

**Governor's Commission on Disabilities**

# **2009 Report**

*Presented to Florida Governor Charlie Crist  
in fulfillment of Section 3 of Executive Order 07-148  
and Section 2 of Executive Order 08-193, which direct the  
Commission to provide annual written reports detailing its  
recommendations for changes in Florida law and policy,  
its accomplishments in bringing about legislative and  
administrative change, and its progress in collaborative  
efforts with other agencies and organizations*

June 2009





Governor Charlie Crist  
Lance Block, Chairman  
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July 1, 2009

The Honorable Charlie Crist  
Governor of Florida  
The Capitol  
Tallahassee, Florida 32399

Dear Governor Crist:

On behalf of the Governor's Commission on Disabilities, it is my privilege to submit the Commission's Report for 2009. The report is required by Section 2 of Executive Order 08-193 and Section 3 of Executive Order 07-148.

This year's report provides 18 new recommendations that address issues concerning civil rights, education, employment, independent living, transportation, and health care. The report also addresses proposed strategies for the implementation of many of the 2008 recommendations and reviews the accomplishments of the Commission over the past year as required by the executive orders.

The Commission held four quarterly meetings in Tallahassee, Orlando, and Jacksonville. Additionally, there were numerous committee and subcommittee meetings that were primarily conducted by teleconference. Of course, all meetings were open and we received valuable information from the public throughout the course of the year.

The Commission is most grateful for the generous assistance and information provided by the many interested citizens, advocacy groups, service providers, educational researchers, and state and local governments. Likewise, we are most grateful for the tireless and valuable efforts made by your Commission staff.

Governor, on behalf of the entire Commission, we thank you for recognizing the importance of addressing issues that affect the more than three million Floridians with disabilities. All of us on the Commission are most grateful for the honor of serving you and the people of Florida.

Sincerely,

A handwritten signature in black ink, appearing to read "Lance Block".

Lance Block, Chair

## ***Beyond Limitations***

***Placing one foot in front of the other,  
I've climbed to higher lengths.  
Reaching beyond my own limitations,  
To show my inner strength.***

***No obstacle too hard  
For this warrior to overcome.  
I'm just a man on a mission,  
To prove my disability hasn't won.***

— Robert M. Hensel

From *Collection of Work*

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## CHAPTER 1

# Executive Summary

The Governor's Commission on Disabilities was created by Executive Order on July 26, 2007, to advise the Governor on issues concerning all Floridians with disabilities.

The Governor established the Commission to identify barriers faced by persons with disabilities and the elderly, and to develop recommendations to overcome those barriers. Over the past two years, the Commission conducted meetings in Jacksonville, Orlando, Tampa, Miami and Tallahassee. Members of the public and subject matter experts provided information regarding barriers that interfere with the independence and inclusion of persons with disabilities, and the Commission offered suggestions and recommendations for overcoming those obstacles.

The Commission's primary focus during its first year addressed issues involving education, employment, independent living, transportation and civil rights. The Governor's 2008 Executive Order extended the Commission's tenure and expanded the Commission's areas of focus to include health care.

The Commission researched and debated each issue presented to create a fact-based report with recommendations to enhance life for Floridians with disabilities and enable them to fully participate in the opportunities, responsibilities, and benefits our great state has to offer. The goal of this project is for Florida to be a national leader in advocating for the rights of access and participation by people with disabilities in all aspects of community life. Toward that end, this report presents new recommendations for 2009, strategies to enact some of the 2008 recommendations, updates on the 2008 recommendations enacted and resulting public-private partnerships.

The Commission recognizes that some of these recommendations are innovative and far-reaching in scope, and that implementation may require further study and fiscal analysis.

## ***Commission Initiatives***

The following are some of the new Initiatives or Programs implemented or supported by the Commission.

### *Florida Version of the Americans with Disabilities Act:*

This year, as in 2008, the need for a Florida version of the Americans with Disabilities Act rose to the forefront of implementation discussions. The Commission proposes that the State of Florida take a leadership role to enact a state law giving disabled Floridians the same opportunities that are available to other Floridians.

### *The Florida College Transition Program:*

A structured college transition program offers a solution to the underemployment of Floridians with disabilities by providing individualized transition services to high school students between ages 14 and 22. The Commission supports academic achievement, career development opportunities and on the job work experiences that enable these students to achieve personal satisfaction as well as meet workforce demands.

### *Transportation – Disadvantaged Real ID Cards:*

Since July 1, 2008, the Commission has worked with the Florida Public Transportation Association and The Florida Department Highway Safety and Motor Vehicles (HSMV) to implement the designation of eligible ADA/transportation-disadvantaged individuals on the state ID cards or driver licenses. HSMV determined this initiative could be integrated into the development of the Real ID by July 1, 2009. The projected cost is less than \$37,000. The Commission for the Transportation Disadvantaged (CTD) will integrate the Real ID card into its 2009-2010 strategic action plan.

### *Take Me Home Program:*

The Commission recommends statewide implementation of the “Take Me Home Program” and to facilitate multi-state participation. This interactive, searchable database is available to law enforcement and provides vital identity and contact information for voluntarily enrolled, at-risk individuals. The program can be deployed by emergency personnel, including the Florida National Guard, during times of disaster to plan and complete evacuation of persons with disabilities and their families.

### *The Respiratory Pacing System - Success Story:*

The Commission, the Florida Department of Health's Brain and Spinal Cord Injury Program, Case Western Reserve University, the Agency for Health Care Administration's Medicaid Division, and the state's certified trauma centers collaborated to implement a Respiratory Pacing System that can replace a standard ventilator. The group obtained a Medicaid billing code to facilitate patient access to the system. Currently, there are approximately 120 Floridians



on ventilators living in trauma centers because nursing homes and assisted living facilities will not accept them, and they are unable to return home. There is a one-time cost of \$50,000 to purchase and implant the device. Basic care in trauma centers costs the state approximately \$30,000 per individual, per month. Potentially, if just 50 of these Floridians were released from trauma centers, it could save the State of Florida \$1.5 million per month.

## ***New Recommendations for 2009***

The new recommendations address several general topics of interest and the Commission submitted individual recommendations related to the following:

### *Increased Accessibility*

- Amend the State Building Code to provide inclusive design modifications for all new single-family and attached-single-family residential construction.
- Enforce the compliance of all state and federally funded construction projects, including Florida's emergency shelters, with state and federal accessibility codes and national green standards.
- Provide a tax credit to encourage the expansion of this type of construction and standards.

### *Protections for Persons with Disabilities*

- Develop multi-discipline training for first responders on behaviors to expect from the various disability groups and increase their comfort level during interactions with more severely disabled Floridians.
  - Provide persons with disabilities with the same level of care—with dignity—as nondisabled patients.
  - Training should be expanded to include both the school systems and the criminal justice system.
- Facilitate appropriate and effective interactions with persons with disabilities in routine and emergency situations for law enforcement, first responders, public safety personnel, all psychiatric, dental and health providers and any public or private employees who interact with persons with disabilities.
- Amend the Bill of Rights for Persons with Developmental Disabilities to broaden the protections against sexual abuse and harm, and to strengthen the civil enforcement provision of the act.

- Enact legislation to appropriately regulate and provide reporting requirements for the use of restraint and seclusion in the state's public and private schools.

*Support for Returning Veterans:*

- Support the needs of returning veterans with traumatic brain injury or behavioral health needs through the development of appropriate behavioral health care services and effective systems of referral.

*Leverage Resources and Increase Health Services to At-Risk Disabled Populations:*

- Enact Trauma-Informed Care across the State's system of care to include community behavioral health service providers, changing the focus of behavioral health treatment from alleviation of symptoms to treatment addressing the underlying traumatic event that triggered mental illness.
- Expand partnerships between state agencies to leverage resources and eliminate duplication of services to persons with disabilities while allowing individuals with disabilities or their legal representatives to manage service and supports as feasible.
- Investigate the barriers to senior adults and people with disabilities living in home and community settings rather than institutional care settings such as nursing homes.
- Advocate for health plan coverage for people with disabilities in all health plan options and promote public/private partnerships in all health areas to increase services to at-risk populations.
- Adjust Medicaid fees and streamline regulations and paperwork to remove barriers to recruiting providers willing to accept Medicaid.
- Advance Medicaid buy-in coverage, mental health parity, and coverage for an individual's disability without a pre-existing condition wait period if the individual accepts a position of employment.
- Promote public-private partnerships between dental health professionals and training facilities to increase services to at-risk populations, including persons with disabilities.

## ***Summary of Commission Staff Projects 2008-2009***

The following is a summary of the activities of the Commission staff from July 1, 2008, through June 30, 2009. Numerous advisory groups regularly ask Commission staff to join or assist with policy, research, advocacy, and information exchanges. Listed below are some of those organizations and events that staff assisted during the past year. Please contact Bryan Vaughan, Executive Director, (850) 921-0241, with any questions or to obtain any related materials.

### **Councils, Commission, Task Force, and Workgroups**

- ❖ **Florida Rehabilitation Council**, July 2009
- ❖ **Brain and Spinal Cord Injury Task Force for Disabled Veterans & their Families** - Returning to Florida from IRAQ or Afghanistan, May 2009
- ❖ **Trauma Informed Care National Protocol Planning Workgroup**, National Institute of Mental Health, Baltimore, MD, March 2009
- ❖ **Faith Based Prevention and Permanency Workgroup**, Executive Office of the Governor, March 2009
- ❖ **Dependency Scholarship & Support Program, Steering Committee**  
Tallahassee Community College Foundation, March 2009
- ❖ **2010 Census Statewide Complete Count Committee**, Executive Office of the Governor, March 2009
- ❖ **Trauma Informed Care Workgroup**, Florida Department. of Children & Families, January 2009
- ❖ **Transportation Feasibility Study Workgroup**, Florida Developmental Disabilities Council, December 2008
- ❖ **Vulnerable Populations Communications Workgroup**, Florida Department. of Health, December 2008
- ❖ **Institute for Coordinated Transportation**, Washington, DC, November 2008
- ❖ **Inclusion Council**, Florida Commission on Volunteerism & Community Service, August 2008

- ❖ **Medicaid Work Incentive Task Force**, Agency for Persons with Disabilities, July 2008
- ❖ **Examining Zero Tolerance Committee**, Florida Department. of Juvenile Justice and Florida Department. of Education
- ❖ **Disability Law Committee**, Florida Bar Association, July 2008
- ❖ **Exceptional Student Education State Advisory Council**, Florida Department. of Education, June 2008
- ❖ **Chamber of Commerce for Persons with Disabilities**, June 2008
- ❖ **Governor's Points of Light Awards**, Volunteer Florida Foundation, Presenter
- ❖ **Projects/Requests for Assistance from State Agencies**
  - Partnering to enact *Take Me Home Program* statewide
  - Partnering with DOE and others to enact Recommendation A – 2: *University System Transition Program*
  - Developing and assisting with ADA training for DMS Employees
  - ADA training for Adoption Services, Miami, Florida
  - Partnering with Neighborhood House to strengthen local and statewide referrals for Clearinghouse on Disability Information
  - Partnering with for Appalachia Center's Mental Health Services to develop training for Disability Etiquette and Sensitivity training for professional staff
  - Developing Phase 1 of Mapping of Disability Services for State Agencies - Phase 2 underway
  - Developing training module to recruit volunteers for the Clearinghouse on Disability Information
  - Tracked legislation and provided weekly report to Commission, staff and interested individuals and organizations during the Legislative Session
  - Working with Chief Child Advocate to develop policies and practices to expand the adoption of children with disabilities in foster care
  - Assisting Mental Health Awareness Day for Florida Department. of Children and Families

## **PUBLICATIONS**

- Dowds, D., D. Andrews, and B. Vaughan. *Engaging Volunteer Groups Serving Vulnerable Populations*. January 2009.  
Prepared for use inside and outside of the State of Florida by Nonprofit groups and AmeriCorp workers in recruiting, retaining, and promotion of persons with disabilities

## CHAPTER 2

# Introduction

### ***Governor's Commission on Disabilities***

This report is the result of 18 months of fact-finding and research by the Governor's Commission on Disabilities and the Clearinghouse on Disability Information, referred to as "the Commission" and "the Clearinghouse" or "CDI," respectively, throughout this document. The report outlines specific recommendations to overcome barriers identified by the Commission through quarterly full Commission meetings and monthly committee and subcommittee meetings. This report also outlines strategies to implement some of the recommendations in the 2008 Governor's Commission Report, and documents the accomplishments of the Commission and Clearinghouse during the past year.

Highlights of this report concern recommendations to enhance life for Floridians with disabilities and their families, and to enable persons with disabilities to fully participate in all of the opportunities and benefits our great state has to offer. All Floridians, not just those with disabilities, will benefit from implementation of these recommendations.

Within Florida's diverse populations, 16 percent of persons five years of age or older are persons with disabilities, according to statistics from the U.S. Census Bureau's 2006 American Community Survey (ACS) Florida Summary. Thirteen percent of Florida's population between ages 21 and 64 are persons with disabilities. This age range is viewed as our state's most productive – most people enter the job market, begin a family, buy or build a home, prepare for retirement, and send their children to college.

The current population of veterans with service-connected disabilities in Florida is 227,190 out of a total veteran population of 1.7 million, which ranks Florida as third in the nation behind California and Texas. According to the U.S. Department of Veterans Affairs (USDVA), during the period of July 2006 to June 2007, programs for veterans brought \$3.3 billion in new and recurring revenues to Florida.

The Florida Department of Elder Affairs identifies three million Floridians as age 62 and older, making the retirement industry Florida's second largest economic sector. This population brings a great deal of prosperity into our state, such as 50 percent of new home construction, \$135 billion in spending power, and \$2.8 billion in net tax benefits after services are rendered. Florida's total population is projected to be 19.3 million by July 1, 2010, with a median age of 41.9 years—up

from 38.7 years in 2000. Along with this aging of the population, we will continue to see an increase in age-related disabilities.

To address the needs of these populations, Governor Charlie Crist created the Governor's Commission on Disabilities by Executive Order 07-148 as a 19-member board. Executive Order 07-244 expanded the board to 21 members. As a direct response to the groundbreaking work begun by the Commission during its first year, Governor Crist extended the Commission's tenure with Executive Order 08-193. This order also broadened the Commission's mission to include health care, with an emphasis on exploring methods of early detection and intervention of all disabling conditions. A copy of each Executive Order is included in Appendix III of this report.

At the beginning of its second year, the Commission recognized its multidimensional responsibility—to Governor Crist, the Florida Legislature, and to the citizens of Florida with disabilities and without them. As history has shown, a culture that embraces all of the differences among its people is a culture that not only will survive but thrive.

In acknowledgement of these demanding economic times, the Commission noted that some of its recommendations are revolutionary and have fiscal impact. The Commission identified these recommendations for incorporation over time with long-range strategic planning. This will remain an ongoing process as the Commission continues to consider a number of sources, including public comment, expert testimony, and input from the commissioners.

During the early committee meetings, some of the members felt a more useful plan was to refrain from developing new recommendations, but to explore strategies to implement more of last year's recommendations.

At the current Commission's first meeting in December 2008, committees were assigned based on the areas of concern specified in Executive Order 08-193—Education, Employment, Independent Living, Health Care, Civil Rights, and Transportation. In addition, the Commission designated the Health Care Committee as a committee of the whole, composed of the following subcommittees: Long-Term Health Care, Access to Health Care, Behavioral Health Care, and Health Care Education. One of the Commission's driving principles continued to be the civil rights of people with disabilities—a stance supported by Governor Crist's commitment to civil rights and the rights of persons with disabilities.

Since December 2008, the Commission's committees and subcommittees met regularly to fully explore and develop new recommendations in the areas of health care and civil rights, as well as to explore new Proposed Implementation Strategies for some of the 2008 recommendations. At each meeting, public comment and expert testimony were sought and accepted.

An integral part of Executive Order 07-148, the development of partnerships and collaborative efforts, was continued in Executive Order 08-193. To build upon its very successful first year, the Commission continued to reach out to both public and private organizations to eliminate the barriers faced by persons with disabilities, the elderly and disabled veterans. The Commission's efforts also included blending the functions of state agencies and nonprofit organizations in ways previously not attempted. In this way, the Commission embraces its responsibility as the state's only comprehensive voice for all persons with disabilities, senior citizens and veterans.

In addition to the statistics cited above, the Commission considered a significant finding in *Housing Needs and Household Characteristics of Persons with Disabilities in Florida: An Analysis of 2000 Census Data*, compiled by the Shimberg Center for Affordable Housing, Rinker School of Building Construction, College of Design, Construction and Planning at the University of Florida. The Shimberg Center's report found that statewide, averaged per county, 36.7 percent of households had at least one person, age 15 or older, self-reporting at least one disability. This finding does not reflect children younger than age 15. It does reinforce the fact that persons with disabilities in Florida are not a small percentage of the overall population, but a rising minority population of this state.

It is difficult to concisely define the term *disability* because the issues are so diverse. In its work, the Commission uses a definition that includes, but is not restricted to, the definition of *disabilities* as cited in the Americans with Disabilities Act, which includes physical, mental, cognitive, and sensory loss or impairment.

We, the Commission members, take to heart the following words from federal statutes:

Disability is a natural part of the human experience and in no way diminishes the right of individuals to live independently; enjoy self-determination and make choices; benefit from an education; pursue meaningful careers; and enjoy full inclusion and integration in the economic, political, social, cultural, and educational mainstream of society in the United States. {Public Law 108-364, Section 2(a)(2).}

The underlying truth of this statement invests us as citizens and policymakers with a societal duty. If we can thoughtfully and compassionately make the appropriate changes in our environment and our culture, then a person's disability does not become an obstacle to the enjoyment of a fulfilling life. That is the single overarching objective of the task to which Governor Crist appointed us.

# **Committees**

## **Civil Rights Committee**

The Civil Rights Committee is charged with developing recommendations to facilitate enforcement of the Americans with Disabilities Act's guiding principles of nondiscrimination, barrier removal, and full community inclusion for persons with disabilities. This year, the committee studied specific public programs and services that persons with disabilities identified in their testimony to the Commission as areas of concern, and produced three recommendations to advance equal access.

The committee also prepared an additional recommendation for legislation to update and enhance the current Bill of Rights for persons with developmental disabilities, which is contained in Chapter 393, Florida Statutes. Finally, the committee worked to facilitate implementation of two of last year's recommendations by preparing a draft legislative proposal for a Floridians with Disabilities Act and by crafting an implementation plan for an accessibility survey of state government executive branch buildings modeled on the state court system's recent similar project.

## **Education Committee**

The Education Committee unanimously voted not to submit new recommendations but, rather, to work on the implementation of its 2008 recommendations with the following tenets in mind:

Education provides a foundation for a complete and well-grounded preparation for life. In the United States, all persons have a right to a quality public education, including the opportunity to attend postsecondary education. Evidence shows that individuals with disabilities who graduate from postsecondary education with a bachelor's degree or higher achieve at the same levels as those without disabilities. In Florida, only 14 percent of working-age persons with disabilities achieve a bachelor's degree, compared to 27 percent of nondisabled working-age persons.

Under the Individuals with Disabilities Education Act (IDEA 2004), eligible students with disabilities are guaranteed a Free Appropriate Public Education (FAPE), in Florida, through age 21. IDEA 2004 requires students with disabilities to identify measurable postsecondary goals on their Individual Educational Plans (IEPs) in the areas of education, employment or training and, if appropriate, independent living. Students making linkages with adult service providers and postsecondary educational institutions prior to their leaving school enhance this process.



The Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act provide for freedom from discrimination and the provision of reasonable accommodations in employment and postsecondary educational environments.

Florida's 2008 State Education Agency Profile identified outcomes for students with disabilities. Trend data indicate that graduation with a standard high school diploma has remained the same, while improvements have been made in the dropout rate and graduation with a special high school diploma.

The Florida Education and Training Placement Information Program (FETPIP) reflects post-school outcomes for all students within one year of high school exit. For students with disabilities who exited school in 2005-2009, approximately 19 percent were found in postsecondary education.

Students with disabilities who continue into postsecondary educational settings often take longer and are less likely to complete degree programs than their nondisabled peers. Complications with requirements for self-identification and documentation of disability may delay provision of accommodations.

For students with disabilities who exited school in 2005-2006, the FETPIP found 48 percent employed (including military employment) and 55 percent pursuing postsecondary education alone, or in postsecondary education and gainful employment. Three-year trend data indicate that these percentages have fluctuated slightly with a decline of 1 percent in employment and of 2 percent in the total.

#### *Education Committee Members*

Bambi J. Lockman, Chair  
Ken Littlefield  
Trueman Bell Muhrer-Irwin  
Christine Eckstein

### **Employment Committee**

The Employment Committee proposed recommendations in its 2008 Report to improve employment opportunities for all Floridians with disabilities. In this 2009 Report, the committee provides an update on implementation strategies, combines and restates three recommendations, and adds one recommendation.

The 2007 American Community Survey (ACS) conducted by Cornell University indicated that the overall percentage of working-age people (ages 21 to 64) with any disability in Florida decreased from 12.9 percent in 2006 to 12.1 percent in 2007. Numerically, 10.2 million of the state's 102.9 million working-age individuals reported having one or more disabilities, with the highest percentage

(7.2 percent) being a physical disability. This is a decrease in the percentage of persons reporting physical disabilities compared to 8.2 percent in 2006.

The ACS survey reports major differences in employment rates between the general population and persons with disabilities. They are: (a) the employment rate of working-age persons with disabilities was 37.6 percent, compared to a 78.9 percent employment rate for persons without disabilities; and (b) the median earnings of working-age people with disabilities who worked full-time for a full year in Florida was \$32,000, compared to median earnings of \$36,600 for persons without disabilities.

A report produced in 2008 and based on data for 2007 shows that, while Florida leads the four most populous states in the percentage of employment among persons with no disabilities at 78.9 percent, it is second in the percentage of employment among persons with disabilities at 37.6 percent. Florida ranks third among the four states in a comparison of the percentage employed in the two groups, with a 41.3 percentage-point difference in employment between the two.

(a) Ranking: employment of persons with no disability	(b) Percentage: employment among persons with no disability	(c) Ranking: employment of persons with a disability	(d) Percentage: employment among persons with a disability	(e) Ranking (1 = most favorable): percentage-point difference between the employment of persons with a disability and persons with no disability	(f) Percentage-point difference between the employment of persons with a disability and persons with no disability
Florida	78.9	Texas	38.7	1. Texas	39.8
New York	78.6	Florida	37.6	2. California	40.5
Texas	78.5	California	36.8	3. Florida	41.3
California	77.3	New York	34.0	4. New York	44.6

Source: Erickson, W., & Lee, C. (2008), *2007 Disability Status Report: Florida*, Ithaca, NY, Cornell University Rehabilitation Research and Training Center on Disability Demographics and Statistics. The estimates in the report are based on the American Community Survey—a U.S. Census Bureau survey of a sample of the population.

**Table 1**  
*Employment Data by State (ages 21 to 64, 2007)*  
Rankings for the four states with the largest populations

For a comparison of data for all 50 states, see Appendix V.

The number of Floridians with disabilities may be underreported. One of the issues related to getting data on employment of persons with disabilities is that it requires individuals to self-report their disability and some are reluctant to do so for a variety of reasons.

Access to Cornell University's reports and other data on persons with disabilities is available at: [www.ilr.cornell.edu/edi/disabilitystatistics](http://www.ilr.cornell.edu/edi/disabilitystatistics).

For many Floridians with disabilities, career advancement carries a risk of losing eligibility for critical economic and programmatic support necessary to sustain employment and quality of life.

The recommendations presented in this report focus on reducing the barriers to employment and enhancing the services that will enable persons with disabilities to succeed in their chosen career fields. Successful employment may also require additional supports such as asset building, financial management, assistive technology and services, transportation, personal assistance, access to health care, and affordable housing. Those issues continue to be addressed by other committees of the Commission. The Employment Committee strongly recommends that the state of Florida promote the employment of qualified persons with disabilities by implementing its recommendations.

#### *Employment Committee Members*

Marc Buoniconti, Chair  
Thomas DeLilla  
Henry Dittman  
Judy Meyer

### **Health Care Committee**

The issues surrounding the limitations and barriers to quality health care for people with disabilities are so great that the Commission could not adequately address them all during the development of this report. Therefore, the Commission is presenting its health care recommendations as the first steps to address needs in the near future. As the Commission goes more in Department in its work, it will address in future years the longer-term issues either as logical extensions of these recommendations or as new ones.

It is a general and overall recommendation that health care clinicians who desire to make their practices more disability-friendly and fully accessible should be provided with financial incentives to do so. These incentives may be in the form of low-interest or interest-free loans to replace equipment, in-state tax incentives, or other options. Although the Commission did not have ample time to formulate a full recommendation on this topic, it is highly recommended that the issue be studied and directed to the Commission's attention during its next session.

Without available, quality health care, individuals with disabilities (mental, physical, or a combination), experience barriers to even a marginally satisfactory life. This includes individuals who do not have coverage for certain specific disabilities or do not have access to health care through government programs such as Medicare or Medicaid or special programs such as Cover Florida.

The Commission believes that people with disabilities should have the same health care options and accessibility as the rest of the population—not more, but

certainly not less. Often the lack of appropriate health care coverage in a potential employer's health plan will prevent a person with a disability from seeking or accepting an employment position. This creates the proverbial "Catch 22" that can keep people on public assistance unnecessarily simply because it is the only way they are assured access to at least some health care coverage.

Additionally, the Commission adopted the concept of self-directed care in its deliberations. Self-directed care provides individuals the knowledge, resources, freedom, and responsibility they need to make the best decisions possible, given their preferences and personal needs and goals.

#### *Health Care Committee Members*

Susanne Homant, Chair  
Darcy Abbott  
Marc Buoniconti  
Thom DeLilla  
Cheryl Stone  
Chuck Corley (alternate)  
Bill Peeler (alternate)

### **Independent Living Committee**

The Independent Living Committee recognizes the broad nature of this topic and chose to focus on accessible, affordable, and sustainable housing for persons with disabilities. It purposefully left out the service component to independent living, fully realizing that services from various community organizations would not work if people with disabilities do not have adequate, accessible, affordable, and sustainable housing.

The committee acknowledges that the fiscal impact of some of the 2008 recommendations is significant. Alternative methods of implementation could be used, such as future implementation dates and phase-in plans. The Commission believes the 2008 recommendations are still viable and is willing to continue to work with its partners in a collaborative effort to implement them.

The need for accessible, affordable, and sustainable housing is greater for people with disabilities than that of the general population. The cost of retrofitting existing housing to provide accessibility is a significant barrier to home ownership and independent living. Features that are very inexpensive when included in new construction can be cost-prohibitive when added to existing housing.

National studies show "green" building as a key part of America's economic future. Even as the dire financial news continues to dominate the headlines, a cascade of newly released studies and reports point to green building as one of

the growing bright spots in the U.S. economy. The green building standards referenced in Recommendation C-17 can help to provide accessible, affordable, and sustainable housing for Floridians with disabilities. The initial cost of construction is negligible compared to conventional construction; however, the savings in operating costs will be significant over the life of the dwelling.

As research comes in from diverse sources examining green building concepts, the numbers keep painting the same picture. The future of our environment clearly centers on energy efficiency, water conservation, systems that encourage cleaner indoor air, the use of recycled and more sustainably developed materials, and communities that coexist with their environments. The key to a prosperous future is sustainability, and the triple bottom line—environmental responsibility, economic prosperity and social equity—is imperative as we move forward (U.S. Green Building Council, news release, Jan. 13, 2009).

#### *Independent Living Committee Members*

Bill Peeler, Chair  
Audria Moore  
Chip Wilson

## **Transportation Committee**

Transportation is about choices, options, employment, and the essential component for community-based services—the freedom of having full and quality access to the community. Having multiple systems in place to provide this access is essential

Without reliable and dependable mobility, the community-based service model for people with disabilities cannot work as intended. Transportation provides freedom. For persons with disabilities, transportation that is cost-efficient, reliable, and accessible means independence.

In 2008, the Florida Commission for the Transportation Disadvantaged (CTD) served 697,159 people (unduplicated headcount) and provided over 50 million trips to Floridians who are transportation disadvantaged. This data indicates a 1.5-million-trip reduction in relation to the 2007 report. Moreover, the availability of trips has been steadily declining because of the increased cost of trips due to insurance, fuel, maintenance, and labor expenses. The system has had no funding increase in 16 years, yet demand is increasing.

By the year 2010, an estimated 7.3 million people with disabilities will be considered potential users of the system. The availability of travel within the state, and someday within the nation, using transit identification for program eligibility, would provide for seamless travel and allow spontaneity.

Efforts during both the 2008 and 2009 legislative sessions to increase the \$1.50 vehicle registration tag fee failed. A return-on-investment study conducted by Florida State University in 2008 found that an increased tag fee would generate approximately \$20 million annually and would fund more than 2.5 million trips with a return on investment of roughly \$200 million for the state. Distribution of transportation funding in the form of vouchers would allow travelers to purchase the transportation that is appropriate for their needs.

This year, the Transportation Committee's work focused on implementing the recommendations that it initiated in the Commission's 2008 Report. These recommendations can be found in chapters 4 and 5 of this report for 2009. These recommendations comprise the first step in identifying the transportation concerns and barriers that people with disabilities face every day and providing realistic recommendations that will allow full inclusion in society.

*Transportation Committee Members*

J.R. Harding, Ed.D., Chair  
Cheryl Stone, Vice Chair  
Carol A. Christopherson  
Thom DeLilla

## CHAPTER 3

# New Recommendations

The Governor's Commission on Disabilities has approved all of the recommendations contained in this chapter. They are respectfully submitted in fulfillment of Section 3, paragraph (a) of Executive Order 07-148, and Section 2 of Executive Order 08-193. The former order requires the Commission to provide the Governor with "recommendations regarding changes to Florida statutes, administrative rules, policies, and/or procedures of the State" as well as "accomplishments in obtaining legislative and administrative change" and "progress related to collaborative efforts with other agencies."

These recommendations are the result of information provided by public comment, the testimony of subject matter experts, and the commissioners' personal and professional experiences. The recommendations are submitted with the understanding that some will require legislative action while others can be achieved through either executive order or changes in administrative policies and procedures.

The Commission also recognizes that, in these times of budgetary crisis, fiscal impact will be a factor in some of the recommendations. Some of them have little or no fiscal impact; those that do have significant fiscal impact can be considered at a future date. These recommendations are not meant to be interpreted as legislative language, but as the Commission's expressions of need.

The recommendations are grouped into the nine subject areas addressed by the committees and subcommittees. The numbering system used for the recommendations is for reference purposes and is not meant to imply ranking by priority or importance. The Commission's numbering system is continuous, to prevent duplicate recommendation numbers from year to year. For example, the Employment Committee presented 11 recommendations last year, the last one being B-11, so its new recommendation for 2009 is numbered "B-12."

Later in the report, where recommendations from 2008 are implemented or listed as accomplishments, they include "(2008)" in their titles. However, if such a recommendation were significantly revised, its title will include "(2008/Rev. 2009)." This is to further distinguish them from this year's new recommendations.

## ***Section A – Education***

The Education Committee unanimously voted to not submit new recommendations but, rather, to work on the implementation of its 2008 recommendations. Therefore, the committee's input can be found in Chapters 4 and 5 of this report.

## ***Section B – Employment***

### **Recommendation B – 12**

**Encourage state agencies to continue expanding partnerships across agency lines to leverage resources and eliminate duplication of services to persons with disabilities.**

#### *Justification*

Each agency operates according to federal and state regulations that govern its functions, establish eligibility criteria, and set parameters on the use of funds. Persons with disabilities may qualify for concurrent funding from two or more sources. Cross-agency coordination is essential to minimize duplication of services while maximizing opportunities for persons with disabilities to achieve independence and realize their life goals.

#### *Commentary*

Three state agencies have major resources to support the employment and training of persons with disabilities: the Department of Education, especially its divisions of Public Schools, Vocational Rehabilitation, and Blind Services; the Agency for Persons with Disabilities; and the Agency for Workforce Innovation. These agencies vary in the services and the client groups they serve, and how their resources are delivered. Each entity is described below.

The *Bureau of Exceptional Education and Student Services*, Division of Public Schools, Department of Education, administers programs for students with disabilities and for students who are gifted. In addition, the bureau coordinates student services throughout the state and participates in multiple interagency efforts designed to strengthen the quality and variety of services available to students with special needs.

The *Division of Vocational Rehabilitation* (VR), Department of Education, is a federal-state program that works with people who have physical or



mental disabilities to prepare for, gain, and retain employment. VR is committed to helping people with disabilities find meaningful careers.

The *Division of Blind Services*, Department of Education, is responsible for ensuring that people of all ages in the state who are blind or visually impaired can live independently and achieve their goals. Also, its Bureau of Braille and Talking Book Library Services administers a free library program of braille and recorded materials for eligible persons.

The *Agency for Persons with Disabilities* (APD) works in partnership with local communities to support persons with developmental disabilities in living, learning, and working in their communities. APD provides critical services and supports to enable persons with developmental disabilities to reach their full potential in the home and community. The agency serves people with spina bifida, autism, cerebral palsy, Prader-Willi syndrome, and mental retardation.

The *Agency for Workforce Innovation* (AWI) is the Governor's agency for disbursement of federal workforce funds. Florida's workforce system provides services through its 24 Regional Workforce Boards and over 80 full-service One-Stop Career Centers. The workforce system ensures that Florida's businesses can hire the well-trained workers they need. Through these programs, Floridians have the opportunity to upgrade their skills and obtain jobs that allow them to become economically self-sufficient and competitive in a knowledge-based economy. One-Stop Career Centers also have dedicated staff to work with veterans with disabilities. Many of these centers have Disability Program Navigators and most are becoming Employment Networks under the Ticket to Work program.

Success in the workforce goes beyond education and training, and often requires additional supports, such as access to housing and transportation, basic health and dental services, and often, child care. No matter the structure, local communities need to establish relationships and referral processes to those additional resources outside their agencies' scope of service. Over the past two years, the Commission has taken testimony and begun to expand the list of entities that comprise the available supports to address the needs of persons with disabilities. The mapping of resources and the development of a Web site to make them readily available are tools to build better bridges, expand partnerships, and formalize relationships to support persons with disabilities in achieving their career goals and their quality of life.

This recommendation replaces recommendations B-7 (2008/Rev.2009), B-8 (2008/Rev. 2009), and B-9 (2008), listed in Chapter 4 of this report.

## ***Section C – Independent Living***

The members of the Independent Living Committee continue to support the recommendations made in the 2008 Commission Report and realize their significant impact. In addition, the committee determined that three additional issues should be considered; recommendations that would address them are below.

### **Recommendation C – 16**

**The State Building Code should be amended to provide inclusive design modifications for all new single-family and attached-single-family residential construction.**

#### *Justification*

The cost of modifying a dwelling to provide accessibility for people with disabilities is a significant barrier to home ownership and independent living. The cost of providing accessibility during initial construction is far less than that of modifying a home after conventional construction. The cost to meet inclusive design standards during initial construction is estimated to be \$1,000 to \$4,000, compared to \$20,000 to \$50,000 for major structural renovations to modify the home at a later time. Features that are very inexpensive when included in new units can be much more expensive when added to existing units. A nondisabled individual can live in any home; however, a person with a disability cannot.

#### *Commentary*

This proposed amendment to the State Building Code would equip every new home for life-span adaptability. This amendment should include, as a minimum, the following:

1. At least one accessible entrance with a cover
2. Hallways at least 44 inches wide
3. Use of 36-inch doors to provide opening clearance of at least 32 inches with lever handles for ease of operation
4. Adequate space for approach and use in kitchen and bathroom on the main floor, requiring a 30-by-48-inch clearance for approach or a 60-inch turnaround space
5. Additional blocking to support future installation of a grab bar in each main floor bathroom
6. Light switches, thermostats, alarm system keypads, and other environmental controls in accessible locations, height not to exceed 48

- inches above the finished floor. Outlets should be installed at least 15 inches above the finished floor.
7. Audible/visual/tactile carbon monoxide detection system
  8. Audible/visual/tactile fire alarm system
  9. Audible/visual/tactile smoke alarm system
  10. Audible/visual/tactile doorbell notification system.

NOTE: The visual alarms should be located in at least two rooms—one being the master bedroom.

People with mobility impairments often need features like zero-step entrances and wide interior doorways in order to reside safely and comfortably in their homes, but such features are generally missing in the U.S. housing market.

One study estimated that more than 90 percent of the housing in the United States are inaccessible to people with disabilities (Steinfeld, Levine, and Shea, 1998); another estimated that the vast majority of newly built single-family homes have steps at all entrances or narrow interior doorways (Maisel, Steinfeld, and Smith, in press).

The lack of accessible housing has serious consequences for individuals and for society as a whole. People with disabilities living in units that lack adequate accessibility features face a greater risk of injury due to falls than those living in units with adequate features. The fear of falling itself reduces the well-being of many older people. Also, people with disabilities living in units without adequate features are more likely to suffer from social isolation and loneliness. This is a negative impact on life satisfaction, health, and self-esteem (*Aging and Disability; Implications for the Housing Industry and Housing Policy in the United States*, Smith, Rayer, and Smith, 2008).

## **Recommendation C – 17**

**All future state and federally funded construction should comply with existing state and federal accessibility codes and national green standards, such as the use of structural insulated panels (SIPs). A tax credit should be provided to encourage individuals and contractors to construct accessible as well as green-standard structures.**

### *Justification*

Buildings consume significant amounts of natural resources. The intelligent use of energy and materials can have powerful impacts on local, state, and global environmental quality. Because they significantly reduce energy use, green buildings naturally complement clean energy development.

The average U.S. family spends nearly \$2,200 on home energy bills per year, according to the U.S. government's Energy Star program. Green home features can lower energy bills dramatically. Based on the average Home Energy Rating System (HERS) scores of homes certified under the Leadership in Energy and Environmental Design (LEED) Green Building Rating System for Homes in 2008, energy savings can be up to 30 percent for homes certified at the basic LEED-Certified level. LEED-Platinum homes have an average predicted energy use reduction of 50 to 60 percent. In case studies of LEED-certified homes, builders project water savings of 20 to 50 percent, sometimes even higher. Decreased operating expenditures alone can more than pay for the incremental initial investment in "greening" a home. These same energy savings would be experienced in commercial structures as well. Applying such standards to government construction projects would reduce energy usage throughout the state as well as make more housing accessible for Floridians with disabilities.

### *Commentary*

Comparing the construction cost of building two equivalent structures—one using conventional methods and one using structural insulated panels (SIPs)—the difference in construction cost is negligible. However, the structure built with SIPs will provide a higher-quality structure, and the cost of a comfortable interior (utility cost) will be much lower in the long term, with savings estimated to be 30 to 50 percent. It also takes less time to build a SIP structure due to a reduction in the number of subcontractors required.

Airborne pollutants are 2 to 5 times higher indoors than outdoors. Truly green homes implement strategies that aim to improve a home's ventilation, exposing residents to cleaner, fresher air. Green homes make use of paints, adhesives, and other products that emit little or no volatile organic compounds (VOCs), which can be harmful to respiratory health. They also address moisture control concerns to create a healthier indoor climate.

According to the Massachusetts Technology Collaborative, "The Green Affordable Housing Initiative aims to catalyze the affordable housing financing, development, and builder communities to include more green design and renewable energy in future developments." National green standards were established in 2005. Florida should be a leader in complying with these standards. Tax credits should be offered to help our state achieve this important goal.

## **Recommendation C – 18**

**Require all of Florida's emergency shelters to meet accessibility standards, as outlined in the Americans with Disabilities Act and Chapter 11 of the Florida Building Codes, in the shelters' policies, programs, and facilities.**

### *Justification*

People with disabilities should be afforded access to goods, services, programs and protection offered to people without disabilities. Inclusion of people with disabilities in all phases of emergency preparation and management should be instituted in all counties and local jurisdictions in the state of Florida. This is the only way to ensure the health and safety of persons with disabilities in times of disaster. Accessibility standards should apply to emergency shelters for the general population as well as those designated for special needs and higher medical needs.

### *Commentary*

For too long, the needs of people with disabilities for safety and access to all phases of emergency preparation and management have been more of an afterthought rather than inclusion, especially in the earliest phases. Many areas of the state lack understanding of the legal requirements of federal and state laws.

This issue is especially critical for people with disabilities in the event of an emergency or disaster for people with disabilities. The effects of a disability are often magnified in the midst of an emergency and should be mitigated. It is incumbent on community leaders and emergency management professionals to ensure that people with disabilities are included in all phases of emergency preparation and management, from planning to sheltering.

An unfortunate example illustrates this problem. A young lady with a service animal was refused admittance to a general population shelter during the storms of 2008. The reason given was that the shelter was not pet-friendly.

## ***Section D – Transportation***

The Transportation Committee's work focused on implementing the recommendations that it initiated in the Commission's 2008 Report. These recommendations can be found in chapters 4 and 5 of this report for 2009.

## **Section E – Civil Rights**

### **Recommendation E – 8**

**Develop training modules for law enforcement, first responders, and public safety personnel designed to facilitate appropriate and effective interactions with persons with disabilities in both routine and emergency situations.**

#### *Justification*

Anecdotal evidence in the form of public comment and complaints suggests that too many persons with disabilities have unnecessarily negative interactions with law enforcement and other public safety personnel, especially when a disability precludes or hinders an individual from responding to a request or a directive in the manner expected.

#### *Commentary*

Law enforcement and other public safety personnel should be trained in various types of disabilities, such as deafness and hearing loss, impaired mobility, impaired vision, mental illness, developmental disabilities, senility, and dementia. As a result of training, these personnel will be more likely to recognize that an individual may not be able to respond to requests or directives as expected, and will be more likely to adjust their approach, when possible, to ensure a more positive interaction. Training modules for various types of disabilities, associated physical and cognitive limitations, and appropriate interaction techniques should be developed using the Memphis Police Department's Crisis Intervention Training (CIT) program as a model.

CIT under the Memphis model is a proven strategy for educating law enforcement officers to recognize and respond appropriately to persons with mental illness with whom they come into contact. Although designed to address mental illness, key CIT program goals are equally applicable for public safety personnel contacts with persons with other types of disabilities. These goals include better preparing law enforcement and public safety personnel to react to crises involving persons with disabilities and increasing the safety of officers, consumers, and the public.

Disabilities that do not involve cognitive impairment should be easier to address in a training environment. Usually, persons with noncognitive disabilities can respond appropriately to an officer or public safety official; they may just need an accommodation in order to do so. Generally, in nonemergency situations,

persons with chronic disabling conditions will not need law enforcement or public safety personnel to make a treatment or services referral.

Using the program model for CIT as a guide in developing the disability awareness training modules, it is critical to seek the assistance and support of agencies and organizations serving people with disabilities throughout the state, including the Florida Division of Blind Services, Florida Coordinating Council for the Deaf and Hard of Hearing, Florida Council of the Blind, Florida Agency for Persons with Disabilities, Advocacy Center for Persons with Disabilities, Florida Developmental Disabilities Council, Florida Service Dogs, Florida Department of Elder Affairs, and others.

One of the primary objectives of this recommendation is to gain statewide approval and implementation of the program. As the training is developed, it is imperative to begin building partnerships with the Florida Department of Law Enforcement, Florida Department of Corrections, State Fire Marshal, Florida Department of Health, Florida Department of Elder Affairs, Department of Juvenile Justice, Florida Sheriffs Association, and the Florida Police Chiefs Association.

Standards and training representatives from the Department of Law Enforcement and Department of Corrections informed the committee that they are very receptive to assisting with the development and implementation of the training and are looking forward to the finished product.

The training should include: (a) a basic introduction and impetus for the training; (b) an overview of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act; and (c) general tips for encountering a person with a disability during a routine or emergency call for service.

Subsequent training modules should (a) emphasize an understanding of a specific disability, such as physical, deaf or hearing impaired, and blind or visually impaired; (b) focus on how a disability impacts a person's life; (c) include the development of communication skills; (d) emphasize practical experience and role playing; (e) include interaction with people with disabilities, their caregivers and family members—in the classroom and in the field during site visits; and (f) contain contact information for local, state, and national resources

The ultimate goal of the disability awareness training is to ensure that trained officers and public safety personnel are available whenever the need arises. Because this could take several years to achieve, the training should be offered annually with a requirement to recertify every two years. The recertification could be achieved via the Internet. Law enforcement and public safety agencies should be encouraged to develop strategies to train all of their personnel while still meeting minimum staffing standards for coverage.

## Recommendation E – 9

**Florida should enact legislation to appropriately regulate, and provide reporting requirements for, the use of restraint and seclusion in the state's public and private schools.**

### *Justification*

Reports by the U.S. Government Accountability Office and by professional and advocacy groups, as well as public comment to the Commission's Civil Rights Committee, indicate that the largely unregulated and sometimes inappropriate use of restraint and seclusion to manage problem behaviors in public and private schools places students at risk of serious physical and psychological harm. The research demonstrates that students with disabilities are disproportionately affected by these practices. There are no federal laws or regulations that meaningfully address restraint and seclusion in schools. Florida law is largely silent on this issue.

### *Commentary*

*Restraint* consists of any method or device to involuntarily limit movement. *Physical restraints* generally refer to the use of interpersonal contact to restrict a subject's movement. The term *mechanical restraints* refers to devices or objects applied to a subject to restrict movement, such as shackles, straps, tape, weights, etc. *Seclusion* is involuntary isolation in a closed room or area from which the individual is physically prevented from leaving. It is important to note that seclusion is not the same as *time out*, which is generally recognized as an appropriate behavior management technique. Time out, however, can become seclusion when it involves involuntary confinement or continues for an excessive period.

Mental health and other behavioral professionals recognize that restraint and seclusion are sometimes clinically appropriate in a controlled setting for short periods when less restrictive options have failed to reduce behaviors that endanger a patient or those around the patient. Clinicians also recognize, however, that restraint and seclusion can be physically dangerous and psychologically harmful to patients. For that reason, residential treatment and habilitation facilities have moved away from these practices in recent years, and have developed strict regulations to govern restraint and seclusion, when used. For example, see §§ 393.13(2)(d)8, 393.13(3)(g) Florida Statutes (F.S.), (Bill of Rights for Persons with Developmental Disabilities); § 394.453, F.S.; rule 65E-5.180(7), Florida Administrative Code.

Reports issued in 2009 by U.S. General Accountability Office (GAO), the Council for Children with Behavioral Disorders, and the National Disability Rights Network



suggest that public and private school staff sometimes employ behavior management techniques, particularly with students with developmental or behavioral disabilities, that meet the clinical descriptions of restraint and seclusion. Unlike mental health treatment facilities, however, the use of these practices by schools is generally unregulated and is usually neither tracked nor reported. That is the status quo in Florida schools, as well as in many other states. The result has been that some students with disabilities have been subjected to grossly inappropriate use of restraint and seclusion, and some have been abused under the guise of behavior management.

Prevalent data on restraint and seclusion in schools is quite limited, due to the lack of reporting requirements, but there is enough data to demonstrate that it is an important issue. The GAO found that Texas and California track the practices in some respects. From September 2007 through June 2008 (a single school year) Texas schools formally reported 18,741 instances in which restraint of some sort was used on students. California, for the same period, reported 14,354 instances of restraint, seclusion, or other "emergency intervention."

Evaluation of specific school cases also suggests that there is cause for concern. The GAO and the other organizations found several recurring themes in the sample of specific cases they examined: (a) most incidents involved children with disabilities; (b) restraint and seclusion were frequently used as disciplinary measures, even when the child was not being physically aggressive; (c) parents had not consented to the use of restraint or seclusion and were sometimes not notified even after it occurred; (d) several instances involved prone and face-down physical restraints, which are particularly dangerous; and (e) school staff were often not trained in appropriate restraint and seclusion practices.

The reports note that federal regulation of restraint and seclusion in schools is largely lacking, and that state regulation is, in many states, quite limited. The reports express concern that restraint and seclusion, while closely regulated and increasingly disfavored in medical and psychiatric settings, continue to be largely unregulated in most school systems. Protection and advocacy organizations nationwide, such as Florida's Advocacy Center for Persons with Disabilities, have been increasingly involved in investigating and attempting to resolve individual restraint and seclusion cases. In Florida, the Advocacy Center also has called for comprehensive regulation of these practices.

Florida's Department of Education (DOE) has begun to address this issue, but its efforts cannot entirely replace legislation. In 2008, DOE published *Guidelines for Use of Manual Physical Restraint in Special Education Programs*, which provides nonbinding recommendations to school districts on when and how to appropriately use physical restraint. This technical assistance paper, however, addresses only physical restraint, not mechanical restraint or seclusion, and is unenforceable. DOE is also in the process of developing rules that address the use of physical force with students. A draft of this rule includes some guidelines

for the use of seclusion, as well as physical force, but again, it does not address mechanical restraint. DOE, moreover, lacks jurisdiction over private schools, and protection for all students is needed. The State Fire Marshal has promulgated rule 69A-58.0084, Florida Administrative Code, which provides some physical and operational requirements for seclusion rooms. This rule, however, is geared toward fire safety, and does not address many of the functional problems attendant to seclusion.

Florida should address this issue through legislation. There are existing laws and regulations in other states that can provide guidance. For example, see Colorado Rev. Stat., §§ 26-20-101 – 109; 1 Colorado Code of Regulations 301-45; Connecticut Gen. Stat. §§ 46a-150 to 154; 105 Illinois Comp. Stat. 5/2-3.130, and 5/10-20.33; Illinois Admin. Code title 28, §§ 1.280, 1.285; Maryland Code Regs. 13A.08.04.01 - .06; 603 Massachusetts Code Regs. 18.05, 46.01-.07. The pertinent laws and regulations from all of the states are more completely indexed in the reports from the GAO and the other organizations referenced above.

Florida could also look to rule 65E-5.180(7), Florida Administrative Code, which comprehensively regulates restraint and seclusion in a broad array of mental health treatment facilities as defined in section 394.455(10), Florida Statutes.

## **Recommendation E – 10**

**The Bill of Rights for Persons with Developmental Disabilities should be amended to broaden the protections against sexual abuse and harm, and to strengthen the civil enforcement provision of the act.**

### *Justification*

A recent opinion from the Florida Fifth District Court of Appeal has revealed potential gaps in the protections guaranteed under the sexual abuse and harm clauses of sections 393.13(3) (a) and (g), Florida Statutes, and has weakened and likely jeopardized the rights of persons with developmental disabilities to enforce the act through civil causes of action under section 393.13(5), Florida Statutes.

### *Commentary*

Section 393.13(3)(a) guarantees persons with developmental disabilities the right to be free from sexual abuse in residential facilities. This is obsolete language dating back to when most persons with developmental disabilities resided either with their families or in large institutions. Today, persons with developmental disabilities also reside in supervised independent living arrangements and in family-style group homes. Section 393.13(3)(a) needs to be revised to delete the reference to residential facilities. The Bill of Rights for Persons with

Developmental Disabilities (DD Bill of Rights) should expressly protect this vulnerable population from sexual abuse at all times and locations, not just in residential facilities.

Special Olympics of Florida, Inc. v. Margaret Showalter, et al, 6 So. 3d 662 (Fla. 5th DCA 2009) is a recent appellate decision concerning two developmentally disabled adults who were sexually molested while participating in an Orlando Special Olympics event. The perpetrator was an individual who had previously been formally associated with Special Olympics. The Special Olympics had been advised of instances of this individual sexually abusing other developmentally disabled athletes, but failed to prevent him from having unsupervised access to the two vulnerable plaintiffs. A verdict favorable to the developmentally disabled plaintiffs was reversed by the appellate court, which held that section 393.13(5) imposed liability for violation of the DD Bill of Rights only upon the person who actually harmed the victim, and possibly upon any entity that was vicariously liable for the actions of the perpetrator. The court's opinion suggests that section 393.13(3)(g) could not be applied to impose liability upon a provider of services to a person with a developmental disability in the event the provider is negligent when delivering services. Sections 393.13(3)(g) and (5) should be revised to expressly provide these vulnerable persons statutory protection from the negligence of service providers, whether that provider is an individual or another legal entity.

In the United States, people with developmental disabilities such as mental retardation, autism, cerebral palsy, epilepsy, and severe learning disabilities are at disproportionately higher risks for violent victimization and neglect. Although the scientific evidence is scanty (research is mostly from the 1990s and there are no reports from Florida), a handful of studies from the U.S., Canada, Australia, and Great Britain have consistently shown that violence, abuse, and neglect affect people with developmental disabilities with staggering frequency. (See *Crime Victims with Developmental Disabilities*, Joan Petersilia, Joseph Foote, and Nancy A. Crowell, editors.)

Joan Petersilia, Ph.D., professor of criminology, formerly a member of the Mental Retardation Research Center at the University of California at Irvine, now at the Stanford University Law School and co-chair of the Law and Justice Committee of the National Research Council, is a leading authority on the subject of crime against persons with developmental disabilities. Professor Petersilia compiled the most current data and studies into a presentation entitled, "Violence and Abuse Against Persons with Developmental Disabilities and Mental Retardation." The data show that persons with developmental disabilities are 11 times more likely to suffer from sexual assault, and that the chances are exceedingly greater for teenaged girls and younger women. The risk of being victimized by robbery is 13 times greater than the general population.

All of the studies show much greater rates of revictimization, as well. An Australian study took a comprehensive look at crime and neglect of the developmentally disabled in that country (*Australian National Crime Victims Survey*, 1992). Using the Australian data and applying the difference ratios by crime types to the U.S. *National Crime Victims Survey* of 1994, Dr. Petersilia determined that approximately 5 million crimes occur each year against persons with developmental disabilities in the U.S.

Statistics relating to the abuse and neglect of children with developmental disabilities are equally disturbing. The Roeher Institute in Canada found that child abuse and neglect occurs two to three times more often in children with disabilities in Canada. Dr. Petersilia documented that various data sources showed ranges of 40 to 70 percent of girls and 16 to 30 percent of boys with developmental disabilities will be sexually abused before the age of 18. Although less than 5 percent of children in the U.S. have developmental disabilities, of all children physically and sexually abused, nearly one in five—almost 20 percent—were developmentally disabled. However, these numbers are unquestionably underestimates because the statistics only include reported cases and exclude children in institutions (*Annual Report*, National Center on Abuse and Neglect, 1993).

Therefore, the statistics are overwhelmingly indicative of the fact that children and adults who have developmental disabilities are at great risk of abuse. It is imperative for caregivers and providers to take prudent steps and exercise reasonable precautions designed to prevent abuse and neglect of those who are entrusted to serve and protect persons with developmental disabilities.

Sections 393.13(3) and (5), along with other sections within the act, are intended to provide a legal foundation to protect individuals with developmental disabilities in settings that are not supervised by the state. The act sets forth rights for anyone with a developmental disability, as defined in Florida law.

Sections 393.13(3) (a) and (g) provide protections for persons with developmental disabilities from sexual abuse and harm, and section 393.13(5) provides for a cause of action if these rights are violated.

Three principles, which should guide the amendment of these statutes in the implementation of this recommendation, are presented below.

*Principle 1 – The right to be free from sexual abuse should be expanded beyond residential facilities.*

Subsection (a) provides:

- (a) Persons with developmental disabilities shall have a right to dignity, privacy, and humane care, including the right to be free from sexual abuse in residential facilities.

The Commission finds that the right to be free from sexual abuse should not be limited to residential facilities. The above-cited studies show that persons with developmental disabilities are far more vulnerable to sexual abuse than the general population for a number of reasons, and that, while sexual abuse of people with developmental disabilities is prevalent in residential settings, sexual predators, such as in the Special Olympics case, do not limit their abusive behavior to residential facilities. Nonresidential caregivers, as residential providers, should take reasonable steps to protect vulnerable citizens from abuse and neglect. Therefore, the Commission recommends that the right to be free from sexual abuse be expanded beyond the current residential facilities limitation.

*Principle 2 – The right to be free from harm should include legal protection from negligence.*

Subsection (g) provides:

- (g) Persons with developmental disabilities shall have a right to be free from harm, including unnecessary physical, chemical, or mechanical restraint, isolation, excessive medication, abuse or neglect.

The Fifth District's holding in the Special Olympics case relied on this subsection to support its decision to deny the victims in that case their right to enforce the act via a civil cause of action. The court opined that the statute, at least under the facts of that case, applies only to the individual who causes harm to the victim. The court determined that the molester in that case was not acting within the course and scope of an employment or agency relationship, and concluded that Special Olympics could not, therefore, be liable for violating the DD Bill of Rights. The holding was vague and left open the question as to whether caregiver employers or principals may be legally responsible for the acts, intentional or not, of their employees or agents.

The court surprisingly did not construe the term *neglect* as used in subsection (g), to be tantamount to *negligence*, as provided for in section (5) of the act. The words *neglect* and *negligence* are synonymous; both originate from the centuries-old Latin root word *neglectus*. Yet, the court ruled that the failure of the Special Olympics to take reasonable precautions to prevent the volunteer from

unsupervised access to the two women was not actionable under the DD Bill of Rights even though the Special Olympics had been advised that he had sexually abused other developmentally disabled women on prior occasions. The court required plaintiffs to proceed to trial only on a traditional negligence claim, without any reference to section 393.13, Florida Statutes. The Commission, therefore, recommends that the word *negligence*, or its legal definition, *unreasonable care*, be added to subsection (g) to clarify that negligence is actionable as a violation of the DD Bill of Rights.

*Principle 3 – Clarifying language should be added to section (5) to broaden protection against negligence.*

Section (5) of Florida Statutes 393.13, provides:

(5) LIABILITY FOR VIOLATIONS. — Any person who violates or abuses any rights or privileges of persons who are developmentally disabled provided by this act shall be liable for damages as determined by law. Any person who acts in good faith compliance with the provisions of this act shall be immune from civil or criminal liability for actions in connection with evaluation, admission, habilitative programming, education, treatment, or discharge of a client. However, this section shall not relieve any person from liability if such person is guilty of negligence, misfeasance, nonfeasance, or malfeasance.

In the Special Olympics case, the 5th District in effect limited the ruling in *Baumstein v. Sunrise Communities*, 738 So. 2d 420 (Fla. 3rd DCA 1990), a 19-year-old sister-court decision. In *Baumstein*, the 3rd District Court of Appeal held that the Florida Legislature clearly intended that a private cause of action may be brought based upon a violation of the act. In the Special Olympics case, however, the 5th District narrowly construed this section, holding that the word *person*, as used in the statute, means that only the intentional actor, or in that case, the molester, may be liable for harm caused to a person with a developmental disability.

The Commission finds that the Bill of Rights for Persons with Developmental Disabilities is intended to provide needed protections to persons who are vulnerable to abuse, neglect, or harm, and that enforcement of those protections through section (5) is essential to carry out the act's purpose. Therefore, the Commission recommends that clarifying language be added to section (5) to include the term *entities* in addition to the existing language which holds *persons* liable for negligence, so as to bolster the act's clear intent to protect against negligence, as well as intentional acts, by caregivers and providers entrusted to serve the needs of persons with developmental disabilities.

The Commission's recommended amendments to Florida Statutes 393.13(3) (a) and (g), and Florida Statute 393.13(5), can be found in Appendix VI.

## **Section F – Health Care**

The work of the Health Care Committee of the Governor's Commission on Disabilities was done through its four subcommittees: the Behavioral Health Care Subcommittee, Health Care Education Subcommittee, Long-Term Health Care Subcommittee, and Access to Health Care Subcommittee. The recommendations are presented in sections G through J of this chapter.

## **Section G – Behavioral Health Care**

### **Recommendation G – 1**

**Ensure that providers within the community behavioral health system have been trained in Trauma-Informed Care.**

#### *Justification*

Studies have found that persons with psychiatric disabilities have a higher rate of past traumatic experiences than the general population and are at a higher risk of experiencing trauma during their lifetimes as a result of these disabilities. It is critical that providers in the community behavioral health system are appropriately trained to work with traumatized individuals. This need is becoming increasingly more critical as Florida welcomes back returning veterans with many behavioral health needs as a result of their combat experiences.

#### *Commentary*

Rather than being a specific treatment, Trauma-Informed Care is an overall approach to caring for persons who have experienced violence or other types of trauma. The approach permeates the culture of the treatment setting and seeks to recognize and be sensitive to the far-reaching impact that trauma has on the lives of survivors.

Currently, community behavioral health treatment centers do not have sufficient resources to implement training statewide. Florida should assist community behavioral health treatment centers in the establishment of Trauma-Informed Care service models. This could be accomplished through financial support to a state university to design and deliver initial and ongoing training and technical support on the use of Trauma-Informed Care for professionals that deliver behavioral health services to individuals with psychiatric disabilities. The University of South Florida has already done work in this area and would be an appropriate choice for development of the training.

Treatment delivered within the Trauma-Informed Care model has the potential to prevent permanent psychiatric disability in recently traumatized people and to assist persons with disabilities to return to living fully productive lives.

## **Recommendation G – 2**

**Establish programs to support persons with psychiatric disabilities who have, or are at risk for, criminal justice system involvement in the community.**

### *Justification*

Individuals with severe and persistent mental illness are at risk of entering the criminal justice system due to behavioral difficulties that fall outside legal boundaries when adequate support and services are not available in the community. Public policy groups evaluating the issue, such as the Florida Supreme Court and the Correctional Medical Authority, have clearly documented the steady rise in the number of persons with severe and persistent mental illness who are incarcerated in county jails and state prisons. This increase is inversely proportional to funding for community mental health services. Specialized services targeted to those at risk of or with a history of criminal justice system involvement are even scarcer.

### *Commentary*

The Commission supports the recommendations of the Florida Supreme Court's Steering Committee on Families and Children in the Court in its report, *Mental Health: Transforming Florida's Mental Health System. Constructing a Comprehensive and Competent Criminal Justice/Mental Health/Substance Abuse Treatment System: Strategies for Planning, Leadership, Financing, and Service Development*.

Necessary services and supports for individuals at risk of criminal justice system involvement and for those persons released from jails and prisons include: (a) a forensic intensive-care management system to provide supervision, monitoring, and coordination of necessary services and supports; (b) a wraparound service delivery model that includes behavioral health care treatment services as well as supported employment and housing; for those eligible for Medicaid, this could be best provided through a specialized Medicaid waiver; (c) an emphasis in the court system on diversion from jails and prisons into community treatment settings and specialized probation and parole programs to monitor those individuals released from prison settings; (d) community-based competency restoration programs for those determined to be incompetent to stand trial who



have committed nonviolent offenses; and (e) Crisis Intervention Team training for law enforcement agencies.

It is important that providers working in the community mental health system are competent in treating persons who have experienced trauma when working with persons involved in the criminal justice system. Incarcerated individuals are more likely than those in the general population to have experienced trauma prior to imprisonment and are also likely to be retraumatized in prison. Persons with mental illness who are incarcerated are even more likely to have experienced trauma prior to incarceration and are more likely to experience trauma within the prison system. The same is true for youth in juvenile justice settings, with rates of post-traumatic stress disorder ranging as high as 50 percent. In one study, more than 90 percent of youth in detention reported experiencing at least one traumatic event.

Just as it is important for mental health professionals to be trained in trauma, it is equally important for law enforcement agencies to be trained to respond to a mental health crisis. Crisis Intervention Team training is a model being used successfully in many Florida counties when a person with a psychiatric disability has exhibited behavior that comes to the attention of law enforcement. The Crisis Intervention Team model increases the likelihood that a crisis situation will resolve safely for the person with the psychiatric disability and others involved, while decreasing the chances that the person will be taken to jail rather than an appropriate treatment setting. Florida should support Partners in Crisis, the organization providing training and support for the implementation of Crisis Intervention Teams statewide.

### **Recommendation G – 3**

**Support the needs of returning veterans with traumatic brain injury or behavioral health needs through the development of appropriate behavioral health care services and effective systems of referral.**

#### *Justification*

Returning veterans with disabilities due to traumatic brain injuries, post-traumatic stress disorders, chronic or persistent mental illness, and chronic substance abuse disorders need access to treatment and community resources to support their return to their communities. Providers working in the existing community behavioral health system should be given specialized training, such as Trauma-Informed Care, to appropriately treat the specialized issues of returning veterans. It should be noted that post-traumatic stress disorder (PTSD), as a result of traumas experienced in combat, presents differently and requires different treatment techniques than when the disorder is caused by other types of traumas, such as abuse. Many veterans express a preference for care rendered

by those specializing in veteran's issues and, in particular, care rendered by other veterans.

In addition to training, behavioral health treatment and community social service providers are in need of education on assistive supports that are available to returning veterans through the Veterans Administration. In addition, resources are needed for the provision of services and supports to family members.

### *Commentary*

Epidemiologic data and studies regarding mental health problems among veterans are just beginning to emerge on a national level. An estimated 18.5 percent of all service members and veterans returning from Operation Enduring Freedom and Operation Iraqi Freedom suffer from PTSD or some form of major depression. Applying that percentage to Florida's returning veterans, approximately 32,450 of them may suffer from these disorders. National data also show that 47 percent of returning troops who met criteria for PTSD or major depression did not seek help from a provider for these conditions in the past year. In Florida, an estimated 15,250 returning veterans who suffer from mental health or substance abuse problems have not sought proper treatment. These national data also suggest that there are subgroups of returning veterans who are at increased risk for PTSD and major depression: Army soldiers, Marines, women, Hispanics, and individuals with deployment of over one year and exposure to combat trauma.

At the national and state levels, resources are being developed through the Veterans Administration and other veterans' organizations to provide services and supports to returning veterans. However, many veterans are not aware of the services available nor are other community support professionals who may be working with veterans. It is critical to increase awareness of resources among these groups. This could be accomplished via public service announcements and financial support to the Clearinghouse on Disability Information to link veterans to services. Two existing Web sites that could be publicized are:

[www.suicidepreventionlifeline.org/Veterans](http://www.suicidepreventionlifeline.org/Veterans)  
[www.floridavets.org/first.asp](http://www.floridavets.org/first.asp)

Training also should be developed for community support professionals who may be unaware of resources or unfamiliar with initiating referrals to veteran service providers.

## ***Section H – Health Care Education***

### **Recommendation H – 1**

**Ensure the coordination of sensitivity training for all primary and secondary students, including "comprehensive health education that addresses concepts of...mental and emotional health" as mandated under Florida Statute 1003.42(2)(n).**

#### *Justification*

Since the passage of the All Handicapped Children Act of 1975, providing that all students with disabilities be educated in a "least restrictive environment," there have been many laws enacted that build on this ideal of inclusion. In 2005, 54.2 percent of all children with disabilities were considered fully included in general education classrooms, according to the National Center for Education Statistics. Also, according to a report published in the *Wall Street Journal*, children with disabilities account for about 14 percent of all the nation's students. Research has indicated that many students with disabilities make social and educational gains when included with adequate support and accommodations. However, the education and training of general education teachers in the area of special education have not kept up with this growing trend.

Most general education teachers have minimal experience or training regarding students with disabilities. Many teachers do not fully understand the nature of the disability, the accommodations needed, or the resources necessary to effectively educate a student with a disability. Teacher training and education that recognizes differences in learning and how to overcome these differences can be of benefit to all students, including students with disabilities.

#### *Commentary*

Students receiving comprehensive health education that addresses concepts of mental and emotional health must include information about the spectrum of disabilities in the community. Awareness of all disabilities will benefit all students.

Awareness is the key to overcoming some of the barriers and challenges persons with disabilities encounter on a daily basis and not just in inclusionary settings. Disability awareness will create a new generation of citizens who will enter the workforce with the knowledge, compassion, and understanding of the importance of an inclusive and accommodating environment from all career perspectives.

More pertinent data can be obtained from these sources on the Web:

[http://nces.ed.gov/programs/digest/d07/tables/dt07\\_048.asp](http://nces.ed.gov/programs/digest/d07/tables/dt07_048.asp)  
<http://online.wsj.com/article/SB119906505632958721.html>

## **Recommendation H – 2**

**Support the training of all health care professionals and paraprofessionals in providing direct care services to people with disabilities. This training should occur in all applicable educational settings and as a part of continuing education requirements. The curriculum should be appropriate for people with physical, cognitive, and sensory disabilities and mental illnesses, and should address communication skills and barriers to health care for patients.**

### *Justification*

Access to quality health care is a prerequisite for effective treatment. Individuals with disabilities without adequate health insurance have limited access to comprehensive health care services. This results in unnecessary emergency room visits, lack of or too much medication, delayed treatment, gaps in coordination of medical services, and increased medical costs. Targeted case management services provided by knowledgeable providers who use effective communication and show sensitivity to the needs of the disabled would ensure quality care as well as enhance the quality of life for this population.

### *Commentary*

It is essential that health care professionals and paraprofessionals be appropriately trained to provide direct care services to individuals with disabilities. Health care professionals and paraprofessionals include physicians, nurses, certified nursing assistants, chiropractors, social workers, family therapists, health counselors, paramedics, dentists, nutritionists, hearing specialists, occupational therapists, physical therapists, physician assistants, psychologists, speech language pathologists, and audiologists. In terms of educational curricula, training and continuing educational requirements and health care disciplines are regulated by Department of Health medical quality assurance rules that apply to all settings in which direct services occur.

## ***Section I – Long-Term Health Care***

### **Recommendation I – 1**

**A multiagency study should be conducted on the barriers to senior adults and people with disabilities living in home and community settings as opposed to institutional care settings such as nursing homes. The purpose of the study would be to identify the various obstacles to receiving reasonable community-based care and suggest strategies for dealing with or eliminating those obstacles.**

#### *Justification*

According to data from the Florida Medicaid Program, Office of Program Analysis, the annual cost of nursing home placement to Medicaid is approximately \$63,000. In most cases, it is considerably less than that to maintain an individual in the community. Costs aside, most individuals prefer to remain in their communities being cared for by familiar people rather than being institutionalized for long-term care. Community care settings also better facilitate the use of volunteers in the care and support of individuals. A comprehensive study identifying the barriers to accessing community care conducted by partner agencies would have a minimal fiscal impact and provide valuable data on enhancing the quality of life for seniors and persons with disabilities.

#### *Commentary*

As baby boomers become seniors and veterans return home from Iraq and Afghanistan with brain, spinal cord, and other injuries, it is time to rethink the traditional model of long-term care. The executive order that established the Governor's Commission on Disabilities requires recommendations for independent living and the removal of barriers to the delivery of and access to services. If individuals choose to remain in their community with appropriate supports and services in place, they still will face many barriers to this preferred method of care.

Although consumer-directed care and person-centered planning models receive positive reviews and outcomes, there are still many barriers to these types of care. Many of the services offered under these programs are required to be provided by licensed professionals, such as registered nurses, and by licensed agencies. This potentially prohibits an individual from returning home because a trained individual, such as a family member or friend, is not allowed to perform the service because of programmatic or regulatory constraints.

In keeping with the holistic perspective, keys to successful integration into a community care setting are adequate accommodations for sufficient transportation and health services in the host communities.

## ***Section J – Access to Health Care***

### **Recommendation J – 1**

**Require health care service providers, including emergency rooms and walk-in centers, to provide appropriate accommodations as well as modifications to policies and practices to ensure that persons with disabilities receive the same level of care—with dignity—as nondisabled patients. Training programs for health care professionals and subsequent continuing education requirements for licensure renewal should include awareness of the impact of physical, sensory, mental illness, and cognitive disabilities when treating persons with disabilities.**

#### *Justification*

According to the most recent American Community Survey (2007), over 2.6 million Floridians (15.5 percent of noninstitutionalized individuals ages 5 and older) reported some type of disability. The disabilities included sensory (4.6 percent), physical (10.15 percent), mental (5.6 percent), self-care (3.1 percent), go-outside-home (5.6 percent), and employment (6.5 percent). As a significant segment of the population, Floridians with disabilities should have appropriate accommodations to improve their access to health care while maintaining their dignity as persons.

#### *Commentary*

In order to receive equal access to health care, persons with disabilities may require various types of accommodations, including physical accommodations, effective communication, and modification of policies and procedures. Accommodations should not only include physical access to facilities and treatment areas, but should also take into consideration the dignity of the individual when transferring to and from treatment areas or tables, weight scales, wheelchairs, etc. Service animals should be allowed on premises. A variety of communication accommodations should be readily available, especially in emergency situations and when gathering information and authorizing treatment. Two areas of particular concern are health care and dental treatments for children with disabilities.

## Recommendation J – 2

**The Commission supports the adoption of the recommendations of the state Surgeon General's Florida Health Practitioner Oral Health Care Workforce Ad Hoc Committee regarding dental care for persons with disabilities.**

### *Justification*

Persons with disabilities in Florida need better access to dental care. Dentists, their assistants, and other dental practitioners usually do not have adequate training and experience to provide care to those with special needs.

### *Commentary*

The Surgeon General's ad hoc committee recently concluded a series of meetings spanning ten months. The Oral Health Committee, composed of multiple governmental and nongovernmental stakeholders, reviewed literature, heard presentations on selected programs and best practices from other states, and ultimately agreed on strategies to be considered to begin to address Florida's oral health workforce needs.

These recommendations lay the foundation for addressing these issues, as well as addressing many of the concerns discussed by the Commission's Access to Health Care Subcommittee. These observations and strategies were offered to provide guidance to policy makers, professional organizations, advocates, and the public as they consider how to positively impact Florida's dental workforce challenges in these areas: (a) oral health education and prevention services; (b) third-party payer issues; (c) recruitment and incentives to attract providers to public health dental positions; (d) legal and policy approaches to expand the dental workforce and services; and (e) training for providers.

## Recommendation J – 3

**Adjust Medicaid fees and eliminate unnecessary paperwork and regulation to remove barriers to recruiting providers willing to accept Medicaid. In addition, promote public-private partnerships between dental health professionals and training facilities to increase services to at-risk populations, including persons with disabilities.**

### *Justification*

Access to health care and dental care is often a function of economics. Many persons with disabilities do not have the resources to purchase health and dental

insurance. Limited state and federal funding restricts coverage because there is simply not enough funding to cover all potentially eligible persons and the services they require. Participating health care providers complain about excessive paperwork, delays in payment, and fee schedules. Persons trying to access providers complain that they cannot locate appropriately trained professionals who will accept Medicaid and appointments are often difficult to obtain.

## **Recommendation J – 4**

**The State of Florida should take a leadership position on health plan coverage for people with disabilities, and put activities in place to ensure coverage for a wide range of disabilities, physical and mental, in all health plan coverage options. Such initiatives should include Medicaid buy-in coverage, mental health parity, and a means of covering an individual's disability without a pre-existing condition wait period if the individual accepts a position of employment.**

### *Justification*

Approximately 20 percent of Florida's population does not have health plan coverage. Approximately 10 percent of Floridians is estimated to have significant or chronic disabilities. Some of these individuals have health care coverage through public offerings such as Medicaid. It is believed that, among those without Medicaid or Medicare, a significant number are included in the ranks of the uninsured.

For most citizens with Medicare or Medicaid coverage, employment is not an option because of the resulting loss of health care coverage, and remains continually out of reach. For the uninsured, the only option may be to seek health care at emergency clinics, which are inappropriate for ongoing care and often inadequately equipped to handle the basic needs of people with disabilities.

### *Commentary*

Health insurance coverage is not equitable, as health plan companies and plans that are self-insured are able to select which options are included after basic care requirements are met. For example, an individual could be covered extensively for a stroke or an incidence of cancer, but be limited to \$30,000 or less per year for a diagnosis of bipolar disorder or not covered at all for a pre-existing condition such as cerebral palsy, deafness, polio, etc. Florida Statute 627.644, which prohibits discrimination against people with disabilities by health insurers, does not require a health insurer to provide coverage for a pre-existing disability.



Research and data collection are needed to identify the number of people with disabilities who are negatively affected by this lack of coverage, and to develop the parameters of its economic impact. Many individuals with disabilities who would be able to accept employment if increased availability of health care coverage were to become a reality, would be removed from public funds coverage and support, would achieve a higher level of self-support, and would return earned funds back to their communities as they go about their lives. This is a direct and positive economic impact to local communities and to the state.

The initiatives referenced in this recommendation would meet the needs of employees and potential employees with disabilities throughout Florida, making access to health care available to all, regardless of their place of employment.

## **Recommendation J-5**

**Services and supports provided to individuals with disabilities or legal representatives should be managed by the individual to the extent that it is feasible and does not compromise health and safety.**

### *Justification*

Given the ever-present reality of resource constraints, individuals with disabilities deserve a chance to ensure that funds spent on their behalf are used to their maximum benefit. Generally speaking, individuals or their legal representatives are going to know best which services and supports are most important to allow for successful lives in the community. This is especially true regarding long-term care services providing assistance with the routine activities of daily life.

Substantial public and private resources are devoted to paying outsiders to make and enforce decisions dictating the type, intensity, and duration of services needed by individuals with disabilities. This deprives Floridians with disabilities of the opportunity to take ownership of their care and make sound decisions regarding their use of available resources. It also encourages reliance on others, thus thwarting efforts to empower the individual.

### *Commentary*

In order to create sustainable systems of support, individuals and their families must be encouraged to actively participate in their care. They must be encouraged and allowed to make sound decisions, particularly regarding the most intimate activities of their personal lives. They should understand the resource constraints that are inherently present and comply with program requirements and limitations.

Such an approach will lead to greater consumer satisfaction and greater efficiency. The Consumer-Directed Care Plus (CDC+) program within Florida's Agency for Persons with Disabilities is one example of a successful self-direction program currently in operation.

It should be noted that this recommendation is not intended to supplant professional services when necessary. Acute medical care, for instance, is best left to the judgment of medical professionals.

## CHAPTER 4

# Implementation of 2008 Recommendations

At the Commission's organizational meeting in December 2008, several of the committees that presented recommendations in the July 2008 report to Governor Crist felt new recommendations were not prudent. These committees decided to work to develop plans that would move some of the 2008 recommendations toward implementation. This section puts those recommendations forward and adds their proposed implementation strategies.

Each committee section that follows includes the original 2008 recommendation with its justification and commentary along with the proposed implementation strategy. For purposes of clarity, the 2008 recommendations have "(2008)" in their titles. However, if the wording of a 2008 recommendation or its accompanying text has been significantly revised, its title included the notation "(2008/Rev. 2009)."

The intent is to provide all of the pertinent information regarding each recommendation for purposes of context and clarity.

## ***Section A – Education***

### **Recommendation A – 1 (2008/Rev. 2009)**

**Require that Individual Educational Plans for students with hidden disabilities be accepted at the postsecondary level.**

#### *Justification*

Currently, federal statutes do not provide funding for evaluations for postsecondary education. Students with hidden disabilities, including but not limited to specific learning disabilities and deaf/hard of hearing, must use their own resources for evaluation. The result is a financial and bureaucratic barrier to higher education for students with these types of disabilities. This recommendation provides a simple, low-cost solution.

## *Commentary*

Postsecondary institutions should access documentation furnished by secondary schools and eliminate subsequent costs of additional assessments prior to provision of services. Students with apparent disabilities, such as visual, wheelchair usage, etc., may provide a doctor's note as proof of the need for an accommodation. This would require language specifying acceptable documentation of a disability in the existing 6A-10.041 Substitution for Requirements for Eligible Disabled Students at State Universities, Community Colleges, and Postsecondary Career Centers.

The issue at the postsecondary level is providing access to education. These requirements are outlined in Section 504 of the Rehabilitation Act of 1973 in subpart D.

Students who were eligible for services under the Individuals with Disabilities Education Act (IDEA 2004) are not automatically eligible for services under Section 504 and the Americans with Disabilities Act (ADA) in college and university settings. In most cases, postsecondary disability service providers interpret Section 504 and ADA guidelines to mean that a specific diagnosis with a clearly established functional limitation in a major life activity is required.

In K-12 education, however, states use a variety of terms (for example, perceptual, communication, or neurological impairment) that may not be readily familiar to postsecondary institutions. Furthermore, once eligibility for special education is established, states or school districts may not require a label, or may allow the option of not specifying a disability category. To document the need for accommodations, postsecondary service providers require a clear rationale and history of the use of accommodations along with data from psycho educational evaluations to make their decisions.

In contrast to the types of data sources typical in secondary reevaluations, postsecondary institutions, in most cases, require evaluation data to be current, be administered by a qualified examiner with experience in evaluating adults, and include standardized, adult-normed measures of aptitude, achievement, and information processing. {Gormley, S., Hughes, C., Block, L., and Lendman, C. (2005) "Eligibility assessment requirements at the postsecondary level for students with learning disabilities: A disconnect with secondary schools?" *Journal of Postsecondary Education and Disability*, 18(1), 63–70}

Psychoeducational testing required for postsecondary education does not match that required in public schools.

Individual Educational Plans (IEPs) are developed for an eligible student with a disability at least annually in accordance with IDEA, the provisions of which end

upon graduation with a standard diploma or at the point of exit from the secondary environment. Under IDEA, an eligible student with a disability who has not graduated with a standard diploma is entitled to free appropriate public education through the student's 22nd birthday. IEPs have not been considered transferable at the postsecondary level because they are implemented under IDEA, which does not apply at the postsecondary level.

Graduation with a standard diploma constitutes a change in placement and a reevaluation is not required under IDEA. However, a Summary of Performance (SOP) is required that provides a summary of the student's academic achievement and recommendations for assisting the student in reaching postsecondary goals, including higher education.

The IEP developed within the last year of high school, together with the SOP, should be acceptable for the postsecondary institution if the student enrolls in postsecondary education or training immediately after high school. Secondary and higher education leaders, as well as the Florida Legislature, should explore how this requirement under IDEA can be used together with the student's IEP to provide postsecondary institutions with the information needed to adequately serve students.

Training should be provided to postsecondary staff members on the availability of assistive technology and the referral of students to assistive technology providers for evaluation. Several nonprofit organizations provide such services. Staff members assigned to provide guidance or support in postsecondary educational settings differ depending upon the setting, such as disability services, advisors, etc.

Currently, state programs have provisions directing how funds received by students can be used. Some of the Florida-funded scholarships and financial aid provided to students with disabilities should be used for assessments and accommodations that are outside the traditional. This use of funds may require a change in statute and/or rule.

#### *Proposed Implementation Strategy*

- Collaborate with entities providing postsecondary special needs services to reduce barriers for individuals with hidden disabilities.

## **Recommendation A – 2 (2008)**

**The Commission recommends that the Governor consider the issuance of an executive order that requires the Commissioner of Education to initiate the following: Have the Florida Department of Education, Division of Public Schools, and the Division of Community Colleges develop a strategic plan for implementation of a comprehensive research-based statewide transition program at each community college that offers (1) inclusive educational opportunities for students with disabilities in a degree-seeking program; (2) inclusive educational, vocational, and community-based living training opportunities for students with disabilities who are not eligible for acceptance into degree programs; and (3) educational and clinical opportunities for college-level students interested in careers devoted to working with persons with disabilities.**

### *Justification*

When Congress passed IDEA 2004, it sought to raise expectations for students with disabilities. Inclusion of higher education preparation for students with disabilities is an established goal of IDEA. In the "Purposes" section of IDEA 2004 {Section 1400(d)}, Congress stated, "The purposes of this title are to ensure that all children with disabilities have available to them a free appropriate public education that emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment and independent living." (20 U.S.C. Section 1400, Findings and Purposes)

There is growing recognition that individuals with and without developmental disabilities benefit from opportunities to attend postsecondary institutions (Wehman, 1992). The practice of including students with their nondisabled peers establishes environments that are supportive, nurturing, and built on giving all students the services and accommodations they need to succeed, as well as teaching students to respect each other's individual differences (Bucalos and Lingo, 2005). On-campus programs with their age-appropriate peers provide students with disabilities an engaging curriculum that will help them successfully transition to adulthood (Grigal, Neubert, and Moon, 2005; Roach, Salisbury, and McGregor, 2002).

In addition, research reveals that students with disabilities benefit greatly from career exploration and employment during their high school years (for example, Johnson, Stodden, Emanuel, Luecking, and Mack, 2002). In spite of these known benefits, young adults with disabilities, particularly those who are age 18 to 22, are not receiving levels of employment and community experiences that would increase their chances for experiencing satisfying and productive lives. Because

their same-aged peers have graduated, traditional high school settings do not offer 18-to-22-year-old students with disabilities fulfilling or enriching experiences unless efforts are made to move their education into adult communities of postsecondary education and employment. Research has revealed the importance of appropriate student culture as a critical component for successful individualized transition planning (Wilder, Jackson, and Smith, 2001). Further, if students have opportunities to voice their career preferences (Bassett and Lehmann, 2002), the professionals who facilitate their transitions can help these young adults select appropriate classes and employment.

### *Commentary*

Research demonstrates that students with disabilities are less successful at transitioning into employment and/or postsecondary educational opportunities than their non-disabled peers. Nationally, only 35 percent of people with disabilities are employed full or part time, compared to 78 percent of persons without disabilities (National Organization on Disability, 2004). Only 12 percent of people with disabilities have graduated from college, compared to 23 percent of their non-disabled peers (National Organization on Disability, 2000). Rates of poverty are three times higher for persons with disabilities compared to people without disabilities (National Organization on Disability, 2004). Florida students face the same challenges.

The following findings are based on data gathered and compiled by the Florida Department of Education for the Florida Education and Training Placement Information Program (FETPIP, 2006): (a) Only 19 percent of students with disabilities were found enrolled in continuing education within one year of exiting the school system; (b) Only 7 percent of students exiting with a special diploma were found enrolled in continuing education within one year of exiting the school system, compared to 65 percent of students with a standard diploma; (c) Only 5 percent of students with developmental disabilities were found enrolled in continuing education within one year of exiting the school system; and (d) 14 percent of students exiting with a special diploma received public assistance, such as Temporary Assistance for Needy Families (TANF) or food stamps, within one year of exiting the school system, compared to only 3 percent of students exiting with a standard diploma.

Currently, there is not a consistent statewide postsecondary program targeted for students with more severe disabilities, and there are just a few isolated programs in Florida that offer inclusive experiences on college campuses for students with more severe disabilities. There is disparity statewide as to the availability and quality of transition services for students who graduate from the primary school system with special diplomas. Some communities within the state offer transition services, but many do not.

In May 2008, an informal survey was distributed to transition specialists in Florida's 67 school districts and at the Florida School for the Deaf and the Blind (FSDB). Thirty-nine school districts and the FSDB responded. Nine school districts responded that they have programs for students with more severe disabilities ages 18 to 22 affiliated with a university or community college. Twenty-nine responded that they did not have programs affiliated with universities or community colleges, but two have programs located on military bases, one at a vocational technical center, two who work with individual students based on their needs, and four planning for program development and implementation. This information does not include special programs for those who are identified with mild disabilities. But it confirms that there is certainly no uniformity of services available across the state, and no standardized curriculum.

The Commission heard from students, parents, providers, and educators that Florida is lacking in quality transition program options for many students leaving the primary school system. In addition, high schools are currently overtaxed with the responsibility of trying to balance community-based instruction to students with disabilities, which includes some transition exposure, with the need to also provide basic skills, communication, and academic instruction. The Commission believes that, if quality transition programs existed at each of Florida's 27 community colleges, high schools could devote more resources toward basic skill acquisition and maximize the academic potential of each student with a disability. The result would be that special diploma students could graduate from the primary school system with a basic skill set that would make them better prepared to move on to the next step toward community transition.

The Commission has also learned from providers and educators that there is a shortage of well-trained disability support professionals in Florida. The Commission believes that this shortage could at least be partially addressed with the initiation of a clinical program for college students at each community college transition program. Students desiring to explore career opportunities working with individuals with disabilities could take college-level courses for credit and opt for clinical experiences as part of the recommended transition program at each community college. An accredited clinical internship program could provide additional staff and enhance the quality and success of each community college transition program. For example, student-interns could assist with job development and job coaching for students with disabilities and help them find employment, provide on-the-job training, and maintain employment. In addition, interns could provide tutoring or mentoring or assist with providing in-class accommodations, such as note taking, for students enrolled in degree-seeking courses.

With focused collaboration, planning, and support, Florida can build upon the few successful transition programs that currently exist within the state and across the country. Accomplishing this will be an important step toward offering students with disabilities postsecondary school options that approach those that are



offered to their nondisabled peers, while providing transition program students with the tools they need to reach their full potential.

To accomplish this goal, the Commission could work with the Florida Department of Education and community partners to establish a means by which an appropriate curriculum could be developed and exploration of both federal and state funding opportunities could be identified.

### *Proposed Implementation Strategies*

1. Continue to collaborate with Project SOURCE at the University of North Florida.
  - a. Examine the research findings of Florida's postsecondary programs for youth with disabilities regarding program design, funding, participation, student population, etc.
  - b. Follow up on the research on program impact, beliefs, and attitudes of degree-seeking mentor participation in the on-campus transition program for youth with disabilities who are not seeking degrees.
2. Identify evidence-based practices that facilitate inclusive educational opportunities for students with disabilities in degree-seeking programs.
3. Develop a work group under the Transition Steering Committee's Postsecondary Education Subcommittee to consider the requirements of implementing recommendation A-2. This work group shall consist of representatives from community colleges, school districts, Project 10, Project SOURCE, Governor's Commission on Disabilities, Bureau of Exceptional Education and Student Services, and Division of Community Colleges.
  - a. Develop a research-based strategic plan that can be used in contacting postsecondary institutions in attempts to partner with them in building such programs.
  - b. Develop curriculum models that postsecondary institutions can borrow in implementing such programs on their campuses.
  - c. The focus of the work group should be on developing a curriculum, staffing plan, assessment plan, outcomes, goals, and objectives for the program.

## **Recommendation A – 3 (2008)**

### **Require a percentage of Carl Perkins funds to be allocated for students with disabilities.**

#### *Justification*

Carl Perkins funds are federal career and technical education (CTE) dollars allotted to each state and, through the state, to the local education agencies. The state is required to submit a plan to the U.S. Department of Education accounting for these funds. Allocating a specific portion of these funds for students with disabilities would improve the ability of such students to participate in career and technical education.

#### *Commentary*

The Carl D. Perkins Vocational and Technical Education Improvement Act of 2006 (the Act) defines special populations as individuals with disabilities; individuals from economically disadvantaged families, including foster children; individuals preparing for nontraditional fields; single parents, including single pregnant women; displaced homemakers; and individuals with limited English proficiency. {20 USC 2301 § 3.(29)(A-F)}

The Act requires that local recipients of funds "provide activities to prepare special populations...for high skill, high wage, or high demand occupations that will lead to self-sufficiency." {20 USC 2301 § 135.(b)(9)}

The Act allows funds to be used as follows:

to "provide career guidance and academic counseling...for students in career and technical education programs, that (a) improves graduation rates and provides information on postsecondary and career options...and (b) provides assistance for postsecondary students, including adult students who are changing careers or updating skills" {20 USC 2301 § 135.(c)(2)(A) and (B)};

"for local education and business...partnerships for work-related experiences for students, such as internships, cooperative education, school-based enterprises, entrepreneurship, and job shadowing that are related to career and technical education programs" {USC 2301 § 135.(c)(3)(A)};

"to provide programs for special populations" {USC 2301 § 135.(c)(4)};  
and

"for mentoring and support services" {USC 2301 § 135.(c)(6)}.

### *Proposed Implementation Strategies*

1. Convene a work group with representatives from the Governor's Commission on Disabilities, Bureau of Exceptional Education and Student Services, Division of Workforce Education, Division of Community Colleges, and universities to address the recommendation.
2. Use a problem-solving process to develop policies and practices related to using Carl D. Perkins Career and Technical Education Act of 2006 funds for students with disabilities.
3. Analyze requirements for providing funding for supports to special populations under the Carl Perkins Act.
  - a. Analyze Florida's current policy and practice for meeting the needs of special populations, including students with disabilities, to determine current resources for and barriers to providing funding and supports.
  - b. Identify methods for allocating a percentage of Carl Perkins funds for students with disabilities.
  - c. Develop a statewide implementation plan.
4. Disseminate information on the implementation plan statewide.
  - a. Provide notice of policy and practice changes to school districts and entities receiving Carl Perkins funds.
  - b. Provide technical assistance and support for guiding implementation.

### **Recommendation A – 4 (2008)**

**Request a review of the implementation of and adherence to the current Florida Accessible and Electronic Information Technology (AEIT) statute. Include a review of the recommendations made by the Governor's AEIT Task Force as well as the creation of the AEIT office and compliance with Section 508 of the federal Rehabilitation Act.**

#### *Justification*

The AEIT Task Force made recommendations that have not been fully implemented. Given the varying electronic instructional and informational methods that are now in use, individuals with disabilities require full accessibility to participate in and make use of postsecondary and continuing educational opportunities.

### *Commentary*

The AEIT statute (section 282.601, Florida Statutes) was passed in 2006. This law requires all state agencies to make available in accessible formats any electronic information needed by state employees and the public.

In the present form, there is no provision for departments or agencies that do not abide by this statute nor is there a provision addressing training of departmental and agency personnel on how to make electronic information accessible.

Outreach to offices that implement on-campus policies regarding compliance with the Americans with Disabilities Act and Section 504 of the Rehabilitation Act could assist with the implementation of Section 508. Postsecondary institutions that have achieved compliance with Section 508 requirements should be used as models.

### *Proposed Implementation Strategies*

1. Provide legal clarification on AEIT, ADA, and Section 504 of the Rehabilitation Act regarding the following:
  - a. Explanation of secondary and postsecondary state agencies under the executive branch of the State of Florida regarding AEIT that fall under the law's accessibility requirements regarding information services procured, developed, or maintained since July 1, 2006.
  - b. Information accessibility requirements (such as the ADA or 504) that affect secondary and postsecondary electronic information products and services in existence prior to July 1, 2006, that are still being used today by Florida's students.
2. Survey the current status of online information accessibility in secondary and postsecondary agencies.
  - a. Review and report on the types of memoranda and technical assistance papers disseminated to secondary and postsecondary agencies regarding the accessibility requirements of AEIT, IDEA, ADA, and Section 504.
  - b. Review and report on the implementation status of those memoranda and technical assistance papers.
  - c. Review and report on the types of online accessibility support services available to students on the Web sites of secondary and postsecondary agencies.

3. Provide a set of guidelines to secondary and postsecondary agencies regarding the following:
  - a. Evaluation of the accessibility features of electronic information services and products, as well as compliance with World Wide Web Consortium (W3C) and Section 508 requirements.
  - b. Effective assistive technologies and accessibility solutions regarding the access and successful use of electronic information in a learning environment.
  - c. Effective transition strategies for the continued use of assistive technologies and electronic information from secondary to postsecondary settings.
  - d. Effective assistive technologies and accessibility solutions regarding Web 2.0 services, such as Twitter and Facebook, that are not required to comply with accessibility standards but may be integral to online social inclusion in a postsecondary setting.

## **Recommendation A – 5 (2008)**

**Require that accessible postsecondary textbooks be made available in a timely manner.**

### *Justification*

Students in postsecondary settings do not have access to textbooks in accessible formats in a timely manner. Textbooks in accessible formats may be obtained, but this process may take more than six weeks. There is no guarantee of consistency of texts used because professors have academic freedom to choose the materials they wish to use in their classes.

### *Commentary*

Section 1003.55, Florida Statutes, provides that publishers submit electronic files for the conversion of textbooks into accessible formats. Students served under this statute are enrolled in K-12 programs. This recommendation would expand coverage to postsecondary education. This statute also created the Florida Instructional Materials Center for the Visually Impaired, which distributes these materials.

The Commission recommends that Florida explore options successfully implemented in other states. For example, Georgia's Alternative Media Access Center (AMAC) is an initiative of the University System of Georgia, which is committed to removing barriers and providing access to knowledge for individuals with physical, sensory, and print-related learning disabilities. The AMAC provides multiple media formats, assistive technology, standardization of

media materials, production, training, resource leveraging, and partnerships with publishers.

### *Proposed Implementation Strategies*

1. Establish a task force comprised of representatives from the Governor's Commission on Disabilities, disability support services provided by universities and community colleges, stakeholders, Veterans Administration, school districts, Bureau of Exceptional Education and Student Services, Division of Blind Services, Division of Vocational Rehabilitation, Division of Community Colleges, and universities. This task force should do the following:
  - a. Develop and distribute a needs assessment identifying services currently provided by colleges and universities in Florida.
  - b. Conduct a review of literature related to the provision of accessible textbooks to postsecondary students.
  - c. Research legislation in other states that addresses accessible postsecondary materials.
  - d. Analyze programs currently providing accessible postsecondary materials in other states and identify successful practices.
2. Address feasibility costs necessary to provide accessible textbooks to postsecondary students at specific colleges and universities and on regional and statewide levels.
  - a. Analyze programs currently providing accessible postsecondary materials in other states, specifically reviewing contractual agreements with publishers as well as expenditures.
  - b. Review costs, which may include, but not be limited to: personnel, computer access hardware and software, infrastructure and networking, text conversion, supplies, and capital outlay expenditures.
3. Develop a statewide implementation plan that reflects the transition between secondary and postsecondary education in the area of accessible instructional materials. The plan would include goals, objectives, activities, timelines, and evaluation components at the local school district, specific college or university, regional, and statewide levels. The plan should:
  - a. Address accommodations, media formats and standardization, assistive technology, production, training, partnerships with publishers, and resource leveraging related to the provision of accessible postsecondary textbooks.

- b. Review unique needs related to online postsecondary training courses, online books, online assessments, and online research and publishing support tools.
- c. Define "timely manner."

## **Recommendation A – 6 (2008/Rev. 2009)**

**Implement a standardized curriculum statewide in community colleges and state colleges to educate students with disabilities on issues concerning their transition from school to work.**

### *Justification*

Without such standardization, the availability and quality of education varies widely on this topic, which has high importance in the disability community.

Funding for a standardized curriculum to be implemented in community colleges is not available. Also, professors have the academic freedom to choose the materials they wish to use in their classes, so there is no guarantee of curriculum consistency.

### *Commentary*

Consider the possibility of providing an elective class for all students in their final semesters concerning the transition from community and state colleges to work. Also consider providing training to advisors in community and state colleges, as well as disability services providers, to enable them to assist students in making this transition.

### *Proposed Implementation Strategies*

1. Develop a work group under the Transition Steering Committee's Postsecondary Education Subcommittee to consider the requirements of implementing this recommendation. The work group should consist of representatives from community colleges, secondary school district personnel, Bureau of Exceptional Education and Student Services, Division of Colleges, Project 10, Project SOURCE, and the Governor's Commission on Disabilities. The focus of the work group would be on developing curriculum standards, staffing plans, assessment plans, outcomes, goals, and objectives for the program.
2. Research existing programs at colleges to explore expanding upon them to include more students with disabilities.

3. Assess potential costs to students and colleges for developing such programs and investigate funding approaches that community colleges might be able to use in educating students in the 18-to-21 age bracket.
4. Develop formal standards for a curriculum that community colleges can use in educating students with disabilities on the issues concerning their transition from school to work.
5. Develop a research-based marketing plan that Project 10 staff and school district staff can use in approaching community colleges regarding the development of such programs.

### **Recommendation A – 7 (2008/Rev. 2009)**

**Seek a partnership with the Florida High School/High Tech Program and other youth programs to increase the graduation rate of students with disabilities, increase their entrance into postsecondary education, and facilitate their transition to employment.**

#### *Justification*

The Florida High School/High Tech Program (HS/HT) offers a solution to the low employment and underemployment of Floridians with disabilities by providing evidence-based, individualized transition services to high school students with disabilities between the ages of 14 and 22. Through the Florida HS/HT Program, over 1,300 students in 36 Florida counties are annually linked to a broad range of academic resources, career development opportunities, and on-the-job experiences that enable them to meet the demands of the 21st century workforce.

#### *Commentary*

Core services for all HS/HT students are organized according to the Guideposts for Success, a national framework available through the National Collaborative on Workforce and Disability for Youth (NCWD/Youth). The guideposts include five areas for service provision: (1) school-based preparatory experiences, (2) career preparation and work-based learning, (3) youth leadership and development, (4) connecting activities, and (5) family involvement and supports. The *National Standards and Quality Indicators: Transition Toolkit for Systems Improvement* is available from the Web site of the National Alliance for Secondary Education and Transition: [www.nasetalliance.org](http://www.nasetalliance.org)

Relevant statistics are available on the Able Trust's Web site at: [www.abletrust.org/hsht/why/statistics.shtml](http://www.abletrust.org/hsht/why/statistics.shtml)



### *Proposed Implementation Strategies*

1. Strengthen this new partnership with the High School/High Tech Program to increase knowledge and implementation within Florida's school districts.
  - a. Continue to involve the Able Trust and High School/High Tech as members of the state Transition Steering Committee.
  - b. Invite the High School/High Tech Program to present information about the program in a variety of venues locally, regionally, and statewide.
  - c. Disseminate information on the High School/High Tech Program through electronic media, including Web sites, and Project 10: Transition Education Network activities.
  - d. Add the High School/High Tech Program to the Bureau of Exceptional Education and Student Services General Supervision Web site as a resource for improving outcomes in graduation rate, dropout rate, post-school employment, training, and postsecondary education.
2. Convene a work group under the Transition Steering Committee composed of representatives from the Governor's Commission on Disabilities, Project 10, Bureau of Exceptional Education and Student Services, Division of Community Colleges, Division of Workforce Education, Dropout Prevention Office of the Bureau of Family and Community Outreach, Division of Vocational Rehabilitation, and universities to identify additional evidence-based programs.
3. Disseminate information statewide on evidence-based programs through electronic media, including Web sites, and other stakeholders, that increase the graduation rate of students with disabilities, increase their entrance into postsecondary education, and facilitate their transition to employment.

### **Recommendation A – 8 (2008)**

#### **Standardize braille education for students with visual impairments.**

##### *Justification*

According to the American Foundation for the Blind, 93 percent of working people who are blind read braille. Despite such widespread use, requirements and standards for braille education vary greatly across the state.

##### *Commentary*

There are requirements under the federal Individuals with Disabilities Education Act of 2004 (IDEA) and State Board of Education rules to consider the need for

braille instruction in Individual Educational Plans (IEPs). Braille instruction is provided when the IEP team determines it is necessary. In school districts, instruction is provided by a teacher of students with visual impairments.

### *Proposed Implementation Strategies*

1. Refer recommendations for implementation to the Statewide Vision Leadership Group, which includes representatives of the Florida State University/Teacher Training Program, Florida Instructional Materials Center for the Visually Impaired, private rehabilitation agencies serving people with visual impairments, statewide parent organizations, school district programs for people with visual impairments, Florida School for the Deaf and the Blind, Florida Outreach Project for Children and Young Adults who are Deaf-Blind, Bureau of Exceptional Education and Student Services, and Division of Blind Services.
2. The Statewide Vision Leadership Group should develop an implementation plan.

## **Recommendation A – 9 (2008/Rev. 2009)**

### **Increase the availability of training and educational opportunities for American Sign Language.**

#### *Justification*

American Sign Language (ASL) is used by people with hearing disabilities, family members, service providers, and others in their community. A communications barrier remains between those with hearing impairments and the general public. The recommendation would help to break down this barrier by encouraging students to learn ASL in larger numbers.

#### *Commentary*

A few two-year and two four-year programs are available to learn ASL interpreting at the community college, college, and university levels. Section 1007.2615, Florida Statutes, authorizes public schools to offer ASL as a foreign language that is accepted in Florida's state universities. Because the current supply of sign language interpreters and instructors does not meet the demand, the availability of academic and community-based training and educational opportunities should be expanded. Community colleges and technical schools serving geographic areas of the state with large populations of persons with hearing loss would be good starting points for expansion.

Age-related hearing loss is increasing. Many veterans are coming home from Iraq and Afghanistan with service-related hearing loss. As the hearing loss of these citizens progresses, they may find themselves needing to learn how to use sign language, Communication Access Real-Time Translation (CART), and other assistive technologies as aids in communicating and participating fully in public life.

Access to community-based conversational sign language instruction is particularly important for family members and friends of persons with hearing loss or other related communication disorders. Sign language has also proven itself to be a valuable communication adjunct for preverbal children, particularly those with autism. Community-based instruction is currently offered sporadically through community colleges, commercial providers, and the few remaining deaf service centers. Presently, the lack of a coordinated delivery system of ASL instruction severely impedes the satisfaction of the need in our society.

#### *Proposed Implementation Strategy*

- Establish a single line of responsibility within state government to address the needs of persons who are deaf, hard-of-hearing, late-deafened, and deaf-blind that would improve the delivery of services and supports, such as sign language interpreters, community-based sign language instruction, Communication Access Realtime Translation (CART) captioning and support service providers (SSPs).

## ***Section B – Employment***

### **Recommendation B – 1 (2008/Rev. 2009)**

**Require that all state agencies and departments actively recruit, hire, and retain qualified persons with disabilities, and encourage city and county governments to do the same. In addition, data on the hiring and promotion of persons with disabilities should be included in the annual Affirmative Action Program updates that state agencies prepare.**

#### *Justification*

One of the largest employers in Florida is state government. Florida's state government should serve as a role model to businesses in the state by developing initiatives designed to increase the employment, promotion, and retention of individuals with disabilities.

### *Commentary*

The number or percentage of state employees with disabilities in Florida is not known. Florida's state departments and agencies are not required to track such information in their databases. Also, many people choose not to disclose a disability unless some accommodation is needed. Committee and Commission staff have gotten the support of the Department of Management Services and state agency human resource directors for a voluntary survey of current state employees. This survey, designed to provide baseline data, will be conducted in the summer of 2009. Staff from the University of Florida's Department of Epidemiology and Biostatistics will assist with the project.

This recommendation is directly tied to the activities and support of the role of designated Disability Champions created as a component of Executive Orders 07-148 and 08-193.

### *Proposed Implementation Strategies*

1. The Governor should issue an executive order implementing a strategy for Florida to become a "model employer."
2. Develop a survey to identify how many persons with disabilities presently work for the State of Florida.
3. Coordinate activities with DMS and state agency human resource managers to implement this voluntary survey to all state employees, collect the responses, and aggregate agency information. No personally identifiable data would be returned to the agencies. This study could:
  - a. Determine a baseline in order to document the effectiveness of this policy.
  - b. Determine if state employees with disabilities have experienced any form of discrimination based on their disability.
4. Require agencies to report regularly on their progress and activities to increase employment and promotion of persons with disabilities to the Office of the Governor.

## **Recommendation B – 2 (2008)**

**Require the State of Florida's "People First" Web site to be accessible to persons with disabilities.**

### *Justification*

As the designated online human resources system for Florida government, its use by all state agencies is mandated. However, state employees with disabilities have difficulty using People First independently because it is not compliant with the Americans with Disabilities Act (ADA), nor the recommendations of the Florida Accessible Electronic and Information Technology (AEIT) Task Force. In addition, persons with disabilities are susceptible to theft of confidential information when using the current system because of the means they must use to gain access to it. Qualified persons with disabilities, therefore, may not be afforded the same employment opportunities as their nondisabled peers.

### *Commentary*

The People First system was built using a version of an Enterprise Resource Planning (ERP) software application that is now in need of an upgrade. This upgrade should allow for enhancements to address many of the items that were identified in an ADA assessment performed last year by an outside vendor under contract with the Department of Management Services, which oversees the People First contract. Most of these enhancements cannot be made using the current SAP platform. The Commission urges adoption of a system that is compatible for use with accessibility software.

### *Proposed Implementation Strategy*

- The Governor's Commission on Disabilities will continue to maintain contact and monitor contract negotiations with the contractor that developed and maintains the People First system and urge modifications to allow access of the system by persons with disabilities. This is a critical issue and has direct impact on state employment of persons with disabilities. This is also an issued addressed by the Commission's Education Committee in its reference to adoption of the recommendations of the AEIT committee, and is supported by other disability entities including the Florida Alliance for Assistive Services and Technology (FAAST).

## **Recommendation B – 3 (2008/Rev. 2009)**

**Design a Web site as a comprehensive clearinghouse to maintain and enhance the list of and links to national and state resources on disability information and services available through the Florida Clearinghouse on Disability Information, and require each state Agency to link to it. Designate a state agency or entity to create and maintain this Web site.**

### *Justification*

Although there are many agencies and providers in Florida offering a wealth of information on disability issues through their Web sites, there is no single Web site that links to them all. Floridians with disabilities and the general public need such a site to serve as an entry portal for accessible online information. The Web sites of all state agencies, including MyFlorida.com, should be required to provide a link to this site to promote its availability.

### *Commentary*

This recommendation began as an issue for the Employment Committee but has evolved into a Commission initiative. For success in life, persons with disabilities need access to a wide range of resources. For example, although access to transportation is critical for employment it also has a direct impact on quality of life. This web site should be an online resource to advise travelers with disabilities of all paratransit and accessible transportation resources throughout the state. This online resource should be supported with a printed version in a booklet and publicity to make potential users aware of the wide range of resources available for persons with disabilities.

### *Proposed Implementation Strategies*

1. This recommendation could be accomplished through Executive Order, advising the Governor's Commission on Disabilities to coordinate with the Clearinghouse on Disability Information in gathering the required information. The data collection for this is already underway (see Chapter 5 of this report). Presently, the Clearinghouse is working with the various agency Disability Champions to gather information on their provided services. This recommendation would formalize and expand that project. Fiscal impact would be minimal; costs would include:
  - a. Designing the Web site (nonrecurring)
  - b. Using trained Commission personnel to update and maintain the Web site (assigned job duties)
  - c. The time involved in collecting and updating the information.

2. Support this online resource with a printed version in booklet form.
3. Generate publicity to make potential users aware of the wide range of resources available for persons with disabilities, directing them to the Web site and booklet.

## **Recommendation B – 4 (2008/Rev. 2009)**

**Create a public-awareness campaign which is representative of cross-disability groups presenting challenges and opportunities pertaining to employment and career advancement, and identify and promote best practices. Have the campaign include, but not be limited to, communications tools such as newsletters, fliers, and links between Web sites that highlight and promote opportunities for training and employment of persons with disabilities.**

### *Justification*

A major obstacle to the employment of Floridians with disabilities lies in employers' reluctance to hire based on limited knowledge or perception about persons with disabilities. Such a campaign would enhance the employment prospects of people with disabilities by educating both employers and potential employees.

### *Commentary*

The campaign will be targeted for launch in October 2009 during Florida's kickoff for Disability Mentoring Day, which also commemorates National Disability Employment Awareness Month.

For employers, the campaign would include (a) public-service announcements and print materials that highlight successful employment outcomes for persons with disabilities, in a wide range of jobs and occupations, in staff and management positions; (b) information about the variety of assistive technology and services that are available and their costs; (c) clarification about personnel matters and their costs, such as health care and attendance; and (d) information about the use of service animals.

The campaign would provide potential employees with (a) access to career counseling that provides a wide variety of employment options based on ability, aptitude, and skills; (b) education and training to optimize the individual's career aspirations; and (c) career-shadowing opportunities.

In addition, both employers and potential employees would benefit from the campaign's (a) job fairs and (b) information about public and private transportation services.

*Proposed Implementation Strategies*

1. The Commission on Disabilities and its Employment Committee will support and participate in the statewide roll-out of the "Look at My Abilities" campaign with the Able Trust and other organizations and businesses. This campaign is directed at companies and organizations that do business in Florida and is tentative scheduled for implementation in October, 2009 as a part of the state's activities celebrating National Disability Awareness Month. The Commission would request that the Governor or his designee from the Office of the Governor be a key spokesman for this statewide campaign, highlighting an often ignored but talented segment of Florida's workforce. During the campaign, the Commission will:
  - a. Partner with The Able Trust in developing support for the campaign, including serving on the planning committee, helping to identify participants for the campaign, and assisting in identifying funding sources.
  - b. Participate in the messages of the campaign through use of electronic media; agency, advocacy group, and business Web sites; and other communication channels of companies who do business with the State of Florida.
  - c. Promote the involvement of businesses (vendors) that provide products and services to the State of Florida, state agencies, organizations, and disability entities.
  - d. Assist the planning committee in identifying and obtaining data to support the message of the campaign—that employing people with disabilities is good business—and assist in the development of data for presentations and media representatives.
2. After this campaign is concluded, the Commission will support and participate in a post-campaign assessment of its effectiveness and use the results to make recommendations for future campaigns.



## **Recommendation B – 5 (2008/Rev. 2009)**

**Explore the State's participation in a "Medicaid Buy-In" program or other similar programs.**

### *Justification*

For many recipients of Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI), the risk of losing Medicaid coverage linked to their cash benefits is a powerful work disincentive. Working-age adults with disabilities need adequate health insurance to enter or remain in the work force, but their options for insurance coverage are limited. Many who have full-time jobs may not be covered through their employer-sponsored health insurance because of a pre-existing condition. Those who work part-time or have jobs that do not offer health coverage may have to turn to government-sponsored programs such as Medicaid. However, a person with a disability who earns more than the allowable amount will be ineligible for Medicaid coverage. The Medicaid Buy-In program allows adults with disabilities to earn more than would otherwise be possible and still have Medicaid coverage. In return, participants "buy into" the Medicaid program, typically by paying premiums based on income.

### *Commentary*

The fear of losing health care and related services is one of the barriers keeping individuals from maximizing their employment, career advancement, earnings potential, and independence. Too often, persons with significant disabilities can neither obtain nor afford private-sector health insurance that would provide coverage for the services and supports that would enable them to live independently and enter, remain in, or rejoin the workforce. Thus, they need to rely on Medicaid for coverage of such necessary services as personal care assistance, prescription drugs, and durable medical equipment. Eliminating barriers to health care and other needed supports and creating financial incentives to work can greatly improve short- and long-term financial independence and financial well-being.

To address these issues, Congress included a Medicaid Buy-In option in the Balanced Budget Act of 1997 and enacted the Ticket to Work and Work Incentives Improvement Act (TWWIIA) in 1999. By authorizing states to offer Medicaid Buy-In programs, these pieces of legislation opened a window of opportunity for states to develop work-incentive initiatives that encourage people with disabilities to work or increase their level of employment. To date, 41 states participate in Medicaid Buy-In. Medicaid Buy-in legislation was introduced in the 2008 Florida legislative session, and again in 2009, but did not pass either time. This issue is also being discussed and addressed by the Commission's Health Care Committee.

### *Proposed Implementation Strategy*

- Restrictions by both state and federal entities make it difficult for persons with disabilities to access health care. Although reductions in state and federal funding are severely limiting the initiation of new programs, the Employment Committee will continue to work with state partners to gather information and monitor the viability of this initiative. The cost (real and perceived) of health care benefits should not negatively impact employability of persons with disabilities. Fear of losing critical supports, including health care supports, continues to influence employment decisions for some persons with disabilities.

## **Recommendation B – 6 (2008/Rev. 2009)**

### **Develop guidelines for the role of designated Disability Champions.**

#### *Justification*

Barriers to employment continue to exist for people with disabilities because of a lack of information about workplace accommodation requirements. The goal is to remove some of the barriers to employment. A partnership between each state agency's human resource office and its Disability Champion would assist in eliminating some of these barriers through information sharing and education. Another important consideration is that having an advocate available for a person with a disability in his or her agency would foster the person's growth within the agency.

Currently, the financial constraints of state government limit the addition of new positions within agencies. It is recommended that consideration be given to defining more clearly the role of the Disability Champion and to assigning the responsibility within each agency and department, without the added expense of creating a new position.

#### *Commentary*

The concept of Disability Champions was created by Executive Order 07-148. Based on research by and discussions of the Commission's committees, the Commission makes the following recommendations regarding the agency Disability Champions.

*Completion of mandated training by the Disability Champions* – The Executive Order creating the Governor's Commission on Disabilities does not specify the duties of an agency Disability Champion. However, it does state that the person appointed must complete the Americans with Disabilities Act (ADA) online course

entitled "ADA Basic Building Blocks," a project of the Disability and Business Technical Assistance Centers. This training is available free of charge and includes a certificate of completion. Disability Champions with this training would have the proper background and history relating to the ADA's authority and requirements. The training also provides resources for further information and research topics. The course is available at this Web site: [www.adabasics.org](http://www.adabasics.org)

#### *Proposed Implementation Strategy*

- Finalize the clarification of Disability Champion roles in order to request authority to further encourage agency buy-in, fulfilling the executive order and incorporating the Disability Champion within existing personnel.

### **Recommendation B – 7 (2008/Rev. 2009)**

**Pursue funding to expand the Disability Program Navigator initiative to all regions of the state to advance employment of persons with disabilities.**

#### *Justification*

Having a designated person in each workforce region who can assist in the coordination of employment opportunities and employment-related services for persons with disabilities within the community will improve the employment outcomes of persons with disabilities.

#### *Commentary*

The Disability Program Navigator (DPN) initiative currently operates in 15 of the 24 workforce regions in the state. The DPN initiative has increased awareness among workforce professionals, employers, and community partners of the untapped potential of persons with disabilities. In addition, 19 of the 24 Regional Workforce Boards have been approved as Employment Networks under the Ticket to Work Program. General information on the program and a list of state and local contacts may be found at: [www.floridajobs.org/workforce/dis\\_Nav.html](http://www.floridajobs.org/workforce/dis_Nav.html).

#### *Proposed Implementation Strategy*

- The proposed strategy for this recommendation is agency-specific. It has been combined with the strategies for recommendations B-8 (2008/Rev. 2009) and B-9 (2008), and is contained in new Recommendation B-12.

## **Recommendation B – 8 (2008/Rev. 2009)**

**Apply the community resource model, that is, an interagency and community partnership, to assist persons with disabilities in attaining their optimal employment goals.**

### *Justification*

Many entities that serve persons with disabilities have employment as a common goal. Participation on an interagency resource team to focus on employment outcomes would enhance those outcomes for the individuals by leveraging resources and decreasing duplication of efforts.

### *Commentary*

Each team would include a variety of local-entity professionals, based on the identified needs of the individual, and could include a job coach, counselor, or other available resource staff. It is anticipated that, based on the individual's disability, this team would include staff from: the Regional Workforce Board or other service provider; the Department of Education's divisions of Vocational Rehabilitation and Blind Services; local secondary and postsecondary school entities; the Agency for Persons with Disabilities; the Department of Children and Families; and other agencies and entities, including faith- and community-based organizations, that support and enhance employment outcomes. This recommendation could be accomplished through several means, including executive order. Fiscal impact would be minimal in that it proposes to use current personnel.

### *Proposed Implementation Strategy*

- The proposed strategy for this recommendation is agency-specific. It has been combined with the strategies for recommendations B-7 (2008/Rev. 2009) and B-9 (2008), and is contained in new Recommendation B-12.

## **Recommendation B – 9 (2008)**

**Employ full-time job developers within appropriate state agencies to initiate contact with employers, with a goal of placing a specific customer.**

### *Justification*

This initiative would increase the employment of qualified persons with disabilities in the public and private sectors.

### *Commentary*

The job developers would focus on identifying and expanding employment opportunities for job seekers with disabilities within their agencies and the business community. Coordination across agency lines would maximize resources, reduce duplication, and build on local contacts with the employer community. This initiative supports the Governor's October 2006 employment strategies.

Due to the potential fiscal impact of this recommendation, development of a plan could begin with implementation being set several years in the future. Alternative funding sources could also be examined to determine their potential use.

### *Proposed Implementation Strategy*

- The proposed strategy for this recommendation is agency-specific. It has been combined with the strategies for recommendations B-7 (2008/Rev. 2009) and B-8 (2008/Rev. 2009), and is contained in new Recommendation B-12.

## **Recommendation B – 10 (2008)**

**Increase employer participation in existing Business Leadership Networks and expand the number of local chapters to provide increased job opportunities for persons with disabilities and promote their employment.**

### *Justification*

Many persons with disabilities who are seeking jobs may remain unemployed or underemployed because potential employers focus on the disability and not the ability of the person. There is a need to make employers more aware of the advantages of hiring persons with disabilities and the wide range of assistive services and technology that is available.

### *Commentary*

The existing Business Leadership Networks (BLNs) have been instrumental in improving employment outcomes for persons with disabilities by increasing employer awareness of the advantages and incentives for hiring persons with disabilities. Minimal funding and state-agency support to expand or initiate local BLN chapters has proved beneficial for both employers and employees with disabilities. Florida's local Business Leadership Network members are encouraging the employment of persons with disabilities. As a result of the BLNs' efforts in 2008 and 2009, BLN members hired people with disabilities (24

percent), created new job opportunities (21 percent), offered internships (21 percent), and provided mentoring opportunities (24 percent), resulting in a cumulative rate of 90 percent. This was a dramatic increase over the survey's three-year period beginning with 46 percent of the respondents taking these actions in 2006-07 to 90 percent in 2008-09, a 44 percent increase. For more information on BLN activities and data go to: [www.abletrust.org/fbln](http://www.abletrust.org/fbln).

### *Proposed Implementation Strategies*

1. The Governor's Commission on Disabilities will work with the Florida BLN and its local chapters to increase business membership in existing BLNs and establish new chapters throughout the state. These activities will include:
  - a. Assigning a member of the Governor's Commission to serve on the Florida BLN Steering Committee to assist in communication of state initiatives and tools available for businesses that hire individuals with disabilities.
  - b. Assisting in the identification and communication of federal tax incentives, grants, and other funds that assist businesses in the hiring of people with disabilities.
  - c. Supporting the BLN in its recognition of businesses that are role models in the development and implementation of fair and progressive employment practices for persons with disabilities.
  - d. Presenting one Points of Light or other significant statewide award each year to a Florida business that is doing exceptional work in employing people from this segment of the workforce.

## **Recommendation B – 11 (2008/Rev. 2009)**

**Require agencies that serve people with disabilities to use common definitions and measures.**

### *Commentary*

This is a very complex issue and has promoted much discussion over the past two years. A multitude of funding sources are available for persons with disabilities. These sources generally have specific eligibility requirements and also have restrictions on the use of the funds and types of activities and services that can be purchased. Definitions vary widely among state and federal agencies.

After additional discussion, both within committees and among members of the full Commission, this recommendation has been placed in abeyance. The Commission has addressed this issue for two years, and it is highly unlikely that state and federal entities can agree on common definitions and measures in the

foreseeable future. Definitions of disabilities vary in state and federal legislation and in agency policies—based on the specifics of a wide variety of programs and the types of services needed by individuals, and on the scope of the entity providing services to persons with disabilities. The Commission has determined that it will continue to focus on providing information, but that identifying a common definition and measure is outside the purview of this Commission.

## ***Section C – Independent Living***

The Independent Living Committee decided that its primary mission for this year was to develop new recommendations (see Section C of Chapter 3), while also accomplishing the implementation of two of last year's recommendations (see Section C of Chapter 5).

## ***Section D – Transportation***

### **Recommendation D – 1 (2008/Rev. 2009)**

**Request the development of a plan on implementation of a requirement that a percentage of taxis and other for-hire vehicles operating in Florida be accessible to persons with disabilities.**

#### *Justification*

The number of taxis and other for-hire vehicles, including rental vehicles, that are accessible for persons with disabilities is insufficient in Florida. There is also a lack of comprehensive advertisement of available, accessible transportation. Meanwhile, the few taxi companies that specialize in accessible vehicles and paratransit are overwhelmed with business. This recommendation would require mainstream companies to address the needs of this population.

The use of accessible taxis has been instituted in several cities around the nation, including Chicago, New York City, Houston, San Francisco, San Mateo, and Seattle.

#### *Commentary*

This plan should address important features, such as the accessible vehicles being radio dispatched for diminished response times, as well as creating provisions for noncompliance, which may include, but would not be limited to, fines and suspension of service.

The issue of accessible taxis is important not only to those who depend on public transit but also as a backup for individuals whose primary mode of transportation is down for service or otherwise unavailable. Presently, if a person with a disability that includes a substantial mobility component needs to rent a vehicle, none of the major car rental companies in Florida are able to provide service. In addition, not all shuttle services, such as those used by hotels and car dealerships, have accessible vehicles, potentially causing a person in a wheelchair to be unable to use complimentary services that are usually available.

This need is particularly urgent in rural areas, where people with disabilities depend on public transportation in order to get to their jobs and to medical appointments. To illustrate this point, figures for Gadsden County compiled by the Florida Commission for the Transportation Disadvantaged in its 2007 Annual Performance Report showed that contractors provided transportation assistance for a total of 83,008 trips in 2007. Of those trips, 40,638 or 48.9 percent were for employment purposes and 25,328 or 30.5 percent were for medical reasons. Clearly, this population depends on accessible public transportation to fulfill critical needs of daily living.

In the spring of 2009, the MV-1 accessible taxi was displayed throughout Florida and other parts of the U.S. by its manufacturer, the Vehicle Production Group LLC, headquartered in Miami. The company is planning to begin production in the second quarter of 2010. This vehicle offers a universal design that meets or exceeds 1994 accessible vehicle standards for those using wheelchairs and scooters. Engineered to withstand the demands of taxi or paratransit fleet operations, the vehicle also offers the option of using the alternative fuel technology of compressed natural gas. Such vehicles can provide additional transportation options for persons with transportation disadvantages in the taxi, hotel shuttle, rental car, and even private-use markets. The vehicle is expected to be priced in the same range as other automobiles that are typically used in taxi fleets. More information on the MV-1 can be found at: [www.vpgautos.com](http://www.vpgautos.com).

#### *Proposed Implementation Strategies*

1. The Commission requests that the Governor direct his appropriate agencies to collaborate on legislative goals of making accessible taxicabs and other for-hire vehicles readily available throughout the state. These agencies could include the Department of Transportation, Florida Commission for the Transportation Disadvantaged, and Visit Florida.
2. Provide incentives to the private sector to diversify fleets to include accessible vehicles. This could be accomplished by tax credits, green technologies, and carbon credits, for example.



## **Recommendation D – 2 (2008/Rev.2009)**

### **Support the needs of the Florida Commission for the Transportation Disadvantaged.**

#### *Justification*

More than 4 million trips have been denied to transportation-disadvantaged citizens since 2002. More recently, in 2008-2009, 90 Gadsden County residents lost their jobs solely due to a lack of reliable, accessible transportation. The last time the Transportation Disadvantaged Trust Fund resources were increased was 1993. Continued support is imperative to meet the growing needs of the increasing numbers of transportation-disadvantaged persons in the future and maintain a dynamic, coordinated transportation system.

#### *Commentary*

The CTD was established over 26 years ago to coordinate transportation for persons with disabilities, persons with low incomes, and senior citizens. In 2009, the CTD was awarded the prestigious State Agency of the Year award by Florida TaxWatch because of its return on investment to the taxpayers. Previously, the CTD was recognized as a model coordinated program by the Community Transportation Association of America (CTAA) in 2008, and was recognized as a model program by the U.S. Department of Transportation with the United We Ride award in 2004.

Transportation coordination encourages a single point of contact for all riders and provides economies of scale, helping to standardize costs of transportation throughout the state.

Funding for the CTD could be secured through various fines and fees, such as speeding, DUIs, and other motor vehicle violations, removal of certain auto registration fee exemptions, and a percentage of fines from crimes against the elderly and persons with disabilities.

Also, the funding of nonemergency transportation for all state agencies should be coordinated by the CTD as charged in chapter 427, Florida Statutes, to identify the money spent on such services and to pay approved transportation rates based on the recently implemented rate standardization model. This could also increase the number of trips offered by streamlining this process and allowing one entity to oversee nonemergency transportation needs.

The Transportation Disadvantaged (TD) program is one of the most used and significant programs in Florida. A recent study performed for the CTD by the Florida State University College of Business has calculated the return on

investment for state and local funding of the TD programs. In this first-time study, using extremely conservative estimates, it was determined that there is a payback of 835 percent, or \$8.35 per each dollar invested in these programs.

This is current information that shows the cost benefits and the impact on human lives. Funding to these programs allows Floridians the opportunity to stay healthier and contribute to the economy by finding and keeping employment and participating in their communities. This research shows that investments in transportation truly are investments in Florida's future.

### *Proposed Implementation Strategies*

1. Fully fund mobility of Floridians with disabilities as described in Chapter 427, Florida Statutes.
2. Enact legislation supporting the concepts expressed in HB 187 and SB 1048 from the 2009 legislative session. The \$1.50 fee increase would produce 2 million additional trips annually.
3. New funding should be focused on employment-related mobility. In Gadsden County alone, 90 people lost their jobs when funding for their transportation program was cut. Florida has 67 counties. Imagine the impact of Gadsden's job loss magnified throughout the state's 66 other counties, many of which are much more densely populated.

### **Recommendation D – 3 (2008)**

**Incorporate the designation of eligible ADA/transportation-disadvantaged individuals on the state ID cards or driver licenses, resulting in documentation of their eligibility that is recognized statewide. Develop a Community Transportation Coordinator pilot program to demonstrate the efficacy of regional agreements.**

#### *Justification*

People with disabilities are currently certified to be ADA-eligible on a county-by-county basis, creating undue and unnecessary difficulty for a population that is more mobile than it used to be. Individuals must have their eligibility determined separately in each county in which they seek transportation assistance. Documentation that is recognized statewide would be a low-cost solution to this problem. Also, the eligibility application form should be standardized and accepted statewide.

Additional barriers to inter-county and long-distance transportation are erected by the present arrangement of Community Transportation Coordinators (CTCs). Unless an agreement exists between neighboring CTCs, transportation assistance may stop at the county line. Regional agreements between CTCs would break down these barriers.

### *Commentary*

The designation on state-issued ID cards or driver licenses as ADA-eligible would be similar to that for organ donors. Counties in Florida could begin this process by having reciprocal agreements to accept ADA certification or eligibility from any county within the state, as long as the person is ADA-certified, without having the person go through another eligibility process. The person should not have to be separately determined as eligible in each county. Research has shown that statewide acceptance of one ADA certification has been successful in many states throughout the country.

The Commission for the Transportation Disadvantaged (CTD) distributes funds to 48 Community Transportation Coordinators (CTCs). Some of the CTCs are regional. Local CTCs select providers every five years through the Request For Proposal (RFP) process. Each county has different qualification forms for providers, and most will not cross county lines unless a regional CTC agreement is in place. A pilot program would be the first step in developing regional agreements that will dissolve these transportation barriers. An important component of the pilot program should be cost sharing among neighboring counties or CTCs. The CTD is gathering information for evaluation of such a program.

In developing this recommendation, the Governor's Commission on Disabilities contacted the Center for Urban Transportation Research (CUTR) at the University of South Florida. CUTR has been able to provide preliminary research as well as a potential timeline. Several stressed items are the development of a pilot program that will identify potential study participants and the need to implement this over a period of several years.

Fiscal impact would be shared by the state and the counties. Alternative funding sources, such as foundation or federal grants, could be used in the pilot program.

### *Proposed Implementation Strategies*

1. *The Florida Department Highway Safety and Motor Vehicles (HSMV) has advised that this designation can be accomplished by July 1, 2009, with the development of the Real ID. It anticipates the cost will be less than \$37,000. The Commission for the Transportation Disadvantaged (CTD) will be integrating the Real ID card into its 2009-2010 strategic action plan. Since July 1, 2008, the Governor's Commission on Disabilities has been*

*working with the Florida Public Transportation Association and HSMV to implement this recommendation.*

2. Standardize the eligibility criteria for community transportation coordinators.

## **Recommendation D – 5 (2008/Rev. 2009)**

**Develop and support initiatives to improve communication between consumers, transit systems, and public works agencies that will eliminate and prevent barriers to pedestrians with disabilities. Make infrastructure elements, such as sidewalks, crosswalks, and bus stops, accessible for people with disabilities to facilitate access to mass transportation services.**

### *Justification*

An accessible pedestrian environment is a key factor in the use of public transportation by persons with disabilities. In the Federal Highway Administration's *Manual of Uniform Traffic Control Devices*, a pedestrian is defined as "a person afoot, on skates, on a skateboard, or in a wheelchair." There is often a disconnect between the bus stop, which is the responsibility of the transit agency, and the accessibility of the public right-of-way, which is controlled by the public works department. Identifying and resolving environmental barriers can involve city, county, and state departments concerning the same intersection or walkway.

### *Commentary*

At this time, Title II of the Americans with Disabilities Act requires state and local governments to make pedestrian crossings accessible by providing curb ramps. Local governments have the legal obligation to maintain existing sidewalks to ensure there is a usable path of travel to the programs, services, and activities offered the public.

A path that is safe and allows independent travel involves more than just curb ramps, however. The United States Access Board has begun a rulemaking process to revise accessibility requirements for public rights-of-way. This includes pedestrian access to streets and sidewalks, including crosswalks, curb ramps, street furnishings, pedestrian signals (including accessible pedestrian signals for people with visual impairment), parking, and other parts of public rights-of-way. These rules will impact all stages of public right-of-way development, including planning, design, construction, and maintenance. ADA guidelines developed by the Access Board will not be enforceable until the U.S.

Department of Justice and the U.S. Department of Transportation issue regulations adopting them as the standards.

A travel path to public transit that is not accessible to a person with a disability gives him or her automatic eligibility for more costly paratransit transportation service. Not only does this limit personal independence, but also, according to the *2008 Annual Performance Report* of the Florida Commission for the Transportation Disadvantaged, each one-way trip will cost approximately \$22.

Federal law requires local governments to provide funding for ADA paratransit services. There are federal funding sources for public rights-of-way, such as the Surface Transportation Program for sidewalks, traffic calming, and accessibility projects. The Congestion Mitigation and Air Quality funding program will pay 100 percent for some signalization projects. Making these areas accessible to a fixed route can be more cost-effective in the long run for many communities.

Despite the efforts of municipalities and counties to make crosswalks and bus stops more accessible, these efforts are not well coordinated and fraught with problems, some of them dangerous. The Commission is aware of sidewalks and bus stops that, while lawful, are adjacent to deep drainage ditches with little or no protection, especially for those with visual impairments. Other problems, while not dangerous, render the infrastructure elements ineffective, such as bus stops and curbs that are not compatible with wheelchair lift devices on accessible vans. Some improvements can be made at little cost, such as adding rings to the posts of bus stops so that those with visual impairments can identify them with their canes.

Also of concern is the accessibility of mass transit announcements at airports, train stations, bus stations, and on buses. Arrival, departure, and schedule changes must be displayed visually for those with hearing loss. There is also the promise of induction loop technology, which provides direct audio communication to users of hearing aids that have telecoils. By the same token, verbal announcements must be made for those passengers who are visually impaired. Such forms of communication are critical to successful travel.

An effort should be made to identify transition plans across the state, determine their levels of completion, investigate inconsistencies and incompatibilities, and further, to identify locations in Florida where transition plans are not yet in place and begin their development. Further efforts should be made to ensure that transportation systems are accessible throughout Florida. The result will be that people with disabilities will be more independent in providing for their transportation needs and less dependent on paratransit providers.

Involvement of consumers, policy makers, planners, engineers, builders, and transit providers is critical to providing another choice for successful public mobility. It is easy to see that a pedestrian-friendly street is an accessible street.

The bottom line is—travel path accessibility for a person with disabilities does not require a special sidewalk or intersection but does require communication and understanding between all involved participants.

### *Proposed Implementation Strategies*

1. The U.S. government, through collaboration between the U.S. Department of Transportation, U.S. Access Board, and related entities, is developing accessibility guidelines and standards to update the public right-of-way, transportation vehicle, and related accessibility elements within this domain.
2. The Florida Department of Transportation was awarded a national grant in late 2008 to advance software to assist persons with disabilities with their community mobility. This software—the Travel Assistant Device (TAD)—uses global-positioning-system-enabled cell phones to provide public transportation riders with real-time audio, visual, and tactile prompts. The program was designed to help passengers with cognitive disabilities but has application also for those with vision and hearing loss. At this time, the TAD can be used to signal the rider when they should exit the transit vehicle by audio, visual, and vibration prompts. It can also be used to track a user's location by authorized personnel from any computer to provide an additional level of security when traveling independently in case the passenger becomes lost. The rider also can be signaled using Google Transit software by entering beginning and destination locations. The program has been successful in limited field tests by several young adults with cognitive disabilities. Project researchers will be partnering with public transit companies in Florida to further develop the program's capabilities.
3. Vehicle (bus and van) transportation guidelines and airport guidelines are currently being articulated at the federal level by the U.S. Department of Transportation Access Board that would make all public announcements at all airports and public ground transportation facilities fully accessible to persons with hearing loss. Targeted for initial accessibility modification are systems and facilities serving 100 or more passengers. Florida could work with this federal project and apply for stimulus funding to provide similar accommodations to smaller systems and facilities. As early as 2004, Hawaii's mass transit system was reported to have scrolling text displays of upcoming bus stops to assist passengers with hearing loss (source: Commissioner Christopherson, Governor's Commission on Disabilities). Florida could work with the U.S. Department of Transportation to issue and enforce regulations for the Air Carrier Access Act that ensure access to all airline services (ticketing, boarding, passenger, baggage handling, problem resolution) and ensure that individuals who are deaf, hard of hearing, or deaf-blind can exercise their right of self-determination for independent travel.

## **Recommendation D – 6 (2008)**

**Increase the penalties for accessible parking violations to include points added to the violator's driver license. Increase the enforcement and penalties for use of fraudulent, counterfeit, or illegally issued parking placards.**

### *Justification*

Florida law includes eligibility requirements to be met in order for a person with a mobility disability to acquire an accessible parking permit. However, current enforcement efforts and penalties for abuse and fraudulent use of these permits have not proven to be a strong deterrent. The Commission feels that increased penalties would provide a deterrent to this criminal activity.

### *Commentary*

The Commission proposes that restructuring the present penalty system, such as adding points to an offender's driver license, would be an appropriate deterrent. In addition, providing information regarding persons with disabilities and accessible parking should be included in all Driver Education programs and Florida Basic Driver Improvement Classes.

A local hotline number and list of penalties should be added to the signage in accessible parking locations to notify offenders and to report violators.

Under current law, counties and municipalities can establish local ordinances to use dollars collected from accessible parking violation fines and for collected dollars to be used specifically for the needs of persons with disabilities. This has been done in a few areas of the state but could be expanded for greater benefit of all persons with disabilities statewide.

In addition, accessible parking placards in Florida should be difficult to counterfeit. Technology is available to incorporate special inks for glowing, glitter, and/or holographic effects within the legally issued placards.

Although the issue of accessible parking violations rarely gets publicity, a story of alleged flagrant violations came to light in 2008 at Miami International Airport. According to investigators, more than 200 airport employees were illegally parking in designated accessible parking spaces. Recently, the first arrest in this case was announced. This incident has received wide coverage in South Florida, and was picked up by national media, suggesting that this is an issue whose time has come in Florida. The texts of two news reports about this case can be found in Appendix IV of this report.

### *Proposed Implementation Strategies*

1. In 2009, the Paralyzed Veterans of America, Central Florida (PVA-CF) expressed interest in seeking state legislation that encourages or requires municipalities and counties to follow the example of the City of Jacksonville and Hillsborough County in establishing a Disabled Parking Auxiliary Officer Program. This program trains and authorizes volunteers to write tickets to those who violate reserved accessible parking spots. In Jacksonville, the City's Division of Military Affairs, Veterans and Disabled Services receives a portion of the paid fines, which it uses to fund disability awareness and assistance programs. Section 316.008, Florida Statutes, allows this.
2. The PVA-CF would like to see legislation pave the way for cities and counties to form cooperation agreements that allow volunteer parking enforcers to issue citations in multiple jurisdictions. The funds generated would be used to benefit public-awareness and assistance programs throughout the covered area.

### **Recommendation D – 7 (2008/Rev. 2009)**

**Require that fueling stations have accessible notification systems affixed to all gas pumps to provide a means for persons with disabilities to notify attendants that assistance is needed.**

#### *Justification*

Section 526.141, Florida Statutes, requires full-service gasoline stations that offer self-service at a lesser cost to offer gasoline at the self-service price to any motor vehicle properly displaying a disabled parking permit or license plate, in accordance with state laws. The person to whom such permit has been issued must be the operator of the vehicle. Such stations must prominently display a decal no larger than eight square inches on the front of all self-service pumps clearly stating the requirements of the law and the penalties applicable to violations of the law.

Unfortunately, current law does not provide a method for the person with disabilities to request assistance other than using an intercom system, if available, or physically going inside the store. A problem with the present intercom systems is that they are out of reach for persons in wheelchairs. Also, under the current law, if only one attendant is working, the store does not have to provide assistance in dispensing fuel. A phone number that connects the driver to the attendant, printed on the gas pump or prominently displayed on the pump island, would enable persons with substantial mobility disabilities to better access



the services, if available. However, other stickers frequently affixed to gas pumps warn motorists to not use their cell phones near the pumps for safety reasons.

### *Commentary*

The proposal would need language that specifies the limits of assistance, such as the time of day that assistance is available, that service is available only if there are two or more attendants on duty for purposes of safety and security, that the attendant cannot ask the driver to verify their disability but may ask for proof that the operator of the vehicle is the person who has been issued the parking permit or special license plate (including out-of-state motorists) that qualifies them for fueling assistance, that no assistance will be provided if there is someone else in the vehicle that can provide the pumping service, that no additional services beyond refueling will be provided at self-service pumps, and that no additional fees can be charged for fuel assistance.

Specific legislation is in effect in several states and all have included additional language to address certain situations that may occur while complying with this requirement.

### *Proposed Implementation Strategies*

1. In 2009, the Paralyzed Veterans Association, Central Florida (PVA-CF) expressed interest in taking the lead on this issue. There is acknowledgment that this access issue involves the education and communication areas. The PVA-CF intends to reach out to the Gas Retailers Association to develop a partnership between merchants and customers.
2. Replicate the attendant notification system currently used by the Florida Turnpike.
3. Develop a program to educate and train gas station owners and employees regarding equivalent services as defined under the ADA.

## ***Section E – Civil Rights***

### **Recommendation E – 1 (2008/Rev. 2009)**

**Create the Floridians with Disabilities Act by enacting the substantive provisions of the Americans with Disabilities Act as state law in chapter 760, Florida Statutes, and provide enforcement authority to the Florida Attorney General and the Florida Commission on Human Relations.**

#### *Justification*

This recommendation would provide Floridians with greater protection against discrimination and access barriers compared to current Florida law.

#### *Commentary*

The Americans with Disabilities Act (ADA) already applies to all public and most private entities in Florida. Florida courts have additionally held that the ADA and the existing Florida Civil Rights Act (FCRA) in chapter 760, Florida Statutes, provide persons with disabilities essentially equivalent protection against employment discrimination. Nevertheless, Florida law affords persons with disabilities less protection against barriers to accessing government and commercial services than does the ADA. Adopting the ADA as state law in chapter 760, Florida Statutes, would provide Floridians with disabilities greater ability to enforce the protections that already exist in Titles II and III of the ADA.

#### *Proposed Implementation Strategy*

- The committee has prepared a conceptual proposal that can serve as a framework for proposed legislation. The committee draft is a simple rendering of one approach to integrating the ADA into Florida civil rights law in chapter 760, Florida Statutes. It is not intended to limit the scope of any potential disability rights legislation. It does not constitute a Commission endorsement of any particular solution for specific issues implicated by such legislation. The draft is included in Appendix VII of this report.

## **Recommendation E – 5 (2008/Rev. 2009)**

**Assess public access to all state government buildings to ensure physical access for persons with disabilities. Make modifications where appropriate.**

### *Justification*

This recommendation would signal Florida state government's commitment to complying with the ADA and advancing citizens with disabilities' right to full community inclusion.

### *Commentary*

Florida prides itself on providing open and transparent government. Florida's executive branch has made significant efforts to make its facilities more accessible to persons with disabilities since the enactment of the ADA in 1991. It is also true, however, that access to many state buildings remains difficult for persons with disabilities.

Florida's judicial branch, under the leadership of Supreme Court Chief Justice Fred Lewis, recently undertook the task of surveying all judicial branch facilities to identify access barriers and to develop plans for each facility to eliminate those barriers. This judicial project developed a comprehensive site survey instrument and extensive training materials. The executive branch should undertake a similar project to survey state buildings, identify barriers to accessibility, and develop a plan to remove those barriers.

### *Proposed Implementation Strategies*

1. The Governor should issue an Executive Order requiring the following:
  - a. The Commission on Disabilities to develop a standard building survey instrument;
  - b. Each agency to identify a sufficient number of staff to attend training on the survey instrument and to complete the survey for all of the agency's buildings;
  - c. Each agency to address identified accessibility deficiencies into the agency's maintenance and FCO plans, and to effectuate the necessary modifications;
  - d. Each agency to report progress on remediation to Commission by April 1 of 2010 and 2011 for inclusion in the Commission's annual reports; and
  - e. Each agency to designate a "champion" from among its senior management to ensure that the project moves forward.

2. Participants in the State Court System's similar project reported that the most critical factor in completing the project was the Supreme Court Chief Justice's commitment to it. The proposed Executive Order would establish, at least within the Governor's agencies, a clear executive branch commitment to the identification and removal of access barriers in state buildings. The Commission can parlay that commitment into substantial assistance to modify the court survey instrument and to establish a "train the trainer" program for the state agency staff who will survey their buildings. The Commission could then, on behalf of the Governor, work with the various agencies to move the project forward at a steady pace.

## CHAPTER 5

# 2008 Recommendation

# Accomplishments

Pursuant to paragraph 3(b) of Executive Order 07-148 and paragraphs 2(c) and (d) of Executive Order 08-193, the Commission is reporting in this chapter on its accomplishments in obtaining legislative and administrative change. In so doing, the Commission is reporting on the progress made since July 1, 2008, in implementing some of the recommendations in the Commission's first report to the Governor in 2008. This progress is detailed for these recommendations in the following sections. For purposes of clarity, the 2008 recommendations have "(2008)" in their titles. However, if the wording of a 2008 recommendation has been revised, its title will include "(2008/Rev. 2009)."

The Commission discussed the many bills introduced in the 2009 legislative session that impacted people with disabilities. The Commission felt that supporting concepts was a better approach to ensuring appropriate removal of barriers than to support specific bill language. This approach was well received by the Governor's Office. The bills from the 2009 session whose concepts were supported by the Commission are listed and described in Appendix VIII of this report.

### ***Section A – Education***

#### **Recommendation A – 2 (2008)**

**The Commission recommends that the Governor consider the issuance of an executive order that requires the Commissioner of Education to initiate the following: Have the Florida Department of Education, Division of Public Schools, and the Division of Community Colleges develop a strategic plan for implementation of a comprehensive, research-based statewide transition program at each community college that offers (1) inclusive educational opportunities for students with disabilities in a degree-seeking program; (2) inclusive educational, vocational, and community-based living training opportunities for students with disabilities who are not eligible for acceptance into degree programs; and (3) educational and clinical opportunities for college-level students interested in careers devoted to working with persons with disabilities.**

### *Accomplishments*

Following the submission of the 2008 Commission Report to Governor Crist, Recommendation A-2 was the first to be pursued. Under a multi-organizational partnership led by the Florida Department of Education and consisting of the Florida Developmental Disabilities Council (FDDC), Project SOURCE at the University of South Florida, and the Commission, a plan began to take shape. Dr. Kristine Web of the University of North Florida undertook FDDC-funded research into best practices and curriculum. This research examined the research findings on Florida's postsecondary programs for youth with disabilities regarding program design, funding, participation, student population, etc. It also followed up on the research on program impact, beliefs, and attitudes of degree-seeking mentor participation in the on-campus transition program for youth with disabilities who are not seeking degrees. This research identified evidence-based practices that facilitate inclusive educational opportunities for students with disabilities in degree-seeking programs.

One of the next steps in this ongoing endeavor is to develop a work group under the Transition Steering Committee's Postsecondary Education Subcommittee to consider the requirements of implementing Recommendation A-2 (2008). This work group shall consist of representatives from community colleges, school districts, Project 10, Project SOURCE, Governor's Commission on Disabilities, Bureau of Exceptional Education and Student Services, and Division of Community Colleges. This work group will develop a research-based strategic plan that can be used in contacting postsecondary institutions in attempts to partner with them in building such programs. Toward this goal, the Commission has contacted Pensacola Junior College, Indian River Community College, and Tallahassee Community College. All of these institutions have expressed a desire to be potential pilot sites for this program.

## **Recommendation A – 6 (2008)**

**Implement a standardized curriculum in community colleges statewide to educate students with disabilities on issues concerning their transition from school to work.**

### *Accomplishments*

This recommendation was combined with Recommendation A-2 (2008), listed above, concerning a postsecondary transition program. The concept of a single statewide curriculum is an important piece of this program.

## **Recommendation A – 9 (2008)**

**Increase the availability of training and educational opportunities for American Sign Language.**

### *Accomplishments*

Currently, American Sign Language (ASL) is approved by the Florida Department of Education as a foreign language in the public school system. As part of the Commission's public awareness campaign in October 2009, more schools will be encouraged to teach ASL as a foreign language. This recommendation takes on a new dimension due to the high number of veterans returning from combat in Iraq and Afghanistan with hearing loss. This hearing loss can be progressive in nature. Thus, increasing numbers of veterans, families, and service providers will need to rely on ASL in order to communicate.

## ***Section B – Employment***

### **Recommendation B – 3 (2008/Rev. 2009)**

**Design a Web site as a comprehensive clearinghouse to maintain and enhance the list of and links to national and state resources on disability information and services available through the Florida Clearinghouse on Disability Information, and require each state agency to link to it. Create and maintain this Web site under the auspices of the Governor's Commission on Disabilities.**

### *Accomplishments*

Barbara Cain, the director of the Clearinghouse on Disability Information, oversaw the challenge of implementing this recommendation. To build a Web site of this magnitude to assist individuals with disabilities first required the creation of a detailed document listing each of the services provided by every agency. This project came to be known as "mapping of services." Navigating each agency's Web site to pull out the details needed to create such a document proved to be very labor intensive. Every state agency in Florida has its own unique style and no two agencies present their services in the same manner. Services are complex and not always available throughout the entire state. Also, some programs have multiple agencies providing specific pieces of a service to the targeted groups of people with disabilities.

The task of creating a document or Web site to list every agency that serves people with disabilities has never been attempted in the state of Florida, and to

the Commission's knowledge no other state in the nation has attempted to have every service listed on one Web site.

Many of the Commissioners representing their respective agencies on the Governor's Commission on Disabilities played pivotal roles in assisting to gather every detail needed to provide this comprehensive list of services. Many of these services provided to Floridians are made possible by Medicaid waiver programs. However, services are in high demand and there is not enough Medicaid funding to provide services, so all waivers have substantial waiting lists. Most of the comments received by the Commission during its statewide meetings were asking for assistance until services were available under Medicaid waiver funding. The general consensus of the public was that most state agencies are not aware of services provided by other agencies and, in some cases, some are not aware of services provided by their own agencies.

The mapping of services is currently in its first stages of development. The Commission envisions completing this in multiple stages. Now that the initial information regarding the State's services is compiled, the Clearinghouse on Disability Information will look at national as well as local services available to assist individuals with disabilities.

Since the initial mapping document was created, the Commission received a grant from the Able Trust to build and maintain a state-of-the-art, stand-alone Web site. The site will be unique in that it will be totally accessible for all types of disabilities and will serve as a best practices model for not only the state of Florida but the nation.

## **Recommendation B – 4 (2008)**

**Create a public awareness campaign representative of all disability groups presenting challenges and opportunities pertaining to employment and career advancement, and identify and promote best practices. Have the campaign include, but not be limited to, communications tools such as newsletters, fliers, and links between Web sites that highlight and promote opportunities for training and employment of persons with disabilities.**

### *Accomplishments*

The partnership between the Commission and the Able Trust is fulfilling this recommendation. This venture is another link in the chain the Commission is forging to pull down barriers that hinder persons with disabilities, elders, and veterans from being as included in community life as they wish. This public awareness campaign is a statewide endeavor focusing on the positive aspects of employing persons with disabilities. The campaign will use various types of print



advertisement (mailers, brochures), outdoor advertising (billboards, banners), and radio and television advertisements. This campaign will focus on the high job-satisfaction ratings, longevity, and other positive aspects of hiring, retaining, and promoting persons with disabilities. The fact it makes good business sense will be promoted as well. Another segment of this campaign will promote success stories of persons with disabilities who have overcome obstacles to garner high achievement, as well as future high achievers.

## **Recommendation B – 10 (2008)**

**Increase employer participation in existing Business Leadership Networks and expand the number of local chapters to provide increased job opportunities for persons with disabilities and promote their employment.**

### *Accomplishments*

The Commission has partnered with the Business Leadership Network (BLN) and the Able Trust's Alliance for the Employment of Citizens with Disabilities to increase employer participation with the BLN to provide more employment opportunities for persons with disabilities. The disability community is supportive of organizations and businesses that hire individuals with disabilities. By advertising about the BLN to members of the Commission's extensive listserve, it highlights those businesses interested in providing employment for persons with disabilities. As the disability community sees which businesses are interested in employing people with disabilities, the community supports those businesses. By using the Commission's listserve to advertise businesses more, and with more of the disability community supporting those members belonging to the BLN, this increases the revenue and funding streams for those businesses. As other businesses become aware of the BLN's appeal, it in turn encourages others to join the BLN.

## ***Section C – Independent Living***

While reviewing last year's recommendations, the Independent Living Committee felt that the implementation of many of its 2008 recommendations was not possible, fiscally, at this time. The committee decided that its primary mission for this year was to develop new recommendations (see Section C of Chapter 3). The committee did feel it was possible to combine some of last year's recommendations with similar recommendations from other committees. Below are some examples of this. The Independent Living Committee will continue to seek methods of implementation for the Commission to recommend to Governor Crist.

## **Recommendation C – 3 (2008)**

**Request that the Florida Housing Finance Corporation (FHFC) and the Clearinghouse on Disability Information work together to develop a more comprehensive toolbox of information about federal, state and local programs and resources to assist persons with disabilities with extremely low incomes in finding affordable and accessible housing. Make the online version of this resource, along with FHFC's entire Web site, fully accessible across the disability spectrum.**

### *Accomplishments*

As part of the new Web site planned for the Commission and the Clearinghouse on Disability Information (CDI), a special section will be created on the Independent Living page of the site. This page will be dedicated to providing comprehensive information regarding housing resources and ownership programs in order to better assist persons with disabilities with extremely low incomes in finding affordable, accessible housing.

During phase three of this project, the CDI will partner with the Florida Housing Finance Corporation (FHFC) to ensure the toolbox of information on this page is comprehensive, informative, and accessible. This section of the Web site will include information on each county's housing resources and programs in the state of Florida. The CDI will continue to maintain and update this site as well as provide its information to those calling the CDI, who may not have access to the Web site.

## **Recommendation C – 12 (2008)**

**Establish a single statewide registry of persons who may need to be served in a special needs shelter in an emergency event. Make the registry accessible by all local emergency management agencies, county health departments, and agencies responsible for the operation of special needs shelters.**

### *Accomplishments*

This will be accomplished as part of the Take Me Home Program discussed in Chapter 6 – Partnerships and Collaboration.

## ***Section D – Transportation***

### **Recommendation D – 4 (2008/Rev. 2009)**

**Develop a plan in collaboration with key stakeholders for the design and implementation of a consumer-directed voucher program for the provision of transportation services for individuals with disabilities living in rural and urban environments.**

#### *Accomplishments*

In April 2009, the Florida Developmental Disabilities Council (FDDC) and the University of South Florida signed a contract to conduct a study. The Florida Commission for the Transportation Disadvantaged and the Florida Task Force on Autism Spectrum Disorders will also be partners with the FDDC on this project.

The Commission, working in conjunction with its partner, the FDDC, has begun work on this recommendation. After July 1, 2008, the FDDC released a Request for Proposals from various entities to research the need for a voucher program in Florida and to recommend a strategy to initiate a transportation voucher program if it is deemed to be a viable alternative.

## ***Section E – Civil Rights***

The Civil Rights Committee decided that its primary mission for this year was to develop new recommendations (see Section E of Chapter 3), while also working to implement several of last year's recommendations (see Section E of Chapter 4).



## CHAPTER 6

# Partnerships and Collaboration

Pursuant to Executive Orders 07-148 and 08-193 and directions from the Executive Office of the Governor, the Governor's Commission on Disabilities and the Clearinghouse on Disability Information support the Commission's mission of advancing public policy for Floridians with disabilities, seniors, and veterans with disabilities. The Commission actively develops new partnerships and collaborative efforts with many public and nonprofit organizations, while strengthening existing ones. This has included expanding its network of input sources and searching for nontraditional forms of revenue to assist in funding its recommendations. This chapter is an abstract that summarizes the many partnerships and collaborative efforts the Commission has formed, as well as the possibilities for future developments. This is by no means an exhaustive accounting of all the important contributions made by not only the citizens of Florida but by governmental and nongovernmental entities alike.

Addressing disability issues involves more than just working with regional governmental programs; it involves uniting with other partners in the community to allow the disability barricade to plummet. Employers are being educated and awareness is being raised about the issues that affect persons with disabilities, seniors, and veterans. Persons with disabilities, the elderly, and veterans should be afforded equality across the spectrum, with appropriate accommodations when necessary.

### ***Civil Rights***

A partnership with the Florida Commission on Human Relations (FCHR) has the potential for breaking down a number of barriers for persons with disabilities. FCHR staff members have played a pivotal role in developing this relationship. It is clear that close cooperation between FCHR and the Commission would assist in the accomplishment of both parties' missions.

This partnership has led to providing education, as well as oversight, regarding disability issues to businesses and housing authorities, both public and private. It provides the Clearinghouse on Disability Information with direct liaisons, specifically in the areas of employment and housing, to better assist persons with disabilities and their families. This relationship is helping to reduce the time it takes for a person to receive assistance after it is requested. The relationship between the Commission and FCHR also works to overcome differences in

compliance with federal and state law. In some of the Civil Rights Committee's recommendations, FCHR has been identified as the enforcement mechanism.

The Commission and Clearinghouse have been working with the Pensacola Police Department, the Autism Society of America, and the Governor's Task Force on Autism Spectrum Disorders to implement the *Take Me Home Program*. The program, created by the Pensacola Police Department, was initially used as a searchable database to assist in the identification and timely return of persons with disabilities and the elderly who wander away from their caregivers. Although designed with children with autism in mind, the program has quickly spread not only throughout the community of persons with disabilities of all ages but also to parents, who use it as an extra safeguard for their children.

The software is provided free of charge by the Pensacola Police Department and the Autism Society of America to all law enforcement agencies to use. It is quite simple to enter information about people with disabilities into the database, and the system is equally easy for the patrol officer to use. If an officer encounters an individual whom the officer feels could be a person with a disability, the officer can quickly search the database either by name or description. The officer can also easily enter the individual's name into the database. In addition, if a parent or caregiver of a person with a disability calls their local law enforcement agency to report the individual is missing, the officer has not only the individual's photo but also all relevant information at his or her fingertips. This timely use of important information has already saved lives.

In an effort to assist law enforcement agencies with the process of registering persons in the database, the Commission has partnered with Volunteer Florida to provide AmeriCorps workers and volunteer teams. During the early stages of this project, the Commission staff felt that partners are necessary to better implement this program. Commission staff approached and received favorable support from the Criminal Justice Standards and Training Commission of FDLE, Florida Sheriff's Association, Governor's Task Force on Autism Spectrum Disorders, Agency for Persons with Disabilities, Department of Elder Affairs, Department of Veterans' Affairs, and the Department of Children and Families.

Presently, the Commission is working to design and implement a Web site to provide information to parents and guardians about how and where they can register their child or adult with a disability. The Commission is also approaching other states in an effort to pool resources to develop a Web-based *Take Me Home Program* that can be accessed by law enforcement officers and also used as a tool during times of emergency or disaster.

## ***Education and Employment***

With the Education Committee's focus on transition, the Commission sought partnerships and collaborative efforts with educational organizations and employers. In executing Recommendation A-2 (2008) for young adults, especially those with developmental disabilities, to transition from secondary to postsecondary environments, the Commission began its efforts by reaching out to some of the state's college and university leaders. The Florida Department of Education initiated a task force to begin work on a statewide curriculum. The Commission met with Charles Meadows, Ph.D., president of Pensacola Junior College, and James E. Martin, the college's vice president for student affairs, in a collaborative effort to lay the groundwork for developing a curriculum to be used in this transition program throughout the state's community colleges. Edwin R. Massey, Ph.D., president of Indian River State College, has expressed interest in this program.

The Commission also partnered with the University of North Florida and Kristine Webb, Ph.D., associate professor and director of disabled student services at the university, regarding the expansion of the transition program for children with disabilities. This program has a high level of buy-in from the Florida Developmental Disabilities Council (FDDC), Department of Education (DOE), and the disability community. At the time of this report's publication, the partners are DOE's Division of Community Colleges and Bureau of Exceptional Education Services, FDDC, University of South Florida researchers, and several nonprofit organizations.

Recently, in the effort to increase the employment opportunities for all persons with disabilities, the Commission has been meeting with Commissioner Judy Meyer; Corey Hinds, employment team manager, Advocacy Center for Persons with Disabilities; Sylvia Smith, special project coordinator, Advocacy Center for Persons with Disabilities; Florida A&M University; and representatives of other public and nonprofit organizations. Each of these organizations, along with other community partners, has a record of successfully providing training and employment opportunities for persons with disabilities. The goal the Commission is to develop a consortium of agencies throughout the state that will assist persons with disabilities, senior citizens, and veterans with disabilities in securing vital long-term employment.

## ***Trauma-Informed Care***

In early 2009, the Commission was invited to become a member of the Interagency Trauma-Informed Care Workgroup. This work group was formed to bring this innovative type of mental health treatment to Florida. A simple definition is that Trauma-Informed Care explores the root cause of a person's

behaviors with an eye toward childhood traumatic events. In the past, mental health practitioners would often treat a person's behaviors without considering events that happened earlier in the person's life. Research shows dramatic reductions in long-term hospitalizations and the use of psychotropic drugs with the effective use of Trauma-Informed Care.

Early in the process, the decision was made to begin implementing Trauma-Informed Care statewide and systemwide. In doing this, Florida became the first state in the nation to declare such a dramatic goal. This has been met with excitement and renewed energy. The interagency work group has been receiving invaluable assistance from the National Center for Trauma-Informed Care, which is a bureau of the U.S. Department of Health and Human Services. The Commission and work group have presented this concept to department secretaries, bureau chiefs, and associations representing community behavioral health providers—all of whom have been very supportive. In July 2009, the work group will make a presentation to Florida's Children and Youth Cabinet. In addition, the Florida Department of Juvenile Justice has begun a pilot program. The Commission also made a presentation to the Florida Department of Corrections (DOC), which has joined these efforts. DOC has committed to developing a training video for institutional staff.

The Commission will continue working as a member of the Interagency Trauma-Informed Care Workgroup to make the dream of Trauma-Informed Care a reality throughout the state of Florida.

## ***Respiratory Pacing System***

Currently, there are approximately 120 Floridians on ventilators living in trauma centers because nursing homes and assisted living facilities will not take them. The ventilator prevents them from going home and getting the care they need to improve or recover. Recently, the Commission, the Department of Health's Brain and Spinal Cord Injury Program, Case Western Reserve University, the Agency for Health Care Administration's Medicaid Division, and the state's certified trauma centers collaborated to solve this problem.

Basic care in the trauma centers costs the state approximately \$30,000 per individual, per month. Through extensive research, Commission staff provided recommendations to significantly reduce patient rehabilitation services. All of the collaborating parties worked together to establish a Medicaid billing code for a respiratory pacing system that can replace a ventilator. The respiratory pacing system would allow a large percentage of those presently living in trauma centers due to ventilators to return home or transfer to nursing homes or rehabilitation facilities. There is a one-time cost of approximately \$50,000 for the device and its implantation. If 50 of these Floridians were moved out of the trauma centers, it



would save the State of Florida \$1.5 million per month or \$18 million per year and positively impact their quality of life.

## ***Statistical Information***

A vital asset to the Commission in its development of recommendations is the research data that has been provided. Instrumental to this data collection effort were Elena Anderson of the Florida Disability and Health Project, University of Florida; and Erin DeFries, project coordinator of the Florida Office of Disability Health (FODH), Department of Epidemiology and Biostatistics, University of Florida. Both provided the Commission with current statistics concerning persons with disabilities and the elderly. They worked with staff to ensure the Commission was provided with a wide range of information, including disability health and census data. Armed with this data, the various committees were able to form well-grounded recommendations. This data also provided a current assessment of life in Florida for persons with disabilities and senior citizens, giving the Commission a benchmark to assess improvements that are made due to its recommendations.

During the process of developing the recommendations, the Transportation Committee was interested in how Florida's population of persons with disabilities, seniors, and veterans were distributed throughout the state. Grant I. Thrall, Ph.D., of the Geography Department at the University of Florida, was instrumental in assisting with this endeavor. Dr. Thrall is using his knowledge of Geographical Information Systems (GIS) and data concerning persons with disabilities, the elderly, and veterans to provide the Commission with maps showing the distribution of these populations throughout the state. This information will be a valuable resource in planning potential pilot programs.

## ***Interactive Exchange with Law Enforcement***

Last year, the Commission began to develop working relationships with local, county, and state law enforcement officials. The Commission is proud to report that this effort has not only continued, but grown. During the past year, the Commission worked with agencies throughout the state on the *Take Me Home Program* (see the Civil Rights section above) as well as on a project to develop a training mechanism for all first responders on best practices when interacting with persons with various disabilities. The latter effort will involve the development of modules for the various disabilities to include developmental disabilities, hearing impairments, neurological disorders, and many others. With agency partnerships, training can be provided to staff and area emergency mental health providers to use the Memphis Model of delivery, which is presently used throughout the state of Florida by crisis intervention teams. Each module

will be developed to educate first responders over a period of years as part of their in-service training cycle.

## ***Disability Champions***

Pursuant to Section 6 of Executive Order 07-148, and Executive Order 08-193, in which Governor Crist called for the appointment of Disability Champions in all departments and agencies under his control, there are now representatives in all of the departments under the control of the Governor. In addition, the Florida Department of Agriculture and Consumer Services has appointed a Disability Champion. The purpose of the Disability Champion is to serve as a conduit for communication between the agency, the Commission, and the disability community. The proposed role is to assist in ADA compliance issues, develop and maintain a workplace culture that improves awareness and sensitivity to the needs of employees with disabilities, and take the lead as a liaison for students with disabilities transitioning into employment.

## ***Clearinghouse on Disability Information***

Since the inception of the Clearinghouse on Disability Information (CDI), its staff has assisted anyone who contacts them by phone or e-mail with a disability-related question to find the most accurate and appropriate information and referrals possible.

Now under the umbrella of the Commission, the CDI continues to play a leading role in the dissemination of relevant information and referrals to various service organizations assisting persons with disabilities, the elderly, and veterans with disabilities. A trained disability specialist handles each call, e-mail and letter to the CDI. Every telephone call into the CDI is answered live and, although calls are timed for data purposes, the CDI staff spends whatever time is necessary to ensure the caller receives the most up-to-date and accurate referrals possible. The database used by the CDI staff is continually updated and refreshed. New resources are added whenever the CDI staff becomes aware of them.

The Clearinghouse on Disability Information has the unique distinction of being the only state-run, disability-related call center of its kind in the nation. The CDI was first created in 2001, because there was no central location for persons for all disabilities to find accurate information and assistance in navigating Florida's complex maze of state agencies and services. In 2007, the CDI moved from the former ADA Working Group to the Governor's Commission on Disabilities because the Governor recognized the invaluable service the CDI offers the citizens of Florida.

Because the Clearinghouse has been recognized for its outstanding customer service, it has been approached by several key state agencies to become the primary referral source for these agencies and their programs. A partnership has already been formed with the Division of Vocational Rehabilitation to inform callers on the waiting list for their Order of Selection about employment alternatives and other needed assistance.

The Clearinghouse's director, Barbara Cain, was instrumental in implementing Recommendation B-3 (2008/Rev. 2009) to map all state agency services in order to create a one-of-a-kind, state-of-the-art disability Web site to ensure all those who have a vested interest in disability-related issues have the necessary information to acquire services and supports to remain independent.

For the past five years, another key role of the Clearinghouse has been to inform the disability community of issues potentially affecting them by tracking all bills in the Florida Legislature that could potentially affect citizens with disabilities. Because of the lack of accessible tracking programs, the Clearinghouse tracks each piece of legislation from the date filed until the bill either passes or fails and, of those that pass, whether the Governor approves or vetoes them. For these efforts, the Clearinghouse was recognized as a recipient of a Davis Productivity Award in 2006.

As with the Commission, the CDI partners with agencies and entities throughout the state and nation to ensure that Florida's disability community, veterans, and the elderly receive accurate and thorough information, referral, and when necessary, advocacy. In addition to supplying referrals for services, the Clearinghouse is called upon to advise both state and county organizations on relevant ADA guidelines and other disability related laws.

## ***The Future***

In looking toward the future, the Commission believes it is imperative to follow its mission to advise the Governor and Legislature, as well as serve Floridians with disabilities, senior citizens, veterans with disabilities, and their families. Over the past year, through public comment and expert testimony, many concerns of the disability community have come to the Commission's attention. The Commission, with its inaugural report in place, has begun to break down the barriers faced by persons with disabilities throughout the state. Initial steps of implementation have begun in the areas of employment, education, independent living, civil rights, health care, and transportation. The Commission has looked at ways to improve lives by providing services that have minimal fiscal impact or none at all. It has recommended programs that will take several years to implement. But, it also sees the long road ahead to truly remove the barriers and level the playing field for all Floridians with disabilities.

The Commission continues to work for progress in employment, education, transportation, civil rights, independent living, and transportation as it aspires to improve the quality of life for persons with disabilities, seniors, and veterans with disabilities.

In addition, the Commission is in the exploratory stage of seeking ways to improve health care and the delivery of health care services to the state's most vulnerable populations. In working with the Florida Office on Disability and Health, the Commission has executed steps in that direction. The Commission is involved in developing a strategic plan that addresses this issue and has taken public testimony that reiterates the need to put forth recommendations for proactive public policy. The Commission plans to continue being an all-encompassing voice for Floridians throughout the disability spectrum.

Finally, the Commission sees the need to continue its work on civil rights legislation and changes in administrative rules, including its proposed Florida Disabilities Act. This Act would take the best of the federal ADA and improve it, creating a document that provides protections to all Floridians with disabilities and also sets guidelines to enhance their lives. It would provide opportunities for persons with disabilities to better compete in the business world and allow them to access consumer goods and services with the same ease as other Floridians.

# APPENDIX I

## Acknowledgements

The Commission expresses its sincere appreciation to all of the persons and entities that assisted with research on specific issues or provided valuable comments and input. Their contributions of knowledge, experience, and time enabled the Commission to consider more issues in a shorter period than the Commission could possibly have accomplished on its own, and with a higher degree of expertise.

In addition to the people and organizations listed below, the Commission wishes to thank the numerous citizen advocates and individuals who provided public comment and anyone else who may have been unintentionally omitted. The Commission hopes that that all of the generous organizations and individuals that provided input can be counted upon for further assistance.

*Amy Albee*, Coordinator, Outreach and Access, Division of Community Colleges, Florida Department of Education

*Bill Aldinger*, Supportive Housing Coordinator, Florida Housing Finance Corporation

*Dean Aufderheide, Ph.D.*, Director of Mental Health Services, Office of Health Services, Florida Department of Corrections

*Elena Anderson*, Florida Disability and Health Project, University of Florida

*Judith Barrett*, Executive Director, Ability 1<sup>st</sup>

*Larry Baxter*, Florida Department of Veteran's Affairs

*Alan Busenbark*, Florida Department of Highway Safety and Motor Vehicles

*Nicole Copuguy*, Florida Department of Elder Affairs

*Rachel Cornwell*, Florida Center for Independent Living

*Jerry Curington*, Deputy General Counsel, Executive Office of the Governor

*Derick Daniel*, Executive Director, Florida Commission on Human Relations

*Mary Beth Date*, Governmental Analyst, Executive Office of the Governor, Office of Policy and Budget for HHS

*Kathy Dejoie*, Program Director, Clearinghouse Information Center, Florida Department of Education

*Peter de Haan*, Inspector Specialist, Office of the Executive Director, Florida Agency for Workforce Innovation

*Erin DeFries-Boudlin*, Project Coordinator, Florida Office of Disability Health, Department of Epidemiology and Biostatistics, University of Florida

*Debra Dowds*, Executive Director, Florida Developmental Disabilities Council

*Marc Dubin*, Director of Advocacy, Center for Independent Living of South Florida

*Deborah Ducett*, Jacksonville HATS, University of Florida

*Melanie Mowry Eppers*, Communications Director, Florida Agency for Persons with Disabilities

*Dana Farmer*, Attorney, Florida Advocacy Center for Persons with Disabilities

*Dwight Floyd*, Training Manager, Office of Research and Training, Florida Department of Law Enforcement

*Patricia Gleason*, Director of Cabinet Affairs and Special Counsel for Open Government, Executive Office of the Governor

*Chuck Graham*, National Federation of the Blind

*Nicole Hargraves*, Volunteer and Community Services Program Manager, Florida Department of Elder Affairs

*Aaron Harmon*, Brain and Spinal Cord Injury Program, Florida Department of Health

*Herb Hesel*, Council on Elder Affairs, Jacksonville-Duval County

*Corey Hinds*, Employment Team Manager, Advocacy Center for Persons with Disabilities, Hollywood, FL

*Carolee Howe*, Advocacy Center for Persons with Disabilities

*Debbie Howells*, Florida State Court System

*Steve Howells*, Executive Director, Florida Alliance for Assistive Services and Technology

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*Deborah Linton*, The ARC of Florida

*Katherine Lopez*, United Cerebral Palsy of East Central Florida

*Fretta Maes*, Disability Navigator Program, Florida Agency for Workforce Innovation

*Shachi Mankodi*, Deputy Policy Chief, Executive Office of the Governor, Office of Policy and Budget for HHS

*Bonnie Marmor*, Vice Chancellor, Division of Workforce Education, Florida Department of Education

*Maria Matthews*, Assistant General Counsel, Florida Department of State

*Jill May*, Advocacy Center for Persons with Disabilities

*Patric McCallissess*, Paralyzed Veterans of America

*Susan McDewitt*, Florida Department of Health

*Jenny McNeely, MSW*, Program Manager, Statewide Community-Based Services Division, Florida Department of Elder Affairs

*Raj Mehter*, Family Care Council

*Pat Melton*, Bureau Chief, Office of Research and Training, Florida Department of Law Enforcement

*Terri Messler*, Florida Department of Environmental Protection

*Mary Ellen Mest*, Project Manager for New Initiatives, Statler Center

*Judy Meyer*, Senior Management Analyst, Office of Statewide Coordination and Contracts, Florida Agency for Workforce Innovation

*Adam Miller*, M.Ed., Child Development and Education Program Manager, Florida Developmental Disabilities Council

*Robert Miller*, Florida Council of the Blind

*Terry Moakley*, United Spinal Association

*Amanda Moore*, Florida Agency for Workforce Innovation

*John Moore*, Florida Coordinating Council for the Deaf and Hard of Hearing

*Bernadette Moran*, The ARC of Jacksonville

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*Lee Nasehi*, Executive Director, Lighthouse Central Florida

*Shannon Nazworth*, Executive Director, Ability Housing of Northeast Florida

*Erica New*, National MS Society

*Dan O'Brien*, Statler Center

*Dan O'Conner*, Florida Division of Blind Services

*Bill Palmer*, Director, Division of Vocational Rehabilitation, Florida Department of Education

*Ellen Piekalkiewicz*, Executive Director, Florida Council for Community Mental Health & Substance Abuse

*Barry Pollack*, United Cerebral Palsy of East Central Florida



*Rebecca Ray*, Partners in Communication

*Clint Rayner*, Bureau Chief, Florida Department of Children and Families

*Chad Reese*, Jacksonville Transportation Authority

*Samme Ripley*, ADA Coordinator, Orange County Disability Advisory Board

*Sherman Rothwell*, Jacksonville Transportation Authority

*Ion Sancho*, Supervisor of Elections, Leon County

*Jeff Saulich*, Communications Deputy, Florida Agency for Persons with Disabilities

*Dwight Sayer*, President, National Association of Blind Veterans

*Martina Schmidt*, Executive Director, Florida Association of Centers for Independent Living

*Ola Sebund*, Florida Department of Elder Affairs

*Ashley Skellenger*, Florida Independent Living Council

*Gerry Smith*, Clearinghouse Information Center, Bureau of Exceptional Education and Student Services, Florida Department of Education

*Sylvia Smith*, Attorney, Advocacy Center for Persons with Disabilities

*Valerie Stafford-Mallis*, Florida Coordinating Council for the Deaf and Hard of Hearing

*Frank Tara*, Brain Injury Association

*Carolyn Timmann*, Executive Deputy Chief of Staff, Executive Office of the Governor

*Cheri Undheim*, Division of Blind Services, Florida Department of Education

*Ruth Waters*, Jacksonville Transportation Authority

*Vicky Watkins*, First Coast Disability Advocacy Center

*Warren Watkins*, First Coast Disability Advocacy Center

*Wes Watson*, Executive Director, Florida Public Transit Association

*Kristine Wiest Webb, Ph.D.*, Director, Disability Resource Center, University of North Florida

*Ronald White*, Florida Telecommunications Relay, Inc.

*Jim Whittaker*, The ARC of Jacksonville

*Melinda Willaford*, Jacksonville HATS

*Stephanie Willaford*, Jacksonville HATS

*Latarsha L. Williams, M.P.A.*, Community Living and Service Coordination Program Manager, Florida Developmental Disabilities Council, Inc.

*Stephanie Wilson*, Division of Blind Services, Florida Department of Education

*David Wood*, Jacksonville Health and Transition Services, University of Florida

*And the many citizen advocates who provided valuable public comments*

## APPENDIX II

# Commission Members and Staff

### *Commission Members*

The Governor's Commission on Disabilities consists of the individuals listed below, appointed by Governor Charlie Crist. Each listing includes a reference to the agency, organization, or constituent group that each commissioner represents, as specified in Section 1 of Executive Orders 07-244 and 08-193.

**Lance Block**, Commission Chair

*Represents individuals with developmental disabilities*

Mr. Block is a civil trial lawyer in Tallahassee and has been a member of the Florida Bar for 26 years. He has represented hundreds of children and persons with developmental disabilities who were abused or neglected, clients who have brain and spinal cord injuries, and survivors of trauma-induced mental pain, suffering and grief due to the wrongful death of loved ones.

Mr. Block has served as president of the Arc of Palm Beach County and was the founding board chairman of the Potentials School, a charter school for children with severe developmental disabilities in Riviera Beach, Florida. He has served as a trustee for the Advocacy Center for Persons with Disabilities Foundation and a board member of the Florida Association of Rehabilitative Facilities. In 2003, the Florida Justice Association honored Mr. Block for his 10-year fight for justice in the courts and the Florida Legislature on behalf of a profoundly developmentally disabled woman who was abused in a group home. In 2008, he received the Governor's Point of Light Award for his work with people who have disabilities.

Mr. Block obtained his juris doctorate and bachelor of arts degrees from Florida State University.

**Darcy Abbott, MSW, LCSW**

*Represents the Agency for Health Care Administration*

Chair, Behavioral Health Care Subcommittee • Health Care Committee

Ms. Abbott is an administrator for the Medicaid Services Long-Term Care and Behavioral Health Policy Section at the Florida Agency for Health Care Administration. She has worked in state government for more than 25 years, directing and administering policy for health care, behavioral health, developmental disabilities, and child welfare. She has extensive public health

experience, including service as a past national president for the Association of State and Territorial Public Health Social Work.

Ms. Abbott earned her bachelor's degree in social work from Rochester Institute of Technology and her master's in social work from Marywood University. She is a Florida-licensed clinical social worker with experience in advocacy and direct clinical practice. In addition, she is a parent of a child with disabilities.

**Marc Buoniconti**

*Represents individuals with spinal cord or brain injuries*

Chair, Employment Committee • Health Care Committee • Long-Term Health Care Subcommittee

Mr. Buoniconti serves as ambassador for the Miami Project to Cure Paralysis and president of the project's Buoniconti Fund to Cure Paralysis. While playing football for The Citadel at age 19, he sustained a spinal cord injury that left him paralyzed from the shoulders down.

His awards for activism on behalf of spinal cord research include Volunteer of the Year from the American Lung Association of Florida. He is a member of Iron Arrow, the University of Miami's highest honor, and a recipient of the university's Henry K. Stanford Award. He has served as director of the Gloria Estefan Foundation, Points of Light Foundation, and a National Institutes of Health advisory board. He is the son of former Miami Dolphin Nick Buoniconti.

**Carol A. Christopherson**

*Represents individuals with hearing impairments*

Civil Rights and Transportation committees • Health Care Education Subcommittee

Ms. Christopherson served on the Florida Coordinating Council for the Deaf and Hard of Hearing from 2004 through 2008 and is a current member of the Hearing Loss Association of Florida, National Association of the Deaf, and Florida Association of the Deaf. She is also the president and founder of Florida Service Dogs, Inc., which provides education and advocacy regarding service animal issues as well as trains service dogs for qualified clients.

Ms. Christopherson is certified as a Dog Obedience and Service Dog Instructor Trainer. She also is certified in the Humane Society's Disaster Animal Response Team (DART) program, K-9 Disaster Relief training, and a behavior consultant course. She is late-deafened and uses a dual-trained service animal. Ms. Christopherson speaks, read lips, and uses oral interpreters who use signed English.

**Charles T. Corley**

*Represents the Department of Elder Affairs*

Chair, Long-Term Health Care Subcommittee • Health Care and Transportation committees

Mr. Corley serves as the deputy secretary of the Florida Department of Elder Affairs. Prior to this position he briefly served as the department's interim secretary in early 2007 and as the department's director of statewide community-based services from 2000 to 2006.

Mr. Corley has worked in the health and human services field for more than 27 years as a direct service provider and administrator. He served as a hospital administrator and consultant in the area of hospital and nursing home certificates of need. Since joining the department, he has been extensively involved in the expansion of home- and community-based programs as an alternative to nursing home placement.

Deputy Secretary Corley received his bachelor of science degree from Florida State University and attended the graduate health care management program at the University of South Florida.

**James DeBeaugrine**

*Represents the Agency for Persons with Disabilities*

Chair, Access to Health Care Subcommittee • Employment Committee

Mr. DeBeaugrine was appointed director of the Agency for Persons with Disabilities (APD) in August 2008 by Governor Charlie Crist after serving as interim director since May 2008. He previously served as APD's deputy director for budget and planning. Prior to joining the agency, Mr. DeBeaugrine served the Legislature in the House Appropriations Committee for 19 years. After a one-year internship, he worked eight years as an analyst for the House Health and Human Services Appropriations Committee. His career then led him to the Criminal Justice Appropriations Committee, where he served as the staff director for 10 years. During his legislative career, he developed a keen interest in issues related to people with disabilities. He was the budget analyst for the Developmental Services program when the current Home and Community Based Services Waiver was initially approved by the Legislature. DeBeaugrine also was the budget analyst for the Agency for Health Care Administration, which administers the state Medicaid program.

Mr. DeBeaugrine graduated from Florida State University with a degree in public administration and economics and received a master's degree in public administration.

**Thom DeLilla**

*Represents the Florida Department of Health*

Employment and Health Care committees • Access to Health Care Subcommittee

Mr. DeLilla is the bureau chief of the Brain and Spinal Cord Injury Program (BSCIP) of the Department of Health—a statewide program that reintegrates individuals with traumatic brain or spinal cord injuries back into the community.

After sustaining a spinal cord injury in 1972, he earned a bachelor's degree in psychology/sociology from the University of South Florida and completed postgraduate studies in rehabilitation counseling at Florida State University. He served as president of the Board of Directors of the National Spinal Cord Injury Association, chairman of the board for the North Florida Center for Independent Living, and as a commissioner on the Florida Commission for the Transportation Disadvantaged. He also developed and managed his own rehabilitation consulting company.

**Henry Dittman Jr.**

*Represents elderly citizens of Florida*

Employment Committee • Behavioral Health Care Subcommittee

Mr. Dittman holds advanced degrees from Pepperdine University and Troy University. He recently retired from a career as a forensic mental health counselor at the Florida Department of Corrections, during which he devised and implemented intensive counseling programs for maximum-security-level felons incarcerated in Florida's penal system. He was also highly instrumental in assisting released individuals in after-care programs aimed at continuing their mental health care, as well as in their obtaining employment.

Prior to joining the Florida Department of Corrections, Mr. Dittman worked in community mental health settings in the Northwest Florida and was instrumental in creating a variety of employment opportunities for elderly day care participants.

**Christine Eckstein**

*Represents individuals with developmental disabilities*

Education Committee • Health Care Education Subcommittee

Ms. Eckstein is a former legal aid attorney who has dedicated her life to her four children. Both of her sons are diagnosed with autism and kidney disease. Through years of specialized therapy and hard work in the home, her sons are now mainstreamed in public school and are honor roll students. Ms. Eckstein is also an advocate for organ donation, having experienced kidney failure at age

18. After 2 1/2 years on dialysis, she received a kidney transplant from an anonymous donor in 1991. Now, 18 years later, she is still going strong.

Ms. Eckstein donates her time as a Seminole County School Dividend volunteer and a religious education teacher for Annunciation Catholic Church. In addition, she is an active member of David Turnbull's Tae Kwon Do School and is co-founder with her husband, Peter Schoemann, of the Chamber of Commerce for Persons with Disabilities and the Central Florida Disability Chamber.

**J.R. Harding, Ed.D.**

*Represents the Commission for the Transportation Disadvantaged*  
Transportation Committee • Long-Term Health Care Subcommittee

Dr. Harding is currently the external affairs coordinator for the Agency for Persons with Disabilities (APD). He frequently serves as a disability expert to guide private business and other stakeholders around the nuances of the Americans with Disabilities Act and independent living. In this capacity, he has served former President George W. Bush, Governor Crist, former Governor Bush, and his fellow citizens with disabilities.

Dr. Harding lends his expertise and experience to the U.S. Access Board, the Election Assistance Commission, Commission for the Transportation Disadvantaged, Governor's Commission on Disabilities, and the Florida Building Commission Waiver Council. He also served the former Governor's ADA Working Group.

In addition, Dr. Harding frequently presents at national, state, and local conferences on abilities, needs, and obstacles facing persons with disabilities. He co-founded the Florida Disability Mentoring Day initiative. In his spare time, he volunteers for the Big Bend Business Leadership Network, Leadership Tallahassee, and Leadership Florida. He is always available to assist fellow citizens.

**Susanne Homant, D.P.A.**

*Represents the independent living community*  
Chair, Health Care Committee • Employment Committee • Behavioral Health Care Subcommittee

Dr. Homant is president and CEO of The Able Trust, a statewide foundation dedicated to creating employment opportunities for people with disabilities. The trust, created in 1990 by the state Legislature, has provided grants totaling more than \$24 million since its inception—grants that have served people of all ages and all disabilities in all of Florida's 67 counties.

Dr. Homant joined The Able Trust in 2007 and is responsible for the operations of the organization. Her previous experience includes executive management work with the National Alliance on Mental Illness of Florida, the Florida Hospices and Palliative Care Organization, and the Michigan Hospice and Palliative Care Organization. She has over 20 years of experience with statewide organizations dealing with health care, public policy, advocacy, fundraising, and public awareness and education.

She earned her MBA degree from Northern Michigan University, and her doctorate in public administration at Western Michigan University.

**Former State Rep. Ken Littlefield**

*Represents the Florida Statewide Advocacy Council*

Education Committee • Long-Term Health Care Subcommittee

Rep. Littlefield was appointed by Governor Charlie Crist to serve as executive director of the Florida Statewide Advocacy Council (FSAC) in March 2007. During his eight-session tenure in the Florida House of Representatives, he served on the Elder Affairs, Long-Term Care, and Health and Human Services Appropriations committees, as well as the Council for Healthy Communities.

Rep. Littlefield also chaired the Health Care Services Committee and the Pasco and Hillsborough legislative delegations and garnered many awards for community involvement. He has been a member and has served on executive boards of five chambers of commerce, the Pasco County Readiness Coalition, and the United Way of Pasco. He also owned and operated a successful business.

**Bambi J. Lockman**

*Represents the Florida Department of Education*

Chair, Education Committee • Chair, Health Care Education Subcommittee

Ms. Lockman has been chief of the Bureau of Exceptional Education and Student Services in the Department of Education since October 2004. She is responsible for Florida's implementation of the Individuals with Disabilities Education Act of 2004 (IDEA) and leads several statewide initiatives.

Ms. Lockman serves on the Interagency Service Committee for Youth and Young Adults with Disabilities, the Florida Developmental Disabilities Council, and the Florida Interagency Coordinating Council for Infants and Toddlers (FICCIT). She was recently reappointed by Governor Crist to serve on the Governor's Task Force on Autism Spectrum Disorders. She is actively involved in regional and national activities through the Southeast Regional Resource Center, 7-Pak, the



National Association of State Directors of Special Education (NASDSE), and CASE.

**Judy Meyer**

*Represents the Agency for Workforce Innovation*

Chair, Employment Committee • Access to Health Care Subcommittee

Ms. Meyer is currently a senior management analyst supervisor in the One-Stop and Program Support Unit of the Agency for Workforce Innovation. She serves as interagency liaison and special projects coordinator, especially on projects concerning persons with barriers to employment. She is a registered nurse and also holds a bachelor of science degree in business, management of public resources, conferred by Florida State University.

Ms. Meyer has over 25 years of continuous service to the State of Florida. She began her employment with the Florida Department of Education and was previously employed by the Center on Gerontology at Florida State University. She was appointed by then Governor Bob Graham to serve as a Florida delegate to the 1980 White House Conference on Aging. She also served on the Human Rights Advocacy Committee for Florida State Hospital. As an advocate for improving education, training, and employment opportunities for youth and adults, she has served on numerous interagency councils, task forces, and work groups within state government.

**Audria Moore**

*Represents the public safety community*

Civil Rights and Independent Living committees • Health Care Education Subcommittee

Ms. Moore has been the public information officer for the Fort Pierce Police Department for the past eight years. In this capacity, she is the department's spokesperson and interacts with a variety of individuals from all walks of life. As one of the newest members of the Commission, Ms. Moore has developed a greater knowledge of the needs of people with disabilities and a commitment to seeing that those needs are addressed.

Ms. Moore graduated from the University of Florida with a bachelor's degree in journalism and communication. Upon returning to her hometown of Stuart after graduation, she worked as a journalist, youth development professional, and marketing director for two nonprofit agencies. In each role, she worked closely with local social service organizations to identify gaps in services being offered in the community and develop strategies to address the deficiencies.

**Trueman Bell Muhrer-Irwin**

*Represents disabled veterans of the United States*

Education and Transportation committees • Behavioral Health Care Subcommittee

Mr. Muhrer-Irwin is a student at Florida State University, studying Spanish and nursing. He is a veteran of the 2003 invasion of Iraq and spent six months in Baghdad before being wounded by a roadside bomb. During the following year, he gained a great deal of experience with the Veterans Administration's disability system before being discharged from the army with a 20-percent disability rating.

Mr. Muhrer-Irwin has worked with the National Theatre Workshop of the Handicapped and its wounded veterans writing program. He also worked with legislators on the 2005 Purple Heart Tuition Waiver Bill and last year's Robert Wise Bill, which dealt with regulations regarding the use of the names and likenesses of deceased soldiers.

**William "Bill" Peeler**

*Represents the Florida Department of Veterans Affairs*

Chair, Independent Living Committee • Health Care Committee • Behavioral Health Care Subcommittee

Mr. Peeler is a supervisor in the Florida Department of Veterans' Affairs, responsible for the area from Lake City to Pensacola. Before joining the department in 1993, he served in the U.S. Air Force for more than 24 years, retiring as an officer. He is a veteran of the Vietnam War, in which he served as a combat dog handler. As a veteran with a disability, he is well aware of the issues and barriers concerning his fellow disabled veterans.

Mr. Peeler is a graduate of the University of West Florida with a bachelor's degree in social work. He served on the Board of Directors of the Columbia County Senior Service Center and is pastor of White Springs United Methodist Church in White Springs, Florida.

**Cheryl Stone**

*Represents persons with disabilities living independently*

Chair, Transportation Committee • Health Care Committee • Health Care Education Subcommittee

Ms. Stone has worked for more than 30 years as a medical technologist with a specialty in clinical microbiology. She began her involvement with disability issues as a result of her self-advocacy when reliable transportation to work was not available.

Ms. Stone is the president of the board for the Central Florida Center for Independent Living. She is also a member of the American Association of Persons with Disabilities, the National Association of Spinal Cord Injuries, the Central Florida Chapter of the National Federation of the Blind of Florida, and the LYNX Transit Advisory Committee of the Central Florida Regional Transportation Authority. She served on the Commission for the Transportation Disadvantaged and was a program consultant for Metroplan Orlando. She was honored with a Governor's Point of Light Award in June 2009.

**Gregory Venz**

*Represents the Florida Department of Children and Families*  
Chair, Civil Rights Committee

Mr. Venz is an assistant general counsel at the Department of Children and Families (DCF) in Tallahassee. He served as the director of the department's Sexually Violent Predator Program for more than five years. His work at DCF has enabled him to understand the needs of persons across the disabilities spectrum.

Mr. Venz graduated from the Florida State University College of Law. He worked for two years as a law clerk at the First District Court of Appeal prior to joining the legal office at DCF in 1996. He brings to the Commission significant experience with legal, policy, and programmatic issues in the delivery of social services.

**Remer "Chip" Wilson**

*Represents the Florida Division of Emergency Management*  
Civil Rights and Independent Living committees • Health Care Education Subcommittee

Mr. Wilson was appointed the Statewide Disability Coordinator for the Division of Emergency Management in November 2007. He founded ADA Consultants of Northeast Florida after a 23-year career with Prudential Insurance.

After becoming a paraplegic in high school, Mr. Wilson earned a bachelor's degree in sociology and a master's degree in computer resource and information management. He is on the Board of Directors of the West Council Chamber of Commerce in Jacksonville and was its 2007 Small Business Leader of the Year. He was president of the Florida Independent Living Council for two terms and served on the Governor's Accessible Electronic Information Technology Task Force. He received the Senator Stephen R. Wise Lifetime Achievement Award for his advocacy efforts.

## ***Commission Staff Members***

**Bryan F. Vaughan**, Executive Director

Mr. Vaughan was appointed by Governor Charlie Crist to serve as executive director of the Governor's Commission on Disabilities in January 2008. He has a long history of public service and disabilities involvement.

Mr. Vaughan obtained a B.A. in political science from Mercer University, a master of science degree in clinical psychology from Troy State University, and is a board-certified expert in traumatic stress. He was awarded the Outstanding Achiever Award by the Georgia Association of Rehabilitation Facilities for developing Georgia's Ex-Offender Employment Program, which assists released felons in securing permanent employment. During his successful career in law enforcement, he received numerous honors, including the Silver Cross Medal, Bronze Cross Medal, Officer of the Year from the American Legion, Certificate of Meritorious Service from the U.S. Customs Service, and two Officer of the Month Awards from the Pensacola Police Department in Pensacola, Florida.

At the height of his law enforcement career, Mr. Vaughan was diagnosed with multiple sclerosis. Over the next few years, he was hospitalized many times due to exacerbations from the MS, leading to an 18-month period in a wheelchair. In 2001, the effects of the disease caused deterioration of his vision to the point that he was determined legally blind.

Since 1996, Mr. Vaughan has worked with a variety of individuals—from ex-felons to persons with physical, mental, and emotional illnesses—to help them overcome barriers to employment. As a recipient as well as a provider of services, he has a personal understanding of the various difficulties faced by people with disabilities. Although he has visual and physical limitations, he has been able to thrive in work environments that are not traditional for persons with disabilities. He is a living example that a person with disabilities can progress beyond what society presently views as norms, achieve the exceptional, and live a life that is fulfilling and rewarding.

**Jamie Bullock**, Deputy Director

**Melanie Parham**, Executive Administrative Assistant

**Stacia Woolverton**, Executive Administrative Assistant

## ***Clearinghouse on Disability Information Staff Members***

**Barbara S. Cain**, Director, Clearinghouse on Disability Information

Ms. Cain became the director of the Clearinghouse on Disability Information (CDI) in November 2004. The CDI offers information and referral services regarding all matters related to disabilities, technical assistance on ADA and other disability rights laws, service animals, SSI/SSDI issues, advocacy, basic needs, and services available throughout all of Florida.

Ms. Cain is the author of the weekly Disability-Related Legislative Report that has tracked disability-related legislation and issues during the past five Florida legislative sessions. The Legislative Report covers all pending legislation that could have an impact on persons with disabilities, seniors, and veterans with disabilities. Because most bill-tracking systems are inaccessible to screen readers, the CDI report tracks each bill from beginning to end using Florida's legislative Web site, Online Sunshine. The CDI's Legislative Report won a Davis Productivity Award in 2006.

Ms. Cain received her dual bachelor of science degrees in psychology and sociology in 1989. She was the first graduate of Southwest Baptist University's geriatric certification program. She has been a double-certified member of the National Alliance of Certified Information and Referral Specialists since 2005.

Prior to becoming CDI director, Ms. Cain served as the lead geriatric case manager for agencies in Illinois and Florida, as well as an elder abuse investigator and adult day care director. Throughout her career, she gained extensive knowledge on issues and programs affecting individuals with disabilities, geriatrics, and veterans with disabilities, which assists her in better serving the people of Florida.

**David Howell**, Disability Specialist

**Barbara “Bobbie” Malley**, Disability Specialist

**Kevin Rowe**, Resource Manager Consultant

## APPENDIX III

# Executive Orders

The Governor's Commission on Disabilities was created by Executive Order 07-148 as a 19-member board. Executive Order 07-244 expanded the board to a total of 21 members by adding two additional commissioners: one representing the Florida Division of Emergency Management, the other being a representative of the Florida Division of Blind Services. Executive Order 08-193 extended the tenure of the Commission.

### ***Executive Order 08 – 193***

STATE OF FLORIDA  
OFFICE OF THE GOVERNOR  
EXECUTIVE ORDER NUMBER 08-193  
(Extending Governor's Commission on Disabilities)

WHEREAS, July 26, 2008, marked the 18th anniversary of the signing of the Americans with Disabilities Act (the "ADA"); and

WHEREAS, on July 26, 2007, the Governor's Commission on Disabilities (the "Commission") was established by Executive Order 07-148 to advance public policy for the disabilities community, to provide a forum for advocates representing groups within the disabilities community, and to develop and voice unified concerns and recommendations to address issues facing the disabilities community; and

WHEREAS, Executive Order 07-148 required the Commission to draft a report identifying and recommending methods to maximize the freedom and independence of Floridians with disabilities, focusing on employment, transportation, education, and independent living, and the removal of barriers to the delivery of and access to services; and

WHEREAS, the Commission completed this task, creating a comprehensive report that outlined forty-nine separate recommendations arising within the subject areas specifically itemized in Executive Order 07-148, along with the area of civil rights of persons with disabilities that the Commission found imperative to address; and

WHEREAS, some of the recommendations proposed by the Commission may be implemented administratively while others will require legislative action; and

WHEREAS, it is in the interest of Florida's disability community, and the public as a whole, that the Commission on Disabilities continue in existence to participate

in the administrative and legislative review of the recommendations contained in its report, to develop new recommendations, and to otherwise continue the functions and further the purposes detailed in Executive Order 07-148.

NOW, THEREFORE, I, CHARLIE CRIST, as Governor of Florida, by virtue of the authority vested in me by the laws and Constitution of the State of Florida, do hereby promulgate the following Executive Order, effective immediately:

Section 1.

The Governor's Commission on Disabilities (the "Commission") shall continue in existence, and shall continue in its mission to advance public policy for Floridians with disabilities and to provide a forum for advocates representing Floridians with disabilities to develop and voice unified concerns and recommendations. The Commission is specifically authorized to continue to work in the areas identified in its July 2008 Report to the Governor, and to advocate for implementation of the recommendations contained in the Report.

Section 2.

The Commission shall, no later than July 1, 2009, and July 1st of each year thereafter, provide the Governor with a written report that satisfies the requirements of section 3 of Executive Order 07-148. The Commission's July 1, 2009 report must address:

- a. recommendations for administrative and legislative change in the areas of employment, transportation, education, independent living, and the removal of barriers to the delivery of and access to services, to supplement the recommendations made in the Commission's 2008 Report;
- b. recommendations for administrative and legislative change in the areas of developmental disabilities, healthcare, civil rights, and any other area the Commission, in consultation with the Governor, determines to be of imperative interest to the disabilities community;
- c. accomplishments in obtaining legislative and administrative change; and
- d. progress related to collaborative efforts with other agencies.

Section 3.

The Commission shall consist of 21 members appointed by the Governor which shall include:

- a. eight individual Florida citizens representing persons with physical and/or developmental disabilities;
- b. an individual representing advocates for independent living;
- c. a representative of governmental providers of law enforcement or public safety services;
- d. the Surgeon General of Florida or his/her designee;
- e. the Commissioner of the Florida Department of Education or his/her designee;
- f. the Secretary of the Florida Department of Children and Families or his/her designee;
- g. the Secretary of the Florida Agency for Health Care Administration or his/her designee;
- h. the Executive Director of the Florida Agency for Persons with Disabilities or his/her designee;
- i. the Secretary of the Florida Department of Elder Affairs or his/her designee;
- j. the Executive Director of the Florida Department of Veterans Affairs or his/her designee;
- k. the Secretary of the Florida Agency for Workforce Administration or his/her designee;
- l. a representative of the Florida Commission for the Transportation Disadvantaged;
- m. the Director of the Florida Division of Emergency Management or his/her designee; and
- n. the Executive Director of the Statewide Advocacy Council.

#### Section 4.

The Commission is authorized to call upon any State agency, department, division, or office to supply data, reports, or other information the Commission deems reasonably necessary to achieve its objectives. Each agency, department, division, or office of the State under the control of the Governor is authorized and directed, and all other agencies are requested, to cooperate with



the Commission and provide it with such information, personnel, and assistance as necessary to accomplish the purposes of this Executive Order and Executive Order 07-148. Universities within the State University System are encouraged to provide the Commission with assistance in performing research necessary to accomplish these purposes. Each agency, department, or division specifically identified in Section 3 of this Executive Order shall designate a support team of officers or employees from within the agency, department, or division to assist the Commission in accomplishing the purposes of this Executive Order and Executive Order 07-148, except that the Florida Division of Emergency Management support team shall include, in addition to the Statewide Disability Coordinator and other individual members from within the Division of Emergency Management, individual members representing the Department of Community Affairs and the Florida Housing Corporation. The Florida Department of Education support team shall include individual members representing the Florida Division of Vocational Rehabilitation and the Florida Division of Blind Services.

IN TESTIMONY WHEREOF, I have hereunto set my hand and have caused the Great Seal of the State of Florida to be affixed at Tallahassee, this 11th day of September, 2008.

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GOVERNOR

ATTEST:

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SECRETARY OF STATE

## ***Executive Order 07-244***

STATE OF FLORIDA  
OFFICE OF THE GOVERNOR  
EXECUTIVE ORDER NUMBER 07-244  
(Expanding Membership of Governor's Commission on Disabilities)

WHEREAS, the Governor's Commission on Disabilities (the "Commission") was established by Executive Order 07-148 to advance public policy for the disabilities community, to provide a forum for advocates representing groups within the disabilities community to develop and voice unified concerns and recommendations, and to partner with the Statewide Advocacy Council to provide proper guidance and education to state agencies in the implementation of the ADA; and

WHEREAS, Executive Order 07-148 limited the Commission to 19 members, representing a broad spectrum of groups within the disabilities community and public agencies charged with serving the disabilities community; and

WHEREAS, the Commission may better achieve its mission by expanding its membership beyond the limitation imposed by Executive Order 07-148;

NOW THEREFORE, I, CHARLIE CRIST, as Governor of Florida, by virtue of the authority vested in me by the Florida Constitution, and all other applicable laws, issue the following Executive Order, to take effect immediately:

### Section 1.

The Governor's Commission on Disabilities shall consist of 21 members appointed by the Governor. At least one individual member of the Commission shall represent each of the following groups, agencies, or departments:

- a. individuals with hearing impairments;
- b. individuals with visual impairments;
- c. individuals with developmental disabilities;
- d. individuals with spinal cord or brain injuries;
- e. individuals with mental illnesses;
- f. elderly individuals;
- g. disabled veterans of the United States;
- h. Centers for Independent Living;
- i. the Division of Vocational Rehabilitation;
- j. the Florida Division of Blind Services;
- k. the Florida Department of Health;
- l. the Florida Department of Education
- m. the Florida Department of Children and Families;
- n. the Florida Agency for Health Care Administration;

- o. the Florida Agency for Persons with Disabilities;
- p. the Florida Department of Elder Affairs;
- q. the Florida Department of Veterans Affairs;
- r. the Florida Agency for Workforce Administration;
- s. the Florida Commission for the Transportation Disadvantaged;
- t. the Florida Division of Emergency Management; and
- u. the Executive Director of the Statewide Advocacy Council.

IN TESTIMONY WHEREOF, I have hereunto set my hand and have caused the Great Seal of the State of Florida to be affixed at Tallahassee, this 21st day of November, 2007.

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GOVERNOR

ATTEST:

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SECRETARY OF STATE

## ***Executive Order 07-148***

STATE OF FLORIDA  
OFFICE OF THE GOVERNOR  
EXECUTIVE ORDER NUMBER 07-148  
(Governor's Commission on Disabilities)

WHEREAS, more than three million Floridians, roughly one-fifth of our state's population, live daily with some form of physical or mental disability; and

WHEREAS, on July 26, 1990, seventeen years ago today, President George H.W. Bush signed into law the Americans with Disabilities Act (the "ADA"), which provides a comprehensive mandate for the elimination of discrimination against qualified individuals with disabilities in access to employment, transportation, telecommunications, state and local services, and public accommodations; and

WHEREAS, on July 26, 1992, fifteen years ago today, the final major provisions of the ADA became effective; and

WHEREAS, by Executive Order 93-166, Governor Lawton Chiles created the Florida Coordinating Council for the Americans with Disabilities Act to encourage a cooperative effort between state and local governments, the education community, the private sector, and the disability community with respect to implementing the ADA; and

WHEREAS, by Executive Order 97-56, Governor Chiles refocused Florida's recognition of and response to the ADA by dissolving the Florida Coordinating Council and creating the Americans with Disabilities Act Working Group (the "Working Group"), whose primary mission was to serve as a clearinghouse of information, and to provide referrals, education, and recommendations for compliance with and implementation of the ADA in order to improve the quality of life for citizens of Florida with disabilities; and

WHEREAS, the Florida Statewide Advocacy Council, established by chapter 402, Florida Statutes, and located within the Executive Office of the Governor, serves a broader, related state function of representing the interests of Florida citizens, including Florida's disabled citizens, that are served by state agencies that provide client services; and

WHEREAS, by Executive Orders 99-80, 03-137, 07-04, and 07-119, Governor Jeb Bush and I extended the duration of the Working Group through July 25, 2007; and

WHEREAS, the Working Group has dissolved under the terms of those orders as of today; and

WHEREAS, it is in the interest of Florida's disability community, and the public as a whole, that a Commission on Disabilities be created to advance public policy for the disabilities community, to provide a forum for advocates representing various groups within the disabilities community to develop and voice unified concerns and recommendations, and to partner with the Statewide Advocacy Council to provide proper guidance and education to state agencies in the implementation of the ADA and to ensure that Florida's citizens with disabilities have equal access to education and employment, information regarding resources and services, and opportunities to participate in all aspects of life in Florida to the fullest extent possible.

NOW, THEREFORE, I, CHARLIE CRIST, as Governor of Florida, by virtue of the authority vested in me by the laws and Constitution of the State of Florida, do hereby promulgate the following Executive Order, effective immediately:

Section 1.

The Governor's Commission on Disabilities (the "Commission") is hereby created to advance public policy for Floridians with disabilities and to provide a forum for advocates representing Floridians with disabilities to develop and voice unified concerns and recommendations.

Section 2.

The responsibilities of the Commission shall include, but shall not be limited to:

- a. identifying and recommending methods to remove barriers to the delivery of, and access to, services for people with disabilities;
- b. identifying and recommending methods to maximize the freedom and independence of Floridians with disabilities, with a focus on employment, transportation, education, and independent living;
- c. providing a forum for communication between individuals with disabilities throughout the State of Florida and the various arms of state government, particularly the Governor and the Legislature; and
- d. partnering with other agencies and organizations serving the disabilities community to facilitate collaborative efforts consistent with the purposes of the Commission.

Section 3.

The Commission shall, no later than July 1, 2008, and July 1st of any subsequent year should the Commission's tenure be extended, provide a written report to the

Governor outlining the accomplishments during the previous 12 months. The report shall address issues including, but not limited to, the following:

- a. recommendations regarding changes to Florida statutes, administrative rules, policies, and/or procedures of the State in reference to all duties outlined above;
- b. accomplishments in obtaining legislative or administrative change; and
- c. progress related to collaborative efforts with other agencies and organizations.

The Commission may also provide interim reports as deemed necessary by the Commission or as requested by the Governor.

#### Section 4.

The Commission shall consist of 19 members appointed by the Governor. Members shall serve a term of one year commencing on the day of appointment. At least one individual member of the Commission shall represent each of the following groups, agencies, or departments:

- a. individuals with hearing impairments;
- b. individuals with visual impairments;
- c. individuals with developmental disabilities;
- d. individuals with spinal cord or brain injuries;
- e. individuals with mental illnesses;
- f. elderly individuals;
- g. disabled veterans of the United States;
- h. Centers for Independent Living;
- i. the Division of Vocational Rehabilitation;
- j. the Florida Department of Health;
- k. the Florida Department of Education
- l. the Florida Department of Children and Families;
- m. the Florida Agency for Health Care Administration;
- n. the Florida Agency for Persons with Disabilities;
- o. the Florida Department of Elder Affairs;
- p. the Florida Department of Veterans Affairs;
- q. the Florida Agency for Workforce Administration;
- r. the Florida Commission for the Transportation Disadvantaged; and
- s. the Executive Director of the Statewide Advocacy Council.

The Governor shall select the Chair from the Commission's membership, and shall appoint an Executive Director. All members and employees of the Commission shall serve at the pleasure of the Governor. The Governor may suspend or remove the Executive Director or any Member of the Commission

with or without cause, and the Governor may fill any vacancy that occurs. The Commission shall be located, for administrative purposes only, within the Department of Management Services.

The Commission shall meet at least quarterly. A majority of the Commission's current members constitutes a quorum. A quorum must be met in order for the Commission to vote on any proposed action or recommendation. The Commission shall function according to the guidelines set forth in Robert's Rules of Order, unless other procedural guidelines are adopted by the Commission.

#### Section 5.

The Statewide Advocacy Council is directed to partner with the Commission through its performance of the following functions related to the needs of Floridians with disabilities:

- a. incorporating the existing clearinghouse for information and referrals on disability resources, formerly housed within the Americans with Disabilities Act Working Group.
- b. maintaining the statewide toll-free information and referral telephone service for disability-related services, programs, assistance, and other resources; and
- c. assisting the Commission and the Executive Office of the Governor in implementing initiatives consistent with the Commission's purposes.

#### Section 6.

All agencies under the control of the Governor are directed to appoint a "Disability Champion" within 60 days of the signing of this Executive Order. Each Disability Champion will be required to undergo ADA training approved by the Commission within 60 days of appointment and will serve as a conduit for communication between the agency, the Commission, and the disability community. A member of the Commission specifically representing an agency or department may serve as that agency's or department's Disability Champion.

#### Section 7.

The Commission is authorized to call upon any State agency, department, division, or office to supply such data, reports, or other information as it deems reasonably necessary to achieve its objectives. Each agency, department, division, or office of the State under the control of the Governor is authorized and directed, and all other agencies are requested, to cooperate with the Commission and provide it with such information, personnel, and assistance as necessary to accomplish the purposes of this Executive Order. State agencies shall

collaborate in the sharing of information necessary to establish and maintain the statewide information and referral telephone service.

Section 8.

Members of the Commission shall serve without compensation, but may receive per diem and travel expenses to the extent allowed by chapter 112, Florida Statutes, and to the extent that funds are available. Per diem and travel expenses shall be paid in accordance with chapter 112, Florida Statutes, and reasonable accommodations shall be made for members of the Commission with disabilities in accordance with the Americans with Disabilities Act. Members of the Commission who are public officers and employees of state agencies shall be reimbursed for per diem and travel expenses by their respective agencies. All other members of the Commission shall be reimbursed for per diem and travel expenses by the Department of Management Services.

Section 9.

The meetings of the Commission shall be noticed and open to the public, and shall be conducted in accordance with chapter 286, Florida Statutes. Florida's public records law, chapter 119, Florida Statutes, shall apply.

Section 10.

The Commission shall continue in existence until July 26, 2008, unless extended by amendment.

IN TESTIMONY WHEREOF, I have hereunto set my hand and have caused the Great Seal of the State of Florida to be affixed at Tallahassee, this 26th day of July, 2007.

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GOVERNOR

ATTEST:

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Secretary of State



## APPENDIX IV

# News Items – Accessible Parking

In support of Recommendation D-6 concerning increased penalties and enforcement regarding accessible parking violations, two news stories about a highly publicized case in Miami are reproduced below.

### **WSVN-TV, Channel 7, Miami/Fort Lauderdale – April 10, 2008**

#### ***Abuse of disabled parking at Miami International Airport***

MIAMI (WSVN) -- Officials have launched an investigation after discovering that disabled parking spaces at a South Florida airport were being occupied by healthy airport employees.

According to the Office of the Inspector General, a county agency that investigates fraud, a thorough investigation including surveillance video was performed at the Miami International Airport. "It is clear to me, just based on what we found at the airport, looking at the video, which speaks for itself, you'd have to draw your own conclusion as to whether you think this people are severely disabled," said Inspector General Christopher Mazzella.

Officials said more than 200 employees are breaking this law. Ironically, employees have their own free lot to park their vehicle, but it requires them to take a shuttle to their designated terminals, which causes some inconvenience to them.

Investigators said, instead of using their lot, employees occupy the much-needed handicapped spots that are closer to the terminal. "The county passed an ordinance many, many, many years ago, allowing disabled individuals to park for free. It's the only county in the country that does so," said Mazzella.

Authorities concluded that only four county workers are involved in the case and the majority of the abusers work for independent airport vendors.

Investigators said it will be up to each individual employer to discipline these parking violators. Authorities continue to investigate.

### **Miami Herald – May 16, 2008**

#### ***Airport worker arrested over use of disabled tag***

*Accused of using a fraudulent disabled parking permit for at least seven months, a TSA baggage screener at Miami International Airport was arrested Thursday.*

BY MATTHEW I. PINZUR  
mpinzur@MiamiHerald.com

A baggage screener at Miami International Airport was arrested Thursday on charges he lied to get a disabled-parking permit, which he used 139 times for a total of \$2,300 in free parking.

Bernard Forbes, 25, was caught on tape parking in handicapped spots at the passenger terminal, using the permit to waive parking fees and even working under the hood of his car while it was parked.

The video also showed him walking to and from the garage with no apparent hardship.

"It is sad to see someone trying to use a fake handicap as a cloak to hide such actions," said State Attorney Katherine Fernández Rundle in a news release.

Forbes, who has worked for the Transportation Security Administration since 2002, was in custody Thursday afternoon.

"The TSA moved swiftly to immediately suspend Officer Forbes indefinitely and without pay," agency spokeswoman Sari Koshetz said in an e-mail.

"We are working closely with the State Attorney's Office to determine if there is adequate evidence to terminate him at this time."

Forbes was the first person arrested since the county's Inspector General reported last month about widespread abuse of the permits at the airport.

He was charged with grand theft, cheating and making a false or misleading statement to obtain a disabled permit.

County ordinance allows permit-holders to park free in all its lots and garages, including the airport.

During the 2007 fiscal year, the county waived \$2.2 million at its airports, and suspicious MIA officials asked for an investigation.

Inspector General Chris Mazzella documented hundreds of apparently able-bodied workers using the permits to get out of \$1 million in parking charges.

"People who really, truly need access to parking spaces for a legitimate disability should have that access," said Lauren Stover, MIA's assistant director of security and communications.

# APPENDIX V

## Employment Data by State

Ages 21 to 64 (2007)

(a) State	(b) Numerical ranking: employment of persons with no disability	(c) Percentage: employment among persons with no disability	(d) Numerical ranking: employment of persons with a disability	(e) Percentage: employment among persons with a disability	(f) Numerical ranking (1 = most favorable): percentage-point difference between the employment of persons with a disability and persons with no disability	(g) Percentage-point difference between the employment of persons with a disability and persons with no disability (column c minus e)
AL	34	79.5	45	31.4	47	48.1
AK	26	80.4	5	47.4	3	33.0
AZ	44	77.3	38	35.4	27	41.9
AR	40	79.0	44	31.9	45	47.1
CA	45	77.3	33	36.8	24	40.5
CO	17	81.8	10	44.6	6	37.2
CT	16	82.2	16	42.7	15	39.5
DE	31	79.8	35	36.0	32	43.8
<b>FL</b>	<b>41</b>	<b>78.9</b>	<b>29</b>	<b>37.6</b>	<b>25</b>	<b>41.3</b>
GA	39	79.2	40	34.3	39	44.9
HI	29	80.0	11	44.0	4	36.0
ID	28	80.2	18	41.7	12	38.5
IL	36	79.3	22	39.2	22	40.1
IN	21	80.8	32	37.1	30	43.7
IA	6	85.2	6	47.0	9	38.2
KS	9	83.6	12	43.7	21	39.9
KY	37	79.3	47	30.4	48	48.9
LA	46	77.3	42	33.6	31	43.7
MN	11	83.3	24	38.6	37	44.7
MD	12	82.5	15	42.8	18	39.7
ME	14	82.3	34	36.5	42	45.8
MI	49	76.7	46	31.3	41	45.4
MN	8	84.2	9	46.1	8	38.1
MS	47	77.3	48	30.4	44	46.9
MO	18	81.4	28	37.6	33	43.8
MT	22	80.6	17	42.2	11	38.4
NE	2	86.1	4	48.0	7	38.1
NV	33	79.7	21	40.1	16	39.6
NH	7	84.7	13	43.2	26	41.5
NJ	32	79.8	31	37.2	28	42.6
NM	48	77.3	25	38.3	14	39.0
NY	42	78.6	41	34.0	34	44.6
NC	24	80.5	37	35.6	38	44.9
ND	4	85.8	1	56.0	1	29.8
OH	25	80.5	36	35.9	36	44.6

(a) State	(b) Numerical ranking: employment of persons with no disability	(c) Percentage: employment among persons with no disability	(d) Numerical ranking: employment of persons with a disability	(e) Percentage: employment among persons with a disability	(f) Numerical ranking (1 = most favorable): percentage-point difference between the employment of persons with a disability and persons with no disability	(g) Percentage-point difference between the employment of persons with a disability and persons with no disability (column c minus e)
OK	27	80.4	27	37.7	29	42.7
OR	35	79.5	19	41.2	10	38.3
PA	19	81.2	39	35.3	43	45.9
RI	13	82.4	30	37.2	40	45.2
SC	38	79.3	49	30.0	49	49.3
SD	1	86.2	8	46.4	20	39.8
TN	30	79.9	43	32.3	46	47.6
TX	43	78.5	23	38.7	19	39.8
UT	20	80.9	3	49.5	2	31.4
VT	5	85.4	7	46.7	13	38.7
VA	15	82.3	26	37.7	35	44.6
WA	23	80.6	20	40.9	17	39.7
WV	50	76.3	50	26.6	50	49.7
WI	10	83.6	14	43.2	23	40.4
WY	3	86.0	2	49.9	5	36.1

Source: Erickson, W., & Lee, C. (2008), *2007 Disability Status Report: Florida*, Ithaca, NY, Cornell University Rehabilitation Research and Training Center on Disability Demographics and Statistics. The estimates in the report are based on the American Community Survey—a U.S. Census Bureau survey of a sample of the population.

## APPENDIX VI

# Interim Project – Bill of Rights

In support of Recommendation E-10, the Commission recommends updating Florida's Bill of Rights for Persons with Developmental Disabilities, contained in 393.13(3) (a) and (g), and 393.13(5), Florida Statutes.

The following are initial proposed changes for continued review:

393.13 Treatment of persons with developmental disabilities.—

(3) RIGHTS OF ALL PERSONS WITH DEVELOPMENTAL DISABILITIES.--  
The rights described in this subsection shall apply to all persons with developmental disabilities, whether or not such persons are clients of the agency.

(a) Persons with developmental disabilities shall have a right to dignity, privacy, and humane care, including the right to be free from sexual abuse ~~in residential facilities.~~

(g) Persons with developmental disabilities shall have a right to be free from harm, including unnecessary physical, chemical, or mechanical restraint, isolation, excessive medication, abuse, ~~or~~ neglect or unreasonable care.

(5) LIABILITY FOR VIOLATIONS.--Any person or entity that ~~who~~ violates or abuses any rights or privileges of persons with developmental disabilities provided by this chapter is liable for damages as determined by law. Any person or entity that ~~who~~ acts in good faith compliance with the provisions of this chapter is immune from civil or criminal liability for actions in connection with evaluation, admission, habilitative programming, education, treatment, or discharge of a client. However, this section does not relieve any person or entity from liability if the person or entity is liable or guilty of negligence, misfeasance, nonfeasance, or malfeasance.

## APPENDIX VII

# Interim Project – Florida’s Version of the ADA

### *Summary*

In support of the proposed implementation of Recommendation E-1 (2008/Rev. 2009), the Commission recommends enacting the federal Americans with Disabilities Act of 1990, as amended by the Americans with Disabilities Restoration Act, as state law in Florida, to be known as the Floridians with Disabilities Act (FDA) or another appropriate title.

### *Background*

The Americans with Disabilities Act (ADA) was enacted in 1991 and became generally effective in 1992. Since that time, there has been significant progress in addressing disability discrimination and barriers to participation for persons with disabilities in employment, government programs and services, and public accommodations. Despite the progress, it is still easy to identify both anecdotal acts and systemic patterns and practices of discrimination that preclude persons with disabilities from equal participation in the full range of community life enjoyed by persons who do not have disabilities.

Florida enacted the Florida Civil Rights Act of 1992 (FCRA) in chapter 760, Florida Statutes. The intent of this Act was to provide state law protection against discrimination on the basis of race, color, religion, sex, national origin, age, handicap, or marital status. The FCRA, however, provides disability discrimination protections that are, in many cases, less than those afforded by the ADA.

A number of states have enhanced state legal protections for persons with disabilities by adopting the federal ADA and its regulations as state law. This not only ensures that the ADA provisions become the minimum standards that must be applied, but also ensures that state avenues of legal redress become available to persons who encounter disability discrimination.

California, for example, in its Unruh Civil Rights Act, expressly provides that a violation of the ADA is a violation of California law. {See California Civil Code, §51(f).} California has also adopted the provisions of the ADA and its implementing regulations in many subject matter-specific sections of the California Code. For example, see California Business and Professional Code, §§ 313, 11502.5, 13651, California Civil Code, §§ 51.2, 54, 54.1, 54.8,

55.52(a)(6), 55.54(i); California Education Code, § 8250.5; California Evidence Code, § 754(j).

A number of other states have, to varying degrees, broadly adopted the ADA and its implementing regulations as state law. For example, see Alabama Code 1975, § 33-5-58(d); Arizona Revised Statutes, Title 41, Ch. 9, Art. 8, §§41-1492 – 41-1492.12; Connecticut General Statutes § 46a-7, § 29-269; Kentucky Revised Statutes § 344.010 and those that follow.

Many states have also enacted state laws that require compliance with the ADA in specific instances. For example, see Georgia Code § 45-2-43 (medical services).

### *Present Situation*

The Americans with Disabilities Act (ADA) already applies to all public and many private entities in Florida. Florida courts have additionally held that that Title I of the ADA and the existing Florida Civil Rights Act (FCRA) in chapter 760, Florida Statutes, provide persons with disabilities essentially equivalent protection against employment discrimination. These two pieces of civil rights legislation are not, however, equivalent. The most significant difference between the ADA and the FCRA is the treatment of commercial entities defined as "public accommodations." The FCRA narrowly defines public accommodations such that only places of lodging, entertainment, on-site food or beverage consumption, and gas stations are covered. Title III of the ADA defines public accommodation to include virtually any commercial establishment that people frequent as part of daily living. The FCRA also lacks a clear analog to Title II of the ADA, which requires accommodation of disabilities in the operation of government programs and the delivery of services.

These differences between the FCRA and the ADA mean that the compliance and enforcement mechanisms in ss. 760.02–760.11, Florida Statutes, are not currently available to address alleged violations of Title II of the ADA and many alleged violations of Title III. This means that the Florida Commission on Human Relations cannot investigate and conciliate these claims, nor can the Attorney General become involved on behalf of the public interest. For disability discrimination claims to which the FCRA does not apply, individuals generally must pursue their own lawsuits in state or federal court.

## APPENDIX VIII

# 2009 Legislation

To augment Chapter 5 of this report, concerning the Commission's accomplishments, the bills from the 2009 legislative session whose concepts were supported by the Commission are listed and described below. The status cited for each bill was as of the publication of this report in June 2009.

*SB-102 Chronic Kidney Disease Awareness Day:* (Sen. Wilson) Recognizes March 12, 2009, as Chronic Kidney Disease Awareness Day. (Status: 03/24/09 Adopted)

*CS/CS-126 Children and Vulnerable Adults/Records:* (Sen. Dockery) Requires that the case file of a child under the supervision or in the custody of the Department of Children and Families (DCF) be maintained in a complete and accurate manner. Specifies who has access to the case file and records in the file. Limits the public-records exemption provided for reports relating to adult abuse, neglect, or exploitation to personally identifying information in the reports, etc. Effective date: 07/01/2009. (05/01/09 Senate Ordered enrolled)

*SB-152 Federal Funding/Home Health Services/Elderly:* (Identical HB-131) (Sen. Aronberg) Urges the Congress of the United States to increase federal funding for home health services for the elderly. (04/29/09 Senate Ordered enrolled)

*CS/CS-162 Electronic Health Records:* (Compare HB-876) (Sen. Ring) Expands access to a patient's medical records to facilitate the electronic exchange of data between certain health care facilities, practitioners, and providers and attending physicians. Requires the Agency for Health Care Administration (AHCA) to operate an electronic health record technology loan fund, subject to a specific appropriation. Requires AHCA to adopt rules related to standard terms and conditions for the loan program, etc. (04/29/09 Senate Ordered enrolled)

*CS/CS-308 Developmental Disabilities:* (Identical HB-33) (Sen. Ring) Requires that a physician refer a minor to an appropriate specialist for screening for autism spectrum disorders or other developmental disability and inform the parent or legal guardian of the right to direct access to that specialist under certain circumstances. Requires certain insurers and HMOs to provide direct patient access to an appropriate specialist for screening, evaluation of, or diagnosis for autism spectrum disorders, etc. Effective date: 07/01/2009. (05/04/09 Died in House Insurance, Business, & Financial Affairs Policy Committee)

*SB-316 High School Diplomas/Vietnam War Veterans:* (Compare SB-2654) (Sen. Constantine) Authorizes the Commissioner of Education to award a high



school diploma to honorably discharged Vietnam War veterans. Effective date: 07/01/2009. (04/29/09 Ordered enrolled in Senate)

*SB-338 Kidcare Outreach Program Study/Uninsured Children:* (Similar HB-807) (Sen. Wilson) Requires the Office of Program Policy Analysis and Government Accountability to perform a study of the outreach efforts of the Kidcare program. Provides requirements for the study. Requires a report to the Legislature by a specified date. (05/01/09 Placed on Special Order Calendar; Substituted HB 807; Laid on Table, Link/Identical/Similar/Compare passed, refer to HB 807)

*SB-420 Florida Commission on Human Relations:* (Sen. Joyner) Recognizes the 40th anniversary of the creation of the Florida Commission on Human Relations and commends the commission on its many significant accomplishments during the past 40 years. (03/05/09 Introduced; Read 2nd time; Adopted)

*CS/CS-424 Department of Transportation:* (Similar 2nd ENG/HB-1021, SB 0932, Compare HB-441, CS-819, HB-0989, CS/CS-1451, HB-5013, SB-294, CS-582, CS-856) (Sen. Gardiner) Provides that the executive director of the Florida Transportation Commission is in the Senior Management Service. Provides for counties to incur certain costs related to the relocation or removal of certain utility facilities under specified circumstances. Provides that certain port-related facilities may not be designated as developments of regional impact under certain circumstances, etc. (04/30/09 Placed on Special Order Calendar; Read 2nd time; Amendment adopted; Substituted HB 1021; Laid on Table, Link/Identical/Similar/Compare passed, refer to HB 1021)

*SB-442 Education Dollars for Duty Program:* (Compare HB-685) (Sen. Fasano) Revises provisions relating to the duties of the Adjutant General. Removes the duties of the Board of Governors and the State Board of Education for the Education Dollars for Duty Program. Provides for education assistance for members of the Florida National Guard who enroll in a private institution. Provides that college preparatory courses are authorized for the program, etc. Effective date: 07/01/2009. (04/30/09 Placed on Special Order Calendar; Read 2nd time Amendment failed; Amendment adopted; Substituted CS/CS-685; Laid on Table, Link/ Identical/ Similar/ Compare passed, refer to CS/CS- 685)

*CS/CS-456 Mental Illness/Psychiatric Examination:* (Similar HB-535) (Sen. Gaetz) Requires a law enforcement agency that transports persons to a receiving facility to have a memorandum of understanding with the facility. Requires that custody of a person who is transported to a receiving or treatment facility be relinquished to a responsible person at the facility. Specifies that a psychiatric examination by certain personnel be conducted face-to-face or by electronic means. Effective date: 07/01/2009. (04/29/09 Senate Ordered enrolled)

*SB-498 Clinical, Counseling, and Psychotherapy Services:* (Identical HB-109) (Sen. Baker) Provides for a waiver of confidentiality and privileged communications when, in the clinical judgment of a person licensed or certified under the laws covering said services, there is a clear and immediate probability of certain harm. Provides immunity from liability for, and prohibiting causes of action against, such person for disclosure of otherwise confidential communications under such circumstances. Effective date: 07/01/2009 (04/27/09 Substituted HB 109; Laid on Table, refer to HB 109)

*CS/CS-556 Medicaid Program/Low-Income Pool Plan:* (Similar HB-285) (Sen. Gaetz) Requires the Agency for Health Care Administration to make and submit recommendations to the Governor and the Legislature regarding the financing of and distribution of funds for the low-income pool plan and the disproportionate share program. Abolishes the Medicaid Low-Income Pool Council. Effective date: 07/01/2009. (04/24/09 Placed on Special Order Calendar; Substituted CS-285; Laid on Table, refer to CS-285)

*CS-574 Prescription Drugs/Purchase:* (Similar CS/CS-1144, Compare CS-574) (Sen. Gaetz) Deletes provisions requiring a health care clinic establishment permit for the purchase of certain prescription drugs. Authorizes certain establishments to possess prescription drugs. Establishes criteria for certain business entities to purchase and possess prescription drugs. Assigns responsibilities to a medical director who acts as the qualifying practitioner of a licensed health care clinic, etc. Effective date: 07/01/2009 (04/14/09 Read 3rd time; CS passed as amended)

*CS/CS-606 Florida Prepaid College Program:* (Identical HB-315) (Sen. Wise) Revises provisions relating to the transfer of benefits received from the Florida Prepaid College Program to private and out-of-state colleges and universities and to career centers. Amends a provision relating to professional guardians; conforms a cross-reference. Effective date: 07/01/2009. (04/29/09 Senate Ordered enrolled)

*CS-620 Health Facilities:* (Identical HB-573) (Sen. Oelrich) Redefines the term *health facility* for the purpose of allowing additional types of health facilities to receive assistance from a health facilities authority. (04/29/09 Senate Ordered enrolled)

*CS-642 Autism License Plate/Autism Programs:* (Identical HB-239) (Sen. Altman) Creates an autism license plate. Establishes an annual use fee for the plate. Provides for the distribution of use fees received from the sale of such plates. Requires the application form for motor vehicle registration, renewal of registration, and driver's license or duplicate to include language permitting a voluntary contribution to the Autism License Plate Fund. Effective date: 7/01/2009. (04/24/09 Placed on Special Order Calendar; Read 2nd time; Amendments adopted; Ordered engrossed)

*SB-644 Veterans:* (Identical HB-509) (Sen. Fasano) Revises an exemption from license or permit fees required for improvements to a dwelling owned by a disabled veteran if the improvements are for the purpose of making the dwelling safe. Removes a provision limiting the exemption to veterans who use wheelchairs. Deletes the monetary limitation on the amount of general revenue deposited into the State Homes for Veterans Trust Fund within the Department of Veterans' Affairs, etc. Effective date: 07/01/2009 (04/28/09 Placed on Special Order Calendar; Substituted HB 509; Laid on Table, Link/Identical/Similar/ Compare passed, refer to HB 509)

*CS-702 Health Care Access:* (Compare HB-185) (Sen. Gaetz) Expands the membership of the board of directors of the Florida Healthy Kids Corporation. Specifies certain provider arrangement contract prohibitions or restrictions. Prohibits prepaid limited health service organizations from specifying certain contract continuation or renewal conditions. Provides for application to HMOs of the prohibition against specifying certain contract continuation or renewal conditions, etc. Effective date: 07/01/2009. (04/16/09 Substituted CS/HB 185; Laid on Table, refer to CS-185)

*SB-720 Physician Assistants:* (Identical HB-249) (Sen. Peaden) Provides that a supervising physician may not be required to review and cosign a physician assistant's charts or medical records. Deletes certain supervisory physician requirements related to prescribing and dispensing medications noted in appropriate medical records. Effective date: 07/01/2009. (04/29/09 Ordered enrolled Substituted for CS-249)

*CS-746 Direct Support Organization/Department of Elder Affairs (DOEA):* (Linked SB-648) (Sen. Fasano) Authorizes the Department of Elder Affairs to create a direct-support organization. Requires the organization to operate under a contract. Provides contract requirements. Requires the Secretary of Elder Affairs to approve of any transaction or agreement between the department's direct-support organization and any other direct-support organization. Requires the direct-support organization to submit certain forms from the Internal Revenue Service to DOEA, etc. Effective date: 07/01/2009. (05/01/09 Senate Ordered enrolled)

*SB-748 Children's Services Council or Related Entity Open Government Sunset Review Act (OGSR):* (Committee of Children, Families and Elder Affairs) Repeals a specified provision relating to a public records exemption for personal identifying information held by a children's services council or related entity. Saves the exemption from repeal under the Open Government Sunset Review (OGSR) Act. Deletes provisions providing for repeal of the exemption. Effective date: 10/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted HB 7021; Laid on Table, Link/Identical /Similar/Compare passed, refer to HB 7021)

*CS-770 Area Agencies on Aging:* (Sen. Fasano) Revises provisions relating to the Department of Elder Affairs (DOEA). Deletes references to the boards of area agencies on aging. Requires that each area agency on aging, rather than DOEA, develop request for proposals for community care for the lead agency. Prohibits the Division of Administrative Hearings from having jurisdiction over disputes relating to the competitive procurement process developed by the area agencies, etc. Effective date: Upon becoming law. (04/24/09 Read 3rd time; Amendment adopted; Substituted CS/CS/CS- 935; Laid on Table, refer to CS/CS/CS- 935) donors

*CS/CS-810 Unemployment Compensation Trust Fund:* (Sen. Garcia) Raises the amount of an employee's wages subject to an employer's contribution to the trust fund, with a reversion to current law after January 1, 2015. Revises the rate and recoupment period for computing the employer contribution to the trust fund, with a reversion to current law for recoupment after January 1, 2015. Provides for advances to be credited to the Unemployment Compensation Trust Fund, etc. (04/29/09 Senate Ordered enrolled)

*SB-844 Postsecondary Distance Learning:* (Sen. Oelrich) Establishes the Florida Distance Learning Consortium. Requires that the Board of Governors and the State Board of Education jointly oversee the consortium. Authorizes the consortium to enter into contracts for administrative services. Provides duties for the consortium. Defines the term *distance learning course* for purposes of assessing a distance learning course user fee for community college and state university students. (04/23/09 Placed on Special Order Calendar; Substituted HB 7121; Laid on Table, refer to HB 7121)

*CS-892 Mental Health and Substance Abuse Services:* (Similar HB-767) (Sen. Bennett) Authorizes the Agency for Health Care Administration to license facilities that provide services as an integrated adult mental health crisis stabilization unit and addictions receiving facility. Provides eligibility criteria for treatment services. Requires the Department of Children and Families (DCF) to adopt appropriate rules. Effective date: 07/01/2009. (04/23/09 Placed on Special Order Calendar; Substituted HB 767; Laid on Table, refer to HB 767)

*SB-902 Florida Public Health Foundation, Inc.:* (Similar HB-331) (Sen. Deutch) Changes the name of said foundation to the Florida Public Health Institute, Inc. Modifies the purpose of the institute. Deletes the duties of the institute to facilitate communication between biomedical researchers and health care providers, to provide an annual report of its finances, and to provide an annual report of its activities to the Governor and the Florida Center for Universal Research to Eradicate Disease, etc. (04/28/09 Read 3rd time; Amendments adopted; Substituted HB 331; Laid on Table, Link/Identical/Similar/Compare passed, refer to HB 331)

*CS-918 Florida Kidcare Program:* (Sen. Rich) Clarifies the application of the Florida Kidcare program to include all eligible uninsured, low-income children. Removes a restriction on participation in the Florida Healthy Kids program. Authorizes certain enrollees to opt out of the Children's Medical Services network. Deletes provisions that place a limit on enrollment in Medikids and the Florida Healthy Kids full-pay program, etc. Effective date: 07/01/2009. (05/01/09 Senate Ordered enrolled)

*SB-944 Fair Housing Month:* (Sen. Garcia) Recognizes April 2009 as Fair Housing Month. (04/24/09 Introduced; Read 2nd time; Adopted)

*SB-970 Prostate Cancer Awareness Month/September 2009:* (Sen. Hill) Recognizes September 2009 as Prostate Cancer Awareness Month. (04/22/09 Introduced; Read 2nd time; Adopted)

*SB-972 Power to End Stroke:* (Sen. Hill) Urges support of the American Stroke Association's Power to End Stroke campaign and recognizes May 2009 as Power to End Stroke Month in Florida. (04/30/09 Introduced; Read 2nd time; Adopted)

*SB-996 Spinal Cord Injury Awareness Week:* (Sen. Rich) Recognizes November 16-22, 2009, as Spinal Cord Injury Awareness Week in Florida. (04/16/09 Introduced; Read 2nd time; Adopted)

*CS-1018 Guardians Ad Litem:* (Identical HB-679) (Sen. Joyner) Authorizes a person certified by a not-for-profit legal aid organization to serve as a guardian ad litem in a dissolution of marriage proceeding that does not involve child abuse, abandonment, or neglect. Requires that such person undergo a security background investigation and undergo training in a program developed by The Florida Bar, etc. Effective date: 07/01/2009. (04/29/09 Senate-Ordered enrolled)

*CS/CS/CS-1022 Medicare/Insurance/End-stage Renal Disease:* (Compare HB-675) (Sen. Altman) Requires that certain insurers issue a Medicare supplement policy to any individual who is younger than 65 years of age and eligible for Medicare due to having end-stage renal disease. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Read 2nd time; Amendments adopted; Substituted CS/CS-675; Laid on Table Link/Identical/ Similar/Compare passed, refer to CS/CS/HB 675)

*CS-1038 Landlord-Tenant Relations:* (Sen. Joyner) Requires the landlord or the landlord's agent to notify the mortgagee in writing within a specified period that the premise is being rented as a dwelling unit. Requires the landlord to give a copy of the notice to the tenant at the time the landlord notifies the mortgagee. Requires the landlord or the landlord's agent to notify the mortgagee of any change in the rental arrangement, etc. Effective date: 07/01/2009. (04/01/09 CS by Judiciary; Original bill laid on Table, refer to combined CS-1646)

*CS-1054 Homelessness:* (Compare HB-161, SB-597, SB-1040) (Sen. Crist) Increases and revises membership on the Council on Homelessness. Creates the Housing First program. Provides components of the program. Provides that local continuums of care that adopt the program be given funding priority. Directs the State Office on Homelessness to develop procedures for identifying and giving priority. Provides legislative findings and intent relating to young adults leaving foster care, etc. Effective date: 07/01/2009. (04/29/09 Placed on Special Order Calendar; Substituted CS/HB 597; Laid on Table, Link/Identical/Similar/ Compare passed, refer to CS-597)

*SB-1068 Spinal Muscular Atrophy Awareness Month:* (Sen. Rich) Recognizes August 2009 as Spinal Muscular Atrophy Awareness Month. (04/16/09 Introduced; Read 2nd time; Adopted)

*CS-1114 Highway Safety:* (Identical HB-481) (Sen. Richter) Provides an additional penalty for violations of provisions that require traffic to stop for a school bus, prohibit racing on highways, and prohibit reckless driving. Provides for distribution of moneys collected. Requires the Department of Highway Safety and Motor Vehicles to identify a person who has committed a second violation of specified provisions within a specified time period and requires such person to complete a driver improvement course, etc. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Read 2nd time; Amendment adopted; Substituted CS/CS-481; Laid on Table, Link/Identical/Similar/Compare passed, Refer to CS/CS/HB 481)

*CS/CS/CS-1128 Education/Children in Shelter Care or Foster Care:* (Sen. Rich) Provides conditions for district school board or court appointment of a surrogate parent for educational decision-making for a child who has or is suspected of having a disability. Requires access to a child's medical records and educational records if a child is placed in a shelter. Requires the court and citizen review panel in judicial reviews to consider testimony by a surrogate parent for educational decision-making, etc. Effective date: 07/01/2009. (04/28/09 In Messages; Received, referred to Calendar 04/29/09 Placed on Special Order Calendar; Substituted for CS-783; Read 2nd time; Read 3rd time; CS passed; 04/29/09 Senate Ordered enrolled)

*SB-1248 Public K-12 Instructional Materials:* (Sen. Wise) Deletes a provision that requires a public school principal to collect 50 to 75 percent of a textbook's purchase price from a student who has lost, destroyed, or damaged a textbook that has been in use for more than 1 year. Effective date: 07/01/2009. (05/01/09 Senate-Ordered engrossed, then enrolled)

*CS/CS/CS/CS-1276 Care of Children:* (Identical HB-381) (Sen. Storms) Creates the Zahid Jones, Jr., Give Grandparents and Other Relatives a Voice Act. Provides for the Department of Children and Families (DCF) to analyze certain

unaccepted reports to the central abuse hotline. Expands access to certain confidential reports of child abuse or neglect to include physicians, psychologists, and mental health professionals. Requires an attorney for DCF to provide notice to certain relatives of the child regarding upcoming judicial hearings, etc. Effective date: 07/01/2009. (04/27/09 Placed on Special Order Calendar; Read 2nd time; Amendments adopted; Substituted HB-381; Laid on Table, refer to HB 381)

*SB-1292 Department of Military Affairs/Welfare Transition Trust Fund:* (Sen. Fasano) Recreates the Welfare Transition Trust Fund within the Department of Military Affairs (DMA) without modification. Repeals a specified provision. Abrogates provisions relating to the termination of the trust fund, to conform. Effective date: 07/01/2009. (04/02/09 Read 3rd time; Substituted HB 7061; Laid on Table, refer to HB 7061)

*CS-1302 Members of the Military/Property Taxes/Credit:* (Sen. Gardiner) Proposes an amendment to the State Constitution to permit the Legislature to provide a tax credit by law to members of the United States military or its reserves, the United States Coast Guard or its reserves, or the Florida National Guard who received the homestead exemption at the time they are deployed on active duty outside the continental United States, Alaska, or Hawaii, etc. (04/30/09 Placed on Special Order Calendar; Substituted CS-833; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS-833)

*SB-1330 Silver Alert Grant Program:* (Similar HB-753) (Sen. Jones) Urges Congress of the United States to authorize the Silver Alert Grant Program to help establish and improve state-administered notification systems that assist in locating missing senior citizens and other individuals suffering from dementia-related disorders. (04/29/09 Senate-Ordered enrolled)

*CS/CS/CS-1540 Zero-tolerance Policies/Schools:* (Similar HB-997 Compare HB-785; SB-406; SB-2218) (Sen. Wise) Requires that a district school board having a policy authorizing corporal punishment as a form of discipline review its policy on said punishment at specified intervals. Deletes provisions relating to agreements with the county sheriff's office and local police departments. Provides that zero-tolerance policies do not require the reporting of petty acts of misconduct and misdemeanors to a law enforcement agency, etc. Effective date: 07/01/2009. (05/01/09 Senate Ordered enrolled)

*CS/CS-1616 Career and Adult Education:* (Sen. Oelrich) Renames the Division of Workforce Education within the DOE as the Division of Career and Adult Education. Revises the membership of the Seaport Security Officer Qualification, Training, and Standards Coordinating Council by replacing the chancellor of the Community College System with the Commissioner of Education. Provides an exception for adult high school students regarding certain prerequisites for high

school graduation, etc. Effective date: 07/01/2009. (05/07/09 Signed by Officers and presented to Governor)

*CS/CS-1840 Protecting Health/Surcharge on Tobacco Products:* (Sens. Deutch and Rich) (Compare HB-11; HB-477; HB-877; SB-850) Levies a surcharge on cigarettes equivalent to \$1 per standard pack. Requires that revenue from the surcharge to be deposited into the Health Care Trust Fund within AHCA. Provides enhanced penalties for the sale or possession of any quantity of counterfeit cigarettes. Levies a surcharge on tobacco products other than cigarettes. Provides for the administration of Indian-stamped cigarettes and other tobacco products, etc. Appropriation: \$50,000. Effective date: 07/01/2009. (05/08/09 Senate-Ordered engrossed, then enrolled)

*CS/CS-1868 Prescribed Drugs:* (Sen. Peaden) Authorizes the use of an institutional formulary system in a Class I institutional pharmacy at which, with certain exceptions, all medicinal drugs are administered from individual prescription containers to the patient and medicinal drugs are not dispensed on the premises. Specifies requirements for the policies and procedures of such an institutional formulary system, etc. Effective date: 07/01/2009. (04/29/09 Read 3rd time; CS passed)

*SB-1880 Breast Cancer/Referral Program/DOH:* (Sen. Peaden) Creates a referral program within the Department of Health for the early detection and treatment of breast cancer. Requires the department to provide clinical breast examinations and screening mammograms for low-income women between specified ages. Requires the organizations providing testing and treatment services to report to the department the insurer of each underinsured woman who is tested, etc. Effective date: 07/01/2009. (04/27/09 Placed on Special Order Calendar; Read 2nd time; Amendment adopted; Substituted CS-1269; Laid on Table, refer to CS-1269)

*CS/CS/CS-1986 Health Care:* (Sen. Gaetz) Designates Miami-Dade County as a health care fraud area of concern. Allocates certain funds recovered under the Florida False Claims Act to fund rewards for persons who report and provide information relating to Medicaid fraud. Authorizes the Agency for Health Care Administration (AHCA) to deny, revoke, or suspend the license of or fine a home health agency that bills the Medicaid program for medically unnecessary services, etc. Effective date: 07/01/2009. (04/29/09 Senate Ordered enrolled)

*SB-2038 Exceptional Students:* (Sen. Detert) Revises provisions relating to due process hearings for exceptional students. Provides that any party to a hearing related to gifted students may request that the findings or decision be reviewed by the district court of appeal. Authorizes a district school board to consider a change in placement for a student who has a disability if the student engages in behavior that violates the district school board's code of student conduct, etc. Effective date: 07/01/2009. (04/29/09 Placed on Special Order Calendar;



Substituted HB 7089; Laid on Table, Link/Identical/Similar/Compare passed, refer to HB 7089)

*SB-2064 Construction Defects:* (Identical HB-709) (Sen. Altman) Limits application of certain notices. Revises requirements and procedures for notice and opportunity to repair certain defects. Specifies that there are no construction lien rights under certain provisions of law for certain testing. Revises requirements for application to certain claims for legal relief. Revises application of notice requirements to certain earlier contracts. Specifies a required notice for certain contracts, etc. Effective date: 10/01/2009. (04/29/09 Senate Ordered enrolled)

*SB-2064 Construction Defects:* (Identical HB-709) (Sen. Altman) Limits application of certain notices. Revises requirements and procedures for notice and opportunity to repair certain defects. Specifies that there are no construction lien rights under certain provisions of law for certain testing. Revises requirements for application to certain claims for legal relief. Revises application of notice requirements to certain earlier contracts. Specifies a required notice for certain contracts, etc. Effective date: 10/01/2009. (04/29/09 Senate Ordered enrolled)

*CS-2574 Information Technology:* (Sen. Haridopolos) Deletes an obsolete provision relating to duties of the Legislative Budget Commission. Revises the duties of the Agency for Enterprise Information Technology. Creates the Office of Information Security within the agency. Provides that the Northwood Shared Resource Center is an agency established with the Department of Children and Families (DCF). Establishes a state e-mail system as an enterprise information technology service, etc. Effective date: 07/01/2009. (05/15/09 Signed by Officers and presented to Governor)

*CS/CS-2612 Substance Abuse Services:* (HB-1493; SB-1564; SB-2160) (Sen. Wise) Establishes priority populations of persons who are eligible for services funded by the Department of Children and Families (DCF). Deletes a provision that authorizes DCF to establish a pilot project to serve certain persons who qualify to receive substance abuse or mental health services in a specified district. Provides that a crisis stabilization unit is exempt from licensure. Provides that inmate substance abuse programs are exempt from level 2 background screenings, etc. Effective date: 07/01/2009. (04/29/09 Senate Ordered enrolled)

*SB-2716 Alzheimer's Disease/Caregiver/Health Care Provider:* (Sen. Wise) Honors the caregivers and health care providers of those who have Alzheimer's disease, and encourages participation in National Memory Screening Day. (03/24/09 Introduced; Read 2nd time; Adopted)

*SB-2720 Amyotrophic Lateral Sclerosis Awareness Month:* (Sen. Ring) Recognizes May 2009 as Amyotrophic Lateral Sclerosis Awareness Month in the

State of Florida. (04/29/09 Introduced; Read 2nd time; Adopted; Also see HR 9045 Adopted)

*SB-2732 Florida National Guard:* (Sen. Baker) Honors the Florida National Guard and recognizes March 24, 2009, as Florida National Guard Day. (03/24/09 Introduced; Read 2nd time; Adopted)

*CS-01 Safety Belt Law Enforcement:* (Similar CS-344) (Rep. Glorioso) (Co-Sponsors Reps Abruzzo; Adkins; Ambler; Anderson; Aubuchon; Brandenburg; Brise; Bullard; Carroll; Chestnut; Clarke-Reed; Culp; Domino; Fetterman; Fitzgerald; L. Garcia; Gibbons; Gonzalez; Hays; Heller; Holder; Homan; Hooper; and others) Creates Dori Slosberg and Katie Marchetti Safety Belt Law; deletes provision exempting certain passengers from using safety belt; provides safety belt exemption for motor vehicles not required to be equipped with safety belts under federal law; deletes requirement for enforcement of Florida Safety Belt Law as secondary action. Effective date: 06/30/2009. (04/29/09 Placed on Special Order Calendar; Substituted CS/SB 344; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/SB 344)

*HB-109 Clinical, Counseling, and Psychotherapy Services:* (Identical SB-498) (Rep. Porth) Provides for waiver of confidentiality and privileged communications when, in clinical judgment of person licensed or certified under ch. 491, F.S., there is clear and immediate probability of certain harm; provides immunity from liability for, and prohibits causes of action against, such person for disclosure of otherwise confidential communications under such circumstances. Effective date: 07/01/2009. (04/27/09 House Ordered enrolled)

*HB-131 Federal Funding for Home Health Services/Elders:* (Compare SB-152) (Rep. Pafford) Urges Congress to support federally funded and state-funded home and community-based services for individuals with disabilities of any age, especially elders. (04/29/09 Placed on Special Order Calendar; Substituted CS/SM 152; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/SM 152)

*CS-185 Access to Health Care:* (Compare SB-702) (Rep. Hudson) (Co-sponsor Reps. Crisafulli; Hays; Holder; Nehr; Tobia) Establishes Florida Dental Health Access Task Force for specified purposes; specifies task force membership; provides for appointments, meetings, and filling vacancies; requires task force to develop recommendations and report to Legislature; provides for termination; expands membership of board of directors of Florida Healthy Kids Corporation, etc. Effective date: 07/01/2009. (05/15/09 Signed by Officers and presented to Governor)

*HB-209 Revised Uniform Anatomical Gift Act:* (Identical SB-492) (Rep. Schwartz) Enacts the Revised Uniform Anatomical Gift Act; revises numerous provisions relating to anatomical gifts, including manner of making or revoking

gifts and persons who may make or receive gifts; requires specified persons to make reasonable search identifying certain persons as donor or persons who have refused; specifies rights and duties of procurement organizations when an individual has been referred to them, etc. Effective date: 10/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted CS/CS/SB 766; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS/SB 766)

*CS-249 Physician Assistants:* (Identical SB-720) (Rep. Patronis) (Co-Sponsor Rep. Hooper) Provides that a supervising physician may not be required to review and cosign physician assistants' charts or medical records; deletes certain supervisory physician requirements related to prescribing and dispensing medications noted in physician assistants' appropriate medical records. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted CS/SB 720; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/SB 720)

*CS-281 Florida Prepaid Tuition Scholarship Program:* (Rep. Weinstein) Provides for aggregation into one pool per program of unused student credit hours purchased by private sector entity; provides for reissuance of such credit hours as prepaid tuition scholarships for eligible students. Effective date: 07/01/2009. (04/29/09 House Ordered enrolled)

*HB-285 Medicaid Low-Income Pool/Disproportionate Share:* (Similar SB-556) (Rep. Patronis) (Co-sponsors Reps. Burgin; Flores; Hudson; Zapata) Repeals Low-Income Pool Council; requires Agency for Health Care Administration (AHCA) to make recommendations to Legislature regarding financing and distribution of low-income pool and disproportionate share funds and to submit report to Governor and Legislature annually. Effective date: 07/01/2009. (05/15/09 Signed by Officers and presented to Governor)

*CS/CS-315 Florida Prepaid College Program:* (Identical SB-606) (Rep. Van Zant) Revises provisions relating to transfer of benefits received from Florida Prepaid College Program to private and out-of-state colleges and universities and to career centers. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted CS/CS/SB 606; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS/SB 606)

*HB-331 Public Health Initiatives:* (Similar SB-902) (Rep. Skidmore) Establishes Florida Public Health Institute, Inc., and deletes provisions relating to Florida Public Health Foundation, Inc.; provides for institute to operate as not-for-profit corporation; requires annual reports to Legislature. Effective date: 07/01/2009. (04/30/09 House Concurred; Passed as amended; Ordered engrossed, then enrolled)

*CS/CS-371 Community Residential Homes:* (Compare SB-1124) (Rep. Stargel) (Co-Sponsor McKeel) Provides that community residential homes with six or

fewer residents in planned residential communities are not required to obtain local government approval regardless of their proximity to each other. Effective date: 07/01/2009. (04/29/09 Placed on Special Order Calendar; Substituted SB 1124; Laid on Table, refer to SB 1124)

*HB-381 Care of Children:* (Rep. N. Thompson) Creates Zahid Jones, Jr., Give Grandparents and Other Relatives a Voice Act; provides for Department of Children and Families (DCF) to analyze certain unaccepted reports to central abuse hotline; requires information to be provided to reporter; expands access to certain confidential reports of child abuse or neglect to include physicians, psychologists, and mental health professionals, etc. Effective date: 07/01/2009. (05/15/09 Signed by Officers and presented to Governor)

*CS/CS/CS-433 Purchasing of Medicaid Prescribed Drugs:* (Identical SB-894) (Rep. K. Roberson) Requires providers of Medicaid-prescribed drugs to give purchasing preference to drugs manufactured or repackaged at certain facilities; defines the term *qualifying facility*; provides for Department of Health's (DOH) recognition of qualifying facility; requires that DOH adopt procedures and criteria for recognition of qualifying facility. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted CS/CS/SB 1868; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS/SB 1868)

*CS/CS-481 Highway Safety:* (Identical SB-1114) (Rep. Kreegal) Provides additional penalty for violations of provisions that require traffic to stop for school bus, prohibit racing on highways, and prohibit reckless driving; provides for distribution of funds to trauma centers; requires DHSMV to identify persons who have committed second violations of specified provisions within specified time period and require such persons to complete a driver improvement course. Effective date: 07/01/2009. (04/30/09 House Concurred; CS passed as amended; Ordered engrossed, then enrolled)

*HB-509 Veterans:* (Identical SB-644) (Rep. Zapata) Revises exemption from license or permit fees required for improvements to dwelling owned by disabled veteran if improvements are for purpose of making dwelling safe, etc. Effective date: 07/01/2009 (04/29/09 House Ordered enrolled)

*CS/CS-535 Mental Illness:* (Identical SB-456) (Rep. Drake) Requires law enforcement agency that transports persons to receiving facility to have memorandum of understanding with facility; requires that custody of person who is transported to receiving or treatment facility be relinquished to responsible person at facility; specifies that psychiatric examination by certain personnel be conducted face-to-face or by electronic means. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted CS/CS/SB 456; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS/SB 456)

*CS-573 Health Facilities:* (Identical SB-620) (Rep. O'Toole) Redefines term *health facility* for purpose of allowing additional types of health facilities to receive assistance from a health facilities authority (04/28/09 Placed on Special Order Calendar; Substituted CS/SB 620; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/SB 620)

*HB-597 Homelessness:* (Compare HB-161) (Rep. Reed) Establishes homelessness prevention grant program; requires grant applicants to be ranked competitively and provides preference for certain applicants; provides eligibility requirements and grant limitations and restrictions; requires lead agencies for local homeless assistance continuum of care to track, monitor, and report on assisted families for specified period of time, etc. Effective date: 07/01/2009. (05/01/09 Concurred; CS passed as amended; Ordered engrossed, then enrolled)

*CS-635 Military Affairs:* (Compare SB-206) (Rep. Scionti) Revises applicability of provisions with respect to immunity of National Guard members ordered into state active duty from penalization by employers; provides for entitlement of National Guard members returning to work following state active duty to seniority and other rights and benefits; provides that such members shall not be discharged from employment except for cause, etc. Effective date: 07/01/2009. (05/01/09 House Ordered enrolled)

*CS/CS-675 Medicare Supplement Policies:* (Compare SB-1022) (Rep. Workman) Expands eligibility to enroll in Medicare supplemental policy to specified additional individuals having end-stage renal disease; expands prohibition against exclusions based on pre-existing conditions. Effective date: 07/01/2009. (04/29/09 House-Ordered enrolled)

*CS/CS-679 Guardian Ad Litem:* (Identical SB1018) (Rep. Stargel) Authorizes person certified by not-for-profit legal aid organization to serve as guardian ad litem in dissolution of marriage proceeding that does not involve child abuse, abandonment, or neglect; requires that such person undergo security background investigation and undergo training in program developed by Florida Bar; provides for training developed by curriculum committee of not-for-profit org. pending development of bar's program, etc. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted CS/SB 1018; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS-1018)

*CS/CS-685 Educational Dollars for Duty Program:* (Compare SB-442) (Rep. Proctor) Revises provisions relating to Educational Dollars for Duty educational assistance program; revises duties of Adjutant General with respect to program; removes duties of Board of Governors (BOG) and State Board of Education (SBE) with respect to program; provides for education assistance for members of Florida National Guard who enroll in nonpublic institutions of higher learning or public vocational-technical programs, etc. Effective date: 07/01/2009.

(05/01/09 House-Ordered enrolled)

*SB-709 Construction Defects:* (Rep. Aubuchon) Revises requirements and procedures for notice and opportunity to repair certain defects; specifies there are no construction lien rights under certain provisions of law for certain testing; provides exception; provides requirements for parties to exchange specified materials in actions claiming construction defects; provides penalties; revises requirements for application to claims for legal relief, etc. Effective date: 10/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted SB 2064; Laid on Table, Link/Identical/Similar/Compare passed, refer to SB 2064)

*HB-753 Silver Alert Grant Program:* (Similar SB-1330) (Rep. Anderson) Urges Congress to pass legislation creating Silver Alert Grant Program that provides funds to establish and improve state notification systems to locate and return missing senior citizens and other individuals suffering from dementia-related disorders. (04/29/09 Placed on Special Order Calendar; Substituted SM 1330; Laid on Table, Link/Identical/Similar/Compare passed, refer to SM 1330)

*HB-767 Mental Health and Substance Abuse Services:* (Similar SB-892 ) (Rep. Fitzgerald) Authorizes the Agency for Health Care Administration (AHCA) to license facilities that provide services as integrated adult mental health crisis stabilization units and addictions receiving facilities; provides eligibility criteria for treatment services; requires Department Children & Families (DCF) to adopt rules. Effective date: 07/01/2009. (05/15/09 Signed by Officers and presented to Governor)

*CS-783 Children in Shelter Care or Foster Care/Education:* (Identical SB-1128) (Rep. Kelly) (Co-Sponsor Rep. Porth) Provides conditions for court or district school board appointment of surrogate parent for educational decision making for certain children who have or are suspected of having disability; provides certain access to medical and educational records; provides access to free public education for children known to Department of Children and Families (DCF); authorizes certain temporary exemptions from requirements for school attendance and school-entry health examinations. Effective date: 07/01/2009. (04/29/09 House Placed on Special Order Calendar; Substituted CS/CS/CS-1128; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS/CS-1128)

*HB-813 Instructional Materials for K-12 Public Education:* (Identical SB-1248) (Rep. Hays) Deletes provision that restricts cost to students for replacement of certain instructional materials that are lost, destroyed, or damaged. Effective date: 07/01/2009. (04/28/09 Placed on Special Order Calendar; Substituted SB 1248; Laid on Table, Link/Identical/Similar/Compare passed, refer to SB 1248)

*CS-833 Deployed Military/Homestead Ad Valorem Tax Credit:* (Identical SB-1302) (Rep. Horner) Proposes amendment to s. 3, Art. VII of State Constitution

to authorize Legislature to provide tax credit to members of U.S. military or its reserves, U.S. Coast Guard or its reserves, or Florida National Guard who received homestead exemption when deployed on active duty outside continental U.S., Alaska, or Hawaii; bases credit upon number of days in calendar year person is deployed on active duty outside continental U.S., Alaska, or Hawaii, etc. (05/01/09 House Ordered enrolled)

*CS-897 Controlled Substances:* (Linked HB-937; Identical SB-462; Compare HB-143; HB583; SB-440; SB-614; SB1356) (Rep. Llorente) Requires Agency for Health Care Administration (AHCA) to establish statewide, comprehensive electronic system to monitor prescribing and dispensing of controlled substances in Schedules II-IV; provides reporting requirements; provides exemptions; requires prescribing or dispensing pharmacists and practitioners to submit information in certain format; requires DOH and regulatory boards to adopt rules; requires that AHCA costs be paid through federal, private, or grant funding sources. Effective date: 07/01/2009. (04/30/09 Substituted CS/CS/CS/CS-462; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS/CS/CS-462)

*CS/CS/CS-935 Area Agencies on Aging:* (Similar SB-770) (Rep. Bogdanoff) Requires Department of Elder Affairs (DOEA) to contract with area agencies on aging to fulfill programmatic and funding requirements; revises responsibilities of governing body of area agency on aging and executive director of agency; revises definition of *lead agency*; revises requirements with respect to request for proposal process for designation of lead agency for community care for elderly; provides construction with respect to jurisdiction to entertain disputes, etc. Effective date: 07/01/2009. (05/15/09 Signed by Officers and presented to Governor)

*HB-991 School Improvement and Accountability:* (Compare CS-1682 ) (Rep. Grady) Designates Florida's Equal Opportunity in Education Act; revises provisions relating to powers and duties of district school boards to implement state system of school improvement and education accountability; requires that State Board of Education comply with federal Elementary and Secondary Education Act (ESEA); requires that DOE categorize public schools annually based on school grade and level and rate of change in student performance, etc. Effective date: 07/01/2009. (04/27/09 House-Ordered enrolled)

*CS-1005 Charter Schools:* (Rep. Nelson) Revises provisions and duties relating to charter schools and charter technical career centers, charter applicants, sponsors, governing boards, and Florida Schools of Excellence Commission; establishes criteria and requirements for charter schools and charter technical career centers that have financial weaknesses or are in state of financial emergency; provides for corrective action and financial recovery plans, etc. Effective date: 07/01/2009. (04/29/09 Placed on Special Order Calendar;

Substituted CS/CS/SB 278; Laid on Table, Link/Identical/Similar/Compare passed, refer to CS/CS-278)

*HB-1021 Department of Transportation:* (Similar SB-932; Compare HB-441; HB-989; HB-1019; SB-284; SB-294; SB-856; SB-1306) (Rep. Aubuchon) Requires study of alternatives to Interstate 95 corridor; provides for salary and benefits of executive director of Florida Transportation Commission; counties to incur costs related to utility facilities, claims relating to maintenance contracts; department to pay proposal costs, public pay telephones and advertising thereon, toll collection systems, business partnership pilot program, Old Cutler Road, etc. (05/15/09 Signed by Officers and presented to Governor)

*CS-1409 Interstate Placement of Children:* (Similar S-2240) (Rep. Sands) Authorizes Department of Children and Families (DCF) to execute new interstate compact on placement of children; provides purpose, applicability, jurisdiction, evaluation of placement, approval by child-placing agency in receiving state prior to placement of child, administrative and judicial review, and responsibilities of child-placing agency; establishes Interstate Commission for Placement of Children, etc. (04/29/09 House-Ordered enrolled)

*HB-1439 Confidential Records/Children and Vulnerable Adults:* (Similar SB-126) (Rep. Nehr) Requires case file of child under supervision or in custody of Department of Children and Families (DCF) to be maintained in complete and accurate manner; specifies who has access to case file and records therein; provides sanctions and penalties for specified failure to provide records in case file or failure to provide access within reasonable time; authorizes court to directly release child's records to certain entities, etc. Effective date: 07/01/2009. (05/02/09 Died in Committee on Civil Justice and Courts Policy, Link/Identical/Similar/Compare passed, refer to CS/CS-126) exemption

Representative



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