

# Minutes



## GOVERNOR'S COMMISSION ON DISABILITIES BUSINESS MEETING

Monday November 21, 2005 5:00 – 7:00 PM

**John O. Pastore Center** (Formerly the Howard Center)

**- 41 Cherry Dale Court,  
Cranston, RI 02920-3049**

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<b>Secretary:</b>	Bob Cooper
<b>Attendees:</b>	Paul Choquette (Chair); John McDonald (Vice Chair); Jeanne Behie; Sharon Brinkworth; Frederick Burke; Dr. Judith Drew; Binyamin Efreom; Dr. Kate McCarthy-Barnett; Ronald McMinn; Dr. Orestes Monteracy; Bill Nieranowski; James Pitassi; Lorna Ricci; Patricia Ryherd; & Rev. Gerard Sabourin
<b>Excused:</b>	Rosemary Carmody; Regina Connor; Joseph Corrente; Victoria Ferrara; Scott Greco; Karen O'Connell-Lyons; Arthur Plitt; & Lou Salerno

### Minutes

**5:00 PM Call to Order, Introductions and Acceptance of Minutes Paul Choquette, Chair.**

Discussion: Chair called the meeting to order at 5:00 PM.

Members and staff introduce themselves

MOTION: To accept the minutes of the previous meeting as mailed BN/RMcM passed unanimously

#### **5:05 PM Action Items**

##### **1) 2006 Legislative Package Bob Cooper**

The Commission's Operating Regulations (Bylaws) provide for a Legislation Committee with the following responsibilities

##### 1) Legislation Committee

- a) *The Legislation Committee shall review and comment on local, state, and federal legislation concerning persons with disabilities. A quorum for committee meetings shall be three (3) members, at least two (2) of who shall be commission members.*
- b) *The Legislation Committee shall conduct public hearings to elicit public comments prior to the development of the Commission's Legislative Package.*
- c) *The committee shall prepare and mail to all commissioners, at least two (2) weeks prior to the Commission's Fall Legislative Meeting:*

- i) Proposed a Legislative Package for the commission to review; and
  - ii) A Scope of Review that outlines the areas of general assembly legislation that the committee should be empowered to review and comment on during the upcoming legislative session.
- d) *The Legislation Committee shall prepare and disseminate statements as to the impact of legislation being considered by the RI General Assembly, on the quality of life of individuals. The committee is authorized to:*
- i) Review all legislation, introduced into the General Assembly, within the approved scope of review;
  - ii) Send a statement concerning the impact (beneficial or harmful) of bills, along with reasons, to the appropriate General Assembly committees, legislative leaders and the Governor;
  - iii) Include comments on the need for amendments to those bills; and
  - iv) Provide statement of impact on any legislation which the Governor's Office or the General Assembly request, even if outside the approved scope of review.
- e) *Only the Commission or the Executive Committee is authorized to announce support or opposition to bills.*
- f) *Any legislation outside the committee's approved scope of review that in the committee's judgment would have a dangerous impact on the mission of the Commission may be referred to the Commission or Executive Committee along with the committee's comments.*
- g) *All other reports, statements, etc. of the committee, except for those mentioned in subsection d) above, shall be submitted to the commission for its review, modification, and adoption.*

## **Status of GCD 2005 Legislative Package**

### **Access to Comprehensive Health Care for people with disabilities through:**

1. Expand Home Care Services, so people can remain living in their community;
2. Adjust state's income eligibility level for Medicaid for persons with disabilities to match the Family Independence Program level and then adjust annually by the cost of living **Sen. Lanzi [S 0261]**;
3. Personal Care Assistance:
  1. Increase the number of Medicaid Personal Care Attendants slots from 80 to 150 (**in Budget**) and
  2. Provide a cost of living adjustment for personal care assistance services **Sen. Gallo [S 0413]**; **Accomplished** a 2.2% (\$0.19) increase on January 1<sup>st</sup> for Medicaid funded Personal Care Assistance.
4. Establish a managed health care system for adults with disabilities within Medicaid **Rep. Naughton [H 5734] & Sen. Paiva Weed [S 801]**; **Accomplished** plan to be finalized by April 1<sup>st</sup> and service to start after July 1<sup>st</sup>.
5. Provide state funded health insurance coverage (including prescription drug coverage) during the 2-year wait for SSDI recipients to be covered by Medicare **Sen. Gibbs [S 0171]**;
6. Establish of program to provide appropriate in-state services for people with traumatic brain injury, probably via the Traumatic Brain Injury Trust Fund legislation **Sen. Blais [S 0114]**; **Accomplished** Funding & licensure to create the first in-state transitional housing/treatment services for persons with traumatic brain injury.

7. Amend the State Medicaid Plan to include for “medically needy persons with disabilities, the same benefits that are provided to “categorically needy” persons (outpatient hospital clinic and emergency room services; hearing aids and molded shoes; Podiatry Services; one pair of eyeglasses [frames, lenses, dispensing fees] every other year). The habilitation waiver should be expanded to include all eligible recipients who would benefit from physical therapy, occupational therapy, speech/language therapy, psychological therapy, rehabilitation services **Sen. Perry [S 0238] & Rep. Slater [H 5382]**.

**Expand Employment Opportunities for adults with disabilities through the creation/maintenance of work-related infrastructure:**

8. Fully fund RIDE & RIPTA as recommended by RIPEC in its Rhode Island at the Crossroads – A RIPEC Public Policy Issues Brief;
9. Fully fund Medicaid Buy In, for personal care services, job coaches, and other support services available for people with disabilities who are working;
  - **Affordable and Accessible Housing** including:
10. Fully Fund modifications to homes/apartments owned or rented by families with disabled members (expand to include Medicare only recipients) and create flexible funding plan such as cash and counseling for families to modify home or yard; and
11. Fully Fund the Neighborhood Opportunities Program to expand the public and private market of affordable/adaptable housing **[H 5270 Article 6] Rep. Fox [H 5175] and Sen. Felag [S651] Accomplished**
12. The withdrawal of 05 H-5270 Article 14 Medical Assistance For Certain Disabled Children which would require co-payments for Medicaid participation for families above 250 percent of the federal poverty limit, who have enrolled their children with disabilities, whose level of disability would otherwise require institutionalization, the Katie Beckett program. **Accomplished**

The Legislation Committee determined the following items from the 2005 Legislative Package have been accomplished and should be monitored for implementation:

1. Personal Care Assistance;
2. Medicaid Managed Care Option for adults with disabilities;
3. In-state Services for People with Traumatic Brain Injury;
4. Medicaid Buy In;
5. Neighborhood Opportunities Program; and
6. Defeating the Medicaid Katie Beckett Program’s 5% Premium

The Legislation Committee reviewed the following proposal from the Public Forum Working Groups for possible inclusion in the 2006 Legislative Package:

**Accessibility Working Group**

- (a.) No legislative recommendations

**Assistive Technology Working Group**

- (2) Grant the Public Utilities Commission the authority to implement reduced rate for internet access for people with disabilities of low income
- (3) Funds to increase the capacity of clinicians (pre-service training and in-service graduate training) to do assistive technology assessments
- (4) Increase State dollars Feasibility Study Activities of Daily Living related Assistive Technology

### **Education & Employment Working Group**

- (5) Enact awareness and guidelines for employers, and educational institutions relating to chemical sensitivities resulting in job loss, increased sick days, behavioral concerns and difficulty learning of students.

### **Family & Community Support Working Group**

- (6) Designate a state agency to respond **to abuse of non-elderly persons with disabilities**
- (7) Mandate commercial coverage for children with special health care needs
- (8) Designate DBR or AG's office to advocate for persons with disabilities in areas such as disability insurance claims

### **Health Care Working Group**

- (9) Commercial insurers need to be held accountable to provide the medical services their members need; particularly those with disabilities. Commercial insurers' practices shift costs for providing these services to the state; this is contributing to the rising cost of Medicaid
- (10) Fund a Dental Benefit Management (DBM) program for Medicaid beneficiaries
- (11) Fund:
  - (a.) An expansion of DEA volunteer guardianship program to allow under 60 to participate in program, or
  - (b.) A clinical coordinator for a statewide assessment team composed of residents, SW interns and student nurses etc. or
  - (c.) Develop a college credit/continuing education credit course (ie web based) on differential diagnosis, decision-making assessment, independence training, behavioral training, client empowerment, etc for providers or
  - (d.) Develop a training for repayee services by provider agencies or expand capacity for neurological, neuro-psychology, psychiatric services in hospital settings
- (12) Determine if MS drugs are on any Part D formularies, if not, then include on RIPAE
- (13) Establish a disability ombudsman position
- (14) Improve underinsured grievance process such as Katie Beckett
- (15) Legislation or regulation to protect access to health care, nursing homes, schools and other necessary services for those sickened by chemicals in these places. (Might include requirements for in-service training, as per 3 b.) At a minimum, require institutions to adopt and carry out fragrance-free, less-toxic cleaning product and pest control policies
- (16) Funding for individuals who are dual diagnosis or have severe disabilities that currently do not fall under an existing MHRH priority diagnosis population. Young adults 18-21 experience difficulty accessing behavioral health services as they fall in the gap between two state agencies (DCYF and MHRH)

### **Housing Working Group**

- (17) All New construction should be visit-able with accessible bath rooms on first floor.
- (18) Funding for Shelters accessibility renovations thru the Neighborhood Opportunities Program funds or other to reduce the cost of complying by community group owners

### **Transportation**

- (19) Fund incentives to increase the use of private entrepreneurial businesses for transportation, and making use of other vehicles like senior center vans, school buses, etc. to fully use existing resources in the community

After reviewing the 19 Legislative proposals from the Public Forum Working Groups, the Committee selected the following to add to the 2006 Legislative Package:

- (1) Designation of a state agency for providing protective services to abuse of non-elderly persons with disabilities and the designation of the Attorney General's Health Care Advocate's Office to advocate for persons with disabilities in areas such as disability insurance claims
- (2) Establishment of minimum accessibility standards regarding fragrance-free, less-toxic cleaning product and pest control policies, for health care facilities, nursing homes, and schools to ensure persons who are chemically sensitive can access necessary services without being sickened by chemicals used at the facilities.
- (3) Develop a Dental Benefit Management (DBM) program for Medicaid beneficiaries (and raise the reimbursement rate)

The maximum number of issued for the 2006 Legislative Package is 12 (including both issues continued from the 2005 Legislative Package and those added from this year's public forums.

**The Legislation Committee Recommends the following be adopted as the Commission's 2006 Legislative Package:**

- (1) Designation of a state agency for providing
  - (a.) protective services to abuse of non-elderly persons with disabilities and
  - (b.) the designation of the Attorney General's Health Care Advocate's Office to advocate for persons with disabilities in areas such as disability insurance claims;
- (2) Establishment of minimum accessibility standards regarding fragrance-free, less-toxic cleaning product and pest control policies, for health care facilities, nursing homes, and schools to ensure persons who are chemically sensitive can access necessary services without being sickened by chemicals used at the facilities
- (3) Expand Home Care Services so people can remain living in their community;
- (4) Adjust state's income eligibility level for Medicaid for persons with disabilities to match the Family Independence Program level and then adjust annually by the cost of living;
- (5) Provide state funded health insurance coverage (including prescription drug coverage) during the 2-year wait for SSDI recipients to be covered by Medicare [by resolution or law];
- (6) Amend the State Medicaid Plan to include for "medically needy" persons with disabilities, the same benefits that are provided to "categorically needy" persons (outpatient hospital clinic and emergency room services; hearing aids and molded shoes; Podiatry Services; one pair of eyeglasses [frames, lenses, dispensing fees] every other year). The habilitation waiver should be expanded to include all eligible recipients who would benefit from physical therapy, occupational therapy, speech/language therapy, psychological therapy, rehabilitation services
- (7) Fully fund RIDE & RIPTA as recommended by RIPEC in its Rhode Island at the Crossroads – A RIPEC Public Policy Issues Brief;
- (8) Fully Fund modifications to homes/apartments owned or rented by families with disabled members (expand to include Medicare only recipients) and create flexible funding plan such as cash and counseling for families to modify home or yard; and
- (9) Develop a Dental Benefit Management program for Medicaid beneficiaries (reimbursement rate)

**MOTION: To Adopt the 2006 Legislative Package:**

- (1) Designation of a state agency for providing
  - (a.) protective services to abused of non-elderly adults (18-64) with severe impaired and
  - (b.) the designation of the Attorney General's Health Care Advocate's Office to advocate for persons with disabilities in areas such as health care insurance claims;
- (2) Establishment of minimum accessibility standards regarding fragrance-free, less-toxic cleaning product and pest control policies, for health care facilities, nursing homes, and schools to ensure persons who are chemically sensitive can access necessary services without being sickened by chemicals used at the facilities [by regulation or law];
- (3) Fully fund RIDE & RIPTA as recommended by RIPEC in its Rhode Island at the Crossroads – A RIPEC Public Policy Issues Brief;
- (4) To change the Open Meeting Law's ban on the use of telephones allow the use of telephones as a reasonable accommodations for members of boards who are unable to be physically present at the meeting because of a disability;
- (5) Fully Fund modifications to homes/apartments owned or rented by families with disabled members (expand to include Medicare only recipients) and create flexible funding plan such as cash and counseling for families to modify home or yard;
- (6) To advocate during the Medicaid Budget Hearing the following:
  - (a.) Expansion of Home Care Services so people can remain living in their community;
  - (b.) Adjustment of state's income eligibility level for Medicaid for persons with disabilities (100% of the federal poverty level) to match the Family Independence Program (180% of the federal poverty level)
  - (c.) Provide state funded health insurance coverage (including prescription drug coverage) during the 2-year wait for SSDI recipients to be covered by Medicare [by resolution or law];
  - (d.) Amendment of the State Medicaid Plan so "medically needy" persons with disabilities, receive the same benefits that are provided to "categorically needy" persons (outpatient hospital clinic and emergency room services; hearing aids and molded shoes; Podiatry Services; one pair of eyeglasses [frames, lenses, dispensing fees] every other year). The habilitation waiver should be expanded to include all eligible recipients who would benefit from physical therapy, occupational therapy, speech/language therapy, psychological therapy, rehabilitation services;
  - (e.) Develop a Dental Benefit Management program for Medicaid beneficiaries (reimbursement rate) OM/RMcM passed, BE abstained.

**6:00 PM**

**RECESS FOR DINNER**

## **2) Legislation Committee's 2006 Scope of Review**

*Normally Committees submit reports, etc. to the full Commission before sending them on the Governor or other officials. Due to the nature of the Legislative Session, that is not possible within the short time constrains for comment. As a result:*

*“(d) The Legislation Committee shall prepare and disseminate statements as to the impact of legislation being considered by the RI General Assembly, on the quality of life of individuals. The committee is authorized to:*

- i) Review all legislation, introduced into the General Assembly, within the approved scope of review;
- ii) Send a statement concerning the impact (beneficial or harmful) of bills, along with reasons, to the appropriate General Assembly committees, legislative leaders and the Governor;
- iii) Include comments on the need for amendments to those bills; and
- iv) Provide statement of impact on any legislation which the Governor's Office or the General Assembly request, even if outside the approved scope of review.”

The Legislation Committee reviewed the scope of its review during the past year, realized it had taken positions on too many bills and chose to reduce its scope for 2006. The categories it choose from included: Budget (5)<sup>1</sup>; Civil Rights (15); Confidential Information (3); Employment (1); Health Care Services (36); Housing (9); Human Services (4); Life Safety & Health / Disability Prevention (15); People with Disabilities (4); Special Education (3); Transportation (6); appropriations (1); education; financial assistance (9); government operations; health care/rules (5); taxes (5) = 136 of a possible 422. Prevailed in 63 instances.

Legislation Committee recommend the 2006 Scope of Review focus only on bills in the following categories:

1. Civil Rights;
2. Health Care Services;
3. Housing;
4. Disability Prevention;
5. Special Education;
6. Transportation

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<sup>1</sup> The number in () indicates how many bills in that category the Legislation Committee adopted a Legislative Impact Statement and sent it to the appropriate General Assembly Committees and the Governor.

MOTION: To as adopt the Legislation Committee's Scope of Review as revised to read as follows

1. Civil Rights;
2. Health Care Services;
3. Housing;
4. Disability Prevention;
5. Special Education;
6. Transportation
7. Employment JD/BN passed unanimously

### 3) Schedule of Meeting for 2006

#### RI Governor's Commission on Disabilities

#### **2006 Public Meeting Schedule**

Unless otherwise noted all meeting will be at the Commission's Office  
John O. Pastore Center – 41 Cherry Dale Court, Cranston, RI 02920-3049  
401-462-0100, tty: 462-0101, fax: 462-0106, email: [disabilities@gcd.ri.gov](mailto:disabilities@gcd.ri.gov)  
website: [www.disabilities.ri.gov](http://www.disabilities.ri.gov)

Meeting times/dates subject to change.

#### **Commission**

**Responsible for:** Setting policy for the commission, recommending the Commission's budget, and adopting an operational plan, connecting the different elements within the Commission.

**Meets:** 5:00 PM Monday; 02/06, 04/03, 07/17, & 11/06 and  
Annual Meeting: 5 PM Wednesday 09/06, 5 PM Thursday 09/07 or Saturday  
09/09 @ 9:00 – 1:30 PM

#### **Accessibility Committee**

**Responsible for:** Increasing access to government provided (or funded) services by people with disabilities, through the removal of environmental and /or communication barriers.

**Meets:** 2:30 PM Monday; 01/23, 03/20, 05/15, 06/26, 09/18 & 11/20

#### **Disability Business Enterprise Committee**

**Responsible for:** Enhancing the competitiveness of businesses owned by people with disabilities, rehabilitation agencies, and businesses where people with disabilities provide 60 % of the labor.

**Meets:** 9:00 AM Wednesday; 01/11, 02/08, 03/08, 06/14, 10/11

#### **Disability Parking Committee**

**Responsible for:** Improving the enforcement of disability parking laws through monitoring of state/local enforcement efforts.

**Meets:** 11:00 AM Thursday; 02/09, 03/09, 04/06, & 05/11

### **Election Assistance Committee**

**Responsible for:** Overseeing the Election Assistance for Individuals with Disabilities: develop training modules to be used by election officials and poll place workers to better prepare them to meet a variety of voter needs; recruit people with disabilities to serve as trained poll workers; and/or serve, on an as-needed basis, as advisors to the Commission, the RI Disability Law Center, Secretary of State's Election Division, and the State Board of Elections' ongoing attempts to ensure polling site accessibility and greater participation by people with disabilities in the electoral process.

**Meets:** 9:00 AM Wednesday; 01/25 03/22, 05/24, 07/26, 09/27 & 11/29

### **Employment Committee**

**Responsible for:** Overseeing implementation of the Human Resource Investment Council's Promoting Work Grant and the provision of training and technical assistance regarding the employment provisions of the ADA.

**Meets:** 9:00 AM Thursday; 01/26, 03/30, 05/25, 7/27, 9/28, & 11/30

### **50<sup>th</sup> Anniversary Planning Committee**

**Responsible for:** Planning and Coordinating 50<sup>th</sup> Anniversary Events Oct. 23, 2006 – Oct. 23, 2007

**Meets:** \_\_: \_\_0 \_\_M \_\_day;

### **Hearing Board**

**Responsible for:** Conducting hearings and: issuing findings and corrective action orders regarding disability discrimination pursuant to RIGL 42-87-5(b); granting leased facility accessibility waivers pursuant to RIGL 37-8-15.1(b); and accepting open meeting transition plans pursuant to RIGL 42-46-13(f).

**Meets:** As needed, upon the receipt of: disability discrimination complaints; leased facility accessibility waiver requests; or open meeting transition plans.

### **Information and Assistive Technology Committee**

**Responsible for:** Promoting the design and use of accessible information technology and providing assistive technology to people with disabilities who are: employees of state agencies; students enrolled at state operated schools and colleges; or clients/residents of state operated programs/services.

**Meets:** 2:30 PM Wednesday; 01/18, 03/15, 05/17, 07/19, 09/20 & 11/15

### **Legislation Committee**

**Responsible for:** Developing legislation that improves the quality of life of people with disabilities, getting enacted into law that legislation and ensuring that legislation that is harmful to people with disabilities is not enacted into law.

**Meets:** 3:00 PM Monday; 01/09, 02/13, 03/13, 4/10, 05/08, 06/12, 07/10, 09/11, 10/16 & 12/04; Public Forums in various locations throughout the state the week of: 07/24 – 07/28

## State Coordinating Committee on Disability Rights

**Responsible for:** Coordinating compliance with disability rights laws throughout state government.

**Meets:** 4:00 PM Tuesday; 02/28, 05/23, 09/26 & 11/28

### Executive Committee

**Responsible for:** Managing the Commission's operations, preparing budget, selecting fellows, and addressing personnel issues.

**Meets:** 4:00 PM Wednesday; 01/25, 06/21, 08/23 & 09/13

MOTION: To adopt the 2006 Schedule of Meetings for the Commission and its Committees, revised to:

- Set the date of the Annual Meeting as September 6, 2006 from 5 – 8 PM
- Authorize the 50<sup>th</sup> Anniversary Planning Committee to adopt its meeting schedule at its Nov. 29<sup>th</sup> meeting, JD/OM passed, JB nay

**6:45 PM Other Business:**

**Paul Choquette**

#### **Registry of Motor Vehicles Handicapped Parking Placard Unit**

Last Thursday Brian P. Peterson, the Associate Director of the Registry of Motor Vehicles called to ask if the Commission would be interested in taking over the Handicapped Parking Placard responsibilities if the 2 employees and operating budget were transferred. The Executive Secretary ask the following information:

- 1) The two employees who would be affected:
  - Are employees in a union? – Council 94
  - The positions and pay grades? – They do all of the clerical work associated with the issuance of permits, including meeting with the people. One is a grade 14 and one a 09.
- 2) Does the unit approve the initial applications for parking privilege and recertifications, or are the reviewed by members of the Medical Advisory Board? – The “automatics” are approved in house and those who need review are sent to the Medical Board.

#### **31-28-7. Motor vehicle plates for persons with disabilities – Entitlement – Designated parking spaces – Violations.**

(a) Persons, as defined in subsection (h) of this section, upon application and proof of permanent or long-term disability to the **division of motor vehicles**, shall be issued one motor vehicle disability parking privilege placard or in the case of a motorcycle, one motor vehicle sticker, of blue which shall be imprinted with the white international symbol of access, certificate number, the words “Rhode Island Disability Parking Permit” and shall bear the expiration date upon its face. A placard or motorcycle sticker issued to a person whose disability is temporary shall be substantially similar to that issued to a person with a permanent or long term disability. The temporary placard, however, shall be a red placard with a white international symbol of access, certificate number, the words “Rhode Island Disability Parking Permit” and shall bear the expiration dates upon its face. Persons issued a placard or motorcycle sticker pursuant to this section shall be entitled to the immunities of §§ 31-28-4 and 31-28-6.

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**31-28-7. Motor vehicle plates for persons with disabilities – Entitlement – Designated parking spaces – Violations.**

(a) Persons, as defined in subsection (h) of this section, upon application and proof of permanent or long-term disability to the **division of motor vehicles**, shall be issued one motor vehicle disability parking privilege placard or in the case of a motorcycle, one motor vehicle sticker, of blue which shall be imprinted with the white international symbol of access, certificate number, the words “Rhode Island Disability Parking Permit” and shall bear the expiration date upon its face. A placard or motorcycle sticker issued to a person whose disability is temporary shall be substantially similar to that issued to a person with a permanent or long term disability. The temporary placard, however, shall be a red placard with a white international symbol of access, certificate number, the words “Rhode Island Disability Parking Permit” and shall bear the expiration dates upon its face. Persons issued a placard or motorcycle sticker pursuant to this section shall be entitled to the immunities of §§ 31-28-4 and 31-28-6.

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**31-10-44. Medical advisory board.**

(a) There shall be established within the **division of motor vehicles** a medical advisory board to function solely as an advisory panel to the administrator of the **division of motor vehicles** on the subjects of physical and mental fitness standards for licensure to operate a motor vehicle and **eligibility standards for disability parking privileges**. When any person’s eligibility or continuing eligibility for a license is questioned on the grounds of physical or mental fitness, the administrator of the **division of motor vehicles** may consult with relevant specialist members of the medical advisory board in determining that person’s qualifications to operate a motor vehicle. **The administrator of the division of motor vehicles may also consult with relevant specialist members of the medical advisory board in making determinations of eligibility for disability parking privileges.**

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The Commission’s Executive Committee will meet with representatives of the Registry of Motor Vehicles to determine if the transfer is beneficial to both the Commission and the Disability Community.

<b>Adjourned at:</b>	6:58 PM
<b>Resource People:</b>	Harvey Salvas (GCD)