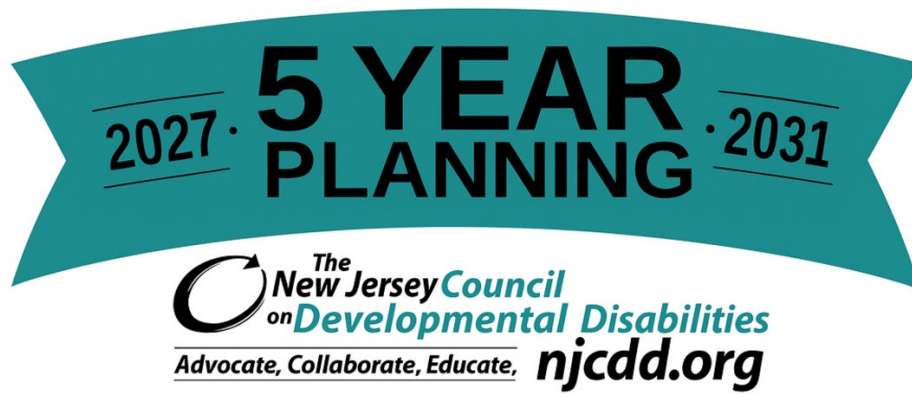




Five-Year State Plan 2027-2031

Background and Process

About State Councils on Developmental Disabilities

State Councils on Developmental Disabilities (Councils) are federally funded, self-governing organizations charged with:

- identifying the most pressing needs of people with developmental disabilities in their state, and
- advancing public policy and systems change that help these individuals gain more control over their lives.

Councils do this by conducting advocacy, systems change, and capacity-building efforts that promote self-determination, integration, and inclusion.

Councils do not provide direct services, but sometimes they fund special projects and demonstrate efforts that do. Key Council activities include conducting outreach, providing training and technical assistance, removing barriers, developing coalitions, encouraging citizen participation, and keeping policymakers informed about disability issues.

Council members are appointed by the governor – more than 60 percent of a Council's membership consists of individuals with intellectual and developmental disabilities (I/DD) or their family members. Advocates and state agency representatives also serve as members. This diversity enables Councils to better analyze and improve systems and services within a state and ensure that the voices of people with developmental disabilities and their families are heard.

A developmental disability is lifelong. It is a severe, chronic disability that occurs before an individual is 22 that is likely to continue indefinitely and results in substantial functional limitations in three or more of the following areas: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and economic self-sufficiency. Diagnosed medical conditions may include autism, Down syndrome, intellectual disability, cerebral palsy, spina bifida, epilepsy, mental health issues, and others.

The Mission of the New Jersey Council on Developmental Disabilities

The mission of the New Jersey Council on Developmental Disabilities (NJCDD) is to assure that individuals with intellectual and developmental disabilities (I/DD) and their families participate in the design of, and have access to, needed community services, individualized supports, and other forms of assistance that promote self-determination, independence, productivity, integration, and inclusion in all facets of life through culturally-competent programs.

Our vision is that all individuals with I/DD are participating, equally-included members of their communities who:

- make real choices and have control over their own lives.
- have the freedom to strive, excel, and make mistakes.
- are in a position to achieve personal goals and affect policy and process decisions that affect their lives.
- have the same rights, privileges, responsibilities, and opportunities of citizenship as any other New Jersey resident.

The 5-Year Plan

The work of the NJCDD is driven by a five-year strategic plan. The plan offers a framework for volunteer Council members and paid Council staff as they determine and carry out projects, initiatives, and activities to support New Jersey residents with intellectual and developmental disabilities and their families.

In accordance with the Developmental Disabilities Assistance and Bill of Rights Act of 2000, the NJCDD develops and implements goals and objectives every five years. The 5-Year Plan addresses identified unmet needs through systems change and capacity-building efforts that promote self-determination, integration, and inclusion for people with developmental disabilities.

The plan includes goals and objectives that will guide and focus the Council's work over the five-year period. The work in our plan is aligned around NJCDD's motto: Advocate. Collaborate. Educate.

How are the goals determined?

In developing this plan, the NJCDD gathered and considered a great deal of information. We conducted a Comprehensive Review and Analysis that included collecting, reviewing and analyzing data in several key areas:

- state demographics
- housing
- employment
- transportation
- formal and informal supports
- education and early intervention
- childcare
- interagency coordination
- recreation
- quality assurance, including safety
- health care

We also reviewed reports, white papers, and other planning documents issued by our DD Network partners, the Office of the Ombudsman for Individuals with I/DD and Their Families, and others. We compared New Jersey data to other states and the nation.

As part of that analysis, and to help guide us in identifying unmet needs and setting priorities, we sought input from the public.

- Survey: More than 1,200 NJ residents responded to our survey, which was offered in multiple languages.
- Public Comment: Individuals and agencies were invited to provide written comments and also to provide input during public portions of the Council meetings.
- Listening Sessions: The Council hosted five listening sessions, including two in Spanish
- Self-Advocacy Focus Groups: More than 40 self-advocates took part in two in-person structured focus groups and shared perspectives and priorities. Individuals also participated via Zoom.
- Council members took part in a day-long retreat.
- NJCDD's Planning Committee met multiple times to guide the process.

Based on public input, Council members agreed that some of our objectives in this planning cycle would include a focus on efforts designed to address the needs individuals with severe and complex needs, including medical, behavioral and co-occurring mental health conditions.

Public Input

The NJCDD gathered public input from people with ID/DD and their families

Outreach and Engagement Strategies

Online Survey

NJCDD administered a survey in multiple languages. More than 1,200 people responded.



Listening Sessions

NJCDD hosted five listening sessions including two in Spanish. More than 200 individuals registered.



Focus Groups

NJCDD got input from self advocates through facilitated focus groups.



The public input highlighted areas of need:

Advocacy & Leadership • Abuse & Neglect • Healthcare
Education • Employment • Behavior & Medical



FOCUS POPULATION:

Children & adults with complex medical, behavioral and health care needs.

Using Public Input and Data

The NJCDD used the public input along with state and federal data to identify barriers and unmet needs of individuals with ID/DD and their families. This information was used to determine the State Plan goals and objectives.

