

**SD COUNCIL ON DEVELOPMENTAL DISABILITIES
GRANT APPLICATION - - TITLE PAGE**

University of South Dakota

Applicant Organization _____

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Address _____

605-658-3760

46-8000364

Telephone _____ Federal ID Number _____

Eric Kurtz

Project Director _____

1400 West 22nd St, Sioux Falls, SD 605-357-1439

Address/Telephone _____

eric.kurtz@usd.edu

Email Address: _____

IHE

Yes

Type of Organization _____ Tax Exempt? _____

Under "Type of Organization" indicate all of the following that apply: State, county, municipality, or other public institution; nonprofit or profit private institution. If "nonprofit" and/or "tax exempt", proof of status may be requested.

Public/State Controlled Institution of Higher Education

2025 South Dakota Developmental Disabilities Conference

Title of Project _____

01/01/2025

12/31/2025

Project Begins _____ Project Ends _____

\$65,858

\$85,858

Total Council Funds Requested _____ Total Project Budget _____

Daniel Engebretson

DocuSigned by:
Daniel Engebretson
C297C091745F4F3

Authorizing Official (please type name)

Signature

Vice President for Research

Title and address, if different from Project Director listed above.

South Dakota Conference on Developmental Disabilities
Grant Proposal
January 1, 2025 – December 31, 2025
Requested Amount of Award: \$65,858

PROJECT NARRATIVE

This proposal seeks funding to support the 2025 South Dakota Conference on Developmental Disabilities. In 2021, the Center for Disabilities at the University of South Dakota Sanford School of Medicine partnered with the South Dakota Department of Human Services Division of Developmental Disabilities, the South Dakota Developmental Disabilities Council, and over a dozen additional state and community agencies and organizations developed the South Dakota Conference on Developmental Disabilities. Participants included people with disabilities, their families, and professionals from disciplines across healthcare, human services, mental health, education, vocational rehabilitation, and direct service professionals, among others. While this event takes a conference form, this robust collaboration of planning partners offers a platform to develop relationships and collaborations, and to discover new approaches to solve complex issues. This convening of people and organizations from a broad range of perspectives coming together to partner on these issues has been powerful, and has focused on topics and issues that our stakeholders have communicated are critical. Key areas including mental health, trauma-informed care, Native American health and disability issues, technology, leadership development and self-advocacy, along with many other important topics have been featured. Over 200 participants attended this event in 2021, and in 2023 over 300 attendees participated. This proposal intends to build on this momentum and success in establishing a tradition of convening around critical issues across the field of developmental disabilities.

Statement of Need:

People with disabilities experience significant disparities in their care across settings and providers. Factors contributing to these disparities include inadequate knowledge about disabilities and related conditions, insufficient best-practices and evidence to guide care for people with disabilities, and inaccessible environments. Another possible contributor to disparities are misunderstandings and false beliefs regarding the values and expectations of people with disabilities and lack of inclusion within the community. This lack of awareness and understanding points to the need for cultural competence required to care effectively for people with disabilities. Cultural competence is defined as the “ability of providers and organizations to effectively deliver services that meet the social, cultural, and linguistic needs of patients”^[1].

Demographics. The overall percentage of persons who identified themselves as having a disability was 12.6% which is not significantly different than the national rate of disability^[3]. The percentage of citizens below the age of 65 with a disability is 7.1%. Approximately, one percent of persons with disabilities were reported to be age 17 or younger. The prevalence of developmental disabilities (DD) in children ages 3-17 is reported to be approximately 18%^[4]. According to the most recent estimates, approximately 13,188 people with DD reside in SD and over 3,000 adults and children with DD receive services through the CHOICES and Family Support 360 waivers administered by the SD Department of Human Services^[5]. As of February

2021, a total of 21,664 South Dakota students with disabilities received special education services^[6]. This represented 15.6% of the total Fall 2020 student census^[7].

Health Care Shortage. A recent special report published states, “Access to health care remains a serious challenge in much of rural South Dakota, where federal data show that residents tend to have greater rates of serious illness and death from diseases and far less access to doctors, nurses and dentists than in the state’s few urban areas”^[9]. The COVID-19 pandemic has exacerbated this situation. The South Dakota Department of Health reported that of 66 counties, 19 experienced shortages in low-income areas and 31 in areas due to geographic distance from primary medical care^[10]. Six counties reported shortages related to geographic factors in portions of the county. Only nine counties reported no shortage. According to the Health Resources and Services Administration (2021), as of July 2021, 11 areas have been designated as mental health care shortage areas^[11].

Mental Health. In 2020, it was reported that 112,000 persons in SD experienced mental illness, with approximately 30,000 experiencing serious mental illness^[12]. More than half of people with a mental health condition in the U.S. did not receive treatment in the last year. It is also reported that 47.5% of South Dakotans age 12–17 with diagnosed depression did not receive any care in the last year^[12]. SD was ranked 34th with respect to the prevalence of mental illness and rates of access to care for adults and 24th for youth^[13]. Additionally, in 2020, suicide was the leading cause of death in SD for youth ages 10 to 19^[14]. It was also reported that SD had the 8th highest suicide rate in the United States and the American Indian suicide rate was 2.5 times higher than the White suicide rate for 2011-2020^[14].

Income and Poverty. SD has great economic diversity and disparity. The median per capita personal income is \$59,533^[1]. The overall percentage of South Dakotans who live below the poverty line is 11.6%^[15]. Two South Dakota counties, Ziebach and Buffalo, had the second and third-lowest per capita income of all US counties. Four additional counties including, Oglala Lakota, Todd, Corson, and Jackson, were in the lowest per capita income counties in the US. Ziebach and Todd counties had the highest poverty rates of all 3,198 US counties and parishes. Corson, Oglala Lakota, and Buffalo Counties had the fourth, fifth and seventh highest poverty rates in the nation, respectively. Ziebach and Corson Counties have the highest and fourth-highest poverty rates for children age 0-17 in the country. The poverty rates of all six counties for children age 0-17 range from 43-63%^[15], and are all home to Native American reservations.

Aging. The median age in South Dakota is 37.7 years. More than a third (36%) of the South Dakota population is age 50 or older^[1]. This is impacted by the increased migration of young people out of the state upon completion of secondary education to reside in surrounding states where wages are higher and a greater variety of opportunities abound. Within the state, citizens are also migrating to larger communities which in turn increases the burden on support and health care services in frontier communities. In short, the population of SD is aging which will increase the scope and need for services and supports within every community of SD.

Summary. People with disabilities are impacted exponentially by the issues presented above, and there is a significant need in to improve access and the quality of care for South Dakotans with disabilities. This project proposes to help address those needs through capacity building efforts

that meets individuals with disabilities, their family, as well as providers and professionals where they are in an accessible, effective, and sustainable manner.

Goals, Objectives, and Action Plan:

The **Primary Goal** of this initiative is to develop and implement the 2025 South Dakota Conference on Developmental Disabilities for providers and organizations across South Dakota. Outcomes will include an increase in knowledge, skills, strategies, ensuring cultural responsiveness in service provision, and understanding the positive contributions of individuals with disabilities and their families on communities.

The theme of this year's conference is Leading Change Together and will focus on developing partnerships to improve the well-being of individuals with developmental disabilities in South Dakota.

The conference will include over 25 sessions covering a variety of topics including:

- Apps and software to help people with disabilities live more independently
- Using Charting the LifeCourse Tools to build a Good Life
- Sensory processing
- Intersectionality of disability and abuse/assault
- Division of Developmental Disabilities services
- Understanding guardianship and alternatives to guardianship
- Supporting families through the transition process
- Providing culturally responsive services
- Assistive technology

Please see attachments for session descriptions, keynote presenter information, and a draft schedule.

The conference is open to all and intended for people with disabilities, family members, professionals in the field of developmental disabilities (healthcare, education, mental health), state, community and agency providers. Additional emphasis is also placed on reaching underserved and underrepresented populations across the state with representation from Tribal members, agencies, and communities to ensure a true statewide approach.

Organization and Staff Qualifications:

The Center for Disabilities has served as the University Center of Excellence in Developmental Disabilities (UCEDD) for the state of South Dakota since 1971. Over the course of 50 years, we have partnered with numerous healthcare, education, human service, employment, and community-based organizations to improve the lives of individuals with disabilities and their families. We have a strong track record of successful capacity building efforts through community education, clinical services, interdisciplinary training, technical assistance, research, information dissemination, and policy/advocacy. It is through this diverse range of initiatives and partnerships the Center for Disabilities pursues progress on its mission to improve the lives of individuals with disabilities and their families with a vision that all people can achieve

independence, self-determination, productivity, and community inclusion. We commit to leveraging these relationships to support this project as well.

The Center for Disabilities is a Leadership Education in Neurodevelopmental Disorders (LEND) site. For the past 30 years, the Center for Disabilities has been a leader in the state and nation in providing the highest quality interdisciplinary, culturally competent, family-centered care. SD LEND has successfully prepared hundreds of healthcare and related professionals to assume leadership roles and has also provided ongoing continuing education and technical assistance for thousands of practicing professionals in South Dakota. Funding comes from the Autism CARES Act through the U.S. Department of Health and Human Services; Health Resources and Services Administration.

The Center for Disabilities will also leverage our relationships with tribal communities through the Oyate` Circle, a sub-center at the USD Center for Disabilities. The Oyate` Circle is a resource, education, outreach, and training program that serves Tribal communities. Named in Lakota for “the people” the Oyate` Circle focuses on the needs of tribal members and their families. We also provide technical assistance and training for tribal communities and non-tribal communities and agencies. These efforts have been critical in building bridges, relationships, and collaboration to ensure the most underserved and underrepresented populations in the country have a voice on matters important to them. The relationships fostered by Oyate' Circle have allowed the Center for Disabilities to expand its services which ensure inclusion and representation across the region.

Evaluation and Consumer Satisfaction Information:

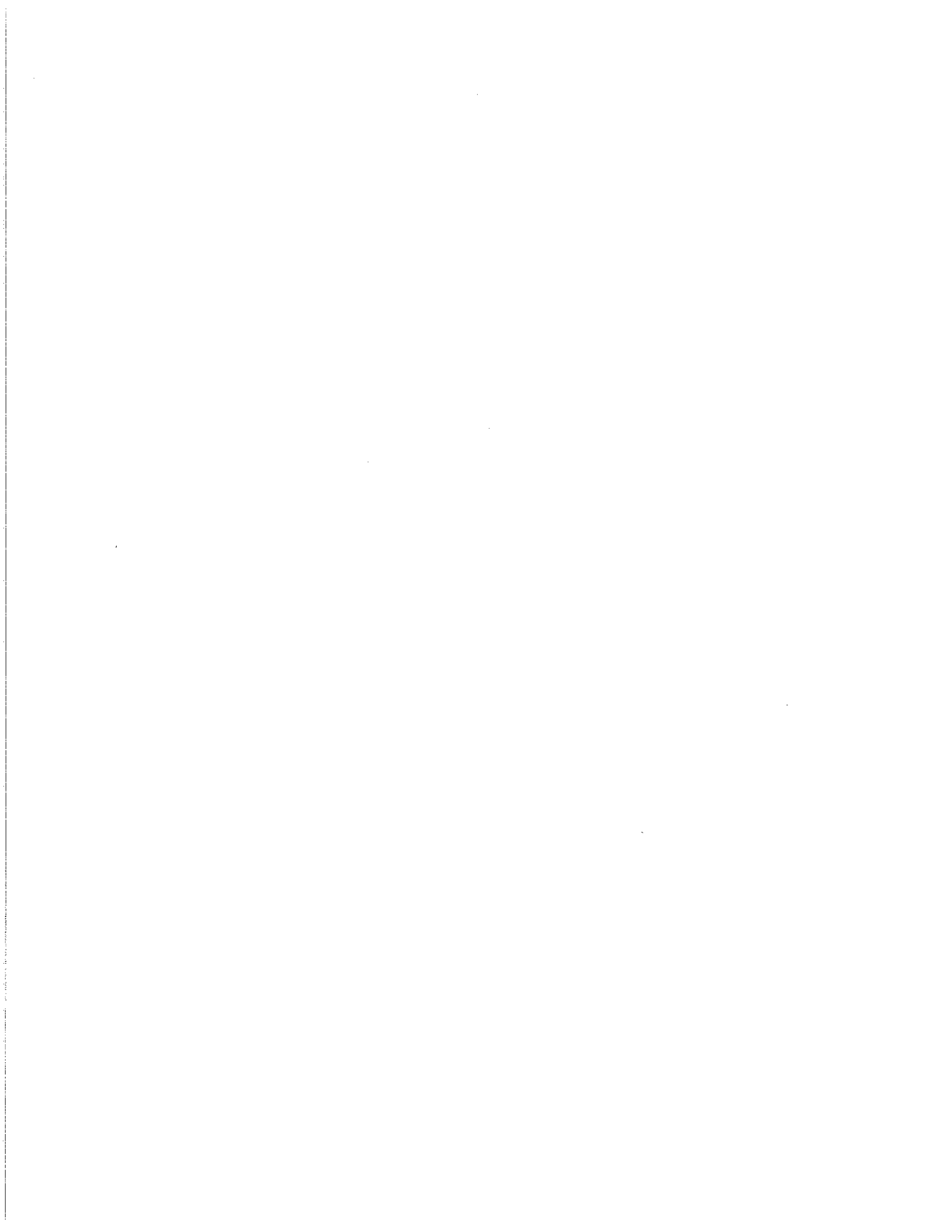
Evaluation surveys will be conducted to measure consumer satisfaction, and the effectiveness of each individual session, as well as the conference as a whole. We will gain demographic information about the attendees, as well as learn about emerging needs and concerns that may be addressed by future conferences. These evaluations will be used to make improvements or modifications. This feedback will also be used to: a) prioritize material components; b) determine training activities given; c) include areas overlooked; and d) modify content areas.

This information will also be utilized to provide progress on performance measures required by the grant.

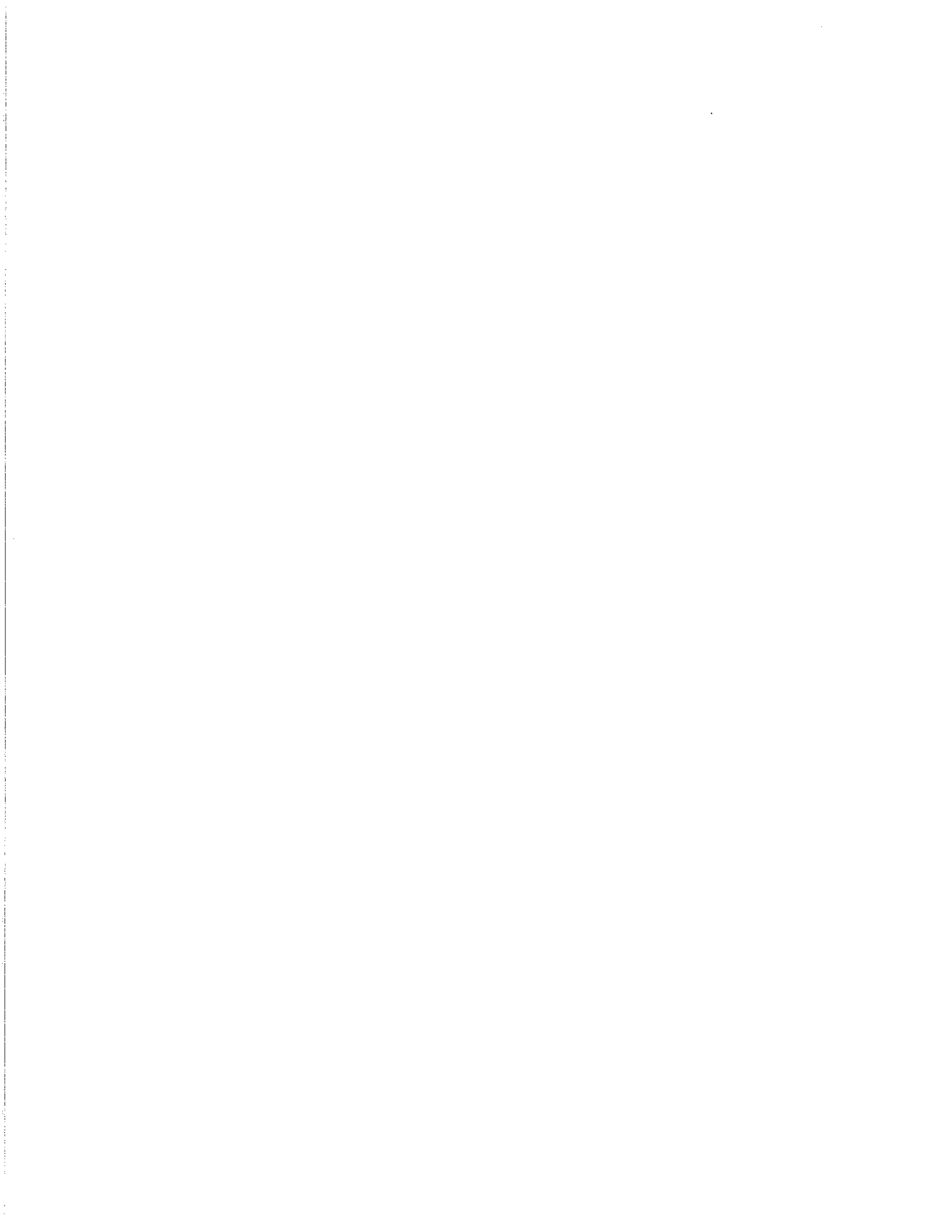
REFERENCES

- [1] Agarinnik, N., Campbell, E.G., Iezzoni, L.I., Exploring Issues Relating to Disability Cultural Competence Among Practicing Physicians. (2019) *Disability and Health Journal*. July 12(3): 403-410.
- [2] South Dakota Department of Health. (2020). *Health Data & Statistics*. <https://doh.sd.gov/>
- [3] US Census Bureau. (2021a). US Census Bureau (2021b). <https://data.census.gov/cedsci/profile?q=0400000US46>.
<https://data.census.gov/cedsci/profile?q=United%20States&g=0100000US>.

- [4] Zablotsky, B, Black, L. I., Maenner, M. J., Schieve, L. A., Danielson, M. L., Bitsko, R. H., Blumberg, S. J., Kogan, M. D., and Boyle, C. A. (2019). Prevalence and trends of developmental disabilities among children in the United States: 2009–2017. *Pediatrics*, 144(4).
- [5] South Dakota Department of Human Services (2021), Division of Developmental Disabilities CHOICES 1915(c) Waiver Rate Study.
- [6] South Dakota Department of Education (2021a). *Special Education December Child Count - by Disability*. <https://doe.sd.gov/ofm/data-childcount.aspx> .
- [7] South Dakota Department of Education (2021b). 2020 Fall Census Enrollment, Public - by District, by Grade. <https://doe.sd.gov/ofm/enrollment.aspx>.
- [8] US Census Bureau (2021c). 2019 Public Elementary-Secondary Education Finance Data. <https://www.census.gov/data/tables/2019/econ/school-finances/secondary-education-finance.html>.
- [9] Pfankuch, B. (2020). *Special Report: Pandemic threatens fragile rural health-care system in South Dakota*. <https://www.sdnewswatch.org/stories/small-towns-big-challenges-pandemic-burdens-fragile-rural-healthcare-system-in-sd/>.
- [10] South Dakota Department of Health (2021) Federally Designated Health Professional Shortage Areas and Medically Underserved Areas. <https://doh.sd.gov/providers/ruralhealth/shortage.aspx>.
- [11] Health Resources & Services Administration (2021). *Health Workforce Shortage areas*. <https://data.hrsa.gov/topics/health-workforce/shortage-areas>.
- [12] National Alliance on Mental Illness (2021). State fact sheets. <https://www.nami.org/Advocacy/State-Fact-Sheets>.
- [13] *Mental Health America (2021). Ranking the states*. <https://www.mhanational.org/issues/ranking-states#four>.
- [14] South Dakota Suicide Prevention (2021). Facts and stats. <https://sdsuicideprevention.org/about-suicide/facts-stats/>.
- [15] U.S. Bureau of Economic Analysis (2021). *Personal income by county and metropolitan area, 2019*. <https://www.bea.gov/data/income-saving/personal-income-county-metro-and-other-areas>



Description	(A) Requested DD Council Funds	(B) Allowable Match from Applicant **	(C) Allowable Match from Other Agencies **	(D) Total Contract Grant Budget (A + B + C)	(E) Un-allowable Match from Applicant & Other Agencies	(F) Total Project Budget (D + E)
PERSONNEL	\$10,976			\$10,976		\$10,976
Salaries						
Kendra Gottsleben – 2.5%	1,352					
Brenda Canfield – 5%	3,120					
Aimee Deliramich – 3.5%	4,004					
Benefits						
Kendra Gottsleben – 2.5%	489					
Brenda Canfield – 5%	1,035					
Aimee Deliramich – 3.5%	976					
TRAVEL	\$0			\$0		\$0
CONTRACTUAL	\$0		\$20,000	\$20,000		\$20,000
Keynote Speakers			20,000			
OPERATING EXPENSES	\$2,100			\$2,100		\$2,100
Printing	1,400					
Name Tags and Lanyards	200					
Graphic Design	500					
OTHER	\$49,646			\$49,646		\$49,646
Venue Rental	8,000					
A/V, Staging, booths,	10,000					
Food & Beverage	31,646					
F&A	\$3,136			\$3,136		\$3,136
Indirects - 5%	3,136					
GRAND TOTAL	\$65,858		\$20,000	\$85,858		\$85,858





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dhs.sd.gov/cdd.aspx


ASSURANCES

1. The applicant assures that grant funds made available under the South Dakota Council on Developmental Disabilities will not be used to supplant state or local funds, but will be used to increase the amounts of such funds that would be made available for other similar activities.
2. The applicant assures that grant funds made available under the South Dakota Council on Developmental Disabilities will be used to complement and augment rather than duplicate or replace services for individuals with developmental disabilities and their families who are eligible for Federal assistance under other state programs.
3. The applicant assures that fund accounting, auditing, monitoring and such evaluation procedures as may be necessary to keep such records as the South Dakota Council on Developmental Disabilities shall prescribe will be provided to assure fiscal control, proper management, and efficient disbursement of funds received through the South Dakota Council on Developmental Disabilities.
4. A clear audit trail must be maintained for each source of funding. Receipts, expenditures and disbursements must be individually accounted for from each source of funds.
5. The applicant agrees to submit reports indicating activities undertaken, expenditures, match provided, program income and general progress of the project. Projects are required to submit a final report at the end of the grant funding period.
6. The applicant certifies that the program contained in its application meets all the requirements, that all the information is correct, that there has been appropriate coordination with affected agencies, and that the applicant will comply with all provisions of the South Dakota Council on Developmental Disabilities and all other applicable laws.
7. The applicant understands that although an effort will be made to continue the funding of projects of proven effectiveness or with a record of proven success, each project must stand on its own merit each year. No project will be

guaranteed continued funding. NOTE: Projects/programs must re-apply annually for funding.

- 8. This agreement depends upon the continued availability of federal funds and expenditure authority from the Legislature for this purpose. This agreement will be terminated by the State if the Legislature fails to appropriate funds or grant expenditure authority. Termination for this reason is not a default by the State nor does it give rise to a claim against the State.
- 9. The applicant also understands and agrees: 1) that funds received are to be expended only for the purpose and activities covered by the applicant's approved application and budget, and 2) that the grant may be terminated at any time by the South Dakota Council on Developmental Disabilities if the applicant fails to comply with the provisions of the South Dakota Council on Developmental Disabilities, legislation or any of the certified assurances listed above and in the grant agreement.

CERTIFICATION - I certify that I have read and reviewed the above assurances and will comply with all provisions of the South Dakota Council on Developmental Disabilities legislation and all other applicable federal and state laws.

DocuSigned by:

C297C681745F4F5... 9/18/2024

Signature of Authorizing Official **Date**
 Daniel Engebretson, Vice President for Research

Typed Name and Title
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