

## Section 1: Candidate Information

• Full Name (Required) Bertrand Tessa

• District running for (Required) District council 6

## Section 2: Questionnaire

### **How will you ensure that Prince George's County government leads by example in hiring, retaining, and promoting employees with disabilities, and what accountability measures will you implement?**

To ensure that Prince George's County government leads by example in hiring, retaining, and promoting employees with disabilities, I would pursue a comprehensive, accountable approach that embeds disability inclusion into every stage of the employee lifecycle—recruitment, onboarding, advancement, and leadership.

#### Hiring and Recruitment

We will establish clear, countywide goals for increasing the representation of people with disabilities across classifications and leadership levels. Job descriptions, postings, and application systems will be audited to ensure they are fully accessible and focused on essential functions rather than unnecessary physical or procedural barriers. Partnerships with vocational rehabilitation agencies, disability advocacy organizations, community colleges, and universities will expand our talent pipeline. Hiring managers will be trained on inclusive hiring practices, reasonable accommodations in the interview process, and bias mitigation.

#### Retention and Workplace Culture

Leading by example requires an environment where employees with disabilities can thrive and grow. We will standardize and streamline the reasonable accommodation process with clear timeliness standards, transparent decision-making, and confidential support. Supervisors will receive mandatory training on disability inclusion, accommodation management, and mental health awareness. Employee Resource Groups (ERGs) for employees with disabilities and allies will be formally supported and integrated into policy feedback and culture initiatives. Flexible work arrangements, where compatible with job duties, will be normalized rather than treated as exceptions.

#### Promotion and Career Advancement

Equity in promotion is critical. We will ensure that performance evaluations focus on outcomes and competencies, not assumptions about disability. Leadership development programs, mentorship opportunities, and succession planning will intentionally include employees with disabilities. Data will be reviewed to identify and address disparities in promotion rates, acting assignments, and professional development access.

#### Accountability and Measurement

Accountability will be built into governance and management systems. Key measures will include:

Annual public reporting on disability representation, hiring, retention, promotion, and accommodation timelines.

Integration of disability inclusion metrics into departmental performance scorecards.

Regular audits of accessibility in physical spaces, digital systems, and HR processes.

Clear escalation pathways and oversight for accommodation disputes. Executive and manager performance evaluations that include inclusion outcomes.

#### Leadership Commitment

Finally, leadership must model behavior. County executives and department heads will visibly champion disability inclusion, consult regularly with employees with disabilities, and commit to continuous improvement based on data and feedback. By embedding accountability, transparency, and leadership ownership, Prince George's County government will not only comply with the law, but set a standard for equitable, inclusive public service.

### **What comprehensive employment initiatives will you champion to create meaningful career opportunities for county residents with disabilities?**

Creating meaningful career opportunities for county residents with disabilities requires moving beyond access to jobs and toward sustainable, growth-oriented employment. I would champion a coordinated set of initiatives that aligns workforce development, education, employers, and accountability to ensure real outcomes—not just good intentions.

#### Inclusive Workforce Pipeline

We will build a countywide disability employment pipeline that begins early and continues through adulthood. Partnerships with public schools, community colleges, universities, vocational rehabilitation providers, and disability organizations will support career exploration, paid internships, apprenticeships, and work-based learning. Transition-age youth with disabilities will be intentionally connected to county employment and private-sector career pathways before exiting the school system.

#### Skills Training and Credentials

Employment efforts must align with labor-market demand. I will advocate for targeted training programs—co-designed with employers—in

high-growth sectors such as healthcare, IT, cybersecurity, public administration, skilled trades, and green infrastructure. Programs will offer industry-recognized credentials, accessible instruction, assistive technology, and individualized supports to ensure completion and job placement.

#### Paid Internships, Fellowships, and Apprenticeships

The County will lead by example by expanding paid internships, registered apprenticeships, and fellowships that intentionally include people with disabilities. These will serve as pipelines to permanent employment, with mentorship, clear performance expectations, and defined career pathways rather than temporary placements.

#### Employer Partnerships and Incentives

We will engage local businesses and government contractors to expand inclusive hiring through technical assistance, accommodation guidance, and disability inclusion training. Incentives such as procurement preference points, public recognition, and access to job-coaching resources will encourage hiring, retention, and advancement. Small businesses will receive hands-on support to reduce administrative barriers and misconceptions.

#### Supported Employment and Retention

Job placement alone is not success. I will support evidence-based models that include job coaching, peer mentoring, and wraparound services. Career navigation and benefits counseling will help individuals pursue advancement without fear of losing critical supports, ensuring workers are not trapped in low-wage roles.

#### Entrepreneurship and Self-Employment

For residents interested in starting businesses, we will develop accessible entrepreneurship programs, including microgrants, business coaching, and links to county procurement for disability-owned enterprises.

#### Accountability and Results

Success will be measured by outcomes—credential attainment, job placement, wages, retention, and advancement. Data will be publicly reported, programs adjusted based on performance, and residents with disabilities actively involved in evaluation and improvement. Through coordinated investment and accountability, Prince George's County can create pathways where residents with disabilities build meaningful, lasting careers.

### **What comprehensive, county-wide accessible transportation solutions will you develop beyond existing paratransit services?**

Meeting the transportation needs of residents with disabilities requires a county-wide, multimodal approach that expands well beyond traditional paratransit. I would pursue integrated, accessible transportation solutions that are reliable, flexible, and embedded into the County's broader mobility strategy.

#### 1. Universal Accessibility Across the Transit Network

Accessibility must be the standard, not the exception. I will advocate for continued investment to ensure all fixed-route buses, bus stops, shelters, rail stations, sidewalks, and crossings are fully accessible. This includes curb ramps, tactile paving, audible and visual announcements, real-time service information, lighting, and weather-protected stops—particularly in underserved areas.

#### 2. On-Demand, Flexible Mobility Options

Beyond paratransit, the County should pilot on-demand, app-based and call-in accessible microtransit services that provide same-day or near-real-time trips. These services can bridge first- and last-mile gaps, connect residents to fixed-route transit, and serve trips that paratransit cannot efficiently meet, such as short, spontaneous, or off-peak travel.

#### 3. Partnerships with Transit Network Companies (TNCs)

We will expand partnerships with ride-hailing providers that offer wheelchair-accessible vehicles, subsidizing trips where appropriate and ensuring non-app booking options for residents without smartphones. Contracts will include service standards for reliability, driver training, and response times to ensure dignity and safety.

#### 4. Community Transportation Hubs

I will support the development of neighborhood mobility hubs that integrate accessible buses, microtransit pick-ups, TNC access, bikeshare with adaptive cycles, safe pedestrian access, and passenger amenities. These hubs would reduce isolation and create predictable access points for employment, healthcare, and services.

#### 5. Expanded Travel Training and Navigation Support

Transportation is only useful if people can confidently use it. We will expand travel training programs for riders with cognitive, sensory, and developmental disabilities, including one-on-one instruction, virtual tools, and multilingual materials. A centralized mobility concierge service can help residents plan trips across multiple modes.

#### 6. Employer- and Destination-Based Solutions

For major employment centers, healthcare campuses, and government facilities, we will encourage shared accessible shuttles and employer-supported transportation options. These partnerships can significantly improve commute reliability while reducing pressure on paratransit.

#### 7. Technology and Data Integration

All transportation options—paratransit, fixed route, microtransit, and TNCs—should be coordinated through accessible trip-planning platforms and call centers. Data will be used to identify service gaps, reduce wait times, and continuously improve performance.

#### 8. Accountability and Community Oversight

Finally, people with disabilities must guide the system. Advisory councils, regular rider feedback, public performance dashboards, and

equity audits will ensure services meet real needs and evolve over time.

By integrating accessibility into every mode—not isolating it into para transit- Prince George’s County can create a transportation system that supports independence, employment, and full community participation for residents with disabilities.

**How will you ensure that all new transit infrastructure exceeds ADA minimum standards and truly provides accessible, reliable public transportation?**

Ensuring that new transit infrastructure exceeds ADA minimum standards requires shifting from a compliance mindset to a universal design and accountability framework that centers lived experience, reliability, and long-term usability.

**1. Commit to Universal Design as County Policy**

ADA standards are a baseline, not a goal. I will advocate for a county policy requiring all new transit infrastructure to meet universal design principles, ensuring usability for people with physical, sensory, cognitive, and invisible disabilities. Design decisions must benefit everyone—older adults, parents with strollers, temporary injuries—not just meet legal checklists.

**2. Disability Inclusion at the Design Stage**

Accessibility failures often occur because people with disabilities are consulted too late. I will ensure individuals with diverse disabilities are formally engaged at concept, design, and pre-construction stages, not just during public comment. Advisory input will be documented, responded to, and incorporated before projects advance.

**3. Stronger Design and Construction Standards**

All new transit facilities—stations, bus stops, shelters, sidewalks, crossings, and parking—should exceed ADA by incorporating:

Redundant wayfinding (visual, tactile, auditory) Level boarding where feasible

Predictable layouts with clear sightlines Weather protection, lighting, and seating

Slip-resistant materials and safe grade transitions

Accessibility must be tested under real conditions, including low visibility, weather, and service disruptions.

**4. Independent Accessibility Review and Testing**

Before opening any new facility, the County should require independent accessibility audits and real-world usability testing, including walkthroughs by people with disabilities. Final acceptance should be contingent on addressing identified barriers, not deferred to future fixes.

**5. Reliability as an Accessibility Issue**

Accessibility means nothing without reliability. Elevators, ramps, announcements, and digital systems must be maintained with strict uptime requirements. I will push for preventative maintenance plans, rapid repair timelines, redundancy for critical equipment, and public reporting of outages.

**6. Accessible Technology and Information Systems**

All real-time transit information—signage, apps, kiosks, websites, and call centers—must exceed accessibility standards for screen readers, captioning, color contrast, plain language, and multilingual access. Information during service disruptions must be timely, consistent, and available in multiple formats.

**7. Procurement and Contractor Accountability**

Accessibility performance will be embedded into procurement and contracts. Designers, builders, and operators will be evaluated—and held financially accountable—based on accessibility outcomes, not just initial construction. Poor accessibility performance will have real consequences.

**8. Ongoing Oversight and Public Transparency**

I will support public dashboards tracking accessibility performance, maintenance uptime, complaints, and resolution timelines. Regular equity and accessibility audits will ensure systems continue to meet community needs as usage patterns change.

By embedding universal design, lived-experience input, rigorous oversight, and performance accountability into every phase of transit delivery, Prince George’s County can ensure new infrastructure does more than meet ADA—it delivers safe, reliable, and dignified mobility for all residents.

**What specific actions will you take to increase the supply of affordable, accessible, and integrated housing options throughout Prince George’s County?**

Increasing the supply of affordable, accessible, and integrated housing in Prince George’s County requires coordinated action across planning, finance, development, and enforcement—anchored in disability inclusion and fair housing principles.

**1. Make Accessibility a Standard, Not an Exception**

I will work to ensure that all housing funded or subsidized by the County exceeds minimum accessibility requirements. This includes adopting universal design standards in new construction and substantial rehabilitation so units are usable by people with mobility, sensory, and cognitive disabilities without segregation. Accessibility must be integrated across all neighborhoods—not clustered or isolated.

**2. Align Zoning and Land-Use Policies**

Zoning reforms are critical. I will support updates that allow higher-density, mixed-income housing near transit, healthcare, and employment centers—while requiring a meaningful percentage of affordable, accessible units. Accessory dwelling units, missing-middle housing, and mixed-use developments can expand options while maintaining community integration.

### 3. Leverage County Financing and Incentives

County tools—such as the Housing Investment Trust Fund, tax abatements, reduced fees, and expedited permitting—should prioritize projects that deliver affordable, accessible units. Developers who exceed accessibility and affordability requirements should receive additional incentives. Public land should be strategically used for inclusive, transit-oriented housing.

### 4. Partner with Nonprofits and Service Providers

Mission-driven nonprofit developers and community organizations are essential partners. I will strengthen partnerships to deliver permanent supportive housing and deeply affordable units paired with voluntary services. This ensures housing stability without institutionalization or displacement from the community.

### 5. Preserve and Retrofit Existing Housing

Preservation is as important as new construction. I will champion investments in retrofitting existing affordable housing to improve accessibility, energy efficiency, and safety—allowing residents to age in place. Targeted home modification grants and low-interest loans will assist homeowners and small landlords in making units accessible.

### 6. Enforce Fair Housing and Accessibility Laws

Strong enforcement protects integration. I will support proactive monitoring, compliance checks, and tenant education to prevent discrimination against people with disabilities. Landlords must meet reasonable accommodation and modification obligations, and violations must carry real consequences.

### 7. Support Transitions from Institutional Settings

Housing initiatives must support residents transitioning from nursing facilities or other institutional settings. Coordinating housing development with Medicaid waivers, rental assistance, and supportive services will expand community-based living options.

### 8. Accountability and Data Transparency

We will track and publicly report the number, location, affordability level, and accessibility features of housing units. Disaggregated data will help identify gaps, prevent concentration of disability housing, and guide future investments.

By using policy, financing, zoning, and enforcement together—with people with disabilities at the decision-making table—Prince George's County can expand affordable, accessible, and truly integrated housing options that promote independence, stability, and opportunity county-wide.

## **What policy changes will you advocate to improve healthcare access including provider training and accessible medical facilities?**

Improving healthcare access for people with disabilities in Prince George's County requires policy changes that address provider training, physical and digital accessibility, care coordination, and accountability. I would advocate for reforms that embed disability inclusion into healthcare delivery as a core measure of quality and equity.

### 1. Mandatory Disability-Competency Training

I will support policies requiring disability-competency training for providers receiving county funding or participating in county-affiliated networks. Training should include disability rights, legal obligations, effective communication with patients with sensory, intellectual, and cognitive disabilities, trauma-informed care, and respectful use of assistive devices and support persons. Training must be recurring, evaluated, and informed directly by people with disabilities.

### 2. Accessible Medical Facilities Beyond ADA Minimums

Healthcare facilities must exceed ADA baselines to meet real patient needs. I will advocate for tying county incentives, grants, and partnerships to demonstrated accessibility, including adjustable exam tables, accessible diagnostic equipment, accessible restrooms and check-in areas, and clear wayfinding. Independent accessibility audits should be required as part of county licensing or partnership approvals.

### 3. Enforce Accessibility in Digital Health

Telehealth platforms, patient portals, appointment systems, and kiosks must be accessible. I will support countywide standards requiring strong digital accessibility, including screen-reader compatibility, captioning, plain-language content, multilingual access, and alternatives for patients without reliable internet access.

### 4. Transportation and Healthcare Coordination

Healthcare access depends on transportation reliability. I will advocate for policies that encourage providers to coordinate with accessible transportation services, including flexible scheduling for paratransit users and on-demand accessible options for medical appointments.

### 5. Expand Community-Based and Preventive Care

People with disabilities often experience fragmented care. I will support policies that expand community-based healthcare models, care coordination, and home- and community-based services, integrating physical health, behavioral health, and long-term supports to reduce avoidable hospital use.

### 6. Address Workforce Gaps

I will advocate for incentives such as loan forgiveness, grants, and residency placements to attract providers trained in disability-competent care to underserved areas. Expanding pathways for people with disabilities to enter healthcare professions will also improve system responsiveness.

### 7. Protect Patients' Rights

Policies must reinforce the right to reasonable accommodations, communication access, support persons, and informed consent. Clear, responsive enforcement mechanisms are needed so patients can resolve accessibility issues without fear of retaliation.

## 8. Accountability and Transparency

Finally, I will support public reporting on healthcare accessibility, patient experience, and disability-related disparities. Regular audits and consumer feedback will ensure continuous improvement.

Together, these policy changes will help build a healthcare system that delivers equitable, accessible, and dignified care for all residents of Prince George's County.

## **How will you expand integrated, trauma-informed mental health services specifically designed for children and adults with disabilities?**

Expanding integrated, trauma-informed mental health services for children and adults with disabilities requires a system-wide approach that recognizes the intersection of disability, trauma, health inequities, and access barriers. I would focus on aligning policy, funding, workforce development, and accountability to ensure services are effective, inclusive, and community-based.

### 1. Trauma-Informed Care as a County Standard

I will advocate for making trauma-informed care a foundational requirement across all county-funded mental health and human services programs. This includes training providers to understand how trauma—including medical trauma, discrimination, poverty, and abuse—affects people with physical, intellectual, developmental, and psychiatric disabilities, and how trauma may present differently across disability types.

### 2. Integrated, Disability-Competent Care Models

Mental health services must be integrated with primary care, developmental disability services, and long-term supports. I will support policies that promote coordinated care teams—bringing together clinicians, case managers, educators, and support professionals—to reduce fragmentation and ensure continuity across settings and life stages.

### 3. Expand Community-Based and School-Based Services

For children and youth with disabilities, early intervention is critical. I will champion expansions of school-based and community-based mental health services that are accessible, family-centered, and culturally responsive. These programs should offer behavioral health supports in familiar environments, reducing the need for crisis intervention or institutional care.

### 4. Workforce Training and Capacity Building

Provider shortages and lack of training are major barriers. I will advocate for ongoing workforce development focused on trauma-informed, disability-competent care, including incentives to recruit and retain providers with expertise in intellectual, developmental, sensory, and physical disabilities. Lived-experience perspectives should be embedded in training programs.

### 5. Accessible Service Delivery

Mental health services must be physically, digitally, and linguistically accessible. I will support policies that ensure accessible facilities, telehealth platforms compatible with assistive technology, communication supports, and flexible service delivery models for individuals who cannot easily travel or who require accommodations.

### 6. Crisis Prevention and Response

We must move away from law-enforcement-centered crisis responses. I will advocate for disability-informed, trauma-responsive crisis services, including mobile crisis teams, peer support, and stabilization services designed specifically for people with disabilities.

### 7. Family and Caregiver Support

Trauma affects families as well as individuals. I will support expanded respite, counseling, and education for caregivers to help stabilize households and reduce preventable crises.

### 8. Accountability and Lived-Experience Oversight

Finally, I will push for measurable outcomes, public reporting, and formal input from people with disabilities and families to guide program design and continuous improvement. By integrating trauma-informed principles with disability-competent care across settings, Prince George's County can build a mental health system that promotes stability, healing, and dignity for children and adults with disabilities.

## **How will you ensure that first responders receive regular training on interacting with and supporting people with diverse disabilities?**

Ensuring that first responders are prepared to effectively interact with and support people with diverse disabilities requires a mandatory, recurring, and accountability-driven training framework embedded across all public safety agencies.

### 1. Make Disability Training Mandatory and Ongoing

I will advocate for county policy requiring regular, mandatory disability-focused training for all first responders—law enforcement, fire, EMS, and emergency management. Training cannot be one-time or optional; it must be recurring, updated, and integrated into onboarding, in-service requirements, and promotional pathways.

### 2. Center Disability-Led and Lived-Experience Training

Training will be developed and delivered in partnership with people with disabilities, disability organizations, and self-advocates. Lived experience is essential to understanding real-world communication needs, behaviors, and safety considerations involving physical, sensory, intellectual, developmental, psychiatric, and neurological disabilities.

### 3. Emphasize Communication, De-Escalation, and Trauma Awareness Core training topics will include:

Recognizing disability-related behaviors that may be misinterpreted as noncompliance

Using clear, accessible communication methods and assistive technology Applying trauma-informed and de-escalation strategies

Supporting individuals who use service animals, mobility devices, or communication supports

Special attention will be given to interactions involving autism, intellectual disabilities, mental health disabilities, and brain injuries.

#### 4. Scenario-Based, Practical Training

Beyond classroom instruction, I will support hands-on, scenario-based training that simulates real emergencies and routine encounters involving people with disabilities. This approach builds muscle memory and confidence, improving safety for both responders and residents.

5. Integrate Disability Content into Crisis Response Models Disability-informed principles must be embedded into crisis intervention and emergency response protocols. I will advocate for closer alignment between first responders and mobile crisis teams, behavioral health professionals, and peer support providers—reducing unnecessary use of force or incarceration.

#### 6. Provide Field Resources and Tools

Training must be reinforced with practical tools, including quick-reference guides, communication cards, accessible dispatch notes, and voluntary registries where residents can share relevant accessibility information for emergencies—while protecting privacy and consent.

#### 7. Measure Performance and Accountability

I will push for clear metrics to track training completion, refresher frequency, and incident outcomes involving people with disabilities. Public reporting, after-action reviews, and community feedback will inform improvements and identify gaps.

#### 9. Leadership and Cultural Change

Finally, leadership must reinforce expectations. Supervisors will be trained to model disability-competent practices, and agencies will treat effective interactions with people with disabilities as a core measure of professional performance.

Through mandatory training, lived-experience leadership, practical tools, and accountability, Prince George's County can ensure first responders are equipped to provide safe, respectful, and effective support to residents with diverse disabilities.

### **How will you ensure adequate funding and accessibility of programs that help older adults maintain independence when they acquire disabilities?**

Ensuring that older adults can maintain independence when they acquire disabilities requires sustained funding, accessible program design, and coordination across aging, disability, housing, healthcare, and transportation systems. I would focus on building a stable, inclusive support infrastructure that allows residents to age with dignity in their homes and communities.

#### 1. Protect and Expand Dedicated Funding Streams

I will advocate for stable, multi-year funding for programs that support aging in place, including home- and community-based services, caregiver supports, and assistive technology. County budgets should prioritize these programs as cost-effective alternatives to institutional care, leveraging state, federal, and Medicaid waiver funding to maximize impact and reduce duplication.

#### 2. Integrate Aging and Disability Systems

Too often, older adults who acquire disabilities fall between aging and disability service systems. I will support policies that formally align these systems through shared funding strategies, coordinated eligibility processes, and cross-trained staff—ensuring seamless access regardless of age at disability onset.

#### 3. Expand Home Modifications and Assistive Technology

Maintaining independence starts at home. I will champion expanded funding for home modification grants and low-interest loans to support accessibility improvements such as ramps, grab bars, wider doorways, and smart-home technology. Programs must be easy to access, with simplified applications and outreach to historically underserved communities.

#### 4. Ensure Program Accessibility and Usability

Programs are only effective if people can use them. I will push for universal design standards across county-funded services, including accessible facilities, transportation options, digital services, and multilingual communication. Intake and assessment processes must be person-centered, not burdensome or duplicative.

#### 5. Strengthen Care Coordination and Navigation

Acquiring a disability later in life can be overwhelming. I will support funding for care coordination and benefits counseling that help older adults and families navigate healthcare, housing, transportation, and income supports without losing critical assistance during transitions.

#### 6. Support Caregivers and Prevent Burnout

Family caregivers are essential to independence. I will advocate for expanded respite services, caregiver training, and mental health supports, recognizing that sustainable caregiving prevents avoidable institutionalization and emergencies.

#### 7. Promote Community-Based Health and Wellness

I will support accessible wellness, fall-prevention, rehabilitation, and mental health programs delivered in community settings. These services help older adults adapt to new disabilities while promoting physical and emotional well-being.

#### 8. Accountability and Community Oversight

Finally, I will push for transparent tracking of funding levels, service capacity, waitlists, and outcomes—guided by direct input from older adults with disabilities and advocacy organizations. By protecting funding, improving access, and coordinating systems, Prince George's County can ensure that older adults who acquire disabilities are supported to live independently, safely, and with dignity.

**What will be your top three legislative priorities to advance disability rights and full inclusion in our county? (Please list and briefly describe your top three priorities.)**

1. **Countywide Disability Inclusion and Accessibility Accountability Act**  
My first priority is establishing a binding legislative framework that makes disability inclusion a core responsibility across all county agencies—not an optional add-on. This legislation would require universal design standards for county-funded facilities, transportation, housing, digital services, and public communications, exceeding ADA minimums. It would mandate disability impact assessments for major legislation and capital projects, create enforceable accessibility timelines, and establish penalties and corrective action plans for non-compliance. Importantly, it would elevate lived-experience input by formalizing advisory roles for residents with disabilities in policy development and oversight. This priority ensures accessibility is proactive, measurable, and enforceable—preventing costly retrofits and systemic exclusion.
2. **Integrated Housing, Transportation, and Services for Independent Living**  
True inclusion depends on where people live and how they move. My second priority is legislation that aligns housing, transportation, healthcare, and support services to promote independent, community-based living. This includes expanding affordable, accessible, and integrated housing requirements in county-funded developments; strengthening enforcement of fair housing and reasonable accommodation protections; and coordinating housing policy with accessible transportation and community-based services. The goal is to end unnecessary institutionalization and ensure people with disabilities—across the lifespan—can live in the community with choice and dignity. By legislating system alignment rather than siloed programs, this priority supports long-term independence and reduces reliance on crisis and institutional care.
3. **Disability-Competent Public Systems: Workforce, Healthcare, and Public Safety**  
My third priority focuses on how public systems interact with people with disabilities every day. I will prioritize legislation requiring mandatory, recurring disability-competency and trauma-informed training for county employees, healthcare providers receiving county support, and first responders. This includes standards for accessible healthcare facilities and telehealth platforms, requirements for disability-informed crisis response models, and investments in disability-competent workforce development. Accountability measures—such as performance metrics, public reporting, and corrective action requirements—will ensure training translates into safer, more respectful outcomes. This priority recognizes that rights are only real when public systems have the capacity, training, and accountability to uphold them.

Together, these three legislative priorities—accountability, independent living, and system competency—form a comprehensive strategy to move Prince George’s County from compliance toward full inclusion, equity, and dignity for residents with disabilities. I consent to my responses being shared publicly in full.

Campaign Website or Contact Information: <https://district-thrive-hub.lovable.app/#about>

