

AGENCY ANNUAL PROGRAM PERFORMANCE REPORT FOR PATBI
FINAL 11/29/12

REPORTING PERIOD: 2012
STATE: Virginia
AGENCY NAME: Virginia Office for Protection and Advocacy
DATE SUBMITTED:

AGENCY INFORMATION

Agency Name: Virginia Office for Protection and Advocacy

Address of Agency:

a. Main Office:

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Richmond, Virginia 23230

b. Satellite Office(s) (if applicable):

Not Applicable

c. Contract Office(s) (if applicable):

Not Applicable

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PART I: NON-CASE SERVICES

A. INFORMATION AND REFERRAL SERVICES (I&R)

1. Total Individuals Receiving I&R Services	91
2. Total Number of I&R requests during the Fiscal Year	90

B. TRAINING ACTIVITIES

1. Number of Trainings Presented by Staff	12
2. Number of Individuals Who Attended These Trainings	1152

3. Describe at least two (2) trainings presented by the staff. Be sure to include information about the topics covered, the purpose of the training, and a description of the attendees.

VOPA provided training on a broad array of topics such as disability rights, employment, special education, and TBI services and resources available in Virginia to a diverse group of attendees during this past year

Training to improve the lives of Veterans with TBI remained a priority. One such training objective involving five (5) groups and sixty-six (66) individuals addressed employment rights of Veterans with TBI. The training focused on the Americans with Disabilities Act and state employment laws. Training attendees were Veterans with TBI and staff of the Virginia Employment Commission. The training educated the participants on employment law applicable to Veterans with TBI with practical information on their employment rights and how to protect against potential discrimination.

Training on employment rights for transition aged young adults and individuals utilizing rehabilitation programs is an area where VOPA concentrated our efforts as well. One training objective educated three (3) groups of thirty-seven (37) college students, advocates, rehabilitation program participants, teachers and staff regarding employment rights to ensure individuals with TBI understand their rights when searching for and maintaining employment.

4. Agency Outreach. Describe the agency’s outreach efforts to previously unserved or underserved individuals including minority communities.

VOPA provided outreach through our training objectives to many rural and underserved counties and cities in Virginia. They included: Petersburg, Marion, Hampton, Mechanicsville and Charlottesville.

Since employment is a crucial pathway for individuals to maintain their household and economic health, VOPA made a concerted effort to complete outreach in this area.

VOPA provides “Office Hours” at some of the local Centers for Independent Living and other organizations. Individuals with disabilities are informed of their rights and provided with other legal advice and services when appropriate.

VOPA routinely provides training and speaking engagements through our Speakers Bureau. The Speakers Bureau is comprised of VOPA staff that are available to provide training and presentations that are related to the Office’s current Goals, Focus Areas, and Objectives

(priorities). The Speakers Bureau currently has its own page on the VOPA website and there is a link for the public to make request a for a Speaker's Bureau presentation. VOPA also provides exhibits and materials for fairs, conferences, and other functions. Whenever a presentation is conducted about VOPA in general, it addresses some of the work we do related to TBI.

C. INFORMATION DISSEMINATED TO THE PUBLIC

1. Radio and TV Appearances by Agency Staff	1
2. Newspaper/Magazine/Journal Articles Prepared by Agency Staff	3
3. PSAs/Videos Aired by the Agency	0
4. Website Hits	n/a
5. Publications/Booklets/Brochures Disseminated by the Agency	152

6. Other

Number	Description (use separate sheets if necessary)
0	

7. External Media Coverage of Agency Activities

Radio/TV Coverage	Newspaper/Magazines/Journal	PSAs/Videos	Publications/Booklets/Brochures
0	21	0	0

PART II: CASE-SERVICES

A. INDIVIDUALS SERVED

1. Individuals	
a. Individuals Served Receiving Advocacy at Start of Fiscal Year (carryover from prior)	2
b. Additional Individuals Served During Fiscal Year (new for fiscal year)	2
c. Total Number of Individuals Served During Fiscal Year (a + b)	4
d. Total Number of Individuals with Cases that Were Closed During Fiscal Year	4
e. Total Individuals Still Being Served at the End of the Fiscal Year	0

2. Services	
a. Number of Cases/Service Requests Open at Start of Fiscal Year (carryover from prior)	2

b. Additional Cases/Service Requests Opened During Fiscal Year (new for fiscal year)	2
c. Total Number of Cases/Service Requests During Fiscal Year (a + b)	4
d. Total Number of Cases/Service Requests that Were Closed During Fiscal Year	4
e. Total Number of Cases/Service Requests Open at the End of the Fiscal Year	0

B. PROBLEM AREAS/COMPLAINTS OF INDIVIDUALS SERVED

Complaint	
1. Abuse (total)	
a. Inappropriate Use of Restraint & Seclusion	
b. Involuntary Treatment	
c. Physical, Verbal, & Sexual Assault	
d. Other	
2. Access to Records	
3. Advance Directives	
4. Architectural Accessibility	
5. Assistive Technology (total)	
a. Augmentative Comm. Devices	
b. Durable Medical Equipment	
c. Vehicle Modification/Transportation	
d. Other	
6. Civil Commitment	
7. Custody/Parental Rights	
8. Education (total)	1
a. FAPE: IEP/IFSP Planning/Development/Implementation	
b. FAPE: Discipline/Procedural Safeguards	
c. FAPE: Eligibility	
d. FAPE: Least Restrictive Environ.	
e. FAPE: Multi-disciplinary Evaluation/Assessments	
f. FAPE: Transition Services	1
g. Other	
9. Employment Discrimination (total)	1
a. Benefits	

b. Hiring/Termination	1
c. Reasonable Accommodations	
d. Service Provider Issues	
e. Supported Employment	
f. Wage and Hour Issues	
g. Other	
10. Employment Preparation	
11. Financial Benefits (total)	
a. SSDI Work Incentives	
b. SSI Eligibility	
c. SSI Work Incentives	
d. Social Security Benefits Cessation	
e. Welfare Reform	
f. Work Related Overpayments	
g. Other Financial Entitlements	
12. Forensic Commitment	
13. Government Benefits/Services	
14. Guardianship/Conservatorship	
15. Healthcare (total)	2
a. General Healthcare	
b. Medicaid	
c. Medicare	
d. Private Medical Insurance	
e. Other- issues with Veterans Administration Services	2
16. Housing (total)	
a. Accommodations	
b. Architectural Barriers	
c. Landlord/Tenant	
d. Modifications	
e. Rental Denial/Termination	
f. Sales/Contracts/Ownership	
g. Subsidized Housing/Section 8	
h. Zoning/Restrictive Covenants	

i. Other	
17. Immigration	
18. Neglect (total)	
a. Failure to Provide Necessary or Appropriate Medical Treatment	
b. Failure to Provide Necessary or Appropriate Mental Health Treatment	
c. Failure to Provide Necessary or Appropriate Personal Care & Safety	
d. Other	
19. Post-Secondary Education	
20. Non-Medical Insurance	
21. Privacy Rights	
22. Rehabilitation Services (total)	
a. Communications Problems (Individuals/Counselor)	
b. Conflict About Services To Be Provided	
c. Individual Requests Information	
d. Non-Rehabilitation Act	
e. Private Providers	
f. Related to Application/Eligibility Process	
g. Related to IWRP Development/Implementation	
h. Related to Title I of ADA	
i. Other Rehabilitation Act-related problems	
23 Suspicious Death	
24. Transportation (total)	
a. Air Carrier	
b. Paratransit	
c. Public Transportation	
d. Other	
25. Unnecessary Institutionalization	
26. Voting (total)	
a. Accessible Polling Place / Equipment	
b. Registration	
c. Other	
27. Other*	

*For any cases listed under “27. Other,” describe the specific problem area or complaint and the number of cases covered under each problem area or complaint listed. Use separate sheets if necessary.

C. REASONS FOR CLOSING CASE FILES

1. Reason for Closing Case Files	
a. All Issues Resolved in Client’s Favor	2
b. Some Issues Resolved in Client’s Favor	
c. Other Representation Obtained	
d. Individual Withdrew Complaint	
e. Services Not Needed Due to Death, Relocation, etc.	
f. Individual Not Responsive to Agency	1
g. Case Lacked Legal Merit	
h. Conflict of Interest	
i. Agency Withdrew from Case	
j. Lack of Resources	
k. Not Within Priorities	
l. Issue Not Resolved in Client’s Favor	1
m. Other*	
n. Total	4

*For any cases listed under “Other,” describe the reason for closing the case and the number of cases covered under each reason listed. Use separate sheets if necessary.

D. HIGHEST INTERVENTION STRATEGY

Interventions	
1. Short Term Assistance	1
2. Systemic/Policy Activities	
3. Investigation/Monitoring	
4. Negotiation	3
5. Mediation/Alternative Dispute Resolution	
6. Administrative Hearing	
7. Legal Remedy/Litigation	
8. Class Action Suits	

PART III: STATISTICAL INFORMATION FOR INDIVIDUALS SERVED

A. AGE OF INDIVIDUALS SERVED

Age	
0 to 12	
13 to 18	
19 to 25	1
26 to 64	3
65 and over	
Total	4

B. GENDER OF INDIVIDUALS SERVED

Male	2
Female	2
Total	4

C. RACE/ETHNICITY OF INDIVIDUALS SERVED

Race/Ethnicity	
1. American Indian/Alaskan Native	
2. Arab American	
3. Asian	
4. Black/African American	
5. Hispanic/ Latino	2
6. Native Hawaiian/Other Pacific Islander	
7. White/Caucasian	2
8. Multiracial/Multiethnic	
9. Race/Ethnicity Unknown	
10. Other Than Above*	
11. Total	4

*For any individuals listed under "Other Than Above," describe the race/ethnicity of the individual and the number of cases covered under each description listed. Use separate sheets if necessary.

D. LIVING ARRANGEMENTS OF INDIVIDUALS SERVED

Arrangement	
1. Community Residential Home	
2. Foster Care	
3. Homeless/Shelter	
4. Legal Detention/Jail/Prison	
5. Nursing Facility	
6. Parental/Guardian or Other Family Home	2
7. Independent	2
8. Private Institutional Setting	
9. Public (State Operated) Institutional Setting	
10. Public Housing	
11. VA Hospital	
12. Other*	
13. Unknown/Not Provided	

*For any cases listed under “Other,” describe the living arrangement of the individual and the number of cases covered under each description listed.

E. GEOGRAPHIC LOCATION

Geographic Location	
1. Urban/Suburban	2
2. Rural	2
3. Total	4

PART IV: SYSTEMIC ACTIVITIES AND LITIGATION

A. SYSTEMIC ACTIVITIES

1. Number of Policies/Practices Changed as a Result of Non-Litigation Systemic Activities	0
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2. Describe the agency’s systemic activities. Be sure to include information about the policies that were changed and how these changes benefit individuals with disabilities. If possible, estimate the number of individuals potentially impacted by such policy changes. Also include at least three case examples of how the agency’s systemic activities impacted individuals served.

VOPA participated in a Virginia Department of Education (VDOE) convened TBI Task Force. The Task Force advocated for a national policy paper to be published by the National Institute of Neurological Disorder and Strokes about identifying students with TBI and describing the educational service delivery needed for students identified with TBI. The paper will contain a national study in which the Institute is surveying and reporting the methods used by various Departments of Education from many states including Virginia. VDOE expects the Institute to provide the guidance policy paper which will establish a national standard for all states to follow in identifying students with TBI and providing the appropriate service delivery for students with TBI, including issues related to TBI awareness and capacity building for educators. VOPA's hope is this national standard will be used for state training initiatives by national experts to train state educators who will then become designated TBI "specialists" for local school divisions. VOPA awaits publication of the policy paper.

B. LITIGATION/CLASS ACTIONS

1. Total Number of Non-Class Action Lawsuits Filed	0
a. Number of Non-Class Action Lawsuits Filed During Fiscal Year (new for fiscal year)	0
b. Number of Non-Class Action Lawsuits Filed at Start of Fiscal Year (carryover from prior fiscal year)	0
2. Total Number of Class Action Lawsuits Filed	0
a. Number of Class Action Lawsuits Filed During Fiscal Year (new for fiscal year)	0
b. Number of Class Action Lawsuits Filed at Start of Fiscal Year (carryover from prior fiscal year)	0

3. Describe the agency's litigation/class action activities. Explain how individuals with disabilities benefited from such litigation. If possible, estimate the number of individuals potentially impacted by changes resulting from the litigation. Be sure to include at least three case examples that demonstrate the impact of the agency's litigation.

N/A

C. MONITORING

Describe any monitoring conducted by the agency by providing the major areas of non-litigation-related monitoring activities and the groups likely to be affected. Address the major outcomes of the monitoring activities during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency's monitoring activities.

VOPA continued a comprehensive project in which we surveyed eight (8) Medicaid Waiver Group Homes and seven (7) Assisted Living Facilities in Staunton, Harrisonburg and Winchester using two survey instruments we developed based on the Virginia Department of Behavioral Health and Development Services and the Department of Social Services licensing regulations. Our surveys included a comprehensive overview of the safety and condition of the homes. Many Virginians with TBI live in community residential placement. As a result of the surveys, VOPA inspected the residents' current living environment and indentified and addressed concerns. These concerns included inadequate ramps, bathrooms and doorways, making sure the facilities are clean and

making sure the emergency preparedness plans meet the unique needs of the residents of the home. We conducted these surveys using multiple funding sources. VOPA is continuing this project in FY 13.

D. LITIGATION-RELATED MONITORING

Describe any monitoring conducted by the agency related to court orders or case settlements by providing the major areas of monitoring and the groups likely to be affected. Address the major outcomes of the litigation-related monitoring during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency’s litigation-related monitoring.

In support of *United States v. Virginia*, VOPA filed an amicus brief arguing that training centers are not safe. Using data we collected from hundreds of investigations over the last several years, we laid out in stark detail to the court the abuse and neglect that occur in training centers. We also summarized the safety provisions of the agreement and showed how, if entered, it would protect all training center residents: those who are discharged, those who remain and those who may someday be admitted. The Court held a hearing to determine whether to enter the agreement. VOPA asked the Court for an opportunity to be heard, so that we could point out the value the settlement agreement has for other persons, specifically for people with traumatic brain injury. Although the Court declined to let us argue, on August 23, 2012, the Court approved the agreement. Thousands of people living and at risk of living in training centers will now have the opportunity to live in integrated community settings as a result of the Court's Order in *United States v. Virginia*, and other disabilities such as TBI will benefit from improvements to community services and oversight.

E. FULL OR PRELIMINARY INVESTIGATIONS

Describe any full investigations conducted by the agency by providing the major areas of investigation and the groups likely to be affected. Address the major outcomes of the investigations during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency’s investigations. Use separate sheets if necessary.
N/A

F. DEATH INVESTIGATIONS

1. Number of Formal Death Reports Received	0
2. Number of Informal/External Death Reports Received	0
3. Number of Death Investigations	0

4. Describe any death investigations conducted by the agency during the fiscal year and any subsequent activities resulting from these investigations. Also include the major outcomes of the death investigations. Use separate sheets if necessary.
None

PART V: PRIORITIES AND OBJECTIVES

A. CURRENT PRIORITIES AND OBJECTIVES

Priority #1: People with Disabilities are Free from Abuse and Neglect

Description of Need, Issue, or Barrier Addressed:

Indicator(s):

Survey community residential facilities in a selected region to assess the effectiveness of licensure oversight for safety and quality of service.

Respond to all proposed legislation, regulation, or policy changes that seek to address elimination of abuse and neglect in licensed community residential settings.

Respond to any plan purporting to address the February 2011 Department of Justice findings to ensure that there is an adequate system for protection from harm in community settings.

Outcome:	met
Total Number of Cases Handled	0

Illustrative Cases (at least one specific case description showing the success)

VOPA completed a comprehensive project in which we surveyed fifteen (15) residential facilities for individuals with disabilities including TBI in the Shenandoah Valley and identified and addressed concerns. These concerns included inadequate ramps, bathrooms and doorways, making sure the facilities are clean and making sure the emergency preparedness plans meet the needs of the residents of the home. For further detail on this project, please reference Part IV, Section C of this report.

VOPA worked with the Virginia Medicaid Waiver Network signing onto the Network's comments on MR/ID Waiver proposed regulations. VOPA endorsed multiple suggestions to make quality service delivery more accessible to individuals with disabilities. VOPA also consulted with the Virginia Board for People with Disabilities regarding consumer directed services reference checks.

In support of *United States v. Virginia*, VOPA filed an amicus brief arguing that training centers are not safe. Using data we collected from hundreds of investigations over the last several years, we laid out in stark detail to the court the abuse and neglect that occur in training centers. As noted in Part IV D above, our briefs argued that the agreement would benefit people with multiple disabilities other than developmental disabilities, especially people receiving services relating to traumatic brain injury.

Priority #2: Children with Disabilities Receive an Appropriate Education

Description of Need, Issue, or Barrier Addressed:

Indicator(s):

Increase self-advocacy by providing technical assistance or short-term assistance to all callers who complain that they or their children have been suspended or at risk of long term suspension, denied appropriate therapy and services or denied a full school day.

Outcome:	met
Total Number of Cases Handled	0

Illustrative Cases (at least one specific case description showing the success)

VOPA opened fifty-five (55) cases under this indicator which were all funded by our other grants. Under this indicator, we did provide information and referral to multiple parents and advocates of children with TBI facing education issues outside of our objectives. An increase in PATBI funding would allow us to take on more education cases.

Priority #3: Children with Disabilities Receive an Appropriate Education

Description of Need, Issue, or Barrier Addressed:

Indicator(s):

As part of the Virginia Department of Education Task Force, develop a training for educators regarding the education of children with TBI and revise guidelines for the education of children with TBI.

Represent individuals with TBI who have been denied appropriate evaluations, services, or accommodations under their IEP or 504 Plan.

Through contract with Brain Injury Services of the Southwest, represent children with TBI to receive appropriate special education services through September 30, 2012.

Outcome:	met
Total Number of Cases Handled	1

Illustrative Cases (at least one specific case description showing the success)

VOPA provided our Task Force Training via the conference "Building Capacity to Meet the Needs of Students with Traumatic Brain Injury in Virginia Schools!" As many as three hundred ninety (390) parents, teachers and advocates from across the state gained information about VOPA, our services, and providing services to children with TBI. This was a collaborative effort with the Partnership for People with Disabilities and Virginia Department of Education.

VOPA continued to collaborate with the Virginia Department of Education (VDOE) via the TBI Task Force. The Task Force advocated for a national policy paper to be published by the National Institute of Neurological Disorder and Strokes about identifying students with TBI and educational service delivery needed for students identified with TBI. VOPA awaits publication of the policy paper. For further detail about this project, please review Part IV, Section 2-A of this report.

Illustrative case: Jane is 19. She felt like her public high school was pushing her through the education system without providing any type of transition services. Jane wanted to get out. VOPA worked with Jane and attended an IEP meeting with her. We were able to negotiate with the school to get Jane a special diploma along with curriculum for preparing to take the General

Education Diploma (GED) test, a One-To-One Aide, connection with local GED facilitator and services with Department of Rehabilitative Services. Jane was happy to finally get the supportive services from the school to allow her to finish school and successfully transition into the community.

Through a contract with Brain Injury Services of the Southwest, VOPA provided funding for advocacy services for fifteen (15) children with TBI to receive appropriate special education services through an IEP or 504 plan. The typical service included meeting with parents of children with TBI to educate them on the IEP process and to assist them in developing IEP self-advocacy skills related to their specific type of IEP meeting. These meetings addressed the need to provide appropriate behavioral accommodations, specialized services such as occupational or speech therapy and basic accommodations such as extended time on work and de-escalation techniques. Southwest Virginia is a rural and underserved part of the state and VOPA ensured many children with TBI were able to get the services they needed through our partnership with Brain Injury Services of the Southwest.

Priority #4: People with Disabilities Have Equal Access to Government Services

Description of Need, Issue, or Barrier Addressed:

Indicator(s): Appropriate TBI supports for Veterans

Train veterans and staff at Veterans facilities, Virginia Employment Commission, or community-based Veterans organizations about employment rights for people with disabilities

Prepare and submit articles related to TBI and services to Veterans organizations for publications

Represent Veterans with TBI denied appropriate services or supports, or denied rights due to their disability

Outcome:	met
Total Number of Cases Handled	2

Illustrative Cases (at least one specific case description showing the success

VOPA trained five (5) groups of sixty-six (66) Veterans with TBI and staff at Virginia Employment Commission (VEC) group sites regarding employment rights of Veterans with TBI. The trainings focused on the Americans with Disabilities Act and state employment laws. The trainings educated the participants on employment law applicable to Veterans with TBI with practical information on their employment rights and how to protect them from potential discrimination. Locations of the presentations included Marion, Hampton, Petersburg and Mechanicsville.

VOPA provided information for Veterans and advocates about accessibility under Title III of the ADA and provided an overview of VOPA services in a series of three (3) separate published articles. In July 2012, Paralyzed Veterans of America did a press release about VOPA in their Advocacy Newsletter. In September 2012, Fort Lee Traveler published our own VOPA article titled "Veterans to Have Equal Access to Public Accommodations." Finally, in October 2012 The Flagship also published VOPA's article titled "Veterans to Have Equal Access to Public Accommodations." These publications were provided to approximately 30,000 Veterans and advocates.

Leon is a fifty-seven year old Veteran who worked for several years in a military psycho-therapy and employment program. He had progressed far in the program to the point where he was actually working and getting paid directly by the program to load machines and organize items. Suddenly, one day after a verbal argument with other clients in the program, Leon was immediately terminated from the program, leaving him without a job or the training he needed to be successful. VOPA worked with Leon to get a consultation from his doctor to to get back into the program. VOPA then attended a meeting with Leon and the program staff and as a result of our negotiation, Leon was allowed back into the program. Leon can once again maintain employment and training vital to his continued rehabilitation.

In 2007, a bomb blast left thirty-one year old Adam injured. He suspected he had suffered a TBI, but the military branch he was in diagnosed him with depression and post-traumatic stress disorder and refused to assess him for a potential TBI. VOPA assisted Adam by contacting his physician at the on-base clinic to discuss the necessity of the assessment to rule out TBI. In November 2011, a TBI evaluation was conducted and determined the Adam did not have TBI. Adam now has peace of mind that he is being treated by his physicians under the most appropriate diagnosis.

Priority #5: People with Disabilities are Employed to their Maximum Potential

Description of Need, Issue, or Barrier Addressed:

Indicator(s):

Train groups regarding employment rights under ADA and VDA

Provide Technical Assistance to individuals regarding employment rights or discrimination based under Title 1 of the ADA or the Virginians with Disabilities Act.

Outcome:	met
Total Number of Cases Handled	1

Illustrative Cases (at least one specific case description showing the success)

VOPA concentrated our training on employment rights under this Indicator to transition-aged young adults and individuals utilizing rehabilitation. This training objective educated three (3) groups of thirty-seven (37) college students, advocates, rehabilitation program participants, teachers and staff regarding employment rights to ensure individuals with TBI understand their rights when searching for and maintaining employment. Presentation sites included two Community Colleges in Charlottesville and Richmond City and a Vocational Rehabilitation Center in Petersburg.

Danielle is fifty-two and worked at a counseling and training service for criminal inmates. She was terminated from her job due to her memory issues and what she felt was discrimination from her employer. VOPA opened a case for technical assistance to review these concerns with Danielle, however, after an initial conversation to gather the facts of her case, she was unresponsive to our communication and therefore the case was closed.

B. AGENCY ACCOMPLISHMENTS

VOPA connected with veterans with Traumatic Brain Injury across Virginia by providing employment presentations to five groups of sixty-six Veterans and advocates, creating three

published articles on equal access to public accommodations to 30,000 Veterans and advocates and assisting two Veterans directly with barriers in employment and vocational services and medical diagnosis. Utilizing these three unique outreach methods we successfully connected to 30,068 Veterans with TBI.

VOPA surveyed 15 residential facilities who serve individuals with TBI and addressed barriers with the providers to ensure the residents and the homes they live in are safe.

VOPA continued to work with the Virginia Department of Education, Medicaid Waiver Network, Brain Injury Services of Southwest Virginia, Partnership for People with Disabilities and many other agencies to ensure quality services for students with TBI are provided by our schools and service providers.

VOPA reached out to thirty-seven students in one vocational rehabilitation programs and in two colleges to inform them of their employment rights to make sure they are equipped with the knowledge they need to have supports to maintain competitive employment.

C. IMPLEMENTATION PROBLEMS

Limited resources remains a significant impediment to meeting the advocacy needs of adults and children with TBI. VOPA staff regularly use other appropriate funding resources to serve potential PATBI-eligible individuals in order to maximize total services provided. Additional PATBI funds would permit VOPA to increase PATBI goal objectives. The unmet need is significant.

While identified estimated case numbers and activities may have been addressed in conjunction with other funding sources, the result was a positive impact on PATBI-eligible individuals.

PART VI: AGENCY ADMINISTRATION

A. GRIEVANCES FILED

PATBI grievances filed against the agency during the fiscal year	0
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B. COLLABORATIVE EFFORTS

On TBI funded projects, VOPA collaborated with the following agencies:

- Brain Injury Services of Southwest Virginia
- J. Sargeant Reynolds Community College
- Partners in Policymaking
- Petersburg Area Rehabilitation Center
- Virginia Board for People with Disabilities
- Virginia Employment Commission
- Medicaid Waiver Network
- Piedmont Community College
- McGuire Veterans Hospital
- Fort Lee
- Partnership for People with Disabilities
- U.S. Department of Justice

1. NETWORK COLLABORATION

VOPA regularly collaborates and consults with the National Disability Rights Network (NDRN). Several VOPA staff subscribe to NDRN supported P&A listservs. These listservs offer P&As the opportunity to consult and collaborate nationwide on similar issues and concerns facing people with disabilities. VOPA staff serve on NDRN TASC committees, as well.

2. ALL OTHER COLLABORATION

VOPA participates on the Virginia Rehabilitation Council for the Department for the Blind & Vision Impaired (DBVI) and the Rehabilitation Council for the Department of Rehabilitative Services. The Rehabilitation Act of 1973, as amended, requires the establishment of a Statewide Rehabilitation Council to be appointed by the Governor. The amendments identify specific organizations to be represented on the Council, and also specify that a minimum of four individuals represent business, industry, and labor on the Council as well as current or former applicants for or recipients of vocational rehabilitation (“VR”) services. The Rehabilitation Council advises the VR program in development of the State plan and completion of the federally required needs assessment. The Council also assists with customer satisfaction surveys, training or employment opportunities, and completion of the required Annual Report on the status of VR services in the State.

VOPA works informally with the State Long-Term Care Ombudsman throughout the year. Coordination with the State Long-Term Care Ombudsman Program (through the Virginia Department of Aging and Rehabilitative Services) is particularly important during the legislative session.

The Department of Medical Assistance Services (DMAS) is the primary source of funding for the long-term care system in Virginia. VOPA coordinates with them on an as needed basis.

PART VII. END OF FORM

Signature

Date

Colleen Miller, Executive Director

Name (printed)

Title