

AT FY15 PPR

AGENCY INFORMATION

Agency Name: disAbility Law Center of Virginia

Address of Agency:

a. Main Office:

1512 Willow Lawn Drive
Suite 100
Richmond, Va. 23230

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

Not Applicable

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

Not Applicable

Agency Telephone Number: 804-225-2042

Agency Toll-Free Telephone Number: 800-552-3962

Agency TTY Number: 804-225-2042

Agency Toll-Free TTY Number: 800-552-3962

Agency Fax Number: 804-662-7431

Agency E-Mail Address: info@dlcv.org

Agency Web Address: www.dlc.v.org

Executive Director Name: Colleen Miller, Esq.

Executive Director Email: Colleen.Miller@dlcv.org

Staff Preparing Report Name: Robert Gray

Staff Preparing Report Email: Robert.Gray@dlcv.org

Staff Preparing Report Office Location: 1512 Willow Lawn Drive, Suite 100
Richmond, Virginia 23230

PART I – NON-CASE SERVICES

A. INFORMATION AND REFERRAL SERVICES (I&R)

1. Total Number of Individuals Receiving I&R Services during the Fiscal Year	43
2. Total Number of Requests for I&R Services during the Fiscal Year	43

B. TRAINING ACTIVITIES

1. Number of Training Sessions Presented by Staff	34
2. Number of Individuals Who Attended These Training Sessions	1069

3. Describe two training events presented by the staff. Include the following information: (a) topics covered, (b) the purpose of the training, and (c) a description of the attendees.

Training Event # 1

Train groups of individuals, advocates and parents about the availability of and how to access AT services.

- a. Training topics for these presentations included assistive technology and how to access it through special education and the Early and Periodic, Screening, Diagnosis and Treatment (EPSDT) program. EPSDT is a Medicaid program for children from birth to age 21 that covers things like assistive technology to help children manage and overcome their disabilities.
- b. The purpose of these trainings was to inform individuals of their rights and teach them how to navigate the process of obtaining assistive technology through different funding sources. dLCV revised its EPSDT Fact Sheet and distributed it to those in attendance.
- c. The attendees for these trainings included forty parents, children, advocates, special education teachers and other service providers. Ten of the individuals trained were Spanish speakers who were able to gain valuable information with the help of an interpreter. Trainings were held in Manassas, Virginia at a twenty-fifth Anniversary of the ADA Celebration and as part of dLCV's Office Hours program. Attendees reported they felt they had increased knowledge as a result of coming to the trainings and were excited about what they had learned from dLCV.

Training Event #2

Inform consumers, family members and service providers about dLCV, rights in the community and community integration by providing regional presentations.

- a. Topic for the trainings included dLCV services, general rights information, community integration and assistive technology. A variety of assistive technology was demonstrated and the presenter discussed how assistive technology helps individuals integrate into their programs and communities.

- b. The purpose of the trainings was to inform individuals of their rights and give examples of different types of assistive technology available. General dLCV and assistive technology publications were provided.
 - c. Forty-one individuals received training over three presentations, two of which occurred on the Eastern Shore. Those in attendance included individuals with intellectual disabilities, family members, day support providers and case managers.
- 4. Agency Outreach -- Describe the agency's outreach efforts to previously unserved or underserved individuals including minority communities.**

In Fiscal Year 2015, dLCV provided outreach and training to eleven different groups the Commonwealth totaling one-hundred sixty-three individuals. The topics of trainings included general information about the Law Center, voting and employment rights, the Americans with Disabilities Act and assistive technology. dLCV staff provided Office Hours at eight Centers for Independent Living (CIL) located in diverse areas of the Commonwealth. We also met one-on-one with individuals discussing the issues they were facing and providing information and referral and completing requests for services.

Several of the presentations were focused specifically on assisting children and transition age youth in obtaining assistive technology to help overcome their disabilities. dLCV worked with a school for children with Autism to increase the knowledge base of teachers, therapists and administrators seeking to help students get therapies and assistive technology covered under Medicaid Waivers and the Early and Periodic, Screening, Diagnosis and Treatment program. We also worked with a program that helps visually impaired students prepare for life after high school and educated them on what accommodations, like assistive technology, they might need to attend college or find employment.

dLCV collaborated with a videographer to create informational videos regarding topics like vocational rehabilitation, employment rights and advance directives. The video series is posted on dLCV's website and can be viewed at www.dLCV.org.

In the Employment Rights video, dLCV's expert discusses reasonable accommodations in the workplace. We explain that accommodations include adaptive equipment that allows individuals with disabilities to perform their job duties. The video's expert also talks about how to request reasonable accommodations, as well as how to make a complaint to the Equal Opportunity Employment Commission.

The importance of Assistive Technology is also talked about in the Vocational Rehabilitation Rights video. The Department of Aging and Rehabilitative Services, the agency responsible for Vocational Rehabilitation in Virginia, may be required to provide assistive technology and evaluations to determine what kinds of AT an individual may need in order to get or keep a job. This segment informs individuals of their rights and responsibilities about Vocational Rehabilitation.

dLCV maintains a website that posted our Goals and Focus Areas. This website also posted notices for the Board of Directors' and Advisory Council meetings, Job vacancies, announcements, agency publications, and disability-related advocacy links were also available. This website can be viewed at www.dlcV.org.

dLCV also provides outreach and training, exhibits and materials for fairs, conferences, and meetings on request. Whenever a presentation is conducted about dLCV in general, it addresses some of the work we do related to Assistive Technology issues.

dLCV has a Facebook page which includes agency information and links to resources.

dLCV uses “The Directors’ Blog” on our website to alert the public about our activities, as well as news and developments in disability law and to obtain feedback about our work.

C. INFORMATION DISSEMINATED TO THE PUBLIC BY YOUR AGENCY

For each method of dissemination, enter the total number of each method used by your agency during the reporting period to distribute information to the public. For publications/booklets/brochures (item 5), enter the total number of documents produced. See instruction manual for details.

Method of dissemination	Number
1. Radio and TV Appearances by Agency Staff	0
2. Newspaper/Magazine/Journal Articles Prepared by Agency Staff	0
3. PSAs/Videos Aired by the Agency	1
4. Website Hits	25,863
5. Publications/Booklets/Brochures Disseminated by the Agency	650
a. Number of individuals/agencies receiving documents produced in item 5	200
6. Other – Report to the General Assembly	1

D. INFORMATION DISSEMINATED ABOUT YOUR AGENCY BY EXTERNAL MEDIA COVERAGE

Describe information about your agency produced and disseminated by external media or other agencies/entities for each of the relevant categories below. Enter “N/A” for each field not applicable for your agency.

- 1. Radio/TV coverage- N/A
- 2. Newspapers/Magazines/Journals- N/A
- 3. PSAs/Videos

dLCV produced and released a video this year in our ‘Ask the Expert’ Series titled ‘Vocational Rehabilitation Rights and Services’. Frequently, individuals utilizing VR services utilize assistive technology and environment modifications to maintain employment.

4. Website Hits

dLCV had 25,863 website hits from 15,043 unique visitors.

5. Publications/Booklets/Brochures

dLCV provided Assistive Technology for Adults fact sheets and general dLCV brochures to residents and staff during community monitoring visits and other presentations.

6. Other

dLCV created an annual report summarizing our work across all grants for the 2015 General Assembly session.

PART II – CASE-SERVICES

A. INDIVIDUALS SERVED

Report information on the individuals served during the fiscal year and the number of closed cases. Refer to the instruction manual for details on completing items 4 and 4a.

Individuals	Number
1. Individuals Served Receiving Advocacy at Start of Fiscal Year (carryover from prior)	1
2. Additional Individuals Served During Fiscal Year (new for fiscal year)	17
3. Total Number of Individuals Served During Fiscal Year (1 +2)	18
4. a. Total Number of Cases Closed During the Fiscal Year	11
4. b. Total Number of Individuals with All Their Cases Closed During the Fiscal Year	11
5. Total Individuals Still Being Served at the End of the Fiscal Year (3 minus 4b)	7

B. PROBLEM AREAS/COMPLAINTS

Identify the problem areas or complaints of each case served by you PAAT program during the fiscal year (include new cases and carry-over cases). More than one problem area/complaint may be identified in a single case.

Complaint Area	Number of cases
1. Architectural Accessibility	0
2. Education	5
3. Employment Discrimination	0
4. SSI/SSDI Work Incentives	0
5. Healthcare (total generated by the system from a-d below)	12

a. Medicaid	8
b. Medicare	0
c. Private Medical Insurance	0
d. Other	4
6. Housing	1
7. Post-Secondary Education	0
8. Rehabilitation Services	1
9. Transportation	0
10. Voting <i>(total generated by the system from a-c below)</i>	0
a. Accessible Polling Place / Equipment	0
b. Registration	0
c. Other	0
11. Other – specify- Needs augmentative communication evaluation	1
TOTAL	20

C. Problem Areas / Complaints

Report (1) the total number of individuals who received one or more AT devices or services as a result of casework during the fiscal year. For item (2), report by type, the total number of AT devices and services received by those individuals reported in item (1).

1. Number of individuals that received one or more AT devices or services as a result of casework (unduplicated count)	11
2. Type of AT device or AT service received as a result of casework	Number of devices/ services
a. Devices for communication	1
b. Devices for mobility	2
c. Devices for hearing or seeing	1
d. Devices for reading or writing	1
e. Devices to assist with household activities	0
f. Devices to assist with participation in play or recreation	0
g. Devices to assist with personal care	2
h. Devices to aid in therapy or medical treatment	1
i. Devices to assist with the use of public/private transportation	1

j. Devices to assist with employment	0
k. Devices to aid with school/learning	2
l. AT services	5
m. Other –	0
n. Total number of devices and services received as a result of casework (a-m)	16

D. PRIMARY REASON FOR CLOSING A CASE FILE

Identify the primary reason for closing a case file. Select the best reason if more than one reason applies.

Primary Reason	Number of cases
1. All Issues Resolved in Client's Favor	4
2. Some Issues Resolved in Client's Favor	5
3. Other Representation Obtained	0
4. Individual Withdrew Complaint	0
5. Services Not Needed Due to Death, Relocation, etc.	0
6. Individual Not Responsive to Agency	2
7. Case Lacked Legal Merit	0
8. Conflict of Interest	0
9. Lack of Resources	0
10. Not Within Priorities	0
11. Issue Not Resolved in Client's Favor	0
12. Other - specify	0
13. Total (number must match Part II A4a)	11

E. INTERVENTION STRATEGIES FOR CLOSED CASES

Report the highest intervention strategy used for each case closed during the fiscal year, considering the lowest form of intervention to be 'Short Term Assistance', and the highest to be 'Class Action Suits'. See instruction manual for an example. *Each closed case should be counted only once – do not include any open cases in this count.* The total reported on line 9 should match the total in II.D.13 above (primary reason for closing a case during the fiscal year).

Interventions	Number of cases
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1. Short Term Assistance	6
2. Systemic/Policy Activities	0
3. Investigation/Monitoring	0
4. Negotiation	4
5. Mediation/Alternative Dispute Resolution	0
6. Administrative Hearing	1
7. Legal Remedy/Litigation	0
8. Class Action Suits	0
9. Total (<i>this should match the total in Part II.A.4.a above</i>)	11

PART III – STATISTICAL INFORMATION FOR INDIVIDUALS SERVED

A. AGE OF INDIVIDUALS SERVED

Report the age of the individuals served during the reporting period (unduplicated count). The total reported should match the total in II.A.3 above (total number of individuals served during fiscal year).

Age	Number of individuals
0 to 4	1
5 to 13	5
14 to 18	2
19 to 21	1
22 to 40	3
41 to 64	6
65 and over	0
Age Unknown	0
Total (this should match the total in II.A.3)	18

B. GENDER OF INDIVIDUALS SERVED

Report the gender of the individuals served during the reporting period. The total reported should match the total in II.A.3 above (total number of individuals served during the fiscal year).

Gender	Number of individuals
Male	8
Female	10
Total (this should match the total in II.A.3)	18

C. RACE AND ETHNICITY OF INDIVIDUALS SERVED

1. Race / Ethnicity of individuals served.

Report an unduplicated count of the self-reported racial backgrounds of individuals served under the PAAT grant during the fiscal year. If an individual reported more than one race, report that individual in the 'More than one race' category rather than each of the categories they selected.

Race	Number of Individuals
1. Hispanic / Latino of any race	1
2. American Indian or Alaska Native	0
3. Asian	0
4. Black or African American	4
5. Native Hawaiian or Other Pacific Islander	0
6. White	13
7. Two or more race	0
8. Unknown/not reported	0
9. Total	18

D. LIVING ARRANGEMENTS OF INDIVIDUALS SERVED

Identify the primary living arrangement of each individual served by the PAAT program during the fiscal year. For individuals who had more than one living arrangement, while receiving services, please report the living arrangement when the case was opened (if theirs was a new case; report the arrangement at the beginning of the fiscal year if the case continued from the previous year). The total reported on line 15 should match the total in II.A.3 above (total number of individuals served during fiscal year).

Living Arrangement	Number of individuals
1. Community Residential Home	3
2. Foster Care	0
3. Homeless/Shelter	0
4. Legal Detention/Jail/Prison	0
5. Nursing Facility	1

6. Parental/Guardian or Other Family Home	10
7. Independent	2
8. Private Institutional Setting	0
9. Public (State Operated) Institutional Setting	2
10. Public Housing	0
11. VA Hospital	0
12. Other – describe the living arrangement	0
13. Other – describe the living arrangement	0
14. Unknown/Not Provided	0
15. Total (<i>this should match the total in II.A.3</i>)	18

E. PRIMARY DISABILITY OF INDIVIDUALS SERVED

Identify the primary disability of each individual served by the PAAT program during the fiscal year. For individuals with multiple disabilities, please select the one disabling condition deemed to be the most important in the context of their case. The total reported on line 34 should match the total in II.A.3 above (total number of individuals served during fiscal year).

Primary Disabling Condition	Number of individuals
1. ADD/ADHD	0
2. AIDS/HIV Positive	0
3. Absence of Extremities	0
4. Auto-immune (non-AIDS/HIV)	0
5. Autism	3
6. Blindness (Both Eyes)	0
7. Other Visual Impairments (Not Blind)	0
8. Cancer	0
9. Cerebral Palsy	0
10. Deafness	0
11. Hard of Hearing/ Hearing Impaired (Not Deaf)	0
12. Deaf-Blind	0
13. Diabetes	0

14. Digestive Disorders	0
15. Epilepsy	0
16. Genitourinary Conditions	0
17. Heart & Other Circulatory Conditions	0
18. Mental Illness	3
19. Mental Retardation	5
20. Multiple Sclerosis	0
21. Muscular Dystrophy	0
22. Muscular/Skeletal Impairment	2
23. Orthopedic Impairments	4
24. Neurological Disorders/Impairment	0
25. Respiratory Disorders/Impairment	0
26. Skin Conditions	0
27. Specific Learning Disabilities (SLD)	1
28. Speech Impairments	0
29. Spina bifida	0
30. Substance Abuse (Alcohol or Drugs)	0
31. Tourette Syndrome	0
32. Traumatic Brain Injury (TBI)	0
33. Other Disability	0
34. Total (<i>this should match the total in II.A.3</i>)	18

F. GEOGRAPHIC LOCATION OF INDIVIDUALS SERVED

Report the geographic location of the individuals served by the PAAT program during the fiscal year. The total reported on line 5 should match the total in II.A.3 above (total number of individuals served during fiscal year).

Geographic Location	Number of individuals
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1. Urban/Suburban (50k population)	13
2. Rural (<50k population)	5
3. Other - specify	0
4. Unknown	0
5. Total (this should match the total in II.A.3)	18

PART IV – SYSTEMIC ACTIVITIES AND LITIGATION

A. NON-LITIGATION SYSTEMIC ACTIVITIES

1. Number of Policies/Practices Changed as a Result of Non-Litigation Systemic Activities 1

2. Describe the agency's systemic activity completed during the fiscal year.

dLCV investigated the provision of crisis services, protection of health and safety, actual community integration and quality of life by monitoring thirty community residences and day programs. These programs are located throughout the state from far southwestern Virginia to the Eastern Shore - from Winchester to Franklin to the Northern Neck. During the visits we provided information regarding assistive technology as well as gathered information from the facilities.

a. The policy or practice that was changed, as a result of your agency's non-litigation systemic activity, along with a description of the negative impact upon individuals with disabilities

Individuals and staff in the residential and day support programs understand assistive technology and communication and accessibility barriers it breaks down. As many individuals transition out of the state operated training centers into community placements, assistive technology is vital to their independence.

b. The manner in which this change benefited individuals with disabilities

As a result of dLCV's visits individuals receiving services from the monitored locations and staff gained an increased knowledge and awareness of their rights, the availability of assistive technology and how to acquire it.

c. Estimate the number of individuals potentially affected by the policy/practice change

650

d. The method used to determine this estimate (or enter n/a)

Number of individuals and staff counted during visits to facilities and totaled.

e. Include one case example of the agency's systemic activity related to this policy/practice change

Rather than seeking specific individuals during the monitoring visits, dLCV took a systemic approach educating all residents in the homes by purchasing an assistive technology "demonstration bag". We demonstrated the devices at many of the provider locations and showed the benefits of devices such as communication boards, magnifiers, grabbers and many other high and low tech devices.

In a visit to a large day program, dLCV demonstrated the diversity of assistive technology for participants. We explored a Go-Talk augmentative communication device with choices specific to that community. dLCV demonstrated an iPad with applications for sensory stimulation and for self-soothing. We also shared applications showing how social stories could be used to support acquisition of new skills and help the individual sequence the anticipated activities in the day's schedule. Although several individuals had existing augmentative communication devices, they were cumbersome old devices that lacked versatility. To quote one individual, "too heavy and it makes me look different." This client really appreciated using an I-pad instead. dLCV continues contact with the day program regarding AT evaluations for several individuals.

3. Number of On-going Non-Litigation Systemic Activities 1

**4. Describe the agency's systemic activities completed during the fiscal year.
On-going System Activities**

dLCV is continuing the monitoring project above in FY 16 with a continued emphasis on assistive technology education.

a. How these activities may benefit individuals with disabilities

Continued empowerment toward independence

b. Estimate the number of individuals potentially affected by the policy/practice change

650

c. The method used to determine this estimate (or enter n/a)

A comparable number of providers and sizes of homes as last year

d. Describe the potential policy/practice change that may result from this activity.

See 4.A.2-e.

B. LITIGATION/CLASS ACTIONS

Report information on the PAAT-related litigation for your agency.

	Number
1. Total Number of Non-Class Action Lawsuits, resulting in, or with the potential for, systemic change, pending during the fiscal year	0
a. Number of Non-Class Action Lawsuits Newly Filed During Fiscal Year	0
b. Number of Non-Class Action Lawsuits That were Pending at Start of Fiscal Year (carryover from prior fiscal year)	0
c. Number of Non-Class Action Lawsuits Closed During Fiscal Year	0

If the total for question 1 is zero, skip to Question 3.

2. Describe the agency’s on-going systemic non-class action litigation activities.

Using a case example that demonstrates the potential impact of the agency's class action activities, explain (a) the issue that prompted the litigation, (b) the negative impact upon individuals with disabilities and (c) the potential benefit to individuals with disabilities. If possible, (d) estimate the number of individuals potentially affected by changes resulting from the litigation and (e) the method used to determine this estimate.

N/A

3. Describe the agency’s completed systemic non-class action litigation activities.

Using a case example that demonstrates the potential impact of the agency's completed non-class action activities, explain (a) the issue that prompted the litigation, (b) the manner in which individuals with disabilities were being negatively affected, and (c) the benefit to individuals with disabilities. If possible, (d) estimate the number of individuals affected by changes resulting from the litigation and (e) the method used to determine this estimate.

N/A

Report information on the PAAT-related class action lawsuits for your agency.

4. Total Number of Class Action Lawsuits Filed and/or Pending (during fiscal year)	0
a. Number of Class Action Lawsuits Newly Filed During Fiscal Year	0
b. Number of Class Action Lawsuits Pending at Start of Fiscal Year (carryover from prior fiscal year)	0
c. Number of Class Action Lawsuits Closed During Fiscal Year.	0

5. Describe the agency's on-going systemic class action litigation activities.

Using a case example that demonstrates the potential impact of the agency's class action activities, explain (a) the issue that prompted the litigation, (b) the negative impact upon individuals with disabilities and (c) the potential benefit to individuals with disabilities. If possible, (d) estimate the number of individuals potentially affected by changes resulting from the litigation and (e) the method used to determine this estimate.

N/A

6. Describe the agency's completed systemic class action activities.

Using a case example that demonstrates the impact of the agency's class action activities, explain (a) the issue that prompted the litigation, (b) the negative impact upon individuals with disabilities and (c) the benefit to individuals with disabilities. If possible, (d) estimate the number of individuals potentially affected by changes resulting from the litigation and (e) the method used to determine this estimate.

N/A

C. LITIGATION-RELATED MONITORING

Did the agency conduct any litigation-related monitoring under the PAAT program during the fiscal year?

NO

If yes, describe any monitoring conducted by the agency related to court orders or case settlements by

(1) providing the major areas of monitoring and

N/A

(2) the groups likely to be affected.

N/A

(3) Address the major outcomes of the litigation-related monitoring during the fiscal year.

N/A

(4) Include at least one case example that demonstrates the impact of the agency's litigation-related monitoring.

N/A

PART V – PRIORITIES

A. PRIORITIES

1. Number of priorities: 3

2. Describe agency's systemic activity completed during the fiscal year. For each of your PAAT program priorities for the fiscal year covered by this report, please provide the information below. You may enter data on as many priorities as you need. See the instruction manual for more details.

Priority 1

1. Describe the Priority

Children with Disabilities Receive an Appropriate Education

Educational Services

Children with disabilities receive appropriate assistive technology services as identified in Individualized Education Programs (IEPs) or 504 Plans.

Provide self-advocacy education rights presentations to parent or child advocacy groups regarding special education rights, and an overview of dLCV services.

Contract with an expert(s) in Assistive Technology (OT/PT/SL) to assess the quality of Assistive Technology services at a children's long-term care residential facility.

Represent children who have been denied appropriate assistive technology (AT) services under their IEPs or 504 Plans.

2. Describe the Need, Issue, or Barrier Addressed

Children are routinely denied appropriate assistive technology or AT assessments from schools due to failure to identify a child's education needs. dLCV educates and advocates for acquisition of devices and services that are appropriate for a child to grow and succeed in the classroom.

3. Indicate the Outcome of the priority: Partially Met

- a. Describe any external or internal implementation problems for outcomes marked "not met" or "partially met."

4. Total Number of Cases Handled Related to the Priority: 4

5. Illustrative Cases/Activities:

Assistive Technology and Special Education

dLCV provided Special Education trainings to five groups of parents, students and advocates. The presentations covered students and parents' rights as well as school division responsibilities and were provided in geographically diverse locations across the state. This series of trainings reached approximately two-hundred individuals providing valuable information regarding parent and student rights. Additionally, it provided practical assistance and resources for parents and advocates to use as they advocate for students to receive a free appropriate public education, including the provision of assistive technology, in Virginia's public education system.

An Expert Opinion

dLCV identified an Assistive Technology Specialist to perform ten to twelve AT evaluations on children with developmental disabilities and complex medical disabilities in a nursing facility. Once these evaluations are completed in FY 16, dLCV plans to advocate for the evaluated children to receive the appropriate AT services in the

nursing home. dLCV also plans to use these evaluations to advocate for transitioning these children back into the community with the appropriate supports and services.

Helping Parents Advocate for Assistive Technology

Jane visited Manassas Office Hours seeking help getting appropriate supports and accommodations in her son's IEP. dLCV provided short term assistance in the form of a letter requesting an assistive technology evaluation and the forms Virginia Department of Education (VDOE) mandates are necessary to perform a thorough assistive technology evaluation.

She was able to secure the evaluation with dLCV assistance and the door is open to figure out what will make his education effective.

Using Technology to Empower the Student

Piper's mother contacted dLCV for help with getting her daughter appropriate educational supports and services, including assistive technology. Piper is a fourteen-year-old year girl diagnosed specific learning disability and processing disorder. She had a 504 plan that was not meeting her needs. The school did an assistive technology evaluation but was not providing appropriate assistive technology to meet her needs.

dLCV reviewed records; assisted Piper's parents in requesting an independent AT evaluation; and attended 504, eligibility and IEP meetings. With dLCV's help, Piper received an appropriate eligibility category as well as an IEP with the appropriate supports, including assistive technology. She is using read aloud app, dictate to scribe apps, word prediction software, digital texts, and a recording pen. Because of dLCV assistance, Piper can effectively access her education and succeed in school.

Priority 2

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

Access to Assistive Technology (AT) Individuals with disabilities have access to Assistive Technology and environmental modifications as authorized under Medicaid, Medicare or other insurance.

Train groups of individuals, advocates and parents about the availability of and how to access AT services.

Analyze AT coverage of health insurance provider policies for Veterans and their dependents including CHAMPVA. Draft a letter of concern to the applicable insurance.

Represent individuals at DBHDS-operated psychiatric hospitals to receive, as part of their treatment plan, opportunities for choice and control over themselves.

Increase self-advocacy by providing STA to all callers who complain that they have been denied AT by Medicaid, Medicare, or other insurance.

Represent individuals under age twenty one (21) who have been denied AT or environmental modifications authorized by Medicaid or other insurance

2. Describe the Need, Issue, or Barrier to be Addressed

Assistive technology is essential for many individuals with disabilities. For example, people who receive Medicaid services may need assistive technology to avoid more restrictive lives. dLCV continues to monitor these complaints and advocate for independence through AT. dLCV is also concentrating a portion of our work in this area analyzing insurance programs which serve Veterans and their dependents.

3. Indicate the Outcome of the priority: Met

- a. **Describe any external or internal implementation problems for outcomes marked “not met” or “partially met.”** N/A

4. Total Number of Cases Handled Related to the Priority: 8

5. Illustrative Cases/Activities:

Helping Kids Cope

The Early and Periodic, Screening, Diagnosis and Treatment (EPSDT) Program is a way children between birth and age twenty-one can access assistive technology necessary to help them manage their disabilities. In partnership with a Center for Independent Living (CIL) and by participating in a twenty-fifth anniversary fair for the Americans with Disabilities Act (ADA), dLCV staff provided training to forty parents, children and service providers. Individuals received information on EPSDT and how to request services under the program. One of the presentations reached a group of Spanish speaking parents.

Protecting Those Who've Served

dLCV completed comprehensive policy review of covered AT and Durable Medical Equipment (DME) under all Virginia Medicaid programs and two Veterans health insurance programs. We discovered that Veterans are fully funded. The Tricare and Champ VA Veterans insurance programs we studied offer services comparable to Medicaid. We determined the programs are compliant and consistent with federal code. dLCV also did not receive any complaints from potential clients or Veterans regarding these AT devices and Veterans insurance programs.

Falls Prevention

dLCV receives Critical Incident Reports from all of the state operated facilities in the Commonwealth. We received reports indicating Veronica was falling a lot and getting hurt. She told us she loses her balance and asked us to advocate for the facility to provide a walker or similar device to prevent falls.

Veronica's chart showed she had been on "standard falls precautions" for many months, but that the precautions were not preventing her from falling. To make matters worse, Veronica's doctor knew about her continued chronic falls but had not done anything and neither had her treatment team.

Based on these facts, dLCV presented the matter to the facility director as patient neglect and demanded Veronica be evaluated for an ambulation aid without delay. The facility director addressed the matter with the Medical Director and the treatment team met, ordered the evaluation, and subsequently provided a personally fitted walker and an individualized falls prevention plan for Veronica.

Gimme My Stuff

Ashley contacted dLCV ask for help getting medically necessary devices and assistive technology that were being denied by the facility where she lived. She had been transferred and was not allowed to bring the devices with her.

dLCV advocated for her right to the items and helped facilitate communication between the two facilities. While Ashley's health improved and reported she no longer needed two of the requested items, the hospital provided her with leg wraps that served the same function as the Unna Boots she originally requested.

Walking, Not Rolling

Joan, an individual with mental and mobility disabilities, contacted dLCV for assistance with being able to use a cane in a state mental health hospital and a community assisted living facility (ALF). At the time she contacted the Law Center, she was required to use a wheelchair instead of the cane.

After reviewing the facts and her subsequent discharge from the state hospital, dLCV wrote two letters to the Administrator of the assisted living facility outlining Joan's rights and demanded she have use of her cane. Joan and the Administrator agreed to compromise on their concerns and reached an agreement. Joan is now able to use a walker indoors at the ALF and her a cane both outdoors and in the community. She was pleased with this outcome.

Priority 3

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

Denial of Medicaid Services Individuals with disabilities have access to necessary medical services under a Medicaid Waiver program or under the Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT).

Develop educational materials for children with behavioral disabilities concerning availability of wrap around services under Medicaid.

Assist medical providers for children with disabilities to develop letters of medical necessity for supports and services through the Early and Periodic Screening.

Individuals under age twenty one (21) who have been denied needed and appropriate Medicaid services under a Waiver Program or under the (EPSDT) program.

2. Describe the Need, Issue, or Barrier Addressed

Early Periodic Screening Diagnosis and Treatment and certain Medicaid Waivers are programs that offer unique pathways to fund AT. Unfortunately just because the benefit exists does not mean the individual is automatically eligible for the AT. Therefore dLCV helps those who receive these benefits by advocating for acquisition of assistive technology.

3. Indicate the Outcome of the priority: Met

a. Describe any external or internal implementation problems for outcomes marked “not met” or “partially met.”

N/A

4. Total Number of Cases Handled Related to the Priority: 4

5. Illustrative Cases/Activities:

Strength of Family

Wraparound services are those designed to help children with serious mental health issues and behavior problems remain in the community. In many cases these children are at risk of placement in residential care for their own safety or that of family member.

Through research and review of the Children's Services Act, dLCV put together a fact sheet outlining wraparound services to give families an introduction to the purpose, services and funding options available through this program. The fact sheet was published to dLCV's website.

Talk To Me

Amanda, a young woman with Down syndrome, has a lot of needs that her parents are struggling to meet. In 2014, they applied for services under the Elderly or Disabled with Consumer Direction (EDCD) Waiver hoping to get some help at home and open the door to

services under Medicaid's Early and Periodic Screening, Diagnosis and Treatment (EPSDT) for a communication device.

The Department of Health and Department of Social Services screened Amanda for the Waiver after an extended delay. When she was denied EDCD Waiver, there was a further delay waiting for an appeal. Her parents were frustrated that Amanda was unable to get services and felt her due process rights were being violated so they turned to dLCV for help.

Reviewing Amanda's records, it appeared her application was denied because her family submitted the wrong Medicaid application. One of the things that is waived for services under the EDCD Waiver is financial eligibility – Amanda's dad's income should not have been considered. Her case remains open and dLCV is assisting her family with preparing for a new EDCD Waiver screening.

B. PRIORITIES for the CURRENT FISCAL YEAR - FY2016

1. Number of Priorities 4

Report your program priorities for the current fiscal year (the fiscal year succeeding that covered by this report). You may enter data on as many as priorities you need.

Priority 1

1. Describe the Priority

People with Disabilities are Free from Abuse and Neglect

Protection from Harm in Institutional and Community Settings

dLCV has multiple objectives in FY 16 to monitor institutional and community based providers to assess the adequate availability and access to assistive technology.

2. Describe the Need, Issue, or Barrier Addressed

Children and adults in institutional and community based programs face barriers safely accessing programs and participating in meaningful activities. dLCV advocates through monitoring and advocacy to ensure assistive technology is a part of their lives.

Priority 2

1. Describe the Priority

Children with Disabilities Receive an Appropriate Education

Educational Services

Children with disabilities receive appropriate assistive technology services as identified in Individualized Education Programs (IEPs) or 504 Plans.

2. Describe the Need, Issue, or Barrier Addressed

Children are routinely denied appropriate assistive technology or AT assessments from schools due to failure to identify a child's education needs. dLCV educates and advocates for acquisition of devices and services that are appropriate for a child to grow and succeed in the classroom.

Priority 3

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

Access to Assistive Technology (AT) Individuals with disabilities have access to Assistive Technology and environmental modifications as authorized under Medicaid, Medicare or other insurance.

2. Describe the Need, Issue, or Barrier Addressed

For some individuals with disabilities, assistive technology is essential. For example, people who receive Medicaid services may need assistive technology to avoid more restrictive lives. dLCV continues to monitor these complaints and advocate for independence through AT.

Priority 4

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

Denial of Medicaid Services Individuals with disabilities have access to necessary medical services under a Medicaid Waiver program or under the Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT).

2. Describe the Need, Issue, or Barrier Addressed

Early Periodic Screening Diagnosis and Treatment and certain Medicaid Waivers are programs that offer unique pathways to fund AT. Unfortunately just because the benefit exists does not mean the individual is automatically eligible for the AT. Therefore dLCV helps those who receive these benefits by advocating for acquisition of assistive technology.

C. AGENCY ACCOMPLISHMENTS

Describe the most significant accomplishments of the agency during the fiscal year.

Assistive technology equals independence for many individuals with disabilities. In FY 15, dLCV completed individual casework and systemic advocacy to make AT accessible for Virginians with disabilities.

dLCV assisted eighteen children and adults acquire devices and services such as communication devices, AT assessments, pressure boots, canes and walkers.

dLCV provided thirty-four presentations to one-thousand-sixty-nine parents, advocates, family members and individuals with disabilities to educate them on topics such as AT acquisition and requesting AT through an employer or from a rehabilitation provider.

Our monitoring project educated six-hundred-fifty individuals about AT through hands on demonstration and experience.

Through our office hours program, dLCV connected with many unserved and underserved regions across the Commonwealth and has used these relationships to provide information and referral and education on AT to multiple individuals.

PART VI – AGENCY ADMINISTRATION

A. AGENCY FUNDING

Enter the sources of funds your agency received and used to carry out PAAT program activities. Round to the nearest dollar, do not include cents. Do not include in-kind contributions in the ‘Other’ categories. Refer to instruction manual for types of funds to report in ‘Other.’

PAAT funding sources	Amount Received
1. Federal P&A (AT Act funds):	87,546
2. Program income	
3. Other – carryover funds	72,703
4. Other – specify	
5. Other- specify	
6. Total:	160,249

B. DESCRIPTION OF PAAT PROGRAM STAFF

- 1. Provide a brief description of the agency’s staffing plan for carrying out PAAT activities.**

dLCV Staffing Plan:

The dLCV Receptionist may provide information and referral services for anyone requesting services from our agency.

dLCV Disability Rights Advocates and Staff Attorneys provide case level services and pursue systemic reforms via a variety of methods such as investigation and monitoring. They also provide training and outreach.

The Team Leaders provide supervision and leadership in these efforts. They may also provide case level services and pursue systemic reforms.

Support services (data management, fiscal, human resources, purchasing, for example) are provided by Administrative Staff.

The Management Team (Executive Director, Deputy Director for Legal Services, Deputy Director for Deputy Director of Fiscal and Operations and Deputy Director for Compliance and Quality Assurance) provides leadership and direction in the areas of program and policy planning, development, monitoring, and evaluation.

The Executive Director provides the ultimate leadership and direction for all actions of the agency and provides direct supervision for the Management Team.

The Deputy Director for Legal Services supervises the Team Leaders and all legal services provided by the agency.

The Deputy Director for Fiscal and Operations supervises administrative, human resources and information technology staff and manages financial operations of the agency.

The Deputy Director for Compliance and Quality Assurance manages our federal grants, intake and I&R and agency performance and efficiency.

2. PAAT Staff

Report on the number of persons and the number of full time equivalent (FTE) staff performing PAAT activities. As applicable, include (a) staff supported in full or in part by PAAT grant funds during the current reporting year, (b) subcontractor staff supported by PAAT funds and (c) P&A management staff to the extent that their duties included oversight of the PAAT program (and salaries were paid out of PAAT funds). Do not include P&A staff who did not work on PAAT cases during the fiscal year. Report actual, not budgeted, FTE totals. See the instruction manual for an example and further details on the type of staff to include in each position.

Type of Position	Number of persons*	Number of FTEs
Professional		
Full-time	26	24
Part-Time		
Administrative		
Full-time	6	6

Part-time	2	1
Totals	34	31

C. CONSUMER INVOLVEMENT

- 1. Briefly describe any consumer-responsive activities not reported elsewhere in this report (e.g., PAAT Advisory Board, forums to obtain input into planning and priorities). If not applicable, enter N/A**

dLCV is pleased to report a ninety seven percent satisfaction rate across all grants from the sixty one client satisfaction surveys we received. The ninety seven percent satisfaction rate breaks down as forty six respondents indicating a high level of satisfaction and thirteen who reported satisfaction with the help they received from dLCV. Fifty-nine out of sixty-one respondents indicated they were satisfied with dLCV’s assistance.

We follow up with approximately ten percent of clients we have served across all grants through interview callbacks where a neutral member of our staff unfamiliar with a client’s case calls the client we served and asks about their overall satisfaction with the services we provided. Clients expressed satisfaction with the skill of our advocates. This data is valuable to assess the quality of services dLCV provides to the community.

One client’s parent expressed they were “very happy” dLCV helped their son get his in home accommodations and assistive technology to allow for his continued independence. The parent believes they couldn’t have done this without dLCV’s help!

dLCV launched a web-based survey to obtain feedback on the goals and focus areas. From 5/17/15 through 7/24/15 dLCV received 340 responses to our survey. This is an increase from the number of responses in previous years. Twenty-two percent of responses came directly from individuals with disabilities. Twenty-six percent of responses were from parents or guardians. The remaining groups represented included family members, teachers, mental health professionals, and providers.

When it came to the issues most important to respondents, access to quality mental health care services (14 %) comprised the largest and most significant percentage. Tied for second place includes access to community programs and government services (10 %), housing (10 %), and access to assistive technology and health care (10 %). Following those were: special education (8 %), effective vocational rehabilitation services (7 %), employment rights (7 %), transportation (7 %), abuse and neglect in schools (5 %), access to buildings and community activities (4%), guardianship (4 %), abuse and neglect in the juvenile justice system (3 %), abuse and neglect in jails and prisons (1 %), and voter rights (1%). dLCV also distributed surveys to the public via mailings and at facilities.

dLCV staff, with input from the PAC, public input survey, and past year work experience, also helped to develop Fiscal Year 2016 Goals, Focus Areas, and Objectives. The dLCV Board approved the Fiscal Year 2016 Goals and Focus Areas.

All dLCV Board and advisory council meetings are open to the public and include receipt of public comment as an agenda item. Any public comment receives review in the priority planning process for the development of dLCV's goals and focus areas.

dLCV distributed an “annual report” to the members of the General Assembly which provides statistics and case examples about the work we do.

2. Consumer Involvement in P&A Agency Staff and Board

Type	Agency staff	Agency board
Person with a disability	13	6
Family members of a person with a disability	21	2
Total	34	8

D. GRIEVANCES FILED

Number of PAAT grievances filed against the agency during the fiscal year	0
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E. COLLABORATIVE EFFORTS

1. Collaboration with Other P&A Programs and Activities

Briefly describe your work on AT issues funded by other P&A programs (do not include activities carried out with PAAT funds).

dLCV operated with one (1) Advisory Council: The Protection and Advocacy for Individuals with Mental Illnesses (PAIMI) Advisory Council. The Council's primary responsibility was to advise the protection and advocacy system on policies and priorities in protecting individuals with disabilities concentrating on those with mental illness. This function helped dLCV to identify underserved and unserved Virginians.

dLCV also consulted with NDRN for our dLCV Board Strategic Planning Session and to create a project plan for our ‘Ask the Expert’ video series.

2. All Other Collaboration

Describe any coordination with programs that are not part of the agency (e.g. state Tech Act projects, state long-term care programs, etc.).

As noted above in several sections of this performance report, dLCV reached out to multiple agencies and collaborated to provide the useful information regarding assistive technology for adults and children.

Our collaborators this year included: Virginia Board for People with Disabilities, the Partnership for People with Disabilities, Department for Aging and Rehabilitation Services (DARS), Virginia

Organization of Consumers Asserting Leadership (VOCAL), VAVS Video Production, dLCV Foundation and Centers for Independent Living (CILs) in Winchester, Eastern Shore, Norfolk, Richmond, Roanoke, Lynchburg, Fredericksburg and Manassas.

dLCV worked informally with the State Long-Term Care Ombudsman throughout the year. Coordination with the State Long-Term Care Ombudsman Program 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. dLCV will continue to coordinate with DMAS when appropriate.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number of this information collection is 1820-066.1. The time required to complete this information collection is estimated to average 16 hours per response, including the time to review instructions, search existing data sources, gather the data needs, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate or suggestion for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4760. If you have any comments or concerns regarding the status of your individual submission of this form, write directly to: Jessica Smith, 400 Maryland Avenue, SW Washington, D.C. 20202-2800.