

Annual Protection & Advocacy for Assistive Technology (PAAT) Program Performance Report

Information to the Reader about PAAT Form and Web System

All information reported in this annual report should address activities conducted during the Federal fiscal year (October 1-September 30). This time frame is referred to in this document as the “reporting period” and is also indicated in the upper right header on each page of the form. (The web system will generate the Federal Award Number, state name, and the reporting period on the top of each page of the form.)

This form, Annual Protection and Advocacy for Assistive Technology (PAAT) Program Performance Report, will be accepted through an electronic, web-based ACL Program Performance Reporting System. All 57 PAAT programs will submit the form using this method. All grantees will report using the Internet. Since the system will allow grantees to enter or update data throughout a reporting period, the web system will provide a means for grantees to indicate when they are submitting their completed (final) report. ACL staff will then download the annual report.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. Public reporting burden for this collection of information is estimated to average 16 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The obligation to respond to this collection is required to obtain or retain benefit pursuant to Section 5 of the Assistive Technology Act of 1998, as amended (At ACT).

ANNUAL PROTECTION & ADVOCACY FOR ASSISTIVE TECHNOLOGY (PAAT)
PROGRAM PERFORMANCE REPORT

Fiscal Year 2016

AGENCY INFORMATION

Agency Name: disAbility Law Center of Virginia
Main Office - Address: 1512 Willow Lawn Drive
STE 100
Richmond, Va. 23230

Satellite Office(s) (if applicable)- Address: N/A

Contract Office(s) (if applicable) - Address: N/A

Agency Telephone Number: 804-225-2042
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Staff Preparing Report Office Location: 1512 Willow Lawn Drive
STE 100
Richmond, Va. 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 27
2. Total Number of Requests for I&R Services during the Fiscal Year 27

B. Training Activities

1. Number of Training Sessions Presented by Staff 46
2. Number of Individuals Who Attended These Training Sessions 1831
3. Describe two training events presented by PAAT staff. Include the following information: (a) topics covered, (b) the purpose of the training, and (c) a description of the attendees.

Training Event #1

- a. dLCV provided training on the benefit and use of assistive technology for children in school and home and community settings.
- b. The purpose of the training was to educate students, parents, service providers, and educators with information about existing assistive technology options and programs that exist to benefit children with a variety of disabilities.
- c. 160 individuals from 5 different parent and child advocacy groups attended these trainings: a school division Special Education Advisory Committee, students and staff at a high school, parents from a local autism society, vendors, and providers at a learning disability association, and parents and providers at a regional hospital.

Training Event #2

- a. dLCV provided a training on types of assistive technology, examples of assistive technology, and information on procedures and programs to obtain assistive technology and services.
- b. The purpose of the training was to provide individuals, advocates, and parents about the availability of and process for how to access assistive technology and services.
- c. 29 individuals from the underserved and remote area of the Eastern Shore of Virginia.

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

dLCV provided trainings to groups and individuals located in underserved and remote areas of the state, including the training event #2 described above. dLCV used technology to combat the attendance limitations created by geography and scheduling, by developing an "Ask the Expert" training video related to Assistive Technology and made it available on the agency website and YouTube. Additionally, dLCV worked with the Department of Juvenile Justice (DJJ) to provide Assistive Technology training materials to students in DJJ care and custody.

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.

1. Radio and TV Appearances by Agency staff	1
2. Newspaper/Magazine/Journal articles Prepared by Agency Staff	0
3. PSAs/videos Aired by the Agency	1
4. Website Hits	71,059
5. Publications/Booklets/Brochures Disseminated by the Agency	1881
6. Other (specify)	1

(Report to General Assembly)

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 | 3 |
| 2. Newspapers/Magazines/Journals | 0 |
| 3. PSAs/Videos | 0 |
| 4. Publications/Booklets/Brochures | 0 |

1

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.

- | | |
|---|----|
| 1. Individuals Served Receiving Advocacy at Start of Fiscal Year (carryover from prior) | 7 |
| 2. Additional Individuals Served During Fiscal Year (new for fiscal year) | 19 |
| 3. Total Number of Individuals Served During Fiscal Year (1 +2) | 26 |
| 4. Total Number of Cases Closed During the Fiscal Year | 29 |
| 4b. Total Number of Individuals with All Their Cases Closed During the Fiscal Year | 22 |
| 5. Total Individuals Still Being Served at the End of the Fiscal Year (3 minus 4b) | 4 |

B. Problem Areas/Complaints

Identify the problem areas or complaints of each case served by your 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.

- | | |
|--|----|
| 1. Architectural Accessibility | |
| 2. Education | 6 |
| 3. Employment Discrimination | |
| 4. SSI/SSDI Work Incentives | |
| 5. Healthcare (total generated by the system from a-d below) | |
| a. Medicaid | 15 |

- b. Medicare 2
- c. Private Medical Insurance
- d. Other
- 6. Housing 3
- 7. Post-Secondary Education
- 8. Rehabilitation Services 1
- 9. Transportation
- 10. Voting (total generated by the system from a-c below)
 - a. Accessible Polling Place / Equipment
 - b. Registration
 - c. Other
- 11. Other – specify – 1- access to AT, facility not eligible for Medicaid/Medicare reimbursement
- 12. Other – specify – 2 – education; communication needs aug com eval
- 13. TOTAL - 30

C. Assistive Technology Devices/Services

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) 26
- 2. Type of AT device or AT service received as a result of casework
 - a. Devices for communication 3
 - b. Devices for mobility 4
 - c. Devices for hearing or seeing 7
 - d. Devices for reading or writing 3
 - e. Devices to assist with household activities 1
 - f. Devices to assist with participation in play or recreation
 - g. Devices to assist with personal care 1
 - h. Devices to aid in therapy or medical treatment 9
 - i. Devices to assist with the use of public/private transportation
 - j. Devices to assist with employment 1
 - k. Devices to aid with school/learning 2
 - l. AT services 3
 - m. Other – specify 1 – Eligibility for the Medicaid Technology Assisted Waiver
 - n. Total number of devices and services received as a result of casework (a-l) 35

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.

1. All Issues Resolved in Client's Favor 7
2. Some Issues Resolved in Client's Favor 16
3. Other Representation Obtained 1
4. Individual Withdrew Complaint 2
5. Services Not Needed Due to Death, Relocation, etc.
6. Individual Not Responsive to Agency 2
7. Case Lacked Legal Merit 1
8. Conflict of Interest
9. Lack of Resources
10. Not Within Priorities
11. Issue Not Resolved in Client's Favor
12. Other - specify
13. Total (number must match Part II A4a) 29

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).

1. Short Term Assistance 21
2. Systemic/Policy Activities
3. Investigation/Monitoring
4. Negotiation 5
5. Mediation/Alternative Dispute Resolution 1
6. Administrative Hearing 2
7. Legal Remedy/Litigation
8. Class Action Suits
9. Total (this should match the total in Part II.A.4.a above) 29

PART III. STATISTICAL INFORMATION ON INDIVIDUALS SERVED

A. Age of Individuals Served: (as of October 1)

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).

1. 0 to 4 2
2. 5 to 13 9
3. 14 to 18 5
4. 19 to 21 0
5. 22 to 40 1
6. 41 to 64 8
7. 65 and over 1
8. Age unknown 0
9. Total (this should match the total in II.A.3) 26

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 fiscal year).

1. Male 14
2. Female 12
3. Total (this should match the total in II.A.3) 26

C. Race/Ethnicity of Individuals Served

Report the racial/ethnic 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 "Two or more races" category rather than each of the categories they selected. See the instruction manual for more details on completing Section C.

1. Hispanic /Latino of any race 2
For individuals who are non-Hispanic/Latino only
2. American Indian or Alaska Native
3. Asian 2
4. Black or African American 2
5. Native Hawaiian or other Pacific Islander
6. White 20
7. Two or more races
8. Race/ethnicity unknown

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).

1. Community Residential Home 2
2. Foster Care
3. Homeless/Shelter
4. Legal Detention/Jail/Prison
5. Nursing Facility 2
6. Parental/Guardian or Other Family Home 17
7. Independent 3
8. Private Institutional Setting
9. Public (State Operated) Institutional Setting 2
10. Public Housing
11. VA Hospital
12. Other – describe the living arrangement
13. Other – describe the living arrangement
14. Unknown/Not Provided
15. Total (this should match the total in II.A.3) 26

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 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).

1. ADD/ADHD
2. AIDS/HIV Positive
3. Absence of Extremities 1
4. Auto-immune (non-AIDS/HIV)
5. Autism 3
6. Blindness (Both Eyes) 3
7. Other Visual Impairments (Not Blind) 2
8. Cancer
9. Cerebral Palsy 2
10. Deafness
11. Hard of Hearing/ Hearing Impaired (Not Deaf) 1
12. Deaf-Blind
13. Diabetes
14. Digestive Disorders
15. Epilepsy
16. Genitourinary Conditions
17. Heart & Other Circulatory Conditions
18. Mental Illness 1
19. Mental Retardation 1
20. Multiple Sclerosis
21. Muscular Dystrophy
22. Muscular/Skeletal Impairment 2
23. Orthopedic Impairments 3
24. Neurological Disorders/Impairment 2
25. Respiratory Disorders/Impairment
26. Skin Conditions
27. Specific Learning Disabilities (SLD)
28. Speech Impairments 1
29. Spina bifida
30. Substance Abuse (Alcohol or Drugs)
31. Tourette Syndrome
32. Traumatic Brain Injury (TBI) 2
33. Other Disability – specify – 2 – Congenital hydrocephalus; Down syndrome
34. Total (this should match the total in II.A.3) 26

F. Geographic Locations 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).

1. Urban/Suburban (50K population) 21

- | | |
|--|----|
| 2. Rural (<50K population) | 5 |
| 3. Other – specify | |
| 4. Unknown | |
| 5. Total (this should match the total in II.A.3) | 26 |

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.

Include information about (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, and (b) the manner in which this change benefited individuals with disabilities. If possible, (c) estimate the number of individuals potentially affected by the policy/practice change and (d) the method used to determine this estimate. [If you cannot provide an estimate, enter 'N/A'.] Include (e) one case example of the agency's systemic activity related to this policy/practice change.

- a. dLCV conducted monitoring specifically to evaluate provision and use of assistive technology at 35 locations that serve as community placements for Virginians with disabilities. Due to the information and advocacy dLCV provided to providers managing those locations, assistive technology provision and use increased in community residential placements.
- b. Virginians with disabilities who receive services through community placements have increased opportunity and access to assistive technology due to increased information about its availability and use.
- c. 900 people who receive services at the community placement locations will receive more appropriate assistive technology consistent with their needs and goals.
- d. This estimate was reached using the community placements' enrollment data.
- e. Following one community monitoring on-site review, dLCV met with the facility speech language pathologist and facility director to get a better sense of speech and communication services and related assistive technology available to individuals. dLCV successfully advocated for the facility director to update Speech Language Pathology forms to include speech assessments for all participants.

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

4. Describe the agency's on-going systemic activities.

Include information about (a) how these activities may benefit individuals with disabilities. If possible, (b) estimate the number of individuals potentially affected by such activities and (c) the method used to determine this estimate. (d) Describe the potential policy/practice change that may result from this activity.

- a. dLCV contracted with an Assistive Technology Expert to perform AT evaluations on children at a Nursing Home and Rehabilitation Center for Children. Over 3 visits to the facility to meet the residents and meet with facility staff, dLCV observed 40 residents, many of whom were observed to be confined to their beds for most of the day due to lack of supports and assistive technology services.
During these monitoring visits to identify residents who may benefit from additional AT evaluations and services, dLCV observed dangerous and unclean facility conditions, as well as residents receiving substandard care. One such visit revealed children with independent mobility strapped in wheelchairs for staff convenience, while these residents communicated their desire to get up and explore their environment. dLCV and the Assistive Technology Expert contractor observed a lack of active treatment during their monitoring visits, including that the nursing facility staff was not actively trying to wean any of the residents off their feeding tubes. dLCV contacted the parents or guardians of 14 children who might benefit from AT.
- b. 14
- c. This estimate is based on the number of residents identified as potential beneficiaries of increased access to Assistive Technology in the nursing home
- d. dLCV obtained four consents for evaluations. dLCV's Expert has completed four detailed Assistive Technology Evaluations, and is writing an institutional assessment. These monitoring visits led to not only successful advocacy for greater and more appropriate Assistive technology and services, but also systemic changes within the nursing home. These evaluations and assessments will support continued advocacy for individual children as well as systemic change. dLCV's Expert is writing an institutional assessment that will benefit current and future nursing home residents.

B. Litigation/Class Actions

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

1. **Total Number of Non-Class Action Lawsuits, resulting in, or with the potential for, systemic change, pending during the fiscal year: 1**
 - a. **Number of Non-Class Action Lawsuits Newly Filed During Fiscal Year: 1**
 - 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: 1**
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 non-class action activities, explain (a) the issue that prompted the

litigation, (b) how individuals with disabilities were being negatively affected, 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.

- a. n/a
- b. n/a
- c. n/a
- d. n/a
- e. 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.

- a. The disAbility Law Center of Virginia (dLCV) represented a 4 year old Medicaid recipient in a formal administrative appeal of a Medicaid Managed Care Organization's (MMCO) denial of durable medical equipment (a stander), challenging the MMCO's finding of a lack of medical necessity for the Assistive Technology.
- b. In the course of this litigation, dLCV determined that the MMCO was not using the proper standard of review under the Medicaid Early Periodic Screening Diagnosis and Treatment (EPSDT) program; resulting in inappropriate denials for individuals with disabilities.
- c. As a result of this litigation, the MMCO agreed to a settlement where they provided the individual client with the medically necessary Assistive Technology, and agreed to meet with dLCV to review the MMCO's internal standards to ensure compliance with approval/denial guidelines under EPSDT.
- d. 163
- e. This number reflects 163 claims for standers in the last 2 years from the MMCO related to the change of policy – we received those numbers from a subpoena response.

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

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.

- a. n/a
- b. n/a
- c. n/a
- d. n/a
- e. 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.

- a. n/a
- b. n/a
- c. n/a
- d. n/a
- e. n/a

C. LITIGATION-RELATED MONITORING

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

Yes ___ No X [IF NO, web system will take user to Part V]

[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 (2) the groups likely to be affected. (3) Address the major outcomes of the litigation-related monitoring during the fiscal year. Include (4) at least one case example that demonstrates the impact of the agency's litigation-related monitoring.

- 1. n/a
- 2. n/a
- 3. n/a
- 4. n/a

PART V. PRIORITIES

A. Priorities

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.

1. Describe the Priority
2. Describe the Need, Issue, or Barrier Addressed
3. Indicate the Outcome of the priority: check one
Met
Partially Met/Continuing
Not 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 (enter zero if needed)
5. Illustrative Cases/Activities (at least one specific case/activity description showing the success)

Priority 1

1. Describe the Priority

People with Disabilities are Free from Abuse and Neglect

Protection from Harm in Institutional and Community Settings

Conduct primary or secondary investigations of abuse or neglect, including failure to provide needed assistive technology, at non-state operated institutions.

Monitor 20 community placements to assess availability of assistive technology.

Represent individuals from community monitoring to obtain necessary AT.

Monitor 10 large licensed ICFs-ID, large DBHDS licensed group homes or those clustered in close proximity to each other to determine if there is active treatment, access to needed assistive technology and meaningful community integration.

Provide self-advocacy training at five PRTFs for children and caregivers of children, to include information on facility specific rights, wrap around services, special education, assistive technology, and vocational rehabilitation (VR) services, with a specific emphasis on transition services

Develop and distribute self-advocacy materials for children and parents or guardians of children in DJJ facilities, to include facility specific rights, information on special education, assistive technology, supported decision-making, and VR services, with a specific emphasis on transition services.

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.

3. Indicate the Outcome of the priority: check one

Met

Partially Met/Continuing X

Not 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 (enter zero if needed) 2

5. Illustrative Cases/Activities (at least one specific case/activity description showing the success)

Better Support for Independent Mobility – dLCV represented Aslan, who uses a wheelchair for mobility. The back of Aslan’s wheelchair was too low, and provided inadequate postural support, with improperly positioned arm and foot rests. The back and seat fabric was also pulling away from the fasteners. dLCV successfully advocated for Aslan’s care provider to purchase a new wheelchair for him, suited to his height and size, with anti-tip devices to protect him against falls. dLCV also successfully advocated for Aslan’s care provider to place risers under his living room couch to allow him to transfer between his wheelchair and the couch independently.

dLCV conducted monitoring at 35 community placements to assess the availability of assistive technology and provide information about the Protection and Advocacy for Assistive Technology program. Through this monitoring, dLCV provided information to providers who serve more than 800 people with disabilities who can benefit from Assistive Technology services and supports.

dLCV monitored 12 large (6+ bed) group homes serving approximately 150 people with disabilities. In so doing, dLCV educated providers and residents on their right to live in an integrated environment and receive assistive technology. dLCV advised providers that homes must be appropriately furnished and accessible to residents, including provision of assistive technology. dLCV used this information to inform systemic advocacy on community integration, and offer services to individuals interested in vocational rehabilitation, in need of assistive technology, or interested in more integrated settings.

dLCV trained 185 children and 39 staff at Psychiatric Residential Treatment Facilities (PRTFs) on self-advocacy issues, including the right to appropriate assistive technology and services. As a result of these trainings, staff and residents received education on residents’ rights, and knowledge of dLCV’s existence and mission. This led to an increase in information and referral, short-term assistance, and case level services provided to PRTF residents in FY 2016.

dLCV met with the special education and the behavior sciences unit executive staff for the Department of Juvenile Justice (DJJ). We successfully negotiated to provide self-advocacy materials to 405 parents and juveniles during DJJ intake, upon assignment to units in DJJ facilities or community placements, and in the transition packets distributed to residents as they prepare to exit DJJ custody.

Priority 2

1. Describe the Priority

Children with Disabilities Receive an Appropriate Education

Present five (5) trainings on the benefit and use of assistive technology for children to parent and advocacy groups utilizing the dLCV assistive technology kit.

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: check one

Met X

Partially Met/Continuing

Not 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 (enter zero if needed) 8

5. Illustrative Cases/Activities (at least one specific case/activity description showing the success)

dLCV provided special education self-advocacy presentations, including the benefit and use of assistive technology, to 160 people in 5 different parent and child advocacy groups across the Commonwealth.

Advocating for Assistive Technology – dLCV represented Susan, a 13 year old student in a self-contained classroom, to ensure appropriate Assistive Technology services and supports at school. dLCV successfully negotiated with Susan's school and Individualized Education Plan (IEP) team, resulting in the school's provision of a formal Assistive Technology evaluation for her. The school and IEP team agreed to

incorporate the ensuing recommendation of a specialized computer into Susan’s IEP as an accommodation to allow her to meet her educational goals and needs.

Priority 3

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

Represent individuals over age twenty one (21) who have been denied AT or environmental modifications authorized by Medicaid or other insurance, or for whom authorization was denied.

Train two (2) veterans groups or other groups of individuals, advocates and parents about the availability of and how to access AT services.

Assess the quality of Assistive Technology services at a children’s long-term care residential facility. Conduct individual evaluations for 12 children and refer individuals with identified AT needs for case-level services.

Represent individuals under age twenty one (21) who have been denied AT or environmental modifications authorized by Medicaid or other insurance, or for whom authorization was denied.

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.

3. Indicate the Outcome of the priority: check one

Met X

Partially Met/Continuing

Not 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 (enter zero if needed) 10

5. Illustrative Cases/Activities (at least one specific case/activity description showing the success)

A Helping Hand – dLCV represented Caspian, a man who requested assistance appealing an order from Medicaid through the Department of Medical Assistance (DMAS) upholding a provider’s denial of a requested prosthetic hand. dLCV reviewed the hearing record, and determined that a Judge would be unlikely to

overturn the Medicaid decision because there was a factual basis for the order and no discernable procedural errors. Caspian noted that the prosthetic hand would allow him to obtain and perform work more easily, so dLCV advised that he contact his local Department of Aging and Rehabilitative Services, Virginia's office that assists potential employees obtain supports (including assistive technology) that will help or allow them to work. Caspian is successfully working with DARS to acquire the technology.

dLCV provided 2 days of trainings in the remote and underserved Eastern Shore region of Virginia to 29 people regarding several disability rights topics, including assistive technology. dLCV provided attendees with information on types of assistive technology, examples of assistive technology, and information on how to obtain assistive devices and services.

dLCV contracted with an Assistive Technology Expert to perform AT evaluations on children at a Nursing Home and Rehabilitation Center for Children. After 3 visits to the facility to observe the residents and meet with facility staff, dLCV contacted the parents or guardians of 14 children who might benefit from AT. dLCV obtained four consents for evaluations. dLCV's Expert has completed four detailed Assistive Technology Evaluations, and is writing an institutional assessment. These evaluations and assessments support continued advocacy for individual children as well as systemic change. This project is ongoing.

On His Feet – dLCV represented Peter, a 4 year old Medicaid recipient, in a formal administrative appeal of a Medicaid Managed Care Organization's (MMCO) denial of a stander, a piece of durable medical equipment that increases body strength and coordination for independent movement. The appeal challenged the MMCO's finding of a lack of medical necessity for the Assistive Technology. In the course of the litigation, dLCV determined that the MMCO was not using the proper standard of review under the Medicaid Early Periodic Screening Diagnosis and Treatment (EPSDT) program, resulting in inappropriate denials for not only Peter, but many individuals with disabilities. As a result of Peter's case, the MMCO agreed to a settlement where they provided Peter with the medically necessary Assistive Technology, and agreed to meet with dLCV to review the MMCO's internal standards to ensure compliance with approval/denial guidelines under EPSDT. Peter is now learning to walk on his own two feet at a young age, which is critical to his future independence!

Priority 4

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

Represent individuals living in institutional settings to receive opportunities for choice and control over themselves and their environment to include opportunities to communicate and meet in private and any necessary AT.

Assist medical providers for three (3) children with disabilities to develop letters of medical necessity for supports and services through the Early and Periodic Screening, Diagnosis and Treatment (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: check one

Met X

Partially Met/Continuing

Not 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 (enter zero if needed) 3

5. Illustrative Cases/Activities (at least one specific case/activity description showing the success)

Seeing is Believing – dLCV represented Edmund, an adult living in an institutional setting, who needed glasses to see properly. Due to dLCV’s negotiation and advocacy, the institution provided Edmund with glasses, and he can now safely read critical drug information sheets and other materials on the unit.

Now You See Me – dLCV represented Lucy, a young girl with multiple disabilities, including vision impairment. Lucy’s doctors recommended applications that may improve her vision by improving the communication between her eyes and brain through the use of bright colors and movement. dLCV assisted with drafting a letter of medical necessity to request necessary assistive technology for Lucy. Lucy’s parent and doctors used that letter to submit the request for approval under the Medicaid EPSDT program. EPSDT provides Lucy with multiple services including assistive technology to foster growth and independence.

B. Priorities for the Current Fiscal Year

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 priorities as you need. See the instruction manual for more details. The priorities you enter in this section will be

pre-loaded into your annual performance report form for the coming fiscal year (section A above).

1. Describe the Priority:

People with Disabilities are Free from Abuse and Neglect

Protection from Harm in Institutional and Community Settings

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

Investigate failure to provide appropriate AT in institutional and community settings.

1. Describe the Priority:

Children with Disabilities Receive an Appropriate Education

Children with Disabilities in Underserved Populations Receive Educational Services

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

Provide limited short-term assistance, training and case services to advocate for appropriate and necessary AT for students with disabilities

1. Describe the Priority:

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

People with Disabilities are Not Denied Medicaid Services Unlawfully

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

Educate providers about new requirements related to access to technology and case services for children denied AT under Medicaid.

C. AGENCY ACCOMPLISHMENTS

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

dLCV assisted 29 clients with acquisition of AT to help promote personal growth and independence.

dLCV filed a formal administrative appeal with DMAS on behalf of Peter and acquired a stander for him. The MCO settled the appeal, agreed to pay for the requested DME services for Peter. This opens the door for many other children to receive approval for standers under Medicaid in the future.

dLCV completed 46 training and outreach opportunities and reached 1831 people. This included surveying 35 state facilities, day programs, community residents, and intermediate care facilities to determine access to assistive technology and educating and reaching 400 individuals and providers.

dLCV contracted with an Assistive Technology Expert to perform AT evaluations on children at a Nursing Home and Rehabilitation Center for Children. dLCV's Expert completed four detailed Assistive Technology Evaluations, and is writing an institutional assessment. These evaluations and assessments will support continued advocacy for individual children as well as systemic change.

dLCV conducted outreach and training for two days on the Eastern Shore of Virginia to reach this underserved and remote area of the state. Twenty-nine individuals attended two training opportunities to hear about many areas of disability rights, including assistive technology.

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):	91,910
2. Program income	
3. Other – carryover funds	110,939
4. Other – specify	
5. Other- specify	
6. Total:	202,849

1. 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	25	24.75
Part-Time		
Administrative		
Full-time	8	7.5
Part-time		
Totals	33	32.25

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

Person with a disability
 Agency staff 12
 Agency board 8

Family members of a person with a disability
 Agency staff 21
 Agency board 4

Total number of persons on agency staff 33
 Total number of persons on agency board 12

D. GRIEVANCES FILED: 1

Number of PAAT grievances filed against the agency during the fiscal year

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).

None

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, Central Virginia Aid Legal Society, Virginia Organization of Consumers Asserting Leadership (VOCAL), VAVS Video Production, and dLCV Foundation and Centers for Independent Living (CILs) across the Commonwealth.