# RSA-227 - Annual Client Assistance Program (CAP) Report

**Virginia (Disability Law Center of Virginia) - H161A160067 - FY2018**

## General Information

### Designated Agency Identification

<table>
<thead>
<tr>
<th>Name</th>
<th>disAbility Law Center of Virginia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>1512 Willow Lawn Drive</td>
</tr>
<tr>
<td>Address Line 2</td>
<td>Suite 100</td>
</tr>
<tr>
<td>City</td>
<td>Richmond</td>
</tr>
<tr>
<td>State</td>
<td>Virginia</td>
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<tr>
<td>Zip Code</td>
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<td>Phone</td>
<td>804-225-2042</td>
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Operating Agency (if different from Designated Agency)

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City  Richmond

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Additional Information

Name of CAP Director/Coordinator  Colleen Miller

Person to contact regarding report  Robert Gray

Contact Person Phone  804-225-2042

Part I. Non-case Services

A. Information and Referral Services (I&R)

Multiple responses are not permitted.

1. Information regarding the vocational rehabilitation (VR) program  35

2. Information regarding independent living programs  1

3. Information regarding American Indian VR Service projects  2

4. Information regarding Title I of the ADA  24

5. Other information provided  14

6. Information regarding CAP  1698
7. Total I&R services provided (Lines A1 through 6) 1775

B. Training Activities

1. Number of training sessions presented to community groups and public agencies.
47

2. Number of individuals who attended these training sessions. 1698

3. Describe training presented by the staff. Include the following information:

    - topics covered, purpose of the training and description of the attendees

Knowing Your Rights in the Sheltered Workshops

With the assistance of volunteers and our Protection and Advocacy for Individuals with Mental Illness (PAIMI) Council, dLCV educated employees at every existing 14(C) sheltered workshop on their employment rights and dLCV services available to them. dLCV discovered that the official listings of 14(C) employers were unreliable. We eventually verified 25 such employers. We then held one or more in-person presentations at 23 existing 14(C) employer locations and sent educational information to all 25. We distributed 1175 total information packets assembled with assistance with dLCV volunteers.

In all, dLCV successfully conducted at least 28 Presentations at 23 existing 14(C) employer locations, or 92% of the Sheltered Workshops and other 14(C) locations in Virginia. A total of 792 subminimum wage employees, family members, and others attended these presentations, and at least 29 requested further information or provided feedback.

School is in Session!

dLCV educated students, staff, and parents at 5 private colleges and universities across Virginia about vocational rehabilitation (VR) rights and services. The sessions covered a general overview of the agency, accessibility, and extensive education about the Client Assistance Program and how dLCV can help. Throughout the year, we reached
250 students, faculty, and staff at Randolph Macon, Roanoke College, Sweet Briar College, Hollins University, Bryant & Stratton, and Virginia Union University.

**What’s Next?**

dLCV presented to 15 individuals at the Virginia Psychiatric Rehabilitation Association annual conference about VR rights, transition, and other disability related topics. Many of the attendees, who were primarily consumers of mental health services, learned they can pursue competitive employment and resources exist to do so.

**Planning for Adulthood**

dLCV opened a project to train 5 advocacy groups or job clubs regarding VR rights and services, benefits planning and transition rights. dLCV presented to 575 transition aged youth, parents and advocates at 5 different groups about transition rights. Groups included Amelia Street School, the Arc South of the James, I'm Determined, affiliated with the Virginia Department of Education, the Youth Leadership Academy, affiliated with the Virginia Board for People with Disabilities, and Virginia Advocates United Leading Together.

**C. Agency Outreach**

Describe the agency's outreach efforts to previously un-served or underserved individuals including minority communities.

dLCV hired an Outreach Coordinator to specifically connect with the Hispanic Community in FY 18. This Coordinator educated 15 individuals from two Hispanic advocacy groups, Grupo Gaviotas in Chesterfield and Grupo Caminos in Richmond, about the dLCV and CAP program.

dLCV trained 21 volunteers about CAP to be knowledgeable when conducting presentations, outreach, and distributing CAP information across the Commonwealth. Volunteers completed outreach at a total of 20 community locations. We reached 164 case managers, job coach specialists, individuals with disabilities, advocates, and disability service providers.

dLCV used our volunteer core of over 50 individuals to attend fairs, conferences and other events to reach many across the Commonwealth as well.

dLCV continues close communication with all state DARS and DBVI offices to ensure their clients understand dLCV and the CAP program.
D. 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 4), enter the total number of documents produced. Agencies should not include website hits. See instructions for details.

dLCV offered two public input surveys during FY 18. The first survey allowed our 200 respondents the opportunity to express which disability advocacy issues they feel are most important. We posted the survey instrument on our website and distributed paper copies at conferences, during trainings and presentations, and directly to residents during facility monitoring. The top three categories chosen were quality mental health care, housing, and special education. 40% of our respondents were individuals with disabilities. Agencies and groups we reached included: the Virginia Board for People with Disabilities, Arc South of the James, Department for Aging and Rehabilitative Services (DARS), Partnership for People with Disabilities, Department for Behavioral Health and Developmental Services (DBHDS), and multiple community advocacy and networking groups. dLCV used this information to develop our FY 19 goals and focus areas.

The second systemic input survey allowed dLCV to receive targeted input from established advocacy agencies. The agencies reviewed our dLCV Board adopted FY 19 goals and focus areas and offered specific feedback to contribute to our work plan. Agencies contributing to this effort include Arc of the Piedmont, Virginia Poverty Law Center, Virginia LEND, New River Agency on Aging, Brain Injury Association of Virginia, Appalachian Agency for Senior Citizens, Formed Families Forward, Arc of Northern Virginia, and Virginia Autism Project. dLCV reviewed these suggestions and those of our PAIMI Council and incorporated them into our FY 19 work plan. Specific CAP related responses included work with transition aged children and addressing VR barriers. We incorporated these suggestions in our FY 19 work plan.

dLCV participated on the Virginia State Rehabilitation Councils (SRACs) for the Department for Aging and Rehabilitative Services (DARS) and the Department for the Blind and Vision Impaired (DBVI), assigning two different CAP disability rights advocates to each position. dLCV will continue collaboration with the State Rehabilitation Councils in FY 19. In FY 18, dLCV staff was involved in the acquisition and training of new Fair Hearing Officers. dLCV impacted the DARS SRC by taking part in reviewing and updating the client satisfaction surveys. dLCV impacted the DBVI SRC by partaking in the comprehensive needs assessment, reviewing the changes to the definitions of the functional limitations and remained a part of the discussions about the order of selection.

dLCV maintains a website that posts the following: our federal grants’ goals and focus areas, notices for the Board of Directors and dLCV’s Advisory Council meetings, job vacancies, announcements, agency publications, and disability-related links.

dLCV has a Facebook page and Twitter account which include agency information and links to resources.
1. Agency Staff Interviewed or Featured on Radio and TV 5

dLCV promoted our agency on Richmond based Channel 6 local news multiple times during the year. dLCV was also featured in a radio talk show called ‘Raising the Bar’ on 820 AM out of Chester Virginia. We provided information about CAP and other dLCV programs to approximately 15,000 listeners.

2. Articles about CAP Featured in Newspaper/Magazine/Journals 0

3. PSAs/Videos Aired about the CAP Agency 2

dLCV’s ‘VR Rights and Services’ and ‘Employment Rights’ Ask the Expert videos, produced in FY 16 are still posted on www.dlcv.org. Many other resources related VR remain as well. This year, dLCV had 68,366 visitors to our website to view our videos and VR resources.

4. Publications/Booklets/Brochures Disseminated by the Agency 1309

5. Number of Times CAP Exhibited at Conferences, Community Fairs, etc. 18

6. Other (specify below)

E. Information Disseminated About Your Agency by External Media Coverage

Describe the various sources and information disseminated about your agency by an external source.

There were 15 news articles across different media outlets about dLCV during the year. Although none specifically promoted the CAP program, they helped promote our agency as a whole.
Part II. Individual Case Services

An individual is counted only once during a fiscal year. Multiple counts are not permitted for Lines A1-A3.

1. Individuals who are still being served as of October 1 (carryover from prior year) 14

2. Additional individuals who were served during the year 55

3. Total individuals served (Lines A1+A2) 69

4. Individuals (from Line A3) who had multiple case files opened/closed this year (In unusual situations, an individual may have more than one case file opened/closed during a fiscal year. This number is not added to the total in Line A3 above.) 5

5. Individual still being served as of September 30 (Carryover to next year. This total may not exceed Line A3.) 13

B. Problem areas

Multiple responses permitted.

1. Individual requests information 2

2. Communication problems between individual and VR counselor 10

3. Conflict about VR services to be provided 34
4. Related to VR application/eligibility process

5. Related to assignment to order of selection priority category

6. Related to IPE development/implementation
   i. Selection of vendors for provision of VR services
   ii. Selection of training, post-secondary education
   iii. Selection of employment outcome
   iv. Transition services

7. Related to independent living services

8. Other Rehabilitation Act-related problems

9. Non-Rehabilitation Act related
   i. TANF
   ii. SSI/SSDI
   iii. Housing
   iv. Other:

10. Related to Title I of the ADA

C. Intervention Strategies for closed cases

   (Choose one primary service the CAP provided for each closed case file. There may be more case files than actual individuals served.)

   1. Short Term Technical Assistance

   2. Investigation/Monitoring

   3. Negotiation

   4. Mediation and other methods of Alternative Dispute Resolution
5. Administrative / Informal Review  

6. Formal appeal / Fair Hearing  

7. Legal remedy / Litigation  

8. Advisory/interpretational  

9. Information/referral  

10. Transportation  

10. Total  

**D. Reasons for closing individuals' case files**

(Choose one primary reason for closing each case file. There may be more case files than the total number of individuals served.)

1. All issues resolved in individual's favor  

2. Some issues resolved in individual's favor (when there are multiple issues)
3. CAP determines VR agency position/decision was appropriate for the individual 3

4. Individual's case lacks legal merit; (inappropriate for CAP intervention) 1

5. Individual chose alternative representation

6. Individual withdrew complaint 4

7. Issue not resolved in clients favor 1

8. CAP services not needed due to individual's death, relocation, etc.

9. Individual not responsive/cooperative with CAP 2

10. CAP unable to take case due to lack of resources

11. Conflict of interest

12. Other (Please explain below)

**E. Results achieved for individuals**

(Choose one primary outcome for each closed case file. There may be more case files than the total number of individuals served.)

1. Controlling law/policy explained to individual 10
2. Application for services completed 3

3. Eligibility determination expedited

4. Individual participated in evaluation 2

5. IPE developed/implemented/Services Provided 3

6. Communication re-established between individual and other party 19

7. Individual assigned to new counselor/office 6

8. Alternative resources identified for individual 8

9. ADA/504/EEO/OCR complaint made 2

10. Other (Please explain below)

Part III. Program Data

A. Age
Multiple responses not permitted.

1. Up to 18 11
2. 19 – 24  18

3. 25 – 40  8

4. 41 – 64  26

5. 65 and over  6

6. Total (Sum of Lines A1 through A5. Total must equal Part II, Line A3.)  69

B. Gender

Multiple responses not permitted.

1. Females  40

2. Males  29

3. Total (Lines B1+B2. Total must equal Part II, Line A3.)  69

C. Race/ethnicity of Individuals Served
1. Hispanic/Latino of any race (for individuals who are non-Hispanic/Latino only) 9

2. American Indian or Alaskan Native 1

3. Asian 3

4. Black or African American 24

5. Native Hawaiian or Other Pacific Islander 1

6. White 23

7. Two or more races 4

8. Race/ethnicity unknown 4

**D. Primary disabling condition of individuals served**

Multiple responses not permitted.

1. Acquired Brain Injury

2. ADD/ADHD 4
3. AIDS/HIV

4. Amputations or Absence of Extremities

5. Arthritis or Rheumatism

6. Anxiety Disorder

7. Autism Spectrum Disorder  6

8. Autoimmune or Immune Deficiencies (excluding AIDS/HIV)

9. Blindness (Both Eyes)  7

10. Other Visual Impairments (Not Blind)  4

11. Cancer

12. Cerebral Palsy  4

13. Deafness  2

14. Hard of Hearing/Hearing Impaired (Not Deaf)
15. Deaf-Blind

16. Diabetes

17. Digestive Disorders

18. Epilepsy 1

19. Heart & Other Circulatory Conditions

20. Intellectual Disability 11

21. Mental Illness 14

22. Multiple Sclerosis

23. Muscular Dystrophy

24. Muscular/Skeletal Impairment 4

25. Neurological Disorders/Impairment 1

26. Orthopedic Impairments 4
27. Personality Disorders

28. Respiratory Disorders/Impairment

29. Skin Conditions

30. Specific Learning Disabilities (SLD)  5

31. Speech Impairments

32. Spina Bifida

33. Substance Abuse (Alcohol or Drugs)

34. Other Disability  2

35. Total (Sum of Lines D1 through D34. Total must equal Part II, Line A3.)  69

E. Types of Individual Served

Multiple responses permitted.

1. Applicant of VR  9

2. Individual eligible for VR services currently on a wait list  3
3. Individual eligible for VR services not currently on a wait list 40

4. Applicant or individual eligible for Independent Living 3

5. Transition student/High school student 5

6. All other applicants or individuals eligible for other programs or projects funded under Rehabilitation Act 11

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**Part IV. Systemic Activities and Litigation**

**A. Non-Litigation Systemic Activities**

1. Number of non-litigation systemic activities not involving individual representation that resulted in the change of one or more policy or practice of an agency. 3

2. Describe the systemic activities conducted by CAP during the fiscal year and its impact on other agency's policies or practices.

**We Are Watching.**

dLCV assessed incident reports we received from Social Services, Adult Protective Services (APS) Division and from the Department for Behavioral Health and Developmental Services critical incident reports related to employment and denial of VR services. We received 12 reports during the year relating to falls, injuries on the job, client on client injury, and sexual abuse. All of the reports received related to sheltered workshop programs, and created a barrier for the client to work. dLCV opened 5 service requests to address specific concerns from these 12 reports. Corrective Action Plans to resolve the concerns included fall prevention plans, referrals to VR services and OT and PT specialists, and increased staff supervision. As a result, individuals in sheltered workshop programs have greater supports and oversight.
What’s Going On?

dLCV identified and investigated service delivery issues for individuals with developmental disabilities (DD) at vocational rehabilitation. We identified a need for education, training, specialized expertise working with the DD population, utilization of customized employment, as well as other adjustments in DARS service delivery. No significant increase in employability for persons with DD occurred in FY 18. However, as a result of the identification of barriers and implementation of DARS hiring new staff to specifically work with this population, dLCV continue to monitor this issue and advocate for continued employment of individuals with DD.

Get in the Know.

dLCV investigated the adequacy of the DARS referral process for VR transition services. Clients from three DARS offices reported that the school referred them to DARS to apply for VR transition services, but DARS then referred them back to the school. We reached out to DARS in these districts and learned that they were aware that there was a lot of miscommunication regarding the referral process. dLCV shared the clients’ experiences and asked DARS to inform parents on how to apply for VR services and maintain and monitor consistent communication.

B. Litigation

n/a

1. Total number of CAP cases requiring litigation involving individual representation resulting in, or with the potential for, systemic change.

a. Number of cases requiring litigation involving individual representation filed during fiscal year.

b. Number of on-going cases pending at start of fiscal year (carryover from prior fiscal year).

c. Number of cases resolved through litigation during fiscal year.

2. Describe the agency's on-going and completed systemic litigation activities involving individual representation.

dLCV did represent one client in a DARS Fair Hearing. See the final narrative in Part VI.
Part V. Agency Information

A. Designated Agency

1. Agency Type (select only one option)  
   External-Protection and Advocacy agency

2. Name of designate agency  
   disAbility Law Center of Virginia

3. Is the designated agency contracting CAP services?  
   No

4. If yes, name of contracting agency:  
   N/A

B. Staff Employed

Provide a description of all CAP positions

dLCV utilized 36 advocates, attorneys, and support staff from all units to complete our CAP advocacy in FY 18.

As Virginia’s protection and advocacy system, we utilize multiple funding streams to complete our advocacy projects and casework.

Part VI. Case Examples

Help Me Learn.

Tabitha is a freshman at a large Virginia University and is a current Department for Aging and Rehabilitative Services (DARS) client. DARS failed to provide financial support for her education, as well as vital technology evaluation. dLCV represented Tabitha at mediation. dLCV argued that the lack of counseling and informed choice, failure to provide an appropriate IPE, and poor management of the case, led to an improper decision to deny funding. DARS conceded and agreed to pay the remaining $2500 tuition. DARS also agreed to a technology evaluation, in addition to transportation for counseling. Tabitha was able to stay in school and pursue her education.
Move Quick!

Christie needed DARS help to find a job. She contacted dLCV when she received a letter from DARS that they were going to prematurely close her case. dLCV moved swiftly and assisted Christie to stop the case closure. Within only one day, we set things straight, re-established communication and Christie’s case stayed open. She continues to move forward to find employment, thanks to a fast intervention.

I Need Information I Can Understand.

Tomas contacted dLCV to gain services from the Department for the Blind and Vision Impaired (DBVI). We learned that DBVI was not providing services in Tomas’s native language, Swahili. dLCV successfully negotiated with DBVI to provide information to him in his native language. dLCV also connected DBVI with specific interpreter service and translation service options to use to communicate with Tomas effectively. DBVI also agreed to provide a qualified interpreter in Swahili when needed. DBVI can now assist Tomas to get the training and supports he needs to be a successful.

Let’s Get on the Same Page.

David contacted dLCV to request a new counselor. He is pursuing a specialized IT profession and is working towards certifications and trainings. David became frustrated with his DARS counselor’s tardiness and follow through when time to pay for tests. dLCV identified the source of the communication breakdown, negotiated a compromise and communication was restored. The counselor agreed to work on her tardiness and also put in place monthly meetings via phone and enrolled the David in a specialized program. This program provides insight on trends and trainings for the IT field. David can now pursue his career!

First Home, Then Work!

dLCV worked with a Jaida in desperate need of assistive technology from DBVI. As a result of our advocacy, DBVI provided her specialized software, touch outlets to ensure safety, a talking blood pressure monitor and a glucose monitor, tactile dots to mark things, a talking watch, liquid indicator, and a case transfer to the DBVI Richmond Regional Office. Now Jaida has the necessary supports she needs to have maximum independence and safety to prepare her to pursue employment opportunities.

I Need a Jump Start.

Jennifer contacted dLCV because she was unsure of the status of her VR case with DARS. We learned the case already closed and the appeal window passed to request that her VR case remain open. dLCV assisted her to get through the referral and application process for new services from DARS. The District Manager reopened the case and connected her with a Counselor right away.
dLCV helped the client avoid months of waiting and service delay by breaking down walls to get her help.

**Hear Me at Hearing.**

dLCV represented Eliza, a woman with mental illness, to challenge closure of her DARS case. After DARS upheld her closure in an informal administrative review, dLCV requested mediation. DARS declined our request for mediation. dLCV then represented our client at a fair hearing. The hearing officer sided with DARS and ruled that DARS properly closed Eliza’s case. dLCV voiced our strong dissent and provided Eliza with a recount of our argument and a letter of support as part of her request for an administrative review by the Office of the Governor.

**Certification**

Reports are to be submitted to RSA within 90 days after the end of the fiscal year covered by this report. Please be reminded that you can enter data directly into RSA’s website via the internet. Information on transmittal of the form is found on pages 19 and 20 of the reporting instructions.

Name of Designated Agency Official

Colleen Miller

Title of Designated Agency Official

Executive Director

Date Signed