

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 2018

AGENCY INFORMATION

Agency Name:	disAbility Law Center of Virginia
Main Office - Address:	1512 Willow Lawn Drive, Suite 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:	Main Office

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 | 13 |
| 2. Total Number of Requests for I&R Services during the Fiscal Year | 13 |

B. Training Activities

- | | |
|--|------|
| 1. Number of Training Sessions Presented by Staff | 16 |
| 2. Number of Individuals Who Attended These Training Sessions | 1278 |
| 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's annual open house featured an AT demonstration table. Staff at the table exhibited several AT devices and discussed rights to AT in special education, how AT can be used in transition planning, use of AT in the workforce, and dLCV services as they relate to AT issues.

- b. The table encouraged consideration of how individuals can use AT in diverse settings and increased awareness of dLCV as a resource on AT related issues.
- c. Approximately 80 people participated in the AT demonstration. Participants included school administrators, educators, group home staff, service providers, vocational rehabilitation counselors, and individuals with disabilities.

Training Event #2

- a. dLCV conducted office hours at seven centers for independent living and mental health clubhouses. Topics covered included accommodations at school, accommodations in the workplace, and rights to accommodations under the Americans with Disabilities Act (ADA) and the Rehabilitation Act of 1973. Staff also discussed what individual services dLCV provides. In conjunction with the general training provided at office hours, staff also provided one on one information and referral on various issues including failure to provide assistive technology at school and work.
- b. Office Hours educated individuals about their rights and dLCV services. We also provided information and referral for individual issues and identified potential cases.
- c. dLCV staff conducted 37 one-on-one consultations and introduced 116 individuals to dLCV. Participants included individuals with disabilities and their family members.

4. Describe the agency’s outreach efforts to previously unserved 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 Grupo Gaviotas in Chesterfield, VA and Grupo Caminos in Richmond, VA, two Hispanic advocacy groups, about the dLCV and CAP program. The Coordinator also represented dLCV at multiple fairs and outreach events targeting underserved and unserved populations.

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

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 3
- 2. Newspaper/Magazine/Journal articles Prepared by Agency Staff 0
- 3. PSAs/videos Aired by the Agency 0
- 4. Website Hits 68,366
- 5. Publications/Booklets/Brochures Disseminated by the Agency 397
- 6. Other (specify) 0

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

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

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) 13
3. Total Number of Individuals Served During Fiscal Year (1 +2) 20
4. Total Number of Cases Closed During the Fiscal Year 13
- 4b. Total Number of Individuals with All Their Cases Closed During the Fiscal Year 12
1. Total Individuals Still Being Served at the End of the Fiscal Year (3 minus 4b) 8

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) 10
 - a. Medicaid 7

- b. Medicare
- c. Private Medical Insurance
- d. Other 3
- 6. Housing
- 7. Post-Secondary Education
- 8. Rehabilitation Services 4
- 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 - Lack of suitable mobility device
- 12. Other – specify
- 13. TOTAL 21

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) 20
- 2. Type of AT device or AT service received as a result of casework
 - a. Devices for communication 5
 - b. Devices for mobility 4
 - c. Devices for hearing or seeing 2
 - d. Devices for reading or writing 4
 - e. Devices to assist with household activities
 - 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 3
 - i. Devices to assist with the use of public/private transportation
 - j. Devices to assist with employment 2
 - k. Devices to aid with school/learning 2
 - l. AT services 4
 - m. Other –
 - n. Total number of devices and services received as a result of casework (a-l) 27

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 10
- 2. Some Issues Resolved in Client's Favor 2
- 3. Other Representation Obtained
- 4. Individual Withdrew Complaint
- 5. Services Not Needed Due to Death, Relocation, etc.
- 6. Individual Not Responsive to Agency 1

7. Case Lacked Legal Merit
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) 13

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 5
2. Systemic/Policy Activities
3. Investigation/Monitoring
4. Negotiation 8
5. Mediation/Alternative Dispute Resolution
6. Administrative Hearing
7. Legal Remedy/Litigation
8. Class Action Suits
9. Total (this should match the total in Part II.A.4.a above) 13

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 0
2. 5 to 13 7
3. 14 to 18 3
4. 19 to 21 1
5. 22 to 40 3
6. 41 to 64 5
7. 65 and over 1
8. Age unknown 0
9. Total (this should match the total in II.A.3) 20

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 11
2. Female 9
3. Total (this should match the total in II.A.3) 20

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
For individuals who are non-Hispanic/Latino only 2
2. American Indian or Alaska Native
3. Asian 1
4. Black or African American 6
5. Native Hawaiian or other Pacific Islander 0
6. White 9
7. Two or more races 1
8. Race/ethnicity unknown 1

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. Foster Care
3. Homeless/Shelter
4. Legal Detention/Jail/Prison
5. Nursing Facility 5
6. Parental/Guardian or Other Family Home 9
7. Independent 2
8. Private Institutional Setting
9. Public (State Operated) Institutional Setting 3
10. Public Housing
11. VA Hospital
12. Other – describe the living arrangement 1 – Veteran’s Home
13. Other – describe the living arrangement
14. Unknown/Not Provided
15. Total (this should match the total in II.A.3) 20

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
4. Auto-immune (non-AIDS/HIV)
5. Autism 2
6. Blindness (Both Eyes) 1
7. Other Visual Impairments (Not Blind) 3
8. Cancer
9. Cerebral Palsy 3
10. Deafness
11. Hard of Hearing/ Hearing Impaired (Not Deaf)
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
20. Multiple Sclerosis
21. Muscular Dystrophy
22. Muscular/Skeletal Impairment 2
23. Orthopedic Impairments 3
24. Neurological Disorders/Impairment 1
25. Respiratory Disorders/Impairment 1
26. Skin Conditions
27. Specific Learning Disabilities (SLD)
28. Speech Impairments
29. Spina bifida 1
30. Substance Abuse (Alcohol or Drugs)
31. Tourette Syndrome
32. Traumatic Brain Injury (TBI)
33. Other Disability – specify 1 – Rhetts Syndrome 1 – Unspecified Chromosomal Abnormality
34. Total (this should match the total in II.A.3) 20

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) 15
2. Rural (<50K population) 5
3. Other – specify
4. Unknown
5. Total (this should match the total in II.A.3) 20

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 3

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. Through monitoring of a pediatric nursing facility, dLVCV identified several areas of concern affecting the patients residing there. dLVCV filed a complaint with the Office of Licensure and Certification (OLC) notifying them of these concerns. As a result, OLC conducted a compliance review in addition to its annual review. OLC cited the facility for several deficiencies, including failing to follow a patient's plan of care requiring staff to use positioning devices. When staff do not follow a patient's plan of care, that patient is at risk of a variety of negative health effects.
- b. The facility ordered the pediatric unit manager to re-educate the direct care nursing staff on the importance of following the care plans. Additionally the facility updated their policy to require the Assistant Director of nursing to make random visual observations of the provision of care to ensure that it is in compliance with the care plan. This will occur a minimum of three days per week and the Assistant Director of nursing will report once a month to the Administrator over a period of three months. This additional education of staff and monitoring increases the likelihood that patients at this facility have a properly implemented plan of care.
- c. 38
- d. Bed capacity for this facility.
- e. Staff are now properly using positioning devices for the youth cited in the OLC report, to prevent pressure over boney prominences.

- a. Through review of adult protective services (APS) reports, dLVCV determined that one county's Department of Social Services (DSS) was not reporting to dLVCV. This negatively impacted individuals with disabilities, as dLVCV was not aware of these reports.
- b. dLVCV discussed the issue with the DSS office in question and they changed their policy from placing reporting responsibility on individual staff to forwarding the report when validated. dLVCV is now receiving reports from this county and is able to follow up with investigations, case level services, or other corrective action as appropriate.
- c. 2

- d. Number of actual reports received after policy change. However, this will continue to impact the entire population that could have an APS complaint filed on their behalf in this county, so actual impact is greater.
- e. N/A

- a. A dermatology clinic was not providing auxiliary aids and services. Without effective communication, patients who communicate via sign language were not able to receive adequate medical care.
- b. As part of dLCV’s systemic work, we followed up with this provider to inform them of their obligations under the ADA. The clinic started to provide video remote interpretation services via their office tablets. Now clients who need American Sign Language interpretation services at this clinic are able to receive them, even on a walk-in basis.
- c. N/A
- d. We are unable to determine how many patients at this clinic require this service. However, this provider is a large clinic with several locations.
- e. dLCV received notification of this issue by a patient of the clinic. This patient is now able to access the services at this clinic through remote video interpretation.

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

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. N/A
- b. N/A
- c. N/A
- d. N/A

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: 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
- 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

[Entering a non-zero number in IV.B.1.c will require an answer to Question 3. Entering zero for this item will cause the system to skip to Question 4.]

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. N/A
- b. N/A
- c. N/A
- d. N/A
- e. 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.

- 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 in Institutional and Community Settings

1. Monitor state-licensed community-based institutions of 7 or more people using review of APS reports, CHRIS reports, CMS surveys, and other sources. Identify trends and issues and obtain corrective action as needed.
2. By the end of the third quarter, host at least one meeting of an inter-agency Coalition on Community Safety to discuss issues and trends from our review of CHRIS reports. Obtain commitment from Coalition members for at least three actions to address issues raised by dLCV and other members.
3. Monitor conditions on the pediatric unit of Iliff Nursing and Rehabilitation Center through quarterly onsite visits and review of APS reports and OLC reports. Monitoring efforts will focus on opportunities for community integration and discharge, access to FAPE, provision of specialized services, and abuse/neglect. Report findings to regulatory or oversight entities, and to the DOJ and Independent Reviewer.

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

(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): 7

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

- 1. Putting New Data to Use-** dLVCV received critical incident reports from community providers (CHRIS reports) this fiscal year. dLVCV implemented a protocol for reviewing the reports and identifying trends. dLVCV reviewed over 23,000 CHRIS reports. Through this review, dLVCV identified the following as the most prevalent issues: falls in the bedroom, safe wheelchair transportation, signs of pain in individuals who are non- or minimally- verbal, and communication between programs.

A Right to Basic Care- Claire lives in a geriatric hospital and recently needed a wheelchair to accommodate her spinal inflammation. The hospital failed to provide her with a wheelchair, leaving Claire confined to her bed for several weeks. Because Claire could not be transported, staff were not providing appropriate bathing care, which was irregular and consisted only of her being cleaned with wet-wipes. Claire agreed for dLVCV to report the complaint, but did not wish for dLVCV to receive the investigation report. dLVCV empowered the client by reporting Claire's complaint to the Director of the hospital. A wheelchair is on the way!

- 2.** dLVCV created an inter-agency Coalition on Community Safety to discuss possible solutions and advocacy efforts for these issues. dLVCV then developed a detailed info graphic to educate Department of Behavioral Health and Developmental Services (DBHDS) licensed facilities on these issues. The info graphic provided suggested solutions to these problems, including installing grab bars in bedrooms, using picture pain charts for non-verbal clients, and ensuring staff properly use 4-point tie downs when transporting someone in a wheelchair. dLVCV distributed this info graphic to DHBDS licensed facilities, educating a large audience on ways in which assistive technology can help reduce the risk of critical incidents.
- 3. Sticking to the Plan-** dLVCV monitored conditions at a private pediatric nursing facility, where the majority of residents require assistive technology and adaptive equipment to live and navigate their environment. Through a combination of announced and unannounced visits, dLVCV completed quarterly onsite monitoring and provided residents with information about assistive technology and disability rights generally. dLVCV filed a complaint with the OLC which alleged that the facility was not sufficiently meeting the supervision and social development needs of a resident, restraining ambulatory children in wheelchairs, and failing to provide a homelike environment. OLC completed an onsite compliance survey in combination with the facility's annual survey. OLC found the facility non-compliant with federal requirements for long term care facilities for several reasons including, failing to implement a care plan that called for the use of positioning devices to prevent pressure over bony prominences and provide a safe environment to two residents. The facility submitted corrective action plans which the state approved. dLVCV will continue to actively monitor conditions at this facility in FY19.

Priority 2

1. Describe the Priority

Children and Youth with Disabilities Receive an Appropriate Education

1. Represent children who have been denied appropriate assistive technology (AT) services under their IEP or 504 Plan.

2. Describe the Need, Issue, or Barrier Addressed

Children and youth are routinely denied appropriate assistive technology or AT assessments from schools due to failure to identify a child's education needs. dLCV 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

(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

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

1. **It Can't Just Sit on a Shelf!** - Alex is a six year old student with Rett Syndrome. Alex has no use of her hands and is non-verbal, so the school purchased a communication device with an eye gaze feature. The school did not provide Alex with consistent access to the device and several teachers did not know how to use the device, so it often sat unused on a shelf. dLCV successfully advocated for staff training, access to the device throughout the day, and a one on one to help Alex use her assistive technology. Due to dLCV's assistance, Alex can now effectively communicate at school.

The Accommodations He's Been Waiting for- Luke is a student who is visually impaired and reads braille in school. Sometimes it took months for the provider to send class materials to the school and when the materials arrived, the class had moved on to another topic. This caused Luke to fall behind in his math class. dLCV contacted both the school and the materials provider. The school started sending the materials to the provider in advance, so Luke now receives his materials in a timely manner. The school is also providing Luke compensatory math education to get him back on track in the class. The wait is over for Luke!

Charging towards Success- Phil is a young student with Down syndrome and a hearing impairment. Phil's individualized education program (IEP) included the

use of a Frequency Modulation (FM) system, but Phil could not use the system because it was not charging properly. dLVCV successfully advocated for a functional FM system at school. Everyone, including the school, noticed a vast improvement in Phil's communication during school once he had access to his FM system.

Sometimes you Need to Complain- Haley is a student who is visually impaired. Haley's IEP included services from a teacher for the visually impaired (TVI), large print, and high contrast materials. Haley's mother filed a complaint with the Office of Civil Rights (OCR), prior to requesting services from dLVCV. dLVCV assisted mother through the OCR mediation and investigation process. While mediation was not successful, dLVCV's advocacy resulted in a resolution agreement which required the school to hold a meeting to determine if they owed Haley compensatory education and train staff on Hayley's disability and IEP. Haley is currently receiving compensatory education for TVI and orientation and mobility services. The current draft of Haley's IEP also provides for staff training.

Priority 3

1. Describe the Priority

People with Disabilities have Appropriate Access to Government Services and Maximum Individual Choice

1. Investigate training protocol for poll workers in 10 precincts to accommodate individuals with disabilities via electronic equipment and alternate formats.
2. Represent individuals who have been denied access to public accommodations due to a denial of effective communication or assistive technology, physical barriers, or any failure to provide reasonable accommodations.

2. Describe the Need, Issue, or Barrier Addressed

Access to AT to living in the community independently presents many challenges. dLVCV addresses these concerns through case and project work.

3. Indicate the Outcome of the priority: check one 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)

1. **Exceeding Expectations-** dLCV set a goal to contact 10 voting precincts to investigate their training protocol for accommodating individuals with disabilities via electronic equipment and alternative formats. dLCV far exceeded this goal. Eighty of the 133 precincts in Virginia completed our survey tool (provided via postcard and online). dLCV then followed up with six offices, whose initial responses caused concern. All six of these offices clarified their responses and confirmed that they are compliant with training for AT equipment use and providing accommodations.

2. **Breathe Again-** Jay is a veteran who relies on the use of oxygen. He currently resides in a Virginia veterans home near his sister, but wanted an oxygen concentrator in order to travel to his South Carolina home and settle his affairs. The veteran's home does not allow those devices on their premises. The veteran's hospital said that they would loan Jay one, but they could not do so without a physical address. Jay called dLCV, with the help of his sister. dLCV recommended that they request they allow him to use his sister's address as a reasonable accommodation. This was not something they had thought of or tried. The veteran's hospital agreed to loan Jay the device and he was able to settle his affairs before moving to Virginia permanently.

Priority 4

1. Describe the Priority

People with Disabilities Receive Appropriate Vocational Rehabilitation

1. Provide STA or case services to 3 individuals denied assistive technology by a VR service provider.

2. Describe the Need, Issue, or Barrier Addressed

Vocational Rehabilitation Service Providers have the opportunity to identify and fund AT critical to the employability of people with disabilities.

3. Indicate the Outcome of the priority: check one

Met

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

Met

4. Total Number of Cases Handled Related to the Priority (enter zero if needed): 3

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

- 1. Christmas in February-** dLCV previously advocated for the Department of the Blind and Vision Impaired (DBVI) to fund assistive technology so that Gloria could work and attend college. Gloria contacted dLCV several months later and explained that DBVI had failed to provide the agreed upon assistive technology. dLCV reached out to the manager of Gloria's DBVI office and received an immediate response agreeing to provide the AT within a day of dLCV sending the letter of concern. Due to dLCV advocacy, Gloria received the assistive technology she needs to succeed in school and work including: Kurzweil National Federation for the Blind (KNFB reader iPhone app), Zoomtext software with audio, portable Zoomtext image reader camera, laptop, and JAWS software. Gloria also received tuition assistance.

It's Never too Late to Ask- Manny receives services from the Department for Aging and Rehabilitative Services (DARS). Manny's wheelchair broke, so he had to rent one. The rental wheelchair was not adequate for his needs and caused him pain. Manny requested support from DARS to obtain a replacement wheelchair, but due to staff turnover, Manny was lost in the shuffle, and had been waiting months for appropriate assistive technology. dLCV intervened. DARS agreed to provide a new home modification evaluation, an updated individualized plan of employment that included a job coach, wheelchair evaluation, and situational assessments. Manny is now on his way to obtaining the assistive technology he needs to work without added pain.

Priority 5

1. Describe the Priority

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

1. Represent individuals who have been denied appropriate health care services due to a denial of effective communication, assistive technology, physical barriers, or any failure to provide reasonable accommodations.

2. Describe the Need, Issue, or Barrier Addressed

dLCV helps those who receive these benefits by advocating for acquisition of assistive technology.

3. Indicate the Outcome of the priority: check one 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)

1. **A Perfect Fit-** Joe is a quadriplegic who uses a ventilator. Joe's wheelchair was a rental and was not appropriate for his needs. Joe needed full postural support and positioning because of his ventilator. dLCV worked with Joe's social worker to obtain a proper wheelchair for Joe. dLCV connected Joe with an assistive technology provider, who measured Joe and his house to make sure the wheelchair was a perfect fit. Joe received his wheelchair, which his Medicaid waiver funded. Joe is enjoying his new wheelchair and his overall health is improving as this wheelchair accommodates him properly!

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

1. Describe the Priority:

People with Disabilities are Free from Harm

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 and Youth with Disabilities Receive an Appropriate Education

Children and Youth with Disabilities Access AT

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

Provide case services and training to advocate for appropriate and necessary AT for students with disabilities

1. Describe the Priority:

People with Disabilities Live in the Most Appropriate Integrated Environment

People with Disabilities have Maximum Individual Choice and Equal Access to Public Accommodations

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

Provide training, education and case services to ensure maximum independence and access where AT is necessary

1. Describe the Priority:

People with Disabilities are Employed to their Maximum Potential

People with Disabilities Access Supports and Benefits for Gainful Employment

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

Case services for individuals facing barriers with assistive technology denials which impact their ability to work.

1. Describe the Priority:

People with Disabilities have Equal Access to Appropriate and Necessary Healthcare

People with Disabilities have Access to Healthcare

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

Education and case services for children and adults denied AT related to healthcare.

C. AGENCY ACCOMPLISHMENTS

dLCV assisted 20 clients with acquisition of AT to help promote personal growth and independence. We also took on systemic projects to address the AT needs of individual populations.

dLCV helped clients receive many AT devices and services including multiple wheelchairs, a functional FM system, Kurzweil National Federation for the Blind iPhone app, Zoomtext software with audio, portable Zoomtext image reader camera, a laptop, and JAWS software.

Our unprecedented access to critical incident reports from community providers (CHRIS reports) this fiscal year allowed our review of over 23,000 CHRIS reports. AT cases will continue to arise in the future from this important data system.

As a result of monitoring under multiple funding streams, dLCV continued to promote systemic change for all patients at state operated facilities to access AT.

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):	\$101,644
2. Program income	
3. Other – carryover funds	\$51,466
4. Other – specify	
5. Other- specify	
6. Total:	\$153,110

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	31	29
Part-Time		
Administrative		
Full-time	6	5
Part-time		
Totals	37	34

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 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 for PAAT and other funding streams.

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

Person with a disability

Agency staff 17

Agency board 5

Family members of a person with a disability

Agency staff 21

Agency board 7

Total number of persons on agency staff 38

Total number of persons on agency board 12

D. GRIEVANCES FILED

Number of PAAT grievances filed against the agency during the fiscal year 0

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).

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 the United States Department of Justice, Regional Educational Assessment Crisis Response and Habilitation (REACH), DBHDS, Richmond Office of Multicultural Affairs, Grupo Gaviotas, Grupo Caminos, and various psychiatric residential treatment facilities, mental health clubhouses, and centers for independent living.