

ANNUAL CLIENT ASSISTANCE PROGRAM (CAP) REPORT

Fiscal Year 2005

DESIGNATED AGENCY IDENTIFICATION	
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OPERATING AGENCY (IF DIFFERENT FROM DESIGNATED AGENCY)	
Name: see above	
Address:	
E-mail Address (if applicable):	
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Phone: ()	TTY: ()
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Name of CAP Director/Coordinator: Colleen Miller	
Person to contact regarding report: Sherry Confer	
Contact Person's phone: (804) 225-2042	
PART I. AGENCY WORKLOAD DATA	
A. Information and Referral Services (I&R): (Multiple responses are not permitted.)	
1. Information regarding the Rehabilitation Act	403
2. Information regarding Title I of the ADA	383
3. Other information provided	359
4. Total I&R services provided (Lines A1+A2+A3)	1145
5. Individuals attending trainings by CAP staff (approximate)	202

B. Individuals served (An individual is counted only once during a fiscal year. Multiple counts are not permitted for Lines B1-B3.)	
1. Individuals who are still being served as of October 1 (carryover from prior year)	28
2. Additional individuals who were served during the year	40
3. Total individuals served (Lines B1+B2)	68
4. Individuals (from Line B3) 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 B3 above.) <i>*Of the 68 individuals served, 48 had multiple CAP issues that were addressed prior to their case being closed. VOPA does not establish a separate file for each issue.</i>	0*
C. Individual still being served as of September 30 (carryover to next year) (This total may not exceed Line I.B3.)	
29	
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 to account for those unusual situations, referred to in Line I.B4, when an individual had multiple case files closed during the year.)	
1. All issues resolved in individual's favor	25
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	
4. Individual's case lacks legal merit; (inappropriate for CAP intervention)	3
5. Individual chose alternative representation	
6. Individual decided not to pursue resolution	6
7. Appeals were unsuccessful	
8. CAP services not needed due to individual's death, relocation, etc.	4
9. Individual refused to cooperate with CAP	
10. CAP unable to take case due to lack of resources	
11. Other (<i>unfavorable resolution</i>)	1
E. Results achieved for individuals (Choose one primary outcome for each closed case file. As stated in Section D, there may be more case files than the total number of individuals served.)	
1. Controlling law/policy explained to individual	4
2. Application for services completed	
3. Eligibility determination expedited	
4. Individual participated in evaluation	
5. IPE developed/implemented	5
6. Communication re-established between individual and other party	15
7. Individual assigned to new counselor/office	2
8. Alternative resources identified for individual	7
9. ADA/504/EEO/OCR complaint made	
10. Other (<i>1-lacked legal merit; 2-individual decided not to pursue; 3-individual moved/death/etc.</i>)	6

PART II. PROGRAM DATA	
A. Age (as of the beginning of the fiscal year)(Multiple responses not permitted.)	
1. 21 and under	4
2. 22 – 40	19
3. 41 – 64	44
4. 65 and over	1
5. Total (Sum of Lines A1 through A4. Total must equal Line I. B3.)	68
B. Gender (Multiple responses not permitted.)	
1. Females	29
2. Males	39
3. Total (Lines B1+B2. Total must equal Line I.B3.)	68
C. Race/ethnicity (Multiple responses are permitted.)	
1. American Indian or Alaskan Native	
2. Asian	3
3. Native Hawaiian or Other Pacific Islander	
4. Black or African American	19
5. Hispanic or Latino	1
6. White	42
7. Race/ethnicity unknown	3
D. Primary disabling condition of individuals served (Multiple responses not permitted.)	
1. Blindness (both eyes)	6
2. Other visual impairments	5
3. Deafness	1
4. Hard of hearing	2
5. Deaf-blind	
6. Orthopedic impairments	7
7. Absence of extremities	
8. Mental illness	22
9. Substance abuse (alcohol or drugs)	
10. Mental Retardation	2
11. Specific learning disabilities (SLD)	9
12. Neurological disorders	5
13. Respiratory disorders	1
14. Heart and other circulatory conditions	1
15. Digestive disorders	
16. Genitourinary conditions	
17. Speech impairments	
18. AIDS/HIV positive	1
19. Traumatic brain injury (TBI)	2
20. All other disabilities	4
21. Disabilities not known	
22. Total (Sum of Lines D1 through D21. Total must equal Line 1.B3.)	68
E. Types of individuals served (Multiple responses permitted.)	
1. Applicants of VR Program	9
2. Clients of VR Program	48
3. Applicants or clients of IL Program	1
4. Applicants or clients of other programs and projects funded under the Act	10

F. Source of individual's concern (Multiple responses permitted.)	
1. VR agency only	57
2. Other Rehabilitation Act sources only	1
3. Both VR agency <u>and</u> other Rehabilitation Act sources	
4. Employer	10
G. Problem areas (Multiple responses permitted.)	
1. Individual requests information	2
2. Communication problems between individual and counselor	16
3. Conflict about services to be provided	19
4. Related to application/eligibility process	11
5. Related to IPE development/implementation	15
6. Other Rehabilitation Act-related problems	2
7. Non-Rehabilitation Act related	8
8. Related to Title I of the ADA	6
H. Types of CAP services provided (Choose one primary service CAP provided for each closed case file. As stated above, there may be more case files than actual individuals served.)	
1. Information/referral	5
2. Advisory/interpretational	18
3. Negotiation	15
4. Administrative/informal review	1
5. Alternative dispute resolution	
6. Formal appeal/fair hearing	
7. Legal remedy	
8. Transportation	
PART III. NARRATIVE (Attach separate sheet(s))	

_____ Colleen Miller, Executive Director

_____ Date

**VIRGINIA OFFICE FOR PROTECTION AND ADVOCACY
CLIENT ASSISTANCE PROGRAM (CAP) FY2004**

PART III. NARRATIVE

a. Type of agency used to administer CAP:

- 1) External-Protection & Advocacy

b. Sources of funds

Source of funding	Total expenditures spent on individuals
Federal funds	193,270
State funds	
All other funds (carryover)	250,906
Total from all sources	193,270

c. Budget for current and following fiscal years

Category	Current Fiscal Year (FFY2005)	Next Fiscal Year
Wages & Salaries	88,905	215,178
Fringe Benefits (FICA, unemployment, etc.)	49,523	80,610
Materials/Supplies	911	2512
Postage	0	1120
Telephone	2775	10,604
Rent	2685	3121
Travel	12,250	14,674
Copying	904	1586
Equipment Rental/Purchase	9078	8292
Temporary Personnel Services	7505	13,627
Indirect Costs	16,737	473,263
Miscellaneous	8697	40,741
Total Budget	193,970	439,391

d. Number of person-years

Type of position	Full-time equivalent	% of year position filled	Person-years
Professional			
Full-time	12.11	90.5	14.48
Part-time			
Vacant			
Clerical			
Full-time	14.44	96.29	6.74
Part-time			
Vacant			

NOTE: All figures are based on a State fiscal year (July 1, 2004-June 30, 2005)

e. Summary of presentations made:

The following rights related presentations about CAP and other rehabilitation programs and projects were made during the program year:

Date	Type of Event/Title/Topic	Group Addressed	Location	# of Attendees
10/20/04	Special Ed. Eligibility	Family members of students with disabilities	Northern VA	20
10/23/04	Panel Participation	Parents and Advocates	Tidewater	30
11/6/04	Special Education and the Law	Parents of students with disabilities	Woodbridge	30
11/8/04	Special Education and the Law	Parents of students with disabilities	Chantilly	10
11/11/04	Special Education and the Law (Legal Aid Conference)	Attorneys	Roanoke	45
11/18/04	Rights of Persons with Vision Impairments, Right to Vote, Rights as VR Applicants or Clients of DBVI	Consumers with vision impairments	DBVI Richmond	12
3/17/05	Virginia PABSS	Attorneys and	Baltimore	20

	Program and Transition Services	Paralegals		
5/10/05	Overview of VOPA & CAP	Consumers	Hampton	35
6/18/05	Workshop for the Deaf and Hard of Hearing	Consumers	Grundy	11

f. Involvement with advisory boards

1) VOPA has two Advisory Councils known as the Disabilities Advisory Council (DAC) and The Protection and Advocacy for Individuals with Mental Illnesses (PAIMI) Advisory Council. The Councils' primary responsibility is to advise the protection and advocacy system on policies and priorities to be carried out in protecting individuals with disabilities. This function helps VOPA to identify underserved and unserved Virginians.

2) VOPA has developed a Spanish Speaking Outreach Committee. With the assistance of VOPA's Spanish-speaking Outreach Committee, VOPA has been able to get a sense of the diverse needs of this community. The committee is comprised of VOPA staff, representatives of the Disability Advisory Council and PAIMI Council, and community and political leaders representing the Spanish-speaking community in the Commonwealth. We have identified that there is a need to educate this community about disability rights in special education, state and community facilities, accessibility to medical services (lack of interpreters), and opportunities for self-advocacy. The committee is working with the Richmond, Henrico, and Chesterfield, Virginia, Coalitions and the Richmond Hispanic Liaison Office to eliminate cultural and linguistic barriers so that general education can take place about VOPA and determine where VOPA should target its advocacy efforts.

VOPA has begun the general education process by meeting with the Limited English Speaking Program in Richmond to discuss VOPA's mission and services. VOPA has also met with the Governor's Latino Advisory Commission Liaison to discuss the findings of the Latino Advisory Commission's report on the needs of the Latino community in Virginia. VOPA made a radio appearance for WRIR (97.3 FM), a newly created independent radio station in Richmond which provides many public interest shows targeted at the Spanish-speaking community in Richmond.

3) VOPA participates in the Virginia Department of Education State Special Education Advisory Committee. This committee is required by the federal government as a first step in federal Continuous Improvement Monitoring Process. Discussions have included Personnel Licensure Issues, completion and submission of the Federal Annual Performance Report, IDEA Reauthorization, State Assessment Update and a State Improvement Grant.

4) VOPA serves on the State Rehabilitation Council. The State Rehabilitation Council provides advice to the Department of Rehabilitative Services regarding vocational services provided pursuant to Title I and Title VI of the Federal Rehabilitation Act. Membership and duties are constructed according to federal provisions.

g. Outreach to unserved/underserved populations:

- 1) VOPA provides information about the CAP program on our website. The VOPA CAP publication was revised by the VOPA publications committee. It has been formatted and printed and made available to the public.
- 2) VOPA is in the process of revising/updating most, if not all, of its publications. With this effort, VOPA has revised the CAP publication (please see attachment). Part of the publication revision/updating effort includes developing a “boilerplate” Powerpoint presentation about VOPA and the services we provide.
- 3) VOPA provides “Office Hours” at some of the local Centers for Independent Living. Individuals with disabilities are informed of their CAP rights and provided with other legal advice and services when appropriate.
- 4) Please see above regarding Spanish Speaking Outreach Committee

Next year, VOPA intends to develop an Employment Clinic to inform people with disabilities and employers about their rights and obligations on issues relating to Title I of the Americans with Disabilities Act.. The VOPA Employment Clinic will create materials relating to the rights of people with disabilities regarding accommodations, privacy, the interview process, requesting accommodations, as well as other areas, and how to file a complaint if these rights are violated. The Clinic also plans to do presentations to individuals with disabilities in a variety of forums to reach people who are working, preparing to work, or simply hoping to work somewhere down the line and explain these rights. Through presentations, written materials, self-advocacy guides, and other multi-media projects, The Clinic hopes to reach individuals throughout Virginia and create a database of material to allow additional self-education and self-advocacy for Title I of the Americans with Disabilities Act, as well as how to use formal complaint procedures when necessary.

The Clinic also plans to present to agencies, employers, schools, and attorneys to try to create a better informed community regarding the rights of people with disabilities, and the obligations of employers. Networking will also be pursued to make our services and materials available to other agencies and advocacy groups who work with individuals with disabilities.

h. Alternative dispute resolutions:

VOPA staff routinely engage in alternative dispute resolutions. VOPA staff assist clients with self-advocacy efforts with other entities at the lowest level of the administrative chain of command. Often, the presence of the VOPA staff encourages the “provider” to more willingly explore alternative dispute resolutions prior to the client and VOPA resorting to more formal or legal remedies. In most cases, more clear and direct communication is the optimum resolution. In all CAP cases, we engage in ADR to the maximum extent possible. VOPA always conducts significant negotiation prior to even considering litigation. We have offered formal ADR in some cases that seemed to reach a “sticking point” but never had to follow

through with it as the cases generally settled. VOPA remains willing to engage in ADR whenever necessary to assist our clients.

In relation to Mediation---VOPA, as advocates/attorneys, would not conduct Mediation, but, when appropriate, would accompany and/or represent a person as an advocate within a Mediation session where there is a separate Mediator. VOPA was not involved in any formal mediation activities this past year. Cases have been settled before that stage.

The VOPA Governing Board of Directors has established a committee structure. One of the committees is responsible for developing and reviewing operating and Board policies. VOPA already had a policy about mediation but the Committee recommended that the policy make a stronger statement about exploring alternative dispute resolutions with the client. The Board approved the policy recommendation and VOPA has implemented it.

i. Systemic advocacy:

- 1) CAP continued an extensive systemic project of reviewing and analyzing DRS participation in special education transition. This project began in FY01; continued through FY02. In FY03 VOPA had attained sufficient information to make this an on-going official VOPA objective. This year VOPA acquired and reviewed contracts between school districts and DRS setting forth each entity's responsibility to provide transition planning. After extensive investigation and review of cases and complaints, VOPA determined that DRS did not provide adequate transition services to some children with disabilities who were eligible for those services. VOPA sent a Notice of Potential Litigation to DRS demanding that it provide the services it is obligated to provide. A settlement agreement was reached that will ensure that transition age children who are eligible for services will receive access to DRS transition services. Previously, DRS had refused to provide transition services to some children prior to their final year of high school, based on their age or year in school. VOPA argued that this violated federal law. Since the settlement agreement, VOPA received a complaint alleging DRS refused to provide transition planning for a child before his last semester of high school. VOPA complained to DRS which immediately resolved the issue.
- 2) VOPA's role during the General Assembly, and throughout the year, is to be available to educate policy makers about the implications of proposed legislation for people with disabilities in the Commonwealth of Virginia. In the FY05 General Assembly session, VOPA monitored over 14 bills from the House of Representatives and Senate of Virginia. We posted a notice on our website identifying these bills and encouraged the public to use the General Assembly's website about other bills. In addition, we received communication from the public about other bills that were of importance to the disability communities in Virginia. These recommendations were explored and some were added to the VOPA list to monitor and track.

j. Interesting cases:

VOPA served 68 individuals under the CAP program in FY05. Service eligibility or maximized employment issues were the most frequent complaints.

Self-referred, a client with a mental illness had been struggling for years to obtain successful employment. She felt, however, that she needed more formal schooling in order to be more competitive in the field that she wanted to pursue: a human services counselor. Communication had broken down between her and the Department of Rehabilitative Services; however, with VOPA advocacy she was assigned to another VR counselor and they were able to establish a positive rapport. After client submitted information from her current therapist, and gave permission for the VR counselor to speak with the therapist, he decided that she could handle the demands of college courses. Department of Rehabilitative Services committed to assisting her with the cost of tuition, books, and transportation that is not covered through comparable benefits. With VOPA negotiation with VR, we were able to avoid the process of a Fair Hearing.

The client, a self-referral to VOPA CAP, requested assistance to have the Department for the Blind & Vision Impaired approve his plan for employment in the area of music. He had suffered a stroke several years ago. However with his persistence, and despite his total blindness, he was able with VOPA advocacy to achieve the following:

- acceptance of his Business Plan,
- subsequent services by DBVI such as new computer equipment, and training
- limited car repair
- assistive technology to enhance his ability to promote/market his music, tapes, et cetera.
- approximately \$20,000 funding toward the Business Plan and his marketing.
- approximately \$5,000 for assistive technology.

VOPA was able to negotiate with the DBVI so the client could gain maximized employment related to his interests and skills.

A sixty year-old female was referred to VOPA by her vocational rehabilitation counselor. Residing in an economically depressed rural county there is little opportunity for employment for persons with or without disabilities. The client's disabilities included orthopedic issues, severe joint pain and mental health issues; all significant barriers to successful employment. Through strong advocacy and negotiation on VOPA's part, the Virginia Department of Rehabilitative Services conducted a comprehensive evaluation. An Individual Plan for Employment (IPE) was developed with the vocational goal of becoming a clerical worker to handle filing and billing in a medical office setting. The client had no local references to demonstrate experience, so the counselor, in tandem with VOPA advocacy, arranged for an Unpaid Work Experience. Through participation in this program, the counselor could assess work tolerance, punctuality, abilities and the client's work readiness in general. In rural communities there is a growing trend toward utilizing the Unpaid Work Experience which benefits both the employer and the consumer. Upon case closing, the client continued to demonstrate slow but steady improvement in her job readiness skills.

k. On-line information/outreach:

VOPA maintains a website that posts all of our federal grants' priorities, goals, and objectives, including CAP. This website also has the notices for the Board of Directors' and VOPA's Advisory Councils meetings. Job vacancies, announcements, VOPA publications, quarterly newsletters, and disability-related links are also available.

In FY 2005 there were 19,733 VOPA website hits.

As noted above, VOPA posted its legislative updates on-line.

VOPA uses the VOPA Web-site to recruit volunteers to serve on our two Advisory Councils. Meetings of the Advisory Councils and the Governing Board of Directors are posted on the web-site. Meeting announcements are also posted on disability related list-serves. Minutes from the Governing Board and Advisory Councils Meetings are also posted on the Web-site.

Annually, VOPA gathers input from the public as it develops its goals and objectives for the fiscal year. A web-based survey was posted on the VOPA website during the summer of 2005 and was announced to the public via several listservs. VOPA received over 90 responses.

Signature and title of CAP program director: The director of the CAP agency should sign the form to certify that it is complete and correct.

Colleen Miller, Executive Director

Date