

PAAT REPORT (October 1, 2005 – September 30, 2006)

AGENCY INFORMATION

Agency Name: Virginia Office for Protection and Advocacy

Address of Agency:

a. Main Office:

1910 Byrd Avenue, Suite 5
Richmond, Virginia 23230

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

287 Independence Boulevard, Suite 120
Virginia Beach, Virginia 23462

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

Not Applicable

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Agency E-Mail Address: general.vopa@vopa.virginia.gov

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Staff Preparing Report Office Location: Richmond, Virginia

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	591
2. Total Number of Requests for I&R Services during the Fiscal Year	638

B. TRAINING ACTIVITIES

1. Number of Training Sessions Presented by Staff	4
2. Number of Individuals Who Attended These Training Sessions	132

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

Training Event #1

- a. Overview of Special Education laws and IDEIA 2004
- b. To provide factual information about the law changes brought with IDEIA compared to IDEA and the implications for functional behavioral assessments. Trainings include assistive technology services and devices.
- c. service providers

Training Event #2

- a. Transition services and the Law
- b. To provide factual information about the law changes brought with IDEIA compared to IDEA and the implications for transition services. Trainings include assistive technology services and devices.
- c. Parents, students, advocates, educators

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

VOPA maintains a website that posts all of our federal grants' goals and objectives. 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. The annual public comment process is posted on the website and visitors can participate on-line.

VOPA has convened a committee of staff members to assist in the reviewing, revising and updating of the VOPA publications. The committee has agreed to some general guidelines, the most important being that the publications reflect one voice and one vision for VOPA.

The VOPA newsletter mailing list is continuously updated to better reflect inclusion of underserved populations. The newsletter mailing list is not a static work product; VOPA considers it to be an on-going project that will consistently be reviewed and updated to best reflect the disability communities in Virginia.

VOPA's goals include both focus areas and then more specific measurable objectives. We have devoted a focus area to "Underserved." VOPA efforts in that area include the unserved and underserved. Please see Priority Section.

C. INFORMATION DISSEMINATED TO THE PUBLIC BY YOUR AGENCY

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

Method of dissemination	Number
1. Radio and TV Appearances by Agency Staff	
2. Newspaper/Magazine/Journal Articles Prepared by Agency Staff: Girl Scout newsletter article	1
3. PSAs/Videos Aired by the Agency	4
4. Website Hits	22173
5. Publications/Booklets/Brochures Disseminated by the Agency	4
5a. Number of individuals/agencies receiving documents produced in item 5	unknown
6. Other (specify)- - newspaper articles about VOPA activities	9

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

See below related to PSAs.

2. Newspapers/Magazines/Journals-

VOPA was contacted by the Girl Scouts to provide them with information about people with disabilities. VOPA prepared a newsletter article for them and it was circulated statewide.

3. PSAs/Videos

In the first PSA, the content was not exclusive to AT; the content was related to voting rights for people with disabilities. However, by having the PSA broadcast on television and posted on the VOPA website, this assistive technology usage would be of benefit to individuals who do not use written documents. Another VOPA PSA was also broadcast by the Virginia Voice radio; a reading station for people who do not use print materials. In addition, the Valley Voice in Shenandoah Valley area of Virginia and WHRO TV/radio in the Tidewater area also broadcast the general VOPA PSA.

4. Publication/Booklets/Brochures-

- VOPA Overview
- Assistive Technology
- Assistive Technology and Medicaid
- The Availability of Assistive Technology in Schools (Information About)- -newly developed in FY06

PART II: CASE-SERVICES

A. INDIVIDUALS SERVED

Individuals	Number
1. Individuals Served Receiving Advocacy at Start of Fiscal Year (carryover from prior)	13
2. Additional Individuals Served During Fiscal Year (new for fiscal year)	5
3. Total Number of Individuals Served During Fiscal Year (1 +2)	18
4a. Total Number of Cases Closed During the Fiscal Year	10
4b. Total Number of Individuals with All Their Cases Closed During the Fiscal Year	10
5. Total Individuals Still Being Served at the End of the Fiscal Year (3 minus 4b)	8

B. PROBLEM AREAS/COMPLAINTS

Complaint Area	Number of cases
1. Architectural Accessibility	0
2. Education	14
3. Employment Discrimination	0
4. SSI/SSDI Work Incentives	0
5. Healthcare <i>(total generated by the system from a-d below)</i>	5
a. Medicaid	5
b. Medicare	0
c. Private Medical Insurance	0
d. Other	0
6. Housing	0
7. Post-Secondary Education	1
8. Rehabilitation Services	1
9. Transportation	1
10. Voting <i>(total generated by the system from a-c below)</i>	0
a. Accessible Polling Place / Equipment	0
b. Registration	0
c. Other	0
11. TOTAL	22

ASSISTIVE TECHNOLOGY DEVICES/SERVICES

1. Number of individuals that received one or more AT devices or services as a result of casework (unduplicated count)	10
2. Type of AT device or AT service received as a result of casework	Number of devices/services
a. Devices for communication	2
b. Devices for mobility	0
c. Devices for hearing or seeing	1
d. Devices for reading or writing	2
e. Devices to assist with household activities	0
f. Devices to assist with participation in play or recreation	0
g. Devices to assist with personal care	1
h. Devices to aid in therapy or medical treatment	2
i. Devices to assist with the use of public/private transportation	1
j. Devices to assist with employment	1
k. Devices to aid with school/learning	3
l. AT services	2
m. Other - specify	0
n. Total number of devices and services received as a result of casework (a-l)	15

D. PRIMARY REASON FOR CLOSING A CASE FILE

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

E. INTERVENTION STRATEGIES FOR CLOSED CASES

Interventions	Number of cases
1. Short Term Assistance	3
2. Systemic/Policy Activities	0
3. Investigation/Monitoring	0
4. Negotiation	3
5. Mediation/Alternative Dispute Resolution	1
6. Administrative Hearing	0
7. Legal Remedy/Litigation	3
8. Class Action Suits	0
(No response from client)	0
9. Total (<i>this should match the total in Part II.A.4.a above</i>)	10

PART III: STATISTICAL INFORMATION FOR INDIVIDUALS SERVED

A. AGE OF INDIVIDUALS SERVED

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

B. GENDER OF INDIVIDUALS SERVED

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

C. RACE AND ETHNICITY OF INDIVIDUALS SERVED

1. Race of individuals served.

Race	Number of individuals
a. American Indian or Alaska Native	0
b. Asian	0
c. Black or African American	1
d. Native Hawaiian or Other Pacific Islander	1
e. White	15
f. More than one race	1
g. Unknown/not reported	0
h. Total (this should match the total in II.A.3)	18

2. Ethnicity of individuals served.

Ethnicity	Number of individuals
a. Hispanic/Latino	0
b. Non- Hispanic/Latino	0
c. Ethnicity unknown/not reported	18
d. Total (this should match the total in II.A.3)	18

D. LIVING ARRANGEMENTS OF INDIVIDUALS SERVED

Living Arrangement	Number of individuals
1. Community Residential Home	0
2. Foster Care	0
3. Homeless/Shelter	0
4. Legal Detention/Jail/Prison	0
5. Nursing Facility	0
6. Parental/Guardian or Other Family Home	18
7. Independent	0
8. Private Institutional Setting	0
9. Public (State Operated) Institutional Setting	0
10. Public Housing	0
11. VA Hospital	0
12. Other – describe the living arrangement	0
13. Other – describe the living arrangement	0
14. Unknown/Not Provided	0
15. Total (this should match the total in II.A.3)	18

E. PRIMARY DISABILITY OF INDIVIDUALS SERVED

Primary Disabling Condition	Number of individuals
1. ADD/ADHD	0
2. AIDS/HIV Positive	0
3. Absence of Extremities	0
4. Auto-immune (non-AIDS/HIV)	0
5. Autism	1
6. Blindness (Both Eyes)	0
7. Other Visual Impairments (Not Blind)	0
8. Cancer	1
9. Cerebral Palsy	3
10. Deafness	1
11. Hard of Hearing/ Hearing Impaired (Not Deaf)	2
12. Deaf-Blind	0
13. Diabetes	0
14. Digestive Disorders	0
15. Epilepsy	0
16. Genitourinary Conditions	0
17. Heart & Other Circulatory Conditions	0
18. Mental Illness	0
19. Mental Retardation	3
20. Multiple Sclerosis	0
21. Muscular Dystrophy	1
22. Muscular/Skeletal Impairment	0
23. Orthopedic Impairments	1
24. Neurological Disorders/Impairment	2
25. Respiratory Disorders/Impairment	0
26. Skin Conditions	0
27. Specific Learning Disabilities (SLD)	2
28. Speech Impairments	0
29. Spina bifida	0
30. Substance Abuse (Alcohol or Drugs)	0
31. Tourette Syndrome	0
32. Traumatic Brain Injury (TBI)	0
33. Other Disability – Developmental Delay	1
34. Total (this should match the total in II.A.3)	18

F. GEOGRAPHIC LOCATION OF INDIVIDUALS SERVED

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

PART IV: SYSTEMIC ACTIVITIES AND LITIGATION

A. NON-LITIGATION SYSTEMIC ACTIVITIES

1. Number of Policies/Practices Changed as a Result of Non-Litigation Systemic Activities	1
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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. VOPA advocated for the Department of Education to allow students to use assistive technology on the Standards of Learning examination. (VOPA took one case to due process and prevailed on this issue in the last year.) This year, after VOPA advocated for all children to receive similar rights, the Department of Education agreed and has solicited bidders to provide screen reading technology for children who need it on the SOLs.

b. This is of significant benefit to children with disabilities who regularly use a specific type of assistive technology in school. These students will be able to participate in the testing process using the same accommodation that they have been using all school year that has been determined as the best accommodation for their need. This sets an important precedent for all student users of assistive technology. Prior to VOPA’s involvement, the use of assistive technology on SOL exams was very circumscribed; some technology was banned outright. Because of VOPA’s advocacy, a previously banned technology is now approved for use.

c. This could affect over 11,000 children and youth involved in special education services in Virginia’s public schools.

d. Virginia Department of Education notes over 11, 000 students enrolled in special education services.

e. See a. above.

3. Number of On-going Non-Litigation Systemic Activities	0
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4. Describe the agency’s on-going systemic activities. Not applicable

B. LITIGATION/CLASS ACTIONS

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

	Number
1. Total Number of Non-Class Action Lawsuits, resulting in, or with the potential for, systemic change, pending during the fiscal year	0
a. Number of Non-Class Action Lawsuits Newly Filed During Fiscal Year	2
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	2

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

Not applicable.

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

Please see case scenarios in Priorities section.

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. Not applicable

6. Describe the agency's completed systemic class action activities. Not applicable

C. LITIGATION-RELATED MONITORING

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

No

PART V: PRIORITIES

It should be noted that the Virginia Office for Protection and Advocacy (VOPA) has made a deliberate decision to take cases that we believe will have a strong systemic impact on the lives of Virginians with disabilities. Although we are opening a targeted number of cases, we believe that by tying them directly to systemic reform, we are making significant impact on a much larger population group.

It should also be noted that VOPA plans its objectives based on the needs within the state; not by funding stream or specific disabilities. Some of the identified estimated cases may be addressed in conjunction with other funding streams, but the result will still be a positive impact on PAAT eligible individuals.

1. 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

Goal: Children with Disabilities Receive an Appropriate Education

Focus Area: Assistive Technology in Schools

Objectives:

1. Represent ten (10) children who have been denied appropriate assistive technology or services under their Individualized Education Plans or 504 Plans.
2. Litigate or advocate to obtain compliance by the Virginia Department of Education with requirements to allow students who use assistive technology on classroom tests to use that technology in Standards of Learning (SOL) assessments.
3. Send AT brochure to parent organizations (PEATC, PADDA, CHADD)

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

Children with disabilities have a right to an appropriate education that includes access to assistive technology in school. VOPA will represent children with disabilities who have been denied assistive technology as part of their Individualized Education Plan or their Section 504 Plan. A Fact Sheet will be developed to assist with information and referral/technical assistance efforts. VOPA's efforts will help ensure that children have access to appropriate assistive technology and receive a free appropriate public education.

3. Indicate the Outcome of the priority: Met

3a. VOPA has struggled with achieving satisfactory translation of its materials. We were advised that our version done with a computer software was not accurate. VOPA arranged for volunteers to look over a publication once it had been translated into Spanish to ensure that the correct meaning was being conveyed. However, different volunteers had differing opinions. This objective has been carried over to FY07.

4. Total Number of Cases Handled Related to the Priority: 12 individuals represented

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

In another case, VOPA ensured that a child received an appropriate assistive listening device. The child had a hearing disability and needed a specific type of technology to receive a free

appropriate public education. The school originally refused to provide the device, but, after VOPA advocated on behalf of the child, the matter was resolved.

VOPA also advocated for the Department of Education to allow students to use assistive technology on the Standards of Learning examination. (VOPA took one case to due process and prevailed on this issue in the last year.) This year, after VOPA advocated for all children to receive similar rights, the Department of Education agreed and has solicited bidders to provide screen reading technology for children who need it on the SOLs.

The Assistive Technology publication was published, posted to the web, made available in alternate format and is being sent to parent organizations. VOPA sent twenty copies of the new AT publication to a cross-section of the disability populations throughout Virginia. The groups receiving the publication are as follows: The Down Syndrome Association of Roanoke, the Prince William County Support Group for Parents of Children with Autism Spectrum Disorders, CHADD (Children and Adults with Attention Deficit/Hyperactivity Disorder) of Northern Virginia, Tidewater Chapter of CHADD, Parents of Children with Cerebral Palsy in Stephens City, Celebrate ADHD in Ashburn, and the Virginia Department of Education's Ombudsman.

1. Describe the Priority

Goal People with Disabilities have Equal Access to Appropriate and Necessary Health Care
Focus Area: Assistive Technology Obtained through Insurance

Objectives:

1. Represent three (3) people denied assistive technology or assistive technology services by Medicaid or other insurance.
2. Inform people with disabilities of their right to receive assistive technology through Medicaid and other insurance, through three (3) trainings to 30 attendees.

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

An essential element of the rehabilitative process, life sustenance, and quality of life is to be able to access appropriate and necessary healthcare. For some individuals with disabilities, assistive technology is a key element of necessary healthcare. In particular, people who receive Medicaid Waiver services often need assistive technology to avoid institutionalization. VOPA's efforts, therefore, will help people live in the most integrated setting appropriate to their needs.

3. Indicate the Outcome of the priority: Met

4. Total Number of Cases Handled Related to the Priority: 5

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

VOPA represented five people with disabilities to ensure that they received appropriate assistive technology services through Medicaid. In one case, VOPA represented a child in two Medicaid appeal hearings. VOPA argued that the child was entitled to assistive technology under the EPSDT program. The Hearing Officer ruled in the child's favor, holding that DMAS had used an improper standard to deny the assistive technology. As a result of this case, DMAS reviewed and reversed other denials of assistive technology under the EPSDT program.

VOPA also represented a child in a Medicaid Appeal who was denied assistive technology. That case was settled on the eve of trial when DMAS reversed its position. In that case, the child

needed an adapted bed in order to correct or ameliorate her disability. The Medicaid agency originally refused to provide the bed, citing cost. VOPA intervened on behalf of the child and filed a Medicaid Appeal. Just before trial, DMAS agreed to provide the child with the bed.

These two cases had substantial systemic impact. It is believed that they are the first two cases where DMAS approved, under EPSDT, the respective assistive technologies. Also, the cases established that the “medical necessity” criteria DMAS (through its contractor) had applied was incorrect. Previously, DMAS applied rigorous “medical necessity” criteria to EPSDT requests for assistive technology instead of the “correct, ameliorate or maintain” standard required by federal law. In both cases, the hearing officer specifically found that DMAS (through the contractor) had applied the incorrect standard. After these cases, DMAS agreed to review several of its prior EPSDT decisions to determine if the incorrect standard had been applied at that time as well.

VOPA represented a child who was denied assistive technology through private insurance. The child needed an implant in his brain in order to control seizures. The child’s primary private insurance refused to cover the implant, ruling that it was experimental. VOPA represented the child to advocate for DAMS to provide the implant under the EPSDT program. DMAS agreed to do so. The child had successful surgery.

1. Describe the Priority

Goal: People with Disabilities in the Commonwealth of Virginia are Aware of VOPA’s Services
Focus Area: Underserved Communities

Objectives:

1. By December 1, 2005, identify two (2) additional underserved areas in the far Southwest Virginia.
2. Develop plan for outreach to these areas by February 1, 2006
3. Implement outreach activities beginning March 1, 2006.
4. By April 30, 2006, develop a plan for increasing cultural, geographical, and disability diversity on VOPA’s Board of Directors and Advisory Council.

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

VOPA will increase its visibility in the disability communities.

3. Indicate the Outcome of the priority: Met

4. Total Number of Cases Handled Related to the Priority: not limited to individual cases-these objectives were achieved using a combination of funding streams in addition to PAAT

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

Outreach in the southwestern region of Virginia has included presentations to the following groups: Radford University on self-advocacy; Wytheville Community Services Board on VOPA services and how we can work together in serving clientele; The Appalachian Independence Centers in Galax and Bristol on VOPA services; and On Our Own – Drop in Center in Charlottesville on VOPA services. VOPA participated in a mental health walk in Emory, which should include persons from Radford, Wytheville, Galax, Marion, Abington, Grundy, Tazewell, Richland, St. Paul, Big Stone Gap, and Clintwood as a part of the Southwest Virginia Consumer and Family Involvement Project. VOPA has also connected with the Valley Voice who has agreed to read a VOPA Public Service Announcement (PSA) on their radio station. In addition,

VOPA had an article published in the Girl Scout newsletter regarding inclusion of those with disabilities that was mailed to members in the southwest area. All of these organizations were very appreciative of the outreach and VOPA has received several requests for information and referral from these organizations as a result of the outreach efforts in this area.

The Advisory Councils have both developed and implemented a membership recruitment plan that we hope will increase the diversity of the Councils. There are roles for both Council members and VOPA staff in the plan. In addition, through the web-based survey for annual public input for the priority planning, there was an opportunity to request more information about the Advisory Councils. Council members have taken a very active role in recruiting new applicants. VOPA staff are in the process of reviewing the applications we have received and responding to other Council related inquiries.

1. Describe the Priority

Goal: People with Disabilities in the Commonwealth of Virginia are Aware of VOPA's Services
Focus Area: Outreach to constituents of the Eastern Shore

Objectives:

1. Develop and implement a plan for outreach to residents of the Eastern Shore using contacts with area service providers (CILs, DRS Offices, health departments, DSS hospitals, CSBs and local advocacy organizations).
2. By April 1, 2006, evaluate and refine the Eastern Shore outreach plan.

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

VOPA will increase its visibility in the disability communities of the Eastern Shore area of Virginia.

3. Indicate the Outcome of the priority: Met

4. Total Number of Cases Handled Related to the Priority: not limited to individual cases-these objectives were achieved using a combination of funding streams in addition to PAAT

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

VOPA has conducted outreach efforts on the Eastern Shore. Information about VOPA was provided for the following groups: the CIL, the CSB, the local newspaper (The Eastern Shore News), Shore Memorial Hospital, and the Eastern Shore Health Fair. Outreach has been provided to the Children's Hospital of the King's Daughters and Old Dominion University (both located in Tidewater, but serves the Eastern Shore). The local newspaper ran a public service announcement (PSA) for a week that provided information and contacts for VOPA. Also, WHRO TV and Radio which reaches the Eastern Shore read the PSA over the radio. These providers requested and received a large amount of VOPA publications that they are eager to share with consumers. The VOPA article published in the Girl Scout newsletter that was also mailed to members in this area. Outreach recipients have included both service providers and members.

The CSB and Children's Hospital of the King's Daughters requested and were greatly appreciative of receiving materials in Spanish. They also are eager to share these materials with local residents who speak Spanish.

VOPA participated in a Health Fair in Northampton County (Eastern Shore) and handed out VOPA materials to approximately 200 family members and service providers in the area. We also visited the CIL in Northampton County and passed out VOPA materials.

1. Describe the Priority

Goal: People with Disabilities in the Commonwealth of Virginia are Aware of VOPA’s Services
Focus Area: Spanish-speaking Constituents

Objectives:

- 1. Develop outreach to Spanish-speaking communities in tow (2) additional areas with the assistance of the Spanish-speaking Advisory Committee.
- 2. Inform Spanish-speaking constituents of their rights by translating all publications into Spanish and distributing a list of translated materials to ten (10) contact organizations.

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

VOPA will increase its visibility in the disability communities that speak Spanish.

3. Indicate the Outcome of the priority: Partially Met

4. Total Number of Cases Handled Related to the Priority: not limited to individual cases-these objectives were achieved using a combination of funding streams in addition to PAAT

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

VOPA has formed alliances with the Refugee and Immigration Services and has participated in the Henrico Hispanic Coalition and the Richmond Coalition, which includes service providers and members from the Hispanic community. VOPA, through the Neighborhood Development Center, had 1,286 flyers delivered to families of Hispanic origin informing them of VOPA services.

VOPA has participated in the Henrico Hispanic Coalition and the City of Richmond Hispanic Coalition to strengthen our relationships with service providers to Spanish speakers. We attended a Neighborhood Watch meeting in the City of Richmond and handed out our VOPA flyer in Spanish to make the Spanish community aware of our presence. We have also arranged for a volunteer to look over our publications once they are translated into Spanish to ensure that the correct meaning is being conveyed.

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

Goal: Children with Disabilities Receive an Appropriate Education

Focus Area: Assistive Technology in Schools

Objective:

- 1. Represent seven (7) children who have been denied appropriate assistive technology or services under their Individualized Education Plans (IEPs) or 504 Plans.

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

Children with disabilities have a right to an appropriate education that includes access to assistive technology in school. VOPA will represent children with disabilities who have been denied

assistive technology as part of their Individualized Education Plan or their Section 504 Plan. A Fact Sheet will be developed to assist with information and referral/technical assistance efforts. VOPA's efforts will help ensure that children have access to appropriate assistive technology and receive a free appropriate public education.

1. Describe the Priority

Goal People with Disabilities have Equal Access to Appropriate and Necessary Health Care

Focus Area: Assistive Technology Obtained through Insurance

Objectives:

1. Represent three (3) people denied assistive technology or assistive technology services by Medicaid or other insurance.
2. Inform persons with disabilities of their right to receive assistive technology through Medicaid and other insurance, through three (3) trainings to 30 attendees.

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

An essential element of the rehabilitative process, life sustenance, and quality of life is to be able to access appropriate and necessary healthcare. For some individuals with disabilities, assistive technology is a key element of necessary healthcare. In particular, people who receive Medicaid Waiver services often need assistive technology to avoid institutionalization. VOPA's efforts, therefore, will help people live in the most integrated setting appropriate to their needs.

1. Describe the Priority

Goal: People with Disabilities in the Commonwealth of Virginia are Aware of VOPA's Services

Focus Area: Underserved Communities

Objectives:

1. Implement and monitor the plan for increasing cultural, geographical, and disability diversity on VOPA's Board of Directors and Advisory Councils.
2. Review complaints forwarded by the Capital Area Immigrant's Rights Coalition and monitor five (5) Virginia facilities that have contracted with the federal government to house detainees to determine whether immigrants with disabilities in there are receiving appropriate care and treatment.

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

VOPA will increase its visibility in the disability communities.

1. Describe the Priority

Goal: People with Disabilities in the Commonwealth of Virginia are Aware of VOPA's Services

Focus Area: Outreach to constituents of the Eastern Shore

Objective:

1. Send new publications to three (3) community organizations on the Eastern Shore

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

VOPA will increase its visibility in the disability communities of the Eastern Shore area of Virginia.

1. Describe the Priority

Goal: People with Disabilities in the Commonwealth of Virginia are Aware of VOPA's Services
Focus Area: Spanish-speaking Constituents

Objectives:

1. Inform Spanish –speaking constituents of their rights by translating all publications into Spanish and distribute to 200 Spanish-speaking individuals.
2. Develop a VOPA PSA and run on one Spanish speaking radio station.

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

VOPA will increase its visibility in the disability communities that speak Spanish.

C. AGENCY ACCOMPLISHMENTS

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

It should be noted that the Virginia Office for Protection and Advocacy (VOPA) has made a deliberate decision to take cases that we believe will have a strong systemic impact on the lives of Virginians with disabilities. Although we are opening a targeted number of cases, we believe that by tying them directly to systemic reform, we are making significant impact on a much larger population group.

It should also be noted that VOPA plans its objectives based on the needs within the state; not by funding stream or specific disabilities. Some of the identified estimated cases may be addressed in conjunction with other funding streams, but the result will still be a positive impact on AT eligible individuals.

In fall of 2005 VOPA was awarded a HUD grant to provide outreach and education about the federal Fair Housing Act. VOPA finalized negotiations with the Regional HUD representative in the spring, causing a late start for the grant. However, VOPA has completed many of the activities under that grant. VOPA identified policy-makers to target the education effort about increased accessible, affordable housing needs in Virginia. VOPA engaged in planning Fair Housing month activities for both VOPA staff and jointly with HUD representatives. VOPA spoke at the Virginia Fair Housing Board meeting about the need for accessible affordable housing. VOPA has distributed more than 1,500 informational flyers and has responded to more than 100 callers on housing issues. Although this work was done with other funding, PAAT eligible individuals benefited from the information.

VOPA's Director implemented and maintained a "Legislative Watch" on the VOPA website during the General Assembly session. It was updated daily, with the most recent activity and a commentary as appropriate. This Legislative Watch generated a heavy amount of feedback from the community at the beginning of the session and a steady flow of comments throughout the session. It seemed to be a useful tool for some in the disability community.

VOPA received complaints regarding paratransit services in Richmond City/Henrico County. Because of the number of complaints being made from one of the brain injury Clubhouses in the area, VOPA felt compelled to look into it. VOPA went to the Clubhouse to discuss with consumers and staff the problems they were having with paratransit services. They began documenting the incidents. Documentation included the date of occurrence, if the van was late, or it didn't show at all. If the van was late, how late was it? This was a great collaboration effort. Because of the documentation

provided by this clubhouse, VOPA entered into an arrangement with the paratransit service provider requiring it to meet or exceed the ADA standards for paratransit transportation by June 30, 2006. VOPA received no further complaints after June 30, 2006. Therefore this systemic case was successfully closed in September 2006. This systemic case was worked under another funding stream, but will be a benefit to all individuals with disabilities who use this paratransit service.

PART VI: AGENCY ADMINISTRATION

A. AGENCY FUNDING

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

PAAT funding sources	Amount Received
1. Federal P&A (AT Act funds):	87,650
2. Program income	
3. Other -specify	
4. Other – specify	
5. Other- specify	
6. Total:	87,650

B. DESCRIPTION OF PAAT PROGRAM STAFF

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

The VOPA Receptionists may provide information and referral services for anyone requesting services from VOPA.

VOPA Disability Rights Advocates and Staff Attorneys provide case level services and pursue systemic reforms. They also provide technical assistance, training and outreach.

The Managing Attorneys provide supervision and leadership in these efforts. They may also provide some case level services and pursue systemic reforms.

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

The Business Manager provides supervision and leadership for all of the administrative staff efforts.

The Policy Director provides leadership and direction in the areas of program and policy planning, development, monitoring, evaluation and collaboration with external entities.

The Executive Director provides the ultimate leadership and direction for all actions of the agency and provides supervision for the Managing Attorney, the Business Manager and the Policy Director.

2. PAAT Staff

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

Type of Position	Number of persons	Number of FTEs
Professional		
Full-time	10	11.42
Part-Time		
Administrative		
Full-time	11	2.12
Part-time	1	.08
Totals	22	13.62

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.'

VOPA has two Advisory Councils known as the Disabilities Advisory Council (DAC) and The Protection and Advocacy for Individuals with Mental Illnesses (PAIMI) 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. Both Councils have consumer representation. The Council Chairs are non-voting members of the VOPA Governing Board.

VOPA developed and implemented strategies for gathering public comment on the goals and focus areas as well as the work of VOPA in general. A web-based survey was posted on the VOPA website and announced to the public via several list-serves. The VOPA Advisory Councils also participated in focus group activities with VOPA staff and provided input on the goals and focus areas as well as suggestions for the process of public comment gathering.

VOPA uses the terms "Goal" and "Focus Area" instead of "Priority." This is a result of client and potential client feedback that telling someone their issue does not fall within our priorities gives the person the impression we are insensitive to their issue. This change was positively received by our Governing Board and our Advisory Councils.

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

Person with a disability	Number
Agency staff	7

Agency board	5
Family members of a person with a disability	
Agency staff	VOPA does not collect this type of data from employees
Agency board	8
Total number of persons on agency staff	6
Total number of persons on agency board	

*not all positions were filled for all 12 months of the fiscal year; therefore, this number reflects two staff filling one position over the course of the year

D. GRIEVANCES FILED

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

1. Collaboration with Other P&A Programs and Activities

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

VOPA collaborates and consults with the National Disability Rights Network (NDRN) and several VOPA staff subscribe to NDRN supported P&A listservs. These listservs offer P&As the opportunity to consult and collaborate nationwide on similar issues and concerns facing people with disabilities.

Internally, VOPA staff working under the PAAT grant may also work under the PADD, CAP, HAVA or PAIR grants which all could be related to assistive technology device and service needs. For example, while working a PADD case that involves developing an appropriate IEP, the need for appropriate assistive technology assessment, devices, and services may be identified. If the PADD case is being worked by a VOPA staff lacking experience with PAAT, the staff routinely will consult with other VOPA staff that have that PAAT experience.

VOPA's Executive Director was elected to a 4-year term on the NDRN Board of Directors. This 17-member Board of Directors is elected by the membership and governs NDRN. VOPA's Director's active involvement in the P&A network and collaborative efforts earned her this honor.

NOTE: The figures below are not accurate due to electronic form limitations.

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.).

VOPA staff routinely collaborate with the vocational rehabilitation agencies in the area of assistive technology. These agencies include: the Department of Rehabilitative Services, the Department of the Blind and Vision Impaired and the Department of the Deaf and Hard of Hearing. In addition, VOPA staff are available to staff of the state institutions for consultation about assistive technology needs and services.

VOPA provides “Office Hours” at some of the local Centers for Independent Living or other organizations. Individuals with disabilities are informed of their AT rights and provided with other legal advice and services when appropriate.

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. The annual public comment process is posted on the website and visitors can participate on-line.

In addition, under other and with PAAT funding, VOPA collaborated with the following entities:

- Brain Injury Council
- Alliance of Brain Injury Service Providers
- Partnership for People with Disabilities
- Virginia State Independent Living Council
- Department of Rehabilitative Services
- Department of Medical Assistance Services
- Office of the Attorney General
- Virginia Public Guardian and Conservator Advisory Board
- Virginia Board for People with Disabilities
- State Special Education Advisory Council
- Virginia Interagency Coordinating Council
- Medicaid Buy-In Work Group
- Centers for Independent Living