

**PAIMI ADVISORY COUNCIL (PAC) Section of the
ANNUAL PROGRAM PERFORMANCE REPORT (PPR)**

STATE	Virginia	FISCAL YEAR	2008
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The Advisory Council Report (ACR), an important component of the PAIMI PPR, is due on due on January 1st. The ACR may be submitted by mail or electronically. However, if submitted electronically, the P&A shall mail to the SAMHSA, Division of Grants Management at least ONE (1) COPY OF THE PAIMI ADVISORY COUNCIL (PAC) REPORT WITH THE ORIGINAL SIGNATURE OF THE PAIMI ADVISORY COUNCIL CHAIR ON THE COVER PAGE. Send the reports to the following addresses:

ELECTRONIC MAIL:

Barbara.Orlando@SAMHSA.hhs.gov

REGULAR MAIL

Barbara Orlando, M.S.
SAMHSA - Division of
Grants Management
Room 7-1091
1 Choke Cherry Road
Rockville, Maryland 20857

FOR CERTIFIED MAIL & OVERNIGHT DELIVERY

Send to the above mailing address

*BUT CHANGE THE ZIP CODE TO: 20850**Phone: (240) 276-1400*

Electronic submissions of the annual PAIMI PPR, including the ACR, should also be sent d to the PAIMI Program Coordinator, Karen.Armstrong@samhsa.hhs.gov. If submitted electronically, please ensure that the Division of Grants Management is sent a signed copy of the ACR. Please use the attached glossary and instructions to complete the form. Questions may be directed to Ms. Armstrong, the PAIMI Program Coordinator at (240) 276 1760.

Public reporting burden for the ACR section of the annual PAIMI PPR is estimated to average 10 hours per response. This includes the time needed to review the instructions, to search existing data sources, to gather the data needed, and to complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to SAMHSA Reports Clearance Officer; Paperwork Reduction Project (0930-0169); OAS, Room 7-1044; 1 Choke Cherry Rd.; Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0169).

**ANNUAL *PAIMI ADVISORY COUNCIL (PAC) SECTION* OF THE PAIMI
PROGRAM PERFORMANCE REPORT (PPR)**

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**ANNUAL *PAIMI* ADVISORY COUNCIL (PAC) SECTION OF THE PAIMI
PROGRAM PERFORMANCE REPORT (PPR)**

SECTION A. GENERAL INFORMATION

Fiscal Year:	2008
State:	Virginia
Name of P&A system:	Virginia Office for Protection and Advocacy
PAC Report Prepared By: Provide the name [Print First, Middle and Last Name] Title of the preparer Phone Number:	Sherry Confer Deputy Director 804-225-2042
Name of PAC Chair: Print First, Middle and Last Name Provide updated contact information if the PAC Chair is different than the person listed on the most recent PAIMI Application.	CW Tillman P.O. Box 17451 Arlington, Virginia 22216
Telephone Number	703-600-1104
E- Mail Address:	ctillman@yahoo.com
Date Submitted:	
By signing this document, the Chair certifies that this report reflects the consensus of the PAC members.	

SECTION B. PAIMI ADVISORY COUNCIL (PAC) MEMBERSHIP

B. 1. COMPOSITION

Indicate the number of the following mandated positions [B.1.b. - B.1.g.] included on the PAIMI Advisory Council (PAC). Count each member only once.

*Under Primary ID, select <i>ONLY ONE</i> (1) primary identity for each PAC member position [B.1.b. - B.1.h.] which are mandated per the PAIMI Act & Rules). PAC members secondary ID may be in any category.	Primary I.D.	Secondary I.D.
B.1.a. The TOTAL number of seats on the PAC.		
B.1.b. Individuals who are recipients/former recipients (R/FR) of mental health services.	4	
B.1.c. Family members of individuals who are recipients/former recipients (R/FR) of mental health services.	1	1
At least one (1) PAC member from B.1.d.		
B.1.d. Family members of a minor child or youth (under 18 years old) who has received or is receiving mental health services.	1	
B.1.e. Mental health service providers.		1
B.1.f. Mental health professionals.		1
B.1.g. Attorneys.		
B.1.h. Individuals from the public knowledgeable about mental illness.		3
B.1.i. Others (please identify by position held).		

*Since each Advisory Council member can only be counted once, to meet the 60 percent requirement of individuals who have received or are receiving mental health services or who are family members of such individuals, there must be at least 6 seats occupied by individuals who have received or are receiving mental health services or who are family members of such individuals in addition to the 4 other mandated positions. [See, PAIMI Application, Appendix B].

B.1.j. Vacancies as of 9/30. [Identify each vacant position & the date it was vacated].	9-14	
<p>Over the past year, the VOPA PAIMI Advisory Council has had up to nine (9) members. However, one member's term expired, another left due to new full-time position, and another left due to the amount of traveling and time off work to participate in PAIMI Advisory Council meetings. However, the Advisory Council members and VOPA staff have done a good job with recruiting and the membership is growing again.</p> <p>Attorney term expired 8/07 Attorney resigned 5/08 (did not attend meeting after appointment, resigned due to travel and time off work) Governing Board member referred attorney, tried to contact with no reply to voice mail, e-mail and letters 6/08</p>		

B.1.k. *Demonstrate that at least 60% of the PAC membership is comprised of individuals who have received or are receiving mental health services or family members of such*

<i>individuals.</i>	
B.1.i. TOTAL number of PAC members serving on 9/30.	6
B.1.m. Number of PAC members who are R/FR of MH services or family members of these individuals.	6
B.1.n. Percentage of PAC members who are R/FR of MH services or family members of these individuals [B.1. i. divided by B.1.m.]	100%

SECTION B. PAIMI ADVISORY COUNCIL (PAC) MEMBERSHIP

B. 2. REPRESENTATION OF THE CHAIR

B.2. Is the PAC Chair an individual who has received or is receiving mental health services, or a family member of an individual who has received or is receiving mental health services?	Yes ✓	No
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B. 3. TERMS

B.3.a. Term of Appointment (Number of years)	4
B.3.b. Maximum Number of Terms a Member May Serve	1
B.3.c. Frequency of Meetings	Quarterly
B.3.d. Number of Meetings Held in the FY09 [3 is the mandated minimum].	4
B.3. e. Number (%Average) of PAC members present at Meeting.	88.88%

SECTION C. PAC ETHNICITY/RACIAL DIVERSITY

*In the columns below, indicate the number of the following positions included on the PAC who identify with each ethnic/racial group below:

		Number of Members	Vacancies on 9/30
C.1. American Indian/Alaska Native		0	
C. 2. Asian		0	
C. 3. Black/African American		0	
C. 4. Native Hawaiian/Other Pacific Islander		0	
C. 5. White		6	
C. 6. Hispanic/Latino(a)		0	
C.7. *TOTAL PAC MEMBERS serving on 9/30. [*This total should be the same as that listed in Section B.1.I.]	Total	6	9-14

***This information was provided to SAMHSA/CMHS in the PAIMI Application (see Appendix B – PAIMI Advisory Council Information Table) for the same FY.**

Please note that the PAIMI Advisory Council has undergone several changes throughout the year. Several members have left for a variety of reason as noted in part B.1 j. One of the members who left in January 2008 was African-American. The PAIMI Advisory Council continues to strive for a more representative council encompassing of members from racial and ethnic diversity reflective of the Commonwealth of Virginia.

The PAIMI Advisory Council notes at every meeting the need for more diversity on the Council to better reflect the mental health consumer population in Virginia both racially and culturally. Work in the area continues to on-going. Council members' efforts to recruit resulted in a good turnout of guests at meetings. Some guests submitted membership applications. In addition, the Council is moving to various geographical locations around the State in order to better connect with consumers and potential members.

SECTION D. GENDER of PAC Members

D.1 MALE 2	D.2 FEMALE 4
D.3. TOTAL 6	

SECTION E. GOVERNING BOARD INFORMATION

E. 1. FOR STATE-OPERATED P&A SYSTEMS ONLY:

E.1.a. Is this a State-operated P&A system?	Yes ✓	No
E.1.b. Does this State-operated system have a Governing Board/Authority authorized by State statute? If the answer is NO, proceed to Section F.	Yes ✓	No
E.1.c. If the answer to item E.1.b. is Yes, does the PAC Chair sit on the Governing Board/Authority as a full voting member?	Yes	No ✓
<p>E.1.d. If the answer to item E.1.c. is no, briefly explain (e.g., state statute determines Governing Board/Authority composition, etc.). State Statute determines the Governing Board's composition and authority. The PAC Chair is an ex-officio member of the Governing Board.</p>		

E.2. For PRIVATE, NOT- FOR PROFIT P&A SYSTEMS only

E. 2.a. Does the P&A system have a multi-member Governing Board?	Yes	No
If you answered YES to E.2.a., please answer the questions E.2.b. 1. - 3.		
E.2.b.1. Number of Governing Board members.	Total	
E.2.b.2. Is the PAC Chair a full voting member of the Governing Board?	Yes	No
<p>E.2.b.3. If you answered No to E.2.b.2., than explain why the PAC Chair is not a full voting member of the Governing Board as mandated by the PAIMI Rules at 42 CFR 51.22(b)(3).</p>		
E.2.b.4. Do any other PAC members hold seats on the Governing Board? If Yes, how many seats? ____	Yes	No

SECTION F. PAC ACTIVITIES [See, PAIMI Act 42 U.S.C. at 10805(7)]

F.1. Are P&A program staff invited to attend PAC meetings?	Yes ✓	No
F.1.a. Did any of the invited program staff attend?	Yes ✓	No
<p>F.2.a. If the answer to F.1. is Yes, please identify the positions of staff (e.g., PAIMI Coordinator, Mental health advocate, etc.) usually invited to attend.</p> <p>The Executive Director, Deputy Director and the Council Liaison (Administrative Staff) routinely attend the PAIMI Advisory Council meetings. In addition, every meeting includes a training session that is provided by VOPA Managing Attorneys, staff attorneys, or advocates.</p>		
<p>F.2.b. If the answer to F.1.a. is Yes, please identify the positions of the program staff in attendance (e.g., one advocate, one attorney) and their role at the meetings, e.g., information sharing, etc.</p> <p>The Executive Director provides an update on the activities of VOPA and highlights items that are of particular interests and concerns to the PAIMI Advisory Council. The Executive Director also explains legal concepts and processes to clarify the PAIMI Advisory Council's understanding of the authority and the limitations of the P&A.</p> <p>The Deputy Director develops the agenda and facilitates the Advisory Council's work session in close consultation with the PAIMI Advisory Council Chair. This includes providing comment on the work of VOPA as well as making recommendations for goals, focus areas and objectives.</p> <p>The Council Liaison is responsible for the recording and posting of the minutes on VOPA's website. The Council Liaison is also responsible for all the logistics of the meetings; that is room setup, refreshments, travel arrangements, and so on. The Council Liaison routinely sends the council members information about upcoming events (such as information fairs and educational sessions), and current events and news articles concerning the mental health community. The Council Liaison is available to council members to address any concerns of the members as well as advocating on the behalf of the council to appropriate VOPA staff, including areas such as drafting the goals, focus areas and objectives for the next fiscal year.</p> <p>In addition, every meeting includes a training session that is provided by Managing Attorneys, staff attorneys, or advocates.</p>		
F.2.c. If the answer to F.1. is No, you MAY provide a brief explanation. N/A		
F. 3. a. Were governing board (excluding the PAC Chair) members invited to PAC meetings?	Yes ✓	No
<p>F.3.b. If you answered Yes to F.3.a., which governing board members were invited, for what purpose (e.g., informational, etc.) and did they attend?</p> <p>Board members routinely attend and provide an update from the most recent Board meeting. This exchange between PAIMI Advisory Council members and Board members has been noted as being positive from both bodies.</p>		

F.3.c. Did any of the invited governing board members attend?	Yes ✓	No
F.4. Did the PAC work jointly with the governing board to develop the annual PAIMI priorities? [42 CFR 51.23(a)(2)].	Yes ✓	No*

F.4.a. If Yes, Briefly describe these joint activities.

Time on meeting agendas was dedicated to discussing and providing recommendations about the goals, focus areas and objectives. In addition, the PAIMI Advisory Council was provided information that summarized the public comment input VOPA receives. The PAIMI Advisory Council chair, as an ex-officio member of the VOPA Governing Board, was involved in the Board's deliberations of the goals, focus areas and objectives.

PAIMI Advisory Council members were invited to participate in the Governing Board retreat in April 2008. Two members attended and were actively involved in the activities with VOPA staff and Governing Board Members. Retreat discussions involved issues facing VOPA, increasing Board-Staff-Council relationships, and improving Board-Staff-Council communications. As a result of the retreat, the Governing Board created a new committee titled "Council Relations and Public Policy." The new committee is tasked to devise solutions to improve the communication and relationships issues revealed at the retreat. The committee will also look into updating the PAIMI Advisory Council bylaws to better reflect how the council operates as well as reviewing the role of a PAIMI Advisory Council member in relation to the Governing Board.

SECTION F. PAC ACTIVITIES [See, PAIMI Act 42 U.S.C. at 10805(7)]

F.4. b. If No, PAC's affiliated with private, non-profit P&A systems must provide a brief explanation.

N/A

F.5. Did PAC members attend any in-state or out-of- state trainings or educational presentations related to PAIMI Program activities? *[42 CFR 51.27 - payments for PAC and Governing board/authority members by a State P&A system are optional].*

F.5.a. In-State Trainings/Educational Activities.

Yes

No

If Yes, list each activity by number and provide a brief description of PAC involvement, e.g., Activity 1 - Attendance at local NAMI training.

✓

F.5.b. Out of State Trainings/Educational Activities.

Yes

No

If yes, list each activity by number and provide a brief description of PAC involvement, e.g., Activity 1 - Attendance at NDRN annual conference.

✓

F.6. Does the P&A system have established written policies and procedures for reimbursing PAC members for expenses that takes into account the needs of the individual council members, available resources and applicable restrictions on use of grant funds, including the restrictions cited in and the restrictions in 51.31(e) and 51.6(e)? [See, 42 CFR 51.23 (d)(1)].

F.6.a.1. Yes ✓

F.6.a.2. No*

F.6.a.3. Don't Know.*

F.6.b. Brief explanation needed for F.6.a.2. or F.6.a.3. responses].

PAIMI Advisory Council members are reimbursed for their Council activities in accordance with the travel reimbursement policies for State employees.

SECTION F. PAC ACTIVITIES [See, PAIMI Act 42 U.S.C. at 10805(7)]

F.7. If the answer to F.6. was Yes, were PAC members reimbursed for expenses incurred for PAIMI Program related activities, consistent with the P&A system's policies and procedures. [Brief explanation required].

F.7.a.	1. Yes ✓	2. No*	3. Don't Know*
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F.7.b. *Brief explanation required for F.7.a. 2. No *OR* F.7.a. 3. Don't Know responses.

VOPA provides PAIMI Advisory Council members with reimbursement for their travel costs for Council meetings and for Governing Board Committee meetings. However, these costs are not tracked by "council" expenses but rather by "travel" expenses. The PAIMI Advisory Council members are reimbursed for their Council activities in accordance with the travel reimbursement policies for State employees.

F. 8. REIMBURSEMENT OF EXPENSES – If PAC member expenses were reimbursed, please complete the following chart. [42 CFR 51.23(d)(1)] . Under the Activity column, list the activity by the number used in above F.5.a. – In-State or F.5.b. – Out-of State. Example: F.5.b. Out of State activity # 1, – 5 PAC members attended the NDRN annual meeting, 2 members reimbursed by the P&A; 2 self-paid, 1 NDRN scholarship.

a. ACTIVITY	b. # ATTENDING	c. P&A	d. SELF	e. OTHER
Not applicable				

SECTION F. PAC ACTIVITIES [See PAIMI Act at 10805(7)]

F.9. Did the P&A system provide the PAC with reports, materials, & fiscal data to enable review of the following: [42 CFR 51.23(c)].

F.9.a. Existing program policies, priorities, and performance outcomes.	Yes ✓	No
F.9.b. If Yes, were the submissions (of P&A system documents referenced in F.9.a.) made at least annually and (shall) report expenditures for the past two (2) <i>FISCAL YEARS</i> ?	Yes ✓	No*
F.9.c. If No,* briefly explanation required.] N/A		
F.9.d. If you answered Yes in F.9.a., did the P&A system documents referenced also <i>INCLUDE THE PROJECTED EXPENSES FOR THE NEXT FISCAL YEAR (FY) IDENTIFIED BY BUDGET CATEGORY</i> , e.g. salary & wages, contracts for services, administrative expenses, including, the amount allotted for training of the PAC, the governing board and staff?	Yes ✓	No*
F.9.d.1. If No*, brief explanation required]. N/A		

SECTION F. PAC ACTIVITIES See PAIMI Act at 10805(7)

F.9.e. The PAIMI Rules mandate that members of the public shall be given an opportunity, on an annual basis, to comment on the priorities established by, and the activities of, the P&A system. Procedures for public comment must provide for notice in a format accessible to individuals with mental illness, including such individuals who are in residential facilities, to family members and representatives of such individuals with disabilities. [42 CFR at 51.24(b)].

F.9.e. Does the P&A have procedures established for public comment?

F.9.e. 1. Yes ✓

F.9.e. 2. No*

F.9.e.3. Don't Know*

F.9.e.4. *Brief explanation required for F.9.e.2. No or F.9.e.3.Don't know responses.

Not applicable

F.9.f. Was the PAC provided a copy of these procedures?

F.9.f.1. Yes ✓

F.9.f.2. No*

F.9.f.3. Don't Know*

F.9.f.4. *Brief explanation required for F.9.f.2. No or F.9.f.3.Don't know responses.

Not applicable

SECTION F. PAC ACTIVITIES See PAIMI Act at 10805(7)

F.9.g. The PAIMI Rules, at 42 CFR 51. 24(b), mandate that the public shall be given an opportunity, on an annual basis, to comment on the priorities established by and the activities of the P&A system. *WAS THE PUBLIC PROVIDED AN OPPORTUNITY FOR PUBLIC COMMENT?*

F.9.g. 1. Yes ✓

F.9.g. 2. No*

F.9.g.3. Don't Know*

F.9.g 4. *If the answer to F.9.g.1. is Yes, briefly describe activities the P&A system used to obtain public comment.

Information regarding the PAIMI program and VOPA's Goals and Focus areas are published on our website. The VOPA Governing Board has adopted a bi-annual schedule for reviewing our program goals and objectives; the FY09 Goals and Focus areas are the second year of this cycle. We solicited public comment through a public survey posted on our website. This survey ran from August 31 to October 1, and we received 31 comments from consumers. The VOPA Board Goals and Public Awareness Committee met on July 21 and September 22 to discuss means of gathering public input. The PAIMI Advisory Council met on August 14th at Catawba Hospital, a state-run mental health institution, and provided input on comment on VOPA's proposed goals and focus areas; this meeting was also open to members of the public and hospital residents. The VOPA Disability Advisory Committee also met on June 4 to provide input and comment on proposed goals and focus areas. The VOPA Board of Directors met on 21 July and 23 September, with notice to the public that public comment would be received at both meetings. The Board actively reviewed VOPA's proposed goals and focus areas, and received in-person comment from one individual, and email comment from two individuals at the September meeting. The VOPA Governing Board has an established policy and practice to receive public comment at each quarterly meeting of the Board and that Board Committees may receive public comment at their meetings at their discretion. Also, the Governing Board develops and implements a detailed public comment process based on the bi-annual planning cycle and staff recommendations; these decisions are reflected in the Board's meeting minutes which are also posted on the VOPA website. All VOPA Board and advisory council meetings are advertised as open to the public and include receipt of public comment as an agenda item. Any public comment received is considered in the priority planning process for the development of VOPA's goals, focus areas and objectives.

F.9.g. 5. *If the answer to F.9.g.2. is No, explain why public comment was not obtained.

N/A

F.9.g. 6. *If the answer to F.9.g.3. is DON'T KNOW, please explain (e.g., PAC needs training, etc.)

N/A

F.10. *COMPLETION OF THIS SECTION (F.10 a. -e.) IS OPTIONAL.* However, if you choose to respond, please describe in the spaces below any other PAC activities, *other than* mandated PAC membership meetings.

F.10.a. Briefly describe, governing board or PAC committee work.

At every Governing Board meeting the PAIMI Advisory Council Chair gives a verbal report of the PAIMI Advisory Council's activities since the last Board meeting. This report is usually a review of the Council meeting and what impact it may have had on the members' other advocacy efforts in the mental health community.

PAIMI Advisory Council members are given the opportunity to serve on the Governing Board committees. The PAIMI Advisory Council members have volunteered to serve on each of the Governing Board committees.

The PAIMI Advisory Council members and VOPA staff routinely update the other council members on the Governing Board committee work. The committees and their roles are as follows:

Goals and Public Awareness – develop a plan to effectively communicate how VOPA works for people with disabilities and the funding limitations/opportunities financial and programmatically.

Internal Policies – review and when necessary revise current VOPA operating policies. When necessary, develop new operating policies;

Public Policy – (former committee, ceased September 2008) review systemic challenges and opportunities to VOPA, address public policy position requests;

Finance and Resource Development – identify sources for funding to build capacity in local communities to provide services to those that VOPA cannot serve, create a fundraising plan, review VOPA financial reports and practices.

Council Relations and Public Policy – new committee as of September 2008, same role as the former Public Policy committee with the addition of improving communication between the VOPA Governing Board and VOPA Advisory Councils (including PAIMI).

F.10.b. Briefly describe any training or educational presentations to either constituency groups or the general public.

The PAIMI Advisory Council makes referrals to VOPA but has not done any presentations on VOPA's behalf.

SECTION F. PAC ACTIVITIES See PAIMI Act at 10805(7)

F.10.d. Briefly describe any special projects (e.g., institutional monitoring).

PAIMI Advisory Council members were invited to attend the Governing Board retreat (please see section F.4.a)

F.10.e. Briefly describe any other (e.g., fund raising, public relations, etc.).

Ongoing PAIMI Advisory Council activities include work on the Governing Board committees in particular the new Council Relations and Public Policy committee.

SECTION G. PAC ASSESSMENT OF PAIMI PROGRAM OPERATIONS

G.1. Please provide A NARRATIVE SUMMARY of the PAC'S ASSESSMENT of the PAIMI priorities (goals) and objectives included in the PPR for this Fiscal Year.

Include in the narrative an assessment of the following items:

G.1.a. The PAIMI Priorities (Goals) and Objectives selected.

G.1.b. The activities conducted towards achieving these priorities (goals) and objectives.

G.1.c. The outcomes.

G.1.d. Examples of individual or systemic cases, applicable legislative activities, and participation in State mental health planning activities.

G.1.e. Any recommendations regarding future priorities (goals) and objectives.

PRIORITY (GOAL) 1: People with Disabilities are Free from Abuse and Neglect

Focus Area 1: Deaths where there is probable cause to believe abuse or neglect occurred.

Focus Area 2: Abuse or Neglect in Community Settings

Focus Area 3: Abuse or Neglect in Institutional Settings

Focus Area 4: Physical Abuse in Juvenile Facilities

PAC ASSESSMENTS

PAIMI Advisory Council members spoke about instances where they were denied medication when they were admitted to a hospital. Often the admitting physician would withhold medication until they confirm with the primary care physician if the patient is allowed to take that prescribed medication. Often patients will decompensate while waiting for the primary care physician confirmation, which can take days or even weeks. Medications include non-psychiatric and psychiatric medication. The PAC states that this is a form of abuse.

The Council asserts that VOPA should continue its work with Critical Incident Reports (CIRs) from State facilities. The Council is concerned that not all cases of abuse and neglect are reported in CIRs to VOPA. CIRs only include incidents where medical treatment is required, loss of consciousness, or death. CIRs do not include verbal or psychological abuse. The Council believes that the work VOPA does on abuse and neglect is important and there is a need to look at juvenile facilities. The Council appreciates VOPA's work on gaining access to mental health facilities. Council members thought it would be helpful to look at raw data for CIRs to help with systemic cases.

The Council was concerned about the staff hired to work in facilities. The Council wondered if there were background checks or even if personality tests were conducted prior to hiring. Performing these checks and tests could prevent abuse by not hiring anyone with a violent history or predisposition. The Council was also concerned about training of facility staff in particular de-escalation training to prevent a crisis situation from escalating out of control.

During the discussion for creating objectives for Fiscal Year 2009, the PAC suggested the following:

- Look at the incident reporting policy and procedures currently in place at state-operated facilities, make recommendations to the State and follow-up to address concerns
- Use of photographs, autopsy reports, and interview staff and family members in investigations
- Seclusion and restraints should be banned in every State-operated facility
- Look at the effectiveness of Local Human Right Committees
- People with known psychiatric conditions in jail should be reported. Council members request that VOPA research on how to obtain the authority to request such information from jails.
- All State-operated facilities should have a "comfort room" and increase the use of individualized de-escalation rooms

PRIORITY (GOAL) 2: Children with disabilities receive an appropriate education

Focus Area 1: Denial of eligibility due to lack of or inappropriate evaluations and assessments
Focus Area 2: Children who have been (or are at risk of being) suspended to inadequate behavioral intervention plans or functional behavioral assessments
Focus Area 3: Transition from school to work

PAC ASSESSMENTS

The PAC believes that VOPA's work with children getting good and accurate assessments early in life is important. However, children might be misdiagnosed and there is also a concern with children earning modified diplomas.

The Council wants to concentrate efforts into recruiting new members who are primary care givers of minor children who are receiving or have received mental health services. Recently, a member's child turned 18 and no longer fits the criteria to be classified as a minor child.

The Council is aware of anecdotal information of children being restrained in schools and that the PAIMI grant is primarily for individuals in facilities.

During the discussion for creating objectives for Fiscal Year 2009, the PAC suggested the following:

- Seclusion and restraint should be removed in all schools
- VOPA should look into creating State regulations to remove seclusion and restraint practices in all schools.

PRIORITY (GOAL) 3: People with Disabilities Have Equal Access to Government Services

Focus Area 1: Services and support to enable individuals to move into the community
Focus Area 2: Access to vote for persons with disabilities

PAC ASSESSMENTS

The Council is appreciative of VOPA's work on the behalf of individuals in facilities with regards to access to voting in elections. The Council is concerned about individuals in jails not having the access to vote.

During the discussion for creating objectives for Fiscal Year 2009, the PAC suggested the following:

- Continued representation on Social Security (SS) benefits and assisting people with navigating through the Social Security Administration (SSA) system
- Continued work with cross-unit work between the Communities and Institution Unit to assist people with discharge plans
- Assist people in rural communities with transportation issues
- Work with community groups (i.e. church groups, retirees, etc.) to create partnerships with people with disabilities with travel needs
- Increase recognition of psychiatric service animals

PRIORITY (GOAL) 4: People with Disabilities Live in the Most Appropriate Integrated Environment

Focus Area 1: Appropriate and timely discharge plans at state mental health facilities
Focus Area 2: Consumer driven alternatives to guardianship

PAC ASSESSMENTS

One PAC member does not agree with the closing of facilities especially when there can be a two-year waiting list to obtain Community Service Board (CSB) services. Consensus among PAC members that there should be more community provider follow-up after the discharge from facilities to CSBs to ensure positive adjustments to the community and increased ability to serve people with restricted incomes.

The Council is committed to concepts of self-direction. VOPA needs to encourage the use of powers of

attorney even if there is resistance from facilities. The Council also wants VOPA to strengthen the WRAP process, encourage stronger supports to PACT, and stronger supports for people in crisis. The council wants VOPA to pursue creating a statute for Psychiatric Advance Directives to be recognized and followed in the Commonwealth of Virginia.

The council voiced the concern of the need for support for housing and transportation.

The council is concerned over the funding for CSBs and the CSBs' abilities to provide services. The council wants to know why in theory if psychiatric beds are closing in mental health hospitals, why is the money not being moved to the CSB to provide care. The council also expressed concern about not having a geriatric facility in Northern Virginia. Geriatric patients have to go elsewhere in the State to obtain services that can be far away from family and friends and other support networks.

During the discussion for creating objectives for Fiscal Year 2009, the PAC suggested the following:

- VOPA should educate the public more about the alternatives to guardianship by use of public service announcements
- Virginia needs to have Psychiatric Advanced Directives
- VOPA should defend people whose Advanced Directives have not been honored

PRIORITY (GOAL) 6: People with Disabilities Live are Employed to their Maximum Potential

Focus Area 1: Employment Self-Advocacy Clinic

PAC ASSESSMENTS

Council members want more training on Social Security benefits. Members talked about personal experiences where they were ill-informed about returning to work and loss of benefits.

During the discussion for creating objectives for Fiscal Year 2009, the PAC suggested the following:

- VOPA should promote work incentives, promote education about continued benefits eligibility
- VOPA should address all the incorrect information in the community about work incentives and Ticket to Work

SECTION G. PAC ASSESSMENT OF PAIMI PROGRAM OPERATIONS

G.2. OTHER COMMENTS CONCERNING PAIMI SYSTEM OPERATIONS:

Briefly describe any special initiatives, problem solving techniques, or innovative practices that may help other State P&A systems.

As mentioned in section F.10.a., PAIMI Advisory Council members have a voting role in the decision making on the VOPA Governing Board committees. Every committee member has an equal voice on any decisions made during the meeting. The committee as a whole comes to a consensus by taking a vote and the committee's decision is then relayed to the Board as a recommendation at the Governing Board meeting. The committee structure affords PAIMI Advisory Council members to have a voice in the decisions of the Governing Board.

During the past year, the PAIMI Advisory Council stated that they would like to have the council meetings at various mental health facilities throughout the Commonwealth. Council members expressed that they need to know more about the conditions at the facilities to better represent the individuals served by the PAIMI grant. By the facilities hosting the PAIMI meetings, facility staff have often attended the meeting in portions and over lunch to talk with the members. These meetings have been very successful as council members have toured the facilities and gained very insightful information from the staff working at the facilities. The council has planned in the next fiscal year to move the meeting location to community providers to learn about services provided once individuals are discharged from the facilities.

G.3. Please list any training & technical assistance needs identified by the PAC.

PAIMI Advisory Council members have expressed interest in training in the following areas:

- Social Security and navigating the Social Security Administration system
- Return to work and benefits
- Alternatives to Guardianship, substitute decision-making

SECTION H. GRIEVANCE PROCEDURES [42 CFR Section 51.25]

PURSUANT TO THE PAIMI RULES at 42 CFR PART 51.25, THE P&A SYSTEM SHALL ESTABLISH PROCEDURES TO ADDRESS GRIEVANCES FROM: (A)(1) - CLIENTS OR PROSPECTIVE CLIENTS . . . ; AND (A)(2) - INDIVIDUALS WHO HAVE RECEIVED OR ARE RECEIVING MENTAL HEALTH SERVICES IN THE STATE, FAMILY MEMBERS OR REPRESENTATIVES OF SUCH INDIVIDUALS

H.1. Is the PAC aware of and knowledgeable of the above referenced policies and procedures?	Yes ✓	No*
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H.1.a. If you answered No to H.1. provide a brief explanation. N/A		
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H.2. The number of grievances filed by PAIMI-eligible clients, including representatives or family-members of such individuals, who received services during this fiscal year.	Total 5
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H.3. The number of grievances filed by prospective PAIMI-eligible clients (those who were not served due to limited PAIMI Program resources or because of non-priority issues).	Total 0
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H.4. Add H.2 & H.3 [42 CFR Section 51.25(a)(1),(2)]	Total 5
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H.5. THE NUMBER OF GRIEVANCES APPEALED TO:

H.5. a. The Governing Board (the PAC Chair of a private, non-profit P&A system should have this information).	Total 1
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H.5.b. The Executive Director	Total 4
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H.5 c. The number of Grievances appealed [H.5.a. + H.5.B = H.5.c.].	Total 5
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H.6. The number of reports sent to the Governing Board AND the PAC (<i>at least one annually</i>) that describe the grievances received, processed, and resolved.	Total 1
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SECTION H. GRIEVANCE PROCEDURES [42 CFR Section 51.25]

H.7. Please identify all individuals, by name & title, responsible for P&A system grievance reviews.

Colleen Miller, Executive Director

Governing Board Appeals Committee (membership rotates routinely): Susan Kalanges (Chair), Pat Meyer (Vice Chair), Brent Brown, Charles Cooper, Bill Fuller, Waja Grimm, Chris Harrison, Maureen Hollowell, Elizabeth Priaux, Daaiyah Rashid

H.8. What is the timetable (in days) used to ensure prompt notification of the grievance procedure process to clients, prospective clients or persons denied representation, and ensure prompt resolution. **[42 CFR 51.25(B)(4)]**

Days
15

H.9. Were written responses sent to all grievants?

Yes

No*

✓

H.9.a. *If you answered No, to H.9, briefly explain.

H.10. Was client confidentiality protected? _____. If not, explain below. **[42 CFR 51.25(B)(6)]**

Yes

No*

✓

H.10.a. *If you answered No, to H.10, briefly explain.

Yes

No*

N/A

GLOSSARY

Closed case - is when the advocate/attorney closes the client record or case file after providing advocacy interventions on behalf of a client, and determining that the client either has no need of further intervention services or that the agency has no other services available to address the issue(s) or complaint(s) for which the case was initially opened.

Grievance Procedures – are policies and procedures developed by the P&A system to ensure that its clients and prospective PAIMI-eligible clients, their family members, or representatives have full access to the system services and that the system is fully compliant with the provisions of the PAIMI Act and Rules.

Information and Referral (I&R) Services - is the provision of brief written or oral information, such as generic information about the P&A, including information about additional programs and resources external to the P&A that relate to the individual's service needs and statutory or constitutional rights as a person with a disability. I &R services are generally of short duration, typically range from a few minutes to an hour, do not involve direct advocacy intervention by staff, and any type of staff follow-up. I&R services may include mailing generic agency information. Individuals receiving I &R services are not counted as PAIMI clients.

Intervention Strategies:

- **Abuse/Neglect Investigations** - a systemic and thorough examination of information, records, evidence and circumstances surrounding an allegation of abuse and neglect. Investigations are undertaken to determine if there is a basis for administrative or legal action on behalf of the client. Investigations require a significant allocation of time to interview witnesses, gather factual information, and to issue a written report of findings.
- **Administrative Remedies** - includes the use of any systems for appeal within an agency or facility, or between agencies, which does not involve adjudication by a court of law.
- **Legal Remedies** - the legal representation of clients in litigation in court processes concerned with rights, grievances, or appeals of such rights or grievances.
- **Legislative/Regulatory Advocacy activities** involve monitoring, evaluating, and commenting upon the development and implementation of Federal, State, and local laws, regulations, plans, budgets, taxes and other actions which may affect individuals with mental illness. [The PAIMI Rules at 42 FCR at 51.24 mandates that legislative activities shall also be addressed in the development of program priorities].
- **Negotiation/Mediation** - is an informal, non-legal intervention by a PAIMI representative, attorney or case manager used to resolve problems with facility staff or other agency representatives; (does not involve a formal appeal).
- **Short Term Assistance** - Time limited advice and counseling assistance, which may include reviewing information, counseling a client on actions one may take, and

assisting the client in preparing letters, documents or making telephone calls to resolve the issue.

- Technical Assistance - includes the provision of information, referral or advice to clients by a PAIMI Program representative, attorney, or advocate, (e.g., coaching the client in self-advocacy, explaining service delivery system(s) available to meet needs, dissemination of information and materials to client, etc.). Follow-up is required.

Objectives - are activities undertaken to achieve annual program priorities (goals). All objectives required to have measurable outcomes and the use of numerical targets is encouraged. Each objective must clearly state why the activity was undertaken, who will benefit from the objective (the target population), how the activity will be accomplished, and what is the expected outcome for the activity? Generally, with the exception of litigation, legislative or regulatory activities, objectives shall be attainable within the fiscal reporting period (within one (1) fiscal year).

Open Case - is when a PAIMI-eligible individual with a complaint is accepted as a client by the P&A system. A case record or case file is opened for that individual. System staff maintain all intervention services provided to the client and other information t are maintained in this case record/file.

Outreach - is an activity that targets information on PAIMI Program activities to specific populations (e.g., cultural, ethnic and racial minorities, and other underserved or un-served populations, etc. The activity is linked to an objective of a specific annual priority.

PAIMI Clients (for purposes of this report) - are individuals who meet the PAIMI eligibility criteria as defined in the PAIMI Act [42 U.S.C. 10802(4) and its Rules at 42 CFR 51.2 Definitions, who have a complaint, for whom demographic data is collected, and for whom the PAIMI Program, or any of its subcontractors, provides an intervention (as reported under Intervention Strategies in this form).

Priorities (Goals) – are broad general descriptions of short term activities for the P&A system to accomplish within one (1) fiscal year (FY). [The exceptions are generally regulatory, legislative, and litigation activities]. The priorities must be directly related to the purpose of the enabling Federal legislation and the requirements of the Federal-funding agency and consistent with the priorities included in the PAIMI Application for the same FY. [See PAIMI Act at 42 U.S.C. 10801, PAIMI Rules at 42 CFR 51.24 (a) – Program Priorities, and the Children’s Health Act of 2000 at 42 U.S.C. at 290ii-ii-1 and 290jj-jj-2].

Public Awareness Activities - provide general information on disability rights and the purpose and mission of the P&A system. Public awareness activities include public service announcements, newsletters, radio or television, publications in legal journals, web site services, general distribution of agency brochures, etc.

Public Education and Constituency Training - is the dissemination of information to one or more persons through an interactive event, which often promotes a greater understanding of the constitutional or statutory rights of persons with disabilities. Contrasted to Public Awareness

Activities, education and training must be specifically targeted to meet the unique need of the group(s) trained.

Racial/Ethnic Background - for the purposes of this report, the ethnicity categories are Hispanic or Latino and Not Hispanic or Latino. The race categories are American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, and White.

Resolution of Complaint/Problem Area – is in a client’s favor when (1) the client is satisfied with the result of the intervention or (2) the expressed wish or stated goal of the client is either fully attained or negotiated to an agreeable outcome, or (3) the violation in the stated case complaint/problem area was remedied.

Systemic Advocacy Activities – are the efforts taken to implement changes in policies and practices of systems that impact persons with mental illness. These "systems" include, but are not limited to, State agencies, various public and private residential care and treatment facilities, and other service providers, etc. [The PAIMI Rules at 42 CFR 51.24 (a) PAIMI Priorities state that systemic activities shall be addressed in the development and implementation of program priorities].