

AGENCY ANNUAL PROGRAM PERFORMANCE REPORT FOR PATBI

REPORTING PERIOD: FROM 10/1/2009 TO 9/30/2010
STATE: Virginia
AGENCY NAME: Virginia Office for Protection and Advocacy
DATE SUBMITTED: 12/20/2010

AGENCY INFORMATION

Agency Name: Virginia Office for Protection and Advocacy

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

Not Applicable

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Not Applicable

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PART I: NON-CASE SERVICES

A. INFORMATION AND REFERRAL SERVICES (I&R)

1. Total Individuals Receiving I&R Services	306
2. Total Number of I&R requests during the Fiscal Year	323

B. TRAINING ACTIVITIES

1. Number of Trainings Presented by Staff	33
2. Number of Individuals Who Attended These Trainings	724

3. Describe at least two (2) trainings presented by the staff. Be sure to include information about the topics covered, the purpose of the training, and a description of the attendees.

VOPA provided training on a broad array of topics such as disability rights, employment, special education, and TBI services and resources available in Virginia to a diverse group of attendees during this past year.

Training to veterans and the military in the areas of disability rights, employment, accessible transportation, and available services remained a priority. One such training, with 40 participants, was presented to the Joint Leadership Council of Veterans. Disability rights and TBI resources and services available in Virginia training was provided to the veterans who participated. The purpose of the training was to provide participants with the self-advocacy tools and resources to address issues they may face. Resource materials on other topics were also made available.

Several trainings on children with TBI and providing an appropriate education were presented to parents, advocates, and providers. Training provided to the Richmond Center for Independent Living on identifying children with TBI and providing an appropriate education was attended by 25 parents and school district staff and covered the importance of identifying children with TBI and providing necessary services to ensure an appropriate education. The purpose of the training was to educate participants so they have the advocacy skills necessary to help ensure that children with TBI receive an appropriate education.

In the spring of 2010, VOPA conducted an analysis of its outreach and services statewide. The Disability Advocacy Database (DAD) reporting and sorting capabilities were used to determine the localities where VOPA had provided some level of services. VOPA staff marked each county or city where VOPA had done work and were able to illustrate how broad reaching advocacy efforts were across the state for the first half of the year. Calculations were also made to determine the populations of each region so that a comparison could be made between populations of regions in relation to the services provided. By importing the number of individual cases and types of systemic projects into Microsoft Excel, VOPA was able to further demonstrate its efforts showing the number of case services, I&R and systemic work by grant. The overall results of the project were put into a PowerPoint presentation and shared with VOPA's Governing Board. In addition, staff used the results to target underserved areas for the last half of the fiscal year.

4. Agency Outreach

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

VOPA concentrated outreach efforts toward individuals residing in remote Southwestern Virginia. This rural area has been hard hit by the economic downturn, unemployment, as well as the loss of funding and services for individuals with disabilities. Within this region, outreach focused on special education, employment rights, and disability rights for individuals with TBI. There were two special education outreach opportunities at centers for independent living, concentrating on FBAs, BIPs, and seclusion and restraint in schools. There were an additional three outreach functions at assisted living facilities which focused on employment and disability rights.

C. INFORMATION DISSEMINATED TO THE PUBLIC

1. Radio and TV Appearances by Agency Staff	3
2. Newspaper/Magazine/Journal Articles Prepared by Agency Staff	3
3. PSAs/Videos Aired by the Agency	5
4. Website Hits	19,169
5. Publications/Booklets/Brochures Disseminated by the Agency	140

6. Other

Number	Description (use separate sheets if necessary)

7. External Media Coverage of Agency Activities

Radio/TV Coverage	Newspaper/ Magazines/Journal	PSAs/Videos	Publications/ Booklets/Brochures
3			

PART II: CASE-SERVICES

A. INDIVIDUALS SERVED

1. Individuals	
a. Individuals Served Receiving Advocacy at Start of Fiscal Year (carryover from prior)	0
b. Additional Individuals Served During Fiscal Year (new for fiscal year)	24
c. Total Number of Individuals Served During Fiscal Year (a + b)	24
d. Total Number of Individuals with Cases that Were Closed During Fiscal Year	8
e. Total Individuals Still Being Served at the End of the Fiscal Year	16

2. Services	
a. Number of Cases/Service Requests Open at Start of Fiscal Year (carryover from prior)	0
b. Additional Cases/Service Requests Opened During Fiscal Year (new for fiscal year)	27
c. Total Number of Cases/Service Requests During Fiscal Year (a + b)	27
d. Total Number of Cases/Service Requests that Were Closed During Fiscal Year	10
e. Total Number of Cases/Service Requests Open at the End of the Fiscal Year	17

B. PROBLEM AREAS/COMPLAINTS OF INDIVIDUALS SERVED

Complaint	
1. Abuse (total)	2
a. Inappropriate Use of Restraint & Seclusion	1
b. Involuntary Treatment	
c. Physical, Verbal, & Sexual Assault	1
d. Other	
2. Access to Records	
3. Advance Directives	1
4. Architectural Accessibility	3
5. Assistive Technology (total)	
a. Augmentative Comm. Devices	
b. Durable Medical Equipment	
c. Vehicle Modification/Transportation	
d. Other	
6. Civil Commitment	
7. Custody/Parental Rights	
8. Education (total)	5
a. FAPE: IEP/IFSP Planning/Development/Implementation	17
b. FAPE: Discipline/Procedural Safeguards	
c. FAPE: Eligibility	
d. FAPE: Least Restrictive Environ.	
e. FAPE: Multi-disciplinary Evaluation/Assessments	
f. FAPE: Transition Services	1
g. Other	

9. Employment Discrimination (total)	
a. Benefits	
b. Hiring/Termination	
c. Reasonable Accommodations	
d. Service Provider Issues	
e. Supported Employment	
f. Wage and Hour Issues	
g. Other	
10. Employment Preparation	1
11. Financial Benefits (total)	
a. SSDI Work Incentives	
b. SSI Eligibility	
c. SSI Work Incentives	
d. Social Security Benefits Cessation	
e. Welfare Reform	
f. Work Related Overpayments	
g. Other Financial Entitlements	
12. Forensic Commitment	
13. Government Benefits/Services	2
14. Guardianship/Conservatorship	
15. Healthcare (total)	
a. General Healthcare	
b. Medicaid	
c. Medicare	
d. Private Medical Insurance	
e. Other	
16. Housing (total)	
a. Accommodations	
b. Architectural Barriers	
c. Landlord/Tenant	
d. Modifications	
e. Rental Denial/Termination	
f. Sales/Contracts/Ownership	
g. Subsidized Housing/Section 8	
h. Zoning/Restrictive Covenants	

i. Other	
17. Immigration	
18. Neglect (total)	
a. Failure to Provide Necessary or Appropriate Medical Treatment	
b. Failure to Provide Necessary or Appropriate Mental Health Treatment	
c. Failure to Provide Necessary or Appropriate Personal Care & Safety	
d. Other	
19. Post-Secondary Education	
20. Non-Medical Insurance	
21. Privacy Rights	
22. Rehabilitation Services (total)	
a. Communications Problems (Individuals/Counselor)	
b. Conflict About Services To Be Provided	
c. Individual Requests Information	
d. Non-Rehabilitation Act	
e. Private Providers	
f. Related to Application/Eligibility Process	
g. Related to IWRP Development/Implementation	
h. Related to Title I of ADA	
i. Other Rehabilitation Act-related problems	
23 Suspicious Death	
24. Transportation (total)	
a. Air Carrier	
b. Paratransit	
c. Public Transportation	
d. Other	
25. Unnecessary Institutionalization	
26. Voting (total)	
a. Accessible Polling Place / Equipment	
b. Registration	
c. Other	
27. Other*	

***For any cases listed under “27. Other,” describe the specific problem area or complaint and the number of cases covered under each problem area or complaint listed. Use separate sheets if necessary.**

C. REASONS FOR CLOSING CASE FILES

1. Reason for Closing Case Files

Reason	
a. All Issues Resolved in Client's Favor	5
b. Some Issues Resolved in Client's Favor	2
c. Other Representation Obtained	
d. Individual Withdrew Complaint	
e. Services Not Needed Due to Death, Relocation, etc.	
f. Individual Not Responsive to Agency	3
g. Case Lacked Legal Merit	
h. Conflict of Interest	
i. Agency Withdrew from Case	
j. Lack of Resources	
k. Not Within Priorities	
l. Issue Not Resolved in Client's Favor	
m. Other*	
n. Total	10

*For any cases listed under "Other," describe the reason for closing the case and the number of cases covered under each reason listed. Use separate sheets if necessary.

D. HIGHEST INTERVENTION STRATEGY

Interventions	
1. Short Term Assistance	4
2. Systemic/Policy Activities	
3. Investigation/Monitoring	1
4. Negotiation	4
5. Mediation/Alternative Dispute Resolution	1
6. Administrative Hearing	
7. Legal Remedy/Litigation	
8. Class Action Suits	

PART III: STATISTICAL INFORMATION FOR INDIVIDUALS SERVED

A. AGE OF INDIVIDUALS SERVED

Age	
0 to 12	6
13 to 18	11
19 to 25	2
26 to 64	5
65 and over	0
Total	24

B. GENDER OF INDIVIDUALS SERVED

Male	15
Female	9
Total	24

C. RACE/ETHNICITY OF INDIVIDUALS SERVED

Race/Ethnicity	
1. American Indian/Alaskan Native	
2. Arab American	
3. Asian	
4. Black/African American	5
5. Hispanic/ Latino	
6. Native Hawaiian/Other Pacific Islander	
7. White/Caucasian	18
8. Multiracial/Multiethnic	1
9. Race/Ethnicity Unknown	
10. Other Than Above*	
11. Total	24

*For any individuals listed under "Other Than Above," describe the race/ethnicity of the individual and the number of cases covered under each description listed. Use separate sheets if necessary.

D. LIVING ARRANGEMENTS OF INDIVIDUALS SERVED

Arrangement	
1. Community Residential Home	1
2. Foster Care	
3. Homeless/Shelter	
4. Legal Detention/Jail/Prison	
5. Nursing Facility	
6. Parental/Guardian or Other Family Home	18
7. Independent	4
8. Private Institutional Setting	1
9. Public (State Operated) Institutional Setting	
10. Public Housing	
11. VA Hospital	
12. Other*	
13. Unknown/Not Provided	

*For any cases listed under "Other," describe the living arrangement of the individual and the number of cases covered under each description listed.

E. GEOGRAPHIC LOCATION

Geographic Location	
1. Urban/Suburban	11
2. Rural	13
3. Total	24

PART IV: SYSTEMIC ACTIVITIES AND LITIGATION

A. SYSTEMIC ACTIVITIES

1. Number of Policies/Practices Changed as a Result of Non-Litigation Systemic Activities	0
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2. Describe the agency's systemic activities. Be sure to include information about the policies that were changed and how these changes benefit individuals with disabilities. If possible, estimate the number of individuals potentially impacted by such policy changes. Also include at least three case examples of how the agency's systemic activities impacted individuals served.

VOPA participated on a Virginia Department of Education (VDOE) Task Force to revise the guidelines for the education of children with TBI. VDOE and other groups recognized the need to revamp and improve the information it provides to schools about children with TBI and the services that they need. VOPA attended task force meetings throughout the year and provided materials and input and shared opinions and thoughts on how to improve services. The guidelines were not finalized this year. Therefore, VOPA's work on this systemic activity will continue into FY 2011.

Due to changes in the federal regulations and following recent Government Accounting Office and National Disability Rights Network reports on the use of seclusion and restraint in schools, VOPA began work on developing policy recommendations to VDOE regarding the use of seclusion and restraint in Virginia schools. Via FOIA requests to every school district, VOPA obtained copies of all written policies, procedures, regulations or protocols regarding the use of restraint and seclusion. 70 responded. Of those, 48 indicated they had no written policy or were waiting for guidance from the Virginia School Board Association. The Department of Education in 2009 released a report that 81 of the Local Education Authorities had provided staff training on the use of seclusion and restraint. However, we could find no consistent data on training, implementation or policy implementation amongst the school districts. VOPA's intention was to send this information to DOE but the process has been hampered by the fact that many schools clearly indicated that they will be changing their policies within the next academic year making this report all but obsolete. We are waiting to see what the recommendations are and how they intend to implement them.

B. LITIGATION/CLASS ACTIONS

1. Total Number of Non-Class Action Lawsuits Filed	0
a. Number of Non-Class Action Lawsuits Filed During Fiscal Year (new for fiscal year)	0
b. Number of Non-Class Action Lawsuits Filed at Start of Fiscal Year (carryover from prior fiscal year)	0

2. Total Number of Class Action Lawsuits Filed	0
a. Number of Class Action Lawsuits Filed During Fiscal Year (new for fiscal year)	0
b. Number of Class Action Lawsuits Filed at Start of Fiscal Year (carryover from prior fiscal year)	0

3. Describe the agency’s litigation/class action activities. Explain how individuals with disabilities benefited from such litigation. If possible, estimate the number of individuals potentially impacted by changes resulting from the litigation. Be sure to include at least three case examples that demonstrate the impact of the agency’s litigation.

Not applicable

C. MONITORING

Describe any monitoring conducted by the agency by providing the major areas of non-litigation-related monitoring activities and the groups likely to be affected. Address the major outcomes of the monitoring activities during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency’s monitoring activities.

Not applicable

D. LITIGATION-RELATED MONITORING

Describe any monitoring conducted by the agency related to court orders or case settlements by providing the major areas of monitoring and the groups likely to be affected. Address the major outcomes of the litigation-related monitoring during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency’s litigation-related monitoring.

Not applicable

E. FULL OR PRELIMINARY INVESTIGATIONS

Describe any full investigations conducted by the agency by providing the major areas of investigation and the groups likely to be affected. Address the major outcomes of the investigations during the fiscal year. Be sure to include at least three case examples that demonstrate the impact of the agency’s investigations. Use separate sheets if necessary.

Not applicable

F. DEATH INVESTIGATIONS

1. Number of Formal Death Reports Received	0
2. Number of Informal/External Death Reports Received	0
3. Number of Death Investigations	0

4. Describe any death investigations conducted by the agency during the fiscal year and any subsequent activities resulting from these investigations. Also include the major outcomes of the death investigations. Use separate sheets if necessary.

Not applicable

PART V: PRIORITIES AND OBJECTIVES

Use the format below to describe the program priorities and objectives toward which the prior fiscal year’s activities were targeted.

A. CURRENT PRIORITIES AND OBJECTIVES

Priority #1: PEOPLE WITH DISABILITIES FREE FROM ABUSE AND NEGLECT

Description of Need, Issue, or Barrier Addressed:

Adequate System for Protection from Harm In Licensed Community Residential Settings

Indicator(s):

Investigate allegations of the abuse or neglect of individuals with a disability in licensed community residential settings including the response of each entity responsible for licensing, oversight, or investigation. All investigations will seek corrective action, to include systemic reform, as necessary.

Inform policy makers of the need to eliminate abuse and neglect in licensed community residential settings in response to all significant proposed regulations, policies, or legislation.

Outcome: Partially Met
Total Number of Cases Handled 1

Illustrative Cases (at least one specific case description showing the success)

VOPA investigated the use of a prone restraint on an individual residing in a private facility specializing in rehabilitation and treatment of individuals with TBI. Our client had several medical conditions which were contraindicators to prone restraint which were outlined in the facility’s physical management system manual. VOPA was able to get the facility to eliminate the use of prone restraint. They also agreed to the periodic review of restraint-related documents, revision of their restraint policy to include the notification of a resident’s authorized representative when a restraint procedure is used, and the reevaluation of all residents to determine any contraindications for the use of restraints. Additional cases were opened under this objective under other funding streams.

VOPA participates in workgroups revising assisted living facilities licensing regulations. The regulations apply to both large private pay facilities as well as smaller facilities that accept supplemental funding (known as auxiliary grants) used by individuals with Medicaid not needing nursing home care. Although the work group is dominated by the large facilities, we advocate for individuals in the smaller facilities, focusing on both protection from harm and self-direction. VOPA made substantive comments on the proposed regulations & posted them so other entities could review & use them. We addressed consumer-direction, genuine community integration, & increased focus on crisis intervention services. Also, we provided public comment on the new MR/ID Waiver emergency/NOIRA administrative regulations. Children with TBI under the age of 6 might be eligible for these waiver services in Virginia. We encouraged DMAS & DBHDS to not be overly protective in risk mitigation. VOPA has drafted the complaint publication; it will be completed in FY 11.

Priority #2:

CHILDREN WITH DISABILITIES RECEIVE AN APPROPRIATE EDUCATION

Description of Need, Issue, or Barrier Addressed:

Children who are Suspended or who are at Risk of Long-Term Suspension

Indicator(s):

Provide three (3) presentations to teachers, school staff and parent advocacy groups regarding Functional Behavior Assessments and Behavior Intervention Plans, and addressing seclusion and restraint practices and methodologies in schools.

Represent three (3) children in special education who are at risk of a long term suspension due to a lack of an appropriate Functional Behavioral Assessment or Behavioral Intervention Plan. Priority will be given to children who have already requested and received a Functional Behavioral Assessment and disagree with the results.

Represent three (3) children in special education who have received a long term suspension to ensure that they return to school in an appropriate placement.

Represent up to three (3) children from objectives above in Due Process or VADOE Complaints.

Outcome: Met
Total Number of Cases Handled - 0 using TBI funding

Illustrative Cases (at least one specific case description showing the success)

VOPA staff developed materials regarding Functional Behavior Assessments (FBAs), Behavior Intervention Plans (BIPs), and seclusion and restraint practices and provided training at parent advocacy groups at the Arc of Prince William County, the Abingdon Center for Independent Living, Clinch Center for Independent Living in Grundy, and the Norton Center for Independent Living.

We represented four children, through other funding streams, who received long-term suspensions ensuring they continue to receive appropriate special education and services. In one case, we advocated to allow a child back in class and to conduct new evaluations. In another, a child was suspended for behaving how his IEP said he was likely to act. The MDR team found his actions were not a manifestation of his disability.

Priority #3: CHILDREN WITH DISABILITIES RECEIVE AN APPROPRIATE EDUCATION

Description of Need, Issue, or Barrier Addressed:

Special Education for Children with Traumatic Brain Injuries

Indicator(s):

Develop training on the importance of identifying children with TBI and providing the necessary services to ensure an appropriate education, and provide to three (3) school districts.

Represent two (2) individuals with TBI who have been denied appropriate evaluations or services under their IEP or 504 Plan.

Represent the rights of children with traumatic brain injuries to receive appropriate evaluations, identification and services by participating on the Virginia Department of Education Task Force charged to revise guidelines for the education of children with TBI.

Through the current contract with Brain Injury Services of the Southwest, represent at least fifteen (15) children with traumatic brain injuries to receive appropriate special education services through December 31, 2010. Evaluate contract results and make recommendations for renewal.

Outcome: Met
Total Number of Cases Handled 17

Illustrative Cases (at least one specific case description showing the success)

VOPA developed and provided three trainings to parents and staff about TBI identification, services, and accommodations, as well as how to develop an adequate IEP to ensure FAPE.

VOPA represented three individuals with TBI denied appropriate evaluations or services under their IEP or 504 Plan. In one case, the mother claimed the school was not providing her child with a one-on-one aide that was identified in the student's IEP. Through negotiation, VOPA was able to advocate for the student to receive para-professional services identified in the IEP. In another case, our client diagnosed with TBI suffered from temporary paralysis resulting in him being tardy or missing school. The school suspended him for tardiness and would not allow him to participate in extracurricular activities. VOPA participated in two IEP meetings in an effort to have the suspensions removed from the student's record, which the school would not do. VOPA provided the client and his mother information on how to file a complaint with VDOE.

VOPA participated on a Virginia Department of Education (VDOE) Task Force to revise the guidelines for the education of children with TBI. VDOE and other groups recognized the need to revamp and improve the information it provides to schools about children with TBI and the services that they need. VOPA attended task force meetings throughout the year and provided materials and input and shared opinions and thoughts on how to improve services. The guidelines were not finalized this year. Therefore, VOPA's work on this systemic activity will continue into FY 2011.

Through a contract with the Brain Injury Services of Southwest Virginia, 13 children with TBI-related special education issues received services. VOPA's contract with the Brain Injury Services of Southwest Virginia (BIS of SWVA) was a success as it enabled children with TBI-related special education issues to have advocates in an area of the state where VOPA has less of a significant presence. In addition, the contract reduces VOPA's travel expenses and related costs in representing these individuals.

Priority #4: PEOPLE WITH DISABILITIES HAVE EQUAL ACCESS TO GOVERNMENT SERVICES

Description of Need, Issue, or Barrier Addressed:

Access to State and Federal Government Services

Indicator(s):

Provide five (5) trainings to the personnel of county or city transportation providers on disability awareness and the right to accessible transportation under the ADA.

Provide training to the staff of four (4) Assisted Living Facilities or Nursing Homes regarding TBI services and disability rights.

Develop in conjunction with the US Census Bureau strategies and opportunities for people with disabilities to actively participate in FY2010 census efforts.

Outcome: Met
Total Number of Cases Handled Not Case Level Services

Illustrative Cases (at least one specific case description showing the success)

VOPA gave presentations on disability awareness and the right to accessible transportation for transit employees at Valley Metro in Roanoke, Petersburg Area Transit (twice), GRTC/CARES in Richmond, and JAUNT Transportation Services in Charlottesville, Virginia.

VOPA conducted training for staff and residents at four assisted living facilities and nursing homes on TBI and TBI resources and services available in Virginia as well as disability rights. The training also focused on how facilities could provide adequate services to their residents with TBI.

Initial collaboration with the US Census Bureau to fund outreach by VOPA had been hopeful. However, with the new federal fiscal year budget concerns, the Census Bureau funding for VOPA was not available. Instead, VOPA distributed information at its trainings and presentations that encouraged individuals to participate in the census

Priority #5: PEOPLE WITH DISABILITIES HAVE EQUAL ACCESS TO GOVERNMENT SERVICES

Description of Need, Issue, or Barrier Addressed:

Appropriate TBI supports for Veterans

Indicator(s):

Provide education and outreach for Veterans with TBI through five (5) trainings at Veterans Administration facilities and community-based Veterans Groups.

Prepare and submit three (3) articles to the VA or Veteran's groups for publication in bulletins or newsletters regarding identification of service-connected disabilities and access to appropriate services.

Represent two (2) veterans with TBI denied appropriate services or supports.

Outcome: Partially Met
Total Number of Cases Handled 0

Illustrative Cases (at least one specific case description showing the success)

VOPA provided training to three veterans groups during the reporting period. The trainings focused on disability rights and TBI resources and services available in Virginia. Two trainings had to be rescheduled and were not conducted during the reporting period.

VOPA submitted three articles which were published in veterans groups magazines reaching approximately 15,000 veterans. The first article, "Working Together for Soldiers with Disabilities," addressed employment rights. Another article, "Removing Barriers to Healthcare," covered architectural and communication barriers an individual might face when trying to obtain medical services and the accommodations that could be requested. The final article, "Working Veterans Have Disability Rights," provided veterans with a disability an understanding of employment rights.

VOPA did not receive any requests for services by veterans with TBI denied appropriate services or supports so no cases were opened under this focus area.

Priority #6: PEOPLE WITH DISABILITIES ARE EMPLOYED TO THEIR MAXIMUM POTENTIAL

Description of Need, Issue, or Barrier Addressed:

Employment Rights under the ADA

Indicator(s):

Provide ten (10) trainings on employment rights to consumers and community based advocacy groups, to include consumers at state and private rehabilitation centers.

Inform assisted living facility (ALF) residents about their employment rights through ten (10) annual visits to ALFs or other community facilities ALF residents regularly attend.

Outcome: Met
Total Number of Cases Handled Not Case Level Services

Illustrative Cases (at least one specific case description showing the success)

Utilizing TBI and additional funding streams, VOPA held 11 presentations on Employment Rights at Partners in Policymaking; the Virginia Rehabilitation Center for the Blind and Visually Impaired; the Crohns and Colitis Support Group in Richmond, the Disabilities Services Board Symposium; and the City of Waynesboro - Disability Rights Office. VOPA completed presentations on Employment Rights at the Woodrow Wilson Rehabilitation Center, and at the Norfolk and Portsmouth Department of Rehabilitative Services Job Clubs. VOPA staff participated in an interview for Public Radio on Employment rights and individuals with disabilities.

Residents of ten assisted living facilities were advised of their employment rights under the Americans with Disabilities Act and Virginia law.

Outside Objectives FY10: VOPA served two individuals with TBI on three issues that were not covered by our objectives during FY10. Short-term assistance was provided in

two cases and one case continued into FY11. The problem area on all three was architectural accessibility. In one case, the individual had concerns about access to the newly built Department of Social Services building. After VOPA intervention, the county engineer addressed the client's concerns with accessible entrances, threshold height, and door positioning and made the appropriate modifications. In the other case, the individual had concerns about accessibility to a privately run museum that had undergone several recent renovation projects and was still under renovation. VOPA contacted the museum and expressed the client's concerns. Museum staff responded that they had completed several renovation projects both within the building and on the surrounding property and that they had been mindful of the issue of accessibility and the difficult task of balancing that against the need to preserve the integrity of an historic structure. Client concerns regarding a gravel parking lot, entrance/accessible path, and accessible rest room were satisfactorily resolved.

B. AGENCY ACCOMPLISHMENTS

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

VOPA has not received many requests for services from individuals receiving services and treatment from veterans' hospitals. Therefore, we are re-directing our efforts to reach this population via community services and veterans' self advocates. We were fortunate to have 3 disability rights related articles printed in publications reaching and dedicated to veterans.

VOPA participated on a Virginia Department of Education (VDOE) Task Force to revise the guidelines for the education of children with TBI. VDOE and other groups recognized the need to revamp and improve the information it provides to schools about children with TBI and the services that they need. VOPA attended task force meetings throughout the year and provided materials and input and shared opinions and thoughts on how to improve services. These efforts will have a statewide impact on children with TBI at a critical point in their lives and in one of the few systems with the responsibility and resources to respond to TBI-related concerns. The guidelines were not finalized this year. Therefore, VOPA's work on this systemic activity will continue into FY 2011.

C. IMPLEMENTATION PROBLEMS

Describe any external or internal implementation problems for priorities marked "not met" or "partially met."

Again, this year, lack of resources was a significant impediment to meeting the advocacy needs of individuals with TBI. VOPA had to juggle service requests between funding streams in order to not run out of grant funds prior to the end of the federal fiscal year. Staff were creative in using other funding streams to serve a limited number of PATBI-eligible individuals and to offset some expenses. VOPA plans its objectives based on the needs within the state; not by funding stream or specific disabilities. Some of the identified estimated cases and proposed activities may have been addressed in conjunction with other funding streams, but the result is still a positive impact on PATBI-eligible individuals. The lack of adequate funding prevents VOPA from addressing the significant advocacy needs for people with this highly complex disability.

PART VI: AGENCY ADMINISTRATION

A. GRIEVANCES FILED

PATBI grievances filed against the agency during the fiscal year	1
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B. COLLABORATIVE EFFORTS

Under other and with TBI funding, VOPA collaborated with the following entities:

- Brain Injury Association of Virginia
- Department of Behavioral Health and Developmental Services
- Partnership for People with Disabilities
- Department of Rehabilitative Services
- Department of Medical Assistance Services
- Virginia Public Guardian and Conservator Advisory Board
- Virginia Board for People with Disabilities
- Centers for Independent Living
- Veterans Administration Medical Centers in Virginia

1. NETWORK COLLABORATION

Identify issues selected for network collaboration

Not applicable

2. ALL OTHER COLLABORATION

Describe any coordination with programs that are not part of the agency (e.g. state long-term care programs, etc.). Use separate sheets if necessary.

VOPA participates on the Virginia Rehabilitation Council for the Department for the Blind & Vision Impaired (DBVI). The Rehabilitation Act of 1973, as amended, requires the establishment of a Statewide Rehabilitation Council to be appointed by the Governor. The amendments identify specific organizations to be represented on the Council, and also specify that a minimum of four individuals represent business, industry and labor on the Council as well as current or former applicants for or recipients of vocational rehabilitation (“VR”) services. The Rehabilitation Council advises the VR program in development of the State plan and completion of the federally required needs assessment. The Council also assists with customer satisfaction surveys, training or employment opportunities, and completion of the required Annual Report on the status of VR services in the State. VOPA was an active participant and voting member of the council. We debated and voted on agency priorities and workplan. VOPA was a vocal and frequent advocate for maximum inclusion, participation and employment of people with disabilities and advocated for policies that would give people with disabilities the opportunity to be employed to their maximum potential.

Upon nomination by the VOPA Director, a VOPA advocate was appointed by the Governor of Virginia to be a member of the Virginia State Rehabilitation Council (SRC). In accordance with federal and state law the group must include a representative of the Client Assistance Program (CAP) of the state’s Protection and Advocacy entity (VOPA). In Virginia, VOPA is the CAP. The appointment is for one year and expired in September 2010. VOPA has nominated a new staff for the SRC position. “Improving

employment and quality of life for Virginians with disabilities” is an objective for this council. This is another avenue for TBI related advocacy.

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.

VOPA also coordinates with the State Long-Term Care Ombudsman Program (through the Virginia Department of Aging). This effort is particularly important during the legislative session.

PART VII: END OF FORM

_____ Signature	_____ Date
Colleen Miller	Executive Director
_____ Name (printed)	_____ Title