

**PROTECTION and ADVOCACY for BENEFICIARIES of SOCIAL SECURITY (PABSS)**

**SEMI-ANNUAL/ANNUAL  
PROGRAM PERFORMANCE REPORT  
(Revised November 2005)**

**REPORTING PERIOD:** From March 1, 2011 To September 29, 2011

**GRANT AWARD NUMBER:** 17-B-20051-3-05

**STATE:** Virginia

**AGENCY NAME:** Virginia Office for Protection and Advocacy

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**DATE SUBMITTED:**

**PABSS PROGRAM PERFORMANCE REPORT**

**PART I – QUANTATATIVE STATISTICS**

**Section A: Information and Referral**

1. How many <u>individuals</u> received Information and Referral under the PABSS program during the report period? (Do not count individuals more than once for this response.)	689
2. How many Information and Referral <u>requests</u> were made under the PABSS program during the report period? (Include all I&R requests, even if more than one for some individuals. This number should equal or exceed Sec A. 1.)	694

**Section B: Individuals and Issue Area Service Requests/ Workload Statistics**

1. Individuals <i>(Do not count individuals more than once for this response.)</i>	
a. How many individuals had open PABSS issue area service requests at the start of the report period?	7
b. How many new PABSS individuals were added during the report period?	18
(Calculated by Computer) Total individuals served during the report period under the PABSS program. (Sum Section B1-a and B1-b.)	25
c. Total number of individuals with all issue area service requests that were closed during the report period under the PABSS program?	21
(Calculated by Computer) Total number of individuals still being served at the end of the report period? (sum of section B1-a & B1-b minus B1-c)	4

<b>2. Services</b>	
a. Total PABSS issue area service requests open the start of the report period.	9
b. Number of new PABSS issue area service requests added during the report period?	22
(Calculated by Computer) Total number of issue area service requests during the report period? ( Sum of B-2-a and B-2-b)	31
c. Total number of issue area service requests closed during the report period?	24
(Calculated by Computer) Total number of issue area service requests open at the end of the report period? (sum of section B-2-a & B2-b minus B-2-c)	7

**Section C: Individual Demographics**

1. Please provide counts of individuals receipted by Gender:

a. Male	3
b. Female	15
(Calculated by Computer) Total individuals receipted. <i>(Must equal count from Part I Section B-1b above.)</i>	18

2. Please provide counts of individuals receipted by Ethnicity:

a. Alaskan Native	
b. American Indian	
c. Arab American (Middle Eastern)	
d. Asian	
e. Black (Not Hispanic/Latino Origin)	11
f. Hispanic/Latino	2
g. Multi Racial / Multi Cultural	
h. Pacific Islander	
i. White (Not Hispanic/Latino Origin)	5
j. Other (IF SELECTED MUST SPECIFY)	
k. Unknown	
(Calculated by Computer) Total individuals receipted. <i>(Must equal count from Part I Section B-1b above.)</i>	18

3. Please provide counts of individuals received by Age Bracket:

a. 14 to 18	2
b. 19 to 21	1
c. 22 to 40	4
d. 41 to 59	9
e. 60 to 64	2
(Calculated by Computer) Total individuals received. <i>(Must equal count from Part I Section B-1b above.)</i>	18

4. Please provide counts of individuals received by Beneficiary Status:

a. SSI eligible	11
b. SSDI eligible	5
c. Dually eligible	2
(Calculated by Computer) Total individuals received. <i>(Must equal count from Part I Section B-1b above.)</i>	18

5. Please provide counts of individuals received by Primary Disability:

a. Absence of extremities	
b. Autism	
c. Auto-immune (lupus, thyroid, ALS, etc.)	
d. Blindness (both eyes)	1
e. Cancer	
f. Cerebral palsy	
g. Deaf-blind	
h. Deafness	2
i. Diabetes	1
j. Digestive disorders (chronic pancreatitis, esophageal stricture, fistulae, chronic liver, etc.)	
k. Epilepsy	
l. Genitourinary conditions (kidney, prostate, etc.)	
m. Hard of Hearing (not deaf)	
n. Heart and other circulatory problems including cardiovascular	
o. HIV/AIDS	
p. Mental illness (diagnosis according to DSM-IV)	6
q. Mental retardation	2
r. Multiple sclerosis	
s. Muscular dystrophy	
t. Muscular / Skeletal impairment (arthritis, fibromyalgia, osteogenesis imperfecta, osteomyelitis, etc.)	1

u. Neurological disorders (brain tumors, convulsive disorders, Parkinson, etc.)	1
v. Other emotional/behavioral ( <i>Provide detail</i> )	
w. Other intellectual such as ADD/ADHD ( <i>Provide detail</i> )	
x. Physical / orthopedic including spinal cord injuries, paraplegia, quadriplegia, back problems, etc.	3
y. Respiratory disorders (emphysema, asthma, pulmonary hypertension, cystic fibrosis, etc.)	
z. Specific learning disabilities (SLD)	
aa. Speech impairment	
bb. Spina bifida	
cc. Substance abuse (alcohol or drugs)	
dd. Tourette syndrome	
ee. Traumatic brain injury (TBI)	1
ff. Visual Impairment (not blind)	
gg. Disability not known/Other than Above (Specify)	
(Calculated by Computer) Total individuals receipted. ( <i>Must equal count from Part I Section B-1b above.</i> )	18

**D. Major Source of Concern – Service Requests – Reason for Receipt**

Please provide counts of all PABSS issue area service request receipts by major source of individual's concern for the current report period.:

1. State Vocational Rehab Agency (public VR program)	14
2. Employment Networks (SSA contractor)	1
3. Agencies other than 1. or 2. above	
4. Employment discrimination – hire, fire, promotion	
5. Employment wages and benefits	
6. Housing	
7. Healthcare (not 5 above)	
8. Insufficient/improper benefits planning	
9. Transition services (Student beneficiary between 14-18 (or under age 22) engaging/needing a transition plan)	
10. Post Secondary accommodation	
11. Transportation	
12. Social Security benefits cessation based on SGA (including CDR's) – not Overpayment	
13. Benefits Questions/Work Incentives – Not 12 or 14	1
14. Work Related Overpayment	4
15. Other ( <i>MUST SPECIFY</i> ) Representative Payee Issues	2
(Calculated by Computer) Total issues/service requests of individuals receipted. ( <i>Must equal count from Part I Section B-2b above.</i> )	22

**Section E: Closed Issue Area Service Requests**

**1. What was the problem/sub-problem area?**

a.	[AT] Assistive Technology	
b.	[Education] Transition school to work	1
c.	[Employment] Discrimination in employment benefits	
d.	[Employment] Discrimination in hiring	
e.	[Employment] Unlawful termination / firing	
f.	[Employment] Other employment discrimination	
g.	[Employment] Reasonable accommodation – not d, e, or f from above	2
h.	[Employment] Service provider issues – not c-g above	1
i.	[Employment] Wage and hour issues	
j.	[Financial Entitlements] SSI: Overpayments based on work issues	2
k.	[Financial Entitlements] SSDI: Overpayments based on work issues	4
l.	[Financial Entitlements] (other) – Specify	
m.	[Healthcare] Medicaid only issues	
n.	[Healthcare] Medicare/Medicaid issues	
o.	[Healthcare] Medicare only issues	
p.	[Healthcare] Private Insurance Issues	
q.	[Housing] Accommodations in housing	
r.	[Housing] Subsidized housing/Section 8	
s.	[Housing] Rental termination – not q .	
t.	[Housing] Other – Specify	
u.	[Childcare]	
v.	[Rehab Services] Related to State VR	11
w.	[Rehab Services] Related to Employment Network (EN)	
x.	[Rehab Services] Related to Agencies other than State VR or Employment Network (EN)	
y.	[Post-Secondary Ed] Accessibility	
z.	[Post-Secondary Ed] Funding issues	
aa.	[Post-Secondary Ed] Grievance Against College – Not y or z above	
bb.	[Post-Secondary Ed] Other – Specify	
cc.	[Services] Personal assistance – not Employment	
dd.	[Transportation]	
ee.	[Benefits Planning] referral / access to BPAO services	1
ff.	[Other] (MUST SPECIFY) <i>Representative Payee Issues</i>	2
<b>(Calculated by Computer)</b>		
<b>Total closed issue area service requests. (Must equal count from Part I Section B-2c above.)</b>		<b>24</b>

**2. What was the reason for closing the individual's issue area service request?**

a. Issue Resolved in Individual's Favor	13
b. Issue Partially Resolved in Individual's Favor	9
c. Issue Lacked Legal Merit	
d. Individual decided not to pursue resolution or Individual Withdrew Complaint (Not e-g below)	1
e. Other Representation Obtained (Individual found other representation)	
f. Individual Not Responsive to Agency / Individual refused to cooperate with P&A	1
g. Services Not Needed Due to lost contact, Death, Relocation, etc.	
h. Advocacy efforts/appeals were unsuccessful (Issue not resolved in Individual's Favor)	
i. Other (IF SELECTED MUST SPECIFY)	
(Calculated by Computer) Total closed issue area service requests. <i>(Must equal count from Part I Section B-2c above.)</i>	24

**3. What was the highest intervention strategy used?**

a. Short Term/Technical assistance	12
b. Informal Resolution	2
c. Investigation/Monitoring	
d. Negotiation	9
e. Mediation / Alternative Dispute Resolution	
f. Administrative Remedies	
g. Legal remedy / Litigation	1
h. Class Action Suits	
i. Systemic / Policy activities	
(Calculated by Computer) Total closed issue area service requests. <i>(Must equal count from Part I Section B-2c above.)</i>	24

4. As a result of P&A intervention, the following major outcome was achieved: (Choose **ONE** outcome for each closed issue area service request!)

a. Individual gained / maintained access to services including those of VR, EN or other agency	9
b. Individual obtained employment	
c. Individual regained employment	
d. Individual maintained employment	2
e. Individual advanced in employment	
f. Individual's employment opportunities increased	
g. Individual obtained an increase in salary and/or benefits	
h. Validity of discrimination complaint was upheld	
i. Overpayment situation addressed (it doesn't matter if it was waived or the efforts weren't successful)	6
j. Individual acquired knowledge concerning his/her rights	7
k. Outcome information is not available	
l. Other outcome (IF SELECTED MUST SPECIFY)	
(Calculated by Computer) Total outcomes of closed issue area service requests. <i>(Must equal count from Part I Section B-2c above.)</i>	24

## **PART II – NARRATIVE**

**Section A: Description of Progress and Status Update:** [Please provide a brief overview of overall project status, staff changes, staff training or other major developments with regard to the PABSS program. This could include information about boards and committees where decisions are made concerning disability service delivery and local policy.

The Virginia Office for Protection and Advocacy's (VOPA) PABSS program continues to operate successfully, providing excellent assistance to beneficiaries of social security who are attempting to return or are in the process of returning to work. VOPA has provided training and outreach to over 600 people using the PABSS program. In addition, we have given information and referral to an additional nearly 700 people during this period and case level services for 25 individuals.

VOPA participates on the Virginia Rehabilitation Council (SRC) for the Department of Rehabilitative Services (DRS) and the Rehabilitation Council for the Department for the Blind and 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 applications 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 service in the state. VOPA staff fully participate in the meeting, although the Governor has not made formal appointments of VOPA staff for either council.

Under a separate contract with the National Disability Rights Network (NDRN), we conducted on-site investigations of fifteen Social Security Administration (SSA) Representative Payee organizations in Virginia. PABBS funds were used to initiate these investigations until NDRN approved and paid for completed investigations. We investigated seven representative payee organizations who were also employers of the Social Security beneficiaries; we investigated eight representative payee organizations who were not employers. Every organization investigated was the representative payee for at least five beneficiaries. Our investigations consisted of reviewing financial records, examining living conditions and work conditions (when provided by the representative payees), and interviews with both representative payee organization staff and SSA-designated beneficiaries.

Another project we conducted involved conversations with various focus groups to obtain information about potential fraud or mismanagement of SSA payments by representative payees. The results of these focus groups discussions have been compiled and will be shared with relevant decision makers and stakeholders.

In addition to the NDRN representative payee investigations and the representative payee focus group project, VOPA served individual clients with Representative Payee funds. These matters focused on providing individuals with practical, how-to information on requesting a change in a representative payee and general representative payee responsibilities. In addition, we provided a small number of clients with a greater level of services by performing a more detailed investigation of their particular representative payee-beneficiary circumstances to insure that no fraud or mismanagement had occurred.

VOPA's current PABSS trained staff include the following: two Managing Attorneys, two staff attorneys and two disability rights advocates. In addition, the Executive Director, one of the Managing Attorneys and one of the disability rights advocates have achieved the required security clearances to work the Representative Payee Review Project. VOPA's Data Analyst position is currently vacant. However this has had no impact on the implementation of the PABSS advocacy work.

## **Section B: Detail of Actions Taken on the Project:**

### **1. Issue Area Service Requests Summaries: [Please provide summaries of three Issues/Service Requests undertaken as part of the PABSS project. Indicate clearly the issue or problem, the PABSS intervention, and the results if known]**

VOPA received a complaint from a beneficiary who is deaf that DRS was not providing her with appropriate vocational rehabilitation services. VOPA agreed to represent the client to advocate for her to receive appropriate job coaching service, assistive technology including hearing aids and glasses and access to DRS' Self Employment Enterprise. VOPA received and reviewed the client's records and then attended a settlement conference with the client. VOPA ensured that an appropriate interpreter would be present at the conference. As a result of VOPA's advocacy, DRS agreed to do the following:

- The client was provided with additional evaluations to find potential areas of interest or to identify a new job goal;
- Once a job goal is agreed upon, DRS will provide job coaching and training services to help her reach that goal;
- DRS will assist the client in scheduling an appointment with its audiologist. If the evaluation proves that she requires a new hearing aide, DRS will provide it;
- DRS will purchase new glasses for the client;
- DRS will provide the client with information about its Self Employment Enterprise program; and
- DRS will provide the client with an appropriate sign language interpreter for all future meetings.

In another case, VOPA received a complaint from a beneficiary who had suffered a traumatic brain injury several years ago and had been unable to work until recently. He applied for and received a “ticket to work” in the early spring of 2011 and awaited a call from the assigned provider for employment assistance. The client claims he waited for 'a couple of months' until May 2011 and then attempted to contact the network but was unsuccessful. He was never contacted by the network. The client told VOPA that he is “desperate to work” and contacted us on a recommendation from his local Area Work Incentive Coordinator (AWIC).

VOPA opened a case to investigate the client’s complaint of inadequate service. VOPA contacted the AWIC assigned to the client’s area. VOPA learned that the client’s ticket had been assigned to the network initially and then “unassigned.” The ticket had never been re-assigned and the client had not received notice that the ticket was unassigned. Maximus’ records simply noted that the ticket was “unassigned” with no reason given. The initially assigned employment network had never requested any milestone or outcome payments for the client. VOPA informed the client of the outcome of its investigation of the complaint and gave the client technical assistance on how to request a new assignment of his ticket to work.

As a third example, VOPA received a complaint from a beneficiary with cerebral palsy asking that we advocate for her to be found eligible for vocational rehabilitation services. The client stated that she had spent years only doing volunteer work on her limited SSI income. The client explained that due to her desire to finally acquire a job, she set up an interview with DRS. At her initial meeting, the DRS counselor told her that DRS could not offer services due to her need for a “supervised job” and that she needed to look at “workshop options.” VOPA demanded that the client be found eligible for vocational rehabilitation services and assigned to a new counselor. VOPA requested a settlement conference to discuss the matter. Within two weeks, the case was assigned to a new counselor. A new intake interview was scheduled. On a systemic level, the supervisor agreed that additional training was needed for DRS personnel on issues including Trial Work Experience and Extended Evaluation. At the meeting, VOPA successfully advocated for the client to receive a vocational evaluation and an expedited determination of eligibility. The client was then determined to be eligible for vocational rehabilitation services. Subsequently, and under a different funding stream, VOPA successfully advocated for the client to receive an appropriate Individualized Plan for Employment.

**2(a). Outreach Statistics:**

	<b>Annual</b>
<b>Total Number of Outreach/Presentations</b>	19
<b>Total Number of Persons Reached by Outreach/ Presentation Events</b>	612

**Other Information Dissemination Activities: (Number of Instances)**

<b>1. Radio/TV appearances by PABSS staff</b>	
<b>2. Newspaper/Magazine/Journal articles prepared by staff</b>	1
<b>3. PSAs/videos/films aired by the Agency</b>	1
<b>4. Reports disseminated</b>	
<b>5. Publications/Booklets/Brochures disseminated</b>	7
<b>6. Number of Website hits</b>	
<b>7. Other media activities (MUST SPECIFY) Annual Report to General Assembly</b>	1

**2(b).Outreach Narrative: [Describe the agency’s outreach efforts. Describe the trainings presented by the staff including information about the topics covered, the purpose of the training, and a description of the attendees. Describe media events, informational materials developed or other activities undertaken as part of the PABSS project.]**

VOPA’s outreach and training related to PABSS work was completed in conjunction with other funding streams. This was due to VOPA’s awareness that the PABSS funding was limited. In addition, it makes more sense to our constituents (and is more practical for VOPA) to provide presentations and training on related topics no matter what the funding source. VOPA uses printed PABSS related materials that were developed by another entity and previously approved by SSA.

VOPA provided targeted trainings to DRS clients in west and southwest Virginia. Because DRS has closed all of its eligibility categories, VOPA provided information on services that DRS can provide to clients in the application stage.

VOPA developed an “annual report” for the members of the General Assembly and to be used with other audiences.

VOPA provided trainings for Department of Social Service (DSS) staff on a variety of topics. These trainings were designed to inform Case Managers of the many services available for preparing students leaving Foster Care. The trainings were very well received. Many of the Case Managers had no knowledge of the many work incentives that could assist their students. They were especially pleased to learn of the Student Earned Income Exclusion (SEIE). VOPA covered the entire state when providing these five trainings.

VOPA participated in a Work Incentive Seminar Event (WISE) sponsored by one of the Community Work Incentive Coordinator (CWIC) projects in the state. This event was done in collaboration with DRS, DBVI, CWICs, & SSA. The Area Work Incentive Coordinator (AWIC) from SSA shared about his positive working relationship with PABSS staff. VOPA is pleased to have such a positive relationship with the AWIC. There were approximately twenty to twenty-five individuals in attendance for the WISE. This is a very important event for PABSS to be a part of as it is an excellent collaboration effort with the other agencies providing services to beneficiaries of Social Security.

VOPA provided training to students at Woodrow Wilson Rehabilitation Center (WWRC) on the topics of Employment Rights under the ADA, Work Incentives for Beneficiaries of Social Security and VR services. There were approximately one hundred (100) in attendance. The students had great questions about accommodations for working and having a disability. The students also asked great questions about reporting earnings to SSA. This training gave them valuable information to assist them in avoiding a future overpayment.

VOPA maintains a website that posts all of our federal grants' goals and objectives. This website also has notices for the Board of Directors' and VOPA's Advisory Councils' meetings, job vacancies, announcements, VOPA publications, and disability-related links are also available. The annual public comment process is posted on the website and visitors can participate online.

VOPA routinely provides training and speaking engagements through our Speakers Bureau. The Speakers Bureau provides training and presentations that are related to the Office's current Goals, Focus Areas, and Objectives (priorities). There is a link on the VOPA website for public to request for a Speaker's Bureau presentation. VOPA also provides exhibits and materials for fairs, conferences, and meetings on request. Whenever a presentation is conducted about VOPA in general, it addresses some of the work we do related to work incentives and Social Security issues.

VOPA uses a "VOPA alert," an email distribution list service to communicate with our constituents. In the past year, "VOPA alert" notified constituents of important legal and legislative developments as well as changes in other service agencies.

VOPA also uses "The Directors' Blog" on our website. VOPA offers this blog as a way of alerting the public to news and developments in disability law, sharing activities of the Office, and getting feedback about how we're doing.

**Section C: Problems encountered and steps taken to resolve problems: [Please provide detail information about problems encountered in implementing or administering the PABSS program and actions you have taken to resolve the problems you encountered.]**

VOPA continues to have problems communicating with local SSA staff. We are pleased to have such a positive working relationship with the AWIC for this area. Another problem we encounter is limited PABSS funding to serve individuals with disabilities to gain or maintain employment. In addition, many individuals with disabilities would like to work, but because SSA limits our ability to do overpayment work, we cannot provide the much needed assistance and education on the valuable work incentives available. Thus these individuals continue to have the misperception that beneficiaries with disabilities who gain employment will lose benefits or will experience painful overpayment situations.

**Section D: Planned activities: [Please provide activities you plan to undertake to further the objectives of the PABSS project.]**

VOPA takes cases that we believe will have a strong systemic impact on the lives of Virginians with disabilities. We opened a targeted number of individual cases, focused to obtain systemic reform. In this way, we make a significant impact on a much larger population group. 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 PABSS-eligible individuals.

VOPA plans to continue to provide information and referral, trainings about work incentives, and to represent beneficiaries attempting to gain, maintain and re-gain employment.

**Section E: Diversification activities: [Please provide a description of activities undertaken to address the needs of individuals with disabilities from diverse ethnic and racial communities.]**

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.

Using other funding, VOPA has translated 12 of its publications into Spanish. We are in the process of posting them on our website.

Many of VOPA's PABSS related trainings were provided in the southwestern and western areas of Virginia. These areas are historically underserved by disability related service providers and advocacy efforts due to the rural nature of the areas and the economic climate.