

Virginia Board for People with Disabilities

Program Performance Report

For Federal Fiscal Year 2014

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Virginia Board for People with Disabilities
1100 Bank Street

Richmond, VA
23219

Section I: Identification

State or Territory: VA - Virginia Board for People with Disabilities

Reporting Period: October 1, 2013 through September 30, 2014

Name of Person to Contact Regarding PPR Information

Contact Last Name: Lawyer

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State Authority

State Authority Establishing Council:

Did the State authority change in this fiscal year? N/A

Designated State Agency

Did your DSA change? N/A

If 'yes', Name?

Is the new DSA a service provider? N/A

Section II: Comprehensive Review Update

Since '04, Va. has ranked in top 10 states in per capita income, but near bottom in "fiscal effort" level for DD svcs: Since '09, Va. has ranked in bottom 10 states in fiscal effort for all ID/DD services & for community-based svcs. Va. has 2 hi-poverty regions (SW & Southside) which have 36% & 33% of households earning <25K/yr; have 31% of adults out-of-workforce; & have localities w/ >11% unemployment. Access to healthcare providers there are limited. PwD unemployment remains hi. Dept. of Rehab Svcs added former Dept. on Aging in '12, now DARS. For 3 yrs, per Order of Selection, VR svcs. only were to those w/most significant disabilities, but in July/Aug'13, lwd on VR wait lists for Category 1&2 got svcs. At end of FFY14, all categories closed. New Governor's health reform initiatives include planning health benefits exchange & Medicaid expansion. Legislature opposes latter. Only 37% of small employers offer health insurance; approx. 1 mill. adults & 150,000 youth lack insur. Va. survey found that PwD are: > likely to be smokers, be overweight/obese, & 2x < likely to exercise as indiv. w/o disabilities. Future shortages of health professionals, esp. primary care MDs, are likely. Medicaid enrollment rose during recession, altho eligibility criteria are among strictest nat'ly. Medicaid still does not cover basic dental svcs. for adults. ID & DD Waiver wait lists grew > slowly in FFYs 13 & 14 due to new funding for slots due to DOJ Settlement Agreement (approved July 2012). The 2012 legislature required: formal review of all Waivers to increase # served & cost-effectiveness; & expanded managed care, which continues. Va. still relies on institutions, but a major shift occurred due to: > advocacy; Systems Transformation grant efforts; & 2011 DOJ findings that Va. violated the ADA & Olmstead decision. Prior to DOJ Settlement Agreement approval, plan implementation was begun, esp. expanding community capacity & TC transitions. Settlement plan includes: close all but 1 TC; expand community housing/supports, & add 4,000+ new Medicaid Waiver slots by 2020. Target population are: TC residents, indiv. in nursing facilities (NF) & in non-state operated ICFs, & lwd ID/DD in community. Significant work began & is underway to improve oversight to ensure health, safety, & quality of supports at TCs & esp. communities. In June '14, one Training Center (SEVTC) closed, & ongoing census reduction led to < 650 indiv. in the 4 remaining TCs as of Sept. '14. Annual funding for Waiver slots, however, is not adequate for need or wait lists. Regional crisis intervention programs (REACH) for adults w./DD were developed & begun, but creation of such svcs for youth is slow. Va agencies partner w/ stakeholders in planning Settlement Agreement implementation. Independent Reviewer monitors efforts for court. Moving people w.ID/DD out of NF has been much slower. Most on ID wait list need affordable housing, which remains limited. Some progress was made in local use of coordinated planning models for housing & transportation. Pilot project for supported, independent housing was developed. Quality of para-transit & Medicaid-funded human svcs. transport varies; local funds= limited. Local public educ. control in grades K-12 results in svcs. variability for students w. disabilities (SwD). While SwD performance has improved, significant achievement & graduation rate disparities continue; gaps widened since 2011. A diploma option w/ ltd. value was eliminated; work began to ensure that >SwD can achieve a standard diploma w/ credit accommodations, as needed. From 2008-12, the number of SwD betw. the ages of 18 - 22 grew, w/ a 18% increase in # closest to transition. In a VDOE survey, nearly 40% SwD are neither in higher ed. nor competitive employmt 1 year post-high school. Part C svcs. this yr. made birth prematurity = automatic eligibility, has > demand & > fiscal stress, causing unallowable wait lists (which were remedied) & inadequate, variable svcs by locality.

Section III: Progress Report - Goals and Objectives

Goal 1: Public awareness of inclusion as civil right

Individuals with developmental and other disabilities have improved opportunities for independence, productivity and self determination through promotion of full inclusion in education, employment, health and civic and community activities as a civil right and an investment in Virginia's future.

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance		
Education and Early Intervention		
Child Care		
Health		
Employment		
Housing		
Transportation		
Recreation		
Formal and Informal Community Supports	planned	addressed

Strategies	Planned for this Goal	Strategies Used
Outreach	planned	used
Training		used
Technical Assistance		used
Supporting and Educating Communities	planned	used
Interagency Collaboration and Coordination	planned	used
Coordination with Related Councils, Committees and Programs	planned	used
Barrier Elimination	planned	used
Systems Design and Redesign		
Coalition Development and Citizen Participation	planned	
Informing Policymakers	planned	used
Demonstration of New Approaches to Services and Supports	planned	used
Other Activities		

Intermediaries/Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	planned	used
University Center(s)	planned	used
State DD Agency	planned	used

Other Collaborators Planned:

DD Councils, State agency & professional assoc public information officers & marketing staff, State Board of Elections, VACIL, CILs, advocacy orgs, state disability agencies, local & state mass media, VCU Ctr on Aging, Office of Gov, VA Depts of Health, Criminal Justice Services, Social Services, Medical Assistance Svcs, CSBs, private & non-profit providers, Arc of VA, State Office on Volunteerism, NGOs, non-profit orgs, Sec. of Health & Human Resources, Dept. of Public Safety, PIP & YLF grads

Other Collaborators Actual:

DD Councils, State agency & professional assoc public information officers & marketing staff, State Board of Elections, VACIL, CILs, advocacy orgs, state disability agencies, local & state mass media, VCU Ctr on Aging, Office of Gov, VA Depts of Health, Criminal Justice Services, Social Services, Medical Assistance Svcs, CSBs, private & non-profit providers, Arc of VA, State Office on Volunteerism, NGOs, non-profit orgs, Sec. of Health & Human Resources, Dept. of Public Safety, PIP & YLF grads, CILs, VA Poverty Law Center, VA Sexual & Domestic Action Alliance, TTAC

Objective 1.1:

By 2016, 40 individuals with developmental disabilities will be supported by council efforts to share with public policymakers and the public, their experiences with community living, including but not limited to transition from an institution to the

community.

Implementation activities:

Plan, develop & implement a 5-Year communications plan to raise awareness of inclusion. Share personal stories of individuals with developmental and other disabilities living successfully in the community.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2011 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

During FFY2014, Council continued its public awareness efforts using a variety of activities:

Council participated w/ other DD Council communicators on campaigns for DD Awareness (March) & Nat. Disability Employment Awareness Mo. (Oct). Council participated in a social media campaign on Facebook, coordinating messages w/ other councils; the most popular posts in Mar14 had Facebook engagement (shares & likes) of 334 + reach exceeded 4100 unique views. Campaigns were supplemented by e-news messaging via Constant Contact & YouTube videos.

Council staff worked w/ other state agencies to further messaging. During Mar, the new Gov. recorded his first Public Service Announcement encouraging Virginians to find common ground w/ people who have DD. A proclamation, in conjunction w/ the Department for Aging & Rehabilitative Services, was signed in Mar. Both were featured on YouTube, Facebook & Virginia.gov online, resulting in 380 YouTube views & 864 unique Facebook views. However, networking among professional marketing associations was very limited due to staff time and financial constraints.

Similarly, time & fiscal constraints led to minimal creation of new content. New footage was used to create 3 recruitment videos for the Youth Leadership Forum (YLF); the 2-min. segments featured students, parents & staff. These videos were featured on the Council's website, receiving 484 YouTube views during FFY14. Previous videos for the YLF & Partners in Policymaking training programs were also included, generating more than 650 additional YouTube views.

A new photographic campaign promoted graduates of the Council's Partners in Policymaking (PIP) training program. Each photo featured a paragraph incorporating a quote from the individual; the campaign ran on Facebook for 24 straight days (featuring one grad per day). Press releases were sent to participant's hometown newspapers; media coverage was minimal, but social media engagement included 510 likes & 71 comments as grads shared photos w/ their personal networks.

Facebook continues to be the main social media outreach tool for Council; the number of likes increased almost 50% (from 683 to 1011) during FFY14. Engagement grows exponentially when users have original photos and content to share among their networks.

New videos for YLF and the Gov.'s PSA were the only ones created in FFY14. Supplementing the

Council's website & YouTube channel with existing video created during FFY 13 (17:00 min. documentary film - Place Matters- & short vignettes from the full-length film) have led to 1584 views of the full length film & 692 views of the vignettes. Place Matters was shown during two events during FFY14—to 60 conference attendees & to approx. 40 attendees at a legislative event for the Centers of Independent Living. It continues to have generate YouTube views.

A blog replaced the quarterly council newsletter during FFY14. 20 posts generated > 1200 views. Through this longer format communication, 2 students w/ disabilities who graduated in FFY13 from Council's YLF training program were interviewed. One student (A) had joined Spanish & book clubs at her high school, plus found the courage to model prom dresses for art design. She bought the dress she modeled & wore it to the prom. This student was motivated to pursue her scholastic goals, especially in writing. (A) also attended a week-long writer's conference in Southampton, NY after submitting work samples, transcripts & letter of recommendation; she wrote & recorded a spoken word poem inspired by the keynote speaker at YLF.

Another student w/ dis. (C) focused on her grades during her senior year to be "the best candidate I could be for college." She sharpened her writing skills through workshops & filling out numerous applications, one w/ "20 essay questions, each w/ a 250-500 word requirement, plus 6 video-taped responses & a phone interview." To help offset the cost of college application fees, (C) washed dogs, ran errands & participated in a variety of fundraisers. In addition to earning her high school diploma, (C) was recognized by her school principal w/ the President's Award of Excellence.

These 2 students, both of whom overcame numerous challenges, credited the Council's training program w/ helping them "stay focused" on plans they created during the week-long event.

Prior to the blog, Council produced a quarterly PDF newsletter. A story about self-employment featured (B), who has severe disabilities. (B) runs a dog-boarding business she started after graduating high school in 2012. (B) is supported by her mother, D & reported on her clients (both the 2-legged & 4-legged ones). She "gives them food & water, grooms them...my dad walks them for me right now because most of the dogs are not used to my wheelchair." (B)'s mother is involved in the disability field as a professional at the UCEDD.

To date, the Board has shared 14 stories (cumulative) of individuals with disabilities being included in their communities. This addresses Objective 1.1, which states: "By 2015, 40 individuals with developmental disabilities will be supported by council efforts to share with public policymakers and the public, their experiences with community living, including but not limited to transition from an institution to the community.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0

SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	103,889
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 1.2:

By 2016, 1,000 individuals with developmental and other disabilities will obtain information, supports and/or resources that improve access to and participation in civic and community activities.

Implementation activities:

- a. Contract with State Board of Elections to conduct program, "Improving Voter Access."
- b. Conduct outreach to organizations to educate them about including individuals with disabilities in volunteering.
- c. Identify and promote opportunities in underserved areas for paid and volunteer participation by Virginians with disabilities at polls during primaries & elections (state and national).

Activities undertaken were: All met Partially met Not met

Timelines:

- a. April 2012 - March 2013
- b. October 2013 - September 2014
- c. April 2014 - March 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

- b. In FFY2014 Council staff met with the Community Foundation (which provides support to

many community organizations about efforts to engage individuals with disabilities as volunteers. Unfortunately, the Community Foundation conveyed that many of their organizations are currently losing funding, downsizing and would be resistant to take on another goal. As a result, Council staff amended the FFY 2015 State Plan to end this activity in September 2014.

c. During this reporting period, Council staff explored hiring & volunteer opportunities for people with disabilities to work during primaries and elections with staff leaders at the Virginia Department of Elections (VDE). VDE staff advised that hiring registrars & individuals to work at the polls is highly competitive and that using volunteers typically was not done by local registrars. VDE registrars voiced concern that individuals with DD & other disabilities would not be able to work the long election day (i.e., work begins as early as 5 am & can last late into the night). Although Council advocated for hiring, VDE could not support this initiative. As a result, Council staff amended the FFY 2015 State Plan to end this activity in September 2014.

Virginia passed legislation during 2013 requiring a picture ID be provided in order to vote. The VDoE requested consultation about strategy for outreach as some individuals with disabilities do not have an ID. VDoE met with Council staff to discuss increased outreach to inform individuals with disabilities about polling precincts having equipment to make IDs. VDoE wrote a Blog to encourage voting among individual with disabilities for the Council's website. A representative from VDoE presented to the Board about the new law and the process to obtain picture ID's free of charge.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:

\$0

Objective 1.3:

By 2016, 250 individuals with developmental and other disabilities will obtain information and/or resources that educate them on protective measures against abuse and exploitation.

Implementation activities:

Liaison work to include:

- a. Planning and implementation of an Aging & Disabilities conference on long-term care supports.
- b. Work with partners on collaborative strategy development to educate individuals with disabilities.
- c. Liaison with Governor Domestic Violence Prevention & Response Advisory Board towards prevention of domestic and familial violence for people with DD and other disabilities.
- d. Grant project, Leadership for Empowerment & Abuse Prevention (LEAP), administered by VCU Partnership for People with Disabilities (UCEED) to educate people with developmental and other disabilities about how to protect themselves from sexual assault and domestic violence and developing healthy relationships.

Activities undertaken were:



All met

Partially met

Not met

Timelines:

- a. October 2011 - September 2016
- b. October 2011 - September 2016
- c. October 2011 - September 2016
- d. October 2013 - September 2015

Timelines established were:



All met

Partially met

Not met

Annual Progress Report:

- a. Council staff determined the Aging and Disability Conference was more appropriate to be placed within State Plan objective 2-13 as it relates to individuals with developmental and other disabilities having the supports needed to “age in place.” Therefore, that activity is reported within that objective and a revision has been made to the 2015 State Plan Update.
- b. The Council is an active member of the ICAN Accessibility Project Steering Committee. This is an initiative which is led by the Supreme Court of Virginia and Virginia Commonwealth University. Members represent the independent living community, health, law enforcement, sexual assault support providers, lawyers, the Virginia Poverty Law Center, and emergency responders including public safety officers. Several disability associations are also represented as well. Quarterly meetings occur throughout the year, providing education on current practices in the administration of protective orders. Specific protocols have been established by this Committee to ensure people with disabilities have assistance navigating the courts system. Assistance is given by Centers for

Independent Living to individuals with disabilities who have experienced exploitation and violence. A curriculum is updated each year by this Committee to ensure current practices are aligned with state and local law. This year topics of bullying, human & sex trafficking, and health disparities were featured.

Council also is an active member of the Advisory group (non-voting) for the Virginia Brain Injury Council (VBIC), which meets quarterly. Planning priorities were determined for 2014 and addressed at VBIC meetings: neurobehavioral services; education & coalition building; systems change; and action steps. This year top legislative priorities for VBIC were: access to a full range of brain injury services, including crisis stabilization; ; and preservation & expansion of core BI services

DARS will continue program funding for the Traumatic Brain Injury Grant until the General Assembly takes action on the budget. The Va. Brain Injury Association, in collaboration with Centers for Independent Living (CILs), began promotion of a national curriculum to educate individuals with Brain Injury about healthy relationships as well as protection from financial exploitation, domestic violence & sexual assault. They are using one of the curriculums reviewed by the Steering Committee of LEAP (the ESCAPE curriculum) for the training.

c. During this performance period, staff to the Council participated in the Sexual Assault and Domestic Violence Alliance Leadership Council, including participation in its Strategic Planning Session, which will lay out goals and primary objectives for the next five years. this group meets quarterly. Other participants were local health officials, operators of SA/DV programs, and the Family & Children's Trust Fund. The participating state agencies (Virginia Department of Health, Department of Social Services, and Criminal Justice Services) reported uncertainty about continuation funding in several program areas and significant reduction to funds in general. However, state leadership has become more interested in prevention programs. Council worked to improve inclusion of individuals with developmental disabilities in long-term planning for abuse/neglect prevention initiatives and programs.

d. In 2013, Council awarded a grant totaling \$178,125 to Va's UCEDD, the Partnership for People with Disabilities (PPD), for the project: Leadership for Empowerment and Abuse Prevention (LEAP). The project began on October 1, 2013. The purpose of the project is to teach people with developmental and other disabilities about healthy relationships and how to protect themselves from assault, abuse, neglect and violence.

In Year 1 of the project, a Curriculum Review Committee (CRC) was formed. After reviewing existing curricula in use nationwide or in other states, the committee recommended that PPD develop a LEAP curriculum, because there was no acceptable curriculum available that could be adapted for use in Virginia. The curriculum development required a very significant increase in the amount of time for this task by project staff members and a great deal of collaboration between CRC members.

Six trainers with disabilities and six co-trainers were instructed on LEAP training, but one person did not complete the training (SA01 = 11). Four train-the-trainer sessions, facilitated with Safe Harbor, were held in August and September in Richmond. The format for the sessions used principles of Universal Design for Learning to ensure that the trainers received the information in a format that they would understand. Topics included: background of domestic violence, healthy relationships, healthy sexuality, sexual assault myths and facts, triangle of abuse, how to be an effective facilitator, disability etiquette and awareness and basic training techniques. Pre- and post-evaluations were conducted with each trainer. The LEAP curriculum was implemented in August to train the trainers selected.

The pilot LEAP training for individuals with disabilities will be conducted at Southeast Virginia Training Center (SEVTC) in October 2014 (FFY15). Originally, this activity was to be conducted in August or September 2014, but is slightly behind due to curriculum development taking longer than expected. It is expected that approximately 180 individuals with disabilities will be trained in FFY15.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	11
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 1.4:

By 2016, in collaboration with advocacy partners, the Council will support or influence at least 25 proposed policies, laws, regulations & budget actions to ensure they are non-discriminatory, culturally competent and consistent with the tenets of a fully included life.

Implementation activities:

- a. Monitor state agency policy, legislative & regulatory proposals, and develop/submit public comment as indicated. Council on an ongoing basis advises the Governor, the legislature, & other state agencies on emerging & current disability issues, focusing on problem solutions. Expand social media postings on policy & related issues, to include self-advocates on policy positions.
- b. Promote the Benchmarks for Policymaking" to new target audiences, including at local and regional levels.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2011 - September 2016
- b. October 2012 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. During this performance period, Council staff worked collaboratively with the Office of Cultural Racial and Linguistic Services at the Department of Behavioral Health & Developmental Services (DBHDS) to build a conference that would engage participants in developing a tool kit which would lead to statewide practices for engaging new immigrant families of youth w/ developmental disabilities. Representatives on the team included individual support providers and local Community Services Boards from the central Virginia region. While the conference draws attendees from throughout Virginia, efforts were made this year to include outreach to staff at state training centers to assist & support transformation of the ID/DD service delivery system to a more community based system of services & supports. The "Building Bridges IV" Conference Planning Team reviewed research studies which were distributed for content discussion: "Racial and Ethnic Considerations in the Assessment, Diagnosis, and Treatment of Individuals with Intellectual and Developmental Disabilities," "Culturally Sensitive Collaboration Within Person-Centered Planning", and "How We Make It Happen: Across Boundaries' an anti-racist, holistic service delivery model." The team utilized links to a new resource site: http://www.geneticcounselingtoolkit.com/cross_cultural_communication.htm to identify already invented tools and educational materials for the conference which will be held in October 2014.

b. Due to time and effort of all program staff in developing the Disability Assessment, combined with other priorities, Council did not address promotion and outreach for the Benchmark document in FFY14. Activities will occur in FFY15.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

- SA01 People trained in area related to goal/objective: 0
- SA02 People trained in leadership, self-advocacy, and self-determination: 0
- SA03 People trained in systems advocacy: 0

Performance Measure 1.2 (self-advocacy/advocacy):

- SA04 People active in systems advocacy: 0
- SA05 People attained membership on public/private bodies and leadership coalitions: 0

SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 1.5:

By 2016 (through VBPD collaboration with at least 5 public and private entities), first responders, public safety agencies and justice system entities will improve their emergency preparedness policies and response protocols to better serve individuals with developmental and other disabilities and will include these individuals in preparedness planning efforts.

Implementation activities:

- a. Explore social media opportunities.
- b. Liaison work to ensure individuals with dev and other disabilities are included in Emergency Preparedness planning, response & recovery and public safety agencies are educated on needs of individuals with developmental and other disabilities.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2013 - September 2016
- b. October 2011 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

- a. During this period Council staff wrote 1 blog about emergency preparedness and the

importance of preparation for individuals with special needs to have specific supports before, during and after a disaster and during recovery. Council staff has developed multiple relationships with Emergency Preparedness Response and Recovery entities during this performance period. Council staff participated in the Virginia Emergency Management Association (VEMA) Marketing Public Relations and Outreach Team meetings as well as the Virginia Emergency Management Alliance. Staff routinely distribute Council materials and engage in dialogue to ensure the inclusion of individuals with disabilities at every level of emergency response preparedness planning response and recovery.

b. During FFY 14, Council staff continued to provide leadership at the Secretary for Health and Human Resources Emergency Preparedness and Response & Recovery (SHHREPRR) Team which meets monthly. Representatives include leaders from every agency in the SHHR as well as agency leaders from other secretariats which have a role as responders in the event of a disaster. The team ensures participation by its members in disaster exercises in Virginia, and prepares an annual report to the Secretary. Development of this annual report resulted from Council recommendation (SC01= 1). Each year, the team develops a work plan to improve preparedness awareness among the general public, as well as targeted outreach to IwD through disability services agencies. Council continues to ensure individuals with developmental and other disabilities are informed of disaster planning.

Council staff also participates on the Health & Human Resources (HHR) Sub-panel, a state level panel lead by the Commissioner of Health, a General Assembly member, and the Secretaries of HHR and Public Safety & Homeland Security. The panel meetings focus on: issues & activities of the US Center for Disease Control (CDC); & the state response to emergent health and safety concerns. Council participated in a variety of training courses and sessions during the last fiscal year. As indicated, Council staff provided feedback on materials under development or in use regarding whether or not content is person-centered and can be easily understood by individuals with disabilities and their families. Among the training activities this year were the following (1) Community Based Emergency Response Series: Psychological First Aid; (2) the Commonwealth Recovery Committee; (3) a Public Safety Workgroup which addressed interaction law enforcement with individuals with disabilities; (4) Individuals with Disabilities Survivor Day; (5) FEMA webinar series on Emergency Preparedness Planning for Children.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	1
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Section III: Progress Report - Goals and Objectives

Goal 2: Eliminate dual system

State financial supports and policies will be directed to expanding community infrastructure, services and supports for individuals with developmental and other disabilities through the elimination of Virginia's dual system of services (institution and community).

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance		
Education and Early Intervention	planned	addressed
Child Care		
Health	planned	addressed
Employment	planned	addressed
Housing	planned	addressed
Transportation	planned	addressed
Recreation		
Formal and Informal Community Supports	planned	addressed

Strategies	Planned for this Goal	Strategies Used
Outreach	planned	used
Training	planned	used
Technical Assistance	planned	used
Supporting and Educating Communities	planned	used
Interagency Collaboration and Coordination	planned	used
Coordination with Related Councils, Committees and Programs		used
Barrier Elimination	planned	used
Systems Design and Redesign	planned	used
Coalition Development and Citizen Participation	planned	used
Informing Policymakers	planned	used
Demonstration of New Approaches to Services and Supports	planned	used
Other Activities		

Intermediaries/Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System		
University Center(s)	planned	used
State DD Agency	planned	used

Other Collaborators Planned:

Various state agencies for disability, education, health, med assistance svcs, aging & rehab, housing & trans, social svcs, Dis Commission; Autism Center, state med/dental schools; SSEAC, ESOs, CSBs, VA APSE, VACIL, Arc's, Arc of VA, Hope House Fnd, Voices of VA, local AAAs, State assocs of health professionals, homecare, hospital assoc, healthcare, financial planners, homebuilders; local Health clinics, private dental practices, high schools, community colleges, CILs, SILC, VCU RRTC, DRPT

Other Collaborators Actual:

Various state agencies for disability, education, health, med assistance svcs, aging & rehab, housing & trans, social svcs, Dis Commission; Autism Center, state med/dental schools; SSEAC, ESOs, CSBs, VA APSE, VACIL, local Arcs, Arc of VA, Hope House Fnd, Voices of VA, AAAs, State assocs of health professionals, homecare, hospital assoc, healthcare, financial planners, homebuilders, architects; local Health clinics, private dental practices, high schools, community colleges, CILs, SILC, VCU RRTC, DRPT, VA Oral Health Coalition, Coalition to Improve School Safety

Objective 2.1:

Improve access to community based services and supports that will lead to successful post-secondary education, training and employment for students with developmental and other disabilities by raising policymaker awareness of student

needs and supporting at least 3 policies or initiatives that expand access to needed supports for students exiting school.

Implementation activities:

a. Develop product to disseminate to policymakers & families to impact awareness of supports leading to successful employment/education following secondary education.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2013 - September 2015

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. Council staff started development of a transition product that will educate policymakers and families about supports that lead to successful employment or education following secondary education. The product is based on data provided by Virginia Dept. of Education for the Council's 2014 Assessment of the Disability Services System in Virginia. Additionally, Council worked with Virginia Commonwealth University's Center for Transition on the product. Major components are: definition of transition (transition = work), and the key predictors to success (such as parent aspiration and students working during school years). The product was expected to be completed this year for use in 2015 General Assembly Session, however, coordinating with VCU Center for Transition and Council's Education-Employment Committee caused the project to be behind schedule. This will be completed later in FFY 2015.

Council staff is also active in liaison activity related to transition. The DD Council serves on the ACE-IT Advisory Council. ACE-IT is part of the national Think College Program and was established at Virginia Commonwealth University (VCU) through a collaboration of the VCU Partnership for People with Disabilities (UCEDD), the Center for Teaching Excellence, the VCU Rehabilitation Research & Training Center, the Vice Provost of Student Affairs, and the Vice President of Academic Affairs. This initiative, aimed at youth ages 18-26 with ID/DD, provides a 30-month inclusive, individualized college campus experience through which students can earn a certificate for successful class completion. The ACE-IT Advisory Council hopes to expand this program to other colleges & universities. Through a federal grant, VCU partners additionally identified & collaborated with faculty statewide to improve supports available to college/university students with DD; monitored progress of higher education practitioners & programs in attracting/supporting students with DD. Although there have been challenges in the community college system, which requires testing for admission, a few 4-year universities are willing to accept youth who have not met general admission requirements in order to attend regular courses. It is hoped that these efforts will improve supports that encourage students with DD to enter college. ACE-IT created a best practices document, "Think College Standards, Quality Indicators and Benchmarks for Inclusive Higher Education," which was distributed to high school youth with disabilities. The team successfully launched a series of videos this year which were used in social media (YouTube & Facebook) to promote higher education programs to youth with DD and their families.

During FFY14, there were 20 participants in the program, of whom two individuals completed the program in December 2013. The 2 graduates, who had internships & job supports, left the program with competitive jobs. The ACE-IT Advisory Council succeeded in adding new

members: the Alliance for Full Participation, Autism Center for Excellence, Virginia Autism Council, Brain Injury Council, The Arc of VA. The members of this collaborative developed action steps for the next three years, including the following priorities: Education and Awareness; K-12 System Improvements; Financing; College Admission and Access issues.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	3
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.2:

Improve opportunities for post-high school success in education, training and employment for students with disabilities by supporting at least one replicable project that has an Employment First philosophy as its foundation.

Implementation activities:

- a. Demonstration project (grant) to Valley Associates Independent Living to work with school divisions in the Valley region, "Opportunities Abound: Early Planning for Your Future." Project

uses Employment First philosophy to educate school personnel, families and students on planning for employment.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2012 - September 2015

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. In 2012, Valley Associates for Independent Living (VAIL) was awarded a \$40,000 grant to develop and implement: "Opportunities Abound: Early Planning for Your Future." Originally, this was a 3 year grant, but in 2014 VAIL requested a one year, no cost extension which was approved by Council. Also, originally this grant was a partnership between VAIL and another CIL, Resources for Independent Living in Richmond. RIL dropped out of the grant after Year 1, citing difficulty in resolving unexpected barriers. By the end of Year 1, they did not have any participants in their program. Council was in agreement that it was best for the grant project for RIL to drop out.

VAIL is a Center for independent Living (CIL) serving the Shenandoah Valley region and has established early transition programs with 4 public school divisions (SC01 = 4): Cities of Waynesboro & Harrisonburg, and the Counties of Rockingham & Highland. The purpose of the project is to educate students, families and school professionals about beginning career exploration and transition planning for students with disabilities in elementary and middle schools and to design Individualized Education Plan goals with the ultimate result of self-sufficiency, higher education and employment. In FFY 2014 VAIL added 11 student participants to the program, bringing the total participants to 12. The reason for requesting an additional year was because it has been much more difficult than expected to enlist participants, mostly because of parental/guardian reluctance. VAIL has increased the number of workshops conducted and is working closely with the schools to improve the outcomes.

In FFY 2014 VAIL conducted 77 workshops, training 184 students, parents and professionals. Many of the participants attended multiple workshops (SA01 = 184). Workshop topics included: Medicaid waivers, self-determination, career exploration, SSI and SSDI work incentives. Workshop activities varied, but all addressed students' abilities to self-identify, advocate and explore aspects of self-determination, as well as different careers. VAIL is in the process of establishing baseline data for each student to enable tracking of progress during the 5-year follow along. In addition, two programs have been improved (SC01 = 3) following VAIL workshops: A teacher for a Multiple Disabilities classroom at Skyline Middle School and Berkley Glenn Elementary School has added Career Exploration activity to her curriculum with students. She also started a transition portfolio with her students (not required until 9th grade). A Special Ed teacher in grades K-5 at William Perry Elementary added a career exploration activity to her class schedule.

Council staff has worked closely with VAIL to address barriers. Since they are having a problem with participants' parents communicating with them, Council staff has suggested that at the least they send information and resources in writing to the parents. VAIL is having more success where they can work directly with the participants' teachers. Although there are two years remaining in

the grant project, VAIL does not think it will reach its target of 20 participants, however, they will continue the workshops and strive to add new participants.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	184
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	7
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.3:

Expand opportunities for fully integrated, competitive employment of individuals with developmental and other disabilities by supporting at least one regional or statewide employment project utilizing best practices; e.g. customized employment, mentoring and post-secondary training.

Implementation activities:

- a. Customized Employment Post-Grant follow-along for two years.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2011 - September 2013

Timelines established were: All met Partially met Not met

Annual Progress Report:

Objective completed in FFY2013.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.4:

By 2016, support at least 3 policies that advance the implementation of an Employment First policy in VA, as well as other policies and/or initiatives which provide employment and/or create incentives for integrated, competitive employment of individuals with developmental and other disabilities.

Implementation activities:

- a. Continued activity on State Employment Leadership Network Advisory Group and implementation of Employment First policy in Virginia.
- b. Participation on WorkWORLD (web-based benefits planning) and other advisory groups.
- c. Employment First training for adult self-advocates.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2011 - 2016
- b. October 2011 - September 2016
- c. October 2015 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. The DOJ Settlement Agreement requires, to the greatest extent possible, that the Commonwealth must provide individuals in the target population under the Settlement Agreement with integrated day opportunities, including supported employment. The Settlement also requires that the Commonwealth maintain its membership in the State Employment Leadership Network (SELN) and establish a state policy on Employment First for the target population. An Employment First policy includes individual supported employment in integrated work settings as the first and priority service option for individuals with intellectual or developmental disabilities receiving day program or employment services from or funded by the Commonwealth. The goal of employment services is to support individuals in integrated work settings where they are paid minimum or competitive wages.

Council continues to participate on the SELN Advisory Group, among other agencies. In 2014 the priority items were:

* Collection of employment data from all providers and funding types (not just target population for DOJ Settlement Agreement) and establish baseline employment data for individuals with disabilities and making recommendations for 5 year employment targets (5% increase each year); the SELN created a subcommittee to compile and analyze all data collected; this will continue in FFY2015.

* Review and make recommendations to the case manager training curriculum. Training includes: definition of integrated employment; involving the person & family; myth busting on employment for IwD; counseling on benefits and work incentives; career planning; accessing services; and the role of the case manager. The advisory group recommended that the training be mandatory – a decision is pending. The SELN also reviewed and provided recommendations to the Integrated Day Activity Plan and the Waiver redesign under the DOJ Settlement Agreement.

Council also participates on the Virginia Business Leadership Network's (VABL N) Community Advisory Council. The VABL N is a business-to-business non-profit organization of employers who believe in and know the corporate bottom-line benefits of employing people with disabilities and marketing to this consumer group. The VABL N educates businesses on hiring and

retaining individuals with disabilities as key employees. In 2014 the VABLN Community Advisory Council planned and held a gala to raise funds to support training, technical assistance, and outreach to employers working with people with disabilities, those not yet employing people with disabilities who wish to do so, and others who have not necessarily considered this talent pool. Over 170 people attended. Sponsors included Dominion Power, VCU Health System, Market Corp., Aerotek, Guardian Parking Services, Dept. for Aging & Rehabilitative Services (DARS), ATLFA, Alliantz, Career Support System, Williams Mullen, and Merck Pharmaceuticals. The gala included a silent art auction featuring art by people with and without disabilities. In addition, VABLN focused this year on developing a program to increase employment for veterans with disabilities which will be held in FFY2015.

In 2014 Council partnered with VA APSE (Association of Persons in Supported Employment) to develop a "Take Your Legislator to Work" (TYLTW) campaign. VA APSE has received permission from the Wisconsin DD Council to will use their toolkit. State delegates/senators will be strategically targeted and DARS will recommend successful placements and employers in the legislator's area. The legislator will visit the employer/employee and have a tour of the site, etc. The objective is to educate the legislator on different types of jobs (i.e., not typical) and the varied skills of people with disabilities. The goal of the group is to get 5 legislators in FFY2015 and then use that to promote the program and increase the target in FFY2016.

b. This workgroup activity has ended as the Dept. for Aging and Rehabilitative Services (DARS) is administering the WorkWorld software. As reported in FFY2013, WorkWorld was developed, maintained and customized for Virginia by the VA Commonwealth University Employment Support Institute. Funding ended in 2013 and DARS entered into a license agreement with VCU to maintain the software. This activity is updated in the 2015 State Plan Update.

c. In FFY2014 Council determined that Employment First training was not a feasible activity due to lack of funding. The 2015 State Plan Update deletes this activity from the State Plan.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0

SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.5:

By 2016, in partnership with non–disability entities, increase access to quality integrated patient centered medical and dental care for individuals with developmental and other disabilities by supporting at least 3 policies, practices and emerging approaches to health care.

Implementation activities:

- a. Identify and join healthcare coalition for policy development and advocacy for: expanded accessibility to (including, but not limited to physical, environmental, technological and communication accessibility) and availability of health services, including dental and integrated patient-centered models of care.
- b. Liaison/partnerships to develop and implement DD curriculum and continuing education programs that incorporate integrated, patient-centered models.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2013 - September 2016
- b. October 2012 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. Council staff has continued its engagement in advocacy to improve health and dental care in Virginia. One staff member serves on the Advisory Council on Health Disparities & Health Equity (ACHDHE) to the Commissioner of the state Department of Health (VDH). The purpose of ACHDHE is to provide recommendations to develop or improve VDH initiatives, programs & policies in order to reduce health disparities statewide. During FFY 14, ACHDHE reviewed VDH initiatives to: increase availability of affordable fruits & vegetables; improve feeding programs for low income children; increase supports to veterans, especially those with disabilities, of the Iraq & Afghanistan wars; expand culturally competent healthcare workforce; & various legislative proposals.

Relatedly, Council staff was invited to & participated in the 1-day VDH/HHR Secretariat conference, “Excellence in state Public Health Law”. Va. is one of only 8 states to receive a

federal grant award to improve health policy development processes as well as public/private partnerships and stakeholder engagement to improve public health outcomes. At this conference, agency and stakeholder feedback for improvements was made for incorporation into planning & implementation of policy model for state. VDH will rollout change plans in FFY15.

Council staff regularly monitored activities of the legislative Joint Commission on Health Care (JCHC), including several sub-committees. Key issues under examination by the JCHC are: effective methods for expansion/retention of healthcare professionals; & role/scope of VDH & “safety net” private/non-profit organizations in providing healthcare & dental care to low income populations & underserved localities. Council provided public comment to the JCHC for legislative action in 2014 session to fund expansion of Medicaid coverage for routine dental care: 1.) preferably to all low income adults, or 2) at least to pregnant adult women; & 3) include Va. Dental Hygienists Association as an ongoing partner in future need assessment activities. JCHC adopted the latter option (SC01=1).

During FFY13, Council provided extensive public comment, in writing & through participation at stakeholder meetings, to the state Medicaid agency (DMAS) on contractual requirements for health plans implementing the Commonwealth Coordinated Care (CCC), managed care project for “dual eligibles”. DMAS adopted 11 of Council’s 17 recommendations language changes into final contract to ensure: person-centeredness, cultural competence, care coordination, health promotion, individual choice, community integration, accessible communication & marketing, & quality assurance (SC01=1). CCC Partnership Agreement was accepted by CMS & implemented in January 2014.

As part of its involvement with the DOJ Settlement Agreement, Council provided public comment on the DBHDS draft plan for creation of the DBHDS DD Health Support Network. Council recommended improvements & changes on: dental services, tele-medicine use, infra-structure for community (not institution based), outcome measurement & program evaluation, & clear short & long term goals with action steps. Comments went to & were discussed with DBHDS staff (SC04=2) & the Secretary & Under Sec. HHR (SC04=2)

b. Council continues to partner with various coalitions to improve access to & availability of affordable health and dental care for Virginians with disabilities: Virginia Nursing Association Coalition; Virginia Oral Health Coalition; the Virginia Waiver Network Coalition; & (most recently) Virginia Dental Hygienists Association (VDHA). During FFY14, for the first time, Council Executive Director & policy staff member met with the director & legislative liaisons for VDHA, one of whom is faculty at Old Dominion University (ODU) School of Dental Hygiene. Council staff shared a “People First” guidance document for writing to the faculty member reviewed & provided feedback on the curriculum at ODU.

Council staff this FFY attended the annual Oral Health Summit sponsored by Va. Oral Health, the Va. Dental Association, and VCU School of Dentistry, among others. Its theme was “the Future of Oral Health Dentistry”. An expected outcome from the “Improving Oral Health” grant project will be revision of curriculum at VCU School of Dentistry to focus on serving individuals with disabilities.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	2
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	4
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.6:

By 2016, increase access to community-based health and dental care that uses integrated patient centered models for individuals with developmental and other disabilities by supporting at least one project that creates incentives for quality care.

Implementation activities:

a. Grant project, "Improving Oral Health for Adults with DD," administered by VA Oral Health Coalition.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2013 - March 2015

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. A Council funded project, "Improving Oral Health for Individuals with Disabilities" was conducted in FFY14. The goal of the project was twofold: to expand the number of dental

professionals trained to serve IwDD; & to provide oral hygiene education & clinical services to IwDD. This project had several components. First the grantee, Virginia Oral health Coalition (VaOH) created a project planning team in collaboration with VCU School of Dentistry and the Va. Dental Association. The VaOH planning team first created a survey for individuals with DD and their caregivers to gain a deeper understanding of their personal oral health knowledge & practices as well as their needs & access issues; and developed an interview question guide to be used in focus group sessions with individuals with DD, family members & caregivers.

Surveys were distributed, resulting in 120 responses, & 2 focus groups were held. Issues discussed in the focus groups included barriers & challenges that providers and families faced getting care for the individuals they support, especially payment & accessibility issues. Focus group comments indicated that, because state Medicaid would not pay for preventative dental care, many people w/ severe disabilities or behavioral issues do not get basic dental care and end up w/ tooth extractions. Providers noted that some people w/ disabilities were in pain & when working w/ those ind., there was a great need for better oral hygiene & education. Fear, which affects people both w/ & w/out disabilities, has led to people being afraid to have someone look in their mouth, get into a dental chair, or be in pain so people don't want to brush their teeth because it hurts. Training was lacking for nurses, hygienists, & dentists. Frustrations w/ the person's behavior & long waiting lists contributed to oral hygiene problems developing over years due to a lack of preventative care. Building trust is crucial & often that trust begins w/ the care provider (showing how to brush teeth w/ repetition) & the dentist (explaining what they are going to do).

Based on the information gained, VaOH planning team developed a 2-day training for dentists & dental hygienists; developed topics/content for provider training & client handouts. On day 1, dental professionals received didactic training. The second day included: hands-on dental care to individuals w/ DD recruited from communities as well as education on oral hygiene to the individuals & their caregivers. In addition, throughout the project 2 Externs from the VCU School of Dentistry received didactic & hands-on training as part of residency training to serve IwDD (SA01= 2); & externs provided dental care under supervision to 84 individuals w/ ID/DD. The Extern training will add new dental professionals who are willing, skilled & knowledgeable in serving those w/ DD to the dental workforce. During FFY14, trainings were held in: Richmond & Lynchburg. A total of 37 dentists & dental hygienists (SA01) were trained & 20 indiv. w. ID/DD received dental care. These same individuals later received a followup dental visit paid through the grant project. Thus far, 15 new partners (community providers) were recruited for & engaged in the trainings (SC03= 15) across the two areas, such as: residential providers (SupportOne, DePaul Community Resources, Presbyterian Homes & Family Services) and health providers (Horizon Behavioral Health & Free Clinic of Central Virginia). Through these efforts, more individuals with DD & caregivers gained knowledge & dental care to improve oral hygiene.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	39
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0

SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	15
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.7:

Increase the availability of integrated housing controlled by individuals with developmental and other disabilities by supporting at least 2 policies or initiatives that promote the separation of housing and services.

Implementation activities:

- a. Policy and advocacy work with/on relevant workgroups and agencies.
- b. Housing Plan developed through DOJ settlement agreement.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2012 - September 2016
- b. April 2013 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

Virginia was required to develop a comprehensive housing plan under the terms of the DOJ Settlement Agreement. The Virginia DD Council was specifically named in the Settlement Agreement as a required member of the team that would be developing the housing plan. A corner stone of the plan that was submitted is the de-coupling of housing and services, such that service provision and housing decisions are separate and distinct, so that an individual's choice about where they live is a separate decision from where they may obtain services. This will result

in more individuals with intellectual and developmental disabilities and their families having more choices of where to live and increased accessibility to affordable opportunities to live independently. Historically, individuals with intellectual and developmental disabilities have resided in congregate housing settings in which the service and housing provider were one and the same, thereby creating a situation in which an individual's housing and services choices are inextricably linked." One strategy being implemented through the plan is the development of state funded rental subsidy, for which the DD Council has been advocating for a number of years. The Council participated in the program design for the rental subsidy program which was approved by the Governor's office and is now being implemented. Rental Choice VA is utilizing the \$800,000 from the Settlement Agreement to subsidize independent living options for 20 individuals in the Tidewater and Northern Virginia areas. Recruitment has been very slow. Two individuals in Fairfax have transitioned to their own home. There are approximately 2-3 others in various stages of the process. FFX continues to conduct outreach to potential applicants including presenting at the People First meeting held by the ARC of Northern Virginia. The 1st individual is slated to transition in VA Beach. There are barriers that still need to be addressed. Some landlords require a minimum income which makes it impossible for someone with rental assistance to qualify for a unit. There is a limited funding duration for Rental Choicer VA. Most properties that accept rental assistance have minimal to no vacancy. It has been difficult for individuals to identify potential roommates within a reasonable timeframe. The Housing workgroup has continued to develop strategies to address these barriers such as the following: (1) Local partners should work directly with the VHDA tax Credit program to resolve issue regarding minimum income requirements for voucher holders; (2) Need ongoing communications with landlords, individuals and their families, providers case managers, etc.; (3) Need to drill down to determine what the actual barriers are; (4) Should explore options to partner with other disability groups; (5) DBHDS should continue to pursue the annualization of the \$400,000 for rental assistance for the 20 individuals; (6) DBHDS should continue its efforts to develop a case management module for support coordinators/case managers; (7) VA Beach should consider conducting additional outreach similar to what has been done in Fairfax; (8) Consider providing tours of properties where individual with I/DD are currently living independently; and (9) Need to have continued conversations with families regarding independent living choices and options for individuals. Council has continued to be an integral part of the DOJ Housing workgroup as the group worked to refine RentalChoice VA and address identified barriers and will continue to be actively engaged in ongoing meetings and policy discussions. In May 2014, the Commonwealth of Virginia submitted an application for HUD Section 811 Project Rental Assistance program funding. This funding, if awarded, will link rental assistance to approximately 130 units in the target regions of northern Virginia (Alexandria, Arlington, Fairfax City, Fairfax County, Falls Church, Loudoun, and Prince William) – 70 units and Hampton Roads (Chesapeake, Hampton, Newport News, Norfolk, Portsmouth, Suffolk, and Virginia Beach) – 60 units. The proposed target population includes individuals with an intellectual disability, developmental disability, and/or serious mental illness; with individuals included in the DOJ target population receiving a waitlist preference over individuals with serious mental illness. The Council participated in the development of a similar application in 2013 that was not submitted for a variety of reasons. Council supported the 2014 application but stakeholders, including, but not limited to, Council, were not asked to participate in its development which was completed by DBHDS and the Housing agencies.

Through the public comment process, Council recommended to Dept. of Housing and Community Development that priorities for that agency's Consolidated Plan should be established for the DOJ Settlement Agreement's target population. In order for the development of affordable rental housing for the target population to occur on the scale needed, significant and meaning cooperation and partnership between state housing agencies (VHDA, DHCD, PHAs) and service agencies needs to be actualized. Examples of such recommended cooperation and shared

responsibility included those found in federally mandated planning documents such as the Consolidated Plan, which prioritizes HOME funds and other housing resources, and the Qualified Allocation Plan, which sets the parameters for the Low Income Housing Tax Credit program (LIHTC). Both plans prioritize Virginia's federal housing resources based on the needs of the state.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.8:

By 2016, expand housing options by supporting at least one policy or project that facilitates the building of multi-family and community housing options using visitability and universal design standards.

Implementation activities:

- a. Increasing the Use of the Transportation & Housing Toolkit, grant with Thomas Jefferson

Planning District Commission.

- b. Support and contract with EasyLiving Home Program to continue educating housing professionals, encouraging the building of EasyLiving Homes with UD and visitability and certifying EasyLiving Homes.
- c. ABLE: Advocates Building Livable Environments, grant awarded to VACIL.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2011 - March 2012
- b. October 2011 - June 2016
- c. October 2013 - September 2014

Timelines established were: All met Partially met Not met

Annual Progress Report:

Consistently, Virginia's approach has been to develop relationships with non-traditional partners. Council collaboration with trade groups like the Home Builders Association of Virginia and the Virginia Association of REALTORS has raised member awareness of the housing needs and preferences of individuals with disabilities. State housing finance and community development agencies plus building code officials are another segment, along with Community Development Financial Institutions (CDFIs) and architect and design professionals. Through these liaisons the Council has been able to influence policy and program outcomes that have improved housing opportunities for individuals with disabilities.

b. Easy Living Home:

The Council and its partners, traditional and non-traditional, have come together to collaborate, recognize mutual interests and individual system challenges and to work toward common goals. For example, Virginia's EasyLiving Home (ELH) program promotes the development of single family homes that meet specific Universal Design (UD) and visitability standards. Through Council and its many partners work, voluntary UD standards, modeled after EasyLiving Home certification standards and mentioned in greater detail below, have been included in Virginia's Uniform Statewide Building Code.

The EasyLiving Home project promotes the building of new residences with "visitability" and universal design features. The Council continues to be active in the promotion and expansion of the ELH program. One new builder was ELH certified this year, M.H. Eades, Inc. (SC03=1). Another builder, Southern Development, built 13 ELH certified houses this year (SC03=1) in the subdivision, Dunlora Forest, in Charlottesville. A community event was held in recognition of the first community in Virginia to offer "ELH" as a standard feature and to include multiple ELHomes in the subdivision.

In June 2014, the National AARP published an article on ELH and livable communities in their national magazine. The article included that ELHs were needed for a variety of reasons, not just for the elderly or people with disabilities. In FFY2014 AARP contributed \$5,000 to ELH in Virginia. Additionally the VA Housing Development Association contributed \$10,000. (RL01=15,000)

c. ABLE Grant

In October 2013, the Board awarded a grant in the amount of \$171,409 to the VA Association of

Centers for Independent Living to conduct the “Advocates Building Liveable Environments” (ABLE) program. In FFY2014 VACIL conducted three focus groups in Charlottesville, Richmond and Fairfax. Participants (58 total) included Building inspections officials, architects, builders, Fair Housing officials, planners, project engineers and consumer advocates. The sessions were particularly helpful in highlighting a number of areas that were incorporated into the training module/curriculum, including interconnections (or disconnections) of the Americans with Disabilities Act (ADA), ADA Accessibility Guidelines (ADAAG), and American National Standards Institute (ANSI) issues, the Fair Housing Act, and Universal Designs concepts. The session participants shared their experiences, their knowledge, and their suggestions regarding the building code and for the application of applicable accessibility requirements with particular attention to inconsistencies and omissions between the International Building Code(IBC)-State Building Code, ANSI and ADAAG.

VACIL spent a lot of time and effort on developing a training manual/module for distribution to building professionals. The major research issue has been the compilation, analysis, and comparison of the three primary sources of accessibility standards: ANSI, IBC, and Fair Housing. This type of compilation of all three codes with their differing issues of safe harbor and specifications was repeatedly identified by building code officials around the state as a major source of confusion. In addition, this simplified type of compilation has never before been created in VA or nationally, so the project is creating it. Following the round of focus groups earlier this year, VACIL conducted an extensive series of follow-up interviews with selected building professionals throughout the summer and early fall in an attempt to clarify the most effective instrument and training module for these individuals. The professionals seek a simple guideline that will quickly allow them to determine the optimal accessibility standard and a guideline that will provide them with reassurance that their decision is supported by the existing laws, regulations, and standards. The research materials will be clarified and condensed into an easy resource guide in November 2014. Starting in late November/early December, VACIL will hold a series of short training sessions with CIL advocates to acquaint them with the training manual/module and to prepare them for their outreach efforts with building inspections officials in their regions. VACIL anticipates that most of these outreach efforts will occur in January and February. This grant is scheduled to end on March 31, 2015.

Consistently, Virginia’s approach has been to develop relationships with non-traditional partners. Council collaboration with trade groups like the Home Builders Association of Virginia and the Virginia Association of REALTORS has raised member awareness of the housing needs and preferences of individuals with disabilities. State housing finance and community development agencies plus building code officials are another segment, along with Community Development Financial Institutions (CDFIs) and architect and design professionals. Through these liaisons the Council has been able to influence policy and program outcomes that have improved housing opportunities for individuals with disabilities.

Pursuant to House Joint Resolution 648 a workgroup was convened in October 2011 to study and report on feasibility and appropriateness of amendments to the Uniform Statewide Building Code (USBC) and to provide accessible routes for persons with disabilities into public and private buildings and facilities and promote universal features in dwelling units. The Council was a required participant in this workgroup. In FFY 2013, the DHCD Board approved a total of four of five proposals, and denied one. The four approved Uniform Statewide Building Code changes included:

- Revising upward the 22-year-old table prescribing the number of accessible parking spaces required per size of parking lot;

- Creating a minimum accessible parking space requirement for newly-constructed doctors' and dentists' offices;
- Mandating a minimum 34"-wide passage to specific living areas - bathroom, kitchen, bedroom, living room - on the main level in new residential construction, thus enabling access to critical areas by occupants/visitors using mobility devices; and
- Voluntary Universal Design standards in the Code Appendices that a builder could reference/use for new residential construction. The features, though voluntary, would be inspected by local building code officials if permit documents indicate the inclusion of the visitability features. Compliance with UD standards would also be noted on the Certificate of Occupancy.

The Council supported all five proposals; two of the five proposals were introduced by Council staff and supported by members of the workgroup. First, the voluntary standards for universal design in single family homes added to the Statewide Building Code as a reference for builders and building inspectors. When such standards are included in the design of a home the builder inspector will inspect per the standards to ensure compliance. Second, accessible interior passage requiring all openings and doors to be a minimum of 34 inches on the main level. There are exceptions to this requirement; however, adding it to the USBC in Virginia has made Virginia a national leader for main floor accessibility promoting community integration and aging in place principles. This requirement has been part of the ongoing discussion with Code and Standards officials. These changes were effective as of July 2014. (SC01=2)

The Council has influenced the direction of housing in Virginia and is often called upon to participate and partner with other agencies and organizations. The development of relationships born of mutual respect and a desire to understand each other's issues and challenges has made this work possible.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	2
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	2
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0

SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$15,000
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Objective 2.9:

Positively impact the development and implementation of strategies to rebalance state resources from institutions to community housing by supporting at least two legislative, policy, or regulatory changes.

Implementation activities:

Policy and advocacy work with/on relevant workgroups and agencies; Housing Plan developed through DOJ settlement agreement; support state funded rental subsidy.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2011 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

Council actively supported several bills during the 2014 state legislature, some of which was through confidential summaries & processes as set forth by the Governor. One bill (HB 854) would expand eligibility for the Auxiliary Grant program to include individuals who reside in supportive housing licensed by the Department of Behavioral Health & Developmental Services (DBHDS). Such an expansion would enable more individuals with DD or other disabilities to have more housing options in the community. This bill additionally required development of licensure regulations for service coordination providers paid under the Auxiliary Grant program, tasking: 1) the Commissioner of the Department for Aging & Rehabilitative Services (DARS) for providers serving individuals with certain disabilities (blindness & physical disabilities); & 2) the State Board of Behavioral Health & Developmental Services (BHDS) for providers serving individuals with ID or mental illness. The legislative sponsor of the bill developed a workgroup on which Council participated with other disability stakeholders. Council submitted explanatory background info & rationale to the Governor, the Secretary of HHR, & the Commissioners of DARS, DBHDS, Dept. of Social Services, & DMAS (SC04= 6). Council Director & staff member met to further discuss the impacts & potential regulation change with: legislative patron (SC04= 1); leaders of DARS, DSS, DBHDS, DMAS & other disability advocacy groups at the beginning of the legislative session; again to make revisions for bill substitution. The bill unfortunately did not pass, but significant progress was made as compared to the prior legislative session.

Council supported SB 82, which would extend the sunset provision for the Alzheimers

Disease & Related Disorders Commission (ADRDC) from 7/1/14 to 7/1/18. Council provided written comments in support of the bill to Commissioner for DARS (already counted). In collaboration with the Network P&A, Council also provided direct written comment to DARS Commissioner (already counted) on HB 240. This bill would broaden access to records, clients & facilities by the Office of Long-Term Care Ombudsman to enable investigation of complaints. Facilities included: adult day centers, assisted living facilities (ALFs), nursing facilities/homes, hospices, state psychiatric hospitals, state Training Centers, & all providers licensed by DBHDS.

Council additionally provided public comments to the DBHDS on significant issues related to building community capacity & reducing reliance on institutions. In Sept. 2014, written comments were sent on a draft Nursing Facility & Large ICF/ID Overarching Plan, which addressed the future role of these institutions within the overall system of care for persons with ID/DD. Council comments addressed: expanded informed choice & alternatives to guardianship; quality improvement of health-care & related providers; closing the “front door” of nursing facilities for youth; changing state regulations & licensure to limit bed capacity for ICFs/ID; improving tracking of youth w/ ID/DD to reduce “falling through the cracks”; & developing exit strategies (Planning, implementation & discharge processes) for adults & youth now in institutions; & developing diversion strategies. Council comments were sent to: the DBHDS Director of Health Services & Asst. Commissioner (SC04 = 2); the Secretary (already counted). & Deputy Secretary of HHR (SC04= 1). Council staff met with the DBHDS Director of Health Services to discuss concerns in more depth.

Council provided public comments to the DBHDS Commissioner & Assistant Commissioner (already counted) and the Secretary & Deputy Secretary of HHR (already counted) on the draft ID Waiver Transition Plan. That plan was required to ensure compliance with the new CMS Final Rule on Community Settings under HCBS Medicaid Waivers. Council comments made recommendations to improve or strengthen: assessment & service definitions; assessment of setting characteristics; assessment of person-centered planning; & quality management practices.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0

SC04 Number of public policymakers educated:	10
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.10:

By 2016, family, behavioral, or personal supports for individuals with developmental & other disabilities will be improved or increased through at least 2 Council supported initiatives.

Implementation activities:

- a. Grant: Improvement & Expansion of Consumer-Directed Services (VACIL); post-grant follow along for two years.
- b. Grant: RGI DSP Training Program to train individuals with developmental and other disabilities to be consumer-directed direct care staff; administered by Rappahannock Goodwill Industries.
- c. Engage in policy input & advocacy on DBHDS/DMAS revision of Medicaid Waivers -- ID, DD & Day Support.
- d. Post-grant monitoring of grant: Our Special Harbor Sprayground (Joey Pizzano Memorial Fund/Fairfax County Park Authority)
- e. Potential project to develop or expand a holistic service model to address individuals with DD who have behavioral or medical challenges.
- f. Monitor progress of START services and Regional Community Support Centers to identify unmet needs.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2011 - September 2014
- b. October 2012 - March 2015
- c. October 2012 - December 2014
- d. May - September 2012 & 2013
- e. October 2015 - September 2016
- f. October 2013 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

- a. During FFY 14, the Improvement & Expansion of Consumer Directed Svs. project was unable to provide post-grant outcomes due to staffing/budget constraints.

b. The Direct Support Professionals Training project, awarded to the Rappahannock Goodwill Industries, Inc (RGI), encountered ongoing difficulties in FFY 2014. The project coordinator resigned in Oct. 2013, & a new one did not begin for 5 weeks. As a result, staff training & preparation for the next cohort of trainees was the focus for that quarter. Council provided technical assistance to the new Coordinator, including linkage to a national expert on DSP hiring & retention at Va. Commonwealth University. However, RGI had had difficulty recruiting new trainees & in getting placements for graduates as DSPs. In Feb. 2014 Council staff met with Rappahannock Goodwill Industries (grantee) to explore outcome barriers in-depth & to help seek resolution to them. RGI reported that the most significant barrier for trainees was the limited public transportation (both hours & routes) in that area. A second barrier was the already large number of people in that area working in DSP positions or seeking them – a previously unknown reality discovered through extensive research by the new Coordinator. Both RGI & Council concluded that these barriers were insurmountable. By mutual agreement, the decision was made to complete training for the final cohort (SA01 = 4) and to terminate the project in April 2014. In the last months of the project, 2 graduates were employed as DSPs & 7 individuals w/ DD received direct services from those grads.

RGI agreed to continue working with all those who had completed DSP training & report any post-grant employment outcomes for remainder of FFY14 & 15 for those individuals. During the FFY14 post-grant period, RGI followup found that 2 trainees had found employment as DSPs, resulting in 2 individuals with DD receiving needed supports; & 2 others had obtained other positions.

c. Waiver Redesign - Council has been actively involved in the redesign planning workgroups of the Dept. of Behavioral health & Developmental Svs. (DBHDS) for 3 current Waivers – the DD, the ID, & the Day Support Waivers – to increase cost effectiveness & to improve outcomes. Each Waiver has different eligibility criteria and different service arrays. Council Director participated in the Waivers Redesign Advisory Committee as well as the Waiting List & other planning sub-committees. At this time, although the proposed redesign still has 3 Waivers, significant changes include, but are not limited to: assessment tools & processes will be standardized; the service array will be broadened to better meet needs; waiting lists will be combined into one, with a process & set-aside funds for emergency cases/need; & new reimbursement rates, based on a study by HSRI, will be set. DBHDS & DMAS will put the changes out for public comments in FFY 2015 prior to finalizing the CMS Waiver application.

d. Post Grant, Sprayground - – n/a

e. Council had planned to issue a RFP for a project which would develop or expand a holistic, integrated service model for individuals w/ DD who have complex behavioral or medical needs. However, two factors led Council members to discontinue this strategy from the FFY15 State Plan: 1) DMAS & DBHDS have implemented a program under Medicaid to improve medical services & coordination for individuals w/ disabilities served by local Community Services Boards; 2) the projected cost of funding such a project was prohibitive in light of ongoing flat federal funding.

f. Council, as part of its ongoing engagement in the DOJ Settlement Agreement, has continued to monitor the evolving implementation of the DBHDS crisis intervention program for individuals with ID & DD. During this FFY, DBHDS revised the program: now named the Regional Education, Assessment Crisis Habilitation program (REACH), it no longer adheres to the START model because more flexibility in staffing & service scope was needed across the 5 regions. Council and other disability advocates continue to voice their concerns that development of the crisis intervention services for youth has lagged behind schedule. Council & others continue to

monitor that development.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	4
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.11:

By 2016, in collaboration with state and local partners, individuals with developmental and other disabilities will have improved access to natural supports available to all through at least three Council supported policies, practices, or initiatives.

Implementation activities:

- a. Grant project, Empowerment to Prevent Institutionalization, administered by VACIL, to effectively demonstrate ways in which to remove barriers or address gaps that contribute to institutionalization.
- b. Liaison with state agencies and relevant workgroups to develop or improve state policies and

practices.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2013 - September 2015

b. October 2012 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. Begun this FFY, the Empowerment to Prevent Institutionalization (EPI) grant project is intended to provide education to medical & related healthcare professionals on community services & supports available to IwD in order to help maintain individuals in their community rather than be placed in an institution. The grantee, the Va. Association of Centers for Independent Living (VACIL). Enlisted 10 local CILs from across the state, including rural areas (Eastern Shore; Grundy & Norton in SW Va) and urban areas (Norfolk, Hampton, Fredericksburg, Roanoke, Winchester, & Richmond). The main tasks this year have been: creation & operation of local project Steering Committees, each of which included at least one IwD & one healthcare professional; develop recruiting teams for outreach to providers; conduct train-the-trainer sessions (SA01= 43) ; & creation of local Resource Directories. The Directories are user-friendly, quick guides to disability services & supports for use by health-care professionals. At the end of the FFY, CIL staff began outreach to professionals to offer training on community resources & to distribute the Directories. By the end of this year, the CIL trainers had trained & distributed directories to 28 professionals (RNs, case managers, clinical supervisors & others: SA01 = 28). During FFY15, CIL staff will conduct additional trainings in their localities.

b. Liaison activities – As in the previous year, Council increased its engagement in and monitoring of various healthcare initiatives. Council staff participate as a member of the Evaluation Committee for the Commonwealth Coordinated Care (CCC) program, Virginia’s federally funded managed care demonstration project for “dual eligibles”. The Evaluation Committee, which meets twice a year, provides input into survey & other measurement methods to track outcomes and challenges from CCC. The CCC initiative also held weekly stakeholder conference calls, in which Council participated.

DMAS had contracted with Magellan Behavioral Health to be the managed care provider of behavioral health services. [Note: Va. legislature has mandated that DMAS expand managed care to all populations by end of SFY 2016.) Council attended quarterly meetings of its new Governing Board, comprised of Magellan staff & various stakeholders. Monthly conference calls were conducted to inform stakeholders of progress and to be informed about emerging issues re: implementation or unmet needs.

Although no outcomes (PMs) have come from these efforts, Council does bring the needs of IwDD to the forefront, as indicated in these calls and meetings; & offers suggestions to resolve access & outreach barriers.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	71
SA02 People trained in leadership, self-advocacy, and self-determination:	0

SA03 People trained in systems advocacy: 0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy: 0

SA05 People attained membership on public/private bodies and leadership coalitions: 0

SA06a Other self-advocacy measure: 0

SA06b Other self-advocacy measure: 0

SA06c Other self-advocacy measure: 0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved: 0

SC02 Number of organizations involved coalitions/networks/partnerships: 0

SC03 Organizations engaged in systems change efforts: 0

SC04 Number of public policymakers educated: 0

SC05 Members of the general public reached: 0

SC06a Other systems change measure: 0

SC06b Other systems change measure: 0

SC06c Other systems change measure: 0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged: \$0

Objective 2.12:

Council will support at least 5 policies or other initiatives that develop/ expand community capacity to better transition individuals with developmental disabilities from state training centers into the community.

Implementation activities:

- a. Participation in MFP Advisory Council.
- b. Participation in planning for revised Licensure regulations.
- c. Monitor and support implementation of the National Core Indicators Project.
- d. Monitor implementation of DOJ Settlement Agreement; participation in Implementation Committee, planning workgroups with Health & Human Resource agencies on service system expansion.
- e. Grant project, Peer-to-Peer Education Project, administered by the Dept. of Behavioral Health & Developmental Services; mentors will work with individuals transitioning from training centers to (or already in) the community.

Activities undertaken were:



All met

Partially met

Not met

Timelines:

- a. October 2011 - September 2016
- b. October 2011 - September 2016
- c. October 2011 - September 2016
- d. October 2012 - September 2016
- e. July 2013 - December 2014

Timelines established were:



All met



Partially met



Not met

Annual Progress Report:

- a. The Money Follows the Person (MFP) Advisory Council was unexpectedly inactive throughout FFY14. A meeting was set up, however, for early FFY15 to discuss progress to-date and post-grant planning.
- b. Changes were made by DBHDS in prior legislative sessions (FFYs12 & 13) to clarify licensure expectations & to increase consequences for non-compliance. Because no other changes are planned by DBHDS in FFY15, this strategy was deleted from 2015 State Plan.
- c. NCI Project – As described in the Collaborations section of this PPR, in FFY 2015 the UCEDD & Council will partner with DBHDS and DMAS to develop research questions & data analysis for cost/benefit analysis of both NCI data (DBHDS) & Medicaid expenditures (DMAS).

d. Council remained active in the DOJ Stakeholders Committee, advocating for community integration. At ea.meeting, DBHDS provided status reports on various initiatives; members provided feedback & suggestions. Issues included: integrated day activities; creation of regional quality councils & expanded quality improve-ment activities; housing initiatives; case management improvements; health services. Members of VOR & Parents/Family of Institutionalized Residents (PAIR) regularly voiced opposition to Training Center closures at the meetings.

Council provided public comments to DBHDS on resulting draft documents: Integrated Day Activity plan; & Implementation Plan for Serving Individuals w/ High Medical Needs in the Community. Council's Day Activity Plan comments to Asst. DBHDS Commissioner (SC04= 1) focused on improving: reimbursement rates; staffing ratios; consumer direction; person-centered practices; individualized budgets; & licensure. For the High Medical Needs Plan, Council supported: improving Level I & II PASSR assessments; setting limits on duration of respite residential sv.s.; & more clinical nurses w/in DBHDS. Council, however, recommended changes to: develop timelines & measurable goals for system change; specify/measure health outcomes, to include identification of milestones & resources needed; strengthen relationship of new DBHDS nursing w/ VDH Office of Licensure & Certification, DMAS, & large medical providers. Comments went to DOJ Independent Reviewer, DBHDS Asst. Commissioner (already counted), Secretary & Deputy Sec.HHR, & DMAS Deputy for Complex Care (SC04= 3).

Council Director gave 2 presentations in FFY14 on policy issues that promote community living, w/ emphasis on transition plans to close state Training Centers & build/expand community sv.s. In Oct. 2013, Director addressed the Mayor's Disability Services Committee for Hampton, Va. In attendance were: 1 state Senator & 1 state delegate (SC04= 2); representatives from the Mayor's Committee, local CSBs, local Arc chapter, local Ctr for Independent Living (CILs), area disability service provider agencies & professionals, local police, lwd & their family members (SC05= 140). In July 2014, Council Director spoke on similar topic at the Church Hill Rotary Club in Richmond, Va. (SC05= 12).

Council provided significant advocacy on a key bill (SB 627) that would impact the state's efforts to transform to a community system of care. SB 627 sought to require the DBHDS Commissioner to formally certify for each individual discharged from a Training Center that:

community services will be at a comparable quality of care to services in TCs; resident or family/guardian have been informed that, per Settlement Agreement, that remaining in a state TC is an option. SB 627 additionally proposed a workgroup, to include family/guardians of TC residents & other stakeholders, to study whether or not more than one Training Center should remain open and make recommendations to the 2015 legislature. (Under DOJ Settlement Agreement, Va. planned to close 4 of 5 state TCs.) Council collaborated with P&A, the Arc of Va. & other disability advocates to oppose the bill. Council Director provided formal testimony against the bill to the Senate Finance Sub-committee for HHR (SC04= 7); & met w/ 1 Senator & 4 aides to other Senators to oppose the bill (SC04= 5). SB 627, however, passed. Council Director was appointed by Sec. HHR as member of the mandated workgroup; & participated in the meetings held to advocate for community service expansion & community integration as well as oppose an increase in TCs open. Relatedly, Council opposed SB 136, which required DBHDS Commissioner to certify that svcs. to discharged TC indiv. were of equal or better quality than TC svcs. Bill was withdrawn by patron.

HB 540, which passed, stated that DBHDS may issue a provisional license at any time when a provider is temporarily unable to comply with all licensing standards; & clarified situations in which certain sanctions may be imposed. Council Director submitted comments to: DBHDS Commissioner (SC04= 1) & Asst. Commissioner (already counted) & Sec. HHR (already counted) in support of bill, strengthening DBHDS oversight over community svcs. Council provided support, via comments to DARS Commissioner (SC04= 1) on HB 240, which expanded LTC Ombudsman access to clients & records at ALFs, nursing homes, adult day care, & other providers.

e. Peer to Peer Education Project, which began in July 2013, has the goal of developing & implementing an educational and mentoring program for individuals with ID/DD to improve self-determination, community integration (through knowledge of community resources) & communication skills. The project is to train 15 individuals with ID/DD & 15 others to serve as peer mentors to indiv. who: 1) now reside in state Training Centers to encourage & facilitate transition into community; or 2) newly transitioned individuals in community to foster & improve community participation. During FFY14, the 15 indiv. w/ ID/DD & 15 others completed the mentor training. Monthly training topics were (but not limited to): Medicaid, community service systems, key terms of DOJ Settlement Agreement, mentor role & skills (esp. reducing transition stress) & housing options.

STORIES of Mentor Trainees:

#1 - Chris, a 25 year old w/ DD from the Greater Richmond area who works part-time at a local business, has been on the Waiver wait list for close to 20 years. He lives independently in his own home with his fiancé. His parents provide day to day support needs. Chris decided to become a mentor because he wanted to share his story to help others gain independence. Chris believes he has become a better role model and leader for his peers after completing the training. Since starting the program, he has become more outgoing and more of a leader in his workplace. "I talk to more people and feel more confident in myself." Chris is mentoring a 43 year old man, CM* who is now living in a sponsored residential home after leaving a state training center earlier this year. CM likes doing most things independently with just a little support when needed, and he enjoys being active. Chris is working with him to find activities in this community that he will enjoy doing. They are even starting to talk about the possibility of getting a job! Chris and CM are excited about the future ahead.

#2 - Kate, a 45 year old, has been living independently in supportive living for the past 22 years. Since 2009, Kate has been living by herself in her own home with some supports as needed. She enjoys visiting other friends in her apartment complex, walking to local stores & business to eat or shop, and working part-time as a self-advocate. Kate decided to become a peer mentor because "I strongly believe individuals with disabilities should live and participate in their communities." Kate has been mentoring a 32 year old woman, KM*, who lived in a state

Training Center for 11 years. KM uses a power wheelchair & has some medical needs. KM is very interested in living in the community & being more independent, but is nervous about making a big change in her life. Kate & KM first bonded over their shared love for animals; Kate talked about the joy of taking care of her own cat. KM seemed to really like the idea of owning a pet one day. KM also loves decorating her room, eating out, listening to music, shopping, & being with friends. Kate is mentoring KM on the supports available with a community based waiver that will help her do all the things she enjoys. Kate has offered ideas on ways to be social in the community, such as inviting friends over for dinner and movies, going out with friends to shop or eat, and working. KM was reassured that she will never be alone if she needs help because a caregiver will be there for her, just like when Kate needs help she has support. KM is excited about the possibility of having her own home to decorate and having the supports she needs to be independent.

#3 - Donna, a 50 year old, remembers that her doctors instructed her parents to “put her away,” which would have meant placement in a state training center. Her parents, however, wanted their child to have a life in the community. Donna has been living in a group home since her father died and her mother moved into a nursing home. Donna says she enjoys living there because: the people are nice; her boyfriend lives there, too; she can walk to church; & the house is pretty with a big fenced-in yard. Donna loves going to church, singing in the choir, bowling, singing Karaoke, shopping, and working. Donna had been attending a workshop day program for decades. After starting the peer mentor training program, she learned about her right to work in the community. Donna decided she wanted to transition from her day program into supported employment. Now, Donna is working at the local courthouse where she cleans 3 days a week. She says, “I know everybody there, like the lawyers and the police. They are all nice. I have a good time. I like my job.” Donna also shares that she is proud of herself when the place looks nice. When asked what the peer to peer mentor program has meant to her, Donna said, “[I] learn how to help people. Help them learn about the community. Take them places, to church, shopping, bowling, out to eat, movies, make friends, feel safe, know their rights, make people treat them right.”

#4 - Wes, who is 28 years old, moved into a local 9-person group home after graduating from high school in 2005. Wes said he wanted to join the peer mentor program because he “wanted to help people find jobs, a place of their own, and to learn new things.” Since starting the training, Wes has been modeling the transition he wants others to have. After a lot of hard work and self-advocacy, Wes moved out of the group home & is now living in his own apartment with a roommate. He is also actively trying to find a job in the community. The mentor training taught Wes about his rights to community inclusion & improved self-advocacy skills. His very own life transformation is inspiring to peers in his area. He is looking forward to meeting with his new mentee to help s/he set goals and start making accomplishments.

#5 - For more than four decades, Tena lived with her mother at their home in rural Virginia. While she waited for a community based waiver, she lacked supports needed to be independent and active in her community. After the death of her mother, she was in need of emergency services and was almost forced to live in a nursing home at age 46. Since getting on the ID Waiver, Tena was able to stay in her home with a roommate who offers her assistance, transportation, & companionship. Now she is able to participate in her community, including this mentor training. Since completing the training, Tena feels more motivated to learn, grow, & try new things. For example, Tena recently got a pedicure for the first time in her life, which she said made her feel special. Tena wanted to participate in the peer mentor program to share her story with others and help them to live a more inclusive life like the one she h

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:

30

SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	20
SC05 Members of the general public reached:	152
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.13:

In collaboration with agency & advocacy partners, including those in the aging community, influence at least three policies or initiatives to expand the availability of services & supports that foster self direction, choice, independence, inclusion & aging in place.

Implementation activities:

- a. Project to improve services/supports that promote \"aging in place\" and community life for individuals with ID/DD who are 55 years old or older.
- b. Liaison/advocacy with relevant workgroups and agencies and organizations for policy change or creation.

Activities undertaken were:

All met Partially met Not met

Timelines:

- a. October 2015 - September 2017

b. October 2012 - September 2016

Timelines established were:



All met



Partially met



Not met

Annual Progress Report:

a. At its June 2014 meeting, the Council's Board initiated development of a draft proposal for a demonstration project to improve supports to individuals who were 55 years old or older and had an ID or DD. This draft, as part of a Request for Proposals (RFP) will be reviewed at the December 2014 (FFY 2015) Board meeting for a decision on whether or not to release the proposal.

b. In FFY2014, Council staff participated on the Area Planning & Services Committee (APSC) for the planning of two Disability & Aging conferences. The APSC goal is to ensure that support care providers have access to continuing education in order to better support individuals with developmental disabilities. APSC membership includes multiple agencies - state & local - which include both volunteer & non-profit organizations as well as academic centers. [Members include but are not limited to these: DD Council, local Area Agencies on Aging, Community Services Boards, Catholic Charities, VCU Gerontology Center of Excellence, & the Program for All Inclusive Care for the Elderly (PACE)]. Another nonprofit worked with the APSC this year: Hope House Foundation, a successful residential & support program which has helped individuals with DD to leave institutions and live integrated lives in the community.

The first APSC-planned conference, entitled "Creative Options for Staying Active," was held in November 2013 in Richmond. this conference focused on knowledge & skills to help support their customers in improving healthy choices in exercise, & recreation. There were 75 attendees (SC05= 75), comprised of home health & residential support providers. Presentations, which were very person-centered in content & delivery, addressed: multiple resources for adaptive equipment & assistive technology; resources for low or no-cost expertise in adaptive equipment; & the value of creative therapies (such as adaptive yoga) for individuals who use wheel chairs or who have ID/DD. There was a great deal of interactive learning with the audience practicing rehabilitative/ habilitative activities or using equipment or using less common therapies such as music therapy. Completed conference evaluations by attendees indicated that the learning was highly valued.

The second APSC conference, entitled "Cutting Edge Breakthroughs for Aging with Lifelong Disabilities", took place in June 2014 in Richmond. This conference had 166 attendees (SC05). Session topics included: "smart home" technologies; DOJ plans for new housing options for people with disabilities; Medical Home initiatives; using smart phones & tablets as aids to healthy aging; updates on the Affordable Health Care Act impacts; & promising practices in employment services. In addition, APSC was successful in recruiting individuals with DD to hold a session to tell their story of living successfully with the proper supports in the community: "Freedom and Safety in the Community". This presentation included an overview of self-advocates' participation in a Council- funded grant project for peer run education on preventing abuse & exploitation. Council showed its short film, "Place Matters," which depicts several individuals with severe disabilities who moved from a state Training Center into the community.

Council continued to monitor activities of the Virginia Public Guardian & Conservator Advisory Board (VPGCAB). Beginning in FFY 13, this Board restricted membership to the regulatory requirement on advice of the state Attorney General. Although Council no longer is a formal member, staff continued to monitor their activities via meeting minutes online or thorough

attendance. Council staff attended one meeting in FFY14, which included a review of the 2013 (CY) Annual Report for VPGCAB & a presentation on alternatives to full guardianship given by our DD Network partner, disAbility Law Center of Va.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	241
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.14:

By 2016, facilitate a more secure and independent future for individuals with developmental and other disabilities by educating at least 500 individuals and policymakers on best practices and mechanisms for financial stability development.

Implementation activities:

a. Monitor state agency regulatory proposals, statutes/legislation, and policies; and develop advocate input as indicated.

b. Develop and support partnerships that focus on education, training and information sharing opportunities.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2012 - September 2016
- b. October 2014 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

There was no activity in FFY2014 for this objective because the program manager responsible for this objective left Council mid-year and this position is still vacant. Council expects activity in FFY2015.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.15:

By 2014, increase the availability of affordable, accessible transportation in at least one or more rural and/or underserved areas through at least one Council supported initiative.

Implementation activities:

Grant project, Affordable Transportation Options in Rural and Underserved Areas, administered by Dept. for Aging and Rehabilitative Services.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2012 - September 2014

Timelines established were: All met Partially met Not met

Annual Progress Report:

In 2012, the Dept. for Aging and Rehabilitative Services (DARS) was awarded \$200,000 to conduct a two-year project: "Affordable Transportation Options in Rural and/or Underserved Areas." DARS oversees a network of 25 Area Agencies on Aging (AAA). These AAA's are strategically placed around the Commonwealth and many have developed regional transportation programs for the elderly. For this grant, which began October 1, 2012, DARS contracted with three local AAAs to expand transportation for individuals with disabilities: Rappahannock Area Agency on Aging (RAAA), Mountain Empire Older Citizens, Inc. (MEOC), and Senior Services of Southeastern Virginia (SSSEVA). Each AAA had a different approach to increasing transportation opportunities for individuals with Developmental Disabilities in a rural or underserved area. The RAAA program ended September 30, 2013. The two other AAA programs continued in FFY2014 and are summarized below:

The program period for Western Tidewater Mobility Improvement Initiative (I-Ride) with SSSEVA was October 1, 2012 through December 31, 2013. The program established the Western Tidewater Community Transportation Collaborative (comprised of 32 organizations), expanded ridership by 30% for existing ADA corridors in Suffolk, expanded ridership by 17% for Franklin, Isle of Wight and Southampton Counties (non-senior ridership was increased by 29%). Riders said: "I am new to the area and can finally make friends;" "I don't have a car and my family is not always available;" and "helps me go to the Center, the doctor and shopping."

In the final Oct-Dec quarter of the program there was a slight decrease in overall I-Ride ridership compared to the same time period in 2012, however, there was an increase of 8% in rides by individuals with disabilities. There were 5 calls for transportation in the Western Tidewater area between November and December 2013 with 4 needs met as the outcome. There were two meetings with Suffolk Redevelopment and Housing authority on the transit service and ADA application process. Defensive driving and sensitivity training was provided to 5 drivers during the 5th quarter and 5 volunteer drivers were trained for medical, work, church and social needs. (SA01=10)

STORY: One passenger uses the Paratransit service 6 times a week on Tuesday, Thursday and Friday from his home in Suffolk to Sentara Obici Hospital. The young man uses a wheelchair as

his mobility device and volunteers 3 days a week at the hospital. He states “Without this service I wouldn’t get out of the house and I love my job at the hospital.” He volunteers in the cafeteria removing trays from tables and cleaning them, assists with kitchen work and at times assists at the front desk providing information. He doesn’t know how he could get to work without the I-Ride Paratransit van.

A provider stated, “the service is such a big help” to the individuals she serves. “The Paratransit service provides an alternative for people that have Medicaid or no insurance covering transportation. It becomes a burden for families to drive 3 times a week and wait for 3 or 4 hours.... This service means more independence for the individual that is on dialysis; they don’t have to worry about someone waiting on them. Also thru the initiative of the collaborative it was arranged for public bus passes to be ordered for individuals that are able to use the bus service saving even more money.”

Another provider relays: “The Western Tidewater area is a rural area that is in dire need for more assistance to provide seniors and disabled people like myself safe transportation that is reliable. To me and many others this transportation is the difference between contributing to our communities or wasting our lives indoors. It is important to hear in our words what we need to improve the transportation services. What advocates provide are smart ideas that improve what is really needed rather than what others looking from the outside think we need. The improvements will provide a higher ridership, expand transportation for those in need, and to provide a safer way to travel. Senior Services provides a service that I can proudly say changes lives for the better.”

The Mountain Empire Older citizens AAA expanded its weekday service in Lee, Wise and Scott Counties and the City of Norton to include Saturday service. The “Saturday Service 4 All” program served each of the four MEOC jurisdictions one Saturday per month, resulting in an additional sixteen shuttle routes monthly. In FFY2014, MEOC provided 1,824 one way trips on Saturday. On average, 52% of the trips were provided to individuals with disabilities. In FFY2013, 111 individuals with disabilities received transportation services. In FFY2014, there were 20 new individuals with disabilities using the service. MEOC’s Saturday initiative provided transportation services to persons with developmental and intellectual disabilities. Of the persons with disabilities served during the grant period, 45% were over the age of 60 and 55% were under the age of 60.

The primary goal of the VBPD grant was to provide transportation options for persons with developmental disabilities within MEOC’s service area (Lee, Wise and Scott Counties and the City of Norton). MEOC not only met this goal but far exceeded program expectations. Further, the VBPD grant provided MEOC the ability to once again expand the Mountain Empire Regional Transportation Advisory Council (MERTAC) with area partners and stakeholders. By building positive relationships with stakeholders, the Saturday service program quickly gained momentum within the community.

During the first year of the grant, in FFY2013, MEOC faced its one and only barrier, which was marketing the program to the target population. Word of mouth and program promotion within and outside MEOC clarified any misconceptions and removed any perceived barriers. In addition, MEOC’s Mobility Manager discussed the program with passengers and their family members to resolve any trip issues. Also, passenger attendants were scheduled to assist persons with disabilities to ease any travel fears or apprehensions. Once the passenger gained self-confidence, passenger attendants would no longer assist that passenger (unless requested).

Annual Consumer Satisfaction Surveys were distributed to MEOC passengers in September 2013 and September 2014. Between the two time periods, 8 sets of surveys (one per route) were distributed yielding approximately 121 completed surveys indicating satisfaction with Saturday transportation service. Survey responses were gleaming, showcasing the magnitude of the service, professionalism of staff and cleanliness of buses. Various surveys contained handwritten comments indicating the program’s fundamental importance to persons’ health, well-being, socialization and independence. Enhancing an individual’s independence and well-being leads to increased self-worth and outlook on life.

Following are quotes from September 2014 surveys: “Gets me back and forth to work, grocery store and other places;” “Saturday trips give my dad more freedom. He uses the bus on Saturday about 3 times a month;” “It has been helpful to me getting out going shopping and I get to visit my family more often.” “I work and can’t always take my mother where she needs to go.” “Ability to be more independent.” “I would never get off the hill if it was not for MEOC. Have no one else to take me.”

Mr. O, a 68 year old passenger stated, “Saturday service has been a blessing for me.” By receiving funding from Council and the Dept. for Aging and Rehabilitative Services, MEOC was able to provide a life changing service to individuals with disabilities in Southwest Virginia.

In 2014, MEOC received an N4A Aging Innovations Award from the National Association for Areas on Aging for its “Saturday Service 4 All.” The program was recognized for its collaboration with area partners and enhanced transportation services.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	10
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0

SC06b Other systems change measure: 0
 SC06c Other systems change measure: 0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged: \$0

Objective 2.16:

By 2016, promote integrated local and regional planning by supporting at least 1 policy or initiative that ties planning for accessible transportation to the needs of individuals with disabilities to easily access community services and supports.

Implementation activities:

- a. Increasing the Use of the Transportation & Housing Toolkit (Thomas Jefferson Planning District Commission)
- b. Project to demonstrate improved driver competence for transportation providers through education and training.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2011 - March 2012
- b. October 2014 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

Council staff presented a proposal to the Disability Commission’s Housing and Transportation Workgroup to add language to local Comprehensive Plan Code requirement to include the alignment of transportation with affordable accessible housing and services. Senate Bill 58 and House Bill 296 were introduced and passed in the 2014 session of the General Assembly (SC01=1). This bill requires the alignment of transportation services with accessible housing and other community services in a locality’s Comprehensive Plan. When localities develop their Comprehensive Plan, they will be required to take into consideration how to align transportation infrastructure and facilities with affordable, accessible housing and community services that are located within the territory in order to facilitate community integration of the elderly and persons with disabilities. This policy was effective July 1, 2014. It should positively impact local coordination of land use and services and is consistent with the DOJ Settlement.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective: 0
 SA02 People trained in leadership, self-advocacy, and self-determination: 0

SA03 People trained in systems advocacy: 0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy: 0

SA05 People attained membership on public/private bodies and leadership coalitions: 0

SA06a Other self-advocacy measure: 0

SA06b Other self-advocacy measure: 0

SA06c Other self-advocacy measure: 0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved: 1

SC02 Number of organizations involved coalitions/networks/partnerships: 0

SC03 Organizations engaged in systems change efforts: 0

SC04 Number of public policymakers educated: 0

SC05 Members of the general public reached: 0

SC06a Other systems change measure: 0

SC06b Other systems change measure: 0

SC06c Other systems change measure: 0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged: \$0

Objective 2.17:

By 2015, a minimum of 30 individuals with developmental disabilities will successfully transition from facility-based (sheltered) employment, day support or pre-vocational services to integrated employment.

Implementation activities:

a. Grant project, Employment for All Citizens of the Arc of Southside, administered by VCU/RRTC will demonstrating how to move individuals from facility-based employment to integrated employment.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2013 - September 2015

Timelines established were: All met Partially met Not met

Annual Progress Report:

In 2013, Council awarded a grant totaling \$243,975 to VA Commonwealth University (VCU) RRTC for the project: "Employment for All Citizens of the Arc of Southside." The project began October 1, 2013. The Arc of Southside, located in Blairs, VA, serves an economically depressed area of the state. One of The Arc's programs is the Hatcher Employment Program, a sheltered work facility that supports 108 adults with disabilities. The goal of this grant is to employ 30 adults with disabilities in integrated, competitive employment in the community.

The major activity in Year 1 of the grant was for VCU RRTC to provide training to The Arc's staff. All Arc staff were trained on: individual choice, Discovering Personal Genius, employment best practices and integrated employment outcomes. (SA01 = 10) Three additional staff had started training prior to the beginning of the grant (these are not counted with the 10). RRTC also provided weekly technical assistance The Arc of Southside's administrative and employment services staff.

In addition, VCU RRTC also educated The Arc's Board members who are integral in facilitating the conversion of the sheltered workshop. The employment team worked with the Board to develop a process to assist with job development leads via a Job Leads Share bi-weekly email. This system allows employment specialists and Board members to work together to share contacts and network with employers in the community.

The primary objective of the project is to assist individuals to transition from the workshop into community integrated employment. Efforts in this area included the development of new supported employment brochures to aided employment specialists when conducting job development activities with community businesses.

A new partnership was developed this quarter with Full Circle Employment Solutions to provide mentorship and training for The Arc of Southside as they become an Employment Network. In collaboration with Full Circle, 50 sheltered workshop employees received benefits analysis and counseling to help individuals and their families make informed decisions about community employment opportunities and the impact of work on current benefits.

The primary objective of the project is to assist individuals to transition from the workshop into community integrated employment. To ensure that all individuals seeking integrated employment make informed choices, comprehensive individual profiles are completed for each person supported by The Arc. This includes completing the "Discovery" process. To date, 21 profiles have been completed and reviewed with individuals and their identified supports; 17 of these are currently participating in job development. Four of the participants were placed in employment at Wendy's, Oak Grove Residential, Old Oak Hardwood Floors and Stratford Conference Center (SC03=4). All jobs are at least minimum wage and the hours range from 12 - 30 hours per week.

Tirik is newly employed as a groundskeeper at Oak Grove Residential. His employment specialist states: "Tirik loves to joke about service with a smile, but I think he really means it."

Freddie is a grounds and maintenance attendant at Wendy's. The Employment Director at The Arc of Southside states: "Freddie had poor attendance at the workshop because it wasn't what he wanted to do ... now his bosses say he doesn't miss a day."

Clarence is a laborer at Old Oak Hardwood Floors. The owner of Old Oak Hardwood Floor states that Freddie is the "hardest worker and runs paces around my other guys and is the only guy other than me with a Fork Lift License."

STORY:

Thomas has worked at the Hatcher Center for many years in various departments. He is a charming young man in his mid-20s who makes friends easily and is a hard worker. Thomas shared with The Arc staff that he was the only income earner in the household where he lived with various family members. The home situation is not a healthy one and it is one where he is taken advantage of and mistreated. The wages he earned at Hatcher, along with his SSI, was not enough for him to support those family members or himself. Knowing his circumstance, he was among the first people with whom The Arc began to work.

Thomas and his job coach searched for work for a several months hitting many dead ends. Finally, their hard work paid off when he was offered a position at a conference center in the catering department doing set-up, take down, serving and cleanup. This job suited him well because he is fast and efficient. He is also friendly and outgoing and enjoys interacting with the public at events.

In October, Thomas will move into an apartment with one of his best friends from Hatcher. Thomas is thrilled to get his first apartment. While the issues with his family are a concern to him, he wants to be on his own. His life has truly changed because of this grant and he shared his story about work with his peers at the monthly "Job Club" meeting. Thomas states: "Getting my own apartment with my friend has been the best part of my year after getting my new job!"

(SC03 = 4)

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	10
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	4
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0

SC06c Other systems change measure: 0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged: \$0

Objective 2.18:

By 2016, educate at least 250 self advocates, family members and professionals on the impact of federal health care reform on individuals with development and other disabilities.

Implementation activities:

a. Promote information and updates via social media.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2014 - September 2015

Timelines established were: All met Partially met Not met

Annual Progress Report:

No activity planned for FFY2014.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

- SA01 People trained in area related to goal/objective: 0
- SA02 People trained in leadership, self-advocacy, and self-determination: 0
- SA03 People trained in systems advocacy: 0

Performance Measure 1.2 (self-advocacy/advocacy):

- SA04 People active in systems advocacy: 0
- SA05 People attained membership on public/private bodies and leadership coalitions: 0
- SA06a Other self-advocacy measure: 0
- SA06b Other self-advocacy measure: 0
- SA06c Other self-advocacy measure: 0

Performance Measure 2.1 (systems change):

- SC01 Programs/policies created or improved: 0

SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.19:

By 2016, in coordination with state agency and advocacy partners, improve access to early intervention services for high risk infants served in NICUs by educating medical professionals on best practice follow-up and referral protocols.

Implementation activities:

a. Potential demonstration project to improve follow-up and referral to needed services (e.g., Part C) for high-risk infants served in NICUs.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2015 - September 2017

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. In September 2014, Council's Board of Directors requested that a draft proposal be written for a demonstration project. The draft will be reviewed & a determination to approve will be made at the December 2015 Board meeting (FFY 2015).

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.20:

Monitor and provide input on legislation, regulations and policy affecting students with disabilities.

Implementation activities:

a. Promote \"Universal Design\" for Learning; provide input on teacher licensure certification/recertification and other related special education activities at the state level.

Activities undertaken were: All met Partially met Not met

Timelines:

a. October 2013 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

In the 2015 State Plan Update, activity "a" is deleted and the activities are added to reflect policywork and liaison activities related to the objective.

In FFY2014, Council staff was active participating on workgroups, advising policymakers and

commenting on proposed legislation during the General Assembly session related to legislation, regulations and policies that affect students with disabilities. During the 2014 General Assembly session, Council Director joined other advocates in testifying to the Education Reform Subcommittee (SC04 = 8) in support of HB 1106 which requested the Commission on Youth (COY) to study the use of seclusion and restraint in public schools. Following passage of that bill, in Council joined with Stop Child Abuse Now (SCAN) and other advocacy organizations (such as The Arc of Virginia, the disAbility Law Center of Virginia, the Legal Aid Justice Center, JustChildren) to form the "Coalition for Improvement of School Safety – Focus on Restraint and Seclusion" (CISS). The purpose of the coalition was to discuss current the public school policy and come to a consensus on recommendations to the Commission on Youth that would limit the use of restraint and seclusion.

In August 2014 CISS submitted policy recommendations on seclusion and restraint in public schools to the legislative Commission on Youth. Council Director disseminated the comments to the Deputy Secretaries (2) and Secretary of Health and Human Services, the Deputy Secretary and Secretary of Education, the Superintendent of Public Instruction at VDOE, and the Executive Director and Deputy at the legislative COY. (SC04 = 7) Policy recommendations were as follows: (1) Amend the definitions of restraint and seclusion; (2) Limit the use of restraint and seclusion in schools to emergencies; (3) Restraint and seclusion should only be used as a last resort to prevent immediate physical injury; (4) Require least restrictive measures (including de-escalation) to be implemented; (5) Prohibit the use of the most dangerous restraints; (6) Prohibit the use of seclusion rooms; (7) Parental notice of the use of restraint or seclusion; (8) Collect data about the use of restraint and seclusion. CISS also encouraged public comment prior to COY's meeting in September.

COY met twice in the fall and reviewed significant public comment. CISS supported the COY option put forth to put forth legislation to require the VA Dept. of Education (VDOE) to promulgate regulations governing seclusion and restraint in public schools. This option passed and legislation will be put forth in the 2015 General Assembly session which begins on January 14, 2015.

Council Director participated on the State Special Education Advisory Committee (SSEAC) as an ex officio non-voting member. The SSEAC advises the state Board of Education on the needs of students with disabilities. Among the key areas discussed and on which the SSEAC provided guidance were the special diploma, services for students with learning disabilities, facilitated IEPs, seclusion and restraint, legislation affecting students with disabilities, federal monitoring, assessments, inclusive education, teacher licensure, functional behavioral assessments and other areas. Council Director also served on several interagency workgroups established by VDOE which are ongoing. Council staff helped develop SSEAC Annual Report to the Board of Education. Recommendations in this report included but were not limited to (1) increasing requirements to obtain a special diploma to better support successful post-secondary outcomes in employment, education, training, and independent living; (2) development of a guide to explain testing and its impact on diploma options to be distributed no later than the 2nd grade an annually thereafter, (3) creation of a checklist or other document that identifies exemplary practices and allows schools to assess themselves with respect to the amount of time students with disabilities spend in a regular education classroom; (4) ensure all documents and communication are written in person first language; (5) ensure that the new Center for Transition Innovations addresses needs statewide, not just in Central Virginia. Council staff met with the VA Dept. of Education staff and VA Commonwealth University Rehabilitation Research & Training Center staff person regarding development of a new IEP diploma (also called special diploma) that will be used to demonstrate skill mastery to potential employees. Discussion included coming up with ways to make the IEP diploma meaningful when unlike a standard or advanced diploma, there are no

consistent criteria since the IEP is individualized. Subsequently, Council staff participated in VDOE stakeholder meeting/webinar on the work in progress to modify the Special (IEP) diploma that is given to students w/disabilities who cannot achieve a standard or advanced diploma. The focus is on ensuring that students leave school with a diploma and an academic resume that reflects the skills and competencies they have achieved. The goal is to facilitate employment. This is also a recommendation from Council in its 2014 Assessment of Disability Services in VA. Council Director had met with VDOE staff on this previously and it has also been discussed at the SSEAC meetings. Council Director also participated in the workgroup addressing local determinations of progress with respect to quality vs.compliance monitoring at the local level.

Council Director also presented to the SSEAC on Council's Assessment of the Disability Services System in Virginia (Assessment) and its related findings and recommendations in the areas of early intervention and education. See narrative for Objective 2-21 related to Assessment presentations.

In FFY2014 Council staff facilitated a panel discussion for the Virginia Dept. of Education Aspiring Leaders Program on family input in special education and transition processes. There were 25 attendees (SC05 = 25). This is an annual program.

Council staff was active during the 2014 General Assembly session and commented on several proposed bills through the confidential executive branch process. These included, but were not limited to, HB 1086 relating to special education and multi-division online courses, virtual school programs and responsibility/accountability for FAPE. Comments were provided to the Secretary of HHR, Secretary of Education and Dept. of Education (already counted above). The bill passed in amended form.

Legislative summaries were submitted through confidential executive branch process on HB926 on behavior analysis and licensure. The bill established the Advisory Board on Behavior Analysis to advise the Board of Medicine on issues related to licensure of behavior analysts and assistant behavior analysts and provide that a student enrolled in an accredited behavior analysis education program may perform behavior analysis as part of his program of study. Comments were submitted to the Secretary of HHR (already counted above).The bill passed. As noted above, the Board testified before House and Senate committees re HB 1106 regarding seclusion and restraint in public schools.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	15
SC05 Members of the general public reached:	25
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 2.21:

Monitor and provide input on legislation, regulations, policies and budget actions affecting individuals with disabilities and their families.

Implementation activities:

- a. Provide public comments; develop policy positions; and participate in state level task forces and advisory councils addressing policy issues.
- b. Development and dissemination of the 2014 Assessment of Disability Services System in VA.

Activities undertaken were: All met Partially met Not met

Timelines:

- a. October 2013 - September 2016
- b. October 2013 - September 2015

Timelines established were: All met Partially met Not met

Annual Progress Report:

a. Council submitted public comment on two legislative bills regarding services administered by the Dept. for Aging & Rehabilitation Svcs. (DARS). HB 1076 modernized & clarified the definition of the agency’s target population from “functional & central nervous system disabilities” to “physical & sensory disabilities” (SC04= 1). Council also provided supportive feedback & recommendations to improve HB 554, which established licensure requirements for providers of homemaker services (SC already counted). Both bills were approved & implemented.

Additional legislative advocacy conducted by Council in FFY 2014 is documented under other Goal 2 objectives (eg, see # 9 & 12).

b. A major Council activity during FFY 14 was research, development & distribution of its

comprehensive report, the 2014 Assessment of the Disability Services System in Virginia. The Assessment has two parts: 1) a factual description of available services for individuals w/ DD that are funded, administered or licensed by the Commonwealth and trends re: use, availability, gaps, & costs; & 2) recommendations (82) for system improvements based on the findings. The Assessment is organized by categories of core services & supports needed by Virginians with developmental and other related disabilities across the lifespan: early intervention, education, employment, health care, Medicaid, community housing, transportation, institutional supports, and community living supports. It also includes: a list & description of all statewide disability advocacy groups; & a concise guide to IwDD on preparing for natural disasters and other emergency conditions, including state & local contact agencies information..

Development of the Assessment involved extensive staff research of: state agency publications (both print and online); agency web pages; legislative study reports; annual state budgets; agency strategic plans; minutes of agency Board meetings; minutes of interagency taskforces; and national reports. After initial research, staff corresponded with each state agency involved in a service for utilization & expenditure data as well as additional information. During chapter development, staff communicated by phone or e-mail with agency staff, as indicated, to obtain clarification and to seek additional insights about identified trends. When draft chapters were completed, Council sent chapters to agencies to review content & data for accuracy. Agency feedback or corrections were then made to finalize the chapters, which then underwent internal review before being sent to an external editor. The Board for Council reviewed the Assessment findings and developed recommendations for change. Those recommendations will be used by Council to both shape and inform its advocacy activities. In 2016, it also will be used in development of the Council's new 5-year State Plan.

Once published, Council first sent copies (print & CD) of the Assessment to the Governor as well as the Secretary of HHR and their policy staff; & then to members of the current General Assembly & to members of Virginia's Congressional delegation (SC04 = 156); and then to HHR agency heads (SC04 = 11). Print copies of the Findings & Recommendations (vol. 1) and CD of complete Assessment were then sent to: Community Services Boards, Centers for Independent Living, various disability advocacy groups and Council listserve constituents (SC05 = 531). Announcements of the Assessment's publication were sent to Council's listserve members by e-mail, were posted: Assessment online version is in accessible format. All announcements noted that accessible versions were available upon request.

In FFY2014 Council Director gave 2 presentations on findings & recommendations from Council's 2014 Assessment. Council presented on early intervention, education, employment, & Medicaid services for individuals with ASD & other DD to the Legislative Autism Advisory Committee (SC04 = 7). Council recommendations on Early Intervention were used as a foundation for legislative & budget considerations for the 2015 state legislative session. Council Director gave a presentation focused on education findings & recommendations to the State Special Education Advisory Council (SSEAC, SC04 = 20).

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
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SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	175
SC05 Members of the general public reached:	551
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Section III: Progress Report - Goals and Objectives

Goal 3: Self-advocacy

Youth and adults with developmental disabilities and their families are actively engaged in leadership and systems advocacy on the local, regional and statewide levels.

Area of Emphasis	Planned for this Goal	Areas Addressed
Quality Assurance	planned	
Education and Early Intervention		
Child Care		
Health		
Employment		
Housing		
Transportation		
Recreation		
Formal and Informal Community Supports		

Strategies	Planned for this Goal	Strategies Used
Outreach	planned	
Training	planned	
Technical Assistance		
Supporting and Educating Communities		
Interagency Collaboration and Coordination		
Coordination with Related Councils, Committees and Programs		
Barrier Elimination		
Systems Design and Redesign		
Coalition Development and Citizen Participation	planned	
Informing Policymakers		
Demonstration of New Approaches to Services and Supports		
Other Activities		

Intermediaries/Collaborators	Planned for this Goal	Actual
State Protection and Advocacy System	planned	
University Center(s)	planned	
State DD Agency		

Other Collaborators Planned:

Dept. of Education, PIP & YLF alumni, CILs, disability advocacy orgs

Other Collaborators Actual:

Dept. of Education, PIP & YLF alumni, CILs, disability advocacy orgs, The Arc of VA, I'm Determined alumni

Objective 3.1:

By 2016, at least 125 self advocates will be supported to influence public policy and systems change and increase their participation in civic, leadership and community activities.

Implementation activities:

Plan and conduct annual training programs- Youth Leadership Forum (YLF) & Partners in Policymaking (PIP). YLF is a competitive, 1 week long training program for youth to develop advocacy & leadership skills for rising HS juniors & seniors w/ DD & other disabilities. PIP is an

8-month long (1 weekend/month) advocacy training program for adults w/ DD or parents of youth with DD or other disabilities.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2011 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

The Virginia Youth Leadership Forum is a five-day leadership program that provides rising high school juniors and seniors with a disability an array of leadership and personal development activities and opportunities. The Virginia YLF is based on the successful California model of youth leadership development where students learn about: the history of the disability rights movement; the ADA; assistive and other technologies; employment and vocational training opportunities; higher education; networking skills; teamwork; working with legislators and policymakers; and the importance of civic involvement.

An important outcome for each student participant is the development of a "Personal Leadership Plan" designed to help students identify and plan for future education and career goals. As reported in previous PPRs, the YLF empowers student participants to fully understand their disability, their rights, and the importance of being a strong self-advocate. This very attitude of empowerment, self-confidence and pride is helping to raise the bar for all students with a disability in the Commonwealth. YLF alumni have expressed that the program helped them to clarify their future goals, examine their strengths and interests, develop career choices and set goals for higher education or vocational training.

Highlights of the week's activities included hearing national speakers such as LeDerick Horne, Michael Beers and Mark Goffeney, a guitarist who plays with his feet. Presentations included information on employment, assistive technology, social media and personal branding, no IEPs in college, and living with a disability helped students gain a well-rounded understanding the means to personal growth.

For one day students went offsite to the State Capitol for "Capitol Day." The theme was "For the People, by the People." It was the Council's goal that student delegates gain a greater appreciation for the important role and responsibility each U.S. citizen has to participate in their government and understand that one individual can make a difference. Dr. Jennifer Lee, VA Office of the Secretary of Health and Human Resources, met with student delegates and shared the importance of communicating with local elected officials. Student delegates prepared a "mock" testimony on an issue important to them and delivered their testimonies to a "mock" committee panel made up of two legislators, agency representatives, Council members and staff. Topics included: accessibility of forms in doctors' offices, bullying, SOL testing, emergency response systems in rural areas, disability etiquette and awareness in schools, and language interpreters for parents who do not speak English during IEP meeting.

Another activity aimed at raising the self-esteem of the delegates was to develop individual "I am" statements. The student completes the sequence: "I am _____ today, I am _____ tomorrow, I will be _____." Their statements were video recorded to share with parents during the

graduation ceremony and the students also orally shared their statements with guests of the Networking and Mentor Luncheon.

20 students graduated from the 2014 YLF (SA02=20) in August 2014. The Council received a 100% evaluation response rate from delegates. [what was average score ???] Capitol Day received the highest score of all YLF activities.

The VA Dept. of Education contributed \$16,800 to the YLF in FFY2014. (RL01 = 16,800)

Additionally, 9 self-advocates participated in the Council's Partners In Policymaking (PIP) program graduating in May 2014 (SA03=8). PIP provides program participants with education, training and resources to better enable them to influence public policy and systems change and increase their participation in civic, leadership and community activities. Additional detail regarding PIP is included in the narrative for Objective 3-2.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	20
SA03 People trained in systems advocacy:	8

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$16,800
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Objective 3.2:

By 2016, at least 75 parents/guardians of individuals with developmental disabilities will be supported and trained to influence policy and systems change.

Implementation activities:

Plan and conduct PIP, annually.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2011 - September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

The 2013-2014 Partners in Policymaking (PIP) was held in Richmond, VA. A total of 24 individuals graduated from the program, including 16 family members (SA03 = 16) and 8 self advocates (reported under Objective 3-01).

Training session topics included: Disability History Facts; History of the Self Advocacy Movement; History of the Disability Rights Movement; The Medicaid Maze; Communicating with Legislators; The Opportunity of Adversity; The Arc of VA; Inclusive Education in Montgomery County Public Schools; DOJ Settlement Agreement with the Commonwealth; Supportive Living; Self-Determination; and the DD Act and the DD Network in VA.

National speakers included Bradford Hulcher and Betty Thompson (Person Centered Planning), Erin Riehle (Project Search), Kathie Snow (Disability is Natural, Living Real Lives and Dreaming Big Dreams & Creating Community with Natural Supports and Generic Services, Inclusive Communities: Organize for Change), Jerry Adams (the History of Human Services and A History Perspective), Bobby Silverstein (How to Be an Effective Disability Policy Change Agent), and Charlie & Maria Girsch (Out of the Box Thinking).

As PIP participants declared their projects they were divided into teams with similar interests. Team members supported each other through development and execution of final projects. Just a few examples of the projects include: change inclusive education policies and practices in school division; establish a parent advocacy program through PTAs; start a parent men's support group; create guidelines for parents on creating a space in their home to support children with sensory and developmental needs; self-advocates create a training program for public/para-transit drivers; create a mentor/buddy network for families who are new to disability and medically complex diagnosis to pair them with experienced families; and work with churches to reach out to the community to help with disability awareness and tornado/emergency preparedness.

The participants also presented "Comment/Testimony" utilizing a testimony template to prepare testimony. Council staff presented on self-determination and Jack Brandt of the Partnership for People with Disabilities (UCEDD) presented on providing legislative testimony in preparation for the April Capitol Day mock legislative forum. A Mock Committee Hearing, held in the Capitol Building, include PIP participants, Council staff, Del. John O'Bannon (who served as chair); and the legislative aide to Del. Carr. Partners provided well constructed and impactful testimony.

Some comments from the PIP participants: "I was glad I went through the program. It has helped me and I will continue to help others." The speakers were excellent. The staff is amazing. It was challenging and empowering." "Tremendous program. Amazing people. So grateful that this program exists. Thank you!" "I liked the intense training sessions and vast resources---caliber of speakers. I also like that PIP helped me with my son personally, but with my community and other parents to find resources and feel more empowered to be an advocate." "This was a joyous life changing journey. I am eager to take what I have learned to share and, hopefully, continue to make positive change and awareness in my community."

Council began to recruit for the 2015 class of PIP, however, due to lack of staff and financial resources, Council could not hold a session in FFY2015. Council expects to resume PIP in FFY2016.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	16

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 3.3:

By 2016, at least 350 individuals with developmental disabilities and their family members will receive information and/or resources from our partners that will help them address policy and advocacy barriers and support coalition building on the local, state or community level.

Implementation activities:

Continue liaison activities to support PIP & YLF alumni in local, regional and statewide advocacy activities to address advocacy barriers.

Activities undertaken were: All met Partially met Not met

Timelines:

October 2014-September 2016

Timelines established were: All met Partially met Not met

Annual Progress Report:

Again, this year Council provided funding to the annual Arc of Virginia 2014 State Convention held in Richmond July 30th through August 2nd. 446 individuals with developmental disabilities and their family members attended (SC05 = 446). The following workshops are a sampling of what was provided to participants: An Overview of Public Policy Issues Affecting Virginians with me /DD, An Overview of Public Policy Issues Affecting Virginians with I /DD, Consumer Directed Services: Making Them Work for You! Virginia's Transition to Community Based Services, Project Unify: The Power of Building Inclusive School Environments through Sports Leadership and Advocacy, Post-Secondary Education: A Panel of Personal Stories, Speed Dating, Navigating the Service System: Medicaid Waivers, An Update from Virginia Department of Education, An Update on Waiver Redesign, Supported Decision Making, Future Planning and the Role of the Special Needs Trust, ABCs of IEPs, Early Intervention: What Every Advocate Needs to Know About This Important Program, and Social Media: Building a Safe Online Network of Friends. The conference featured a session on the Peer-to-Peer Mentor program, funded through a Council grant (see Objective 2-12), where individuals with disabilities and partners have been trained to mentor individuals who are moving (or have recently moved) from training centers into the community.

During this reporting period, the Council staff participated in an initiative entitled, Inclusion Day Planning. This project was led by a dedicated group of leaders with disabilities from Virginia's Youth Leadership Forum alumni and I'm Determined participants (www.imdetermined.org), a Dept. of Education initiative, who were concerned about what they perceived as a lack of general awareness of disabilities in schools by peers, educators and staff. A Steering Committee was formed composed of VCU Partnership for People with Disabilities (UCEDD), the VCU Rehabilitation Research & Training Center at VCU, a school superintendent and 8 YLF alumni. (SA04 = 7; one alumni already counted under the YLF, Obj. 3-01.) There was a great deal of synergy among the students who are developing a toolkit to be used in schools throughout Virginia during the month of October, Disability History Awareness Month in the Commonwealth. The toolkit, which should be completed in FFY2015, is intended to increase awareness for students with disabilities and convey that disability is natural, and the student's values, beliefs and perspectives about life are not aligned with the diagnosis or a label place upon a person. Familiarity and understanding will, hopefully, decrease incidents of bullying, particularly targeted to students with disabilities.

In the 2015 State Plan Update this objective will be modified to focus on YLF/PIP alumni development and finding strategies to address barriers locally and regionally for the advocates.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	64
SA05 People attained membership on public/private bodies and leadership coalitions:	20
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	446
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:	\$0
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Objective 3.4:

By 2016, a statewide self advocacy organization led by individuals with developmental and other disabilities will influence policy and systems change.

Implementation activities:

Virginia Advocates United Leading Together contract terminated November 2013; plans for activity pending.

Activities undertaken were:



All met

Partially met

Not met

Timelines:

March 2012 - September 2014

Timelines established were:



All met

Partially met

Not met

Annual Progress Report:

In FFY2012, Council funded a self-advocacy organization, Virginia Advocates United Leading Together (VAULT). As there was a lack of progress in Year 1, a contract for year 2 of funding was awarded in March 2013 with certain conditions. Conditions included increasing the number of self-advocates advocating for policy issues, filling un-filled seats on the Board of Directors, implementing a membership program and establishing a fundraising plan to sustain the organization. By August of 2013 there were continuing concerns that progress was not being made and in November 2013 Council's Executive Committee met to review the status of the contract. The Executive Committee made a recommendation to the full Board in December 2013 to terminate the contract with VAULT.

In Councils 2015 State Plan Update, this objective has been refocused to support and provide technical assistance to statewide conferences in which self-advocates participate in the development and comprise a substantial proportion of attendees.

Performance Measures

Performance Measure 1.1 (self-advocacy/advocacy):

SA01 People trained in area related to goal/objective:	0
SA02 People trained in leadership, self-advocacy, and self-determination:	0
SA03 People trained in systems advocacy:	0

Performance Measure 1.2 (self-advocacy/advocacy):

SA04 People active in systems advocacy:	0
SA05 People attained membership on public/private bodies and leadership coalitions:	0
SA06a Other self-advocacy measure:	0
SA06b Other self-advocacy measure:	0
SA06c Other self-advocacy measure:	0

Performance Measure 2.1 (systems change):

SC01 Programs/policies created or improved:	0
SC02 Number of organizations involved coalitions/networks/partnerships:	0
SC03 Organizations engaged in systems change efforts:	0
SC04 Number of public policymakers educated:	0
SC05 Members of the general public reached:	0
SC06a Other systems change measure:	0
SC06b Other systems change measure:	0
SC06c Other systems change measure:	0

Performance Measure 3 (resource leveraging):

RL01 Dollars Leveraged:

\$0

Section IV: Satisfaction with Council Supported or Conducted Activities

Individual Survey Responses:

Number of responses:	300
Respect (%):	Yes 97.00% No 3.00%
Choice (%):	Yes 93.00% No 7.00%
Community (%):	Yes 93.00% No 7.00%
Satisfaction (%):	58.00% Strongly Agree 39.00% Agree 2.00% Disagree 1.00% Strongly Disagree
Better life (%):	54.00% Strongly Agree 40.00% Agree 4.00% Disagree 2.00% Strongly Disagree
Rights (%):	Yes 95.00% No 5.00%
Safe (%):	Yes 94.00% No 6.00%

Individual Comments:

Survey responses were collected online (interactive) as well as by targeted e-mails & regular mail (print). Respondents included past & recent graduates in Council training programs (PIP, YLF) & in Council supported projects (grants, contracts). They self-identified as: Individ. w/ disability (IwD, 40%); family members of IwD, 27%; service provider, 11%; govt. agency employee, 7%; member of advocacy orgs, 4%; & Other, 11%. Typical comments re: Council: "Always great information & support"; "use information [from Council] on a regular basis"; "provides comprehensive & easily accessible information". Several were unclear about Council's role: "... need to be clear how they can help people w/ disabilities ..."; "Activities seem limited" ...; & "Board addresses developmental disabilities but not physical disabilities". A few urged more outreach to those who are deaf. Training programs remain highly valued. YLF grads noted: "I love the program"; "YLF... has given me confidence to do my best & be successful". PIP grads reported that PIP provided motivation, encouragement and new advocacy strategies: "I'm more empowered to make change"; "the knowledge gained was immense"; "I am able to stand up for myself better". One noted: "PIP is an amazing program, & one that I highly encourage all applicable families to investigate. "PIP helped me to establish connections with organizations & agencies that I would not have otherwise done." Participants in Council funded projects were very appreciative. Many comments came from a transportation grant (AAAs). Typical example: "In other words, without [project], I'd be walking & I'm NOT ABLE". Other comments: "I am able to ... enjoy life as I should be able to"; "Sat. trips give my dad more freedom". VCU RRTC project was recognized for getting individuals work or supports to maintain jobs: "helped me learn new skills ..."; "helping me experience different jobs"; & "learning... how I can hire indiv. [w. disabilities]". "Having this partnership has helped us to 'break through' to the families who have been so hesitant to the idea of Supported Employment". Participants in VaOHC "Improving Oral Health" project (dentists, hygienists) reported: "... free training course increases my confidence & willingness to treat disabled patients"; "training materials were very helpful"; "raising awareness of dental needs of people w/ disabilities & the barriers to dental care"; & "helpful in educating patients & caregivers about oral hygiene...".

Stakeholder Survey Responses:

Number of responses:	235
Choices & Control (%):	43.00% Strongly Agree 48.00% Agree 8.00% Agree Somewhat 0.00% Disagree Somewhat 0.00% Disagree 1.00% Strongly Disagree
Participation (%):	44.00% Strongly Agree 47.00% Agree 7.00% Agree Somewhat 0.00% Disagree Somewhat 0.00% Disagree 1.00% Strongly Disagree
Satisfaction (%):	50.00% Strongly Agree 44.00% Agree 4.00% Agree Somewhat 1.00% Disagree Somewhat 0.00% Disagree 1.00% Strongly Disagree

Stakeholder Comments:

Respondents most often engaged w/ Council for info on disability services, issues, & policies. Use of Council website, social media & e-news continues to be strong. Numerous general comments about Council focused on advocacy role: “provides excellent advocacy on behalf of people with disabilities to policymakers”; “... has played a major role throughout the years in improving the lives of people with disabilities”; “... has been a leading advocate for persons with disabilities and their families”. Council “... has had a very strong impact on the disability community.... Three respondents thought Council was not active enough in promoting policy change: “get more action”; “More support of advocacy organizations; ... “fund public awareness, waiting list campaigns, rights trainings”. Two felt Council should focus more on needs of deaf. Another noted: “have no knowledge Perhaps[Council]needs to increase its visibility?”

Grant project respondents overall felt that the projects made a positive difference in their communities or lives. “[EPI project]... gives individuals more independent choices on how to more actively live their lives”; “VBPD empowers & supports individuals & their families-something that very few, if any, organizations do effectively”. From VaOH project: “Very positive impact on ... individuals as well as other community members”; “program brings great impact on the life of each individual ... self-confidence & willingness to be/go out in the community”. From Peer-to-Peer Mentoring: “...VBPD walks the walk & does so in a responsible & accountable way”; “Training peer mentors to support people making the transition into communities will take enormous stress off...”

Section V: Measures of Collaboration

Critical issues/barriers affecting individuals with developmental disabilities and their families that the collaboration has jointly identified:

1. Implementation of DOJ Settlement Agreement
2. Use of Seclusion & Restraint in Schools

Section V: Measures of Collaboration

Issue 1: Implementation of DOJ Settlement Agreement

Description of collaborative issue/barrier or expected outcome:

In Aug. 2012, the federal court approved Virginia's Settlement Agreement with the U.S. Dept. of Justice (DOJ) which commits to significant improvements in services/supports to indiv. w/ ID/DD who: reside in state-operated Training Centers, nursing homes, or non-state ICFs; or are on a Medicaid Waiver wait list. To address issues raised by DOJ, Va. decided to expand community service capacity & oversight as well as to develop a plan to close 4 of 5 state Training Centers by 2020. Resistance to closures from some families of TC residents & some localities (NIMBY) continued. Nevertheless, the 1st center (SVTC in Petersburg) transitioned all residents & closed in June 2014; & at the end of FFY14, Training Centers' total census was < 650 indiv. Significant progress was made to implement a statewide crisis intervention program for indiv. w/ ID/DD, now called REACH (Regional Education, Assessment, Crisis & Habilitation program). Although some staff retention issues arose during program initiation, REACH programs (originally based on START model) have operated in all 5 regions since end of FFY13.

Through advocacy on proposed legislation, regulations/policies, & budget actions, Council & Network engaged in efforts w/ other advocacy partners to support the Settlement Agreement terms to ensure that lw I/DD are served in the most integrated setting appropriate to their needs. All Network entities serve on a variety of interagency workgroups addressing Settlement Agreement components. The network partners additionally have met & otherwise communicated periodically w/ the DOJ attorneys & the Independent Reviewer (IR), who provides oversight for the court & DOJ. The IR meetings are to provide our perspectives & feedback on both progress being made & challenges seen; and to convey what each entity individually & together are doing to support Agreement implementation. The IR uses the meetings to ask specific questions about the service system & implementation activities. Full implementation of plans to address Settlement Agreement will not be completed until 2020.

Life Areas:

- | | | | |
|---|---|--|---|
| <input checked="" type="checkbox"/> Self-Determination | <input checked="" type="checkbox"/> Health | <input checked="" type="checkbox"/> Transportation | <input type="checkbox"/> Recreation |
| <input checked="" type="checkbox"/> Employment | <input type="checkbox"/> Education | <input type="checkbox"/> Childcare | <input checked="" type="checkbox"/> Housing |
| <input checked="" type="checkbox"/> Community Inclusion | <input checked="" type="checkbox"/> Quality Assurance | | |

Council roles and responsibilities in collaboration:

DOJ Settlement Agreement required Council to be rep in planning increased integrated community housing options, & participation in group continued. Council staff also have been active in other DOJ workgroups led by the Department of Behavioral Health & Developmental Services (DBHDS): provider training workgroup; Individual & Family Support workgroup; & the Stakeholder Advisory group (providing feedback on DOJ activities & progress made). Council sits on several Waiver Redesign workgroups & Waiver Redesign Advisory Council, on which P&A & UCEDD also sit. Council provides ongoing feedback to Secretary of HHR as well as DBHDS & Dept. of Medical Assistance Svs leadership (among others) re: issues & concerns on current/proposed policies & practices which affect Agreement implementation. Council consults regularly w/ DD Network partners on these activities. Council informs constituents of Agreement progress & issues thru electronic, web, & social media. Council's investments have been, & will continue to be, supportive of Settlement Agreement goals. Since FFY13, a Council funded short film ("Place Matters") has been used for public awareness & education: it shows transition of 7 indiv. w/ ID/DD from training centers to community. Several Council funded grant projects were initiated in FFYs13-14 specifically to support system change. One grant award went to UCEDD to develop & conduct training to indiv. w/ ID/DD on how to develop healthy relationships & to prevent/avoid domestic violence & sexual abuse. Council worked both within & outside of

the service system to effect positive change; & benefitted from diverse expertise, knowledge held by Network partners. Sustained involvement & advocacy by DD Network is needed in support of ongoing, sustained system change & improvements. Council serves on the state Community Integration Implementation Team, which advises Governor on strategies & progress towards fulfillment of the Olmstead decision. In late FFY13, UCEED brought Council a draft project proposal from NASDDD & AIDD to develop data-sharing or a database betw. DMAS (Medicaid expenditures) & DBHDS (Natl. Core Indicators) to improve cost/benefit analysis of both DOJ-related & Medicaid reform initiatives. In FFY14, formal agreements were completed at federal level. In FFY15, project implementation is planned; both Council & UCEED will serve in stake-holder group of state & national leaders to provide guidance/direction, esp. on research questions to be examined.

Problems encountered as a result of collaboration:

There are no challenges with respect to the collaboration. There are challenges with respect to Settlement Agreement implementation, Challenges continue to include: timely, effective implementation of certain provisions of the DOJ Settlement Agreement; need for adequate resources; state revenue stress; resistance by some family members & some localities (NIMBY); and consensus building. Implementation of the Settlement Agreement is complex, with many components, and will take many years to accomplish. (Target date for closure of the 4th Training Center is 2020.) Virginia is the only state that has a single term Governor, which results in renewed efforts every 4 years to educate the new administrative team on issues & strategies for integrated, inclusive services. There is not always consensus among advocates in the disability community on specific strategies and service changes within or outside of the Settlement Agreement, The slow economic recovery continues to be a challenging environment. Moreover, because Va. has been very reliant on federal funds - directly & indirectly - its economy is being hurt more by federal cuts.

Unexpected benefits:

None

Issue 2: Use of Seclusion & Restraint in Schools

Description of collaborative issue/barrier or expected outcome:

A long-standing issue in Virginia, as in other states, has been the use of seclusion & restraint (S/R in school settings. The issue has been heard in Congress, where a bill was drafted but has not passed. The use of S/R has been the subject of numerous newspaper articles nationally and in Virginia, including instances where students have died due to the use of prone restraints. While Revised regulations governing the use of S/R in private schools in Virginia are now pending in the Governor's office, no such regulations yet exist for S/R use in public schools. The Virginia Department of Education (VDOE) published guidelines on the use of S/R and updated those guidelines several years ago, but they are not mandatory and many school divisions have no policies or procedures governing the use of S/R. This has also been an issue discussed by the State Special Education Advisory Committee (SSEAC) on which Council serves. Parents and advocates brought the issue to attention of Virginia's legislature with compelling testimony.

During the 2014 General Assembly session, Council Director joined other advocates in testifying in support of HB1106 which required the Commission on Youth (CoY), in consultation with VDOE & DBHDS, to:

- study policies & regulations related to use of seclusion & restraint (S/R) in public & private elementary & secondary schools;
- examine efforts in other states to reduce & eliminate use of S/R in schools; &
- submit recommendations for modernizing S/R regulations & policies to VDOE & legislature by 11/30/14.

The desired goal is to significantly reduce, if not eliminate, the use of seclusion & restraint in public schools, with a focus on students with disabilities.

Life Areas:

- | | | | |
|--|---|---|-------------------------------------|
| <input type="checkbox"/> Self-Determination | <input type="checkbox"/> Health | <input type="checkbox"/> Transportation | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Employment | <input checked="" type="checkbox"/> Education | <input type="checkbox"/> Childcare | <input type="checkbox"/> Housing |
| <input type="checkbox"/> Community Inclusion | <input checked="" type="checkbox"/> Quality Assurance | | |

Council roles and responsibilities in collaboration:

Following passage of HB1106, Council joined w/ Stop Child Abuse Now (SCAN) & other advocacy organizations, including but not limited to the P&A & UCEDD, to form the statewide Coalition for Improvement of School Safety (CISS). CISS purpose is to discuss current public school policies related to S/R and develop consensus on recommendations to the CoY that would limit the use of restraint & seclusion. In August 2014 CISS submitted policy recommendations on seclusion and restraint in public schools to the legislative Commission on Youth (CoY). Council signed on to these comments as well as comments provided by the Virginia Coalition for Students with Disabilities, of which it is also a participant. The P&A also submitted public comment. Key policy recommendations were as follows: (1) Amend the definitions of restraint and seclusion; (2) Limit the use of restraint and seclusion in schools to emergencies; (3) Restraint and seclusion should only be used as a last resort to prevent immediate physical injury; (4) Require least restrictive measures (including de-escalation) to be implemented; (5) Prohibit the use of the most dangerous restraints; (6) Prohibit use of seclusion rooms; (7) Require Parental notice of S/R use; (8) Collect data about the use of restraint and seclusion. The CoY met twice in the fall & reviewed significant public comment. CISS members were asked to meet w/ members of the Commission prior to the decision-making meeting. Council Director & a member met with one of the Senators on the CoY. CISS supported a proposed CoY option to put forth legislation to require the Department of Education to promulgate modernized regulations governing seclusion & restraint in public schools. This option passed, & legislation will be entered for that requirement in the 2015 General Assembly session, which begins 1/14/15. All entities continue to participate in the CISS, will follow the 2015 legislative process, & will engage in the regulatory development process.

Problems encountered as a result of collaboration:

None.

Unexpected benefits:

Collaboration in the Coalition resulted in the establishment of relationships with organizations with which the Council had not previously engaged, resulting in the potential for new partnerships on other issues

Section VI: Dissemination

A ten page “Highlights” document of the FFY 2013 PPR report was developed, which added photographs, a pie chart on expenditures, and other visuals. The PPR Highlights presented information in simple, easy-to-read language and serves as the Council’s annual report. Grant investments, policy comments, and an overview of changes in Virginia’s approach to citizens with disabilities were included in an executive summary format. For approx. 2 months, for maximum exposure, the 2014 PPR Highlights document was featured on the home page of the Council’s website. The Council’s website received more than 18,719 visits during FFY 2014; more than 13,500 were new visitors to the site. Full accessibility of the Council website continues to be maintained for this and all other information.

Links to the Highlights document were distributed via e-news (total size of listserve is approx. 3,800 constituent contacts), including state & local policymakers, state agency & non-profit contacts, news media, & other stakeholders. It also was shared through key constituent list serves, newsletters, web postings, and on the Council’s Facebook page. Council makes the PPR Highlights, and all other publications, available in alternative formats upon request; notices of that are posted within documents and on all online websites. Hard copy of “PPR Highlights” was not printed due to budgetary constraints. The online PDF was accessible, and there were no requests for hard copies. Unfortunately, due to staffing issues, the document was not completed until late spring 2014. Because it is titled for the previous federal fiscal year, it appears outdated, even when produced quicker, and may not attract as many readers as desired.

Council’s FFY 2014 PPR will be similarly distributed as a shorter, accessible “Highlights” document. We are targeting early February 2015 for completion & distribution.