

Virginia Disability Commission
Meeting Summary
August 23, 2006

I. Call to Order/Opening Remarks

Delegate Michele McQuigg, Chair, called the meeting to order after welcoming the other Commission members and speakers.

II. Introduction to Independent Living Services and Disability Services Boards

Mary-Margaret Cash, Assistant Commissioner of the Department of Rehabilitative Services, introduced the concept of Independent Living Services (CILs) and Disability Services Boards (DSBs) in Virginia. She announced the upcoming speakers who would provide more information on these services and their funding history.

III. Statewide Plan for Independent Living (SPIL)

Lisa Grubb, Executive Director of the Statewide Independent Living Council (SILC), reviewed the statutory origin of the SILC and the State Plan for Independent Living (SPIL). The Rehabilitation Act of 1973, as amended, requires each state to establish a SILC in order to qualify for financial assistance under the Act. Ms. Grubb explained that the mission of the SILC is to promote effective policies, programs, and activities that maximize independence for Virginians with disabilities. She noted that the SILC must consist of a majority of people with disabilities who are not employed by the State or by a Center for Independent Living (CIL). The state then adopts a Statewide Plan for Independent Living (SPIL) to ensure coordination of services. Ms. Grubb indicated that the current SPIL with seven goals outlined remains in effect from 2004 to 2007.

The Chair and other members requested more information on the outcomes as well as the goals. They requested a full report and asked about the annual budget (approximately \$450,000) designated for the SILC. Ms. Grubb offered to provide a report and explained that \$380,000 goes to field work. In response to questions, she explained that communication can minimize potential agency duplication.

IV. Services at Centers for Independent Living (CILs)

Kelly Hickok, the Community Advocate for Resources for Independent Living in Richmond, described the history of Centers for Independent Living (CILs) and the services they offer. In her presentation, she explained that the civil rights struggle of the '50s and '60s influenced the Independent Living Movement for disabled persons. While the Civil Rights Act of 1964 did not include disabled persons, the passage of the Rehabilitation Act and the Education for All Handicapped Children Act in the '70s did mark the beginning of full participation in society. Title VII of the Rehabilitation Act provided federal funding for state Centers for Independent Living (CILs). Ms. Hickok explained that CILs are consumer-controlled, community-based, cross-disability, and nonresidential, private non-profit agencies. By law, CILs

must provide four core services: 1) Independent Living Skills Training, 2) Information and Referral, 3) Peer Counseling, and 4) Advocacy. Ms. Hickok listed the 16 CILs in Virginia and described the branch offices for consumers in outlying areas. She further noted the two satellite offices that hope to become free-standing CILs with additional funding.

Ms. Hickok reported that currently 5,989 people with disabilities have been placed in nursing homes in Virginia and all have indicated to the Department of Medical Assistance Services that they want to leave. Of that number, Ms. Hickok reported that 64 are age five or younger and 108 are minors between the ages of 6-20.

Ms. Hickok presented the budget initiative of the Virginia Association of Centers for Independent Living (VACIL) that requests \$ 2 million to expand outreach and transition services to people in nursing homes, to distribute among all 16 CILs, and to establish new CILs in Loudoun County, Middle Peninsula, the New River Valley, and Petersburg. On behalf of VACIL, Ms. Hickok thanked the Disability Commission and requested continued support.

Members commented on funding to allow children to transition out of nursing homes, outcome measurements, the differences between satellite and branch offices, the places served, and the distribution of funds. Ms. Hickok and Ms. Preda offered to provide reports with the requested information.

V. History of Funding for Centers of Independent Living (CILs)

Theresa Preda, the Director of Independent Living at the Department of Rehabilitative Services, reported on the funding history of Centers for Independent Living (CILs). Her presentation included a map of Virginia that displayed CIL service coverage by planning district and she noted four areas that have not been served. Ms. Preda underscored that they are proud of Virginia's focus on CILs and appreciate that it is one of only 15 states in the nation that provides more state than federal funding. The graphs she presented demonstrated that state funding has increased steadily over the past two decades, although satellites receive far less funding than established CILs. In her presentation, Ms. Preda set forth the requirements mandated by law, including the four core services, an active Board of Directors and staff composed of a majority of disabled persons, standard legal and financial practices, and the annual submission of data from all CILs to the Rehabilitation Services Administration. Ms. Preda also outlined the accomplishments of Virginia CILs in 2006, which included the number of individuals served and moved into the community.

Ms. Preda responded to questions from members on plans for unserved areas, annual objectives for CILs, and the number of disabled persons in CIL planning districts. Ms. Preda offered to provide the Commission with a matrix of goals and reports with aggregated data based on census figures. She explained that CILs always prioritize the most severely disabled.

VI. Disability Services Boards (DSBs)

Richard Kriner, DSB Program Manager for the Department of Rehabilitative Services, introduced the 40 DSBs in Virginia that include 5 inactive DSBs. In his discussion of the history of funding, he noted that reduced funding beginning in 2003 has hurt the provision of services, especially for sign language interpreters. Mr. Kriner described the Rehabilitative Services Incentive Fund (RSIF) and showed diagrams of counties that received grants, the levels of program investment, the numbers served in core areas, and the RSIF grant trends for fiscal years 2004-07.

Mr. Kriner advised the Commission that DSBs ranked transportation as the most common critical need, followed by housing, medical therapeutic services, and assistive technology. Options for transportation grants include purchased and subsidized rides, accessible vehicles, and a transportation brokerage system to coordinate existing resources under one number. Housing grants have been applied to construct reusable ramps to support home access, to establish a non-profit housing agency with low rent units, and to secure funding for development of fully accessible low income housing. Mr. Kriner listed other grants that funded the development of a pediatric feeding clinic, specialized brain injury management services, and an assistive technology and disability resources specialist. They seek additional grants to fund an emergency management coordinator, a sign language interpreter training program at community college, and an assistive technology loan closet.

Members inquired about the number of DSBs in Virginia, the relationship between DSBs and CSBs, and sought more details on the budget and external review. Mr. Kriner offered to supply additional information and noted that the last audit was in 1999. He explained that DSBs and CSBs are separate and that DSBs do not provide direct services. Instead, DSBs coordinate local responses and information to meet the needs of the disabled. Mr. Kriner confirmed the duties of DSB staff and quarterly reports that measure outcomes, as required by the RSIF.

Mike Hatfield, Disability Resources Coordinator for the City of Alexandria DSB, described how RSIF grants led to achievements in Alexandria. Mr. Hatfield reported that an RSIF grant in 1998 enabled a successful three year employment initiative. As a result, nearly 70% of Alexandria's disabled residents are now members of the workforce. This statistic presents a sharp contrast to national figures that show nearly 70% of disabled persons are unemployed. The Department of Labor's Office of Disability Employment Policy recognized the JobLink program in Alexandria as a national model and Best Practices site.

Mr. Hatfield further reported that the Alexandria DSB used its 2002 RSIF grant to test and provide audible pedestrian signals at traffic intersections. These signals successfully improved quality of life, safety, and mobility, so they are being installed throughout the city.

To continue transportation improvement projects and meet needs for accessible medical services, insurance, and housing, Mr. Hatfield asked the Commission to call for the full restoration of the RSIF. He contends that only the restoration of RSIF will allow every DSB to enjoy similar innovations and success in their respective locality. For example, there were 69 RSIF grants in 2002, but in 2006, only 4 have been awarded.

For the members, Mr. Hatfield clarified the duality of being a city government employee and staff support for the Alexandria DSB. He explained that the DSB monies went to the city and that his cross-employment works well to serve the disabled.

Joan Manley, DSB Board Member of the Rockbridge DSB, provided a more rural perspective on DSB services. Ms. Manley praised the positive impact of Mr. Kriner as the new DSB Program Manager for Virginia. She explained that DSBs must identify needs and promote awareness of needs at the community level. Ms. Manley applauded original ideas, exciting pilot programs, and the opportunity for DSBs to share information. Successful programs in Rockbridge that she described included wheelchair ramps and the installation of a loop system for the hearing-impaired to hear speakers at public hearings. She described her work as inspiring, creative, and responsive to specific needs. With additional funding, she would like to pursue a DSB website, news reports, and community fairs to exchange new ideas.

VII. Public Comment

John Congable of Senior Connections, the Capital Area Agency on Aging, addressed the Commission regarding his plans to remedy transportation problems for the disabled. In his retirement, he runs the Smart Ride program for the elderly and visually impaired and finds it very rewarding. As the Transportation Coordinator for Smart Ride, he confirms that hundreds of disabled persons in the Richmond area need transportation. Based on a needs assessment conducted by the Richmond Regional Planning District Commission and approved by the Richmond Metropolitan Planning Organization, there is a growing need for more and better transportation for elderly, disabled, and low-income populations. Due to the pressing need, Mr. Congable may not wait for the government to back him. He briefed the Commission on the planning behind the development of a community-based coordinated transportation system called, "Ride Connection," and a coalition of stakeholders called the Regional Transportation Association (RTA). Mr. Congable informed the Commission that the Federal Transportation Administration (FTA) requires counties to hold open forums on special needs as a condition to receive transportation grants. In closing, Mr. Congable appealed to the Commission to target transportation issues and legislation to further these objectives.

VIII. Review of 2006 Work Plan

Ellen Weston, DLS Staff, set forth the Proposed Work Plan for the Disability Commission during the 2006 interim. She reviewed the objectives of the current meeting, the Employment focus of the next meeting, and the follow-up focus for the fourth meeting. She further noted that the Commission may call for a final brief meeting in December or January to discuss proposed legislation.

At the next meeting, the Commission will examine state employment policies that promote employment of disabled persons, including outsourcing work to employment service organizations or individuals, and support for private employers who hire disabled persons. The next meeting also will consider the Medicaid Buy-in Program and the Virginia Work Task Force.

At the fourth meeting, Ms. Weston expects updates from the Housing Work Group on the visitability certification process, reports from the Joint Commission on Health Care and its Behavioral Health Care Subcommittee with endorsed legislation, a report from the Autism Council, and a briefing by Jim Rothrock on transportation initiatives, particularly in rural areas. Moreover, at the fourth meeting, the Commission will review legislative proposals for the 2007 session, including the repeal or extension of the 2007 sunset clause for the Commission.

Members commented on modifying the Work Plan to directly produce legislation and the Chair promised to take their concerns into account.

IX. Adjournment