
training and advocacy

Achieving the Vision: *Community Integration of Virginians with Disabilities After Olmstead*

By Julie A. Stanley, J.D.

The U.S. Supreme Court's Olmstead decision prompted state activities designed to assure that Virginia moves steadily toward community integration of people with disabilities. Since submission of comprehensive Task Force recommendations in 2003, a Team of executive branch state agencies in four secretariats has worked together under the watchful eye of—and with—a cross-disability stakeholder advisory commission in order to achieve the Task Force's consensus vision that Virginia become “one community” for everyone.

Governor Kaine issued Executive Order 2 (2006) and Executive Directive 6 (2007), directing the preparation and annual update of a Cross-Governmental Strategic Plan for Continued Community Integration (Strategic Plan). The Plan updates, accompanied by progress updates, are due to the Governor by August 31 each year.

The draft Strategic Plan completed by the Team and Commission has two goals: 1) helping people who want to live in the community to transition out of institutions, and 2) preventing unwanted institutionalization of people who currently live in the community. A series of action plans addresses strategies for seven “critical success factors:” planning, understanding, choosing and self-directing services and supports; choosing quality providers; locating and obtaining appropriate housing; locating and obtaining a job; accessing appropriate transportation; accessing a qualified surrogate decision-maker if necessary; and accessing ongoing supports in the community. Smaller groups refined the action plans and are currently developing baselines to measure future progress on outcomes.

While the Strategic Plan is being finalized, significant portions are also being implemented. Medicaid provider reimbursement rates have increased significantly. The personal maintenance allowance has increased from 100 percent to 165 percent of Supplemental Security Income. Additional slots have been added to the Medicaid Waivers: 860 Mental Retardation (MR) Waiver slots in 2004, and 523 in 2006; 110 MR Waiver slots for children in 2006; and 105 Developmental Disabilities (DD) Waiver slots in 2004, and 65 in 2006. Medicaid reimbursement for Positive Behavioral Supports is now available. Day Support

and Alzheimer's and Dementia Medicaid Waivers have been established, and the Elderly and Disabled Waiver merged with the Consumer-Directed Personal Assistance Services Waiver, providing additional services and opportunities for consumer direction. Three new Programs of Assertive Community Treatment, 130 new discharge assistance plans, nine new crisis stabilization programs, and increased funding for community inpatient bed purchases are available for people with mental health issues.

Three significant competitive federal grants are boosting efforts to create community integration opportunities. One, a five-year Systems Transformation Grant awarded by the Center for Medicare and Medicaid Services (CMS) last fall, is designed to improve access to and control of long-term supports statewide through a No Wrong Door initiative; promote person-centered thinking and planning in service systems; create an individual budgeting capability in some waivers; streamline enrollment, preauthorization and waitlist submission processes in the MR and DD waivers; and produce critical incident and management reporting systems that interface with existing long-term support systems and focus on systems improvement (See article on p. 21).

The second, a five-year CMS demonstration awarded in December, will help Virginia develop community alternatives to psychiatric residential treatment facilities for children by allowing children who are Medicaid-eligible and who are in residential care for 90 days to access family support and community services through Medicaid.

The third, a five-year CMS Money Follows the Person Rebalancing Demonstration grant awarded in May 2007, will give individuals more informed choices about where they live and receive services; transition over 1,000 seniors, children, and adults with disabilities from institutions who want to live in the community; and promote quality care through long-term support services that are person centered, appropriate and needs-based, ensuring continual improvement through a quality management strategy for both community settings and institutions. The Demonstration will allow Virginia to permanently add services to several Waivers, including transition and transition coordinator services; Personal Emergency

Response Systems and medication monitoring; Environmental Modifications; Assistive Technology; and consumer-directed supported employment. A Nursing Facility Transition grant awarded by the Virginia Board for People with Disabilities to the Virginia Association of Centers for Independent Living in 2005 has laid the groundwork for nursing facility transition by educating providers and residents.

Affordable, accessible housing is critical to the Money Follows the Person initiative. The Department of Housing and Community Development (DHCD) pledged \$0.5 million each year for four years for home modifications. The Virginia Housing Development Authority and DHCD will work together on increasing accessible housing stock. A Housing Task Force will consider ways to make living in the community affordable for those who transition.

An essential component of continued community integration is the inclusion of people with disabilities and family members as equal partners in every facet of planning. Nowhere has inclusion been more prominent than in emergency planning and preparedness. The Office of Commonwealth Preparedness (OCP), the Department of Emergency Management (VDEM) and the Department of Health (VDH) have assured disability representation on the Governor's Hurricane Preparedness Task Force, OCP Regional Preparedness Work Groups, the Health and Human Resources Emergency Response Workgroup, VDEM's Local Emergency Planner regional briefings in

November, VDEM's Vulnerable Populations Workgroup, and VDH's Medical Sheltering Workgroup. These groups are working to assure that people with disabilities and people who are aging participate directly in all emergency planning and that they have a personal emergency plan, accessible shelters and transportation, and services and supports available in the event they need to leave their homes in an emergency. This spring, 10 regional Community-Based Emergency Response Seminars throughout the Commonwealth brought together emergency personnel, services providers, seniors, people with disabilities and others to begin inclusive regional and local planning. ■

For further information about efforts to implement the Olmstead decision in Virginia, visit www.olmsteadva.com.

Julie Stanley currently chairs a state and local cross-governmental Team and staffs the cross-disability, 21-member, stakeholder Community Integration Advisory Commission. The Team and Commission jointly developed and are working together to implement the Cross-Governmental Strategic Plan to Assure Continued Community Integration for Virginians with Disabilities. She coordinated the activities of the Governor's Hammond/Anderson Commission on Mental Health Services from 1998 to 2000, and Virginia's Olmstead Task Force from 2002 to 2003. She was named Director of Community Integration for People with Disabilities in January 2004, and reappointed to that position in 2006. Julie has worked with the Supreme Court of Virginia, the Office of the Attorney General, the Department of Mental Health, Mental Retardation and Substance Abuse Services, and currently the Governor's Office.



PAUL VI CATHOLIC HIGH SCHOOL

OPTIONS PROGRAM



A Caring and Nurturing Environment. . .

The Program

The Options Program provides a quality, modified-inclusive education to high school students with intellectual and developmental disabilities. The program nurtures the maturation of inquisitive, creative, confident and motivated students within a Catholic-Christian environment.



The Curriculum

The program is designed to develop the vocational and transitional skills necessary to enable students to pursue meaningful and productive lives in today's society. Instruction and curriculum are tailored to helping each student become as fully integrated with the overall life of the school community as possible.

The Classroom

A student-teacher ratio of 4-1 enables each individual to receive as much attention and opportunity as possible. Total enrollment is limited to within the area of 15 students in order to help maximize personal learning and development.

The Catholic Mission

In-line with the overall vision of Paul VI, the main focus of the Options Program is to help foster the spiritual, intellectual, personal and vocational development of its students, while striving to maximize each individual's potential as a member of society.

Fostering Growth, Development, and Independence

For information on Paul VI's Options Program, please contact Mrs. Christine Desmaris at 703-352-0925 ext.333, or via e-mail at cDesmaris@paulvi.net
Paul VI Catholic High School ~ 10675 Fairfax Boulevard ~ Fairfax, VA 22030