The Commonwealth’s Developmental Disabilities Council

FFY 2016 State Plan Update
(October 1, 2015 – September 30, 2016)

To
Administration on Intellectual and Developmental Disabilities,
U.S. Department of Health and Human Services

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Background

The Virginia Board for People with Disabilities (VBPD or the Board) serves as the Commonwealth’s Developmental Disabilities (DD) Council. The Board advises the Governor on issues affecting individuals with developmental disabilities and their families. Authorized under the federal Developmental Disabilities and Bill of Rights Act of 2000 (DD Act), DD Councils currently exist in 56 states and territories which receive funds to improve advocacy, promote systems change, and expand services capacity statewide, thereby increasing independence, productivity, and integration of individuals with disabilities in their communities and reducing policy and other barriers to full inclusion in all facets of community life.

DD Councils are required to develop five year plans that provide a framework for the Councils’ policy, program, and funding priorities. The State Plan details the goals and objectives developed by each Council based on a required comprehensive assessment of disability services in the state. State plans, which are based on the federal fiscal year (October–September) are updated annually and progress in meeting goals is reported each December for the previous federal fiscal year (FFY).

The Board’s 2012-2016 State Plan was developed with public input, as required in the DD Act. Initial public comment for this plan was gathered during five public forums held in Spring 2010, and the draft goals and objectives were released for a 45 day public comment period in Spring 2011 (April 1–May 15, 2011). The Board considered the comments at its June 8-9, 2011 meeting and made several changes to the Plan in response to those comments. The approved plan was submitted to the federal Administration on Developmental Disabilities in August 2011 and became effective October 1, 2011 (the beginning of FFY 2012).

During the past year, Board staff/members continued to monitor policy, legislative and regulatory changes regarding disability services. Board staff participated in numerous diverse workgroups and advisory committees pertinent to disability services. This State Plan update was developed by the Board in final quarter of 2015. While State Plan goals did not change, one objective was revised.

Board Activities

The Board’s priorities and strategies are identified, shaped, and focused through a comprehensive process that is designed to reflect the changing needs of disability stakeholders as well as shifts in the state’s policy, regulatory, and fiscal environment. The Board achieves its organizational goals through an array of diverse activities that include:

- Constituent Outreach;
- Service System Monitoring;
- Information, Referral, and Technical Assistance;
- Supporting and Educating Communities;
- Informing Policymakers;
- Building Coalitions;
- Funding Systems Change Grants; and
- Advocacy Training and Leadership Development.
Goals and Objectives

The Developmental Disabilities (DD) Act identifies nine “Areas of Emphasis” for the work of DD Councils. Councils can select some or all of these areas to address in their state plans based on their comprehensive assessment, public input, and the status of their service delivery systems for individuals with DD. The nine areas of emphasis in which goals and objectives may be developed are:

- Child Care
- Employment
- Health
- Recreation
- Quality Assurance
- Education/Early Intervention
- Formal/Informal Community Supports
- Housing
- Transportation

System monitoring by Board staff is an ongoing process, conducted through research, report reviews and interagency liaison activities. The issues identified through the research process from the Board’s 2014 Assessment of the Disability Services System in Virginia (available online at www.vaboard.org and upon request) helped guide the development of the Board’s priorities for its 2012-2016 State Plan. The Board carefully considered the data and findings in the Assessment and then developed goals and objectives based on its policy, research, investment, liaison and other activities. These were then prioritized consistent with available staff and fiscal resources as well as consideration of whether the Board could have a significant impact with respect to the individual goals chosen. The goals and objectives are listed below. Those objectives which were reworded or added are marked as “revised” or “new,” respectively.

**Goal 1: 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: Formal/Informal Community Supports**

**CS 1-1.** By 2016, implement a 2 year communications plan targeted to policymakers and the public which includes sharing the stories of 40 individuals with developmental disabilities and their experiences with community living. [Revised].

**CS 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.

**CS 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.

**CS 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.

**CS 1-5.** By 2016 (through VBPD collaboration with at least 5 public & 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.

**Goal 2: 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: Education**

**ED 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.

**ED 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.

**Area of Emphasis: Employment**

**EM 2-1.** 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.

**EM 2-2.** 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.

**EM 2-3.** 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. [Revised]

**Area of Emphasis: Health**

**HE 2-1.** 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.

**HE 2-2.** 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.

**HE 2-3.** By 2016, educate at least 250 self advocates, family members, and professionals on the impact of federal health care reform on individuals with developmental and other disabilities.
HE 2-4. 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.

**Area of Emphasis: Housing**

**HO 2-1.** 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.

**HO 2-2.** 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.

**HO 2-3.** 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.

**Area of Emphasis: Formal/Informal Community Supports**

**CS 2-1.** 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.

**CS 2-2.** 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.

**CS 2-3.** 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.

**CS 2-4.** 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.

**CS 2-5.** 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.

**CS 2-6.** Monitor and provide input on legislation, regulations, policies and budget actions affecting individuals with disabilities and their families.

**Area of Emphasis: Transportation**

**TR 2-1.** 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.

**TR 2-2.** By 2016, promote integrated local and regional planning by supporting at least 1 policy or initiative that ties accessible transportation planning to the needs of individuals with disabilities to easily access community services and supports.
Goal 3. 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: Quality Assurance

QA 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.

QA 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.

QA 3-3. By 2016, increase participation and reporting by board training program alumni on their systems advocacy activities by 10% annually.

QA 3-4. By 2016, provide technical assistance and/or financial support to one statewide conference in which self advocates participate in planning/development and comprise a substantial proportion of attendees.