



OMB Approval No.: 0980-0162

Expiration Date: pending

# PADD Project Performance Report

## For Year 2017

## I. Demographics

### A. Individuals Served

\* - Required field

What to Count	Number
<b>1. Individuals served as of October 1 (Carried over from previous FY)*</b>	38
<b>2. Additional individuals served during the year*</b>	75
<b>3. Total individuals served during the year (Add lines A1 and A2)*</b>	113
<b>4. Individuals with more than one (1) intervention opened/closed FY*</b>	11
<b>5. Individuals served as of September 30 (Carry over to next FY; &lt;= A3)*</b>	31

### B. Problem Areas/Complaints of Individuals Served

\* - Required field

ProblemAreas/Complaints of Individuals Served	Number
<b>1. Abuse*</b>	
<b>1. Inappropriate Use of Restraint &amp; Seclusion*</b>	2
<b>2. Involuntary Treatment*</b>	0
<b>3. Physical, Verbal, &amp; Sexual Assault*</b>	8
<b>4. Excessive Medication*</b>	1
<b>5. Financial Exploitation*</b>	0
<b>6. Other*</b>	0
<b>Total Abuse</b>	11

<b>ProblemAreas/Complaints of Individuals Served</b>	<b>Number</b>
<b>2. Access to Administrative or Judicial Processes*</b>	2
<b>3. Access to Records*</b>	0
<b>4. Advance Directives*</b>	0
<b>5. Architectural Accessibility*</b>	3
<b>6. Assistive Technology*</b>	
<b>1. Augmentative Communication Devices*</b>	0
<b>2. Durable Medical Equipment*</b>	0
<b>3. Vehicle Modification/ Transportation*</b>	0
<b>4. Other*</b>	0
<b>Total Assistive Technology</b>	0
<b>7. Aversives (including ECT)*</b>	0
<b>8. Civil Commitment*</b>	0
<b>9. Criminal Justice*</b>	0
<b>10. Custody/Parental Rights*</b>	1
<b>11. Education*</b>	
<b>1. FAPE: IEP/IFSP Planning/ Development/ Implementation*</b>	18
<b>2. FAPE: Discipline/ Procedural Safeguards*</b>	17
<b>3. FAPE: Eligibility*</b>	7

<b>ProblemAreas/Complaints of Individuals Served</b>	<b>Number</b>
<b>4. FAPE: Least Restrictive Environment*</b>	22
<b>5. FAPE: Multi-disciplinary Evaluation/Assessments*</b>	3
<b>6. FAPE: Transition Services*</b>	0
<b>7. Other*</b>	2
<b>Total Education</b>	69
<b>12. Employment Discrimination*</b>	
<b>1. Benefits*</b>	0
<b>2. Hiring/Termination*</b>	1
<b>3. Reasonable Accommodations*</b>	1
<b>4. Service Provider Issues*</b>	0
<b>5. Supported Employment*</b>	0
<b>6. Wage and Hour Issues*</b>	0
<b>7. Other*</b>	0
<b>Total Employment Discrimination</b>	2
<b>13. Employment Preparation*</b>	0
<b>14. Financial Benefits*</b>	
<b>1. SSDI Work Incentives*</b>	0
<b>2. SSI Eligibility*</b>	0

<b>ProblemAreas/Complaints of Individuals Served</b>	<b>Number</b>
<b>3. SSI Work Incentives*</b>	0
<b>4. Social Security Benefits Cessation*</b>	0
<b>5. Work Related Overpayments*</b>	0
<b>6. Welfare Reform*</b>	0
<b>7. Other Financial Entitlements*</b>	0
<b>Total Financial Benefits</b>	0
<b>15. Forensic Commitment*</b>	0
<b>16. Government Benefits/Services*</b>	1
<b>17. Guardianship/Conservatorship/ Substitute Decision Maker*</b>	3
<b>18. Home &amp; Community Based Services including Discharge Planning Transition Follow-up*</b>	16
<b>19. Healthcare*</b>	
<b>1. General Healthcare*</b>	1
<b>2. Medicaid*</b>	2
<b>3. Medicare*</b>	0
<b>4. Private Medical Insurance*</b>	0
<b>5. Other*</b>	0
<b>Total Healthcare</b>	3
<b>20. Housing*</b>	

<b>ProblemAreas/Complaints of Individuals Served</b>	<b>Number</b>
<b>1. Accommodations *</b>	0
<b>2. Architectural Barriers*</b>	0
<b>3. Landlord/Tenant*</b>	0
<b>4. Modifications*</b>	0
<b>5. Rental Denial/ Termination*</b>	1
<b>6. Sales/Contracts/ Ownership*</b>	0
<b>7. Subsidized Housing/ Section 8*</b>	1
<b>8. Zoning/Restrictive Covenants*</b>	0
<b>9. Other*</b>	0
<b>Total Housing</b>	<b>2</b>
<b>21. Immigration*</b>	0
<b>22. Juvenile Justice*</b>	1
<b>23. Neglect*</b>	
<b>1. Failure to Provide Necessary or Appropriate Medical Treatment*</b>	2
<b>2. Failure to Provide Necessary or Appropriate Mental Health Treatment*</b>	0
<b>3. Failure to Provide Necessary or Appropriate Personal Care &amp; Safety*</b>	4
<b>4. Other*</b>	0

<b>ProblemAreas/Complaints of Individuals Served</b>	<b>Number</b>
<b>Total Neglect</b>	6
<b>24. Post-Secondary Education*</b>	0
<b>25. Non-Medical Insurance*</b>	0
<b>26. Privacy Rights*</b>	0
<b>27. Public Accommodations*</b>	1
<b>28. Rehabilitation Services*</b>	
<b>1. Communication Problems*</b>	0
<b>2. Conflict About Services To Be Provided*</b>	0
<b>3. Individual Request Information*</b>	0
<b>4. Non-Rehabilitation Act*</b>	0
<b>5. Private Providers*</b>	0
<b>6. Related to Application/ Eligibility Process*</b>	0
<b>7. Related to IWRP Development/ Implementation*</b>	0
<b>8. Related to Title I of ADA*</b>	0
<b>9. Other Rehabilitation Act-related problems*</b>	0
<b>Total Rehabilitation Services</b>	0
<b>29. Suspicious Death*</b>	0
<b>30. Transportation*</b>	

<b>ProblemAreas/Complaints of Individuals Served</b>	<b>Number</b>
<b>1. Air Carrier*</b>	0
<b>2. Paratransit*</b>	0
<b>3. Public Transportation*</b>	0
<b>4. Other*</b>	0
<b>Total Transportation</b>	0
<b>31. Unnecessary Institutionalization including identification and assessment*</b>	5
<b>32. Voting*</b>	
<b>1. Accessible Polling Place/ Equipment*</b>	0
<b>2. Registration*</b>	0
<b>3. Other*</b>	0
<b>Total Voting</b>	0
<b>33. Other*</b>	0
<b>34. Total Complaints</b>	126

### **C. Gender of Individuals Served**

\* - Required field

<b>Gender</b>	<b>Number</b>
<b>1. Female*</b>	37
<b>2. Male*</b>	76

<b>Gender</b>	<b>Number</b>
<b>3. Total</b>	113

### **D. Living Arrangements of Individuals Served**

\* - Required field

<b>Living Arrangement</b>	<b>Number</b>
<b>1. Independent*</b>	18
<b>2. Parental or Other Family Home*</b>	77
<b>3. Community Residential Home for Children/Youth (0-18 Yrs)*</b>	0
<b>4. Community Residential Home for Adults*</b>	3
<b>5. Non-Medical Community Base Residential Facility for Children and Youth*</b>	0
<b>6. Foster Care*</b>	2
<b>7. Nursing Homes, Including Skilled Nursing Facilities (SNF)*</b>	2
<b>8. Intermediate Care Facilities (Icf)*</b>	0
<b>9. Public And Private General Hospitals including Emergency Rooms*</b>	0
<b>10. Public Institutional Living Arrangement*</b>	9
<b>11. Private Institutional Living Arrangement*</b>	0
<b>12. Psychiatric Wards (Public or Private)*</b>	0
<b>13. Jail*</b>	2
<b>14. State Prison*</b>	0

<b>Living Arrangement</b>	<b>Number</b>
<b>15. Federal Detention Center*</b>	0
<b>16. Federal Prison*</b>	0
<b>17. Veterans Administration Hospital*</b>	0
<b>18. Other Federal Facility*</b>	0
<b>19. Homeless*</b>	0
<b>20. Unknown*</b>	0
<b>Total</b>	113

### **E. Reasons for Closing Individual Intervention Files**

\* - Required field

<b>Reasons for Closing Individual Advocacy Case File</b>	<b>Number</b>
<b>1. Number of Closed Cases in Which Client's Objective Was Partially or Fully Met*</b>	58
<b>2. Other Representative Found*</b>	3
<b>3. Individual Withdrew Complaint*</b>	8
<b>4. Services Were Not Needed Due To Client's Death or Relocation*</b>	0
<b>5. P&amp;A Withdrew Because Individual or Client Would Not Cooperate*</b>	4
<b>6. Individual's Case Lacked Merit*</b>	5
<b>7. Individual's Issue Not Favorably Resolved*</b>	1
<b>8. Appeal(s) Unsuccessful*</b>	2

<b>Reasons for Closing Individual Advocacy Case File</b>	<b>Number</b>
<b>Total</b>	81
<b>Reason for Closing Individual Investigation File</b>	
<b>1. Complaint Was Withdrawn*</b>	0
<b>2. Other Appropriate Entity Investigating*</b>	0
<b>3. P&amp;A withdrew because Individual or Client Would Not Cooperate*</b>	0
<b>4. Investigation completed*</b>	12
<b>Total</b>	12

## **F. Intervention Strategies Used in Serving Individuals**

\* - Required field

<b>Individual Advocacy</b>	<b>Number</b>
<b>1. Self-Advocacy Assistance*</b>	33
<b>2. Limited Advocacy*</b>	32
<b>3. Administrative Remedies*</b>	7
<b>4. Negotiation*</b>	4
<b>5. Mediation/Alternative Dispute Resolution*</b>	1
<b>6. Litigation*</b>	4
<b>Total</b>	81
<b>Individual Investigation Service</b>	

Individual Advocacy	Number
7. Investigation*	12
<b>Total</b>	<b>93</b>

### G. Age Range of Individual Served

\* - Required field

Range	Number
1. 0-2*	2
2. 3-5*	2
3. 5-10*	31
4. 11-22*	42
5. 23-64*	36
6. 65 & Over*	0
<b>Total</b>	<b>113</b>

### H. Primary Disability of Individuals Served

\* - Required field

Primary Disability	Number
1. Absence of Extremities*	0
2. Acquired Brain Injury*	1
3. ADD/ADHD*	2

<b>Primary Disability</b>	<b>Number</b>
<b>4. AIDS/HIV Positive*</b>	0
<b>5. All Other Disabilities*</b>	0
<b>6. Autism*</b>	50
<b>7. Auto-immune (non-AIDS/HIV)*</b>	0
<b>8. Blindness (Both Eyes)*</b>	0
<b>9. Cancer*</b>	0
<b>10. Cerebral Palsy*</b>	9
<b>11. Deafness*</b>	0
<b>12. Deaf-Blind*</b>	0
<b>13. Diabetes*</b>	0
<b>14. Digestive Disorders*</b>	0
<b>15. Epilepsy*</b>	2
<b>16. Genitourinary Conditions*</b>	0
<b>17. Hearing Impaired (Not Deaf)/ Heard of Hearing*</b>	0
<b>18. Heart &amp; Other Circulatory Conditions*</b>	0
<b>19. Intellectual Disability*</b>	41
<b>20. Mental Illness*</b>	0
<b>21. Multiple Sclerosis*</b>	0
<b>22. Muscular Dystrophy*</b>	0

Primary Disability	Number
23. Muscular/Skeletal Dystrophy*	0
24. Orthopedic Impairments*	0
25. Other Emotional/Behavioral*	0
26. Other Visual Impairments (not blind)*	0
27. Neurological Disorders/Impairments*	4
28. Respiratory Disorders/Impairments*	0
29. Skin Conditions*	0
30. Specific Learning Disabilities (SLD)*	0
31. Speech Impairments*	2
32. Spina Bifida*	1
33. Substance Abuse (Alcohol or Drugs)*	0
34. Tourette Syndrome*	1
35. Traumatic Brain Injury (TBI)*	0
<b>Total</b>	<b>113</b>

### I. Racial and Ethnic Diversity of Individuals Served

\* - Required field

Race/Ethnicity	State %	Individual Advocacy #	Individual Advocacy %
1. Hispanic/Latino (of any race) *	16.30	3.00	2.65

Race/Ethnicity(NOT Hispanic/Latino)	State %	Individual Advocacy #	Individual Advocacy %
2. American Indian/ Alaskan Native *	0.70	0.00	0.00
3. Asian *	4.70	0.00	0.00
4. Black/African American *	12.20	29.00	25.66
5. Native Hawaiian/ Other Pacific Islander *	0.20	0.00	0.00
6. White *	63.70	80.00	70.80
7. Two or more races *	1.90	1.00	0.88
8. Race/Ethnicity Unknown *	0.20	0.00	0.00

### J. Groups Served

\* - Required field

What to Count	Number
1. Group cases/projects still open at October 1 (Carried over from prior FY(s))*	5
2. New group cases/projects opened during the year*	16
3. Total group cases/projects worked on during the year (Add lines I1 and I2)*	21
4. Total group cases/projects as of September 30 (Carry over to next FY)*	1
5. Group cases/projects targeted at serving racial/ethnic minority(ies)*	0
6. Total # of individuals potentially impacted by the line I.J.3 projects/cases	10065

**K. Problem Areas/Complaints of Groups Served**

\* - Required field

<b>Problem Area/Complaint</b>	<b>Number</b>
<b>1. Abuse*</b>	3
<b>2. Access to Administrative or Judicial Processes*</b>	0
<b>3. Access to Records*</b>	0
<b>4. Advance Directives*</b>	0
<b>5. Architectural Accessibility*</b>	0
<b>6. Assistive Technology*</b>	0
<b>7. Aversives (including ECT)*</b>	0
<b>8. Civil Commitment*</b>	0
<b>9. Custody/Parental Rights*</b>	0
<b>10. Education*</b>	7
<b>11. Employment Discrimination*</b>	0
<b>12. Employment Preparation*</b>	1
<b>13. Financial Benefits*</b>	0
<b>14. Forensic Commitment*</b>	0
<b>15. Government Benefits/Services*</b>	0
<b>16. Guardianship/Conservatorship/ Substitute Decision Maker*</b>	0
<b>17. Home &amp; Community Based Services including Discharge Planning Transition Follow-up*</b>	2

<b>Problem Area/Complaint</b>	<b>Number</b>
<b>18. Healthcare*</b>	0
<b>19. Housing*</b>	0
<b>20. Immigration*</b>	0
<b>21. Neglect*</b>	0
<b>22. Post-Secondary Education*</b>	0
<b>23. Non-Medical Insurance*</b>	0
<b>24. Privacy Rights*</b>	0
<b>25. Rehabilitation Services*</b>	0
<b>26. Suspicious Death*</b>	0
<b>27. Transportation*</b>	1
<b>28. Unnecessary Institutionalization including Identification and Assessment *</b>	7
<b>29. Voting*</b>	0
<b>Total</b>	21

**L. Living Arrangements Targeted by Groups Interventions** \* - Required field

<b>Living Arrangement</b>	<b>Number</b>
<b>1. Independent*</b>	5
<b>2. Parental or Other Family Home*</b>	11

Living Arrangement	Number
3. Community Residential Home for Children/Youth (0-18 Yrs)*	1
4. Community Residential Home for Adults*	0
5. Non-Medical Community Base Residential Facility for Children and Youth*	0
6. Foster Care*	0
7. Nursing Homes, Including Skilled Nursing Facilities (SNF)*	0
8. Intermediate Care Facilities (Icf)*	0
9. Public And Private General Hospitals including Emergency Rooms*	0
10. Public Institutional Living Arrangement*	3
11. Private Institutional Living Arrangement*	0
12. Psychiatric Wards (Public or Private)*	0
13. Jail*	6
14. State Prison*	0
15. Federal Detention Center*	0
16. Federal Prison*	0
17. Veterans Administration Hospital*	0
18. Other Federal Facility*	0
19. Homeless*	0
20. Not Applicable - Intervention not Focused on a Particular Living Arrangement*	0

Living Arrangement	Number
<b>Total</b>	26

### M. Reasons for Closing Group Cases/Projects

\* - Required field

Reason	Number
<b>1. Concluded Successfully*</b>	14
<b>2. Concluded Unsuccessfully*</b>	0
<b>3. Other*</b>	0
<b>Total</b>	14

### N. Intervention Strategies Used in Group Cases/Projects

\* - Required field

Intervention Strategy	Number
<b>1. Abuse and Neglect Investigation*</b>	1
<b>2. Systemic Litigation*</b>	0
<b>3. Educating Policymakers*</b>	7
<b>4. Other Systemic Advocacy*</b>	13
<b>Total</b>	21

### O. Age Ranges Targeted by Interventions for Groups

\* - Required field

<b>Focus</b>	<b>Number</b>
<b>1. Group Cases/Projects Focused on Children Approximately 0-2 yrs. old*</b>	3
<b>2. Group Cases/Projects Focused on Children Approximately 3-5 yrs. old*</b>	8
<b>3. Group Cases/Projects Focused on Young People Approximately 5-10 yrs. old*</b>	9
<b>4. Group Cases/Projects Focused on Young People Approximately 11-23 yrs. old*</b>	15
<b>5. Group Cases/Projects Focused on Adults Approximately 23-64 yrs. old*</b>	7
<b>6. Group Cases/Projects Focused on Seniors Approximately 65 yrs &amp; older*</b>	2
<b>7. Not Applicable - Intervention Not Focused on Any Particular Age Range Grouping*</b>	3
<b>Total</b>	47

### **P. Race/Ethnicity of Groups Served**

\* - Required field

<b>Race/Ethnicity</b>	<b>Number</b>
<b>1. Hispanic/Latino (of any race)*</b>	0
<b>2. American Indian/Alaskan Native*</b>	0
<b>3. Asian*</b>	0
<b>4. Black/African American*</b>	0
<b>5. Native Hawaiian/Other Pacific Islander*</b>	0
<b>6. White*</b>	0
<b>7. Two or more races*</b>	0

Race/Ethnicity	Number
8. Unknown*	21

## II. Statement of Goals and Priorities

### A. Report on Statement of Goals and Priorities (SGP)

\* - Required field

1.

**Goal Statement:** Abuse, Neglect, and Exploitation- Individuals with disabilities will be protected from abuse, neglect, and exploitation

#### 1. Priorities

**Priority 1\*** Reduce incidents of abuse, neglect, and exploitation of individuals with disabilities in institutional and community settings.

#### 2. Strategies Used to Implement Goal and Address Priorities

Collaboration

Systemic Litigation

Rights-Based Individual Advocacy Services **true**

Educating Policy Makers

Investigations of Abuse and Neglect **true**

Other Systemic Advocacy

Monitoring **true**

Training/Outreach

3. Extent to Which Goal was Achieved (select one) Achieved

4. Stage of Implementation (select one) Implementation

#### 5. Results Narratives of P&A Activities and Accomplishments Related to Above Goal

##### Narrative 1.

##### Narrative Title

Abuse, Neglect, and Exploitation

Priority Number \*

["Reduce the use of harmful restraint and seclusion of individuals with disabilities in institutional and community settings."]

**Collaborator(s)**

ArkSTART  
Pulaski County Crime Victim Collaboration  
Arkansas Department of Education  
Guardianship  
Youth Justice Reform Board  
The Breakfast Club  
Office of Long Term Care Ombudsman  
Developmental Disabilities Council  
University Center of Excellence for Developmental Disabilities (UCEDD)  
Arkansas State Independent Living Center

**Underserved/Unserved/Minorities Targeted**

No

**Narrative**

An allegation of physical assault of a PADD-eligible individual attending a Development Day Treatment and Clinical Services (DDTCS) program by an employee of the program was made to DRA by the client's sister. The client's sister was notified of the incident by the program, but the program would not divulge information about who the employee was, and the sister received conflicting information about whether the employee was suspended (pending the outcome of an investigation) or terminated. The Department of Human Services (DHS) was notified and reportedly began an investigation. DRA followed up with DHS and confirmed the employee was terminated and placed on the abuse registry, which should prevent them from future employment in any DDTCS program.

DRA investigated several other allegations of abuse/neglect, but was unable to substantiate them. One client transitioned to a new service provider, and did not want to pursue their complaint, another client's allegations were investigated by the appropriate

state agencies, but that client's guardian, too, elected to change service providers, and in several other cases, DRA was simply unable to substantiate the allegations.

DRA continues to investigate allegations of abuse and neglect, whether requested to do so by a client or a family member, or by discovering issues of concern through regular review of Office of Long Term Care surveys and deficiency reports.

Throughout the year, DRA staff monitored proposed rule and policy changes that impacted persons with developmental disabilities who receive Medicaid services. DHS, including its quality assurance and licensure departments, has been in the process of a reorganization that will impact oversight functions in the state. DRA has monitored these changes, attended stakeholder meetings, and commented on changes as appropriate throughout the year.

See Goal 4 (Education) for a summary of systemic work conducted with regards to the use of restraint in schools, as Goal 4, Priority 4 specifically deals with restraint and seclusion in school settings.

**Choose performance measures from Part III here for activity described above in this Result Narrative**

<b>Performance Measurement</b>	<b>Number of People</b>
People with disabilities who live in a healthier, safer, or otherwise improved environment	2
People with disabilities who had their own rights enforced, retained, restored and/or expanded	3
People with disabilities who work in safer and more humane conditions	10

**2.**

**Goal Statement:** Community Integration and Access- Individuals with disabilities will be integrated into the community and have access to programs and services in the community.

**1. Priorities**

**Priority 1\*** Improve access to community-based services and settings for individuals with disabilities who are institutionalized or at risk of institutionalization.

**2. Strategies Used to Implement Goal and Address Priorities**

Collaboration **true**  
Systemic Litigation  
Rights-Based Individual Advocacy Services **true**  
Educating Policy Makers  
Investigations of Abuse and Neglect  
Other Systemic Advocacy **true**  
Monitoring **true**  
Training/Outreach

**3. Extent to Which Goal was Achieved (select one)** Achieved

**4. Stage of Implementation (select one)** Implementation

**5. Results Narratives of P&A Activities and Accomplishments Related to Above Goal**

**Narrative 1.**

**Narrative Title**

Community Integration and Access

**Priority Number \***

["Reduce barriers that deny program access to individuals with disabilities."]

**Collaborator(s)**

ArkSTART  
Pulaski County Crime Victim Collaboration  
Arkansas Department of Education  
Guardianship  
Youth Justice Reform Board  
The Breakfast Club  
Office of Long Term Care Ombudsman  
Developmental Disabilities Council

University Center of Excellence for Developmental Disabilities (UCEDD)  
Arkansas State Independent Living Center

### **Underserved/Unserved/Minorities Targeted**

No

#### **Narrative**

A PADD-eligible individual was threatened with eviction while dealing with issues concerning fees owed to her landlord and access issues with her apartment. The client requested DRA's assistance, and DRA was able to intervene on the client's behalf to negotiate an agreement whereby the client would be able to repay owed fees via a payment plan (rather than all at once), and the landlord would address the access issues in her apartment. The client continues to live in her home, which has been modified to make it more accessible for her.

A PADD-eligible individual residing in a small ICF/ID was threatened with discharge after exhibiting PICA behaviors on a second occasion, the first occasion having occurred in 2002. The ICF/ID claimed the PICA behaviors were a health and safety issue, and that they would not be able to guarantee his health and safety; they recommended the client be moved to one of the state's five Human Development Centers (HDC). DRA provided the client with an attorney to represent him in an appeal hearing; the Office of Long Term Care ultimately determined the ICF/ID had not met the burden of proof required for refusing to serve him due to health and safety concerns, and the client was allowed to remain in this lesser restrictive setting, which had been his home for over 20 years.

A 19-year-old PADD-eligible individual who had been incarcerated in a juvenile treatment facility for three years requested assistance from DRA staff monitoring the facility. He wanted to be moved to a different dorm; however, he was past due to be released but had not been because staff could not find a community program that would accept him. DRA worked with an ombudsman to advocate on the client's behalf; subsequently, a provider was identified who agreed to serve the client, and he was successfully transitioned to this community program. This program provided housing for the client and assisted him with obtaining a PELL grant to attend community college.

Throughout the year, DRA monitored proposed rule and policy changes that impacted persons with developmental disabilities who receive Medicaid services. DRA submitted public comments addressing the needs of its clients in response to policy and rule

changes impacting the assessments, which are used to ascertain eligibility and levels of care for home- and community-based services, access to care, and the state's shift to a managed care system.

DRA engaged in regular collaboration with ArkSTART Arkansas by attending its monthly Clinical Education Team meetings at which issues involving service and treatment barriers to individuals with developmental disabilities with behavioral challenges are discussed; these cases involve individuals whose placement in the community is threatened because the behavioral issues are not being successfully addressed. DRA staff participates in the meetings, providing advocacy and legal strategies to assist in addressing the needs of the individual to access appropriate educational, vocational and other services through Medicaid that would support their ability to remain in the community. This collaboration has led to increased knowledge by DRA staff of barriers and practices that are negatively impacting individuals with disabilities who want to remain in the community and is also a means of referrals for direct case assistance for individuals.

DRA also collaborated with Legal Aid of Arkansas and Central Arkansas Legal Services with ongoing litigation concerning the ArPath Assessment, which is used to determine eligibility and levels of care provided to recipients of the state's Medicaid Waiver for persons with physical disabilities and the elderly, which included some persons with developmental disabilities. DRA tracked the litigation by Legal Aid, researched developments caused by decisions in that litigation, communicated with community stakeholders about the issues and results of the litigation, and used information learned from this tracking and research to provide direct service to clients and to assist with review of the upcoming changes to the assessment used for all Medicaid waivers in the state, including the developmental disabilities waiver. Through this collaboration, DRA staff has developed expertise that will serve in any future challenges of this assessment process as a whole.

DRA engaged in systemic advocacy to address ongoing problems and rights violations in the state-operated juvenile justice system. Although many of the youth in these facilities have serious mental illness, some have co-occurring developmental disabilities. DRA monitored the secure juvenile treatment facilities, met with officials from the State's Division of Youth Services (DYS), collaborated with other stakeholders, and engaged the media to heighten awareness of problems with the services and treatment provided in the facilities. These problems included a lack of treatment and education services at the facility, as well as upon discharge to the community. The state made some changes to the system, and has represented that it would retain an expert to review its system, improve educational services, and otherwise provide services that will support meaningful transition to the community.

**Choose performance measures from Part III here for activity described above in this Result Narrative**

<b>Performance Measurement</b>	<b>Number of People</b>
People with disabilities who were able to stay in their own home	2
People with disabilities who had their own rights enforced, retained, restored and/or expanded	3
People with disabilities who are provided with appropriate community based services resulting in community integration and independence	2
People with disabilities who live in a healthier, safer, or otherwise improved environment	2
Children with disabilities receiving appropriate services in most integrated settings	3

**3.**

**Goal Statement:** Employment- Individuals with disabilities will have access to vocational rehabilitation services, employment and post-secondary education.

**1. Priorities**

**Priority 1\*** Promote meaningful access to vocational rehabilitation services and supports needed for competitive employment in the community.

**2. Strategies Used to Implement Goal and Address Priorities**

- Collaboration
- Systemic Litigation
- Rights-Based Individual Advocacy Services **true**
- Educating Policy Makers
- Investigations of Abuse and Neglect
- Other Systemic Advocacy **false**
- Monitoring **true**
- Training/Outreach **true**

**3. Extent to Which Goal was Achieved (select one)** Partially Achieved

**4. Stage of Implementation (select one)** Implementation

**5. Results Narratives of P&A Activities and Accomplishments Related to Above Goal**

**Narrative 1.**

**Narrative Title**

Employment

**Priority Number \***

["Improve access to reasonable accommodations needed to obtain, maintain, or return to competitive employment in the community.", "Improve access to reasonable accommodations needed for post-secondary education."]

**Collaborator(s)**

ArkSTART  
Pulaski County Crime Victim Collaboration  
Arkansas Department of Education  
Guardianship  
Youth Justice Reform Board  
The Breakfast Club  
Office of Long Term Care Ombudsman  
Developmental Disabilities Council  
University Center of Excellence for Developmental Disabilities (UCEDD)  
Arkansas State Independent Living Center

**Underserved/Unserved/Minorities Targeted**

No

**Narrative**

A PADD-eligible individual requested assistance from DRA in requesting reasonable accommodations on the job from his employer. A DRA attorney met with this individual to educate him about his rights, as well as his employer's obligations, under the law. DRA assisted him in crafting his request for accommodations, and provided strategies for

handling the interactive process of negotiating accommodations from his employer. Armed with the knowledge and suggestions from DRA, this individual was able to successfully advocate for the needed accommodations.

Throughout the past two years, DRA has engaged in monitoring and data collection at sheltered workshops and DDTCS programs across the state that include a pre-vocational component. While not using funding from the PADD grant for these activities, it is appropriate to report here on this activity, as sheltered workshops and DDTCS programs provide services to a large number of individuals with developmental disabilities. DRA monitored these programs to not only to ensure the absence of abuse, neglect, and exploitation, but also to ensure that individuals are given meaningful opportunities to obtain competitive, integrated employment.

This process began with data collection to better understand the breadth of sheltered workshops in our state, and the effect on our state's disability population, then progressed to collaborating with Arkansas Rehabilitation Services (ARS) to provide guidance to sheltered workshops/DDTCS programs regarding their obligations and restrictions. Finally, the sheltered workshops were monitored again to ensure that ARS was fulfilling its obligations, and to assist individuals who did not have a relationship with any vocational rehabilitation services providers.

DRA is now in the process of preparing a report of our findings regarding sheltered workshops and DDTCS programs with pre-vocational components in Arkansas, and will include recommendations for future steps the state must take to achieve a more inclusive employment community for individuals with disabilities.

As part of the collaboration with ArkSTART mentioned in the Community Integration and Access narrative, DRA provided a training on vocational rehabilitation services for the ArkSTART participants; this training included an overview of the state's vocational rehabilitation program, the services that are offered and, perhaps most importantly to this audience, how to appeal adverse decisions regarding those services. While we did not utilize PADD funds for this training, ArkSTART provides services primarily to individuals with developmental disabilities, so increasing this group's knowledge of vocational rehabilitation services should positively impact opportunities for their clients to access employment services.

DRA also participated in the Employment First Task Force, and while Arkansas was one of the first states to craft an "Employment First" resolution, we have not followed this up with any legislation or rule-making. Accordingly, the task force was assembled to see what, if anything, can be done to move this initiative forward. While this task force met only once in FY17, subcommittees have been created to address specific issues that will impact people with developmental and other disabilities.

While not utilizing PADD funding for this project, DRA did meet with Arkansas Rehabilitation Services (ARS) to address a number of topics; chief among them the revision of ARS's policy manual, which requires administrative rule-making. DRA was

permitted access to ARS’s proposed rules and regulations prior to them being published for public comment, resulting in DRA pointing to a number of problems with the proposed regulations that would require revision to bring the policies into compliance with federal law and regulations. This prevented state rule-making that could have had a detrimental impact on persons with developmental disabilities who could benefit from vocational rehabilitation services.

**Choose performance measures from Part III here for activity described above in this Result Narrative**

Performance Measurement	Number of People
People with disabilities who work in safer and more humane conditions	1
People with disabilities who had their own rights enforced, retained, restored and/or expanded	200

**4.**

**Goal Statement:** Education- Youth with disabilities will have access to a free appropriate public education in the least restrictive environment and to transition planning and services.

**1. Priorities**

**Priority 1\*** Ensure that youth with disabilities are identified and not excluded from school in response to behaviors related to their disability.

**2. Strategies Used to Implement Goal and Address Priorities**

- Collaboration
- Systemic Litigation
- Rights-Based Individual Advocacy Services **true**
- Educating Policy Makers
- Investigations of Abuse and Neglect
- Other Systemic Advocacy **true**
- Monitoring
- Training/Outreach **true**

**3. Extent to Which Goal was Achieved (select one)** Achieved

**4. Stage of Implementation (select one)** Implementation

**5. Results Narratives of P&A Activities and Accomplishments Related to Above Goal**

**Narrative 1.**

**Narrative Title**

Education

**Priority Number \***

["Ensure that youth with disabilities are provided with an education in the least restrictive environment appropriate to meet their needs."]

**Collaborator(s)**

ArkSTART  
Pulaski County Crime Victim Collaboration  
Arkansas Department of Education  
Guardianship  
Youth Justice Reform Board  
The Breakfast Club  
Office of Long Term Care Ombudsman  
Developmental Disabilities Council  
University Center of Excellence for Developmental Disabilities (UCEDD)  
Arkansas State Independent Living Center

**Underserved/Unserved/Minorities Targeted**

No

**Narrative**

DRA received a request for assistance from the parent of a seven-year-old PADD-eligible client who exhibited difficulties with transitions and social situations, particularly after special education services were discontinued without a reevaluation and the client was placed in a regular classroom without any supports. The student subsequently began getting suspended, and was ultimately placed in an alternative learning environment (ALE) for behaviors commonly associated with autism. The student was also reportedly placed in restraints during some behavior incidents. The parent requested he be evaluated, but the district reportedly talked her out of it each time she made the request. DRA filed for due process on the student's behalf, whereupon the school district quickly agreed to evaluate the student, provide behavioral supports and move him from the ALE back to a school setting.

DRA received a request for assistance from the parent of a 13-year-old PADD-eligible client after her written request for an evaluation was denied by the school district, with the school district reportedly responding that the student was "too smart" for special education services, but that the parent could have him evaluated at her own expense if she so chose. The evaluation the parent paid for recommended supports and services for the student; in the meantime, the student exhibited some behaviors that the school district responded to by beginning expulsion proceedings. DRA intervened prior to the conclusion of the expulsion hearing and filed for due process, which halted the expulsion. The outcome of the due process proceeding resulted in the school district vacating the expulsion, conducting an evaluation and a functional behavior assessment, and transferring the student to a school more suitable for his needs.

DRA received a request for assistance from a parent of an 11-year-old PADD-eligible student in obtaining adequate supports and services as part of an individualized education program (IEP) to address his needs and ensure his placement in the least restrictive environment. DRA provided expertise to the parent to assist them in understanding the student's rights and how to advocate for his needs, and also attended an IEP meeting with the parent to ensure an appropriate plan was developed. The plan that was developed included occupational therapy services that would be integrated into the classroom setting, school-based mental health services, and speech therapy services.

The parent of a seven-year-old PADD-eligible student requested DRA's assistance with obtaining appropriate accommodations and positive behavioral supports in school. DRA staff educated the parent about the student's educational rights and provided strategies in working with an IEP team and crafting an appropriate IEP; a DRA advocate also attended several IEP meetings in which functional behavior assessments, least restrictive environment, and appropriate educational services were all discussed. This resulted in a behavior intervention plan being developed to provide more consistency about how the student's behaviors are handled. Extended school year services will also be provided to minimize regression that often occurs during the summer months.

In FY17, DRA identified systemic issues within the public school system regarding the use of restraint. Currently, Arkansas lacks any binding regulation or law regarding the use of restraint on students with disabilities. Although the Arkansas Department of Education (ADE) provided “guidance” on the use of restraint, the guidance is not binding or mandatory. Many school districts in the state are either unaware of the guidance or refuse to follow it. Thus, students with disabilities continue to be subjected to and are at risk of the unsafe, excessive, and/or inappropriate use of restraint at school. This impacts many students with developmental disabilities, particularly those with Autism Spectrum Disorder and other disabilities with behavioral and communication challenges. To address this problem on a systemic level, DRA drafted and published a White Paper to educate the public and education advocates about the need to adopt binding standards and law related to the use of restraint on students with disabilities in the public school setting. The White Paper was disseminated publicly at the time of its release and continues to be distributed through various outreach opportunities and through social media. The White Paper was also covered by a local reporter as a news report on one of the local news stations. In addition, DRA met with stakeholders who might be interested in assisting with the development and adoption of binding regulation and law. The release of the White Paper revealed the ongoing need for further education and advocacy around the issue of restraint, reflected partly by some of the public reaction and comments to the White Paper and what is perceived by some as a need to use corporal punishment for students with atypical behaviors. The ADE claims that it is powerless to promulgate any regulations, although it has previously done so with respect to time-out regulations. DRA intends to use the White Paper as a vehicle to assist in raising public awareness and increasing systemic advocacy to obtain needed enforceable regulations and law.

Arkansas school districts and their staff routinely file petitions against students with disabilities in the state courts under the provisions of the State Juvenile Code concerning Families in Need of Services (FINS). Many of these students are eligible students with disabilities under Section 504 of the Rehabilitation Act of 1973 and/or the Individuals with Disabilities Education Act (IDEA), including students with developmental disabilities. DRA’s research, as well as complaints from other stakeholders, indicates that school districts are using the FINS process for the purpose of excluding students from school and circumventing their obligations under Section 504 and the IDEA, including those related to identification, individualized plan development, discipline, and least restrictive environment. The consequences for students (and their parents) through FINS can be severe, including removal from school, home, and community, and opening a gateway to the delinquency system. DRA, in collaboration with a Hendrix College student, prepared a report outlining the concerns of disability advocates and other stakeholders about the misuse of the FINS process and the need for reform of the Juvenile Code related to FINS. DRA disseminated this report publicly, including posting it to DRA’s website.

DRA also utilized this report as a vehicle for conversations to educate policy makers within the state in an attempt to garner interest in needed reforms. At the request of a

state representative, DRA reviewed existing draft legislation to provide input as to whether the draft adequately protected and clarified the federal rights of students with disabilities who are the subject of FINS proceedings. DRA also used the report and information gathered for the report to advocate for clients served individually under the agency's education priority, as well as to provide technical assistance to public defenders representing students in FINS proceedings about applicable law and the rights of students with disabilities.

DRA attorneys participated in three task forces that ADE organized to address issues of students with disabilities:

One task force was charged with reducing the special education paperwork used by school districts across the state and developing a manual to better explain the process to parents.

Another task force was charged with identifying issues and possible solutions for educating students with disabilities in juvenile justice settings. DRA worked on a task force subcommittee to develop a child find resource that could be utilized in juvenile justice settings.

A third task force was charged with reforming the dispute resolution process for students with disabilities. At the meetings, needed reforms were identified, including state regulations that differ from federal requirements, process-related discrepancies, and an overall lack of understanding of due process by both stakeholders and parents. Despite identification of these issues, DRA has not seen any meaningful change to the process. ADE disbanded this task force without resolution, but did retain an expert to address needed changes to state regulations. DRA will continue to monitor these issues and their impact on students with disabilities.

DRA also participated in a Youth Justice Reform Board comprised of judges, DYS staff, and other stakeholders to address the overuse of the juvenile justice system for youth, including those with disabilities, across the state. The board identified a number of issues, and has subsequently joined another group that is also tackling juvenile justice reform. This reconstituted board will continue to meet in FY18, and DRA will continue to participate on this board and advocate for needed changes to the juvenile justice system.

DRA has continued to monitor and provide public comment on proposed rule changes that impact the education of students with disabilities throughout the state. DRA provided comment on the state's proposed Every Student Succeeds Act (ESSA) plan on two separate occasions and encouraged ADE to revise the proposed plan to better reflect the needs of students with disabilities.

**Choose performance measures from Part III here for activity described above in this Result Narrative**

<b>Performance Measurement</b>	<b>Number of People</b>
People with disabilities who go to school in safer and more humane conditions	8
Students with disabilities who stayed in school	8
Children with disabilities receiving appropriate services in most integrated settings	53

## **B. Priority Setting Process**

\* - Required input

### **Number of days for public comment\***

70

### **Describe how P&A conducted data driven strategic planning \***

DRA created a public input survey using Survey Monkey and made it available to the public via social media beginning 7/13/17 and ending 9/27/17. The following is the article posted to the DRA website, encouraging individuals to provide input in any number of ways:

**DRA's FY18 Proposed Priorities Open for Comment Until September 27, 2017**

DRA has drafted the proposed Priorities for fiscal year 2018, which runs from October 1, 2017 through September 30, 2018. The proposed priorities are based on the public input DRA received earlier this summer, as well as an analysis of the service requests received over the past 12-24 months.

These priorities will go through the approval process by the PAIMI Advisory Council and the DRA Board of Directors the last week of September. If you have any comment about the proposed priorities, please let us know. Deadline for comment is September 27, 2017.

To submit comments, you can send them via the contact form at the bottom of each page of this website (email), you can message or post them to DRA's Facebook page, you can call DRA at 501.296.1775 or 800.482.1174, or you can visit our offices or send comments via mail to: 400 West Capitol Avenue, Suite 1200, Little Rock, AR 72201.

Here are the proposed priorities: (a link was available here)

Reminders were continually posted to DRA's Twitter and Facebook pages, and staff were encouraged to distribute paper copies of the survey whenever they were monitoring facilities. providing trainings, attending outreach events, etc.

DRA also used input from advocates and attorneys who actually worked the service requests DRA received, and reviewed FY2016 service requests (using the Disability Advocacy Database) to assist in determining what the needs were, based on the actual requests for services received.

#### **Describe efforts to assure diversity (disability, geographical, racial, etc.) in the data-driven strategic planning process \***

DRA utilized the Disability Advocacy Database to create reports and examine service requests with respect to demographic data such as race, ethnicity, gender, disability, and distribution of requests across Arkansas counties. This is particularly helpful in determining whether DRA is reaching the rural areas of the state, including the Delta region, and not just receiving requests from the more populated areas of the state. DRA outreach staff actively seek opportunities to attend events that target unserved and underserved populations in the state, to ensure as many people with disabilities are aware of DRA and the services we provide as possible.

#### **Summary of Findings \***

DRA found that the areas of emphasis in fiscal year 2016 continued to be areas of need in fiscal year 2017, namely education, employment and accessibility. Abuse, neglect, and exploitation continue to be an area of focus as well; while the number of requests for services are not as high in this area as in the other areas, incidents are often underreported due to the lack of opportunity people residing in long-term-care facilities have to report abuse, neglect, and exploitation. These incidents are so serious in nature that they deserve to be prioritized even when the number of incidents reported to DRA is proportionally smaller when compared to other areas of concern.

**Summary of How Data was used to Develop P&A Goals and Priorities (include how priority input used, including input from the DDC and UCEDD) \***

DRA utilized the data obtained from the previous year's work, input from advocates and attorneys doing casework and monitoring facilities, and public input to confirm our priorities and goals were addressing the primary concerns identified. Routine collaboration activities with both the DDC and the UCEDD confirm they identify the same areas of need as priorities for the population we all serve. The input obtained from individuals, both those with disabilities and the staff carrying out the work, were in sync with the areas identified through data analysis as the major sources of service requests.

**List of topic areas of additional priorities that would be listed but are not due to lack of resources \***

Not addressed, or minimally addressed: guardianship and housing

Areas that are being addressed via priorities, but would be more comprehensive given greater resources include: serving more special education clients, increasing scrutiny with regards to the provision of appropriate mental health services to the DD population, and more intense monitoring of a greater number of facilities housing PADD-eligible clients.

**C. Statement of Goals and Priorities (SGP) for Next FFY**

\* - Required field

**Abuse, Neglect, and Exploitation- Individuals with disabilities will be protected from abuse, neglect, and exploitation**

I want to change my current Goal Statement false

I want to change my current Priority(ies) true

**1. Priorities**

**Priority 1 \*** Individuals with disabilities will be free from abuse, neglect, and exploitation.

**Priority 2 \*** Individuals with disabilities shall be free from restraint and seclusion.

**2. Strategies Used to Implement Goal and Address Priorities**

Collaboration

Systemic Litigation

Rights-Based Individual Advocacy Servicestrue

Educating Policy Makers  
Investigations of Abuse and Neglecttrue  
Other Systemic Advocacy  
Monitoringtrue  
Training/Outreach

**Community Integration- Individuals with disabilities will be integrated into the community and have access to programs and services in the community.**

I want to change my current Goal Statement true

I want to change my current Priority(ies) true

### 1. Priorities

**Priority 1 \*** Individuals with disabilities will have access to community- based services.

**Priority 2 \*** Individuals with disabilities who are being discharged or transferred from facilities and institutions will have access to adequate supports and services in the community.

**Priority 3 \*** Individuals with serious mental health conditions will have timely access to behavioral health services.

**Priority 4 \*** Individuals with disabilities will have the right to make their own decisions through the use of supported decision-making and other alternatives to guardianship.

### 2. Strategies Used to Implement Goal and Address Priorities

Collaborationtrue  
Systemic Litigation  
Rights-Based Individual Advocacy Servicestrue  
Educating Policy Makers  
Investigations of Abuse and Neglect  
Other Systemic Advocacytrue  
Monitoringtrue  
Training/Outreach

### 3. Rationale for Adding/Changing Goal \*

Community integration and Access are now two goals, instead of one. This was done to minimize confusion between access to services issues based on Medicaid, waiting lists, etc.(community integration) and architectural access and other forms of ADA issues (access).

**Access- Individuals with disabilities will have have access to supports and services to ensure access to their community.**

I want to change my current Goal Statement true

I want to change my current Priority(ies) true

### 1. Priorities

**Priority 1 \*** Individuals with disabilities will have architectural access to public and private facilities and programs.

**Priority 2 \*** Individuals with disabilities will have access to assistive technology to maintain and/or increase functional capabilities.

**Priority 3 \*** Individuals with disabilities will have access to effective communication.

**Priority 4 \*** Individuals with disabilities will have the right to be supported by service and emotional support animals in relevant settings.

### 2. Strategies Used to Implement Goal and Address Priorities

Collaboration

Systemic Litigation

Rights-Based Individual Advocacy Service true

Educating Policy Makers

Investigations of Abuse and Neglect

Other Systemic Advocacy true

Monitoring false

Training/Outreach true

### 3. Rationale for Adding/Changing Goal \*

Pulled ADA access issues out of the Community Integration goal to lessen confusion for staff working the service requests and to differentiate between access to program services and ADA access.

**Education- Youth with disabilities will have access to a free appropriate public education in the least restrictive environment and to transition planning and services.**

I want to change my current Goal Statement

I want to change my current Priority(ies) true

### 1. Priorities

**Priority 1 \*** Students with disabilities will be provided with a free appropriate public education in the least restrictive environment.

**Priority 2 \*** Students with disabilities will receive accommodations, health plans, and nursing services needed to ensure their safe participation in a free appropriate public education.

**Priority 3 \*** Students with disabilities that impact their behavior who are being suspended, expelled, arrested at school, or placed in a restrictive setting will receive a free appropriate public education in the least restrictive environment.

**Priority 4 \*** Students with disabilities will have access to meaningful, non-discriminatory graduation opportunities, including diplomas, and will receive adequate transition planning and services from school to post-secondary settings.

**Priority 5 \*** Students with disabilities will have access to reasonable accommodations in post-secondary educational settings.

## 2. Strategies Used to Implement Goal and Address Priorities

Collaboration  
Systemic Litigation  
Rights-Based Individual Advocacy Services  
Educating Policy Makers  
Investigations of Abuse and Neglect  
Other Systemic Advocacy  
Monitoring  
Training/Outreach

## **Employment- Individuals with disabilities will have access to vocational rehabilitation services, employment and post-secondary education.**

I want to change my current Goal Statement

I want to change my current Priority(ies)

### 1. Priorities

**Priority 1 \*** Individuals with disabilities will receive reasonable accommodations in employment.

**Priority 2 \*** Individuals with disabilities in community rehabilitation programs will receive supported employment services.

## 2. Strategies Used to Implement Goal and Address Priorities

Collaboration  
Systemic Litigation  
Rights-Based Individual Advocacy Services  
Educating Policy Makers  
Investigations of Abuse and Neglect  
Other Systemic Advocacy  
Monitoring

Training/Outreach

**3. Rationale for Adding/Changing Goal \***

Employment continues to be a goal in FY18 as it was in FY17, its position was changed in the plan from goal three to goal five.

**Self-Advocacy/Training- individuals with disabilities will learn about their civil rights and will be empowered to become self-advocates.**

I want to change my current Goal Statement true

I want to change my current Priority(ies) true

**1. Priorities**

**Priority 1 \*** Individuals with disabilities and the general public will have knowledge about the legal rights of individuals with disabilities.

**Priority 2 \*** Individuals with disabilities will learn to become effective self-advocates.

**2. Strategies Used to Implement Goal and Address Priorities**

Collaboration

Systemic Litigation

Rights-Based Individual Advocacy Services

Educating Policy Makers

Investigations of Abuse and Neglect

Other Systemic Advocacy

Monitoring

Training/Outreachtrue

**3. Rationale for Adding/Changing Goal \***

This goal was added to specifically address the work accomplished via the training of individuals with disabilities about their civil rights, and empowering them to become self-advocates.

**D. Description of P&A Operations**

\* - Required input

1. Provide a description of how the P&A operates.

**1. Provide a description of how the P&A operates. \***

DRA utilizes a system of advocates and attorneys who monitor facilities, work cases and work on systemic initiatives. An intake advocate is the initial contact for all service requests that do not originate in the field.

The intake advocate provides information and referral to requests for service that do not meet the agency's goals and priorities. The Legal Director reviews all requests for service and supervises all case work and systemic work. Since all P&A grants are housed within DRA and administered by the same management staff, coordination of grants occurs naturally, as does streamlining of advocacy services. Staff do not work in teams separated by grants, but work on issue-based teams. For efficiency's sake, and due to limited resources, referrals are made to other agencies (Arkansas Legal Services, the ACLU of Arkansas, the Parent Training and Information Center, the Arkansas Fair Housing Commission, etc.) as appropriate.

**2. Will the system be requesting or requiring fees or donations from clients as part of the intake process**

No

**3. Collaboration and Coordination**

**3a. Describe how the P&A is collaborating with others in the State, including the DDC and UCEDD \***

DRA collaborates with the DDC and the UCEDD in several ways. The three agencies created a "Breakfast Club" to collaborate with each other and other interested parties on how to address the most pressing issues impacting the ID community in Arkansas. DRA, the DDC and the UCEDD also collaborated to develop a self-advocacy coordination program and have hired a full-time self-advocate coordinator to achieve the program's goals of strengthening the self-advocacy network in Arkansas. The genesis for this collaborative project was the identification, through a joint priority planning process, of a need to support self-advocates in the state. The DDC entered into an interagency agreement with the UCEDD, who in turn entered into a joint agreement with the P&A to begin the Self-Advocacy Network Development (SAND) grant. DRA hired a self-advocate to become the coordinator of the program, the focus of which is to support all self-advocates, provide leadership and training opportunities to self-advocates by coordinating regional meetings throughout the state, and develop and maintain a database for self-advocates.

DRA's Executive Director is an active member of the DDC and serves on the UCEDD Consumer Advisory Council. In addition to working together to create the Breakfast Club and the Self-Advocate Development program, the three directors of these agencies meet on a regular basis to keep abreast of what each agency is working on and to identify ways in which the three agencies can further collaborate on issues of mutual interest.

**3b. Describe how the P&A is reducing duplication and overlap of services and sharing of information on service needs \***

DRA makes a point of initiating and developing collaborations with other agencies and organizations across the state, precisely to avoid a duplication of efforts and to maximize efficiency and the wise use of limited resources.

**III. Results of P&A Activity**

**A. End Outcomes of P&A Activity**

\* - Required field

<b>Performance Measurement (PerfM)</b>	<b>Number</b>
<b>1. People with disabilities who are provided with appropriate community based services resulting in community integration and independence</b>	530
<b>2. People with disabilities who accessed benefits</b>	9
<b>3. People with disabilities who live in a healthier, safer, or otherwise improved environment</b>	1110
<b>4. People with disabilities who were able to stay in their own home</b>	4
<b>5. People with disabilities who work in safer and more humane conditions</b>	11
<b>6. People with disabilities who go to school in safer and more humane conditions</b>	8
<b>7. Students with disabilities who stayed in school</b>	8

Performance Measurement (PerfM)	Number
8. Children with disabilities receiving appropriate services in most integrated settings	53
9. People with disabilities who had their own rights enforced, retained, restored and/or expanded	1549
10. Public and private places/services made more accessible	15

PerfM	Technical Assistance	Individual Advocacy	Abuse & Neglect Investigations	Systemic Litigation	Educating Policy Makers	Other Systemic Advocacy
1	2	28	N/A	0	500	0
2	1	8	N/A	0	0	0
3	3	5	2	0	100	1000
4	0	4	N/A	0	0	0
5	0	1	0	0	0	10
6	0	8	0	0	0	0
7	0	8	N/A	0	0	0
8	1	51	N/A	0	1	0
9	1	15	N/A	0	75	1458
<b>Total</b>	8	128	2	0	676	2468
10	0	5	N/A	0	0	10

**B. Overview of How Many People with Disabilities Served** \* - Required field

<b>Performance Measurement</b>	<b>Number</b>
<b>1. People with disabilities receiving advocacy services to exercise their civil, human, and legal rights*</b>	113
<b>2. Abuse and neglect investigations to protect people with disabilities from abuse and neglect*</b>	1
<b>3. People with disabilities receiving informaiton, technical assistance, and referral services*</b>	143
<b>4. People with disabilities trained to become active participants in making decisions that affect their lives*</b>	181
<b>5. People whose rights were advanced through class and/or systemic impact litigation*</b>	0
<b>6. People with disabilities whose rights were enforced, protected, or restored as a result of non-litigation group advocacy*</b>	1010
<b>7. People with disabilities who received a lower level of services due to lack of P&amp;A resources*</b>	2
<b>8. People with disabilities impacted by one or more provision(s) in law modified or prevented*</b>	0

### **C. Rights-Based Individual Advocacy Services**

\* - Required field

<b>Performance Measurement</b>	<b>Number</b>
<b>1. People with disabilities who had their rights enforced and/or restored*</b>	25
<b>2. People with disabilities who were assisted in obtaining access to administrative or judicial processes*</b>	1

Performance Measurement	Number
3. Closed cases in which client objective was met or partially met*	25

## D. Investigations of Abuse and Neglect

\* - Required field

Performance Measurement	Number
1. Investigations (not death related)*	1
2. Investigations of abuse and neglect completed with a finding or determination (not including death investigations)*	1
3. Death investigations*	0
4. Death investigations completed with a finding or determination*	0
5. People with disabilities who benefitted from the findings of investigations of abuse and neglect*	0
6. Provisions in policy added or prevented*	0

### Other Qualitative Narrative \*

DRA received an allegation regarding the abuse of clients at a developmental day treatment clinical services program serving people with developmental disabilities, which was made by a former employee of the program. The program staff were initially resistant in allowing DRA staff to enter the facility and speak to their clients, to the extent that a DRA attorney interceded with the program's legal counsel to gain access to the facility and its clients. DRA staff then interviewed five clients at random, asking each a prescribed list of questions. Through these interviews, it was determined that DRA could not substantiate the allegations.

## E. Monitoring

\* - Required field

Name of Facility	Facility Type	Facility Capacity	Location (By County)	# of Visits	Court Ordered Monitoring
Arkadelphia Human Development Center	Public Institutional Living Arrangement	125	Clark	3	No
Booneville Human Development Center	Public Institutional Living Arrangement	138	Logan	9	No
Bost, Inc. Brazil ICF/ID	Intermediate Care Facilities (lcf)	15	Sebastian	1	No
Bost, Inc.- Hand in Hand Preschool	Not Applicable - Intervention not Focused on a Particular Living Arrangement	105	Sebastian	3	No
Bost, Inc.- Willow Creek ICF/ID	Intermediate Care Facilities (lcf)	10	Sebastian	1	No
Brownwood Life Care Center, Inc.	Nursing Homes, Including Skilled Nursing Facilities (SNF)	50	Sebastian	1	No
Conway Human Development Center	Intermediate Care Facilities (lcf)	518	Faulkner	3	No

<b>Name of Facility</b>	<b>Facility Type</b>	<b>Facility Capacity</b>	<b>Location (By County)</b>	<b># of Visits</b>	<b>Court Ordered Monitoring</b>
Helen's Residential Care Facility	Community Residential Home for Adults	10	Crittenden	1	No
Housing Opportunities Addition, Inc.	Intermediate Care Facilities (Icf)	10	Miller	1	No
Jonesboro Human Development Center	Public Institutional Living Arrangement	109	Craighead	4	No
Millcreek of Arkansas	Intermediate Care Facilities (Icf)	146	Dallas	5	No
Southeast Arkansas Human Development Center	Public Institutional Living Arrangement	100	Bradley	9	No
Westwood ICF/MR- West Memphis	Intermediate Care Facilities (Icf)	10	Crittenden	1	No
Willowbend	Nursing Homes, Including Skilled Nursing Facilities (SNF)	98	Crittenden	1	No
Young Homes ICF/MR	Intermediate Care Facilities (Icf)	10	Pope	1	No

Total Number of Unique Facilities

15

Monitored Performance

<b>Performance Measurement</b>	<b>Number</b>
<b>1. People with disabilities whose living, working, and/or other circumstances were monitored by P&amp;A*</b>	13884
<b>2. Cases opened for health and safety issue investigation*</b>	1
<b>3. Health and/or safety violations*</b>	0
<b>4. Rights violations (not health or safety and including quality of life) identified and addressed as a result of P&amp;A monitoring*</b>	2
<b>5. Complaints referred to regulatory agencies or investigative organizations*</b>	0
<b>6. Times P&amp;A access were denied during a monitoring/access attempt*</b>	0
<b>7. Times denial of P&amp;A access were successfully resolved*</b>	0

**Other Qualitative Narrative \***

Arkansas has large and small congregate institutional settings for individuals with developmental disabilities, including five state-owned and operated Human Development Centers (HDCs) and approximately 30 private Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IDs). DRA engaged in a multi-pronged approach throughout the fiscal year targeted at ensuring that residents in these institutions were living in healthy and safe conditions, free from abuse and neglect. The HDCs, which are located across the state, serve approximately 958 individuals who have been admitted either by family members or by the State of Arkansas. Many of these individuals have lived in institutional settings for years, and many have significant deficits in communication. DRA developed a regular monitoring schedule for the HDCs to ensure consistent monitoring throughout the year; however, DRA identified two of the HDCs as needing enhanced monitoring due to DRA's knowledge of problems at the facilities related to the use of restraint, staff shortages, and a lack of qualified leadership at the institution. DRA monitored these institutions, interviewed residents and staff,

and followed up on concerns identified during monitoring with the institution's management staff and with the director of the state's Division of Developmental Disabilities Services (DDS). Among issues that have been and are being addressed are staff shortages, the need for updated restraint policy, improved psychological services, a better standard of living, access to habilitation services, availability of employment opportunities for residents, transition services, and guardianship issues. One of the two facilities was previously the subject of a DRA report about excessive restraint; while the number of restraints has decreased considerably, DRA continues with enhanced monitoring of this facility to ensure the number of restraints does not creep back up. DRA has also continued to address concerns with DDS regarding the outdated psychological and behavioral interventions favored by long-term staff at this same facility. While multiple barriers exist in addressing these issues, including the remote location of the two institutions under an enhanced monitoring schedule, DRA prioritizes this work to protect these institutionalized residents. DRA also responded to complaints by residents, and addressed these with institution staff.

Arkansas has approximately 30 private ICF/ID facilities; DRA obtained and reviewed a list of these facilities and began to monitor them as resources allowed. DRA was able to monitor 10 of these facilities during fiscal year 2017, which included interviewing individuals with disabilities, staff, and administrators, and educating them about DRA's role and access authority when informed of abuse and neglect allegations.

DRA routinely receives surveys from the state's Office of Long Term Care (OLTC). DRA staff review these surveys as they come in, communicate with OLTC staff regarding plans of correction and other aspects of the surveys as needed, and uses the surveys to identify facilities which may be in need of monitoring by DRA.

DRA is identified as a member of the DDS Mortality Review Committee in DDS policy that describes the composition of the committee; however, DDS requires a confidentiality agreement for participation in the Mortality Review Committee, and DRA has concerns about the confidentiality agreement compromising DRA's ability to investigate a death reviewed by this committee. The DDS director has agreed to changes to the agreement requested by DRA; however, there continues to be a delay in finalizing the confidentiality agreement by DDS and addressing barriers to DRA's participation. DRA staff continues to advocate for inclusion in this process and DRA plans to address concerns that the mortality review policy is not being implemented as required by applicable law.

## F. Systemic Litigation

\* - Required field

Performance Measurement	Number
1. Systemic or class action lawsuits handled for the benefit of people with disabilities*	0

<b>Performance Measurement</b>	<b>Number</b>
<b>2. Provisions in policy modified or prevented*</b>	0
<b>3. Provisions in regulation modified or prevented*</b>	0
<b>4. Provisions in law modified or prevented*</b>	0
<b>5. Lawsuits addressing systemic issues resolved by settlement*</b>	0
<b>6. Lawsuits addressing systemic issues resolved by judgment*</b>	0
<b>7. Amicus briefs signed onto or filed*</b>	0
<b>8. People with disabilities whose rights were advanced as a results of amicus participation*</b>	0

## **G. Educating Policymakers**

\* - Required field

<b>Performance Measurement</b>	<b>Number</b>
<b>1. Communications to people with disabilities explaining a policy initiative*</b>	51000
<b>2. People with disabilities supported in expressing their own viewpoint on a policy related matter*</b>	7575
<b>3. Times written comments were submitted regarding proposed legislation or regulations*</b>	4
<b>4. Times testimony was provided at a legislative hearing*</b>	0
<b>5. Provisions in regulation modified or prevented*</b>	1

Performance Measurement	Number
6. People with disabilities impacted by the regulation provision(s) modified or prevented*	51000
7. Provision in law modified or prevented*	1
8. People with disabilities impacted by one or more provision(s) in law modified or prevented*	500
9. Provisions in ordinances modified or prevented*	0

## H. Other Systemic Advocacy

\* - Required field

Performance Measurement	Number
1. Changes in practices made or prevented*	4
2. Provisions in policy modified or prevented*	0

## I. Information, Technical Assistance, and Referrals

\* - Required field

Performance Measurement	Number
1. People receiving information and referral services*	134
2. People receiving technical assistance*	10
3. Self-advocacy materials published or received*	2
4. Self-advocacy materials distributed*	1250

## J. Training

\* - Required field

Performance Measurement	Number
1. People who report the training enhanced their knowledge and/or skill (was beneficial) at the completion of the training*	176
2. People with disabilities who received advocacy skills training*	192
3. People with disabilities who received rights training*	192

## K. Public Relations and Outreach

\* - Required field

Performance Measurement	Number
1. Press related issued*	2
2. Times a P&A representative was interviewed or featured on TV or radio*	5
3. Articles about the P&A or its work in external mass media such as newspapers, radio, podcasts, blogs, or television*	11
4. Social media followers*	3328
5. Absolute unique visitors to blogs/web pages where information about the P&A is posted*	27000
6. Circulation of the P&A's newsletter and/or listserv updates*	0
7. Articles by the P&A about disability rights issues published in newspapers, books, journals, or magazines*	0

Performance Measurement	Number
8. Links to other disability rights related information sources published on the P&A website*	50
9. Times the P&A exhibited at conferences, community fairs, etc*	19
10. Presentations made to community groups*	25

**Other Qualitative Narrative \***

Question #4 As of 9/30/17, DRA had 2,597 followers on Facebook, and 731 followers on Twitter

Question #5 DRA does not have a tally of unique visitors; the 27,000 is the number of website hits (approximate) in FY2017

Question #6 DRA does not currently publish a newsletter or maintain a listserv; DRA does have a very active social media presence.

Question #8 DRA posts numerous links to other resources on the DRA website and on Facebook and Twitter continually during the year

**PADD MEDIA COVERAGE DURING FISCAL YEAR 2017:**

12/15/16	Arkansas on Line	Flaws seen in Arkansas family-services program
11/8/17	Hendrix College	Unfulfilled Promises: The reality of FINS in Arkansas....
5/25/17	KARK – TV	Developmental Disability Waiver Recipients Suffering in Silence?
5/12/17	KARK-TV	Thousands on Medicaid Waiver Wait List in Arkansas
1/28/17	Arkansas Dem Gazette	Letter says neglect rife at Arkansas youth jails: state...
7/16/17	Arkansas Dem Gazette	Arkansas youth-jail locks not replaced despite years of safety warnings
8/15/17	Arkansas Dem Gazette	7 youth lockups in state to be run by firms.
8/30/17	KARK – TV (Ark Matters)	Kids in Isolation: Locked Away in Alexander
8/31/17	KARK – TV (Ark Matters)	Kids in Isolation: Locked Away in Dermott
8/31/17	Arkansas Dem Gazette	Escape leads Arkansas youth lockup to fire worker
8/30/17	Arkansas Times	Kids in Isolation: Locked Away in Dermott
8/31/17	Arkansas Times	Kids in Isolation: Locked Away in Alexander

9/13/17	Arkansas Dem Gazette	Violence not prime in jailing of youths in Arkansas...
7/17/17	Fox 16	Fox 16 Investigates: State of Restraint

## IV. Collaborations

### IV. Collaborations

\* - Required field

**Check one or more of the following boxes if the P&A houses any of these programs**

Client Assistance Program true

Long Term Care Ombudsman

Parent Training Center

Collaboration #1

**Name of Collaboration\***

ArkSTART

**Description of collaboration \***

ArkSTART is the Arkansas Systemic, Therapeutic Assessment, Resources, and Treatment program, and it serves individuals who have Intellectual/Developmental Disabilities (I/DD) and behavioral health conditions or challenging behaviors that negatively affect their quality of life. The DRA/ArkSTART collaboration is a true collaborative relationship, whereby the two entities cross-train each other's staff, and ArkSTART welcomes DRA input when discussing cases they are working on, which ensures the individual's rights are protected while solutions are being developed to deal with challenging behaviors and situations.

**Role of the P&A within the collaboration \***

Partner

Collaboration #2

**Name of Collaboration\***

Pulaski County Crime Victim Collaboration

**Description of collaboration \***

DRA is a member of a collaborative group of agencies, including the state's University Center for Excellence in Developmental Disabilities (UCEDD), created to address issues pertaining to people with disabilities who are victims of crime (which is often an underrepresented group). The participants in this collaboration are discussing issues about consent (e.g. rape exams), guardian issues such as obtaining consent and refusal to allow rape exams or to press charges, and the institutionalization that can result after a person is a crime victim (e.g. as an overreaction to concerns about safety). The group meets with various stakeholders, including the state traumatic brain injury group, rape centers and others to identify needs for rights trainings to providers, hospitals, consumers, and family, and to develop advocacy strategies for promoting self-determination and rights protections for victims with disabilities.

**Role of the P&A within the collaboration \***

Group member

Collaboration #3

**Name of Collaboration\***

Arkansas Department of Education

**Description of collaboration \***

DRA collaborated with the Arkansas Department of Education (ADE) and other education stakeholders on a couple of projects this year. One involved participation on a task force to review due process rules in the state. The task force was comprised of diverse stakeholders, including ADE staff, school district staff, special education hearing officers, the University of Arkansas at Little Rock (UALR) Mediation Clinic, and the Legal Aid Medical Legal Partnership. This task force reviewed the state's special education due process regulations and process, and recommended changes. ADE is now tasked with ensuring that the recommended changes are promoted and implemented. This will improve access to due process for students with developmental disabilities who are in need of special education services.

Another collaboration included participating on the ADE Correctional Education Task Force, which brought together ADE staff, Division of Youth Services (DYS) staff, juvenile detention center (JDC) staff and school district staff to discuss issues within the youth correctional system's education services, including the lack of compliance with educational requirements for youth in DYS and JDC facilities, which includes youth with developmental disabilities. As a result of this collaboration, DRA had significant input into what content and information needed to be included in DYS's child find process, as well as how to train staff to ensure the identification of students with disabilities in DYS custody. DRA also gained a greater understanding of the myriad challenges facing educators in the juvenile facilities, and assisted with identifying gaps in services.

DRA also collaborated with other stakeholders on a task force charged with reducing the special education paperwork used by school districts across the state and developing a manual to better explain the process to parents.

**Role of the P&A within the collaboration \***

member of three task forces

Collaboration #4

**Name of Collaboration\***

Guardianship

**Description of collaboration \***

DRA collaborated with the National Coalition for a Right to Counsel and Central Arkansas Legal Services on guardianship issues, including the need for representation for wards during guardianship proceedings, the failure of the courts to ensure that existing law is followed, including least restrictive environment and limited guardianships, and the need for guardianship law reform. DRA and the other two agencies collaboratively researched and discussed the issues, and ultimately decided to work together to issue a report. While this work will continue into fiscal year 2018, progress was made during this fiscal year, such as identifying steps to take and impediments to overcome, including the need for a larger stakeholder group invested in advancing this work.

**Role of the P&A within the collaboration \***

partner

Collaboration #5

**Name of Collaboration\***

Youth Justice Reform Board

**Description of collaboration \***

DRA participated in a task force created to address the need for the reform of the juvenile justice system in the state. DRA was particularly interesting in the task force addressing living conditions in several facilities, a lack of adequate treatment, including mental health and educational services, abuse and neglect that occurs in these facilities, and the school-to-prison pipeline. Several member organizations, including DRA, Arkansas Advocates for Children and Families, the Arkansas Public Defender Ombudsman, and the Division of Youth Services, collaborated to strategize and present a united front on these major issues. This collaboration is continuing into fiscal year 2018.

**Role of the P&A within the collaboration \***

Partner

Collaboration #6

**Name of Collaboration\***

The Breakfast Club

**Description of collaboration \***

The Breakfast Club is a coalition of advocacy groups (including some service providers) created to identify, monitor and attempt to address issues of importance to people with developmental and intellectual disabilities. Primary among these issues is the need for more

community-based services, as the state continues to maintain a long waiting list for community-based Waiver services. Members of this group include the Arkansas State Independent Living Council (ArSILC) and the UCEDD.

**Role of the P&A within the collaboration \***

Member of the coalition

Collaboration #7

**Name of Collaboration\***

Office of Long Term Care Ombudsman

**Description of collaboration \***

DRA collaborates with the Office of Long Term Care (OLTC) as appropriate, including obtaining OLTC surveys of the five Human Development Centers (HDCs) and the 30 ICF/IDs in the state as a means of being alerted when there are concerns about any particular facility serving PADD-eligible individuals. DRA prioritizes facilities to be monitored based on OLTC surveys that depict a facility as having numerous deficiencies, substantive deficiencies, or both. DRA has participated in collaborative investigations with OLTC in the past, and will do so any time circumstances warrant a joint investigation.

**Role of the P&A within the collaboration \***

This collaboration is defined by maintaining contact with OLTC and obtaining deficiency reports about facilities service PADD-eligible clients.

Collaboration #8

**Name of Collaboration\***

Developmental Disabilities Council

**Description of collaboration \***

The DRA executive director serves as a member of the DDC, and the two agencies, along with the UCEDD, all collaborated to create the self-advocate coordinator program. This program was developed in fiscal year 2016, implemented in fiscal year 2017, and will continue in fiscal year 2018. DDC provides the grant funding for the self-advocate coordinator position, DRA provides office space and administrative support, and the UCEDD provides technical support for the program.

**Role of the P&A within the collaboration \***

Partner

Collaboration #9

**Name of Collaboration\***

University Center of Excellence for Developmental Disabilities (UCEDD)

**Description of collaboration \***

As noted in the DDC collaboration narrative, DRA works with the DDC and the UCEDD to fund the self-advocate coordinator program. DRA collaborates with the UCEDD on the Breakfast Club collaboration, which was also described in an earlier collaboration narrative.

**Role of the P&A within the collaboration \***

Partner

Collaboration #10

**Name of Collaboration\***

Arkansas State Independent Living Center

**Description of collaboration \***

As described in an earlier collaboration narrative, DRA and the Arkansas State Independent Living Council (ArSILC) collaborated as members of the Breakfast Club. The executive directors of DRA and ArSILC look for opportunities to collaborate on various projects, including voting outreach activities.

**Role of the P&A within the collaboration \***

Partner

**V. Governance and Compliance**

**A. Board, staff, and advisory council and race and ethnicity** \* - Required field

Race/Ethnicity	Board	Employees	Advisory Council
1. Hispanic/Latino (of any race)*	0	0	0
Race/Ethnicity(NOT Hispanic/Latino)			
2. American Indian/ Alaskan Native*	0	0	0
3. Asian*	0	0	0
4. Black/African American*	3	3	0
5. Native Hawaiian/ Other Pacific Islander*	0	0	0
6. White*	7	14	0
7. Two or more races*	0	0	0
8. Race/Ethnicity Unknown*	0	0	0

Race/Ethnicity	Board	Employees	Advisory Council
<b>Total</b>	10	17	0

**Describe advisory council if applicable**

Non-applicable.

## B. Consumer involvement in P&A governance

\* - Required field

	Board	Advisory Council
<b>PADD Eligible Primary Consumers*</b>	0	0
<b>PADD Eligible Secondary Consumers*</b>	5	0
<b>Other Eligible Primary Consumers*</b>	0	0
<b>Other Eligible Secondary Consumers*</b>	2	0
<b>Total Membership</b>	7	0

## VI. General Program Information

### VI. General Program Information

\* - Required input

#### A. P&A Identification

**Name of state, territory, or jurisdiction\***

Arkansas

**Name of P&A system\***

Disability Rights Arkansas, Inc. (DRA)

B. Main Office

**Mailing Address\***

400 West Capitol Avenue, Suite 1200; Little Rock, AR 72201

**Phone Number of Main Office\***

501-296-1775

C. Satellite Offices (If Any)

D. CEO Contact Information

**Name\***

Tom Masseau

**Phone Number\***

501-296-1775

**Email Address of P&A CEO\***

tmasseau@disabilityrightsar.org

E. PADD PPR Preparer Contact Information

**Name\***

Susan Pierce

**Title\***

Director of Policy/Planning

**Phone Number\***

501-296-1775

**Email Address of PPR Preparer\***

spierce@disabilityrightsar.org