

Protecting and promoting the rights of Kentuckians with disabilities

2016 Annual Report

# Kentucky Protection and Advocacy

Kentucky Protection and Advocacy (P&A) is a client-directed legal rights agency that protects and promotes the rights of persons with disabilities. Kentucky P&A is an independent state agency that derives its authority from both federal and state law; specifically the Developmental Disabilities Assistance and Bill of Rights Act (DD Act) 42 U.S.C. § 6000 et. seq.; the Protection and Advocacy for Individuals with Mental Illness Act (PAIMI Act) 42 U.S.C. §10801 et. seq.; and Kentucky Revised Statute 31.010 (2).

Kentucky P&A receives funding from the Administration on Intellectual and Developmental Disabilities, the Center for Substance Abuse and Mental Health Services Administration, the Rehabilitation Services Administration, the Health Resources and Services Administration, the Social Security Administration, and State General funds.

Congress gave the protection and advocacy system the authority to access individuals with disabilities, their records, and the locations where they receive services and supports to investigate abuse and neglect, monitor facilities, provide information and referral services, and pursue legal and other remedies on their behalf.

In 2016, P&A, with a total staff of 22, had many successes and accomplishments. In this report we share some of those successful outcomes for individuals and positive systemic changes.



Frederick Douglass Abolitionist

"Those who profess to favor freedom, and yet depreciate agitation, are men who want crops without plowing up the ground. They want rain without thunder and lightning."



Dear Supporter of Rights and Independence,



I am pleased to share with you the 2016 Annual Report of Kentucky Protection and Advocacy. This report represents the efforts of the members of our advisory bodies and the staff of Kentucky Protection & Advocacy. The Protection and Advocacy for Developmental Disabilities Board and the Protection & Advocacy for Individuals with Mental Illness Council offer first person insight and experience into the barriers facing Kentuckians with disabilities.



Kentucky Protection and Advocacy has a vision of a just society where all people are treated with dignity and respect for their expressed choices and have equal opportunities to participate in an integrated and inclusive society where different abilities are valued.

This report is a reflection of the current status of disability services in Kentucky.



The Amended Settlement Agreement has given Kentuckians with mental illness in Personal Care Homes the opportunity to live in the community with services and supports. However, the services aren't being provided in over half of Kentucky's counties.

Young adults are being placed in institutions due to a lack of Kentucky Medicaid waiver services.

Young men and women living independently are being threatened with nursing home placements.

Children with disabilities continue to be segregated in schools. Transition plans to adulthood continue to be lacking, parents are often ignored and in some instances children with disabilities have been seriously injured.



Unfortunately, these issues are not new or rare.

On behalf of the Kentucky P&A advisory bodies and staff, thank you for your continued support of our vision.

Sincerely,



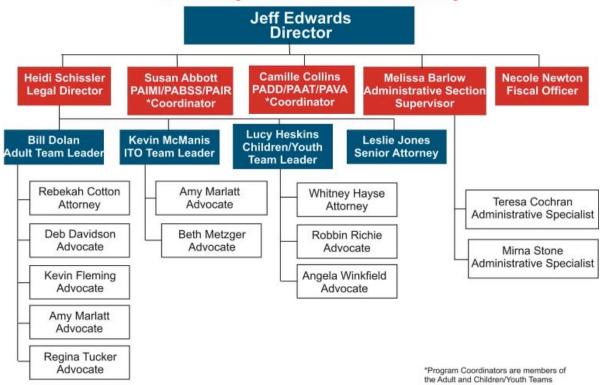
Jeff Edwards, Director

Kentucky Protection and Advocacy Division



1st row: Melissa Bowman, Angela Winkfield, Leslie Lederer, 2nd row: Jeff Edwards, Regina Tucker, Malicia Hitch, Whitney Hayse, Beth Metzger; 3rd row: Necole Newton, Lucy Heskins, Deb Davidson, 4th row: Susan Abbott, Robin Ritchie, Leslie Jones, Rebekah Cotton; Back row: Bill Dolan, Camille Collins, Kevin Fleming, Teresa Cochran Not Pictured: Kevin McManis, Amy Marlatt, Heidi Schissler Lanham, Mirna Stone

### **Kentucky Protection & Advocacy**



### **Grant Descriptions**

Protection and Advocacy for Individuals with Developmental Disabilities (PADD)

authorized in the Developmental Disabilities Assistance and Bill of Rights Act, 42 U.S.C. §15001, Pub. L. No. 106-402

- created by the Developmental Disabilities Assistance and Bill of Rights (DD) Act of 1975
- administered by the Administration on Developmental Disabilities of the Administration for Children and Families, U.S. Department of Health and Human Services

#### Protection and Advocacy for Individuals with Mental Illness (PAIMI)

authorized in the Protection and Advocacy for Mentally III Individuals Act, 42 U.S.C. §10801-10807, Pub. L. No. 106-310

- established by the PAIMI Act of 1986
- administered by the Center for Mental Health Services, U.S. Department of Health and Human Services

#### **Protection and Advocacy for Individual Rights (PAIR)**

authorized in the Rehabilitation Act, 29 U.S.C. §794e, Pub. L. No. 106-402

- established by Congress as a national program under the Rehabilitation Act in 1993
- administered by the Rehabilitation Services Administration of the Office of Special Education and Rehabilitative Services, U.S. Department of Education

## Protection and Advocacy for [Individuals in Need of] Assistive Technology (PAAT) authorized in the Assistive Technology Act, 29 U.S.C. §3004, Pub. L. No. 105-394

- created in 1994 when Congress expanded the Technology-Related Assistance for Individuals with Disabilities Act (Tech Act)
- administered by the Rehabilitation Services Administration of the Office of Special Education and Rehabilitative Services, U.S. Department of Education

#### **Protection & Advocacy for Beneficiaries of Social Security (PABSS)**

authorized in the Ticket to Work and Work Incentives Improvement Act of 1999, 42 U.S.C. §1320b-21, P.L. 106-170

- created by the Ticket to Work and Work Incentives Improvement Act of 1999
- administered by the Social Security Administration

#### Protection and Advocacy for Individuals with Traumatic Brain Injury (PATBI)

authorized in the Children's Health Act of 2000, 42 U.S.C. §300d-53, Pub. L. No. 106-310

- created by the Traumatic Brain Injury (TBI) Act authorized as part of the Children's Health Act of 2000
- administered by the Health Resources and Services Administration, U.S.
   Department of Health and Human Services

#### Protection and Advocacy for Voter Access (PAVA)

authorized in the Help America Vote Act of 2002, 42 U.S.C. §15461-15462, Pub. L. No. 107-252

- created in 2002 when Congress enacted the Help America Vote Act (HAVA)
- administered by the Administration on Developmental Disabilities of the Administration for Children and Families, U.S. Department of Health and Human Services

## Protection & Advocacy for Individuals with Mental Illness (PAIMI) Advisory Council

Federal law requires P&A to have a PAIMI (PAC) Advisory Council that advises P&A on policies and priorities to protect and advocate for the rights of Kentuckians with disabilities each year. The PAC is comprised of 17 Kentuckians and 60% of membership must be a person with a mental health diagnosis. Membership is also comprised of family members of a persons with a mental health diagnosis, mental health professionals, or any other person who is interested in advocating for the rights of Kentuckians with a mental illness.

Each year the PAC creates their own collaborative priorities with Kentucky P&A. In FY 2016, the PAC continued to have an active presence in Kentucky's personal care homes by providing training to residents in 15 personal care homes about long term care rights, services made available under the Amended Settlement Agreement (ASA) including the Community Integration Supplement. They created a resource brochure for mental health services available for both LGBT adults and children. Many PAC members met with their legislators to discuss the proposed Assisted Outpatient Treatment (AOT) legislation and advocated for creating more community services and supports for individuals who have a mental illness.

- Attended the 874K Rally
- Participated in fundraising for Relay for Life and participated in the event, honoring a current PAC member
- Participated in the annual Frankfort State Hospital Cemetery Clean Up event
- Testified before the Health and Welfare Committee on the proposed Assisted **Outpatient Legislation**
- Attended the Autism Society of the Bluegrass Annual Workshop
- Provided resource information at the Northern Kentucky Pride Festival
- Conducted historical research about Kentucky's psychiatric institutions
- Attended Brideghaven Center for Peer Excellence Adult Peer Support Training
- Attends monthly Cabinet Level Transition meeting for the implementation of the ASA



Back row: Melissa Mays, Woody Moore, Robert Johnson, Reggie Gentry (Treasurer), Gayla Lockhart, Front row: Becky Clark, James Light, Marty Wilhoite (Chair), Ruth Marlatt, Robin Osborne (Vise Chair) seated: Jackie May

> Not pictured: Kelly Williams, Angela Childress, Brent Collins, Heather McNeil Currently 2 vacancies

## Protection & Advocacy for Individuals with Developmental Disabilities (PADD) Advisory Board

The Protection and Advocacy for Individuals with Developmental Disabilities (PADD) Advisory Board is comprised of 17 citizens from across the Commonwealth of Kentucky. The majority of members are individuals with developmental disabilities who are eligible for services, or have received, or are receiving services through the system. Additional members are parents or family members of individuals with developmental disabilities. Members advise Kentucky P&A on policies and priorities to be carried out in protecting and advocating for the rights of individuals with developmental disabilities. They also provide education to state and federal policy makers about current and future regulations and policies that impact individuals with disabilities . Each year PADD Advisory Board members create and work on priorities alongside Kentucky P&A staff. In 2016, PADD Advisory Board members participated in the following priorities:

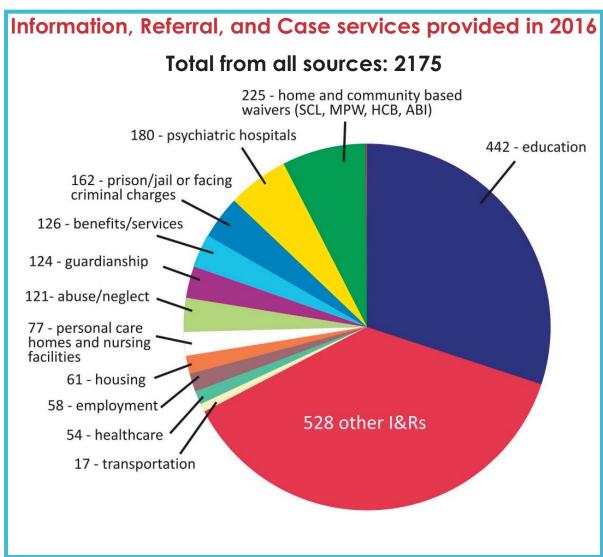
- Advocated and participated in press conference to promote passage of state legislation for Kentucky STABLE Accounts to be established
- Educated legislators about the impact of Medicaid waiver changes and advocated for policy revisions regarding changes to the Supports for Community Living (SCL) Waiver with specific focus on the changes to the Participant Directed Services (PDS) option
- Held an annual clean- up event at the Frankfort State Hospital and School Cemetery
- Assisted Kentucky P&A staff with public forum in Morehead, Kentucky
- Attended legislative committee meetings
- Commented on regulations for Medicaid waivers
- Created posters about themselves and the services they receive to help them live independently to be shown throughout the state



Front Row: Amanda Stahl, Kelly Knoop, Ashley Layne (Chair), Elizabeth Hernandez, Cathy Jo Edwards,
Back Row: Camille Collins (PADD Program Coordinator), Nyketa Williams,
Karen Ricci (Ky-Self Advocates for Freedom Representative), Mike Smith (Secretary),
Lissette Johnson, Katie Bentley, Kevin Webb,
Not pictured: Stephen Ward, Arthur Campbell, Mark Newton (Vise Chair),
Tommy Malone, Grant Logsdon, Jay Tyner-Wilson, Chuck Woods, Tammy Mischler

### Information, Training and Outreach (ITO)

The ITO Team has primary responsibility for the provision of Information and Referral (I&R) services as requested by individuals with disabilities, family members, service providers, agencies, and the public at large. ITO also coordinates agency training and outreach activities. In 2016, ITO consisted of a Team Leader and two Disability Rights Advocates.



## **Trainings and Outreach**

In 2016, Kentucky P&A provided trainings and presentations on a variety of disability-related topics to public and private organizations as requested. Kentucky P&A also provided information and resources at various disability and non-disability conferences and events throughout Kentucky.

- Provided 114 trainings on special education, guardianship, crisis intervention, longer-term care rights, and votin
- Trained 2130 individuals with disabilities, families members, and providers
- Hosted 14 information booths at disability and non-disability related conferences and events
- Distributed over 5560 Kentucky P&A publications

## Information & Referrals (I&Rs) Service Request Cases



## Total I&R Services per CMHC Region

1.	Four Rivers	48
2.	Pennyroyal	99
3.	River Valley	57
4.	Lifeskills	82
5.	Communicare	64
6.	Seven Counties	377
7.	NorthKey	105
8.	Comprehend	13
9/10.	Pathways	48
11.	Mountain	32
12.	Kentucky River	59
13.	Cumberland	56
14.	Adanta	69
15.	Bluegrass	348

1457

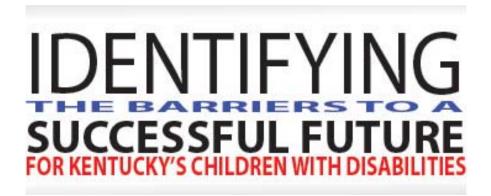
Total

## Total Services Request Cases per CMHC Region

1.	Four Rivers	31
2.	Pennyroyal	38
3.	River Valley	34
4.	Lifeskills	37
5.	Communicare	29
6.	Seven Counties	169
7.	NorthKey	41
8.	Comprehend	2
9/10.	Pathways	28
11.	Mountain	19
12.	Kentucky River	11
13.	Cumberland	19
14.	Adanta	31
15.	Bluegrass	229
	Total	718

### Kentucky P&A's Annual Meeting of the PADD Advisory Board and PAIMI Advisory Council





The Annual Meeting of the PADD Advisory Board and The PAIMI Council was held at the Thomas D Clark Center for Kentucky History. The focus of the meeting was the identification of barriers to a successful future for Kentucky's children with disabilities.

The meeting was facilitated by The Facilitation Center of Eastern Kentucky University. There were participants from the Department of Behavioral Health Intellectual/Developmental Disabilities, Client Assistance Program, the KATS network, Human Development Institute,

the Commonwealth Council on Developmental Disabilities, Department of Juvenile Justice, Department of Public Advocacy, Kentucky SPIN, Kentucky Partnership for Families and Children, Commission for Children with Special Healthcare needs, Kentucky Autism Network, the Down Syndrome Association and P&A staff.

Education, Job Training/Transition, and Direct Supported/Resources were identified as barriers for children with disabilities. Kentucky P&A has written priorities to address these barriers.



Kentucky P&A Director, Jeff Edwards and PAIMI Advisory Council Members, Robin Rider Osborne and James Light







Attendees identifying barriers for children with disabilities



The Public Advocate, Ed Monahan, Annual Meeting of the PADD Advisory Board and PAIMI Advisory Counsil

#### The Billy Cox/Victoria Scott Self-Advocacy Award

Kentucky P&A honors Billy Cox and Victoria Scott for their advocacy and passion, by presenting the self-advocacy award named after them to an individual at the annual meeting of our two advisories held in May of each year. Billy advocated for the rights of people with disabilities to make their own choices about where they lived and how they spent their time. Victoria's advocacy highlighted how persons of color were over represented on locked wards of state psychiatric hospitals. Nominations for this award are made by the PAIMI Advisory Council and PADD Advisory Board.



Robin Rider Osborne

**Robin Rider Osborne** was the recipient of the award in 2016. Robin has long been a self-advocate and advocate for others. As the Chair of the PAIMI Advisory

Council, Robin is involved in many advocacy efforts such as educating legislators about proposed mental health legislation that could restrict the rights of individual who have a mental illness. She keeps herself informed and P&A informed of disability related articles, legislation and other activities not only in Kentucky but nationally. Robin also is a board member (and only consumer) for the Women's Crisis Center for the Trauma Informed Care Learning Community in Northern Kentucky. Historical research is a passion of Robin's and she is actively researching Kentucky's Psychiatric Institution History. By serving as the voice of those who often feel helpless and without a voice, Robin's work epitomizes the spirit of self-advocacy.

### The Jean Gossick Award



Left to Right: Kim Brothers, Ellen Kincaid, Sherry Brown, Dianne Metzmeier, Jonna Meyer, Jeff Edwards, Kentucky P&A Director

The recipient of the Jean Gossick Award for 2016 was the Seven Counties Rural Assertive Community Treatment (ACT) Team, now Centerstone ACT Team. Jean Gossick served for many years on the PADD Advisory Board and was the mother of a daughter with a disability. She was a strong advocate not only for her daughter, but for all individuals with disabilities. She fought to ensure individuals with disabilities received services and supports they needed. Since the signing of the Settlement Agreement between the Cabinet for Health and Family Services and P&A in 2013, the Seven Counties Rural ACT Team has had a con-

stant, energetic presence in the personal care homes in its region and has successfully transitioned many individuals residing in personal care homes into the community by providing an array of services and provide supports. A lack of community resources has not deterred Seven Counties Rural ACT Team from serving individuals. This team has shown creativity by networking with businesses in the community to provide housing, household items, and services to support individuals moving into the community after years of institutionalization.

## Message From PAIMI Advisory Council Chair

As Chair of the PAIMI Advisory Council and a voice for individuals who have a mental health diagnosis and other disabilities, a grave concern I have is the proposed forced treatment legislation, or Assisted Outpatient Treatment Orders. The PAIMI Advisory Council feels this legislation focuses on a small group of individuals yet casts a wide net over the many individuals who have a mental health diagnosis, may not be complying with treatment, yet do not pose a threat to others. One of the components of KRS 202A already addresses outpatient treatment orders, however, it is an underutilized component of KRS 202A. Engaging and wrapping individuals with strong community supports and services is what is needed, not more laws that restrict the rights of many Kentuckians who have a mental illness.



Robin Rider Osborne, PAIMI Advisory Council Chair

## "We must always remain vigilant about the loss of rights and dignity."

My hope is that resources continue to be available to train peer specialists and promote alternative forms of treatments, such as Trauma Informed Care and continue to strengthen community supports. Choice is critical in recovery process.

I also want to mention how important it is to have a seat at the table. We must continue to bring others to the table to have a voice, those who have experiences to share. For those of us who have a seat at the table have a responsibility to speak for those who don't have a seat at the table.

One of the most empowering part of my own recovery was becoming a member of the PAIMI Advisory Council at Kentucky Protection and Advocacy. I was accepted where I was in my recovery even if it didn't look like anyone else's recovery. The work that Protection and Advocacy does empowers me and others. I look forward in my role as Chair to help facilitate the further expansion of rights and services for individuals who have a mental illness.

## Message From PADD Advisory Board Chair

#### Greetings!

In light of recent events, the Kentucky PADD Advisory board is committed to making the disability community a better place to live, learn, work, and grow. As advocates, we strive to educate and empower those who may not have found their voice yet. It is easy to feel suppressed at a time when the world seems to be submerged in darkness and uncertainty. Now, more than ever, it is essential that we use our collective voice to ensure that we are heard.

This past year has brought with it many successes--- most notably, the passage of the ABLE act in the state of Kentucky. We also visited some sheltered workshops



Ashley Layne, PADD Advisory Board Chair

throughout the state, educated high schoolers about transition options post-graduation, and continued our efforts to revitalize the Frankfort State Hospital grounds. Some objectives (such as the creation of a privately funded scholarship) were not able to be achieved, but I am hopeful that we will be able to return to those at some point in the future. For now, we will be working to ensure that at least three designated public places are not in violation of the American's with Disabilities Act standards. In addition, we are looking into creating a committee, whose aim is to reach out to younger potential board members across the state. After all, the youth are our future.

When I joined this board at the age of 18, I could not have foreseen the profound impact my position would have on my life and career goals. Now at 22, I am realizing just how blessed I really am. In order to create change, we must be willing to make noise, roll with the punches, and stay humble. I hope you will join me.

*H*shley Layne

### Highlights of Systemic Advocacy for FY 2016

#### Don't Dis My Ability



Kentucky PADD Advisory Board created a video titled, "Don't Dis my ABILITY", to promote integrated, competitive employment and the Medicaid waiver services and supports used to support them. The video featured three PADD Advisory Board members working at their place of employment. Employers included Montgomery County Judge Executive Office, Murakami in Campbellsville, Kentucky, and the Bracken County Public Library.

#### **SB 200 Juvenile Justice Reform**

Kentucky P&A attended legislative committee meetings with Juvenile Justice stakeholders concerning the implementation of juvenile justice reform and how it may affect children with disabilities. Kentucky P&A educated stakeholders about the disproportionality of children with disabilities involved in the Juvenile Justice system. The Department of Juvenile Justice, the Administrative Office of the Court, the Kentucky Department of Education, the Department of Public Advocacy and the Department of Behavioral Health have started to look at existing data concerning children with disabilities who are involved in the Juvenile Justice system.

## Kentucky's System of Care

Protection and Advocacy advised parents and guardians of children and youth about the ongoing changes in Kentucky's System of Care. Kentucky's Department for Medicaid Services is now allowing providers who historically could not have billed to Kentucky's Medicaid System now are able to bill and steps are being taken to determine where services are available. Parents and guardians of children are also made aware that they can request a case manager or care coordinator from the managed care organizations to assist them in coordinating and receiving services. People with disabilities are able to coordinate and access mental health services since Kentucky Protection and Advocacy informed the public about the changes.

### **Outreach to the LGBTQ Community**



The Kentucky P&A PAIMI Advisory Council created, with technical assistance from Kentucky P&A staff, a resource brochure about mental health services in Kentucky for LGBT adults and youth. The PAIMI Advisory Council participated in the Northern Kentucky Pride Festival and provided participants with information about Kentucky P&A and the resource guide. This brochure was also distributed at other outreach events. To request a brochure, please call 502-564-2967, 800-372-2988 or visit www.kypa.net.

#### **Public Forum**

The public was invited to make comments about the work and priorities of Kentucky P&A at two public forums. Notices were place in local newspapers, on Kentucky P&A's web site, Facebook page and Twitter account. The first was held at the World Fest, in Louisville, Kentucky where over 200 individuals met with P&A staff, and the second public forum was held in Morehead, Kentucky. Areas of concern most identified by participants are abuse/neglect, outreach to minorities and underserved population, education, community supports, healthcare and employment.





Americana World Festival, Iroquois Park, Louisville, Kentucky Public Forum



Public Forum in Morehead, Kentucky

### **Monitoring**

Protection and Advocacy Systems are granted access by federal authority that includes monitoring facilities where individuals with disabilities reside. During 2016, Kentucky P&A monitored 125 facilities.





Kentucky P&A monitored 12 children's psychiatric hospitals and interviewed 85 children. One common complaint was children felt grievances were not properly addressed and several hospital administrators expressed concern about children committed to the Department of Community Based Services linger in the hospital beyond their discharge date due to a lack of placement.

Kentucky P&A monitored 9 Psychiatric Residential Treatment Facilities (PRTFs), 10 Private Child Care Facilities, and 5 Department of Juvenile Justice facilities. One hundred and seventeen (117) children and youth were interviewed. A consistent complaint made by residents from all facilities was that they felt that resident grievances are not taken seriously.

#### **Nursing Facilities**

Kentucky P&A conducted onsite monitoring in sixty-five (65) nursing facilities throughout the Commonwealth. At each facility Kentucky P&A staff met with administrative, nursing and social work staff, completed monitoring tools and toured the facilities. Kentucky P&A provided facility staff with information about the P&A system, Medicaid Waivers, KY Transitions (Money Follows the Person), Assertive Community Treatment, Integrated Supplement, PASRR II services and voting accessibility rights.

#### **State Prisons**

Kentucky P&A monitored the mental health units including restrictive housing units in all of Kentucky's state adult prisons(12) in 2016. Kentucky P&A developed a detailed monitoring tool which focused on inmates with disabilities in special management units where the inmate is in cell for 23 hours per day. Kentucky P&A interviewed the warden, other prison staff and all of the mental health treatment staff for the Kentucky Department of Corrections (DOC) regarding programs, concerns and treatment barriers and three inmates were interviewed in each prison.

## Intermediate Care Facilities for the Intellectually and Developmentally Disabled (ICF-ID) Facilities:

In 2016, efforts were focused at Hazelwood and Bingham Gardens located in Louisville. Kentucky P&A's goals are to ensure that persons admitted to a facility rights are not violated, are free from abuse and neglect, and facilities are not violating state and/or federal regulations. In 2016, reports were made to the Office of Inspector General for lack of active treatment and facility disrepair at one or both facilities. Kentucky P&A also monitors admissions under a 202B order and voluntary admissions to ensure that individuals who are admitted are placed in the least restrictive environment. According to the Department for Behavioral Health and Intellectual and Developmental Disabilities, in 2016 there were 52 filed 202B petitions with 22 being upheld with admissions to an ICF-ID facility. This is an increase from 23-202B petitions filed with 14 being upheld with admissions in 2015.





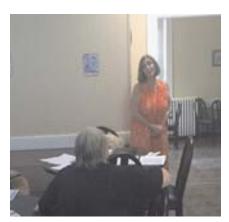






### **Training at Personal Care Homes**

During fiscal year 2016, the Kentucky PAIMI Advisory Council along with technical assistance from Kentucky P&A staff members provided training to 170 persons living in 15 Personal Care Homes (PCHs). Information about Long Term Care Rights, services available through Amended Settlement Agreement (ASA) provided by the 14 Community Mental Health Centers, including supported employment, as well as any other topics participants wished to discuss about retaining benefits. The Kentucky PAIMI Advisory Council distributed written information on each topic to all of the residents who were not able to attend the trainings.



Robin Rider Osborne providing training to residents of personal care homes



Gayla Lockhart providing training to residents of personal care homes

## Training at Sheltered Workshops in Kentucky

Kentucky P&A presented training at four sheltered workshops that have 14C certificates through the U.S. Department of Labor. 14C certificates allow employers to pay sub-minimum wages to individuals with disabilities. Approximately 150 Individuals with developmental disabilities attended the hour training. The goal of the training is to inform individuals with disabilities about integrated, competitive employment opportunities beyond sheltered workshops. Topics included: Ticket to Work, Vocational Rehabilitation, Individual Plans for Employment, Client Assistance Program, Certified Work Incentive Coordinators, Post-secondary educational opportunities, work place accommodations, and Adult Education programs.

## **Annual Judicial College**

Judge Karen Thomas, District Court Judge in Campbell County, contacted Kentucky P&A about the lack of Community Mental Health Center (CMHC) involvement in Northern Kentucky on a particular case. P&A shared information with Judge Thomas the Amended Settlement Agreement (ASA), the Community Integrated Supplement and the community transition regulation. The lack of services available to those individuals with a mental illness often leads to situations where an involuntary commitment to a psychiatric hospital is the only available option. Judge Thomas invited P&A to participate in the Annual Judicial College sponsored by the Administrative Office of the Court.

Kentucky P&A discussed services made available under ASA. The judges received contact information for each CMHC and ACT team, a copy of ASA and the regulation 908 KAR 2:065. The services under the regulation includes case management, supported employment ACT services, housing assistance, peer support and a person centered recovery plan. The presentation stressed that services and supports under the regulation should be attempted prior to an involuntary commitment being filed.

## Highlights of Protection & Advocacy for Voting Access in Kentucky 2016

#### **Collaborations with Other Agencies**

Kentucky P&A partnered with three of the Commonwealth's independent living centers, Center for Accessible Living in Murray and Louisville and Independence Place in Lexington, and the Commonwealth Council on Developmental Disabilities to create REV-UP Kentucky. REV-UP Kentucky is a non-partisan, cross disability, coalition of providers and citizens dedicated to full political participation for Americans with disabilities.

REV UP works to eliminate barriers, promote accessible voting technology and polling places; educate voters about issues and candidates; promote turnout of voters with disabilities; engage candidates and the media on disability issues, and protect eligible voters' right to participate in elections.

- 1500 individuals in Kentucky received information and education about voting access and rights.
- Hosted a voter hotline for the general and primary elections to ensure voting access and rights.
- Worked with Kentucky State Board of Elections to ensure that polling places are
  physically accessible though the state.
- Educated policy makers about the impact of the passage of HB 212 that would add people with disabilities to the list of voters who wish to vote early by absentee machine.
- Provided continued education on accessible elections to County Clerks and precinct election officers through the instructional video created in fiscal year 2014.
- Provided comments to the U.S Election Assistance Commission on their voter quick tips publication.









## **Kentucky P&A Provided Comments On:**

#### 1115 Medicaid Demonstration Waiver Proposal

Kentucky P&A tracked and provided comments on Kentucky's new 1115 Medicaid Demonstration Waiver proposal. The 1115 targets those individuals who became newly Medicaid eligible following the passage of the Affordable Care Act (ACA). Under the ACA and following a U.S. Supreme Court ruling, states could choose to expand Medicaid to those earning 138% of the federal poverty level or less. Kentucky choose to expand. The 1115 requires community engagement and premiums among other things. Kentucky P&A expressed concern that the 1115, while focusing on the expansion population, also included Supplemental Security Income (SSI) recipients. SSI recipients in Kentucky receive Medicaid and have done so long before the passage of the ACA. By including SSI recipients, the 1115 created burdens for the SSI population where none existed before. Kentucky P&A asked Kentucky Medicaid to remove the SSI population from the 1115. The final version of the 1115 Kentucky submitted to the Center for Medicare and Medicaid services **excluded** SSI recipients from the 1115. Consequently, SSI recipients won't have to pay premiums, participate in community engagement, and will receive Medicaid on a fee for service basis rather than via managed care.

#### Home and Community Based Waiver (HCBW) Pay Rate of Attendant Care

Kentucky has recently been creating more and more barriers to those wanting to consumer direct their Medicaid wavier services. The recent changes to Kentucky's waiver for those that meet nursing facility level of care (HCBW) continues this trend. Kentucky P&A commented and testified before a legislative commitee about these changes to HCBW. Kentucky P&A expressed concern that the pay rate for traditional attendant care services will be billed at more than double the rate for the same service provided by the consumer directed choice. Additionally, as this is an existing waiver, many recipients that direct their care will be forced to dramatically cut the pay of their employees. This pay cut along with a tightening of allowing family members to provide care combined with forcing consumers to pay hundreds of dollars in per employee start-up costs makes it much more difficult for consumers to direct their care. Kentucky P&A is client driven and will continue to advocate for removing barriers for individuals who are receiving the HCBW.

#### The Able Act

Kentucky Protection & Advocacy assisted in the passage of the Kentucky ABLE Act (Senate Bill 179). The Achieving a Better Life Experience (ABLE) Act allows individuals with disabilities to have savings accounts for disability-related expenses while keeping access to meanstested benefits like SSI and Medicaid. Unlike a special needs trust, the beneficiary of an ABLE account has control over the funds. Several of KY P&A's PADD Board and PAC Council members expressed frustration at having to keep a bare minimum of savings in order to access benefits.

## In Addition, Kentucky P&A Assisted the Department of Public Advocacy in Draft Comments to the 1115 Medicaid Proposal

Kentucky P&A worked with various partners to educate state officials about the availability of suspending rather than terminating Medicaid benefits upon incarceration or placement in an Institution for Mental Disease (IMD). These comments were included in the draft comments to the 1115 Medicaid proposal. Kentucky added an additional status category that allows inmates to have their Medicaid benefits suspended and suggest that persons incarcerated have their Medicaid benefits suspended rather than terminated. It has shown that recidivism is reduced and employment is increased if individuals have access to health care upon release from a jail or prison.

#### **Able Accounts**

Kentucky P&A met with Kentucky legislators, the State Treasurer, and the Commonwealth Council on Developmental Disabilities and attended numerous roundtable meetings on the passage of the Senate Bill 179. An often cited example of the savings barrier involved consumers who could not afford to repair their modified vehicles so they could continue going to work or interacting with their community. Now that the Kentucky ABLE Act is law, Kentuckians with disabilities can open an ABLE account in any participating state and not be forced to have minimal savings in order to access benefits.

## Internal Abuse and Neglect (IAN) Team

Kentucky P&A's Abuse and Neglect (IAN) team investigates all suspicious deaths and serious injuries sustained to individuals with disabilities in various settings including: communities, schools, and facilities. Notifications of allegations of abuse, neglect, and exploitation are received from anonymous referrals, media reports, Type A/B Citations issues by the Office of Inspector General (OIG), facility incident reports, victims and other concerned persons who call Kentucky P&A to report. In FY 2016, the IAN team investigated 28 incidents of abuse and neglect out of the 98 referrals made to Kentucky P&A.

## **Assisted Outpatient Treatment Order**

Kentucky P&A continues to monitor mental health legislation. For over five years, Assisted Outpatient Treatment legislation has been filed in the Kentucky General Assembly. This proposed legislation could potentially restrict the rights of individuals who have a mental illness by issuing orders that can last indefinitely. Due to the restrictiveness of the proposed legislation, Kentucky P&A continues to elicit comments from the PAIMI Advisory Council. The PAIMI Advisory Council issued a position statement about the proposed legislation, have met with legislators to educate them about how this legislation restricts the rights of many individuals with mental illness and have attended committee hearings and testified at the hearings. Kentucky P&A continues to advocate for more intensive outpatient treatment programs in Kentucky.

### **Project Safe**

Kentucky P&A continued participation in Project SAFE (Safety & Accessibility for Everyone), a multi-disciplinary network working to build the capacity of professionals throughout Kentucky to provide safe, accessible and comprehensive person-centered services to individuals with disabilities who have been subjected to sexual assault and/or domestic violence. During 2016, Kentucky P&A had an advocate serve as co-chair of the statewide organization. In addition, this staff member was interviewed for an article featured in the Exceptional Family Magazine produced by the Commonwealth Council on Developmental Disabilities. Kentucky P&A also assisted in the planning and hosting of the 4th Annual state-wide Advocating to End Abuse summit held in Lexington. Further, Kentucky P&A advocate served as a panelist in the Crisis Intervention Team (CIT) for the Louisville Metro Police Department and State CIT, and actively participated in quarterly meetings of the CIT Advisory Board for Louisville Metro Police Department. Kentucky P&A also presented on the intersection of disability and youth entering juvenile justice system at the Juvenile Justice and Community System Summit. Kentucky P&A will continue to collaborate with others on Project SAFE to advocate for accessible services for all who have been subjected to sexual assault and/or domestic violence.











### **Amended Settlement Agreement**

Kentucky P&A and the Cabinet for Health and Family Services (CHFS) amended the Settlement Agreement signed in August 2013. The former agreement, the Interim Settlement Agreement, called for CHFS to provide community based supported housing assistance and services, including Assertive Community Treatment, Peer Support Services, Crisis Services and Supportive Employment to 600 individuals over a three-year period. Kentucky P&A has been involved in the rollout of these services by attending monthly Cabinet level transition meetings, Regional transition meetings, person centered recovery planning meetings, among attending trainings about these services and supported employment. On September 30, 2015, 225 individuals with serious mental illness had received housing assistance and services as described in the Agreement. The benchmark was established for 300 individuals to receive services after two years. Negotiations occurred between Kentucky P&A and the

CHFS to amend the Settlement Agreement and was signed on October 19, 2015. The current Amended Settlement Agreement states over 675 individuals residing in Personal Care Homes or who have previously resided will receive services outlined in the Settlement Agreement within five years. As of September 30, 2015, 355 individuals have received services under the Settlement Agreement. This agreement provided much needed community supports and services to eligible individuals living who are currently living in a personal care home or who have previously lived in one. However, there are still many individuals residing in personal care homes who are unhappy living there and have expressed their wish to live in the community but are waiting for housing and services.



How a resident in a personal care home maintains his privacy

## 908 KAR 2:065 Regulation to Ensure Community Based Services for Individuals with Severe Mental Illness Who Are At Risk of institutionalization

Kentucky P&A worked with the Cabinet for Health and Family Services to write a regulation to ensure that services provided by the Amended Settlement Agreement are a permanent fixture in the manner in which the state provides community services to PAIMI eligible individuals who are institutionalized or at risk of institutionalization. **908 KAR 2:065** requires the Secretary of the Cabinet for Health and Family Services to promulgate administrative regulations necessary to protect the health of Kentucky citizens and to implement programs mandated by federal law or to qualify for the receipt of federal funds. **KRS 210.450** requires the Secretary to promulgate administrative regulations governing qualifications of personnel and standards for personnel management for community programs for behavioral health or individuals with an intellectual disability. This administrative regulation establishes housing assistance guidelines and the range of community transition services to be made available to qualified individuals diagnosed with a serious mental illness residing in or at risk of residing in personal care homes.

The following narrative is an example of how services made possible by the Amended Settlement Agreement have had a positive impact on the lives of individuals who are living in a personal care home. The services provided by Mountain Comprehensive Care Center ACT Team, funding provided by the Olmstead Housing Initiative and the Kentucky Housing Corporation, and the Community Integration Supplement administered by the Department for Community Based Services, is an example of agencies working together to prevent institutionalization.

Assertive Community Treatment (ACT) is an Evidence-Based Practice Model designed to provide treatment, rehabilitation and support services to individuals who are diagnosed with a severe mental illness and whose needs have not been well met by more traditional mental health services. The ACT team provides services directly to an individual that are tailored to meet his or her specific needs. ACT teams are multi-disciplinary and include members from the fields of psychiatry, nursing, psychology, social work, substance abuse, and vocational rehabilitation.

#### "Home, Sweet Home"

Greg Wilson was born and raised in Pikeville, Kentucky. He graduated from high school and was known as an athlete and someone with a ready smile. In the years following high school, his friends and family began to notice some changes in Greg. He "wasn't acting like himself" and they noticed he would occasionally talk about strange things that seemed to trouble him. Many dismissed his behavior as drug usage. Greg does not deny that he experimented with illegal drugs when he was younger, but his behavior was not related.



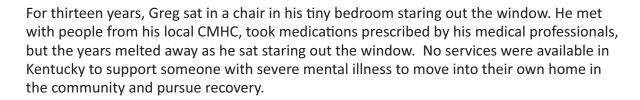
Grea at home

His unusual behavior ultimately led to involvement with law enforcement, which resulted in psychiatric evalua-

tions, and psychiatric hospital admissions. It was during this time that Greg began to understand he had a serious mental illness. He had previously thought his "issues" were attributed to his drug and alcohol use. However, during the psychiatric hospitalizations he no longer had access to drugs and alcohol. It was determined that he had a diagnosis that could be managed with a combination of therapy, medication(s), and appropriate recovery based services in the community. When he was discharged from the hospitalizations, he was advised to return to his community and work with his local community mental health center (CMHC) to obtain services.



Greg returned to Pikeville, worked with the local CMHC, accessed therapy programs and agreed to medications. There was not any services in his region, such as permanent supported housing or ACT that would provide the necessary support for Greg to remain in his community. Greg found that he did not have the tools to manage his mental illness. On July 21, 2000, Greg agreed to move into a Personal Care Home (PCH) in a county near Pikeville. His team explained to him that this was the setting in Kentucky which could best meet the needs of someone like Greg.



In 2009 the PAIMI Advisory Council, along with assistance from Kentucky P&A staff provided training to residents about long term care rights, voting, psychiatric advance directives, restoration of rights, and employment. In addition to training residents, they were also interviewed about their lives and PCHs. In 2011, a Kentucky P&A advocate walked into Greg's PCH and found him sitting in his chair, staring out the window. Greg was asked if he would like to participate in an interview about living in a personal care home, current services and whether he would like additional help in his recovery. He agreed and offered his insights on what he needed to regain his independence.

Greg's input, along with 122 other personal care home residents across the state who also participated in the interviews, contributed to the signing of Interim Settlement Agreement signed in 2013 between Kentucky P&A and the Cabinet for Health and Family Services (CHFS). This agreement created community based services for people with serious mental illness. As significant as the accomplishment seemed, Greg's skepticism of the new services served as a predictor of how difficult it is to implement new services.

The newly developed ACT team at his CMHC immediately began to work with Greg to determine where he would like to live and what services would be needed to allow him to live as independently as possible. His questions were telling of his experience with previous

efforts. "Are they just going to drop me off at an apartment and then leave?" "Will I have any furniture or a bed?" "How will I get my food?" "I don't know how to handle my money; will someone help me pay my bills?" "I don't know how to get my medications or take them, how will I do that?" These questions were the culmination of 13 years of institutionalization and the lack of confidence Greg had in himself to live independently.

In the years that followed, with the support of the Mountain Comprehensive Care ACT team, Greg overcame the fears, the anxiety, the unintended dependence that comes from statefunded food and shelter, and he took that brave leap of faith and moved into his own apartment. After months of visiting



Greg at the grocery

and becoming reacquainted with Pikeville, an apartment was secured for Greg. He found himself back in his hometown, walking around town, shopping, socializing, and sharing his smile with those who remember him fondly and now see him back at his best.

When a Kentucky P&A advocate approached Greg about his willingness to be highlighted in Kentucky P&A's annual report, Greg recounted several things that attributed to his success. He emotionally recounted how he promised his mother on her deathbed that he would no longer "do drugs." He recalled fondly the people who steered him toward the only services available to him at the time when he was first diagnosed with his mental illness and trying to manage his mental illness. Greg emphatically said he never wanted to return to a PCH.

### **Highlights of Case Narratives for FY 2016**

#### **Utilizing Services to Seek Competetive Integrated Employment**

Maybelle, age 64, met Kentucky P&A while living in a personal care home in western Kentucky. For years, Maybelle wanted to leave the personal care home and work in the community. In 2013, the Interim Settlement Agreement (now the Amended Settlement Agreement) was signed. Maybelle was one of the 133 expressers identified as part of the Interim Settlement Agreement, (now the Amended Settlement Agreement) that was signed in 2013. She was assessed by Pennyroyal Community Mental Health Center and was soon approved for the Supports for Community Living (SCL) Waiver. Maybelle wanted to remain in Western Kentucky and selected an SCL provider in Madisonville before changing providers and moving to Bowling Green. Maybelle receives services from an SCL provider, Help at Home, Omni Visions Case Management Services, and Behavioral Support Services by CLiK.

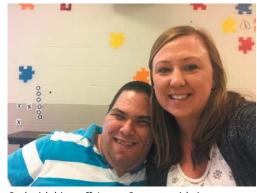


Maybelle at Lifeskills

Maybelle is very happy living in Bowling Green, loves her home, her roommate and staff and the services she is receiving. She expressed to Kentucky P&A she would like to work. This information was relayed to her case manager who referred Maybelle to Life Skills Industries. Maybelle is currently works at Life Skills Industries three days a week. She performs various tasks at Life Skills Industries including assembling parts for subcontractors. Maybelle has expressed she would like to work at Walmart. She has been referred to Vocational Rehabilitation to begin working with a job coach with the goal of securing a job at Walmart.

#### **Please Resuscitate!**

Carl Sundstrom is a 36-year-old man who has a diagnosis of cerebral palsy. He is a recipient of the Supports for Community Living waiver and receives services in the Northern Kentucky area. While meeting with his team for his annual Plan of Care, it was discussed why he had a Do Not Resuscitate (DNR) order and they asked him if he understood what the order meant. It was unclear if Carl understood the order and he was asked that in the event he stopped breathing for various reasons, if he would like emer-



Carl with his staff, Laura Creasey, with Aspen Community Living

gency medical staff to use lifesaving measures like resuscitation. Carl indicated yes, he would want measures to be taken to save his life. His day program contacted Kentucky P&A and requested assistance. Carl told Kentucky P&A he wanted to have the order revoked. Kentucky P&A worked with Carl and drafted a new document that revoked the order and the original DNR was removed from all files.

#### Jackson cried almost every day because he did not want to attend school

Jackson Tillman is a ten year-old fourth grader who is Autistic and a student in the Daviess County Public Schools. He often becomes overstimulated in the school environment. The overstimulation led to Jackson kicking, biting or pinching others, throwing things, stripping, and running away from other people. In the 2015-2016 school year, officials restrained and called Jackson's mother to help deescalate Jackson daily. Jackson spent more time out of class, calming down, than he did in class.

Jackson's mother requested frequent Individualized Education Plan meetings. Her hope was to devise a plan that would eventually allow Jackson's beha-



Jackson Tillman and Mateo

viors to decrease, so that he could participate more in the classroom and not spend the school day in a segregated classroom.

Desperate to help her son, Jackson's mother also contacted Autism Service Dogs of America after researching the potential life-changing benefits a service dog could offer a child who is Autistic. Jackson's mother met with the school district to discuss the proper procedures to implement the service dog into Jackson's school day. The school district's response was to refuse to allow school personnel to assist Jackson with his service dog. They stated Jackson would have to control the dog or that family would have to provide a handler. Jackson could not be the service dog's handler without assistance.

Not giving up, Jackson's mother contacted P&A about this issue. A P&A attorney, Jackson's mother, and the service dog trainer met with the school district to further discuss the service dog attending school with Jackson and without the family having to provide a handler. During that meeting, the school system agreed that school officials would be trained to be the dog's handler while at school and assist Jackson in controlling the service dog. This accommodation ensured that Jackson could attend school with his service dog without the family needing to provide a handler for the service dog.

Jackson met Mateo in December, 2015. They attended school for the first time together on January 8, 2016. Jackson's aide assists him with control of Mateo. Since Jackson has had Mateo, school officials have not restrained Jackson. Jackson's mother has not been called to deescalate Jackson and Jackson does not cry about going to school anymore. Instead, Jackson loves going to school.

#### Successful Discharge from an ICF-ID Facility

Joshua Baxter was admitted to an ICF/ID facility following the closure of his Medicaid waiver provider. The provider closed because of numerous health, safety, and welfare complaints. Due to increased behavior incidents, significant health and dental concerns and the lack of implementation of his treatment plan, he was placed in an institution. He requested Kentucky P&A's assistance to transition back into the community, as quickly as possible. Kentucky P&A opened a case to assist with appropriate discharge from the facility and a secondary investigation to ensure that Adult Protective Services (APS) followed-up on his dental neglect. Joshua was successfully discharged to a new community provider with exceptional supports to provide additional services during his transition. Staff are currently assisting Joshua with having increased access to the community, access to gainful employment through the Office of Vocational Rehabilitation, and in restoring his right to vote. Kentucky P&A feels staff



Joshua Baxter at a state park

are working successfully as a team, with Joshua as the center, to ensure he does not encounter the same barriers to a successful community placement, as in the past. In addition, APS did substantiate provider neglect due to the lack of dental care provided to Joshua while at the previous Medicaid waiver placement. He has since received full dental care.

"In matters of truth and justice, there is no difference between large and small problems, for issues concerning the treatment of people are all the same."

Albert Einstein

#### **Individuals Finally Receive Funds on Patient Liability**

Kentucky P&A expressed concern to the Cabinet for Health and Family Services (CHFS) several years ago about CHFS incorrectly charging many individuals in Medicaid waivers substantial co-pays, commonly referred to as a patient liability. In response to P&A's advocacy efforts, CHFS changed its policies to comply with federal law. Many individuals with disabilities no longer had to pay the liability and CHFS also, over the course of several years, reimbursed them for the erroneous payments. Those reimbursements occurred in two phases—the first going back to January 2011, and the second from December 2010 back to July 2008. P&A assisted many waiver participants navigate the reimbursement process. P&A assisted many waiver participants navigate the reimbursement process and our clients were able to purchase mobility devices and modified vehicles, build ramps, and create trusts. CHFS' Medicaid Operation Manual now reads:

"When an individual who is already Medicaid eligible begins receiving waiver services, the individual has a \$0 patient liability regardless of income. This applies only to waiver admissions, not to nursing facility admissions. The case remains in the original category."

One of those individuals is JY, a young lady with diagnoses of ID/DD and autism who lives with her parents. CHFS stopped requiring her \$100 monthly patient liability in July 2013, but when her mother first contacted P&A in early 2014, she had not been reimbursed the first phase of payments. The provider to whom she had made the payments claimed it first had to be reimbursed by CHFS. This was not accurate. P&A was able to ensure that JY received those monies. Her mother contacted P&A again in August 2016 when the same provider made the same claim for the second phase of reimbursements. Again, P&A through its efforts secured payment of those funds. Like many P&A clients, JY used the money to purchase beneficial items, like mobility devices, ramps and modified vehicles.

#### **Student Receive Appropriate Services and Remains in School**

MG is a seven-year-old male who is Autistic and legally blind and attends Kentucky School for the Blind (KSB) in Louisville, Kentucky. Kentucky P&A was contacted when the school refused to complete a Functional Behavioral Assessment and MG's parents were concerned staff working with MG at KSB were not certified in visual impairments. MG's parents were concerned that KSB was preparing to expel MG due to his behaviors. Kentucky P&A advocate attended several ARC meetings and ensured staff working with MG were properly certified, a Functional Behavior Assessment was completed and behavior plan developed and implemented, and MG's behavioral needs were met. MG is currently receiving appropriate supports and services and is doing well at KSB.

When the whole world is silent even one voice becomes powerful

Malala Yousafzai

#### **Employment Jeopardized Due to Costly Out of Pocket Expenses for Transportation to Work**

Kentucky P&A represented Cathy Jo Edwards, SSA beneficiary whose employment was being jeopardized due to her inability to pay out-of-pocket for her transportation to and from work. With the support of her Medicaid waiverfunded supported employment services, Cathy Jo had successfully performed her job as an administrative employee at the Montgomery County Courthouse for over eight years. Her supported employment specialist informed her that she was performing her work so well, she could no longer justify continuing the supported employment services.



Cathy Jo at the Montgomery County Judge Executive's office

While initially proud of her accomplishment of becoming self-sufficient in her job, Cathy Jo later discovered that the discontinuance of the Medicaid-billable supported employment services meant her transportation to and from work would no longer be covered by Medicaid. The out-of-pocket rate she was given by her transportation company would not have allowed her to keep her job, as she would have been charged more than her job pays. Kentucky P&A advocate attended a meeting with Cathy Jo and her service providers, researched funding options to cover her transportation within her Medicaid waiver Participant Directed Services (PDS) option and another disability-related grant. Kentucky P&A helped Cathy Jo contact her transportation provider directly to negotiate a lowered transport rate that could be fully covered by these other funding streams. Commitments were secured from all service providers involved to coordinate the payments to the transportation provider on a monthly basis. As a result of the negotiated rate and secured funding options for covering the new rate, Cathy Jo has successfully maintained her self-sufficient employment for the seven months following termination of her Medicaid waiver-funded supported employment services.



#### " A Place to Hang My Own Hat"

Joe Steinbock, age 57, enjoyed living with his parents in their home his entire life. He helped his family with household chores, enjoyed going to church with his family, participated in the Special Olympics and especially enjoyed family gatherings. Due to the declining health of Joe's parents, Kentucky P&A was contacted to explore residential options for Joe.

Kentucky P&A assisted the family with submitting an application for the Supports for Community Living waiver. Joe was soon placed an emergency waiting list for the waiver. During this time, Joe received case services supports from Centerstone, formerly Seven Counties Services. Joe chose Apple Patch as his residential provider and case management services from Louisville Independent Case Manage-



Joe Steinbock

ment. A residential opening soon became available at one of the homes owned by Apple Patch and to prevent Joe from missing the opportunity to move into this home, Centerstone paid for the residential expense out of crisis funding for a short period of time until Joe was awarded the Supports for Community Living waiver.

In June 2016, Joe moved into his new home. After 57 years of living with his family, all involved were anticipating that Joe may become homesick and have difficulty adjusting. This was most definitely not the case! Joe immediately said "I love my home and my two roommates." Eight months later, Joe again states he loves his home and his roommates. Joe enjoys his bedroom, has his own bathroom and his home is located in a quiet residential neighborhood where he takes walks with his roommates. He enjoys socializing with other residents of Apple Patch who reside in the same neighborhood. During the week Joe attend St. Mary's Center where he spends most of his time working on the computer, Wii dancing for cardio exercise, when he is not involved in community outings that include bowling, visiting parks, going to movies, shopping for art supplies. Joe has enjoyed creating art for many years, particularly painting. He recalled an early memory of sketching the family dog, Tom Tinker. Due to this interest in art, Joe attends Creative Diversity Studio one day a week where he spends his time painting, sketching and being in the company of other artists. Joe visits his family often and stays for extended period of time during the holidays, however, he is always eager to return to his home, roommates, St. Mary's and attending Creative Diversity. Joe stated he likes to have a "place where he can hang his own hat."



Joe at Creative Diversity Studio



Joe at St. Mary's Center



Kentucky PAIMI Advisory Council Members, Reggie Gentry and Robin Rider Osborne, Northern Kentucky Pride Festival



PADD Board member, Katie Bentley presenting at the PADD Advisory meeting



PAIMI Council members, Angela Childress and Jackie May, Relay for Life



Members of Team Jackie May Relay for Life



P&A advocate, Kevin Fleming, Wheelwright Autism Walk



PADD Board member, Mike Smith with Senator Schroder



Teresa Brandenburg with Vocational Rehabilitation, Keith Hosey with Center for Accessible Living and Camille Collins with P&A



Jonathan Martinis, presenting at the Human Development Institute/University of Kentucky on Supported Decision Making



P&A Legal Director, Heidi Schissler Lanham, informing PAIMI Advisory Council about proposed legislation



PADD Board member, Amanda Stahl, press conference on Kentucky Stable Account



Will Bentley 874K, Kentucky P&A Youth Advisor



P&A advocates, Regina Tucker and Robbin Richie, Frankfort State Hospital Cemetery Cleanup



Volunteers, Frankfort State Hospital Cemetery Cleanup



Beckie Clark, Camille Collins, Robbin Rider Osborne, and Elizabeth Hernadez, Frankfort State Hospital Cemetery Cleanup



PADD Board member Kevin Webb and friend, Frankfort State Hospital Cemetery Cleanup



PADD Board member Mike Smith, Frankfort State Hospital Cemetery Cleanup



Quarterly PADD Advisory Board meeting



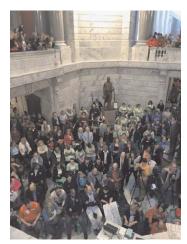
PADD Advisory Board 2016



PADD Board member, Jay Tyner-Wilson and friend



PADD Board member, Lisette Johnson, 874K



874K Rally

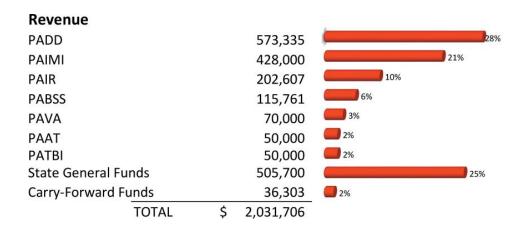


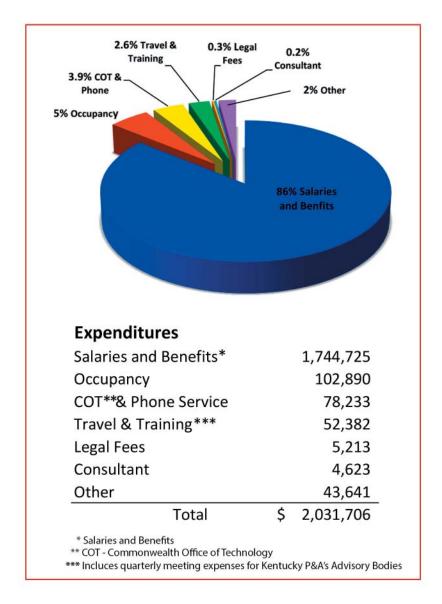
PAIMI Advisory Council, 874K Rally



PAIMI Advisory Council

### 2015 Financial Information





Protection and Advocacy receives funding from the U.S. Department of Education, the Social Security Administration, U.S. Department of Health and Human Services, and State General Funds.

### **Highlights of 2017 Priorities**

#### **Kentucky Protection and Advocacy will:**

- investigate all serious injuries and deaths at schools, facilities, and community programs
- monitor the implementations of the Amended Settlement Agreement between the Cabinet for Health and Family Services and P&A
- analyze data collected from 100 nursing facility visits during FY 2015 and FY 2016 and assist residents of nursing facilities who would like to transition to the community
- monitor Psychiatric Residential Treatment Facilities, children's psychiatric hospitals/ units, private child care facilities, and Juvenile Justice facilities
- investigate current resources available to parents regarding educational advocacy, identify gaps in available resources and increase access to parents
- monitor the implementation SB 200, Juvenile Justice Reform and investigate ongoing changes to the Juvenile Justice System
- summarize information gathered during the FY 2016 monitoring of prison mental health units and restrictive housing units and monitor at least four county jails
- along with the PAIMI Advisory Council, monitor and respond to any proposed statutory changes to the current statues as it relates to the use of "agreed orders" or Assistive Outpatient Treatment (AOT) orders in Kentucky
- provide training about integrated, competitive employment at four sheltered workshops
- continue to research and compile information about the history of Kentucky's psychiatric institutions
- along with the PAIMI Advisory Council, provide training to residents at 15 personal care homes about the Amended Settlement Agreement, Community Integration Supplement
- hold two public forums
- monitor Intermediate Care Facilities for Individuals with Intellectual and/or Developmental Disabilities in Kentucky
- advocate for changes in the consent statutes
- provide information and education on the newly-created Kentucky STABLE accounts
- Hold the annual Frankfort State Hospital clean-up on May 26th, 2017
- Complete accessibility surveys at four public facilities or businesses
- Create an informative video in American Sign Language to educate the deaf and hard of hearing community about P&A and services



Please Like Kentucky Protection and Advocacy on Facebook!



Please follow Kentucky P&A on our Twitter Account: https://twitter. com/kyadvocacy!



"Unless someone like you cares a awful lot, nothing is giong to get better. It's not."

~Dr. Suess, The Lorax

## Who is a Protection and Advocacy for Individuals with Developmental Disabilities (PADD) Advisory Board Member?

- A person who has a developmental disability, their parents, or representative. The majority of members are a person with a developmental disability.
- Works jointly with Kentucky P&A to develop policies and priorities concerning the protection and advocacy of the human, legal and civil rights of individuals who have a mental illness.
- Educates and trains others in the community about the expansion rights for individuals with a developmental disability.

## Are you interested in becoming a member of the PADD Advisory Board?

For an application, please contact Camille Collins at 502-564-2967 or camille.collins@ky.gov or visit P&A's website at www.kypa.net







## Who is a Protection and Advocacy for Individuals with Mental Illness (PAIMI) Advisory Council Member?

- A person who is a consumer of mental health services, a family member, a provider of mental health services, an attorney, or any other person who is interested and knowledgeable from the community.
- Works jointly with Kentucky P&A to develop policies and priorities concerning the protection and advocacy of the human, legal and civil rights of individuals who have a mental illness.
- Educates and trains others in the community about the expansion rights for individuals with a mental illness.

## Are you interested in becoming a member of the PAIMI Advisory Council?

For an application, please contact Susan Abbott at 502-564-2967 or Susan.abbott@ky.gov or visit P&A's website at www.kypa.net

## THE RULES HAVE CHANGED...



Individuals with disabilities can now save and invest without losing government benefits such as Medicaid or SSI.

- Nationwide enrollment for individuals with disabilities
- )) Tax-free savings plan for disability-related expenses
- Save and invest without losing needs-based benefits

team@stableaccount.com 1-800-439-1653 Mon-Fri 9a-6p EST

stablekentucky.com



A





The Cemetery is located at the intersection of Glenn's Creek Road and Cold Harbor Drive, Frankfort, KY. Accessible parking will be available across the street from the cemetery and additional parking is available in the Cabinet for Health and Family Services parking lot.

## Mission

Kentucky Protection and Advocacy will protect and promote the rights of Kentuckians with disabilities through legally based individual and systemic advocacy and education.

## **Vision**

Kentucky Protection and Advocacy has a vision of a just society where all people are treated with dignity and respect for their expressed choices and have equal opportunities to participate in an integrated and inclusive society where different abilities are valued.

## **Values**

Kentuckians with disabilities have a right to self-determination including, but not limited to, the right to refuse, the right to participate, and the right to choose.

Kentuckians with disabilities have the same inherent rights as Kentuckians without disabilities.

Kentuckians with disabilities will live and receive services in integrated and inclusive settings.

Kentucky Protection and Advocacy values and accepts differences and diversity.



5 Mill Creek Park Frankfort, KY 40601 502-564-2967 800-372-2988 Fax 502-695-6764 www.kypa.net