



VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES



DIVISION FOR THE AGING

James A. Rothrock, Commissioner

VDA WEEKLY E-MAILING

July 26, 2016

Table of Contents

[ACL News & Information Link](#)

[NASUAD Weekly Updates Link](#)

[NASUAD Report on State Long-Term Care Ombudsman Programs](#)

[Effective Communication for People Who Have Vision, Hearing or Speech Disabilities](#)

[Local Aging Technology Startup UZURV Wins Competition](#)

[Bon Secours International Active Aging Week Event](#)

[FEMA Newsletter: Heat Safety, Disaster Preparedness](#)

[ACL News: Staying Safe in the Summer Heat](#)

[NASUAD Weekly Update](#)

[DARS Independent Living Weekly Newsletter](#)

[VA Hospital Research & Educational Foundation Upcoming Events](#)

ACL News & Information

Here is a link to news & information from the Administration for Community Living (ACL):

<http://www.acl.gov/NewsRoom/NewsInfo/Index.aspx>

NASUAD Weekly Update

Here is a link to the weekly update from NASUAD:

<http://www.nasuad.org/newsroom/friday-update>

Note: The web links in this document may change over time. DARS-VDA does not attempt to refresh the links once the week has passed. However, this document is maintained on the web for a period of time as a reference. Some links may require registration.

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**NASUAD State Long-Term Care Ombudsman Programs:
Organizational Structure Report**

Joani Latimer, State Long-Term Care Ombudsman

The National Association of States United for Aging and Disabilities (NASUAD) published a new report that offers data from the Long-Term Care Ombudsman Program organizational structure survey that was conducted in early 2015. The report is available at <http://www.nasuad.org/hcbs/article/state-long-term-care-ombudsman-programs-organizational-structure>.

**Effective Communication for People who have Vision, Hearing, or
Speech Disabilities**

Kathy Miller, Director of Aging Programs

The Department of Justice published revised final regulations implementing the Americans with Disabilities Act (ADA) for title II (State and local government services) and title III (public accommodations and commercial facilities) on September 15, 2010, in the Federal Register. Please see additional information below.



Effective Communication

Overview

The Department of Justice published revised final regulations implementing the Americans with Disabilities Act (ADA) for title II (State and local government services) and title III (public accommodations and commercial facilities) on September 15, 2010, in the Federal Register. These requirements, or rules, clarify and refine issues that have arisen over the past 20 years and contain new, and updated, requirements, including the 2010 Standards for Accessible Design (2010 Standards).

People who have vision, hearing, or speech disabilities (“communication disabilities”) use different ways to communicate. For example, people who are blind may give and receive information audibly rather than in writing and people who are deaf may give and receive information through writing or sign language rather than through speech.

The ADA requires that title II entities (State and local governments) and title III entities (businesses and nonprofit organizations that serve the public) communicate effectively with people who have communication disabilities. The goal is to ensure that communication with people with these disabilities is equally effective as communication with people without disabilities.

This publication is designed to help title II and title III entities (“covered entities”) understand how the rules for effective communication, including rules that went into effect on March 15, 2011, apply to them.

- The purpose of the effective communication rules is to ensure that the person with a vision, hearing, or speech disability can communicate with, receive information from, and convey information to, the covered entity.
- Covered entities must provide auxiliary aids and services when needed to communicate effectively with people who have communication disabilities.
- The key to communicating effectively is to consider the nature, length, complexity, and context of the communication and the person’s normal method(s) of communication.

Effective Communication

- The rules apply to communicating with the person who is receiving the covered entity's goods or services as well as with that person's parent, spouse; or companion in appropriate circumstances.

Auxiliary Aids and Services

The ADA uses the term "auxiliary aids and services" ("aids and services") to refer to the ways to communicate with people who have communication disabilities.

- For people who are blind, have vision loss, or are deaf-blind, this includes providing a qualified reader; information in large print, Braille, or electronically for use with a computer screen-reading program; or an audio recording of printed information. A "qualified" reader means someone who is able to read effectively, accurately, and impartially, using any necessary specialized vocabulary.
- For people who are deaf, have hearing loss, or are deaf-blind, this includes providing a qualified notetaker; a qualified sign language interpreter, oral interpreter, cued-speech interpreter, or tactile interpreter; real-time captioning; written materials; or a printed script of a stock speech (such as given on a museum or historic house tour) . A "qualified" interpreter means someone who is able to interpret effectively, accurately, and impartially, both receptively (i.e., understanding what the person with the disability is saying) and expressively (i.e., having the skill needed

to convey information back to that person) using any necessary specialized vocabulary.

- For people who have speech disabilities, this may include providing a qualified speech-to-speech transliterator (a person trained to recognize unclear speech and repeat it clearly), especially if the person will be speaking at length, such as giving testimony in court, or just taking more time to communicate with someone who uses a communication board. In some situations, keeping paper and pencil on hand so the person can write out words that staff cannot understand or simply allowing more time to communicate with someone who uses a communication board or device may provide effective communication. Staff should always listen attentively and not be afraid or embarrassed to ask the person to repeat a word or phrase they do not understand.

In addition, aids and services include a wide variety of technologies including 1) assistive listening systems and devices; 2) open captioning, closed captioning, real-time captioning, and closed caption decoders and devices; 3) telephone handset amplifiers, hearing-aid compatible telephones, text telephones (TTYs), videophones, captioned telephones, and other voice, text, and video-based telecommunications products; 4) videotext displays; 5) screen reader software, magnification software, and optical readers; 6) video description and secondary auditory programming (SAP) devices that pick up video-described audio feeds for television programs; 7) accessibility features in electronic documents and other electronic

and information technology that is accessible (either independently or through assistive technology such as screen readers).

Real-time captioning (also known as computer-assisted real-time transcription, or CART) is a service similar to court reporting in which a transcriber types what is being said at a meeting or event into a computer that projects the words onto a screen. This service, which can be provided on-site or remotely, is particularly useful for people who are deaf or have hearing loss but do not use sign language.

The free nationwide **telecommunications relay service** (TRS), reached by calling 7-1-1, uses communications assistants (also called CAs or relay operators) who serve as intermediaries between people who have hearing or speech disabilities who use a text telephone (TTY) or text messaging and people who use standard voice telephones. The communications assistant tells the telephone user what the other party is typing and types to tell the other party what the telephone user is saying. TRS also provides speech-to-speech transliteration for callers who have speech disabilities.

Video relay service (VRS) is a free, subscriber-based service for people who use sign language and have videophones, smart phones, or computers with video communication capabilities. For outgoing calls, the subscriber contacts the VRS interpreter, who places the call and serves as an intermediary between the subscriber and a person who uses a standard voice telephone. The interpreter tells the telephone user what the subscriber is signing and signs to the subscriber what the telephone user is saying.

Video remote interpreting (VRI) is a fee-based service that uses video conferencing technology to access an off-site interpreter to provide real-time sign language or oral interpreting services for conversations between hearing people and people who are deaf or have hearing loss. The new regulations give covered entities the choice of using VRI or on-site interpreters in situations where either would be effective. VRI can be especially useful in rural areas where on-site interpreters may be difficult to obtain. Additionally, there may be some cost advantages in using VRI in certain circumstances. However, VRI will not be effective in all circumstances. For example, it will not be effective if the person who needs the interpreter has difficulty seeing the screen (either because of vision loss or because he or she cannot be properly positioned to see the screen, because of an injury or other condition). In these circumstances, an on-site interpreter may be required.

If VRI is chosen, **all** of the following specific performance standards must be met:

- real-time, full-motion video and audio over a dedicated high-speed, wide-bandwidth video connection or wireless connection that delivers high-quality video images that do not produce lags, choppy, blurry, or grainy images, or irregular pauses in communication;
- a sharply delineated image that is large enough to display the interpreter's face, arms, hands, and fingers, and the face, arms, hands, and fingers of the person using sign language, regardless of his or her body position;

Effective Communication

- a clear, audible transmission of voices; and
- adequate staff training to ensure quick set-up and proper operation.

Effective Communication Provisions

Covered entities must provide aids and services when needed to communicate effectively with people who have communication disabilities.

The key to deciding what aid or service is needed to communicate *effectively* is to consider the nature, length, complexity, and context of the communication as well as the person's normal method(s) of communication.

Some easy solutions work in relatively simple and straightforward situations. For example:

- In a lunchroom or restaurant, reading the menu to a person who is blind allows that person to decide what dish to order.
- In a retail setting, pointing to product information or writing notes back and forth to answer simple questions about a product may allow a person who is deaf to decide whether to purchase the product.

Other solutions may be needed where the information being communicated is more extensive or complex. For example:

- In a law firm, providing an accessible electronic copy of a legal document that is being drafted for a client who is blind allows the client to read the draft at home using a computer screen-reading program.
- In a doctor's office, an interpreter generally will be needed for taking the medical history of a patient who uses sign language or for discussing a serious diagnosis and its treatment options.

A person's method(s) of communication are also key. For example, sign language interpreters are effective only for people who use sign language. Other methods of communication, such as those described above, are needed for people who may have lost their hearing later in life and do not use sign language. Similarly, Braille is effective only for people who read Braille. Other methods are needed for people with vision disabilities who do not read Braille, such as providing accessible electronic text documents, forms, etc., that can be accessed by the person's screen reader program.

Covered entities are also required to accept telephone calls placed through TRS and VRS, and staff who answer the telephone must treat relay calls just like other calls.

Many deaf-blind individuals use support service providers (SSPs) to assist them in accessing the world around them. SSPs are not "aids and services" under the ADA. However, they provide mobility, orientation, and informal communication services for deaf-blind individuals and are a critically important link enabling them to independently access the community at large.

The communications assistant will explain how the system works if necessary.

Remember, the purpose of the effective communication rules is to ensure that the person with a communication disability can receive information from, and convey information to, the covered entity.

Companions

In many situations, covered entities communicate with someone other than the person who is receiving their goods or services. For example, school staff usually talk to a parent about a child's progress; hospital staff often talk to a patient's spouse, other relative, or friend about the patient's condition or prognosis. The rules refer to such people as "companions" and require covered entities to provide effective communication for companions who have communication disabilities.

The term "companion" includes any family member, friend, or associate of a person seeking or receiving an entity's goods or services who is an appropriate person with whom the entity should communicate.

Use of Accompanying Adults or Children as Interpreters

Historically, many covered entities have expected a person who uses sign language to bring a family member or friend to interpret for him or her. These people often lacked the impartiality and specialized vocabulary needed to interpret effectively and accurately. It was particularly problematic to use people's children as interpreters.

The ADA places responsibility for providing effective communication, including the use of interpreters, directly on covered entities. They cannot require a person to bring someone to interpret for him or her. A covered entity can rely on a companion to interpret in only two situations.

(1) In an emergency involving an imminent threat to the safety or welfare of an individual or the public, an adult or minor child accompanying a person who uses sign language may be relied upon to interpret or facilitate communication only when a qualified interpreter is not available.

(2) In situations **not** involving an imminent threat, an adult accompanying someone who uses sign language may be relied upon to interpret or facilitate communication when a) the individual requests this, b) the accompanying adult agrees, and c) reliance on the accompanying adult is appropriate under the circumstances. This exception does **not** apply to minor children.

Even under exception (2), covered entities may **not** rely on an accompanying adult to interpret when there is reason to doubt the person's impartiality or effectiveness. For example:

- It would be inappropriate to rely on a companion to interpret who feels conflicted about communicating bad news to the person or has a personal stake in the outcome of a situation.
- When responding to a call alleging spousal abuse, police should never rely on one spouse to interpret for the other spouse.

Who Decides Which Aid or Service Is Needed?

When choosing an aid or service, title II entities are **required** to give primary consideration to the choice of aid or service requested by the person who has a communication disability. The state or local government must honor the person's choice, unless it can demonstrate that another equally effective means of communication is available, or that the use of the means chosen would result in a fundamental alteration or in an undue burden (see limitations below). If the choice expressed by the person with a disability would result in an undue burden or a fundamental alteration, the public entity still has an obligation to provide an alternative aid or service that provides effective communication if one is available.

Covered entities may require reasonable advance notice from people requesting aids or services, based on the length of time needed to acquire the aid or service, but may not impose excessive advance notice requirements. "Walk-in" requests for aids and services must also be honored to the extent possible.

Title III entities are **encouraged** to consult with the person with a disability to discuss what aid or service is appropriate. The goal is to provide an aid or service that will be effective, given the nature of what is being communicated and the person's method of communicating.

Limitations

Covered entities are required to provide aids and services unless doing so would result in an "undue burden," which is defined as significant difficulty or expense. If a particu-

lar aid or service would result in an undue burden, the entity must provide another effective aid or service, if possible, that would not result in an undue burden. Determining what constitutes an undue burden will vary from entity to entity and sometimes from one year to the next. The impact of changing economic conditions on the resources available to an entity may also be taken into consideration in making this determination.

State and local governments: in determining whether a particular aid or service would result in undue financial and administrative burdens, a title II entity should take into consideration the cost of the particular aid or service in light of all resources available to fund the program, service, or activity and the effect on other expenses or operations. The decision that a particular aid or service would result in an undue burden must be

made by a high level official, no lower than a Department head, and must include a written statement of the reasons for reaching that conclusion.

Businesses and nonprofits: in determining whether a particular aid or service would result in an undue burden, a title III entity should take into consideration the nature and cost of the aid or service relative to their size, overall financial resources, and overall expenses. In general, a business or nonprofit with greater resources is expected to do more to ensure effective communication than one with fewer resources. If the

entity has a parent company, the administrative and financial relationship, as well as the size, resources, and expenses of the parent company, would also be considered.

In addition, covered entities are not required to provide any particular aid or service in those rare circumstances where it would fundamentally alter the nature of the goods or services they provide to the public. In the performing arts, for example, slowing down the action on stage in order to describe the action for patrons who are blind or have vision loss may fundamentally alter the nature of a play or dance performance.

Staff Training

A critical and often overlooked component of ensuring success is comprehensive and ongoing staff training. Covered entities may have established good policies, but if front line staff are not aware of them or do not know how to implement them, problems can arise. Covered entities should teach staff about the ADA's requirements for communicating effectively with people who have communication disabilities. Many local disability organizations, including Centers for Independent Living, conduct ADA trainings in their communities. The Department's ADA Information Line can provide local contact information for these organizations.

**For more information
about the ADA,
please visit our website
or call our toll-free number.**

ADA Website: www.ADA.gov

To receive e-mail notifications when new ADA information is available, visit the ADA Website and click on the link near the bottom of the right-hand column.

ADA Information Line

800-514-0301 (Voice) and
800-514-0383 (TTY)

Call M-W, F 9:30 a.m. – 5:30 p.m., Th 12:30 p.m. – 5:30 p.m., (Eastern Time) to speak with an ADA Specialist (calls are confidential) or call 24 hours a day to order publications by mail.

For people with disabilities,
this publication is available
in alternate formats.

Duplication of
this document is encouraged.

January 2014



Local Aging Technology Startup **UZURV** Wins Competition

Sara Link, No Wrong Door

In April, our very own Richmond chapter of [Aging2.0](#), an international organization with a mission to reshape technology in aging, hosted the first event in a global competition. Richmond is the only chapter of Aging 2.0 in the state of Virginia. The local Richmond chapter is “raising the bar,” says the San Francisco-based headquarters team, and has leveraged movement in the community by being housed in the [Greater Richmond Age Wave’s Business for Life work group](#), which includes a diverse network of advocates and leaders.

UZURV won the local global startup competition and will now be headed to San Francisco to represent Virginia in the Global Startup competition. UZURV could use our support with their innovative idea and technology that is already transforming the way we provide transportation. Check out their video below and don’t forget to vote now through Aug 19.

Full article here: <http://www.agewellva.com/trending/help-richmond-represent-in-san-francisco>

[View this email in your browser](#)



Please [Vote for UZURV](#) in Aging 2.0's Global Startup Search!

When the UZURV app first launched, we did not anticipate the overwhelming interest and support we would receive from special needs communities, including those invested in the quality of life and well being of older adults.



In fact, when you think about it, it makes a lot of sense. Riders benefit from the smart economy of Uber and Lyft combined with the reliability and security of having a confirmed reservation. For the older population, this has tremendous benefits. First and foremost is peace of mind. With UZURV riders or their caretakers can choose to request a favorite, trusted driver again and again.

Back in April, UZURV was pleased and honored to win the Richmond Chapter's Aging 2.0 startup search. Now we are in the running for the GLOBAL search, and we need your help...

Public votes account for 50% of each company's score and you can vote ONCE every 24 hrs, now through August 19! Please consider taking a look at our presentation and voting for UZURV as often as possible. And let your friends and family know too! :)

[VOTE HERE!](#)
[View Presentation.](#)

Thanks in advance for your support.

Best,
UZURV

Bon Secours *International Active Aging Week* Event

Sara Link, No Wrong Door

September 26, Richmond - Bon Secours Richmond, as the kickoff event for city-wide celebrations of the International Active Aging Week, will be hosting their 2nd Annual Bon Secours Richmond Successful Aging Forum for seniors and caregivers. This event will feature local celebrity Emily Kimball, "The Aging Adventurer," as the keynote speaker, and will include health and wellness education by Bon Secours physicians, a health and resources expo, a plated three course lunch, a senior friendly exercise class and a day pass to the Lewis Ginter Botanical Gardens. The event will be held at Lewis Ginter Botanical Gardens, 1800 Lakeside Avenue, Henrico, from 10 a.m.-2:30 p.m. Advance registration is required. Attendee tickets are \$10 and include lunch. Sponsorships are available. To register as an attendee or a



sponsor, visit www.bsvaf.org/successfulagingforum or call (804) 287-7700. Email seniorservices@bshsi.org with any questions.

FEMA Newsletter: Heat Safety, Disaster Preparedness

On behalf of Chip Stratton, DARS Emergency Coordination Officer

- Extreme Heat Safety
- Cooling Shelters – for information about cooling shelters in your areas, dial 211.

Individual and Community Preparedness e-Brief |

JULY 21, 2016



IN THIS ISSUE:

- Family Preparedness
- Food Safety Before and After Disasters
- Preparedness for People with Disabilities and Others with Access and Functional Needs

Family Preparedness



Have you heard? National Parents' Day is July 24. In observance of this occasion, we encourage you to take specific actions to prepare your family for emergencies. America's PrepareAthon! and the Ready

Campaign highlight several ways you can prepare for the unexpected.

Some of these actions include:

- **Creating a family emergency communication plan.** Your family may not be together when disaster strikes, so it's important to plan ahead about how you will connect with each other;
- **Building a disaster supply kit.** A disaster supply kit is simply a collection of basic items your household may need in the event of an emergency. You may need to survive on your own after a disaster. This means having your own food, water, and other supplies in sufficient quantity to last for at least 72 hours. Local officials and relief workers will be on the scene after a disaster, but they cannot reach everyone immediately. You could get help in hours or it might take days; and
- **Practicing your emergency response plan.** Making emergency plans is great, but practicing your plan by conducting drills will help your family's response time when seconds count.

Disasters can be stressful for kids. Try to make emergency planning fun for children in your family! Visit ready.gov/kids for exciting games, quizzes, and other resources to help young children and teens understand the importance of being prepared.

Disasters also impact older adults. Visit ready.gov/seniors to learn more about preparing older Americans for the unexpected.

Food Safety Before and After Disasters



Power outages can jeopardize the safety of the food stored in your home refrigerator or freezer. If you lose electricity, do you know how to determine if your food is safe to eat? [The U.S. Department](#)

[of Agriculture](#) (USDA) offers tips to follow before and after a power outage to minimize loss of food and lower the risk of foodborne illness:

- Gather an emergency food supply of shelf-stable food, boxed or canned milk, bottled water, and canned goods;
- Have coolers and frozen gel packs on hand to keep refrigerated food cold if the power goes out longer than four hours;
- Buy an appliance thermometer for the refrigerator and freezer and a food thermometer to help you know if the food has stayed at a safe temperature during an outage;
- Throw out any perishable food items such as meat, poultry, fish, eggs, and leftovers that have been exposed to temperatures above 40 degrees Fahrenheit for more than two hours;
- Use a food thermometer to test the temperature of food – never taste it! You can't rely on appearance and odor to determine whether food is safe; and
- Discard any items in the refrigerator that have come into contact with raw meat juices.

Keep in mind that your refrigerator will keep food cold safely for about four hours if it is unopened. A full freezer will hold the temperature for approximately 48 hours (24 hours if it is half full) if the door remains closed.

Did you know that a flood or fire can also impact the safety of food in your home? Be sure to check out the [FAQs](#) on the USDA website about keeping food safe after these emergencies.

Preparedness for People with Disabilities and Others with



Access and Functional Needs

This year marks the 26th Anniversary of the Americans with Disabilities Act (ADA). Signed into law in 1990 by President George HW Bush, the ADA prohibits discrimination and mandates equal opportunities for people with disabilities in employment, state, and local government services, public accommodations, commercial facilities, transportation, and telecommunication.

If you or someone you know has a disability or access or functional needs, be sure to take additional steps to stay safe, healthy, mobile, and independent during a disaster.

Find out about assistance programs that may be available in your community and register in advance with your local office of emergency services, non-profit groups, and health departments.

Stay mobile and independent by including items in your disaster supply kit that meet your needs such as:

- Extra eyeglasses and hearing aids;
- Medical prescriptions;
- Batteries and chargers for assistance devices; and
- Written descriptions of service needs.

Looking for more ways to plan for people with disabilities and others with access and functional needs? Check out this video from the *Ready* Campaign and the Ad Council. The video is for all communities and shows people with disabilities taking charge to prepare themselves and their families for emergencies. The video provides equal access and includes open captioning, a certified deaf interpreter, and audio description for viewers who are blind or have low vision.

Disclaimer: The reader recognizes that the federal government provides links and informational data on various disaster preparedness resources and events and does not endorse any non-federal events, entities, organizations, services or products. Please let us know about other events and services for individual and community preparedness that could be included in future newsletters by contacting citizencorps@fema.dhs.gov



UPDATES

July 21, 2016

Staying Safe in the Summer Heat



Author: HHS Office of the Assistant Secretary for Preparedness and Response

Published Date: 7/5/2016 3:57:00 PM

For most parts of the country, summer brings lots of heat. Over the last few weeks, just about everybody has been feeling the heat. Cities and towns from across the country have been coping with heat advisories and trying to find ways to stay cool.

Some people handle the heat pretty well. They just need to remember to take it slow, protect themselves from sun exposure, drink plenty of fluids, and do their best to stay cool. But other people - especially [young children](#), [older adults](#), [athletes](#), [people with low incomes](#), [outdoor workers](#), and



[people with certain medical conditions](#) - are at greater risk and need to be even more careful.

By knowing how to prevent heat-related illnesses, spot the warning signs, and being ready and willing to act, you could protect your own health or even help save someone's life.

Prevention promotes summer fun

Preventing heat-related illnesses is the best way to protect yourself and those you care for. Here are some things you can do to stay healthy when temperatures rise:

- Spend time in locations with air-conditioning when possible.
- Drink plenty of fluids. Don't wait until you are thirsty. Good choices are water and diluted sport electrolyte drinks (1 part sport drink to 2 parts water) unless told otherwise by a doctor.
- Choose lightweight, light-colored, loose-fitting clothing.
- Limit outdoor activity to morning and evening hours.
- Never leave a child or a pet in a parked car - even if the windows are open.

To learn more, **[click here.](#)**



FRIDAY UPDATES

NASUAD

July 22, 2016

In This Issue

***NASUAD: NASUAD State Long-Term Care Ombudsman Report**

***NASUAD: I&R Center Webinar: Key Guardianship Concepts for I&R/A Specialists**

***NASUAD: Registration for the 2016 HCBS Conference is Open!**

***HCBS Clearinghouse: CHCS State Trends in Delivery of MLTSS**

***CMS: LTSS Open Door Forum**

***CMS: Program Integrity Report**

***CMS: Technical Assistance Mailbox for Parity Final Rule**

From NASUAD

NASUAD State Long-Term Care Ombudsman Program Report

The National Association of States United for Aging and Disabilities (NASUAD) published a new report that offers data from the Long-Term Care Ombudsman Program organizational structure survey that was conducted in early 2015. This survey was conducted through one-on-one telephone interviews with each State Long-Term Care Ombudsman. Information for the survey focused on four basic topic areas: Office of the State Long-Term Care Ombudsman, management of regional/ district/ local program offices, volunteers, and comments regarding current structure. The report includes a standard organizational structure chart and a flow structure with more detailed information regarding roles and responsibilities for all fifty states and the District of Columbia.

[Click here](#) to view the report.

NASUAD I&R Center Webinar: Guardianship - Key Concepts for I&R/A Specialists

The National I&R Support Center will host a webinar



[*Justice in Aging:
Medicare and Medicaid
Fact Sheets for LGBT
Beneficiaries](#)

[*LEAD: Review of Final
Rules Implementing
WIOA](#)

[*NADRC: Webinar: Legal
Planning Essentials for
Persons with Dementia](#)

[*NQF: Webinar: HCBS
Committee Meeting](#)

[*Oral Health America:
Webinar: Barriers to Food
Access](#)

[*UNF and KF: nTIDE Jobs
Report](#)

[*Jobs & Internships](#)

[*Funding Opportunities](#)

[*Friday Updates Archive](#)



[Check out NASUAD iQ!](#)

that will train attendees on the basics of guardianship. It is a key but complicated issue that aging and disability I&R/A specialists address in their work with consumers, family members, and caregivers. The webinar is scheduled for **Thursday, August 4, 2016, from 3:00 p.m. to 4:00 p.m. ET.**

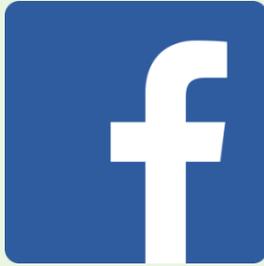
The webinar will cover the process of becoming a guardian, responsibilities of the guardian, the difference between guardianship and powers of attorney, and a discussion on when a guardianship may be necessary. To help I&R/A specialists gain more insight into guardianship issues, our presenter, Kim Grier, Adult Guardianship Specialist, Georgia Department of Human Services, will share her expertise on this topic. **Pre-registration is required for this webinar.** Space is limited so make sure to register as soon as possible.

[Click here](#) to view details and register.

Early Bird Rate Ends July 31st! Register Today for the 2016 HCBS Conference!

Join us for the National Home and Community Based Services (HCBS) Conference held in Washington, DC, August 29 - September 1. The Conference offers a unique blend of policy, program, and practice issues for professionals interested in home and community based services for individuals of all abilities and in all settings. Quickly becoming the "go-to" conference for learning in the expanding field of HCBS and long-term services and supports, the Conference allows states to share best practices, present unique partnerships, and recognize the work of their peers.

The National HCBS Conference will include federal, state, and local policymakers and those who



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administer, manage, and deliver waiver and other HCBS programs. The Conference always sees a strong presence from U.S. Health and Human Services ranging from the Administration for Community Living including (AoA, Office of Disability, and AIDD) to CMS, HRSA, SAMHSA, Office of Developmental Disabilities, and other federal agencies.

[Click here](#) to view details and register.

HCBS Clearinghouse E-Clips

This section of Friday Update highlights reports that have been added to the HCBS Clearinghouse within the past week. Visit www.nasuad.org/hcbs for more information.

State Trends in the Delivery of Medicaid Long-Term Services and Supports

On Wednesday, July 20, 2016, the Center for Health Care Strategies, Inc. (CHCS) published a new brief, "State Trends in the Delivery of Medicaid Long-Term Services and Supports." With support from The SCAN Foundation, seven states (Arizona, California, Kansas, Minnesota, New Jersey, Tennessee, and Texas) were selected to provide insights into current trends in both managed long-term services and supports (MLTSS) program refinement and long term services and supports (LTSS) system reform. The report is intended to provide other states with strategies to consider for improving the care delivery for their own beneficiaries and providers.

[Click here](#) to view the report.

From the Administration



Centers for Medicare & Medicaid Services

Long-Term Services and Supports Open Door Forum

The Centers for Medicare & Medicaid Services (CMS) is holding an upcoming long-term services and supports (LTSS) Open Door Forum that will focus on managed long-term services and supports (MLTSS). The integration of LTSS and associated beneficiary protections into the Medicaid managed care regulation will be discussed. The open door forums are hosted to provide an opportunity for live dialogue and foster strong collaboration between CMS and the stakeholder community at large. These forums are intended for all stakeholders who interact with CMS or work with consumers who rely on services that CMS provides. The forum is scheduled for **Tuesday, July 26, 2016, from 2:00 p.m. to 3:00 p.m. ET.**

[Click here](#) for more information about the forum.

Program Integrity Report to Congress

On Wednesday, July 20, 2016, the Center for Program Integrity (CPI) in the Centers for Medicare & Medicaid Services (CMS) released their program integrity report. The report highlights CMS achievements in reducing potentially fraudulent and improper payments. Total savings from the program's efforts were nearly \$42 billion over the two-year period covered by the report. Program integrity efforts have included provider enrollment and screening standards, enforcement authorities, and advanced analytics such as predictive modeling. In addition, CMS collaborates with various partners



such as law enforcement, state Medicaid agencies, and contractors to implement integrity measures. [Click here](#) to view the report.

Technical Assistance Mailbox for Parity Final Rule

The Centers for Medicare & Medicaid Services (CMS) has created a mailbox for stakeholders to submit questions regarding the Medicaid and Children's Health Insurance Program (CHIP) mental health parity final rule. The rule was finalized on March 29, 2016 with the intent of strengthening access to mental health and substance use services for people with Medicaid or CHIP, while aligning with protections already required of health plans in the commercial market.

[Click here](#) to view the final rule.

Technical assistance will begin this fall and continue through 2018. Questions and concerns can be submitted at any time to parity@cms.hhs.gov.

From Other Organizations

Justice in Aging

Medicare and Medicaid Fact Sheets for LGBT Beneficiaries

Justice in Aging published three new fact sheets in collaboration with SAGE (Services & Advocacy for Gay, Lesbian, Bisexual, & Transgender Elders), SHIP National Network (State Health Insurance Assistance Programs), and the Administration for Community Living (ACL). The new fact sheets were designed to help LGBT consumers learn how recent changes in Medicare and Medicaid may affect them. The



Supreme Court's legalization of same sex marriage in all states changed how both programs evaluate the eligibility of same sex spouses. Additionally, Medicare has begun covering gender reassignment surgery and issued new rules that protect transgender older adults from sex discrimination in health care settings.

[Click here](#) to view the publications.

LEAD Center

Webinar: Implementing the WIOA Final Rule from a Disability Perspective

The LEAD Center is hosting a webinar to inform participants about provisions in Title I of the Final Rule to implement the Workforce Innovation and Opportunity Act (WIOA) that creates opportunities for youth and adults with disabilities. The session will review available resources that support implementation. In addition, leadership from the Department of Labor's Employment and Training Administration (ETA) and the Office of Disability Employment Policy (ODEP), and from the National Association of State Workforce Agencies (NASWA) and the National Association of Workforce Development Professionals (NAWDP) will talk about the implementation from a disability perspective. The session is scheduled for **Thursday, July 28, 2016, from 3:00 p.m. to 4:00 p.m. ET.**

[Click here](#) to register.

The National Academies of Sciences, Engineering, and Medicine



Meeting the Dietary Needs of Older Adults

The National Academies of Sciences, Engineering, and Medicine published a report that includes discussions and presentations from a previously held Food and Nutrition Board workshop. "Meeting the Dietary Needs of Older Adults" convened last fall and was designed to examine factors in the physical, social, and cultural environment that affect the ability of older adults to meet their daily dietary needs.

[Click here](#) to view the report.

National Quality Forum

Webinar: HCBS Committee Meeting

The National Quality Forum (NQF) published the last interim report, "Addressing Performance Measure Gaps in Home and Community-Based Services to Support Community Living: Priorities for Measure Development." It details the findings and milestones in the home and community-based services (HCBS) quality project performed under contract with the U.S. Department of Health and Human Services. The HCBS Committee will host a meeting for members and the public on **Thursday, August 4, 2016, from 12:00 p.m. to 2:00 pm. ET.**

[Click here](#) to register.

Oral Health America

Webinar: Barriers to Food Access: Experiences by Older Adults

The Wisdom Tooth Project, an Oral Health America



Program, hosts a monthly webinar series to provide a forum for organizations to share information about initiatives and activities related to older adults. The upcoming session, "Barriers to Food Access: Experiences by Older Adults," will discuss the issue of food insecurity as it relates to older adults. The presentation will cover topics such as causes of food insecurity, preparing meals, nutrition, barriers to food access programs, and measurement issues. The webinar is scheduled for **Tuesday, July 26, 2016 from 2:00 p.m. to 3:00 p.m. ET.**

[Click here](#) to register.

University of New Hampshire, Kessler Foundation, Association of University Centers on Disabilities

Webinar: nTIDE Lunch and Learn

The Employment Policy & Measurement Rehabilitation Research and Training Center (EPM-RRTC) at the University of New Hampshire, in partnership with Kessler Foundation and the Association of University Centers on Disabilities (AUCD), hosts a monthly webinar on the first Friday of every month. There will be a live broadcast via Zoom webinar to share the results of the latest nTIDE findings, based upon the Bureau of Labor statistics jobs report. Additionally, the monthly webinars will feature news and updates from the field of Disability Employment and a discussion from an invited panelist on current disability related findings and events. The next nTIDE webinar is scheduled for **Friday, August 5, 2016 at 12:00 pm ET.**

[Click here](#) to register.



Jobs & Internships

Crater District Area Agency on Aging Seeks Executive Director

Crater District Area Agency on Aging (CDAAA) in Petersburg, Virginia is seeking an Executive Director that provides leadership and vision in planning services, coordinating community programs, developing new initiatives, and fundraising. The Director must work effectively with the Board of Directors, elected officials, local governments, Advisory Council, advocacy organizations, agency staff, volunteers, and older individuals and families receiving services. In addition, the Director is responsible for administration, personnel, and financial management including the monitoring of programs and subcontractors.

The successful candidate will be expected to have a Bachelor's degree from an accredited college or university with a major in business or public administration, gerontology, social work or a closely related field. A Master's degree is preferred. Strong written and oral communication skills and public relations skills are also critical. Candidates should have a minimum of 5 years of progressively responsible administrative or supervisory experience in either a public or private agency. Applications are due by **Friday, July 29, 2016**.

[Click here](#) to view the posting.

TMG seeks Long-Term Care Screening Specialists

TMG is seeking three Screening Specialists in Wisconsin to be responsible for completing the Adult



Long-Term Care Functional Screens (LTC-FS) for participants of the IRIS program. This includes completing annual re-screens and any change in condition screens. The Screening Specialist will use the Adult LTC-FS tool for IRIS participants as required and outlined in the Wisconsin Adult LTC-FS Instructions. This includes completing collateral contacts to verify screen findings with IRIS Consultants, MAPC agencies and day programs, and verifying diagnosis information with physicians and or SSA. Screening Specialists are also responsible for tracking screening requests electronically and participating in the development, process improvement, and ongoing quality management of the services provided. Applications are due by **Friday, July 29, 2016.**

[Click here](#) to view the posting for Chippewa, Price , Rusk, or Taylor Counties

[Click here](#) to view the posting for Milwaukee, Ozaukee, or Washington Counties

[Click here](#) to view the posting for Ashland, Price, or Sawyer Counties

Mid-America Regional Council Seeks Director of Aging and Adult Services

The Mid-America Regional Council (MARC) in Kansas City, Missouri is seeking a Director of Aging and Adult Services. The director will play a key role in helping to advance the vision that all adults in the Kansas City region have access to resources and networks to support a high quality of life. The director will play a visible, active role in the broader community and state initiatives to strengthen and



develop new services and systems, and will provide central leadership in internal efforts to develop and deploy a strategy for assessing and reorganizing services to older adults. At the same time, the director will be responsible for all aspects of planning and managing the effectiveness and statutory compliance of ongoing programs. In addition, MARC's Aging and Adult Services Department will support the Communities for All Ages initiative in cooperation with MARC's Community Development Department, which coordinates a variety of related local and regional planning efforts. Applications should be submitted by **Friday, August 19, 2016**.

[Click here](#) to view the job announcement.

Funding Opportunities

Partnerships in Employment Systems Change

The Administration for Community Living (ACL) released the Partnerships in Employment Systems Change grant. The purpose of the funding opportunity is to encourage state partnerships and systems change efforts that will contribute to the 1) the development of policies that support competitive employment in integrated settings as the first and desired outcome for youth and young adults with developmental disabilities including intellectual disabilities; 2) the removal of systemic barriers to competitive employment in integrated settings; 3) the implementation of strategies and best practices that improve employment outcomes for youth with intellectual and developmental disabilities; and 4) enhanced statewide collaborations that can facilitate the transition process from secondary to post-



secondary school, or other pre-vocational settings, to complete employment in integrated settings. Eligible applicants include state and local governments, public and private institutions of higher education, independent school districts, nonprofit organizations, and public housing authorities. All applications are due by **Tuesday, July 26, 2016 at 11:59 p.m. ET.**

[Click here](#) to view the full posting.

Building the Business Capacity of Community-Based Aging and Disability Networks for Integrated Services Partnerships

The Administration for Community Living (ACL) announced two new funding opportunities that seek to expand the readiness of community-based aging and disability organizations (CBO) for contracting with integrated care entities, and prepare state agencies and CBOs to be active stakeholders and partners in the development and implementation of integrated care systems.

The Learning Collaboratives for Advanced Business Acumen Skills initiative is intended to achieve the following tasks: organize and conduct three to five topically-based action learning collaboratives to address issues such as continuous quality improvement, infrastructure and technology, generating and maintaining volume, data pooling, and more; provide targeted technical assistance to networks of CBOs; and create knowledge and capture insights through these collaboratives to incorporate into future curriculum for national dissemination.

The purpose of the Business Acumen for Disability Organizations initiative is to develop baseline



knowledge about the content and infrastructure needs of CBOs through surveys and feasibility studies; and utilize a learning collaborative model to provide targeted technical assistance to up to 15 state coalitions of CBOs that seek to build their business capacity to contract with health care entities (e.g. hospitals, health systems, accountable care organizations, managed/integrated care plans).

The original closing date for both applications was Monday, July 11, 2016. ACL extended the closing date to **11:59 p.m. ET on Thursday, July 28, 2016, for both applications.**

[Click here](#) to view the announcements.

Disability Employment Initiative

The Department of Labor Employment and Training Administrated announced a new grant opportunity, the Round VII of the Disability Employment Initiative (DEI). The purpose of the program is to provide funding to expand the capacity of American Job Centers (AJCs) to improve the employment outcomes of three population focus areas: 1) adults with visible and non-visible disabilities, including those who have acquired disabilities in adulthood; 2) youth with visible and non-visible disabilities, including those who have chronic health conditions; and 3) individuals (ages 14 and older) with significant disabilities. The DEI plans to accomplish this by increasing participation in career pathways systems and existing programs in the public workforce system in partnership with vocational rehabilitation, community colleges and other education, human service, and business partners. Capitalizing on the flexibility that the career



pathways model provides to use innovative service delivery strategies, grantees will use the award to support job-driven approaches in their pre-existing career pathway systems and programs. This will further equip individuals with disabilities with the skills, competencies, and credentials necessary to help them obtain in-demand jobs, increase earnings, and advance their careers. The Department intends to award at least one cooperative agreement in each of three population focus areas. Applications are due by **Monday, August 1, 2016 at 4:00 p.m. ET.**

[Click here](#) to view more information.

New York Seeks HCBS Contractor

The New York State's Department of Health (DOH), Office of Health Insurance Programs, Division of Long Term Care has issued a request for proposals to hire a contractor to help the State implement their [Statewide Transition Plan](#) required under the federal [HCBS Waiver Rule](#) (CMS 2249-F/CMS 2296-F). The contractor will work to ensure that settings across all agencies serving individuals with disabilities are compliant with the new rule. This is a three-year contract to ensure compliance across the State by March 17, 2019. The contractor will assist state personnel in assessing and remediating residential and non-residential settings to ensure that they meet the requirements of the HCBS rule where Medicaid-funded home and community based services are provided under the authorities of 1915(c), 1915(k) and the 1115 waiver demonstration.

Activities will include: 1) Site visits to assess compliance; implement corrective actions plans,



when necessary; and ensure that compliance has been achieved; 2) Participant and stakeholder interviews to ensure that individual's receiving Medicaid-funded HCBS are receiving person-centered care and that any modifications to settings are appropriately individualized; 3) Data collection and reporting to ensure that the State is carrying out its Statewide Transition Plan; 4) Identifying sites that will require an additional federal review called "heightened scrutiny" in order to be allowed as sites for participants in Medicaid-funded HCBS to live and/or receive services (sites that are presumed institutional); 5) Compiling evidence packages that include public comment on all sites presumed to be institutional under the rule to show that they have the characteristics and qualities of an appropriate home and community based setting; and 6) Establishing a monitoring plan and tools using the State's existing surveillance schedules and staff to ensure ongoing compliance. Submissions are due by **Tuesday, August 2, 2016 at 5:00 p.m. ET.**

[Click here](#) to submit a proposal.

Native American Independent Living Demonstration Project

The Administration for Community Living (ACL), Independent Living Administration (ILA), announced a new funding opportunity that intends to 1) gain an increased understanding of service needs of Native Americans with disabilities living in Indian Country; 2) improve cultural competence in regards to the needs of specific tribal organizations targeted by current (Centers for Independent Living) CIL grantees; and 3) capture lessons learned



and best practices for outreach and service delivery for Native Americans with disabilities, a traditionally under-served population. To achieve these goals, ACL is seeking applications from existing CIL grantees to develop capacity and demonstrate how to provide the five CIL core services in Indian Country. The grant application is due by **Tuesday, August 16, 2016 at 11:59 p.m. ET.**

[Click here](#) to view the announcement.

Community-Based Palliative Care Delivery for Adult Patients with Advanced Illnesses and their Caregivers

The Patient Centered Outcomes Research Institute (PCORI) posted a notice of an upcoming funding opportunity to: a) support care planning for adult patients with advanced illnesses over time that is consistent with the goals and preferences of adult patients and their caregivers, and b) support the delivery of coordinated, community-based palliative care that effectively implements those care plans. PCORI seeks to fund multiple, large, multi-site, community-based comparative effectiveness research (CER) studies to generate evidence in support of this goal. The funding announcement will be released in August 2016. The deadline for Letters of Intent (LOI) is **Wednesday, September 14, 2016.**

[Click here](#) to view more information.

Friday Update Archive

Did you miss a previous issue?
Check out [past Friday Updates](#).

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DARS Independent Living Weekly Newsletter

Marcia DuBois, Livable Communities Coordinator



INDEPENDENT LIVING Weekly Newsletter

COMMUNITY BASED SERVICES DIVISION

James A. Rothrock, Commissioner

ISSUE 163

July 26, 2016

In this issue...

- [An IL Conversation...Youth It Up!](#)
- [CIL-NET Presents...Leaders Without Limits: A Community Leadership Academy](#)
- [Virginia Board for People with Disabilities News](#)
- [Changes Coming To The I/DD Waiver Program](#)
- [It's Time to Celebrate at the HCBS Conference](#)
- [Join the SILC-NET & CIL-NET for Conducting Successful Virtual Meetings: Getting Started with Technology Considerations](#)
- [A First Ever Joint DD Council and State IL Council Members Meeting](#)
- [Financial Management for CILs Online Course](#)
- [Dialogue on Diversity, Disability, and Civil Rights in Kansas City](#)
- [VDA Weekly E-Mailing](#)

An IL Conversation...Youth It Up!



CIL-NET Presents...an IL Conversation via Teleconference

Youth It Up!

Presented by

Cassie Wick, Montana Independent Living Project
June Hermanson, Montana Youth Leadership Forum

Kimberly Tissot, Able South Carolina

August 18, 2016

3:00 - 4:30 PM Eastern



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Join us to learn and add to the conversation with your experiences about:

- Creative youth funding approaches
- Examples of how to access WIOA/VR Funding
- Youth Programming ideas
- Lessons learned

Join the conversation! There is NO Registration Fee for this Teleconference. This is not a toll free call and your regular long distance charges will apply. Please call from a quiet location to join the discussion, or just listen in.

For more information, including how to access the training, click [here](#).

Mary Olson

APRIL Director of Training and Technical Assistance

APRIL and the IL-NET

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Missoula, MT 59801

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[Return to Top](#)

CIL-NET Presents...Leaders Without Limits: A Community Leadership Academy



Leaders Without Limits: A Community Leadership Academy

Train-the-Trainer

September 19 - 21, 2016

Houston, Texas

[No Registration Fee Required!](#)

Target Audience



Executive Directors, program managers, and other staff, and board members of centers for independent living and statewide independent living councils interested in preparing consumers, staff, board members, or themselves for leadership roles will most benefit from this training.

Learning Objectives

You will learn:

- The Leaders Without Limits model of preparing individuals to be community leaders.
- The benefits and advantages of implementing a Community Leadership Academy within your CIL.
- Steps to take to create, fund, and implement a Community Leadership Academy within a CIL.
- How to find and recruit participants.
- How this model can expand your CIL's own leadership capacity.
- Essential skills required for participation on government councils and committees, local nonprofit boards of directors, and other opportunities for leadership.
- How to identify a natural leader vs an appointed authority.
- The difference between activists and community leaders.
- What makes a good leader.
- Opportunities for community interaction and impact.
- How to elevate the CIL's standing in the community as a place to prepare community leaders.
- How to make IL Philosophy and total accessibility part of the community decision-making process.

Location: Houston, Texas

For more information including agenda and accommodations, click [here](#).

[Return to Top](#)

Virginia Board for People with Disabilities News

Please click [here](#) to access **VBPD News** including the following topics:

- Federal Panels Seeks Input on Autism
- Partners in Policymaking and YLF graduates to reconnect
- ABLE Accounts are coming to Virginia!
- VBPD Welcomes new Board Members

[Return to Top](#)



Changes Coming To The I/DD Waiver Program



The Arc of Virginia is sending this communication to provide Virginians with developmental disabilities and their families with a comprehensive summary of proposed changes to the Intellectual Disability (ID) and Development Disability (DD) Waiver programs (referred to as “I/DD Waiver Redesign”). Our goal was to make this summary as family-friendly as possible, but there are many changes being proposed and a few are somewhat complicated. For this reason, we are traveling around the state to host local and regional presentations on the DD Waiver Redesign. We will review the information below, answer questions and receive your feedback. We will also have several sessions on I/DD Waiver Redesign at the upcoming Convention (Aug 8-10 in Williamsburg-click [here](#) for information).

If you are currently on the waiting list for -an Intellectual Disability (ID) Waiver or -Developmental Disability (DD) Waiver, or- are receiving services offered through the ID, DD or DS Waiver programs, we recommend that you set aside time to review the changes that are being proposed. This will help you advocate for the services you need in the new system. We also suggest that you share this communication with others in your network so that they have access to information about the new DD Waiver program too.

While this update is MUCH lengthier than what we typically send, we felt it was important that we notify affected individuals and families about proposed changes to the I/DD Waiver program. We hope you find it helpful to have all of the information in one place. We suggest that you save this email and use it as a reference document that you can access when needed.

In this summary you will find:

- Background on I/DD Waiver Redesign
 - What is I/DD Waiver Redesign?
 - Why are the I/DD Waivers being redesigned?
 - When is Waiver Redesign going to be implemented?

- Changes in the New DD Waiver
 - New Names for the ID,DD, DS Waivers
 - New Services and Emphasis on Integrated Supports
 - Changes in the Eligibility Determination Process



- Changes in Waiting List Management and Slot Allocation
- The Supports Intensity Scale
- New Reimbursement Rates
- Where Can You Learn More?
 - I/DD Waiver Redesign Information Sessions
 - The Arc of Virginia State Convention

To view the full summary, background information, proposed changes, rates, and the presentation schedule, please click [here](#).

Click [here](#) for Waiver Redesign information which includes the following:

1. I/DD Waiver Redesign Training
2. Welcome Lucy Cantrell
3. Inclusive Education Advocacy Update
4. Dental Health Training
5. Register for The Arc of Virginia State
6. Waiver Redesign Training Schedule

[Return to Top](#)

It's Time to Celebrate at the HCBS Conference



Join us for the National Home and Community Based Services (HCBS) Conference held in Washington, DC, August 29 - September 1.

A Time to Dance and Celebrate with Colleagues

We're gearing up for another exciting **HCBS Conference** – please join us!



The National HCBS Conference will include federal, state, and local policymakers and those who administer, manage, and deliver services from these important programs. The Conference always sees a strong presence from U.S. Health and Human Services ranging from CMS, HRSA, SAMHSA, as well as the Administration for Community Living, which now includes the Administration on Aging, the Administration on Disabilities, the Independent Living Administration, the Center for Integrated Programs and the National **Institute on Disability, Independent Living, and Rehabilitation Research**.

The HCBS Conference highlights the work organizations have done to expand and improve services laid out in these programs and to increase the quality of life for older adults and people with disabilities.

Our hard work deserves a bit of celebration! On **Tuesday, August 30th**, the conference will host a reception and dance party honoring all of the work that has been done to serve the long-term services and supports community.

Don't forget: The Early Bird Deadline ends July 31st!

Click [here](#) to learn more about the conference, registration, and sponsorship!

[Return to Top](#)

Join the SILC-NET & CIL-NET for Conducting Successful Virtual Meetings: Getting Started with Technology Considerations

SILC-NET & CIL-NET Presents...A National Webinar

Conducting Successful Virtual Meetings: Getting Started with Technology Considerations

August 10, 2016; 3:00 p.m. Eastern

. Attending in-person meetings can be a real challenge for some people with disabilities. Whether the issue is access or distance, technology can be an effective solution to boost participation and even recruitment for your CIL Board or SILC Council.



So how do you do it? Join us in August to learn how two SILCs have successfully enabled SILC members to participate virtually. If you have concerns about cost, web access, and tech savvy - they've been there. You'll learn what to expect, common pitfalls and solutions, and what you'll need to get started in your state.

Registration Fee: \$75.00. Fee is per site (connection) and does not apply per participant; registrants are encouraged to gather as many individuals as desired to participate by webinar or telephone.

Target Audience

SILC staff and Council members and CIL staff and board members interested in learning about effective, accessible, and affordable technology for conducting virtual meetings

Learning Objectives

After completing this webinar, you will have tools and resources that will enable you to:

- Explain the concept of virtual meetings including benefits and challenges.
- Identify platform, technology, and equipment options and features that best fit your organization's needs and improve the conference room virtual meeting experience.
- Identify strategies to overcome common pitfalls with conducting virtual meetings.
- Describe an informed decision-making process and strategies for implementing virtual meetings through case studies and examples.

Click [here](#) for registration and more information.

[Return to Top](#)

First Ever Joint DD Council and State IL Council Members Meeting



July 14, 2016



The NIDILRR-funded Great Lakes ADA Regional Center will host an audio conference: Americans with Disabilities Act (ADA) Anniversary Update: Celebrating 26 Years on July 19th, 2-3:30pm ET. Representatives from the U.S. Department of Justice, Civil Rights Division, and the Equal Employment Opportunity Commission will provide updates on current enforcement activities as well as new technical assistance and training activities from their agencies. The session will include a question and answer period. Registration is free and required and continuing education credits are available.

Learn more about the ADA National Network and the ten regional centers that provide information, guidance and training on the ADA. This information is tailored to meet the needs of business, government and individuals at local, regional and national levels.

[Return to Top](#)

Financial Management for CILs Online Course

COURSE DATES: September 12-30, 2016

REGISTRATION DEADLINE: August 26, 2016

PURPOSE: This three-week course is designed to instruct centers for independent living in the critical importance and "know how" of sound fiscal management. .

COURSE LEVEL: Introductory to Intermediate

COURSE FEES: The course fee is \$100 per participant.

TARGET AUDIENCE: CIL executives, financial managers, and other managers, as well as board members. The course may also be of benefit to SILC staff and members.

COURSE OBJECTIVES: Through this course you will learn:

- key components of sound fiscal management
- appropriate roles for board and staff financial oversight
- how to develop budgets
- how to understand fiscal reports and use them in effective program management
- how to identify fiscal risk management controls



FORMAT: Participants will read assignments in the online course manual, complete daily exercises, review supplemental materials through the course website, and interact with the instructors and other students in an online discussion forum. Students will have an opportunity to learn about and share best practices. Students can ask and receive responses to their questions about sound financial management from the instructors and from their peers. Please plan on dedicating one to two hours per day for the class.

INSTRUCTORS: Maria Stepanyan and Paula McElwee.

For more information and a full catalog of courses, click [here](#).

[Return to Top](#)

Dialogue on Diversity, Disability, and Civil Rights in Kansas City



Blog: A Dialogue on Diversity, Disability, and Civil Rights in Kansas City By Aaron Bishop, Commissioner, Administration on Disabilities

In my time at ACL, I have been a part of many conversations about disability and diversity. Usually, these involve disability advocates talking to each other about the need for more diverse voices in our movement and greater cultural and linguistic competency in our programs. These conversations, and the actions they inspire, make the disability community stronger. They must continue, but they are just one part of a larger picture.

Last week I had the privilege of participating in a community conversation in Kansas City, Mo. that was unique.



The group of more than 20 local leaders was convened by ACL, Congressman Emanuel Cleaver, and the Institute for Human Development (IHD) at the University of Missouri-Kansas City. It was memorable because it built on these conversations within the disability community to consider how we could accomplish more by collaborating with local leaders working on other civil and human rights issues.

Congressman Cleaver kicked off the event by reminding us that diversity has made our country stronger and more beautiful. He spoke about the contributions of the

Mormon community as an example of this diversity. He also spoke about the contributions of African Americans with disabilities as an example of the diverse subgroups that exist within every group. Congressman Cleaver emphasized the importance of viewing our civil rights work as connected, speaking of disability rights in the context of Dr. Martin Luther King's fight for civil rights and quoting Muhammad Ali, who once said, "Everyone needs someone in their corner."

To read about themes and lessons from the Kansas City dialogue, click [here](#).

[Return to Top](#)

VDA Weekly E-Mailing

Click [here](#) for the latest issues of the VDA Weekly E-mailing.

[Return to Top](#)

Note: The web links in this document may change over time. DARS does not attempt to refresh the links once the week has passed.



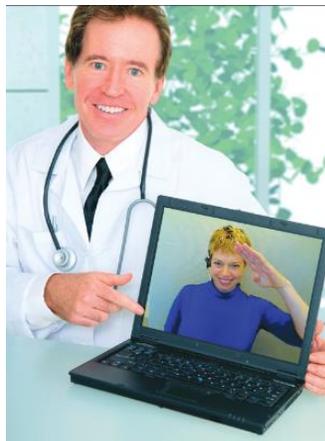
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**VA Hospital Research & Educational Foundation:
Improving the Healthcare Experience for Deaf & Hard of Hearing
Patients and other upcoming events**

Cecily Slasor, Administrative Assistant



Upcoming Events



**Improving the Healthcare Experience for
Deaf & Hard of Hearing Patients**

Date

August 10, 2016

Time

9:00 AM - 12:00 PM

Location

**The Virginia Hospital & Healthcare Association
4200 Innslake Drive Glen Allen, VA 23060**

This seminar will educate hospital teams and those in the healthcare community on the new Guidance Document surrounding deaf and hard of hearing patients and their families. Our presenters will help you understand the challenges that these patients face and how to appropriately address these challenges. You will also learn about advanced technology that can be used to enhance communication with deaf and hard of hearing patients to improve the quality of



Includes: Yellow Belt Manual, Lean Simulations, Yellow Belt Certification, CE Credit, breakfast & lunch each day of training.

[Register](#)



Virginia
Readmissions
Conference
Sept. 8, 2016

Virginia Readmissions Conference

Date

September 8, 2016

Time

9:00 AM - 3:00 PM

Location

**Virginia Commonwealth University
Student Commons - Richmond Salons**

This conference is designed for hospitals & health systems. The main objective of this conference is to bring Virginia hospital readmission reduction leaders and champions together in order to collectively embrace and commit to a new phase of readmissions reduction work. We encourage you to bring a team from your hospital. Our content experts will review hospital strategies for effectively engaging post-acute and community based partners in readmissions reduction efforts. Attendees will hear success stories and lessons learned from other hospitals who have already begun to work with post-acute and community based partners and with high utilizer patient populations. By the end of the conference, teams will develop action plans for implementing new strategies to work effectively with post-acute and community based partners and with high



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utilizer patient populations.

\$250 per person

* Includes CE credits

[Register](#)



Date

November 2-3, 2016

Location

The Homestead Resort
Hot Springs, VA

Continuing tradition, our membership will gather for the 90th Fall Meeting at the Homestead Resort in beautiful Hot Springs, VA for an opportunity to learn, share, and network. This year's program will focus on the emerging field of population health and is titled, Following our Mission: Creating a Healthier Virginia by 2020. National experts will deliver cutting edge education and identify key strategies for hospitals & health systems to help make Virginia a healthier place to live. Each Fall, more than 300 of our members attend this event. Audience includes: VHHA member hospital and health system CEOs, senior executives, physician leaders, trustees and other healthcare professionals.



* See event page for pricing details

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Interprofessional leadership development is vital in healthcare. Recognizing this reality, the Medical Society of Virginia (MSV), Virginia Hospital & Healthcare Association (VHHA) and the Virginia Nurses Foundation (VNF) have partnered to create a new learning institute designed to teach healthcare teams strategies to better serve their communities, lead their colleagues and improve as effective leaders. The program, SYNC -Transforming Healthcare Leadership, engages emerging leaders in collaborative leadership development. SYNC is open to health care teams with up to five members, which must include a physician, a registered nurse and other clinical leaders. Program instruction will focus on developing collaborative teamwork and leadership capabilities among participants through four in-person training sessions, online learning and discussions and Capstone Project completion. Program topics and expectations: The changing landscape of 21st century healthcare & its implications for health care leadership & strategy Why interprofessional collaboration is an essential strategic response to the new health care Applying design thinking as an important tool in enhancing collaborative leadership & strategy Leveraging personal leadership fundamentals as a starting point for effective collaboration Employing these concepts in the development of a practical Capstone Project

LEARNING SESSIONS:

Participating teams commit to attend five in-person sessions in Richmond. Each session is scheduled for a Friday (8 a.m.- 6 p.m.).

Session 1: September 16, 2016

Session 2: October 7, 2016



DIVISION FOR THE AGING
VIRGINIA DEPARTMENT FOR AGING
AND REHABILITATIVE SERVICES

Session 3: November 11, 2016

Session 4: January 13, 2017

Session 5: March 10, 2017

For more information visit <http://syncva.org/>
or contact Amy Swierczewski at
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In partnership with:



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