# **REPORT OF THE**

# **DISABILITY COMMISSION**

# TO THE GOVERNOR AND THE GENERAL ASSEMBLY OF VIRGINIA



# **HOUSE DOCUMENT NO. 89**

COMMONWEALTH OF VIRGINIA RICHMOND 1997

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# COMMONWEALTH of VIRGINIA

Donald S. Beyer, Jr. Lieutenant Governor

# Office of the Lieutenant Governor Richmond 23219

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May 30, 1997

TO:

The Honorable George Allen

and

The General Assembly of Virginia

In my capacity as Chair of the Disability Commission, I am pleased to submit the 1996 Annual Report pursuant to House Joint Resolution 274, agreed to by the 1994 General Assembly.

This report conveys the findings and recommendations resulting from the Commission's work during the 1996 interim.

Respectfully Submitted,

Donald S. Beyer, Ir. Lieutenant Governor

#### Introduction

In 1990, the Commission on the Coordination of the Delivery of Services to Facilitate the Self-Sufficiency and Support of Persons with Physical and Sensory Disabilities was established pursuant to House Joint Resolution 45 to assess the delivery of services to Virginia's citizens with physical and sensory disabilities. The 1992 Report of the Commission established a ten year plan of action which formed a system of programs and services within an infrastructure designed to be consumer-focused and community-based. The General Assembly in 1994 passed House Joint Resolution 274 (HJR 274) which authorized the Commission to continue its work in developing and reviewing recommendations for service program changes and funding related to people with physical and sensory disabilities until the year 2000. HJR 274 also designated the Virginia Board for People with Disabilities as the agency to provide staff support to the Commission. Today, this legislative commission is known as the Disability Commission, and is comprised of 16 members chaired by the Lieutenant Governor.

Another House Joint Resolution passed in 1994 by the General Assembly was HJR 83 which requested the Secretary of Health and Human Resources to evaluate the implementation of the recommendations made in the Commission's 1992 Report. In the summer of 1995, an evaluation of all of the recommendations made in the 1992 Report of the Disability Commission was completed. The evaluation provided an overview of accomplishments to date, as well as identified the remaining gaps in services affecting individuals with physical and sensory disabilities.

Each year, the Commission continues to examine the progress made in regard to the legislative priorities it forwards to the General Assembly. These recommendations result in study resolutions, budget amendments, and bills patroned by members of the Commission. The report which follows presents the major outcomes that resulted from the 1996 Disability Commission proposals to the General Assembly and the Commission's legislative agenda presented to the 1997 Session.

#### MAJOR OUTCOMES OF THE 1996 DISABILITY COMMISSION PROPOSALS

The 1996 agenda of the Disability Commission targeted legislative issues pertaining to assistive technology and the assumption of responsibilities for educational services for children residing in pediatric long term health care facilities. In addition, three Appropriation Act Amendments were put forward as well as a number of appropriation requests. The actions taken during the 1996 General Assembly Session are as follows.

#### Legislation

• To amend the Assistive Technology Authority authorization legislation to require the Loan Fund Authority Board composition to include at least two members with financial industry expertise.

Upon the passage and signing of SB 366, Governor Allen appointed to the Assistive Technology Loan Fund Board two new members, both having a banking/finance background.

To require institutions in the Commonwealth that elect to establish pediatric
units to be licensed under both Chapter 5 of Title 32.1 of the Code of Virginia
and under Chapter 10 of Title 63.1 of the Code, with the condition that the
jurisdiction where the family resides will assume the cost for educational
services.

SB 579 was considered in the Senate Committee on Education and Health and continued by the Committee to the 1997 General Assembly Session.

#### **Appropriation Act Amendments**

• To direct the Department of Medical Assistance Services to request of the Health Care Financing Administration an emergency amendment to the Elderly and Disabled Waiver to initiate consumer-driven personal assistance services.

An amendment did not appear as appropriation language, but the issue was contained in HJR 125 which was passed by the General Assembly. The resolution requested the Department of Medical Assistance Services (DMAS) to request a waiver or waiver amendment from the federal government and implement consumer-directed personal assistance services. This was to be done in conjunction with the agency-directed model currently available to Virginians who are elderly or who have disabilities, and it requested DMAS to examine existing and available waivers to other options to provide personal assistance services through a consumer-based model of service delivery. The work that was done through HJR 125 led to an Appropriation Act Amendment

recommendation for consideration by the 1997 General Assembly (see 1997 Disability Commission Proposals).

 To require the Disability Commission to annually review the implementation of licensure of institutions treating medically fragile children in meeting their educational needs.

Amendment Item 131 #2c, approved by the General Assembly, requires that the Superintendent of Public Instruction and the Department of Education (DOE), with the cooperation of DMAS, the Department of Social Services (DSS), the Department of Health (DOH), and the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), report on the status of certain medically fragile children as defined in Senate Document No. 5, 1995. The children included are those with one or more conditions who require continuous ongoing specialized health care. The annual report is to address: 1) The identification of a mechanism for reporting on the number, location, and placement of such children; 2) the assignment of responsibility for the provision of educational services for such children; 3) the assignment of responsibility for the payment of education services for such children; and 4) recommendations for any statutory or funding changes to be considered by the 1997 General Assembly. Recommendations were submitted to and considered by the Disability Commission and included in its 1997 legislative proposals.

• To require the Department of Rehabilitative Services to provide members of Disability Services Boards training as part of the Virginia Assistive Technology System annual conference.

This amendment, Item 377 #4c was passed by the General Assembly and resulted in 80 Disability Services Board (DSB) members attending DSB training held in conjunction with the Virginia Assistive Technology System Tri-State Conference in May, 1996.

#### **Appropriation Requests**

Program	Additional Amount Requested	Additional Amount Allocated
Assistive Technology Loan Fund	<b>\$</b> 1,500,000	\$ 500,000

The General Assembly appropriated a one year allocation of \$500,000 to initiate the Assistive Technology Loan Fund. During the past year, the Loan Fund Authority has focused on developing procedures for the distribution of loans and developing partnerships with potential financial institutions. To date, none of the principle has been used. It is anticipated that the initial loans will be made to consumers during the summer

of 1997. The Loan Fund Authority receives its administrative support through the Department of Rehabilitative Services (DRS).

#### **Personal Assistance Services**

\$ 431,528

\$ 175,000

In FY 1996, 151 people were served in the PAS program operated by DRS. As of November, 1996, 211 individuals were being served, but 271 individuals remain on a waiting list for services.

#### **Consumer Services Fund**

\$ 425,000

\$ 0

The Consumer Service Fund served 105 individuals in FY 1996. All dollars allocated to the fund were expended. There were 196 applications for funding received, and funds were available to serve 54% of the people who applied. The fund continues to operate with its 1996 level of funding.

#### Rehabilitative Services Incentive Fund

\$ 500,000

\$ 0

The current appropriation (\$500,000) is divided among the 44 DSBs based on the population of people with disabilities in each locality. Allocations to the DSBs range from \$1,000 to \$71,000. In FY 1996 there were 57 separate grants awarded to the DSBs to meet a wide variety of needs, but over 30% of the grants supported transportation projects. The next highest number of awards were in the areas of housing, assisted communication, and public awareness. In FY 1997, 51 grants have been awarded (approximately 1/3 to transportation projects), and all of the funds have been allocated.

#### Centers for Independent Living

\$ 329,000

\$ 70,000

The additional funds appropriated by the General Assembly in 1996 increased the funding to the disAbility Resource Center in Fredericksburg, bringing its budget more in line with the other 9 Centers for Independent Living (CILs). During 1996, the disAbility Resource Center provided direct services to 47 people with disabilities in addition to providing advocacy and education services in the community.

### **Long-Term Rehabilitative Case Management**

\$ 100,000

100,000

The Long Term Rehabilitation Case Management Program served 202 individuals during fiscal year 1996. This represented an increase of 47 individuals over the previous year. With the \$100,000 increase in funding for FY 1997, the program has hired 2 additional personnel for the Christiansburg and Fredericksburg areas. It is anticipated that the program will serve by the end of the fiscal year the additional 92 people on the current waiting list.

### **Supported Employment**

\$ 67,000

\$ 0

A total of 179 consumers are being served statewide through the DRS Supported Employment Physical and Sensory Disabilities program through a combined total budget of \$350,000. The amount originally allocated through the efforts of the Disability Commission have not increased, to date, since the program's initiation.

# **WWRC Brain Injury Services Expansion**

\$ 420,000

\$ 0

Although an additional appropriation was not approved by the General Assembly in 1996, funding continues that provides services in consumer's homes as they transition from Woodrow Wilson Rehabilitation Center (WWRC) back into their communities, including those with acquired brain injury. As of November, 1996, there were 30 people on the waiting list for services.

# **Head Injury Services Partnership**

\$ 0

100,000

The Disability Commission did not put forward in 1996 a recommendation for increased funding for the Head Injury Services Partnership (HISP), but the General Assembly did appropriate an additional \$100,000 that allowed program expansion into Loudoun County and expansion of the HISP apartment program. The project provides a continuum of services to help persons with brain injuries return to work and community living.

#### 1997 DISABILITY COMMISSION PROPOSALS

During the 1996 interim, the Disability Commission met three times: November 14, 1996; December 19, 1996; and January 7, 1997. All three meetings were held in Richmond. At the November 14th meeting, the majority of the time was devoted to hearing public comments. Issues which were presented by individuals with disabilities, advocates for individuals with disabilities, and service providers covered topics that included:

- need for funding to replace high mileage specialized transportation vehicles
- support for Consumer- Directed Personal Assistance Services
- concerns regarding ensuring health/safety of disabled participants in Consumer-Directed Personal Assistance Services
- achievements of the Specialized Transportation Council
- need for funding to develop transition services for youth within the Centers for Independent Living
- concern over delays in granting loans through the Assistive Technology Loan Fund Authority
- lack of adequate number of qualified interpreters for the deaf and lack of educational opportunities for potential interpreters
- need for funding support and training opportunities for the Disability Services Boards
- the priorities of the Virginia Council on Assistive Technology including the need for establishing an Assistive Technology Lemon Law for defective assistive devices
- need for funds to train and employ emergency alerting system operators for low cost housing used by disabled and elderly citizens in the Cumberland Plateau region (letter submitted as comment)

Also at its November 14th meeting, the Disability Commission received updates on its 1996 program funding initiatives and a status report from the Assistive Technology Loan Fund Authority. Reports on the Educational Needs of Medically Fragile Children and on Consumer-Directed Personal Assistance Services were postponed until the second Commission meeting.

The Disability Commission met again on December 19, 1996. After hearing public comments, the Commission was presented with the findings of the General Assembly directed studies concerning Consumer-Directed Personal Assistance Services and Educational Needs of Medically Fragile Children. Responding to a request from Commission members, additional information was presented on quality assurance for interpreters in public schools, characteristics of specialized transportation in Virginia, the legislative priorities of Disability Services Boards, and the CILs' proposal for the transition of students with disabilities.

The third meeting of the Commission during the interim was held on January 7, 1997 to consider and put forward a legislative agenda for introduction to the 1997 General Assembly. The following issues constitute the Commission's 1997 Legislative Agenda.

# Assistive Technology Device Warranties Act

The Virginia Council on Assistive Technology, in conjunction with the Virginia Assistive Technology System put together a work group during the summer of 1996 of consumers, durable medical equipment vendors, assistive device dealers, and health care providers to identify the issues and components that are essential for inclusion in a lemon law needed to protect consumers who purchase defective assistive devices. A fact sheet presented to the Disability Commission outlines the following key points:

- It is critical for assistive technology to work correctly.
- Not all assistive technology devices have a one year warranty.
- Protection is needed even with a warranty.
- Comparison shopping for assistive technology is rarely possible.
- Lemon laws protect public and private investments in assistive technology.
- Assistive technology lemon laws are working in other states

After considering input from consumers, dealers, providers, manufacturers, and legislative services, the Virginia Assistive Technology Device Warranties Act was developed as a bill for introduction to the General Assembly. Assistive technology devices are defined in the bill as mechanical devices and instruments used by disabled individuals to communicate, see, hear, or maneuver, e.g. manual and power wheelchairs, motorized scooters, communication devices for the deaf, talking software, and Braille printers.

Only new devices having a retail value of at least \$250 were included within the scope of the act. The bill stipulated that in addition to any express warranties otherwise provided, manufacturers of assistive technology devices impliedly warrant, for a period of at least one year following delivery to consumers, that their products are free of defects substantially impairing their value. If, within the 12-month period following delivery, the devices are subject to repair for the same or related problem three times or not practically usable for a cumulative total of 30 days, the devices must be replaced within 30 days, or the purchaser is refunded his full purchase price (plus collateral costs) within 30 days.

Language was also included to provide consumers the option to submit disputes to the Dispute Resolution Unit of the Office of Consumer Affairs.

#### **Consumer-Directed Personal Assistance Services**

The Department of Medical Assistance Services has developed a proposed model for Medicaid-funded consumer-directed personal assistance services as a result of the "Study of Consumer-Directed Services" (House Document 18) done in 1996 under HJR 125. This new service model is to be provided in conjunction with the agency-directed model currently available to eligible individuals in the existing Elderly and Disabled Waiver. Consumers will be eligible to receive personal assistance services under the waiver, except in the consumer-directed model, the consumer will be allowed to hire their own personal attendant after demonstrating their ability to manage and supervise the performance of the attendant.

In order to meet the mandate of the 1996 General Assembly, language was needed to provide DMAS with the authority to promulgate emergency regulations. Prior to making any recommendation, the Disability Commission took into consideration the information provided by both the supporters and those that oppose this issue. An appropriation amendment was recommended by the Disability Commission to allow an emergency regulation so that the program could be implemented effective July 1, 1997.

#### **Educational Needs of Medically Fragile Children**

During the 1996 legislative session, SB 579 was introduced which addressed the issue of providing educational services for medically fragile children, eligible for medical assistance services, who have been placed in nursing homes licensed by the Department of Health. The legislation attempted to rectify the current void in the Code of Virginia concerning programmatic and fiscal responsibility for the educational services for those medically fragile children living in nursing homes. Rather than carry forward SB 579 it was withdrawn, but an appropriation act amendment was approved by the General Assembly to request that information be gathered for a more in-depth study. The Disability Commission was presented with this new information for their consideration at its December 19, 1996 meeting. The following 4 options were presented by the Department of Education:

- Add statutory language to clarify that the local school division where the child's parent resides has programmatic and fiscal responsibility to provide educational services for the eligible children.
- Add statutory language to clarify that the local school division where the facility is located has programmatic responsibility, but the financial responsibility is retained by the home division where the parent resides.
- Add statutory language to clarify that the local school division where the facility is located has programmatic responsibility and create a state fund to reimburse the school division for the excess local cost.

• Require that those nursing home facilities providing services to school-aged children are also licensed under the CORE regulations as a "residential facility for children" which would require the facility to provide the educational services. (Serious concerns were expressed by DMAS regarding this option).

During its deliberations, the Disability Commission did not make any specific recommendation as to which option should be supported but did include the Educational Needs of Medically Fragile Children as part of its 1997 legislative agenda.

### Interpreter Services for Persons who are Deaf and Hard of Hearing

Since 1988, the Department of Education, the Department for the Deaf and Hard of Hearing, and the Virginia Community College System, in conjunction with stake holders such as the Virginia Registry of Interpreters for the Deaf and the Virginia Association of the Deaf, have studied the issues of American Sign Language (ASL) instruction and interpreter training on several occasions and have reported these findings to the General Assembly. As a result of a statewide symposium convened by the Virginia Community College System in 1995, there was a unanimous recommendation for the establishment of a statewide coordinator of ASL and interpreter training within the Community College System.

The Disability Commission was presented with data which showed a critical need for interpreters who meet a Level III qualification for continuing employment in educational settings. Information was presented that demonstrates that there is good, basic interpreter training being provided at the long-established programs located at J. Sergeant Reynolds Community College in Richmond and at New River Community College in Dublin, but that the number of interpreters who meet the Level III requirement has only grown by 12 individuals in the last year and a half. After receiving the information which was presented, the Disability Commission recommended a budget amendment to establish and fund a five-year position for a statewide director of interpreter education and professional development, to be housed at a Virginia Community College at an annual cost of approximately \$85,000. It was the intent of the this recommendation that the following also be accomplished:

- Standardize the programs and courses in ASL and interpreter education in all colleges and universities.
- Utilize distance education technology for training instructors, including persons who are deaf and hard of hearing, in less populated areas of the state.
- Provide on-site technical assistance, to include performance evaluations and individualized training options for educational interpreters, to school divisions.

#### **Transportation**

The Department for the Aging, on behalf of the Specialized Transportation Council, and other advocates provided information to the Disability Commission regarding the status of unmet demand for transportation services for people who are elderly and those with disabilities statewide. In July, 1996, the Area Agencies on Aging reported that there is an annualized unmet demand of 680,000 trips. In addition, the Disability Commission was presented vith information regarding the status of the number of vehicles used for specialized transportation with high mileage. As of December, 1996, 230 of the vehicles used for specialized transportation services in 38 of the Area Agencies on Aging had over 120,000 miles; 83 of which were wheelchair accessible. Other options that were reported to the Disability Commission included use of school buses to help meet unmet needs. In order to increase the coordination and expansion of specialized transportation, the Disability Commission recommended a budget addendum request in the amount of \$500,000 be forwarded to the General Assembly for the Transportation Incentive Fund.

### **Disability Services Boards**

On the day prior to the December 19, 1996 meeting of the Disability Commission, a statewide meeting of the Disability Services Boards (DSBs) was held. A representative of the DSBs presented an overview of the results of this meeting and the progress made during the past 4 years. Although only receiving a fraction of the amount of funding recommended by the Disability Commission in past years, the DSBs have demonstrated that the dollars invested have yielded many times the return in volunteer hours, programs, publications, and the generation of communication about and coordination of disability services. A concern that was raised regarding the inability in past years to fully utilize the funds in the Rehabilitative Services Incentive Fund was addressed. The Disability Commission made the recommendation for 2 budget amendments to support the DSBs in their efforts: 1) an increase of \$500,000 for the Rehabilitative Services Incentive Fund; and 2) an increase of \$100,000 per year for the administrative costs of Board operations.

# Youth with Disabilities Transitioning to Self-Sufficiency

The Virginia Centers for Independent Living (CILs) have prioritized the need for consumer based independent living services for the underserved population of youth with physical, sensory and learning disabilities under the age of 26. A proposal was submitted to and reviewed by the Disability Commission addressing this issue which would result in a minimum of 735 youth receiving services and becoming, in many instances, tax payers. Many youth with disabilities throughout the Commonwealth are graduating from high school without the skills and confidence necessary to live independently in the community, to become employed when possible, and to be contributing members of society. In 1995, there were an estimated 21,000 students with physical, sensory and learning disabilities between the ages of 14 to 22 enrolled in special education in Virginia public schools. With an unemployment rate for individuals with disabilities remaining at about 70% for the past decade, services are needed to help prepare students for life after school and to bridge

the gap from school to employment and independent community living. By creating opportunities for independence within the educational system and after graduation, the CILs are uniquely positioned to assist youth with disabilities to successfully make the transition to self-sufficiency. The Disability Commission recommended a budget amendment in the amount of \$960,000 be forwarded to the General Assembly for consideration.

# SUMMARY OF RECOMMENDATIONS OF THE DISABILITY COMMISSION DURING THE 1996 INTERIM

## **LEGISLATION**

Enact the Virginia Assistive Technology Device Warranties Act.

### **APPROPRIATION ACT AMENDMENTS**

Amend the Appropriations Act of 1996 with new budget language which authorizes the Department of Medical Assistance Services to promulgate emergency regulations for the purpose of initiating Medicaid funded consumer-directed personal assistance services in Virginia.

# **APPROPRIATION REQUESTS**

Program	Amount Requested
Medically Fragile Children	To be determined
Interpreter Services for Persons who are Deaf and Hard of Hearing	\$ 85,000
Specialized Transportation Services	\$ 500,000
Rehabilitative Services Incentive Fund	\$ 500,000
Disability Services Boards (Board Operations)	\$ 100,000
Youth with Disabilities Transitioning to Self-Sufficiency	\$ 960,000

# **ATTACHMENTS**

Attachment #1 -- HJR 45

Attachment #2 -- HJR 274

Attachment #3 -- Members of the Disability Commission

#### GENERAL ASSEMBLY OF VIRGINIA-1990 SESSION

HOUSE JOINT RESOLUTION NO. 45

Creating a Commission on the Coordination of the Delivery of Services to Facultate the Self-Sufficiency and Support for Persons with Physical and Sensory Disabilities in the Commonwealth.

Agreed to by the House of Delegates, March 9, 1990 Agreed to by the Senate, March 7, 1990

WHEREAS, 350,961 citizens in the Commonwealth are affected by physically disabling conditions; and

WHEREAS, it is appropriate that the goals, responsibilities, and desired outcomes of the public and private sector regarding persons with disabilities receive legislative review to facilitate the availability, accessibility, and coordination of essential services and to ensure the participation of the consumers of such services in the review process; and

WHEREAS, categorical funding sources and current performance standards often circumscribe interagency coordination in meeting the needs of such persons for individualized services; and

WHEREAS, identification and implementation of a regionalized service continuum throughout the Commonwealth requires the development of a meaningful system for the coordination and delivery of services and consistent interpretation of the concept, "least restrictive environment"; and

WHEREAS, goals and processes are required to ensure persons with physical and sensory disabilities access to appropriate levels of care and opportunities for optimum self-sufficiency and employment: and

WHEREAS, the needs of persons with physical and sensory disabilities frequently exceed the program, services, and resources configuration of public agencies; and

WHEREAS, eligibility criteria, exclusions, waiting periods, and gaps in benefits and services in public and private third-party health insurance coverage leave many such persons without resources to pay for medical and rehabilitative services; and

WHEREAS, there is the need to better integrate the role and responsibilities of public education in providing special education as required under P. L. 94-142, as amended, and Article 2 (§ 22.1-213 et seq.) of Chapter 13 of Title 22.1 of the Code of Virginia, with human service and economic development agencies to enhance special education programs and to facilitate transition programs for handicapped and disabled children and youth: and

WHEREAS, fragmentation and perceived inadequacies in public programs and involvement of the private sector in selected service areas can result in competitive, duplicative, and expensive public services; and

WHEREAS, an accountable and integrated service delivery system for persons with physical and sensory disabilities should be established congruently with the development and enhancement of public and private rehabilitative agencies and programs, these issues requiring immediate attention; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring. That a Commission on the Coordination of the Delivery of Services to Facilitate the Self-Sufficiency and Support for Persons with Physical and Sensory Disabilities in the Commonwealth be created. The Commission shall be composed of sixteen members to be appointed as follows: two members each of the House Committees on Health, Welfare and Institutions and on Appropriations, one member of the House Committee on Education, and one member of the House of Delegates at large to be appointed by the Speaker of the House; one member each of the Senate Committees on Education and Health, on Rehabilitation and Social Services, and on Finance to be appointed by the Senate Committee on Privileges and Elections; and one member each of the business community, the health insurance industry, and the health care industry, one educator certified in special education, one licensed practicing physician who shall have expertise in emergency medicine and trauma care or neurosurgery, the Lieutenant Governor, and one citizen at-large to be appointed by the Governor.

For the purposes of this study, physical and sensory disability shall include temporary and permanent motoric impairment sustained by direase of or injury to the central nervous system, traumatic brain injury, and disabilities resulting from disease or injury to the sensory system. The Commission shall review and consider the findings and recommendations referred to it for action in the report of the Joint Subcommittee Studying the Needs of Head and Spinal Cord Injured Citizens, the Need for Research and the Needs of All Physically Handicapped Persons. The Commission shall, among other activities: (i) review and determine the measures and incentives that provide for accountability and support coordinated services for persons with physical and sensory disabilities, (ii) develop

strategies for optimum use of public and private fiscal resources and insurance, (iii) determine methods to address the gaps in eligibility criteria for services and the service delivery system that inhibit access to needed services and employment opportunities, (iv) develop human resource models to facilitate rehabilitation-oriented case management and other professional support for persons with physical and sensory disabilities, (v) evaluate the need for and recommend strategies for research and a system to provide post-acute and long-term rehabilitation for traumatic injury and specified disability groups, (vi) identify and develop service delivery models to address the multifaceted and long-term needs for treatment, community support, transportation, housing, employment, job training, vocational and career counseling, and job placement services, and (vii) determine ways to promote coordination and cost-sharing of programs and services between public and private rehabilitative and educational entities.

The Secretary of Health and Human Resources shall ensure that the Commission is appropriately staffed. All agencies shall provide assistance upon request in the manner deemed appropriate by the Commission.

The Commission shall submit an interim report on the actions taken in 1990 to the 1991 Session of the General Assembly, and pursuant to procedures of the Division of Legislative Automated Systems for the processing of legislative documents, shall submit a final report by October 31, 1991, in order to provide data for the preparation of the Governor's 1992-94 budget recommendations to the General Assembly.

The direct costs of this study shall not exceed \$17,280.

# GENERAL ASSEMBLY OF VIRGINIA -- 1994 SESSION

#### HOUSE JOINT RESOLUTION NO. 274

Continuing the Commission on the Coordination of the Delivery of Services to Facilitate the Self-Sufficiency and Support of Persons with Physical and Sensory Disabilities, hereafter to be known as the Disability Commission.

Agreed to by the House of Delegates, February 11, 1994

Agreed to by the Senate, February 28, 1994

WHEREAS, in 1990, the Commission on the Coordination of the Delivery of Services to Facilitate the Self-Sufficiency and Support for Persons with Physical and Sensory Disabilities, hereafter to be known as the Disability Commission, was established to assess the delivery of services to persons with physical and sensory disabilities; and

WHEREAS, the Disability Commission issued its final report to the Governor and the 1992 Session of the General Assembly, including its comprehensive 10-year plan for addressing the identified service needs, legislative initiatives and budget amendments in response to its findings and recommendations; and

WHEREAS, in its 1994 Report to the Governor and General Assembly, the Disability Commission continues to assess service needs and barriers to service delivery and has

proposed a number of service initiatives; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That the Disability Commission be continued to provide review and oversight of the implementation of its recommendations, including those that have not been funded, and any recommendations that may arise during the course of implementing its 10-year plan. In addition, the Disability Commission shall receive, evaluate and make recommendations based upon the report by the Consumer/Interagency Task Force on Individual and Family Support Services.

Disability Commission members appointed pursuant to House Joint Resolution No. 257 of 1992 shall continue to serve as members with full voting privileges. Vacancies in the membership of the Commission shall be filled in the manner provided in the original resolution. The membership of the Disability Commission shall be expanded by one member who shall be from the Senate to be appointed by the Senate Committee on Privileges and Elections.

The direct costs of this study shall not exceed \$7,350 each year. An estimated \$3,400 is allocated for the printing of documents and such expenses shall be funded from the operational budget of the Clerk of the House of Delegates.

The Virginia Board for People with Disabilities shall provide staff support for the study. All agencies of the Commonwealth shall provide assistance to the Commission, upon

request.

The Disability Commission shall submit its findings and recommendations annually to the Governor and the General Assembly as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents. The Disability Commission shall complete its study and submit a comprehensive report on the status of services for persons with physical and sensory disabilities to the Governor and the 2000 Session of the General Assembly.

Implementation of this resolution is subject to subsequent approval and certification by the Joint Rules Committee. The Committee may withhold expenditures or delay the period for the conduct of the study.

# INTERIM STUDY - HOUSE OF DELEGATES

House Joint Resolution 274

Patron: Mayer

Total Membership: 17

Reporting Date: 2000 Session

Continuing the Disability Commission

Lieutenant Governor (1):

Donald S. Beyer, Jr.

**House of Delegates** 

(Speaker - 5):

Health, Welfare & Institutions

Kenneth R. Melvin

Appropriations:

George H. Heilig, Jr. Marian Van Landingham

Education

Alan A. Diamonstein

House at Large:

Joyce K. Crouch

Senate (Senate Privileges & Elections - 4):

Finance:

Joseph V.. Gartlan, Jr.

Education & Health:

Richard L. Saslaw

Rehabilitation & Social Services:

Yvonne B. Miller

At Large:

Jane H. Woods

Citizen Members (Governor - 5):

Health Care Industry:

Richard C. Craven

Health Insurance Industry:

Joan M. Gardner

Educator Certified in Special Education:

Brenda T. Williams

Physician with Expertise in Emergency

Medicine and Trauma Care:

Worthington G. Schenk, III, M. D.

Citizen at Large:

Charles H. Bonner, M. D.

Senator from 25th Senatorial District

from Jan. 1980 to Dec. 1991 (1):

Thomas J. Michie, Jr.

Delegate from 76th House District

from Jan. 1970 to Dec. 1991 and Former Chairman of Committee on Health,

Welfare and Institutions (1):

J. Samuel Glasscock

STAFF - Virginia Board for People with Disabilities (Brian Parsons & Nicole Chase-Stewart, (Committee Operations) Secretary of Health & Human Resources will serve as ex-officio member. Direct costs of this study shall not exceed \$7,350 each year. HJR 45 - 1990 - 1991; HJR 257 - 1992; HJR 429 - 1993 (Study for 1994 includes HJR 272)