



Quarterly Report

FY 2022, Quarter 3

Prepared for the
Mental Health Advisory Council (MHAC) Meeting
August 17, 2022

and

Indiana Protection and Advocacy Services (IPAS)
Commission Meeting
August 19, 2022

Equity Through Advocacy

The Protection and Advocacy System for the State of Indiana



Table of Contents

| | |
|--|----|
| Strategic Plan At-A-Glance | 4 |
| Executive Director’s Report | 5 |
| Key Updates | 5 |
| Operations Updates..... | 5 |
| Diversity, Equity, and Inclusion | 6 |
| Key Updates | 6 |
| Client Demographics..... | 6 |
| Priorities and Objectives Progress | 8 |
| GOAL 1: Preventing, finding, and stopping abuse, neglect, and exploitation of persons with disabilities in facilities | 8 |
| 1.1. Conduct systemic investigations at private secured facilities and psychiatric rehabilitation treatment facilities..... | 8 |
| 1.2. Investigate suspected abuse, neglect, and exploitation in facilities or by a service provider. | 9 |
| 1.3. Use monitoring authority to ensure appropriate treatment of residents in: children’s nursing homes, mental health facilities, nursing facilities, private psychiatric facilities, sheltered workshops, educational settings, waiver settings, juvenile detention centers, and jails and prisons. | 10 |
| 1.4. Investigate instances of discharge delays for individuals dually diagnosed with developmental disabilities and mental illness in mental health facilities. | 11 |
| GOAL 2: Breaking down barriers to ensure rights are respected and supports are available for persons with disabilities to participate in an equitable and inclusive society | 12 |
| 2.1. Provide individual legal advocacy to ensure the protection of rights for individuals with disabilities in the areas of self-determination, health care, abuse and neglect, discharge from institutions, civil rights, education, employment, justice, and voting..... | 12 |
| 2.2. Civil Rights – Improve the accessibility of buildings and public services. | 14 |
| 2.3. Education – Address education barriers for children in institutions (e.g., juvenile detention, private secure facilities)..... | 16 |
| 2.4. Employment – Advocate for increased VR funding and equitable service prioritization within order of selection. | 16 |



2.5. Health Care – (1) Provide individual or systemic advocacy relating to policies or practices around COVID-19, including long-term consequences from those policies and practices. (2) Advocate for policy changes to ensure availability and access to Home and Community-Based Service (HCBS) providers..... 17

2.6. Self-Determination – Expand the knowledge and use of supported decision-making/less restrictive alternatives to guardianship..... 19

2.7. Voting – Ensure elections are accessible to voters with disabilities.....21

GOAL 3: Serving as a partner in rights issues and supporting self-advocates and disability-led organizations. 24

3.1. Provide easily accessible paths for the public to contact IDR for advocacy needs and to distribute information, referrals, and resources to individuals.24

3.2. Support the self-advocacy and disability-led movement in Indiana through continued collaboration with self-advocates and disability-led organizations on voting initiatives, supported decision-making and other activities that align with the mission of IDR. 25

3.3. Increase participation in the local, state and federal policy process including the monitoring of emerging trends in the area of disability rights, the use of strategic collaborations with other organizations, and educating legislators and policymakers regarding the impact of policies on people with disabilities.....26

3.4. Ensure IDR’s services are inclusive and respectful of the intersectional identities of the people it serves and employs.....27

3.5. Advocate for the inclusion of people with disabilities, those from marginalized communities, and people with lived experiences to be meaningfully included in policy workgroups at the agency/state/national level.27

3.6. Generate new partnerships with stakeholders that have not traditionally held a seat at the policy table (e.g., cultural or religious groups, legal or professional groups, community issue groups, e.g., homelessness, Veteran’s issues).....28

Acronyms 30

List of Common Acronyms30

IDR Teams32

IDR Staff.....32

Grant Programs32

State Hospitals.....32



Strategic Plan At-A-Glance

| GOAL/PRIORITY | Type | Category | P&O | SP |
|--|-------------|--------------------------------|-----|-----|
| Conduct systemic investigations at PSF/PRTF. | Substantive | AND | 1.1 | |
| Get people out of institutions. | Substantive | AND | 1.4 | 2.1 |
| Address barriers to exercising rights or accessing services. | Substantive | ALL | 2.1 | |
| Improve accessibility of buildings and public services | Substantive | Civil Rights | 2.2 | |
| Address education barriers for children in institutions | Substantive | AND, Education | 2.3 | |
| Advocate for increased VR funding. | Substantive | Employment | 2.4 | |
| Improve community integration and access to community-based services. | Substantive | ALL | 2.5 | 2.3 |
| Provide advocacy related to COVID-19 | Substantive | Health care, civil rights, AND | 2.5 | |
| Strengthen use of SDM and LRAs. | Substantive | SD | 2.6 | 2.2 |
| Ensure elections are accessible. | Substantive | PSP, Civil Rights | 2.7 | |
| Strengthen education, outreach and communication efforts. | Operational | Programmatic | 3.1 | 1.3 |
| Partner with/support self-advocates and disability-led organizations. | Operational | Programmatic | 3.2 | |
| Increase participation in local, state, and federal policy advocacy. | Operational | Programmatic | 3.3 | |
| IDR Policies and processes are equitable, transparent, and accessible. | Operational | Compliance | 3.4 | 1.4 |
| Provide services to more BIPOC people with disabilities | Operational | DEI | 3.4 | 1.1 |
| Staff, Commission, MHAC reflect broad diversity of Indiana | Operational | DEI | 3.4 | 1.2 |



Executive Director's Report

Key Updates

- IDR represented well at the Indianapolis Bar Foundation Trivia Night coming in first out of 10 teams. IDR has historically not been involved in the broader legal community as a whole but is working on building those connections.
- IDR Executive Director accepted the Indianapolis Bar Foundation Community Empowerment Grant on behalf of the agency. Details about the project this grant will support can be found on page 20.
- IDR Executive Director and IDR client Nicholas Clouse accepted the 2022 Advocate of the Year Award from the National Disability Rights Network (NDRN) at its annual conference.
- In June 15, IDR staff attended the annual NDRN conference in Crystal City, VA. Staff networked with peers from other states and learned from sessions about: Rep Payee program updates, leadership, enforcing Olmstead, recruiting diverse staff, and due process.

Operations Updates

- The State Fiscal Year ended on June 30, 2022. All state and federal reports were timely completed.
- The state made changes to its payroll, Human Resources, and financial platforms. Accounting staff worked diligently to ensure these changes caused as little disruption as possible.
- IDR has contracted with IOT and its website vendor to do a comprehensive review and revamp of IDR's website to ensure accessibility and ease of navigation.
- IDR is updating its internal onboarding process as well as a comprehensive review of its internal policies and processes.
- IDR welcomed its second Disability Law Fellow, Bryan Gogg.
- IDR welcomed three summer interns: Special Projects Intern Maddie Nixon and Legal Interns Madi Hernandez and Lizzie Ford.
- IDR has the following job openings:
 - Correctional Facility Monitor
 - Supported Decision-Making Project Coordinator
 - Litigation Paralegal



Diversity, Equity, and Inclusion

Key Updates

The DCC Workgroup has begun responding from a place of trauma informed care when denying services to potential clients. This includes being empathetic with the words used when IDR is unable to assist.

The DCC Workgroup has also begun outreach to minority and marginalized communities. See “Update – Goal 3” on page 29.

Client Demographics

Hispanic Ethnicity Demographics

| | Q1 Count | Q1 Percent | Q2 Count | Q2 Percent | Q3 Count | Q3 Percent | Q4 Count | Q4 Percent | Total Count | Total Percent |
|---------------------|----------|------------|----------|------------|----------|------------|----------|------------|-------------|---------------|
| Hispanic | 6 | 2% | 6 | 2% | 7 | 3% | | | 19 | 2% |
| Not Hispanic | 50 | 19% | 44 | 16% | 202 | 87% | | | 296 | 38% |
| Blank | 209 | 79% | 232 | 82% | 23 | 10% | | | 464 | 60% |
| Total | 265 | | 282 | | 232 | | | | 779 | |

Figure 1 – Client Hispanic Ethnicity Demographics

Gender/Sex Demographics

| | Q1 Count | Q1 Percent | Q2 Count | Q2 Percent | Q3 Count | Q3 Percent | Q4 Count | Q4 Percent | Total Count | Total Percent |
|----------------|----------|------------|----------|------------|----------|------------|----------|------------|-------------|---------------|
| Female | 49 | 18% | 53 | 19% | 74 | 32% | | | 176 | 23% |
| Male | 95 | 36% | 100 | 35% | 132 | 57% | | | 327 | 42% |
| Other | 0 | 0% | 1 | 0% | 0 | 0% | | | 1 | 0% |
| Unknown | 3 | 1% | 2 | 1% | 1 | 0% | | | 6 | 1% |
| Blank | 118 | 45% | 126 | 45% | 25 | 11% | | | 269 | 34% |
| Total | 265 | | 282 | | 232 | | | | 779 | |

Figure 2 – Client Gender/Sex Demographics



Race Demographics

| | Q1 Count | Q1 Percent | Q2 Count | Q2 Percent | Q3 Count | Q3 Percent | Q4 Count | Q4 Percent | Total Count | Total Percent |
|--|----------|------------|----------|------------|----------|------------|----------|------------|-------------|---------------|
| Asian | 2 | 1% | 2 | 1% | 2 | 1% | | | 6 | 1% |
| Black/African American | 29 | 11% | 27 | 10% | 35 | 15% | | | 91 | 12% |
| Race Unknown | 2 | 1% | 0 | 0% | 7 | 3% | | | 9 | 1% |
| White | 99 | 37% | 116 | 41% | 150 | 65% | | | 365 | 47% |
| Blank | 131 | 49% | 134 | 48% | 31 | 13% | | | 296 | 35% |
| Two or More Races | 2 | 1% | 3 | 1% | 7 | 3% | | | 12 | 2% |
| Native Hawaiian/Other Pacific | 0 | 0% | 0 | 0% | 0 | 0% | | | 0 | 0% |
| American Indian/ Alaskan Native/ Indigenous | 0 | 0% | 0 | 0% | 0 | 0% | | | 0 | 0% |
| Unknown-Declined | 0 | 0% | 0 | 0% | 0 | 0% | | | 0 | 0% |
| Total | 265 | | 282 | | 232 | | | | 779 | |

Figure 3 – Client Race Demographics

Age Demographics

| | Q1 Count | Q1 Percent | Q2 Count | Q2 Percent | Q3 Count | Q3 Percent | Q4 Count | Q4 Percent | Total Count | Total Percent |
|---------------------|----------|------------|----------|------------|----------|------------|----------|------------|-------------|---------------|
| 1 to 3 | 0 | 0% | 4 | 1% | 3 | 1% | | | 7 | 1% |
| 4 to 10 | 21 | 8% | 31 | 11% | 23 | 10% | | | 75 | 10% |
| 11 to 21 | 61 | 23% | 65 | 23% | 55 | 24% | | | 181 | 23% |
| 22 to 40 | 65 | 25% | 59 | 21% | 47 | 20% | | | 171 | 22% |
| 41 to 65 | 71 | 27% | 81 | 29% | 69 | 30% | | | 221 | 28% |
| 66 to 80 | 14 | 5% | 12 | 4% | 15 | 6% | | | 41 | 5% |
| 81 and above | 0 | 0% | 1 | 0% | 3 | 1% | | | 4 | 1% |
| Blank | 30 | 11% | 27 | 10% | 16 | 7% | | | 73 | 9% |
| Data errors | 3 | 1% | 2 | 1% | 1 | 0% | | | 6 | 1% |
| Total | 265 | | 282 | | 232 | | | | 779 | |

Figure 4 – Client Age Demographics



Priorities and Objectives Progress

GOAL 1: PREVENTING, FINDING, AND STOPPING ABUSE, NEGLECT, AND EXPLOITATION OF PERSONS WITH DISABILITIES IN FACILITIES.

PRIORITIES TO ADDRESS:

1.1. Conduct systemic investigations at private secured facilities and psychiatric rehabilitation treatment facilities.

Educate

Presentations – Know Your Rights

- IDR staff completed 3 presentations to a total of 132 attendees.
- **Outcome:** IDR met individually with 6 youth in placement and was able to address 2 issues.
- IDR has been asked to make the Know Your Rights presentation an annual event

Materials – Know Your Rights Handbook:

- The initial Handbook draft is complete and being reviewed for legal accuracy.

Monitor and Investigate

Monitoring – PRTFs and PSFs

- 7 facility visits completed, including 1 new facility
- 6 reports filed with overseeing entities
- **Outcomes:**
 - IDR filed complaints with DCS for 2 facilities. IDR has not been officially notified of the results of those complaints but was notified by the facility that corrective action plans would be required by DCS.
 - See “Success Story – Goal 1” on page 12.

Advocate

Systemic Litigation

Ashley W. et al v. Holcomb et al (3:19-cv-00129-RLY-MPB; U.S. District Court, Southern District of Indiana)

The case was stayed in the district court while Defendants appeal the district court’s decision denying their motion to dismiss on abstention grounds. The Seventh Circuit Court of Appeals reversed the denial of Defendants’ motion to dismiss in an opinion dated May 16, 2022. The Seventh Circuit denied Plaintiffs’ petition for rehearing and rehearing *en banc* in an order dated June 15, 2022. The parties continue to litigate Defendants’ motions for costs.



Community Connections

- Private bar attorney currently litigating case against a facility
- DCS leadership to establish better path for collaboration and communication

1.2. Investigate suspected abuse, neglect, and exploitation in facilities or by a service provider.

Educate

No education activities tied to this priority.

Monitor and Investigate

Rep Payee – IDR presented 29 Rep Payee reviews to SSA which are now in end stages of review.

Investigations – 25 investigations were opened or still open during Q3; 2 investigations were substantiated and 1 was partially substantiated. 5 investigations were conducted. 3 referrals for additional action were made.

While many investigations span more than one quarter, the number of investigations opened and closed in Q3 are detailed below.

| Investigations in Q2 | Opened | Closed |
|-----------------------|----------|----------|
| Unnecessary Restraint | 0 | 0 |
| Death of Patient | 0 | 0 |
| Neglect | 2 | 1 |
| Other Abuse | 0 | 0 |
| TOTAL | 2 | 1 |

Advocate

Individual Representation

- 11 cases opened in Q3
- 8 cases closed in Q3

Advocacy Project – CRMNF Marion

IDR continues to monitor the CRMNF in Marion monthly. The environmental issues were noted and addressed with facility directors. Staffing shortages remain an issue. There were no active investigations during this quarter.

IDR filed 1 complaint with IDOH regarding staffing issues including providing access to vape pens, use of personal cell phones while on duty, an inappropriate restraint resulting in injury, 3 incidents of choking, and inappropriate staffing ratios. IDR has not been notified of the result at the time of this report.



Discharges continue to occur. IDR staff met several times this quarter with the DD Ombudsman, BDDS, and the facility about discharge issues. More specifically, IDR staff provided feedback on CRMNF discharge criteria and forms.

Policy Advocacy

Workgroups

- BQIS Incident Reporting Process Workgroup Collaborative Workgroup
- Mortality Review Committee (MRC)

Community Connections

- Indiana Association of Rehabilitation Facilities, Inc. (INARF)

1.3. Use monitoring authority to ensure appropriate treatment of residents in: children's nursing homes, mental health facilities, nursing facilities, private psychiatric facilities, sheltered workshops, educational settings, waiver settings, juvenile detention centers, and jails and prisons.

Educate

No education activities tied to this priority.

Monitor and Investigate

Monitoring – State-Operated Facilities

IDR conducted 27 monitoring visits at 10 facilities.

Outcome: Natasha Henry, the regular monitoring advocate at Evansville State Hospital met with Evansville State Hospital's all new Superintendent, Clinical Director, and Psychological Services Director, to discuss IDR's general relationship with the hospital and how it may be improved. The discussion went very well; ESH offered to invite Natasha Henry to ESH executive staff and social services staff meetings to further the discussion.

Advocate

Advocacy Project – Prison Monitoring Project

IDR is continuing its Prison Project with the goal of gathering information from Indiana correctional facilities to determine how IDR can improve service to incarcerated people with disabilities. IDR will request and review the IDOC's administrative policies as well as attempt to build relationships with staff and offenders in each IDOC facility. IDR staff will also attempt to build relationships with staff from each county jail. The project will conclude with a report and recommendations of how IDR can provide the most effective advocacy in these settings.



Systemic Litigation

Indiana Protection and Advocacy Services Commission et al v. Commissioner, Indiana Department of Correction (1:08-cv-01317-TWP-MJD; Southern District of Indiana)

The settlement monitoring period was extended. IDR has begun a prison monitoring project, as detailed above, that will cover multiple topics, including mental health treatment.

Policy Advocacy

Public Comment

- On June 9, IDR submitted 12 single-spaced pages of commentary regarding the Department of Corrections' proposed regulations for juvenile detention facilities.

Workgroups

- Facility-based human rights committees

Community Connections

- No new connections from this quarter tied to this priority.

1.4. Investigate instances of discharge delays for individuals dually diagnosed with developmental disabilities and mental illness in mental health facilities.

Educate

No education activities tied to this priority.

Monitor and Investigate

Monitoring

- See "Advocacy Project – CRMNF Marion" on page 9.
- IDR created a discharge monitoring and advocacy protocol and is working to implement the new advocacy focus.

Advocate

Individual Representation

3 discharge meetings attended; 2 individuals have transitioned to less restrictive placements

Policy Advocacy

Workgroup

- ResCare Marion Bureau of Developmental Disabilities Services (BDDS) Transition Meeting

Community Connections

- No new connections from this quarter tied to this priority.



Success Story – Goal 1:

When monitoring a juvenile facility, IDR found that serious occurrences were not being reported appropriately. IDR filed a complaint with IDOH who then substantiated the complaint. IDOH issued a corrective action plan to the facility.

GOAL 2: BREAKING DOWN BARRIERS TO ENSURE RIGHTS ARE RESPECTED AND SUPPORTS ARE AVAILABLE FOR PERSONS WITH DISABILITIES TO PARTICIPATE IN AN EQUITABLE AND INCLUSIVE SOCIETY.

PRIORITIES TO ADDRESS:

2.1. Provide individual legal advocacy to ensure the protection of rights for individuals with disabilities in the areas of self-determination, health care, abuse and neglect, discharge from institutions, civil rights, education, employment, justice, and voting.

Educate

Presentation

- On May 25, 2022, Keith Butler provided an overview of IDR services and Disability Laws to 13 staff at Child Care Answers.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Individual Representation

232 individual client cases were opened or remained open during this quarter. While some cases require more than one quarter for resolution, the numbers of cases opened and closed in Q3 are detailed on page 13.



Individual Advocacy Case Data

| | Opened | Closed |
|--------------------|-----------|-----------|
| Civil Rights | 22 | 17 |
| COVID-19 Vaccine | 0 | 0 |
| Education | 14 | 9 |
| Employment | 13 | 5 |
| Health Care | 5 | 5 |
| Self-Determination | 6 | 2 |
| TOTAL | 60 | 38 |

Individual Representation Select Outcomes

Connor – Education

“Connor” was a high school student with disabilities who was removed from his school bus for a disability-related reason. Without transportation by the school, Connor had no way to participate in class. IDR successfully advocated that Connor be returned to bus services so he could attend school.

Ellen – Employment

“Ellen” was a VR client who wanted to open and operate a small business. Although she had submitted her feasibility plan to VR, she was facing delays in receiving the necessary supports to start her business. IDR successfully advocated for Ellen to receive a trial run with VR support such as a loner computer.

Ivy – Health Care

“Ivy” was an individual with developmental disabilities and significant behavioral challenges whose CIH Waiver application had been denied. IDR successfully represented Ivy in her appeal hearing and she was found eligible for the CIH Waiver.

Kyle – Health Care

“Kyle” was being threatened with eviction from his nursing facility. IDR agreed to represent him in his hearing to challenge the eviction. Ultimately, the nursing facility rescinded their notice of eviction and Kyle was permitted to continue living in the facility.

Litigation

Crumley v. Forestall et al. (1:19-cv-04110-TWP-DML; U.S. District Court, Southern District of Indiana)

IDR continues to litigate under the ADA and the Rehabilitation Act. The lawsuit alleged that client suffered unexplained injuries while incarcerated and the defendants failed to provide him with any accommodations or supports while in their custody. The IMPD and nurse’s motions for summary judgment were granted and they have been dismissed from the case. The Marion County Sheriff’s (MCSO) motion for summary judgment was granted as to the individual defendants and denied with respect to the ADA and Section 504 claims.



Plaintiff's ADA and Section 504 claims against the MCSO will proceed to trial. Settlement negotiations between Plaintiff and MCSO restarted after the summary judgment decisions. If those are unsuccessful, trial is scheduled to begin January 23, 2023.

Advocacy Project – Police Pursuit Policies

IDR began researching police pursuit policies after meeting with members of the community about interactions between police and people with disabilities with the purposes of supporting the community in advocating for policy change.

Policy Advocacy

Workgroups

- Disability Employment Technical Assistance Center (DETAC) Grantee Advisory Workgroup
- Fair Housing Center of Central Indiana Board of Directors
- Indiana Association of People Supporting Employment First (INAPSE) Public Policy Committee
- Medicaid All Hands
- National Board of Directors for Association of People Supporting Employment First (APSE)
- State Personnel Department (SPD) Employees with Disabilities Workgroup

Community Connections

- Indiana's Education Scholarship Account Program
- Private bar attorney regarding policy pursuit policies

2.2. Civil Rights – Improve the accessibility of buildings and public services.

Educate

Technical Assistance

- Individual in Bloomfield of their right to file a complaint with the DOJ or ICRC regarding accessibility barriers at a local pharmacy.
- Individual in Indianapolis regarding their right to make complaints with local gas station to remove impediments to accessibility.
- Student at Purdue Northwest to request accommodations regarding their coursework.
- Apartment tenant about how to request a reasonable accommodation to the apartment's maintenance procedures.
- Provided TA to State Personnel Department to ensure the upcoming Workplace Harassment Training will be accessible for everyone.



Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Individual Representation Outcome

Patrick – Civil Rights

“Patrick,” an individual with disabilities, was denied an emotional support animal by his apartment landlord. IDR assisted Patrick in completing the landlord-required paperwork and successfully receiving written approval of his emotional support animal from the landlord.

Systemic Litigation

Indiana Protection and Advocacy Services Commission v. Indiana Family and Social Services Administration et al (1:22-cv-00906-JRS-TAB; Southern District of Indiana)

IDR and the ACLU of Indiana filed a lawsuit on behalf of the IPAS Commission against FSSA and DMHA for failing to timely provide court ordered competency restoration services to people who are found incompetent to stand trial. The Complaint asserts that DMHA has grossly insufficient capacity to provide restoration services to those committed for that purpose. As a result, defendants who lack the capacity to stand trial are held in Indiana county jails for months awaiting access to appropriate restoration services. The resulting improper confinement violates due process, Title II of the Americans with Disabilities Act (ADA), 42 U.S.C. § 12101, et seq., and Section 504 of the Rehabilitation Act, 29 U.S.C. § 794.

Press

To highlight the [complaint](#) described above, IDR and the ACLU of Indiana issued a [press release](#). Ray Lay, IPAS Commissioner and person with lived experience, provided a quote for the [Indiana Lawyer](#).

Policy Advocacy

Public Comment

- On June 13, IDR signed onto a letter to Mayor Hogsett and Marcia Lewis, drafted by the Fair Housing Center for Central Indiana, calling upon them to address crises within the Indiana Housing Agency.

Workgroups

- ADA-Indiana Steering Committee
- Back Home in Indiana Alliance Steering Committee
- Carmel Advisory Committee on Disability
- Division of Disability and Rehabilitative Services (DDRS) Advisory Council
- Fishers Advisory Committee on Disability



- Indiana Department of Transportation (INDOT) Americans with Disabilities Act (ADA) Community Advisory Working Group
- Indianapolis Mayor's Advisory Council on Disability (MAC-D)

Community Connections

- Indiana Public Defenders Council

2.3. Education – Address education barriers for children in institutions (e.g., juvenile detention, private secure facilities).

Educate

No education activities tied to this priority.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Advocacy Project – FAPE in Institutions

Nothing to report this quarter.

Community Connections

- No new connections from this quarter tied to this priority.

2.4. Employment – Advocate for increased VR funding and equitable service prioritization within order of selection.

Educate

Materials – Competitive Integrated Employment (CIE) Initiative – Based on IDR's 7 CIE fact sheets, short videos are being developed by Maddie Nixon, Special Projects Intern. ASL videos of the fact sheets are also being produced.

Materials were shared by the GCPD with DDRS's Building Independence Workgroup.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Advocacy Project – Sheltered Workshop Project

IDR continues to participate in two of DDRS's monthly workgroups addressing the promotion of CIE. Recently, each workgroup was tasked with proposing three activities to be completed before the end of the year. DDRS incorporated these activities into its Employment Systems Transformation Plan.



IDR staff continue to meet with representatives from DDRS and technical advisors from the Center for Public Representation about moving away from funding sheltered workshop participation towards increasing participation in CIE.

Policy Advocacy

Public Comment

- In April, IDR submitted written comments to the AbilityOne Commission, regarding its Strategic Plan for Fiscal Years 2022-2026. IDR emphasized the importance of competitive, integrated employment (CIE) opportunities, as defined by the Workforce Innovation and Opportunity Act.
- IDR's Policy Director continues to participate on the National Board of Directors for the Association of People Supporting Employment First (APSE). In June, she participated in strategic planning and APSE's 2022 Annual Conference. These activities informed IDR about CIE initiatives around the country and provided valuable networking opportunities.

Workgroups

- Vocational Rehabilitation (VR) Commission
- Work to INclude Advisory Committee
- Work to INclude Coalition
- DDRS Advisory Council CIE Workgroups

Community Connections

- U.S. Department of Labor, Office of Federal Contract Compliance Programs, to collaborate regarding disability discrimination involving federal contractors.

2.5. Health Care – (1) Provide individual or systemic advocacy relating to policies or practices around COVID-19, including long-term consequences from those policies and practices. (2) Advocate for policy changes to ensure availability and access to Home and Community-Based Service (HCBS) providers.

Educate

Event – Walking for the Health of It

- On May 21, 2022, Jim Hutton, Carmen Ledezma, and Shari Stites participated in the “Walking for the Health of It” 5K and Mental Health Fair hosted by Mental Health America of Hendricks County. There were 50 attendees and IDR personally engaged 3 about COVID-19 vaccine accessibility.

Outreach

- The DCC Workgroup began COVID-19 vaccine outreach to minority and marginalized communities as detailed on page 29.
- In Q3, IDR added 4 posts to its social media channels regarding the COVID-19 vaccine. These posts included:



- The ADA in Healthcare
- CDC updates on the COVID-19 booster
- Promotion of the Disability Information and Accessibility Line (DIAL)

Professional Development

- In April, IDR's Policy Director attended Applied Self-Direction's Self-Direction Conference in Baltimore. The two-day event provided the opportunity to learn about innovative self-direction services and opportunities used by other states, as well as educated attendees about inequalities within self-direction programs that have yet to be addressed.

Monitor and Investigate

Monitoring – COVID-19 Vaccine Access

The COVID-19 Vaccine Project spent-down the remainder of that grant funding during Q3. One initiative of the project was to ensure that people in institutional settings had access to the vaccine through monitoring. IDR advocates successfully completed this deliverable.

Advocate

Policy Advocacy

Public Comment

- In May, IDR signed onto a letter to the U.S. Senate, drafted by Justice in Aging, that highlighted the need for increased congressional investment in home and community-based services.
- On June 6, IDR submitted comments regarding the Division of Aging's 2023-2026 State Plan on Aging. These comments highlighted the importance of self-directed services, participant autonomy, and the need for a more robust Adult Protective Services program.

Workgroups

- Center for Youth and Adults with Conditions of Childhood (CYACC) Advisory Board
- Long-Term Care Coalition – This quarter, the Coalition received updates regarding the Long-Term Care Ombudsman's plan to recruit, train, and utilize volunteer ombudsman to expand their reach throughout more nursing facilities. The Coalition also continued to discuss self-directed HCBS services and other germane topics.
- National Center on Advancing Person-Centered Practices and Systems' Self-Directed Learning Collaborative – Policy Director Emily Munson and Disability Law Fellow Tash Crespo began participating in this 18-month program designed such that each team will complete a discrete project to launch or improve a self-directed service within its home state. Both of Indiana's teams – one sponsored by INSILC and the other by FSSA – have discussed merging to share resources and maximize results.



Community Connections

- Social Security Administration, Office of Communications
- Kentucky Protection and Advocacy

2.6. Self-Determination – Expand the knowledge and use of supported decision-making/less restrictive alternatives to guardianship.

Educate

Presentations

- On May 5, 2022, Melissa Keyes presented to the Arc of Indiana Board of Directors on “Decision-Making Supports.” There were 11 provider administrators in attendance.
- On June 8, 2022, Melissa Keyes presented “Alternatives to Guardianship and Restoration of Rights” to 30 P&A staff across the nation at the NDRN Annual Conference.
- On June 21, 2022, Melissa Keyes presented “Guardianship in the Public Discourse” at the Indiana Adult Guardianship Symposium. There were 261 attendees, primarily comprised of guardians, service providers, family members and attorneys.

Technical Assistance

IDR provided TA regarding guardianship issues to multiple attorneys and families. Additionally, IDR consulted with the following entities:

- BDDS
- Medicaid Waiver Ombudsman
- DMHA
- Arc of Indiana
- Center for Youth and Adults with Conditions of Childhood
- Indiana Legal Services
- Disability Rights Texas
- Disability Law Center of Virginia
- Disability Rights North Carolina
- Hawaii Disability Rights Center

Monitor and Investigate

IDR began monitoring guardianship court filings to provide input about the implementation of Indiana’s supported decision-making legislation and to support Guardianship Code modernization efforts.



Advocate

Advocacy Projects

- SDM Indiana State Plan – The SDM Coalition met to outline the workgroups for ongoing tracking of implementation including research, advocacy, and education. Tasks from the State Plan have been shared with Youth Ambassadors. IDR is currently seeking a SDM State Plan Project Coordinator.
- Transition-Aged Youth – IDR joined the National Community of Practice of the Center for Youth Voice, Youth Choice (CYVYC) to promote alternatives to guardianship for youth with disabilities. The [press release](#) notes that IDR and the Self Advocates of Indiana (SAI) were selected for the Indiana team. Indiana now has four youth ambassadors participating in the program. The youth will contribute to projects benefiting Indiana’s state plan.
- IDR was the recipient of the 2022 Indianapolis Bar Foundation Community Empowerment Grant. This grant will support a project to expand access to advanced directives and other decision-making supports related to health care. Coverage of the grant award was featured in [The Indiana Lawyer](#) and [Indianapolis Bar Association blog](#).
- ACL Court Improvement Grant – IDR staff consulted with stakeholders and the Office of Adult Guardianship on supporting Indiana’s application to the ACL’s court improvement grant program. We are awaiting a response from ACL regarding the status of the application. If successful, IDR would be heavily involved in this project.

Press

- Coverage of the CYVYC community of practice selection is detailed above under “Advocacy Projects.”
- Coverage of IDR’s receipt of the 2022 Indianapolis Bar Foundation Community Empowerment Grant is detailed above under “Advocacy Projects.”

Policy Advocacy

Legislative

- Justin Schrock consulted with the attorney who previously authored the *Anderson’s Probate Forms* section of the *Indiana Practice Series* targeted to attorneys on an annual basis, regarding the replacement of – or modifications to – *Anderson’s Probate Form § 2.53*. The model form pertains to waivers of rights made by an Alleged Incapacitated Person (AIP) in a guardianship proceeding under Ind. Code § 29-3-5-1(d), as well as a purported consent to guardianship made by the AIP. The model form is commonly misused and misapplied by guardians’ attorney in Indiana courts to circumvent the minimal due process protections afforded to AIPs by our guardianship code.
 - **Outcome:** These conversations led to the addition of a formal advisory comment on *Form § 2.53* in future versions of *Anderson’s Probate Forms* clarifying the applicable law. IDR submitted a proposed replacement for



the model form, but the attorney announced her retirement before it could be approved. Justin Schrock intends to continue the conversation with the next author of *Anderson's Probate Forms*.

- Melissa Keyes provided feedback on proposed legislation from the Probate Review Committee on access to records for proposed guardians. As a result of IDR's comments, the legislation was amended to also affirm access to records without guardian consent for people under guardianship.

Workgroups

- Indiana Adult Guardianship State Taskforce (WINGS)
- Indiana SDM Coalition
- Indiana Traumatic Brain Injury Advisory Board
- National Coalition for a Civil Right to Counsel
- Uniform Guardianship Act Subcommittee for Probate Review Committee

Community Connections

- American Bar Association Center on Law and Aging

2.7. Voting – Ensure elections are accessible to voters with disabilities.

Educate

Presentation

See “Success Story – Goal 2” on page 23 for more details.

Outreach

IDR has been working with SAI to refresh the Voter Empowerment Training and spent Q3 scheduling trainings to be presented during Q4.

Technical Assistance

See “Success Story – Goal 2” on page 23 for more details.

Digital Media

IDR's [Hoosiers Vote website](#) pages constituted 60% of all page views for Q3. The website received praise from the [National Lawyers' Committee for Civil Rights](#) as best practice for local voting rights content.



Monitor and Investigate

Monitoring – Polling Place Accessibility Surveys

IDR and 1 community partner surveyed 11 polling sites in 4 counties. Follow-up letters detailing survey findings and recommendations were sent to the respective county's Clerk. IDR plans to expand training of community partners and diversify counties surveyed for the general election.

Advocate

Systemic Litigation

American Council of the Blind of Indiana et al. v. Indiana Election Commission et al. (1:20-cv-03118-JMS-MJD; U.S. District Court, Southern District of Indiana)

IDR continues to litigate with co-counsel from Disability Rights Advocates under the ADA and the Rehabilitation Act, alleging that Indiana's absentee voting options are inaccessible to voters with print disabilities. Discovery closed on April 8. The parties have filed cross-motions for summary judgment, which will be fully briefed by July 11, 2022. The district court scheduled a July 11 settlement conference. Plaintiffs have retained three experts to support their positions.

Policy Advocacy

Workgroup

- Indiana Voting Coalition

Community Connections

- Partnered with the [Election Protection Hotline](#) for Indiana to provide disability voting rights information to staff handling election day calls.



Success Story – Goal 2:

Since 2016, Natasha Henry has provided TA to the Vanderburgh County Clerk’s office to ensure their polling sites are accessible. Based on this history, the Vanderburgh’s County Clerk recommended IDR as a speaker at the annual County Clerk Conference. On June 15, 2022, Kristin Dulaney presented “Making Your Polls Accessible” at the Conference, providing representatives from each county with basic information about polling place accessibility. Additionally, IDR received 3 requests for TA, 1 follow-up question, and 7 hits to the webpage [“Poll Worker Resources.”](#) IDR will provide the requested TA in Q4.



GOAL 3: SERVING AS A PARTNER IN RIGHTS ISSUES AND SUPPORTING SELF-ADVOCATES AND DISABILITY-LED ORGANIZATIONS.

PRIORITIES TO ADDRESS:

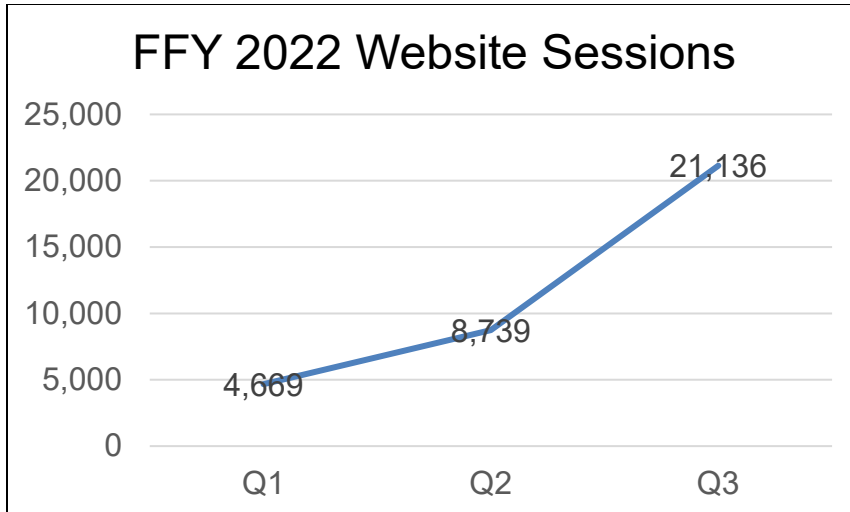
3.1. Provide easily accessible paths for the public to contact IDR for advocacy needs and to distribute information, referrals, and resources to individuals.

Educate

I/R and Website

566 Intake requests

21,136 website sessions



Presentations

Total of 6 presentations and 525 total participants. Presentations are noted throughout this report under their corresponding priority area.

Projects

Accessibility Checklist

- Policy Director has created an accessibility policy for externally shared documents and PowerPoint slides that is in the process of being finalized.

Communication Plan

- IDR completed the Communication Audit with David Card, NDRN Communication Manager. Results of the Audit are being reviewed, including support of a website revamp.
- IDR has been working with IOT to determine the level of customization available and IOT's ability to assist with the revamp.



Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Workgroups

- PANDA Improvement Workgroup
- TASC Advisory Group (TAG) Advocacy Working Group

Community Connections

- No new connections from this quarter tied to this priority.

3.2. Support the self-advocacy and disability-led movement in Indiana through continued collaboration with self-advocates and disability-led organizations on voting initiatives, supported decision-making and other activities that align with the mission of IDR.

Educate

Melissa Keyes and IDR client Nicholas Clouse spoke on a panel about decision-making and legislative advocacy to students with disabilities.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Workgroups

- Self-Advocate Innovation Collaborative
- HIV Advocacy Coalition

Policy Advocacy

Public Comment

- On June 13, IDR signed onto a letter to Congressmen Nadler and Jordan, informing them about the positive effects that the passage of the REPEAL HIV Discrimination Act (H.R. 6111) would bring.

Partner Support

- HIV Modernization Movement – IDR staff attended meetings to discuss strategy for 2023 legislative session and how IDR can best support the HIV community.
- Helped share leadership and training opportunities with people with disabilities in our network.

Community Connections

- No new connections from this quarter tied to this priority.



3.3. Increase participation in the local, state and federal policy process including the monitoring of emerging trends in the area of disability rights, the use of strategic collaborations with other organizations, and educating legislators and policymakers regarding the impact of policies on people with disabilities.

Educate

No education activities tied to this priority.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Policy Advocacy

- IDR and Indiana's APSE Chapter continue to discuss possible revisions to the MED Works bill, and accompanying strategy, for the next legislative session. They are hoping to build a larger coalition of bill supporters, including allies from cross-disability organizations.
- IDR is working with a network of advocates and state and national organizations to advocate for the Marion County Health and Hospital Corporation to dismiss its petition before the Supreme Court.
- IDR signed on to a letter of support for proposed federal legislation ABLA Age Adjustment Act.

IDR's public comments are listed above throughout Goals 1, 2 and in Goal 3.2.

Workgroups

- Governor's Council for People with Disabilities
- Helen Keller Advisory Board
- Indiana Disability Advisory Group - State of Indiana Office Chief Equity, Inclusion and Opportunity
- National Alliance on Mental Illness (NAMI)-Indiana Public Policy Committee
- NDRN External Relations Committee
- NDRN Technical Assistance Advisory Committee
- NDRN – CEO Meetings, Legal Director Meetings, Policy Meetings
- State/Local Education Equity Resource Group
- Training and Advocacy Support Center (TASC) Advisory Group
- Transition Partners of Northeast Indiana
- United States Attorney's Office (USAO) Disability Rights Roundtable
- Indiana Advisory Committee to the US Commission on Civil Rights

Community Connections

- Indiana ABLA Authority



3.4. Ensure IDR's services are inclusive and respectful of the intersectional identities of the people it serves and employs.

Educate

Professional Development

IDR staff completed 192 hours of professional development in following areas:

- 165 Agency/Job/Mission Related
- 21 Diversity and Cultural Competency
- 6 Ethics

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Individual Representation

Client demographics listed on pages 6-7.

Policy Advocacy

Workgroups

- Diversity Roundtable of Indianapolis
- Georgetown University Cultural & Linguistic Competence Initiative
- DCC workgroup
- Ivy Tech Diversity Workgroup

Community Connections

- Arc of Indiana and SAI regarding how IDR can best support SAI in public policy initiatives

3.5. Advocate for the inclusion of people with disabilities, those from marginalized communities, and people with lived experiences to be meaningfully included in policy workgroups at the agency/state/national level.

Educate

Professional Development

IDR's 3 summer interns started their work during Q3. In addition to their projects, they are shadowing IDR staff on various policy initiatives.

IDR's 2022-2024 Disability Law Fellow, Bryan Gogg, also started his tenure during Q3.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.



Advocate

Advocacy for Meaningful Leadership & Inclusion of Individuals with Lived Experience

- Former IDR Client Nick Clouse spoke at the NDRN Conference as part of IDR's acceptance of the 2022 NDRN Advocacy Award.
- Supported IDR Employment Advocate Bonnie Bomer to apply to serve on ACL's Disability Employment TA Center Peer Action Community.

Internal Policies

The DCC Workgroup has improved its communication of service denial as detailed on page 6.

Community Connections

- No new connections from this quarter tied to this priority.

3.6. Generate new partnerships with stakeholders that have not traditionally held a seat at the policy table (e.g., cultural or religious groups, legal or professional groups, community issue groups, e.g., homelessness, Veteran's issues).

Educate

Presentation

- On April 2, 2022, Kristin Dulaney presented "Get To Know IDR" at the Seizure Smart Conference for Ohio and Indiana. There were 2 in attendance and 1 attendee invited IDR to give another presentation to Child Care Answers detailed on page 12.
- On May 19, 2022, Melissa Keyes presented to the Indy Downtown SERTOMA Club on the Basics of IDR Services. There were 10 in attendance for the community service organization.

Monitor and Investigate

No monitoring/investigating activities tied to this priority.

Advocate

Partnerships/Workgroups

- Immigration Welcome Center
- Mexican Consulate
- Indiana State Bar Association Diversity Committee

Community Connections

- Child Care Answers
- Anna's Celebration of Life Foundation
- SERTOMA



Update – Goal 3:

The DCC Workgroup began outreach to multiple minority and marginalized communities. In Q3, the group identified organizations it believes IDR should connect with and began scheduling introductory meetings with them. In Q3, IDR connected or re-connected with the Immigrant Welcome Center, Little Hoosiers, and the Kphrew Institute. In Q4, IDR will continue outreach to the DCC Workgroup’s identified organizations and strengthen the partnerships started in Q3.



Acronyms

List of Common Acronyms

| | |
|--------------|---|
| 504 - | Section 504 of the Rehabilitation Act of 1973-504 |
| ACF - | Administration for Children and Families |
| ACLU - | American Civil Liberties Union |
| ADA - | Americans with Disabilities Act |
| AIDD - | Administration on Intellectual and Developmental Disabilities |
| APS - | Adult Protective Services |
| ARC - | State and local organizations for developmental disability advocacy |
| ARTICLE 7 - | Special Education Regulations (Indiana) |
| BDDS - | Bureau of Developmental Disabilities Services |
| BQIS - | Bureau of Quality Improvement Services |
| CEO - | Chief Executive Officer |
| CIH Waiver - | Community Integration and Habilitation Waiver |
| CMS - | Center for Medicare and Medicaid Services |
| CPR - | Center for Public Representation |
| CRMNF - | Comprehensive Rehabilitative Management Needs Facility |
| CYVYC | Center on Youth Voice/Youth Choice |
| DCC - | IDR Diversity and Cultural Competency Workgroup |
| DCS - | Department of Child Services |
| DD - | Developmental Disabilities |
| DD Act - | Developmental Disabilities Assistance and Bill of Rights Act |
| DD Council - | Developmental Disabilities Council |
| DDRS - | Division of Disability and Rehabilitative Services |
| DMHA - | Division of Mental Health and Addictions |
| DOC - | Indiana Department of Correction |
| DOE - | Indiana Department of Education |
| EEOC - | Equal Employment Opportunity Commission |
| FBA - | Functional Behavioral Assessment |
| GCPD - | Governor's Council for People with Disabilities |
| HAVA - | Help America Vote Act |
| HMM - | HIV Modernization Movement |
| HRSA - | Health Resources and Services Administration |
| I&R - | Information and Referral |
| ICF - | Intermediate Care Facility |
| ICRC - | Indiana Civil Rights Commission |



| | |
|------------------|--|
| ICLU - | Indiana Civil Liberties Union |
| ID - | Intellectual Disability |
| IDD - | Intellectual or Developmental Disabilities |
| IDR - | Indiana Disability Rights |
| IDEA - | Individuals with Disabilities Education Act (Federal) |
| IDOH - | Indiana Department of Health |
| IIDC/Institute - | The Indiana Institute on Disability and Community |
| IN*SOURCE - | Indiana's Parent Training Information Project |
| IPE - | Individual Plan for Employment |
| LD - | Learning Disability |
| MI - | Mental Illness |
| NDRN - | National Disability Rights Network |
| OCR - | Office of Civil Rights |
| OMB - | Office of Management and Budget |
| OMPP - | Office of Medicaid Policy and Planning |
| P&A - | Protection & Advocacy System |
| PPR - | Program Performance Report |
| PRTF - | Psychiatric Residential Treatment Facility |
| PSF - | Private Secure Facility |
| PTSD - | Post-Traumatic Stress Disorder |
| RSA - | Rehabilitation Services Administration |
| RULE7 - | Part of Nursing Home Regulations (Indiana) concerning the facility's requirements for programming for MR residents used in QMRP-D Training |
| SAI - | Self-Advocates of Indiana |
| SAMHSA - | Substance Abuse and Mental Health Services Administration |
| SDM - | Supported Decision-Making |
| SGL - | Supervised Group Living |
| SSA - | Social Security Administration |
| TA - | Technical Assistance |
| TASC - | Training and Advocacy Support Center |
| TBI - | Traumatic Brain Injury |
| UCEDD - | University Centers for Excellence in Developmental Disabilities |
| USDOE - | United States Department of Education |
| VA - | Veterans Affairs |
| VR/Voc Rehab - | Vocational Rehabilitation Services |



IDR Teams

- Abuse, Neglect, and Discharge (AND)
- Civil Rights
- Education
- Employment
- Health Care
- Policy and Special Projects (PSP)
- Self-Determination
- Representative Payee

IDR Staff

Please visit <https://www.in.gov/idr/staff/our-staff/> to view a current staff list.

Grant Programs

| | |
|---------|---|
| CAP - | Client Assistance Program |
| PAAT - | Protection & Advocacy for Obtaining Assistive Technology |
| PABSS - | Protection & Advocacy for Beneficiaries of Social Security |
| PADD - | Protection & Advocacy for Persons with Developmental Disabilities |
| PAIMI - | Protection & Advocacy for Individuals with Mental Illness |
| PAIR - | Protection & Advocacy for Individual Rights |
| PATBI - | Protection & Advocacy for Persons with Traumatic Brain Injury |
| PAVA - | Protection & Advocacy for Voting Access |

State Hospitals

| | |
|--------|--|
| LCH - | Larue Carter Hospital |
| LSH - | Logansport State Hospital |
| EPCC - | Evansville Psychiatric Children's Center |
| ESH - | Evansville State Hospital |
| MSH - | Madison State Hospital |
| RSH - | Richmond State Hospital |