



Alabama Disabilities Advocacy Program
&
Protection and Advocacy for Traumatic Brain Injury
(PATBI)

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Protection and Advocacy System

Federal law created a system of “protection and advocacy” organizations in every state and territory of the U.S.

ADAP's Mission & Vision

- ▶ ADAP's mission is to provide quality, legally-based advocacy services to Alabamians with disabilities in order to protect, promote and expand their rights.
- ▶ ADAP's vision is one of a society where persons with disabilities are valued, exercise self-determination through meaningful choices, and have equality of opportunity.

Program Components

- ▶ Protection and Advocacy for Persons with Developmental Disabilities (PADD)
- ▶ Protection and Advocacy for Individuals with Mental Illness (PAIMI)
- ▶ Protection and Advocacy for Individual Rights (PAIR)
- ▶ Protection and Advocacy for Beneficiaries of Social Security (PABSS)
- ▶ Protection and Advocacy for Traumatic Brain Injury (PATBI)
- ▶ Protection and Advocacy for Assistive Technology (PAAT)
- ▶ Protection and Advocacy for Voter Accessibility (PAVA)
- ▶ Representative Payee Program

Priorities and Goals (FY 19)

- ▶ **PROTECTION FROM ABUSE & NEGLECT** - Individuals with disabilities will be free from abuse and neglect and live in healthier, safer or otherwise improved facility or community settings.
- ▶ **COMMUNITY ACCESS** - Individuals with disabilities will have access to appropriate and individualized community services, including assistive technology, which will enhance their ability to live independently.
- ▶ **EMPLOYMENT** - Persons with disabilities will have meaningful access to integrated employment and be paid at least minimum wage.
- ▶ **SUPPORTED DECISION-MAKING** - With needed supports, individuals with disabilities will be able to make everyday decisions about their lives, including matters related to where they live, how
- ▶ **EDUCATION** - Youth with disabilities will be provided a free appropriate public education in their least restrictive environment to move them toward independent living and, depending on their individual goals, secondary schooling or employment upon graduation.
- ▶ **VOTING** - Individuals with disabilities will be given equal opportunity to register to vote and to vote privately and independently.
- ▶ **STRENGTHENING PROTECTIONS FOR BENEFICIARIES OF SOCIAL SECURITY** - Individuals with disabilities who receive Social Security benefits administered by a representative payee

TBI Act and Protection and Advocacy

The Traumatic Brain Injury (TBI) Act was authorized as part of the Children's Health Act of 2000. Within the TBI Act, Congress created a Protection and Advocacy program for individuals with Traumatic Brain Injuries. This enables every state to have a Protection and Advocacy for Individuals with Traumatic Brain Injury (PATBI) program, funded at a minimum of \$50,000 per state. Funded by the United States Department of Health and Human Services, Administration on Community Living, TBI impacts individuals of all ages.¹

¹ National Disabilities Rights Network, 'Fiscal Year 2020 Protection and Advocacy for Individuals with Traumatic Brain Injury (PATBI) Appropriations Request and Justification', ndrn.org, (2019)

TBI and Advocacy

Individuals with a TBI have an array of advocacy needs including assistance finding, maintaining or advancing in employment, finding a home, accessing needed supports and services such as personal attendant services, assistive technology, and obtaining appropriate mental health, substance abuse, and rehabilitation services. Often these individuals, including returning veterans, are forced to remain in extremely expensive institutional settings far longer than necessary without the advocacy of the P&A agency.²

² National Disabilities Rights Network, 'Fiscal Year 2020 Protection and Advocacy for Individuals with Traumatic Brain Injury (PATBI) Appropriations Request and Justification', ndrn.org, (2019)

Legally Based Services

- ▶ Information, Referral and Technical Assistance
- ▶ Education & Training
- ▶ Individual Case Advocacy
- ▶ Investigation & Monitoring
- ▶ Individual and Systemic Litigation

Individual Case Advocacy

To be eligible for individual case advocacy services all four of the following statements must be true:

1. The individual with a disability must be eligible for services under one of ADAP's seven programs - PADD, PAIMI, PAIR, PAAT, PABSS, PAVA, and PATBI.
2. The individual's situation must involve the abuse or neglect of a person with disability, a violation of a right granted to a person because that person has a disability, or discrimination based on disability.
3. Accepting the individual's case for advocacy services will further one of ADAP's annual priorities.
4. The individual's situation meets other case selection criteria, which include such considerations:
 - availability of other competent resources to advocate on behalf of the individual (including the individual's ability to pay for other legal services, or the individual's ability to advocate on his/her own behalf);
 - whether there is a realistic prospect of success if the case is selected;
 - the extent to which the potential client will benefit from satisfactory resolution of his/her case;
 - the likelihood of a favorable impact on the legal rights of other individuals with disabilities;
 - The availability of agency resources.

Investigations

What do we investigate?

- ▶ Abuse and neglect
- ▶ Serious injury or death
- ▶ Inappropriate treatment planning
- ▶ Financial exploitation
- ▶ Involuntary medication
- ▶ Personal care issues (food, shelter, clothing, etc.)

Where do we investigate?

- ▶ Group homes
- ▶ Hospitals
- ▶ Jails & prisons
- ▶ Nursing homes
- ▶ Residential facilities
- ▶ Sheltered workshops
- ▶ Schools

Case Example

Angie, a 16 year old girl residing in a psychiatric residential treatment facility, was struck 22 times in the head and kicked in the head during an altercation with a peer. Staff failed to intervene during the violent altercation. Direct care staff provided the teen first aid to treat the teen's busted lip and sent her to bed. Staff failed to notify the facility nurse and failed to document the incident. The following day, the teen complained of a headache, neck and head pain. The teen was subsequently transported to the ER and diagnosed with a concussion without LOC.

A review of Angie's history indicates she was involved in 6 physical altercations at this facility, 5 involving head and neck injuries, and 2 requiring emergency medical treatment at the hospital. The facility had in place no concussion prevention and identification policy or protocol.

Monitoring

What is monitoring?

Activities in which ADAP evaluates compliance issues and quality of service by providers of services, supports and other assistance.

Where do we monitor?

- ▶ Group homes
- ▶ Hospitals
- ▶ Jails & prisons
- ▶ Nursing homes
- ▶ Residential facilities
- ▶ Sheltered workshops
- ▶ Schools

Alabama County Jail



Monitoring in PRTFs and TBI Screening

- ▶ In 2016, the P&A completed 50 random TBI screenings while monitoring in psychiatric residential treatment facilities (“PRTFs”), using the OSU-TBI Identification Method.³ Twenty-five of fifty youth screened reported injuries resulting from exposure to head or neck injuries with interpretive findings suggesting these children may be more likely to have ongoing problems as a result.
- ▶ In 2016, only 1 of 19 PRTFs had in place a concussion prevention, identification and treatment policy and protocol.
- ▶ PRTF staff are not routinely provided education and training specific to TBI prevention, identification and treatment.
- ▶ Direct care staff are provided little to no information about a resident’s disability. The majority of incidents, resulting in serious injury, occur during weekends when most professional staff are absent and access to medical care is limited.
- ▶ Approximately 95% of children residing in PRTFs are in DHR custody, many having been removed from abusive homes where they were exposed to violence.

³ Corrigan, J.D., Bogner, J.A., Ohio State University TBI Identification Method, (2007)

Types of Providers & OSU-TBI Identification Method

- ▶ Psychiatric Residential Treatment Facilities (PRTFs)
- ▶ State Operated Facilities
- ▶ Jails & Prisons
- ▶ Schools
- ▶ Nursing Homes
- ▶ Group Homes
- ▶ Juvenile Justice Facilities

Individual Advocacy

Children's Team

- ▶ Assistive Technology
- ▶ Community Placement
- ▶ Foster Care (PRTFs)
- ▶ Guardianship
- ▶ Juvenile Justice
- ▶ Special Education & Section 504

Community Access Team

- ▶ Assistive Technology
- ▶ Discharge Planning
- ▶ Home & Community Based Services
- ▶ Medicaid Managed Care
- ▶ Veterans Services
- ▶ Work Incentives/Employment

Children's Rights Clinic



Why Does Disability Matter?

- ▶ Each year, more than 600,000 youth in America are placed in juvenile detention centers, and close to 70,000 youth reside in juvenile correctional facilities on any given day.⁴
- ▶ Youth in the juvenile justice system experience mental health disorders at a rate that is more than 3 times higher than that of the general youth population.⁵

⁴ Abram, K., Teplin, L., Charles D., Longworth, S., McClelland, G., & Dulcan, M (2004). Posttraumatic stress disorder and trauma in youth in juvenile detention. *Archives of General Psychiatry* 61 (4): 403-410

⁵ Merikangas, K.R., He, J.P., Burstein, M., Swanson, S.A., Avenevoli, S., Cui, L., Benjet, C., Georgiades, K., & Swendsen, J. (2010). Lifetime prevalence of mental disorders in U.S. adolescents: results from the National Comorbidity Survey Replication—Adolescent Supplement (NCS-A). *J Am Academy Child Adolescent Psychiatry* 49(10):980-9.

Over 60% of youth with a mental health disorder also have a substance use disorder; and

Almost 30% of youth have disorders that are serious enough to require immediate and significant treatment.⁶

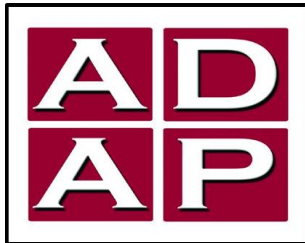
⁶ Shufelt, J.S. & Cocozza, J.C. (2006). Youth with Mental Health Disorders in the Juvenile Justice System: Results from a Multi-State, Multi-System Prevalence Study. Delmar, NY: National Center for Mental Health and Juvenile Justice.

Negative Affects of Placement on Youth with Disabilities

- ▶ Programming Lacks Developmental Components
- ▶ Standard Therapies Not Normed
- ▶ Exposure to Negative Role Models
- ▶ Exposure to Violence

Questions?

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