



Disability Rights Ohio is a non-profit organization with a mission to advocate for an equitable Ohio for people with disabilities.

Every year, we seek community input to focus our advocacy on issues of the highest importance to Ohioans with disabilities and strategies where we can have the most effective impact.

Through hundreds of surveys completed by Ohioans with disabilities - including more than 200 from people living in facility settings, and input from our PAIMI Advisory Council, Board of Directors, and community members, these new goals and objectives have been informed by the lived experiences of advocates statewide.

1. Strengthening and expanding the community mental health service system.

The community mental health system in Ohio is broken, underfunded, and fragmented, with gaps in critical services and supports, including housing, peer support services, employment, and education. Harmful outcomes occur as a result, including long-term institutionalization in highly restrictive, isolated nursing facilities; involuntary psychiatric hospitalization; interactions with law enforcement; incarceration in prisons and jails; and homelessness. Historically marginalized communities suffer the most from these system failures. DRO will:

- Continue collaboration with the Ohio Department of Mental Health and Addiction Services and other stakeholders to implement a pilot program in one or more counties in Ohio. The purpose is to evaluate and advocate for long-term, statewide solutions to address widespread and pervasive segregation of people identified as having serious mental illness—some of whom also have traumatic brain injuries— in nursing facilities across the state, and the lack of adequate community supports, housing, and transition and diversion services for this population.
- Engage in systemic and individual advocacy for people with mental health diagnoses and traumatic brain injuries who are in nursing facilities where they face a lack of recovery-based supports as preparation for transition to community living and an improper reliance on locked behavioral units within these facilities.
- Engage in systemic advocacy to strengthen and expand voluntary, community-based mental health services to prevent law enforcement interactions and involvement in criminal legal systems for people with mental

health labels, particularly people of color who are disproportionately affected by these punitive outcomes.

2. Improving access and quality services for kids with behavioral health needs.

Kids with behavioral health needs across Ohio are too often separated from their families and communities, sometimes segregated in youth residential treatment facilities or in foster care systems or both. Many suffer from abuse and neglect by those entrusted to support them. And many are involved in the juvenile justice system, or are experiencing regression in their development or other harmful outcomes. These result from long-standing problems in service systems that should be protecting and supporting kids. To address them, DRO will:

- Monitor implementation of the state's new OhioRISE Medicaid program for kids with behavioral health needs, and engage in systemic and individual advocacy regarding adequate capacity for community-based services, to avoid custody relinquishment or foster care placement or institutionalization, and to ensure compliance with federal Medicaid EPSDT standards under this new program.
- Relatedly, engage in individual and systemic advocacy for kids with behavioral health needs in Ohio's foster care system who endure institutionalization, hospitalization, family separation, and multiple placements and resulting trauma, as well as racial disparities from these harmful outcomes.
- Monitor youth residential treatment facilities and juvenile detention facilities to address instances of abuse, neglect, and exploitation and to inform broader strategies for expanding and strengthening community services.

3. Supporting disabled people to participate in advocacy and policymaking to address major, systemic issues that directly impact their lives, like the direct care workforce crisis in Medicaid-funded waiver programs.

The most effective and powerful movements are led by people who are directly impacted by the oppressive, harmful outcomes of failures in systems. One of the biggest issues facing disabled people in Ohio is the direct care workforce crisis. Tens of thousands of disabled Ohioans rely on paid providers —home health aides, personal care aides, nurses — to meet their needs so they can live in their own homes in the community. However, low wages and high turnover have long been a reality for this workforce, which is disproportionately women of color. The

COVID-19 pandemic has severely worsened this crisis, causing more people to be segregated in, or at risk of admission to, institutional settings, and adversely affecting their quality of life. The solutions are clear, but the path to fixing this crisis will not be easy.

Disabled people must be at the center of all policies and systems that impact their lives; we must listen to their ideas, their perspectives, and their experiences and allow them to lead. We know that accessibility barriers, ableism, and other systemic obstacles prevent or inhibit people's participation in advocacy more broadly, in their engagement in policymaking, and in having the autonomy to make their own decisions about their lives. And we know that intersectional approaches are needed since disabled people in other historically marginalized communities often endure additional challenges and injustices.

To address these serious problems, DRO will:

- Implement strategies to center the lived experiences of disabled people and ensure meaningful representation in policy and legislative forums, particularly the direct care workforce crisis but also in other areas that directly impact their lives, and continue advocacy for increased investments in systems that fund home and community-based services.
- Support and collaborate with disability-led organizations and groups, like Breaking Silences Advisory Committee, the Ohio Olmstead Task Force, and the centers for independent living.
- Advocate to make full accessibility the norm in spaces where advocacy strategies are discussed, debated, designed, and implemented, and in policymaking realms where ultimate decisions are made.
- Develop opportunities for communication and collaboration between advocacy groups, organizations, and individuals, particularly where the disability perspective is missing or diminished, and aim to build relationships and intersectional strategies.
- Monitor, educate, and inform policymakers, organizations, and advocates on federal and state legislation and regulatory changes that impact on the rights of disabled people, including access to voluntary, non-coercive mental health services and adequate funding for special education services, housing, and transportation.
- Evaluate strategies and engage in systemic advocacy for foster care youth and alum, immigrants and refugees, those with limited English proficiency, and

other historically marginalized communities to address challenges in gaining eligibility for services (particularly because of the lack of childhood records) in the developmental disabilities system.

- Evaluate strategies and engage in systemic advocacy to ensure culturally and linguistically competent community mental health services for foster care kids, immigrants and refugees, those with limited English proficiency, people who are deaf, and other marginalized communities.
- Participate in the Supported Decision-Making Network of Ohio, along with other advocates and stakeholders, as part of the movement away from adult guardianship systems, which take away people's rights to make decisions about their lives, and toward supported decision-making systems that offer respect and dignity and personal autonomy.

4. Increasing positive educational outcomes for students with disabilities.

Students with disabilities need special education and related supports to benefit from school and receive a free and appropriate public education. Numerous barriers to the provision of appropriate services exist that negatively impact students with disabilities, especially kids of color and kids in rural Ohio. Issues like the overuse of discipline, unnecessary segregation in special classrooms or schools, the lack of behavioral health programming, and the lack of attention to literacy, all lead to the underachievement of students with disabilities compared to their nondisabled peers.

To ensure these and other barriers to a free appropriate public education are reduced or eliminated for Ohio's children with disabilities, DRO will:

- Provide general information and advice and conduct trainings on rights and remedies to students with disabilities, parents, and families, including regularly-held legal advice clinics.
- Engage in systemic and individual advocacy to address inadequate access to programming and individualized educational services (such as school-based mental health services and positive behavioral interventions and supports), the use of seclusion and restraint, the use of discipline (suspensions, expulsions), the use of school resource officers, the school-to-prison pipeline, and the existence of racial disparities in these categories.

- Monitor implementation of the *Doe* settlement agreement and collaborate with community organizations to improve outcomes for students with disabilities.
- Provide short-term assistance or individual advocacy, as appropriate, on special education issues to the students, parents, and families in the eleven *Doe* school districts and the special education fellowship counties.
- Provide short-term assistances to students who need assistive technology or other access to programming, or who have language barriers or communication needs.
- Engage in policy advocacy and work with the Ohio Department of Education and other stakeholders and advocates to ensure access to necessary special education services and related supports and a free and appropriate public education.
- Provide self-advocacy materials and resources, conduct trainings and outreach, and engage in individual and systemic advocacy for transition-age kids and their families, with a focus on access to integrated, competitive employment and vocational rehabilitation services.

5. Promoting equity and increasing positive employment outcomes for people with disabilities to prepare for, enter, or remain in the workplace.

Many people with disabilities want to work, but face barriers, like discrimination, an employer's refusal to provide reasonable accommodations, inaccessible work places, insufficient adaptive technologies, unavailable services to prepare for work, and, if hired, the loss of essential benefits and medical insurance. Ohio's vocational rehabilitation system is an important resource for many people, but too frequently there are obstacles in the way. DRO will:

- Continue work on the Seneca Re-Ad litigation to ensure the rights of individuals working in non-integrated work environments are protected, including minimum wage and reasonable accommodations necessary to eliminate discrimination. This includes continued representation of three clients in defending against appeal of federal administrative proceedings, enforcing their Fair Labors Standards Act rights in federal court, and litigating their Americans with Disabilities Act claims against their employer, workshop and the county board of developmental disabilities.
- Provide benefits counseling under the Work Incentives Planning and Assistance program within our northern and western county area in Ohio,

using the priorities set by the Social Security Administration (including a focus on transition-age youth and veterans), and referrals from the Ticket to Work helpline and Opportunities for Ohioans with Disabilities.

- Provide short-term assistance, including legal information and referrals, on employment discrimination issues in which an employer has denied a person reasonable accommodations for their disability that would enable them to do their job.
- Provide short-term assistance, including legal information and referrals, for disputes with the Social Security Administration involving overpayments that are work-related and that are a barrier in securing, maintaining, or regaining employment.
- Participate in the task force led by Ohio APSE and People First of Ohio to advocate for elimination of 14(c) sub-minimum wage certificates in Ohio and conduct outreach and center the experiences and perspectives of disabled people.
- Participate in the State Rehabilitation Council (SRC) to monitor and partner on the activities of the state vocational rehabilitation agency, Opportunities for Ohioans with Disabilities, and as a designated member of the SRC, attend meetings and identify opportunities to advocate for policies and procedures that comply with federal law.
- Review and, when appropriate, submit comments and engage in advocacy on new or proposed changes to administrative rules, policies, procedures and Ohio's state plan governing its vocational rehabilitation and independent living systems.
- Assist with issues or problems in accessing vocational rehabilitation services or independent living services by providing self-advocacy assistance, information, advice, negotiation, and, when appropriate, advocacy within the administrative hearing process.
- Address blanket denials by Opportunities for Ohioans with Disabilities through individual advocacy or litigation where services are denied without individual analysis or because of policies that conflict with federal law. This includes situations where the state denies a service on the basis that it does not cover that category of service, or denies a service without determining eligibility for the service based on the individual need or ability of client (e.g., service is denied based on type of disability instead of the client's abilities).

6. Protecting people with disabilities in facilities from abuse, neglect, and rights violations.

Many people with disabilities are segregated in facilities and other institutional settings across Ohio, and are too often subjected to abuse, neglect, exploitation, and rights violations in these settings. Race, gender identity, and other personal characteristics add more dimensions to people's experiences in these settings. Isolation is common, and many people lack connections to resources in the community or advocacy services and are not aware of their rights. The state's longstanding overreliance on institutional care has long been a serious concern in Ohio.

Furthermore, people with mental health labels are incarcerated in jails and prisons at overwhelmingly disproportionate rates, an illustration of broader failures in the community mental health system and the criminalization of mental illness. Racial disparities persist. Jails and prisons too often fail to provide critical mental health care and treatment to people incarcerated in their facilities, particularly suicide prevention. And many people in prisons and jails who have hearing or vision impairments often do not have access to effective communication and assistive technology so they can raise concerns, request services, or file grievances. Finally, many people incarcerated in state prisons who have reached the end of their lives due to a terminal illness or a serious medical condition sadly do not die with the dignity and respect all people deserve.

DRO will:

- Monitor state-licensed, segregated residential facilities, with a focus on facilities where many people with mental health diagnoses are (nursing facilities, private and public psychiatric hospitals, adult residential facilities, jails and prisons), where many kids with behavioral health needs are (youth residential treatment facilities, juvenile detention facilities), and where many people with intellectual and developmental disabilities are (state-operated developmental centers, private intermediate care facilities). DRO will also identify trends in specific facility-types and develop systemic advocacy strategies accordingly.
- Through our monitoring activities, DRO will provide information to people about their rights and available resources, including the protection and advocacy system; monitor compliance with respect to the rights, safety, and needs of people with disabilities, including knowledge and awareness of their community service options; and reduce the isolation that residents of

- facilities typically experience, especially those who do not speak or speak only a few words, use a communication device or use gestures to communicate.
- Evaluate and implement systemic advocacy strategies, in partnership with other advocates and organizations, for LGBTQIA+ kids in residential facilities to ensure compassionate, empathetic, anti-oppressive, anti-racist, trauma-informed treatment and supports, recognizing that ultimately kids belong in family-like, community-based settings.
 - Investigate allegations of abuse and neglect and exploitation in a variety of state-licensed or state-operated segregated settings where necessary to ensure systems and service providers are held accountable, policy changes are made, and individuals with disabilities are safe. Suspicious deaths, serious injury resulting in hospitalization, restraint and seclusion that is frequent and reoccurring or for long periods of time, and sexual abuse and human trafficking will be prioritized, particularly those allegations in which race, gender identity, or other intersections are also present.
 - Engage in systemic and individual advocacy for people in jails and prisons who are experiencing suicidal ideations or who express a need for or problems with the conditions of suicide observation.
 - Engage in systemic and individual advocacy for people in prisons whose medical conditions or disabilities require end-of-life care and compassionate release to die in dignity.
 - Engage in systemic and individual advocacy on issues of effective communication and access to assistive technology for people in prisons or jails to ask for services or raise concerns, to access medical and mental health services, and to talk safely to an attorney and visitors.

7. Ensuring voters with disabilities have equal access to voting systems and the information and resources they need to enforce their rights.

Many voters with disabilities have questions about their rights, how to register to vote, the different ways of casting a ballot, or may need advocacy or resources to ensure they can vote. People with disabilities incarcerated in county jails, in particular, face systemic barriers that make registering to vote and casting a ballot exceedingly challenging or even impossible. For the November 2022 mid-term elections and beyond, DRO will:

- Operate a voter hotline on Election Day to answer questions and provide information and referrals, short-term assistance, and legal advocacy.

- Engage in advocacy to improve accessibility of voting systems for people incarcerated in county jails through Ohio.
- Engage in policy and legislative advocacy to protect the right to vote for people with disabilities.

8. Implementing Social Security representative payee review program.

- Review at least 153 representative payees in FY 2023, as well as engaging in Quick Reviews and other activities, like assistance in implementing corrective action plans, as needed to implement the representative payee grant.
- Conduct outreach to places where Social Security beneficiaries receive services.
- Make referrals to outside programs as well as other protection and advocacy programs to address problems identified during reviews, including collaborating with DRO's abuse and neglect team for referrals of abuse or neglect and conditions issues.

9. Assisting people with disabilities to advocate for their rights.

DRO has limited resources and cannot meet all of the advocacy needs of people with disabilities and their families across the state. To maximize our ability to assist people with disabilities to advocate for their rights, DRO will provide short-term assistance and advice, information and referrals, and self-advocacy materials on the following issues:

Housing discrimination, including a landlord's refusal to provide reasonable accommodations (like service animals, emotional support animals, accessible parking) or to allow reasonable modifications (physical modifications to one's dwelling) that have a significant impact on one's ability to use and enjoy their home, do daily tasks, have their needs met, or be integrated in their community.

Access to services for adults with intellectual and developmental disabilities, including home and community-based waiver programs and the waiver waiting list assessment process, and eligibility for services in the developmental disabilities system.

Access to programs and services of places of public accommodation and private businesses, as well as government or public buildings and programs, and refusal

to provide reasonable accommodations in these settings. This also includes accommodations for post-secondary course work or tests and examinations.

Access to Medicaid services or equipment, where a denial causes a significant and negative impact on one's health and safety, independence, and community integration.

Rights within the guardianship process, including circumstances where a person is wrongfully denied legal representation at a probate court hearing, denied notice of a hearing or the right to attend, or denied the right to an independent evaluation; where a person's attorney requests technical assistance on disability rights issues; or where a person needs advice on supported decision-making and other less restrictive alternatives to guardianship or wants to terminate their guardianship.

Access to assistive technology, the lack of which causes a significant and negative impact on access to programs, services, housing, transportation, or medical care.

The level of short-term assistance and advice depends on a number of factors, including:

- whether there is legal merit (meaning the facts and law support what the individual wants);
- whether the type of issue and the individual's situation is able to be resolved with short-term assistance; and
- whether DRO has the necessary resources (attorney time, funding grant resources, etc.).

There are many types of requests for advice and assistance where DRO does not have the staff resources to provide any individualized help at all. For those requests, DRO will develop plain language fact sheets, general information in multiple formats, or lists of referrals and resources to provide to people. Generally, this will include requests in the following areas, though this is not a complete list:

- Eligibility for Social Security disability insurance or Supplemental Security Income benefits;
- Veterans benefits;

- Victims of crime services;
- Other abuse, neglect or financial exploitation by a service provider or guardian, not covered above;
- Parental or custody issues;
- Evictions or general landlord-tenant issues;
- Housing discrimination where a request for reasonable accommodation has not yet been made, or where only general information on reasonable accommodations is needed;
- Complaints about one's current attorney;
- Criminal or forensic matters;
- Nursing facility discharge issues or complaints;
- Employment discrimination where the employee has already been terminated;
- Other prisons or jails issues not covered above, including where a person incarcerated in a prison has concerns about general medical care, insufficient mental health care or treatment, or ineffective communication;
- Complaints or questions from people in mental health facilities, including those involving voluntary or involuntary admissions to psychiatric hospitals.

10. Taking necessary steps to enforce DRO's statutory access under federal and state law to facilities, individuals and their records.

As the protection and advocacy system for Ohio, DRO has federal and state authority to monitor any facility or service provider in the state providing care or treatment to individuals with disabilities, or to investigate incidents of abuse and neglect of individuals with disabilities. DRO will enforce this access authority when necessary to fulfill its role as Ohio's protection and advocacy system.

11. Conducting outreach and training to people with disabilities, their families and advocates, with a focus on reaching underserved communities and diverse populations.

DRO is committed to reaching historically underserved communities and diverse populations. DRO will implement a culturally and linguistically competent communications and outreach plan to accomplish this goal.