

REALTIME FILE

NDRN-Addressing the Needs of Formerly Incarcerated People

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>> Philip Fornaci: Good afternoon or good morning to those on the West Coast. My name is Philip Fornaci. I'm a senior staff attorney at NDRN. I'm a white male, bald headed in a coat and tie today. Today, welcome to this webinar, which is Addressing the Needs of Formerly Incarcerated People with disabilities. I'm joined today by Heather McKimmie Director at the avid program, amplifying voices of incarcerated people with disabilities. Also joining today, by Robert Davis who is with the D.C. P&A. Robert is with the D.C. prison and advocacy jail project and he is a reentry level advocate. This is the first of three webinars on the topic of reentry for formerly incarcerated people with disabilities, this will introduce you to the program and they focus on reentry issue, although from slightly different angles.

The second webinar will be next week, November 3 at 2:00 P.M. will focus on employment, financial planning and public benefits and issues around supervision and other reentry matters. That will be next week on Wednesday, November 2. The third and final part of the series will be the following week focusing on housing for people with criminal records that will be at 2:00 P.M. Eastern time. The third webinar will be focused on legal advocacy and legal strategies around that issue of housing and a criminal record.

So, I hope you will be able to join us for all three sessions and ask questions of our expert presenters, but we will have recordings if you can't participate, but it would be great to have you on live. Our goal to discuss the needs of people with disabilities who experienced incarceration, a more significant goal for all P&A staff to recognize incarceration is, unfortunately, not an uncommon experience for people with disabilities in our community, particularly for black and immigrant people with disabilities. We know the prisons are in proportionated with people with disabilities and the disability is why they ended up behind bars to begin with, but it is difficult to develop programs responsive for people with disabilities with a criminal record and history of incarceration.

As prison reform advocates have been preaching for many years and now prison jail officials report this is their mantra, it starts with the first day of incarceration. Incarcerated people, particularly incarcerated people with disabilities require new work skill, get an education, learn how to address issues that resulted in their incarceration and prepare for a life beyond prison before they leave. Unfortunately, the rhetoric of reentry starting on the first day of incarceration is mostly an aspiration. Most prisoners do not learn new skills or gain an education while incarcerated, most do not address the factors that led to incarceration, and few are learning how to integrate back into society when they get released unless they are self-motivated to or have help from the outside or both.

As Heather will describe prisoners with disability, particularly those with psychiatric disabilities endure extraordinary abuse and other traumas while incarcerated and little reentry planning tends to happen. Heather will describe this in more detail, but most incarcerated people with a disability are released quickly into a community where resources are in short supply and navigating services is complex. This is why the work of the D.C. jail and prison advocacy project is so essential. Robert will describe that project, as well as his own journey getting into this work. So, we hope the webinars will provide you with useful information, but also give you some ideas for how your P&A can become more involved in providing services for people with

disabilities who have been incarcerated, as well as the people with disabilities who are currently incarcerated. We know P&A have many competing priorities, it is important to understand what a profound impact incarceration can have on so many members of society and with that, I will turn it over to Heather and you can start the PowerPoint. Thank you.

>> Heather McKimmie: Thanks, Phil.

>> Heather McKimmie: Thank you. I'm a white woman in my 40's with light brown hair and wearing a bright pink sweater and a black headset. Just a moment while I -- here we go. I'm an attorney. I have been part of the P&A network since 2009. I was involved in the legal services as a public defender before that and I am a member of the prison and jail advocacy rights team here in Washington. I think we can move the next slide.

And to one more, I just did that slide. I'm excited to see names I recognize in the audience, too. I wanted to say that. Just a quick overview of today's presentation, I'm going to talk about what reentry means to our program, what AVID is and what we do. I will describe common reentry issues for people with disabilities and some of our strategies that we've done related to reentry advocacy. Next slide.

So, what is reentry? Transition from life in prison or jail to life in the community. I think a lot of folks think of reentry that way. You have to plan for services like housing, finances, health care, and community support before reaching the community it. As Phil was mentioning that planning for reentry should start as soon as possible. Waiting for two weeks before someone leaves a facility or prison will not have a successful reentry. I think of it as a way to work to get to a place of safety and not think about one might happen after they are safety, such as expunging a record and paying off debt. I think we have a poll to get a sense of where folks in the audience are. Phil, I think you are on mute.

>> Philip Fornaci: Sorry, does anyone in your P&A work on reentry issues? That is transition from life in prison or jail to life in the community, it is a simple yes or no. And it looks like it is about 57% yes that does some reentry work, 48% no, so about 50-50.

>> Heather McKimmie: Good to know. Hopefully are new ideas for folks who can do this and those who are not currently working on these issues. Our program stands for amplifying voices of incarcerated individuals with disabilities and there is a photo on this slide that is two orange doors in a prison in Washington State. One of them has a hearing-impaired sign on it and one of them has a cat, I think the person was part of the cat program, it shows what one of our prisons looks like.

We use our access authority to amplify the voices of what people who are incarcerated want, we take the conditions that they live into the administration of the prisons and their ideas, most importantly, how their ideas on how to solve the problems. This program focuses on prisons and jails and what we call in our state the special commitment center, which is a civil commitment facility for people who have been deemed sexually violent predators, although it is a civil commitment facility, we do work in that location also. We have four attorneys on our

team, and we work with law student, at least one is in the audience today.

Not all P&A's use their powers in the prisons and jail, but we think these issues are on the forefront of disability rights and Disability Justice. I think lot of people took sessions around Disability Justice or know about Disability Justice. The principles around Disability Justice, we won't get into all of them today, but looking at the whole person and leadership are the most impacted. When you look at those and the other Disability Justice principles and try to apply them to the work that P football A's do, we think it can lead you towards gravitating towards populations with disabilities, because those are the folks who are most impacted and within incarcerated populations, you can get down to subsets of the populations of those incarcerated folks who are most incarcerated like the black and indigenous folks who are overrepresented in our system. We work with transgender folks in our systems and people with intersecting identities who are impacted negatively by the prison system.

As our team have been working towards a Disability Justice framework and how we do our work, that means a move towards de-incarcerating and abolition, so it has been difficult to respond to the difficult conditions and reentry issues can get to the some of the -- reentry work can work towards those issues as you work to get folks out of the prison systems safely. Next slide, please.

How we get our information is how do we decide what we work on is similar to most P&A's, there is an image on this slide. It is an image of folks sitting inside of a Washington state jail. It is a two-story jail. It has the spider table, the stools are attached to them and in the left-hand corner, you can see a room where there would be indirect observation of the unit, so people up in a watchtower watching what the unit is doing.

So, we talked to thousands of people in jail over the last 10 years in our program and heard common themes around what issues with reentry are. We monitor, and do investigation, individual or systemic related to the issue, like any P&A would do on an initiative that you're looking at. We helped establish an Ombuds office for the prisons in our state and they write reports, and they can be helpful to give us more information around what some of the issues are in our state.

The next slide. So, we will go through the common reentry issues for people with disabilities, this is what we see in Washington State, but I think are likely in all states. They are mostly focused on the prisons. The jails tend to be -- run by counties or municipalities and they have very few reentry resources compared to the prison system, unless you are in a well-resourced community, so these issues are mainly issues related to prison system. Before I get into these - going through each of these issues one by one, I want to talk a little bit about how incarceration itself is cause disability and harm and trauma and as Phil mentioned earlier, I think folks who work in prisons know a majority of folks in prison have some kind of disability or may get one while they are incarcerated, so any general issues we work on to help get folks out of prison generally helps people with disabilities. We have been doing a lot of work related, again, to de-incarcerating folks, shortening people's sentences, knowing the general work will be helping folks with disabilities.

So, the first issue here about common reentry issues is people with disabilities often serve longer sentences, which is a barrier to reentry when they are disproportionately spending longer time on their sentences in prison and there are a lot of reasons why people with disabilities might serve a longer time. A lot of the people we work with have significant disability related behaviors that land them in solitary confinement. In our state, when you are in solitary confinement, you lose good time, which makes your sentence longer than if you were not in solitary confinement. Another way you can serve longer if in the program, you don't get an accommodation for programming, which may mean you get kicked out of the programming and that may mean you're serving a longer sentence. Another common thing we hear about, is folks with disabilities having difficulty getting an approved address and that can be for a variety of reasons. One of the ones I think is most easy to understand is if you use a wheelchair and you need an accessible house and finding that accessible house is harder to find than a non-accessible house. Because your address has not been approved by the prison, you stay in prison longer, so in our state, we have earned release date, but we also have maximum release dates. If you don't have your address approved after release date time, you will stay until the address gets approved and may stay until your max date, so we see that happen.

You also, in our state, we don't have a parole system, but we have something sort of similar called the in detainer review board and you're not entitled to a lawyer, so if your disability is impacting your ability to represent yourself in front of those hearings then that will result in a longer sentence.

The second one here that people with disabilities may lack access to lowest custody settings, so folks who work in prison know there are different levels of custody, there might be a maximum custody. In our state, we have close custody, which is the next step down, you get more time out of your cell and it goes down to medium or minimum and then there is work release and other type of things. Your disability may be a barrier for you accessing those programs. These are Washington-specific example, sometimes only certain minimum custody facilities have a pill line, so if you take medication, you may not be able to go to the minimum custody facility, because they can't distribute the medication to you, and you can't keep it on your person. It will set you up for success closer to release. We used to have a work release in our state helping people with mental health conditions and with budget cuts that shutdown, so the pathway to get to work release or that lower custody setting was harmed because of that closure. In our state just instituted a graduated reentry program that was intended to get more people out of custody sooner, but we were hearing reports that folks with mental health conditions were not being screened for eligibility for that, so even though there might be programs that sound pretty good, folks with disabilities may not be able to access those programs.

And so, the big one, I put here is lack of connection to services and that was just kind of encompassed everything. When somebody is about to get out, you need to be able to connect to money, housing, health care, job, all of those type of supports that will help you be safe and successful in the community. In Washington State, there is not a good way to connect to Social Security benefit, so if you had Social Security benefits before you got into prison and they were

cut off, so there is a lag for some people for months or longer and we have been trying to work on this for our state far long time and have not had cooperation from Social Security. Maybe states have figured this out, but it is not our state.

Our health care is set up pretty well, but transition to getting your health care benefits set up can be a problem. Ours is pretty seamless at this point, at least for Medicaid. Getting connected to health care may be a problem. Housing is a problem, the people I'm living with are not healthy for me or my disability is such that this housing is not going to work and if they leave the housing situation means they will come back to prison. Lack of appropriate housing and housing that people want to stay at is an issue.

Sometimes folks may release homeless, too. If our state, if you don't have a requirement of supervision by the community supervision, probation officers or however other states call them, they don't have to find you an address, so you may release homeless, and the prison is OK with that. There are other things like jobs and supports and if you have a disability, you get your wheelchair, what about other devices that the prison has given you, do you have access to your medications once you release? So, those are all I describe as lack of connection to services but are quite a lot of different issues.

Another thing that happens as discriminatory community supervision, when folks get out there is a relationship where someone is being monitored by some prison staff in our state, it is called community custody. There is a lot of things that can go wrong with that process that are related to disability. In our state, there are special needs units designed to be working with folks who have disabilities, so one issue, you may need that unit and you're not assigned to it. That is a problem. The unit themselves, we get reports they are not accommodating folk, they are violating people for breaking the rules, so people with disabilities are turning in and out of jails or prisons and I talk to staff who don't understand the basic service of social service systems or accommodations. This is an issue that we haven't dug into real specifically, but I bet if we did, we could find all kind of A.D.A. violations.

I want to say a couple of things about special issues for transgender and nonbinary folks. We do a lot of things with trans and nonbinary folks in our program, as we identify them as some of the most impacted people in our facilities. We are working on a negotiation with our state prison system about some issues and some of these reentry issues have come up. How are folks connecting to safe housing that are appropriate for their gender and aren't being discriminated against? How much information is shared when people are releasing to housing providers that would not allow them to discriminate against trans people. Folks may have had a legal name change and if the check is issued to their wrong name or identification is wrong, all of those things can be a barrier when someone gets out and trying to get access to benefits.

So, I think now, that was a lot of information, we have a poll to see where folks who work on these issues, what are the things that you're hearing about. The poll will come up now.

>> Philip Fornaci: So, the question, if you do reentry work now, what issue do you hear about more often? What feels the most urgent to address? People with disabilities serving longer

sentences. People with disabilities lack access to the lowest custody settings, people lack connections to services, including housing or discriminatory supervision. You have to choose just one.

>> Heather McKimmie: I'm not surprised so far.

>> Philip Fornaci: Looks like it is a lack of services.

>> Heather McKimmie: Also, the most complicated to address. I think Robert may talk about it a little bit, too.

>> Philip Fornaci: Yes, thank you.

>> Heather McKimmie: So, the next slide. So, I thought I would go over some of the advocacy strategies that we have and then folks can ask questions or maybe we're saving them for the end, I'm not sure.

One of the things that we did, and we had a video team. I know not all P&A have video team, but we had a video team and funding, so we created a 30-minute documentary about what it is like to be a person with a disability who is trying to leave prison and what it looks like once you are released and the time after that. The video, we made in 2016 called "on the outs" and follows three people who are releasing. If you haven't seen it or I don't want to spoil it too much, but it does not go too well for most people, not surprisingly. This was when we were pretty involved with folk, things were still not -- we had to interject pretty strongly to get basics set up.

We did a screening with the community and the department of corrections folks, and it is a good tool to use to get the visual out there of what this means as an advocacy tool, we didn't end up using it as much as I think we could have, I guess. I don't think what is shown in the video is not unique. It is not unique to just our state. I think having people to understand this is what we're talking about and what barriers there are for folks with disabilities can be use throughout the network.

We have advocated for individuals, I think some of the ones I can think of most specifically, our state has an extraordinary medical placement statute. Some people call it compassionate release. It is for folks who may die in prison and why are we keeping these folks here. This doesn't make any sense. It is inhumane. We helped some folks get access to that system. Our state statute is so narrow in the exceptions for people to use this to release. We assisted some folks with it, but v always been working last year and this year to make the law broader, so there is not as many barriers there.

We have bun individual advocacy, related to solidarity confinement, trying to move people into less restrictive housing is a lot of what we have done that will, hopefully, let them have more success upon their reentry. We have done more systemic change. I mentioned some of these issues earlier. We tried to take action on them, so when we found out people with mental health conditions were not being screened for the re-graduated entry, the new program, we

asked the department to look into that and report back. We advocated for nursing staff in the lower custody settings, so our folks can access the settings. We've advocated for the abolition of solidarity confinement working on that last year and this year to get rid of solidarity confinement in states prisons, so the sentences would be longer hopefully, will be gone. We have done some work about programming accommodations, specifically in education. We had people not getting any accommodations for G.E.D. programming, so we got a law passed to help with that situation and raise that to the awareness of the department. Let's see, when we're doing these bigger negotiations or litigation, we're including reentry issues, like when I was talking about the barriers related to trans folks as they are leaving, we put r putting those things into our settlement agreements and things like that. I think that is all I got on this. Are we waiting for question, Phil?

>> Philip Fornaci: We'll do that at the end.

>> Heather McKimmie: OK. Thank you.

>> Philip Fornaci: The next slide has Heather's contact information. You all have the PowerPoints, you ought to have them now. So, I will turn it over to Robert Davis. As I mentioned is with the D.C. jail and prison advocacy project, disability rights D.C. and legal services. All of yours, Robert. We can get rid of the PowerPoint now. Thanks.

>> Robert: Thank you. Hello, everyone. My name is Robert Davis. I am an African American with dreads and a gray tee shirt, Star Wars tee shirt that is. And I just want to give you a little background right now.

Unfortunately, in 1995, I was incarcerated for 21 years, I think it was 21 years and for various things. I won't get into all of the foolishness, but I did manage to travel the world while I was incarcerated into California, Texas, I've been to about almost every USP in the United States, unfortunately. But I did manage to, in 2015, get released. In the beginning, I was sentenced to 22 to life in jail and after 21 years, I was able to see the parole board and actually make parole, which really, really surprised me. I thought I was going to be there for the rest of my life. I really did.

In 2015, I made parole and it was unexpected, so there I was like from prison straight to my mom's couch. I was on supervision, so when I came home, my supervision was, I think it was urine analysis once a week. I had a black box. It was very high level of supervision. Basically, my P.O. was like get your life together.

[LAUGHTER]

And as short of words those are, it was sort of the hardest thing in the world to do, because after doing 21 straight years, I was completely lost when I came home. I had no reentry plan before I was released, so I was just, you know, basically lost when I came home. But what I did do, I found an apprenticeship program ran by some good people at free miles book club here in D.C. I don't know if you have heard of free miles book club, but it is run by Tyra, Kelly, and some other special people.



They basically -- it is a 30-day apprenticeship program and I got into it when I was in the halfway house. So, I finished the 30-day apprenticeship program and they actually collaborated with flick shop's C.E.O. His name is Marcus Bullard. At that time, they came together, and actually helped me get a job after my apprenticeship program with a bank. That was my first job, and I worked. I worked. I stayed on my mom's couch. Took the metro, just tried to keep my head low.

Supervision wasn't the nicest thing to get along with. So, so, so many complex rules and they weren't user friendly, put it like that. But I stayed the course, stayed the course, I actually moved on from Jose Bank after three years and I started working for Catholic charities as a program assistant and I started working with the homeless and I started to give back. I had the opportunity to give back, give back to people. While I was working at Catholic charities, I realized a very big percent of the homeless population is returned citizens.

Maybe about November 2020, I was, you know, working constantly, I was early terminated off of my paper, Chicago was supposed to be on paper for the rest of my life, but like I said, my P.O. saw my hard work and requested that by early terminated and by the parole commission, it was granted. I am very grateful.

I moved on from Catholic charities and now, here I am, as a reentry advocate for university legal services, disability rights D.C. I think it might be time for a poll question, right now.

>> Philip Fornaci: Thank you. Charles, do you have the white board? So, now we're going to ask a question of you all and this is a fill in of whatever you want to put in. Based on your experience working with formerly incarcerated people with disabilities, what do you think is the single most -- I put single, but it can be as many as you want -- pressing service needs for people with disabilities in your jurisdiction upon release from incarceration. If you go the top of your screen, hit annotate and text. So, just type in. Whatever you think. If you can't figure that out, put your answers in chat.

OK, mental health services, employment, housing seems to be a popular one, including accessible housing and affordable housing. Mental health services, supported employment, mental health services, wraparound services, rehabilitation. Sounds like we're circling around a lot of the similar issues, particularly around housing and getting basic medical care, things like job, employment and general social services that people need. Thank you.

Robert is going to tell us what he does to help people get those things. We can take that off. Thanks.

>> Robert: Hello, everyone, again. Yeah, so here I am, reentry advocate since March of 2021. What I do, I basically provide reentry assistance for returning citizens with disability. First and foremost, I always try to remember what did I need when I came home, how did I feel, what help did I need, so what I did with my client, first, I have maybe about 17 clients at the time. Maybe six are currently incarcerated right now.

So, what I try to do is reach out if my client is incarcerated, I try to reach out, three to six

months before the client comes home. When I touch base with them, I first just try to figure out from them what is it that they want to accomplish when they come home. From what they tell me then we will try to, you know, put together a reentry plan that best fits the individual whether it's for, instance SSI benefit, so I can get a jump start on filing the paperwork and getting things together before they even reach, you know, being released. Also, some of the things we do, we help out with documentation, birth certificates, Social Security cards, guys coming home, it may be confined to D.C., but there is an I-code problem on the Medicaid that does not allow it to be used, because the I. stands for incarcerated or something, but they are not incarcerated any longer, but the I. is still there.

I work to get those removed, break down the barriers between my clients and inpatient treatment, if these are the things that are needed, I try to bridge the gap between my clients and their supervision. I also, one of the things I do before my clients come home is it connect them with the core service agency even before they come home. I like to maybe get a legal call with my client and then conference in the mental health hotline, so we can make an appointment for their first, you know, initial appointment with the agency before they come home, so my client knows that is important. Keeping them in line with their core service agency and case management, whether they have anything that's one of the most important things for us. I also do referrals; I help guys stay in school. I have purchased a phone for clients, food, gift cards, and the basis is this, to me, when I came home, there were three things that I needed they couldn't go without. I also see that in every client that comes home.

It's like employment, job, health care, everything else spins off of those three things and my goal is here at ULS is to offer help with all of these things, housing, reunification for families, everything, but it is all centered to me around helping guys get to their core service agency, so they can get rightfully medicated and help these guys get housing, as well as, helping guys find employments. I think those are the biggest three things. Right now, disability rights D.C. is doing it, in my opinion, they really give me tangible, tangible assets that I can help these clients out with. I can go see them while they are in jail. On the day they come home, I can be there to pick them up and take them to the halfway house or wherever they need to go, and I will be there. I answer the phone when they call. I take them to their appointments. It doesn't matter, but I think ULS is doing a great job.

We also have lawyers on staff that help us with litigation and stuff like that, but I think our reentry efforts are really, really centered around our clients and what our clients would really like to do with themselves, and I help them be the best guys they can be. I think that what reentry is all about, because that is what people help me do. And that's all I have for today.

>> Philip Fornaci: That's a lot. Thanks, Robert and thank you, Heather. Both of these programs, as I mentioned in the beginning are pretty extraordinary and not so common in the P&A world but are things that can be done and projects that can be started. One of the questions that has been coming up a little bit, more than a little bit around SSI and Medicaid and connecting people with that. If I can put her on the spot here now, we have in our group, Tammy Seltzer who runs a jail and prison advocacy program. Tammy, if you're listening, you may be able to give us a little bit of background on the process of getting someone

reconnected to SSI and Medicaid that Robert mentioned?

>> Tammy: Sure, you can put me on the spot, Phil. I put in the chat, as far as Medicaid is concerned in terms of state advocacy making sure that your state suspends benefits rather than terminates that is step one. Step two would be ensuring that your state has a process for automatically reactivating benefits for people whose benefits have been suspended, and also, a process for helping people while they are still incarcerated to apply before they come out of the jail or prison. And then in terms of benefits, SSDI is always suspended. It doesn't terminate when people are incarcerated, so that is a fairly easy process to make sure people have their release papers and their identification documents, so they can get their benefits restarted right away. SSI is more complicated after 12 months of incarceration. Your benefits are terminated, and when you reapply, it is as if you have really not applied ever before. It is not quite that bad, but it is. We have to explain to clients all of the time, they can't just say I had this before. You have to establish again that they are disabled, meeting all of the criteria under Social Security regulations for that and it can take a long time. So, I did put in the chat that people should consider prerelease agreements and you can do it by facility by facility or do it as a state. You can enter into an agreement with Social Security, so people in your correctional facilities can apply. In D.C., we can apply four months before someone is released and they can get a decision, although it is highly unlikely in most cases, but you get a decision sooner than if you started after somebody has released. I know P&A's usually can't help people with Social Security and those applications, but that is why we have a separate project with our own separate funding, so we're able to do that.

>> Philip Fornaci: Thank you so much, Tammy. Appreciate that. Both Heather and Robert mentioned issues around supervision, by the way, if you have not watched "on the outs" the video that Heather mentioned, the link was included with your registration. I suggest you watch it. It is a powerful film. I wonder if Heather or Robert are willing to talk a little bit about the hazards of supervision. That is a common way for people to end up going back to prison. You got out and here you are. Do you want to take a stab at talking about supervision and what that means, especially someone with a disability?

>> Heather McKimmie: You want to go, Robert? Yeah, go ahead.

>> Robert: Here at ULS, we have staff lawyers that actually kind of sort of deal with the ins and outs of individual supervision, but supervision is never easy. One of my biggest questions, you know, is what ultimately is supervision's goal to keep people out or send them back? It is never easy, but I tell my clients, if I can tell them, first off, I always tell them to ask for help. When you're dealing with your P.O., psychological for help, if you don't understand something, ask for help, ask the next person, call me, call -- get help. I had a P.O. tell me the other day, we don't pay for I.D.'s and I know you guys refer -- you guys have a referral letter that you attach to the fact sheet and the client takes the sheet and the referral letter to the D.M.V. and they give them a temporary I.D. This P.O. is adamant, we don't do that. We stopped doing that five years ago. I talked to the client. Calm down. I have this. Let me call his boss.

The key was asking for help, because if he didn't call me, if he blew up, you know, he didn't

listen or bump the I.D. or whatever, then we would not have an I.D. Supervision is always hard. I think that we have -- our staff is great dealing with supervision and its issues. I do think our staff is great with that.

>> Heather McKimmie: I think, from our perspective, from the legal perspective, supervision is just like life issues from all points. I discussed a couple of them in the presentation, but another one is that in our state there is a hearing that happens about a violation. Again, if you can't represent yourself in to hearing, there is supposed to be a process where maybe you get an attorney, but there are legal issues throughout. Should you -- were you accommodated in supervision such that you can follow the rules?

And then, if you are violated, can you defend yourself in the violation hearing, which is, you know, basically based on some evidence usually or more likely than not standard. So, throughout every process there is a potential legal issue related to disability that we can look at.

To go back a little bit on the Social Security benefits front, in our state, we don't have prerelease agreements, for whatever reason. We definitely don't have them at the state level. there are issues getting them at the facility level. I would love to hear offline the process to get the agreements in place. We tried to represent individuals to see if we can figure something out and it has been pretty much a nightmare on that end, most of our clients are SSI and not SSDI, really tough getting people connected back with those benefits.

>> Philip Fornaci: Thank you. Time for one more question if anyone can put it in the chat or say it. Thank you for two excellent presenters, really appreciate your time and insights. One reason we want to talk a little bit about your supervision, next week, our presentation will be about benefits and employment and financial related services. Libby Whiteside from disabilities rights Louisiana will be talking about that, but other issues, including supervision and other related issues, will be presented next week, so we will be looking forward to that. You will have a copy -- a recording of this will be available within a day or so. Thank you all for attending. Thank you for your attention and look forward to hearing any questions. Also, one of the reasons we wanted to do this was get people together who are either working on reentry issues or thinking about working on these issues to think it is helpful and now you have two really strong contacts here and you will get the chat blog later. You want to get in touch with each other, we have a person advocacy listserve, contact me if you want to be on that to continue the questions there. Thank you for the great presentations and I think we're done for now. Thank you so much.

>> Heather McKimmie: Thank you, everybody for coming.

>> Robert: Bye, everyone.

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