

**GUARDIAN**

**PACKET**



**Division of Aging and Adult Services**  
Department of Community & Human Services  
6101 Stevenson Ave., Suite 200  
Alexandria, VA 22304  
703.746.5999  
Fax: 703.746.5975  
[www.Alexandriava.gov/aging](http://www.Alexandriava.gov/aging)  
daas@alexandriava.gov

December 3, 2021

Dear Guardian:

You have been appointed Guardian to an incapacitated adult. As a guardian, you are responsible for the personal affairs of that person, to include making decisions regarding the person's support, care, health, safety, education, therapeutic needs, and unless the court order specifies otherwise, the person's residence.

The order appointing you Guardian may limit your authority, depending on the ability of the incapacitated adult to attend to certain personal needs. The court order appointing you guardian will:

- State the nature and extent of the person's incapacity
- Specify any legal disabilities that the incapacitated person has
- Define your authority so that the incapacitated person can care for him/herself to the extent that he/she is capable
- Indicate whether your appointment is limited to a specified length of time; and
- Include any limitations to your authority.

You are in a fiduciary relationship with incapacitated person and you may be held personally liable for any breach of your fiduciary duties. You are not liable for the acts of the incapacitated person unless you are negligent. You are not required to expend your personal funds on behalf of the incapacitated person.

If the incapacitated person has a valid advanced directive or a durable power-of-attorney, your authority and duties as Guardian will not include decisions already addressed in these documents. You may, with legitimate cause, seek court authorization to revoke, suspend, or modify a durable power-of-attorney, or modify the designation of an agent under an advanced directive. Any modification of these documents will not affect the incapacitated person's directives concerning the provision of refusal of specific medical procedures or treatments.

Unless the court order specifically states otherwise, you have the authority to determine where the incapacitated person will live within the Commonwealth of Virginia. This is a serious responsibility, and you should keep in mind that the least restrictive living arrangements are usually the best. Depending upon the condition of the incapacitated person, remaining in his/her home is usually the most beneficial and ideal living arrangement. You must get the court's permission before you change the incapacitated person's residence to another state. You must also get the court's permission before you terminate or consent to terminate the incapacitated person's parental rights or initiate a change in the incapacitated person's marital status.

You are required by sections 37.2-1021 of the Code of Virginia to file an annual report on the status of the incapacitated person. This report must be filed with the local Division of Social Services within the jurisdiction that you were appointed. The enclosed "Instructions to Newly Appointed Guardians" document addresses the requirements for submitting the annual report.

It is your responsibility to maintain sufficient contact with the incapacitated person to be updated on his/her capabilities, limitations, needs and opportunities. It is expected that you will visit the incapacitated person as often as necessary to meet this requirement.

To the extent that it is feasible, encourage the incapacitated person to proactively participate in decisions, to act on his/her own behalf and to regain the capacity to manage his/her own personal affairs. When you make decisions for the incapacitated person, consider his/her expressed desires and personal values. You are expected to act in the incapacitated person's best interest and exercise care, diligence and prudence.

I commend you for choosing to provide for another person's well-being. Thank you for your willingness to assume that responsibility. I am confident that you will not only perform an invaluable service to another person, but that you will also receive great satisfaction from this honorable undertaking.

Please mail your completed annual reports to:

Velda Weathers  
Department of Community and Human Services  
Division of Aging and Adult Services - APS  
6101 Stevenson Ave., Suite 200  
Alexandria, VA 22304

Sincerely,

A handwritten signature in cursive script that reads "Terri Lynch".

Terri Lynch, Director

## INSTRUCTIONS TO NEWLY APPOINTED GUARDIANS

- Court appointed guardians are required, under section 37.2-1021 of the Code of Virginia, to file an annual report with the local department of social services in the jurisdiction in which he/she was appointed.
- The first report to be filed is due at the local department of social services within six months from the date of the guardian's qualification.
- After the first report has been filed, the second and subsequent reports for each succeeding twelve month period will be due within four months from the last day of the twelve month period, beginning on the last day of the preceding reporting period (Code of Virginia, 26-17.4).

(Example: If the reporting period covered in an annual report begins on March 1, 2009, and ends on February 28, 2010, the annual report must be filed with the local department of social services no later than June 28, 2010, The annual reporting period for the next twelve months would begin on February 28, 2010).

- The annual report shall be on a form prepared by the Office of the Executive Secretary of the Supreme Court. The first annual reporting form be provided to you by the Clerk of the Court at the time of qualification. Subsequent annual reporting forms will be provided by the local department of social services. The guardian has four months in which to complete the annual report and submit it to the local department of social services. All questions on the form must be addressed.
- Annual reporting forms which are submitted incomplete will be returned to the guardian for completion.
- The annual reporting form shall be accompanied by a \$5.00 filing fee. This fee should be submitted in the form of a check only and made payable to the local department of social services.
- Mail the annual reporting form and the check addressed as follows:

### ANNUAL GUARDIAN REPORT

ATTENTION: Velda Weathers, Adult Protective Services  
Department of Community & Human Services  
6101 Stevenson Avenue, Suite 200  
Alexandria, Virginia 22304

- The local department of social services contact person regarding the annual reporting form is: Velda Weathers, MSW, Supervisor, Adult Protective Services. The contact person may be reached at the above address or by telephone at 703.746.5702.

## Guidelines for Completion of Guardian's Report

- Insert the name of the incapacitated person and the Social Security Number
- Insert the name of the Circuit Court where the Guardian was appointed and the age of the incapacitated person
- Insert the Circuit Court Case Number and the Date of Appointment
- Insert the Guardian's name, address and telephone number
- Insert the Conservator's name, address and telephone number (if the Guardian and Conservator are the same, place a check mark in the box next to "Same as Guardian")
- Place a check mark in one of the boxes to indicate the Initial four-month report or the Annual report
- The period covered by this report: Insert the date the reporting period began and the date the reporting period ended.

# 1. In this section, in addition to the physical address, you should describe the setting in which the incapacitated person lives (i.e. with relatives, in a nursing home, alone, etc.)

# 2. Here you should describe the incapacitated person i.e. Mental (alert, confused, demented), Physical (height, weight), Social (interacts with others, keeps to self, isolated). Describe changes in the incapacitated person from the previous report.

# 3. In this section, you should explain the various services provided to the incapacitated person during the reporting period. Include a statement that, in your opinion, the services provided were adequate or inadequate. If you believe the services provided were inadequate, state what you intend to do to assure that services will improve. You should identify areas in which you may need assistance from the local department of social services to assure adequate care of the incapacitated person.

# 4. Include here the number of times during the reporting period that you or your representative visited the incapacitated person and the purpose of the visits. You should also describe activities you performed on behalf of the incapacitated person.

# 5. Provide a statement about whether or not you agree with the treatments, services or current living arrangements are adequate or effective in meeting the incapacitated person's needs.

# 6. In this section, you may recommend continuation of the guardianship without changes or recommend expanding your authority to areas not designated in the court order or recommend rescinding all or part of your authority and restoring all or part of the authority of the incapacitated person. In each case, you should attach documentation to support your recommendations.

# 7. In this section you should itemize expenses incurred and state the amount of compensation requested. Any request for compensation should be made to the Conservator, who has control of the incapacitated person's finances.

Sign and date the form.