

Attachment 4.10: Comprehensive System of Personnel Development

(a) Data system on personnel and personnel development

(1) Qualified personnel needs

DVR has a total of 126 Full Time Equivalent (FTE) staff positions. The Division operates using a matrix management structure headed by the Division Director. The breakdown of staff is as follows:

Full Time Equivalents	Position Titles and Functions
1	Division Director
6.8	Senior Central Office Managers including the Field Services Manager, Employment Services Manager, Quality Assurance and Business Systems Manager, Staff Development and Training Coordinator, DVR Administrative Services Manager, the Budget and Policy Manager, and the Transition Program Director
7	Regional Managers overseeing the 12 district offices
35	DVR Counselors serving a general caseload and BOND caseload
4	Rehabilitation Counselors for the Deaf
14	DVR Transition Counselors serving a youth caseload
10.5	DVR Reach Up Counselors serving a TANF caseload
6	DVR Counselors Serving a General Assistance Caseload
7	Benefits Counselors
19	Program Techs and Administrative Support Staff
6	Employee Assistance Manager and Specialists
4	Special Project Coordinators
2	Data Management and Program Evaluation Staff
3	Business Account Managers
3	Assistive Technology Staff and Manager

DVR anticipates serving 10,264 consumers in FFY 2013, or 80 consumers for each FTE.

DVR believes we have adequate DVR counselor capacity to meet the current need. There is a need for additional administrative staff in the district offices. However, this past year DVR upgraded all district case aides to Program Technicians I in order to have a higher skill level to serve district staff.

(2) Vermont has no accredited graduate school offering a master's degree in Rehabilitation Counseling. To meet the Comprehensive System for Professional Development (CSPD) standards, a counselor needs either a master's degree in Rehabilitation Counseling or a master's degree in a related field plus completion of four additional core rehabilitation courses.

The percentage of our current counselors having completed the CSPD is 68%, which is 51 Counselors out of 75. Six more staff are scheduled to complete the CSPD requirement by mid-May 2014. Staff turnover as a result of retirements and relocations has resulted in a loss of qualified DVR Counselors including two CRC credentialed staff who were hired from out-of-

state. Most of the replacements need to meet CSPD requirements and are in the process of completing this requirement. Similar to last year, in two instances, qualified DVR Counselors have been hired from a neighboring state.

Assumption College, University of Massachusetts, and Springfield College of Human Services typically have a range of 35-45 students who graduate with a master's or CAG degree in Rehabilitation Counseling per year. These graduates would be qualified to fill counseling vacancies without additional coursework. Vermont has attempted to recruit students who received a master's degree in a related field such as Social Work, Special Education, School Guidance, Mental Health Counseling, or Community Mental Health Services from New England colleges. All of these graduates could be candidates for counseling vacancies if they are willing to complete the four core courses.

Eighteen (18) counselors have a master's degree in a related field and they are in the process of taking the four required core courses. Currently four (4) staff are enrolled in Assumption College pursuing degrees in Vocational Rehabilitation Counseling, one staff is enrolled in Springfield College of Human Services, and two staff are enrolled in Johnson State College.

The following is a breakdown of the educational plans for DVR staff. These plans fall into a four-category system, based on the availability of existing financial resources.

Category one: Current staff who meet the highest standards for education and/or certification.

Fifty-one (51) counselors have either obtained their CRC, a master's degree in Rehabilitation Counseling, or a master's degree in Counseling or a closely related field, and have met requirements for their core courses.

Category two: Staff who do not yet meet the highest standards and are currently enrolled in an approved graduate or undergraduate program.

Six (6) counselors are enrolled in graduate programs in rehabilitation counseling or related fields. Of these, five are scheduled to graduate in the spring of 2014 and one plans to graduate in 2016. Those who finish their graduate programs in related fields will also have to take the four core courses if they are not included in their current curriculum.

Category three: Staff who have graduate degrees in counseling or a related field are required to take four core courses in order to comply with the CSPD requirements. These courses are based on the course areas suggested by the CRC Commission. Since Vermont does not have a graduate program in Rehabilitation Counseling, it has been necessary to develop these courses via distance learning or through collaboration with Vermont colleges and Assumption College. The four course areas are: Medical and Psychosocial Aspects of Disability; Job Placement or Career Counseling; Vocational Assessment; and Foundations of Rehabilitation.

Eighteen (18) counselors have master's degrees in counseling or a related field and need to take the four core courses. Staff accessed the distance learning program through Assumption College for the fall semester of 2013 to meet some of their CSPD requirements. Career Counseling and Medical and Psychosocial Aspects of Disability were offered over the summer semester of 2013 and the Spring Semester of 2014 through Johnson State College's Extension program.

(b) Plan for recruitment, preparation and retention of qualified personnel

DVR has been able to fill counselor vacancies as they occur, although this year some vacancies have been open for four months while a qualified candidate was identified. State personnel policies require DVR to consider qualified applicants on the Reduction in Force list before other applicants. DVR advertises openings through the State recruitment system, through local newspapers, on-line on CareerBuilder.com and by listing openings through college placement services. Assumption College, University of Massachusetts, and Springfield College of Human Services advertise counselor openings by forwarding job opportunities to their list of recent graduates. In addition Counselors for the Deaf have been recruited by contacting specialized training organizations such as Gallaudet University.

DVR continues to work with Assumption College, Johnson State College and Springfield College to provide educational programs to prepare people to become DVR counselors and to provide on-going education. These training opportunities are available and accessible to all counselors including those from minority backgrounds and those with disabilities. Vermont has a small but growing minority population. Consequently, DVR recruits regionally and nationally for counselors through the Career Builder. This continues to result in receipt of out-of-state applications.

To assist in recruiting candidates with disabilities, DVR has advertised openings through disability-related organizations such as the Vermont Coalition for Disability Rights, the Vermont Center for Independent Living, and the State Independent Living Council. People who are DVR consumers are also encouraged to apply for positions.

(c) Personnel Standards

The Division follows standards set forth in the Comprehensive System for Professional Development (CSPD). This prescribes a national standard for vocational rehabilitation counselor qualifications. This standard gives highest priority to counselors with a master's degree in rehabilitation counseling. The second level of priority is for counselors with related degrees in social work, psychology, mental health counseling or special education. This group must complete four additional courses to meet the standard: Foundations of Rehabilitation, Career Counseling, Vocational Assessment, and Medical and Psychosocial Aspects of Disability. When unable to recruit qualified candidates that meet the two highest levels, DVR hires counselors with Bachelor's degrees and support their graduate training through our RSA training grant. Though not required by the Division or by RSA, some of counselors continue on to become Certified Rehabilitation Counselors (CRC) through the Commission on Rehabilitation Counselor Certification.

In order to recruit counselors who meet the highest standard we advertise in the state's two largest newspapers: the Burlington Free Press and the Rutland Herald/Barre Montpelier Times Argus. We also post openings in CareerBuilder.com. We also post positions on University of Vermont, Lyndonville State College, St. Michaels College, Norwich University, and Johnson State College websites. We have received inquiries about openings from around the country primarily in response to the CareerBuilder.com postings. Over the last several years there has been little difficulty in finding applicants with graduate degrees in counseling, social work and special education through use of our regular advertising.

In order to provide graduate training for counselors with master's degrees in related fields to meet the CSPD requirements we have been encouraging counselors to take advantage of on-line courses funded by RSA long-term training grants. Colleges are currently applying for these

grants and will be awarded this fall. Assumption College, Southern University of Maine, Springfield College and the University of Massachusetts are all competing for the RSA long-term training grants and would be able to serve DVR staff via their distance learning program. The timelines for meeting graduate training are written into the job specifications, which all candidates have access to, on the State of Vermont Department of Human Resources website. Counselors are required to meet the standard within three years. All training information related to core courses and completion of Master Degrees is stored on a spreadsheet maintained by the Division's Staff Development and Training Coordinator. Supervisors are given quarterly updates to monitor progress.

New counselors are also required to attend a six-day training program taught by the Staff Development and Training Coordinator that reviews DVR's Policies and Procedures Manual. All counseling staff are expected to attend training seminars produced by DVR and by TACE Center – New England. No specific requirement exists for the number of hours of training; however, supervisors address training expectations through employees' annual performance evaluations.

In addition to counselors, there are other groups of employees that share similar expectations for on-going training including Program Tech staff and contracted employment staff. These employees often work closely with our consumers and are expected to provide a high level of customer service. The employment staff also receive training through the local TACE Center – New England in connection with ICI of Boston and Assumption College.

The DVR Benefits Counselors receive ongoing training and support provided by a Project Manager. The local Social Security Administration (SSA) Area Work Incentives Coordinator provides quarterly trainings to the Benefits Counselors on a variety of SSA Work Incentives issues. He is also available to provide consultation as needed around challenging cases or specific issues. SSA also provides training and technical assistance for benefits counselors through contracts with Cornell and Virginia Commonwealth University. DVR is the SSA Work Incentives Planning and Assistance grantee for the State of Vermont. The six Benefits Counselors working under that project are certified by SSA as Certified Work Incentive Counselors (CWIC). To achieve certification, Benefits Counselors must attend a week-long training and complete a comprehensive "take home" assignment that is evaluated by Virginia Commonwealth University staff.

(d) Staff development

The in-depth, division-wide training on Motivational Interviewing (MI) training has been initiated and is well underway. The RFP process was completed between July and October of 2013. Contract development occurred in November and December 2013 and training began in February 2014. As of the end of April, 2014 all VR Counselors have received introductory and advanced training as well as the scoring and coding of two audio-recordings with individualized feedback. All DVR Supervisors and Managers have completed introductory training and one audio-recording. They are scheduled to take advanced training in May, 2014. TACE New England-Region 1 is providing two-day sessions of introductory training in Motivational Interviewing for all additional DVR staff and contracted employment staff over the course of the spring and summer, 2014. Additionally the contractor, Manthey Consulting, will be providing monthly trainings via video conference through the life of the contract, completion of coding and

scoring of up to four audio-recordings for DVR supervisors and DVR counselors, and a train-the-trainer session to ensure sustainability of MI within DVR.

Nationally, Motivational Interviewing is being used by State Vocational Rehabilitation Agencies/Departments as a way to provide services and effectively engage consumers in making changes that improve their lives through improved health, employment, and actively pursuing their goals. Preliminary results indicate this way of practice is especially useful for consumers with disabilities, and there are well-established results available regarding its effectiveness with those who experience substance abuse issues. A high number of DVR consumers struggle with substance and alcohol addiction, which reinforces the relevance of having staff trained in MI techniques and practice.

Monthly video conferences focused on a variety of medical and psychosocial aspects of disability have been offered including those focused on Bipolar Disorder, Traumatic Brain Injury and Spinal Cord Injury, and Autism and Non-Verbal learning disabilities. These have been provided by presenters from TACE New England-Region 1 and have been offered economically via video conference.

DVR's effort to implement video conferencing in all twelve districts has been completed and staff received introductory training regarding its use. A Memorandum of Understanding is in place between DVR and the Agency of Education (AOE) to utilize the AOE bridge to allow connection of all 13 sites at one time. In addition, a Statement of Work (SOW) is now in place with a local provider for technical assistance and support. All DVR programs are now using video conference and Go to Meeting technology to support a percentage of their yearly meetings to reduce staff costs related to time and travel. Additionally various meeting, trainings, and presentations have been completed using video conferencing that otherwise would have resulted in mileage and overtime expenses.

4.11(b) Annual Estimates of Individuals to be Served and Costs of Services

1. Based on the American Community Survey (ACS) for 2012, DVR estimates that there are 46,401 Vermonters between the ages of 16 and 64 with a disability. All of these people are potentially eligible for services under this Plan.

2. An estimated 10,576 individuals will receive services in FFY 2014 with funds provided under either Part B of Title I of the Act or under Part B of Title VI. Since DVR operates under an Order of Selection for Services, it is anticipated that 9,771 Priority Category 1 customers will be served; 751 Priority Category 2 customers; and 53 Priority Category 3 customers.

3. Total costs to serve individuals in all three categories will be approximately \$20,500,000. Estimated costs of services for each category are:

	Title I	Title VI-B
Priority Category 1	\$18,273,489	\$279,006
Priority Category 2	\$1,404,502	\$0
Priority Category 3	\$99,119,383	\$0
TOTALS	\$19,777,110	\$279,006

The following table shows the number of individuals served in the past two years and the number DVR anticipates serving during the current and next fiscal years:

	Actual FFY 2012	Actual FFY 2013	Projected FFY 2014	Projected FFY 2015
Category 1				
# Served	9,618	9,474	9,771	9,789
# Rehabs	1,632	1,667	1,809	1,918
Category 2				
# Served	788	760	751	707
# Rehabs	154	144	135	122
Category 3				
# Served	41	44	53	66
# Rehabs	5	10	10	13
Total Served	10,447	10,278	10,575	10,562
Total Rehabs	1,791	1,821	1,953	2,052

4.11(c) (1) State's Goals and Priorities for the Vocational Rehabilitation and Supported Employment Programs

Based on the new VR/SRC Needs Assessment completed in April of 2014, DVR and the SRC have established new targets for FFY 2015 for DVR's Strategic Plan goals. Although our broad Strategic Goals remain the same from year to year, DVR develops new strategies to achieve those goals based on annual progress and the Needs Assessment. Upon review DVR and the SRC developed targets for the FFY 2015 based on data collected in FFY 2013.

FFY 2015 Goals and Priorities	FFY 2015 Measures	FFY 2015 Targets
1. Consumer satisfaction with DVR services will increase.	Biennial consumer satisfaction survey.	DVR will increase overall consumer satisfaction back to at least the 91% level in 2011 survey from 83% in the 2013 survey when the survey is repeated in 2015.
2. Consumer earnings will increase beyond the rate of inflation.	RSA Performance Indicator 1.5: DVR wages compared to state average, and 1.6: own income as primary source of support.	1.5: DVR consumer wages will increase from 60% in 2013 of state average to 62% of state average in 2015. 1.6: DVR will increase the percentage of consumers achieving self-support from 46% in 2013 to 48% in 2015.
3. More consumers will be employed and the rate that consumers maintain employment will increase.	RSA Performance Indicator 1.2: Percentage of DVR consumers achieving an employment outcome. Vermont Unemployment Insurance data to track employment retention post DVR closure.	1.2: DVR consumers achieving an employment outcome will increase from 58% in 2013 to 60% in 2015. Percentage of DVR consumers who retain employment two years post closure will remain stable at 65%.
4. Vermont employers will increase their use of DVR as an employment agency through Creative Workforce Solutions.	DVR uses Salesforce as its primary tool for tracking employer outreach.	DVR will maintain an ongoing relationship with 2,500 businesses across the State of Vermont, an increase from 2,025 in FFY 2013.
5. DVR employees will be satisfied with their jobs.	Results from biennial DVR staff satisfaction survey.	DVR staff satisfaction will be maintained at 93.8% (2012 rating) or higher when the staff satisfaction survey is repeated in late 2014.
6. All DVR staff will have the skills and competencies to do their jobs.	Feedback from staff on biennial DVR staff satisfaction survey.	In 2012, 88% of staff said they had enough information to do their jobs. This will increase to 93% in the 2014 survey. In 2012, 79% of staff said they had adequate training in skills related to their job. This will increase to 85% in the 2014 survey.

FFY 2015 Goals and Priorities	FFY 2015 Measures	FFY 2015 Targets
<p>7. Continue to pursue funding opportunities for case management services to serve un-served or underserved populations; specifically:</p> <ul style="list-style-type: none"> • Individuals with measured IQs between 70 and 80 • Individuals with TBI • Individuals with psychiatric disabilities • Individuals with other significant disabilities who require case management services <hr/> <ul style="list-style-type: none"> • Individuals exiting the correctional system <hr/> <ul style="list-style-type: none"> • Individuals with alcohol/substance abuse dependence/abuse disorders (AODA) <hr/> <ul style="list-style-type: none"> • Individuals with disabilities who are veterans <hr/> <ul style="list-style-type: none"> • Individuals with disabilities who are not primary English speakers. <hr/> <ul style="list-style-type: none"> • Individuals age 65 and older 	<p>Implementation of services targeted at underserved populations.</p>	<p>Where possible, determine strategy to measure success rates and collect baseline data.</p> <hr/> <p>The percent of AODA consumers who achieve plan status increased to 75% in FFY 2013. DVR feels this goal has been achieved.</p> <p>Increase the rehabilitation rate of AODA consumers from 54% (FFY 2013) to 58% by FFY 2015.</p> <hr/> <p>Increase the post plan closures for eligible veterans from 164 in FFY 2013 to 200 by FFY 2015</p> <hr/> <p>Increase the post plan closures for individuals with disabilities who are not primary English speakers from 33 in FFY 2013 to 45 by FFY 2015.</p> <hr/> <p>Increase the number of closures of people 65 and older to 3% of all closures from 1% in FFY 2013.</p>
<p>8. DVR will work to improve the outcomes of community supported employment providers serving individuals with developmental disabilities.</p>	<p>Number of 26 closures achieved through the supported employment programs.</p> <p>Total number of people with developmental disabilities employed with supports.</p>	<p>Maintain number of 26 closures in State Fiscal Year 2015 at 200.</p> <p>Increase the total number of people with developmental disabilities employed with supports from 1,088 in SFY 2013 to 1,120 in SFY 2015.</p>
<p>9. DVR will work to improve the outcomes of community providers serving individuals with severe mental illness.</p>	<p>Number of 26 closures achieved through supported employment programs for adults with psychiatric disabilities.</p> <p>Total number of people with psychiatric disabilities employed with supports.</p>	<p>Maintain the number of 26 closures in SFY 2015 at the SFY 2013 level of 143.</p> <p>Increase the number of people working in supported employment programs from 526 in SFY 2013 to 550 in SFY 2015.</p>

4.11 (c) (4) Goals and plans for distribution of Title VI, Part B Funds

Five (5) programs or services are being funded by DVR in FFY 2014 using Title VI-B funds to serve approximately 180 individuals with developmental disabilities and 30 persons with mental illness. Total funding obligated for FFY 2014 was \$281,433. In FFY 2013, 8 programs received Title VI-B funds and served 255 individuals with developmental disabilities and 32 individuals with psychiatric disabilities.

\$1,821,619 in Title I funds were used in SFY 2013 to supplement Title VI- B funds for supported employment programs. These funds supported an additional 1,259 consumers, for a total of 1,546 consumers in 26 programs. The largest groups of customers served were: 585 people with significant developmental disabilities; 647 individuals with significant mental illness; and 27 individuals with TBI.

4.11 c (3) Order of Selection

Vermont continues to operate under the order of selection established in FFY 1999. With the approval of the State Rehabilitation Council, the Category definitions have been rewritten to clarify the intent of the Rehabilitation Act to serve those most in need of services:

Priority Category 1: Individuals who have been determined by DVR to have the most significant disabilities are those who have two or more areas of functional loss requiring multiple services over a period of 6 months or more, either for the provision of a required service, or for the duration of the use of a provided good.

Priority Category 2: Individuals who have been determined by DVR to have significant disabilities are those who have one area of functional loss requiring multiple services over a period of 6 months or more, either for the provision of a required service, or for the duration of the use of a provided good.

Priority Category 3: Individuals who have been determined by DVR to have non-significant disabilities are those who have one or more areas of functional loss not requiring multiple services over a period of 6 months or more.

DVR does not have enough funds to offer paid services to Priority Category 3 customers at the time they are determined eligible. At the end of every quarter, DVR and the SRC reviews the number of Priority Category 3 customers who have been determined eligible in each quarter since services were last provided to customers in this category. Based on resources available, a determination is made on whether or not to serve Category 3 customers. If the decision is made to provide paid services to Category 3 customers, all in the group who were determined eligible in the same quarter are eligible for services regardless of their service needs. In FFY 2013, twenty-four individuals received paid services.

DVR does a good job of getting the maximum services for consumers out of the available resources. DVR increased the number of employment outcomes from 443 in 1991 to 1,821 for FFY 2013, an increase of over 300 percent and a 1.7% increase from FFY 2012. This was achieved without any significant increase in funding. As an agency we understand how to provide services efficiently and economically. We also have aggressively pursued funding from other sources, in particular through grants and SSA Reimbursement and Ticket to Work payments. With recent re-allotment and a grant to serve individuals with disabilities receiving General Assistance, VR has been able to increase its capacity to serve more Vermonters. However, VR continues to seek additional funds to sustain current initiatives.

As noted earlier, DVR does not have enough funds to offer paid services to Priority Category 3 customers at the time they are determined eligible. At the end of every quarter, DVR and the SRC reviews the number of Priority Category 3 customers who have been determined eligible in each quarter since services were last provided to customers in this category. Based on resources available, a determination is made whether or not to serve Category 3 customers.

Priority Category 1

Number of individuals to be served in FFY 2014: 9,771

Estimated number of individuals who will exit with employment after receiving services: 1,809

Estimated number of individuals who will exit without employment after receiving services:
1,322

Cost of services: \$18,600,000

Priority Category 2

Number of individuals to be served in FFY 2014: 751

Estimated number of individuals who will exit with employment after receiving services: 135

Estimated number of individuals who will exit without employment after receiving services: 133

Cost of services: \$1,500,000

Priority Category 3

Number of individuals to be served in FFY 2014: 53

Estimated number of individuals who will exit with employment after receiving services: 10

Estimated number of individuals who will exit without employment after receiving services: 0

Cost of services: \$54,000

4.11 (d) Strategies to Achieve the Goals and Priorities

Based on the 2014 Needs Assessment, nine major findings will be addressed over the next three years. In addition, some strategies from last year's State Plan will be continued. For each strategy, the goal and priority area in Attachment 4.11 (c)(1) that is addressed is indicated.

Strategy 1: DVR will increase/improve VR employment services to the mature worker through outreach, research and other strategies.

Goal and Priority Area Addressed: 3, 7

The number of individuals over the age of 55 is rising in Vermont. The largest population growth between 2010 and 2012 occurred in the 55-64 and the over 65 age groups. The recent recession is still having an effect on people's retirement income, and more individuals over the age of 55 are either still working or are returning to work. Older Vermonters are healthier and live longer and so are working longer to continue social interaction and have a meaningful way to spend their time. Many of the mature workers will experience age-related disabilities and may benefit from placement services, as well as assistive technology, to find and maintain appropriate jobs based on their priorities, interests, skills, and abilities.

Planned Activities:

- Increase outreach to and collaboration with organizations that serve older Vermonters
- Partner with Vermont Associates for Training and Development to assist their clientele who have disabilities to find and maintain employment.
- Conduct market research on the employment needs of the mature worker and why they may not apply for DVR services.
- Have a DVR work group to assess the challenges in working with the mature workers and how DVR can best serve this population.
- Develop a coordinator position to oversee services to the mature worker.
- Collaborate with Invest EAP and the Business Account Managers to identify older employees who may need assistance in order to retain a job.

Strategy 2: DVR will re-focus on ensuring the high quality of its customer service.

Goal and Priority Areas Addressed: 1, 2, and 3

Based on the most recent Consumer Satisfaction Survey (2013), the Partner Survey (2012) and the Baldrige Survey (2013), DVR received feedback that there are some areas in which DVR could improve its services to enhance customer satisfaction. Although still experiencing a very high level of customer satisfaction, the number of customers indicating they were "extremely satisfied" was lower than in previous years.

Planned Activities:

- Conduct focus groups to further identify areas that need addressing.
- Conduct local office process improvement projects to improve customer service.
- Consider technology options such as automated follow-up systems, use of cell phones, and other improvements.
- Revisit customer empowerment concepts learned in the successful Vision 2000 change efforts based on Choice Project.

- Continue staff training in Motivational Interviewing techniques to better assist individuals to move forward with their vocational rehabilitation.
- Continue the work of the statewide Implementation Team as it reviews and improves all aspects of DVR casework services and ensure statewide adherence to procedures and tools that are developed.

Strategy 3: DVR will explore methods to diversify the DVR caseload.

Goal and Priority Areas Addressed: 3 and 4

The 2014 Needs Assessment revealed that the number of individuals with physical disabilities served in DVR has declined as the number of individuals with psychiatric and substance disorders has increased. DVR believes that by diversifying the caseload, it may be able to offer employers a wider range of qualified applicants. In addition, with increased employer outreach through Creative Workforce Solutions, DVR is finding more job opportunities that the agency cannot provide consumers to fill. Anecdotal reports suggest VR-eligible individuals with higher levels of training and education are not accessing the VR program, even though they could benefit from it. DVR needs to better understand why individuals with physical disabilities as well as those with higher education and training levels are not seeking DVR services.

Planned Activities:

- Conduct targeted outreach to medical providers, community health teams, rehabilitation facilities and other medical groups.
- Recruit physicians to talk to their peers and physician groups about patient referral for DVR services.
- Use a DVR subgroup to develop a comprehensive outreach plan and invite providers into the subgroup
- Through DVR's Employee Assistance Program and the Business Account Managers, reach out to employers about assisting their employees who may be struggling to maintain their employment due to a disability, especially the mature worker.
- Reach out to previously closed consumers to offer assistance in career advancement.

Strategy 4: DVR will improve services to individuals with psychiatric disorders.

Goal and Priority Areas Addressed: 9

The 2014 Needs Assessment indicated that the employment outcomes for individuals with psychiatric disorders have steadily declined since 2001, both in the Community Rehabilitation Treatment (CRT) programs and in the general DVR program. Contributing factors may include the decline in the CRT employment staff, the aging demographic, and the competing priorities of community partner agencies. DVR has instituted performance-based grants with the supported employment programs, which include financial incentives and penalties. The performance standards include rehabilitation targets, employment rate targets and consumer earnings targets. The grants include a corrective action and earn-back provision, allowing programs to recoup penalties if they demonstrate significant improvement. Although some supported employment programs in developmental services and the youth supported employment program (JOBS) have seen improvements in outcomes, the CRT agencies have been less successful. Increasing employment outcomes for individuals with psychiatric disabilities has been a long-standing issue that DVR needs to continue to address.

Planned Activities:

- Provide extensive training to all DVR staff in Motivational Interviewing techniques to better assist all DVR customers to move forward in their efforts to obtain meaningful employment.
- Increase the focus on relationships with CRT leadership and staff at the local level.
- Create a supported employment dashboard to provide the ability to monitor progress of CRT programs in meeting their annual performance goals.
- Develop regular meetings of DVR supported employment liaison counselors to strategize ways to support CRT agencies.
- Develop an employment staff training curriculum to be delivered via the Vermont Community College system that is available to all partners in Creative Workforce Solutions.

Strategy 5: DVR will collaborate with community rehabilitation programs to address continuous improvement strategies.**Goal and Priority Areas Addressed: 8, 9,**

Based on feedback from both VABIR and DVR staff in the Baldrige Survey, several areas regarding improvement of partner programs were identified. Areas needing improvement for the Vermont Association of Business, Industry and Rehabilitation (VABIR), a primary DVR partner, were identified. In addition, areas to address with other community rehabilitation programs have been identified.

Planned Activities:

- Continue to improve the referral protocols to VABIR employment staff to ensure consistency and quality.
- Support VABIR training in motivational interviewing and disability-specific training
- Develop a curriculum to be based at the Community College of Vermont to train employment staff of all partner organizations.
- Encourage VABIR managers to use VR video conferencing, GoToMeeting, webcam and other tools to improve communication with VABIR staff.
- Continue to work with the VT Designated Agencies providing supported employment to improve employment outcomes.
- Work with the Division of Developmental Services to improve services to individuals with traumatic brain injury.
- Create a supported employment dashboard, institute DVR liaison counselor meetings, and develop training for CWS partners as indicated in Strategy 4 above.
- Develop regular meetings of DVR supported employment liaison counselors and develop an employment staff training curriculum as indicated in Strategy 5 above.

Strategy 6: DVR will work with technical centers and employers to develop sector-based training**Goal and Priority Areas Addressed: 2, 3, and 4**

Training programs, particularly for youth who are not planning to go to college, are inconsistently available across the State. Technical Centers connected to high schools sometimes

offer adult training, and some have been willing to work with employers to develop sector-based training programs. A more systematic approach to training would be helpful to ensure that employers are able to hire skilled workers for available positions within their companies. In addition, DVR will continue to support employers through Creative Workforce Solutions (CWS).

Planned Activities:

- Invite technical centers, employers and other partners to collaborate on the development of training options, apprenticeships, and certificate programs to build business-specific skills.
- Increase adult training opportunities in evenings that offer advanced level training and certificates recognized by business.
- Look at grant opportunities to develop training programs.
- Work with high schools to engage students in their senior year with technical programs that DVR can then support post-graduation.
- Develop reporting structures for data from the CWS tracking tool and Salesforce.
- Develop a systematic mechanism to collect local success stories.
- Continue to improve collaboration with the VT Department of Labor for a coordinated approach to employer outreach through CWS.

Strategy 7: DVR will develop a comprehensive quality assurance system

Goal and Priority Areas Addressed: 1, 5 and 6

In order to improve its programs and ensure consistency across all district offices, DVR would like to develop a quality assurance system that has a schedule of activities that will ensure a cycle of continuous improvement. VT DVR is a part of a New England regional effort to develop such a system that can be adapted to each state. Included in this system would be data analysis, objectives and measures, program evaluation, and dissemination and communication. DVR will also include practices for case review and counselor metrics. Feedback from the Baldrige Survey suggested that the analysis of data in a more consistent way would be helpful in prioritizing DVR program needs and its budget.

Planned Activities:

- Create a quality assurance plan that provides for regular case review and statewide consistency of case management and DVR counseling practices; share best practices across the Division.
- Develop counselor metrics
- Implement an electronic case management system to better track data, improvement counselor efficiency, and improvement monitoring capability.
- Develop and implement a dashboard to track case service expenditures and Ticket to Work payments by region, district and counselor.
- Conduct regular staff and consumer satisfaction surveys
- Develop a project management structure to better manage DVR initiatives
- Incorporate Results Based Accountability language into any process improvement, data analysis or performance expectations across the Division.
- Continue to explore ways to increase the use of the merit bonus system

Strategy 8: DVR will continue to explore ways to increase long term support and case management services for individuals not eligible for other programs.

Goals and Priority Areas Addressed: 7

The need for case management support for individuals not eligible for services from other organizations/programs has been a long standing goal. However, DVR has not been able to secure funding for this initiative. The need has increased since the 2008 recession and cuts in discretionary funding. Individuals with TBI, developmental disabilities with IQ levels in the 70 to 80 range, and other individuals with significant disabilities who require ongoing case management are among the populations targeted for this support. DVR counselors find themselves the service of last resort for individuals who receive no ongoing case management in their communities. Additionally, DVR continually assesses the vocational needs of various subgroups of the Vermont disability population.

Planned Activities:

- Continue to pursue funding to provide employment services to individuals exiting correctional institutions.
- Continue efforts to collaborate with organizations serving individuals with disabilities who are not primary English speakers.
- Expand the pilot with the Office of Child Support (OCS) to provide services to individuals with disabilities who owe child support; data on the first year of the pilot indicates significant success in increasing employment and child support payments.
- Expand the use of interns to provide case management support.
- Encourage greater use of job coach services.
- Continue to increase DVR use of Invest EAP services to support this population.
- Take a systematic, statewide approach to identify resources beyond traditional Designated Agencies, including the VT Center for Independent Living, organizations that serve individuals with traumatic brain injury, etc.

Strategy 9: DVR will improve services in response to the increasing number of consumers with substance abuse disorders.

Goals and Priorities Addressed: 6 and 7

Between 2009 and 2013 there was a 27% increase in individuals closed with a reported substance abuse issue. This represents 14% of all individuals closed and reflects the increased incidence of substance abuse in the State as a whole. Field staff report significant challenges in engaging and serving individual with substance abuse issues, including the lack of adequate community treatment programs; poor communication with what programs do exist; and the dramatic increase in opiate addiction.

Planned Activities:

- Provide additional training to counselors in ways to serve this population.
- Create a learning community within DVR to increase statewide understanding and consistency of how to serve this population.

- Further enhance the partnership the VT Department of Health's Alcohol and Drug Addiction Program (ADAP) and collaborations with its Hub and Spoke program develop partnerships with other organizations/programs providing substance abuse treatment.
 - Improve coordination with Invest EAP for referrals for substance abuse assessment and treatment.
-

The VT Assistive Technology Program is housed within DVR and provides assessment for individuals with disabilities to determine appropriate AT for home and the workplace. The AT Program also operates two try-out centers that provide statewide coverage. VR Counselors are able to refer individuals for assessment and equipment loans/try-outs.

Most of the ethnic minorities living in VT reside within Chittenden County, served by the Burlington district office. There are several organizations within Burlington that serve individuals who are minorities, and their employment staff are members of the local CWS team. As members, they are able to assist their consumers to find employment and benefit from the team outreach to local employers.

Vermont has a system of Designated Agencies that provide supported employment services to individuals with developmental disabilities and individuals with severe and persistent mental illness. DVR provides annual grants to these agencies to provide supported employment services to DVR customers. DVR has initiated performance-based grants to VABIR and the Designated Agencies that seek to improve outcomes for the individuals they serve.

DVR has reached out to the VR Dept. of Labor to coordinate employer outreach and braid progressive employment options. DVR and VDOL managers at the local level continue to collaborate wherever possible to serve the employer customer and managers of both organizations have recently reinstated retreats aimed at improving this collaboration.

See the first section of this attachment above. Strategies described include:

- * Efforts to achieve the goals and priorities identified in Attachment 4.11(c)(1)
- * Continued efforts to solidify Creative Workforce Solutions, an innovation and expansion activity
- * Efforts to increase the employment outcomes of individuals served in the supported employment programs

4.11 (e) (2) Evaluation and reports of progress: Evaluation of the extent to which goals in 4.11 (c) (1) identified in the FFY 2013 State Plan were achieved.

The following summary provides an update on Vermont DVR's progress toward achieving the goals and priorities identified in the FFY 2013 State Plan.

Goal and Priority 1: Consumer satisfaction with DVR services will increase

Measure: Biennial consumer satisfaction survey.

Target: DVR will maintain overall consumer satisfaction at or above the 2011 level of 91% in the 2013 survey.

Actual Data for 2013: The Consumer Satisfaction Survey of 2013 showed a dip in overall satisfaction to 83%. Although still high, DVR has determined goals and strategies to reverse this downward trend and has reported these in the 2015 State Plan.

Target for 2015: This survey will be repeated in the spring of 2015 and results will be published by the end of June, 2015. The goal in the 2015 State Plan states that DVR will increase the consumer satisfaction level back to 91%.

Goal and Priority 2: Consumer earnings will increase beyond the rate of inflation

Measures: RSA Performance Indicator 1.5: DVR wages compared to state average, and 1.6: own income as primary source of support.

Targets:

RSA Performance Indicator 1.5: DVR consumer wages will increase from 60% of state average in 2013 to 62% of state average in 2014.

RSA Performance Indicator 1.6: DVR will increase the percentage of consumers achieving self-support from 46.5% in 2013 to 47.5% in 2014.

Actual Data for FFY 2013:

RSA Performance Indicator 1.5 for FFY 2013: 60%, a drop from 61% in FFY 2012.

DVR has seen an incremental drop in percentage point for this indicator. We believe this continues to be due to the economic downturn and that wages has been essentially flat. However, DVR exceeds the federal standard and we expect this percentage to rise as the economy improves.

RSA Performance Indicator 1.6 for FFY 2013: 46.5%, up from 45.9%, in 2012.

As stated in last year's State Plan, DVR has not been able to meet the federal standard, although we have seen a steady rise in percent points. We have analyzed this issue over the years and found that two Vermont VR practices impact this measure:

- The high proportion of consumers served through supported employment. Many of the individuals served through supported employment programs have very significant developmental or mental health disabilities. A high proportion work very part-time to supplement their benefits.
- DVR serves a significant proportion of consumers who are already working and who are already self-supporting. These individuals cannot be included in the calculation.

To meet this standard DVR would have to reduce the number of individuals served in these two categories. We do not believe this would be the right thing to do.

Goal and Priority 3: More consumers will be employed and the rate at which consumers maintain employment will increase

Measures:

RSA Performance Indicator 1.2: Percentage of DVR consumers achieving an employment outcome.

Vermont Unemployment Insurance wage data to track employment retention post-DVR closure.

Targets:

RSA Performance Indicator 1.2: DVR consumers achieving an employment outcome will increase from 60% in 2010 to 65% in 2012.

Percentage of DVR consumers who retain employment two years post-closure will increase from 70% to 72%.

Actual Data for FFY 2013

RSA Performance Indicator 1.2: DVR consumers achieving an employment outcome for FFY 2013 remained at 58%.

DVR data in this performance indicator has steadily declined from 66.77% in FFY 2008 to 58% in FFY 2013. We have no doubt the economic downturn contributed to this decline. In this context it is also important to note the total number of employment outcomes DVR has achieved has remained steady or actually increased over the past five years from 1,480 in FFY 2009 to 1,821 in FFY 2013, a 23% increase in the same period.

Percentage of DVR consumers who retain employment two years post-closure: For the period of 2008-2010, 65% of VR consumers closed successfully were still employed after 2 years.

Goal and Priority 4: Vermont employers will increase their use of DVR as an employment agency through Creative Workforce Solutions.

Measure: DVR tracking of employer contacts and employers hiring DVR consumers statewide.

Targets: DVR established in FFY 2010 a data system for tracking employer contacts. This system will be used by employment consultants statewide to track employer contacts. This serves as a good indicator of employer use of CWS.

Actual Data for FFY 2013:

As noted in other sections of the State Plan Amendment, DVR selected a commercial solution for tracking employer outreach. Salesforce is a commercial customer relations tool that is used extensively for sales and marketing in the private sector.

In FFY 2015 we will continue to collect data on employer contacts across Agency of Human Services programs including VR, supported employment for individuals with psychiatric and developmental disabilities, and TANF programs. DVR will now track ongoing relationships with Vermont employers since the number of contacts is not a clear representation on the number of businesses CWS works with. Data for the calendar year 2013 indicate there were 2,025 business relationships entered into Salesforce.

Goal and Priority 5: DVR employees will be satisfied with their jobs

Measures: Results from biennial DVR staff satisfaction survey.

Targets: DVR staff satisfaction will be maintained at 92% (2010 rating) or higher.

Actual Data for FFY 2013: No new data. The next staff satisfaction survey will be conducted in the fall of 2014.

Goal and Priority 6: All DVR staff will have the skills and competencies to do their jobs

Measures: Feedback from staff on biennial DVR staff satisfaction survey

Targets: In 2010, 88% of staff said they had enough information to do their jobs. This will increase to 93% by 2014.

Actual Data for FFY 2012: No new data. The next staff satisfaction survey will be conducted in the fall of 2014.

Goal and Priority 7: Increase capacity to serve un-served or underserved populations, specifically:

- Individuals with measured IQs between 70 and 80
- Individuals with TBI

- Individuals with psychiatric disabilities
- Individuals in the Autism Spectrum range of disorders
- Individuals with other significant disabilities who require case management services
- Individuals exiting the correctional system
- Individuals with alcohol/substance dependence/abuse disorders (AODA)
- Individuals with disabilities who are veterans
- Individuals with disabilities who are not primary English speakers

Measures:

Implementation of services targeted at underserved populations.

Targets:

- a) Through Creative Workforce Solutions, partner with Department of Corrections to replicate VABIR/VR pilot designed to provide job placement for individuals with disabilities who are exiting the correctional system.
- b) Implement the Youth Employment Specialist model to serve youth with cross-disabilities statewide.
- c) Increase the % of AODA consumers who achieve plan status from 57% (FFY 2009) to 62% by FFY 2013.
 Increase the rehabilitation rate of AODA consumers from 47% (FFY 2009) to 55% by FFY 2013.
- d) Increase the post plan closures for eligible veterans from 137 in FFY 2010 to 200 by FFY 2012.
- e) Increase the post plan closure for individuals with disabilities who are not primary English speakers from 42 in FFY 2010 to 80 by FFY 2013.

Actual Outcomes:

- a) Pilots were launched in five sites in FFY 2011. These pilots ended in FFY 2013 due to lack of long term funding.
- b) The Youth Employment Specialist model has been successfully implemented in six sites.
- c) Percent of AODA consumers who achieve plan status: Actual for FFY 2013 – 75% of cases closed with a primary disability source of 2 or 18 achieved plan status.
 Rehabilitation rate of AODA consumers: Actual for FFY 2013 – 54% of cases closed from plan status with a primary disability source of 2 or 18 were closed with an employment outcome (26 closure).
- d) Number of post-plan closures for eligible veterans: Actual for FFY 2013 – 164 veterans closed from plan status.
- e) Individuals with disabilities who are not primary English speakers: Actual FFY 2013 – 33 individuals closed from plan status were not primary English speakers.

Goal and Priority 8: DVR will work in collaboration with the VT Department of Labor (VDOL) to ensure people with disabilities have access to services through the state workforce investment system

Measures:

Implementation of coordinated employer outreach

Implementation of a continuum of progressive employment options with VR and WIA funds

Targets:

By the end of FFY 2012 all VDOL staff conducting employer outreach on behalf of the VT Agency of Human Services consumers will use Salesforce to track employer outreach.

By the end of FFY 2012 DVR and VDOL will have an operational agreement around the blending of VR and WIA funds for progressive employment.

Actual Outcomes:

Use of Salesforce – goal achieved.

Agreement for blending of funds – not initiated

Goal and Priority 9: DVR will work to improve the outcomes of community-supported employment providers serving individuals with developmental disabilities.

Measures:

Number of status 26 closures achieved through the supported employment programs

Total number of people with developmental disabilities employed with supports

Targets:

Total status 26 closures in State Fiscal Year 2011: 137

Status 26 closure goal for State Fiscal Year 2012: 200

In State Fiscal Year 2011 a total of 973 people were working in supported employment programs. This will increase to 1,030 by SFY 2013.

Actual Outcomes:

Actual for FFY 2012: 202 out of 249 plans (81% rehab rate)

Actual for FFY 2013: 202 out of 245 plans (82% rehab rate)

Number of people with developmental disabilities employed with supports was 1,088 for SFY 2013.

The total number of VR consumers achieving an employment outcome (status 26 closures) increased from 163 in SFY 2008 to 178 in SFY 2009, and decreased to 170 in SFY 2010 and again to 137 during SFY 2011. Because of a set of funding incentives and standard put into the supported employment grants this past year, DVR was able to exceed the target of 200. The actual number of 26 closures was 226.

The total number of people with developmental disabilities working in supported employment in Vermont increased from 973 during SFY 2011 to 1,060 in SFY 2012, exceeding the target of 1,030.

Goal and Priority 10: DVR will work to improve the outcomes of community providers serving individuals with severe mental illness

Measures:

Number of status 26 closures achieved through supported employment programs for adults with psychiatric disabilities

Total number of people with psychiatric disabilities employed with supports

Targets:

Total 26 closures in SFY 2011: 78

26 closure goal for State Fiscal Year 2012: 150

Number of people working in supported employment programs will increase from 592 in SFY 2011 to 700 by SFY 2013

Actual Outcomes:

Actual SFY 2012: 127 out of 223 plans (57% rehab rate)

Actual SFY 2013: 136 out of 237 plans (57% rehab rate)

Number of people working in supported employment programs for SFY 2013 = 526

The Vermont Community Rehabilitation and Treatment (CRT) program provides community based services for about 2,500 Vermonters with serious mental illness. DVR has provided funding for evidenced based supported employment services for CRT consumers for over three decades. We have seen a steady decline in the employment rate of working age individuals in the CRT program from about 30% in 2001 to about 19% in 2013. VR and the Vermont Department of Mental Health (DMH) have worked together to identify the causes of this decline and implement strategies to reverse the decline. These have included:

- Including employment performance measures in the joint DMH/VR grants to agencies
- DMH hiring a second technical assistance staff person to work with the agencies to improve outcomes
- Joint VR/DMH performance reviews for every agency
- Individual Placement and Support (IPS) fidelity reviews for agencies that volunteer

In SFY 13 the employment rate increased slightly to 19.5% and has been on a gentle upward trend. VR and DMH will continue and expand efforts to improve outcomes in SFY 15.

Assessment of the performance of the VR program on the standards and indicators for FFY 2013:

Performance Indicator 1.1: Number of Rehabs in Current Fiscal Year - DVR achieved 1,821, 30 more than FFY 2012. DVR is pleased with this result.

Performance Indicator 1.2: Percentage Achieving An Employment Outcome - 58% compared to the federal standard of 55.8%. This indicator remained the same from 2012 to 2013, indicating a continuation of a poor economy.

Performance Indicator 1.3: Percentage Rehabilitated With Minimum Wage - 98% compared to the federal standard of 72.6%. DVR consistently meets this standard. Vermont DVR does not support sheltered or non-competitive employment.

Performance Indicator 1.4: Percentage Competitive and SD - 99% compared to the federal standard of 62.4%. Because DVR has been in an order of selection, we serve very few individuals who do not have a significant disability.

Performance Indicator 1.5: Ratio to State's Hourly Wage - 0.60 compared to the federal standard of 0.52. DVR's ratio remains above the federal standard.

Performance Indicator 1.6: Own Income As Primary Source of Support at Closure – 69.123%

Own Income As Primary Source of Support at Intake: - 22.666%

Difference = 46.457% compared to the federal standard of 53%. This indicator is still below the federal standard but has continued to improve from 40% in FFY 2009, 44% in FFY 2010, 45% in FFY 2011 and 45.934 in 2012. DVR feels that we do not meet this standard because:

a) The high proportion of consumers served through supported employment. Many of the individuals served through supported employment programs have very significant developmental or mental health disabilities. A high proportion of consumers works very part-time to supplement their benefits.

b) DVR serves a significant proportion of consumers who are already working and who are already self-supporting. These individuals cannot be included in the calculation.

To meet this standard, DVR would have to reduce the number of individuals served in these two categories. We do not believe this would be the right thing to do.

Report on how the funds reserved for innovation and expansion (I&E) activities were utilized in FFY 2013:

DVR continues to support the consolidated and coordinated approach to employment services under a single entity called Creative Workforce Solutions (CWS). The goal of CWS is to provide equal access to meaningful work in the competitive job market for all AHS program participants. It also offers employers a point of contact for coordinated job development and placement services across AHS programs. This model has proved very beneficial to AHS participants, a very high percentage of whom have disabilities.

Additionally, DVR has had tremendous success with the use of Progressive Employment, which is a series of employment options to introduce employers to our customers and provide those individuals with a way to increase their work experience, add to their resumes, explore career options, and develop skills. Employers are not required to commit to a hire, and individuals are do not have to commit to a permanent job. Progressive employment options range from a job shadow or company tour to short-term work experiences to OJT placements. Data shows a very positive effect on outcomes, as shown by the increase in 26 closures in the last several years despite a poor economy. This model is the focus of a NIDRR grant to export this employment strategy nationally.

4.2 (c) Summary of Input and Activities

The State Rehabilitation Council (SRC) and DVR continue to enjoy a collaborative working relationship. SRC members are invited to participate on various DVR planning and implementation committees. The DVR Director provides quarterly written and oral updates on programs, activities, and outcomes. In addition, DVR Program Managers, Regional Managers and field staff frequently make presentations to the full SRC and gather feedback and suggestions to improve services.

The following is a summary of the SRC's activities taken directly the FFY 2013 SRC annual report. This report is available on request. For more information on the Vermont SRC go to <http://vtsrc.org/>

2013 SRC Steering Report: by Sam Liss, SRC Chair

During 2013, the SRC Steering Committee, as always, diligently performed its charged task of considering and deciding upon necessary SRC business between meetings of the full Council. I had the honor, as Chairperson of the SRC from April through October of the year, to chair these Committee meetings.

The Committee set agendas for the full Council meetings which take place on alternate months - considering topics most pertinent and timely, as well as those necessary and routine. It also was responsible for planning the very constructive SRC annual Retreat held this year on October 10th at Seyon Lodge State Park in Groton. I am proud to report that Retreat 2013 included a presentation on the critical VR Consumer Satisfaction Survey, as well as important planning sessions on future SRC direction. Also offered were presentations for the edification of new Council members.

Among relevant issues considered both in Steering Committee and before the full Council were a possible formal SRC position on S. 1356, the Workforce Investment Act (WIA) reauthorization and embedded Rehab Act reauthorization. Provisions contained therein can potentially impact VR programs and services. Also high on the Committee's priority list was the planning and analyzing of SRC-sponsored testimony before the Vermont House Committee on Human Services concerning improving successful employment outcomes within the Community Rehabilitation and Treatment (CRT) program – a joint effort of DVR and the State Department of Mental Health (DMH). In addition, toward the latter part of the year, an effort was made to highlight an exciting national initiative, termed the Career ACCESS project, which would begin to eliminate barriers to employment and is designed for low-income youths within the SSI entitlement program.

At the suggestion of VR Director, Diane Dalmasse, it was decided to include, for the first time, SRC members in the organizational Baldrige survey. In addition, the Steering Committee discussed ways to support our military veterans – from both a homelessness and disability viewpoint. And, of course, the Committee – with the lead taken by Coordinator, Rebekah Stephens - actively developed and pursued ways to recruit new Council members, taking into account prescribed positions, as well as the skills and diversity to craft the best possible mix of members. On a related topic, constructive discussions took place on how best to improve attendance and participation in committee meetings during a year of membership transition.

Not in the least, the Creative Workforce Solutions (CWS) initiative was followed, as was the closely associated employer satisfaction survey. And...the transition and integration of the Assistive Technology (AT) Council within the general SRC was successfully completed.

As I step down from the Council and relinquish my duties, I view the opportunity I have had as precious and am grateful for it. Employment services for people with disabilities should be an intensive effort toward the betterment of all of society.

SRC Policy and Procedures Committee by Allen Evans, Chair

The Policy and Procedures (P and P) Committee works on a three-year cycle in order to accomplish its defined tasks. This committee systematically reviews and comments on all of the policies and spending guidelines that guide the Division of Vocational Rehabilitation (DVR) personnel in their work. It is also our task to periodically review the SRC By-Laws to ensure that the Council is in compliance.

By-Laws:

The SRC By-Laws were reviewed and recommended changes adopted in 2011. The Committee determined that another review in 2013 was not necessary.

Policy and Procedure Manual Review:

In 2013 the P and P Committee continued working with the updated DVR Manual; reviewing Chapter 303 – “Maintenance”, Chapter 304 – “Occupational Tools, Licenses, Equipment, Stock and Supplies”, Chapter 305, “Personal Services”, and Chapter 306, “Rehabilitation Technology Services”.

As part of the review of Chapter 305 – “Personal Services” the definitions of Deaf and Interpreter for the Deaf were revised to read: Definition B (Deaf) - “An individual who is deaf has severe hearing loss that may require alternative methods of communication. Some examples of alternative communication include but are not limited to sign language, lip-reading, electronic communications such as texting or email, and cue speech. Some deaf people also have their own culture which means that they have their own language, ways of life, values and arts. Definition B (Interpreter for the Deaf) – “An interpreter (interpreters) is (are) hearing and should have the ability to speak both the

verbal native language of the consumer and sign language. Interpreters help facilitate communication between deaf and hearing speakers. Staff must utilize the State contract for ALS Interpreter services to ensure that the interpreters meet requirements. More information about qualifications/training can be seen at <http://www.rid.org/>. The Committee also recommended changes to policies for services to non-English speaking consumers.

The Committee spent considerable time reviewing Chapter 306, "Rehabilitation Technology Services". Amber Fulcher, Program Director of Assistive Technology in Vermont provided extensive input into the rewriting of this Chapter. The Committee agreed with proposed changes to the Chapter including changing the name of the Chapter to "Assistive Technology Services". Other proposed changes included Section II. General Policy; A. to read: "Assistive Technology services may be provided for a person at any stage in the rehabilitation process." Assistive Technology services need to be directly related to the consumer's vocational goals and in support and implementation of the IPE." Section II. General Policy; B. to read: "When individualized prescriptions or fittings are needed, they shall be done by providers licensed and/or certified for such activity if required by law. If neither licensure nor certification is legally required, the consumer shall be so informed and the DVR staff shall describe the method(s) of obtaining the service so the person can make an informed decision." Section III. Spending and Related Guidelines; A. Guidance: - "re: resources to be removed and wording added" - "Even though technological devices are exempt from comparable benefits and services, counselors should use reasonable judgment when determining if there are existing resources in the community." Section III. Spending and Related Guidelines; B. to read: "The Division, with the input of the State Rehabilitation Council, shall establish and maintain suitable spending, duration, and related guidelines for provision of these services. The guidelines will be reviewed annually. Adjustments may be made by the Division Director. While Counselors are not required to seek comparable benefits, there may be circumstances where employer and/or post-secondary schools may be required to provide benefits and should be explored". Committee members recommended only one change to guideline amounts. It was recommended that the guideline amount for telecommunication and other communication equipment for the Deaf be reduced from \$800 to \$500. The Committee agreed that the remainder of the guideline dollar amounts were reasonable as stated in the Chapter.

Other Actions:

Members of the P&P Committee along with other members of the SRC, joined together to draft a letter to the GROW (Gaining Recovery Outcomes through Work) Committee on the topic of "A systematic root cause analysis of performance of the Community Rehabilitation and Treatment (CRT) program, specifically regarding successful employment outcomes among its participants". Committee members eagerly await a response from the GROW Committee.

Conclusion:

As chair of the Policy and Procedures Committee, I must express my appreciation of the efforts made by the members of this Committee. Our members are dedicated and hard working. We look forward to 2014 and the work to be accomplished.

SRC Advocacy, Outreach and Education (AOE) Committee by Sarah Launderville, Chair

The AOE committee stayed informed on national and state issues regarding people with disabilities and employment some of which included the Medicaid for Working People with Disabilities (MWPDP), the BOND pilot project, reauthorization of the Rehabilitation Act and sequestration.

The committee followed the MWPDP report presented to the VT Legislature on the MWPDP program by Bailit Health Purchasing, LLC. SRC members had a follow up meeting with the Commissioner of the Dept of Disabilities, Aging and Independent Living regarding the lack of data available to pursue some of the options in the original legislative report and will continue to follow in the coming year.

Strong communication lines remained between the SRC and the VT Statewide Independent Living council with a focus on advocacy areas and education opportunities including the SILC networking breakfast and annual SILC Olmstead Meeting.

In May, the AOE committee changed Committee Chair from Sam Liss to Sarah Launderville. Sam is an amazing employment advocate and has been a wonderful leader of the AOE Committee. He will be missed.

Also in May the AOE committee brainstormed topic ideas to focus on moving forward including: continued focus on the mental health and employment initiative, public focus and education on the Creative Workforce Solutions (CWS), a Public Service announcement on the topic of "Employment for All" and funding of transition counselors.

The SRC presented in front of house human services regarding employment and the committee has stated that the SRC is welcome back in January 2014 to continue the discussion.

The coming year will include continued work on the priorities listed and connection to the ACCESS pilot project for youth at the national level.

The members of the AOE committee are dedicated and hardworking individuals who have the best interest of the SRC at heart and we appreciate all of their effort over the past year.

Performance Review Committee by Ellie Marshall, Chair

The Performance Review Committee monitors and analyzes how well the Division of Vocational Rehabilitation is serving its customers. It gives input to the full SRC

regarding development of measures of performance. It reviews statistical data and measures on performance and makes recommendations to the full SRC regarding the content of the State Plan.

PR made it a priority to keep abreast of the information made available by VR's Clayton Clark regarding unsuccessful closures related to mental health disability consumers. While the data show that differences exist, nothing definitive was drawn from the discussions. Consumers receiving supported employment do better than those who do not. The committee would like to get more information from the GROW Committee, a joint effort between the State Department of Mental Health, regional mental health agencies, and VR that is addressing the Community Rehabilitation and Treatment Program and employment outcomes.

PR reviewed the State Plan targets and goals for 2013. Overall VR has met a steady increase in goals for the most part, except for numbers reflecting staff competencies to do their jobs. Staff turnover over the past two years has had an effect here. Consumer satisfaction however has increased.

An overview of status of the RSA Audit was examined for its recommendation that transition counselors open up a case for each student with whom they have contact. VR and the PR Committee feel that if a TC has to open up a case every time they speak with a student this would potentially damage relationship building with students and parents and result in opening up many unnecessary case files. James Smith and Diane Dalmasse will follow up on this matter.

In preparation for the 2013 Needs Assessment members of the PR Committee observed VR new hire trainings. It was decided after the last Needs Assessment where we conducted the "Not So Secret Shopper" interviews that we would sample the trainings delivered by VR's Alicia Wein and staff. The committee wanted to see if the values and culture of VR are being effectively conveyed to new hires. Our conclusion was that VR gets quite a bit of essential information conveyed at these trainings, as well as the spirit and flavor of the organization as conveyed by staff presenters. A list of strengths and suggestions for change were submitted to VR.

Also preparing for the Needs Assessment, PR reviewed the Consumer Satisfaction Survey, Employer Satisfaction Survey, RSA Standards and Indicators, the Baldrige Survey, and the Employee Satisfaction Survey. These are being combed for issues and trends that will help us set a course for 2014 and beyond.

PR chair Ellie Marshall termed off the SRC in September. PR welcomes Adam Leonard as the new PR chair. With his professional business affiliation in human resources, the committee is in good hands.

It is with deepest gratitude that I thank the members of the PR Committee for their dedicated work. Volunteers of this caliber make it a pleasure to be on your team.

SRC Comments on State Plan Goals and Priorities

The SRC invested a considerable amount of time on the 2014 Needs Assessment and were involved in developing the Findings on which the State Plan Goals and Priorities are based. Therefore the SRC is in complete alignment with DVR on Goals and Priorities in this year's State Plan.

Comments on the State Plan at the Public Hearing held June 16, 2014

4.8(b) (1) Cooperation with Agencies That Are Not in the Statewide Workforce Investment System and Other Entities

The Vermont TANF agency, the Vermont Economic Services Division (ESD), has engaged in a variety of initiatives designed to meet federal requirements for work participation rates. One initiative is an ongoing contractual relationship with Vermont DVR to provide VR services for TANF participants with disabilities. A VR counselor is designated in most DVR offices to work with a caseload of individuals presenting with multiple barriers to employment. In addition, each VR counselor in the Reach Up program works with a part-time Employment and Training Specialist who provides work readiness and follow-along services. The DVR Reach Up program utilizes an individualized service model that focuses on progressive steps to employment including company tours, informational interviews, work experiences, community services placements, work assessments, job shadowing and job coaches combined with incentives for completion. The varying approaches support participants in gradually increasing their work participation while learning how to overcome functional barriers.

Through a collaborative effort with DVR, ESD and Vermont Adult Learning staff, a progressive assessment system was developed to provide an individualized approach to assessment. Depending upon roles, all staff working in the broader Reach Up program have assessments available to screen for psychosocial barriers, work readiness, learning styles, achievement levels, substance abuse, etc.

DVR has engaged in a partnership with ESD to serve Vermonters receiving ongoing General Assistance benefits. A DVR counselor is designated in each DVR region to serve GA customers with disabilities. In addition to counseling staff, each region has a dedicated Employment and Training Specialist to process ongoing GA benefits and provide assistance in work search, job placement and follow along activities.

Vermont DVR has been assisting individuals to apply for Social Security disability benefits for the past decade. Assistance has focused on individuals with very severe disabilities, often undiagnosed and untreated, that prevent them from being successful in employment. The goal is to assist those with severe disabilities to receive a more stable source of support that allows them to pursue treatment options that may lead to reengagement with DVR to work on employment goals. Populations being served are those receiving TANF benefits, those on DVR caseloads, offenders exiting prison, and individuals receiving General Assistance, an emergency benefit program for individuals with medical and other barriers to employment.

In FFY 2013, 348 individuals across all four population groups were successful applicants for Social Security disability benefits. There are 10 full and part time Social Security Specialists who provide services to the Reach Up and General Assistance populations, our VR clients, and individuals within the 8 prison facilities in Vermont.

In addition to Social Security assistance, DVR serves offenders with disabilities to achieve employment. Employment is a critical component to prevent recidivism and to assist offenders released from prison to successfully reenter their communities. DVR has designated DVR Counselors in each district office to serve as a single point of contact for the Department of Corrections.

Currently there is one Offender Reentry Employment Specialist based in Burlington who is dedicated to employment assistance to offenders with disabilities. Jointly funded by VR and the Department of Corrections, this specialist runs employment groups and does one-on-one job placement for individuals exiting jail or who are on probation.

4.8(b) (2) Coordination with Education Officials to Facilitate the Transition of Students with Disabilities from School to the Receipt of Vocational Rehabilitation Services

a.) DVR has created a Transition Unit in VR Central Office. This unit is staffed by a Transition Program Director and Coordinator who support all transition activities statewide. DVR now has eighteen designated School Transition Counselors (some of whom are part-time or in a job share) operating out of all twelve DVR District Offices. Three of these counselors have been designated Senior Transition Counselors who provide peer support to a “pod” of other counselors in a variety of local VR offices. These counselors work directly with all of Vermont high schools plus a variety of technical centers, and alternative and independent schools. Since 2002, the number of transition-aged youth served by DVR has more than doubled, and the percent of all DVR rehabilitation closures has increased from 23% to 34%. Transition Counselors have dedicated caseloads and they meet with students in their local high schools, sometimes beginning as early as their freshman year, and focus on both short and long-term goals. Counselors also serve as a community resource to the schools, they collaborate with interagency partnerships, and they work as catalysts for change to improve the transition process for youth with disabilities.

Youth age 14 - 24 served* and achieved a successful employment outcome since 2002:

<u>FFY</u>	<u>Youth Served</u>	<u>Percent of All Served</u>	<u>Youth Rehabs</u>	<u>Percent of All Rehabs</u>
2002	1,224	25%	285	23%
2003	1,405	26%	307	23%
2004	1,534	28%	349	26%
2005	1,633	29%	371	26%
2006	1,672	30%	399	27%
2007	1,687	31%	394	27%
2008	1,895	34%	461	30%
2009	2,121	34%	451	30%
2010	2,338	34%	454	30%
2011	2,489	34%	479	30%
2012	2,556	34%	524	29%
2013	2,523	35%	613	34%

*"Served" is defined as having an open case with an Individualized Plan for Employment (IPE) during the year (this does not include individuals in referral or application status).

b.) The DVR Director and DVR staff meet quarterly with the Special Education Director (Vermont Agency of Education - AOE) and AOE Transition staff to coordinate the annual Transition Conference, to discuss support and collaboration regarding improvement for Indicators 13 and 14, and to stay coordinated on other transition issues. AOE Transition staff provide ongoing technical assistance to the DVR Transition Counselors, and the DVR Transition Counselors coordinate information and education with schools in their local service areas, including AOE staff attending the monthly DVR Transition Counselor meeting at least once a year. Additionally, VR now has a signed Inter-Agency Agreement between VR and AOE.

c.) DVR Transition Counselors use the *Guide to Secondary Transition services: Helping Students with Disabilities Move From School to Work* with special educators in each of the

high schools they serve and the *Transition Counselor Role and Responsibilities* guidance. They also facilitate a “meet and greet” in the fall with special educators to identify specific needs/issues/obstacles with their school and create a plan between VR and school. These meetings replace the former Core Transition teams in some areas.

A new tool created this year is called the Request for VR Consultation which clarifies for special education staff that they can ask for consultation with a VR Transition Counselor in general or about a specific student prior to that student being enrolled in VR services.

- d.) DVR staff is assisting in implementation of a 5-year SAMHSA grant awarded to the Department of Mental Health (DMH) to focus on creating a system of care for transition-aged youth with emotional and behavioral disturbances (EBD). This group has brought the *Transition to Independence* (TIP) model in to Vermont. This is an evidence-supported practice based on published studies that demonstrate improvements in real life outcomes for youth and young adults with emotional/behavioral difficulties. A team is engaged in a train-the-trainer activity and many youth workers around the state have engaged in TIP training.
- e.) Financial responsibilities for services provided to students with disabilities are addressed in the Interagency Agreement between the Agency of Human Services and the Department of Education as signed in June 2005. That agreement states that, “For eligible students, DVR will pay for services to the extent that funds are available at the time the services are needed, including assistive technology services and devices, that are identified in an approved IPE in keeping with DVR’s order of selection for services that:
 - i. are consistent with the Rehabilitation Act of 1973 and implementing regulations including but not limited to 34 C.F.R. §361.53; the IDEA, including but not limited to 34 C.F.R. §§300.5, 300.6, 300.347(b), and 300.348; the Assistive Technology Act of 2004, PL 108-364; and Vermont State Plan; and
 - ii. promote or facilitate the accomplishment of vocational rehabilitation goals and any intermediate rehabilitation objectives identified in the student’s IPE to ensure the student’s successful transition to employment, post-secondary education, or training within 12 months of the student’s exit from school.”

The Agency of Education remains responsible for ensuring a Free Appropriate Public Education (FAPE) for all students with disabilities. The Agreement goes on to state: “The IDEA does not limit the responsibility of non-educational agencies from providing or paying for some or all of the costs of FAPE to children with disabilities. However, this shall not be construed to expand or otherwise alter state and/or federal law requirements imposed on any non-education agency.”

- f. Other new DVR transition initiatives:
 - The number of Youth Employment Specialists (YES) has increased to 7 to support the employment work of the Transition Counselors in 6 areas of the state. We have achieved the goal of having at least one YES in each VR Region and hope to keep increasing this number.
 - Technical assistance and evaluation of the above being done by TransCen, Inc. ended December 2013 and we have now moved into the sustainability plan.
 - Created a *Capacity Support Plan* for each Transition Counselor which involves a twice annual meeting that includes the VR Regional Manager and supervisor.

- Increased use of technology: all Transition Counselors now have iPhones and laptops to use as capacity and counseling tools

4.8(b) (3) Cooperative Agreements with Private Non-Profit Vocational Rehabilitation Service Providers

DVR maintains Social Security Administration, Ticket to Work cooperative agreements with most of the private non-profit employment service providers in the state. Agreements exist with all the community mental health and developmental services agencies. In the spring of 2008 DVR negotiated a new Ticket to Work cooperative agreement with the agencies in anticipation of the new regulations anticipated to be published later that year. The new agreement has been in place since July 1, 2008 and has generated significant new revenue for providers that help beneficiaries earn at higher levels.

4.8(b) (4) Evidence of Collaboration Regarding Supported Employment Services and Extended Services

In FY 2015 DVR will fund 26 programs serving people with developmental disabilities, people with significant mental illness, and people with Traumatic Brain Injury (TBI). Title VI-B funds account for about \$285,000 and about \$2 million a year is provided by Section 110 funding. Supported Employment Projects fund direct on-site and off-site supports for people with significant disabilities engaged in real, competitive work. The employment rate for customers who receive both DVR and mental health services is more than twice the rate of those who receive only mental health services. According to RSA data, Vermont's rate of placements in supported employment is almost five times the national mean.

DVR has a well established agreement with the Vermont Division of Disability and Aging Services (DDAS) to provide extended services for individuals with developmental disabilities. The primary source of funding for extended services for individuals with developmental disabilities is Home and Community-based Medicaid Waiver funds. In addition, DVR also has a well established agreement with the Department of Mental Health to provide extended services for adults with significant mental illness. The primary source of funding for individuals with severe mental illness is the Community Rehabilitation and Treatment (CRT) Case Rate funding.

For individuals with other disabilities, no state funding for extended services exists in Vermont. As a result there are limited options for providing extended services for individuals with brain injuries, sensory disabilities, severe learning disabilities and other disabilities. There are some limited options to use Social Security Administration, Impairment Related Work Expenses or Plans to Achieve Self Support. However, these options are only feasible in a small minority of cases.

6.3 Quality, scope, and extent of supported employment services (Section 625(b)(3) of the Act; 34 CFR 363.11(c) and .50(b)(2))

In State Fiscal Year 2013, the Vermont Division of Vocational Rehabilitation funded twenty-six (26) Supported Employment grants serving two distinct disability groups: 1) thirteen (13) programs for individuals with developmental disabilities; and 2) thirteen (13) programs for adults with significant mental illness. This funding resulted in 1,500 people with significant disabilities being served in supported employment with 405 people becoming employed in the competitive job market.

DVR is able to support individuals with the most significant disabilities to find and keep stable competitive work through its valuable relationship with the Division of Disability and Aging Services (DDAS) and the Department of Mental Health (DMH).

Individuals with Developmental Disabilities

DVR works closely with DDAS to provide supported employment services and DVR funds are viewed, along with Medicaid funds, as an integral part of the overall employment budget for individuals with developmental disabilities. This funding blends DVR funding with individual Medicaid Waiver funds to create a seamless structure of upfront and ongoing support. DVR funds are specifically allocated to provide assessment, training, and placement services until closure, with Medicaid Waiver funds providing the necessary long-term follow-up.

DVR and DDAS have no supported employment workshops since Vermont closed its last workshop for individuals with developmental disabilities in 2002. That same year, Vermont was ranked #1 in the nation in the number of people with developmental disabilities who received supported employment to work per 100,000 of the state population.¹ In the past two years, the numbers of individuals with developmental disabilities employed in competitive jobs have continued to increase.

Adults with Significant Mental Illness

DVR has also worked closely with DMH to support the integration of employment into the broad array of clinical mental health services available to individuals with significant mental health issues. Similar to its relationship with DDAS, DVR funding is blended with DMH capitated Medicaid to provide a seamless structure of upfront and ongoing support. DVR funds are specifically allocated to provide assessment, training, and placement services until closure, with the DMH capitated Medicaid funds providing the necessary long-term follow-up.

In 2002, the Vermont Performance Indicator Project noted that the employment rate for individuals who received VR services combined with mental health services (through DMH) was more than twice the rate of individuals who only received mental health services.² More recent studies show that individuals in the community mental health system who receive employment services (the preponderance become consumers of VR services) achieve an employment outcome more than twice as often as people who do not receive employment services.

DVR and DMH continue to work together closely to support evidence based supported

employment. Vermont was the first state to pilot a Johnson and Johnson-Dartmouth initiative, now in 13 states, which continues to demonstrate that adherence to the principles of evidence based supported employment are key to increasing employment rates.

Youth with Emotional and Behavioral Disturbances

The JOBS Program is an innovative supported employment and intensive case management service for youth with emotional and behavioral disturbances (EBD) that uses work as a means to reach this challenging population. As a result of a unique partnership between the Department of Mental Health's Child, Adolescent and Family Unit (CAFU), the Department for Children and Families, the Department of Corrections, the Division of Vocational Rehabilitation, and contract agencies, the JOBS Program is operational in twelve (12) sites across the state.

The JOBS Program is funded through a combination of Global Commitment (Medicaid funds) and a VR grant, for a total of \$1.4m, with about 42% coming from VocRehab Federal 110 Funds. In SFY 2013, 531 youth were served through this program.

JOBS involves employers and the business community in meeting the needs of youth through intensive job development, placement, and on and off-site training support. JOBS differs from other traditional employment models by providing intensive case management services to assist in meeting other areas of need in a young person's life, e.g., dealing with legal issues, homelessness, drug/alcohol abuse, and probation and parole.

Within this model, DVR funds are used to provide the employment focus and upfront employment assessment, training, and placement services, while the case management and ongoing support is provided through state general funds (contributed by the different state departments noted above) which are matched to Medicaid through a fee-for-service arrangement with the CAFU in DMH.

Starting in July, 2011, the local JOBS Programs, along with other community supported employment programs funded through AHS, were given employment goals for participants that they were required to achieve. If they exceeded the stated goal, they would receive bonus funds from VocRehab; if they failed to meet the goal, funds would be withheld. For the state fiscal year that ended in June 2013, all JOBS programs but one either met or exceeded their employment goals!

Individuals with Traumatic Brain Injury

DVR also works with the Division of Disability and Aging Services (DDAS) to provide seamless employment support to individuals with Traumatic Brain Injury. Similar to the collaboration that serves individuals with developmental disabilities, the DVR funds are used for the up-front assessment, training, and placement services, while individual Medicaid waiver funds are used to provide the ongoing support.

¹ The State of the States in Developmental Disabilities: 2002 Study Summary, Coleman Institute for Cognitive Disabilities & Department of Psychiatry, University of Colorado, January 2004.

² Vermont Mental Health Performance Indicator Project, Vocational Rehabilitation and CRT Employment, November, 2002.