

RESULTS OF A COMPREHENSIVE STATEWIDE ASSESSMENT OF THE REHABILITATION NEEDS OF INDIVIDUALS WITH DISABILITIES AND THE NEED TO ESTABLISH, DEVELOP OR IMPROVE COMMUNITY REHABILITATION PROGRAMS

Wisconsin DVR (WDVR) conducts an on-going assessment of the rehabilitation (and other) needs of individuals with disabilities residing in the state of Wisconsin. In 2009, Wisconsin focused on expanding the statewide assessment of needs by conducting a key informant survey to augment the information obtained in the 2006-2007 comprehensive needs assessment process. The comprehensive statewide assessment process also includes a review of Wisconsin disability statistics and DVR 911 data, and public comment and input provided by Wisconsin Rehabilitation Council (WRC) members during FFY 09 meetings. This attachment also includes input received during public hearings conducted by WDVR and WRC during the month of March 2009 regarding this FFY'10 State Plan. Representatives from the WRC provided the framework for the key informant survey and reviewed survey data.

Key informant data was gathered and analyzed to develop an understanding of common themes and elements that currently affect the rehabilitation needs of individuals. The key informant survey was conducted on line and distributed to major stakeholders, including advocacy groups, disability advisory councils, community rehabilitation programs, DVR staff, and other partner agency representatives. The survey sought input to six questions which paralleled the state plan needs assessment questions.

WDVR and the Wisconsin Rehabilitation Council will continue to work cooperatively in this process. The identified rehabilitation needs of individuals with disabilities will be discussed with the full council. WDVR and WRC will then identify and prioritize the rehabilitation needs and develop DVR systemic and service delivery goals to address the needs.

A key finding of previous needs assessments included targeting the DVR wait list. During FFY 07 WDVR was able to immediately serve individuals with most significant disabilities and individuals with disabilities. Throughout FFY 08 and 09 individuals with a "most significant disability" were served immediately upon eligibility and OOS determination. In August 2009, individuals with a "significant disability" had a wait of approximately 5 months. Individuals with other disabilities are on an indefinite wait list.

Although in the past, the current governor and legislature have been very supportive of DVR obtaining the full state funding match required to capture federal funds, the current economic situation in Wisconsin resulted in DVR not obtaining the full state funding match required in SFY '10 and '11. One-time funds from the American Recovery and Reinvestment Act (ARRA) partially mitigate the loss of federal funds allotted to Wisconsin but not drawn due to insufficient state match.

Below are the results of the Wisconsin needs assessment process as enhanced by the March 2009 key informant survey.

Description of the results of the comprehensive, statewide assessment with respect to:

1. Rehabilitation needs of individuals with disabilities

The Key Informant Survey respondents identified the following themes:

- Transportation was identified in multiple ways. The issue was identified as not just a rural one, but also within cities and as an adjunct to transition, social and recreational outlets, work, and medical and dental care; nutritional needs
- Better and more consistent access to the long term support services
- Increased accessible and affordable housing
- Increased social and recreational opportunities
- Increased access to medical, dental and wellness programs.
- Training opportunities focusing on soft skills needed for work, GED, adult enrichment opportunities, personal safety, financial planning
- Training that focuses on training for actual jobs in today's market that will meet current or future economic demands.
- Effective counseling and guidance both in terms of work, but also to address emotional needs, development of self advocacy, and positive mentoring to meet life long goals.
- Better use of rehabilitation technology.
- Recognizing the state's difficult economic situation, improved job development services including more job coaching services and employer incentives to improve the likelihood of employment of individuals with disability.
- The WRC noted a need for staff training to be conducted on all new policies and that service and performance data impacted by new policies is retained for three years to measure impact of policy changes.
- The WRC indicated a need for improved coordination with the Department of Health Services on Medicaid Infrastructure Grant funds and projects.

2. Needs which focus particularly on the service needs of those with significant disabilities, including supported employment

- Long term support for people who don't qualify these supports based on IQ – for example, people with autism or mental health
- Improved job coaching so that coaching can fade in a reasonable and timely way.
- Development of a mentor system for work place role models
- Ability to deal with the basic services before rehabilitation e.g. food shelter, basic medical care.
- Improved use of appropriate work skills evaluation tools
- Support of business community for developing a work environment friendly to individuals with disabilities, e.g. need for part time employment, preservation of benefits, flexibility, volunteer work.
- Support of wrap around services not just on the job, e.g. transportation.
- Improved training and development of qualified social workers in the Wisconsin long term care “Family Care” system who understand vocational needs of individuals
- Need to change the long term support system to a managed care approach to retain and expand funding for long-term supported employment services
- Need to orient the long term care system toward a “money follows the person” approach
- Development of natural supports, in lieu of funded long-term extended services
- Informational services regarding various options and programs for families.
- More and better targeted career information to address the attitude that there are no jobs that persons with disabilities can do
- Increased need for soft skill preparation to expand employment opportunities
- Increased education for business community re: the business benefits of hiring our consumers
- Expanded work incentives
- Need for expanded work incentive demonstrations to more fully address the number of consumers experiencing disincentive to full employment (e.g., SSDI \$2/\$1 benefit offset and “Making Work Pay” cost-share demonstration)

- The WRC recommended that DVR modify the OOS determination process.
- The WRC also made this detailed recommendation: Employment and Support Planning: Work with other state agencies (DPI, DHFS) to foster a cross-program commitment to employment in the most integrated setting in keeping with the interests and abilities of the individual. For VR to serve individuals with the most significant disabilities in keeping with the Act, the programs that come before (DPI) and after (DHFS/Family Care) must follow the same process. We have identified that process as employment & support planning: Determine the employment goal, determine the supports needed to achieve the goal, and then plan with the partner agencies, the individual and the individual's natural supports to secure the supports and employment. We recommend that DVR be especially vigilant to protect the "employment goal first" approach as the transition to Family Care (managed care) replaces the county based service system.

3. Rehabilitation needs of individuals with disabilities who are minorities

Responses to the key informant survey were not specific to any specific minority group. Many of the needs identified were not necessarily specific to minorities, but mirrored the general rehabilitation needs of all individuals. However, there were some specific needs identified. They included:

- Provide training to all VR staff in multicultural awareness
- Increase VRC expertise to address cross cultural needs
- Develop awareness in staff of socio-economic issues that are interfering with a person's ability to stay engaged
- Develop better methods to identify issues preventing involvement and make appropriate referrals to community resources to consider these issues to increase engagement of individuals in the VR process
- Culturally competent mental health counseling
- More Spanish speaking VR and employment and training staff
- Develop common protocols for employers to address language barriers
- Develop cooperative programming with the Welfare-to-Work (W-2) staff to address individuals with disabilities (usually in the W-2 Transition program) in the W-2 system – the majority of which are individuals of African-American heritage
- Transportation to jobs in suburbs
- Skills training to prepare for specific occupations

- Increased outreach and availability of VR services in areas of the state with the largest concentrations of African-Americans
- Conduct outreach to recruit potential eligible consumers – e.g. Hmong, Native American.
- For Hmong individuals develop closer working relationships with their clan system to educate clan leaders regarding the VR program, eligibility requirements and services (need permissions for many things: medical evaluations, type of work, etc.).
- Address learning the job through job coaching provided by a Hmong person
- Build better understanding between employer and employee through mentoring provided by a Hmong person
- Increase coordination of VR services between the tribal VR agency and DVR, targeting Native Americans not living on or near reservations
- Develop mentoring services related to crime/poverty to support employment efforts e.g. African American, Native American, Hmong (with specific beliefs or different tribes), and Hmong with their clan structure
- The service rate for minorities does not meet the national standard; increase the service rate for minorities

4. Rehabilitation needs of individuals who are unserved or underserved.

The key informant survey identified the following gaps and population of individuals who are unserved or underserved.

- Individuals on OOS Waiting List - WDVR has addressed the wait list so that in FFY 10 individuals with a most significant disability will continue to be immediately activated. Individuals with or a significant disability or a disability will have a wait of approximately 2-5 months
- Reduce the wait list.
- Felons with disabilities
- Transition students and their families don't recognize the importance of early DVR involvement.
- Transient or homeless population – inability to contact if no phone or home.
- Long term support for individuals with mental illness

- People with AODA issues
 - Study job retention – 1, 2, years out.
 - Transportation – public and private
 - Caregiver reimbursement
 - People unemployed or laid off due to recession
 - Older adult workers
 - Minority populations in general
 - WRC recommended staff training on some specific disability groups such as: autism spectrum disorders, traumatic brain injury, post traumatic stress disorder.
5. Rehabilitation needs of individuals with disabilities who have been served through other components of the statewide workforce investment system
- Need to increase partnerships with the statewide workforce investment system to develop innovative programs to serve common customers.
 - On going training of job center staff on disability sensitivity issues, TTY/Relay usage, pre-employment assessments and work-place technologies.
 - Continued efforts to coordinate the efforts of different government agencies with very different rules and expectations for participation. An individual facing parenting responsibilities, poverty, and disability issues needs to work with agencies that can coordinate their efforts.
 - Cooperation with job center network is valuable to consumers who can work on certain aspects of their job search independently.
 - Need for basic computer skills by consumers to use all resources available
 - Job readiness classes that focus on how to communicate skills and address their disability to the employer.
 - Some centers are not as accessible or “disability friendly”.
 - Reduce hoops (e.g. changing contact people, long wait times)

- Improve work needs assessment before referring to general programs for employment search.
- Increase job openings on the system
- Continue to expand partnerships and avoid duplication.
- The WRC recommended continued partnership with Disability Navigators in the job center system to improve access for individuals with disabilities.

6. Need to establish, develop, and/or improve community rehabilitation programs (CRPs).

- Development of more community-based alternatives.
- Focus on integration and removing the “comfort” in sheltered employment
- DVR should be the lead in creating and being the main coordinator of community rehabilitation programs by developing expertise locally of how to best utilize a CRP.
- Do not develop more programs, but enhance current programs to be more culturally sensitive.
- Work with CRP’s to help them change/adjust mission to improve their ability to look at new avenues of services.
- Develop community outreach to other local and neighborhood agencies, centers, clinics, union centers, schools, employers, other social service agencies
- Develop training programs for staff who work in the work centers to also feel more comfortable working in the community.
- Develop new areas to address behavior or performance issues prior to supported employment or job placement.
- The WRC also recommended tracking satisfaction and outcome of vendors of VR services.
- The WRC recommended outreach to individuals currently in sheltered employment.