2019 Comprehensive Statewide Needs Assessment

Vocational Rehabilitation Needs of Individuals with Disabilities

Washington State Department of Social and Health Services
Division of Vocational Rehabilitation
Completed in partnership with the Washington State Rehabilitation Council

December 2019
Acknowledgements:
The research team of James McCall and Dr. Lena Le, Washington State University, Social and Economic Sciences Research Center, completed an assessment of vocational rehabilitation needs of unserved and underserved populations, based on a survey and interviews conducted with DVR stakeholders.

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Shelby Satko and Mari Heusman of the Washington State Rehabilitation Council conducted the assessment of Washington’s workforce development system and were partners in planning and carrying out the CSNA.

DVR staff Kelly Boston, Tammie Doyle, Katie Mirkovich, and Cassi Villegas contributed information and insights on content related to students and youth, supported employment, community rehabilitation programs, and cultural awareness.
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Introduction

The Comprehensive Statewide Needs Assessment (CSNA) is a study of the vocational rehabilitation needs of individuals with disabilities statewide, undertaken by Washington State Division of Vocational Rehabilitation (DVR) in partnership with the Washington State Rehabilitation Council (WSRC). Required by the federal Rehabilitation Act of 1973, as amended by the federal Workforce Innovation and Opportunity Act of 2014 (WIOA), the CSNA informs the goals and priorities of DVR’s State Plan and the Division’s understanding of its customers and their service needs.

The CSNA requires particular focus on the following needs:

- Individuals with the most significant disabilities, including their need for supported employment;
- Individuals with disabilities who are minorities and individuals who have been unserved or underserved by the VR program;
- Individuals with disabilities served through other components of the statewide workforce investment systems;
- Youth and students with disabilities, including their need for pre-employment transition services;
- Need to establish, develop, or improve community rehabilitation programs.

Data Sources

The 2019 CSNA, completed between May and November 2019, draws upon secondary data and reports, DVR service data, and survey and interview responses to assess vocational service needs. The following sources and data collection methods were used to complete the required components of the assessment:

- Analysis of 2017 American Community Survey data.
- Analysis of DVR service data for cases that closed in program years 2017 & 2018 (July 1, 2017-June 30, 2019).
- Surveys of subject matter experts, existing research, and DVR service data information on supported employment needs and programs.
- Survey and interviews of stakeholders about unserved and underserved populations, undertaken by Washington State University, Social and Economic Sciences Research Center (SESRC).
- Interviews of Workforce Development Council (WDC) representatives and DVR liaisons to WDCs about people with disabilities served by other parts of the workforce system.
- Existing research and DVR service data about youth and students with disabilities.
- Survey of community rehabilitation programs (CRPs) and DVR data about services provided by CRPs.
Disability and DVR Services Data

American Community Survey (ACS) data for 2017 indicate that 12.9% of Washington’s residents – 942,318 individuals – are living with a disability. The rate of disability for Washington’s population has remained nearly constant over the past five years.

More than half of all people with disabilities are in their prime working years, between the ages of 18 to 64 years. For working age individuals with disabilities, 40.5% are employed, 5.4% are unemployed, and 54% are not in the labor force. The unemployment rate, which excludes individuals not in the labor force, is 11.8%. Compared to people without disabilities, people with disabilities are three times as frequently unemployed or out of the labor force as people without disabilities. Although disability and illness are commonly cited reasons for not working, the need for vocational rehabilitation services well exceeds available resources.

DVR service numbers are significant when compared to the 26,096 unemployed working age adults with disabilities but represent a very small portion of the 259,784 individuals with disabilities who are out of the labor force. During program years 2017 and 2018, DVR closed cases for 9,503 customers who were participating in a service plan. Completion of services led to employment for 5,115 individuals.

Washingtonians with disabilities earn about one-third less and are twice as likely to live in poverty as people without disabilities. Lower earnings are attributable to both low hourly wages and less than full time work. Washingtonians with disabilities earn an average of $27,052 annually. DVR customers who obtained employment in program year 2018 had median earnings of $12 per hour and $19,682 annually.

Unemployment and low earnings are related to lower education levels and reflected in high rates of poverty. Compared to people without disabilities, Washingtonians with disabilities are nearly twice as likely to lack a high school diploma or equivalency and about half as likely to have a bachelor’s degree or higher. Nearly 18% of Washingtonians with disabilities live below the federal poverty level, compared to a statewide rate of about 9%. More than 28% of people with disabilities have incomes below 150% of the poverty level.

DVR’s service population in program years 2017 and 2018 was similar to that of working age people with disabilities statewide, with a few notable exceptions. DVR underserved females, in comparison to the gender make-up of working age adults with disabilities. Although minority groups were proportionately represented in DVR’s service population, several groups had lower than average rehabilitation rates. Additionally, Black/African American and American Indian/Alaska Native populations are underrepresented in DVR’s workforce.

County and regional comparisons show that DVR services were not provided in proportion to the population of working age people with disabilities in some counties. Regions 1 and 2 served a larger percentage of customers than would be expected from the population data, although cases more frequently closed without a job in Region 1. Region 3 – especially Pierce County – and rural areas in regions 1 and 3 are underserved, compared to their share of working age individuals with disabilities.
**2019 CSNA Themes**

**Customer Service and Outcomes**

Prior to entering an order of selection in November 2017, DVR provided services to all eligible customers. The need to establish priorities for service has led to thousands of eligible customers being wait-listed for services. DVR’s limited capacity to take new customers and wait times intensify challenges in reaching unserved and underserved populations and meeting the needs of most significantly disabled (MSD) customers. Although DVR has continued to serve all customers determined MSD, referrals to WorkSource services have increased and review and approval of some types of purchased services are required, to maximize the use of comparable resources. Additionally, staff are managing more cases that require coordination with other service systems. These practices have contributed to delays in service planning and referrals.

Since order of selection, customers with a determination of MSD are a larger percentage of active cases. DVR service data show that MSD customers with a service plan are as likely to obtain a job as individuals with less significant disabilities. However, MSD customers, including those with supported employment needs, do not progress to plan development at the same rate as other customers. Additionally, individuals with behavioral health, physical/mobility, and vision impairments, are less likely to move from eligibility determination to plan development than individuals with cognitive or hearing disabilities. These customers are likely to have supported employment needs that are not identified or cannot be met due to lack of long-term support resources.

The rate of successful outcomes – customers who obtain a job – has also fallen since DVR entered an order of selection. The majority of customers with successful outcomes frequently obtain minimum wage jobs that lack opportunity for advancement.

**Coordination with Other Service Systems**

It is increasingly necessary for DVR to coordinate services with other service systems and programs, to effectively meet the vocational rehabilitation needs of people with disabilities. Individuals with supported employment needs require long-term support resources and may already be connected to another service system when they apply to DVR. Pre-ETS services for students are planned and provided collaboratively with educational agencies. Strategies to coordinate and integrate services across the workforce development system are needed for people with disabilities to more effectively access employment services through WorkSource centers. Customers on the waiting list for DVR services also often need referrals to community resources for other support services.

DVR has established relationships with each of these systems through formal and informal agreements about shared responsibilities and resources and liaison roles. Relationships exist at the executive, local office, and staff levels but are at various stages of development and effectiveness. Additionally, knowledge about other service systems and coordination to provide linkages and seamless service delivery for customers is inconsistent across DVR locations.
Responsibility for supported employment services is segmented among DVR and the State agencies responsible for developmental disabilities, behavioral health, and long-term care. Coordination among the lead agencies is complicated and incomplete. Services and interagency coordination are in place and function well, for the most part, for customers with intellectual and developmental disabilities. Coordination of services for customers shared by DVR and other supported employment programs – primarily for people with behavioral health disabilities -- is in early stages. The episodic nature of behavioral health conditions and differing philosophies about readiness for employment are barriers to service delivery and coordination.

WorkSource centers assist a broad population of jobseekers and work best for people who have the ability to independently utilize the tools and training opportunities offered and undertake self-directed job search. A systematic approach to integrating DVR and WorkSource is challenging, due to the local design of one-stop centers; however, local collaborations have led to some promising practices.

The challenges of implementing a statewide Pre-ETS program are greatly magnified, given the shared responsibility with education agencies and the number of school districts in Washington that operate under local authority. Transition planning and navigating between education agencies, DVR, DDA, and transition providers is complex for students, families, school staff, and the agencies.

Service Barriers and Access
Stakeholder interviews identified order of selection as a barrier to services, as it excludes individuals with less severe disabilities and ones whose disabilities are not readily identified. Barriers to accessing services include lack of transportation and awareness about service availability, wait time for services, language and cultural factors, service provider lack of expertise, and behavioral health factors. Challenging life circumstances, such as homelessness, economic insecurity, criminal background, tribal affiliation, or multiple disabilities pose additional barriers to accessing and engaging in services and obtaining employment. Complex life circumstances don’t factor into the determination of significance of disability and DVR is not well-equipped to make referrals to appropriate services.

Access to DVR is limited by insufficient outreach, financial resources, and staff shortages. Many who could benefit do not qualify under order of selection, lack awareness about services, or need more time to engage and gain trust. DVR’s practice of referring customers to WorkSource centers, most of which lack disability expertise, has also delayed services for customers who need more individualized assistance.

Staffing Vacancies and Training Needs
DVR has experienced high staff turnover and unfilled counselor positions, which has contributed to delays in case progress and case transfers.

Stakeholders indicate that DVR and workforce system partners need to develop greater awareness of challenging life circumstances and cultural factors that affect customer success and cultural sensitivity in working with diverse racial and ethnic groups, youth, and individuals who are deaf.
Additionally, the racial/ethnic composition of DVR’s staff does not reflect some of its customer groups.

**Continued Assessment**

The CSNA identified the need for annual assessment of broader workforce system efforts and collaboration between DVR and local WorkSource centers to meet the needs of people with disabilities. Assessment of Pre-ETS needs and service gaps is undergoing additional study at this time.

**Recommendations**

**Customer Service and Outcomes**

- Reduce length of time on the waiting list and wait times for customers to complete a plan and begin services.
  - Develop strategies to improve timely and continuous case progress.
  - Update key performance measures and expectations related to case movement.
  - Develop procedures and monitoring expectations to ensure frequent VRC contacts with customers.
- Improve plan development for populations that are less successful in completing a plan for services.
- Improve customer outcomes, particularly for customers with supported employment needs.
  - Implement outcome measures for Community Rehabilitation Programs, including types of jobs, days to placement, wages, hours worked, and costs per successful placement.
  - Assess the types of in-house job search and placement assistance provided to customers.

**Coordination with Other Service Systems**

- Partner with other agencies to maximize resources and effectively coordinate services for individuals who are eligible for both DVR and Foundational Community Supports (FCS):
  - Implement the Interlocal Agreement with the Health Care Authority/Division of Behavioral Health and Recovery for FCS.
  - Provide staff training on the agreement and working with people with behavioral health conditions, in collaboration with DHBR/FCS.
  - Better understand ALTSA implementation of FCS and potential collaboration.
- Strengthen information and referral guidelines and practices to provide access to other workforce system programs and address customer needs for support services.
- Develop statewide expectations and outcomes for business engagement program and staff roles and responsibilities, including education, training, and outreach.
- Develop and implement with regional Workforce Development Councils (WDCs) a framework to address barriers identified in the WDC case study and an action plan for best practices.
  - Facilitate the provision of training for WorkSource staff to increase the capacity of WorkSource to serve people with disabilities.
• Collaborate with local school districts to better understand their services and gaps.

**Service Barriers and Access**

• Develop and implement culturally relevant outreach plans to reach populations that lack awareness or understanding of DVR services.
• Expand availability of CRP services until WorkSource centers are better able to meet the needs of people with disabilities.
• Make Pre-ETS services available statewide and use all of the resources.
• Engage students with DVR earlier in their transition process and improve coordination between individual education/504 plans and individual plans for employment.
• Provide appropriate information and referral resources for people with complex life circumstances.

**Staff Vacancies and Training Needs**

• Develop staff recruitment and retention plan that addresses staffing patterns and turnover.
• Diversify DVR’s workforce, particularly where representation does not reflect DVR’s service populations.
• Include awareness, cultural humility, and implicit bias training in staff training curriculum.
• Establish mobile work locations for VRCs.
• Provide technical assistance on the use of natural supports in the workplace.

**Continued Assessment**

• Annually re-assess barriers and challenges to serving DVR customers in WorkSource locations.
I – Disability and DVR Services Data

Disability in Washington State
American Community Survey (ACS) data for 2017 indicate that 12.9% of Washington’s residents -- 942,318 individuals – are living with a disability. The rate of disability for Washington’s population has remained nearly constant over the past five years.

More than half of all people with disabilities are between the ages of 18 to 64 years, the prime working years. Working age individuals with disabilities number 480,828 people.

For the working age population, cognitive and ambulatory disabilities are most common, affecting 45% and 43% of working age adults with disabilities, respectively. Auditory and vision impairments occur in about 22% and 16% of people with disabilities, respectively.

People who identify as American Indian/Alaskan Native have the highest rate of disability in the State, with 17.5% reporting a disability, about one out of every six individuals. Disability rates of 7.1% and 8.1% among Asian and Hispanic/Latino individuals are lower than the overall population rate of 12.9%.
Many people don’t work because of their disability: about one-fourth of all people out of the labor force cite illness and disability as the primary reason. Additionally, people with less than a high school education are more likely to be out of the labor force, which is a factor for people with disabilities.
Compared to people without disabilities, people with disabilities are nearly twice as likely to lack a high school diploma or equivalency and about half as likely to have a bachelor’s degree or higher. People with disabilities earn an average of $27,052 annually, 33% less than people without disabilities. Females with disabilities also experience a gender gap, earning 30% less than males.

Poverty affects people with disabilities at twice the rate of people without disabilities. Nearly 18% of Washingtonians with disabilities live below the federal poverty level, compared to a statewide rate of about 9%.

More than 28% of people with disabilities have incomes below 150% of the poverty level.

Poverty level for a two-person household was $16,240 in 2017, the equivalent of minimum wage earnings for 28 hours of work per week. Full-time work at minimum wage equated to an income slightly above 150% of poverty for a two-person household.
Customers Served in Program Years 2017 and 2018
In program years 2017 and 2018, DVR closed 16,068 cases. Of the 14,521 individuals determined eligible for services, 9,503 (65%) closed from plan and 5,115 cases closed successfully, resulting in a rehabilitation rate of 54%.

DVR Closed Cases
July 1, 2017 - June 30, 2018

- Closed Cases
  - Closed from Application: 1,547
  - Closed from Eligibility: 5,018
  - Closed after Plan: 9,503

- Closed after Rehabilitation: 5,115
- Other: 4,388

The most common primary disability types for DVR customers were Cognitive (38%), Psychosocial (34%), and Mobility/Physical (21%).

In PY 2017 and PY 2018, DVR underserved females, in comparison to the gender make-up of working age adults with disabilities.
The percentage of DVR staff who identify as minority is similar to DVR customers. However, Black/African American and American Indian/Alaska Native populations are underrepresented in DVR’s workforce.

For cases that closed in FFY 18, the median annual wage was $19,682. The median hourly wage of $12 was 4% higher than Washington’s minimum wage of $11.50 per hour in 2018.
Distribution of DVR Services

The table below compares the number and percent of people with disabilities in each county with the number and percent of DVR cases closed and closed rehabilitated in programs years 2017 and 2018. The 19 counties for which data are available represent 89.8% of working age individuals with disabilities in the State.

### Geographic Distribution of Working Age Adults with Disabilities and DVR Services

<table>
<thead>
<tr>
<th>Region</th>
<th>County</th>
<th>DVR Location</th>
<th>Number of Working Age Individuals with Disabilities (PY 17 &amp; PY 18)</th>
<th>Percent of Working Age Individuals with Disabilities</th>
<th>Number of DVR Case Closures (PY 17 &amp; PY 18)</th>
<th>Percent of DVR Case Closures (PY 17 &amp; PY 18)</th>
<th>Number of Closed Rehab Cases (PY 17 &amp; PY 18)</th>
<th>Percent of DVR Closed Rehab Cases (PY 17 &amp; PY 18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Benton</td>
<td>Kennewick</td>
<td>16,789</td>
<td>3.5%</td>
<td>405</td>
<td>2.5%</td>
<td>110</td>
<td>2.2%</td>
</tr>
<tr>
<td>1</td>
<td>Chelan</td>
<td>Wenatchee</td>
<td>4,731</td>
<td>1.0%</td>
<td>208</td>
<td>1.3%</td>
<td>46</td>
<td>0.9%</td>
</tr>
<tr>
<td>1</td>
<td>Franklin</td>
<td>Kennewick</td>
<td>5,390</td>
<td>1.1%</td>
<td>92</td>
<td>0.6%</td>
<td>24</td>
<td>0.5%</td>
</tr>
<tr>
<td>1</td>
<td>Grant</td>
<td>Moses Lake</td>
<td>5,947</td>
<td>1.2%</td>
<td>139</td>
<td>0.9%</td>
<td>34</td>
<td>0.7%</td>
</tr>
<tr>
<td>1</td>
<td>Spokane</td>
<td>Spokane</td>
<td>35,252</td>
<td>7.3%</td>
<td>1,648</td>
<td>10.3%</td>
<td>349</td>
<td>6.8%</td>
</tr>
<tr>
<td>1</td>
<td>Yakima</td>
<td>Yakima, Sunnyside, Toppenish</td>
<td>16,090</td>
<td>3.3%</td>
<td>710</td>
<td>4.4%</td>
<td>248</td>
<td>4.9%</td>
</tr>
<tr>
<td>2</td>
<td>Island</td>
<td>Mt. Vernon, Oak Harbor</td>
<td>6,096</td>
<td>1.3%</td>
<td>119</td>
<td>0.7%</td>
<td>55</td>
<td>1.1%</td>
</tr>
<tr>
<td>2</td>
<td>King</td>
<td>Kent, Bellevue, Redmond, SeaTac, Seattle Central, North Seattle</td>
<td>104,540</td>
<td>21.7%</td>
<td>3,926</td>
<td>24.5%</td>
<td>1,321</td>
<td>25.9%</td>
</tr>
<tr>
<td>2</td>
<td>Skagit</td>
<td>Mt. Vernon</td>
<td>9,263</td>
<td>1.9%</td>
<td>279</td>
<td>1.7%</td>
<td>97</td>
<td>1.9%</td>
</tr>
<tr>
<td>2</td>
<td>Snohomish</td>
<td>Arlington, Everett, Snohomish</td>
<td>49,740</td>
<td>10.3%</td>
<td>1,522</td>
<td>9.5%</td>
<td>584</td>
<td>11.4%</td>
</tr>
<tr>
<td>2</td>
<td>Whatcom</td>
<td>Bellingham</td>
<td>13,210</td>
<td>2.7%</td>
<td>720</td>
<td>4.5%</td>
<td>302</td>
<td>5.9%</td>
</tr>
<tr>
<td>3</td>
<td>Clallam</td>
<td>Port Angeles</td>
<td>7,317</td>
<td>1.5%</td>
<td>203</td>
<td>1.3%</td>
<td>82</td>
<td>1.6%</td>
</tr>
<tr>
<td>3</td>
<td>Clark</td>
<td>Vancouver</td>
<td>29,727</td>
<td>6.2%</td>
<td>753</td>
<td>4.7%</td>
<td>281</td>
<td>5.5%</td>
</tr>
<tr>
<td>3</td>
<td>Cowlitz</td>
<td>Kelso</td>
<td>13,258</td>
<td>2.8%</td>
<td>317</td>
<td>2.0%</td>
<td>58</td>
<td>1.1%</td>
</tr>
<tr>
<td>3</td>
<td>Grays Harbor</td>
<td>Aberdeen</td>
<td>6,818</td>
<td>1.4%</td>
<td>233</td>
<td>1.5%</td>
<td>55</td>
<td>1.1%</td>
</tr>
<tr>
<td>3</td>
<td>Kitsap</td>
<td>Silverdale</td>
<td>19,557</td>
<td>4.1%</td>
<td>748</td>
<td>4.7%</td>
<td>260</td>
<td>5.1%</td>
</tr>
<tr>
<td>3</td>
<td>Lewis</td>
<td>Centralia</td>
<td>6,052</td>
<td>1.3%</td>
<td>358</td>
<td>2.2%</td>
<td>92</td>
<td>1.8%</td>
</tr>
<tr>
<td>3</td>
<td>Pierce</td>
<td>Puyallup, Tacoma</td>
<td>66,917</td>
<td>13.9%</td>
<td>1,579</td>
<td>9.9%</td>
<td>529</td>
<td>10.4%</td>
</tr>
<tr>
<td>3</td>
<td>Thurston</td>
<td>Tumwater</td>
<td>15,162</td>
<td>3.2%</td>
<td>845</td>
<td>5.3%</td>
<td>279</td>
<td>5.5%</td>
</tr>
<tr>
<td>All Other</td>
<td>All Other</td>
<td>48,972</td>
<td>10.2%</td>
<td>1,226</td>
<td>7.6%</td>
<td>296</td>
<td>5.8%</td>
<td></td>
</tr>
</tbody>
</table>

**Total** | **480,828** | **100.0%** | **16,030** | **100.0%** | **5,102** | **100.0%** |

County and regional comparisons show that DVR services were not provided in proportion to the population of working age people with disabilities in some counties.

- Pierce County had the largest discrepancy in share of DVR services compared to the working age population. Pierce County was home to 13.9% of working age people with disabilities but served only 9.9% of customers with closed cases and 10.4% of closed rehabilitated cases. Clark County closures were also somewhat low in proportion to the population data, although its share of closures with a job outcome was higher.
• King, Kitsap, Lewis, Thurston, Whatcom, and Yakima counties served a greater share of closed cases and closed rehabilitated cases than their proportion of the population.
• In some counties the number of closed cases was proportionate or greater than the population data but successful closures were disproportionately low. This was especially apparent in Spokane and the combined rural counties.

Regions 1 and 2 served a larger percentage of customers than would be expected from the population data, although cases more often closed without a job in Region 1. While 20% of closed cases were served by Region 1, only 16% closed with a job. Region 2, with 38% of working age individuals with disabilities, served 41% of closed cases and about 46% of those that closed successfully. Region 3 and rural areas in regions 1 and 3 are underserved compared to their share of working age individuals with disabilities.

### Comparison of DVR Caseloads to Working Age Individuals with Disabilities by Region

<table>
<thead>
<tr>
<th>Region</th>
<th>Percent of Individuals with Disabilities</th>
<th>Percent of Closed Cases</th>
<th>Difference</th>
<th>Percent of Closed Rehab Cases</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region 1</td>
<td>17.5%</td>
<td>20.0%</td>
<td>2.5%</td>
<td>15.9%</td>
<td>-1.6%</td>
</tr>
<tr>
<td>Region 2</td>
<td>38.0%</td>
<td>41.0%</td>
<td>2.9%</td>
<td>46.2%</td>
<td>8.2%</td>
</tr>
<tr>
<td>Region 3</td>
<td>34.3%</td>
<td>31.4%</td>
<td>-2.9%</td>
<td>32.1%</td>
<td>-2.2%</td>
</tr>
<tr>
<td>Rural*</td>
<td>10.2%</td>
<td>7.6%</td>
<td>-2.5%</td>
<td>5.8%</td>
<td>-4.4%</td>
</tr>
</tbody>
</table>

* Counties with populations under 65,000. All of these counties are in regions 1 and 2.
II – Supported Employment

DVR Service Data for Most Significantly Disabled and Supported Employment

DVR reviewed cases that closed during the two-year period July 1, 2017-June 30, 2018 and consulted with experts to assess service rates for individuals with most significant disabilities (MSD) and the need for and availability of supported employment services.

DVR implemented an Order of Selection on November 1, 2017 and prioritized services for individuals with the most significant disabilities. Since that time, the proportion of active cases with MSD determination and needs for supported employment have grown.

- Nearly two thirds of closed cases during the review period had MSD determinations, compared to about 50% prior to entering Order of Selection.
- About half of MSD customers had supported employment needs identified on their IPE; 75% of these customers had a cognitive disability and 16% had a psychosocial disability.

DVR service data suggest that DVR has greater challenges assisting individuals with psychosocial, physical/mobility, and vision impairments to move from eligibility determination to plan development than individuals with cognitive disabilities. Since the need for supported employment is assessed in the plan development process, service needs are likely to be greater than indicated by the data for customers in plan.

- Nearly half of MSD cases in which the primary disability was psychosocial, physical/mobility, or vision closed before plan; the rate for MSD individuals with cognitive or hearing disabilities was 36-37%.

When compared to individuals determined significantly disabled (SD) or not significantly disabled (NSD), MSD cases were equally likely to have an employment outcome but were much more likely to close before plan. MSD cases with supported employment needs were more successful in obtaining employment than cases overall.

- Rehabilitation rates were 54% for all cases; 55% for MSD cases; and 68% for supported employment cases.
- 43% of cases with MSD determination closed before plan, twice as often as SD and NSD cases.

Supported Employment Services and Systems

Funding for supported employment services is segmented among DVR, the Developmental Disabilities Administration (DDA), the Division of Behavioral Health and Recovery (DBHR), and the Aging and Long-Term Services Administration (ALTSA). DBHR and ALTSA have program oversight
responsibility for Foundational Community Supports (FCS), which provides resources for supported employment. Coordination among these lead agencies is complicated and insufficient.

Ideally, DDA and FCS services are complementary to and braided with DVR’s services, to enable individuals to access resources from both systems when needed and as appropriate to their needs.

DVR services are time-limited, whereas both DDA and FCS can be ongoing. DVR typically provides assessment, job placement, intensive training services, and support services needed by the individual to obtain a job and achieve stable job performance. DDA or FCS long-term supports begin when the customer reaches stabilization on the job. DDA and FCS can provide job placement services and short-term supports for customers ineligible for DVR services; however, the range of services is more limited than those available from DVR.

Supported employment resources have expanded statewide with the startup of FCS in 2018 but availability of long-term supports is insufficient to meet the need and is often a determining factor in access to VR services. DVR customers with behavioral health needs may not qualify for FCS or be connected to behavioral health services. Additionally, permanent adoption of FCS is not yet assured. DVR could also expand long-term supports by encouraging supported employment providers to focus on developing natural supports within customers’ workplaces.

Definitions and understanding of eligibility for services, readiness to participate, and long-term support differ among the three programs. To effectively serve customers, these differences need to be bridged and staff and providers need to be knowledgeable about the different systems and services. Additionally, customers and their families or advocates need better access to benefits planning and understanding of the impact of work on other benefits, to make an informed choice about pursuing employment.

**DVR-DDA Collaboration**

Services and interagency coordination are in place and function well, for the most part, for customers with intellectual and development disabilities. DVR and DDA work collaboratively with county agencies, employment service providers, and school districts to effectively coordinate transition and vocational rehabilitation services for mutual customers. Respective roles and responsibilities are defined by a memorandum of understanding. DDA and DVR both contract with community rehabilitation programs (CRPs) to provide employment services to customers.

Shared customers of DVR and DDA are highly successful in getting jobs. According to a January 2019 report by the Joint Legislative Audit and Review Committee (JLARC), Washington leads the nation in helping DDA clients get jobs and 80% of DDA supported employment customers who use DVR services get a job. However, few earn a living wage and only 10% earn more than the federal poverty level. Earnings are below poverty level for 99% of individuals with high support needs, who work an average of 21 hours per month. Individuals with low support needs work an average of 88 hours per month and have higher earnings, though only 35% make more than the poverty level.

For shared DDA-DVR customers, service capacity and availability to those who qualify are not major impediments to accessing supported employment services. Challenges pertain to conflicts in service models and processes, lack of procedures for coordination in some offices, confusing communications, and inadequate access to benefits planners. The path to accessing services can be
confusing to customers and their families or advocates, especially with recent changes to practice that require customers to apply to DVR first, which can also lead to a referral to WorkSource.

Sometimes DVR’s “ability to benefit from services” criterion conflicts with DDA’s philosophy that all people can work. DDA can determine a customer ready to search for work and DVR finds them ineligible for services. If a customer is ineligible for DVR services or placed on the waiting list, DDA can provide job placement services but the customer is delayed in their job search.

When a DDA customer comes to DVR and is already working, DVR needs to complete its processes for eligibility determination, vocational assessment, and individual plan for services. In the meantime, the customer is in need of intensive training services to support their success on the job. Sometimes, the vocational assessment or job goal developed through the service planning process conflicts with the existing job placement.

Coordination could be improved by clarifying roles in the transition process, agreement on readiness of referrals, joint participation in presentations to customers about services, engaging customers earlier, and holding each partner accountable for outcomes.

DVR-FCS Collaboration

Foundational Community Supports (FCS) is a Medicaid demonstration program that funds supported employment services for targeted populations, including people with behavioral health conditions, long-term care needs, or physical impairments that necessitate assistance with work activities. The demonstration program is intended to show that supported employment services reduce the overall healthcare costs of Medicaid-eligible individuals. During the demonstration phase, the number of customers that can be served is limited and the program is nearing that capacity.

FCS supported employment provides job placement and retention, with the expectation that participants will be connected to other needed health services, such as outpatient behavioral health and long-term care. Ongoing supported employment services can be provided for the individual to remain employed.

The State Health Care Authority’s Division of Behavioral Health and Recovery and DSHS’ Aging and Long-term Support Administration are responsible for developing and supporting the statewide provider network. FCS services are provided by community health, behavioral health, tribal, and social service agencies, which include community rehabilitation programs. Gaps in service delivery arise when providers do not have policies and procedures for sharing information with other agencies, to facilitate customer access to services provided by other agencies.

Coordination of services for customers shared by FCS and DVR is in early stages. DVR has established standard operating procedures for working with individuals who are eligible for FCS to support coordinated service delivery for mutual customers and is in the process of implementing an interlocal agreement with DBHR to provide a collaborative framework for serving people eligible for FCS.

The episodic nature of behavioral health conditions and differing philosophies about readiness for employment present challenges to coordinated service delivery. FCS draws upon the Individual Placement and Support (IPS) model of supported employment for individuals with long-term severe mental illness or substance use disorders. IPS emphasizes rapid job placement based on the job
seeker’s preference, rather than in-depth assessment or counseling. This approach differs from DVR’s process of assessing customer strengths and barriers to employment and customer selection of a job goal consistent with the vocational assessment.

With the exception of CRPs, DVR has limited experience partnering with FCS providers to serve customers, particularly community health and behavioral health agencies. Knowledge about those service systems and how to work effectively with FCS customers is inconsistent across DVR and its service providers. Additionally, when a customer receives FCS services from a provider that is not a DVR contractor, they cannot use the same provider for DVR services. Providers must be vendors for both FCS and DVR services for coordination to function optimally.

**Recommendations:**

- Improve outcomes:
  - for populations that are less successful in completing a plan and services
  - for supported employment customers (job types, hours worked, earnings)
- Implement collaboration with DBHR Foundational Community Supports
- Provide staff training on working with people with behavioral health conditions, in collaboration with DBHR/FCS.
- Better understand ALTSA implementation of FCS and potential collaboration.
- Provide technical assistance on the use of natural supports in the workplace.
III – Unserved & Underserved Populations

Service Needs and Barriers to Access

In July 2019, DVR contracted with Washington State University, Social and Economic Studies Research Center, to assess the needs of individuals with disabilities who are unserved or underserved, including racial and ethnic minorities. The two-part study included a web-based survey, completed by 33 stakeholders, and follow-up phone interviews with 23 of the survey completers. The survey was designed to identify service needs and barriers to accessing services by populations that are not well-served by DVR. Interviews were held to gain insight into barriers to employment and ways to improve DVR services to underserved groups. Stakeholders were also asked about the appropriate roles of DVR and Washington’s broader workforce system in serving people with disabilities and ways to ensure DVR services are culturally competent and responsive to customers.

Stakeholders identified the populations they serve or represent, including disability types, racial and ethnic minorities, and groups with particular barriers to accessing services (BAS), including homeless individuals, ex-offenders, students and youth, older adults and veterans.

Service Needs: Core VR services of Job Placement, Job Retention, Transition Services for Youth, Job Exploration, and training or education ranked highest among the services most needed by unserved and underserved populations. The table below shows the top service needs, based on weighted rankings of stakeholders’ selection of their top three priorities.

<table>
<thead>
<tr>
<th>Service Needs</th>
<th>Overall Rank</th>
<th>% Ranked #1</th>
<th>% Ranked #2</th>
<th>% Ranked #3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Placement</td>
<td>1</td>
<td>34%</td>
<td>14%</td>
<td>20%</td>
</tr>
<tr>
<td>Job Retention</td>
<td>2</td>
<td>2%</td>
<td>25%</td>
<td>17%</td>
</tr>
<tr>
<td>Transition Services for Youth</td>
<td>3</td>
<td>13%</td>
<td>8%</td>
<td>9%</td>
</tr>
<tr>
<td>Job Exploration</td>
<td>4</td>
<td>7%</td>
<td>12%</td>
<td>11%</td>
</tr>
<tr>
<td>Technical/Vocational Training</td>
<td>5</td>
<td>10%</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>On-the-Job Supports or Coaching</td>
<td>6</td>
<td>3%</td>
<td>7%</td>
<td>18%</td>
</tr>
<tr>
<td>Internships/Apprenticeships</td>
<td>7</td>
<td>7%</td>
<td>8%</td>
<td>4%</td>
</tr>
<tr>
<td>Vocational Assessment</td>
<td>8</td>
<td>3%</td>
<td>11%</td>
<td>3%</td>
</tr>
<tr>
<td>Restoration/Rehabilitation</td>
<td>9</td>
<td>5%</td>
<td>2%</td>
<td>4%</td>
</tr>
<tr>
<td>Independent Living</td>
<td>10</td>
<td>3%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Literacy/Basic Education</td>
<td>11</td>
<td>4%</td>
<td>2%</td>
<td>2%</td>
</tr>
<tr>
<td>Assistive Technology</td>
<td>12</td>
<td>2%</td>
<td>2%</td>
<td>1%</td>
</tr>
<tr>
<td>Post-Secondary Education</td>
<td>13</td>
<td>0%</td>
<td>2%</td>
<td>3%</td>
</tr>
</tbody>
</table>
### Barriers to Access

Transportation to services, awareness of/understanding of service availability, language or cultural factors, and wait time for services were most frequently selected.

<table>
<thead>
<tr>
<th>Barriers to Access</th>
<th>Overall Rank</th>
<th>% Ranked #1</th>
<th>% Ranked #2</th>
<th>% Ranked #3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transportation to Services</td>
<td>1</td>
<td>13%</td>
<td>14%</td>
<td>13%</td>
</tr>
<tr>
<td>Awareness/Understanding of Service Availability</td>
<td>2</td>
<td>15%</td>
<td>12%</td>
<td>13%</td>
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<tr>
<td>Wait Time for Services</td>
<td>3</td>
<td>10%</td>
<td>10%</td>
<td>13%</td>
</tr>
<tr>
<td>Language/Cultural Factors</td>
<td>4</td>
<td>12%</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>Provider Lack of Expertise Related to Needed Services</td>
<td>5</td>
<td>10%</td>
<td>8%</td>
<td>9%</td>
</tr>
<tr>
<td>Behavioral Health Factors</td>
<td>6</td>
<td>3%</td>
<td>14%</td>
<td>6%</td>
</tr>
<tr>
<td>Location of Services</td>
<td>7</td>
<td>8%</td>
<td>4%</td>
<td>9%</td>
</tr>
<tr>
<td>Provider Lack of Expertise Related to Disability Type</td>
<td>8</td>
<td>5%</td>
<td>6%</td>
<td>4%</td>
</tr>
<tr>
<td>Criminal History</td>
<td>9</td>
<td>5%</td>
<td>6%</td>
<td>4%</td>
</tr>
<tr>
<td>Homelessness/Housing Insecurity</td>
<td>9</td>
<td>4%</td>
<td>4%</td>
<td>5%</td>
</tr>
<tr>
<td>Physical Accessibility of Services</td>
<td>11</td>
<td>5%</td>
<td>3%</td>
<td>1%</td>
</tr>
<tr>
<td>Health Factors</td>
<td>12</td>
<td>3%</td>
<td>5%</td>
<td>3%</td>
</tr>
<tr>
<td>Literacy/Educational Level</td>
<td>13</td>
<td>1%</td>
<td>6%</td>
<td>4%</td>
</tr>
<tr>
<td>Assistive or Other Technology Needs</td>
<td>14</td>
<td>0%</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Cost of Services</td>
<td>15</td>
<td>0%</td>
<td>2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

### Barriers to Employment

The following barriers to employment were most frequently identified by stakeholders:

- **Complexity of the Customer Context:** A primary barrier to employment for groups that are not well-served is the inability of workforce system partners to recognize and address the complexity of the customer's life context. These circumstances are often social and economic in nature, experienced especially by homeless people and ex-offenders. Issues such as transportation, housing, mental or physical health, and substance abuse, make it much more difficult for them to access DVR services or maintain employment. These types of obstacles are not typically considered or well-assessed when evaluating barriers to employment and eligibility for vocational rehabilitation services. Order of selection restricts DVR’s ability to serve these populations when the significance of their disability does not account for these types of limitations.

  For racial and ethnic minorities, a general lack of cultural awareness among workforce system partners limits access to services. The system is designed to respond to people seeking assistance. However, some cultures rely more on families to care for people with disabilities.
and may not seek assistance. Stakeholders also identified a failure to recognize that diversity exists within cultures, for example subgroups within the Asian, African American, and the deaf community.

- **Accessing DVR:** Access to DVR services was primarily described in terms of customer lack of awareness about services and DVR’s limited capacity to take new customers, which is intensified by order of selection. The most frequently identified racial and ethnic groups who lack awareness of DVR services and would benefit from outreach included Native Americans, sub-cultures in the broader Asian community, and East Africans. Others thought that DVR needs to engage students and youth at younger ages, indicating that they lack an orientation to planning for their future and understanding their options. Veterans and people living in rural areas were also thought to be in need of greater DVR outreach. Although veterans have access to vocational rehabilitation services through the Veterans Administration, DVR could be more welcoming and do more to understand specific issues that impact them, such as post-traumatic stress disorder.

Order of selection was noted as a barrier to services since it excludes individuals whose disabilities are determined to be less severe. This has especially impacted deaf and deaf-blind populations and people with mental health disorders. Some conditions and limitations are not obvious and customers may not readily present them.

- **Timelines and Timeliness:** Many stakeholders mentioned that more time is needed for some customers to be successful. For example, trusting relationships between ex-offenders and employers take time to develop. For other populations, it can take additional time to engage the customer, fully understand their needs, recognize their potential, and figure out the right resources for the individual.

Issues were also noted in relation to cultural differences in perception of time and timeliness. Cultural differences can affect a customer’s ability to keep to appointments and impact case progress timelines.

Interview questions also addressed the strengths and challenges of DVR and the broader workforce system in meeting the vocational rehabilitation needs of people with disabilities. Changes to workforce system programs have emphasized stronger relationships and coordination across programs, with the goal of establishing a seamless service delivery network that enhances customer access to services. All workforce development programs are expected to be accessible to people with disabilities. At the same time, DVR services are more focused on assisting people with the most significant disabilities and youth in transition from school to work.

**DVR Successes and Challenges**

- **Better Partnerships:** Stakeholders commented that DVR has been successful in building stronger partnerships with groups such as the Office of the Superintendent of Public Instruction, Developmental Disabilities Administration, Tribal Vocational Rehabilitation programs, and Economic Security Administration programs. Additionally, DVR has improved
communications with workforce system partners and provided expertise on disability-informed approaches and making programs accessible to people with disabilities.

- **Customer Focus:** Customer relationships and focus on individual needs were also identified as areas of DVR strength. Developing staff skills to address specific service needs, providing multiple vendor options to customers, and finding a good fit between employer and customer were noted areas of improvement. Counselors have good relationships with their customers and work closely with them to understand their vocational goals. Communications with customers on the wait list have improved.

- **Community Impact:** Increased focus on serving people with the most significant disabilities and connections with underserved communities extends beyond customers. DVR has changed perceptions about people with disabilities working in a competitive setting, which has helped de-stigmatize disabilities.

- **Limited Capacity:** Stakeholders identified Order of Selection and insufficient funding as the biggest challenges to DVR’s ability to serve people with disabilities. In addition to Order of Selection, procedural bottlenecks (e.g., supervisor approval and data entry requirements), high caseloads, and understaffing contribute to long wait times for services and further restrict DVR’s capacity to serve more people. However, orientation to timeliness can act against a client-centered approach, which requires flexibility in response to customer circumstances.

- **Other Challenges:** Location of services and customer access to transportation were also mentioned as issues.

**DVR Role in the Broader Workforce System**

- **Subject Matter Expertise:** DVR’s expertise in working with people with disabilities, particularly people with significant disabilities, can be of benefit to all partners in the workforce system. This can happen at the customer level by coordinating a comprehensive, individualized approach to services with partners. DVR can also train partners on disability matters and available resources to improve services system-wide.

- **Partnership and Advocacy:** DVR can be the connector for customers, workforce system partners, and employers to ensure that resources throughout the system are available to people with disabilities. DVR also has an advocacy role with respect to initiating partnerships at all levels of operations and educating employers about the contributions that people with disabilities can bring to the workplace.

**Broader Workforce Successes and Challenges**

- **Improved Collaboration:** Communications and information sharing among workforce system partners have improved, although data sharing remains an issue. Efforts have also been made to coordinate client referrals, develop job and retention services for people who need
additional support, and provide more individualized services. Some Workforce Development Councils actively work with DVR to develop plans to address barriers to access.

- **Changing Attitudes:** The WIOA mandate to make services accessible and available to underserved groups has challenged the system to improve services for people with significant disabilities. DVR’s outreach and education have fostered greater understanding about who can benefit from employment services. The combination of the policy directive and DVR’s efforts have led to more positive attitudes about people with disabilities and brought greater focus to underserved groups in the workforce system.

- **Lack of Experience with Disabilities:** The broader workforce system lacks understanding about disability and is not equipped to provide the individualized services needed by people with significant disabilities. The system is oriented to market needs and priorities.

- **Workforce System Design:** WorkSource centers are locally designed and host a variety of employment assistance programs offered by different agencies, which do not always work well with DVR. DVR is unable to develop a standardized approach to collaborating with WorkSource, due to local variations in design and operations of the WorkSource centers. Adding to this challenge, the broader workforce system is not designed to offer individualized services, which are often essential for people with disabilities to obtain employment.

**DVR Training Needs**

**Cultural Humility**

- Cultural humility training is needed for DVR staff to better understand cultural differences and the cultural context of people of color, Native Americans, and migrant communities. This type of training is needed at all levels of the organization. Connecting with groups that specialize in working with minority populations will better ensure that DVR decisions reflect the needs of their communities.

- DVR can also help to ensure that services are culturally aware and responsive by hiring a diverse staff that reflects the populations served. As DVR’s staff becomes more diverse, all staff will benefit from a broader range of experiences and perspectives of their colleagues. In combination with training, engagement with a more diverse workforce will increase cultural awareness throughout DVR. Dedicating staff to address cultural humility issues would also be beneficial.

**Other Training**

- Awareness training was recommended in relation to several populations, including homeless individuals, ex-offenders, students and youth, older adults, and veterans. This training would provide insights into how to interact with and help customers access resources, identify
assumptions that enter into interactions with customers, and gain greater understanding of social stratification and power dynamics that characterize counselor-customer relationships.

Recommendations:

- Develop culturally relevant outreach plans to reach populations that lack awareness/understanding of DVR services.
- Provide stronger information and referral resources for people with complex life circumstances.
- Include awareness, cultural humility, and implicit bias training in staff training curriculum.
- Diversify DVR’s workforce, particularly where representation does not reflect the service populations.
- Diversify DVR’s service providers, especially for populations that are underserved.
- Establish mobile work locations for VRCs.
- Reduce amount of time customers are on the waiting list.
- Develop strategies to improve timely and continuous case progress.
- Update key performance measures and expectations related to case movement (including more frequent VRC contacts with customers).
- Develop staff recruitment and retention plan that addresses staffing patterns and turnover.
Need for Pre-Employment Transition Services

In 2017, DVR contracted with the Center for Change in Transition Services (CCTS) at Seattle University to conduct an assessment of student needs for the five required Pre-Employment Transition Services (Pre-ETS). CCTS used data from the State’s Comprehensive Education Data and Research System (CEDARS) to identify the total number of students with disabilities age 15-21, who are potentially eligible for vocational rehabilitation services. CEDARS maintains data used for federal reporting on students with disabilities who receive services under IDEA and students with a 504 plan.

The CCTS study reported 49,812 potentially eligible secondary school students with disabilities in Washington in the 2015-16 school year: 34,882 (70%) were receiving special education or related services and 14,930 (30%) had a 504 plan. Based on an analysis of the transition services already available to students, CCTS estimated that between 17,500 and 29,500 students need additional Pre-ETS. Needs data were provided for each school district and regional education service districts. The assessment did not investigate the number of potentially eligible students attending recognized education programs at institutions of higher education.

Updated enrollment data from the Office of Superintendent of Public Instruction (OSPI) show the total number of students with disabilities in the 2018-19 school year is 47,743, a decrease of 4% since the CCTS study. Students receiving special education or related services decreased by 8% while those with a 504 plan increased by 4%. Since the number of students estimated to be in need of transition services by the CCTS study was wide ranging, these changes are not expected to have a substantial impact on the statewide need for additional for Pre-ETS.

OSPI’s 2018 Secondary Transition Planning Implementation Plan provides data on the student population expected to meet eligibility for services from the State’s Division of Developmental Disabilities (DDA), specifically students with Autism, Intellectual Disability, and Multiple Disabilities. In 2017, about 7,500 Washington students between the ages of 15 and 21 were eligible under those disability categories. Data from a 2015-16 post-school outcome survey shows that these groups are much less likely to be engaged in education, training, or employment after leaving school. While 27.8% of all students with disabilities were not engaged, comparable results were 51.5% of those with Intellectual Disability, 58.2% with Multiple Disabilities, and 37.3% with Autism.

DVR Services for Students and Youth

DVR serves students with disabilities through its Pre-Employment Transition Services (Pre-ETS) program and general Vocational Rehabilitation program, which includes School to Work projects. Pre-ETS services are available to students statewide who are in school and potentially eligible for vocational rehabilitation services, based on having a documented disability. DVR Pre-ETS program participation data shows 3,199 students received group Pre-ETS services during the 2018-19 school
year, which is 11% to 18% of the range of need identified by the CCTS study. Services were provided to students enrolled in 281 public, private, and tribal schools.

In DVR’s general vocational rehabilitation program, 30% of customers with closed cases in program years 2017 and 2018 were youth; 1,681 youth between the ages of 16 and 24 obtained employment during that period. The rehabilitation rate of 56.5% for youth was about 4 points higher than for individuals age 25 and above. Nearly three-fourths of participating youth were 21 years of age or under.

Service Coordination and Priorities
The CCTS assessment also identified the relative need for each of the five required Pre-ETS, based on an assessment of the types of services most commonly available in students’ schools and alignment with DVR Pre-ETS service categories. Workplace Readiness Training and Work Based Learning were the least available, followed by Instruction in Self-Advocacy. However, service needs vary considerably from one school district to another.

Preliminary results of recent DVR Pre-ETS statewide needs assessment indicate that work-based learning and self-advocacy/peer mentoring continue to be among the highest priorities. DVR’s Pre-ETS program has focused on work-based learning and workplace readiness and has recently modified its program to make peer mentoring more accessible.

OSPI’s transition plan addresses the transition-related skills that are most important for students with disabilities, based on a survey of stakeholders, including parents/family members, educators, service providers, state agency representatives and students. Preliminary results of the survey show that skills identified as “Very Important” in the stakeholder survey reinforce the service gaps identified in the CCTS study and subsequent assessment. Approximately three-fourths of respondents identified the following as the top three transition-related skill sets: 1) pre-employment training/skills; 2) job exploration, job shadowing/training, and competitive employment; 3) self-advocacy/peer mentoring skills for students to communicate about disability and related needs.

The following transition-related resources and services were rated as “Very Important” by survey respondents:

- Alignment of transition-related documentation;
- Cross-agency staff knowledge of requirements;
- Information on similarities and differences among transition support agencies; and
- A directory of contacts for schools, service providers, and DDA and DVR offices.

The Plan acknowledges the complexity of transition planning and navigating between OSPI, DVR, and DDA, for students, families, school staff, and agencies. Centralized information and a crosswalk to support understanding of differences in terminology and requirements of the three systems are recommended.

Recommendations:
- Make Pre-ETS services available statewide and use all of the resources.
• Engage students with DVR earlier in their transition process and improve coordination between IEP/504 plans and individual plans for employment.
• Collaborate with local school districts to better understand their services and gaps.
VI – Workforce Development System

Washington’s Workforce Development System

The Division of Vocational Rehabilitation (DVR) is one of 6 core programs in Washington’s workforce development system. Each program depends on the strengths of other partners to maximize the resources available to serve businesses and job seekers. Ten additional partners participate in the workforce system, bringing supplemental resources to the service delivery system.

Workforce Training & Education Coordinating Board is the state’s federally-designated Workforce Investment Board, collaborating with business, labor organizations, state agencies and 12 Workforce Development Councils (WDC) and other program partners to develop the Combined State Plan. This plan identifies the State’s overall vision for its workforce development system.

WDC’s oversee the local one-stop service delivery system and coordinate with a broad range of local partners, including business, labor organizations, education, social services and government. One-stop partners, also known as WorkSource, administer separately funded programs as a set of integrated streamlined services to customers. There are 3 types of WorkSource centers: comprehensive center, affiliate, and connection sites.

Twenty-two Comprehensive centers are physical locations where job seeker and employer customers access programs, services, and activities of all required WorkSource partners. Twenty-four Affiliate sites provide access to one or more partner programs and the frequency of staff’s physical presence is determined at the local level. Seventy-two Connection sites offer virtual resources and services of the WorkSource system.

WorkSource centers are aimed to assist a broad population of jobseekers secure employment. This system presumes that those it serves are coming to the job search with a base level of skills and the ability to utilize the tools and training opportunities the system provides, maintain a degree of self-direction in the job seeking process, understand and follow directions to report outcomes to the personnel, and pursue opportunities independently. The role of this program is not to craft a job to suit the particular skills and abilities of an individual jobseeker.

DVR serves a narrow constituency of jobseekers with significant disabilities who have barriers to employment. Customers interested in services must meet eligibility requirements and demonstrate they will benefit from services. A professionally trained Vocational Rehabilitation Counselor will provide substantial counseling and guidance and develop an individualized plan to assist the customer to identify and overcome disability-related barriers to achieve their employment goal.

In 2015, the Division of Vocational Rehabilitation (DVR) and the Washington Workforce Association (WWA) developed “Shared Vision, Values & Principles of Collaboration between the DSHS Division of Vocational Rehabilitation & Washington Workforce Association” in effort to reflect commitments to be included in the WorkSource Memorandum of Understanding with each WDC. A primary emphasis
of this agreement focuses on DVR’s participation in a locally driven, fully integrated WorkSource service delivery system.

The challenge presented by participating in a federally mandated, locally driven system, is the difficulty for DVR to develop a statewide standard of practice for integration. Success in serving people with disabilities relies on the effective collaboration of local workforce partners.

WorkSource as a Resource for People with Disabilities

In July 2019, Washington State Rehabilitation Council (WSRC) and DVR conducted an assessment of the employment services available to people with disabilities within the broader workforce system. WSRC interviewed contacts with expertise in barriers and access solutions for individuals seeking employment for 11 of the 12 WDCs. DVR Liaisons to WDC’s and DVR stakeholders were also surveyed. From their feedback, the WSRC was able to gather insight into how the workforce system serves individuals with disabilities through the WorkSource one-stop centers.

The responses provided insight into how the greater workforce system views the responsibility for services for individuals with disabilities, both offered through the WorkSource one-stops and by DVR.

What’s working well:

- Each WorkSource location has been identified as meeting ADA certification requirements for job seekers with disabilities.
- 14 of 22 comprehensive WorkSource centers and 2 of 24 WorkSource affiliates are co-located. An example of successful co-location is the WorkSource-imbedded DVR Vocational Rehabilitation Counselors or Business Specialists, who work closely with one-stop system navigators to bolster partnerships within the workforce system.

What’s not working well:

- Order of Selection has had impacts on job seekers and the workforce system, as more people with disabilities seek services from WorkSource one-stop centers and the centers lack sufficient resources and expertise to serve them. As DVR focuses on serving only individuals with the most significant disabilities, the one-stop centers step in to provide services for individuals who qualify but are wait-listed for DVR services. At the same time demand for services has grown, funding for WorkSource services has been declining.
- One-stop locations offer employment training and job search assistance but are not experienced in assessing disability-related barriers to employment. In addition, they do not have the expertise to provide substantial counseling and guidance job seekers receive from Vocational Rehabilitation Counselors.
- WDC partners identified training needs around disability etiquette and reasonable accommodation, basics of disability services, and recognizing disabilities, including those with behavioral health.
- The Workforce Training and Education Coordinating Board reports that 11% of customers served by the workforce system self-reported as having a disability; 4% of those customers receive services through the vocational rehabilitation programs and the balance are served by other workforce programs. The WorkSource standard intake process does not support
The ability to identify all people with disabilities the system is serving. The disability data gathered is self-reported by the customer at time of intake. Without prior knowledge of services offered or eligibility requirements of various workforce programs, a customer is less likely to report their disability, thereby failing to access some types of vocational services.

- The current data tracking system for the WorkSource locations is unable to systematically track and report the percentage of job seekers with a disability. Only 5 of the 11 WDC partners were able to provide data on the number of people with disabilities they serve. Without reliable data, the WSRC was unable to determine how many people with disabilities are being served at one-stop centers.

Promising Practices
The following promising practices were mutually identified by both WDC’s and DVR Liaisons:

- Benton-Franklin WDC/Columbia Basin WorkSource & Olympic WDC – Actively participating in cross training with DVR staff on supporting customers with disabilities.
- Spokane and South Central WDC – Each offer daily training opportunities for partners to provide center staff with a broader understanding of the each program.
- Pacific Mountain WDC/Tumwater WorkSource - The DVR open lab was created in collaboration with DVR for customers with disabilities who have an Individualized Plan for Employment. A Vocational Rehabilitation Counselor (VRC) is available every Wednesday for 2 hours providing hands on access to center resources, assistance to identify job leads and complete applications. In addition, the DVR Business Specialist is integrated into the centers business outreach team.
- Southwest WDC/Vancouver WorkSource - Business specialist acts as referral service for jobseekers with disabilities & provide consultation to WorkSource staff. Integrated service model includes 2 DVR staff to connecting WorkSource customers with services by providing referrals, training, supports and job development.
- Seattle-King WDC/North Seattle WorkSource – DVR staff facilitates jobseeker workshops in collaboration with WorkSource staff.
- Workforce Central WDC – DVR staff are included in all strategic planning, operational planning and day to day needs. The WorkSource front office staff meet quarterly with DVR staff so we can discuss strategies for referrals and brainstorm ideas for improvement. DVR staff are represented on core leadership groups designed to improve customer experience.
- Eastern WDC - Because of rural nature, coordination and collaboration is very strong between DVR and system partners. Utilize and leverage each other’s resources appropriately.
- Northwest WDC - DVR staff considered Disability Specialists, regularly assisting WorkSource staff with questions and training resources.
- Workforce Snohomish WDC – DVR staff have regular office hours at the WorkSource Lynnwood affiliate location and the time is rotated among all the Vocational Rehabilitation Counselors, Business Specialist and Supervisor, so that all VR staff are engaged in becoming familiar with services, programs and partner staff.
Most Significant Challenges
The workforce system in Washington State frequently faces challenges to providing employment services to people with disabilities. The Workforce Development System lacks expertise to provide or identify specialized training and support for individuals with significant disabilities. Examples include:

- Resource limitations with regard language access and high costs of interpreters is problematic across the state.
- Accessing transportation, especially in rural communities is difficult for non-drivers, who would benefit from expanded community infrastructure.
- Lack of awareness and expertise building disability awareness for employers and WorkSource system is a challenge.
- Insufficient funding creates limitations in services, which is compounded by Division of Services for the Blind (DSB) and DVR currently being in order of selection. The cost and training to provide assistive Technology access, is a barrier to assisting customers in their job search.
- Completing paperwork and providing supporting documentation to qualify for program services was identified as a burden for customers.

Partner Strengths
Both DVR and the broader workforce system can offer unique and specific services to benefit job seekers. Workforce partners indicate DVR can best provide benefits planning, job carving, disability-related training for WorkSource Staff, and accessibility/accommodation expertise. DVR is better prepared and trained to offer employment services for individuals with significant barriers to employment and long term employment support. DVR is best suited to offer substantial vocational rehabilitation counseling and guidance for customers with disabilities.

The broader workforce system offers networking, jobseeker classes, job fairs, business partnerships, outreach, short-term employment opportunities, and can open up one-stop centers for co-location and collaboration. They can also step in to offer job search supports when funding limitations create situations like Order of Selection for DVR.

Recommendations
- Define statewide expectations and outcomes for Business engagement program and staff roles and responsibilities, including education, training and outreach.
- Develop a framework to address barriers identified by DVR liaisons in the WDC case study and an action plan for best practices. Implement with WDCs.
  - Annually re-assess barriers and challenges to serving DVR customers in WorkSource centers.
  - Facilitate the provision of training for WorkSource staff. Increase capacity of WorkSource staff to serve people with disabilities.
Services Provided and Challenges Faced by CRPs

Community Rehabilitation Programs (CRPs) provide the majority of vendor-provided assessment and employment services for DVR customers. For the two-year period from July 1, 2017-June 30, 2018, CRPs provided 100% of paid job placement and short-term job support services, 87% of assessments, and 83% of supported employment services for customers who completed services. Two-thirds of customers with a successful employment outcome received services from CRPs. Job placement for the other one-third of successful customers was either supported by DVR staff or self-directed.

DVR held contracts with 117 CRPs based in 23 of the State’s 39 counties during this period. Since entering Order of Selection, DVR is serving fewer customers and a larger proportion of our customers are most significantly disabled. DVR has also implemented practice changes to maximize the use of in-house assessments and refer customers to WorkSource for job search and placement services, when appropriate. These changes have presented significant challenges for CRPs and impacted customer services. As of July 2019, DVR has 16 fewer CRP contracts and lost access to CRP services in two rural counties; however statewide providers are available to serve these communities.

In August 2019, in conjunction with DVR’s quarterly CRP web conference, DVR and WSRC presented a questionnaire about customer access to services and ways they are adapting to changes in the vocational rehabilitation service environment. Of the 52 participating CRPs, 28% were from Region 1, the most rural region in Washington; 32% from Region 2, the most urban area of the State; 16% from Region 3, home to the State Capitol and most government entities; and 24% of providers were located in multiple regions. This forum allowed DVR to reach a broad representation of CRPs across the state to learn about the current challenges faced in serving DVR customers and provide opportunities for information and training on DVR and partner programs. CRPs were asked for their perspectives on the following questions:

1. What are the barriers to DVR customers being able to access services when needed?
2. Given the changes in DVR practice, how are CRPs adapting to meet customer needs that are not addressed by DVR resources?
3. What does WorkSource do well in providing services to people with disabilities?

Barriers to Service Access

- **Coordination and Service Integration between DDA and DVR**: DDA and DVR have shared but distinct areas of responsibility for serving individuals with intellectual and development disabilities. As a provider for both agencies, CRPs help customers navigate the requirements and processes of each agency to access services. CRPs indicated that requiring DDA customers to access DVR services without sufficient braiding of DDA and DVR services results
in burdensome approval processes, customer confusion, and delays in receiving services. They identified needs for more information sharing between DDA and DVR, expedited review and approval processes, seamless access to DVR services, and improved DVR-CRP liaison relationships. Recommendations ranged from allowing DDA customers to bypass DVR altogether and receive all services from DDA to establishing a common process to qualify customers for services for both programs at the same time.

- **Inadequate and Restricted Resources**: Order of Selection, which has restricted services to only those with Most Significant Disabilities (MSD), creates the challenge of obtaining funding for other job seekers with disabilities. Accessing supported employment funding is a major source of frustration for CRPs. Challenges include when to access additional funds, unpaid staff hours while trying to allocate new funds for customers, and eligibly restrictions for available supported employment; for example, Foundational Community Supports (FCS) is only available for individuals with diagnosed behavioral health conditions who are also eligible for Medicaid. Transportation is also an often-noted challenge for CRP customers.

- **Customer Service Concerns with Timeliness and Responsiveness of Services**: Timeliness of services provided by DVR was another challenge identified by CRPs. CRPs and their customers have experienced impediments to effective employment services due to lack of timeliness in each aspect of the vocational rehabilitation process – initial appointment, intake, eligibility determination, plan completion, and the time between appointments. Delays in processing service authorizations and payments were also mentioned. One CRP noted that, in their local DVR offices, the number of counselors are insufficient to address the needs of all individuals seeking jobs. Some noted concerns about timely response to phone calls.

- **Customer Participation Challenges**: Customer lack of participation or willingness to engage in their own job search was noted as an additional barrier. Some CRPs indicated that customer skills and abilities are not well-matched to expectations for their participation and the job goal. Customers with mental health barriers are not getting sufficient support.

**Adaptations to Meet Customer Needs**

- **Communication with Customers about Changes in Service Access**: DDA participants and their families are confused about the process for obtaining employment services and why they need to access DVR services. This is especially difficult for customers who have not received DVR services in recent years. CRPs have been working to provide correct and consistent information about the changes to participants and their families.

- **Reductions in CRP Staff and Operational Expenses**: CRPs have had to adapt financially and operationally to the decline in referrals from DVR. CRPs have implemented hiring freezes or staff reductions, eliminated raises, reduced operational costs, sought out additional funds, and made more referrals to community-based services to mitigate the losses.
• **Accessing Foundational Community Supports and Other Resources:** To narrow the funding gap, CRPs report accessing other resources such as Foundational Community Supports (FCS), Ticket to Work, private pay, and county funding through Developmental Disabilities agencies. While FCS is a critical new resource, providers note that the program’s services are insufficient in comparison to the range available from DVR. Furthermore, CRPs noted the need to refer customers to other community-based services that have capacity and funding to serve customers.

**The Workforce System as Employment Services Partners**

• **WorkSource an Ineffective Alternative for DVR Customers:** When asked about WorkSource, CRPs stated that the greater workforce system, with its current capacity, is not effectively serving individuals with disabilities. WorkSource expects participants to demonstrate a high level of personal initiative, follow through, planning, and focus, whereas people with significant disabilities need individualized assistance. Customers referred to WorkSource report not knowing what to do when they go there.

CRPs agreed that local WorkSource centers lack the expertise to serve people with disabilities specifically and the one-on-one assistance needed by individuals with many barriers to meeting their employment goals.

**Recommendations:**

• Implement outcome measures for CRPs, including types of jobs, days to placement, wages, hours worked, costs per successful placement.

• Expand availability of CRP services until WorkSource centers are better able to meet the needs of people with disabilities.

• Assess types of in-house job search and placement assistance provided to customers who aren't referred to CRPs