Colorado Division of Vocational Rehabilitation

State Plan
2009

Colorado Department of Human Services
Office of Adult, Disability, and Rehabilitation Services
Division of Vocational Rehabilitation
1575 Sherman Street, 4th Floor
Denver, Colorado 80203

Voice and TDD: 303-866-4150

Effective Date: October 1, 2008

CERTIFICATION REGARDING LOBBYING

Applicants must review the requirements for certification regarding lobbying included in the regulations cited below before completing this form. Applicants must sign this form to comply with the certification requirements under 34 CFR Part 82, "New Restrictions on Lobbying." This certification is a material representation of fact upon which the Department of Education relies when it makes a grant or enters into a cooperative agreement.

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 34 CFR Part 82, for persons entering into a Federal contract, grant or cooperative agreement over $100,000, as defined at 34 CFR Part 82, Sections 82.105 and 82.110, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants and contracts under grants and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certification.

NAME OF APPLICANT	PR/AWARD NUMBER AND / OR PROJECT NAME
Colorado Division of Vocational Rehabilitation	Vocational Rehabilitation Program
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Nancy Smith, Director	
SIGNATURE Nancy J. Smith	DATE 7/01/2008

ED 80-0013 06/04

Effective Date: October 1, 2008

CERTIFICATION REGARDING LOBBYING

Applicants must review the requirements for certification regarding lobbying included in the regulations cited below before completing this form. Applicants must sign this form to comply with the certification requirements under 34 CFR Part 82, "New Restrictions on Lobbying." This certification is a material representation of fact upon which the Department of Education relies when it makes a grant or enters into a cooperative agreement.

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 34 CFR Part 82, for persons entering into a Federal contract, grant or cooperative agreement over $100,000, as defined at 34 CFR Part 82, Sections 82.105 and 82.110, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;

(b) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form - LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions;

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants and contracts under grants and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above certification.

NAME OF APPLICANT	PR/AWARD NUMBER AND / OR PROJECT NAME
Colorado Division of Vocational Rehabilitation	Supported Employment Program
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Nancy Smith, Director	
SIGNATURE	DATE 7/01/2008
Nancy J. Smith	

ED 80-0013 06/04

Effective Date: October 1, 2008

STATE PLAN FOR THE STATE VOCATIONAL REHABILITATION SERVICES PROGRAM
AND
STATE PLAN SUPPLEMENT FOR THE STATE SUPPORTED EMPLOYMENT SERVICES PROGRAM

STATE: Colorado

AGENCY: Division of Vocational Rehabilitation

AGENCY TYPE: GENERAL_____BLIND__X__COMBINED

SECTION 1: LEGAL BASIS AND STATE CERTIFICATIONS

1.1 The **Division of Vocational Rehabilitation** (name of designated State agency or designated State unit) is authorized to submit this State plan under title I of the Rehabilitation Act of 1973, as amended[1] and its supplement under title VI, part B of the Act.[2]

1.2 As a condition for the receipt of Federal funds under title I, part B of the Act for the provision of vocational rehabilitation services, the Department of Human Services (name of the designated State agency)[3] agrees to operate and administer the State Vocational Rehabilitation Services Program in accordance with the provisions of this State plan[4], the Act, and all applicable regulations[5], policies, and procedures established by the Secretary. Funds made available under section 111 of the Act are used solely for the provision of vocational rehabilitation services under title I and the administration of this State plan.

1.3 As a condition for the receipt of Federal funds under title VI, part B of the Act for supported employment services, the designated State agency agrees to operate and administer the State Supported Employment Services Program in accordance with the provisions of the supplement to this State plan[6], the Act, and all applicable regulations[7], policies, and procedures established by the Secretary. Funds made available under title VI, part B are used solely for the provision of supported employment services and the administration of the supplement to the title I State plan.

1.4 The designated State agency and/or the designated State unit has the authority under State law to perform the functions of the State regarding this State plan and its supplement.

1.5 The State legally may carry out each provision of the State plan and its supplement.

1.6 All provisions of the State plan and its supplement are consistent with State law.

1.7 The **Director, Division of Vocational Rehabilitation** (title of State officer) has the authority under State law to receive, hold, and disburse Federal funds made available under this State plan and its supplement.

1.8 The **Director, Division of Vocational Rehabilitation** (title of State officer) has the authority to submit this State plan for vocational rehabilitation services and the State plan supplement for supported employment services.

1.9 The agency that submits this State plan and its supplement has adopted or otherwise formally approved the plan and its supplement.

Nancy J. Smith

(Signature)

Nancy Smith

(Typed Name of Signatory)

7/01/2008

(Date)

Director, Division of Vocational Rehabilitation

(Title)

[1] Public Law 93-112, as amended by Public Laws 93-516, 95-602, 98-221, 99-506, 100-630, 102-569, 103-073, and 105-220.

[2] Unless otherwise stated, "Act" means the Rehabilitation Act of 1973, as amended.

[3] All references in this plan to "designated State agency" or to "the State agency" relate to the agency identified in this paragraph.

[4] No funds under title I of the Act may be awarded without an approved State plan in accordance with section 101(a) of the Act and 34 CFR part 361.

[5] Applicable regulations include the Education Department General Administrative Regulations (EDGAR) in 34 CFR parts 74, 76, 77, 79, 80, 81, 82, 85, and 86 and the State Vocational Rehabilitation Services Program regulations in 34 CFR part 361.

[6] No funds under title VI, part B of the Act may be awarded without an approved supplement to the title I State plan in accordance with section 625(a) of the Act.

[7] Applicable regulations include the EDGAR citations in footnote 5, 34 CFR part 361, and 34 CFR part 363

ATTACHMENT 4.2 (c)

Summary of Input and Recommendations of the State Rehabilitation Council; Response of the Designated State Unit; and Explanations for Rejection of Input or Recommendations

FY 2009

Summary of Input and Recommendations of the State Rehabilitation Council; Response of the Designated State Unit; and Explanations for Rejection of Input or Recommendations

The Division of Vocational Rehabilitation (DVR) has had a State Rehabilitation Council (SRC) for over twenty-three years. The SRC mission statement is:

> "The State Rehabilitation Council (SRC) provides individuals with disabilities a strong substantive role in shaping the programs and services established to support their employment goals and aspirations and to provide consumers of vocational rehabilitation services a mechanism to influence at the systemic and policy level the direction of vocational rehabilitation programming."

Colorado's SRC uses standing committees as well as ad hoc committees to conduct most of the detailed work on various issues. They use this committee structure to ensure that their goals are met through active participation of all SRC members. The standing committees include:

1. CONSUMER SATISFACTION COMMITTEE addresses direct access issues of the DVR consumer of vocational rehabilitation services. The committee presents reports and recommendations to the entire State Rehabilitation Council for review and confirmation. The committee is responsible for the Consumer Satisfaction Survey. The committee also cooperates with DVR in the maintenance of the Hearing Officers pool used by clients in appeals.

2. EMPLOYMENT LINKAGE COMMITTEE forges a partnership between businesses and vocational rehabilitation services to facilitate client transition into employment. The committee lobbies and advocates for Partners With Industry in business and industry.

3. MEMBERSHIP/RECRUITMENT COMMITTEE insures that membership of the SRC is in compliance with the mandates of the 1998 Rehabilitation Act. The committee also assures that members and associate members participate and contribute to the SRC and its mission. The committee recommends potential SRC members for Governor appointment and is responsible for the initial orientation and on-going training of SRC members.

Minutes are maintained of all SRC meetings and retreats, and they provide a summary of the advice and recommendations which have been provided to DVR. Each standing and ad hoc committee of the SRC is staffed by appropriate Division of Vocational Rehabilitation personnel to assure that the SRC is apprised of DVR's developing issues and to assure that the SRC has ample opportunity to provide input into DVR's administrative and program activities.

The focus of the State Rehabilitation Council's activities has been and continues to be to work with DVR in developing strategies for how the SRC can partner with and support DVR's efforts in the community, from educating the public and community advocacy organizations about the State/Federal VR program's mission and mandates, providing real stories about how DVR has helped persons with disabilities, advocating for legislative support for DVR, and to expanding DVR's employer network.

The SRC and DVR worked effectively together to conduct a consumer satisfaction survey for DVR consumers who are deaf or hard-of-hearing in early Federal FY 2008.

The SRC made recommendations concerning focusing on placement activities with various employers, specifically with the federal government. Based on this recommendation, DVR and SRC worked together to worked to offer an opportunity for EEOC professionals to learn more about job placement in the federal government at *"A Day at College for Federal Employees: Leadership for the Employment of Americans with Disabilities*". This was a highly successful multi-agency conference/training conducted this June (2008). It offered sessions with such topics as:

- Vocational Rehab: We have the staff that you are looking for
- What is the Schedule A and How to Use It
- Who is the Job Accommodation Network (JAN) and What Can They Offer Your Agency?
- EEOC - An Overview of Section 501 of the Rehabilitation Act and an Agency's Requirement to Provide Reasonable Accommodation.

In addition, DVR supported Senate Bill 08-004 - Concerning Measures To Encourage State Employment Of Persons With Developmental Disabilities, and Making an Appropriation Therefore.

> *This bill states that it is the intent of the general assembly to create the state employment program for persons with developmental disabilities, to encourage and provide incentives for state agencies to give meaningful employment opportunities to persons with developmental disabilities and to improve the state's practices in employing, supervising, and supporting persons with developmental disabilities*.

DVR is mandated by Senate Bill 08-004 to provide staff to work with state personal and administration to implement the provisions of this bill.

While Senate Bill 08-004 does apply specifically to opportunities for employment in state government for people with developmental disabilities, it is a huge first step and opens the door to opportunities for employment in state government for all people with disabilities. DVR will begin to work with the Department of State Personnel and Administration to increase opportunities and facilitate state employment for all persons with disabilities.

Also the SRC made a specific recommendation expand current efforts to target services in response to the needs of veterans who have been injured in the Iraq War. In response, DVR has:

- Supporting new job development efforts for veterans, statewide.
- Participating in a multi-agency task force called the Veterans Initiative committed to working collaboratively to help veterans find the support they need. One focus of this group will be to design, develop and fund an online Resource Directory. As to work to build opportunities for communication between and among all of the various professionals working with veterans.
- Added the Colorado Traumatic Brain Injury Trust Fund program as another program administered by DVR. As of September 2007, the Colorado Traumatic Brain Injury Trust Fund program was transferred to DVR. The Trust Fund supports services for people with traumatic brain injury, as well as traumatic brain injury education and research. This new partnership has enabled the Division to have a more active participation in the options for services to veterans with traumatic brain injury.

Since DVR intends to change the current process of conducting the Comprehensive Needs Assessment once e very three years. In Federal FY 2009, DVR intents to begin conducting a portion (approximately one-third) of the Comprehensive Needs Assessment each year, as is currently being done in other states, the SRC will be working closely with DVR to develop the annual survey tools. DVR determined there are many benefits in doing a smaller needs assessment each year, and it would be possible at that time to look at incorporating consumer satisfaction surveys with this new process. Also the results of the smaller needs assessments will be used to provide more focus for the SRC's Consumer Satisfaction Survey in 2010.

ATTACHMENT 4.10

Comprehensive System of Personnel Development

FY 2009

Comprehensive System of Personnel Development

The Colorado Division of Vocational Rehabilitation (DVR) has a strong commitment to employing and retaining an adequate workforce of qualified vocational rehabilitation personnel, both professional and paraprofessional.

Collection and Analysis of Data. DVR currently has access to two existing data systems that identify the number of persons employed by DVR by personnel category. The primary one is maintained by the Department of Human Services' (DHS) Personnel Office. This is the database that maintains payroll information on employees, including their dates of hire, official job classifications, and home addresses. An additional spreadsheet is maintained internally within DVR by the Human Resource Specialist. It contains information on offices and regions to which staff are assigned, functional job titles, and other information about the position. DVR uses these two data systems as well as supervisory records to continuously gather and analyze information about the qualifications of the 260 full time positions held by DVR staff.

Currently, of the 261 full time positions that exist within DVR, 125 of them are vocational rehabilitation counseling positions. The remaining 136 full time positions consist of 49 administrative assistants, 8 program assistants, 5 office managers, and 17 district and regional supervisors, 10 Business Outreach Specialists, 9 Disability Program Navigators, 14 rehabilitation teachers and orientation and mobility instructors, 7 Business Enterprise staff and 17 central office administrative staff.

DVR has determined that it needs all of the 261 appropriated Full Time Equivalent (FTE) positions to effectively achieve its mission. At the current point in time, DVR has the following vacancies: 9 rehabilitation counseling positions, 4 administrative assistant positions, 1 office manager, 1 rehabilitation supervisor position, 1 Disability Program Navigator, 1 orientation and mobility specialist, 1 Business Enterprise Program staff and 3 central office administrative staff.

The ratio of the number of vocational rehabilitation counselors to the number of consumers currently being served in applicant and active statuses (02 through 24, excluding 08) is approximately 1 vocational rehabilitation counselor for every 115 consumers. The ratio of vocational rehabilitation counselors to field support staff is approximately 3 to 1.

Projections of the number of individuals to be served, including those with significant disabilities, are based on projected increases for the general population and incidence rates for disabilities, using Colorado census data and State demographics. These projections, in combination with DVR attrition and retirement rates, are used to predict personnel needs for the next five years.

The current attrition rate of DVR staff averages about 10%, or approximately 25 staff per year. Given DVR's current efforts to effectively retain high quality staff, it is projected that will approximately 50 staff will leave during the next three years, of which 30 will be vocational rehabilitation counselors, 15 will be support staff and 5 will be supervisory and administrative staff. DVR believes that the administrative and supervisory positions will likely be filled from the pool of DVR counselors and other qualified existing staff. Thus, DVR anticipates the need to recruit approximately 35 vocational rehabilitation counselors and 15 support staff over the next three years in order to maintain its current level of services. These projections are based on current available information related to staff tenure and the state of Colorado retirement system.

Current Status of Qualified Personnel. Of the 116 individuals currently in filled rehabilitation counselor positions within DVR (there are currently 9 vacant rehabilitation counseling positions), 112 of them are either Certified Rehabilitation Counselors (CRC) or are qualified to sit for the CRC exam. 4 counselors do not yet fully meet the qualifications. All of these individuals were hired using the rehabilitation counseling intern classification and will be completing CSPD education plans within the next 3-5 years.

Coordination with Institutions of Higher Education. Colorado currently has only one educational program that specifically prepares vocational rehabilitation professionals. The University of Northern Colorado (UNC), which is located in Greeley, operates a Master's level program that prepares vocational rehabilitation counselors. Graduates of the rehabilitation counseling program possess the credentials necessary for certification in rehabilitation counseling (CRC). Faculty at UNC indicates that there are currently 14 Masters level students and 14 Doctorial level students enrolled in the Rehabilitation Counseling program. During 2007, only 3 individuals graduated from UNC with the credentials to sit for the CRC exam.

The Division also coordinates with Adams State College in Alamosa, Colorado. Adams State caters to many of Colorado's rural areas and offers a master's program in community counseling from which several current staff have graduated. This program comes close to meeting all of the requirements for CRC eligibility. Individuals graduating from the program qualify for employment at DVR as a Rehabilitation Intern and need only to demonstrate a period of "acceptable employment experience" to be fully CRC eligible. Furthermore, Adams State College is located in the San Luis Valley, an area of the state with a high representation of individuals of Hispanic background, which helps increase the availability of individuals with minority backgrounds.

In addition, DVR maintains an ongoing relationship with several other CORE accredited Rehabilitation Counseling programs including Utah State University, University of Arkansas at Little Rock, University of Kentucky and San Diego State University. All of these programs offer distance education programs are especially convenient for staff who work in areas of the State that are beyond commuting distance from the UNC program in Greeley, as well as those whose disabilities limit their mobility.

DVR's plan for recruiting qualified personnel, including qualified individuals from minority backgrounds and individuals with disabilities, includes collaboration with all of the relevant educational programs mentioned above as well as several additional graduate programs with programs in vocational rehabilitation. DVR also recruits using the Utah State University Clearinghouse website to post counselor openings. The state of Colorado continues to approve a waiver to DVR to enable the hiring of qualified counselors from outside of the state. This is extremely beneficial in recruiting efforts.

DVR believes that the private sector is another good resource for recruiting experienced, competent staff. Through its relationship with the Colorado Rehabilitation Association and the Colorado Rehabilitation Counseling Association, as well as the professional associations for other disciplines, DVR maintains a network for recruiting vocational rehabilitation counselors who have experience in the private sector.

Recruiting and retaining a diverse workforce is an expectation for supervisors and is reflected in their performance plans. This has proven to be an effective tool in balancing the diversity of staff to represent all consumers. DVR is also in a position to offer all accommodations

necessary to recruit and retain qualified staff with disabilities who may need accommodations to successfully compete for and do their job when hired.

Personnel Standards. Colorado does not have State-approved or recognized certification, licensing or registration requirements for many of the personnel classifications used by DVR, specifically rehabilitation counselors. In collaboration with Personnel, DVR has established its qualifications to be consistent with the highest national standard, the CRC, for vocational rehabilitation counselors and interns.

One of the levels at which counselors can be recruited is the Rehabilitation Intern level. This requires a Master's degree but allows a total of six years after employment for a candidate with a Master's degree in a counseling related field to complete the necessary coursework or accrue the necessary employment experience to be eligible to take the CRC. When necessary, recruiting at this level can bring in individuals from diverse backgrounds, allowing them to upgrade their qualifications while working under closer supervision. This option is especially useful in outlying areas of the state such as Alamosa and Sterling.

The qualifications are as follows:

REHABILITATION COUNSELOR I:

Requirements:

Graduation from an accredited college or university with a Master's degree in Rehabilitation Counseling or possession of a current Certified Rehabilitation Counselor (CRC) credential that was issued by the Commission for Rehabilitation Counselor Certification (CRCC) or be eligible to apply for the CRC credential.

REHABILITATION COUNSELOR INTERN:

Requirements:

1. Graduation from an accredited college or university with a Master's degree in one of the following: Counseling, Rehabilitation Teaching, Education, Orientation and Mobility, Psychology, Social Work, Sociology, Behavioral Science or Human Services.

For the Intern classification, individuals are required to complete required coursework to meet the minimum qualifications for a Rehabilitation Counselor within 5 years after State certification as a condition of continued employment.

DVR implemented a CSPD tuition assistance policy in March of 2000 for those individuals who need additional training in order to meet the established qualifications. The policy requires individuals who do not currently meet the standard to develop and implement individual education plans. These plans have been phased in over several years, in order to spread out the costs and minimize the loss of productivity. DVR provides full tuition assistance as well as purchasing of required books for those needing to take additional coursework. The Human Resource Development Specialist works with individuals and their supervisors to ensure that training plans are in place and implemented appropriately in order to meet CSPD requirements. In-Service Training funds are the primary source for any financial assistance that is provided to employees

needing to upgrade their qualifications.

Every effort possible is made to recruit fully qualified staff, in the event someone is hired at the above-mentioned intern level, a specific plan for education and oversight is developed and implemented. It is anticipated that the Intern level will be used only when, due to special skills requirements (e.g., American Sign Language or Spanish) or geographic area, it is not feasible to recruit current CRC eligible level staff.

For vocational rehabilitation counselors who will be serving large numbers of consumers who are deaf, there is a separate screening to determine their skills in American Sign Language communications. Orientation and mobility instructors and rehabilitation teachers must be eligible for certification in their discipline by the Academy for Certification of Vision Rehabilitation and Education Professionals (ACVREP).

Communication with Diverse Populations. Nearly 19.0% of the individuals served by DVR are Hispanic, 2.4% are Native American, and 1.4% are Asian American.* Of these minority populations, it is estimated that more than 75% are able to speak and comprehend English. At the present time, at least 50% of DVR's field offices have one or more staff members who speak fluent Spanish and all offices in the areas most heavily populated with Hispanics have at least one staff member who is also Hispanic. Other staff members have completed intensive Spanish-language training programs, with the goal of achieving a functional level of fluency. In addition, all offices have access to translation resources.

All communities with a significantly large population of individuals who are deaf are assigned at least one staff member who is proficient in American Sign Language. In the past when none of the applicants for the position possessed sign language skills, the individual who was hired was sent to the intensive sign language training program for vocational rehabilitation counselors for the deaf out of state. This training was supplemented with classroom instruction in sign language. There are approximately seven community-based organizations throughout Colorado that provide interpreting services as well as numerous private vendors, and offices without staff members who can interpret have local agreements with these organizations and individuals to provide interpreting services. Approximately 12 students are currently enrolled in the Interpreter Preparation Program at Front Range Community College, and this is expected to sufficiently address future interpreter needs. Every DVR office in the State has a TDD for communication with individuals who are deaf, and a telephone relay service is available through Colorado's local telephone provider.

The capacity to provide materials in Braille is available through equipment located in the Administrative Office and at the Denver Metro Office. Additional needs are addressed through the Boulder Public Library and private transcribers. This has been adequately meeting the current level of need. Many consumers, at this time, prefer materials on computer disk, and this is accommodated routinely. Materials are also routinely made available in large print.

Staff Development. Each year, DVR receives a grant from the Rehabilitation Services Administration (RSA) which is dedicated to providing in-service training for DVR staff. As part of the application process, an assessment of training needs is conducted, utilizing information from a variety of sources, including needs identified by staff as well as feedback from the State Rehabilitation Council, the State plan hearings, the consumer satisfaction data, results of State-wide studies and analyses, Federal and State audits, and Federally-mandated priorities. This needs assessment is used to design the training plan which will best fit the most common needs

of different categories of staff, including, as appropriate, training on the requirements of the Workforce Investment Act, Americans with Disabilities Act, the Individuals with Disabilities Education Act, Social Security work incentive programs, informed choice and other provisions of the 1998 amendments to the Rehabilitation Act, and culturally diverse populations. In addition to the RSA grant, DVR allocates additional necessary funds to ensure that all training needs are met. When supervisors identify skill deficits of individual staff members, appropriate training in the community may be arranged for and sponsored through in-service training. In-service training funds are also used to send staff to workshops, seminars, conferences, and formal training programs, including relevant graduate work, as well as for participation in training provided via distance education models.

Staff members who aspire to supervisory or administrative roles are encouraged and supported to take advantage of the Department of Personnel Supervisory Certificate Program and the Department of Human Services Supervisory Training and Review (STAR) program. The Department's Staff Development unit also continues to conduct an internal leadership program to prepare individuals for leadership and administrative positions. DVR's succession planning further indicates that there will be an ongoing need for vocational rehabilitation counseling staff who are eligible for the CRC and DVR will continue recruitment efforts accordingly.

DVR does seek to take advantage of all relevant training opportunities for its staff. Through the Department of Human Services DVR staff will continue to be able to obtain quality training on diversity, equity and cultural competency. Leadership training is one of the top priorities for the Region VIII Rehabilitation Continuing Education Program, and DVR will take full advantage of the training that they produce.

DVR has been and will continue to incorporate the principles of informed choice into all aspects of new training curricula including policy and procedural training as well as assistive technology training provided to DVR counselors. Such training efforts will include a focus on helping consumers develop skills necessary to analyze their own strengths, resources, capacities, concerns, priorities, abilities, interests, etc. so that they can come to their own informed conclusions related to the development of their rehabilitation program. DVR believes that these efforts will help counselors become better facilitators and help consumers develop better skills to become more independent and self directed, as they go through the rehabilitation process.

DVR is committed to maintaining a staff with state-of-the-art skills and knowledge of vocational rehabilitation theory and practice. A library of materials, in a variety of formats, including print, audio tape, video tape, and CD-ROM, is maintained as part of the In-Service Training program. Staff are encouraged to check out materials which will assist them in better serving individuals with disabilities. DVR regularly reviews the offerings available through a variety of sources, including the National Clearing House of Rehabilitation Training Materials, and orders those which will add value to its collection. The Region VIII Rehabilitation Continuing Education program also maintains a library of materials, which are available for loan. DVR's future plans involve making optimal use of computerization, including the Internet and Intranet, to stay current on research findings and state-of-the-art advances and to disseminate materials to staff.

<u>Coordination of the Comprehensive System of Personnel Development and In-service Training.</u> As part of its implementation of transitions services and DVR's School-to-Work Alliance Program (SWAP), DVR has a contract with the Colorado Department of Education to provide

training and technical assistance to DVR counselors and local education staff to enable them to work more effectively with students as they are transitioning from school to work. (See FY 2007 Attachment 4.8(c) for more information concerning training efforts in conjunction with that provided under IDEA and the SWAP program.) DVR counselors serving SWAP youth and the school district employees with whom they partner have also been provided copies of the new counselor training modules developed by the Region VIII RCEP. In-Service Training funds are used to provide continuing education for staff, with a special priority for rehabilitation technology needs and communications skills.

State Rehabilitation Council. DVR maintains a close working relationship with the State Rehabilitation Council (SRC) and feedback from that group regarding training issues is solicited and incorporated where appropriate.

**Due to a major change in reporting, people can now choose multiple categories when selecting Ethnicity. Therefore the percentages of all ethnic populations will add up to more than 100%.*

ATTACHMENT 4.11

Assessment; Estimates; Goals and Priorities; Strategies; and Progress Reports

FY 2009

ATTACHMENT 4.11 (a)

Results of Comprehensive Statewide Assessment
of the Rehabilitation Needs of Individuals with Disabilities

FY 2009

Results of the Comprehensive Statewide Assessment of the Rehabilitation Needs of Individuals with Disabilities

INTRODUCTION

The Division of Vocational Rehabilitation/Department of Human Services (DVR) is mandated by Federal Statute (§361.29) to conduct a comprehensive statewide assessment every three years to identify the needs of individuals with disabilities residing within Colorado in order to establish, develop, or improve community rehabilitation programs within the State. In particular, the assessment results must describe the vocational needs of individuals with disabilities including (a) individuals with the most significant disabilities, (b) individuals who are minorities and (c) individuals who have been underserved or not served by the vocational rehabilitation program.

The Comprehensive Statewide Needs Assessment was jointly conducted by the Colorado Division of Vocational Rehabilitation and the State Rehabilitation Council. The assessment included individuals served by the vocational rehabilitation program or other components of the statewide workforce investment system within the 9 months prior to the assessment or from March 2007 through December 2007. Colorado had conducted the last needs assessment in Federal FY 2005.

Primary objectives for the current needs assessment are:

1. *Identify the perceived need for each DVR service provided and the perceived level to which the need is being met;*

2. *Identify where efforts should be focused to establish, develop or improve DVR services in Colorado;*

3. *Identify additional services needed that are not currently offered by DVR;*

4. *Assess customer satisfaction with DVR services;*

5. *Assess the effectiveness of paperwork reduction efforts; and*

6. *Assess the effectiveness of efforts to increase self-employment options for customers.*

In order to conduct an effective survey and generate the most complete and comprehensive responses possible, we surveyed all consumers who had received DVR services within the last year (over a nine-month time period). This was a general survey conducted in order to provided the data needed to assess the need for the various vocational rehabilitation services provided through DVR, and the extent to which DVR's service delivery system has met those needs, with an emphasis on the following:

- Individuals who reported the highest need for services and their own assessment of how that need was met by DVR. This included supported employment services; such as job coaching, on-the job training and job development services.
- Data on individuals with disabilities who are minorities was gathered in order to compare their responses on the assessment of the service delivery system, with the response of those consumers who were non-minority.

- Individuals who have been underserved by the vocational rehabilitation program, based on the self-assessment of their own needs and how those needs were met by DVR services.

Colorado DVR will use all of the data collected in the comprehensive needs assessment to develop a much more in-depth consumer assessment survey. This survey will focus on needs of specific groups of consumers, including those with significant disabilities, and consumers with special needs, such as traumatic brain injury, individuals who are returning service members or veterans and their families, individuals who are deaf, individuals who are deaf and blind, and individuals with developmental disabilities.

In this report, the results of the assessment conducted in the fall and winter of 2007-08 will be summarized. Data tables which are referenced throughout the document are located in the attached Appendix B.

ASSESSMENT METHODOLOGY

To accomplish these objectives DVR contracted with Colorado WIN Partners/University of Colorado Denver to work with DVR staff and the State rehabilitation Council to design and conduct the needs assessment. The State Rehabilitation Council (the council) determined that data would be collected from three groups; 1) DVR consumers who had received services, 2) DVR staff, and 3) DVR vendors who provided services to DVR consumers.

Survey methodology was used to collect data. Data collection included a multi-method approach with surveys provided in paper, electronic and other alternative methods. Consumers were mailed a paper version of the survey with instructions for completing the paper version and mailing it in the postage reply envelope; taking the survey on-line via the internet; getting a copy of the survey through email or calling and having someone ask the questions over the phone. DVR Staff and DVR vendors were sent an email with a link to take the survey on-line via the internet, with options for completing the survey through alternative formats. Surveys are attached in Appendix A.

Consumers

Paper versions of the survey were mailed with postage paid return envelopes to 2010 consumers who received services in Colorado in the past year (January to December 2007). Of those, 513 surveys were returned as “not deliverable, unable to forward”. Of the remaining 1,497, a total of 270 (18%) consumers completed and returned the survey. Out of the 270, 227 were completed and returned by mail, five completed by phone and 38 were completed on-line via the internet for a total of 270 completed consumer surveys. In addition to responding to the survey, seven consumers included letters with the survey and three consumers called the research team with comments.

Based on one consumers’ responses to the survey questions, which included stating his age as 6 years old and answering questions inconsistently, that consumers’ responses to the survey was not included in any of the data in this report. As a result, all consumer data in this report is for the remaining 269 consumers who filled out surveys.

Staff

A total of 250 DVR staff were sent an email requesting their participation in the survey. The email included a link to the survey via the internet; 147 (58.8%) completed the survey. Two staff members requested an accommodation to complete the survey using an alternative method (e.g., these were completed via telephone).

Staff were asked to estimate the percentage of their time that was spent on direct consumer work and the percentage of their time spent on administrative work. Based on staff member's job classification, as well as how much direct service work they indicated was a part of their job, some data in this report only uses responses from staff members who are direct service providers, as their responses appear most helpful in assessing information related to the direct services provided to consumers.

Within this report, the staff members who are referred to as 'direct service providers' are those staff members who indicated they spent 50% or more of their time providing direct services to consumers and/or staff members who are Counselors I/II or Teachers. There are 56% (n=82) staff who completed the survey who are direct service providers, based on this definition. Throughout this report, 'direct service providers' or 'DSPs' refers to these 82 staff who provided direct services to clients, while 'staff' refers to all staff (n=147) who completed the survey.

DVR Vendors

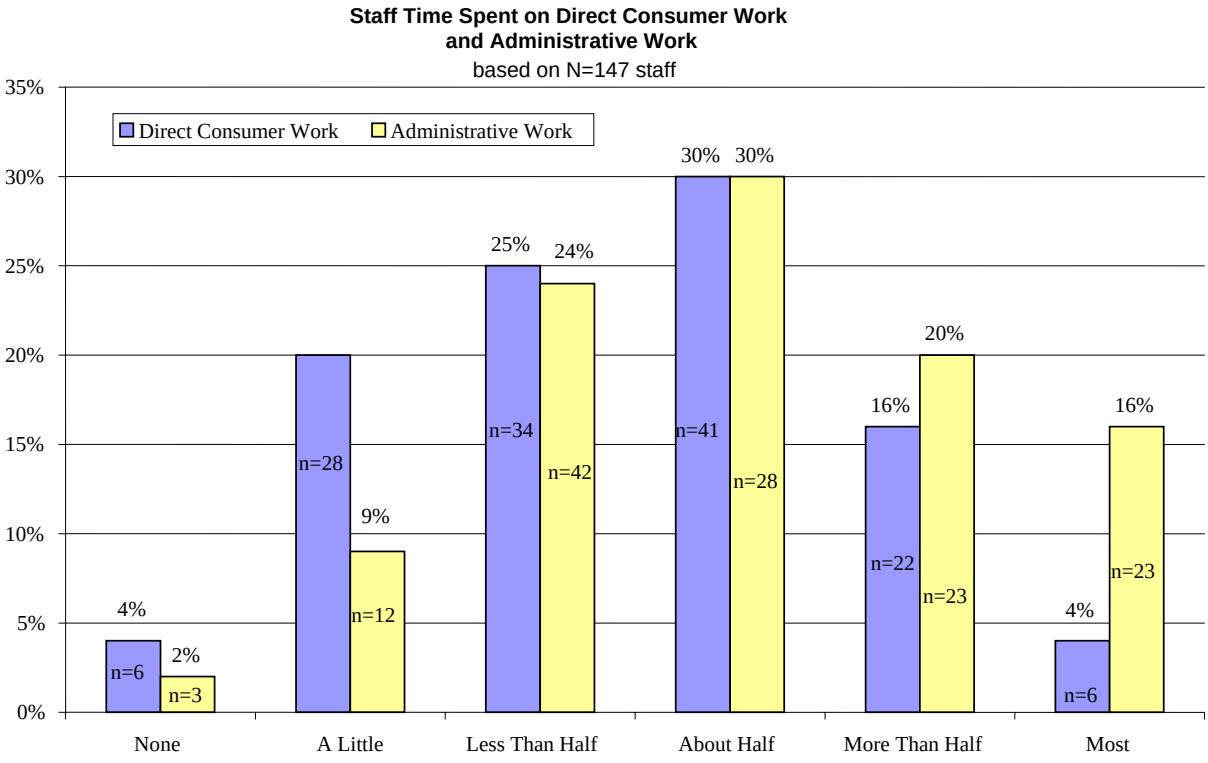
A total of 930 DVR Vendors were sent an email requesting their participation in the survey. The email included a link to the survey via the internet. The email was sent to vendors who provided services to DVR clients within the past year. Of the 930 emails sent, approximately 250 were returned as undeliverable. There are 122 completed surveys, yielding a response rate of approximately 18% of those who received the email.

Out of the 122 vendors who completed surveys, 22 of them indicated that as a DVR vendor 0% of their clients were provided services. Based on this information, those 22 vendors were excluded from some analysis within this report. Where appropriate, it is indicated whether the data from vendors includes all vendors who completed the survey or only those vendors who provided services to DVR consumers.

STAFF TIME SPENT ON DIRECT CONSUMER WORK AND ON ADMINISTRATIVE WORK

On average, staff reported spending 38.7% (std dev = 25.6) of their time on direct consumer work and 51.1% (std dev = 27.6) of their time on administrative work. The range for both of these values was from 0% to 100%. Based on categories of none, a little, less than half, about half, more than half, and most, this data is displayed in graphical form in Figure 1 below.

Figure 1



On average, direct service providers (DSPs; n=82) reported spending 54.6% (std dev = 19.5) of their time on direct consumer work and 37.9% (std dev = 19.1) of their time on administrative work. Those staff who are not direct service providers (non-DSPs; n=65) reported spending 15.2% (std dev = 11.6) of their time on direct consumer work and 68.61% (std dev = 27.6) of their time on administrative work. The difference between the two groups on both the amount of time they report spending on direct consumer work and on administrative work is significantly different (p's=.000) from each other.

Data for DSPs is presented in Figure 2 and for non-DSPs in Figure 3 based on categories of none, a little, less than half, about half, more than half, and most.

Figure 2

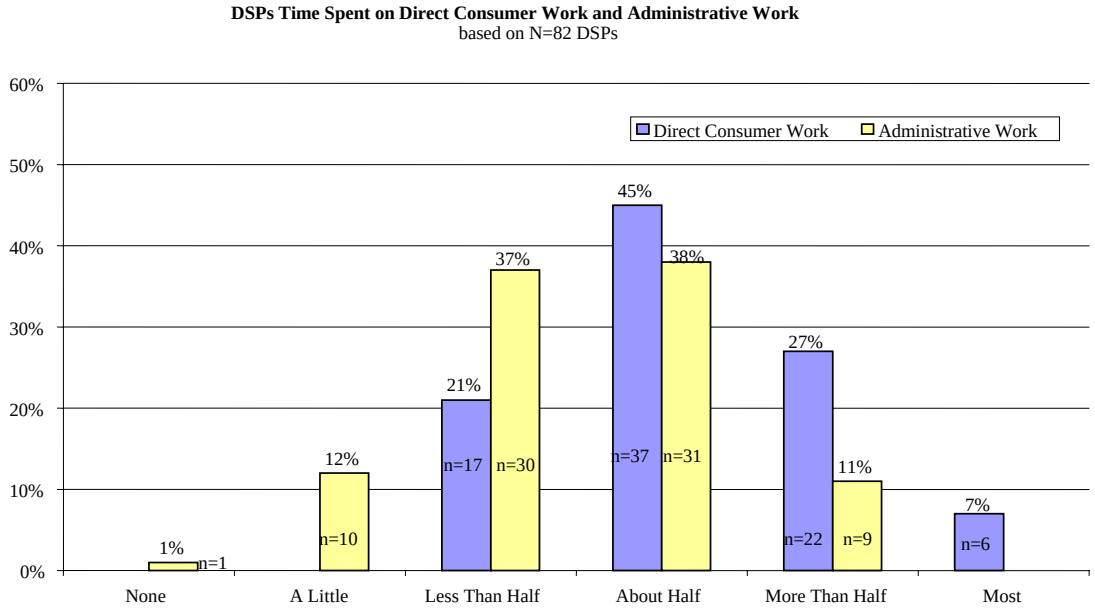
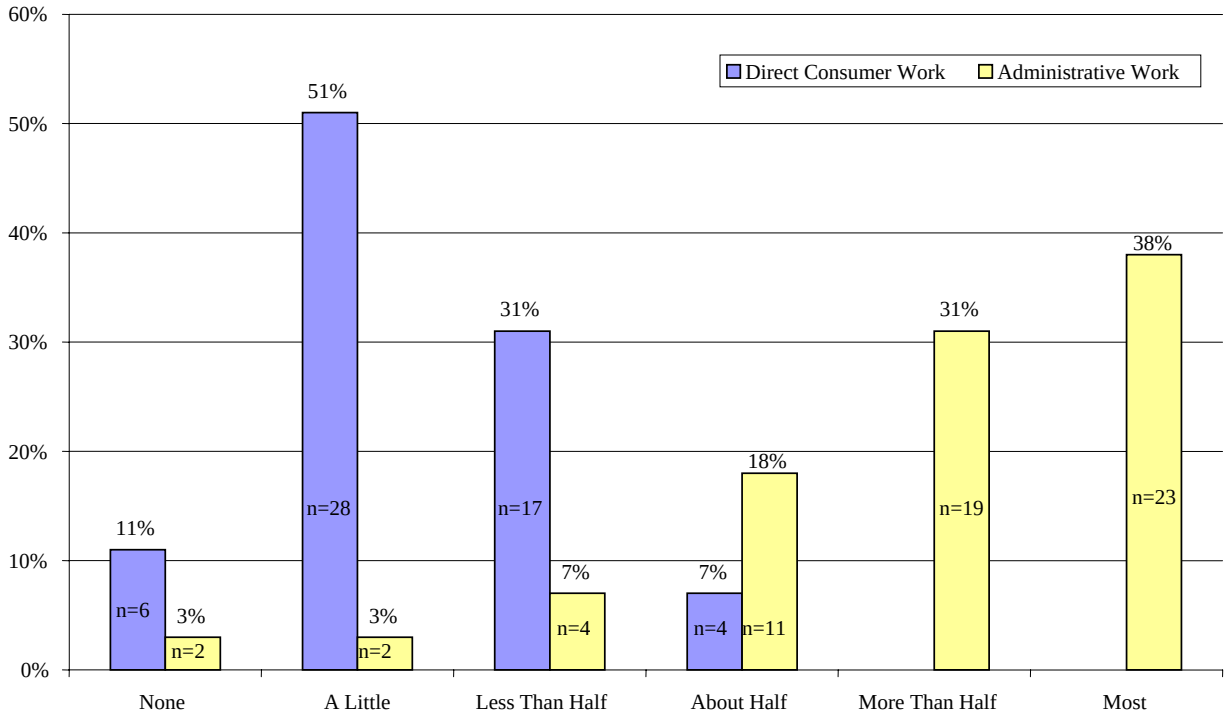


Figure 3



Administrative Work

Staff estimated the time they spent doing administrative work in the following categories: administration/management, program management, financial/budget, training, supervision/HR functions, staff mentoring/consultation, community consultation/employer outreach,

contracts/procurement/purchasing, general administrative functions, information technology support/data systems, research/information gathering, and support for boards/committees. All staff indicated whether they spent none, a little, less than half, about half, more than half, most, or all of their time in each of these administrative tasks.
Data for all staff, as well as information for direct service providers (DSPs) and those who are not direct service providers (non-DSPs) is presented in Table 5 (in Appendix B).

Comparisons of how much DSPs vs. non-DSPs estimated the time spent on these administrative tasks showed few differences in staffs' answers on average. However, there are three statistically significant differences in the estimates of DSPs and non-DSPs. On average, non-DSPs estimated they spent more time than DSPs estimated in the categories of administration/management (p=.003) and supervision/HR functions (p=.000). On average, non-DSPs estimated they spent less time than DSPs estimated they did in the category of community consultation/employer outreach (p=.015). There were no other significant differences in the estimates of DSPs and non-DSPs for the other categories of administrative work.

Direct Consumer Work

Staff estimated the time they spent directly working for individual consumers during the past six months in the following categories: application and intake, evaluation and diagnostic services, physical and mental restoration services, training services, specialized services for blind, deaf and deaf-blind, assistive technology services, educational services, vocational counseling and guidance, placement services, supportive services, post-employment services, and other. All staff indicated whether they spent none, a little, less than half, about half, more than half, most, or all of their time in each of these categories.
Data for all staff, as well as information for direct service providers (DSPs) and those who are not direct service providers (non-DSPs) is presented in Table 6 (found in Appendix B).

Comparisons of how much DSPs vs. non-DSPs estimated the time spent on these administrative tasks showed that for each category, DSPs on average estimated they spent more time working in each category than non-DSPs did. These average differences were statistically significant for each category (p=.000).

Comparing the responses of DSPs and non-DSPs for both administrative and direct consumer work, it appears as if DSPs estimate they spent more time providing direct consumer work than non-DSPs estimated, yet DSPs do not estimate significantly lower amounts of administrative work (aside from administrative/management and supervision/HR functions) than non-DSPs estimate they do.

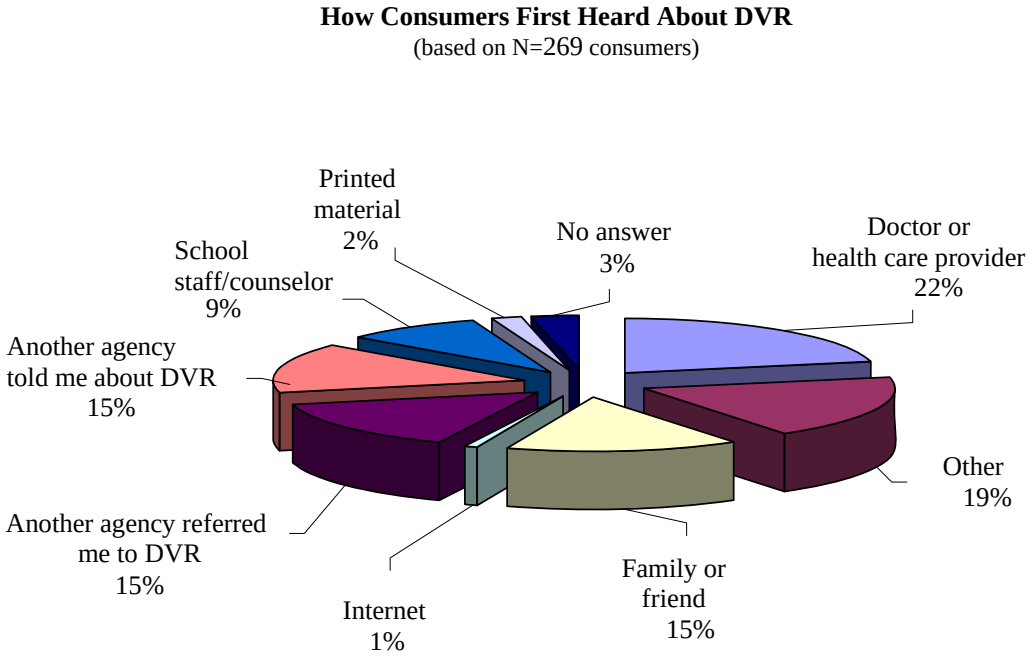
RESPONDENT CHARACTERISTICS

How Consumers First Heard about DVR

Consumers were asked to indicate how they first heard about DVR from a list of choices. Of the choices, respondents indicated that they heard about DVR as follows: a doctor or health care provider, 22% (n=60), another agency referred me, 15% (n=41), friend or family member, 15% (n=40), another agency told me, 15% (n=39), school or staff counselor, 9% (n=24), printed material, 2% (n=6), internet, 1% (n=2), and other, 19% (n=51). Three percent of respondents

(n=7) did not respond to this question. The majority of those who checked other identified a community agency or organization that first told them about DVR. This is shown graphically in Figure 4 below. To see this data in table format, please see Table 1 in Appendix B.

Figure 4



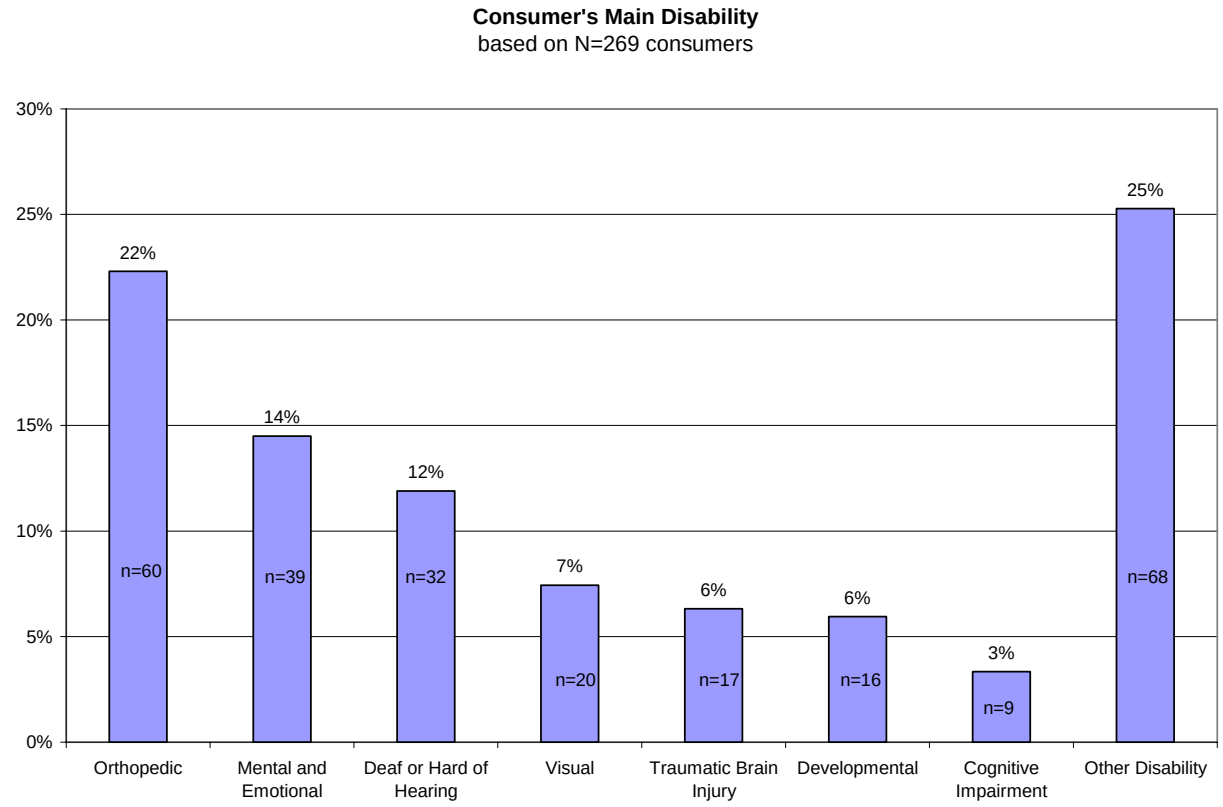
Type of Disability

Consumers were asked to identify the main disability that makes it hardest to maintain employment or independence from a list including: Visual, Deaf or Hard of Hearing, Developmental, Mental and Emotional, Orthopedic, Cognitive Impairment, Traumatic Brain Injury or Other.

Staff and vendors were asked to estimate how many consumers in their caseload in the past six months each of the disabilities (from the same list as consumers) makes it hardest for consumers to maintain employment or independence.

Consumers who responded to this item, 97% (n=261) indicated the disabilities that make it hardest to maintain employment or independence are - in order of the percentage of consumers who checked the disability: orthopedic, 22% (n=60), mental and emotional, 15% (n=39), deaf or hard of hearing, 12% (n=32), visual, 7% (n=20), traumatic brain injury, 6% (n=17), developmental 6% (n=16), cognitive impairment, 3% (n=9) and other, 25% (n=68). Three percent (n=8) of the consumers did not respond to this item. Consumers were instructed to choose only one.

Figure 5



Responses to “other” were categorized into 11 categories. Some of the responses could be categorized in to one of the disabilities listed, 13 consumers identified multiple disabilities. The number of responses and categories are listed below.

13	multiple disabilities identified
11	back related disability
8	muscle related disease
6	chronic illness
5	quadriplegic or amputation
5	mental and emotional
3	aneurism and/or stroke
3	deaf or hard of hearing
3	cognitive impairment
11	miscellaneous
68	

In addition, consumers were also asked if they have other disabilities that also make it hard to maintain employment or independence. They identified mental and emotional, 16% (n=44); orthopedic, 14% (n=37); visual, 12% (n=33); deaf or hard of hearing, 9% (n=25); cognitive, 7% (n=18); developmental, 6% (n=17); and traumatic brain injury, 5% (n=13). Consumers were instructed to check all that apply.

For comparison purposes, the following information about consumers' disability type is presented in the order of prevalence for consumers' main disability in this sample: orthopedic, mental and emotional, deaf or hard of hearing, visual, traumatic brain injury, developmental and cognitive.

Staff and vendors were asked to estimate how many of the consumers they served in the past six months have the following disabilities: visual, developmental, orthopedic, deaf or hard of hearing, mental and emotional, traumatic brain injury, and cognitive impairment. For each disability type, staff were asked to estimate the number of consumers they served on a seven point scale of none, a few, less than half, about half, more than half, most and all. In order to highlight staff who worked with consumers directly, the data for this question focuses on what direct service providers (DSPs) and vendors who work directly with consumers indicated in their surveys.

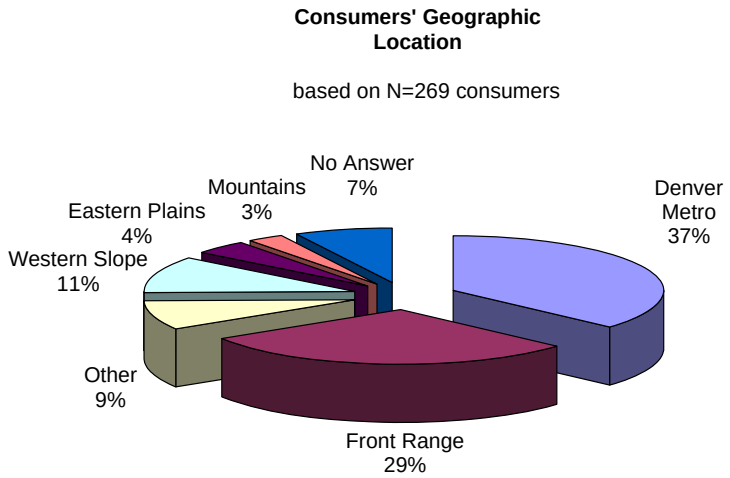
When estimating the number of consumers that direct service providers served with each disability type, most commonly they indicated that they served a few or no consumers with that disability type. However, DSPs did indicate that they served more consumers with orthopedic disabilities, mental and emotional disorders, traumatic brain injury, and cognitive disorders as highlighted by the bold numbers in Table 2 (in Appendix B).

Geographic Location

Geographic regions were identified as: Denver Metro, Eastern Plains, Front Range (not Denver Metro), Western Slope, Mountains and Other.

The largest number of consumer respondents were from Denver Metro, 37% (n=99); secondly Front Range, 29% (n=79); then the Western Slope, 11% (n=29); other, 9% (n=23); the Eastern Plains, 4% (n=11) and the lowest number was from the mountains, 3% (n=8). Several respondents, 7% (n=20), left this item blank.

Figure 6



Staff indicated the geographic area where their office is located and vendors indicated the geographic location where they provide services. Consumer, staff and vendor geographic

locations are illustrated in Figure 7. This figure includes information from all staff and vendors who filled out a survey.

Figure 7

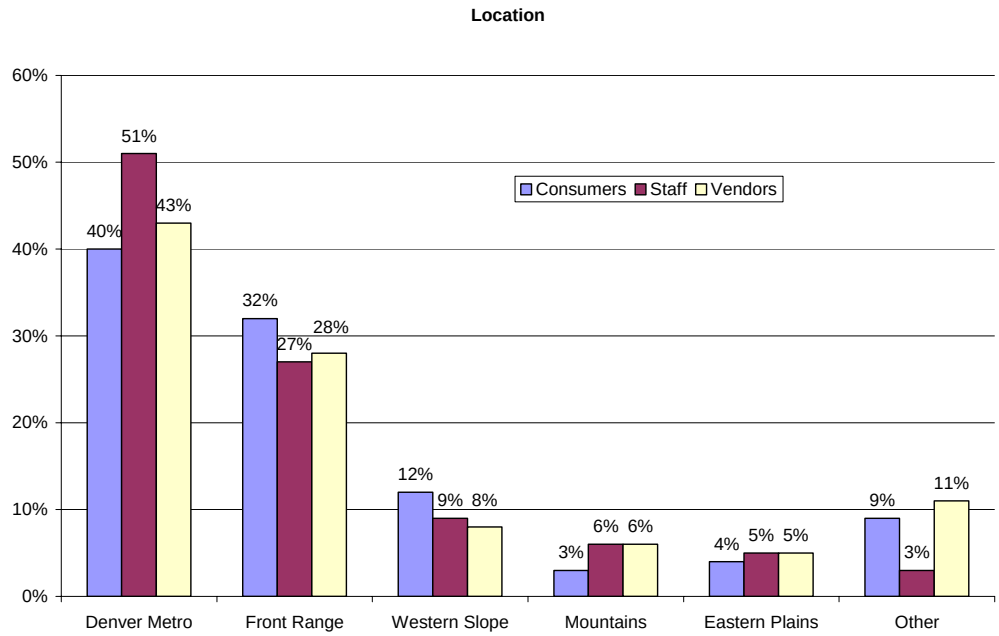
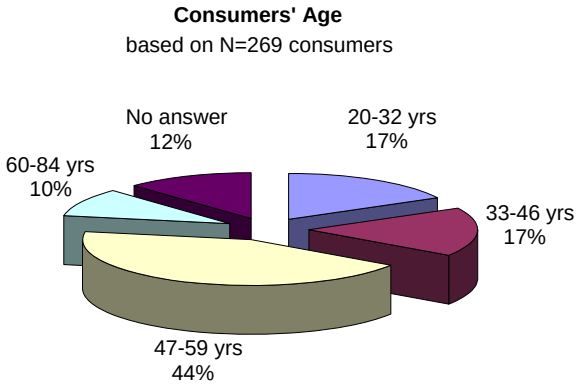


Table 3 (in Appendix B) shows the number (n) and percentage of consumers, staff and vendors in each geographic location.

Age

The average age of consumer respondents was 46 years. 17% (n=46) of the consumers who responded were 20-32 years old, 17% (n=47) were 33-46 years old, 43% (n=116) were 47-59 years old, and 10% (n=27) were 60-84 years old. 12% of consumers did not answer this question.

Figure 8

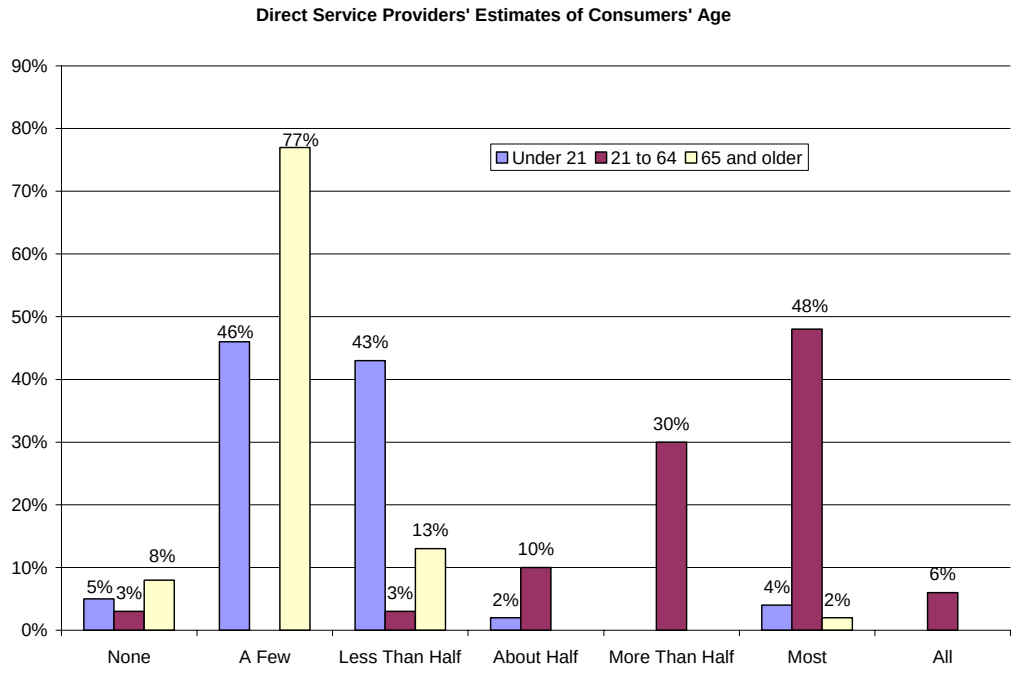


Staff were asked to estimate the age of the consumers they served in three age categories: less than 21, 21 to 64, and 65 or over, staff indicated how many consumers they served in each category on a seven-point scale (none, a few, less than half, about half, more than half, most, or all). As seen in Figure 9 below, direct service providers indicated that they served more consumers who were 21-64 than the other age categories.

Direct service providers' estimates of the age of consumers they served seem consistent with the sample of consumers who completed surveys. In the current sample of consumers, there were 2 consumers (1%) under the age of 21, 223 consumers (94%) 21-64 years of age, and 11 consumers (5%) 65 and older. These percentages do not include the 33 consumers who did not state their age.

Figure 9 illustrates the percentage of direct service providers who provided services to consumers in each of the three age categories.

Figure 9

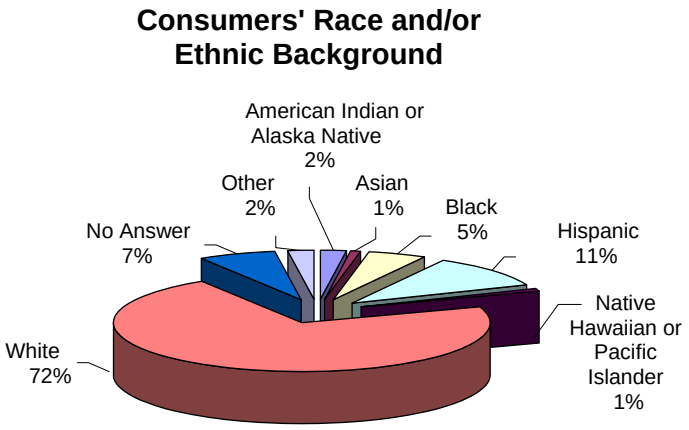


Race and/or Ethnic background

Consumer Race

The majority (72%, n=193) of consumer respondents were White. Of the remaining 76 consumers, 11% (n=30) were Hispanic, 5% (n=12) were Black, 2% (n=6) were American Indian or Alaska Native, 2% identified as 'Other' (n=6), 1% (n=2) were Asian, and 1% (n=2) were Native Hawaiian or Pacific Islander. Seven percent (n=18) did not select any racial/ethnic category.

Figure 10

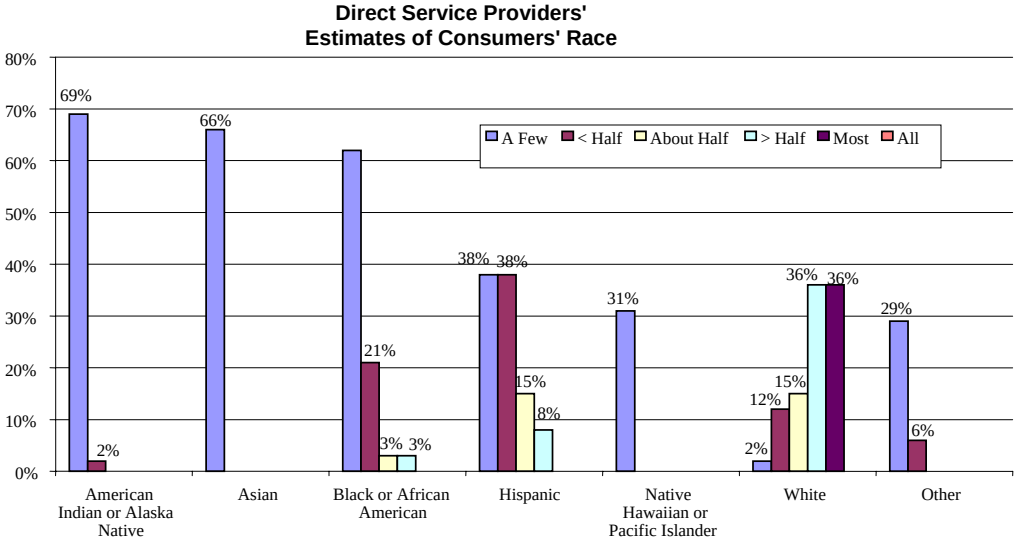


Direct Service Providers' Estimates of Consumer Race

Staff estimated the number of consumers they serve in each of the racial and/or ethnic background categories on a seven point scale with none, a few, less than half, about half, more than half, most and all. The graph below (Figure 11) shows the percentage of direct service providers who indicated the number of consumers in each category. Please note that the percentage of direct service providers who answered 'none' in each category is not presented in Figure 11, in order to highlight the estimates of how many consumers served were in each racial/ethnic category.

Table 4 (in Appendix B) presents the complete data for this question. Most staff served no or a few American Indian or Alaska Natives, Asians, Native Hawaiian or Pacific Islander, or Blacks or African Americans. 76% of direct service providers indicated that a few or less than half of the consumers they served were Hispanic, while 72% indicated that more than half or most of the consumers they served were White.

Figure 11

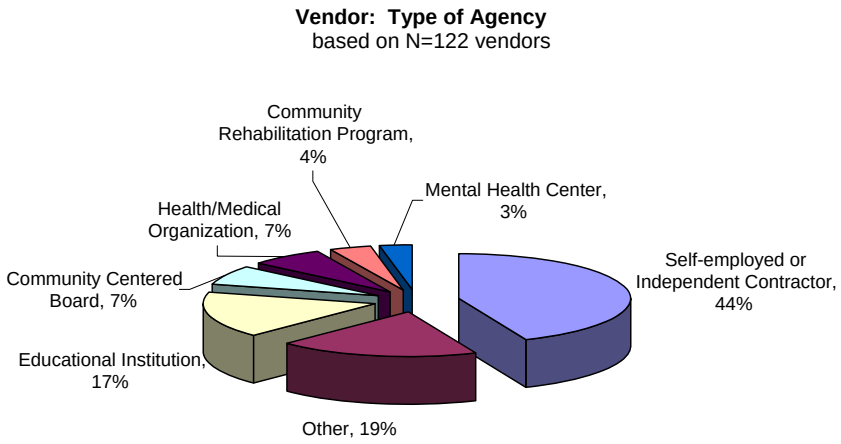


VENDOR

Type of Agency

Vendors most frequently indicated that they are self-employed or independent contractors, 44% (n=54). Several indicated other, 19% (n=23) and 17% (n=21) indicated they are from an educational institution. Table 7 (found in Appendix B) provides the complete data.

Figure 12

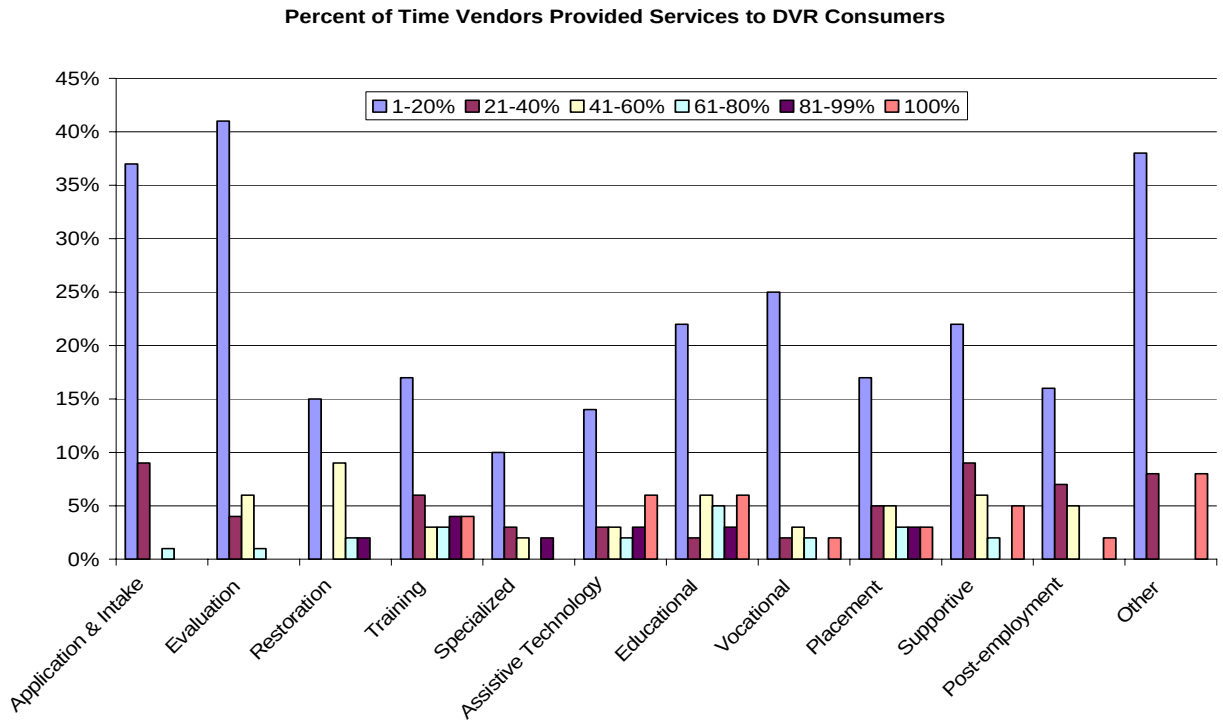


SERVICES

Percent of Vendor Time Providing Services to DVR Consumers

Vendors estimated the percentage of their time in the past year spent providing eleven types of services as seen in Figure 13 and listed in Table 8 (found in Appendix B) to consumers. Time percentage categories were 0, 1-20, 21-40, 41-60, 61-80, 81-99 and 100. For this data, only vendors who indicated they provided direct services to consumers (n=100) were included. In Figure 13 the percentage of vendors who indicated they spent 0% of their time providing this service are not included in the graph, although you can see that number in Table 8 (found in Appendix B).

Figure 13



In the open text box for vendors to describe other services provided to DVR consumers in the past year, 28% (n=28) of vendors provided additional comments. Several vendors indicated that they assisted DVR clients with business plans (n=4), educational activities (n=3), benefits (n=1), intake (n=1) or provided treatment (n=4). In addition, 3 vendors indicated that they assist DVR clients with auto repair (n=3) or computer repair (n=1). A couple of vendors provide services to DVR such as graphic design work, customer billing or CA. The miscellaneous comments included providing supplies to DVR, making travel arrangements, not seeing any clients, scheduling medical procedures, insurance, etc.

Percentage of Vendor Clients Who Are DVR Consumers

Vendors were asked what percentage of their clients were DVR consumers. The majority of vendors, 57% (n=70) estimated that 1-20% of their clients were DVR consumers.

Percentage of Vendor Clients Prepared or Ready for Vendor to Provide Services

Vendors were asked how prepared DVR consumers were for vendors to provide services to them. For four categories (very prepared, somewhat prepared, somewhat unprepared, not prepared), vendors estimated what percentage of DVR consumers fit into each of these categories. The percentages vendors could pick from were 1, 1-20, 21-40, 41-60, 61-80, 81-99, and 100. For this question, answers from vendors who indicated they provided direct services to DVR consumers (n=100) are provided in Table 9 (see Appendix B).

Most vendors estimated that less than 20% of the DVR consumers they served were somewhat unprepared or not prepared More than half of the vendors indicated that more than 61% of the DVR consumers they served were very prepared.

Need for Service – Consumer Ratings

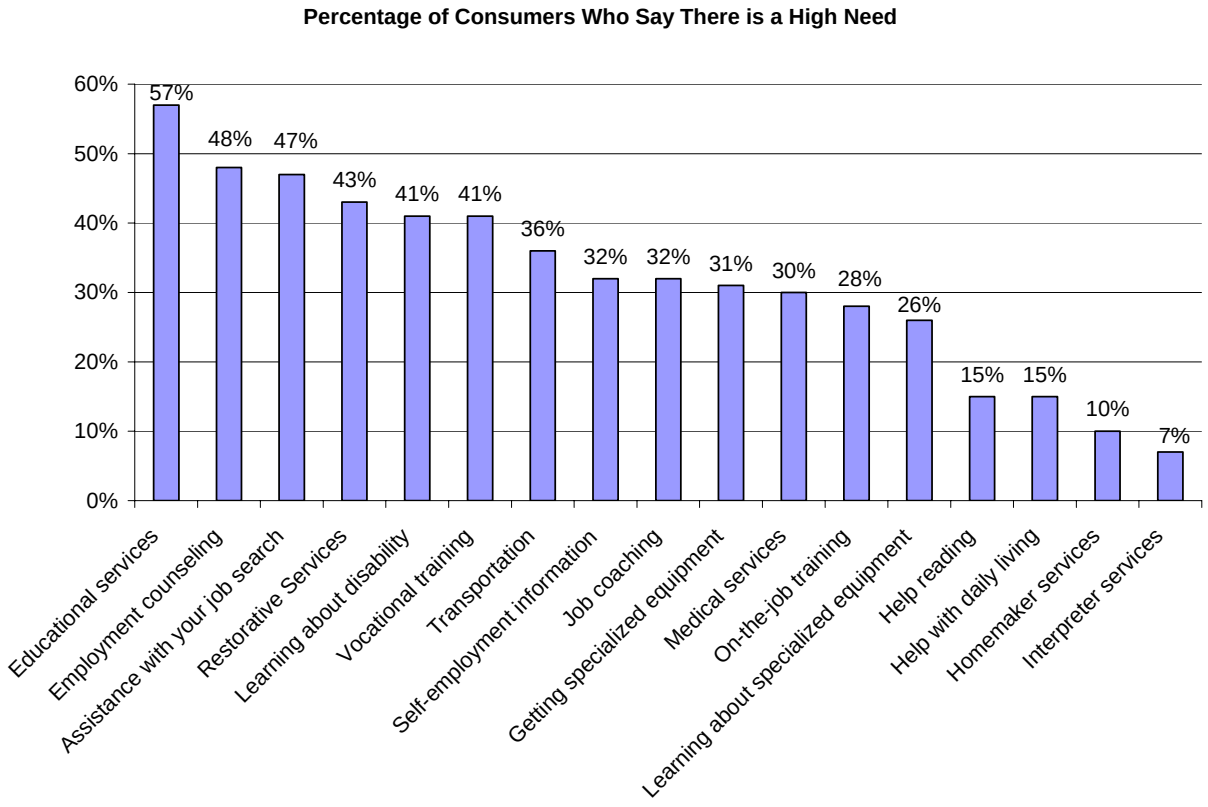
Consumers were asked about three things related to services offered by DVR: (1) their level of need for the service, (2) whether or not they received the service and (3) if they received the service, how helpful was the service.

Consumers indicated that they received between 0 and 15 services with an average of 4.5 services per person. Of those who received services, most of the consumers indicated that they received 5 services (14%, n=38). Another 11% (n=30) received one service, 6% (n=17) received 2 services, and 11% (n=30) received 3 services. There were 29 (11%) consumers who did not check yes for any of the services.

Consumers rated their need for each of the services listed in the survey, on a scale including: none, low, medium, and high. In Table 10 (in Appendix B), these services are listed in order by the number of consumers who rated the services as high in need. The top six services rated as a high need by the largest percentage of consumers are: educational services or assistance with education, 57% (n=128); employment counseling or some guidance about working, 48% (n=108); assistance with job search, 47% (n=104); restorative services, 43% (n=94); learning how your disability could affect your ability to work, 41% (n=92); and vocational training, 41% (n=85). The data for all the services is found in Table 10 (in Appendix B).

For comparative purposes the following tables and figures about services will have services listed in the order presented in Table 10 and Figure 14, that is, the order in which the percentage of consumers indicated they have a high need for the service.

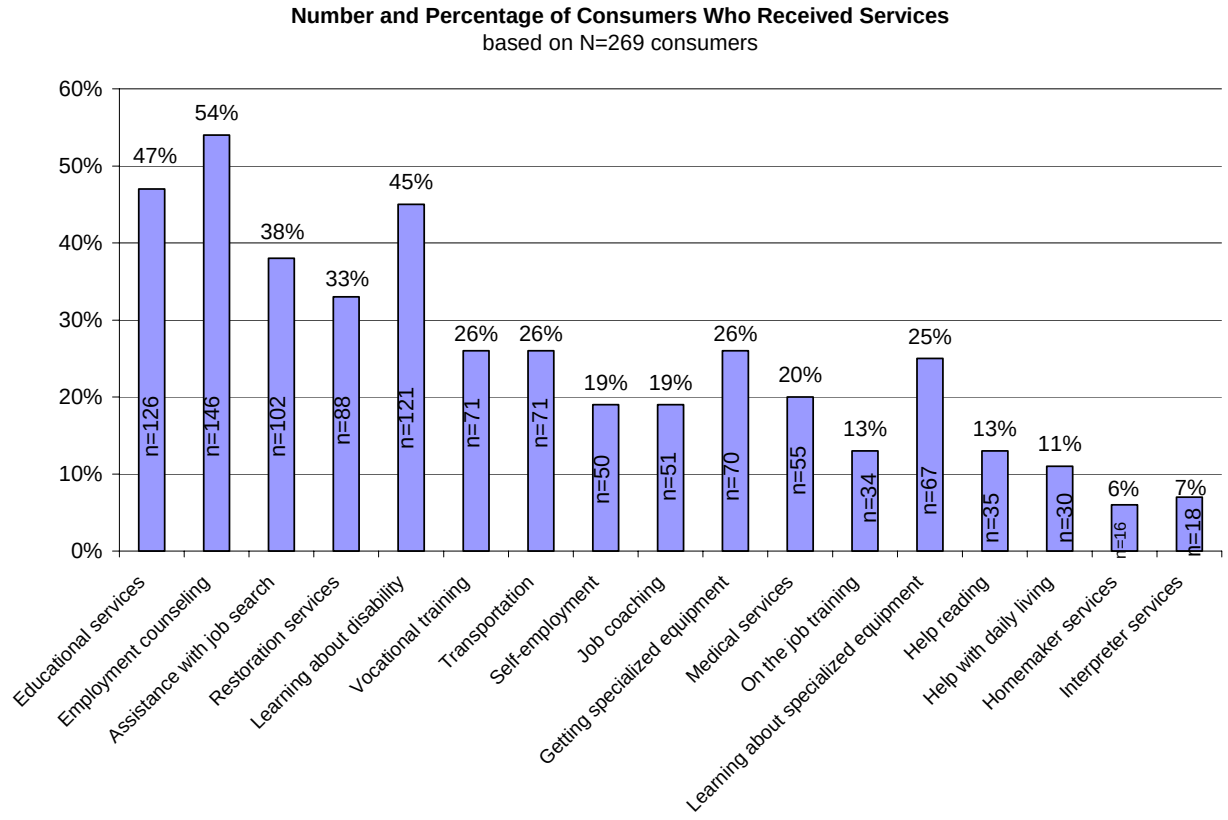
Figure 14



Services Received

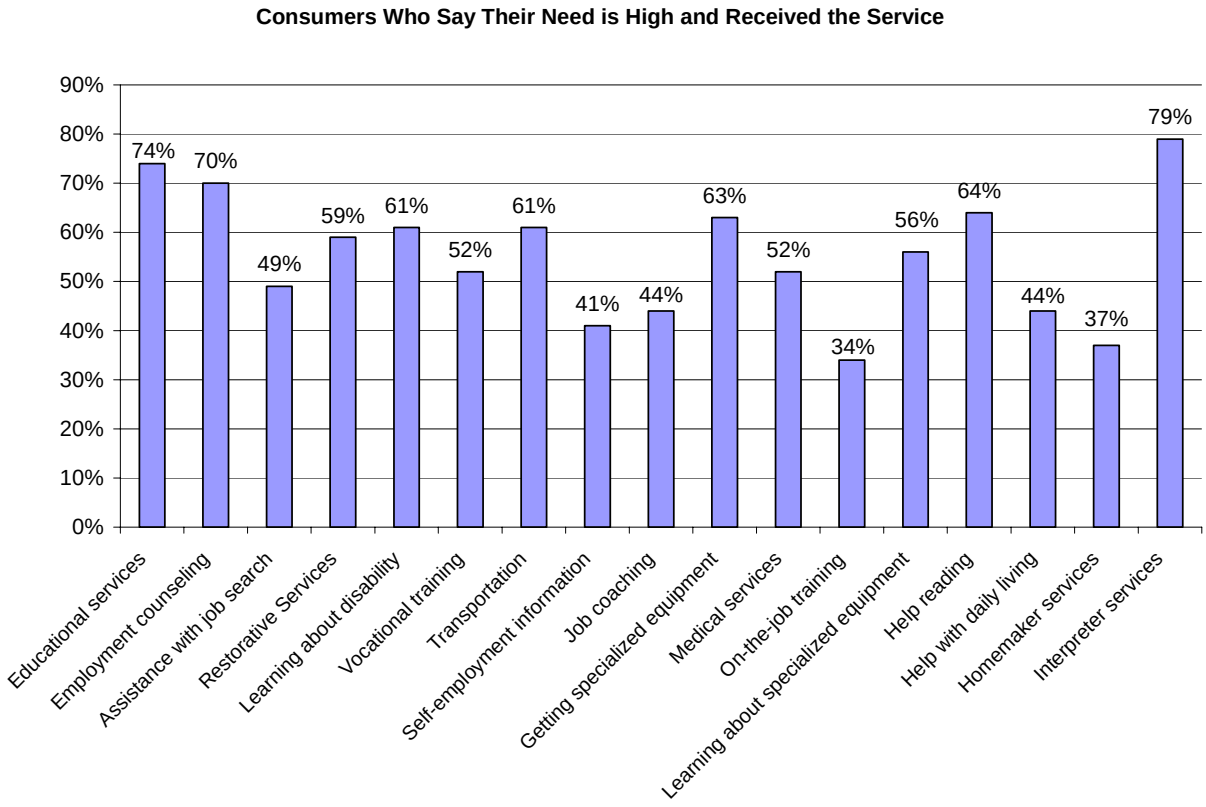
In addition, consumers indicated whether or not they received the service. The services most frequently received are employment counseling, 54% (n=146); educational services, 47% (n=126); learning how their disability could affect their ability to work, 45% (n=121); assistance with job search, 38% (n=102); and restorative services, 33% (n=88). Further information is presented below in Figure 15 and in Table 11(found in Appendix B), outlining the percent and number of consumers who indicated they received each service.

Figure 15



The number of consumers who rated their need for the service as high and who received the service is listed in Table 12 (found in Appendix B) and shown in Figure 16. As shown in the table, for most of the services (11 of 17 services listed), the majority of consumers who indicated a high need for the service, received the service. Those services for which consumers rated it as high yet fewer than 50% received the service are: assistance with your job search, 49% (n=51); job coaching (from a job coach) at a job site, 44% (n = 30); help performing activities of daily living, 44% (n = 14); self-employment information, 41% (n = 28); homemaker services, 37% (n = 8); and on-the-job training (from the employer) at a job site, 34% (n = 20).

Figure 16



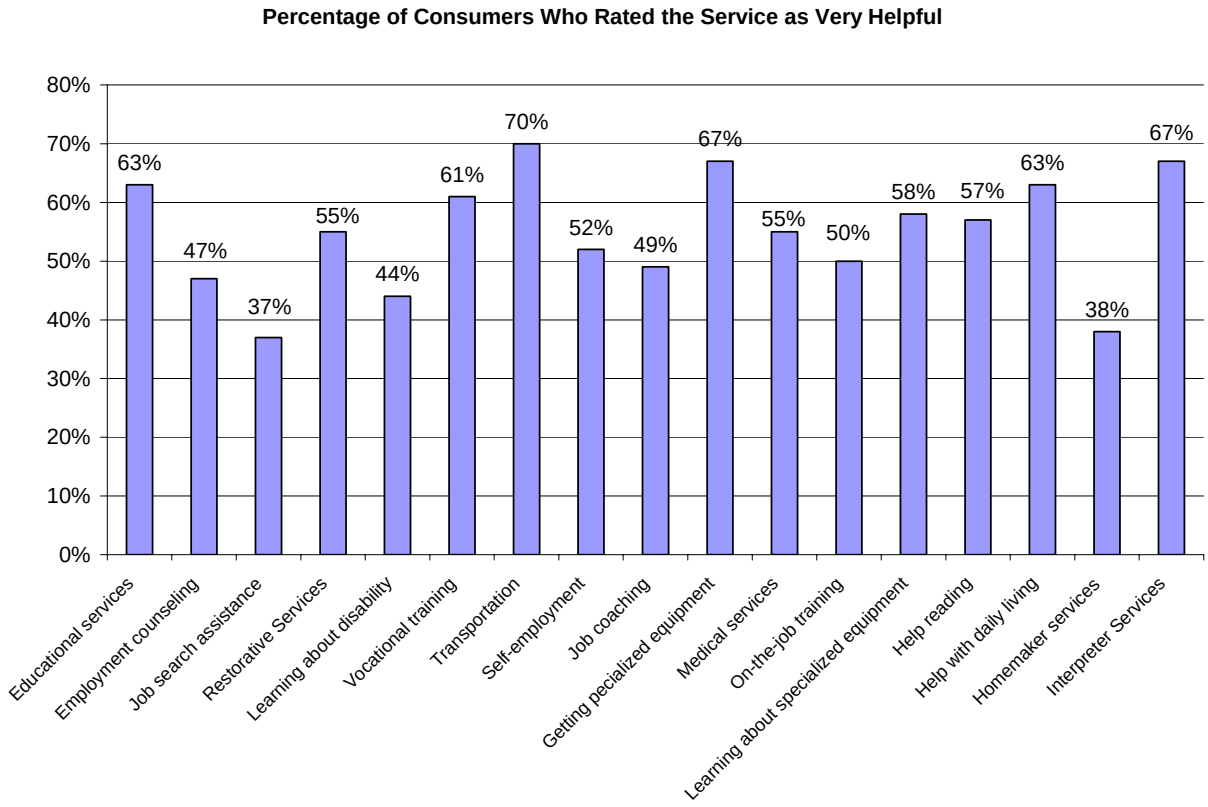
Helpfulness of Services

Consumers were also asked to rate the helpfulness of the services they received on a three point scale including not helpful, somewhat helpful and very helpful. In some instances, consumers rated the helpfulness of the service even if they indicated that they did not receive the service; however, they are not included in this analysis. This analysis only includes consumers who indicated that they received the service and rated the helpfulness of the service.

Figure 17 shows the number of consumers who received the service in the first column of numbers, regardless of their rating of their need for the service. To be consistent with the previous tables, services are listed in the same order as above, that is, by the number of consumers who rated the services as high in need. (also see Table 13 found in Appendix B)

As seen in Figure 17, the services rated as very helpful by the highest percentage of consumers who received the services are transportation, 70% (n=50); getting specialized equipment for the disability, 67% (n=47); interpreter services, 67% (n=12); educational services, 63% (n=79); and help performing activities of daily living, 63% (n=19).

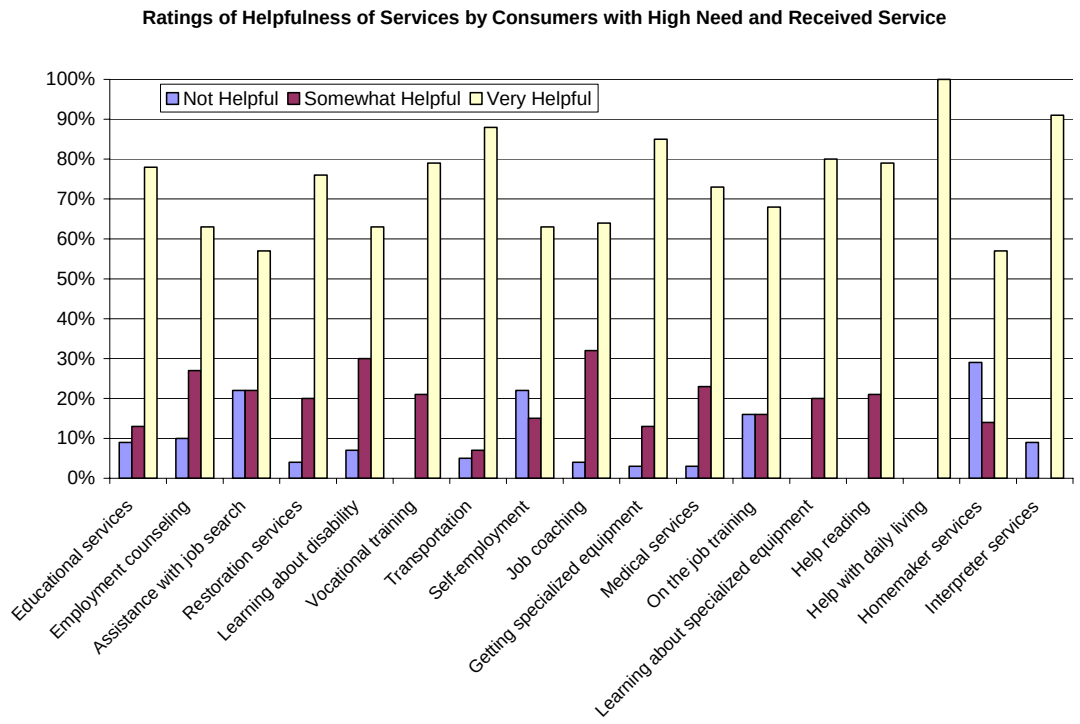
Figure 17



Helpfulness of Services for Services Rated as High Need

Analysis was conducted to examine how helpful services were for consumers who indicated they had a high need for the service and received the service. For most of the services, consumers indicated the service was very helpful as shown in Table 14 (found in Appendix B) and Figure 18. There are a few services that more consumers rated as being not helpful or somewhat helpful (as opposed to very helpful). The services with fewer consumers rating them as very helpful are homemaker services, 29% not helpful; job search, 22% not helpful; self-employment, 22% not helpful; on-the-job training, 16% not helpful; and employment counseling, 10% not helpful. Ratings of all services are displayed in Figure 18.

Figure 18



Staff and Vendor Ratings of Services

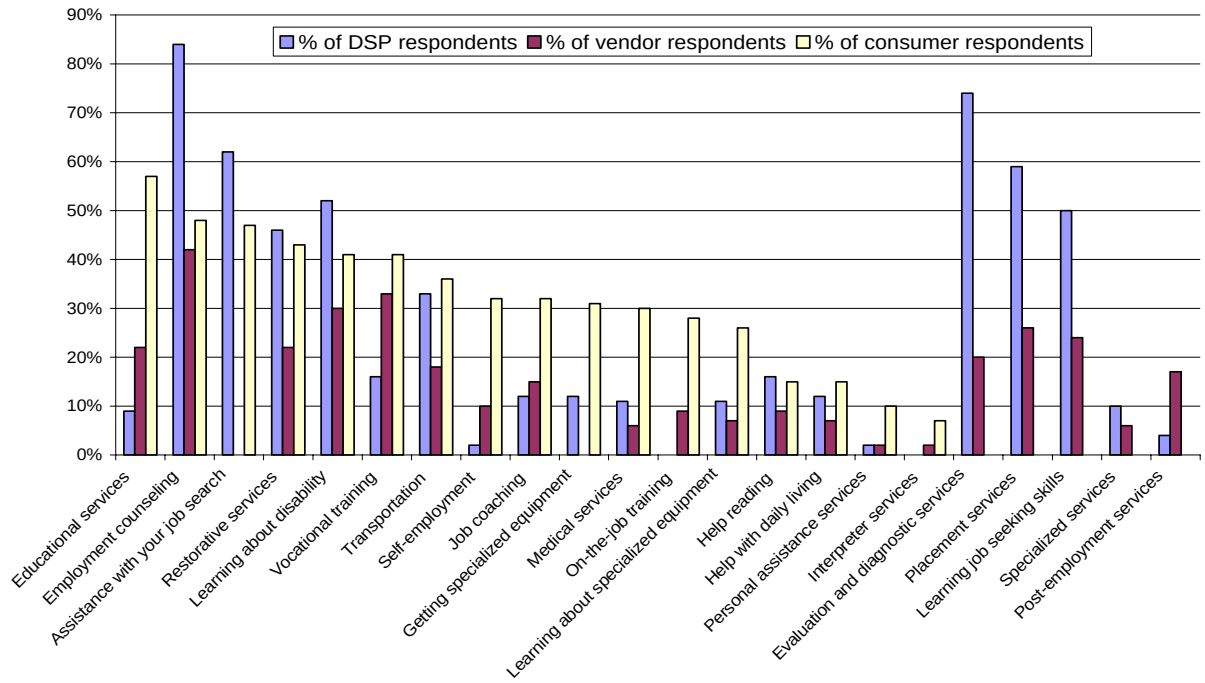
The need for services was rated by consumers, staff and vendors on different response scales. Consumers rated their need for each service on a scale including: none, low, medium, and high. Staff estimated the percentage of consumers they served in the past six months who had a high need for each of the services on a seven point scale including none, a few, less than half, about half, more than half and most and all. Vendors estimated the percentage of consumers they served in the past six months who had a high need for each of the services on a seven point scale including 0, 1-20%, 21-40%, 41-60%, 61-80%, 81-99%, and 100%. For purposes of this summary the response scales for staff and vendors will be matched as follows:

none	=	0
a few	=	1-20%
less than half	=	21-40%
about half	=	41-60%
more than half	=	61-80%
most	=	81-99%
all	=	100%.

Figure 19 indicates the number and percentage of direct service providers, vendors (who indicated they provided services to DVR consumers), and consumers who indicated there is a high need for each service. High need is defined as consumers who indicate there is a high need; direct service providers who indicate there is a need for the service for more than half, most, or all consumers; and vendors who indicate there is a need for the service for 61-80%, 81-99% or 100% of consumers. (Also see Table 15 found in Appendix B)

Figure 19

High Need for Service as Rated by Direct Service Providers, Vendors and Consumers



Differences between consumers and staff and vendors

- More consumers, 57% (n=128) indicated a high need for educational services or assistance with education than direct service providers, 9% (n=5) or vendors, 22% (n=11).
- More consumers, 41% (n=85) indicated a high need for vocational training than direct service providers, 16% (n=10) or vendors, 33% (n=18).
- More consumers, 32% (n= 69) indicated a high need for self-employment information than direct service providers, 2% (n=1) or vendors, 10% (n=5) did.
- More consumers, 32% (n=68) indicated a high need for job coaching (from a job coach) at a job site than direct service providers, 12% (n=7) or vendors, 15% (n=7) did.

- More consumers, 28% (n=59) indicated a high need for on the job training (from the employer) at a job site than did direct service providers, 0% (n=0) or vendors, 9% (n=4).

- More consumers, 26% (n=57) indicated a high need for learning about specialized equipment than did direct service providers, 11% (n=7) or vendors, 7% (n=4).

Services perceived as high need by direct service providers and consumers

Direct service providers and consumers perceived the need to employment counseling, assistance with job search, restorative services, and learning how consumers' disability could affect consumers' ability to work as high.

- The need for employment counseling was perceived as high by 84% of direct service providers (n=52) and 48% of consumers (n=108).

- The need for assistance with job searches was perceived as high by 62% of direct service providers (n=37) and 47% of consumers (n=104).

- The need for restorative services was perceived as high by 46% of direct service providers (n=30) and 43% of consumers (n=94).

- The need for learning how consumers' disability could affect consumers' ability to work was perceived as high by 52% of direct service providers (n=34) and 41% of consumers (n=92).

Services perceived as high need by direct service providers

Staff were asked to rate the need for a few more services than consumers were. Within these questions, direct service providers indicated the need was high for evaluation and diagnostic services (74%; n=48), placement services (59%, n=34), and learning job seeking skills (50%, n=30).

Consumer's Needs Met by Services as indicated by Direct Service Provider Ratings

Direct service providers estimated the number of consumers whose need for services was met by the service on the following scale: none, a few, less than half, about half, more than half, most and all. Complete data for all services is shown in Table 16 (found in Appendix B). Figures 20(a) and 20(b) show all the responses except for none and all, in an effort to simplify the data for graphical display.

Direct service provider (DSP) responses suggest there is a need for more information about self-employment options. DSP responses also indicate that the need for educational services, on-the-job training, medical services and getting specialized equipment was not met for a substantial percentage of consumers. Further inquiry is needed to fully understand staff responses.

Figure 20(a)

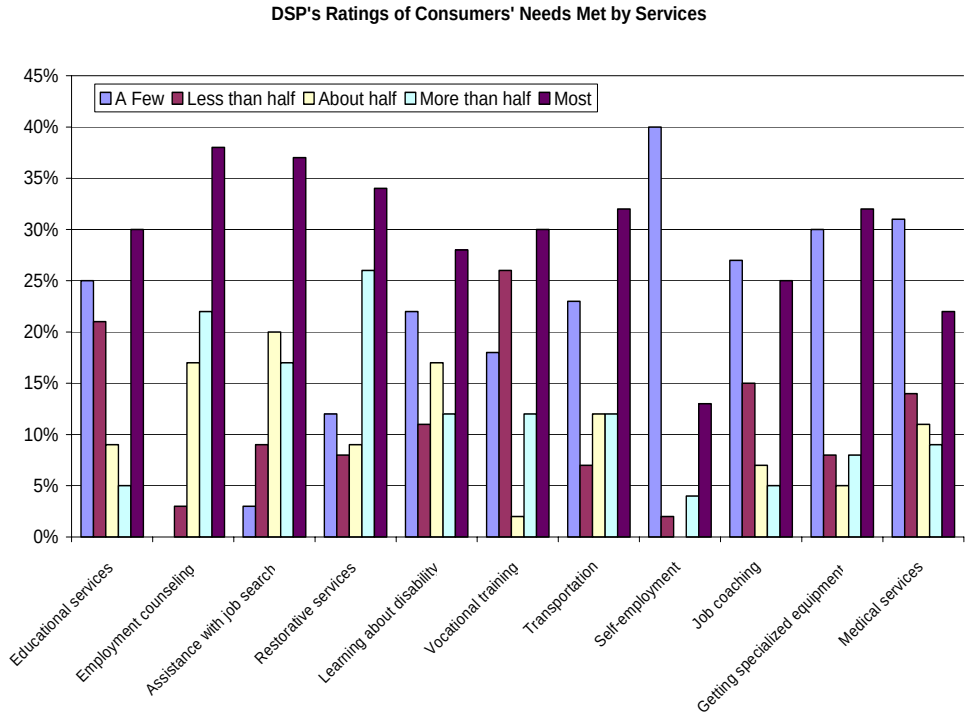
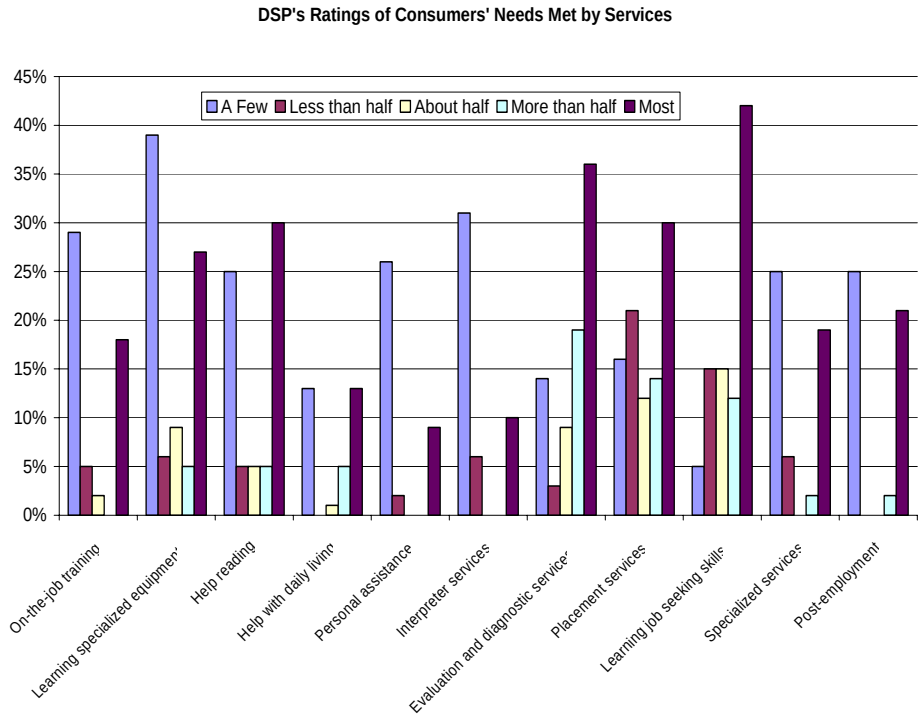


Figure 20(b)



Vendor Ratings of Consumer's Needs Met by Services

Vendors estimated the number of consumers whose need for services was met by the service on the following scale: 0%, 1-20%, 21-40%, 41-60%, 61-80%, 81-99%, and 100%. Data for those vendors who indicated they provided services to DVR consumers is shown in 17 (found in Appendix B).

Who Provided Service

Staff and vendors were asked to indicate who provided the service. Many of the services were provided by both DVR and vendors. Direct service provider estimates are presented in Table 18 (found in Appendix B) and vendor estimates are provided in Table 19 (found in Appendix B). The services most frequently provided by both DVR and vendors according to DVR staff were:

- assistance with job search,
- learning job seeking skills,
- placement services,
- learning how their disability affects their work, and
- getting specialized equipment.

The services most frequently provided by DVR according to DVR staff were:

- employment counseling,
- learning how their disability affects their work,
- self-employment, and
- learning about specialized equipment and transportation**.**

The services most frequently listed as provided by vendors were:

- job coaching,
- vocational training,
- medical services,
- educational services, and
- restorative services.

Other DVR Services

Consumer responses

Consumers were asked if they received other services from DVR (not listed in the previous table) that helped them get or keep a job or become more independent. Comments were written by 106 consumers, 69 of the comments were coded, the remaining comments were not related to services and will be included as a separate topic. The 37 comments that were not coded for this section will be discussed in the section on additional information, since these comments were not about other DVR services. The coding categories and the number of comments for other DVR services are: assessment (n=1), benefits counseling (n=2), counselor support (n=5), dental (n=2), employment (n=1), financial assistance (n=5), health care (n=1), interpreter (n=1), job coaching (n=4), job fair (n=1), medical (n=1), referral (n=11), resume (n=2), school (n=19), self employment (n=4), special equipment (n=4), ticket to work (n=1), transportation (n=6), and vocational training (n=1).

Staff responses

Most of the staff comments about other DVR services they provided to consumers for employment or independence had to do with providing referrals and information (n=5) or coordinating services for consumers (n=4). Vocational counseling and mental health counseling were mentioned by three counselors (each). Advocacy, case management and providing clothing were commented on by two staff members (for each category). The following were mentioned by one staff member: business plan, childcare, transportation and housing.

Services Needed Not Currently Funded or Offered by DVR

Consumer responses

Consumers were also asked if they need other services not offered by DVR. Comments were written by 109 consumers, 72 of those comments were coded into categories. The categories and number of comments are listed below. Some comments were coded into more than one category because there are multiple issues raised in the comments.

Category	Number of responses
ASL interpreter	1
Computer training	2
Counseling	2
Employer incentives	1
Employment	12
Equipment	112
Financial	3
Home services	1
Housing support	1
Job coach	5
Medical	3
Mental health	2
Other comments	5
School	12
Self-employment	10
Transportation	6
Vocational counseling	2
Vocational training	3

Staff responses

The most frequent comment by staff about additional services not currently offered by DVR had to do with offering specialized services. Staff indicated the need for specialized services for the deaf (n=3), including medical services, independent living services, and job development services. Other specialized services mentioned were for memory and cognitive therapy (n=1), consumer basic needs (n=1), TBI (n=1), and support for consumers who are blind and developmentally delayed (n=1). Other staff commented on employment (n=7). The comments included are:

- Paid work experiences.
- Improved job placement services by professionals who are held accountable for 26 production and not just private vendors out to make money.
- Work Experience Training.
- Paid work experience.
- Open Work Experience programs similar to Transitional employment for Clubhouses.
- Long term Follow Along Support.
- Different types of work adjustment outside of Bayaud.

The other comments reflected the need for housing assistance or help with housing costs (n=3), medical services such as surgery, treatment, and access to medications (n=5). Other miscellaneous comments included legal advice, disability adjustment, rehabilitation engineering, how to find resources, and transportation in rural areas. In addition, included in some of the comments (n=3) staff indicated the need for DVR to provide the service and control the quality of the service, not to have a vendor provide the service.

Vendor responses

Only six vendors commented on additional services needed that are not currently funded by DVR they were:

- Group support services.
- Help clients create resumes and other job-related paperwork.
- On-going PASS monitoring/tutoring.
- Personal hygiene needs.
- Independent skills specific to attending work promptly.
- Psychotherapy?
- Resume writing/ interview skills.

SATISFACTION WITH WORKING WITH DVR

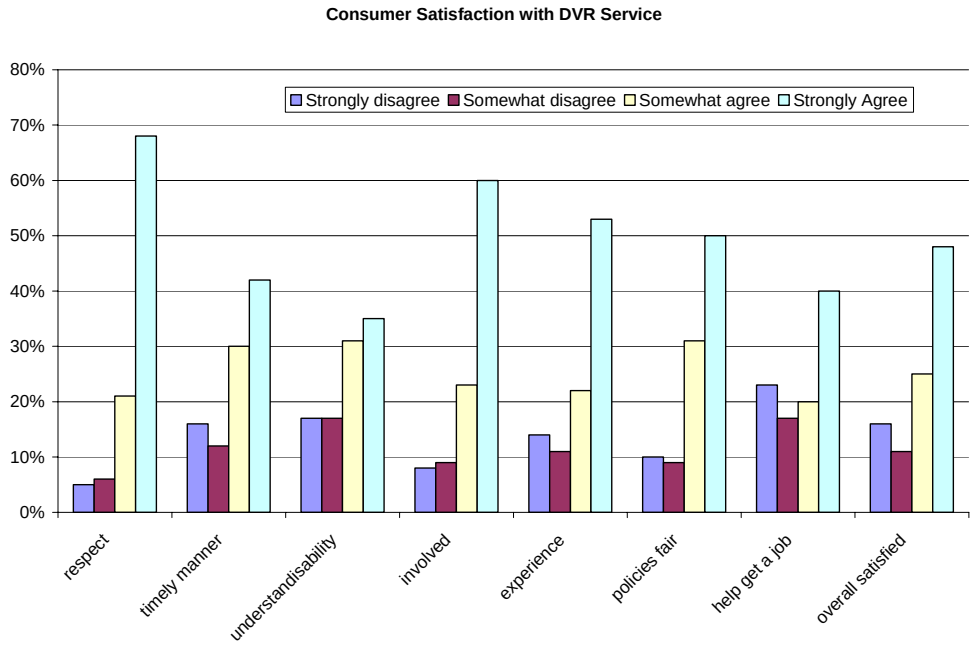
Consumer Satisfaction

Consumers rated their satisfaction with eight aspects of DVR services on a four-point scale including strongly agree, somewhat agree, somewhat disagree and strongly disagree. The data for these questions are presented in Table 20 (in Appendix B) and in Figure 21 (below).

The majority of consumers (68%) strongly agreed with the statement: *The VR staff treated me with respect and courtesy.* There was also strong agreement with the statement: *I was involved in making choices about my goals and services*, 60%. About half of the consumers strongly agreed with the following statements: *My experience with VR was good and I would recommend it to others*, 53%; and *VR policies were fair*, 50%.

Quite a few consumers (40%) disagreed or strongly disagreed with the statement: *VR Services have helped or will help me get a job*. In addition, 34% of consumers (n=82) disagreed or strongly disagreed with the statement: *My counselor helped me to understand my disability and how it might affect my future work*. There was somewhat mixed response to the statement: *Overall, I am satisfied with the services I received from DVR*, as 27% strongly disagreed (n=40) or disagreed (n=26) with the statement and 73% agreed (n=60) or strongly agreed (n=119).

Figure 21



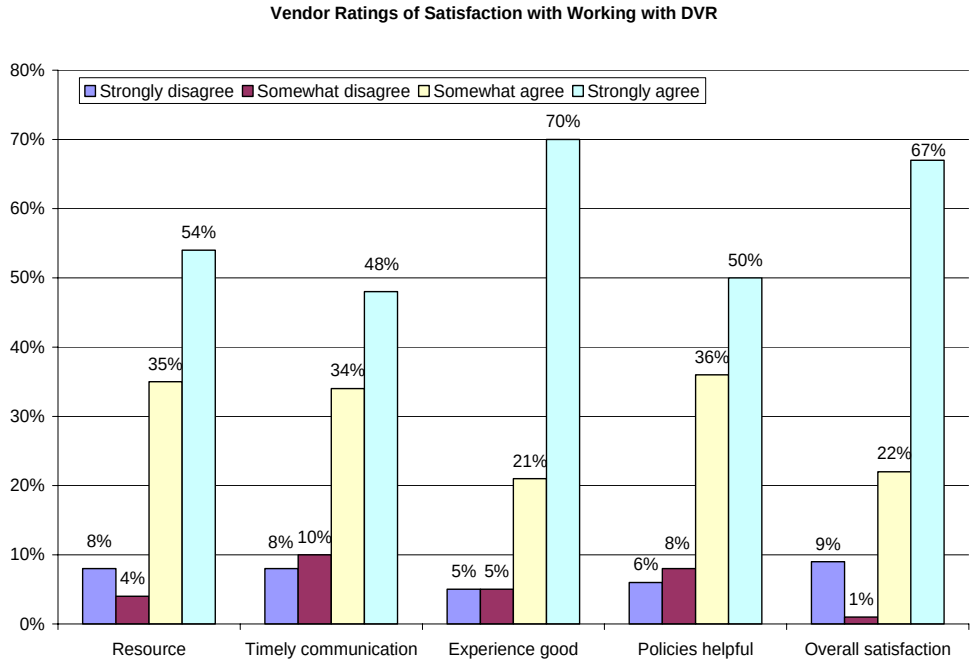
Vendor Satisfaction with Working with DVR

Vendors rated their satisfaction with working with DVR by indicating their level of agreement with five statements on a four point scale with strongly disagree, somewhat disagree, somewhat agree and strongly agree. These statements were:

- Overall, the VR staff were a resource for me.
- Overall, VR staff communicated in a timely manner.
- My experience working with VR was good.
- VR policies are helpful for providing services for consumers.
- Overall, I am satisfied with the relationship I have with DVR.

Information from these questions is presented in Table 21 (in Appendix B). Below, Figure 22 shows the percentage of vendor agreement with each of the statements. For these questions, all vendor responses were used (as opposed to only those who indicated they worked directly with consumers).

Figure 22



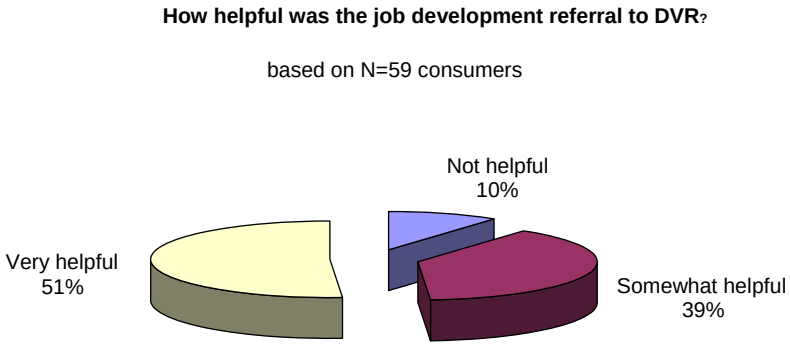
REFERRALS

Job Development Referral

There were 73 consumers (27% of 269 consumers) who indicated that they had received a referral to DVR for job development, while 153 consumers (57% of consumers) indicated they had not received such a referral. 43 consumers (15%) did not answer this question.

Consumers who received the referral rated the helpfulness of the referral, with 10% (n=6) rating it as not helpful, 39% (n=23) rating it as somewhat helpful, and 51% (n=30) rating it as very helpful. Fourteen consumers who said they received this type of referral did not rate how helpful the referral was. Percentages are based on the 59 consumers who responded to both items, as displayed in Figure 23.

Figure 23

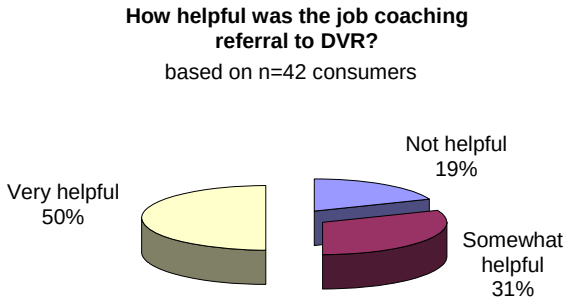


Job Coaching Referral

There were 51 consumers (19% of 269 consumers) who indicated that they had received a referral to DVR for job coaching, while 169 consumers (63% of consumers) indicated they had not received such a referral. 49 consumers (18%) did not answer this question.

Consumers who received the referral rated the helpfulness of the referral, with 19% (n=8) rating it as not helpful, 31% (n=13) rating it as somewhat helpful, and 50% (n=21) rating it as very helpful. Nine consumers who said they received this type of referral did not rate how helpful the referral was. Percentages are based on the 42 consumers who responded to both items, as displayed in Figure 24.

Figure 24



Knowledge and Skills

Vendors were asked to rate their knowledge of other agencies or systems that are resources for DVR consumers and their knowledge and skill for working with DVR consumers. Staff were asked to rate their knowledge and skill for working with consumers. The response scale was poor, fair, adequate, good or excellent for the three questions.

Vendors Knowledge and Skill

Vendors were asked, “In general, how do you rate your knowledge of other agencies or systems that are resources for DVR consumers?,” “In general, how would you rate your knowledge for working with DVR consumers?” and “In general, how do you rate your skill for working with DVR consumers?” The response categories for each of these questions were poor, fair, adequate, good and excellent. The responses in this section are only from the vendors (n=100) who indicated that they worked with DVR consumers.

Vendors rated their knowledge of other agencies and systems as poor (19%, n=14), fair (26%; n=19), adequate (24%; n=18), good (26%; n=19%), or excellent (5%, n=4). Twenty-six vendors (26%) did not answer this question.

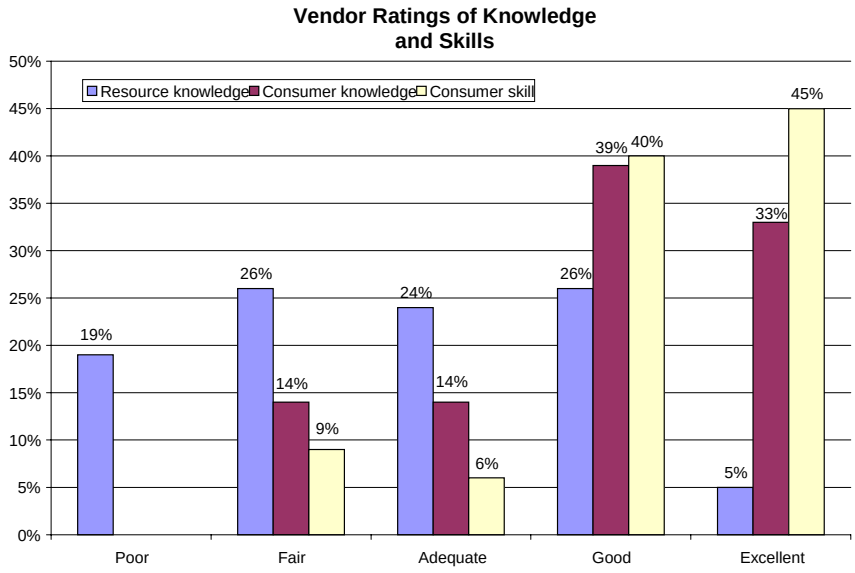
Most vendors rated their knowledge for working with DVR consumers as good (39%; n=30) or excellent (33%; n=26). Almost a third (28%) of vendors rated their knowledge of working with

consumers as fair (14%; n=11) or adequate (14%; n=11). No vendors indicated their knowledge was poor. Twenty-two vendors (22%) did not answer this question.

Most vendors rated their skill for working with DVR consumers as good (40%; n=31) or excellent (45%; n=35). About 15% of vendors rated their skill as fair (9%; n=7) or adequate (6%; n=5). No vendors indicated their skill was poor. Twenty-two vendors (22%) did not answer this question.

Figure 25 displays the percentages for each of these questions.

Figure 25

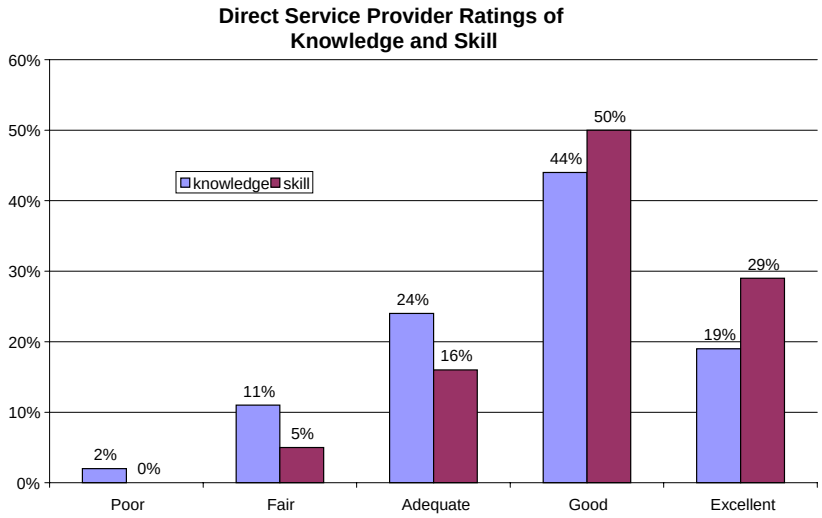


Direct Service Provider Knowledge and Skill

Staff were asked, "In general, how do you rate your knowledge of other agencies and systems that are resources for DVR consumers?" Choice categories included poor, fair, adequate, good and excellent. The majority of direct service providers (DSPs) rated their knowledge of other agencies and systems as good (44%; n=27) or excellent (19%; n=12). Twenty DSPs (24% of DSPs) did not answer this question. For those DSPs who did answer the question, Figure 26 shows the responses for each category.

Staff were also asked, "In general, how do you rate your skill for working with other agencies and systems that are resources for DVR consumers?" Choice categories included poor, fair, adequate, good and excellent. The majority of direct service providers (DSPs) rated their knowledge of other agencies and systems as good (50%; n=31) or excellent (29%; n=18). Twenty DSPs (24% of DSPs) did not answer this question. For those DSPs who did answer the question, Figure 26 shows the responses for each category.

Figure 26



HOW DVR CAN IMPROVE SERVICES FOR CONSUMERS

Staff and vendors were asked to comment on how DVR can improve services related to disabilities faced by the DVR consumers you provided services to in the past six months.

Staff Response

In general staff indicated a need to streamline processes and systems to provide services to consumers more efficiently and effectively. This includes suggestions including: increasing the efficiency for getting vendors into the system, reducing paperwork, improving data management, and increasing administrative support for counselors. Many staff members commented on the need for additional staff to provide direct services to consumers, the case loads for counselors are too high to provide quality services. Many staff members suggested the need for increasing the number of specialized services offered directly by DVR and decreasing the number of vendors. Other comments, suggested increasing the need for credentials or other screening mechanisms to improve vendor's ability to serve DVR clients well. Staff also indicated a need for more resources for a variety of things such as housing, transportation, information, training for consumers, placement specialists, mental health treatment, resources for the deaf, adaptive technology, and assessment and evaluation.

Vendor Response

The most frequent issue identified by vendors was the need to improve the efficiency of providing services and communicating with DVR counselors and billing staff. They also mentioned the need to improve consumer's understanding of the role of the vendor and DVR and clarify the relationship.

Anything Else DVR Should Know for Setting Goals and Priorities for Improving Services

Staff and vendors were asked if there is anything else that DVR should know for setting goals and priorities for improving services.

Vendor Response

Comments from vendors primarily focused on the need to have clear and consistent information from counselors about DVR policies and procedures and a better understanding by DVR counselors about the system the vendor is in or vendor practice and expertise. In addition, many vendors commented on the need to decrease counselors case loads so that they can better serve clients and work with vendors. Four vendors offered compliments about their experience working with DVR.

Standardize Practice

- It would be helpful for all counselors to maintain similar standards in administering/approving VR services. I realize each counselor has some autonomy and ability to navigate the "gray areas" of VR policies and fee schedules, but it is very frustrating to get contradicting answers, directions, etc. from counselors. Communication is also a huge issue with some counselors. While some counselors in our local office and in the pilot program are excellent in maintaining communication with us as a vendor, a few others are nearly impossible to pin down and receive feedback, communication, authorizations, etc. from. Inconsistency is frustrating and leads to distrust of the VR system and counselors by vendors.

- Create clarity and consistency among counselors for defining what and when job placement occurs. Some counselors believe initial placement occurs the moment work starts, others wait a week or two, and still others wait for the 90 day closure before paying the initial placement. The inconsistency makes it difficult to plan ahead financially for many vendors.

- DVR counselors could be more helpful in regards to the rules and expectations that they require from vendors. They tend to tell us their requirements of us as problems arise instead of being proactive up front and laying out expectations ahead of the job.

- Increased consistency among DVR counselors in how they do authorizations.

Better Understanding of Vendor Systems, Vendor Expertise and Practices

- Have your staff take the time to understand the Services that my firm can supply as a DVR Vendor

- As an educational institution, we are required by our state to have tuition collected by census date. Many times, we've have had students come unprepared to pay and telling us that DVR will pay. It would be good for VR counselors to make themselves aware of deadlines, etc for the school.

Staff Response

Forty-four staff members made comments; three were split into two topics for a total of 47 comments coded into nine categories:

Category for Improvement	Number Of Comments
Case load	11
Staff support and recognition	8
Case management system	7
Professional development	5
Policy and procedures	4
Specialized services	4
Vendors	4
Decrease paperwork	2
Leadership	2

The topic most frequently mentioned was the case loads that counselors are carrying. Several supervisors and counselors identified the need to decrease counselor case loads "to deliver a more effective service to the client". Many commented on the combination of factors including the need to decrease the client case load, to improve the case management system and decrease the amount of paperwork required. Eleven staff members specifically mentioned the need to decrease the case load and 7 mentioned the need for an automated case management system.

- "We really need an electronic case management system. This would benefit supervisors, counselors and admin assistants." (Sup I/II).

- "One of the biggest priorities needs to be the development and use of an Automate Case Management System for Vocational Rehabilitation." (Administration/Management)

Another topic mentioned by 8 staff members if the need for staff support and recognition. Some of the comments focused on providing staff with the resources they need to get their job done while others brought up the need for recognizing accomplishments and developing incentives to help with staff retention.

- "Supporting employees, recognizing accomplishments, setting realistic employee expectations, and creating a positive work place with employee incentives will result in improved services to consumers." (Counselor I/II)

- "Try to retain good VR Counselors by providing more incentives for them to be here." (Counselor I/II)

- "If you don't recognize and reward your staff for work well done, you will get diminishing results." (Counselor I/II)

- "More room for growth and promotion, adding increased pay to specialty case load …" (Counselor I/II)

Along with support and recognition for staff, need for professional development was identified by 5 staff members. Some of the comments suggested improving supervisor support for staff and giving counselors tools they need to provide quality services.

- [Give] “the counselor the tools necessary to do an effective and efficient job in providing quality services for each and every client.” (Counselor I/II)

- Continue to assess the training needs of counselors – even veteran counselors can use to refresh their skills and knowledge. (Counselor I/II)

Staff also said there is a need for more vendors and increasing efficiency for vendors working with DVR.

Finally, there were two comments on leadership that focused on increasing creativity and not doing things the way it has always been done, and restructuring DVR management.

ATTACHMENT 4.11 (a) Appendix A

Results of Comprehensive Statewide Assessment
of the Rehabilitation Needs of Individuals with Disabilities

FY 2009

Appendix A - Surveys

Vocational Rehabilitation Consumer Needs Assessment

The Division of Vocational Rehabilitation (DVR) wants to know if the services you've received have helped you. DVR's services may have helped with employment or independence, depending on your own personal goals.

Colorado WIN Partners has been given the job of collecting your opinions. What you tell us can help DVR make their services better for you and for others. For example, in the last survey, DVR learned how to improve job development and job coaching services. DVR was able to start some new programs because of the help of people like you. So, your opinions matter and really do help DVR and all the people DVR serves.

When we (Colorado WIN Partners) get your answers, we will combine your answers with all the other answers we get. Once we hear from enough people, we will give DVR a report. Because your answers are mixed in with other people's answers, DVR will not be able to tell what *you* actually said. You are safe to say what you truly think and feel about DVR's services. In fact, your honesty will help DVR plan for even better services in the future. Thanks in advance for your help.

1. **How did you first hear about DVR?**
   Please check the box next to the resource that told you about DVR.
   - ☐ Doctor or health care provider
   - ☐ Friend or family
   - ☐ School staff / counselor
   - ☐ Internet
   - ☐ Brochure
   - ☐ Magazine, newspaper, bus or light rail advertisement, etc.
   - ☐ Another agency told me about DVR
   - ☐ Another agency referred me to DVR
   - ☐ Other (please specify):

2. **What is your main disability?**
   Please check the disability that makes it hardest for you to maintain employment or independence (choose only one):

☐ Visual	☐ Developmental	☐ Orthopedic
☐ Deaf or Hard of Hearing	☐ Mental and Emotional	☐ Traumatic Brain Injury
☐ Cognitive Impairment	☐ Other (please specify): _____	

3. **Do you have other disabilities too?**
   Please check any other disabilities that make it hard for you to maintain employment or independence (check all that apply).

☐ Visual ☐ Developmental ☐ Orthopedic

☐ Deaf or Hard of Hearing ☐ Mental and Emotional ☐ Traumatic Brain Injury

☐ Cognitive Impairment ☐ Other (please specify): _____

4. **Please grade the DVR services below:**
Remember these services would have been provided to help with either employment or independence.

DVR Service	Your need for this service:				Did you receive this service?		How helpful was this service?		
	None	Low	Medium	High	Yes	No	Very helpful	Somewhat helpful	Not helpful
Learning how your disability could affect your ability to work	☐	☐	☐	☐	☐	☐	☐	☐	☐
Learning about specialized equipment for your disability (i.e.; screen reader, adaptive devices, video phone)	☐	☐	☐	☐	☐	☐	☐	☐	☐
Getting specialized equipment for your disability	☐	☐	☐	☐	☐	☐	☐	☐	☐
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	☐	☐	☐	☐	☐	☐	☐	☐	☐
Medical services that helped you with employment or independence. (i.e.; medical help that corrected or improved your disability)	☐	☐	☐	☐	☐	☐	☐	☐	☐
Employment counseling or some guidance about working	☐	☐	☐	☐	☐	☐	☐	☐	☐
Self-employment information	☐	☐	☐	☐	☐	☐	☐	☐	☐
Transportation to and from work	☐	☐	☐	☐	☐	☐	☐	☐	☐
Educational services or assistance with education	☐	☐	☐	☐	☐	☐	☐	☐	☐
Vocational training	☐	☐	☐	☐	☐	☐	☐	☐	☐
Help performing activities of daily living	☐	☐	☐	☐	☐	☐	☐	☐	☐

DVR Service	Your need for this service:				Did you receive this service?		How helpful was this service?		
	None	Low	Medium	High	Yes	No	Very helpful	Somewhat helpful	Not helpful
Help reading written material	☐	☐	☐	☐	☐	☐	☐	☐	☐
Interpreter services if you speak a language, other than English, as your primary communication.	☐	☐	☐	☐	☐	☐	☐	☐	☐
Assistance with your job search	☐	☐	☐	☐	☐	☐	☐	☐	☐
Homemaker services	☐	☐	☐	☐	☐	☐	☐	☐	☐
Job coaching (from a job coach) at a job site	☐	☐	☐	☐	☐	☐	☐	☐	☐
On-the-job training (from the employer) at a job site	☐	☐	☐	☐	☐	☐	☐	☐	☐
Referral to DVR for job development					☐	☐	☐	☐	☐
Referral to DVR for job coaching					☐	☐	☐	☐	☐
Any other services that helped you with employment or independence					☐	☐	☐	☐	☐

5. **Did you receive other services that helped you get or keep a job or become more independent?**
   Please list here other services you got that are not listed above.

6. **Do you need other services?**
Please list here any other services you need that are not listed above.

	Customer Satisfaction:	**Strongly Agree**	**Somewhat Agree**	**Somewhat Disagree**	**Strongly Disagree**
1.	The VR staff treated me with respect and courtesy	☐	☐	☐	☐
2.	Overall, my VR services were provided in a timely manner	☐	☐	☐	☐
3.	My counselor helped me to understand my disability and how it might affect my future work.	☐	☐	☐	☐
4.	I was involved in making choices about my goals and services	☐	☐	☐	☐
5.	My experience with VR was good and I would recommend it to others	☐	☐	☐	☐
6.	VR policies were fair.	☐	☐	☐	☐
7.	VR Services have helped or will help me get a job	☐	☐	☐	☐
8.	Overall, I am satisfied with the services I received from DVR	☐	☐	☐	☐

7. **Where is your DVR office located?**
Please check the area where you get DVR services (choose only one):

☐ Denver Metro ☐ Front Range (not Denver metro) ☐ Mountains

☐ Eastern Plains ☐ Western Slope

☐ Other (please specify): _____

8. **How old are you?** _____

9. **Please indicate your race and/or ethnic background.**
(check all that apply):

☐ Asian ☐ American Indian or Alaska Native ☐ Black or African American

☐ Hispanic ☐ Native Hawaiian or Pacific Islander ☐ White

☐ Other (please specify): _____

Employee Survey

We are excited about hearing from you! Your opinions are a critical contribution to the development of a successful strategic plan for DVR.

The survey should only take about 15 to 20 minutes to complete.

It will be available on-line until February 29, 2008. Please make the time to complete the survey before then.

You may start the survey and come back to finish it from the same computer. Click "exit survey" in the upper right corner of your computer screen. When you come back to the survey you will be able to continue where you left off. Once you complete the survey and click “DONE” at the end, you will not be able to enter the survey again from the same computer.

Your answers are completely confidential. No one from DVR will see your individual responses, as Colorado WIN Partners will be analyzing all completed surveys. Therefore, please be candid; your honesty will help DVR plan for even better services in the future.

Please don't feel like you must complete every question, we understand that some questions may not apply to your job. Again thank you in advance for contributing to this important project!

1. **Please estimate the percentage of your time during the past six months that was spent on direct consumer work and the percentage of your time on administrative work.** (Please use increments of 5, i.e., 15%, 35%, etc.).

_____% Direct consumer work _____% Administrative work
_____% Other, please specify

2. **Considering the time you spent doing administrative work during the past six months please estimate the percent (of your total work time) you worked in the following areas?**

	None	A little	Less than Half	About Half	More than Half	Most	All
Administration/Management	☐	☐	☐	☐	☐	☐	☐
Program Management	☐	☐	☐	☐	☐	☐	☐
Financial/Budget	☐	☐	☐	☐	☐	☐	☐
Training	☐	☐	☐	☐	☐	☐	☐
Supervision/HR functions	☐	☐	☐	☐	☐	☐	☐
Staff Mentoring/Consultation	☐	☐	☐	☐	☐	☐	☐
Community Consultation/Employer Outreach	☐	☐	☐	☐	☐	☐	☐
Contracts/Procurement/Purchasing	☐	☐	☐	☐	☐	☐	☐
General Administrative functions (i.e., reception, copying, faxing)	☐	☐	☐	☐	☐	☐	☐
Information Technology Support/Data Systems	☐	☐	☐	☐	☐	☐	☐
Research/Information Gathering	☐	☐	☐	☐	☐	☐	☐
Support for Boards/Committees	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐

Other (please specify):

3. Considering the time you spent directly working for individual consumers during the past six months please estimate the percent of your total work time, you worked in the following areas?

	None	A little	Less than Half	About Half	More than Half	Most	All
Application and Intake	☐	☐	☐	☐	☐	☐	☐
Evaluation and Diagnostic services	☐	☐	☐	☐	☐	☐	☐
Physical and mental restoration services	☐	☐	☐	☐	☐	☐	☐
Training services	☐	☐	☐	☐	☐	☐	☐
Specialized services for blind, deaf, and deaf-blind	☐	☐	☐	☐	☐	☐	☐
Assistive technology services	☐	☐	☐	☐	☐	☐	☐
Educational services	☐	☐	☐	☐	☐	☐	☐
Vocational counseling or guidance	☐	☐	☐	☐	☐	☐	☐
Placement services	☐	☐	☐	☐	☐	☐	☐
Supportive services	☐	☐	☐	☐	☐	☐	☐
Post employment services	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐

Other (please specify): _____

4. Please estimate (over the past six months) how many consumers in your caseload have the following disabilities. (If consumers have multiple disabilities, please count the disability that makes it hardest to maintain employment or independence.)

	None	A little	Less than Half	About Half	More than Half	Most	All
Visual	☐	☐	☐	☐	☐	☐	☐
Developmental	☐	☐	☐	☐	☐	☐	☐
Orthopedic	☐	☐	☐	☐	☐	☐	☐
Deaf or hard of hearing	☐	☐	☐	☐	☐	☐	☐
Mental and Emotional	☐	☐	☐	☐	☐	☐	☐
Traumatic Brain Injury	☐	☐	☐	☐	☐	☐	☐
Cognitive Impairment	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐

Other (please specify): _____

5. **As you are completing the following information, please consider the services in the context of employment and/or independence.**

   Hint: it may be easier to answer question 5 using the tab and arrow keys rather than the mouse.

   Estimate the number of consumers you worked with in the last six months:

Vocational Rehabilitation Services	a. Who had a moderate to high need for this service. b. Whose need was adequately or completely met by this service. (*both questions were asked separately)*							Please indicate whether DVR or you provided the service.		
	None	A little	Less than Half	About Half	More than Half	Most	All	DVR	Vendor	Both
Learning how their disability could affect their ability to work	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Evaluation and diagnostic services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Learning about specialized equipment for their disability (i.e., screen reader, adaptive devices, video phone)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Getting specialized equipment for their disability (i.e., screen reader, adaptive devices, video phone)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Restorative Services (i.e., hearing aids, glasses, mental health services)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Medical Services that helped with employment or independence (i.e., medical help that corrected or improved their disability)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Employment counseling or some guidance about working	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Job coaching at a job site	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

On-the-job training (as an employer)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Learning job seeking skills	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Assistance with job search	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Vocational training	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Self-employment information	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Placement Services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Transportation to and from work	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Educational services or assistance with education	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Help performing activities of daily living	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Help reading written material	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Interpreter services if their primary communication is a language other than English	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Specialized services for blind, deaf, and deaf-blind	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Personal assistance services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Post-employment services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

6. Are there other services (not listed in question 5) that you have provided to DVR consumers that have been helpful for employment or independence? *Response Required

☐ Yes ☐ No

7. Briefly describe an "other" service that you provided to DVR consumers. If there is more than one service you will be prompted to identify up to 3 services. *Response Required

7a. What is the level of need for the service you described?

☐ Low ☐ Medium ☐ High

7b. Was the need adequately met by the service?

☐ Not at all ☐ Somewhat ☐ Completely

8, 9 were repeats of # 7.

10. Are there other services needed by consumers that DVR does not currently provide? *Response Required

☐ Yes ☐ No

11. Briefly describe a service needed by consumers that is not provided by DVR. If there is more than one service you will be prompted to identify up to 3 services. *Response Required

11a. What is the level of need for the service you described?

☐ Low ☐ Medium ☐ High

12, 13 were repeats of #11.

14. Please tell us how VR can improve services related to disabilities faced by the consumers you provided services to in the past six months.

15. In general, how do you rate your knowledge of other agencies and systems that are resources for DVR consumers?

☐ poor ☐ fair ☐ adequate ☐ good ☐ excellent

16. In general, how do you rate your ability to work with other agencies and systems that are resources for DVR consumers?

☐ poor ☐ fair ☐ adequate ☐ good ☐ excellent

17. Is the new Medicaid waiver change affecting your workload? *Response Required

☐ **Yes** ☐ **No**

If yes, please briefly describe how it has changed.

18. In the past year have you noticed any changes in the amount of paperwork required for you to provide services for consumers? *Response Required

☐ **Yes** ☐ **No**

18a. Please rate the level of improvement you have noticed in the reduction of paperwork required for you to provide services for DVR customers.

☐	☐	☐	☐
Tremendous Improvement	Good Improvement	Some Improvement	Very Little Improvement

19. Please tell us anything else you think we should know for setting goals and priorities for improving services.

Demographic Information

20. What is your position at DVR? (please check one)

☐ Sup I/II ☐ Counselor I/II ☐ Administration/Management
☐ Administrative staff ☐ DPN ☐ Business Outreach Specialist
☐ Professional Staff ☐ Contractor ☐ Teacher
☐ Other (please specify)_____

21. Where is your DVR office located?
Please check the area where you provide DVR services (choose only one):

☐ Denver Metro ☐ Front Range (not Denver metro) ☐ Mountains
☐ Eastern Plains ☐ Western Slope
☐ Other (please specify): _____

22. Please estimate the percentage of consumers you served in the past six months who fit into each of the following age categories.

	None	A little	Less than Half	About Half	More than Half	Most	All
Less than 21	☐	☐	☐	☐	☐	☐	☐
21 to 64	☐	☐	☐	☐	☐	☐	☐
65 or over	☐	☐	☐	☐	☐	☐	☐

23. Please estimate the percentage of the consumers that you serve in each of the following racial and/or ethnic background categories.

	None	A little	Less than Half	About Half	More than Half	Most	All
Asian	☐	☐	☐	☐	☐	☐	☐
American Indian or Alaska Native	☐	☐	☐	☐	☐	☐	☐
Black or African American	☐	☐	☐	☐	☐	☐	☐

Hispanic	☐	☐	☐	☐	☐	☐	☐
Native Hawaiian or Pacific Islander	☐	☐	☐	☐	☐	☐	☐
White	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐

Vendor Survey

We are excited about hearing from you! Your opinions are a critical contribution to the development of a successful strategic plan for DVR.

The survey should only take about 15 to 20 minutes to complete.

It will be available on-line. Please make the time to complete the survey before then.

You may start the survey and come back to finish it from the same computer. Click "exit survey" in the upper right corner of your computer screen. When you come back to the survey you will be able to continue where you left off. Once you complete the survey and click "DONE" at the end, you will not be able to enter the survey again from the same computer.

Your answers are completely confidential. No one from DVR will see your individual responses, as Colorado WIN Partners will be analyzing all completed surveys. Therefore, please be candid; your honesty will help DVR plan for even better services in the future.

Please don't feel like you must complete every question, we understand that some questions may not apply to your job. Again thank you in advance for contributing to this important project!

1. **What type of agency do you work for? (please select one)**
   ***Response Required**

   ☐ Community Rehabilitation Program ☐ Health Organization ☐ Educational Institution
   ☐ Community Centered Board ☐ Advocacy Organization ☐ Workforce Center
   ☐ Mental Health Center ☐ Independent Living Center ☐ Self-employed or Independent Contractor
   ☐ Other (please specify): _____

2. **What percentage of your time in the past year was spent providing the following types of service for DVR consumers?**

	0	1-20%	21-40%	41-60%	61-80%	81-99%	100%
Application and Intake	☐	☐	☐	☐	☐	☐	☐
Evaluation and Diagnostic Services	☐	☐	☐	☐	☐	☐	☐
Physical and Mental Restoration services	☐	☐	☐	☐	☐	☐	☐
Training Services	☐	☐	☐	☐	☐	☐	☐
Specialized Services for Blind, Deaf and Deaf-Blind	☐	☐	☐	☐	☐	☐	☐

Assistive Technology Services	☐	☐	☐	☐	☐	☐	☐
Educational services	☐	☐	☐	☐	☐	☐	☐
Vocational counseling or guidance	☐	☐	☐	☐	☐	☐	☐
Placement Services	☐	☐	☐	☐	☐	☐	☐
Supportive Services	☐	☐	☐	☐	☐	☐	☐
Post-employment Services	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐

(please specify): _____

3. What percentage of your clients do you provide services for as a DVR vendor?

0	1-20%	21-40%	41-60%	61-80%	81-99%	100%
☐	☐	☐	☐	☐	☐	☐

4. Please estimate the percentage of DVR consumers that you serve with the following disability. If consumers have multiple disabilities, please count the disability that makes it hardest to maintain employment or independence.

	0	1-20%	21-40%	41-60%	61-80%	81-99%	100%
Visual	☐	☐	☐	☐	☐	☐	☐
Developmental	☐	☐	☐	☐	☐	☐	☐
Orthopedic	☐	☐	☐	☐	☐	☐	☐
Deaf or Hard of Hearing	☐	☐	☐	☐	☐	☐	☐
Mental and Emotional	☐	☐	☐	☐	☐	☐	☐
Traumatic Brain Injury	☐	☐	☐	☐	☐	☐	☐
Cognitive Impairment	☐	☐	☐	☐	☐	☐	☐

5. As you are completing the following information, please consider the services in the context of employment and/or independence.

Hint: it may be easier to answer the questions using the tab and arrow keys rather than the mouse.

Estimate the percentage of consumers you worked with in the last six months:

Vocational Rehabilitation Services	b. Who had a moderate to high need for this service. b. Whose need was adequately or completely met by this service. (*both questions were asked separately)*							Please indicate whether DVR or you provided the service.		
	0	1-20%	21-40%	41-60%	61-80%	81-99%	100%	DVR	Vendor	Both
Learning how their disability could affect their ability to work	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Learning about specialized equipment for their disability (i.e., screen reader, adaptive devices, video phone)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Getting specialized equipment for their disability (i.e., screen reader, adaptive devices, video phone)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Restorative Services (i.e., hearing aids, glasses, mental health services)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Medical Services that helped with employment or independence (i.e., medical help that corrected or improved their disability)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Employment counseling or some guidance about working	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Job coaching at a job site	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

On-the-job training (as an employer)	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Learning job seeking skills	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Vocational training	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Self-employment information	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Placement Services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Transportation to and from work	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Educational services or assistance with education	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Help performing activities of daily living	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Help reading written material	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Interpreter services if their primary communication is a language other than English	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Specialized services for blind, deaf, and deaf-blind	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Personal assistance services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
Post-employment services	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

6. **Are there other services (not listed in question 5) that you have provided to DVR consumers that have been helpful for employment or independence? *Response Required**

   ☐ Yes ☐ No

7. **Briefly describe an "other service that you provided to DVR consumers. If there is more than one service you will be prompted to identify up to 3 services. *Response Required**

7a. What is the level of need for the service you described?

☐ Low ☐ Medium ☐ High

7b. Was the need adequately met by the service?

☐ Not at all ☐ Somewhat ☐ Completely

8, 9 were repeats of # 7.

10. Are there other services needed by consumers, that you could provide, but currently are not funded by DVR? Please keep in mind we are interested in services to support independence and/or employment. *Response Required

☐ Yes ☐ No

11. Briefly describe a service needed by consumers that is not funded by DVR. If there is more than one service you will be prompted to identify up to 3 services. *Response Required

11a. What is the level of need for the service you described?

☐ Low ☐ Medium ☐ High

12, 13 were repeats of #11.

14. Were the DVR clients that you served in the past six months prepared or ready for you to provide services for them? Please estimate the percentage of VDR clients who fit into each level of readiness.

	0	1-20%	21-40%	41-60%	61-80%	81-99%	100%
Very Prepared	☐	☐	☐	☐	☐	☐	☐
Somewhat Prepared	☐	☐	☐	☐	☐	☐	☐
Somewhat unprepared	☐	☐	☐	☐	☐	☐	☐
Not Prepared	☐	☐	☐	☐	☐	☐	☐

15. Please tell us how DVR can improve services related disabilities faced by DVR consumers you provided services to in the past six months.

16. How do you rate your knowledge of other agencies or systems that are resources for DVR consumers?

☐ poor ☐ fair ☐ adequate ☐ good ☐ excellent

17. In general, how do you rate your knowledge for working with DVR consumers?

☐ poor ☐ fair ☐ adequate ☐ good ☐ excellent

18. In general, how do you rate your skill for working with DVR consumers?

☐ poor ☐ fair ☐ adequate ☐ good ☐ excellent

19. Please tell us how much you agree with the following statements regarding your satisfaction:

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
Overall, the VR staff were a resource for me.	☐	☐	☐	☐
Overall, VR staff communicated in a timely manner.	☐	☐	☐	☐
My experience working with VR was good.	☐	☐	☐	☐
VR policies are helpful for providing services for consumers.	☐	☐	☐	☐
Overall, I am satisfied with the relationship I have with DVR.	☐	☐	☐	☐

20. Is the new Medicaid waiver change affecting your work with DVR? *Response Required

☐ Yes ☐ No

If yes, please briefly describe how it has changed.

21. In the past year have you noticed any improvements in the amount of paperwork required for you to provide services for DVR customers? *Response Required

☐ Yes ☐ No

21a. Please rate the level of improvement you have noticed in the reduction of paperwork required for you to provide services for DVR customers.

☐ Tremendous Improvement ☐ Good Improvement ☐ Some Improvement ☐ Very Little Improvement

22. Please tell us anything else you think we should know for setting goals and priorities for services. *Response Required

Demographic Information

23. Please check the geographic area where you provide DVR services (choose only one):

☐ Denver Metro ☐ Front Range (not Denver metro) ☐ Mountains

☐ Eastern Plains ☐ Western Slope ☐ Other (please specify): _____

24. Please estimate the percentage of your clients in each of the following age categories.

	0	1-20%	21-40%	41-60%	61-80%	81-99%	100%
Less than 21	☐	☐	☐	☐	☐	☐	☐
21 to 64	☐	☐	☐	☐	☐	☐	☐
65 or over	☐	☐	☐	☐	☐	☐	☐

25. Please estimate the percentage of your clients who are from the following racial and/or ethnic backgrounds.

	0	1-20%	21-40%	41-60%	61-80%	81-99%	100%
Asian	☐	☐	☐	☐	☐	☐	☐
American Indian or Alaska Native	☐	☐	☐	☐	☐	☐	☐
Black or African American	☐	☐	☐	☐	☐	☐	☐
Hispanic	☐	☐	☐	☐	☐	☐	☐
Native Hawaiian or Pacific Islander	☐	☐	☐	☐	☐	☐	☐
White	☐	☐	☐	☐	☐	☐	☐
Other	☐	☐	☐	☐	☐	☐	☐

ATTACHMENT 4.11 (a) Appendix B - Data Tables

Results of Comprehensive Statewide Assessment
of the Rehabilitation Needs of Individuals with Disabilities

FY 2009

Appendix B
Data - Tables

A note about the tables
When there are two percentages listed, the first percentage is based on the number of individuals who completed the survey (including those individuals who did not answer that question). If there is a percentage in parenthesis, that percentage is based only on the number of people who answered that specific question.

Table 1: How Consumers First Heard About DVR

	Number of Consumers	***Percentage***
Doctor or health care provider	60	22% (23%)
Another agency referred me to DVR	41	15% (16%)
Family or friend	40	15% (15%)
Another agency told me about DVR	39	15% (15%)
School staff/counselor	23	9% (9%)
Magazine, newspaper, bus or light rail advertisement, etc.	3	1% (1%)
Brochure	3	1% (1%)
Internet	2	1% (1%)
Other	51	19% (20%)
No answer	7	3%

Table 2: Types of Disabilities Served by Direct Service Providers (DSPs) and Vendors

Type of Disability	*Rater*	*None*	*A few*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Orthopedic	DSPs	**n=6 7% (9%)**	**n=25 31% (36%)**	**n=22 27% (32%)**	**n=10 12% (15%)**	**n=3 4% (4%)**	**n=3 4% (4%)**	n=0
	Vendors	n=33 33% (56%)	n=19 19% (32%)	n=1 1% (2%)	n=1 1% (2%)	n=3 3% (5%)	n=0	n=2 2% (3%)
Mental and Emotional	DSPs	**n=2 2% (3%)**	**n=7 9% (10%)**	**n=13 16% (19%)**	**n=14 17% (20%)**	**n=18 22% (26%)**	**n=13 16% (19%)**	**n=3 4% (4%)**
	Vendors	n=21 21% (30%)	n=28 28% (39%)	n=9 9% (13%)	n=3 3% (4%)	n=4 4% (6%)	n=1 1% (1%)	n=5 5% (7%)
Deaf or Hard of Hearing	DSPs	n=12 15% (17%)	n=43 52% (62%)	n=8 10% (12%)	n=1 1% (1%)	n=1 1% (1%)	n=2 2% (3%)	n=2 2% (3%)
	Vendors	n=26 26% (43%)	n=27 27% (44%)	n=1 1% (2%)	n=1 1% (2%)	n=0 0% (0%)	n=3 3% (5%)	n=3 3% (5%)
Visual	DSPs	n=16 20% (23%)	n=42 51% (60%)	n=4 5% (6%)	n=0	n=0	n=2 2% (3%)	n=6 7% (9%)
	Vendors	n=28 28% (50%)	n=26 26% (46%)	n=0	n=0	n=2 2% (4%)	n=0	n=0
Traumatic Brain Injury	DSPs	**n=5 6% (7%)**	**n=37 45% (53%)**	**n=16 20% (23%)**	**n=8 10% (11%)**	**n=3 4% (4%)**	**n=1 1% (1%)**	n=0
	Vendors	n=30 30% (46%)	n=25 25% (38%)	n=6 6% (9%)	n=2 2% (3%)	n=0	n=2 2% (3%)	n=1 1% (2%)
Developmental	DSPs	n=6 7% (9%)	n=29 35% (43%)	n=21 26% (31%)	n=4 5% (6%)	n=3 4% (4%)	n=2 2% (3%)	n=3 4% (4%)
	Vendors	n=29 29% (46%)	n=18 18% (29%)	n=5 5% (8%)	n=4 4% (6%)	n=1 1% (2%)	n=3 3% (5%)	n=3 3% (5%)
Cognitive	DSPs	**n=3 4% (4%)**	**n=13 16% (19%)**	**n=20 24% (29%)**	**n=13 16% (19%)**	**n=11 13% (16%)**	**n=6 7% (9%)**	**n=3 4% (4%)**
	Vendors	n=30 30% (48%)	n=17 17% (27%)	n=7 7% (11%)	n=3 3% (5%)	n=2 2% (3%)	n=2 2% (3%)	n=1 1% (2%)

Table 3: Geographic Location

	Consumers	***Staff***	***Vendors***
Denver Metro	n=99 37% (40%)	n=45 31% (51%)	n=38 31% (43%)
Front Range	n=79 29% (32%)	n=24 16% (27%)	n=26 21% (28%)
Western Slope	n=29 11% (12%)	n=8 5% (9%)	n=7 6% (8%)
Mountains	n=8 3% (3%)	n=5 3% (6%)	n=5 4% (6%)
Eastern Plains	n=11 4% (4%)	n=4 3% (5%)	n=4 3% (5%)
Other	n=23 9% (9%)	n=3 2% (3%)	n=9 8% (11%)
No answer	n=20 7%	n=58 40%	n=33 27%

Table 4: Direct Service Providers' Estimates of Consumer Race

Race	***None***	***A few***	***Less than half***	***About half***	***More than half***	***Most***	***All***
American Indian or Alaska Native	n=16 20% (29%)	n=38 46% (69%)	n=1 1% (2%)	n=0	n=0	n=0	n=0
Asian	n=18 22% (34%)	n=35 43% (66%)	n=0	n=0	n=0	n=0	n=0
Black	n=6 7% (10%)	n=36 44% (62%)	n=12 15% (21%)	n=2 2% (3%)	n=2 2% (3%)	n=0	n=0
Hispanic	n=0	n=23 28% (38%)	n=23 28% (38%)	n=9 11% (15%)	n=5 6% (8%)	n=0	n=0
Native Hawaiian or Pacific Islander	n=34 42% (69%)	n=15 18% (31%)	n=0	n=0	n=0	n=0	n=0
White	n=0	n=1 1% (2%)	n=7 9% (12%)	n=9 11% (15%)	n=22 27% (36%)	n=22 27% (36%)	n=0
Other Race	n=11 13% (65%)	n=5 6% (29%)	n=1 1% (6%)	n=0	n=0	n=0	n=0

Table 5: Staff: Administrative Work

Type of Work	*Raters*	*None*	*A little*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Administration/ Management	All Staff	n=51 35% (45%)	n=27 18% (24%)	n=14 10% (12%)	n=5 3% (4%)	n=4 3% (4%)	n=13 9% (11%)	n=0
	DSPs	n=33 40% (50%)	n=19 23% (29%)	n=8 10% (12%)	n=2 2% (3%)	n=2 2% (3%)	n=2 2% (3%)	n=0
	Non-DSPs	n=18 28% (38%)	n=8 12% (17%)	n=6 9% (13%)	n=3 5% (6%)	n=2 3% (4%)	n=11 17% (23%)	n=0
Program Management	All Staff	n=64 44% (56%)	n=15 10% (13%)	n=17 12% (15%)	n=7 5% (6%)	n=7 5% (6%)	n=5 3% (4%)	n=0
	DSPs	n=38 46% (57%)	n=9 11% (13%)	n=13 16% (19%)	n=2 2% (3%)	n=3 4% (5%)	n=2 2% (3%)	n=0
	Non-DSPs	n=26 40% (54%)	n=6 9% (13%)	n=4 6% (8%)	n=5 8% (10%)	n=4 6% (8%)	n=3 5% (6%)	n=0
Financial/ Budget	All Staff	n=54 37% (47%)	n=35 24% (31%)	n=18 12% (16%)	n=3 2% (3%)	n=3 2% (3%)	n=1 1% (1%)	n=0
	DSPs	n=34 42% (52%)	n=19 23% (29%)	n=9 11% (14%)	n=1 1% (2%)	n=2 2% (3%)	n=0	n=0
	Non-DSPs	n=20 31% (41%)	n=16 25% (33%)	n=9 14% (18%)	n=2 3% (4%)	n=1 2% (2%)	n=1 2% (2%)	n=0
Training	All Staff	n=20 14% (16%)	n=64 44% (51%)	n=26 18% (21%)	n=6 4% (5%)	n=5 3% (4%)	n=3 2% (2%)	n=2 1% (2%)
	DSPs	n=11 13% (15%)	n=38 46% (52%)	n=17 21% (23%)	n=4 5% (6%)	n=1 1% (1%)	n=1 1% (1%)	n=1 1% (1%)
	Non-DSPs	n=9 14% (17%)	n=26 40% (49%)	n=9 14% (17%)	n=2 3% (4%)	n=4 6% (8%)	n=2 3% (4%)	n=1 2% (2%)
Supervision/HR functions	All Staff	n=73 50% (65%)	n=21 14% (19%)	n=7 5% (6%)	n=0	n=7 5% (6%)	n=3 2% (3%)	n=1 1% (1%)
	DSPs	n=50 61% (81%)	n=11 13% (18%)	n=1 1% (2%)	n=0	n=0	n=0	n=0
	Non-DSPs	n=23 35% (46%)	n=10 15% (20%)	n=6 9% (12%)	n=0	n=7 11% (14%)	n=3 5% (6%)	n=1 2% (2%)

Table 5 continues on the next page

Table 5, continued

Type of Work	*Raters*	*None*	*A little*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Staff Mentoring/ Consultation	All Staff	n=29 20% (24%)	n=41 28% (34%)	n=35 24% (29%)	n=7 5% (6%)	n=6 4% (5%)	n=2 1% (2%)	n=0
	DSPs	n=13 16% (18%)	n=30 37% (42%)	n=23 28% (32%)	n=4 5% (6%)	n=2 2% (3%)	n=0	n=0
	Non-DSPs	n=16 25% (33%)	n=11 17% (23%)	n=12 19% (25%)	n=3 5% (6%)	n=4 6% (8%)	n=2 3% (4%)	n=0
Community Consultation/ Employer Outreach	All Staff	n=25 17% (21%)	n=57 39% (48%)	n=25 17% (21%)	n=8 5% (7%)	n=4 3% (3%)	n=1 1% (1%)	n=0
	DSPs	n=6 7% (8%)	n=41 50% (55%)	n=18 22% (24%)	n=6 7% (8%)	n=3 4% (4%)	n=0	n=0
	Non-DSPs	n=19 29% (41%)	n=16 25% (35%)	n=7 11% (15%)	n=2 3% (4%)	n=1 2% (2%)	n=1 2% (2%)	n=0
Contracts/ Procurement/ Purchasing	All Staff	n=49 33% (42%)	n=40 27% (34%)	n=23 16% (20%)	n=5 3% (4%)	n=0	n=0	n=0
	DSPs	n=34 42% (51%)	n=17 21% (25%)	n=13 16% (19%)	n=3 4% (5%)	n=0	n=0	n=0
	Non-DSPs	n=15 23% (30%)	n=23 35% (46%)	n=10 15% (19%)	n=2 3% (4%)	n=0	n=0	n=0
General Administrative functions (i.e., reception, copying, faxing)	All Staff	n=7 5% (6%)	n=56 38% (44%)	n=28 19% (22%)	n=13 9% (10%)	n=7 5% (6%)	n=12 8% (10%)	n=3 2% (2%)
	DSPs	n=2 2% (3%)	n=36 44% (49%)	n=18 22% (24%)	n=9 11% (12%)	n=4 5% (5%)	n=3 4% (4%)	n=2 2% (3%)
	Non-DSPs	n=5 8% (10%)	n=20 31% (39%)	n=10 15% (19%)	n=4 6% (8%)	n=3 5% (6%)	n=9 14% (17%)	n=1 2% (2%)
Information Technology Support/ Data Systems	All Staff	n=57 39% (50%)	n=30 20% (27%)	n=14 10% (12%)	n=8 5% (7%)	n=3 2% (3%)	n=1 1% (1%)	n=0
	DSPs	n=35 43% (55%)	n=16 20% (25%)	n=6 7% (9%)	n=6 7% (9%)	n=1 1% (2%)	n=0	n=0
	Non-DSPs	n=22 34% (45%)	n=14 22% (29%)	n=8 12% (16%)	n=2 3% (4%)	n=2 3% (4%)	n=1 2% (2%)	n=0

Table 5 continues on the next page

Table 5, continued

Type of Work	*Raters*	*None*	*A little*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Research/ Information Gathering	All Staff	n=14 10% (11%)	n=51 35% (41%)	n=37 25% (30%)	n=11 8% (9%)	n=6 4% (5%)	n=5 3% (4%)	n=0
	DSPs	n=9 11% (12%)	n=26 32% (36%)	n=25 31% (34%)	n=8 10% (11%)	n=3 4% (4%)	n=2 2% (3%)	n=0
	Non-DSPs	n=5 8% (10%)	n=25 39% (49%)	n=12 19% (24%)	n=3 5% (6%)	n=3 5% (6%)	n=3 5% (6%)	n=0
Support for Boards/ Committees	All Staff	n=36 25% (30%)	n=55 37% (46%)	n=20 14% (17%)	n=5 3% (4%)	n=3 2% (3%)	n=1 1% (1%)	n=0
	DSPs	n=14 17% (21%)	n=37 45% (54%)	n=12 15% (18%)	n=3 4% (4%)	n=2 2% (3%)	n=0	n=0
	Non-DSPs	n=22 34% (42%)	n=18 28% (35%)	n=8 12% (15%)	n=2 3% (4%)	n=1 2% (2%)	n=1 2% (2%)	n=0

Table 6: Staff: Working with Consumers

Type of Work	*Raters*	*None*	*A little*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Application and Intake	All Staff	n=31 21% (25%)	n=22 15% (18%)	n=38 26% (31%)	n=14 10% (11%)	n=10 7% (8%)	n=8 5% (7%)	n=0
	DSPs	n=6 7% (8%)	n=11 13% (15%)	n=33 40% (45%)	n=10 12% (14%)	n=7 9% (10%)	n=7 9% (10%)	n=0
	Non-DSPs	n=25 39% (51%)	n=11 17% (22%)	n=5 8% (10%)	n=4 6% (8%)	n=3 5% (6%)	n=1 2% (2%)	n=0
Evaluation and Diagnostic Services	All Staff	n=32 22% (26%)	n=19 13% (16%)	n=45 31% (37%)	n=11 8% (9%)	n=7 5% (6%)	n=7 5% (6%)	n=0
	DSPs	n=1 1% (1%)	n=10 12% (14%)	n=40 49% (56%)	n=10 12% (14%)	n=4 5% (6%)	n=7 9% (10%)	n=0
	Non-DSPs	n=31 48% (63%)	n=9 14% (18%)	n=5 8% (10%)	n=1 2% (2%)	n=3 5% (6%)	n=0	n=0
Physical and mental restoration services	All Staff	n=44 30% (36%)	n=38 26% (31%)	n=27 18% (22%)	n=7 5% (6%)	n=2 1% (2%)	n=3 2% (3%)	n=0
	DSPs	n=8 10% (11%)	n=31 38% (43%)	n=22 27% (30%)	n=7 9% (10%)	n=2 2% (3%)	n=3 4% (4%)	n=0
	Non-DSPs	n=36 55% (75%)	n=7 11% (15%)	n=5 8% (10%)	n=0	n=0	n=0	n=0
Training Services	All Staff	n=34 23% (29%)	n=37 25% (31%)	n=26 18% (22%)	n=10 7% (9%)	n=4 3% (3%)	n=6 4% (5%)	n=1 1% (1%)
	DSPs	n=4 5% (6%)	n=24 29% (34%)	n=23 28% (33%)	n=8 10% (11%)	n=4 5% (6%)	n=6 7% (9%)	n=1 1% (1%)
	Non-DSPs	n=30 46% (63%)	n=13 20% (27%)	n=3 5% (6%)	n=2 3% (4%)	n=0	n=0	n=0
Specialized services for the blind, deaf and deaf-blind	All Staff	n=61 42% (55%)	n=26 18% (23%)	n=9 6% (8%)	n=3 2% (3%)	n=3 2% (3%)	n=2 1% (2%)	n=7 5% (6%)
	DSPs	n=24 29% (38%)	n=19 23% (30%)	n=6 7% (10%)	n=3 4% (5%)	n=2 2% (3%)	n=2 2% (3%)	n=7 9% (11%)
	Non-DSPs	n=37 57% (77%)	n=7 11% (15%)	n=3 5% (6%)	n=0	n=1 2% (2%)	n=0	n=0

Table 6 continues on the next page

Table 6, continued

Type of Work	*Raters*	*None*	*A little*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Assistive technology services	All Staff	n=44 30% (37%)	n=53 36% (44%)	n=16 11% (13%)	n=3 2% (3%)	n=1 1% (1%)	n=2 1% (2%)	n=1 1% (1%)
	DSPs	n=13 16% (19%)	n=40 49% (57%)	n=10 12% (14%)	n=3 4% (4%)	n=1 1% (1%)	n=2 2% (3%)	n=1 1% (1%)
	Non-DSPs	n=31 48% (62%)	n=13 20% (26%)	n=6 9% (12%)	n=0	n=0	n=0	n=0
Educational services	All Staff	n=37 25% (31%)	n=39 27% (33%)	n=30 20% (25%)	n=7 5% (6%)	n=2 1% (2%)	n=2 1% (2%)	n=1 1% (1%)
	DSPs	n=6 7% (9%)	n=27 33% (39%)	n=25 31% (36%)	n=7 9% (10%)	n=2 2% (3%)	n=2 2% (3%)	n=1 1% (1%)
	Non-DSPs	n=31 48% (65%)	n=12 19% (25%)	n=5 8% (10%)	n=0	n=0	n=0	n=0
Vocational counseling or guidance	All Staff	n=33 22% (27%)	n=16 11% (13%)	n=18 12% (15%)	n=25 17% (20%)	n=16 11% (13%)	n=11 8% (9%)	n=4 3% (3%)
	DSPs	n=6 7% (8%)	n=5 6% (7%)	n=16 20% (22%)	n=19 23% (26%)	n=14 17% (19%)	n=9 11% (12%)	n=4 5% (6%)
	Non-DSPs	n=27 42% (54%)	n=11 17% (22%)	n=2 3% (4%)	n=6 9% (12%)	n=2 3% (4%)	n=2 3% (4%)	n=0
Placement services	All Staff	n=44 30% (36%)	n=23 16% (19%)	n=28 19% (23%)	n=10 7% (8%)	n=10 7% (8%)	n=5 3% (4%)	n=1 1% (1%)
	DSPs	n=10 12% (14%)	n=17 21% (23%)	n=26 32% (36%)	n=5 6% (7%)	n=10 12% (14%)	n=4 5% (6%)	n=1 1% (1%)
	Non-DSPs	n=34 52% (71%)	n=6 9% (13%)	n=2 3% (4%)	n=5 8% (10%)	n=0	n=1 2% (2%)	n=0
Supportive services	All Staff	n=35 24% (30%)	n=32 22% (27%)	n=24 16% (20%)	n=12 8% (10%)	n=7 5% (6%)	n=8 5% (7%)	n=0
	DSPs	n=5 6% (7%)	n=22 27% (31%)	n=21 26% (30%)	n=9 11% (13%)	n=6 7% (9%)	n=7 9% (10%)	n=0
	Non-DSPs	n=30 46% (63%)	n=10 15% (21%)	n=3 5% (6%)	n=3 5% (6%)	n=1 2% (2%)	n=1 2% (2%)	n=0

Table 6 continues on the next page

Table 6, continued

Type of Work	*Raters*	*None*	*A little*	*Less than half*	*About half*	*More than half*	*Most*	*All*
Post-employment services	All Staff	n=55 37% (47%)	n=44 30% (38%)	n=11 8% (9%)	n=3 2% (3%)	n=1 1% (1%)	n=3 2% (3%)	n=0
	DSPs	n=17 21% (24%)	n=35 43% (50%)	n=11 13% (16%)	n=3 4% (4%)	n=1 1% (1%)	n=3 4% (4%)	n=0
	Non-DSPs	n=38 59% (81%)	n=9 14% (19%)	n=0	n=0	n=0	n=0	n=0

Table 7: Vendor Type of Agency

Type of Agency	*Percent*	*Number of Respondents*
Self-employed or Independent Contractor	44%	n=54
Other	19%	n=23
Educational Institution	17%	n=21
Community Centered Board	7%	n=8
Health/Medical Organization	7%	n=8
Community Rehabilitation Program	4%	n=5
Mental Health Center	3%	n=3

Table 8: Vendor Estimates of Time Spent in Past Year Providing Services

Service	*0%*	*1-20%*	*21-40%*	*41-60%*	*61-80%*	*81-99%*	*100%*	*No answer*	*# who responded*
Application and Intake	n=37 37% (53%)	n=26 26% (37%)	n=6 6% (9%)	n=0	n=1 1% (1%)	n=0	n=0	n= 30 30%	70
Evaluation and Diagnostic Services	n=33 33% (47%)	n=29 29% (41%)	n=3 3% (4%)	n=4 4% (6%)	n=1 1% (1%)	n=0	n=0	n=30 30%	70
Physical and Mental Restoration Services	n=50 50% (74%)	n=10 10% (15%)	n=0	n=6 6% (9%)	n=1 1% (2%)	n=1 1% (2%)	n=0	n=32 32%	68
Training Services	n=44 44% (63%)	n=12 12% (17%)	n=4 4% (6%)	n=2 2% (3%)	n=2 2% (3%)	n=3 3% (4%)	n=3 3% (4%)	n=30 30%	70
Specialized Services for Blind, Deaf and Deaf-Blind	n=49 49% (83%)	n=6 6% (10%)	n=2 2% (3%)	n=1 1% (2%)	n=0	n=1 1% (2%)	n=0	n=41 41%	59
Assistive Technology	n=45 45% (69%)	n=9 9% (14%)	n=2 2% (3%)	n=2 2% (3%)	n=1 1% (2%)	n=2 2% (3%)	n=4 4% (6%)	n=35 35%	65
Educational Services	n=38 38% (57%)	n=15 15% (22%)	n=1 1% (2%)	n=4 4% (6%)	n=3 3% (5%)	n=2 2% (3%)	n=4 4% (6%)	n=33 33%	67
Vocational Counseling or Guidance	n=41 41% (67%)	n=15 15% (25%)	n=1 1% (2%)	n=2 2% (3%)	n=1 1% (2%)	n=0	n=1 1% (2%)	n=39 39%	61
Placement Services	n=42 42% (65%)	n=11 11% (17%)	n=3 3% (5%)	n=3 3% (5%)	n=2 2% (3%)	n=2 2% (3%)	n=2 2% (3%)	n=35 35%	65
Supportive Services	n=38 38% (57%)	n=15 15% (22%)	n=6 6% (9%)	n=4 4% (6%)	n=1 1% (2%)	n=0	n=3 3% (5%)	n=33 33%	67
Post-employment	n=43 43% (71%)	n=10 10% (16%)	n=4 4% (7%)	n=3 3% (5%)	n=0	n=0	n=1 1% (2%)	n=39 39%	61
Other	n=19 19% (48%)	n=15 15% (38%)	n=3 3% (8%)	n=0	n=0	n=0	n=3 3% (8%)	n=60 60%	40

Table 9: Percentage of Vendor Clients Prepared or Ready for Vendor to Provide Services

	0	*1-20%*	*21-40%*	*41-60%*	*61-80%*	*81-99%*	*100%*	*no answer*	*# who responded*
Very prepared	n=3 3% (4%)	n=17 17% (25%)	n=4 4% (6%)	n=6 6% (9%)	n=10 10% (15%)	n=12 12% (18%)	n=16 16% (24%)	n=32 32%	68
Somewhat prepared	n=7 7% (14%)	n=15 15% (29%)	n=10 10% (19%)	n=3 3% (6%)	n=9 9% (17%)	n=3 3% (6%)	n=5 5% (10%)	n=48 48%	52
Somewhat unprepared	n=15 15% (36%)	n=19 19% (45%)	n=4 4% (10%)	n=3 3% (7%)	n=1 1% (2%)	n=0	n=0	n=58 58%	42
Not prepared	n=22 22% (58%)	n=14 14% (37%)	n=1 1% (3%)	n=0	n=0	n=1 1% (3%)	n=0	n=62 62%	38

Table 10: Services Rated as High Need by Consumers

Service	*# of consumers for whom service is a high need*	*Percentage (based on those who responded)*
Educational services or assistance with education	**128**	**57%**
Employment counseling or some guidance about working	**108**	**48%**
Assistance with your job search	**104**	**47%**
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	**94**	**43%**
Learning how your disability could affect your ability to work	**92**	**41%**
Vocational training	**85**	**41%**
Transportation to and from work	76	36%
Self-employment information	69	32%
Job coaching (from a job coach) at a job site	68	32%
Getting specialized equipment for your disability	67	31%
Medical services that helped you with employment or independence. (i.e.; medical help that corrected or improved your disability)	65	30%
On-the-job training (from the employer) at a job site	59	28%
Learning about specialized equipment for your disability (i.e.; screen reader, adaptive devices, video phone)	57	26%
Help reading written material	33	15%
Help performing activities of daily living	32	15%
Homemaker services	22	10%
Interpreter services if you speak a language, other than English, as your primary communication.	14	7%

Table 11: Number and Percentage of Consumers who Received Services

Service	***Number***	***Percentage****
Educational services or assistance with education	**126**	**47%**
Employment counseling or some guidance about working	**146**	**54%**
Assistance with your job search	**102**	**38%**
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	**88**	**33%**
Learning how your disability could affect your ability to work	**121**	**45%**
Vocational training	71	26%
Transportation to and from work	71	26%
Self-employment information	50	19%
Job coaching (from a job coach) at a job site	51	19%
Getting specialized equipment for your disability	70	26%
Medical services that helped you with employment or independence. (i.e.; medical help that corrected or improved your disability)	55	20%
On-the-job training (from the employer) at a job site	34	13%
Learning about specialized equipment for your disability (i.e.; screen reader, adaptive devices, video phone)	67	25%
Help reading written material	35	13%
Help performing activities of daily living	30	11%
Homemaker services	16	6%
Interpreter services if you speak a language, other than English, as your primary communication.	18	7%

*Percentage is based on N=269 consumers who filled out the survey.

Table 12: Services Rated as High Need and Received by Consumers

Service	*Consumers who say this need is high*	*Consumers who say their need was high and received the service*
Educational services or assistance with education	n=128 48% (57%)	n=95 74%
Employment counseling or some guidance about working	n=108 40% (48%)	n=76 70%
Assistance with your job search	n=104 39% (47%)	n=51 49%
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	n=94 35% (43%)	n=55 59%
Learning how your disability could affect your ability to work	n=92 34% (41%)	n=56 61%
Vocational training	n=85 32% (41%)	n=44 52%
Transportation to and from work	n=76 28% (36%)	n=46 61%
Self-employment information	n=69 26% (32%)	n=28 41%
Job coaching (from a job coach) at a job site	n=68 25% (32%)	n=30 44%
Getting specialized equipment for your disability	n=67 25% (31%)	n=42 63%
Medical services that helped you with employment or independence. (i.e.; medical help that corrected or improved your disability)	n=65 24% (30%)	n=34 52%
On-the-job training (from the employer) at a job site	n=59 22% (28%)	n=20 34%
Learning about specialized equipment for your disability (i.e.; screen reader, adaptive devices, video phone)	n=57 21% (26%)	n=32 56%
Help reading written material	n=33 12% (15%)	n=21 64%
Help performing activities of daily living	n=32 12% (15%)	n=14 44%
Homemaker services	n=22 8% (10%)	n=8 37%

Interpreter services if you speak a language, other than English, as your primary communication.	n=14 5% (7%)	n=11 79%

Table 13: Services Rated as Helpful by Consumers Who Received the Service

Service	*# of Consumers who received the service*	*# of Consumers who rated the service as very helpful*	*% of Consumers who rated the service as very helpful*
Educational services or assistance with education	**126**	**79**	**63%**
Employment counseling or some guidance about working	146	68	47%
Assistance with your job search	102	38	37%
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	88	48	55%
Learning how your disability could affect your ability to work	121	53	44%
Vocational training	71	43	61%
Transportation to and from work	**71**	**50**	**70%**
Self-employment information	50	26	52%
Job coaching (from a job coach) at a job site	51	25	49%
Getting specialized equipment for your disability	**70**	**47**	**67%**
Medical services that helped you with employment or independence. (i.e.; medical help that corrected or improved your disability)	55	30	55%
On-the-job training (from the employer) at a job site	34	17	50%
Learning about specialized equipment for your disability (i.e.; screen reader, adaptive devices, video phone)	67	39	58%
Help reading written material	35	20	57%
Help performing activities of daily living	**30**	**19**	**63%**
Homemaker services	16	6	38%
Interpreter Services	**18**	**12**	**67%**

Table 14: Ratings of Helpfulness of Services by Consumers with High Need and Received Service

Service	*Number of Respondents*	*Percentage*		
		Not Helpful	*Somewhat Helpful*	*Very Helpful*
Educational services or assistance with education	91	9%	13%	78%
Employment counseling or some guidance about working	**71**	**10%**	**27%**	**63%**
Assistance with your job search	**46**	**22%**	**22%**	**57%**
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	50	4%	20%	76%
Learning how your disability could affect your ability to work	54	7%	30%	63%
Vocational training	43	0%	21%	79%
Transportation to and from work	41	5%	7%	88%
Self-employment information	**27**	**22%**	**15%**	**63%**
Job coaching (from a job coach) at a job site	28	4%	32%	64%
Getting specialized equipment for your disability	40	3%	13%	85%
Medical services that helped you with employment or independence. (i.e.; medical help that corrected or improved your disability)	30	3%	23%	73%
On-the-job training (from the employer) at a job site	**19**	**16%**	**16%**	**68%**
Learning about specialized equipment for your disability (i.e.; screen reader, adaptive devices, video phone)	30	0%	20%	80%
Help reading written material	19	0%	21%	79%
Help performing activities of daily living	12	0%	0%	100%
Homemaker services	**7**	**29%**	**14%**	**57%**
Interpreter Services	11	9%	0%	91%

Table 15: High Need for Service as Rated by Direct Service Providers, Vendors and Consumers

Services	% of DSP respondents	% of vendor respondents	% of consumer respondents
Educational services or assistance with education	n=5 6% (9%)	n=11 11% (22%)	n=128 48% (57%)
Employment counseling or some guidance about working	n=52 63% (84%)	n=24 24% (42%)	n=108 40% (48%)
Assistance with your job search	n=37 45% (62%)	*	n=104 39% (47%)
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	n=30 37% (46%)	n=12 12% (22%)	n=94 35% (43%)
Learning how their disability could affect their ability to work	n=34 42% (52%)	n=17 17% (30%)	n=92 34% (41%)
Vocational training	n=10 12% (16%)	n=18 18% (33%)	n=85 32% (41%)
Transportation to and from work	n=19 23% (33%)	n=9 9% (18%)	n=76 28% (36%)
Self-employment	n=1 1% (2%)	n=5 5% (10%)	n=69 26% (32%)
Job coaching (from a job coach) at a job site	n=7 9% (12%)	n=7 7% (15%)	n=68 25% (32%)
Getting specialized equipment for their disability	n=8 10% (12%)	n=0	n=67 25% (31%)
Medical services that helped with employment or independence (i.e.; medical help that corrected or improved their disability)	n=7 9% (11%)	n=3 3% (6%)	n=65 24% (30%)
On-the-job training (from the employer) at a job site	n=0	n=4 4% (9%)	n=59 22% (28%)
Learning about specialized equipment for their disability (i.e.; screen reader, adaptive devices, video phone)	n=7 9% (11%)	n=4 4% (7%)	n=57 21% (26%)
Help reading written material	n=9 11% (16%)	n=4 4% (9%)	n=33 12% (15%)
Help performing activities of daily living	n=7 9% (12%)	n=3 3% (7%)	n=32 12% (15%)

Table 15, continued

Services	% of DSP respondents	% of vendor respondents	% of consumer respondents
Homemaker services/Personal assistance services	n=1 1% (2%)	n=1 1% (2%)	n=22 8% (10%)
Interpreter services if their primary communication is a language other than English	n=0	n=1 1% (2%)	n=14 5% (7%)
Evaluation and diagnostic services	n=48 59% (74%)	n=12 12% (20%)	*
Placement services	n=34 42% (59%)	n=13 13% (26%)	*
Learning job seeking skills	n=30 37% (50%)	n=12 12% (24%)	*
Specialized services for blind, deaf, and deaf-blind	n=6 7% (10%)	n=3 3% (6%)	*
Post-employment services	n=2 2% (4%)	n=8 8% (17%)	*

* This service was not included in the consumer survey.

Table 16: Direct Service Providers' Ratings of Consumers' Needs Met by Services

Service	*None*	*A few*	*Less than half*	*About half*	*More than half*	*Most*	*All*	*No Answer*	*# who responded*
Educational services or assistance with education	n=3 4% (5%)	n=14 17% (25%)	n=12 15% (21%)	n=5 6% (9%)	n=3 4% (5%)	n=17 21% (30%)	n=3 4% (5%)	n=25 31%	n=57
Employment counseling or some guidance about working	n=6 7% (10%)	n=0	n=2 2% (3%)	n=10 12% (17%)	n=13 16% (22%)	n=23 28% (38%)	n=6 7% (10%)	n=22 27%	n=60
Assistance with your job search	n=2 2% (3%)	n=2 2% (3%)	n=5 6% (9%)	n=12 15% (20%)	n=10 12% (17%)	n=22 27% (37%)	n=6 7% (10%)	n=23 28%	n=59
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	n=3 4% (5%)	n=8 10% (12%)	n=5 6% (8%)	n=6 7% (9%)	n=17 21% (26%)	n=22 27% (34%)	n=4 5% (6%)	n=17 21%	n=65
Learning how their disability could affect their ability to work	n=2 2% (3%)	n=14 17% (22%)	n=7 9% (11%)	n=11 13% (17%)	n=8 10% (12%)	n=18 22% (28%)	n=5 6% (8%)	n=17 21%	n=65
Vocational training	n=3 4% (5%)	n=11 13% (18%)	n=16 20% (26%)	n=1 1% (2%)	n=7 9% (12%)	n=18 22% (30%)	n=5 6% (8%)	n=21 26%	n=61
Transportation to and from work	n=2 2% (4%)	n=13 16% (23%)	n=4 5% (7%)	n=7 9% (12%)	n=7 9% (12%)	n=18 22% (32%)	n=6 7% (11%)	n=25 31%	n=57
Self-employment	n=21 26% (38%)	n=22 27% (40%)	n=1 1% (2%)	n=0	n=2 2% (4%)	n=7 9% (13%)	n=2 2% (4%)	n=27 33%	n=55
Job coaching (from a job coach) at a job site	n=4 5% (7%)	n=16 20% (27%)	n=9 11% (15%)	n=4 5% (7%)	n=3 4% (5%)	n=15 18% (25%)	n=8 10% (14%)	n=23 28%	n=59
Getting specialized equipment for their disability	n=9 11% (14%)	n=19 23% (30%)	n=5 6% (8%)	n=3 4% (5%)	n=5 6% (8%)	n=20 24% (32%)	n=2 2% (3%)	n=19 23%	n=63
Medical services that helped with employment or independence (i.e.; medical help that corrected or improved their disability)	n=8 10% (13%)	n=20 24% (31%)	n=9 11% (14%)	n=7 9% (11%)	n=6 7% (9%)	n=14 17% (22%)	n=0	n=18 22%	n=64
On-the-job training (from the employer) at a job site	n=25 31% (45%)	n=16 20% (29%)	n=3 4% (5%)	n=1 1% (2%)	n=0	n=10 12% (18%)	n=1 1% (2%)	n=26 32%	n=56
Learning about specialized equipment for their disability (i.e.; screen reader, adaptive devices, video phone)	n=5 6% (8%)	n=25 31% (39%)	n=4 5% (6%)	n=6 7% (9%)	n=3 4% (5%)	n=17 21% (27%)	n=4 5% (6%)	n=18 22%	n=64
Help reading written material	n=11 13% (20%)	n=14 17% (25%)	n=3 4% (5%)	n=3 4% (5%)	n=3 4% (5%)	n=17 21% (30%)	n=5 6% (9%)	n=26 32%	n=56

Table 16, continued

Service	*None*	*A few*	*Less than half*	*About half*	*More than half*	*Most*	*All*	*No Answer*	*# who responded*
Help performing activities of daily living	n=22 27% (43%)	n=11 13% (22%)	n=0	n=1 1% (2%)	n=4 5% (8%)	n=11 13% (22%)	n=2 2% (4%)	n=31 38%	n=51
Homemaker services/Personal assistance services	n=29 35% (62%)	n=12 15% (26%)	n=1 1% (2%)	n=0	n=0	n=4 5% (9%)	n=1 1% (2%)	n=35 43%	n=47
Interpreter services if their primary communication is a language other than English	n=21 26% (41%)	n=16 20% (31%)	n=3 4% (6%)	n=0	n=0	n=5 6% (10%)	n=6 7% (12%)	n=31 38%	n=51
Evaluation and diagnostic services	n=4 5% (6%)	n=9 11% (14%)	n=2 2% (3%)	n=6 7% (9%)	n=12 15% (19%)	n=23 28% (36%)	n=8 10% (13%)	n=18 22%	n=64
Placement services	n=1 1% (2%)	n=9 11% (16%)	n=12 15% (21%)	n=7 9% (12%)	n=8 10% (14%)	n=7 21% (30%)	n=3 4% (5%)	n=25 31%	n=57
Learning job seeking skills	n=3 4% (5%)	n=3 4% (5%)	n=9 11% (15%)	n=9 11% (15%)	n=7 9% (12%)	n=25 31% (42%)	n=3 4% (5%)	n=23 28%	n=59
Specialized services for blind, deaf, and deaf-blind	n=21 26% (40%)	n=13 16% (25%)	n=3 4% (6%)	n=0	n=1 1% (2%)	n=10 12% (19%)	n=4 5% (8%)	n=30 37%	n=52
Post-employment services	n=9 11% (17%)	n=24 29% (45%)	n=0	n=0	n=1 1% (2%)	n=11 13% (21%)	n=8 10% (15%)	n=29 35%	n=53

Table 17: Vendor Ratings of Consumer Service Needs Met

Service	*0*	*1-20%*	*21-40%*	*41-60%*	*61-80%*	*81-99%*	*100%*	*No Answer*	*# who responded*
Educational services or assistance with education	n=14 14% (36%)	n=10 10% (26%)	n=1 1% (3%)	n=2 2% (5%)	n=1 1% (3%)	n=3 3% (8%)	n=8 8 % (21%)	n=61 61%	n=39
Employment counseling or some guidance about working	n=14 14% (30%)	n=13 13% (28%)	n=2 2% (4%)	n=3 3% (7%)	n=5 5% (11%)	n=2 2% (4%)	n=7 7% (15%)	n=54 54%	n=46
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	n=20 20% (44%)	n=13 13% (29%)	n=1 1% (2%)	n=2 2% (4%)	n=2 2% (4%)	n=4 4% (9%)	n=3 3% (7%)	n=55 55%	n=45
Learning how their disability could affect their ability to work	n=18 18% (38%)	n=12 12% (26%)	n=4 4% (9%)	n=1 1% (2%)	n=1 1% (2%)	n=7 7% (15%)	n=4 4% (9%)	n=53 53%	n=47
Vocational training	n=17 17% (44%)	n=11 11% (28%)	n=3 3% (8%)	n=0	n=1 1% (3%)	n=4 4% (10%)	n=3 3% (8%)	n=61 61%	n=39
Transportation to and from work	n=18 18% (49%)	n=6 6% (16%)	n=1 1% (3%)	n=3 3% (8%)	n=3 3% (8%)	n=3 3% (8%)	n=3 3% (8%)	n=63 63%	n=37
Self-employment	n=29 29% (71%)	n=5 5% (12%)	n=2 2% (5%)	n=1 1% (2%)	n=0	n=1 1% (2%)	n=3 3% (7%)	n=59 59%	n=41
Job coaching (from a job coach) at a job site	n=21 21% (58%)	n=8 8% (22%)	n=1 1% (3%)	n=1 1% (3%)	n=1 1% (3%)	n=3 3% (8%)	n=1 1% (3%)	n=64 64%	n=36
Getting specialized equipment for their disability	n=25 25% (57%)	n=9 9% (21%)	n=1 1% (2%)	n=2 2% (5%)	n=0	n=2 2% (5%)	n=5 5% (11%)	n=56 56%	n=44
Medical services that helped with employment or independence (i.e.; medical help that corrected or improved their disability)	n=28 28% (72%)	n=4 4% (10%)	n=2 2% (5%)	n=1 1% (3%)	n=1 1% (3%)	n=0	n=3 3% (8%)	n=61 61%	n=39
On-the-job training (from the employer) at a job site	n=21 21% (62%)	n=7 7% (21%)	n=1 1% (3%)	n=1 1% (3%)	n=1 1% (3%)	n=2 2% (6%)	n=1 1% (3%)	n=66 66%	n=34
Learning about specialized equipment for their disability (i.e.; screen reader, adaptive devices, video phone)	n=25 25% (57%)	n=10 10% (23%)	n=0	n=2 2% (5%)	n=1 1% (2%)	n=1 1% (2%)	n=5 5% (11%)	n=56 56%	n=44
Help reading written material	n=20 20% (57%)	n=4 4% (11%)	n=2 2% (6%)	n=1 1% (3%)	n=2 2% (6%)	n=4 4% (11%)	n=2 2% (6%)	n=65 65%	n=35

Table 17, continued

Service	***0***	***1-20%***	***21-40%***	***41-60%***	***61-80%***	***81-99%***	***100%***	***No Answer***	***# who responded***
Help performing activities of daily living	n=23 23% (68%)	n=4 4% (12%)	n=1 1% (3%)	n=3 3% (9%)	n=0	n=1 1% (3%)	n=2 2% (6%)	n=66 66%	n=34
Homemaker services/Personal assistance services	n=26 26% (84%)	n=1 1% (3%)	n=1 1% (3%)	n=0	n=1 1% (3%)	n=1 1% (3%)	n=1 1% (3%)	n=69 69%	n=31
Interpreter services if their primary communication is a language other than English	n=28 28% (85%)	n=2 2% (6%)	n=0	n=0	n=0	n=0	n=3 3% (9%)	n=67 67%	n=33
Evaluation and diagnostic services	n=14 14% (26%)	n=14 14% (26%)	n=6 6% (11%)	n=2 2% (4%)	n=3 3% (6%)	n=4 4% (8%)	n=10 10% (19%)	n=47 47%	n=53
Placement services	n=20 20% (53%)	n=3 3% (8%)	n=3 3% (8%)	n=5 5% (13%)	n=4 4% (11%)	n=2 2% (5%)	n=1 1% (3%)	n=62 62%	n=38
Learning job seeking skills	n=16 16% (40%)	n=9 9% (23%)	n=4 4% (10%)	n=0	n=4 4% (10%)	n=2 2% (5%)	n=5 5% (13%)	n=60 60%	n=40
Specialized services for blind, deaf, and deaf-blind	n=22 22% (56%)	n=9 9% (23%)	n=1 1% (3%)	n=2 2% (5%)	n=0	n=1 1% (3%)	n=4 4% (10%)	n=61 61%	n=39
Post-employment services	n=18 18% (51%)	n=2 2% (6%)	n=1 1% (3%)	n=3 3% (9%)	n=4 4% (11%)	n=2 2% (6%)	n=5 5% (14%)	n=65 65%	n=35

Table 18: Direct Service Provider Ratings of Who Provided Service

Service	*N/A*	*DVR*	*Vendor*	*Both*	*No Answer*	*# who responded*
Educational services or assistance with education	n=3 4% (5%)	n=6 7% (10%)	n=31 38% (53%)	n=18 22% (31%)	n=24 29%	n=58
Employment counseling or some guidance about working	n=0	n=34 42% (57%)	n=1 1% (2%)	n=25 31% (42%)	n=22 27%	n=60
Assistance with your job search	n=2 2% (3%)	n=2 2% (3%)	n=4 5% (7%)	n=51 62% (86%)	n=23 28%	n=59
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	n=3 4% (5%)	n=5 6% (8%)	n=32 39% (49%)	n=25 31% (39%)	n=17 21%	n=65
Learning how their disability could affect their ability to work	n=0	n=26 32% (41%)	n=1 1% (2%)	n=37 45% (58%)	n=18 22%	n=64
Vocational training	n=3 4% (5%)	n=3 4% (5%)	n=41 50% (68%)	n=13 16% (22%)	n=22 27%	n=60
Transportation to and from work	n=5 6% (9%)	n=13 16% (22%)	n=21 26% (36%)	n=19 23% (33%)	n=24 29%	n=58
Self-employment	n=16 20% (29%)	n=19 23% (35%)	n=0	n=20 24% (36%)	n=27 33%	n=55
Job coaching (from a job coach) at a job site	n=2 2% (3%)	n=1 1% (2%)	n=44 54% (75%)	n=12 15% (20%)	n=23 28%	n=59
Getting specialized equipment for their disability	n=7 9% (11%)	n=8 10% (13%)	n=18 22% (29%)	n=29 35% (47%)	n=20 24%	n=62
Medical services that helped with employment or independence (i.e.; medical help that corrected or improved their disability)	n=8 10% (13%)	n=2 2% (3%)	n=34 42% (54%)	n=19 23% (30%)	n=19 23%	n=63
On-the-job training (from the employer) at a job site	n=28 34% (49%)	n=5 6% (9%)	n=15 18% (26%)	n=9 11% (16%)	n=25 31%	n=57
Learning about specialized equipment for their disability (i.e.; screen reader, adaptive devices, video phone)	n=4 5% (6%)	n=17 21% (27%)	n=17 21% (27%)	n=26 32% (41%)	n=18 22%	n=64
Help reading written material	n=9 11% (16%)	n=11 13% (19%)	n=9 11% (16%)	n=28 34% (49%)	n=25 31%	n=57
Help performing activities of daily living	n=18 22% (38%)	n=6 7% (13%)	n=16 20% (33%)	n=8 10% (17%)	n=34 42%	n=48
Homemaker services/Personal assistance services	n=26 32% (61%)	n=1 1% (2%)	n=12 15% (28%)	n=4 5% (9%)	n=39 48%	n=43

Table 18, continued

Service	*N/A*	*DVR*	*Vendor*	*Both*	*No Answer*	*# who responded*
Interpreter services if their primary communication is a language other than English	n=18 22% (37%)	n=0	n=20 24% (41%)	n=11 13% (22%)	n=33 40%	n=49
Evaluation and diagnostic services	n=0	n=9 11% (14%)	n=24 29% (37%)	n=32 39% (49%)	n=17 21%	n=65
Placement services	n=1 1% (2%)	n=1 1% (2%)	n=16 20% (28%)	n=40 49% (69%)	n=24 29%	n=58
Learning job seeking skills	n=2 2% (3%)	n=4 5% (7%)	n=6 7% (10%)	n=47 57% (80%)	n=23 28%	n=59
Specialized services for blind, deaf, and deaf-blind	n=18 22% (37%)	n=4 5% (8%)	n=8 10% (16%)	n=19 23% (39%)	n=33 40%	n=49
Post-employment services	n=9 11% (17%)	n=10 12% (19%)	n=7 9% (13%)	n=28 34% (52%)	n=28 34%	n=54

Table 19: Vendor Ratings of Who Provided Service

Service	*N/A*	*DVR*	*Vendor*	*Both*	*No Answer*	*# who responded*
Educational services or assistance with education	n=14 14% (30%)	n=14 14% (30%)	n=12 12% (26%)	n=7 7% (15%)	n=53 53%	n=47
Employment counseling or some guidance about working	n=7 7% (13%)	n=14 14% (26%)	n=12 12% (23%)	n=20 20% (38%)	n=47 47%	n=53
Restorative Services (i.e.; hearing aids, glasses, mental health services, prosthetics)	n=14 14% (28%)	n=12 12% (24%)	n=14 14% (28%)	n=10 10% (20%)	n=50 50%	n=50
Learning how their disability could affect their ability to work	n=15 15% (28%)	n=12 12% (22%)	n=8 8% (15%)	n=19 19% (35%)	n=46 46%	n=54
Vocational training	n=13 13% (27%)	n=16 16% (33%)	n=16 16% (33%)	n=3 3% (6%)	n=52 52%	n=48
Transportation to and from work	n=19 19% (42%)	n=12 12% (27%)	n=10 10% (22%)	n=4 4% (9%)	n=55 55%	n=45
Self-employment	n=22 22% (47%)	n=10 10% (21%)	n=5 5% (11%)	n=10 10% (21%)	n=53 53%	n=47
Job coaching (from a job coach) at a job site	n=19 19% (44%)	n=9 9% (21%)	n=12 12% (28%)	n=3 3% (7%)	n=57 57%	n=43
Getting specialized equipment for their disability	n=16 16% (33%)	n=17 17% (35%)	n=5 5% (10%)	n=10 10% (21%)	n=52 52%	n=48
Medical services that helped with employment or independence (i.e.; medical help that corrected or improved their disability)	n=23 23% (51%)	n=16 16% (36%)	n=4 4% (9%)	n=2 2% (4%)	n=55 55%	n=45
On-the-job training (from the employer) at a job site	n=20 20% (49%)	n=9 9% (22%)	n=7 7% (17%)	n=5 5% (12%)	n=59 59%	n=41
Learning about specialized equipment for their disability (i.e.; screen reader, adaptive devices, video phone)	n=18 18% (37%)	n=15 15% (31%)	n=7 7% (14%)	n=9 9% (18%)	n=51 51%	n=49
Help reading written material	n=19 19% (48%)	n=5 5% (13%)	n=13 13% (33%)	n=3 3% (8%)	n=60 60%	n=40
Help performing activities of daily living	n=25 25% (61%)	n=5 5% (12%)	n=10 10% (24%)	n=1 1% (2%)	n=59 59%	n=41
Homemaker services/Personal assistance services	n=26 26% (70%)	n=5 5% (14%)	n=4 4% (11%)	n=2 2% (5%)	n=63 63%	n=37

Table 19, continued

Service	***N/A***	***DVR***	***Vendor***	***Both***	***No Answer***	***# who responded***
Interpreter services if their primary communication is a language other than English	n=27 27% (71%)	n=6 6% (16%)	n=3 3% (8%)	n=2 2% (5%)	n=62 62%	n=38
Evaluation and diagnostic services	n=10 10% (17%)	n=16 16% (27%)	n=18 18% (31%)	n=15 15% (25%)	n=41 41%	n=59
Placement services	n=16 16% (33%)	n=13 13% (27%)	n=15 15% (31%)	n=4 4% (8%)	n=52 52%	n=48
Learning job seeking skills	n=13 13% (27%)	n=8 8% (17%)	n=23 23% (48%)	n=4 4% (8%)	n=52 52%	n=48
Specialized services for blind, deaf, and deaf-blind	n=18 18% (44%)	n=10 10% (24%)	n=5 5% (12%)	n=8 8% (20%)	n=59 59%	n=41
Post-employment services	n=19 19% (46%)	n=7 7% (17%)	n=10 10% (24%)	n=5 5% (12%)	n=59 59%	n=41

Table 20: Consumer Satisfaction with DVR Services

Statement	*Strongly disagree*	*Somewhat disagree*	*Somewhat agree*	*Strongly Agree*	*# who responded*
The VR staff treated me with **respect** and courtesy	12 5%	14 6%	51 21%	166 68%	243
Overall, my VR services were provided in a **timely manner**	38 16%	30 12%	74 30%	102 42%	244
My counselor helped me to **understand** my **disability** and how it might affect my future work.	41 17%	41 17%	74 31%	83 35%	239
I was **involved** in making choices about my goals and services.	20 8%	21 9%	56 23%	146 60%	243
My **experience** working with VR was good.	35 14%	26 11%	55 22%	130 53%	246
VR **policies** were **fair**.	24 10%	21 9%	73 31%	119 50%	237
VR services have helped or will **help** me **get** a **job**.	54 23%	39 17%	47 20%	94 40%	234
Overall, I am **satisfied** with the services I received from DVR.	40 16%	26 11%	60 25%	118 48%	244

Table 21: Vendor Ratings of Satisfaction working with DVR

Statement	*Strongly disagree*	*Somewhat disagree*	*Somewhat agree*	*Strongly Agree*	*No Answer*	*# who responded*
Overall, the VR staff were a resource for me.	n=6 5% (8%)	n=3 3% (4%)	n=28 23% (35%)	n=43 35% (54%)	n=42 34%	n=80
Overall, VR staff communicated in a timely manner.	n=7 6% (8%)	n=8 7% (10%)	n=28 23% (34%)	n=40 33% (48%)	n=38 31%	n=83
My experience working with VR was good.	n=4 3% (5%)	n=4 3% (5%)	n=18 15% (21%)	n=60 49% (70%)	n=36 30%	n=86
VR policies are helpful for providing services for consumers.	n=5 4% (6%)	n=6 5% (8%)	n=29 24% (36%)	n=40 33% (50%)	n=42 34%	n=80
Overall, I am satisfied with the relationship I have with DVR.	n=8 7% (9%)	n=1 1% (1%)	n=19 16% (22%)	n=58 48% (67%)	n=36 30%	n=86

ATTACHMENT 4.11 (b)

Annual Estimates of Individuals to Be Served and Costs of Services

FY 2009

Annual Estimates of Individuals to Be Served and Costs of Services

DVR anticipates for Federal FY 2009 it will provide vocational rehabilitation services to approximately 2.5% more individuals than during Federal FY 2008. Approximately 3,445 individuals will be provided diagnostic services pursuant to determining eligibility.

Of the 18,136 eligible individuals that DVR anticipates it will provide vocational rehabilitation services to, it is estimated that 16,239 individuals will receive services provided with funds under Title I part B of the Act and that 1,897 individuals will receive services provided with funds under Title VI part B of the Act. The number of eligible individuals served by priority category and the estimated service costs to be achieved between October 1, 2008 and September 30, 2009 appear on the following chart.

ELIGIBLE INDIVIDUALS AND SERVICE COSTS BY PRIORITY CATEGORY*
October 1, 2008 – September 30, 2009

	Eligible Individuals	Service Costs
Individuals with most significant disabilities	9,659	$16,129,909
Individuals with significant disabilities	7,737	$15,229,340
Individuals with least significant disabilities	741	$1,349,207
TOTALS	18,136	$32,708,456

*This does not include an additional $ $1,871,819 that DVR expects to spend on assessment services provided pursuant to eligibility.

ATTACHMENT 4.11 (c)(1)

State's Goals and Priorities

FY 2009

State's Goals and Priorities

Based on the results of the comprehensive statewide assessment of the rehabilitation needs of individuals with disabilities that were described in section 4.11(a) of this state plan, as well as the Division of Vocational Rehabilitation's (DVR) internal needs and analysis of performance on standards and indicators, DVR collaborated with the State Rehabilitation Council (SRC) in April 2008 to establish long term priorities and goals for the vocational rehabilitation program. This process resulted in the development and prioritization of four goals with a number of strategies that Colorado's DVR and SRC can use to achieve our goals.

Goal #1 - Increase the number and quality of employment outcomes.

Strategies:

(a) *Identify, explore, and replicate effective practices that are employed by exemplary counselors.*

(b) *DVR will continue to monitor caseload activity data and implement effective strategies to improve service delivery for consumers.*

(c) *DVR will conduct employer outreach and education.*

Measurements:

Other overall Indicators will be to maintain or increase:

- Total number of successful post-IPE closures.
- Percentage of all post-IPE closures that were closed successfully.

Goal #2 - Increase the visibility and public awareness of the Division of Vocational Rehabilitation.

Strategies:

(a) *Educate Colorado State Agencies, Legislators, DVR Consumers and other community members about DVR's employment focused services and benefits to Colorado.*

(b) *Continue to enhance the functionality of the DVR website and ensure it provides current and appropriate information.*

(c) *Enhance the quality of DVR's outreach strategy and materials for employers.*

Measurements:

Other overall Indicators will be to maintain or increase:

- Number of applicants determined eligible for DVR services.
- DVR's application acceptance rate.
- Number of community educational initiatives conducted by DVR or in which DVR staff participates to increase visibility and public awareness of programs and services.

Goal #3 - Improve the quality and availability of providers from whom DVR purchases services.

Strategies:

(a) *DVR will develop and conduct an on-going consumer survey to measure the quality of services provided by DVR vendors.*

(b) *DVR will review and update provider standards and qualifications.*

(c) *DVR will review and refine procedures for recruitment and registering of providers.*

(d) *DVR will provide training for vendors who interact with DVR consumers.*

Measurements:

Other overall Indicators will be to maintain or increase:

- Number of vendors receiving DVR trainings.
- Number of new providers.
- Increased customer satisfaction in services provided by vendors.

Goal #4 - Improve DVR's ability to maintain a full and competent staff.

Strategies:

(a) *DVR will explore the opportunity to expand the job classification series for rehabilitation counselors.*

(b) *DVR will explore and implement an automated case management system.*

(c) *DVR will provide skill development opportunities for staff.*

Measurements:

Other overall Indicators will be to maintain or increase:

- Ratio of filled to vacant full-time FTE's.
- Average amount of time it takes to fill a vacant DVR position.
- Percentage of all staff departures due to reasons other than retirement.
- Number of staff who have received Continuing Education Credits.

ATTACHMENT 4.11 (c)(3)

Order of Selection

FY 2009

Order of Selection

The Division of Vocational Rehabilitation (DVR) implemented an Order of Selection on March 1, 1993 due to the lack of sufficient funds to provide vocational rehabilitation services to all eligible persons. This action resulted from increased costs for vocational rehabilitation services, increased demand for services, an increased number of applicants with significant disabilities, and an inability of Colorado DVR to match all available Federal funds. However, DVR was able to serve all eligible individuals from SFY 1994 – SFY 2003. During the State budgetary process for SFY 2004, the DVR general fund state tax dollar budget was reduced by 25% which, when matched with federal funds, resulted in a reduction of approximately $5,000,000 to DVR's total budget. As a result, DVR has been serving only the highest two priority categories under the Order of Selection since May 21, 2003.

In State FY 2007, DVR's general fund state tax dollar budget increased to $1.8 million and 24.2 FTE for DVR staff positions were restored. In addition, there was new funding and additional FTE for two new projects and for improvements to the BEP program. Therefore, DVR was able to begin serving individuals in all priority categories during State FY 2007, and was able to maintain that level of service in State FY 2008 with current funding. However, because these dollars are not guaranteed for longer than the state fiscal year DVR will continue its Order of Selection in Federal FY 2009.

DVR expects to be able to serve individuals in all priority categories in the foreseeable future, however will continue with Order of Selection should a decline in the State's economy result in future budget reductions.

In accordance with Section 101(a)(5)(A)(ii) of the Rehabilitation Act of 1973, as amended, DVR has designated that individuals with disabilities will receive vocational rehabilitation services in the following order of priority:

FIRST : Eligible individuals with the most significant disabilities

SECOND: Eligible individuals with significant disabilities

THIRD: Eligible individuals with least significant disabilities

All eligible individuals with disabilities whose priority category is closed after initiation of services under an Individualized Plan for Employment (IPE) shall continue to receive services. All services, including post-employment services, shall be available to eligible individuals receiving services under an order of selection. All applicants, including those receiving trial work experiences, shall receive any and all services necessary to determine eligibility for vocational rehabilitation services and order of selection priority classification without regard to the availability of funds or the implementation of the order of selection. Such services shall be provided on a timely basis in accordance with the provisions of the Rehabilitation Act of 1973, as amended under the Workforce Investment Act of 1998, and the regulations found at 34 CFR Part 361.

The Division of Vocational Rehabilitation has developed the following criteria to identify an individual with the most significant disability:

- The individual must have an impairment or impairments which, alone or in combination, are severe,
- The individual must be seriously limited from achieving an employment outcome due to serious functional loss in **three or more** of the functional capacities identified in Section 7(15)(A) of Rehabilitation Act of 1973 (Public Law 93-112) as amended through 1998 (Public Law 102-569),
- The individual must need at least two **core vocational rehabilitation services*** to address the functional losses imposed by the significant impairment(s) in order to attain an employment outcome, and

- It will take a minimum of **five (5) months** to complete the services.

*** Core vocational rehabilitation services** includes all vocational rehabilitation services other than supportive services (maintenance, transportation, services to family members, and personal assistance services); services secondary to core vocational rehabilitation services, such as training materials and supplies when training is being provided as a core vocational rehabilitation service; or, generalized counseling, guidance, and placement which are provided during the vocational rehabilitation process in connection with the provision of vocational rehabilitation services but are not identified as a needed vocational rehabilitation service on the IPE.

SERVICE AND OUTCOME GOALS AND TIME FRAMES* FOR ACHIEVING THEM
October 1, 2008 - September 30, 2009

	Eligibility Decisions	New Plans	26 Closures	Active Eligible Records
Individuals with most significant disabilities	2,843	1,678	1,011	7,657
Individuals with significant disabilities	3,419	2,114	1,130	9,362
Individuals with least significant disabilities	257	199	135	703
TOTALS	6,520	3,991	2,275	17,722

** As Colorado DVR currently does not have a waiting list for any priority category, all service and outcome goals are estimated to be achieved by September 30, 2009.*

ATTACHMENT 4.11 (c)(4)

Goals and Plans for Distribution of Title VI, Part B Funds

FY 2009

Goals and Plans for Distribution of Title VI, Part B Funds

The Division of Vocational Rehabilitation (DVR) will continue to earmark available grant funds obtained under Title VI, Part B (Supported Employment Services), towards the administration of the supported employment program and the purchase of services in accordance with the 1998 amendments to the Rehabilitation Act of 1973. These funds will be used to purchase supported employment services under Individualized Plans for Employment (IPE) for individuals with the most significant disabilities who have been determined eligible for supported employment. (The types of services to be purchased remain the same as those identified in Attachment 7.3 of the State plan.)

During the first nine months of Federal FY 2008, DVR will have spent an estimated $1.2 million for supported employment services, using both Title VI B and Title I funds. DVR is on track to spend approximately $1.6 million for all of Federal FY 2008. DVR's administrative priority is to assure the provision of supported employment services to all who need it, and it does not guide counselors to be concerned about whether they are funded through Title I or Title VI-B. This means that frequently individuals are served using a combination of the two funding sources.

To successfully meet the supported employment needs of individuals with the most significant disabilities, DVR has continued the collaborative efforts and working relationships between local DVR offices and mental health centers, and between local DVR offices and agencies serving consumers with developmental disabilities. DVR counselors and vocational staff from the above agencies work together to identify individuals who would be appropriate referrals to DVR for supported employment services.

DVR continues to work actively within the realm of Education, including Colorado's School to Career and Transition activities, and within the realm of WIA, to assure that youth with the most significant disabilities are accessing career, transition and employment services, including supported employment services, along with all Colorado youth. DVR has worked to infuse best practices within these areas, so that the needs of youth with the most significant disabilities are considered and met. Colorado DVR and Department of Education state-level staff work and travel as a team throughout the state, to respond to requests and to provide training, technical assistance and facilitation to local community agencies, such as schools and adult organizations, as these entities struggle to provide collaborative transition services to youth with the most significant disabilities.

Since FY 2004, DVR has participated on the State Youth Council and on all eighteen local Youth Councils, to help assure that the needs of youth with disabilities, including those youth with the most significant disabilities, are considered in the planning and implementation of community youth programs and activities. The mission of Colorado's State Youth Council is " to create a pathway of economic success for Colorado's youth through the influence of policy and practice." Through DVR's involvement at the state and local levels, Colorado Youth Councils are doing a better job of identifying barriers and gaps to linking youth with the most significant disabilities to services, and of creating linkages and opportunities for these youth that lead to successful employment, including supported employment.

Typically, DVR uses 100% of its Title VI-B funds for the direct authorization of supported employment services. Title I funds are also used for supported employment services provided under cooperative agreements as well as for individual supported employment programs. Accordingly, DVR develops programming strategies for its entire supported employment program, which includes the use of Title VI-B and Title I funds.

The Division's programmatic activities for supported employment services and programs funded under both

Titles I and VI-B are intended to increase the number of persons receiving supported employment services and to improve employment outcomes for these individuals. The Division believes that the most effective and efficient strategy to accomplish this is by expanding and strengthening its collaborative linkages with relevant State agencies and/or private not-for-profit agencies for the provision of supported employment and extended support services. The following activities to be conducted during 2009 reflect a continuation and refinement of activities performed over the last several years as well as recently enacted State legislation.

Planned Activities

- DVR will continue to partner with the Colorado Division of Developmental Disabilities to conduct regional training sessions for staff from both agencies aimed at enhancing services and increasing employment outcomes for individuals with developmental disabilities.

- DVR is represented on each of Colorado's eighteen Workforce Investment Boards and will continue to assure that the needs of persons with the most significant disabilities are considered and planned for as Colorado's local communities develop WIA programs and policies to employ unemployed and underemployed Coloradoans. DVR will continue to be actively involved with WIA related activities and with the development and implementation of these activities statewide. Through membership on every Workforce Investment Board and Youth Council within the state, DVR will continue to provide technical assistance, training and resources in support of enhancing services to persons with the most significant disabilities, via the WIA system.

- In response to recent legislation enacted by the Colorado Legislature, DVR will be researching a pilot program for an outcome-based supported employment system for persons with disabilities, including developmental disabilities.

ATTACHMENT 4.11 (d)

State's Strategies and Use of Title I Funds for Innovation and Expansion Activities

FY 2009

Strategies to Address Needs in the Comprehensive Assessment and to Achieve Identified Goals and Priorities

Based on feedback received through the comprehensive assessment, public hearings, advisory councils, and other less formal venues regarding the needs of Colorado residents with disabilities, DVR developed a number of goals and strategies. While some of these strategies are new for DVR, many are continuations and refinements of strategies initiated over the past five years. The following is a detailed list of those goals and strategies and the various tasks DVR will undertake as part of the strategies in order to achieve the goals identified.

Goal #1 - Increase the number and quality of employment outcomes

Strategies:

(d) *Identify, explore, and replicate effective practices that are employed by exemplary counselors.*

Timelines	*Tasks*	*Measures of Success*
Year 1	[As a part of Goal 1, Strategy (a) DVR will revise the method used for conducting the Comprehensive Need Assessment. Instead of conducting a comprehensive (consumer, vendor, staff) needs assessment every three year, DVR will be conducting a more in-depth needs assessment each year.] – Using the results of the FFY 2008 Comprehensive Needs Assessment, design processes and tools to be used in an in-depth consumer survey. – As part of the design, include questions to gather data on effective practices. – Conduct survey. – Use results to update and revise DVR Goals and Strategies.	– In-Depth Consumer survey conducted. (by February 28, 2009) – Data analyzed and results reported. (by April 30, 2009)
Year 2	– *Using results of the FFY 2009 consumer survey, design processes and tools to be used in an in-depth vendor/employer survey.* – *Conduct survey.* – *Use results to update and revise DVR Goals and Strategies.*	– *In-Depth Vendor/Employer survey conducted. (by February 28, 2010)* – *Data analyzed and results reported. (by April 30, 2010)*
Year 3	– *Using results of the FFY 2009 consumer survey and FFY 2010 vendor/employer survey, design processes and tools to be used in an in-depth DVR Staff survey.* – *Conduct survey.* – *Use results to update and revise DVR Goals and Strategies.*	– *In-Depth DVR Staff survey conducted. (by February 28, 2011)* – *Data analyzed and results reported. (by April 30, 2011)*

(e) *DVR will continue to monitor caseload activity data and implement effective strategies to improve service delivery for consumers.*

Timelines	*Tasks*	*Measures of Success*
Year 1	Revise and update user friendly tool to monitor caseload activity by counselor; including revisions to include information regarding special populations.	– *Complete user friendly tool.* – *Make tool available to all counselors, along with information on effective use of the tool.*
Year 2	– *Examine DVR caseload activity in regards to special populations.* – *Use analysis to make recommendations concerning services to special populations.*	– *Analyze data in caseload activity regarding special populations.* – *Recommendations (by June 30, 2010)*
Year 3	*Implement recommendations*	*Recommendations implemented.*

(f) *DVR will conduct employer outreach and education.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– Evaluate the recommendations from marketing consultation vendor (Shift) based on three objectives: ▪ Build an awareness of DVR among a primary target audience of Colorado employers. ▪ Increase Colorado employers understanding of the DVR mission. ▪ Attract new Colorado employers.	DVR will develop a marketing plan, based on the recommendations from the marketing consultant. (by December 31, 2008)
Year 2	*Implement the DVR Marketing plan.*	*Maintain or increase the rate of change (increase) in Employment Outcomes.* *(Goal will be based on results from Year 1)*
Year 3	*Continued implementation of the DVR Marketing plan*	*Maintain or increase the rate of change (increase) in Employment Outcomes.* *(Goal will be based on results from Year 2)*

Other overall Indicators will be to maintain or increase:

- Total number of successful post-IPE closures.
- Percentage of all post-IPE closures that were closed successfully.

Goal #2 - Increase the visibility and public awareness of the Division of Vocational Rehabilitation.

Strategies:

(d) Educate Colorado State Agencies, Legislators, DVR Consumers and other community members about DVR's employment focused services and benefits to Colorado.

Timelines	*Tasks*	*Measures of Success*
Year 1	– RLT and SRC: ▪ Will address methods for increasing attendance by targeted groups at current events (educational opportunities) sponsored by DVR. ▪ Generate and recommend new ideas for other types of educational events or strategies. – RLT will provide input into consumer survey tool [Goal 1, Strategy (b)] to help to gather useful data on providers from the consumer's perspective. – SRC will educate members on various job programs statewide during SRC meetings. – SRC will make recommendations on recruitment strategies for providers	– Recommendations from the RLT and SRC. (by June 30, 2009) – Data gathered for baseline (FFY 2009): ▪ Number of events ▪ Attendance by members of targeted groups. – Survey tool designed. – SRC will provide at lest 3 new educational programs at SRC meetings. –
Year 2	*Implement appropriate recommendations.*	– *Increase educational opportunities. (Goal will be based on Year 1)* – *The creation of new educational events or strategies. Goal: 2 new events*
Year 3	*Continue with implementation of educational efforts.*	– *Increase educational opportunities. (Goal will be based on Year 1)* – *The creation of new educational events or strategies. Goal: 1 new event*

(e) *Continue to enhance the functionality of the DVR website and ensure it provides current and appropriate information.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– Evaluate the recommendations from marketing consultation vendor (Shift) concerning new website: ▪ One-stop shop for employers ▪ Candidate profiles ▪ Job postings ▪ Disability awareness – Provide input into consumer survey tool [Goal 1, Strategy (b)] which will help to gather data on enhancements	– DVR will develop a marketing plan, based on the recommendations from the marketing consultant. (by December 31, 2008) – Consumer survey tool designed, which includes section to provide data on enhancements to the website. (by March 31, 2009) – On-line feedback feature available on DVR website.

	to the current DVR website. – Provide an on-line option for website users to provide feedback on the website to DVR. – Provide method for gathering website statistics. (i.e. number of hits, etc.)	– Ability to capture website statistics.
Year 2	– *Implement the DVR Marketing plan.* – *Based on results of consumer survey and on-line feedback, pilot enhancements to the DVR website (which could include translation of some information into ASL).*	– *Marketing plan implemented* – *Increase the overall number of employers of DVR consumers. (Baseline based results from Year 1)* – *Initiation of Pilot for new features on the current DVR website.*
Year 3	– *Continue with implementation the DVR Marketing plan.* – *Evaluate results of the feature piloted on the website. Make additional updates as recommended by DVR's RLT.*	– *Increase the overall number of employers of DVR consumers. (Baseline based results from Year 2)* – *Website updated.*

(f) *Enhance the quality of DVR's outreach strategy and materials for employers.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– Evaluate the recommendations from marketing consultation vendor (Shift) based on three objectives: ▪ Build an awareness of DVR among primary target audience of Colorado employers ▪ Increase Colorado employers understanding of the DVR mission ▪ Attract new Colorado employers	– DVR will develop a marketing plan, based on the recommendations from the marketing consultant. (by December 31, 2008)
Year 2	*Implement the DVR Marketing plan.*	– *Increase the overall number of employers of DVR consumers. (Baseline based results from Year 1)*
Year 3	*Continued implementation of the DVR Marketing plan*	– *Increase the overall number of employers of DVR consumers. (Baseline based results from Year 2)*

Other overall Indicators will be to maintain or increase:

- Number of applicants determined eligible for DVR services.
- DVR's application acceptance rate.
- Number of community educational initiatives conducted by DVR or in which DVR staff participates to increase visibility and public awareness of programs and services.

Goal #3 - Improve the quality and availability of providers from whom DVR purchases services.

Strategies:

(e) *DVR will develop and conduct an on-going consumer survey to measure the quality of services provided by DVR vendors.*

Timelines	*Tasks*	*Measures of Success*
Year 1	Design processes and tools to be used in the surveys.	Survey tool for on-going consumer survey designed.
Year 2	*Implement survey process and analyze results.*	*Survey will be conducted and results analyzed. From the results a baseline will be established.*
Year 3	– *Continue to implement surveys, analyze results and compare with results from previous year.* – *Set goals for next year.*	*Increase in DVR staff and consumer satisfaction with the services provided by vendors from whom DVR purchases Services. (Goals will be determined after baseline is established.)*

(f) *DVR will review and update provider standards and qualifications.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– DVR (Fee Schedule Committee) will review provider standards and qualifications and make recommendations: ▪ If they need to be revised; and if so ▪ How the provider standards and qualifications with be revised. – The RLT will review the recommendations and approve appropriate changes to the Fee Schedule and/or other changes.	– Recommendations for revisions to provider standards and qualifications by June 30, 2009. – Recommendations will be implemented.
Year 2	Implement approved changes.	Fee Schedule revised based on approved recommendations.
Year 3	*TBD based on results of survey*	*TBD based on results of survey*

(g) *DVR will review and refine procedures for recruitment and registering of providers.*

Timelines	*Tasks*	*Measures of Success*
Year 1	Evaluate the Evaluate current registration and recruitment process for vendors to become DVR providers.	Procedures documented and steps analyzed.
Year 2	*Identify possible changes to the provider recruitment and registering procedures and make recommendations for improvement.*	*Recommendations made.*
Year 3	*Implement changes to the procedures.*	*Timelines for provider recruitment and registering procedures will be improved. (Goal TBD based on Years 1 and 2)*

(h) *DVR will provide training for vendors who interact with DVR consumers.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– Develop (or modify) training curricula targeted to vendors: ▪ DVR ethics, processes and expectations; and ▪ disability awareness – Identify potential vendors to be trained. – Plan for vendor training.	– Training curricula for vendors developed and ready to go. – Training for vendors included in FFY 2010 Training plan.
Year 2	*Provide Training*	*Train vendors using new curriculum (Goal TBD)*
Year 3	*Provide Training*	*Train an additional vendors using new curriculum. (Goal TBD)*

Other overall Indicators will be to maintain or increase:

- Number of vendors receiving DVR trainings.
- Number of new providers.
- Increased customer satisfaction in services provided by vendors.

Goal #4 - Improve DVR's ability to maintain a full and competent staff.

Strategies:

(d) *DVR will explore the opportunity to expand the job classification series for rehabilitation counselors.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– Develop Task Force to work with Human Resources (HR) to investigate state process for expanding job classifications – Task force will recommend to the RLT the number of new classifications, as well as the descriptions of the new classifications.	– Task Force in place by November 30, 2009. – Task Force Recommendations to RLT by August 31, 2009. – Expanded job classification series for rehabilitation counselors implements for State FY 2011
Year 2	*Working with HR, RLT will review the recommendations and implement as appropriate.*	*Expanded job classification series for rehabilitation counselors implement for State FY 2011.*
Year 3	*Staff will begin moving into expanded job classifications for DVR Counselors.*	*A percentage (TBD) of DVR counselors will have moved into new job classifications.*

(e) *DVR will explore and implement an automated case management system.*

Timelines	*Tasks*	*Measures of Success*
Year 1	– Contract with a vendor for a vocational rehabilitation case management system. – Begin working on customization of new system.	Signed contract with vendor of automated case management system.
Year 2	– *Convert existing data into the new case management system.* – *Develop training curriculum for new case management system.*	– *Data from 911systems has been converted.* – *Training curriculum has been developed.*
Year 3	– Train staff in new system – Roll-out of new system statewide	– *All staff have been trained in new system.* – *All DVR counselors and appropriate staff will be using a new electronic case management system.*

(f) *DVR will provide skill development opportunities for staff.*

Timelines	*Tasks*	*Measures of Success*
Year 1	DVR will conduct a Training Needs Assessment	
Year 2	*DVR will provide training opportunities based on the results of the Training Needs Assessment*	*75% of staff agree or strongly agree the training they received has a positive impact on their ability to perform their daily job functions.*
Year 3	*DVR will provide training opportunities based on the results of the Training Needs Assessment*	*75% of staff agree or strongly agree the training they received has a positive impact on their ability to perform their daily job functions.*

Other overall Indicators will be to maintain or increase:

- Ratio of filled to vacant full-time FTE's.
- Average amount of time it takes to fill a vacant DVR position.
- Percentage of all staff departures due to reasons other than retirement.
- Number of staff who have received Continuing Education Credits.

Use of Title I Funds for Innovation and Expansion Activities

Support of the State Rehabilitation and State Independent Living Councils

The Division of Vocational Rehabilitation values and appreciates the collaborative efforts of both the State Rehabilitation Council (SRC) and the State Independent Living Council (SILC). This positive collaborative working relationship has resulted in valued input and contributions to help DVR staff develop goals and priorities as well as strategies to meet the needs of individuals with disabilities as identified in the comprehensive needs assessment. In addition, the SRC is actively involved on an ongoing basis any time that DVR revisits and updates its service delivery policies and procedures. In 2008, DVR will continue to use Title I funds for innovation and expansion to provide staff support and to pay for the operating, travel, and per diem costs of members of the SRC and the SILC.

Support the Business Outreach Program

The Business Outreach Program was launched in July 2007 A key concept of the program is the recognition that the Division of Vocational Rehabilitation has two customers—eligible people with disabilities (consumers), and businesses and organizations who require employees for their operation. This is a very important concept to develop into the on-going operations and service delivery for DVR.

The business outreach team is responsible for learning about the business operations, concerns and needs of DVR's business customers, so DVR can refer appropriate and qualified consumers for employment. With this information, it will increase the likelihood that a DVR consumer will be hired, or in other words DVR will complete a "sale." The benefit for DVR's business customer who hires a DVR consumer is they gain a dependable employee who assists them stay profitable or more efficient in their operation. When a DVR consumer goes to work, they become more independent and also contribute to the tax base of Colorado.

In addition to providing businesses and organizations with a pool of qualified candidates for employment, the business outreach team will educate business customers and communities about DVR's mission. One effective way of doing is through disability awareness events to increase people's awareness of people with disabilities. Other customer service vehicles that DVR can use are consultative services such as job analysis, job retention, the Americans with Disability Act (ADA) training, and assistive technology.

Through all these free services to businesses and organizations, the ultimate goal is for the individual Business Outreach Specialists to develop long-term working relationships within the local business community which will result in multiple placements for consumers over time. These services will also keep Colorado businesses profitable and make the Colorado economy stronger.

The following conventions or abbreviations have been used throughout the document:

Year 1 – Federal Fiscal Year (FFY) 2009 – October 1, 2008 – September 30, 2009
Year 2 – Federal Fiscal Year (FFY) 2010 – October 1, 2009 – September 30, 2010
Year 3 – Federal Fiscal Year (FFY) 2010 – October 1, 2010 – September 30, 2011

(Years 2 and 3 are in italics, because those Measures of Success may be modified based on various results from Year 1.)

RLT - Division of Vocational Rehabilitation - Rehabilitation Leadership Team
SRC - State Rehabilitation Council

To Carry Out Outreach Activities to Identify and Serve Individuals with the Most Significant Disabilities Who are Minorities

The Colorado Division of Vocational Rehabilitation (DVR) is committed to assuring the availability and effectiveness of vocational rehabilitation services for diverse ethnic groups. As evidenced by the following table, our outreach to ethnic communities has been effective. The population groups of DVR applicants and of individuals Successfully Rehabilitated closely mirrors the population group's representation in the general population.

Ethnic/Racial Distribution
Colorado Division of Vocational Rehabilitation and Colorado's Population

Ethnic Group	Individuals Served SFY 2007	Individuals Successfully Rehabilitated SFY 2007	Colorado Population
White	70.7%	73.0%	73.9%
Hispanic	18.8%	18.4%	19.5%
African American	8.5%	6.5%	4.1%
Native American	2.4%	2.2%	1.1%
Asian/Pacific Islander	1.4%	1.7%	2.7%
	101.8%*	101.8%*	101.3%*

Source: Division of Vocational Rehabilitation individuals served and persons successfully rehabilitated between July 1, 2006 and June 30, 2007 and 2000 U.S Census Bureau.

* Because of a major change in census and other reporting tools, people can now choose multiple categories of Ethnic Groups; therefore the totals are over 100%.

Although the Division of Vocational Rehabilitation is serving diverse ethnic groups in close proportion to their incidence in the general population, DVR continually strives to further identify and increase outreach to ethnic groups, including those with the most significant disabilities, and to improve the quality and effectiveness of service provision. However, rather than develop special programs and processes which focus exclusively on individuals from minority backgrounds who have most significant disabilities, DVR implements strategies to increase outreach and service effectiveness to all individuals within an ethnic group, regardless of significance of disability. DVR believes that this approach assures outreach to persons with most significant disabilities from minority groups without de-emphasizing outreach to all persons with disabilities from minority groups.

DVR continues to believe that one of the most effective strategies to assure adequate outreach and service provision to individuals with disabilities, including those with the most significant disabilities from diverse ethnic groups, is to employ staff from ethnic groups and/or staff who can communicate with individuals in their native languages, when necessary. This is even more important for individuals with most significant disabilities whose vocational rehabilitation typically requires more intensive interactions with counselors. In order to assure that staffing is appropriate to meet special communication needs of individuals with disabilities, including those with most significant disabilities from ethnic backgrounds, staffing patterns and consumer populations are routinely reviewed to ensure that personnel who are bilingual and/or who are of ethnic backgrounds are available to communicate with consumers.

Recruitment, preparation and retention of qualified personnel, including those from ethnic backgrounds, are on-going activities. The Division of Vocational Rehabilitation recruits counselor interns from university programs where internships are a requirement for graduation. Selection of interns from diverse ethnic groups, when available, is a priority. Recruitment announcements for staff vacancies are shared with community agencies and organizations that provide services to ethnic groups as well as with the Rehabilitation Counseling Program and RRCEP at the University of Northern Colorado, and other institutions of higher education. Further efforts to solicit applications from individuals from ethnic backgrounds include job announcements that are posted on the Internet.

The largest ethnic minority group in Colorado consists of individuals who are Hispanic or Latino; in fact, this population now makes up 18.8% of individuals served by . Therefore, it is critical for DVR to assure adequate service delivery staff members are available that can speak Spanish. At the present time, approximately 50% of the district offices have at least one staff member who speaks fluent Spanish. All offices have no- or low-cost translating resources readily available to assist with communication when necessary. In recent years DVR has upgraded the telephone system within field offices to include multi-line capability. This technology enables staff members to connect up to two outside lines together permitting three-way calling. DVR is developing a list of offices with staff members who are English/Spanish bilingual so that offices lacking a staff member who speaks Spanish, but receives a telephone call from a monolingual Spanish speaking individual will be able to connect to an office with a bilingual staff member who will serve as an interpreter. This will eliminate the need for monolingual Spanish speaking individuals to have to call back or wait for a bilingual staff member to call them back.

From a statistical perspective DVR believes we have demonstrated that our current outreach efforts are adequately addressing the needs of ethnic and racial minority groups with the most significant disabilities. Despite this, DVR is committed to being attentive and active in identifying cooperative and collaborative relationships that will facilitate the awareness of DVR service delivery options to individuals with the most significant disabilities who are minorities.

To Overcome Identified Barriers Relating to Equitable Access to and Participation of Individuals with Disabilities in the State Vocational Rehabilitation Services Program and the State Supported Employment Services Program.

Comparison of DVR's caseload data to Colorado's population characteristics as well as analysis within disability groups does not suggest that equitable access to the vocational rehabilitation services or the supported employment services programs is a problem in Colorado. However, it is an important issue and can always be improved upon. Pursuant to this, DVR has established the following specific goals and strategies concerning access to our programs.

Barrier #1

DVR would like to expand the availability and ease of access for consumers to information about the existence of the agency, its purpose, eligibility, services, and locations of DVR offices, in order to identify and serve individuals with disabilities who have been unserved or underserved by the VR program.

Strategy

1. **DVR will continue to update its website with the goal of developing a user-friendly, accessible site for potential and current DVR consumers, employers, and providers, which provides current, simple, and appropriate information. The updated website will provide, amongst other things, information about DVR's application process, eligibility requirements, services available, office locations with email links to each one, DVR's forms, steps to employment, employment tools, and information about each of our specialty programs. The improved website will be compliant with Section 508 standards, making it fully accessible to persons with disabilities. DVR will include the web-site address for DVR on printed brochures and other publications.**

2. **DVR will expand annual training regarding DVR to local school districts, BOCES, independent living centers, advocate organizations, other state and county agencies, and community service organizations. DVR will provide training to some of these entities. DVR maintains numerous desk aids for use by school personnel to increase their awareness of collaborative DVR services and to provide office contact information.**

3. **DVR will continue to take part in local community events where various service providers and public agencies provide information concerning their programs and services to the general public. DVR will use this forum to "get the word out" about the DVR program to individuals that may not necessarily be considering a public agency, as a means to obtain necessary services. DVR will continue to host Community Education Events to educate legislators and the public.**

4. **Individualized Performance Objectives on staff performance plans will continue to emphasize outreach efforts, particularly to those populations who are less likely to come to DVR on their own.**

5. **DVR will display posters in offices, which identify and describe DVR services.**

6. **DVR will update its listing with the 211 system.**

Barrier #2

The availability of adequate and accessible public transportation especially in rural areas, and in the Denver-metropolitan area, continues to be a problem for those persons served by DVR related to their ability to get to local DVR offices, to get to service locations, and to travel to places of employment.

Strategy

1. **In order to actively advocate for the needs of persons with disabilities related to transportation issues, staff of DVR will participate on the Alternative Transportation Committee. This committee provides input to the Regional Transportation District (RTD) related to Access-A-Ride services for persons with disabilities, in the Denver metropolitan area, as well as to companies that provide alternative transportation. Division staff will continue to provide input and education about the need for improved transportation options for DVR consumers.**

2. **An Orientation and Mobility Specialist for the blind will serve on the RTD Advisory Board. To address the needs of passengers who have disabilities, and help provide disability awareness training for drivers.**

3. **Counselors and supervisors will continue to make special efforts to identify employers, in rural areas who have developed specialized transportation services for their employees, and develop employment opportunities for DVR consumers with these employers.**

4. **DVR staff will help to raise public awareness of the need for adequate and accessible public transportation in rural areas for all citizens, including individuals with disabilities, to enable them to have wider options of where and when they can work. Rehabilitation Teachers for the Blind based in Denver will outreach to rural communities to work with consumers, and can provide consultation on travel accommodations and adaptive skills to enhance their ability to travel.**

Barrier #3

Need to assure on a statewide basis, the availability and use of assistive technology services and devices, as appropriate, at each stage of the rehabilitation process.

Strategy

1. DVR is committed to expanding the availability of assistive technology services and resources for all individuals with disabilities in all areas of the state, regardless of the point during the vocational rehabilitation process at which they become needed.
2. There are two Adaptive Technology Specialists who will provide support and consultation consumers and staff in the Adaptive Technology Lab based at the Denver Metro Rehabilitation Office. While there will always be one specialist available for work in the lab, the other specialist will be able to travel to outlying DVR offices to provide consultation to consumer, counselors and staff regarding assistive technology services and devices. In addition, a specialist will be available to do consultation in the field, for consumers who might have difficulty traveling to a local office.

3. DVR staff will continue to collaborate with community-based organizations to explore the development of local Assistive Technology Centers, which can provide assessment services and demonstrate devices and equipment.

In addition to working to meet the barriers identified above, in FFY 2008 Colorado implemented a new strategy to work more closely with the statewide workforce investment system to further assist individuals with disabilities. DVR has been strengthening connections with the Workforce Centers in Colorado through joint participation in meetings designed to enhance understanding of the services offered on each side. Beginning in July 2007, DVR assumed management of the Disability Program Navigators (DPNs), consisting of twenty positions located throughout the State who are housed in Workforce Centers (WFC). Their role is to act as facilitators to ensure collaboration and coordination between Workforce Center staff and DVR staff, and to increase the positive perception that people with disabilities are individuals that have abilities, who want to and can work, and can be and should be included in the trainings and other offerings available to all customers of the Workforce Centers. Specifically, they problem solve with Workforce Center staff and DVR staff regarding individual clients, act as expert resources for referrals to other community agencies and employers, offer limited service to clients waiting to get DVR services, and develop stronger networks among the WFCs, DVR and other community agencies. DVR has spent the last year incorporating the DPNs into the statewide DVR field offices. DVE staff are supervising the DPNs, who are now directly involved in working towards positive employment outcomes. The DPNs have been especially helpful in doing joint community outreach with the Business Outreach Specialists to inform potential clients about DVR services.

ATTACHMENT 4.11 (d)

Part 2: To Carry Out Outreach Activities to Identify and Serve Individuals with the Most Significant Disabilities Who are Minorities

FY 2009

To Carry Out Outreach Activities to Identify and Serve Individuals with the Most Significant Disabilities Who are Minorities

The Colorado Division of Vocational Rehabilitation (DVR) is committed to assuring the availability and effectiveness of vocational rehabilitation services for diverse ethnic groups. As evidenced by the following table, our outreach to ethnic communities has been effective. The population groups of DVR applicants and of individuals Successfully Rehabilitated closely mirrors the population group's representation in the general population.

Ethnic/Racial Distribution
Colorado Division of Vocational Rehabilitation and Colorado's Population

Ethnic Group	Individuals Served SFY 2007	Individuals Successfully Rehabilitated SFY 2007	Colorado Population
White	70.7%	73.0%	73.9%
Hispanic	18.8%	18.4%	19.5%
African American	8.5%	6.5%	4.1%
Native American	2.4%	2.2%	1.1%
Asian/Pacific Islander	1.4%	1.7%	2.7%
	101.8%*	101.8%*	101.3%*

Source: Division of Vocational Rehabilitation individuals served and persons successfully rehabilitated between July 1, 2006 and June 30, 2007 and 2000 U.S Census Bureau.

* Because of a major change in census and other reporting tools, people can now choose multiple categories of Ethnic Groups; therefore the totals are over 100%.

Although the Division of Vocational Rehabilitation is serving diverse ethnic groups in close proportion to their incidence in the general population, DVR continually strives to further identify and increase outreach to ethnic groups, including those with the most significant disabilities, and to improve the quality and effectiveness of service provision. However, rather than develop special programs and processes which focus exclusively on individuals from minority backgrounds who have most significant disabilities, DVR implements strategies to increase outreach and service effectiveness to all individuals within an ethnic group, regardless of significance of disability. DVR believes that this approach assures outreach to persons with most significant disabilities from minority groups without de-emphasizing outreach to all persons with disabilities from minority groups.

DVR continues to believe that one of the most effective strategies to assure adequate outreach and service provision to individuals with disabilities, including those with the most significant disabilities from diverse ethnic groups, is to employ staff from ethnic groups and/or staff who can communicate with individuals in their native languages, when necessary. This is even more important for individuals with most significant disabilities whose vocational rehabilitation typically requires more intensive interactions with counselors. In order to assure that staffing is appropriate to meet special communication needs of individuals with disabilities, including those with most significant disabilities from ethnic backgrounds, staffing patterns and consumer populations are routinely reviewed to ensure that personnel who are bilingual and/or who are of ethnic backgrounds are available to communicate with consumers.

Recruitment, preparation and retention of qualified personnel, including those from ethnic backgrounds, are on-going activities. The Division of Vocational Rehabilitation recruits counselor interns from university programs where internships are a requirement for graduation. Selection of interns from diverse ethnic groups, when available, is a priority. Recruitment announcements for staff vacancies are shared with community agencies and organizations that provide services to ethnic groups as well as with the Rehabilitation Counseling Program and RRCEP at the University of Northern Colorado, and other institutions of higher education. Further efforts to solicit applications from individuals from ethnic backgrounds include job announcements that are posted on the Internet.

The largest ethnic minority group in Colorado consists of individuals who are Hispanic or Latino; in fact, this population now makes up 18.8% of individuals served by . Therefore, it is critical for DVR to assure adequate service delivery staff members are available that can speak Spanish. At the present time, approximately 50% of the district offices have at least one staff member who speaks fluent Spanish. All offices have no- or low-cost translating resources readily available to assist with communication when necessary. In recent years DVR has upgraded the telephone system within field offices to include multi-line capability. This technology enables staff members to connect up to two outside lines together permitting three-way calling. DVR is developing a list of offices with staff members who are English/Spanish bilingual so that offices lacking a staff member who speaks Spanish, but receives a telephone call from a monolingual Spanish speaking individual will be able to connect to an office with a bilingual staff member who will serve as an interpreter. This will eliminate the need for monolingual Spanish speaking individuals to have to call back or wait for a bilingual staff member to call them back.

From a statistical perspective DVR believes we have demonstrated that our current outreach efforts are adequately addressing the needs of ethnic and racial minority groups with the most significant disabilities. Despite this, DVR is committed to being attentive and active in identifying cooperative and collaborative relationships that will facilitate the awareness of DVR service delivery options to individuals with the most significant disabilities who are minorities.

ATTACHMENT 4.11 (d)

Part 3: To Overcome Identified Barriers Relating to Equitable Access to and Participation of Individuals with Disabilities in the State Vocational Rehabilitation Services Program and the State Supported Employment Services Program.

FY 2009

To Overcome Identified Barriers Relating to Equitable Access to and Participation of Individuals with Disabilities in the State Vocational Rehabilitation Services Program and the State Supported Employment Services Program.

Comparison of DVR's caseload data to Colorado's population characteristics as well as analysis within disability groups does not suggest that equitable access to the vocational rehabilitation services or the supported employment services programs is a problem in Colorado. However, it is an important issue and can always be improved upon. Pursuant to this, DVR has established the following specific goals and strategies concerning access to our programs.

Barrier #1

DVR would like to expand the availability and ease of access for consumers to information about the existence of the agency, its purpose, eligibility, services, and locations of DVR offices, in order to identify and serve individuals with disabilities who have been unserved or underserved by the VR program.

Strategy

7. **DVR will continue to update its website with the goal of developing a user-friendly, accessible site for potential and current DVR consumers, employers, and providers, which provides current, simple, and appropriate information. The updated website will provide, amongst other things, information about DVR's application process, eligibility requirements, services available, office locations with email links to each one, DVR's forms, steps to employment, employment tools, and information about each of our specialty programs. The improved website will be compliant with Section 508 standards, making it fully accessible to persons with disabilities. DVR will include the web-site address for DVR on printed brochures and other publications.**

8. **DVR will expand annual training regarding DVR to local school districts, BOCES, independent living centers, advocate organizations, other state and county agencies, and community service organizations. DVR will provide training to some of these entities. DVR maintains numerous desk aids for use by school personnel to increase their awareness of collaborative DVR services and to provide office contact information.**

9. **DVR will continue to take part in local community events where various service providers and public agencies provide information concerning their programs and services to the general public. DVR will use this forum to "get the word out" about the DVR program to individuals that may not necessarily be considering a public agency, as a means to obtain necessary services. DVR will continue to host Community Education Events to educate legislators and the public.**

10. **Individualized Performance Objectives on staff performance plans will continue to emphasize outreach efforts, particularly to those populations who are less likely to come to DVR on their own.**

11. **DVR will display posters in offices, which identify and describe DVR services.**

12. DVR will update its listing with the 211 system.

Barrier #2

The availability of adequate and accessible public transportation especially in rural areas, and in the Denver-metropolitan area, continues to be a problem for those persons served by DVR related to their ability to get to local DVR offices, to get to service locations, and to travel to places of employment.

Strategy

5. **In order to actively advocate for the needs of persons with disabilities related to transportation issues, staff of DVR will participate on the Alternative Transportation Committee. This committee provides input to the Regional Transportation District (RTD) related to Access-A-Ride services for persons with disabilities, in the Denver metropolitan area, as well as to companies that provide alternative transportation. Division staff will continue to provide input and education about the need for improved transportation options for DVR consumers.**

6. **An Orientation and Mobility Specialist for the blind will serve on the RTD Advisory Board. To address the needs of passengers who have disabilities, and help provide disability awareness training for drivers.**

7. **Counselors and supervisors will continue to make special efforts to identify employers, in rural areas who have developed specialized transportation services for their employees, and develop employment opportunities for DVR consumers with these employers.**

8. **DVR staff will help to raise public awareness of the need for adequate and accessible public transportation in rural areas for all citizens, including individuals with disabilities, to enable them to have wider options of where and when they can work. Rehabilitation Teachers for the Blind based in Denver will outreach to rural communities to work with consumers, and can provide consultation on travel accommodations and adaptive skills to enhance their ability to travel.**

Barrier #3

Need to assure on a statewide basis, the availability and use of assistive technology services and devices, as appropriate, at each stage of the rehabilitation process.

Strategy

4. DVR is committed to expanding the availability of assistive technology services and resources for all individuals with disabilities in all areas of the state, regardless of the point during the vocational rehabilitation process at which they become needed. Please see Attachment 4.12 (d)(1) for DVR strategies related to the provision of assistive technology services.

5. The Adaptive Technology Specialist, based at the Denver Metro Office will travel to outlying DVR offices to provide consultation to counselors and staff regarding assistive technology services and devices.
6. DVR staff will continue to collaborate with community-based organizations to explore the development of local Assistive Technology Centers, which can provide assessment services and demonstrate devices and equipment.

In addition to working to meet the barriers identified above, in FFY 2008 Colorado is implemented a new strategy to work more closely with the statewide workforce investment system to further assist individuals with disabilities. DVR has been strengthening connections with the Workforce Centers in Colorado through joint participation in meetings designed to enhance understanding of the services offered on each side. Beginning in July 2007, DVR assumed management of the Disability Program Navigators (DPNs), consisting of twenty positions located throughout the State who are housed in Workforce Centers (WFC). Their role is to act as facilitators to ensure collaboration and coordination between Workforce Center staff and DVR staff, and to increase the positive perception that people with disabilities are individuals that have abilities, who want to and can work, and can be and should be included in the trainings and other offerings available to all customers of the Workforce Centers. Specifically, they problem solve with Workforce Center staff and DVR staff regarding individual clients, act as expert resources for referrals to other community agencies and employers, offer limited service to clients waiting to get DVR services, and develop stronger networks among the WFCs, DVR and other community agencies. DVR has spent the last year incorporating the DPNs into the statewide DVR field offices. DVE staff are supervising the DPNs, who are now directly involved in working towards positive employment outcomes. The DPNs have been especially helpful in doing joint community outreach with the Business Outreach Specialists to inform potential clients about DVR services.

ATTACHMENT 4.11 (e)(2)

Evaluation and Report of Progress in Achieving Identified Goals and Priorities and Use of Title I Funds for Innovation and Expansion Activities

FY 2009

Evaluation and Report of Progress in Achieving Identified Goals and Priorities

The Division of Vocational Rehabilitation conducts an annual assessment of the effectiveness of the program in achieving its goals. This information is used as a benchmark to review progress made year to year as related to internal performance indicators developed by DVR. Management staff uses this information to identify areas needing improvement as well as positive achievements, and to develop agency strategies and build on best practices. For Comparison Purposes Colorado DVR has provided the actual internal performance indicators for Federal Fiscal Year 2007 and projected internal performance indicators for Federal Fiscal Year 2008. .

Priority One: Increase the number and quality of employment outcomes.

Goal 1: Improve the effectiveness of DVR's service delivery process for all individuals.

Indicator	*Federal FY 2008 YTD (10/1/07 - 5/31/08)*	*Federal FY 2008 Projected (10/1/07 - 9/30/08)*	*Federal FY 2007 Actual (10/1/06 - 9/30/07)*
Total number of successful post-IPE closures	1,765	2,648	2,509
Percentage of all post-IPE closures that were closed successfully	57.9%	65.2%	63.0%

For FFY 2008 DVR is projecting to improve the number of successful post-IPE closures by 139 or 5.5 percent. The rehabilitation rate for was well above the federally required level, with a projection of 60.9% of post-IPE closures being closed successfully, We continue to see the rehabilitation rate rise as the strategies DVR put into place during FFY 2008helped DVR achieve higher levels of performance. These strategies included:

- DVR's policy manual was re-written to; reduce repetition, enhance readability, improve organizational structure and format , provide grater alignment with Federal regulations, and be a more user-friendly tool for DVR Staff. The policy manual continues to provide this functionality. Each chapter begins with a section from the federal regulations in order for staff to continue to familiarize themselves with pertinent regulations. Within each chapter and section staff are able to click on hyperlinks and directly go to the Social Security website, the Client Assistance Program website, the federal regulations website, etc. A permanent policy committee meets periodically to review and provide clarification for future policy issues. In addition, the release of the new manual provided an excellent opportunity to conduct an overall policy training that was intended to review virtually all aspects of DVR policy.
- In conjunction with the new Policy Manual DVR continues to make strides to minimize the time necessary to effectively and completely document the VR process. Therefore, during FFY 2008 DVR has continued to improve, revise and update DVR forms and will ensure that these new forms will be available to all counselors in easy-to-use electronic formats, and that all staff will have a solid understanding of the required information for all forms. Quality assurance reviews have revealed that the process of updating forms is effective in assisting counselors to provided succinct, efficient documentation for their service records and expediting the service provision process.
- DVR's internal quality assurance team has continued to conduct statewide case reviews during FFY 2008 using a team of district and regional supervisors as well as additional administrative staff. Positive and constructive feedback from these reviews were provided to each rehabilitation counselor, his or her supervisor, as well as to members of

the Field Services Management Team for continuous quality improvement discussions and continued modification of DVR documentation.

- DVR increased its accessibility across the state by opening or reopening new offices in FFY 2007 and 2008. In rural areas these offices include; Rocky Ford, Ft. Morgan, Frisco, and Edwards. Metro locations include; Aurora, Longmont and the Greenwood Village Office. The last office was opened at the end of December 2007.
- In an effort to assure the availability of needed medical services DVR maintained its commitment to set medical service fees to match those paid by the State's Worker's Compensation Division. In addition, adjustments were made in the fee structure and the payment amount allowable for selected vocational services. For Federal FY 2008 2009 DVR will continue the process of examining the feasibility of additional fee increases, as well as restructuring the schedule to allow for more flexibility in paying specialists in rural Colorado.
- During FFY 2008, DVR staff participated in a variety of training and professional development activities. These activities were designed to support the daily work of the counselors and promote the achievement of the DVR mission. Examples of the numerous training topics addressed include American Sign Language, Ethics, Traumatic Brain Injury, Supported Employment, Customized Employment, Self-Employment, the Americans with Disabilities Act, Social Security issues, Youth Transition, Job Placement, and various other topics relating to specific disabilities and steps in the VR process. In addition, the Organizational & Staff Development Unit continues to provide high quality in-house training to new staff using an established new counselor training curriculum as well as a network of lead/mentoring counselors."
- DVR has had to delay the development of the RISE application, an automated Rehabilitation Information System for Employment due to overall performance concerns with the vendor. In January 2008, DVR pulled together a team of professionals to conduct a RISE Remediation and Assessment to; 1) evaluate the current development efforts and 2) assess the on-going requirements and challenges for a successful completion of the project. DVR is now working to implement the recommendations of the Remediation and Assessment Team, by contracting with the recommended vendor to complete the software system.

Goal 2: Improve the effectiveness of DVR's service delivery process for individuals who are deaf and for individuals who have mental health needs.

Indicator	***Federal FY 2008 YTD (10/1/07 - 5/31/08)***	***Federal FY 2008 Projected (10/1/07 - 9/30/08)***	***Federal FY 2007 Actual (10/1/06 - 9/30/07)***
Percentage of all deaf or hard-of-hearing post-IPE closures that were closed successfully	70.6%	76.6%	82.4%
Percentage of all mental health post-IPE closures that were closed successfully	56.9%	64.3%	61.2%

DVR took the following steps during FFY 2008 to continue to enhance our effectiveness with these two populations:

- DVR continues in its collaboration with the Mental Health Vocational Consortium, whose purpose is to facilitate ongoing communication between DVR and the Division of Mental Health through quarterly meetings. As part of this collaborative effort, DMH and DVR conducted evaluations of services provided through Fund 7. The final report was published in September 2007 stating that the Centers were meeting their goals of numbers served and most of the Centers met their projected closures. If additional funds were available, there were Centers who wished to increase their capacity for serving more Mental Health customers. However, due to funding restrictions, all Agreements will remain at the same funding level for FY 08-09.
- The Division of Mental Health (DMH) and DVR have maintained a formal cooperative agreement to provide vocational services to individuals with the most significant mental health disabilities. This agreement represents a collaborative effort to increase access to quality vocational services and to ensure the availability of supported employment opportunities for individuals with the most significant disabilities due to mental illness. The agreement stipulates collaborative planning and coordination of services by the local mental health service organizations and rehabilitation offices to eliminate duplication of services and maximize available resources. It also contains provisions for purchase of intensive supported employment services, including transitional employment services, from DMH. Such services are only purchased from vendors approved by both DMH and DVR, such as mental health centers, clinics, and other agencies or community-based programs. However, the rehabilitation counselor and consumer are responsible for determining the appropriate services and developing the supported employment Individualized Plan for Employment.
- DVR continues to identify and support training opportunities for Rehabilitation Counselors and administrative staff focusing on mental health issues. In addition to providing basic information for staff who have limited exposure to mental illness, the training will cover topics such as Diagnostic and Statistical Manual of Mental Disorders, including desk aids and resources, personality disorders, and new treatment methods.
- In FFY 2007 DVR worked with the SRC to conduct a formal evaluation of DVR services provided to individuals who are deaf or hard-of-hearing. The SRC took the lead on hiring a consultant who was fluent in ASL and herself a member of the deaf community, to conduct a survey to gain more perspective on the sufficiency of services to these populations. The survey used three primarily methods to gather information; 1) conducting focus groups throughout the State of Colorado with individuals who are deaf or hard-of-hearing, 2) on-line survey tools, and 3) interviews with Key Informants. The "*Consumer Satisfaction Survey Results for Former Deaf and Hard-of-Hearing Clients"* was submitted to the SRC and DVR on February 18th, 2008. These results were taken into consideration in the determination of the new Goals and Priorities.
- DVR has begun using video phone technology as well as real-time captioning to enhance communication with individuals who are deaf. This technology is being used in offices where the necessary telecommunication requirements are available. DVR will continue to monitor these and other new technologies, and will make it available for use in its offices, when available and appropriate.
- DVR continues to promote the use of highly qualified interpreters for the deaf. All DVR field offices are required to set aside a portion of the operating funds in order to insure that DVR has adequate resources available for interpretation services.

Goal 3: Improve the quality of job placements for all individuals.

Indicator	*Federal FY 2008 YTD (10/1/07 - 5/31/08)*	*Federal FY 2008 Projected (10/1/07 - 9/30/08)*	*Federal FY 2007 Actual (10/1/06 - 9/30/07)*
Percentage of successful closures that are in competitive employment	92.6%.	92.6%	91.4%
Average hourly wage for successful competitive closures	$11.25	$11.35	$10.60
Average difference between weekly wages earned at application and at closure for successful competitive closures	$256.19	$260.00*	$261.92

**The average difference in weekly wages is slightly less then the previous year. The factors contributing to this slight decrease include a worsening economy combined with rising prices. These conditions have resulted in a larger number of people applying for services who already have some income and therefore the average weekly wage earned at application is higher and the corresponding difference in the average weekly wages at application and at closure was lower than last year.*

DVR has continued making progress on this goal during Federal FY 2008.

- **DVR continued to support a job placement incentive program through which counselors can be paid a bonus for job placements, with an additional bonus for exceptional wages. The Division established fee schedules that pay on milestones based on placement and production.**
- **In FFY 2007 and 2008 DVR had hired 24.0 additional rehabilitation counselors, one Job Development Coordinator in the state office who will be responsible for job development statewide and 9 additional Business Outreach Specialists. These new positions have help DVR in its efforts to improve the quality of job placements for all individuals.**
- **DVR continues to provide intensive training curriculum that focuses specifically on job development and job placement in new counselor training. This training will be repeated throughout the year to ensure that all new counselors have the opportunity to participate.**
- **DVR has been strengthening connections with the Workforce Centers in Colorado through joint participation in meetings designed to enhance understanding of the services offered on each side. Beginning in July 2007, DVR assumed management of the Disability Program Navigators (DPNs), consisting of twenty positions located throughout the State who are housed in Workforce Centers (WFC). Their role is to act as facilitators to ensure collaboration and coordination between Workforce Center staff and DVR staff, and to increase the positive perception that people with disabilities are individuals that have abilities, who want to and can work, and can be and should be included in the trainings and other offerings available to all customers of the Workforce Centers. Specifically, they problem solve with Workforce Center staff and DVR staff regarding individual clients, act as expert resources for referrals to other community agencies and employers, offer limited service to clients waiting to get DVR services, and develop stronger networks among the WFCs, DVR and other community agencies. DVR has spent the last year incorporating the DPNs into the statewide DVR field offices. DVE staff are supervising the DPNs, who are now directly involved in working towards positive employment outcomes. The DPNs have been especially helpful in doing joint community outreach with the Business Outreach Specialists to inform potential clients about DVR services.**

Goal 4: Increase the availability of consumer training intended to increase their skill in using assistive technology that allows them to more effectively participate in their rehabilitation program.

Indicator	*Federal FY 2008 YTD (10/1/07 - 5/31/08)*	*Federal FY 2008 Projected (10/1/07 - 9/30/08)*	*Federal FY 2007 Actual (10/1/06 - 9/30/07)*
Number of consumers receiving assistive technology training services through purchased services	181	272	258
Number of consumers receiving computer accessibility training services through DVR's internal training program	42	63	59
Number of vendors available to DVR for the provision of assistive technology training	108	123	123

- DVR has an internal assistive technology training unit that provides evaluations, consultations, and training on an assortment of computer-based assistive technology. In addition, WesTAC project staff collaborates individually with DVR staff on the Western Slope to educate consumers and counselors about issues relating to assistive technology evaluations and equipment. Also, in FFY 2008 one additional assistive technology position was funded, along with additional computers and assistive technology software which increases the unit's mobility and will allow for more assistive technology training to be conducted in the field.

Priority Two: Maintain sufficient organizational capacity to operate an effective vocational rehabilitation program.

Goal 1: Increase the visibility and public understanding of the Division of Vocational Rehabilitation.

Indicator	*Federal FY 2008 YTD (10/1/07 - 5/31/08)*	*Federal FY 2008 Projected (10/1/07 - 9/30/08)*	*Federal FY 2007 Actual (10/1/06 - 9/30/07)*
Number of people who apply for DVR services	5,716	8,574	7,459
Number of applicants determined eligible for DVR services	4,763	7,145	6,234
DVR's application acceptance rate	83.90%	83.9%	81.44%

	State FY 2007 (7/01/06 -6/30/07)	*State FY 2006 (7/01/05 -6/30/06)*
Number of community educational events sponsored or attended by	46	40

DVR		

If DVR continues to receive the same number of applicants it has over the past eight months, it can expect to receive approximately 8,574 new applicants during Federal FY 2008. DVR expects to determine approximately 7,145 of those applicants eligible. This 1.5 increase in the DVR acceptance rate means that the people who are applying for DVR services this year are more likely to become eligible for services, and can be at least partially attributed to the following efforts:

- During October and November of 2007, DVR conducted open houses at local Field Offices. Consumers, the public, and Colorado legislators were invited to visit a DVR office near them to learn more about the services that DVR provides.
- DVR published a "Facts at a Glance" sheet that highlighted key facts about the DVR program for 2007. These were handed out at the open houses as well as in educational forums throughout the year.
- This March, the Colorado State Rehabilitation Council (SRC) and DVR published the 2007 Annual Report, which covered the State Fiscal Year ending June 30, 2007 and summarized key accomplishments for State FY 2007. The Annual Report for State FY 2008 will be published in December 2008.
- By the end of State FY 2007, DVR will have been visible at over 46 community educational events, providing information and education about vocational rehabilitation programs and to partner with other local agencies.

Goal 2: Increase the amount of financial support received from the State of Colorado for the DVR program.

Indicator	***Financial Support*** ***State FY 7/01/07- 6/30/2008***	***Financial Support*** ***State FY 7/01/08 - 6/30/2009***
Financial support in the State Budget allocated to DVR.	$5.04 million	$5.11 million

In State Fiscal Year 2007, DVR's state funding was increased by $1.8 million dollars, effectively restoring budget cuts resulting from the State's economic downturn in previous years. In addition, DVR continues to work with other state agencies, local governments and private entities to ensure adequate third-party dollars to be used as match. Consequently, the program was able to spend its entire federal allotment for Federal FY 2007and DVR is projecting to also spend the entire federal allotment for Federal FY 2008.

Goal 3: Improve DVR's ability to maintain a full and competent staff.

Indicator	***Federal FY 2008*** ***YTD*** ***(10/1/07 - 5/31/08)***	***Federal FY 2008*** ***Projected*** ***(10/1/07 - 9/30/08)***	***Federal FY 2007*** ***Actual*** ***(10/1/06 - 9/30/07)***
Ratio of filled to vacant full time positions (average percent filled)	85%	90%	90%
Average amount of time it takes to fill a vacant position	Approximately 2.5 months	Approximately 3.0 months	Approximately 3.0 months
Percentage of all staff departures that are due to reasons other than retirement	68%	71%	75%
Average supervisory rating on the CDHS Supervisory Feedback Survey	*No longer conducted by Dept.*	*No longer conducted by Dept.*	*No longer conducted by Dept.*
Approximate number of training opportunities made available to staff	100	150	150*
Number of training attendances by DVR staff	165	250	230

**For Federal FY 2007 the State Training Conference held in September 2007 only included Administrative Professional staff and will not include all DVR staff, as was done in State FY 2006.*

DVR has undertaken the following initiatives in an effort to improve its ability to maintain a full and competent staff.

- To better understand what our employee's value in their workplace and why they leave, DVR is continuing to use a Department of Human Services exit survey to collect feedback from every person who leaves. The feedback will be used to identify trends and target areas that will help DVR design and implement system-wide change to retain top talent in the future.
- DVR's Organizational and Staff Development Unit continues to provide regular training specifically to district and regional supervisors and additional management staff at least every 2 months. Topics have included a variety of leadership and management issues, including personnel /performance topics and "*Ouch That Stereotype Hurts"*.
- DVR has developed a strong partnership with its Human Resources Department, maintaining open lines of communication. This partnership has allowed DVR to renew its waiver for hiring individuals living outside the State of Colorado.
- DVR continues to conduct focus groups with staff from all of its offices to solicit feedback about the current state of DVR and ideas for improving the work environment. The feedback received was summarized and incorporated into an action plan completed during FY 2007.
- In June of 2007, DVR established an Employee Council that will meet every other month for the purpose of providing ideas, solutions, input and other constructive information to DVR management. The Council is made up of 17 DVR employees who are not supervisors or members of management. DVR's director is present and involved at all meetings to dialogue first hand with members and to directly hear offered feedback and solutions. At the first meeting, members established the following mission statement:

"The DVR Employee Council strives to effect positive change for DVR by identifying and implementing resolution to agency dilemmas and creating an environment of empowered employees." The Employee Council has continued to meet regularly.

Performance on Standards and Indicators pursuant to Section 106 of the Rehabilitation Act for FFY 2005

For Federal FY 2007, the Division of Vocational Rehabilitation achieved successful performance on both Evaluation Standard #1 (employment outcomes) and Evaluation Standard #2 (equal access to services). The following table summarizes DVR's performance on all of the associated indicators.

Standards	***Indicators***	***Required Performance Levels***	***Colorado DVR FFY 2007 Performance***	***Colorado DVR FFY 2008 YTD Performance (10/1/07 - 5/31/08)***
#1 Employment Outcomes	(1.1	> or = to 0	+301	-744
	(1.2)	55.8%	62.98%	57.9%
	(1.3)	72.6%	91.47%	92.7%
	(1.4)	62.4%	95.03%	94.4%
	(1.5)	52.0%	49.35%	52.3%
	(1.6)	53.0%	54.30%	50.7%
#2 Equal Access to Services	(2.1)	80.0%	94.07%	94.2%

Use of Title I Funds for FFY 2007 Innovation and Expansion Activities

Sandy Total expenditures of Title I funds for innovation and expansion activities for Federal FY 2007 (October 1, 2006 through September 30, 2007) were as follows:

Support of the State Rehabilitation Council $ 20,003
Support of the State Independent Living Council $ 54,773

Support of the State Rehabilitation and State Independent Living Councils
The Division of Vocational Rehabilitation values and appreciates the collaborative efforts of both the State Rehabilitation Council (SRC) and the State Independent Living Council (SILC). This positive collaborative working relationship has resulted in valued input and contributions to help DVR staff develop goals and priorities as well as strategies to meet the needs of individuals with disabilities as identified in the comprehensive needs assessment. In addition, the SRC is actively involved on an ongoing basis any time that DVR revisits and updates its service delivery policies and procedures. In 2008, DVR will continue to use Title I funds for innovation and expansion to provide staff support and to pay for the operating, travel, and per diem costs of members of the SRC and the SILC.

Progress toward achieving goals and plans for Distribution of Title VI, Part B Funds (Supported Employment)

Typically, DVR used 100% of its Title VI-B funds for the direct authorization of supported employment services. Title I funds are also used for supported employment services provided under cooperative agreements as well as for individual supported employment programs. As identified above, DVR's policy is to assure the provision of supported employment services to all who need it and DVR uses both Title VI-B funds and Title I funds for this purpose. When Title VI-B funds are not available, DVR uses Title I funds to assure that supported employment services are not interrupted. Thus, it is impossible for DVR to separate its programmatic

supported employment plans and goals into separate components for each funding source. Rather, DVR develops programming strategies for its entire supported employment program, which includes the use of Title VI-B and Title I funds.

The following is a chart comparing the Standards and Indictors data for the consumers in Supported Employment Programs compared to all DVR consumers, during the first eight months of Federal FY 2007 (October 1 – May 31, 2008):

Standards	***Indicators***	***Colorado DVR YTD Performance (10/1/07 – 5/31/08) Supported Employment***	***Colorado DVR YTD Performance (10/1/07 - 5/31/08) All Consumers***
#1 Employment Outcomes	(1.1)	252 / 80.5%	1,765 / 70.3%
	(1.2)	58.3%	57.9%
	(1.3)	92.1%	92.7%
	(1.4)	100.0%	94.4%
	(1.5)	38.6%	52.3%
	(1.6)	27.6%	50.7%
#2 Equal Access to Services	(2.1)	102.5%	94.2%

As you can see, 100% of the consumers in Supported Employment Programs are individuals with significant disabilities, which is a large factor contributing to the lower results in Indicators 1.5 and 1.6. However, the other Indicators compare very favorably with the Indicators for all Colorado DVR consumers.

Although DVR has maintained a partnership with the Division of Developmental Disabilities (DDD) that allows Colorado's Community Centered Boards (CCB) to provide supported employment services to individuals whose IPEs require them, feedback from various sources has indicated that more could be done to ensure quality supported employment services. Therefore, DVR and DDD entered into an intra-agency agreement in order to provide joint funding to pilot expanded provision of vocational rehabilitation supportive employment services for individuals with developmental disabilities. This MOU provides funding for 6.0 Full Time Equivalency (FTE) Vocational Rehabilitation Counselors to provide vocational rehabilitation Supported Employment services for individuals with developmental disabilities who have been determined eligible and are recipients of services through the Community Centered Board (CCB) system. These six (6) FTE are housed at local Community Centered Boards (CCB) and focus on promoting successful community employment outcomes for individuals with developmental disabilities for CCBs and DVR. This pattern of services for DVR is being piloted at six (6) locations throughout the state. The intent is to measure the effectiveness of counselors providing direct services to individuals with developmental disabilities and how this impacts successful employment outcomes.

DVR continues to be represented on all local youth councils and workforce investment boards. Additionally, DVR is a member of the State Youth Council and the State Workforce Investment Committee, which is a subcommittee of the Colorado Workforce Development Council. These memberships allow DVR staff the opportunity to work with local workforce development partners to provide technical assistance, training and support as strategies, including supported employment strategies, are created throughout the state to meet the unmet needs of youth and adults with disabilities, including those with the most significant disabilities.

DVR is actively involved at both the state and local levels with Colorado Youth WINS (Work Incentive Network of Supports). This is a multi-year-year Youth Transition Process Demonstration (YTPD) funded by Social Security Administration (SSA) and awarded to the University of Colorado Health Science Center's WIN Partners. The overarching goal of the demonstration project is to remove major barriers and disincentives to work for youth, aged 14-25, who receive SSI, SSDI or CDB, in order to maximize their economic self-sufficiency and career advancement. A significant number of youth involved in Colorado Youth WINS are youth in need of supported employment services. In March 2007, DVR began providing vocational rehabilitation service information on approximately 125 individuals in Colorado who are participating in the WINS project, and the agency continues to provide this information on project-involved consumers on a quarterly basis.

Beginning in July 2007, DVR assumed management of the Disability Program Navigators, consisting of twenty positions located throughout the State who are housed in Workforce Centers (WFC). The role of the DPNS is to act as facilitators to ensure collaboration and coordination between Workforce Center staff and DVR staff, provide or facilitate vocational assessment services for consumers, reach out to employers, and to increase the positive perception that people with disabilities are individuals that have abilities, who want to and can work. Additionally, they problem solve with Workforce Center staff and DVR staff regarding individual clients, act as expert resources for referrals to other community agencies and employers, offer services to DVR clients and to individuals waiting to get DVR services, and develop stronger networks among the WFCs, DVR and other community agencies.