

Issue Brief Changes to Critical Vocational Rehabilitation Programs



The Problem

uring the 2015 legislative session, changes to critical Vocational Rehabilitation programs for persons with disabilities in Colorado will be debated - changes that will significantly impact supports and services. The question is whether to move Colorado's state and federally funded Division of Vocational Rehabilitation (DVR) and the associated programs out of Human Services and into Labor and Employment. By taking the best practices of both employment systems, Colorado could build one system that truly serves people with disabilities alongside everyone else. Success will be measured in the increased numbers of employed adults with disabilities who are working in sustainable-income positions.

Colorado has made progress in expanding employment opportunities for people with disabilities. However, the employment rate for Colorado residents with disabilities is 43.5 percent compared with a rate of 83.5 percent for residents without disabilities. People with all kinds of disabilities can succeed in the workplace but many need personal and career counseling, job training, adaptive equipment, viable job leads, and assistance with presenting their functional limitation in a way that shows the employer how productive the individual can be. Now is the time to create an integrated system where Vocational Rehabilitation counselors work together with Workforce Investment Center staff and individuals with disabilities in a team environment to create employment success across the State.

Merging employment programs could break the silos that currently exist, providing for the sharing of best practices, the creation of efficiencies in administration and training, and the creation of more employment opportunities. The long-term economic health of Colorado and its citizens requires the full participation and contributions of all residents of our State. True independence from government programs most often rests with a job! Shall we aim for an employment rate of people with disabilities that is comparable to the rate for others and how do we accomplish that goal?

To receive services, an individual must have a disability that significantly impacts his/her ability "to prepare for, secure, retain or regain employment." Therefore, any service an individual is to receive from the VR system must be connected to an ultimate employment goal.

Vocational Rehabilitation Services may include:

- Career assessment and counseling
- Job search and interview skills
- Independent living skills
- Career education and training
- Assistive technology

Vocational
Rehabilitation
is a government
success story. On
average, for every
dollar spent on
training and support
initially, people with
disabilities paid 7
dollars in state and
federal taxes when
they got back to
work.

Current Issues Facing DVR

A November 2013 audit of the Division of Vocational Rehabilitation identified pervasive problems. The audit raised questions about the Division's oversight, system of internal controls, and culture of accountability. There was a lack of program management practices to ensure that it carries out both its responsibilities under federal and state laws and its duty to taxpayers. Thus, Colorado's DVR was forced to implement a waiting list in large part due to the poor management of the program. The waiting list peaked at 6,100 persons with disabilities in February 2014. There is significant risk that federal authorities could require the State to pay back funding, particularly if questionable management practices are not immediately corrected. DVR has made efforts to shrink the waiting list in the last year, by working to take 1,000 individuals a month off the list. Given the intensity of work involved on the part of both the individual with a disability, and the DVR counselor, in securing stable employment opportunity, there is growing stakeholder concern that individuals' choices and needs are not given proper attention and instead the focus is on just getting people off the waiting list without regard to outcomes and long term success.

The organization has lacked leadership over the years as several directors have come and gone in their attempt to make the program more responsive and effective. Recent discussion has turned to reorganization of the Division; the Joint Budget Committee is sponsoring legislation to move the Division of Vocational Rehabilitation to the Colorado Department of Labor and Employment as a means to change the culture and improve the outcomes of the Division.

Moving Programs

Careful thought and advance planning must be given to effect such a change. In addition to all the services involved in DVR's employment programs, consideration must be given to where in state government will the following programs be housed:

- Independent Living Centers: There are ten Independent Living Centers in Colorado that work to ensure that every person with a disability in Colorado who wants to live independently has the resources necessary. Centers for Independent Living are community-based, cross-disability, non-profit organizations that are designed and operated under a strict philosophy of consumer control, wherein people with all types of disabilities directly govern and staff the organization.
- School to Work Alliance Program (SWAP): Serves approximately 2,500 youths per year age 16 to 25. Services include assessments, career exploration and development, job seeking skills, job placement, job coaching, and follow-along to ensure initial stability in the job for one year.
- Business Enterprise Program: Places qualified legally blind business persons to manage food service operations in federal and state government office buildings and facilities.
- Older Blind Grants: Community grants distributed to community agencies in the support of individuals 55+ who are blind.
- Traumatic Brain Injury Trust Fund:
 Established to help people with brain injury and their loved ones by assisting with accessing needed supports.

History of Vocational Rehabilitation

The Rehabilitation Program in America can trace its roots back to World War I. During that war, modern medicine allowed more injured soldiers to survive and come home with significant disabilities than ever before. But many of these men could not go back to their old jobs. The Soldiers Rehabilitation Act of 1918 introduced a new concept in disability support. Soldiers were provided not just money to live on, but training as preparation for new employment.

In 1920, Congress expanded the veteran's program to include anyone with a physical disability, not just veterans. This was the beginning of the Public Vocational Rehabilitation Program as we know it today.

World War II expanded the rehabilitation system even more. Millions of soldiers went off to war, leaving behind vacant jobs. To help fill those jobs, some amendments to the Rehab Act in 1943 expanded VR services to include people with mental illness and developmental disabilities.

There was a gradual shift in thinking about employment for persons with disabilities. Individuals began changing society's stereotypes about what people with disabilities could do. In addition to training and guidance, Vocational Rehabilitation began paying for medical interventions, such as cataract surgery that could address some individuals' functional barriers to employment. The program began to pay for equipment, such as hearing aids, wheelchairs and prosthetics. The focus was on removing the barriers to employment and improving the ability of someone with a disability to find a job.

In the 1960s, individuals eligible for VR services exploded and with it services became less individualized and flexible. The people who

needed the flexibility and individualization, those with significant disabilities, often got lost in the shuffle.

In 1973 Congress responded with a completely new Rehabilitation Act. This act directed VR to primarily serve people with significant physical or mental disabilities. In addition, counselors and consumers would now work in close partnership to individualize services. The legislation authorized grants to assist states in operating programs designed to provide vocational rehabilitation services to individuals with disabilities.

The Disability Rights movement gained strength with a focus on "community inclusion" and "consumer choice" for disability services. The VR system integrated these concepts with new amendments in 1986. For people with the most significant disabilities, these amendments shifted VR's focus away from jobs in protected places like sheltered workshops. The amendments provided supports to help people adapt to work in typical jobs out in the community.

In 1992, new amendments to the Rehab Act increased the role of the consumer in planning his or her services, mandated a set of standards and indicators for monitoring agencies, required agencies to set minimum training standards for all VR counselors, and streamlined the eligibility process.

In 1998, the Workforce Investment Act (WIA) was signed into law reforming federal job training programs and creating a new, comprehensive workforce investment system. WIA contained the Rehabilitation Act Amendments of 1998 requiring a partnership between the public rehabilitation system and other state and federal agencies and thus the Rehabilitation Act became Title Four of WIA.

The WIA was up for reauthorization in 2003 but stuck in political gridlock until 2014 when the Workforce Innovation & Opportunity Act (WIOA) was passed. Agreements were finally reached after extensive bipartisan and bicameral negotiation. The Act increases individuals with disabilities' access to high-quality workforce services to prepare them for competitive integrated employment. It requires better employer engagement and promotes accessibility.

Major highlights of recent federal legislation include:

- A number of disability agencies moving from the Department of Education to the Department of Health and Human Services, including the Independent Living Program.
- A larger role for VR as people with disabilities make the transition from school to adult life.
- Limiting the use of sub-minimum wage for persons with disabilities.
- A definition for "competitive integrated employment" as an optimal outcome.
- Enhanced roles and requirements for the general workforce system in meeting the needs of people with disabilities.
- Changes in performance measures.

In short, the WIOA will streamline and modernize the maze that was federal jobtraining programs so that workers can access the right training, immediately.

A Call to Action

The Independence Center in Colorado Springs believes that the time for much needed improvements to the State Vocational Rehabilitation system is now. One of the goals of the Disability Civil Rights movement over the past 35+ years has been to integrate services for people with disabilities into mainstream programs. We know that separate services are never equal services. We applaud the efforts to examine the programs and to determine how best to structure the administration so that programs are aligned with all labor and employment initiatives. We agree with the move to the Department of Labor and Employment, which mirrors changes that are starting to occur at the federal level.

However, we believe that careful planning and coordination needs to occur so that changes are thoughtful and purposeful. There will need to be considerable attention given to building respect and team behaviors between DVR staff and the Workforce Development staff to achieve the goal of meaningful jobs for Coloradoans with disabilities across the state. Finally, the placement of related VR programs needs to be thought about in terms of where can these programs be supported to provide their best work.

The Independence Center is one of the ten ILCs and is located in Colorado Springs. The IC serves El Paso, Teller, Park, Lincoln, Cheyenne and Kit Carson counties. In addition to providing Independent Living Services in the community, The Independence Center also operates a Home Health program, funded by Medicaid that allows us to pay for personal services in the home to prevent institutionalization.

For more information on Home Health, Independent Living and Advocacy, visit us at the-ic.org or call 719-471-8181.

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