2022
COMPREHENSIVE STATEWIDE NEEDS ASSESSMENT (CSNA)

Washington State Division of Vocational Rehabilitation

**Washington State
Department of Social
& Health Services**

Transforming lives

Division of Vocational Rehabilitation

Table of Contents

List of Tables

List of Appendices

Appendix #1: VR Customers July 1, 2021 to June 30, 2020 Compared to People with

Disabilities in Washington by County 2021

Appendix #2: Customer Survey Instrument

Appendix #3: Staff Survey Instrument

Appendix #4: Key Informant Survey Instrument

Appendix #5: WA Counties Represented by DVR Customer Survey

Appendix #6: Best Practices

Washington Division of Vocational Rehabilitation

2022 Comprehensive Statewide Needs Assessment

Introduction

Purpose

According to section 101(a)(15) of the *Rehabilitation Act of 1973, as amended* by Title IV of the Workforce Innovation Opportunity Act (WIOA) a comprehensive assessment of the rehabilitation needs of individuals with disabilities residing in the state is to be conducted jointly every three years by each state's vocational rehabilitation (VR) agency and State Rehabilitation Council (SRC) to inform the State Plan for vocational rehabilitation services.

In response to this mandate and to ensure that adequate efforts are made to serve the diverse needs of people with disabilities in Washington, The Division of Vocational Rehabilitation (DVR) contracted with the Center for Continuing Education and Rehabilitation (CCER) at the University of Washington for the purpose of jointly developing and assessing the vocational rehabilitation needs of individuals with disabilities in Washington.

The assessment was designed to be responsive to federal regulations and answer important questions about the population eligible for WA DVR services and their vocational rehabilitation needs. Information gathered for the assessment will guide WA DVR in its strategic plan and goal development for the next three fiscal years. In particular, the assessment and report are required to address the needs of (1) Individuals with the most significant disabilities; (2) Individuals with disabilities who are minorities; (3) Individuals who are unserved or underserved; and (4) Students and youth with disabilities. In addition, the assessment and

report address the vocational rehabilitation service needs of individuals with disabilities served through other components of the statewide workforce investment system as identified by those individuals and personnel assisting those individuals through the components of the system. Finally, the assessment and report address the need to establish, develop, or improve community rehabilitation programs within the state of Washington.

Description of Needs Assessment Process

CCER conducted a comprehensive assessment of the rehabilitation needs of persons with disabilities in Washington at the request of DVR. The purpose of the assessment was to provide information on met and unmet needs to incorporate into the DVR state plan as well as in the planning and quality assurance activities of the agency. This report describes the methods used and results of this research.

The WA VR needs assessment was designed in accordance with the VR Needs Assessment Guide (2009) published by the Rehabilitation Services Administration and involved sequential phases of data collection and analysis as follows:

- analysis of a variety of existing demographic and case service data relevant to individuals with disabilities,

- electronic surveys and telephone interviews conducted with current WA DVR customers and staff, and

- key informant interviews with individuals identified as knowledgeable about the needs of individuals with disabilities in the state including representatives of organizations that provide services to potential or current customers of WA DVR.

This phased approach was designed to capture both quantitative and qualitative data to describe in breadth and depth the vocational rehabilitation needs of people with disabilities in the state. The use of multiple data collection methods strengthens the validity of the needs assessment findings. Thus, the strengths of the methodology used in the WA VR needs assessment are 1) the triangulation of data from different sources, 2) the utilization of multiple methods of data collection, and 3) the integration of quantitative and qualitative data throughout the needs assessment process.

CCER conducted the needs assessment to identify the current and changing vocational rehabilitation needs of individuals with disabilities in the state of Washington. Input was solicited from a broad spectrum of stakeholders including current customers, key informants, and WA DVR staff. The data that appear in this report are relevant to the following activities:

- projecting needed services and redeployment of services,

- identifying common and unique needs of specific sub-populations,

- identifying perceived gaps in vocational rehabilitation services, and

- providing data and a rationale for the development of the State Plan and amendments to the Plan.

Limitations

All research methods are subject to limitations; therefore, it is important to highlight some of the methodological issues that may limit the ability to generalize these needs assessment findings to the population of people with disabilities in Washington.

First, the existing data utilized in this report were not originally collected to identify the rehabilitation needs of people with disabilities in Washington; as such, the analysis based upon

secondary data is speculative and the conclusions drawn are tentative. The data from these

sources are often presented as estimates. Many of these estimates have been drawn from

small sample sizes and may have substantial margins of error. In addition, the definitions of

disability vary across data sources. Some of the approaches used to define disability by these

data sources included diagnosis based, function based, and service based. Readers are

encouraged to consider their knowledge of state and systematic factors impacting the

vocational rehabilitation of people with disabilities in Washington when interpreting the

findings presented in this report. The reviews of existing data should also be viewed within the

context of the additional activities (surveys and key informant interviews) that comprised the

needs assessment.

Second, for both survey and interview methods, there is the potential for bias in the

selection of participants. The findings that are reported reflect only the responses of individuals

who could be reached and were willing to participate. Additionally, the information gathered

from participants may not represent the broader perspectives of all current and potential

stakeholders in the WA DVR program. Data gathered from customer surveys, for example, may

reflect only the needs of individuals who are already recipients of services to the exclusion of

those who are not presently served Similarly, data gathered from key informant interviews

represents a sampling of agency partners and may not reflect the full range of Washington

service providers working with individuals who have disabilities. Therefore, although efforts

were made to gather information from a variety of stakeholders in the vocational rehabilitation

process, it would be presumptuous to conclude with certainty that those who contributed to

the surveys and key informant interviews constituted a fully representative sample of all the potential stakeholders in the vocational rehabilitation process in the state.

Additional Process Details

The four major activities of this assessment included:

- A review of existing data sources for the purpose of identifying and describing the target population and subpopulations statewide.

- Electronic surveys or individual interviews with WA DVR customers in plan status served within the time frame July 1, 2020, through June 30, 2021. A total of 688 surveys were completed, including 90 transition aged customers.

- Electronic surveys of staff with 98 surveys completed.

- Key informant interviews with individuals identified as knowledgeable about the needs of individuals with disabilities in Washington. A total of 28 interviews were completed with more than 45 individuals participating.

A comparison of the common themes that emerged from the various data sources (key informant interviews, customer surveys, and staff) was conducted to validate the information gathered. The results of the surveys and interviews with customers, staff, and key informants were organized into seven categories:

- Barriers to employment for individuals with disabilities

- Services and service provision in addressing the needs of individuals with disabilities in Washington

- Unserved and underserved populations.

- Transition services to transition aged youth

- Partnerships with community rehabilitation programs (CRPs), and other agencies/organizations that serve individuals with disabilities.

- Provision of services through WorkSource to people with disabilities

- Business partnerships

Please note quotations from customers, staff, and key informants are reported as stated without any spelling or grammar changes.

Acknowledgements

Overview of Main Findings

Barriers to Employment for Individuals with Disabilities

In analyzing the collected information, a couple of themes emerge regarding barriers to employment – organizational and societal. Examples of organizational issues include high staff turnover, inconsistency in the delivery of services across the state, and the complexity of DVR's process (including Order of Selection). Societal barriers focus on infrastructure issues such as the lack of transportation in both rural and urban areas of the State. Other societal issues

include the continuing attitudinal barriers individuals with disabilities experience, especially among employers.

Customers were asked to identify how their disability affects their ability to get a job, keep a job, or advance in their career development. The top three barriers identified include work tolerance, communication, and interpersonal skills. The three primary disabilities reported by customer respondents included Autism Spectrum Disorder, Mental Health/Psychiatric disability, and Intellectual disability. Non-disability related barriers reported by customers focused on education/training, job skills, available jobs, job-seeking skills, and employer attitudes. Other notable challenges reported by customers that make it difficult to get or keep a job, or advance in a career include change in health condition and health management, COVID, the job market, and a need for flexible hours or lack of work history. Most customers (n=499; 80.6%) report DVR services are provided in a convenient location and that they are easily able to get around the DVR office building (n=445; 72.8%); however, a sizable proportion indicate they have never been to a DVR office given the change to remote services due to COVID. Almost 76% (n=466) of customers indicate they are able to use technology or equipment and just over 92% (n=567) report they are able to communicate using their own language to participate in DVR services.

The staff respondents identified three themes as barriers to achieving successful employment outcomes. These included social barriers, such as access to mental health care, society and employer attitudes, social support resources, physical/environmental barriers, family barriers, and communication. Personal barriers included severity of the disability, customer behavior, homelessness/housing, income, criminal background, and interpersonal

skills. Transportation was identified as a third major barrier by staff. DVR staff report the three main reasons customers might find it difficult to access DVR services are not knowing about or having a limited understanding of DVR services, transportation, and access to technology.

Finally, key informant participants identified some similar themes with the most frequently mentioned organizational barriers being the complexity of DVR's processes, inconsistency among staff and service delivery approaches, staff turnover, and Order of Selection. Societal barriers identified by key informants included employer attitudes and general stigma about people who have disabilities as well as the lack of reliable transportation.

Services and Service Provision in Addressing the Needs of Individuals with Disabilities Living in Washington

Service Delivery

The issue of high turnover of WA DVR staff across the state is reflected in the responses identifying timely counselor replies as a service need as well as rapid engagement with customers. In addition, key informants often reported that service delivery is inconsistent from counselor to counselor and among offices and regions, with varying interpretation and implementation of policies and rules.

Increased visibility of WA DVR was a subject mentioned by respondents, especially in rural areas of the state. Most respondents seem to understand that WA DVR has limited resources; however, in partnership with other service providers the agency might be able to increase its reach and visibility across the state.

Services

In terms of timeliness of DVR staff response and services, we asked customers to use a 4 point Likert scale of agreement ranging from "strongly agree to strongly disagree". Eighty-two percent (*n*=562) agree or strongly agree that DVR staff answered their questions, responded to their requests, and were told of changes. About 86% (*n*=541) agree or strongly agree that DVR staff provide accommodations needed to participate in DVR services, and just over 91% (n=617) agree or strongly agree that DVR staff are sensitive to their cultural background and identity. This last item received the highest rating in this area of DVR staff response and services.

DVR customers were asked to mark DVR services they have found most helpful. Customers identified VR Counseling and Guidance, Assessment, and Job Search Assistance as the most helpful employment-related DVR services. Similarly, the top three VR or related services identified by DVR staff that are most needed by DVR customers to achieve their employment goals include Vocational Rehabilitation Counseling and Guidance, Job Placement services, and Training (college or university training and Occupational/Vocational training). Overall, the quality rating of employment-related DVR services reported by customers (*n*=679) is "acceptable" with a mean score of 3.72 on a five point rating scale: 1=Very Poor, 2=Poor, 3=Acceptable, 4=Good, 5=Very Good. Described another way, DVR customers rate the quality of employment-related DVR services as very good (39%), followed by good (24%), acceptable (16%), poor (11%), and very poor (10%).

Customers were also surveyed about the quality of vocational rehabilitation (VR) counseling received. Almost 88% agree or strongly agree (*n*=600) that their DVR counselor shared information in a way they could understand. This item received the highest rating

percentage in the area of quality of VR counseling. Whereas, just over two thirds (n=457; 67.4%) agree or strongly agree that their DVR counselor helped them understand their disability and how it may affect future work. This last question received the lowest rating percentage in the area of quality of VR counseling.

The lack of transportation both in rural and urban areas seems to influence the delivery of services as well as impede customers in the pursuit of their employment goals. Overall, most respondents indicated that WA DVR is an organization with dedicated staff who do a good job of serving individuals with disabilities in Washington with the current available resources. Furthermore, 479 customers provided additional comments to improve DVR services and several key informants expressed appreciation for recent changes in leadership.

Remote Services

As a result of COVID, the delivery of remote services by WA DVR staff has needed to be creative. To assess the quality of remote DVR services, we surveyed DVR customers and staff. The majority (n=506; 74.1%) of DVR customer respondents report to have received remote DVR services. The range of customer respondents for the remote DVR service questions ranged from 412 to 450. Whereas the range of DVR staff respondents to the questions related to remote services ranged from 81 to 92. Most customer comments related to what they like about remote services – not having to travel and the ease and convenience of participating remotely. Alternatively, not seeing DVR staff or Rehabilitation Counselor in-person, including having an impersonal connection with staff, underscored what customers dislike about remote services. When DVR staff were surveyed about their experiences with providing remote services, most comments pointed to the benefits of remote services for both customers and staff, particularly

its flexibility and the ability to provide greater customer access to DVR services. Notable

drawbacks identified by staff include the challenge of getting signatures from customers, the

learning process for doing remote work, influence on customer engagement, and technology

limitations.

In examining findings where perspectives of DVR customers and staff align, both liked

having the option of remote services, but acknowledged the trade-offs. Flexibility (and having a

choice of in-person or remote services), access, and ease or convenience of remote services are

positive aspects jointly reported. The use of video conferencing (i.e., Zoom) as a virtual platform

to engage in DVR services also lines up. On the other hand, drawbacks mutually identified

include not seeing DVR staff or the vocational rehabilitation counselor (VRC) in-person or level

of customer engagement, followed by challenges to obtain customer signatures, and

technology limitations (i.e., online technical difficulties, customer access to technology,

telehealth training/skills using virtual platforms). Staff recommendations to improve remote

services include the need for electronic signature software, having up to date technology for

service delivery, electing to use the Zoom online platform, and making technology available for

customers. Given the changing nature of VR service delivery practices that may include remote

services, additional key informants suggested customers might have difficulty in accessing WA

DVR staff without having access to technology, as highlighted by this comment, *"DVR should*

work to strike the right balance between remote and in-person service delivery – have

counselors be more accessible while still being safe."

Unserved and Underserved Populations

Individuals with disabilities who are American Indian/Alaska Native and Pacific Islanders may be groups underserved by WA DVR. The existing data indicates a low percent of American Indians served by WA DVR. However, American Indians/Alaskan Native with disabilities may be served through one of the many tribal vocational rehabilitation programs available across the state. Unserved populations include refugees, migrants, and undocumented individuals. Individuals with criminal histories and individuals who do not speak English were also identified as groups who may be unserved or underserved. Recommendations for increased outreach and engagement include prioritizing diversity in policies and procedures and collaborating with community organizations who are already successfully serving these populations. The creation of specialized outreach staff who can focus on diverse communities may assist these efforts.

Almost all respondents commented on the rural nature of Washington and the difficulty in providing services with limited financial and staff resources. Along this theme, the lack of information in rural areas about WA DVR was also noted.

Transition Services to Transition Aged Youth

Most respondents indicated WA DVR has attempted to improve services to transition aged youth; however, a need for continued improvement was a theme across all respondents. According to the Center for Change in Transition (2022), there is a five-year pattern of declining participation in the areas of higher education and competitive employment by youth and young adults who had Individualized Education Programs (IEPs) in Washington state immediately following their high school experience.

In focusing on Pre-Employment Transition Services (Pre-ETS), the key informant interviews indicated that the contracting process can be prohibitive, especially the documentation process. The Transition Self-Assessment report conducted by Washington State University (2022) indicated that 73% of Pre-ETS were available across the state; however, the Pre-ETS were only provided in coordination with WA DVR less than 25% of the time. Staff and key informants identified the need for more direction from leadership in policy and collaboration with high schools, including the addition of dedicated Pre-ETS staff and Pre-ETS staff training.

Partnerships with Community Rehabilitation Programs (CRPs), and Other Agencies/Organizations that Serve Individuals with Disabilities

Most respondents across the surveys indicated a need to increase the availability of CRP services geographically, especially in rural areas. The contracting processes (including payment rates) may be deterrents to increasing CRPs across the state. Increasing training to CRP staff, along with improvement in the contracting process, might foster better relationships with CRPs and other partner organizations. In addition, increasing the availability of CRPs to provide Pre-ETS may influence improved services.

Provision of Services to Individuals with Disabilities through WorkSource

Most respondents indicate that the DVR/WorkSource relationship is good, and the co-location of DVR staff has assisted in this process. However, the quality of the partnerships is not consistent across the state. Overall, WorkSource continues to struggle with service provision to individuals with disabilities. Continued collaboration and cross training between the two organizations was recommended by most respondents.

Business Partnerships

Most respondents recommended increased employer engagement across the state. There is a perception that WA DVR should be the lead organization in educating and inspiring businesses and employers to hire and work effectively with individuals with disabilities. Woven into this theme is a better understanding and consistency of how WA DVR Business Service Specialists function across the state.

Intended Outcome of the CSNA

It is anticipated that WA DVR and the WA SRC will use this information in a strategic manner that results in the provision of vocational rehabilitation services designed to address the current needs of individuals with disabilities who seek employment. This information may also assist WA DVR in communicating and collaborating with organizations that play a role in serving individuals with disabilities throughout the state. In addition, CCER has reviewed WA DVR's 2021-2023 Strategic Plan and proposes that DVR revisit many of the action plans documented there as they appear to remain relevant, based on the findings of this CSNA. It is noted that the implementation of this Strategic Plan was likely interrupted and significantly impacted by the national and local effects of COVID and agency leadership changes.

After comprehensive data collection and analysis, CCER has identified several areas of focus for WA DVR and SRC consideration as they move forward with strategic and state planning. These include the following:

- Explore and implement innovative strategies for recruiting, hiring, and retaining high quality staff across the agency.

- Improve and simplify rehabilitation and work flow processes to better focus on customer needs and outcomes.

- Build and strengthen collaborative relationships with partners and break down silos.

- Support improved behavioral health services across the state.

- Educate and engage with employers and businesses.

- Educate and raise awareness about DVR services across the state.

Areas of focus and best practice resources are included in appendix #6.

Analysis of Existing Data

Description of Data Sources

The authors of this report conducted a review of existing data sources for the purpose of identifying and describing Washington DVR target population and subpopulations statewide. These sources include the following:

- United States Census Bureau 2020 American Community Survey (ACS) which is sent each year to a random sample of over 3.5 million households.

- The United States Social Security Administration (SSA) data published December 2020.

- Washington DVR case service data for July 1, 2021, through June 30, 2022.

Data from the ACS describes the prevalence of disability in Washington and the U.S. by various demographic factors. The ACS is a continuous data collection effort conducted by the U.S. Census Bureau used to produce annual estimates at the national, state, and local level on

the characteristics of the United States population. It replaced the decennial Census long form and collects information on an annual basis from approximately three million addresses in the U.S. Social Security Administration (SSA) data describes the number of recipients of SSI and SSDI with disabilities in Washington.

In addition, the State FY 2022 case service data was compared with the available estimates of disability. The Washington DVR data used in this section was for all cases in plan status between June 30, 2021, and July 1, 2022.

Apart from the data received from WA DVR, the statistics are estimated, which means that the numbers found in a sample are extrapolated to the entire population. The ACS data uses sophisticated statistical techniques that lead to the estimates with great accuracy. However, there are factors that complicate the interpretation of the estimates presented in this report which are an issue for all statistics from population-based surveys. These limitations include (1) statistics are based on a sample and subject to sample variation; (2) statistics based on a sample may not fully represent the total population; (3) respondents to the ACS survey may be different from those not responding.

Prevalence of Disability in Washington and the U.S.

This section examines the population estimates and demographic characteristics for individuals who have a disability in Washington and provides a comparison with national data. In identifying individuals with a disability, the ACS asks the following six questions of all ages:

1. Is this person deaf or does he/she have serious difficulty hearing? (yes or no).

2. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses? (yes or no).

3. (If a person is 5 years or older) Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions? (yes or no).

4. (If a person is 5 years or older) Does this person have serious difficulty walking or climbing stairs? (yes or no).

5. (If a person is 5 years or older) Does this person have difficulty dressing or bathing? (yes or no).

6. (If a person is 15 years or older). Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping? (yes or no).

According to 2020 ACS estimates, 12.7% of the population reported a disability in Washington, which is the same percentage reported in the U.S. (12.7%). As indicated in Table 1.1, the percentage of males with a disability in Washington (12.8%) is slightly higher than the corresponding national percentage (12.5%) while the percentage of females with a disability (12.7%) is the same as the corresponding national percentage (12.7%).

Table 1.1 Prevalence of Disability by Gender among Civilians Living in the Community for

Washington and the U.S. in 2020

Prevalence of disability by gender among civilians living in the Community for Washington and the US in 2020

	FEMALE		MALE
Number in US	164,384,752		157,140,289
Number in US pop. w/disability	21,066,789		19,719,672
% in US pop. w/disability	12.8%		12.5%
Number in Washington	3,726,467		3,671,465
Number in Washington pop. w/disability	472,972		468,855
% in Washington pop. w/disability	12.7%		12.8%

Source: U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates. (2020).

Image description: Number in US Female 164,384,752; Male 157,140,289. Number in US population with disability Female 21,066,789, Male 19,719,672. Percentage in U.S. population with disability Female 12.8%, Male 12.5%. Number in Washington Female 3,726,467, Male 3,671,465. Number in Washington population with disability Female 472,972, Male 468,855. Percentage in Washington population with disability Female 12.7%, Male 12.8%. Source: U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates. (2020).

Table 1.2 compares the prevalence of disability for Washington and the U.S. by age. The prevalence of disability by age in Washington is similar to the percentages in the U.S. in all age ranges except the age range 18-34. The percentage of individuals living in Washington with a disability, ages 18-34 (1.6%) is slightly higher than the U.S. population (0.65%).

Table 1.2: Prevalence of Disability by Age for the U.S. and Washington in 2020

Prevalence of disability by age
for the US and Washington in 2020

Age	5 and under	5 to 17	18 to 34	35 to 64	65 to 74	75+
US Percent pop. w/disability	0.6%	0.56%	0.65%	4.7%	24.4%	48%
Number in US pop. w/disability	136,688	3,029,868	4,865,509	15,365,708	7,359,873	10,028,815
Washington percent pop. w/disability	0.6%	0.6%	1.6%	4.7%	24.6%	48%
Number in Washington w/disabilit	2,971	66,566	124,714	354,280	172,753	220,543

Source: U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates. (2020).

Image description: For ages 5 and under, U.S. percent population with disability 0.6%, number in U.S. population with disability 136,688, Washington percent population with disability 0.6%, number in Washington with disability 2,971. For ages 5 to 17, U.S. percent population with disability 0.56%, number in U.S. population with disability 3,029,868, Washington percent population with disability 0.6%, number in Washington with disability 66,566. For ages 18 to 34, U.S. percent population with disability 0.65%, number in U.S. population with disability 4865,509, Washington percent population with disability 1.6%, number in Washington with disability 124,714. For ages 35 to 64, U.S. percent population with disability 4.7%, number in U.S. population with disability 15,365,708, Washington percent population with disability 4.7%, number in Washington with disability 354,280. For ages 65 to 74, U.S. percent population with disability 24.4%, number in U.S. population with disability 7,359,873, Washington percent population with disability 24.6%, number in Washington with disability 172,753. For ages 75+, U.S. percent population with disability 48%, number in U.S. population with disability 10,028,815, Washington percent population with disability 48%, number in Washington with disability 220,543. Source: U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates. (2020).

Prevalence of Disability by Race and Ethnicity in Washington and the U.S.

Table 1.3 illustrates the prevalence by race/ethnicity and disability in Washington and

the American Community Survey, 2021. The prevalence of disability in Washington is higher

Washington is higher than the U.S. in three categories, White, Native American, or Alaska Native, and Asian. The prevalence of disability for White Washingtonians (14.8%) is higher than in the U.S. (14.0%). The prevalence of disability for Washingtonians who identify as Native Americans/Alaska Native (17.4%) is higher than in the U.S. (15.1%). The prevalence of disability for Washingtonians who identify as Asian (8.1%) is slightly higher than in the U.S. (7.8%). The percentage of Washingtonians who identify as Hispanics with a disability (8.1%) is lower than the percentage of Hispanics with a disability in the U.S. (9.9%).

Table 1.3: Prevalence of Disability by Race or Ethnicity for Washington and the U.S. in 2021

	Washington		U.S.	
	Percent of population w/ disability	Count	Percent of population w/ disability	Count
White/Non-Hispanic	14.8%	727,909	14.0%	27,977,988
Black/African American	12.2%	35,904	14.5%	5,625,930
Native Am. or Alaskan Native	17.4%	16,871	15.1%	468,498
Asian	8.1%	58,804	7.8%	1,480,323
Native Hawaiian & Other Pacific Islander	10.2%	5,411	12.9%	77,318
Other	9.0%	39,281	9.7%	2,291,341
Hispanic/Latino Origin	8.1%	94,963	9.9%	6,139,680

Source: United States Census Bureau American Community Survey, Public Use Microdata Sample, 2021, which is subject to sampling variation.

[1]

[1] An unintentional error was made in the data reporting in the first release of this document. The error has been corrected and the outcomes of the research are not compromised.

Employment Rates

Table 1.4 compares the employment rates for individuals ages 18-64 who report a disability in Washington by race, ethnicity, and gender. The data for Native American/Alaska Native and Native Hawaiian and Other Pacific Islander is not available. In addition, this table shows the employment gap between individuals with and without disabilities. The employment gap is the difference in the percentage of individuals with and without disabilities who are employed.

The employment rates for people with disabilities in Washington is higher in most instances than the employment rates in the U.S., likely due to the stronger state economy. The employment gap is slightly higher for non-Hispanic Asians with disabilities living in Washington (32%) than the employment gap for non-Hispanic Asians with disabilities in the U.S. (30%) and Hispanics with disabilities living in Washington (36.5%) compared to the U.S. (32.8%). The employment gap is less for non-Hispanic black individuals with disabilities (33.4%) than in the U.S. (40.3%).

Table 1.4: Employment Gap - Individuals with Disabilities Ages 18 to 64 Years Living in the Community for Washington State and the U.S.: 2020

	Employment Rate Washington				Gap (% pts) **	
	Disability		No Disability		WA	US
	Number Employed	Percent	Number Employed	Percent		
Non-Hispanic White	142,665	38.7%	2,090,740	77.2%	38.5%	39.1%
Non-Hispanic Black	9,921	40.2%	123,571	73.6	33.4%	40.3%
Non-Hispanic Asian	10,985	43.7%	353,563	75.7	32%	30%
Non-Hispanic Other	20,003	36.5%	227,498	70.9	34.4%	36.8%
Hispanic	22.419	39.5%	545,906	76.4	36.5%	32.8%
Male	108,423	40.7%	1,718,286	80.9	40.1%	41.1%
Female	97,570	37.1%	1,493,991	71.7	34.6%	34.9%

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Supplement: 2021 (Tables 3.21-3.66). Durham, NH: University of New Hampshire, Institute on Disability. Note: Authors' calculations using the U.S. Census Bureau American Community Survey, Public Use Microdata Sample with Experimental Weights, 202, which is subject to variation.
** The difference in percentage points ages 18 to 64 with and without disabilities who are employed.

In looking at employment rates for selected disability groups (Table 1.5), the percentages are slightly higher than the U.S. rates. For individuals with a hearing disability ages 18 to 64 the employment rate is 55.9% in Washington compared to the U.S. (52%). For individuals with a cognitive disability, the employment rate in Washington is 29.6% compared to 29.1% in the U.S. and for individuals with a vision disability the employment rate in Washington is 46.9% compared to 45.5% in the U.S.

Table 1.5: Employment Rates for Individuals with Hearing, Vision, and Cognitive

Disabilities 18-64 in Washington Living in the Community, 2020

	Washington		US	
	Percent	Number	Percent	Number
With a hearing disability	55.9%	57,531	52%	2,041,592
With a cognitive disability	29.6%	77,661	29.1%	2,875,776
With a vision disability	46.9%	44,650	45.5%	1,823,152

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Supplement: 2021 (Tables 3.3-3.6). Durham, NH: University of New Hampshire, Institute on Disability. Note: Authors' calculations using the U.S. Census Bureau American Community Survey, Public Use Microdata Sample with Experimental Weights, 202, which is subject to variation.

The American Community Survey collects and reports information on the most prevalent industries and occupations for individuals with and without disabilities. ACS asks respondents about their primary job, and for those individuals who have not worked in the last five years, their most recent job. Industries are categorized based on the North American Industry Classification system (NAICS) which is a publication of the Office of Management and Budget. Table 1.6 provides a picture of civilians with and without disabilities ages 18-64 for the most prevalent occupations or industry. The percentage of people with disabilities working in the Education Service Industry in Washington is slightly higher (8.8%) than those individuals without disabilities (8.3%) and higher than people with disabilities in the U.S. (7.9%). In the Manufacturing Industry, the percentage of people with disabilities in Washington and in the U.S. is the same (9.9%) and higher than the percentage of people without disabilities (8.8%). The Retail Trade Industry and Office and Administrative Support Occupations follows the same trend. Two industries where the percentage of people with disabilities employed in Washington is less than those without disabilities and the U.S. rates are the Health Care & Social Assistance

Industry and Sales and Related Occupations. The percentages for the Health Care and Social Assistance Industry for individuals with disabilities working in Washington (12.3%) is almost 2% less than individuals with disabilities in the U.S. (14.9%).

Table 1.6: Civilians with and without Disabilities Ages 18-64 Employed by Selected Occupations for Washington and the U.S., 2020

	With Disability Washington		Without Disability Washington		With Disability U.S.	
	Percent of people/w disability employed	Count	Percent of people w/disability employed	Count	Percent	Count
Education Service Industry	8.8%	18,162	8.3%	266,568	7.9%	629,173
Manufacturing Industry	9.9%	20,405	8.8%	282,158	9.9%	791,904
Retail Trade Industry	13.5%	27,901	11.6%	373,363	13%	1,035,858
Health Care & Social Assistance Industry	12.3%	25,259	13.2%	422,982	14.9%	1,188,310
Office & Administrative Support Occupations	11.3%	23,242	9.5%	306,465	12.3%	983,362
Sales and Related Occupations	8.1%	16,783	8.5%	273,936	9.4%	747,253

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Supplement: 2021 (Tables 4.3-4.10). Durham, NH: University of New Hampshire, Institute on Disability. Note: Authors' calculations using the U.S. Census Bureau American Community Survey, Public Use Microdata Sample with Experimental Weights, 202, which is subject to variation.

Earnings

As illustrated in Table 1.7, the gap in median earnings for workers with disabilities in Washington is approximately $8,428 when compared to those without disabilities. This gap in earnings in Washington is greater than found in the U.S. which is $7,719. This data does not

include workers who did not work in the last 12 months or who worked less than full-time. As income may be skewed, the earnings are expressed by median earnings.

Table 1.7: Annual Median Earnings of Full-time Civilian Workers Ages 18-64 for

Washington and the U.S. by Disability Status, 2020

	No Disability	Disability	GAP ($)
Washington	$60,272	51,844	$8,428
U.S.	50,223	42,504	$7,719

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Supplement: 2021 (Table 5.1). Durham, NH: University of New Hampshire, Institute on Disability. Note: Authors' calculations using the U.S. Census Bureau American Community Survey, Public Use Microdata Sample with Experimental Weights, 202, which is subject to sampling variation.
*Full-time work = 35 hours or more per week.

Poverty

The American Community Survey collects information from individuals in creating statistics on poverty which is set as a dollar threshold by the U.S. Census Bureau. As shown in Table 1.8, the poverty rate for individuals with disabilities in Washington State (25.5%) is less than the U.S. rates (27.8%); however, the gap between those with and without disabilities is larger in Washington (16.3%) compared to the U.S. (15.9%).

Table #1.8: Poverty Rate for Civilians with and without Disabilities Ages 18-64 for

Washington and the U.S., 2020

	No Disability	Disability	GAP (% pts) *
Washington	9.2%	25.5%	16.3%
U.S.	11.9%	27.8%	15.9%

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Supplement: 2021 (Table 6.3). Durham, NH: University of New Hampshire, Institute on Disability. Note: Authors' calculations using the U.S. Census Bureau American Community Survey, Public Use Microdata Sample with Experimental Weights, 202, which is subject to sampling variation.

The difference in the percentage points of poverty rates between disability and no disability.

Estimating Unmet Needs: Comparison of Data to Washington Division of Vocational

Rehabilitation Service Provision

This section examines the demographic characteristics of Washington case service data

for those in plan status July 1, 2020, through June 30, 2021, and compares it to population

estimates and demographic characteristics of individuals with disabilities in Washington. As

indicated previously it is important to keep in mind individuals with disabilities may not wish to

utilize the services of WA DVR, may have disabilities that are not sufficiently severe to warrant

WA DVR services, or may voluntarily be out of the workforce. Furthermore, significant

differences between the characteristics of the WA DVR population of customers and the

characteristics of the population of people with disabilities in the state indicate that further

study beyond this report may be needed.

Estimates made by the U.S. Census in 2020 found 942,827 individuals reported a

disability in the state of Washington. In the period July 1, 2020, through June 30, 2020, WA DVR

served 15,765 individuals (not including Pre-ETS). Data from Table 1.9 indicates that the

percentage of open and closed cases during the period July 1, 2020, through June 30, 2021,

identifying as men (57%) is higher than the percentage of women served during the same

period (53%). The percentage of individuals with disabilities in Washington state is equally split

at 49.5%.

Table 1.9: WA VR Customers and People with Disabilities in Washington by Gender in 2020

	WA VR		Washington	
	Percent of open and closed cases July 1, 2020, thru June 30, 2021	Count	Percent of WA population w/disability	Count
Male	57%	9,043	49.5%	465,855
Female	42%	6,721	49.%	472,972
Does Not Wish to Identify**		1	0	0
Total	100.0%	538	100.0%	941,827

*Source: Based on data from the US Census Bureau's American Community Survey (ACS 2020) and WA DVR case service data.

Race and Ethnicity

Table 1.10 provides data on the racial and ethnic characteristics of WA DVR clients served during the period July 1, 2020, through June 30, 2021, and individuals with disabilities in the state of Washington, ages 18-64. Individuals who identified as white comprise the highest proportion of the WA DVR caseload (77%). Individuals who identify as American Indian/Alaska Native constitute a smaller proportion of the WA DVR caseload (5%) while according to ACS estimates the percentage of American Indian/Alaska Native with disabilities in Washington ages 18-64 is 18%. However, one of the Tribal Vocational Rehabilitation Programs in Washington may offer services to this population. The percentage of individuals served by WA DVR who identify as Native Hawaiian & Other Pacific Island (3%) is lower than the percent of the population with a disability ages 18-64 (11%).

Table 1.10: WA DVR Customers and People with a Disability Ages 18-64 in Washington by Race or Ethnicity in 2021

	WA DVR		Washington	
	Percent of cases served	Count	Percent of population ages 18-64 with disability	Count
White	77%	12,066	11.7%	365,221
Black/African American	10%	1,647	11.2%	21,050
Native Am. or Alaskan Native	5%	814	18.3%	10,980
Asian	5%	734	7%	25,374
Native Hawaiian & Other Pacific Islander	3%	550	11.1%	3,905
One or More (also includes individuals who did not identify race/ethnicity)	12%	1,957	8.8%	24,434
Hispanic	12%	1,911	9.6%	59,456

Source: The race and ethnicity categories in this table are adapted from the ACS 2021 and WA DVR Case Data.
2

Geographic Representation

Appendix #6: provides a full list of counties in Washington comparing WA DVR cases and cases in plan July 1, 2020, through June 30th, 2021, with ACS estimates for people in the state who reported a disability in 2020. This information might be useful in planning for future resource distribution. Table 1.11 indicates those counties with the highest percentage of WA DVR customers. The data show that a quarter of the WA DVR cases were in King County (25%), followed by Pierce (11%) and Snohomish (9.6%). According to ACS data, Thurston and Spokane Counties have the highest percentage of people ages 18-64 reporting a disability relative to the entire population (16.0%) whereas King County has the lowest percentage of people reporting a disability (10%). The percentage of the population with a disability, ages 18-64 follows a similar

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2 An unintentional error was made in the data reporting in the first release of this document. The error has been corrected and the outcomes of the research are not compromised.

pattern with Spokane and Thurston Counties with the highest rates (13.5% and 12.9%) and King

County with the lowest percentage of people with disabilities ages 18-64 (7.4%).

Table 1.11: DVR Customers July 1, 2020, to June 30, 2020, and People with Disabilities in

Washington in Selected Counties 2021

	VR Cases July 1, 2020 – June 30, 2021				State of Washington		
	% of VR Cases July 1, 2020 – June 30, 2021	Count	% of cases in plan	Count	% of population w/ disability	Count	% of population w/disability Ages 18-64
Clark	6%	931	5.8%	305	14.0%	68,958	11.5%
King	25%	3897	33.51%	1746	10.0%	216,031	7.4%
Kitsap	4.2%	656	4.47%	233	15.0%	37,781	11.8%
Pierce	11%	1762	9.8%	514	14.0%	122,382	10.9%
Skagit	1.5%	240	3.38%	176	15.0%	19,656	12.5%
Snohomish	9.63%	1519	11.02%	574	12.0%	95,970	9.3%
Spokane	9.4%	1480	5.78%	301	16.0%	95,970	13.5%
Thurston	6%	962	5.8%	302	16.0%	44,880	12.9%
Whatcom	6.4%	336	6.4%	336	12.0%	28,364	10%

**Source: Based on data from the US Census Bureau's American Community Survey (ACS 2020)
and Washington VR caseload data (2021).*

Supplemental Security Income (SSI) and Social Security Disability Benefits

The data sets used to look at recipients of Supplemental Security Income (SSI) and Social

Security Disability Benefits (SSDI) included information from the Social Security Administration

(SSA) and the Annual Disability Statistics Compendium 2021. According to SSA data sets, 51% of

individuals with disabilities 18-64 years in Washington received SSI. In looking at the WA DVR

caseload data for the period July 1, 2020, through June 30, 2021 (Table 1.12), 17% of customers at application received SSI benefits and at closure 5% of customers.

Table 1.12: WA DVR Customers July 1, 2020, through June 30, 2021, SSI Beneficiaries with Disabilities Ages 18 to 64 in Washington

WA DVR				Washington	
Percent at Application 7/1/2020 – June 30, 2021	Count	Percent at Closure 7/1/2020 – June 30, 2021	Count	Percent of disability population ages 18-64 receiving SSI	Count
17%	2965	5%	801	51%	7,310

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Compendium: 2021 (Table 12.1). Durham, NH: University of New Hampshire, Institute on Disability.
 Social Security Administration, 2021, Annual Statistical Supplement, Table 7.B.1.

Additionally, 22% of individuals with disabilities ages 18-64 living in Washington received Social Security Disability Insurance (SSDI) in 2021 (Table 1.13). WA DVR customers at application during July 1, 2020 through June 30, 2021, received SSDI benefits and at closure 4.3%.

Table 1.13: WA DVR Customers July 1, 2020, through June 30, 2021, SSDI Beneficiaries with Disabilities Ages 18 to 64 in Washington

WA DVR				Washington	
Percent at Application 7/1/2020 – June 30, 2021	Count	Percent at Closure 7/1/2020 – June 30, 2021	Count	Percent of disability population ages 18-64 receiving SSDI	Count
14%	2199	4.3%	680	22%	206,503

Source: Paul, S., Rafal, M., Houtenville, A. (2021) Annual Disability Statistics Compendium: 2021 (Table 12.1). Durham, NH: University of New Hampshire, Institute on Disability.
 Social Security Administration, 2021, Annual Statistical Supplement, Table 8.

Transition and Pre-Employment Transition Services (Pre-ETS)

Many existing data sources were provided to the research team by WA DVR for review.

Availability of Pre-Employment Transition Services

The Transition Self-Assessment Tool (TSAT) was administered by Washington State University during the 2021/2022 academic year to a representative sample of public high schools in Washington state (200 out of 538 or 37.2%). Valid and reliable data was collected from 238 individuals, mostly Special Education Teachers followed by District Special Education Directors. The TSAT results indicate the extent to which required pre-employment transition services (Pre-ETS) were made available to all potentially eligible students with disabilities in Washington state. In addition, the TSAT assessed transition services in terms of accessibility, coordination with DVR, and quality.

- 73% of the Pre-ETS were available in schools across the state. A similar percentage was reported last year.

- 26-50% of potentially eligible students with disabilities were participating in school-based transition services. Although not statistically tested, a visual and descriptive comparison suggests that more students accessed school-based transition services this year than they did last year.

- 1-25% of time, Pre-ETS provided were delivered in coordination with DVR. A similar percentage was reported last year.

- On average, the quality of Pre-ETS was perceived as neither good nor poor. Although not statistically tested, a visual and descriptive comparison suggests that the perceived quality of the transition services was higher last year.

Need for Pre-ETS and DVR Transition Services

Highline Public School has a program for disability students at the end of the school year. Right time and right services are needed. My daughter could find a job right after her school years. Thanks to DVR and Vadis - 2022 Washington State DVR customer

Several considerations arise from the TSAT results as noted in Table 1.14. First and foremost, the results substantiate an even greater need for the availability and provision of Pre-ETS, and for DVR to coordinate those services with school personnel statewide. (Poppen, 2022). A survey conducted by Seattle University between June and November 2021 affirms this finding.

Over 7000 16-to-21 year-olds responded to the survey. Each respondent had had an Individualized Education Program (IEP) when they attended a Washington State high school, and had graduated or left high school a year prior. The data revealed the following:

- When it comes to participation in higher education or employment, the respondents were outpaced by their peers, whose disability status was not reported. 27% of the respondents were in competitive employment and 21% were in other employment, compared to 80% of their peers across the country who were employed or looking for work (per U.S. Bureau of Labor Statistics).
- 17% of the respondents were enrolled in higher education (i.e,. two-year or four-year college or university), compared to 60% of their peers in Washington state

(per [Education Research & Data Center](#)). 30% of the respondents were not participating in postsecondary education or employment.

Table: 1.14 Participation of Transition-Aged Youth in Higher Education or Employment, Compared to Peers
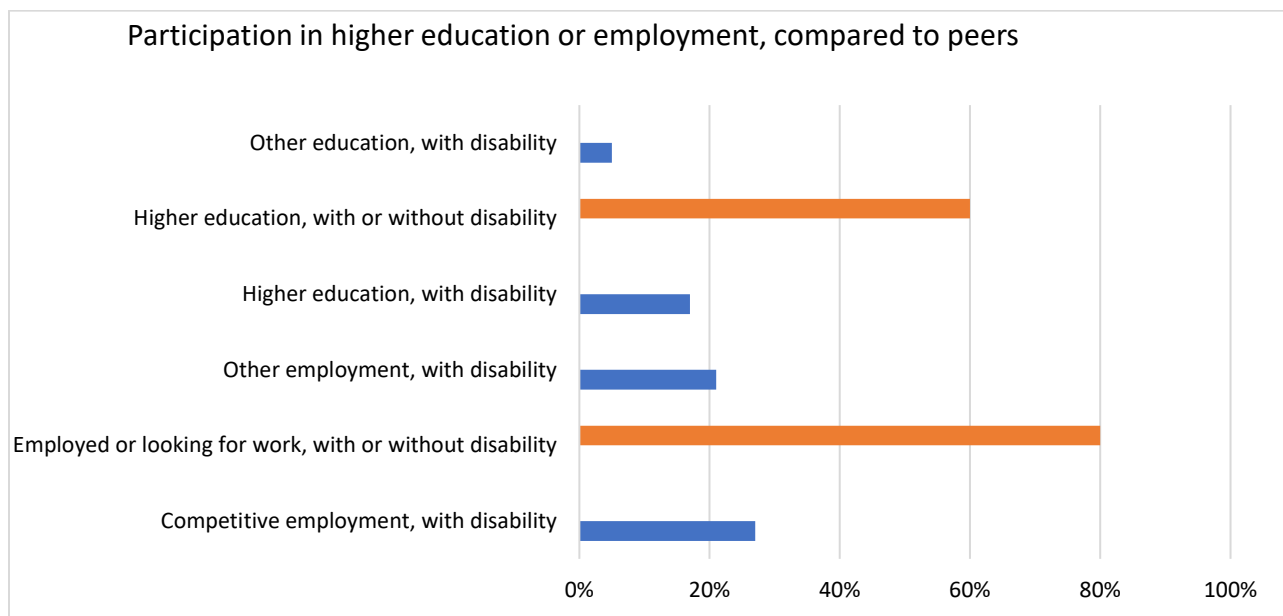
Participation in higher education or employment, compared to peers

Other education, with disability	~5%
Higher education, with or without disability	~60%
Higher education, with disability	~17%
Other employment, with disability	~21%
Employed or looking for work, with or without disability	~80%
Competitive employment, with disability	~27%

Source: Indicator B14 Post-School Outcome Report, Washington state, 2019-20 leaver year, January 18, 2022, Center for Change in Transition Services (CCTS), Seattle University

In addition, when the survey results were compared to the previous years (Table 1.15), Washington state had a five-year pattern of declining participation by youth and young adults who had IEPs in the areas of higher education and competitive employment in the year following their high school experience. In fact, these respondents reported the highest number of non-participation in education or employment in the past five years.

Table 1.15: Survey results, compared to prior surveys
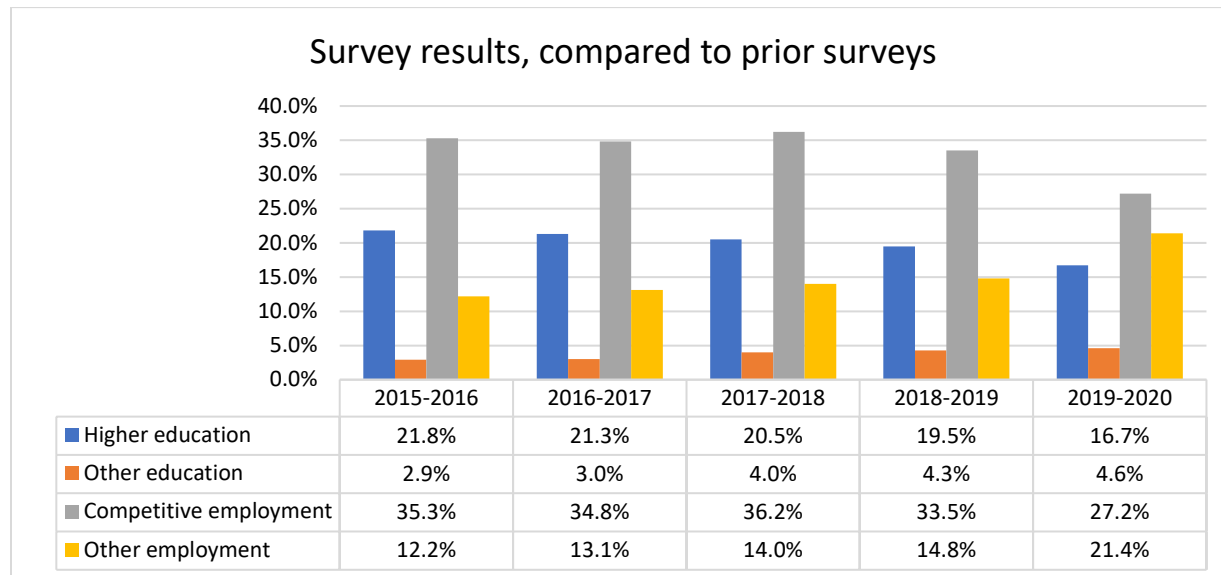
Survey results, compared to prior surveys

	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
■ Higher education	21.8%	21.3%	20.5%	19.5%	16.7%
■ Other education	2.9%	3.0%	4.0%	4.3%	4.6%
■ Competitive employment	35.3%	34.8%	36.2%	33.5%	27.2%
■ Other employment	12.2%	13.1%	14.0%	14.8%	21.4%

Source: Indicator B14 Post-School Outcome Report, Washington state, 2019-20 leaver year, January 18, 2022, Center for Change in Transition Services (CCTS), Seattle University

Based on these comparisons, it is no surprise that youth who had IEPs or received special services or Section 504 services while in a Washington state high school did not earn as much as their peers during their first year post-high school. The median earnings of those who received special services was $10.1K, compared to $13.1K earned by those who did not receive special education. The median earnings of those who had a Section 504 plan (and were not enrolled in higher education) was $12.1K compared to $12.7K ([Education Research & Data Center](#)).

Feedback from Current DVR Transition Cases

Reviewing the data from the DVR Customer Survey conducted by the University of Washington in 2022, the 14 to 21 year-old respondents gave several unique answers in comparison to the answers given by the other age groups of DVR customers.

Top three main disabilities were Autism Spectrum Disorder (49%), Intellectual disability (11%), and Learning Disability (10%). Only 7% of the group identified psychiatric disability as a main disability. This is compared to 19% of the other age groups that identified psychiatric disability as a main disability, and 16% that identified autism as a main disability.

Top three disability-related barriers that impact the ability to get a job, keep a job, or advance in a career were Communication (use formal language, spoken or sign, understand others, be understood), Self-direction (shift from task to task, solve problems, work independently), and Work skills (learn new tasks, read, write or use math skills, show reliable work habits). This is compared to Mobility (walk, change body positions, use transportation, drive), Communication (use formal language, spoken or sign, understand others, be understood), and Work tolerance (work for sustained period, lift, stand, sit, tolerate stress) reported by the other age groups.

Top three non-disability barriers to getting or keeping a job or advancing in a career were job skills , job seeking skills , and education or training/credentials ; compared to the other age groups that reported education or training/credentials (job skills, and available jobs.

Top three services received from an agency that is not DVR were high school services (Individual Education Plan (IEP) or 504 plan)**,** Social Security benefits**,** and job coaching**;** compared to Social Security, mental health, and job coaching services for the all-ages group.

Furthermore, a greater percentage of the 14-to-21 years age group praised DVR in the following areas:

- DVR staff answered my questions, responded to my requests, and told me of changes

- My DVR counselor shared information in a way I could understand

- I met with my DVR counselor for the amount of time I needed

- My plan for employment included services to meet my specific needs

Feedback from DVR Staff about Pre-ETS and Transition Services

better communication pathways between school staff and DVR staff, having dedicated DVR staff to Transition would help this issue. Be onsite at schools rather than in the office trying to manage a general caseload with some transition students. Be part of school staff trainings and meetings so that they know who we are and what we can offer so that invites to DVR staff are more consistent. - DVR staff person

According to the DVR Staff Survey conducted by the University of Washington in 2022, the most respondents rated the quality of Pre-ETS as "okay" to "excellent." Less than half of the respondents indicated that Pre-ETS were in need of improvement; and specific suggestions that were identified by multiple respondents centered on improving coordination, collaboration, and connectivity between the professional parties involved, dedicating staff to Pre-ETS work, and addressing DVR staff confusion about Pre-ETS.

More DVR staff rated transition services "okay" to "excellent." Of those that rated transition services as "needs improvement," several reiterated the suggestions that they gave for Pre-ETS. Others recommended increasing DVR's presence at schools, clarifying roles, assisting family members in their understanding of the process, and solving staffing shortages at DVR and partner agencies.

Recommendations for Pre-ETS and DVR Transition Services

> *Local high schools should have information on this program. I had no idea this existed until a friend who's (sic) daughter also had a disability told me about this program. If the local high school DO have this information, they are not doing a good job of telling parents with children with disabilities about it.* - 2022 Washington State DVR customer

As mentioned above, it is recommended that DVR make Pre-ETS and transition services more available to students with disabilities who need these services; and that DVR find ways to better coordinate Pre-ETS by partnering and supporting Pre-ETS administrators and personnel in the school systems statewide.

For its transition cases, it may be advisable for DVR to ensure that staff assigned to these cases are knowledgeable about the disabilities most prevalent in this age group (i.e. autism, intellectual disability, and learning disability). Also, DVR may find it beneficial to evaluate the gaps that DVR services could address with regards to disability-related barriers concerning communication, self-care, and work skills. Likewise, DVR could evaluate how it could better assist transition customers with mitigating employment barriers that are not disability-related, specifically in the areas of job skills, job seeking skills, and education or training/credentials.

In terms of future research, it would be helpful to address the effects of the COVID pandemic on Pre-ETS, the specific supports that administrators and school personnel believe would improve Pre-ETS, and whether patterns in the TSAT responses relate to the respondent's location in the state. (Poppen, 2022)

Customer Survey

Methods

An online survey design was used for this needs assessment to develop and administer a customer survey electronically using Microsoft Forms survey software program (Dillman, Smyth, & Christian, 2009). To summarize the data and generate findings, CCER used descriptive statistics, including mean, frequencies, and percentages. There were also several open-ended survey questions that were analyzed using reflexive thematic analysis strategies (Byrne, 2022). This approach allowed for thoughtful and reflective coding of comments and interpretative process to reduce responses into themes based on number count of customer comments (Austin, 2012). To validate and add credibility to our findings, we implemented techniques of triangulation (Patton, 1999) by identifying and discussing common findings from results and comment analyses across surveys (DVR Staff and Customer Surveys) and interviews (Key Informant Interviews), and other existing data sources.

Instrument

It is important to know the process of how we went about collecting response data from DVR customers. CCER developed and administered one online survey to DVR customers. CCER used a systematic process to develop the customer survey questions. To do this, we paid attention to being comprehensive, but also being concise in hopes to get a good response rate. CCER made sure to address RSA required areas (Shell, 2009), and important questions posed by the WA DVR and State Rehabilitation Council leadership teams during the customer survey's development. We then went through a team review process over a number of meetings, and piloted the survey with other CCER staff, knowledgeable in the field, and incorporated their

feedback following a final consensus from the CCER team of customer survey questions before its launch. Following this process, there were a total of 41 questions, including 14 demographic questions, on the final 2022 CSNA WA DVR Customer Survey.

Participants

The response rate is 14.4% [688 total DVR customer respondents/4781 customer population who received email or were randomly selected to be contacted by phone from the no-email list] for the DVR customer survey. About 73% (*n*=496) of the 688 sample were current DVR customers, and almost 27% (*n*=185) were individuals who completed the survey on a DVR customer's behalf. Another important note is that customers who responded to the survey represented 31 counties across Washington State, with most respondents from King (*n*=216), Snohomish (*n*=80), Pierce (*n*=60), Whatcom (*n*=46), Clark (*n*=36), Kitsap (*n*=35), Thurston (*n*=35), and Spokane (*n*=32) counties. See Appendix #5 for a full list of WA counties represented by DVR customer participants.

Confidentiality

An email introduction letter from the CCER team to DVR customers, included with the web link to the customer survey, described the importance and anonymity of DVR customer responses and how their response data will only be reviewed by the research team at the University of Washington.

Accessibility

The CCER team included accessibility specialists who reviewed the DVR customer survey to ensure electronic access and an alternative format, if needed, were available to participate.

Additional instructions were provided to help participants to more easily navigate the survey if using a screen reader software.

Data Collection

The CSNA Customer Survey included 41 questions and was disseminated electronically using Microsoft Forms software program. The email link to the survey was sent to current or past DVR customers who were "in plan" between July 1, 2020 and June 30, 2021. We initially sent out the customer survey in September of this year (2022) with follow up email reminders, for about a one month period of data collection. The survey was sent to all cases that were "in plan", or that had a signed individualized plan for employment, and that also had an email. To recruit customers to participate who did not have an email listed and to provide this customer population access to the CSNA Customer Survey, the CCER team made additional phone calls from a list of 94 randomly selected customers from the "no-email" list.

Completed Surveys

A total of 4781 DVR customers were sent the 2022 CSNA Customer Survey electronically or randomly selected to be contacted by phone from the no-email list to attain their perspectives regarding customer barriers to achieving their employment goals, DVR service needs, most helpful services, remote services, WorkSource, and customer perspectives about how DVR services can be improved. Six-hundred eighty eight (N=688) customers responded to the survey for a response rate of 14.4% (688/4781). Highlights of overall findings based on results and thematic analysis of customer comments who responded to the survey questions follow below.

Findings

Demographics of Respondents

To get a good idea of the background of customer samples who participated in the survey, it is important to have a fuller picture of customer demographic characteristics.

Disabilities. As presented in Table 2.1, almost 21% of respondents (n=141), described their main disability as Autism Spectrum Disorder, followed by Mental Health/Psychiatric Disability at 17% (n=117), and Intellectual disability at almost 11% (n=73).

Table 2.1: Main Disability for DVR Customer Survey Participants
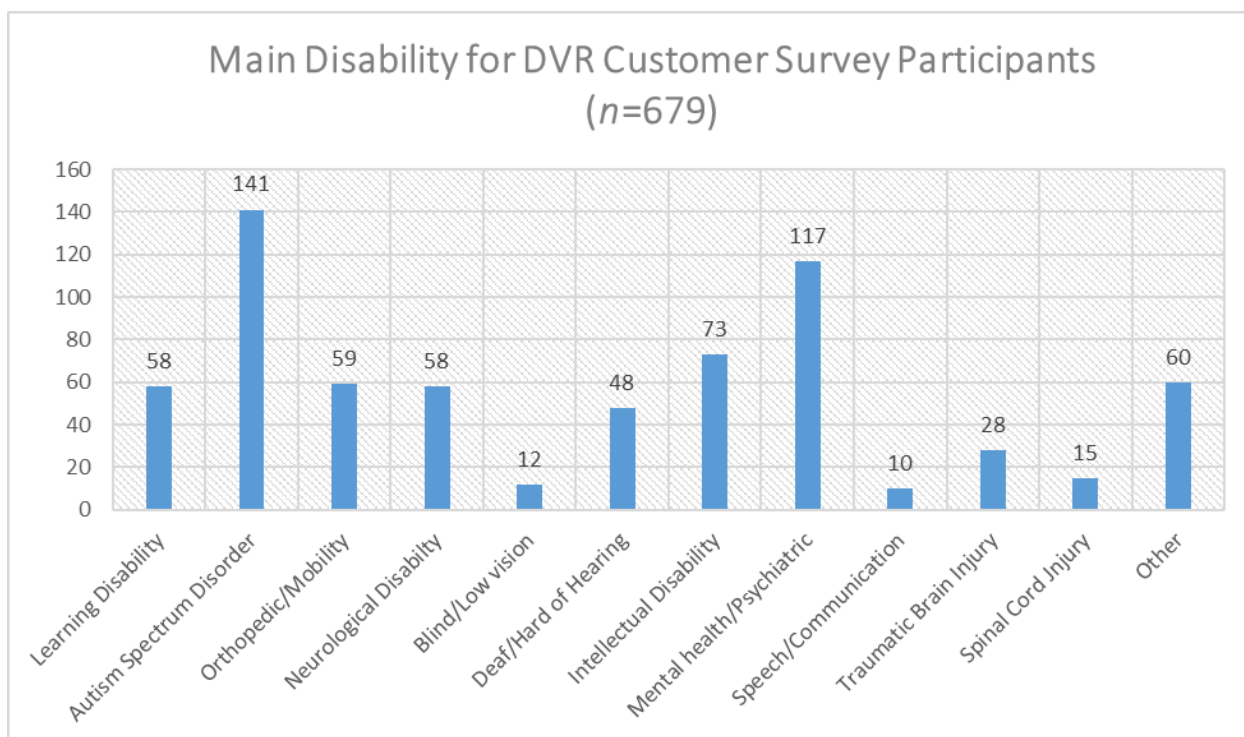
Secondary Disabilities. About 61.2% (n=411) of customer respondents report having other disabilities. The top three secondary disabilities include Mental Health/Psychiatric Disability (n=141), followed by Learning Disability (n=134), and Orthopedic or Mobility

Disability (n=102). It is also notable that many customers reported having multiple

secondary disabilities. See Table 2.2 for full description of customers' secondary disabilities.

Table 2.2: Customers' Secondary Disabilities

Customers' Secondary Disabilities

Category	Value
Learning Disability	134
Autism/ASD	48
Orthopedic/Mobility	102
Neurological Disability	53
Blind/Low vision	30
Deaf or Hard of Hearing	50
Intellectual Disability	64
Mental health/Psychiatric	141
Speech/Communication	83
Traumatic Brain Injury	19
Spinal Cord Injury	16
Other	99
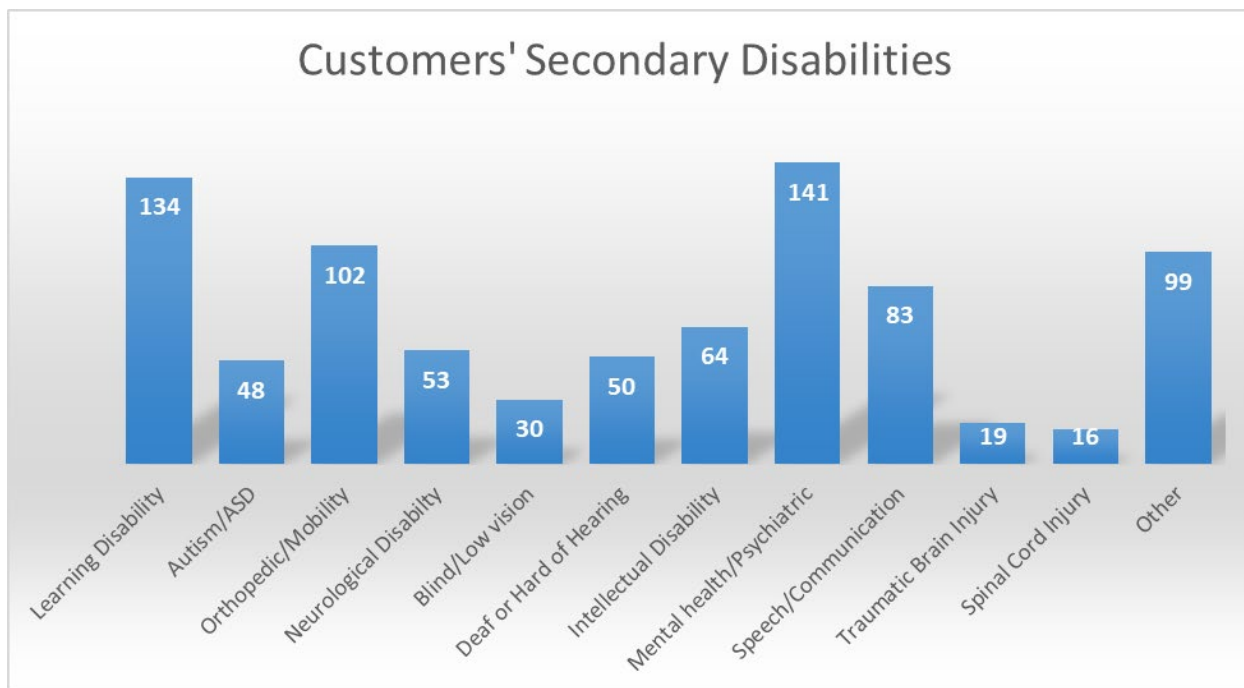
Other Demographics. About 48% (n=332) of customer respondents are female.

Most customer respondents are White/European American (n=512; 72.4%), followed by

Hispanic/Latinx (n=67; 10.2%), and Black/African American (n=61; 8.6%). There was a

relatively good spread across customer ages who participated. Customer respondents aged

50-59 responded the most (n=133; 19.4%), followed by 30-39 (n=112; 16.3%), and 40-49

(n=106; 15.4%). DVR customer respondents' gender, race/ethnicity, and age are displayed

in detail in Table 2.3.

Table 2.3: Customer Respondents' Gender, Race/Ethnicity, and Age

Gender	n = 685	%	Race/ Ethnicity	n = 707	%	Age	n = 684	%
Female	332	48.5	Black/ African American	61	8.6	14 to 21	90	13.2
Male	318	46.4	Asian	49	6.9	22 to 24	79	11.5
Non- binary	15	2.2	Native American/ Alaska Native	30	4.2	25 to 29	72	10.5
Agender	3	0.4	White/Euro American	512	72.4	30 to 39	112	16.4
Gender non-conform	4	0.6	Native Hawaiian/ Pacific Islander	9	1.3	40 to 49	106	15.4
Prefer not to say	11	1.6	Other	46	6.5	50 to 59	133	19.4
Other	2	0.3	Hispanic/ Latinx	67	10.2	60 to 69	82	12.0
						70 or over	10	1.5

Note: Hispanic/Latinx percentage is based on separate question where n=588 responded "not Hispanic/Latinx" and n=67 responded "Hispanic/Latinx".

Most customers who participated in the survey were unemployed, looking for work (*n*=228; 33.4%), followed by employed, part-time (*n*=154; 22.5%). The majority of employed customers are working 11 to 20 hours per week (*n*=76; 30.4%), followed by 1 to 10 hours (*n*=64;

25.6%), and 36 to 40 hours (*n*=57; 22.8%). For customers in the sample who are working, most

are earning at least minimum wage $14.49 to $18.99 per hour (*n*=142; 57.0%), followed by

$19.00 to $28.99 per hour (*n*=59; 23.7%). The top employer-provided benefits customers are

receiving include sick leave (*n*=96; 19.2%) and vacation leave (*n*=85; 17.0%). A notable

proportion of customers who are working indicate their employer does not provide any

benefits (*n*=94; 18.8%). Full customer employment-related information are depicted in the

following Tables (Tables 2.4, 2.5, 2.6, and 2.7).

Table #2.4: Customers' Current Employment Status
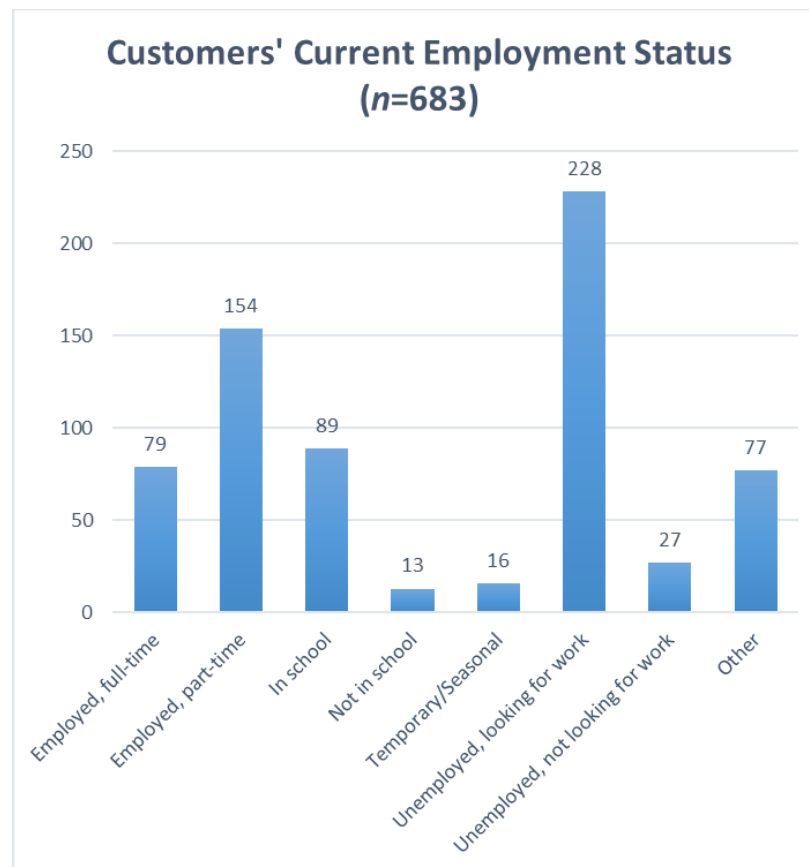
Table 2.5: Hours Employed Customers are Working

Hours Employed Customers are Working

Category	Value
1 to 10 hours per week	64
11 to 20 hours per week	76
21 to 35 hours per week	36
36 to 40 hours per week	57
41+ hours per week	17
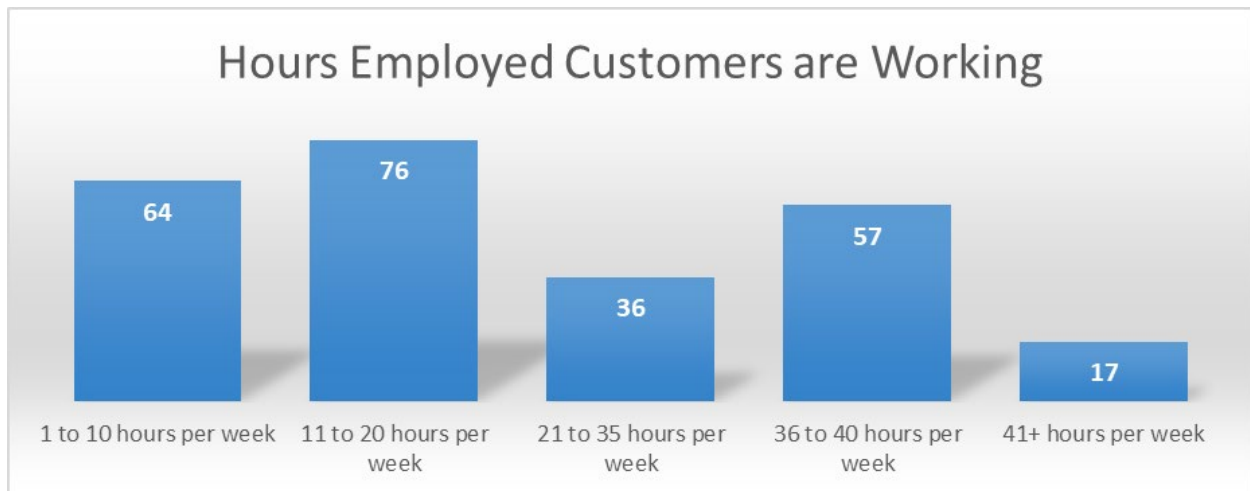
Table 2.6: Hourly Wages Customers are Earning

HOURLY WAGES CUSTOMERS ARE EARNING

Category	Value
Less than $14.49 per hour	19
$14.49 to $18.99	142
$19.00 to $28.99	59
$29.00 to $34.00	16
$35.00 or more	13
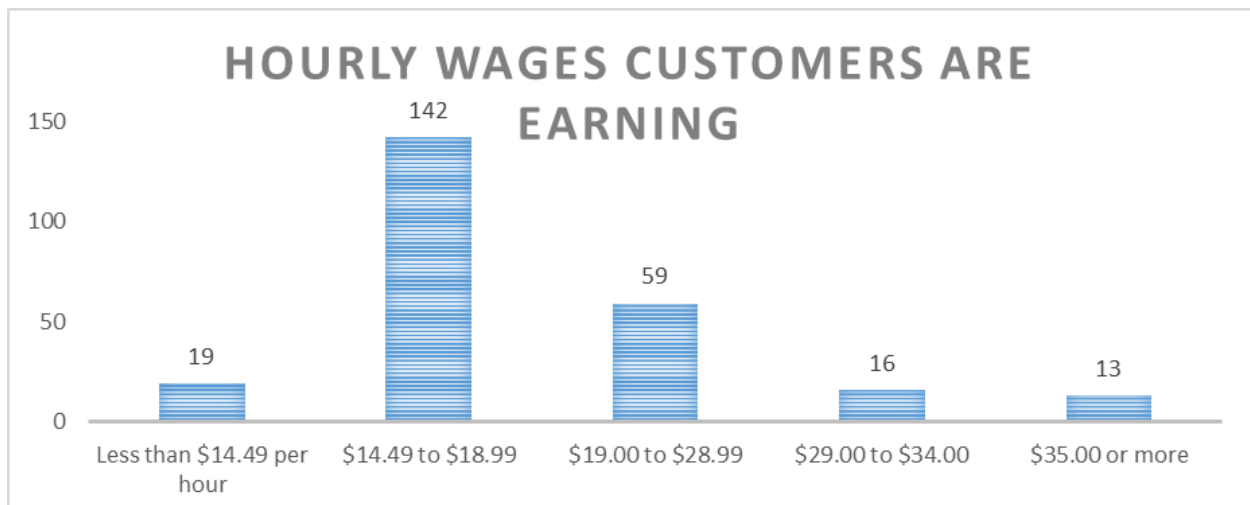
Table 2.7: Employer-Provided Benefits Customers Receive
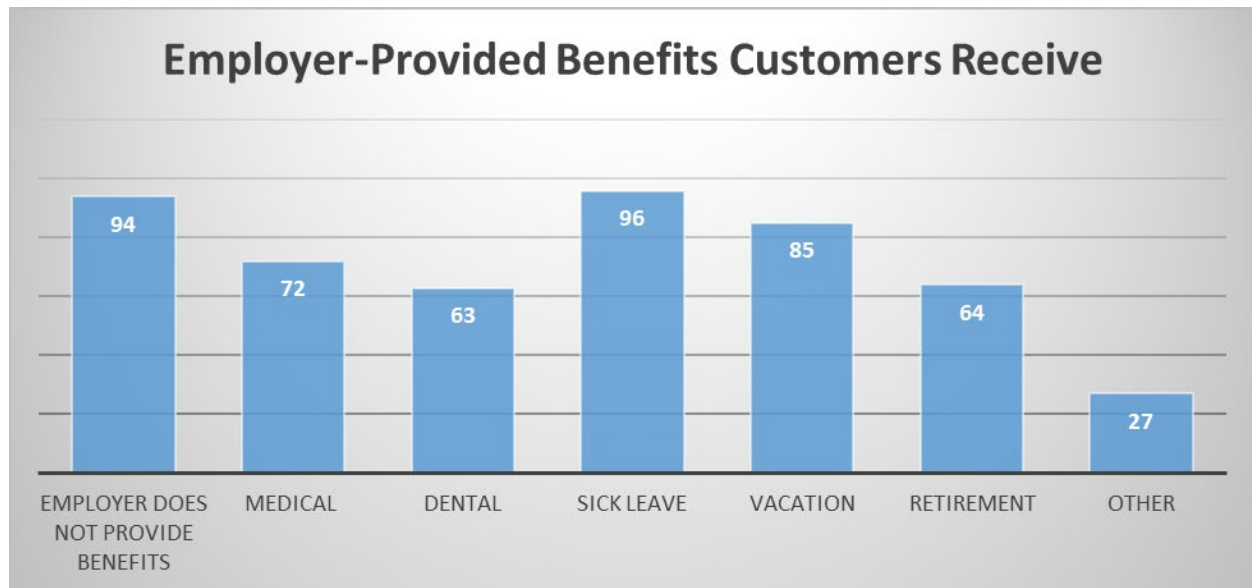
Services customers reported receiving from an agency that is not DVR were social security benefits (*n*=299), followed by mental health services (*n*=191), and job coaching services (*n*=163). See Table 2.8 for a complete list of other reported services customers received.

Table 2.8: Services Customers Received by Other Agencies

Services Customers Received by Other Agencies

Service	Count
Career exploration	107
Drug/alcohol recovery	11
Job placement services	111
Job seeking services	140
Mental health services	191
Post-secondary education	94
Social Security benefits	299
High school services (Individual Education Plan (IEP) or 504 plan)	116
Housing	98
Job coaching services	163
Long-term support services	66
Independent living	21
Temporary Assistance for Needy Families (TANF)	29
Parole and probation/Corrections/Juvenile rehabilitation	8
Services for the Blind	7
Services from Veterans Administration	7
Services from Tribal Vocational Rehabilitation	1

Note: Post-secondary education (community college, university or college, occupational or vocational).

Barriers to Achieving Employment Goals

DVR customers were asked questions to inquire about their experiences and needs related to barriers to employment.

Disability Barriers

Customers were asked to identify how their disability affects their ability to get a job, keep a job, or advance in their career. Disability-related functional limitations related to

mobility, communication, self-care, self-direction, interpersonal skills, work tolerance, and work

skills are relatively well dispersed (as presented in Table #2.9). Work tolerance (or being able to

work for a sustained period, lift, stand, sit, tolerate stress), with the highest number of

responses (*n*=365), communication (or being able to use formal language, spoken or sign,

understand others, or be understood) (*n*=290), and interpersonal skills (or ability to interact and

develop relationships with others) (*n*=286) are the top three identified disability-related

barriers.

Table 2.9: How Disability Affects Customers' Ability to Get a Job, Keep a Job or Advance in

their Career
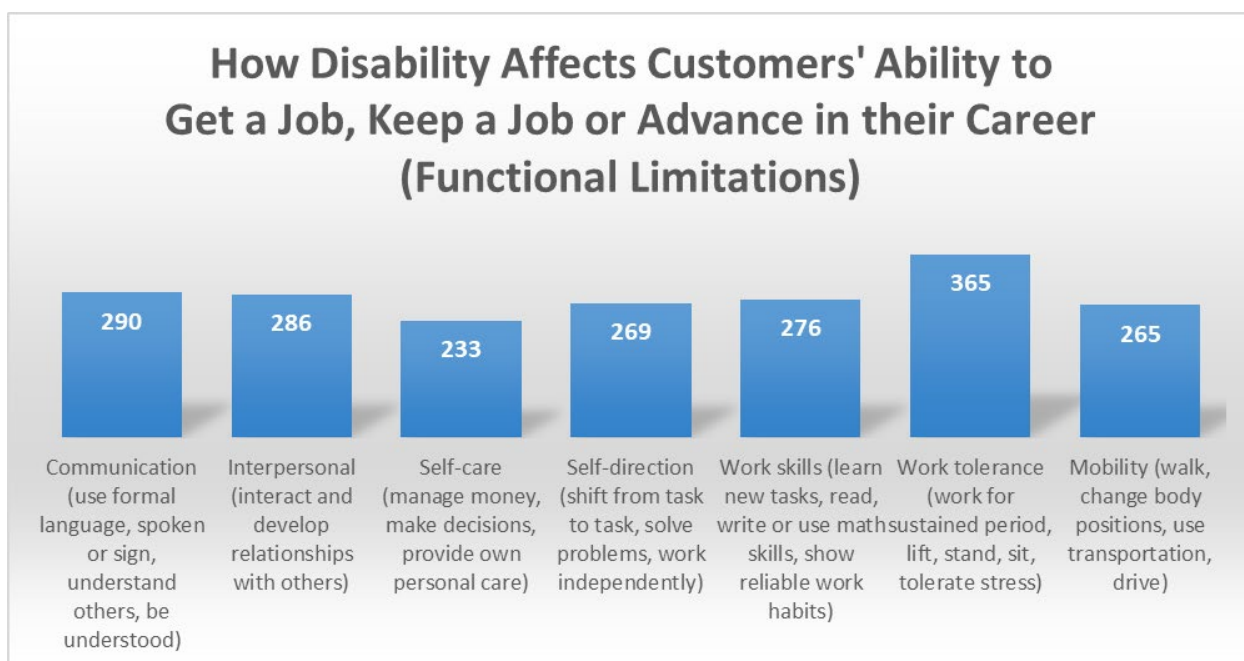
Non-Disability Barriers

Table 2.10 shows the top non-disability barriers reported by customers are education or

training/credentials (*n*=287), followed by job skills (n=259), available jobs (*n*=251), job-seeking

skills (*n*=222), and employer attitudes (n=207).

Table 2.10: Non-Disability Barriers to Getting or Keeping a Job, or Advancing in a Career

Non-Disability Barriers to Getting or Keeping a Job, or Advancing in a Career

Accessible Transportation: 109
Available Transportation: 166
Job skills: 259
Job-seeking skills: 222
Available jobs: 251
Employer attitudes: 207
Education or training/credentials: 287
Work adjustment: 176
Interpersonal/Soft skills development (communication, teamwork): 153
Extended services (Long-term supports): 103
Personal adjustment: 189
Opportunities to explore careers: 157
Social Security disability benefits: 110
Childcare: 11
Personal attendant care: 45
Housing: 65
Criminal Background: 26
Natives language/English speaking skills: 12

To highlight customer experiences of the top five reported non-disability barriers, example customer comments representative of each area are provided below. *Please note that CCER have left customer comments "as is" or in their original form using quotations.*

49

Education or Training/Credentials

"Now the junior colleges are cutting class sections to to lack of student and funding. The state makes sure that uw and wsu get most of the money. The uw needs to lower tuition. make up for that lack of times for the junior colleges classes. also the buses are getting reduced so it makes it hard to get to pierce community colleges, whaereas the 11 gets me to the uw faster." and "Obtaining and or receiving training to move forward with a long term career."

Job Skills.

"I am self-employed. Due to my "disability" this is the best fit for me. I am skilled at what I do but lack and struggle with administrative tasks." and "my computer and technology skills are low"

Available Jobs.

"Limited job opportunities" and "challenges in the entry-level services industry created by either economy and/or pandemic"

Job Seeking Skills.

"I want to look for a job but I don't know who is hiring and its not like anyone puts a sign up anymore, everything is online and without classes or skillsets to look online I don't know who is hiring or how to access this information so its very confusing."

Employer Attitudes.

"I feel discriminated against because i have cerebral palsy and dont feel like employers want to give me a chance to prove that i can do my job well" and "working for employers that don't understand and don't like disabled people- so don't disclose anything which always ends poorly."

Age Bias.

"ageism, also have so much work experience/education/skills that I've been considered a threat to someone with less experience, could take their job." and "Yes Age and having to use a walker cause employers to immediately close me off."

Treatment in the Workplace.

"I've experienced bullying by some management and some co-workers in the past two jobs I've had." and " I have a Bachler's degree, but I cannot keep up with my peers who have a bachelor's

degree. I'm look down apon and then it's a witch hunt to find out what is wrong with me by co-workers and my employer. I get talked to like I am 4 years old, and they talk very loudly and slow, once they do find out. And at that point I look for other employment - and the cycle continues at the next job. Alos another thing that happens, they know I have a disabilities and I have asked for accommodations.... They can't fire me for having them, so they suggest anytime I see them that this isn't a good fit and I need to seek other employment."

Other Challenges

Five hundred fifty-four customers responded to the question that asked them to report other challenges that make it difficult to get or keep a job, or advance in a career. From an analysis of customer responses, three notable themes emerged that include change in health condition and health management, COVID, and the Job Market as illustrated by example customer comments below.

Change in Health Condition and Health Management.

"since I had my stroke I say what is on my mind, because I don't understand certain things but I am working with Physical therapy and speech therapy twice a month to help me understand what it is that I am doing, and how I can understand better." and "take care of my health/attend needed appointments/get proper rest."

COVID.

"COVID - Had to leave a position she liked, due to this position not having safe health conditions for her. When restrictions went away, employer didn't make the position available again for her."

Job Market.

"After 7 years experience in clinic nursing as a LPN, it is hard to get work in that field due to the hiring of MA's Medical Assistants."

Need for Flexible Hours and Lack of Work History.

"energy, attention, amount of hours I can work" and "Very thin/spotty work history. My resume has little recent activities"

Service Needs

We surveyed customer respondents about access, timeliness of DVR staff response, and services.

DVR Access, Staff Response, Services, and Timeliness

Most customers (*n*=499; 80.6%) report DVR services are provided in a convenient location and that they are easily able to get around the DVR office building (*n*=445; 72.8%); however, a sizable proportion indicate they have never been to a DVR office given the need to change to remote services due to COVID. Almost 76% (*n*=466) of customers indicate they are able to use technology or equipment and just over 92% (*n*=567) report they are able to communicate using their own language to participate in DVR services.

In terms of timeliness of DVR staff response and services, we asked customers to use a 4-point Likert scale of agreement ranging from "strongly agree to strongly disagree". Eighty-two percent (*n*=562) agree or strongly agree that DVR staff answered their questions, responded to their requests, and were told of changes. About 86% (*n*=541) agree or strongly agree that DVR staff provide accommodations needed to participate in DVR services, and just over 91% (*n*=617) agree or strongly agree that DVR staff are sensitive to their cultural background and identity. This last item received the highest rating in this area of DVR staff response and services.

Six hundred one customer respondents responded to the question, *"Is there anything else you would like us to know about accessing DVR services?"*, and almost 31% (*n*=184) of respondents marked "yes" to describe their yes-response. Main customer themes that emerged from their comments include response/communication by staff, VRC-customer working

relationship, DVR staff being very helpful, staff turnover affecting services, and DVR services taking too long. Each of these themes are denoted with example customer comments that follow.

Response/Communication by Staff.

"I was going to explain my job progress to my DVR counselor. I called him and sent him, emails for the last 2 months, but he's not being responsive. It was an import[ant], information that I need to talk to but he doesn't return my calls or emails." and "…create a portal hub for clients and case managers to schedule and send messages to each other. that way everyone is on the same page of when scheduled meetings are and what progress has been made.

VRC-Customer Working Relationship.

"Yes, my agent seemed to be ill informed about my case, difficult to get a hold of, not knowledgeable or wiling to become so about my support needs."

DVR Staff Are Very Helpful.

*"I have been working with ***** * (& recently with ******). Both ***** have been exceptional sounding boards & have helped prepare me for my next position." and "I appreciate your services. You got me connected to Dr that helped me which put in place I can help myself and get off SSDI."*

Staff Turnover Affects Services.

"I've been reassigned counselors frequently. I'm trying to get my employment plan in place and approved." and "Had first job coach who was a good match. He left within a month of working with us (job retention issue). The new job coach isn't skilled at working with someone with anxiety and communication issues (lack of training issue)".

DVR Services Take Too Long.

"Has been very slow process, we assume this is due to serious staffing difficulty at DVR." and "I have been waiting for over 6 months to be provided a communications device that has already been approved by the DVR."

Quality of Vocational Rehabilitation Counseling

Customers were also surveyed about the quality of vocational rehabilitation counseling they received. Almost 88% agree or strongly agree (*n*=600) that their DVR counselor shared information in a way they could understand. This item received the highest rating percentage in the area of quality of VR counseling. Whereas, just over two thirds (*n*=457; 67.4%) agree or strongly agree that their DVR counselor helped them understand their disability and how it may affect future work. This last question received the lowest rating percentage in the area of quality of VR counseling. Just over 79% agree or strongly agree (*n*=538) that they met with their DVR counselor for the amount of time needed and about 77% agree or strongly agree (*n*=521) that their plan for employment included services to meet their specific needs. Finally, more than 73% agree or strongly agree (*n*=500) that their DVR counselor helped them to get services on their plan from other agencies and providers.

Remote Services

Because of COVID, DVR services were more often provided by telephone or computer. We asked customer questions to learn about their experiences with remote DVR services.

Likes.

The majority (*n*=506; 74.1%) of DVR customer respondents report to have received remote DVR services. Four hundred-fifty DVR customers responded to the question*, "What did you like about remote DVR services you received?"*

Not Having to Travel/Easier or Convenient.

Most customer comments indicate not having to travel and participating remotely is easier or convenient as expressed by this customer comment, *"Being around people and dealing with transportation causes anxiety and panic attacks. Remote communication removes that problem for me, for the most part."* These same customer respondents found VR counseling support helpful as this customer comment suggests, *"I love the fact that I can have my phone calls from anywhere so I can talk to my counselor even when I'm searching for jobs".*

Safe/Healthy Option.

Other notable themes with comments across customer respondents include remote services being a safe/healthy option to participate in DVR services during COVID and being in a comfortable environment helps alleviate disability-related concerns as these customer comments describe, *"In the light of the Covid Pandemic, it was safe for me and my counselor to receive the DVR service remotely."* and *"My ADHD comes with auditory processing and because I was able to use video calls I was able to understand more of what was being told to me because I was able to process what was being said."*

Technology for Communication.

Many customers also indicated they like using Zoom or video conferencing platform to effectively communicate with staff and benefit from DVR provided computer and associated computer-related training as indicated by these customer comments, *"Zoom meetings are just as good as in person meetings, and I can do it without leaving home.", "DVR allowed me to have a laptop for remote communication and gave me access to a program where I get free internet services when otherwise I could not afford."*, and *"it is difficulty to use online, DVR provided me*

with a private tutor to understand the computer and how it worked, and how to log on for

meetings."

Dislikes.

Four-hundred twelve DVR customers responded to the question, *"What did you dislike about remote DVR services you received?"* Most customer respondents indicate that they have no dislikes with remote services with responses such as "nothing" or "none".

Not Seeing DVR Staff or VRC In-Person.

The primary themes that underscore what DVR customers dislike about DVR remote services include not seeing DVR staff or VRC in-person and impersonal connection with staff as demonstrated by these customer comments, *"I do not like remove DVR services as I feel that it takes away the human touch. I have never met my DVR counselor and I feel that it weird. I feel that we could accomplish more in person. I feel that I could express myself better in person and that remotely I am not respected. I feel I could get better services in person and my DVR counselor would better understand me in person. I could get more of the things I wanted in person as I could relay my ideas more clearly in person. In person, she could see that my struggle and my dreams are real. She would then see my needs are real."* and *"Not having a more personable relationship with my DVR counselor."*

Communication and Responsiveness.

The amount of time between communication and responsiveness and not getting the support needed to secure employment were also primary themes as suggested by these customer comments, *"For the former means of communication, we oftentimes find ourselves having late responses to each other's emails. For example, at one point, I was having trouble*

with getting important college fees for my spring 2022 quarter, and the guy responsible for covering it didn't seem to be doing his job well at that time. I had to ask the college twice to ask for more time to get the payments in." and *"she never responded to me as to how I could improve on my resume she never gave me additional resources to look into for employment support or resources…".*

Virtual Access.

Other themes that emerged related to virtual access such as online technical difficulties, customer access to technology, difficulty signing paperwork, and disability barriers that make remote services challenging, as the following customer comments indicate, *"My laptop sometimes zooms out and it is not very effective and cuts my sessions short or I have to long [log] in multiple times.", "Feel forgotten about since cannot access online platform to meet with counselor", "Instability of internet for my counselor.limited time frame, sometimes it was hard to hear or poor connection", "Internet connection not always cooperative", "I already mentioned the difficulty of printing and signing documents. I do understand the need for paper docs to comply with laws, so I'm not sure what could be done to mitigate that. ", "Did not receive information in advance about specific questions that may be asked. Because this client has a communication based disabilities, that creates access issues",* and *"Deafness is a real struggle via technology. I have gotten some assistive devises and that has helped."*

Most Helpful Services

DVR customer respondents were asked to select DVR services they have found most helpful. Customers identified VR Counseling and Guidance (*n*=257), Assessment (*n*=256), and Job Search Assistance (*n*=240) as the most helpful employment-related DVR services.

57

Proportionally, these three services were selected quite a bit more than the rest of selected services and therefore separate themselves with some distance at the top as being the most helpful services. For the full description of most helpful employment-related DVR services, see Table 2.11.

Table 2.11: Most Helpful Employment-Related DVR Services
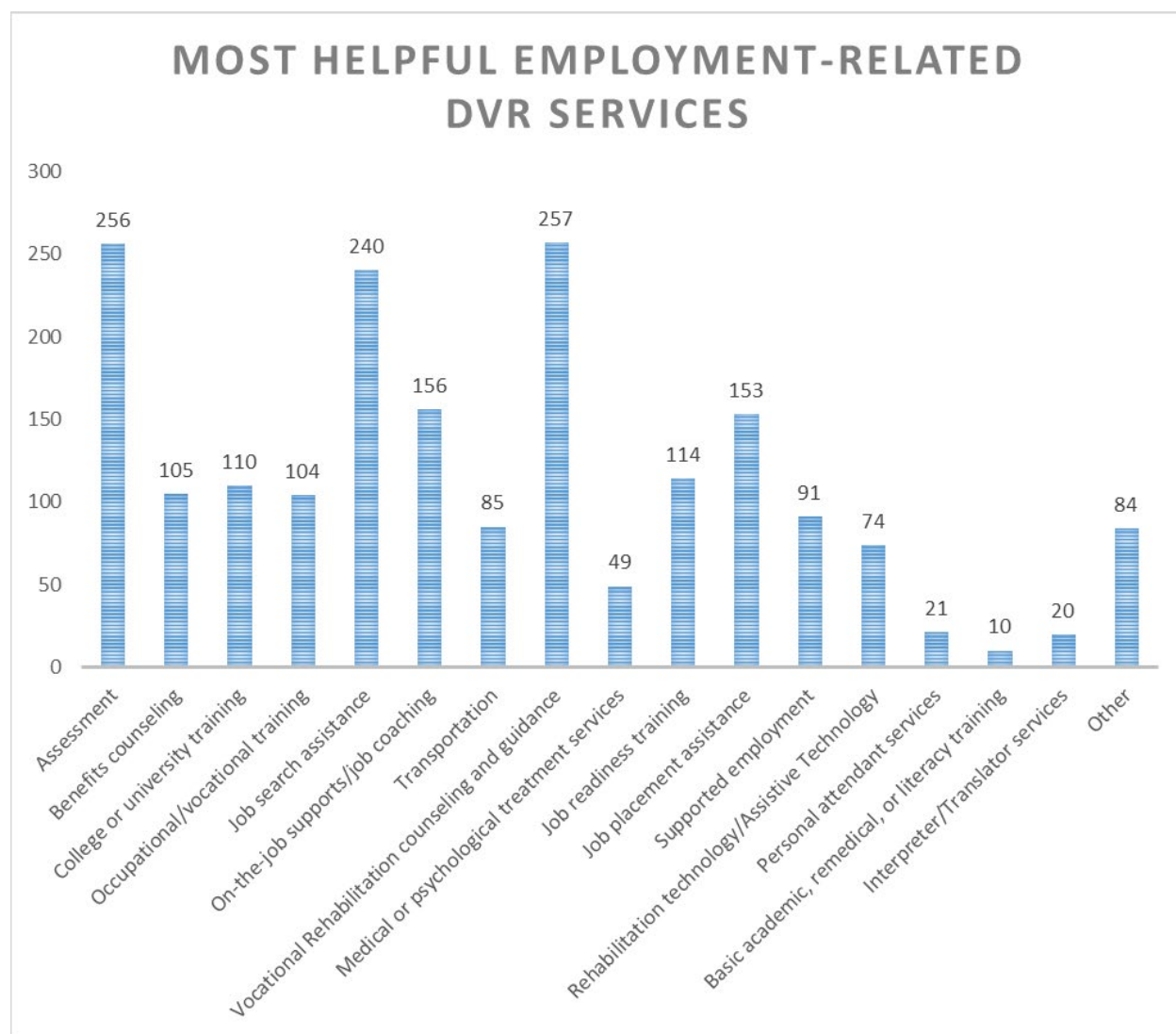
Quality of Employment-Related DVR Services

Overall, the quality rating of employment-related DVR services reported by customers (*n*=679) is "Acceptable" with a mean score of 3.72 on a five point rating scale: 1=Very Poor,

2=Poor, 3=Acceptable, 4=Good, 5=Very Good. Described another way, DVR customers rate the quality of employment-related DVR services as "Very Good" (*n*=268; 39%), followed by "Good" (*n*=165; 24%), "Acceptable" (*n*=106; 16%), "Poor" (*n*=74; 11%), and "Very Poor" (*n*=66; 10%).

Needs of Individuals with Disabilities Served by WorkSource

WorkSource Washington is a partnership of state and local government agencies, colleges and non-profit organizations that offer employment services for job seekers and businesses. WorkSource services are available in-person and online. Only a little more than one-third (*n*=231; 33.9%) of DVR customer respondents report to have used WorkSource services. Of customers who have used WorkSource services, about 75% (*n*=155) report they were able to easily get around the WorkSource office and more than two-thirds (*n*=139; 68.8%) indicate they were able to fully participate in WorkSource services.

Of the customers who report they were not able to fully participate in WorkSource services (*n*=49; 24.3%), concerns related to WorkSource staffing and customer disability-related limitations were notable themes identified as these customer comments suggest, *"no, not enough staff available to answer questions especially regarding tech questions/problems I had with forms"* and *"No, the services are not disabled friendly. You cant get help filling out a form that is not ADA accessible, My workforce does not have adaptive computers with Dragon and screen reader"*.

DVR customer respondents were asked to select what WorkSource services they have received. The three most used WorkSource services are job listing, referrals, and hiring events (*n*=120), followed by resume and application help (*n*=84), and internet access for job searches (*n*=80). See Table #2.12 for complete list of WorkSource services customers have received.

Table #2.12: WorkSource Services Customers Received

WorkSource Services Customers Received
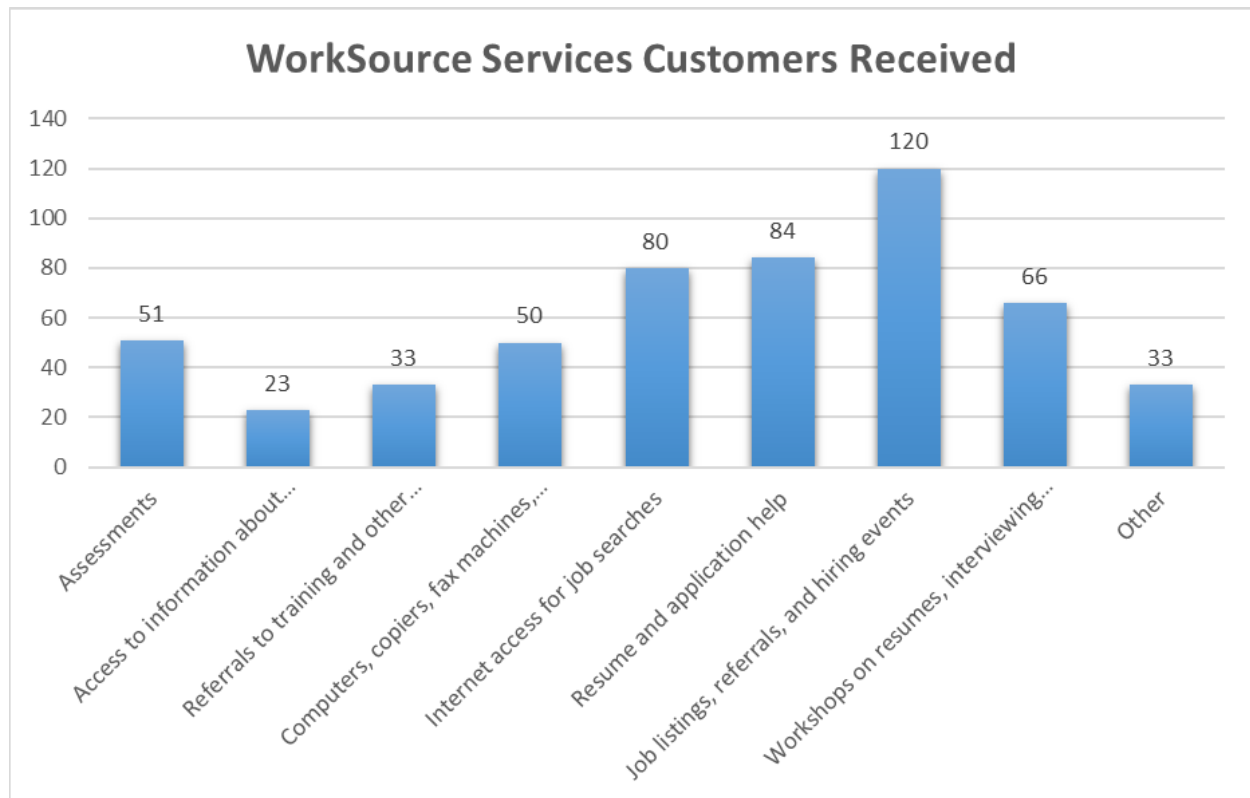
Note: Access to information about unemployment insurance; Referrals to training and other community resources such as food banks, childcare, and public transportation; Computers, copiers, fax machines, phones, and other office equipment; Workshops on resumes, interviewing and other programs.

Quality of WorkSource Services

Overall, the quality rating of WorkSource services reported by customers (*n*=224) is "Acceptable" with a mean score of 3.66 on a five point rating scale: 1=Very Poor, 2=Poor, 3=Acceptable, 4=Good, 5=Very Good. Displayed another way, DVR customers rate the quality of WorkSource services as "Very Good" (*n*=71; 32%), followed by "Acceptable" (*n*=60; 27%), "Good" (*n*=58; 26%), "Poor" (*n*=20; 9%), and "Very Poor" (*n*=15; 6%).

Improvement of DVR Services

There were 479 DVR customer respondents to the question, *"Do you have other comments that may help DVR improve their services to you and other people with disabilities?"* Following an analysis of comments made by customers, several main themes emerged intended to help DVR improve services.

Staff/VRC-Customer Relationship.

The Staff/VRC-customer relationship theme had the most responses and involves comments related to communication and follow-up with customers, engagement, and follow through as these example customer comments indicate, *"DVR needs to provide better follow up when telling customers things are going to happen; have been waiting for months to hear back from DVRC about classes, retraining written into IPE and despite many calls to her office requesting return calls haven't received, nothing. Very disappointed with DVR, very tired in general. Know they are overwhelmed as well but not sure why I can't get at least a return phone call from my counselor?"*, *"I feel like they're just checking off boxes without actually helping me."*, *"I have tried DVR 3 times and everytime nothing happens. I dont feel supported. I feel like I pulling teeth to get what I need."*, and *"Don't say you will provide mental health referral, and then just ignore it. This occurred with 3 separate DVR counselors, so it seems to be a DVR issue, not a forgetful personnel issue."*

Timeliness and Continuity.

Timeliness and continuity is another theme that emerged with the next most comments and relates to timely provision of services, staff turnover, and reassigning or changing VRCs

with customers as these customer comments suggest, *"'Why bother, nothing is going to change the glacial speed of the process, the bureaucratic pace of processing, the legally sculpted vocabulary of communication or anything else. You have good people whose hands are tied by lawyers and accountants doing work that fits in your forms instead of being in the moment with the clients. It was a long drawn out procedure that has ended, I would not bother doing it again."*, *"You need to hire and keep your counselors long term. The turn over is causing your services to be poor despite the good people who work with you. They are over worked and under staff greatly."*, and *"'I think in case the counselor changing from one to the other, then the former counselor should introduce the current counselor to us, the customers; otherwise, we have to recognize the change by surprisingly looking at the signature on our paperwork with DVR. My daughter has been working since July, but DVR had not done all their paperwork. In fact, we were asked to sign them last week (end of September) by the job coach."*

Job Placement.

Job placement is the next main theme that emerged and consists of comments related to partnering with employers, agencies, and schools, a customer's vocational choice, job search assistance, and community rehabilitation program capacity. Example customer comments that underlie job placement theme include: *"I wish that DVR would partner with my new company more closely, to help them understand my disability, and work with them and me to ensure my success. Some companies are hard to onboard with initially. Also, they might not understand my strengths and weaknesses right off the bat. Many people say they understand Autism, but in reality they might want to pull away from me because I have a condition they don't understand."*, *"My daughter has a job at *******- but her job coach (which was initially*

provided by DVR) has said that they will not return to ******* because they are "rude" there. It is very difficult to find jobs at this time for individuals with disabilities, so to have her DVR counselor tell her and myself that she won't support her staying at her job at ******* has been really mind blowing. Her counselor will not provide another job coach is she stays at *******- says she must leave ******* and find another job, despite the fact that she is doing well there and likes her work.", *"'It would be nice like once a week talk with your job placement counselor and go over the techniques for interviews I am so lost I want to work and I have Felonise [felonies] on my record"*, and *"Unfortunately, though, we have seen limited opportunities to find and keep a job due to a lack of fully staffed job coach agencies. This has significantly impacted our ability to utilize the services offered by DVR."*

Staff Training.

Another theme that emerged from the data is staff training and include comments related to training to improve staff disability knowledge, having qualified CRP staff, and other VR practice knowledge and skill areas as depicted by staff comments below.

Staff Disability Knowledge.

"Ava app and Otter.ai app are probably two best apps for Deaf and Hard of Hearing. though the translation accuracy is so-so. So, the sooner Deaf and Hard of Hearing learn about them, the better outlook on their career aspirations", "They do not seem to have skills/services for certain anxiety based disabilities (I have experienced this and heard of similar experiences from others)." and "Need more DVR counselors trained about autism in the work place, along with requiring job placement companies that DVR contracts with to do the same. Otherwise it's a waste of everyone's time and money."

Having Qualified CRP Staff.

"The vendors do not know what they are doing. For example they want me to do a job that would require standing all day when I have told them I can't stand all day. One had given me advice about my resume. When I went to someone she wanted me to go to for a mock interview, the person told me that the things I had been told were wrong."

Other VR Practice Knowledge and Skill Areas.

"Training for DVR caseworkers in clearer, timely and more compassionate communication. It often feels like talking to a wall and the aid offered is sorely lacking." and "The counselors in the *********** area do not provide information or assistance that is consistent with the DVR program. I have a family member who works in the **** office and so I am aware of the assistance I could be receiving."

Provide Information and Work with Partners.

Providing information about DVR and its partners, working together with community agencies, and addressing barriers related to higher education/vocational technical education and transportation were other notable themes and are depicted by the customer comments that follow.

Provide Information about DVR and its Partners.

"Even though the customer chooses the agency to connect with, give feedback to customer about services DVR is paying services for me. Grade services or agencies being used. Offer feedback to the job placement agencies on services being provided." and "The recipients of these services would really benefit from a high level graphic of flowchart that shows the

relationship between, DDA, DVR and the Employment vendor. I was never sure where we were

in the process"

Working Together with Community Agencies.

"Navigating resources has been very difficult. If there were volunteers to help or other agencies to coordinate with, that would be helpful. All these systems and bureaucracies do not coordinate often or well."

Higher Education/Vocational Technical Education.

"I wish DVR would have more options for training besides community colleges because there are excellent Internet training schools and resources for careers, but they seem to not want to view an excellent school online unless it's a community college."

Transportation.

"Need transportation for rural areas. Our limited transportation makes our possible job options difficult".

DVR Staff Survey

Methods

An online survey design was used for this needs assessment to develop and administer a

staff survey electronically using Microsoft Forms survey software program (Dillman, Smyth, &

Christian, 2009). To summarize the data and generate findings, CCER used descriptive statistics,

including mean, frequencies, and percentages. There were also several open-ended survey

questions that were analyzed using reflexive thematic analysis strategies (Byrne, 2022). This

approach allowed for thoughtful and reflective coding of comments and interpretative process

to reduce responses into themes based on number count of staff comments (Austin, 2012). To

validate and add credibility to our findings, we implemented techniques of triangulation

(Patton, 1999) by identifying and discussing common findings from results and comment

analyses across surveys (DVR Staff and Customer Surveys) and interviews (Key Informant

Interviews), and other existing data sources.

Instrument

It is important to know the process of how we went about collecting response data from

DVR staff. CCER developed and administered one online survey to DVR staff. CCER used a

systematic process to develop the staff survey questions. To do this, we paid attention to being

comprehensive, but also being concise in hopes to get a good response rate. CCER made sure to

address RSA required areas (Shell, 2009), and important questions posed by the WA DVR and

State Rehabilitation Council leadership teams during the staff survey's development. We then

went through a team review process over a number of meetings, and piloted the survey with

other CCER staff, knowledgeable in the field, and incorporated their feedback following a final

consensus from the CCER team of staff survey questions before its launch. Following this

process, there were a total of 40 questions, including three demographic questions, on the final

2022 CSNA WA DVR Staff Survey.

Participants

The response rate is 29.1% [98 total staff respondents/337 staff were sent an email to

participate] for the DVR staff survey. The majority of staff respondents were VRCs (n=47;

48.0%) followed by Rehab Technicians (n=18; 18.4%), followed by program staff (n=13; 13.3%)

which include Regional Transition Consultant, Business Relations Specialist, Benefits Technician,

Assistive Technology Assessment Practitioner, Program Evaluation, Training), Other

management (n=11; 11.2%), and VR Supervisors (n=9; 9.2%). Three geographic regions and

state office were represented with Region 2 (*n*=40) 41% of the sample, followed by Region 1 (*n*=30) at 31%, Region 3 (*n*=18) 18%, and State Office (*n*=10) about 10%. Years in current position for staff respondents ranged from less than 1 year to more than 15 years. The largest proportion, almost 45%, have been in their current position 1-5 years (*n*=44), followed by 22% less than 1 year (*n*=22), 15% 6-10 years (*n*=15), 13% more than 15 years (*n*=13), and 4% 11 to 15 years (*n*=4).

Confidentiality

An email introduction letter from the CCER team to DVR staff, included with the web link to the staff survey, described the importance and anonymity of DVR staff responses and how their response data will only be reviewed by the research team at the University of Washington.

Accessibility

The CCER team included accessibility specialists who reviewed the DVR staff survey to ensure electronic access and an alternative format, if needed, were available to participate.

Data Collection

The CSNA DVR Staff Survey included 40 questions and was disseminated electronically using Microsoft Forms survey software program. An email with a survey link was sent to the all DVR staff list. We initially sent out the DVR staff survey in August of this year (2022) with follow up reminders, for a little over a month period of data collection.

Completed Surveys

Three hundred thirty-seven WA state DVR staff were sent the 2022 CSNA WA Staff Survey electronically to attain their perspectives regarding customer barriers to employment, DVR customer service needs, needs for underserved or unserved customers, Pre-Employment Transition Services (Pre-ETS), Transition Services, Partner Programs, Remote Services, and Staff Support. Ninety-Eight (N=98) staff responded to the survey for a response rate of 29.1% (98/337). Highlights of overall findings based on results and thematic analysis of staff comments who responded to the survey questions are listed below.

Findings

Barriers

The top three themes of barriers identified by DVR staff (*n*=98) that prevent DVR customers from achieving successful employment outcomes are social barriers, personal barriers, and transportation. Social barriers and personal barriers had the most staff comments, and then transportation.

Social Barriers

Social barriers include access to mental health care, employer attitudes, physical/environmental barriers, family barriers, societal attitudes, social support/resources, and barriers related to communication. An example staff comment that represents access to mental health care, one staff person indicates customers have *"lack of mental health treatment/access to providers"*. Another staff comment representative of the employer attitudes theme, states that *"The lack of understanding in the business/employment community*

about hiring people with disabilities - this comes in many forms, but mostly, there's fear

regarding the amount of time/training/hours that will be needed to support an employee with a

disability." as a key barrier to customers achieving successful employment outcomes. One staff

comment indicates the physical/environmental barriers customers must attend to, such as the

"accessibility of building, doors, and entry". An example of family barriers includes a staff

comment that suggests *"Family members sometimes have expectation of their family members*

and it doesn't always align with what the customer wants". *"Social barriers: There is still a social*

stigma regarding disabilities" is an example of societal attitudes that exist that can create a

barrier for customers according to this staff comment. Lack of social support resources is

another barrier illustrated by this staff comment, *"Some of our more difficult to serve customers*

just lack all around support. They need help with housing and managing their medical

needs/medication/mental health etc. It's beyond IL support that DVR can provide - it's more

nuanced". Barriers related to communication are highlighted with this staff comment,

"language barriers".

Personal Barriers

Personal barriers consist of severity of disability, customer behavior,

homelessness/housing, income, criminal background, and interpersonal skills. Barriers related

to having reliable transportation was another primary barrier to employment. Comments to

further illustrate by providing an example for each of these areas are discussed below. In

relation to severity of disability, one staff states, [there are] *"Limited jobs open to our*

customers (i.e. small labor market in terms of employers and types of job opening unable to

meet employer expectations due to customers limitations)". Another staff comment indicates

"personal acceptance and/or understanding of the individuals personal abilities" is an example of customer behavior as noted barrier. Being *"Overwhem[ed] with life circumstances connected to housing security food security"* and *"Poverty"* comprises the barriers of homelessness/housing and income. Customers' having *"access to information on navigating impact of employment from criminal record"* is an example of how having a criminal background is a barrier, and *"getting along with others"* illustrates interpersonal skill barriers for customers.

Transportation

To provide example barriers related to transportation representative of this main theme, many staff comments indicate transportation challenges such as, *"Limited access to reliable transportation"*, *"Transportation issues including collapsing infrastructure"*, *"lack of ADA-compliant walking paths"*, *"low public transport options"*, *"Lack of reliable transportation"*, *"Lack of transportation in rural areas"*, *"employer scheduling out of transportation times"*.

Service Needs

The top three VR or related services identified by DVR staff (*n*=96) that are most needed by DVR customers to achieve their employment goals include Vocational Rehabilitation Counseling & Guidance, Job Placement, and Training (Vocational Technical/Higher Education). Example comments from staff representative of each main theme are described below.

Vocational Rehabilitation Counseling and Guidance

Substantial Vocational Rehabilitation (VR) Counseling and Guidance had the largest number of comments by staff showing the value and importance placed by staff of providing this primary VR service. When referring to their customers, one staff person said, *"Many need help determining a vocational goal- they either don't have faith in themselves or have distorted views of the effects their disabilities have on their abilities"*. Other staff focused on VR counseling and guidance as a conduit to exploring careers, and specifying accommodation and other needs with customers as part of the counseling relationship as these comments suggest, [Customers need] *"vocational counseling around career opportunities and accommodations"*, *"more access to guidance and counseling (caseloads are too big)"*, and *"more time to explore and develop an IPE"*.

Job Placement

Job Placement is another high service need for customers to be successful in their efforts to obtain and maintain employment or advance in a career as these staff comments support customers need for *"CRP services including job development"*, job placement *"(Typically the top service I provide is job placement, followed by job retention/ITS, and after that training.)"*, and *"additional supports in all aspects of job search attainment"*.

Training (Vocational Technical/Higher Education)

Training was another highly identified service need for customers by DVR staff. "Employment preparation through skill building - either formal training or volunteer work where the customer can become confident in their ability and capacity to be working", "Access

to workshops/trainings, education (this includes skill building with technology)", and "Post Secondary/Vocational Training" were good example comments by staff highlighting training as a top service need for customers to gain necessary job skills to be successful in employment.

Access to Services

Ninety-eight DVR staff respondents report the three main reasons customers might find it difficult to access DVR services are not knowing about or having a limited understanding of DVR services, with the most comments, followed by transportation, and access to technology. Two example staff comments that represent the not knowing about or having limited understanding of DVR services theme that emerged include staff indicating [customers are] *"Not aware who we are/what we do"* or *"They don't understand the VR process"*. To highlight transportation issues, one staff comment suggests customers have a *"Lack of transportation to get to[the] office or interviews or jobs"*. Access to technology included comments related to customers not having a computer, phone, or internet necessary to participate in DVR services. One staff person states that customers *"Don't have internet/computer access for documents"*, whereas another staff comment indicates that customers *"Not being able to effectively use zoom or other technologies"* are additional access barriers that make it difficult for customers to access DVR services. Other notable themes that make it difficult for customers to access DVR services, as identified by staff, include time it takes for the VR process (e.g., *"DVR needs to get better at jumping on the motivation of our customers. They come to us when they are the very most motivated... and then sometimes we are slow to get things rolling"*), obstacles related to completing and understanding paperwork (e.g., *"Confusing paperwork and delays related to*

paperwork shuffle"), and other disability-related barriers (e.g., *"Management of disability-related challenges requires time/effort/energy/focus."*).

Unserved/Underserved

DVR staff report populations being unserved or underserved. As a reminder, "Unserved" means people who have a disability who are interested in working and are not receiving services from DVR. "Underserved" means people with disabilities who are interested in working and are served by DVR at less than the percentage of the group in general.

Geographic Area

Approximately 59% (*n*=54) of DVR staff report there are geographic areas that are unserved and/or underserved. Rural areas were often pointed out as being unserved and/or underserved as indicated by this comment, *"Rural populations, especially those without access to internet, transportation systems, etc."* This staff comment suggests there are not enough staffed offices to effectively serve rural communities, *"Yes, too many to list, the state of Washington is very large and when you look at say, the Omak office or Clarkston or Colville, you can see the very large geographic area these offices "serve". Without a permanent presence in the offices, there is just very little belief that a person will get any support so they do not apply at all."*

Another comment identified other challenges for both rural and urban settings as stated in these additional comments, "rural areas are more challenging due to limited employment options and high need low resource metropolitan areas are in need of targeted service delivery" and "Rural areas across all counties in WA (including King, Pierce, and Snohomish).

With one office in a city center usual miles from the rural communities that are often inaccessible by public transportation." In addition, Washington counties identified by staff as being unserved or underserved include Pierce, Pacific, Lincoln, Wahkiakum, Cowlitz, Okanagan, and Thurston. The "San Juan Islands" and "rural areas around Spokane", "Ocean Park/Long Beach/Ilwaco area since the CSO closed," "Everson, Lummi, Maple Falls, Sumas", "Snoqualmie Valley area", "the central area and South King County areas. [as] There are SPS in these areas that don't have a dedicated school liaison for IEP and 504 students.", "Skykomish which is far up the SR 2 corridor", and "rural communities such as Concrete, Gold Bar, Island County". The cities of Ellensburg and Yakima were also identified as having limited resources.

Race/Ethnicity and Disability

Almost 61% (*n*=56) of DVR staff report there are racial/ethnic minority groups that are unserved and/or underserved. "People of color" or racial/ethnic minorities in general were identified most by staff, followed by other minority groups which include Hispanic/Latinx, Native/American Indian, African American/Black, Asian, and non-English speakers. Additionally, about 57% (*n*=51) of staff suggest there are disability populations unserved and/or underserved. People with mental health disabilities and who are Deaf and Hard of Hearing were identified having the most comments. Also, over 40% (*n*=35) of DVR staff indicate there were other diverse groups that were unserved and/or underserved. Individuals with gender identity issues or LGBTQ population were a notable theme that emerged having a majority of comments.

Recommendations to Improve Outreach and Engagement. There were 90 DVR staff respondents who made recommendations to improve outreach and engagement for the above identified unserved and/or underserved groups and include prioritizing diversity and specialized outreach staff, targeting diverse communities, providing secondary and post-secondary (education) outreach, agency partnerships, and public education and access to DVR services.

Prioritizing Diversity and Specialized Outreach Staff. Prioritizing diversity and specialized outreach staff was a theme that emerged with the most comments. Example staff recommendations for this area include, [having] "Dedicated, higher level professional staff that are assigned to outreach to these groups would be beneficial. I have worked elsewhere for [t]he state where they tried to add this onto the work of existing staff and it was not sustainable or effective.", "Having resources available to work with counselors when they get someone they don't know how to work with. Having someone to work with providers and community members to increase their understanding and or develop resources", and "hiring VRCs with diverse backgrounds to help bridge gap with underserved racial/ethnic groups".

Targeting Diverse Communities. Targeting diverse communities was another theme that resulted with the next most comments and is connected to making a focused effort to engage in outreach with specific, targeted cultural groups. This theme includes staff comments such as "Purposeful and targeted VRC interaction with groups, clubs, alliances, online circles, etc. where these populations meet", "Setting informational booths/programs in areas where there is predominantly POC in safe community spaces such as schools, libraries and rec. centers.", and "a better presence in lower income and diverse communities. We need to stop waiting for them to come to us and we need to go to them to be available for questions. I am

sure there are a lot of people in the communities that don't even know VR is an available resource to them."

Secondary and Post-Secondary (Education) Outreach. Secondary and post-secondary outreach is another primary theme that highlights the need to make connections with schools. For example, staff comments in this area suggest DVR staff "…should be reaching out to local colleges/disability services office to make them more aware of what we do, who we serve" or "There needs to be a person who is specifically tasked with outreach to schools and the community. They would provide guidance, information and assistance to those wanting to apply. VRCs are so overwhelmed that cannot do this. VRCs are NOT encouraged to be leaders in transition and most do not understand the Pre-ETS services and the importance of reaching out early."

Agency Partnerships. Another notable theme that emerged to improve outreach and engagement for the above identified groups is to focus on agency partnerships. One recommendation by a staff person suggests DVR "…need MOUs and funding supports of some sort to form partnerships that bring actual advantages to our community. I don't know how to do this...because the funding would have to be appropriated and approved by the legislature for the programs, then leadership would need to work together to create functional programming and teams. That is above my level of influence at this time."

Public Education and Access to DVR Services. The staff recommendation for public education and access to DVR services further highlights the need for DVR to market what it does and its benefits to the public in new and innovative ways. One staff comment

recommends that DVR should "Have more videos online and educational outreach for individuals and business to know more about what DVR has to offer."

Pre-Employment Transition Services

Pre-employment transition services include: job exploration counseling; work-based learning experiences in an integrated environment in the community (including internships); counseling on opportunities for enrollment in comprehensive transition or post-secondary educational programs at institutions of higher education; workplace readiness training to develop social skills.

Ninety-six DVR staff respondents rated the quality of pre-employment transition services (Pre-ETS). On a scale of 1 to 4 (1=Needs improvement, 2=Okay, 3=Good, and 4=Excellent), the average or mean score was 1.92 or "Need improvement". Looking at this finding another way, the majority or 75% of DVR staff respondents indicate the quality of Pre-ETS "Needs Improvement" (*n*=40; 41.7%;) or is "Okay" (*n*=32; 33.3%), whereas only 25% rate Pre-ETS quality as being "Good" (*n*=16; 16.7%) or "Excellent" (*n*=8; 8.3%). Moreover, 40 DVR staff made comments to explain why they answered Pre-ETS "Needs Improvement". Main themes that emerged from their responses included the need for DVR Pre-ETS policy and procedure direction from leadership with the most comments, followed by collaboration with high schools, Pre-ETS staff training, availability of CRPs to provide Pre-ETS, and having dedicated Pre-ETS staff. Staff comments to illustrate each theme are discussed below.

Need for DVR Pre-ETS Policy and Procedure Direction from Leadership

This theme was represented by comments that suggested a need for policy and procedural direction regarding the implementation of Pre-ETS by the agency. For example, one staff comment states, *"Over the past five plus years there has been poor leadership and poor implementation in the PreETS program. I am not sure if there was a true misunderstanding of the WIOA rules and expectations or what was going on but I did experience, along with the schools I served, numerous "restarts" or "resets" which undermined the partnerships and frustrated/angered students and parents. Personally, I started to just not provide or offer PreETS unless it was to someone active on a caseload where I could be sure they would get the service promised and that it would be delivered in a professional manner."* Another similar staff comment suggests *"PreETS has been a mess since it started. We don't understand it as an agency - communication has been messy and confusing. We can't expect our staff to know how to administer PreETS if our agency doesn't have it figured out."*

Collaboration with High Schools

Need for improved collaboration between WA DVR and high schools to effectively implement Pre-ETS is another main theme that emerged from staff comments. For example, one staff comment indicates *"More collaboration with the schools [is needed] in them learning how Pre-ETS is relevant to ALL students with a disability."* Whereas another staff person highlighted how high school students are being referred to DVR too late in the process, *"I'm getting students that have graduated from H.S. applying for services instead of students applying for services while still in school."*

Pre-ETS Staff Training

A number of staff comments indicate they do not clearly understand what Pre-ETS are or how to coordinate or implement Pre-ETS in VR practice as these staff comments underscore, *"Pre-ETS is confusing to staff both for eligible and potentially eligible students"* and *"I have not been trained on what the program actually is"*.

Availability of CRPs to Provide Pre-ETS

Staff also indicate a lack of CRP services available in their respective areas to be able to provide Pre-ETS to students as this quote suggests, *"I can't find anyone at all in my catchment area to provide these services right now due to CRP staffing issues. I have told parents that these services are available for students but I can't find anyone who will do Pre ETS. It started that CRPs did not want to do Work Based Learning Opportunities because they were so complicated and there was so much paperwork. Now, Pre ETS in general has been shelved by CRPs so that they can continue to do more core services such as CBA, job placement and job retention. I'm also having a hard time finding CRPs to do independent Living Services."*

Having Dedicated Pre-ETS Staff

More time and specialized staff (e.g., VRCs) devoted to direct service delivery of Pre-ETS is another theme that emerged represented by these staff comments, *"…dedicated staff in each office that are strictly working Pre-ETS/Transition caseloads"* and *"RTC's support admin/billing work that takes away from being able to engage in coordination and direct delivery"*.

Transition Services

Transition Services is a team effort providing support and guidance to students with disabilities as they prepare to transition from high school to the work place. Each student's transition team comprises the student, parents, school staff, School Transition Counselors, and, in some cases, Regional Transition Consultants. Transition teams help students identify their career interests and learn what skills and training may be necessary in order to prepare for those careers they are pursuing.

Ninety-five DVR staff respondents rated the quality of transition services on the same scale used to rate the quality of Pre-ETS, 1=Needs improvement, 2=Okay, 3=Good, and 4=Excellent. The average or mean score was 2.22 or "Okay". Similar to Pre-ETS quality ratings by staff, the majority or 60% report transition services as being "Okay" (*n*=31; 32.6%) or "Needs Improvement" (*n*=26; 27.4%), whereas 40% rate the quality of transition services being "Good" (*n*=29; 30.5%) or "Excellent" (*n*=9; 9.5%). Furthermore, 26 DVR staff made comments to explain their "Needs Improvement" response. The main theme that emerged was the need related to having knowledge of VR transition services, roles and responsibilities with the most comments, followed by having dedicated transition staff, and communicating with high schools. Staff comments representative of each theme are discussed below.

Having Knowledge of VR Transition Services, Roles and Responsibilities

This primary theme that emerged relates to the need for clarity and having knowledge of DVR staff roles and responsibilities when implementing transition services as indicated by these staff comments, *"we have not seen an increase in the number of students who access DVR*

in a meaningful and beneficial way. Expectations and priorities have been confusing for staff.

Simply stated, who's job is it to ensure there is an increased focus on in-school youth engaging

in individualized transition planning and VR services including pre-ets? Does the expectation lie

with RTC's? Is it an expectation of the VRC? How can the RTC, RT, Business Specialist, VRS

support this priority?" and *"It seems a lot of focus has been on Pre-ETS rather than Transition,*

and that a lot of VRC's don't really understand the difference. A lot of students could benefit

from more transition services, but get missed and fall through the cracks."

Having Dedicated Transition Staff

Similarly to staff comments for Pre-ETS, staff comments also suggest a need for specialized staff dedicated to transition as this staff respondent suggests, *"having dedicated DVR staff to Transition would help this issue. Be onsite at schools rather than in the office trying to manage a general caseload with some transition students. Be part of school staff trainings and meetings so that they know who we are and what we can offer so that invites to DVR staff are more consistent."*

Communicating with High Schools

Like collaboration with high schools as a need pointed out by DVR staff for Pre-ETS, staff report the additional need for improved communication by DVR with high schools when providing transition services as this staff comment indicates, *"It is hard to get schools to work with us sometimes. Also the schools have a lot of miscommunication about who we serve."*

Community Rehabilitation Programs

Eighty-seven DVR staff responded to the question that asked what is working well with DVR's partnership with Community Rehabilitation Programs (CRPs) to support high quality services. Several themes emerged across respondents that highlight positive areas of DVR's partnership with CRPs that support high quality services. They include CRP qualities, communication and positive working relationships, and informational meetings with DVR and CRP staff, clear contracts for services, and having a shared mission in serving customers. Example comments that comprise each theme follow.

CRP Qualities

"If you can find a CRP that has availability, then it shows with their placements. Good report writing and providing services." and "There are some very dedicated CRP that have dug in to provide quality job search and job retention services."

Communication and Positive Working Relationship

"we have some CRP staff that we have a really great relationship with and there are no problems at all - there is collaboration and communication", "Good established relationships with CRP and strong communication with each organization", "strong relationships help with moving customers forward and a team approach to services", and "Having good communication with the CRPs on a regular basis so everyone is on the same page and if issues arise"

Informational Meetings with DVR and CRP Staff

"I think the Lunch and Learns are a great way to keep the conversation going. Lately it's been more about checking in and talking about DVR but CRPs don't really have the

opportunity to discuss the struggles that they are having. I'm not sure it's long enough giving people time to really address issues that are going on with them or to get their questions answered."

Clear Contracts for Services

"clear SDOPs" and "expectations are clear on the templates"

Shared Mission in Serving Customers

"CRP's and DVR staff are committed to the customer and want to ensure the best outcomes for those they serve"

Need of Improvement in DVR's Partnership with CRPs.

Eighty-eight DVR staff made comments about areas in need of improvement in DVR's partnership with CRPs to support high quality services. Themes that emerged include reporting of CRP services provided, CRP staff turnover, training on DVR processes, CRP availability/capacity, quality management, and CRP support. Example staff comments that comprise each theme are listed below.

Reporting of CRP Services Provided.

"Better understanding of reporting, better understanding of the fiscal process, including SDORs and paystubs with the invoices and invoicing with the correct AFP number" and "better implementation and enforcement of contracts. better means for reporting to be provided regularly. Ability to truly enforce the SDOP that is signed by the team rather than have CRPs find jobs that are 2-4 hours a week when they agree at time of SDOP creation to 10 or more."

CRP Staff Turnover.

"Yes, the turnover with CRPs is absolutely overwhelming and when engaging in updating contracts with CRPs mandating that new staff have a DVR developed training that would go a long way to ensure that customer services are not negatively impacted by the fact that CRP reps are unfamiliar or blatantly unaware of DVR contracts and processes."

Training on DVR Processes.

"Increased need for training for VR counselors and RT's to improve partnerships, consistent business practices and better alignment/ integration with workforce employment priorities of the broader workforce system. As an important VR partner, CRP's should be able to leverage the partnership and employer engagement goals of the workforce system to achieve outcomes.", "Consistant training for DVR staff on how to engage with a CRP (timelines, expectations, contract) and CRP's receiving consistent training on CRP contract (expectations, ect)", and "Every area. CRP's are consistently referring customers that have no long term funding, or not looking to work due to retirement, or that have been employed and stable for months looking for additional funding after getting paid by other agencies. Job Placement services constantly are using cold calls, looking outside of the job goal, and have no SDOR's while asking for extension after extension. CRP's are dictating to DVR the level of JR or ITS, billing months and even years after AFP closures, and are doing things like placing customers in a job not matching the job goal and the requesting a new JP SDOP so they can bill DVR for a complete JP with intake, partial, and final after already getting an intake and partial on the first job goal."

CRP Availability/Capacity.

"Limited CRP providers in the area, and limited options available for customers to utilized informed choice in selecting a CRP." and "The CRPs are struggling with staff

retention and shortage of staff which has led to them placing holds on referrals so it would be helpful to have more contracts developed to expand CRP options."

Quality Management.

"The DDA Monitoring and Placement plans do not work with quarterly reporting as there is no accountability held to the CRP and when we ask for an update outside of that quarterly, some provide a lot of push back and don't want to provide anything." and *"Yes staff are afraid to have some hard questions with CRP's for fear of making them upset and then not having them as a resource."*

CRP Support.

"Additionally, DVR should listen to the CRPs and VRCs about what services would be beneficial. There has been an ask for services like adult job shadowing, adult WBLs, adult WRT, that could all be provided by the CRPs. At this time, CBAs are being used to address so many different needs and they are NOT designed or outlined to be used in this fashion but it is the only vehicle staff have for job exploration with a CRP." and *"Supporting CRPs in hiring and retaining staff, either by raising contract prices so they can afford to pay staff appropriately or rewarding CRPs that are able to maintain staff and offer quality services with return contracts at a higher rate than those that cannot deliver."*

Availability of CRP Services. The majority of DVR staff indicate there is a need to increase availability of CRP services geographically and to effectively serve DVR customers. Fifty-seven (34%) DVR staff indicate there are not enough CRP staff (e.g., job developers, employment specialists), 50 DVR staff (30%) report there are not enough CRP staff with the qualifications/skills to support their customers' needs, and 33 DVR staff (19%) report there are not enough CRPs in their area.

To further explain why there were not enough CRP staff with the qualifications/skills to support their customers' needs, 60 DVR staff made comments which indicated a need to address a lack of CRP capacity and staff, and CRP staff qualifications and training needs as these staff comments explain, *"The "good" CRPs are often not accepting referrals, or are inundated with referrals, leaving them less responsive. This leaves the customers with fewer effective options and leads to customers switching CRPs often, costing more, as each CRP has to complete an intake.", "the training and staff qualifications of the CRPs could be improved. Specifically, hiring staff from diverse backgrounds, staff who have diverse training credentials and experience. Often staff have no experience job developing and/or no experience working with diverse disability populations.",* and *"personally I feel that CRP's have a lot of turn over and they don't have qualified staff to work with these young adults. I have heard i am new and i have never done this before, can you help guide me do you have a location you typically work with... these are all questions that should not be referred to VRCs"*.

WorkSource

Eighty-nine DVR staff made comments related to their perceived effectiveness of DVR's partnership with WorkSource and its partner organizations. Most comments described

drawbacks to partnering and connections with WorkSource as these staff comments suggest, *"WorkSource sends everyone that the "deem" disabled to DVR. It's especially bad in small offices"*, *"Limited success. WorkSource is often insufficient for customers in my area and thus is underutilized. My office does not have a Business Specialist which is a huge gap in services."*, *"I'm really not sure. In my experience even when stationed at a WorkSource collaboration is low. When I tried to collaborate on services I ran into barriers. People would not want to share information, or I could not get the services I needed for my Customer."*, *"It is inconsistent statewide. In some areas. there are great partnerships in place, and in others there's lack of partnership."*, and *"much work needed here...difficult to identify what the next step would be. Neither WorkSource nor DVR know about each other's services, not even enough to know how or who to refer. The Core Partners have a statewide plan that does not filter down to line staff. Most ESD staff do not know DVR exists and if they do, they do not refer or even think about partnering."*

Additional comments provided examples of effective partnering that is also taking place, "DVR and WorkSource are able to work together to provide different services that will benefit the customer most.", "DVRs relationship with Worksource opens up other services and training opportunities", and "There are many opportunities to increase the benefits of a closer partnership with WorkSource. VR is required to participate in the planning and priorities of local workforce system and contributes financially to the infrastructure of the system. There are opportunities for training, labor market conversations, co-enrollment for cost sharing, broader reach to employers."

Other Partnerships

Schools

Eighty-four DVR staff provided responses when asked to describe what is working well with DVR's partnership with schools (high school, post-secondary education) to support high quality services. Four themes emerged that include communication by specialized DVR staff and liaisons with the most comments, followed by relationships, the work of regional transition consultants, and high school staff knowledge. Example staff comments for each theme are included below.

Communication by Specialized DVR Staff and Liaisons

> *"VRC & VRS effort to repair DVR's reputation for supporting high schools after years of poorly managed services. Working with colleges/post-secondary programs to support student success and funding non-financial aid eligible classes that are designed to address disability related barriers.", "VR works well with transition by having contacts at the schools and being involved with students who are getting ready to leave high school early.", "…transition staff that are embedded in their schools", "I think the liaisons going to the schools helps make the connection", and "Keeping the teachers informed and we now have a great Transition specialist that does a lot of out reach for Pre-Ets services."*

Relationships

> *"Relationships have been established with some schools and partnerships is working towards support students and assisting to smooth transition from high school to employment or secondary.", "I think maintaining a good relationship with school staff is a good way to support high quality services. it has taken me several years to develop*

the relationship that I have with school staff. It takes a while for them to trust you and want to make referrals."

Regional Transition Consultant

"The regional transition consultant and the assigned school district rep working to make sure all parties are on the same page."

High School Staff Knowledge

"The traditional transition services are going well in most schools. The teacher's know what to do for referrals and what the counselor will need for eligibility and partner with the student and VR throughout the process."

Need of Improvement in DVR's Partnership with Schools. Eighty DVR staff made comments related to areas they think are in need of improvement in DVR's partnership with schools (high school, post-secondary education) to support high quality services. They indicated that relationship development with schools, followed by communication, and providing training of DVR Pre-ETS and transition process/service model were areas in need of improvement. Allocating for VRC transition specialty caseloads and the agency providing clear roles and procedures were additional themes that emerged from the data. Example staff comments for each theme is provided below.

Relationship Development with Schools.

"more intentional relationships with schools, and ability to be on site more, need support from schools to achieve this." and "We need consistent outreach, consistent relationship building between RTCs and VRCs with school staff and administration."

Communication.

"Need to maintain consistent contact and communication with schools, students and families" and "Often I will get invited to IEP meetings at the last minute and cannot attend due to my schedule. Communication definitely needs improvement."

Training DVR Pre-ETS and Transition Process/Service Model.

"Having a wait list has impacted student referrals from high schools. Our inconsistent PreETS services has adversely impacted our relationship with high schools. Now with the additional transition programs (school to work) we will need a lot of training and support to effectively implement these programs."

VRC Transition Specialty Caseload.

"More staff to meet capacity's needs for large school districts, hard to have 1 VRC for 500+ students at 1 school while balancing on MH caseload. I personally see valid reason to have VRC on transitional caseload while other VRCs can focus on MH and general caseload - better quality services."

Clear Roles and Procedures.

"DVR's approach to school partnerships has been confusing and unclear. There is a lack of clear definition/delineation between role of RTCs vs. VRCs which leads to a duplication of services and is confusing to schools. Schools want to have a reliable contact, not multiple contacts who can offer different services. They appreciate the ease of having one person they can reach out to who can give them all the information/resources etc. They have a difficult time tracking staff changes, which is occurring too often."

Businesses

Seventy-two DVR staff provided comments to illustrate what is working well with DVR's partnership with businesses to support high quality services. Business relationship activities to include DVR contracts with Vendors (organizations they do business with) and CRP relationship with employers were notable themes, followed by activities of the DVR Business Specialist as noted in these example staff comments, *"RCs and other DVR staff maintain key contacts with businesses in their area, helping to educate employers about hiring individuals with disabilities. Offering the same level of support and education we give to our customers, to the employers and business owners in the area."*, *"Having accounts at Fred Meyer and JcPenney as well as other stores for instance assist customers with clothing for interviews which relieves stress for the customer and also allows them to present appropriately in their interview."*, *"CRP's advocating and informing businesses of DVR customers and supports is also very helpful."*, and *"Our business specialist, who was fantastic, just left DVR. Having a high quality individual in this position is probably the most important thing to do to foster a good relationship with employers."*

Need of Improvement in DVR's Partnership with Businesses

Regarding areas identified as in need of improvement in DVR's partnership with businesses to support high quality services, three main themes emerged from comments made by 72 DVR staff respondents. They included the need to improve business specialist services, communicate and provide information such as marketing DVR services, and business partnership development, including having a community presence. Example staff comments for each theme follow below.

Business Specialist Services. "The business specialist role needs to be better defined

and consistent. DVR needs to develop a better understanding of what our expectations are

in working with businesses, and provide training and resources to our staff., somehow

connect the work done with business to VRCs and their customers. there is a gap to what is

done there to matching need with customer's on caseload.", "Our business specialist could

provide regular updates on business activities and new and incoming businesses to the

community. We do not have a regular report as of yet.", and "There are no business

specialist in rural areas. So this just doesn't happen except on the rare occasion that a VRC

has time outside of caseload management and customer needs to talk with employers."

Communicate and Provide Information. "Continue with monthly meetings for DVR

staff to meet with employers while they get to know about working with DVR", "finding it

very useful and constant communication from DVR Business manager (if hired someone yet

- previously it was helpful).", and "Statewide advertising to help businesses and citizens

better understand diversity and resources available at DVR would be helpful"

Business Partnership Development.

"Yes, more businesses that DVR has relationships with to place customers that
understand what we do as an agency, who we serve and how we can mitigate barriers
to obtaining and maintaining employment for participants.", "Advocacy from a
statewide business resources manager would help facilitate action with larger
employers that are difficult to break into. Ability to collaborate with a higher level
person would be useful. Our local hospital for instance is operated out of an entirely
different region. We cannot get them to work effectively with us on a local level.", "The
business community needs to hear from DVR more, see DVR people in person more.",

and "WE need to be at Chamber of Commerce meetings, Lions, Kiwanis, etc meetings,
professional organization meetings OTHER than rehab! Retail industry groups,
hospitality industry groups, food services, etc etc."

Human Services Agencies

Several areas are reported by DVR staff to be in need of improvement in relation to
DVR's partnership with other human services agencies to support high quality services. Housing
topped the list (*n*=64), followed by community mental health (*n*=56), independent living (*n*=48),
parole and probation/corrections/juvenile rehabilitation (*n*=46), Social Security Administration
(SSA) (*n*=42), and substance abuse (*n*=40). Others include Temporary Assistance for Needy
Families (*n*=34), Aging and Long-term Support (*n*=34), Veterans Administration (*n*=34),
Developmental Disabilities Administration (DDA) (*n*=33), and Services for the Blind (*n*=32).

How Partnerships May Be Improved

Seventy-three DVR staff made comments to describe how partnerships with other
human service agencies may be improved. Following analysis, three main themes emerged that
involved establishing liaisons and collaboration, the need for more resources, and providing
training to work with special populations and other human service agencies.

Establishing Liaisons and Collaboration.

"Actual contact: in person, meetings, via phone, partnerships, zoom calls, etc., Build
relationships. We all act like we are separate entities, when in fact, we should be
working a cohesive unit, providing the best services to our customers.", "Need to
establish visibility and effective communication in each agency - creating units in each
region to address the partnerships and create relationships with each agency.", and

"Establishing contacts within organizations who know of DVR and can serve as a liason for referrals, service expedition, etc."

More Resources.

"funding sources so that customers who are looking for work but have immediate financial need can access those programs quicker and with less office hopping." and "Independent Living - we simply don't have enough providers making it impossible to make referrals."

Training to Work with Special Populations and Other Human Service Agencies.

"DVR providers need additional training to better understand how providing assistance with training, education and employment can jeopardize housing for our customers so that this can be avoided." and "We have zero training in how to support individuals in the justice system and how their records can impact employment, yet we are expected to provide Substantial Counseling and Guidance on this matter."

Partnership with Department of Services for the Blind

Of the 90 staff respondents, DVR staff were about split in their rating of service coordination quality on cases shared with the Department of Services for the Blind (DSB). About 51% rate the quality of service coordination on cases shared with DSB as "Okay" (n=25) or "Needs Improvement" (n=21), whereas almost 49% rate the quality of service coordination on cases shared with DSB as "Good" (n=38) or "Excellent" (n=6). Overall, staff report the average service coordination quality rating or mean score is 2.32 or "Okay".

Twenty-eight DVR staff made comments to explain their "Needs improvement" response. The main theme that emerged was related to the need to improve agency

collaboration as suggested by this staff comment, *"It is odd that these two agencies, which are basically "sister" agencies, do not have better communication with each other. Since I've been with DVR I have seen less collaboration on cases and joint cases. I don't know if new VRCs are encouraged to reach out, visit, and get to know their local DSB counselors."*

Developmental Disabilities Administration

Of the 92 who responded, the majority DVR staff (just under 70%) rate the quality of service coordination on cases shared with DDA/County Developmental Disabilities agencies as "Good" (*n*=46) or "Excellent" (*n*=18), whereas about 30% report the quality of service coordination on cases shared with DDA/County Developmental Disabilities agencies as "Okay" (*n*=17) or "Needs Improvement (*n*=11). Overall, staff report the average service coordination quality rating or mean score is 2.77 or "Okay".

Twenty DVR staff made comments to explain their "needs improvement" response. DVR/DDA communication and coordination that involve DDA/DVR monitoring and support plans were suggested by these staff comments, *"Has been a struggle as long as I know. We don't understand each other's programs and do not share information well. We have difficulty collaborating effectively on cases."*, *"more follow-through on communication and shared commitment to supporting mutual clients."*, *"Need more coordination between agencies and understanding of each others services and roles when working together."*, and *"more training on Monitoring Plans and transitioning DVR to DDA long term support , DDA has been providing funding for DDA/DVR Monitoring and Support Plan when DVR is unaware and then pressuring*

DVR to complete an expedited plan and support a goal that has not been monitored once a job

is already found."

Mental Health/Behavioral Health

Of the 94 who responded, 67% of DVR staff rate the quality of service coordination on

cases shared with mental health/behavioral health agencies as "Okay" (*n*=37) or "Needs

Improvement" (*n*=26). Conversely, only about 33% of DVR staff rate the quality of service

coordination on cases shared with mental health/behavioral health agencies as "Good" (*n*=25)

or "Excellent" (*n*=6). Overall, staff report the average service coordination quality rating or

mean score is 2.12 or "Okay".

Thirty-one DVR staff made comments to explain their "Needs Improvement" response.

The two main themes that emerged were related to comments revolving around DVR/mental

health communication and service coordination, and the lack of mental health providers and

staff capacity as these staff comments suggest, *"There is little to no coordination of care on*

shared cases with mental health providers, our schedule does not allow to meet with

psychologists or counselors on a regular basis.", *"No direct partnerships, lack of DVR/DSHS*

investment in helping CMH orgs succeed, develop liaisons that go beyond the VRC being a POC,

but rather involved and engaged with that community's population.", *"Mental health facility*

needs to expand the insurance the accept. For instance, I have a customer who needs mental

health counseling but I refer her to a mental health facility but they said they don't accept

Medicare.", and *"Prior to the pandemic I think DVR did a great job of collaborating and*

fostering relationships between our agency and local MH organizations. Since the pandemic the

need for MH and BH services are so critical that the turnover is high and waitlists are very long.

Not a problem DVR can necessarily address but it is a HUGE barrier to our participants with

finding and keeping employment."

Remote Services

Ninety-two staff made comments to describe their experiences with providing DVR

services remotely. Most DVR staff comments indicate the many benefits remote services have

for both customers and staff such as flexibility for customers and staff. Example staff comments

include, *"It can be very effective if the customer (or someone in their life) has access to the*

technology required. I really like the hybrid approach, as we are able to provide remote services

to people who may not be able to get to the office or feel comfortable with tech, but can still

provide in-person supports to those who need it.", "I think after the initial year + of getting

established we have mostly figured it out. It's a nice option for some of our customer who have

a difficult time scheduling and managing transportation/home life/child care issues. It's also

harder for some customer to connect, but our hybrid services are really helping. Staff are

conducting almost all intake appointments in-person, which speeds the paperwork needs and

really helps folks establish rapport and understanding of support needs.", and "Overall the

remote option has worked well for customers. Especially those with transportation issues,

mobility issues or mental health or health issues. Giving customers the option is best though as

some do better in person."

Other comments suggested experiences that emphasized drawbacks of remote services.

Getting signatures from customers and the learning process for remote work were notable

challenges identified by staff as these comments suggest, *"As an RT, it has been difficult.*

Because we are in the process of going paperless, our customers don't have the means to print out information or sign stuff electronically." and *"Although initially it was difficult to see how we could provide quality services remotely, I believe this has offered staff the ability to have more work life balance and increased moral related to this, and had the ability to partner and collaborate more as travel is not an issue."*

Ninety-one DVR staff responded to the question asking them to describe how remote DVR services have affected their DVR customers. The majority of DVR staff comments report the positive impacts of remote services. Access to DVR services, alleviating transportation barriers, and having a choice of in-person or remote services were notable impacts. Example staff comments for each of these themes are listed below.

Positive Impacts

Access to DVR Services.

"Remote services have allowed customers the accessibility to attend appointments more conveniently and frequently. Remote services has allowed customers to build their computer skills / knowledge and evolve to change."

Alleviating Transportation Barriers.

"Many customers without reliable transportation just starting with DVR really appreciate virtual meetings until we can help them establish better transportation. Many customers really like remote meetings once we show they how easy it can be to do or join a call."

Choice of In-Person or Remote Services.

"or some of our customers, especially those that deal with extreme anxiety and for those with transportation issues, remote services have allowed them to participate in DVR services. For some customers, they would prefer to meet in person but we have found that remote services worked for most of our customers. We have also seen a steep decrease in "No Shows" since we contact them where they are. We do not have to worry about them forgetting their meeting missing a bus, car problems, or weather related issues." and "Not much even though a small percentage of customers prefer in-person due to hearing loss and/or cognitive limitation, Some customer's disabilities are better served face to face (as shared to us by them)"

Negative Impacts

Alternatively, there were many comments that discussed the negative impacts of remote services including level of engagement and technology limitations for DVR customers as indicated by example staff comments that follow.

Level of Engagement.

"This is hard to quantify. Engagement and rapport seem to be impacted since not all customers are skilled at accessing services virtually." and "Students were less engaged in the discussion and had no incentive to complete work."

Technology Limitations for DVR Customers.

"There are severe access gaps for customers without internet access.", and "Mostly to do with lack of access to technology and or not enough experience on technology uses such as video conferencing, teleconfer[enc]ing, etc."

Recommendations to Improve Remote Work

Eighty-one staff responded to the question that asked for their recommendations to improve remote DVR services. Four primary themes emerged that include continuing with remote services to include giving customers the option for a hybrid service model (remote or in-person), having up to date technology for service delivery, making Zoom the online platform used by DVR, and having technology available for customers. The implementation of an electronic signature software and providing staff training for the use of technology/telehealth practices were also notable recommendations by staff. Example staff comments representing each theme follow.

Give Customers Option for Hybrid Service Model (Remote or In-Person).

"Keep remote work as an option. Encourage supervisors to attend some of the virtual meetings between customers and VRCs to evaluate the quality of the service.", "Yes-specifically I think you should change all interview rooms to high-tech meeting rooms for customers who do not have a private confidential place to meet with their VRC's. It would be great for them to get scheduled for a room, and have it set up for them to talk via Zoom or Teams with a touch of a button. This hybrid approach to meeting with customer would allow for easy access and coordination of paperwork.", "Let people work remotely 90% of the time and only come to the office 1 time per week. It's better for health and safety as well.", and "Allow it to continue. It should be the customer's choice whether to receive services remotely or in person."

Have Up to Date Technology for Service Delivery.

"I would appreciate it if I could have access to Adobe Pro. I always have to forward the documents to the RT to separate and or copy to Stars and for other reasons. The

counselors need the tools be able to be more efficient.", "Allow texting for customers and staff. Some customers prefer to only text, especially Deaf or Hard of Hearing customers.", "All RT's need to have access to schedule 1 hour Zoom meetings. We were advised by IT that we need to start offering appointments via phone or Microsoft Teams if it is a remote appointment.", "Yes, help with WiFi to VRCs, RT to improve the consistency of and speed of.", and "Provide transition with the tools that the schools use so we aren't preventing from working with that specific population."

Make Zoom Online Platform by DVR.

"We need to keep Zoom. Too many customers are not familiar with Microsoft Teams.", "many customers are requesting Zoom because they already have it downloaded and are familiar with it." and "Increase Zoom from the free account to no limit on meeting times."

Have Technology Available for Customers.

"The state could make sure that internet access is available to everyone. That would be beneficial.", "Having COVID equipment available to provide (Ipads/Laptops/etc.) was amazing for many customers that otherwise did not have the tools.", and "even if you have the application installed on a customer device. We will see an impact to our clients punctuality and frustration levels"

Implement Electronic Signature Software.

"Being able to sign virtually would be a huge help for both employees and customers. Having a texting system with customers would help.", "I also think Docusign will make a huge difference as the #1 reason I close people other is due to not signing a plan or an extension in time.", and "Easier methods to acquire customer signature, e.g. phone apps, docusign, etc., Accessible portal for e-signatures. Customer portal for documents".

Provide Technology/Telehealth Training.

> *"policy and best practice guidance on expectations of remote delivery for staff, so they know the expectation and encourage conversations early and ongoing for what is working and what is not with each customer", "I would recommend revisiting our guidance for telework days to ensure that customers needs are at the forefront and work-life balance is maintained at a level that is sustainable for our agency business needs.", "provide more assistive technology training where needed to promote the best remote access for DVR customers", and "or free courses on uses of technology such as phone apps using video conferencing, etc."*

Staff Support

There were 80 DVR staff responses to the question, "What types of organizational support from your agency do you need to provide high quality DVR services to individuals with disabilities?" Three main themes were identified that consist of types of support needed. First, the agency providing resources to effectively serve customers, including training and efficiency of administrative processes. Next, providing staff support and flexibility to include focus on staff capacity and retention of field staff, giving higher salaries, smaller caseloads, and support by office supervisors. Finally, addressing organizational leadership, including direction and communication across the agency. Lesser comments but notable include support to deliver Pre-ETS and transition services, along with coordination with community organizations.

Ideas to Improve Staff Support

Seventy-one DVR staff responded to the question asking for their additional ideas to improve staff support to effectively serve DVR customers. Three main themes emerged across

staff respondents. They include addressing staff turnover and office staffing capacity, providing

staff recognition, trust and support, and staff training.

Address Staff Turnover and Office Staffing Capacity. Increasing staff salaries and

work flexibility were notable areas related to addressing staff turnover and office staffing

capacity as these staff comments suggest, *"More flexibility with ability to work part time*

and to telework more. DVR is losing staff due to the rigidness around only being able to work

full time and then requiring us to be in the office unnecessarily. Most days I come into the

office I am sitting on Zoom all day. It's also not safe because I got COVID a few weeks ago

from my coworker who was told she still had to come in the office because she didn't have a

positive test yet even though she was exposed. She later tested positive after exposing

myself and then I tested positive." and *"flexibility better pay. when a DDA CRM with a BA*

makes the same as a VRC 4 that requires a Masters and 3 years work experience as a VRC it

discourages your staff! RTs need a raise also, they do so much for VRC's and do not get paid

for their work."

Provide Staff Recognition, Trust and Support. Staff recognition, trust and support

were key areas identified as these staff comments indicate, "Treat staff with respect and

trust (i.e. do not make them email supervisor in and out each day). Little things go a long

way.", "more support, more positive feedback, less negative", and "More supportive

administration allowing less customers per caseload and more flexibility where staff can

feel like they are trusted to get their work done without strict office protocols to come in

regular when only seeing one customer in the office".

Provide Staff Training. Specific areas for training that emerged include training in VR case services, on-boarding training, and Pre-ETS/Transition training for staff as these comment describe, "*raining topics need to be created, some staff have not received in depth training in areas including supported employment, eligibility determinations, plan writing, and overall deeper dives in to complicated cases, best practices, and sound professional judgement, Have training on the psychosocial aspects of Disability that focuses on the modern leaders of the Disability Community, the cultural minority model, trainings on disclosure statements/process, and the current updates/guidance on civil rights laws like ADA.*", "*I have been part of the training process for new staff and there doesn't seem to be any consistency regarding how new staff are trained. I feel newer staff need to feel more supported in their training so they don't feel so overwhelmed.*", and "*Training VRC's and supervisors how RTC's are able to assist with transition services and how those services can be provided prior to VR and assist in the referral process for who are good candidates for a referral.*"

Recommendations for DVR as an Organization

Finally, 79 DVR staff responded to the question, "What would you recommend that DVR do as an organization to maximize its effectiveness in fulfilling its mission and providing excellent customer service during the next three years?" Focusing on supporting staff and staff training/professional development were two main themes that emerged.

Hire More Staff and Retain Staff. Hiring more staff and retaining them, increased pay, and agency communication were more notable recommendations as these comments indicate, "*we need more staff so that we can reduce caseload sizes so that VRCs can provide*

more effective case management and counseling supports.", "Second, needs analysis of positions within DVR as a whole, Director to Office Assistants, are all of the positions needed? if so what is the business need they are meeting? are they meeting those needs? or are there changes that need to happen? ", "Increase pay to staff to bring us up to standard with our professional qualifications. This would reduce staff turnover and help to stabilize our work. Right now, we are shedding staff to other agencies as they require lower professional qualifications, but pay more for the work. The work is often less complex as well. This makes DVR a feeder agency to other WA state and surrounding state agencies. Pay us commensurate with our experience and qualifications. We were not included in the pay increases recently other than the general across the board pay increase.", "We have to pay our staff at a level that is in alignment with the education and skills needed to do good VR work. We further diminish the disability community by not paying our staff well enough to provide the services they need.", "Increased communication of priorities, maintain focus on professional development of field staff, and engagement in agency priorities at all levels including RT's and Business Specialist, RTC's, etc.", and *"Ensure that staff know our mission, vision and values and communicate directives and changes with a narrative related to those ideals."*

Offer Training/Professional Development. Also, offering training/professional development opportunities, including training related to VR practices and in working with diverse populations as these example staff comments suggest, *"provide training to all staff to retain staff about their jobs. They are hired in because they meet the qualification, but not trained in how to do their job effectively. I know they need to be trained in sexual*

harassment and ethnic differences and ethics, but they don't get the training on how to DO

THEIR JOBS.", "Provide training on the different processes: Eligibility, Financial Statements

(how to figure out family contributions), IPEs, reviews, etc.", "The two biggest things that

would make a great difference would be to get all of the supervisors trained and in

agreement that they and their offices will follow the customer services manual and not have

glaring differences office to office, equitable customer experience would be nice.", "ongoing

education in regards to the different disabilities and resources to work with them when

needed.", "focus on improved professional judgment", "cover critical areas that impact

service delivery in training, and put quality assurance in place for case management skills.",

and *"continue sensitivity trainings to inform staff about diverse groups, cultures, and social*

morays which will empower them to integrate well with customers from those

demographics."

Key Informant Interviews

The Rehabilitation Services Administration defines key informants as community

partners and "experts who are particularly knowledgeable about VR needs of people with

disabilities, including people who have in-depth knowledge of the rehabilitation needs of

individuals with disabilities and of the rehabilitation service system." (VR Needs Assessment

Guide, 2009)

Process

In collaboration with the Washington SRC, CCER identified more than 30 partner

agencies, service providers and individuals who could potentially provide input as key

informants to Washington DVR. During September and October of 2022, CCER conducted 28

interviews with identified key informants to collect critical community information about

barriers to employment and the rehabilitation service needs of individuals in Washington who

have disabilities. All interviews were conducted live via video conferencing and approximately

46 individuals representing a variety of entities across the state of Washington participated. An

accommodation in the form of an American Sign Language interpreter was provided by one of

the interviewees and all interviews were accessible. Interviewees were informed that their

input would be documented and aggregated in a final report alongside other collected data to

preserve confidentiality.

- DVR partners who were represented in these interviews included the following:

- State Rehabilitation Council

- State Independent Living Council

- Centers for Independent Living

- Client Assistance Program

- Department of Services for the Blind

- WorkSource Partners

- Behavioral Health Providers

- Intellectual/Developmental Disability Providers

- Educational & School District Partners

- Higher Education Partners

- Various Community Rehabilitation Programs and

- Various Disability Advocacy Groups

Although the participants represent a broad range of partners and service providers, it should be noted that some community expertise may be missing from the results. Specifically, CCER did not interview representatives in the following specialty areas: tribal vocational rehabilitation programs, Autism-specific service providers, entities serving only individuals with brain injury, or Washington employers and businesses. These potential partners may have additional perspectives and information that may be valuable for DVR to solicit and review in the future.

The key informant interview process used a systematically developed set of open-ended questions which were presented to interviewees in a semi-structured interview style by a single interviewer. The interviewer took detailed notes throughout the interviews, but the sessions were not recorded. Upon completion of the interviews, each session's notes were transcribed, and reflexive thematic analysis was applied to the transcriptions. An iterative review and coding process resulted in the identification of common themes that were then compared with data collected from other sources including the customer and staff surveys conducted by CCER. One of the strengths of the process is that this data triangulation allowed for the synthesis of qualitative and quantitative data and further validated the results contained in this report, leading to the identification of potential action strategies for DVR.

Responses & Themes

The Key Informant Interview questions solicited information from DVR partners in the following areas: barriers to successful outcomes, rehabilitation service needs, individuals who are unserved and underserved, transition, Community Rehabilitation Programs (CRPs),

WorkSource partnerships, business partnerships, and recommendations for service provision improvement within DVR.

Barriers to Successful Outcomes

Interviewees were asked to identify the most prevalent barriers encountered by people with disabilities while trying to achieve a successful outcome (Table #3.1). The following themes were identified and addressed by multiple respondents:

- **The complexity of the DVR process**. In 21 of the 28 interviews, respondents spoke about how difficult the process can be to navigate for a person with a disability who is not a strong self-advocate or who doesn't have an advocate at their side. Various respondents pointed to the length of time required for a client to progress through the DVR process and indicated that the federal timelines make the process far too long (for example, it was reported that some counselors seem to always wait until the 59th day of the federally allowed 60 days to make an eligibility determination). Another respondent highlighted the issue by stating that DVR's "*cadence is mismatched to the community and its customers*". Several respondents also mentioned that DVR contracting processes can be difficult for partners to navigate and successfully engage with.

- **Inconsistency in quality of staff, staff philosophies, and service delivery**. In 18 of the 28 interviews, respondents indicated that the quality of staff and service delivery differed greatly depending on where in the state someone was accessing DVR. One participant stated, "*Things really vary from counselor to*

counselor, with service delivery ranging from very creative and effective to highly

rigid. We see siloes within the organization from one office to another." Many

respondents spoke about "*pockets of excellence*" that exist across the state but

described a wide range of counselor approaches and differences in how rules

and regulations are interpreted from office to office. Several participants

indicated that many counselors have an "*attitude of scarcity*" and that

supervisory approval processes interfere with service delivery and are not

consistent among offices. Other comments in this area addressed counselor

"*rigidity*" and that service delivery was highly dependent on the personality and

commitment of the specific counselor involved.

- **Employer Attitudes and Disability Stigma.** In 15 of the 28 interviews,

  respondents identified negative employer attitudes towards people with

  disabilities as a significant barrier to employment and described ongoing public

  stigma around disabilities in general. It is notable that employer attitudes about

  disabilities were also identified as a significant barrier by DVR customers and

  staff as well as partner key informants.

- **Transportation**. In 15 of the 28 interviews, respondents identified transportation

  as a significant and ongoing barrier to employment, including in areas where

  public transportation seems to be more prevalently available. Several individuals

  indicated appreciation for DVR's attempts to support payment for transportation

  and provide transportation resources but indicated that the lack of availability of

  reliable transportation is a bigger issue than what DVR can adequately address.

- **Staff Turnover.** In 14 of the 28 interviews, respondents identified the frequent rate of staff turnover and general leadership "*turmoil*" as significant barriers to success. Staff turnover was most often addressed in the counseling area, but frequent changes in leadership (including supervisors), business specialists and transition staff were also mentioned. As one participant stated, "*It's hard for partners to build relationships when staff keep changing.*"
- **Order of Selection.** In 14 of the 28 interviews, respondents identified Order of Selection and long waiting lists as a barrier to successful outcomes.

Other barriers that were mentioned by multiple respondents included a general lack of awareness about who DVR is and what they do, access to and training in the use of technology, the need to build better partner relationships, the lack of access to effective behavioral health and substance abuse services, implicit biases on the part of some DVR staff, the lack of clear communication, housing instability and lack of benefits planning.

Table 3.1: Most Prevalent Barriers Identified by Key Informants

Top Barriers
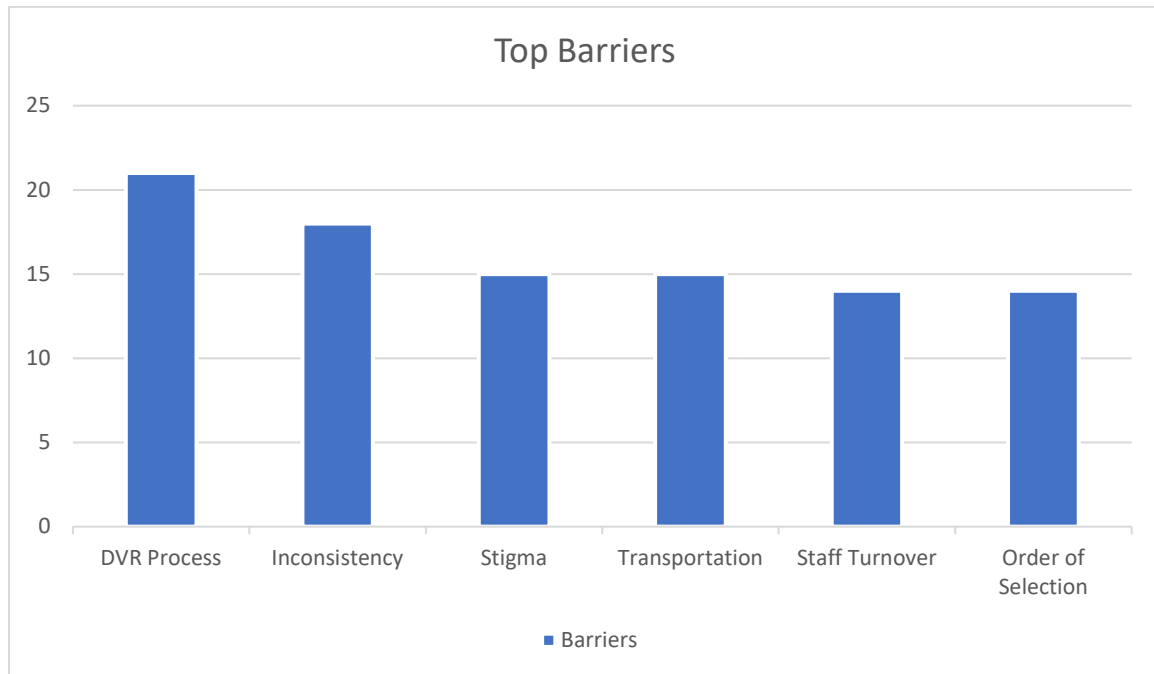
Rehabilitation Service Needs

Key Informants were asked to identify the most important services needed by people with disabilities to achieve successful employment. Table 3.2 illustrates the services identified as the top three most important services by respondents.

Table 3.2: Services Identified as Most Important by Key Informants

Services

Service	Value
Rapid Engagement/Timely Responses from Counselors	8
Job exploration/career planning	8
Job Training, Job Sampling, Work-Based Learning	7
Job Coaching	7
Job Development/Placement	7
Behavioral Health Services	6
Independent Living	6
Benefits Planning	6

■ Services

Other critical services mentioned by interview respondents included employer education and incentives, applying a holistic approach to an individual's situation, reliable transportation, provision of long-term supports, client follow-up and connections to housing resources.

Unserved/Underserved

When asked to identify those groups or individuals who were either not served effectively by DVR (unserved) or who could benefit more from DVR services (underserved), interviewees identified the following groups as seen in Table 3.3.

Table 3.3: Unserved and Underserved Groups Identified by Key Informants
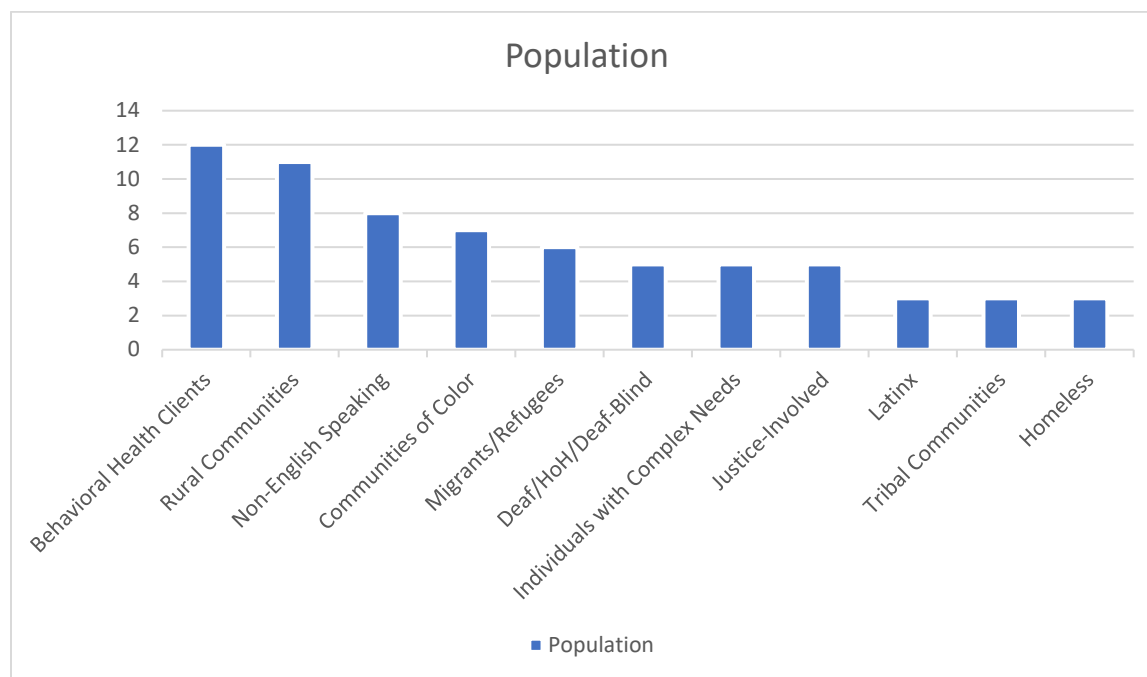
Transition

Key informant interviews included questions about the needs of transition aged youth, how well DVR is working with educational partners to meet those needs, and information about Pre-Employment Transition Services (Pre-ETS). In these areas, participants most frequently raised concerns about the implementation and delivery of Pre-ETS. One respondent stated, "*DVR has a long way to go with Pre-ETS; they still don't effectively partner with school districts in a consistent manner.*" Another indicated that DVR is "*in the game, but there is a lot of room for improvement, especially in the area of Pre-ETS.*" Several respondents mentioned that the contracting process for provision of Pre-ETS is problematic with one stating that "*it would be helpful if the timing for DVR programming and contract periods were better coordinated with the realities of the school districts. If DVR could be more mindful of school schedules when*

working through the contracting process, this would be very helpful." In addition, respondents

remarked that the Pre-ETS processes and required forms can be prohibitive for school districts,

students and families to successfully use and navigate. One respondent stated that "*the*

teachers and staff are incredibly busy and DVR's required forms are a real barrier."

Other transition comments addressed the need for DVR to improve its relationships

with schools and school staff and do a better job of educating students, families and school

personnel about what DVR can do and who it serves. Respondents also indicated that there are

often concerns about the supplanting of services as DVR and schools are attempting to

collaborate around provision of supports that both systems can offer. Interviewees indicated

that many youth are lacking in soft skills, confidence and self-advocacy, all characteristics that

are critical for future success. Several respondents suggested that having more common

verbiage and definitions among service providers would be helpful to the overall transition

process.

Finally, at least 8 of the key informants referenced recent School to Work legislation

passed in Washington and expressed excitement and optimism about the partnership and

service delivery opportunities on the horizon for DVR and transition aged youth in the state.

Community Rehabilitation Programs

Interviewees were asked about the quality and needs of existing Community

Rehabilitation Programs (CRPs) in Washington. The most common responses indicated that

CRPs would benefit from additional training about DVR processes, clients and expectations and

that DVR could benefit from training about the CRPs and their capabilities. Key informants also

discussed the difficulty of CRPs to remain solvent and effective due to low and capped payment

rates as well as barriers related to the contract and billing processes required by DVR. CRPs also struggle with staff turnover due to the level of payment rates from DVR and other governmental partners. Other comments included the need for more CRP resources in rural areas, better data sharing among service providers (including DVR), and better alignment of disability and service-related definitions and verbiage.

WorkSource Partnerships

When questioned about the effectiveness of WorkSource service delivery for people with disabilities and their partnerships with DVR, key informants highlighted the following points:

- Many of the respondents indicated that the relationship between DVR and WorkSource programs is solid and that WIOA has strengthened and institutionalized this partnership.

- WorkSource locations still struggle to effectively serve individuals who have disabilities and many times over-rely on referrals to DVR to address them.

- Co-location of DVR staff at WorkSource locations has been extremely important to the partnership and effective service delivery, although there are still considerable inconsistencies in the quality of those relationships from location to location across the state.

- Both partners could benefit from increased awareness and deeper education about their respective systems of service delivery.

Business Partnerships

Key informant respondents were asked if they had any observations and recommendations about how DVR could better engage with area employers to recruit and hire people with disabilities. As previously indicated, many respondents indicated that employer attitudes and biases constitute a significant barrier to the successful employment of people with disabilities and several indicated that DVR could be an impactful leader in this area. One participant indicated that DVR should "*concentrate on educating the public and challenging employers to be problem-solvers – DVR is in a unique position to do this and should be the epicenter of this activity.*"

Multiple participants mentioned that they believe DVR has worked very hard to develop strong engagement with employers through their business service representatives, although the issue of staff turnover among those specialists was again raised in this area. One respondent pointed to the need to broaden outreach efforts saying, "*DVR could stand to update and expand their 'catalog' of business partners – they can get stuck on certain businesses who hire and then don't explore other options.*"

Areas of Strength

It is important to note that throughout the key informant interviews, almost all the respondents had positive things to say about Washington DVR. In at least 9 of the 28 interviews, DVR's partners described their relationship with DVR as productive and strong, while still pointing to the need for improving collaboration and partnerships. This seems to indicate that most of the key informants recognize DVR's efforts and intentions but still see room for functional improvement. Additionally, many respondents took the opportunity to

highlight the quality and direction of the current DVR director, making statements such as "*DVR is doing a lot of good things – it feels as if they have the right director moving in the right direction – he is working to develop trust inside and outside of the organization and has brought in several good leaders and they are becoming much more responsive.*" and "*Terry Redmon seems to be really responsive when he hears about issues.*"

As previously mentioned, many of the respondents also mentioned staff "pockets of excellence" and made statements such as "We've seen lots of improvement in DVR's engagement with community partners and their ability to craft services to meet the audience they're working with" and "there are excellent staff who engage well with clients and provide quick turn-around".

Lastly, all of the key informants interviewed were actively engaged and many expressed appreciation for being included in the CSNA process. Given the thoughtfulness, seriousness, and quality of these interviews, it is clear that DVR has a plentiful source of collaborative partners who care about people who have disabilities in Washington and their success.

Potential Action Strategies

Each key informant was asked to make recommendations to DVR that would assist them to maximize their effectiveness in fulfilling their mission. The following potential action strategies were mentioned by multiple respondents (as seen in Table 3.4):

- The most frequent recommendation (18 of the 28 interviews) made was for DVR to continue to build and strengthen their functional relationships with community partners and to find ways to improve communication and de-silo

service provision in collaboration with other agencies and providers. One respondent summarized this point by saying DVR should "*ensure good quality and regular communication and relationship building that is consistent across schools, organizations and the state – this is key for future success.*" Another respondent specifically recommended that DVR work to make better use of the Centers for Independent Living as resources for holistically addressing client needs.

- The next most repeated recommendation (17 out of 28 interviews) was for DVR to invest in their workforce and find innovative ways to improve the recruitment, hiring, training and retention of high-quality staff. Several respondents alluded to conducting a review of the credentials required to provide rehabilitation counseling as well as making more creative use of various supporting positions such as paraprofessionals throughout the process. One key informant urged DVR to "*examine current credentialing requirements – keep the high standards but be flexible and find ways to pay and reward people well.*" Other respondents spoke about the need to recruit and hire ethnically diverse staff who represent the community and clients that DVR is serving. One individual recommended that DVR "*develop a culture of integration, accessibility and collaboration among all DVR staff*". Staff training recommendations were made in the areas of assistive technology, anti-racism, ableism, and internal biases, as well as general professional development as a strategy for retaining strong staff. As staff turnover and inconsistency was a significant barrier identified by each of the

three data sources, CCER suggests that focus in this area would be highly

valuable to DVR and have far-reaching benefits across the system.

- Also mentioned (17 of the 28 interviews) was the need for DVR to examine its

  work processes for simplification and to better engage with clients, meeting

  them where they are in their lives and shifting the main focus to customer

  service as opposed to rules and compliance. When discussing potential process

  improvements, key informants frequently expressed the need for DVR to

  embrace rapid engagement philosophies and ensure timely responses to client

  needs. One respondent stated, "*DVR should examine how their policies are*

  working and look for opportunities to make them less complicated and more user

  friendly. Examine and address the tension between compliance and good

  customer service." Another respondent pointed specifically to the job search

  process by stating, "*DVR could be more flexible in modifying client plans to fit a*

  job that happens to come up during the job development process that is a great

  fit."

- The following three suggestions were also made in 11 of the 28 interviews:

- Focus on better supporting and providing access to behavioral health and

  substance abuse services by embracing the philosophies of Individual Placement

  and Support (IPS) such as rapid engagement and zero-exclusion. Several

  respondents mentioned the value of implementing trauma-informed care

  throughout the rehabilitation process. There were several comments about

system misalignment in this area, specifically when it comes to the belief that anyone is employable with the right approach and supports in place.

- Better educate and engage with employers and businesses across the state through strengthening outreach, counselor use of labor market information (LMI), and exploration of emerging industries and apprenticeship programs. One key informant suggested that "*effective use of LMI by DVR staff can result in access to a more diverse range of jobs for clients. Mapping out jobs and matching skills training to employer needs. Exploration of who is really hiring and for what. DVR should be known for their knowledge of emerging and non-traditional jobs.*" Another pointed out that "*employers aren't aware of the wealth of talent among people with disabilities*" and yet another stated that DVR should "*concentrate on challenging employers to be problem-solvers – DVR is in a unique position to do this and should be the epicenter of this activity.*"

- Increase and improve the marketing and broadcasting of DVR services through partner education and training and the development of materials and "*field guides*" that will assist partners in understanding what DVR is, who it serves, and how collaborative service provision leads to successful employment outcomes. One key informant referred to this process as "*system de-mystification*".

Table 3.4: Potential Action Strategies Identified by Key Informants
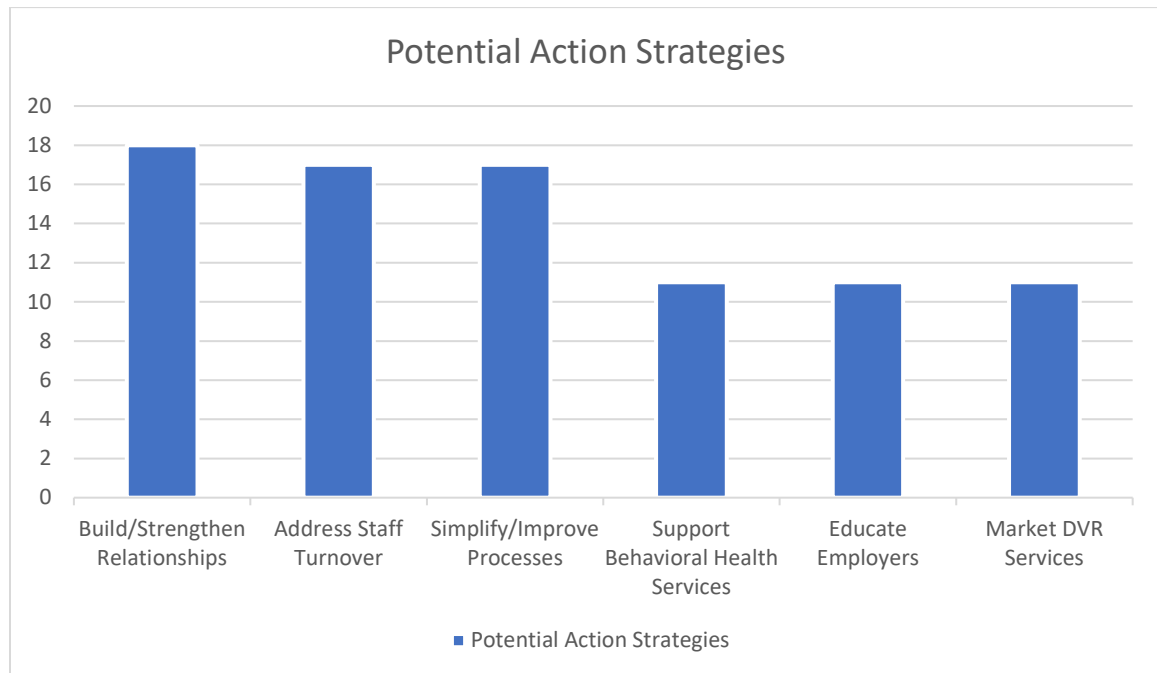
In addition, a myriad of recommendations for agency improvement were proposed (although on a less frequent basis) and include the following:

- Focus on using effective data to drive employment outcomes

- Find ways to get more funding and staff resources

- Use technology and online resources to better engage with clients; develop a client website where individuals can check to see who their counselor is and where they are in the process

- Provide more frequent and high-quality benefits planning to clients

- Identify and focus on areas where positive things are happening and work to replicate these across the system

- Focus on developing stronger career pathway approaches throughout the process

- Teach clients to be great self-advocates

- Explore co-location approaches with educational districts and schools

- Look for creative and flexible ways to improve the provision of Pre-ETS

Finally, one respondent eloquently distilled many of these recommendations into the following overarching statement: "*most of all, create the time and capacity to dream about what the agency can accomplish.*"

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Appendix # 1

VR Customers July 1, 2020 to June 30, 2021 Compared to People with Disabilities in Washington by County 2021

	WA VR Cases					State of Washington	
	Percent of cases July 1, 2020 to June 30, 2021	**Count**	**Percent of cases in plan**	**Count**	**Percent of population w/ disability**	**Count**	**Percent of population w/disability Ages 18-64**
Adams	.08%	14	.06%	3	12.0	2,332	NA
Asotin	.6%	100	0.52%	27	NA	NA	NA
Benton	2.5%	398	1.48%	77	15.0%	30,983	13.5%
Chelan	1.4%	221	0.48%	25	18.0%	14,295	12.9%
Clallam	.8%	139	0.88%	46	18.0%	13,590	13.1%
Clark	6%	931	5.8%	305	14.0%	68,958	11.5%
Columbia	.03%	6	0	0	NA	NA	NA
Cowlitz	2.2%	351	1.0%	52	18.0%	20,413	15.7%
Douglas	.05%	77	0.23%	12	N/A	NA	NA
Ferry	.04%	7	0.02%	1	NA	NA	NA
Franklin	.08%	124	0.4%	18	10.0%	10,006	8.95%
Garfield	.04%	7	0	2	NA	NA	NA
Grant	.8%	131	0.71%	37	14.0%	14,295	15.6%
Grays Harbor	1.0%	152	0.5%	26	22.0%	16,183	18.2%
Island	.6%	101	0.9%	47	15.0%	11,842	11.6%
Jefferson	.5%	88	0.29%	15	NA	NA	NA

	Percent of cases July 1, 2020 to June 30, 2021	Count	Percent of cases in plan	VR Count	State of Washington Percent of population w/ disability	Count	Percent of population w/disability Ages 18-64
King	25%	3897	33.51%	1746	10.0%	216,031	7.4%
Kitsap	4.2%	656	4.47%	233	15.0%	37,781	11.8%
Kittitas	.6%	108	0.6%	31	NA	NA	NA
Klickitat	.2%	30	0.23%	12	NA	NA	NA
Lewis	1%	175	0.77%	40	21.0%	17,177	16.8%
Lincoln	.06%	11	0.58%	30	NA	NA	NA
Mason	.6%	108	0.38%	20	22.0%	14,640	18.6%
Okanogan	.8%	123	0.54%	28	NA	NA	NA
Pacific	.2%	33	z0.17%	9	NA	NA	NA
Pend Oreille	.13%	22	0.06%	3	NA	NA	NA
Pierce	11%		9.8%	514	14.0%	122,382	10.9%
San Juan	.14%	23	0.17%	9	NA	NA	NA
Skagit	1.5%	240	3.38%	176	15.0%	19,656	11.5%
Skamania	.1%	16	0.1%	5	NA	NA	NA
Snohomish	9.63	1519	11.02%	574	12.0%	95,970	9.3%
Spokane	9.4	1480	5.78%	301	16.0%	95,970	13.5%
Stevens	.7%	110	0.29%	15	NA	NA	NA
Thurston	6%	962	5.8%	302	16.0%	44,880	12.9%
Wahkiakum	.03%	6	0.04%	2	NA	NA	NA
Walla Walla	1.1%	178	0.36%	19	NA	Na	NA

Whatcom	4.1%	629	6.4%	336	12.0%	28,364	10%
Whitman	.5%	77	0.6%	31	NA	NA	NA
Yakima	4.8%	752	1.38%	72	14.0%	35,391	12.3%
Out of State			0.33%	17			
Missing Data			0.32%	16			

Appendix # 2 Customer Survey Instrument

The University of Washington's Center for Continuing Education in Rehabilitation is conducting a survey for the Washington State Division of Vocational Rehabilitation (DVR) and the State Rehabilitation Council. The purpose of the survey is to learn about the vocational rehabilitation needs of people who have received DVR services. Your participation is very important. Your input will help DVR know more about the needs of people with disabilities in Washington State and make a plan to improve DVR programs and services.

You are invited to participate in this survey because you are a current customer of DVR. Your participation is voluntary, and your response is anonymous – that is, your name will not be connected to your response. We will make sure no information to identify you is shared with DVR. Your participation will in no way impact your DVR services.

This survey will take approximately 15 to 20 minutes to complete. Please take this opportunity to share your experiences as a DVR customer by completing this survey.

If you have any questions, need an accommodation, or want to complete the survey by phone or US mail, please contact _____.

DVR Customer Demographic Information

These first set of questions will help us learn about you, your employment status and being a DVR customer.

1. What best describes your status with the Washington State Division of Vocational Rehabilitation (DVR)?

a.   I am a current DVR customer

b. I am completing the survey on behalf of DVR customer

2. What is your <u>current</u> employment situation? (Select all that apply)

   a. Employed, full-time

   b. Employed, part-time

   c. Temporary/Seasonal work

   d. Unemployed, looking for work

   e. Unemployed, not looking for work

   f. In school

   g. Not in school

   h. Other (Please specify):_____

   3. How many hours are you working per week?

   a. 1-10 hours

   b. 11-20 hours

   c. 21-35 hours

   d. 36-40 hours

   e. 41+ hours

4. What is your wage per hour?

   a. Less than $14.49

b.	$14.49-$18.99

c.	$19.00-$28.99

d.	$29.00-$34.99

e.	$35.00 or more

5.	What <u>employer-provided</u> benefits do you receive? (Select all that apply)

a.	Medical

b.	Dental

c.	Retirement 401k/Pension

d.	Vacation leave

e.	Sick leave

f.	Other (Please specify):_____

g.	My employer does not provide any benefits

6.	Which of the following would you use to describe your <u>Main</u> disability? (Select

one)

a.	Blind or low vision

b.	Deaf or hard of hearing

c.	Speech and Communication disability

d.	Orthopedic or mobility disability

  e. Neurological disability (such as multiple sclerosis, epilepsy, cerebral palsy,

etc.)

  f.   Learning disability

  g. Mental health/psychiatric disability

  h. Intellectual disability

  i.   Traumatic brain injury or TBI

  j.   Autism/Autism spectrum disorder

  k. Spinal cord injury

  l.   Other (Please describe):_____

7. Do you have any <u>Other</u> disabilities?

  a. Yes (Select all that apply)

  b. No

  a. Blind or low vision

  b. Deaf or hard of hearing

  c. Speech and Communication disability

  d. Orthopedic or mobility disability

  e. Neurological disability (such as multiple sclerosis, epilepsy, cerebral palsy,

etc.)

  f.   Learning disability

g.   Mental health/psychiatric disability

h.   Intellectual disability

i.   Traumatic brain injury or TBI

j.   Autism/Autism spectrum disorder

k.   Spinal cord injury

l.   Other (Please describe):_____

8.   What is your gender?

a.   Female

b.   Male

c.   Non-binary

d.   Agender

e.   Gender nonconforming

f.   Do not want to disclose

g.   Other (If you wish to identify, please indicate your preference):_____

9.   What is your race?

a.   Black/African American

b.   Asian

c.   Native American/Alaska Native

d.   White/European American

e.   Native Hawaiian or Other Pacific Islander

f.   Multiracial

g.   Other: _____

10. What is your ethnicity?

a.   Hispanic/Latinx

b.   Non-Hispanic/Latinx

11. What is your age?

a.   14-21

b.   22-24

c.   25-29

d.   30-39

e.   40-49

f.   50-59

g.   60-69

h.   70 and over

12. In what county do you currently live?

a.   Adams

b.   Asotin

c.   Benton

d. Chelan

e. Clallam

f. Clark

g. Columbia

h. Cowlitz

i. Douglas

j. Ferry

k. Franklin

l. Garfield

m. Grant

n. Grays Harbor

o. Island

p. Jefferson

q. King

r. Kitsap

s. Kittitas

t. Klickitat

u. Lewis

v. Lincoln

w. Mason

x. Okanogan

y. Pacific

z. Pend Oreille

aa. Pierce

bb. San Juan

cc. Skagit

dd. Skamania

ee. Snohomish

ff. Spokane

gg. Stevens

hh. Thurston

ii. Wahaikuma

jj. Walla Walla

kk. Whatcom

ll. Whitman

mm. Yakima

nn. No longer living in Washington

13. Please let us know if you received any of the following <u>services from an agency</u> that is *not* DVR (Select all that apply)

     a.   Career exploration

     b.   drug and alcohol recovery services

     c.   High school services (Individual Education Plan [IEP] or 504 plan)

     d.   Housing

     e.   Independent living

     f.   Job coaching services

     g.   Job placement services

     h.   Job seeking services

     i.   long-term support services

     j.   mental health services

     k.   Parole and probation/corrections/Juvenile rehabilitation services

     l.   Post-secondary education (community college, university or college, occupational or vocational school)

     m. Services for the blind

     n.   Services from the Veterans Administration

     o.   Services from Tribal Vocational Rehabilitation

     p.   Social security benefits

q.　Temporary Assistance for Needy Families (TANF)

r.　Other (Please specify):_____

Barriers to Providing High Quality Services

The next questions ask about your experiences and needs related to your barriers to employment and access to DVR services.

Customer-Related Barriers

14. How does your disability affect your ability to get a job, keep a job, or advance in your career? (Select all that apply)

a.　Mobility (walk, change body positions, use transportation, drive)

b.　Communication (use formal language, spoken or sign, understand others, be understood)

c.　Self-care (manage money, make decisions, provide own personal care)

d.　Self-direction (shift from task to task, solve problems, work independently)

e.　Interpersonal skills (interact and develop relationships with others)

f.　Work tolerance (work for sustained period, lift, stand, sit, tolerate stress)

g.　Work skills (learn new tasks, read, write or use math skills, show reliable work habits)

h.　Other (please specify):_____

15.What have been your <u>other non-disability barriers</u> to getting or keeping a job, or advancing in a career? (Select all that apply)

     a.   Education or training/Credentials

     b.   Job skills

     c.   Job-seeking skills

     d.   Interpersonal/Soft skills development (Communication, teamwork)

     e.   Extended services (Long-term supports)

     f.   Opportunities to explore careers

     g.   Available jobs

     h.   Employer attitudes

     i.   Personal attendant care

     j.   Childcare

     k.   Housing

     l.   Social security disability benefits

     m. Criminal background

     n.   Native language/English speaking skills

     o.   Available Transportation

     p.   Accessible transportation

16. Have you had other challenges that have made it difficult for you to get or keep a job, or advance in a career?

    a.   Yes (Please describe):_____

    b.   No

Access to DVR Services

17. Are DVR services provided in a convenient location?

    a.   Yes

    b.   No, please Explain:

18. Are you able to get around easily in the DVR office building?

    a.   Yes

    b.   No, please explain:

19. Have you been able to use technology or equipment to participate in DVR services?

    a.   Yes

    b.   No. Please explain:

20. Have you been able to communicate using your own language to participate in DVR services?

    a.   Yes

    b.   No. Please explain:

21. Is there anything else you would like us to know about accessing DVR services?

    a.   Yes (Please describe):

    b.   No

DVR Staff Response, Services, and Timeliness

The next set of questions ask you about the timeliness of DVR staff response and services. Please answer to the extent you <u>agree</u> or <u>disagree</u> with the following statements.

22. DVR staff answered my questions, responded to my requests, and told me of changes.

    a.   Strongly agree

    b.   Agree

    c.   Disagree

    d.   Strongly disagree

23. I was provided the accommodations needed to participate in DVR services.

    a.   Strongly agree

    b.   Agree

    c.   Disagree

    d.   Strongly disagree

    e.   Does not apply

24. DVR staff were respectful to my cultural background and identity.

a. Strongly agree

b. Agree

c. Disagree

d. Strongly disagree

Quality of Vocational Rehabilitation Counseling

The next set of questions ask you about the quality of vocational rehabilitation counseling you received. Please answer to the extent you <u>agree</u> or <u>disagree</u> with the following statements.

25. My DVR counselor shared information in a way I could understand.

a. Strongly agree

b. Agree

c. Disagree

d. Strongly disagree

26. I met with my DVR counselor for the amount of time I needed.

a. Strongly agree

b. Agree

c. Disagree

d. Strongly disagree

27. My DVR counselor helped me understand my disability and how it may affect future work.

    a.   Strongly agree

    b.   Agree

    c.   Disagree

    d.   Strongly disagree

28. My plan for employment included services to meet my specific needs.

    a.   Strongly agree

    b.   Agree

    c.   Disagree

    d.   Strongly disagree

29. My DVR Counselor helped me to get services on my plan from other agencies and providers

    a.   Strongly agree

    b.   Agree

    c.   Disagree

    d.   Strongly disagree

    e.   Does not apply

Remote DVR Services

Because of COVID-19, DVR services were more often provided by telephone or computer. We would like to learn about your experiences with remote DVR services.

30. Have you received remote DVR services?

a. Yes (continue to #36, #37, #38; skip logic)

b. No

31. What did you <u>like</u> about remote DVR services you received? (Please explain:

32. What did you <u>dislike</u> about remote DVR services you received? (Please explain:

Employment-Related DVR Services

The next questions ask you about employment-related DVR services you received.

33. Please mark the employment-related DVR services you have found to be <u>most helpful</u>. (Select all that apply to your situation)

a. Assessment

b. Vocational rehabilitation counseling and guidance

c. Medical or psychological treatment services

d. College or university training

e. Occupational/Vocational training

f. Basic academic remedial or literacy training

g. Job readiness training

h.   Job search assistance

i.   Job placement assistance

j.   On-the-job supports/Job coaching

k.   Supported employment

l.   Transportation

m. Rehabilitation technology/Assistive technology

n.   Interpreter/translator services

o.   Personal attendant services

p.   Benefits counseling

q.   Other (Please specify):_____

34.Overall, how would you rate the <u>quality</u> of employment-related DVR services you

received?

a.   Very good

b.   Good

c.   Acceptable

d.   Poor

e.   Very poor

WorkSource Washington is a partnership of state and local government agencies, colleges and non-profit organizations that offer employment services for job seekers and businesses. WorkSource services are available in-person and online.

The next questions ask you about your experiences with WorkSource.

35. Have you used WorkSource services?

    a. Yes

    b. No

36. Were you able to easily get around the WorkSource office?

    a. Yes

    b. No. Please explain:

37. Were you able to fully participate in WorkSource services?

    a. Yes

    b. No. Please explain:

38. What WorkSource services did you receive? (Select all that apply)

    a. Assessments

    b. Job listings, referrals and hiring events

    c. Resume and application help

    d. Internet access for job searches

e. Workshops on resumes, interviewing and other programs

f. Computers, copiers, fax machines, phones and other office equipment

g. Access to information about unemployment insurance

h. Referrals to training and other community resources, such as food banks, childcare)

i. Other (Please describe): _____

39.Overall, how would you rate the quality of WorkSource services?

a. Very good

b. Good

c. Acceptable

d. Poor

e. Very Poor

40. Do you have other comments that may help DVR improve their services to you and other people with disabilities?

Thank you for completing this survey. Your responses are important to improving DVR services.

Appendix #3 2022 Staff Survey Instrument

Introduction

This first section asks you to answer questions as an Introduction to your position with

DVR

1. **What best describes your job category?**

   a. Rehabilitation Technician

   b. Vocational Rehabilitation Counselor/School Transition Counselor

   c. Vocational Rehabilitation Supervisor

   d. Program Staff (Regional Transition Consultant, Business Relations

   Specialist, Benefits Technician, Assistive Technology Assessment

   Practitioner, Program Evaluation, Training)

   e. Other Management

2. **In what region is your DVR office located?**

   a. Region 1

   b. Region 2

   c. Region 3

   d. State office

3. **How many years have you been in your current position?**

   a. Less than 1 year

   b. 1 to 5 years

   c. 6 to 10 years

   d. 11 to 15 years

e. More than 15 years

Barriers to Employment

4. Please think about the barriers that prevent individuals with disabilities from achieving successful employment outcomes. These may be personal barriers, family barriers, social barriers, or barriers in the physical environment. What are the top three barriers that prevent DVR customers from achieving successful employment outcomes?

DVR Customer Services Needs

5. Please identify the top three VR or related services most needed by DVR customers to achieve their employment goals.

6. In your opinion, what are the three main reasons that DVR customers might find it difficult to access DVR services?

Unserved or Underserved

"Unserved" means people who have a disability who are interested in working and are not receiving services from DVR. "Underserved" means people with disabilities who are interested in working and are served by DVR at less than the percentage of the group in the general population.

7. Are there any geographic areas that are unserved/underserved?

    a. If yes, please explain below

    b. If no, please answer "no" and proceed to the next question

8. Are there any racial/ethnic minority groups that are unserved/underserved?

    a. If yes, please explain below

    b. If no, please answer "no" and proceed to the next question

9. Are there any disability populations that are unserved/underserved?

    a. If yes, please explain below

    b. If no, please answer "no" and proceed to the next question

10. Are there any other diverse groups that are unserved/underserved?

    a. If yes, please explain below

    b. If no, please answer "no" and proceed to the next question

11. What recommendations do you have for improving outreach and engagement for groups you've identified above?

Pre-Employment Services (Pre-ETS)

Pre-employment transition services include: job exploration counseling; work-based learning experiences in an integrated environment in the community (including internships); counseling on opportunities for enrollment in comprehensive transition or post-secondary educational programs at institutions of higher education; workplace readiness training to develop social skills and independent living; and instruction in self-advocacy, including peer mentoring.

12. Please rate the quality of pre-employment transition services (PreETS).

    a. Excellent

    b. Good

c. Okay

d. Needs improvement

13. Do you have any recommendations to improve Pre-ETS services?

    a. If yes, please explain below

    b. If no, please say "no" and proceed to the next section

    c. If you answered "needs improvement," please explain below:

Transition Services

Transition Services is a team effort providing support and guidance to students with disabilities as they prepare to transition from high school to the work place. Each student's transition team comprises the student, parents, school staff, School Transition Counselors, and, in some cases, Regional Transition Consultants. Transition teams help students identify their career interests and learn what skills and training may be necessary in order to prepare for those careers they are interested in pursuing.

14. Please rate the quality of transition services.

    a. Excellent

    b. Good

    c. Okay

    d. Needs Improvement

15. Do you have any recommendations to improve transition services?

    a. If yes, please explain below

    b. If no, please say "no" and proceed to the next section

    c.   If you answered "needs improvement" please explain below:

Partner Programs

Partnerships with Community Rehabilitation Programs

16. What is working well with DVR's partnership with Community Rehabilitation

      Programs (CRPs) to support high quality services?

17. Are there any areas in need of improvement in DVR's partnership with CRPs to

      support high quality services?

18. Is there a need to increase availability of CRP services to effectively serve any

      specific group or geographic area?

19. Are there any areas in need of improvement in DVR's partnership with schools

      (high school, post-secondary education) to support high quality services?

20. What is working well with DVR's partnership with businesses to support high

      quality services?

21. Are there any areas in need of improvement in DVR's partnership with

      businesses to support high quality services?

22. Are there any areas in need of improvement in DVR's partnership with other

      human services agencies to support high quality services

        a.   If yes, please select all that apply

                a.   If no, please select no and proceed to next question

                b.   Housing

                c.   Independent Living

d. Temporary assistance for needy families

e. Social Security Administration

f. Developmental Disability Administration/County Developmental Disabilities

g. Aging and Long-Term Support

h. If you selected "needs improvement" please explain:

23. How would you rate the quality of service coordination on cases shared with Developmental Disability Administration/County Developmental Disabilities agencies?

a. Excellent

b. Good

c. Okay

d. Needs improvement

24. If you selected "needs improvement" above, please explain:

25. How would you rate the quality of service coordination on cases shared with mental health/behavioral health agencies?

a. Excellent

b. Good

c. Okay

d. Needs Improvement

26. If you selected "needs improvement" above, please explain:

Remote Services

27. Describe in your own words your experiences with providing DVR services

remotely.

28. Describe how remote DVR services have affected your DVR customers.

29. Do you have any recommendations to improve remote DVR services?

Staff Support

30. What types of organizational support from your agency do you need to provide

high quality DVR services to individuals with disabilities?

31. Do you have any additional ideas to improve staff support to effectively serve

DVR customers?

32. What would you recommend that DVR do as an organization to maximize its

effectiveness in fulfilling its mission and providing excellent customer service

during the next three years?

Appendix # 4 Key Informant Interview

Introduction

Hi, this is Krista Dann with the Center for Continuing Education in Rehabilitation at the University of Washington - thanks so much for taking the time to talk with me today!

We're helping Washington State Division of Vocational Rehabilitation conduct a required needs assessment to learn more about the vocational rehabilitation needs of people with disabilities in Washington and to improve the services DVR provides to them and the community.

Because of your knowledge and relationship with DVR, we wanted to talk with you and gain your perspectives about the needs of individuals with disabilities and how your organization interfaces with DVR and the disability community. We very much appreciate your willingness to participate.

Our interview should take about an hour. We'll go through the questions you were provided, but this is really a conversation. There are no right or wrong answers, and your responses will remain confidential and anonymous. We'll compile your responses with other interviews conducted, as well as other data sources, to provide DVR with a full picture of what employment-related services look like for individuals with disabilities. This will let them know what's going well, and how things can be improved.

Do you have any questions before we begin?

General

1. Please tell me about your organization and briefly describe your duties and service

   areas.

   a. How does your organization support or interact with individuals with disabilities?

   b. How does your organization interface with DVR?

Barriers

Please think about any barriers that prevent individuals with disabilities from achieving

successful outcomes. These may be personal barriers, family barriers, social barriers, or barriers

in the physical environment. In your opinion, what are the top three barriers that prevent

individuals with disabilities in Washington from achieving successful outcomes?

2. What do you think DVR could be doing differently to address some of these barriers?

3. What would make it easier for people with disabilities to work with DVR effectively?

4. What would make it easier for stakeholders to work with DVR effectively?

Service Needs & Gaps

5. What do you think are the top three services most needed by DVR clients to achieve

   successful employment?

6. How well do you believe DVR engages with their customers (think about remote vs. in-

   person engagement, language, communication, quality of interactions, timeliness of

   services, etc.)?

Unserved and Underserved

7. In your experience, what groups or individuals are not using DVR's services but could benefit from them? (Who is currently unserved?)

8. In your experience, what groups or individuals could benefit <u>more</u> from DVR services? (Who is currently underserved?)

9. Are there any geographic areas you feel are unserved/underserved and why?

10. Are there any racial/ethnic minority groups unserved/underserved and why?

11. Are there any specific disability groups that are unserved/underserved and why?

12. How effective is DVR's outreach to these groups/areas? Do you have any recommendations to improve outreach to them?

Transition Youth 24 and Younger, and Pre-Employment Transition Services (Pre-ETS)

13. What are the greatest needs of transition-aged youth (24 and younger) with disabilities?

14. How well are DVR and the schools meeting these needs?

15. Are you aware of or have you accessed Pre-ETS for your clients/students?

16. How well is DVR partnering with Washington schools to serve youth with disabilities?

17. Do you have any recommendations to improve DVR services to youth with disabilities between ages 14 to 24 in Washington?

Community Rehabilitation Programs (CRPs)

18. Other than DVR, which programs and organizations are leaders in the state and are effectively providing services to individuals with various disabilities in the following areas?

    a. Intellectual & Developmental Disabilities

b. Behavioral Health

c. Substance Abuse

d. Physical/mobility disabilities

e. Traumatic Brain Injury

f. Other specific disability groups

g. Students

19. How could CRPs be better equipped or supported to effectively serve any specific groups or geographic areas?

WorkSource Partnerships

20. How well is WorkSource meeting the needs of individuals with disabilities?

21. What barriers exist to effective service delivery partnerships between WorkSource and DVR? Who or what part of the state is doing it well and why?

22. How could DVR better coordinate with WorkSource as a partner to improve the delivery of employment services to individuals with disabilities?

Business Partnerships

23. Do you have any recommendations for DVR on how to improve services to Businesses to engage employers in recruiting and hiring individuals with disabilities?

Conclusion

24. What would you recommend that DVR do as an organization to maximize its effectiveness in fulfilling its mission and Transforming lives by assisting individuals with disabilities to fully participate in their communities through meaningful employment?

25. Do you have any suggestions for other people or organizations we should talk with?

26. Finally, what haven't I asked yet that I should have asked? (any additional

feedback/comments)

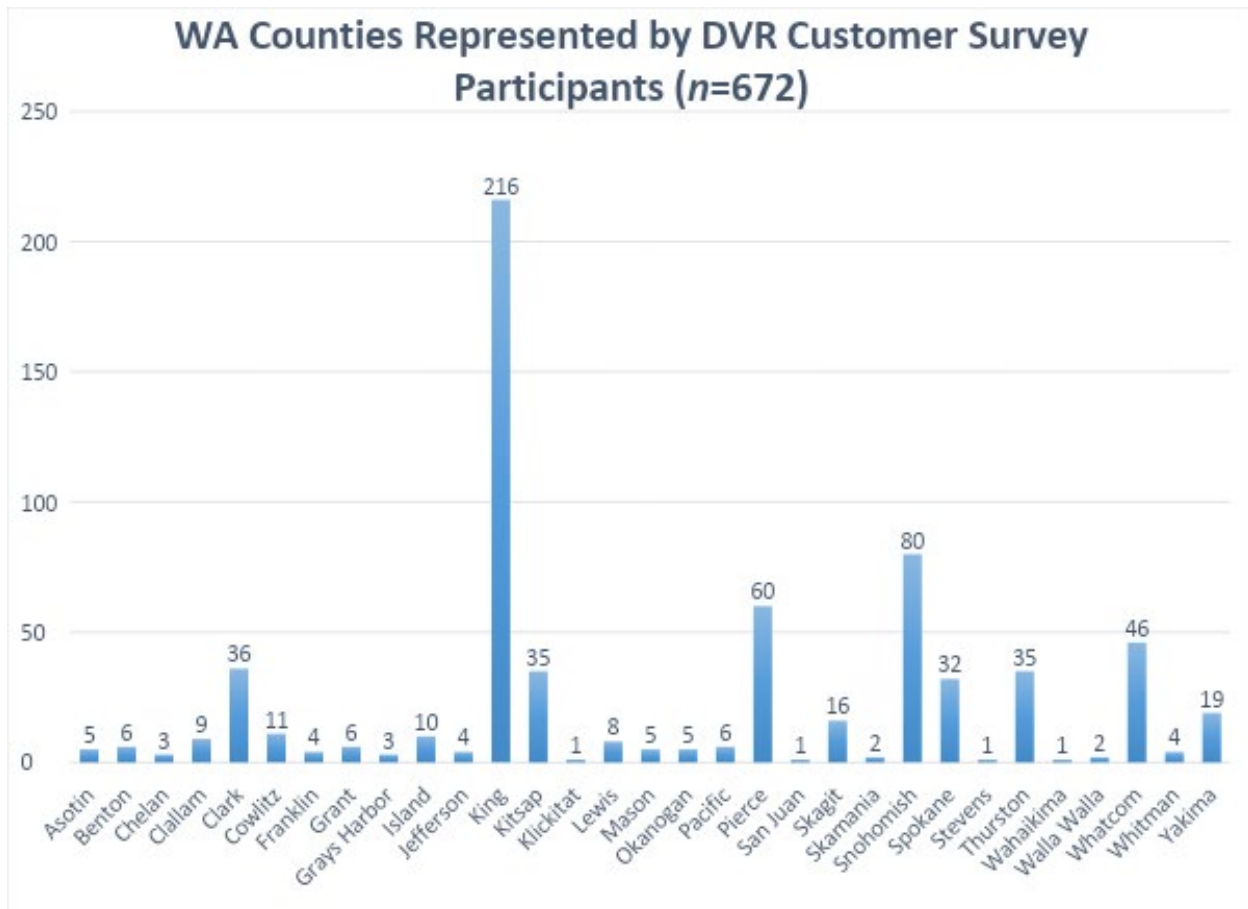# Appendix # 5 WA Counties Represented by DVR Customer Survey

Image description: Bar graph titled WA Counties Represented by DVR Customer Survey. Participants (n=672). X axis shows many county names in alphabetical order. Y axis contains number from 0 to 250. King County is highest point at 216, followed by Snohomish at 80, Pierce at 60, Whatcom at 46, Clark at 36, Kitsap and Thurston at 35, and Spokane at 32. Other counties with associated values are Asotin 5, Benton 6, Chelan 3, Clallam 9, Cowlitz 11, Franklin 4, Grant 6, Grays Harbor 3, Island 10, Jefferson 4, Klickitat 1, Lewis 8, Mason 5, Okanogan 5, Pacific 6, San Juan 1, Skagit 16, Skamania 2, Stevens 1, Wahaikima 1, Walla Walla 2, Whitman 4, and Yakima 19.

Appendix # 6: Resources and Best Practices

Several State VR Agencies have adopted the Individual Placement and Support (IPS) model of supported employment for people with serious mental illness. IPS supported employment helps people living with behavioral health conditions work at regular jobs of their choosing. The following are several links to more information:

- [What is ISP? (IPSWorks.org)](#)

- [IPS Resource Guide (nasmhpd.org) [PDF]](#)

- [Individual Placement and Support Model of Supported Employment: Vocational Rehabilitation Practice (ktdrr.org) [PDF]](#)

- [Individual Placement and Support and State Vocational Rehabilitation: A Crosswalk [PDF]](#)

- [2020 Michigan Department of Health and Human Services Evidence-Based Practice Individual Placement & Support (IPS) Report [PDF]](#)

- [IPS Trainer's Guide to "Supported Employment: Applying the Individual Placement and Support (IPS) Model to Help Clients Compete in the Workforce" (IPSWorks.org) [PDF]](#)

- [The Effect of Vocational Counseling Interventions for Adults with Substance Use Disorders: A Narrative Review - PMC (nih.gov)](#)

Promising Practices for Remote Service Delivery

- [Effective VR Agency Practices for Remote Service Delivery News (tacqe.com)](#)

- [Remote Service Delivery | Promising Practices (promising-practices.com)](#)

Addressing High Staff Turnover

- [Employee Retention Guide: 15 Employee Retention Strategies for 2023 (QuantumWorkplace.com)](#)

- [Improving Retention of State Vocational Rehabilitation Counselors Webinar (tacqe.com)](#)

- [2022 Employee Engagement Guide (gallup.com)](#)

- [14 Effective Employee Retention Strategies | Robert Half](#)

- [Understanding Burnout in Vocational Rehabilitation Counselors, The George Washington University Center for Rehabilitation Counseling Research and Education](#)

Reduce Process Barriers

- [Rapid Engagement in Vocational Rehabilitation Module 2 - Training for Counselors (QM2022-0308) | VRTAC-QM](#)

- [Rapid Engagement in Vocational Rehabilitation - Module 1 (QM2022-0304) (ii-training.org)](#)

Relationships with Partners

- [A Framework for Community Engagement – A Pathway to Competitive Integrated Employment (rsa.ed.gov) [PDF]](#)

Promising Practices in VR

- [RRTC-EBP VR Phase II Findings: Promising Service Delivery Practices (peqatac.org) [PDF]](#)

- [RRTC-EBP VR Phase II Findings: Models of Effective Practice Policy and Procedures (pegatac.org) [PDF]](#)

- [Program & Performance Quality Management | VRTAC-QM](#)

- [Identifying Best Practices for Long-Term Success in Supported Employment | Published in Rehabilitation Counselors and Educators Journal (scholasticahq.com)](#)

- [An analysis of evidence-based best practices in the public vocational rehabilitation program: Gaps, future directions, and recommended steps to move forward | Knowledge Translation for Employment Research Center (kter.org)](#)

- [Innovation Inspiration Expo, 2023, University of Wisconsin-Stout](#)