

# 2010 COMPREHENSIVE STATEWIDE ASSESSMENT of the REHABILITATION and CAREER NEEDS of INDIVIDUALS with DISABILITIES

## Maryland Division of Rehabilitation Services and Maryland State Rehabilitation Council

### REPORT

The Maryland Division of Rehabilitation Services (DORS) along with the State Rehabilitation Council (SRC) continually assesses the rehabilitation and career needs of Maryland citizens with disabilities, as part of its state and strategic planning process. DORS and the SRC hold annual public meetings and the SRC regularly provides input on Agency planning and recommendations. The results of consumer satisfaction surveys are also reviewed in order to provide insight into the rehabilitation and career needs of Maryland citizens with disabilities.

This year the Division in conjunction with the SRC undertook the triennial comprehensive needs assessment in compliance with the Code of Federal Regulations CFR (361.29). Two members of the SRC were an integral part of the nine-member team which (1) collected and analyzed relevant existing data and (2) conducted and analyzed findings of supplemental surveys, focus groups key informant interviews, in order to ascertain the needs of individuals with disabilities throughout the state.

A summary of the findings of the Needs Assessment was available for public input and was discussed in public meetings throughout the state to obtain further input of stakeholders. The SRC reviewed the final comprehensive needs assessment. The conclusions and recommendations of this assessment shall be incorporated into DORS goals and priorities over the next three years for the purpose of enhancing services to persons with disabilities, and more effectively meeting their needs.

**Federal funding.** Mentioned in the 2007 Needs Assessment attachment related to provision of services to transitioning students, DORS waiting list and delays in service provision became a prominent concern and constitute the most significant need for individuals with significant and most significant disabilities in Maryland. Over the past decade inflation – the cost of doing business (operating the VR program) – has risen nearly 25%, while DORS federal funding has risen less than 10%. Meanwhile, demand for DORS services – people with disabilities wanting to go to work – rose more than 40%. That left DORS at the start of State FY 2009 (July 2008) with 5,230 eligible individuals on a waiting list for services, some of whom had to be told it might be up to a year and a half before they could even begin the rehabilitation process. Discouraging and unfair to individuals with disabilities and their families and demoralizing to DORS staff, the waiting list for services has now been substantially reduced due to a modest increase in state funding effective 7/1/2008 and application of funds from the American Recovery and Reinvestment Act (ARRA) of 2009.

However, the ARRA funds are time-limited; while they may address the State and federal funding shortfalls for FY 2010 and 2011, the long-term concerns with DORS waiting list still remain. In September 2009, the Government Accountability Office (GAO) released a report to Congress (GAO-09-798) that makes clear that Maryland has the third most poorly-funded state VR program due to inherent inequities in the formula used to allocate federal dollars between states. Without an act of Congress to change the formula, Maryland's federal funding will not be sufficient to prevent a substantial increase in the waiting list over time.

**Need related to Federal funding:** The overriding vocational rehabilitation services need of individuals with disabilities residing in Maryland is equitable distribution of federal VR funds. While other recommendations in this attachment address ways to incrementally improve VR services to individuals with disabilities, continuation of historical underfunding of Maryland VR in relations to other states will make it very difficult to implement changes that could result in many more individuals with disabilities achieving employment.

## **A. Comprehensive Statewide Assessment of the Rehabilitation and Career Needs of Individuals with Disabilities.**

### **INDIVIDUALS WITH MOST SIGNIFICANT DISABILITIES, INCLUDING THEIR NEED FOR SUPPORTED EMPLOYMENT SERVICES.**

#### **I. BLIND/VISION IMPAIRED/DEAF-BLIND.**

As discussed in the 2007 State Plan Needs Assessment attachment, the Division established the Office for Blindness & Vision Services (OBVS) in January 2005 in an effort to assure provision of specialized, quality services to individuals who are blind, vision impaired and deaf-blind. The Blindness & Vision Services committee of the State Rehabilitation Council has played a critical role in establishment and operation of OBVS. The Office for Blindness and Vision Services (OBVS) includes the following DORS programs and services:

1. Rehabilitation counselors in DORS field offices throughout Maryland who are specialists in employment and independent living issues for people who are blind. They provide technical support to counselors for the deaf who work with deaf-blind individuals whose primary communication is American Sign Language (ASL) or Tactical sign.
2. Rehabilitation teachers across the state who deliver community-based services such as mobility training, household management skills and communication device training. These teachers also provide independent living training to individuals who have a vision impairment, are age 55 and over and not seeking employment.

3. The Maryland Business Enterprise Program for the Blind (MDBEP), which provides opportunities for individuals who are legally blind to operate vending, gift or food service businesses in public and private facilities.
4. Programs for individuals who are blind located at the Division's Workforce and Technology Center (WTC). These programs include assessment, training and support groups.
5. Coordination of the inter-disciplinary team providing services for deaf-blind consumers on an as-needed basis.

While great strides have been made in service provision to this population, the 2010 needs assessment provided a good opportunity to gauge success to date and identify areas for enhancement.

**Prevalence.** According to the National Center for Health Statistics, it is estimated that as many as 10 million Americans are blind or visually impaired, and each year 75,000 more people in the US will become blind or visually impaired. The National Association of Regulatory Utility Commissions (NARUC) estimates that 70,000 – 100,000 people living in the US are deaf-blind. This means that the individuals identified have some significant level of both vision and hearing loss. Based on the reported statistics, it is critical that rehabilitation agencies maintain quality services to assist these individuals with their independent living and employment needs.

**Methodology.** To ensure continuity of quality services to individuals who are blind, visually impaired and deaf-blind, DORS sought feedback from stakeholders, consumers, and staff through (1) a stakeholder focus group (blindness), (2) a DORS-staff workgroup (blindness) and (3) a survey (deaf-blindness). Feedback was valuable and contributed to an understanding of needs and development of recommendations.

**DORS Staff Workgroup.** In June, 2009, OBVS convened a work group of DORS staff to review services being provided and make recommendations for improving WTC services for individuals who are blind. The core group and invited guests met for five months and developed a list of needs/concerns and recommendations as outlined below:

**Needs/concerns:** Needs expressed included

1. More specialization of current general WTC and OBVS staff to meet a variety of needs of individuals with blindness/low vision, including career assessment, job development, job seeking skills, employee development skills, vocational training, orientation and mobility, blindness skills. More staff with specialized skills to meet needs and reduce waiting time for services.
2. More community providers with specialized skills to meet the needs of individuals with blindness.

**NFB Focus Group.** In November 2009, a focus group at the National Federation of the Blind's State Convention was convened to solicit feedback from attendees about the unmet needs and recommendations to satisfy those unmet needs. Approximately 20 individuals participated and the responses are outlined below.

**Needs/concerns:**

1. Need to enhance and emphasize counselor role in (1) advising consumers about the full scope of services, the rehabilitation team and process, (2) focusing on capabilities and individualized needs and learning styles, (3) facilitating access to assistive technology and (4) minimizing gaps in the provision of services.
2. Technology concerns, including access to technology and follow-up training, lack of usage after provision, role of consumer in identifying needed technology, response to technical concerns, access to accessible textbooks.
3. Quality and availability of services to older blind individuals.
4. Service provision for individuals seeking executive level employment.

**Survey: Deaf-blind Services.** Lastly, a survey regarding Deaf-blind (DB) services was emailed to stakeholders, consumers, community partners, and caregivers to solicit feedback about the unmet needs of individuals who are deaf-blind. We received 31 returned surveys via mail, email and fax. It is recognized that providing services to deaf-blind individuals is particularly challenging because of the complex needs and cost of supports and accommodations for a low incidence population.

All returned surveys had the common themes of transportation, communication, and support services as major unmet need of individuals who are Deaf-blind. Below is an outline responses:

**Needs/Concerns:**

1. Limited staff and resources to provide a full range of independent living and employment services to deaf-blind, including older deaf-blind, within DORS and community programs/providers (qualified interpreters, technologists, teachers, counselors, therapists, psychologists, psychiatrists and other professionals).
2. Limited access to public transportation because of communication barrier.
3. Limited availability and funding for Support Service Providers (SSPs) for providing transportation access and visuals information to deaf-blind for daily living and employment skill development.

**II. DEAF AND HARD OF HEARING.**

As a result of testimony at 2007, 2008 and 2009 public meetings concerning services for the deaf and hard of hearing, the Division expedited hiring of a Staff Specialist for Deaf and Hard of Hearing and has provided videophones in DORS offices throughout the state.

In June, 2009 as a further effort to enhance services to deaf and hard of hearing, DORS established a workgroup to assess VR services to persons who are deaf, hard of hearing, or late deafened. The group included three representatives from the Maryland State Rehabilitation Council, the Assistant Superintendent from the Maryland School For the Deaf, as well as representatives from Division programs providing services. The group utilized the principles of the “Model State Plan for Vocational Rehabilitation Services to Persons who are Deaf, Deaf-Blind, Hard of Hearing and Late Deafened” – University of Arkansas RRTC 2008 as guidance as it gathered information relative to the availability of services in Maryland.

**Needs/Concerns:**

1. Students exiting the Maryland School for the Deaf who are not college bound have limited opportunities to develop vocational skills in order to secure employment and live independently.
2. Students with hearing loss who attend regular school programs are generally not aware of DORS programs and services.
3. There are not adequate community rehabilitation programs with staff who are skilled in working with persons who are deaf or hard of hearing.
4. Individuals who are hard of hearing or late deafened have limited access to staff who are trained to understand and meet their special needs.
5. There are a number of veterans returning from battle with hearing losses who are experiencing difficulty adjusting back to civilian life.

## INDIVIDUALS WITH DISABILITIES WHO ARE MINORITIES.

The Maryland 2007 Comprehensive Assessment of the Needs of Individuals with Disabilities identified a need for DORS to enhance services to minority individuals with disabilities, focusing on those from the Hispanic community.

**Prevalence.** According to the US Census 2008 for Maryland:

1. 6.7% of the population is identified as Hispanic
2. 5.1% is identified as Asian.

As indicated in the chart below, DORS has seen a modest increase in individuals served from both Hispanic and Asian backgrounds:

Hispanic:

FY 07 numbers served: 339  
FY 07 Percentage of Total Served: 1.6%  
FY 08 numbers served: 345  
FY 08 Percentage of Total Served: 1.8%  
FY 09 numbers served: 525  
FY 09 Percentage of Total Served: 2.5%

Asian

FY 07 numbers served: 254  
FY 07 Percentage of Total Served: 1.2%  
FY 08 numbers served: 248  
FY 08 Percentage of Total Served: 1.3%  
FY 09 numbers served: 404  
FY 09 Percentage of Total Served: 1.9%

**Needs/concerns:** The agency needs to continue outreach efforts and increase the numbers of minorities provided VR services, with emphasis on Hispanic and Asian individuals with disabilities.

# **INDIVIDUALS WITH DISABILITIES WHO HAVE BEEN UNSERVED OR UNDERSERVED BY THE VOCATIONAL REHABILITATION PROGRAM.**

## **I. AUTISM SPECTRUM DISORDERS (ASD).**

To analyze needs of individuals with autism spectrum disorders, members of the needs assessment committee reviewed available data regarding the incidence of autism, and then supplemented this information with an online survey, interviews of key informants, and a focus group. The dramatically increasing prevalence of autism spectrum disorders in Maryland was confirmed, as follows.

**Prevalence.** Based on 2003 U.S. state educational data, the Autism Society estimates that the prevalence of ASD in the U.S. is increasing between 10% and 17% each year. In 2009, the Center for Disease Control estimated “between 1 in 80 and 1 in 240 with an average of 1 in 110 children in the United States have an ASD,” and found “ASDs are reported to occur in all racial, ethnic, and socioeconomic groups, yet are on average 4 to 5 times more likely to occur in boys than in girls.” (References: [http://www.autism-society.org/site/PageServer?pagename=about\\_what\\_is\\_factsstats](http://www.autism-society.org/site/PageServer?pagename=about_what_is_factsstats) and <http://www.cdc.gov/ncbddd/autism/data.html>)

DORS has seen an equally dramatic increase in the number of consumers with ASD applying for services. Whereas, only one consumer identified with ASD applied for services during fiscal year 1994, 330 consumers identified with ASD applied during fiscal year 2009. Remarkably, out of the 1,691 consumers with ASD who applied for DORS services over the past 15 years, 50.1% (848) applied within the past three years.

According to the information shown below there are 2,686 students with ASD between ages 12 and 21 in Maryland. These students may require support during their transition from high school which could be provided by DORS and/or other adult services agencies.

### **IDEA Part B - Children with Autism in Maryland for 2007-2008 (Child Count)**

Age 3-5: 652  
Age 6-11: 3,007  
Age 12-17: 2,340  
Age 18-21: 336  
Age 6-21 (school age): 5,693  
Age 3-21 (total): 6,345

*Source: Reported by the State of Maryland in accordance with Section 618 of IDEA to U.S. Department of Education, Office of Special Education Programs*

During the past three years, the percentage of applicants with ASD who are transition youth rose to 84%, and transition age youth continued to be responsible for 72% of

successful outcomes among consumers with ASD. The availability of supported employment to transition youth with ASD during this time has significantly improved their overall rehabilitation rate. 76% of transition age youth with ASD who would continue to receive long-term funding for supported employment job coaching after closure of the DORS record of services were successfully rehabilitated compared to 34% of their peers with ASD who did not have long-term funding for supported employment available to them. Adults with ASD who had supported employment services available to them also achieved employment at a higher rate (84%) than did their peers without supported employment (78%). This highlights the importance of long-term funding for supported employment services being available to students with ASD as they transition from school into employment.

While DORS has seen a measure of success over the years, assisting consumers with ASD to become employed, DORS recognizes that these individuals are generally underserved in Maryland, and continues to assess the needs of individuals with autism in order to better serve this population.

**Online Survey.** DORS asked persons with autism, their families, and advocates how the employment needs of persons with ASD can be better met in Maryland. In December 2009, a five question survey was distributed to all those who subscribed to the Pathfinders for Autism newsletter. Pathfinders for Autism, Inc. is a Maryland non-profit focusing on promoting autism awareness and understanding; provision of quality information and resources to individuals, family members, caregivers, and professionals, increasing the number and quality of trained professionals serving individuals with autism and improving early detection of autism.

A total of ninety responses to the survey were received. 79% of responses were received from parents of children with ASD age 14 or older, 2% were received from persons with ASD, and 19% were received from other individuals. The responses are summarized here:

1. 82% indicated that they did anticipate employment within the next 1-10 years for the person with ASD about whom they were completing the survey, and 23% anticipated that employment to begin within the next 12 months.
2. Of the primary services provided by DORS, respondents considered the availability of supported employment (job coaching support) to be the most necessary for employment success, followed by customized placement assistance, vocational skills training, and job search assistance. Career counseling and referral services and assistive technology service were considered the least critical.
3. Interpersonal skills training was considered to be most critically needed support for the individual with ASD, followed by the development of natural supports in the workplace, behavioral assessment and management support, education of employers and co-workers, self-advocacy training, and independent living skills



training.

**Focus Group/Key Informant Interviews.** A focus group was conducted with 12 stakeholders involved in an Adult Autism Resource Group in Towson, MD. Also interviewed were several key informants, including Ms. Sue Howarth, Workforce and Technology Center case manager for the Pathways Program which provides supports to consumers with Aspergers who are enrolled at several campuses of the Community College of Baltimore County; Ms. Zosia Zacks, M. Ed., author of *Life and Love: Positive Strategies for Autistic Adults and Early Intervention Choices: What Parents Need to Know*; Ms. Dawn Koplos, executive director of Pathfinders for Autism; and Ms. Sue Murray, a transition coordinator for Hannah More School, a private school for students with ASD, and transition consultant for all Maryland Association of Nonpublic Special Education Facilities (MANSEF) schools.

Several themes of needs emerged among the various responses to the online survey, which were also echoed by the stakeholders in the focus group and the key informants interviewed: staff development for adult service agency staff, training opportunities designed specifically for individuals with ASD; and specific approaches to employment.

### **Needs/concerns:**

#### **1. Staff Development**

- a. Further training of adult service agency staff.
- b. The unique behavioral triggers, sensory concerns, communication styles, and accommodation needs of persons with ASD must be taken into consideration by the job coach before the job interview is arranged.
- c. Job coaches must educate employers and encourage supervisors and co-workers to bring up concerns to them early on before they grow into a large enough problem to result in job termination.

#### **2. Training Opportunities Designed Specifically for Consumers with ASD**

- a. More opportunities for social skills development in a variety of work adjustment settings for individuals with autism after they exit high school.
- b. Recognize that individuals with ASD, due to their social skills deficits, are more vulnerable to being negatively influenced by peers, and take necessary precautions to protect them, especially during unstructured times when they are feeling the most insecure.
- c. Expand availability of the Division's Pathways Program which provides students a case manager/educational support staff person who mediates between the student, family and community college instructors and staff.

#### **3. Employment**

- a. Understanding that persons with ASD often have skills coveted by employers, DORS and provider staff need to be prepared to match the special interests of individuals with ASD with the needs of employers.
- b. Self-employment may be a good option for some persons with ASD, and that the development of a special approach for autism within the DORS Reach Independence through Self-Employment (RISE) program could help address gaps in executive functioning skills common to persons with ASD.
- c. Explore additional funding needed in order for job coaches to be adequately trained and compensated, for employer education and tax incentive programs for businesses who hire persons with ASD, and for persons to have 1-on-1 coaching or support during the evening, if needed.
- d. With DDA, explore ways to bridge the gap in supported employment funding for students who leave school before age 21.

## **II. STUDENTS WITH 504 PLANS/SIGNIFICANT HEALTH CONDITIONS.**

While DORS has had a long-term focus on providing effective services to transitioning students with disabilities, there has been a sustained sense that the agency is working with relatively few of the students with 504 Plans or serious health conditions, as contrasted with students in special education.

**Prevalence.** To analyze this further, the committee reviewed existing information available through the Maryland State Department of Education (MSDE) and through the DORS case management system. In sum, little information is collected about this group of students: the MSDE Division of Special Education/Early Intervention Services Census data includes no information on this population. The Maryland Report Card just began tracking students with 504 plans in the 2008-2009 school year. While no graduation rates are reported, the dropout rate for students with 504 plans in the 2008-2009 was 1.54, as compared to 3.11 for students in special education and 2.8- for all students. Information collected through the DORS case management system suggests that 8% of all transitioning youth successfully rehabilitated in fiscal year 2009 were youth with 504 plans or serious health conditions.

**Methodology - Focus Group.** In light of very limited information available, a focus group was convened to further explore issues around referral to DORS of students with 504 plans or serious health conditions. The focus group included transitioning staff from two school districts, several DORS transitioning counselors and managers, a Developmental Disabilities Administration staff member and staff from two community rehabilitation programs serving transitioning youth. Findings suggest that students in this population are served by different school staff (guidance counselors and school nurses) than special education students and confirm lack of consistency in school personnel designated as “504 Coordinators” and in tracking these students. Protocols and activities which apply to students in special education, e.g., transition nights, provision of the Transition Planning Guide, outreach to parents, are not available to 504 students and those with significant health conditions. These students are seen as a “quiet minority,” according to teachers; are generally doing all right in class, with supports and accommodations. Unless they present behavioral issues or are students

with visible disabilities, it is unlikely school staff would refer them to DORS.

**Needs/concerns:**

1. Include guidance counselors and school nursing staff in DORS outreach activities;
2. Annually identify 504 coordinators for each school and assure that DORS liaison counselors are aware and include these school staff in all communications for in-service training for transition staff.
3. With MSDE, explore (a) development of a transition planning guide for students with 504 plans and serious health conditions and (b) whether inclusion in transition nights would be a helpful means to provide information to students and families about resources and post-school activities.

## **INDIVIDUALS WITH DISABILITIES SERVED THROUGH OTHER COMPONENTS OF THE STATEWIDE WORKFORCE INVESTMENT SYSTEM.**

The Maryland Division of Rehabilitation Services Comprehensive Needs Assessment committee, including members of the Maryland State Rehabilitation Council, identified community colleges and one stop career centers as focus areas because of their importance as resources for individuals with significant disabilities seeking employment.

### **I. COMMUNITY COLLEGES**

Community colleges are a major component of Maryland's Workforce Investment System, and they are a primary training provider to DORS consumers for both college and noncredit workforce certificate training. Students with disabilities tend to matriculate at community colleges at a greater rate when compared to their nondisabled peers. Community colleges are a highly valued rehabilitation resource, as they typically offer more supports and services to students with disabilities than four-year institutions. In 2005, it was estimated that at least 12-13% of community college students are students with disabilities, and that number is growing.

**Methodology.** Two surveys were utilized to address unmet needs: a student survey and a survey of disability support services professionals at community colleges.

**Community College Students with Disabilities – Student Survey:** 614 surveys were distributed to DORS consumers who had attended community college in calendar year 2009 with some form of financial assistance through DORS. 60% of these surveys were distributed through postal mail, and 40% were distributed electronically via email. Surveys were also made available through community college DSS offices to students with disabilities for public distribution. The survey sought to identify the unmet needs of community college students with disabilities, and to identify if there were unmet needs unique to unserved or underserved populations. DORS received 91 survey responses; 33% of respondents identified as part of a racial or ethnic minority; 24% of respondents identified their geographic location as rural and 18.7% as urban. Respondents represented 18/24 of Maryland's counties, providing a good statewide representation of experiences at various county community colleges. Respondents were asked to self-identify disabilities, yielding the following range of responses: Learning Disabilities, Traumatic Brain Injury; Low Vision; Neurological Disorders; Mental Illnesses; Orthopedic; Autism Spectrum Disorder; Cancer; Substance Abuse; Intellectual Disabilities; and Speech Disabilities. This provided a broad spectrum of disability-related community college experiences. It should be noted that no surveys were received by any respondents who self-identified as deaf or blind.

**Disability Support Services Professionals Survey:** A survey of the unmet needs of community college students with disabilities was circulated electronically to all community college DSS offices. In addition, verbal discussion and comment was

accepted as survey response at a MDDHEN meeting, which is largely comprised of DSS professionals.

**Needs/Concerns:** When asked to identify individual unmet needs, 43% of survey responses left the question blank, or wrote “none” or “N/A.” Four (4) respondents took the time to specifically write a thank you to DORS for meeting their needs and assisting them. The following unmet needs were identified through these two surveys:

- More intensive assistance with job placement upon completion of educational program; more intensive assistance with internship placement during educational program
- More help with course selection, registration, and financial aid process and forms
- Timely authorizations for registration and books so that the individual can take courses selected
- Greater collaboration between DORS and DSS offices in planning and coordinating accommodations and supports, and facilitating positive relationships with instructors
- Financial assistance with gas money, childcare, and campus food costs
- Transportation when public transportation is problematic or unavailable
- Individualized tutoring
- Specialized academic supports for individuals who are deaf (ex. ASL readers and tutors fluent in ASL), and individuals with autism spectrum disorder (ex. expand the Pathways program)
- Part-time attendance options
- Books and supplies (including items like backpacks and calculators if needed)
- Computer equipment and software appropriate to coursework
- Mental health supports, like psychotherapy and medications, when insurance is not available
- Personal Assistance services
- Assistive technology, with the following devices mentioned as individual needs: augmentative communication, glasses, vehicle modifications, ergonomic workstation at work and school, adaptive classroom seating, and tape recorders.
- More language assistance for individuals with limited English skills (both foreign language and ASL as primary language), beyond interpreters provided for classroom
- Resources for disability documentation when none available
- Dental work
- Benefits counseling
- Basic financial support (food, clothing, social security)

**Discussion:** It appears that many community college students with disabilities feel their needs are being met appropriately, based on 43% of respondents indicating they had no unmet needs, or leaving the field blank. Still, a number of unmet needs were illuminated through this survey.

Most of the needs expressed are already within the scope of vocational rehabilitation services and DORS policy. Many of the needs can be met with an enhanced counseling focus on individualized needs, such as: registration assistance, timeliness of authorizations, transportation, childcare, books and supplies, assistive technology, mental health, personal assistance, and tutoring. An agency discussion of policy and practice in respect to such services might be beneficial, to ensure that barriers do not exist to effective service provision.

In addition, it appears that DORS offices could really benefit from strengthening their relationships with community college DSS offices. This relationship could be strengthened with more active interagency contact and planning, in respect to individualized accommodation and support needs.

DORS may need to consider a culture/practice shift when it comes to the provision of individualized tutoring and academic supports. While it is within DORS policy to provide such services, an analysis of the frequency of provision of such services could help to illuminate need. Agency-wide discussion on appropriate service provision, as well as resource development, could be beneficial in this instance. Additionally, continued planning and resource development for specific college supports for individuals with autism, and individuals who are deaf, should be considered.

DORS may also need to consider a culture/practice shift when it comes to exceptions to full-time college attendance. An analysis regarding the frequency and nature of such exception requests might be warranted, as well as agency-wide discussion on appropriate exceptions of this nature.

DORS may need to explore policy change in respect to provision of computers and software to college students. This was expressed as an unmet need, and currently DORS policy focuses on purchasing adaptive computers, and DORS can purchase a computer when it is required for a specific program. The need for a personal computer, with software specific to some individual coursework, seems to be the increasing trend and norm on college campuses. Additionally, the cost of adequate equipment, and the availability of recycled equipment, might make such a policy change more palatable. While college campuses do have campus computer labs available, there are sometimes many barriers to effective use. Such barriers include limited availability, and personal circumstances (related to things like disability, child care, and transportation issues). It seems to be in many individual's best interest to build strong computer skills for the workplace, and more open access to computers should be considered.

Several DSS professionals expressed unmet needs with appropriate disability documentation, primarily with psychological evaluations. An enhanced working relationship between DORS and local DSS offices might address this issue to some extent. However, there are many community college students with disabilities who are not affiliated with DORS for a variety of reasons, such as DORS eligibility and order of selection criteria. Yet DORS has a strong relationship with a network of psychologists statewide, who provide psychological evaluations at reasonable rates. Perhaps it is

possible to work with this network of psychologists to extend to DSS offices the availability of the same rates for their students to use, as appropriate.

## **II. One-Stop Career Centers.**

### Workforce Investment Act System—Maryland One-Stop Career Centers

The Workforce Investment Act (WIA) brought various federal job training and employment programs together, to create one comprehensive service system. Job seekers, including individuals with disabilities can access this system through a network of One-Stop Career Centers. Services are developed and implemented by a number of mandated and non-mandated partners.

The public Vocational Rehabilitation (VR) agency is one of the mandated partners and the only one that focuses on disability. Its involvement is interactive in nature with VR referring individuals to other partners in the network of One-Stop, and conversely partners doing likewise.

To adequately assess the needs of individuals with disabilities served at One-Stops in Maryland within the period in review, methods employed embraced three components: (a) questionnaire, (b) phone interviews, and (c) site visits to seven (7) One-Stop centers that included face-to-face interviews based on the structured questions. Finally, to validate or augment the findings in this report intensive literature review was done.

In regard to questionnaire, 14 questions were constructed each of which is meant to elicit responses that would show whether services were provided, how they were provided, the number of beneficiaries and the nature of collaboration of partners with DORS at the One-Stop centers.

In regard to phone interviews, the employees of DORS who are co-located and those who had association with One-Stop system were asked a battery of 14 questions over the phone. Their responses were recorded as each individual was asked the same question.

In regard to visits to One-Stops, seven One-Stops were selected for visits. These were those in which DORS has co-location of its staff. While there are approximately thirty-three (33) One-Stop centers in Maryland, DORS is co-located in fifteen (15).

### **Discussion:**

The information obtained from site visits and interviews of 20 individuals provides adequate insight in understanding and interpreting the needs of citizens with disabilities served at one-stops in Maryland within the period in review.

While core and intensive services are provided: job search, resume writing, work skills exploration,, internet access, networking skills, interview techniques workshops, referral to employers, assessment of skills and services needed, development of individual and

career plans, case management et cetera, barriers continue to be encountered . Some of the barriers reported are lack of patience on the part of some one-stop personnel to teach consumers with disabilities who lack the basic skill sets on how to search for jobs online; no interpreters for the deaf and hearing impaired; some of the workstations are not accessible to the blind and visually impaired and those on wheelchairs; those with serious mental issues have difficulty navigating the one-stops. In effect one-stop staff feel that some disabilities are easy to serve and those not so-easy are immediately referred to DORS.

Additionally, some one-stop personnel found complying with performance measures particularly challenging when trying to serve individuals with more complex needs especially those with significant disabilities. At this instance the role of the disability navigator was questioned and unclear. Confidentiality issues preclude some consumers from self-identifying and thus pose a challenge to partners to coordinate services when staff felt that they were unable to share information about joint consumers.

While it is not universally held view, a number of respondents felt that there continues to be misconceptions about hiring persons with disabilities and the perceived additional cost it would entail. This kind of attitude creates overload of work for co-located DORS staff at the one-stops.

**Needs/concerns:**

1. The integrative and collaborative models that one-stops are supposed to follow need to be strengthened to minimize issues/barriers including the perception among one-stop staff that working with people with disabilities is more time consuming and costly and will negatively impact meeting performance standards, and one-stop staff not having the time to assist people with disabilities who need help in accessing one-stop resources.
2. Sensitivity training about disabilities and disability topics need to be done more regularly.
3. Both physical and programmatic barriers (e.g., accessible workstations, ASL interpreters) at some one-stops should be addressed.
4. The role of disability navigator needs to be clarified.



## **B. Assessment of the Need to Establish, Develop or Improve Community Rehabilitation Programs within the State**

### **COMMUNITY REHABILITATION PROGRAMS.**

The success of DORS consumers is due in many instances and respects to the partnerships DORS has established with Community Rehabilitation Programs which provide a number of direct services throughout the state. To assess the need to establish, develop or improve community rehabilitation programs within the State, DORS conducted (1) a survey of CRP Executive Directors; (2) a survey of DORS staff and (3) several small focus groups of DORS consumers who had been served by CRPs. Results suggest needs, particularly for development and improvement of CRPs and enhancement of DORS-CRP working relationships.

**Survey of CRPs.** 104 surveys were sent electronically to CRP Executive Directors; 35 responses were returned. Respondents were anonymous and indicated whether their CRP was in an urban, rural and/or suburban area. Twenty-six (26) CRPs indicated they serve the developmentally disabled population; twenty-two (22) serve the mental health population; twenty-three (23) serve individuals on the autism spectrum; seventeen (17) serve individuals with brain injury; sixteen (16) serve individuals who are deaf and hard of hearing, and sixteen (16) serve individuals who are blind/vision impaired. While several indicated that with additional funding and training/technical support they would consider serving additional populations.

**Needs/concerns identified by CRPs.** In analyzing findings, the types of needs expressed by CRPs included the following:

1. Extend time for job development in light of the current job market; consider extending the length of time supports are provided to enhance employment success
2. Expand training for CRP staff, especially regarding business changes due to the economy, training on job development, and marketing to employers
3. Improve job readiness of consumers referred for employment services (skills training; computer literacy; experience with paid internships; availability of a working telephone)
4. Enhance coordination of services among agencies (e.g., case management, housing, mental health services, child care, addictions services)
5. Develop specific interagency programming for transitioning youth with mental illness similar to EBPSE
6. Address transportation, including travel training.

**Survey of DORS staff.** Approximately 140 surveys were forwarded to DORS field counselors and supervisors. 78 were returned. Staff were asked what services they most often request from CRPs, quality and timeliness of services, specific populations served. They were also asked about use of the agency's Workforce & Technology Center (WTC) for employment services in contrast with local CRPs. Analysis of the

findings indicates that selection of a provider is strongly related to geographic proximity to the consumer, as well as availability of services for specialized populations. Private providers of Career Assessment Services were often chosen because of their flexibility, timeliness and quality reports.

#### **Needs/concerns related to CRP Service Needs identified by DORS Staff.**

1. Expand capacity for employment services for special populations (blind/vision impaired; deaf/hard of hearing; ABI; Autism spectrum)
2. Expand general CRP capacity, possibly with additional funding, to enhance the CRPs ability to provide more timely, responsive services
3. Enhance lines of communication between DORS and CRP (including role of DORS Liaison) to better coordinate timely, effective services
4. Determine if revised fees for CRP services would have a positive impact on consumers served and quality of outcomes
5. Identify resources and expand opportunities for CRP staff to participate in training to enhance employment outcomes for consumers
6. Identify resources and incentives for CRPs to work with individuals with disabilities and criminal histories.

**Focus Groups – Consumers previously served by CRPs.** DORS held several focus groups for consumers who had been served by CRPs to elicit their perspective on services. Four groups were held throughout the state. Participants were asked what services they had received, why they chose the provider, would they recommend similar services to a friend, was their DORS counselor involved, did they get a job as a result of the services, and what would improve the services at the CRP. While not a large sampling, there was some commonality among their responses and reactions. The majority of comments were positive about their experience with DORS and the CRP.

#### **Needs/concerns related to CRP Service Needs expressed by Focus Group participants.**

1. Increase provision of jobs in stated interest area of consumer
2. Provide more prompt, active, engaged job development process with CRP employment specialist
3. Improve access to transportation for employment
4. Improve coordination of services, including ancillary services (e.g., transportation, housing, child care) available to the consumer and possibly family
5. Increase level of expertise of CRP and DORS staff regarding the impact of various disabilities and in working effectively with individuals with criminal histories
6. Increase services for individuals seeking employment beyond entry level.

## OVERALL NEEDS ASSESSMENT RECOMMENDATIONS

**Recommendation related to Federal funding:** The overriding vocational rehabilitation services need of individuals with disabilities residing in Maryland is equitable distribution of federal VR funds. While other recommendations in this attachment address ways to incrementally improve VR services to individuals with disabilities, continuation of historical underfunding of Maryland VR in relations to other states will make it very difficult to implement changes that could result in many more individuals with disabilities achieving employment.

**Recommendations from the focus areas of the Needs Assessment** addressing the required elements are as follows:

- 1. Provide staff development for DORS staff and community partners**
  - a) Employment services**
  - b) Needs of and resources for **special populations**
  - c) Career counseling/counselor role**
    - i) Focus on consumer capabilities and interests
    - ii) Address adjustment to disability issues
    - iii) Take into account learning styles
    - iv) Minimize gaps in the rehabilitation process
    - v) Provision of appropriate support services
    - vi) Supporting consumers with employment goals beyond entry level.
- 2. Consider new positions/realignment of staff to meet needs of special populations**, including Blind and Deaf/Blind; 504 Transitioning Students; Autism Spectrum disorders; Deaf and Hard of Hearing.
- 3. Enhance relationships with community partners** – CRPs, One-Stops and Disability Navigators, community college Disability Support Services staff, LEAs including those working with 504 students, State Library for the Blind and Physically Handicapped.
- 4. Expand services offered by WTC and community programs for special populations**
  - a) In collaboration with the Maryland Technology Assistance Program, assess and enhance current resources for providing assistive technology.
  - b) Consider expansion of capacity of the Pathways program and/or similar community programs for individuals on the autism spectrum
  - c) Development of/increase in fees for services for special populations (Support Services Providers for deaf blind; communication support specialists for deaf and hard of hearing; services to blind, deaf).

5. **Continue outreach to minorities**, especially those of Hispanic and Asian background.
6. Develop an implementation plan for **DORS support of the Governor's statewide initiative Skills2Compete** including consideration of agency post-secondary policy related to provision of computers, tutoring and part-time attendance.
7. **Explore outreach to veterans organizations** to assure that Maryland veterans are aware of the resources DORS could provide as they prepare to re-enter Maryland communities and employment.
8. **Enhance the capacity and expertise of community rehabilitation programs** in the area of job development and placement; emphasize the development of middle skill job.