WSRC Pre Meeting Packet

May 11-12, 2023

May 2023 Quarterly Meeting

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Washington State Rehabilitation Council

Quarterly Meeting Agenda
Thursday, May 11th, 2023
9:00 am to 3:30 pm
Oxford Suites Spokane Downtown
115 W North River Dr, Spokane, WA 99201
Click here to join Zoom meeting

TIME	PRESENTER	AGENDA
8:50	Shelby Satko Jolie Ramsey	**Sign into Zoom** • Opportunity to login early and troubleshoot connectivity issues so meeting can get started promptly at 9:00am
9:00	Peggy Frisk	**Call to Order**
9:35	Terry Redmon	**Director Updates**
10:15	Jamie Grund Jeanette Ogg	**DVR Budget**
11:10		**BREAK**
11:25	Jen Bean Lesa Dunphy	**Customer Satisfaction & Program Evaluation Subcommittee and Policy & Planning Subcommittee** • Customer Satisfaction Survey Results – FFY23 Quarter 1 • Field Staff Listening Sessions on Rapid Engagement Summary
12:10		**NETWORKING LUNCH**
1:00	Pablo Villarreal Mary Crago	**Region 1 Leadership Updates**
1:45	Carla Caballero-Jackson Jere Jaline	**Spokane Units Update**
2:30		**BREAK**
2:45	Peggy Frisk	**Public Comment**
3:00	Peggy Frisk	**Council Wrap-up**
3:30	Peggy Frisk	**ADJOURN**

Tomorrow morning, day two of the WSRC Quarterly Meeting will begin promptly at 9:00am.

PLEASE NOTE: Times above are estimates only. The Washington State Rehabilitation Council reserves the right to alter the order of the agenda. For information for people needing special accommodation, please contact Jolie Ramsey at jolie.ramsey@dshs.wa.gov

Quarterly Meeting Agenda
Friday, May 12th, 2023
9:00 am to 11:00 am
Oxford Suites Spokane Downtown
115 W North River Dr, Spokane, WA 99201
Click here to join Zoom meeting

TIME	PRESENTER	AGENDA
8:50	Shelby Satko Jolie Ramsey	**Sign into Zoom** • Opportunity to login early and troubleshoot connectivity issues so meeting can get started promptly at 9:00 am
9:00	Peggy Frisk	**Call to Order**
9:05	Greg Schmeig Jimmy Wilson Janet LaBreck	**Synergy Consulting Partners | Pre-ETS Workgroup updates**
9:35	Peggy Frisk	**Executive Committee**
9:45	Erica Wollen Alexandra Toney Jen Chong-Jewell Dion Graham Laurae MacClain Jolie Ramsey	**Partnership Subcommittee** • Workforce Training & Education Coordinating Board • Office of Superintendent of Public Instruction • Developmental Disabilities Council • Special Education Advisory Council • Pro-Equity Anti-Racism (PEAR) • State Independent Living Council • Tribal VR • Behavioral Health Advisory Council
10:30	Peggy Frisk	**Meeting Wrap-up**
11:00	Peggy Frisk	**ADJOURN**

DVR Budget

Jamie Grund & Jeanette Ogg

Division of Vocational Rehabilitation

DVR Services are provided by State and Federal VR Funds. The VR program typically receives 78.7% in Federal funds and 21.3% in State funds. For detailed information on the dollar amount of Federal funds for the program, please visit Formula Grant Award Details | Rehabilitation Services Administration (ed.gov)

DVR Budget Process

State Fiscal Year (SFY24) July 1, 2023 – June 30, 2024
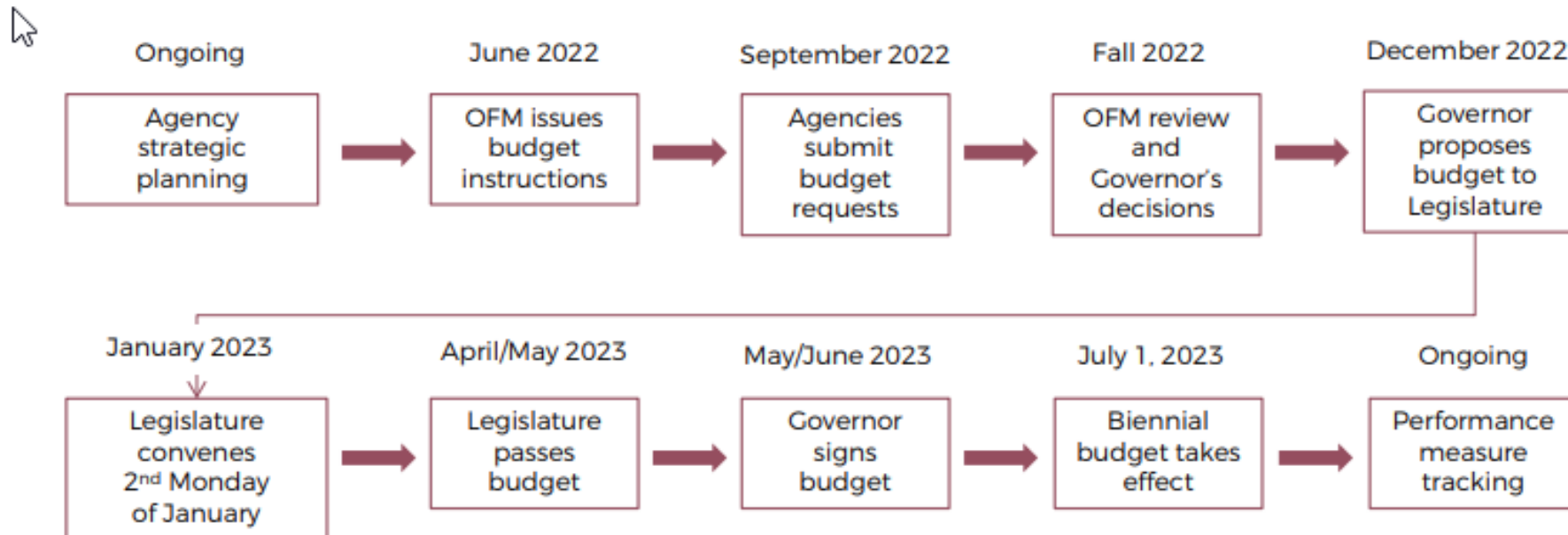
Start of the Biennium 23-25

Official Budget

- Decision Packages (DPs) submitted for next biennium.
- Biennial Budget is passed.
- Supplemental budget every 2nd year of the biennial budget.
- DVR receives General Fund State (GFS) dollars.
- DVR receives GFS appropriation/authority to spend GFS.
- DVR receives Fed appropriation/authority (no dollars) to spend federal dollars.
- ***DVR must not exceed the official budget authority of 80.1 million for SFY 23.***

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DVR Budget Process

State Fiscal Year (SFY24) July 1, 2023 – June 30, 2024

Ongoing	June 2022	September 2022	Fall 2022	December 2022
Agency strategic planning	OFM issues budget instructions	Agencies submit budget requests	OFM review and Governor's decisions	Governor proposes budget to Legislature

January 2023	April/May 2023	May/June 2023	July 1, 2023	Ongoing
Legislature convenes 2nd Monday of January	Legislature passes budget	Governor signs budget	Biennial budget takes effect	Performance measure tracking

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DVR Budget - Sources of Revenue
Federal Fiscal Year

- Basic Support Grant
  - Awards arrive throughout the federal year.
  - State match requirement (21.3%) and
  - Maintenance of effort (MOE) requirement – 2 years prior.
  - 15% Pre-ETS set aside

- Supported Employment Grant
  - Awards arrive throughout the federal year. Match requirement (10%)

- Independent Living Grant
  - Awards arrive throughout the federal year. Match requirement (10%)
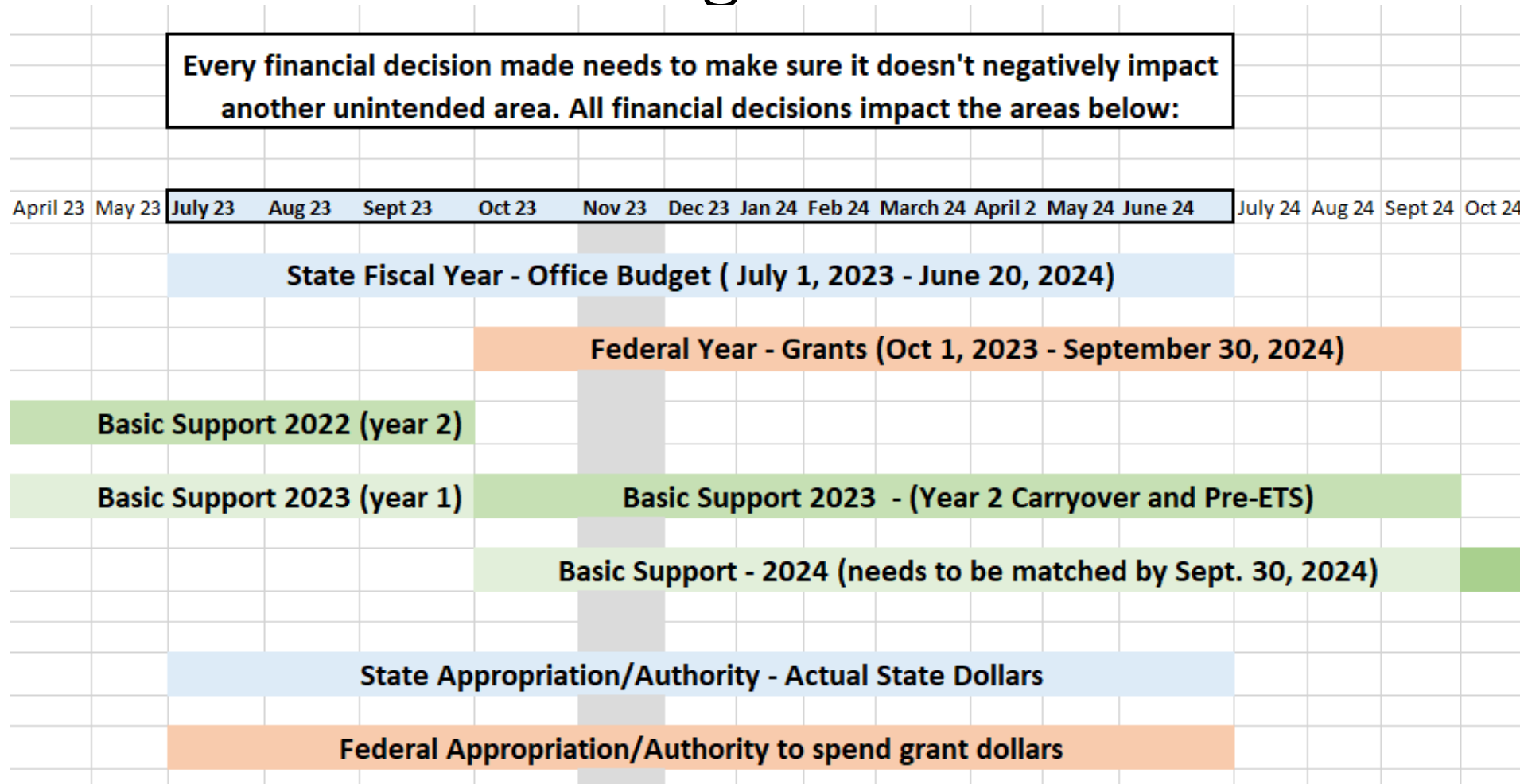
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DVR Budget – Sources of Revenue

- Program Income (Social Security Reimbursements)
  - Ticket Tracker.
  - Funds can arrive daily. No set time for reimbursements.
  - Funds must be spent prior to drawing Basic Support funds.
  - Challenging to estimate anticipated reimbursements.
  - No match requirement

  - ❖Program Income received for FFY 22 - $7,353,623
  - ❖Program Income received for FFY 23 - $6,186,270 (as of 4/24/2023)

Reallotment – Form 692

- Reallotment - Form 692
  - Relinquish
  - Reallotment
  - Must be filed by Mid August
- Request additional funds
  - DVR can request additional federal grant funds **IF** we can match prior to 9/30.
  - Very short window to match funding
  - Must stay within our federal appropriation
- Relinquish funds
  - Before end of year 1
  - Funding goes back to RSA to re-distribute to VR programs

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Transforming
Lives

DVR Budget - Overview

Every financial decision made needs to make sure it doesn't negatively impact another unintended area. All financial decisions impact the areas below:

| April 23 | May 23 | July 23 | Aug 23 | Sept 23 | Oct 23 | Nov 23 | Dec 23 | Jan 24 | Feb 24 | March 24 | April 2 | May 24 | June 24 | July 24 | Aug 24 | Sept 24 | Oct 24 |

State Fiscal Year - Office Budget (July 1, 2023 - June 20, 2024)

Federal Year - Grants (Oct 1, 2023 - September 30, 2024)

Basic Support 2022 (year 2)

Basic Support 2023 (year 1)   Basic Support 2023 - (Year 2 Carryover and Pre-ETS)

Basic Support - 2024 (needs to be matched by Sept. 30, 2024)

State Appropriation/Authority - Actual State Dollars

Federal Appropriation/Authority to spend grant dollars

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DVR Anticipated Funding/Revenue (estimates)

General Fund State – SFY24 $26,670,000

Federal - BS 24 Grant (estimate) $56,000,000

Federal - Supported Employment Grant $ 425,000

Federal - Independent Living Grant $ 385,000

Social Security Reimbursements (estimated) $ 7,500,000

Carryover funds unknown currently

DVR Pre-ETS Expenditures

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	10/01/2019 Final	10/01/2020 Final	10/01/2021 Final	10/01/2022 Currently Spending	
	Basic Support 19	**Basic Support 20**	**Basic Support 21**	**Basic Support 22**	**Basic Support 23**
Required 15% Set Aside	8,054,632	7,393,828	7,580,577	6,018,310	7,992,644
Spent	2,330,440	4,931,819	5,012,777	2,533,935	
Unspent Pre-ETS Funds	5,724,192	2,462,009	2,567,800	3,484,375	
Average Monthly Spend	194,203	410,985	417,731	361,991	

*We tend to spend more for Pre-ETS in Summer months – June, July and
August related to summer programs.

Customer Satisfaction & Program Evaluation and Policy & Planning Subcommittees

Presented by: Jen Bean and Lesa Dunphy

May 2023

Customer Satisfaction Survey: FFY22 – 4th Quarter Highlights

- Customers Surveyed – 481
- Comments Received – 264
- Response Rate - 44%
- Overall satisfaction was 69% Statewide
  - Margin of Error is 4%

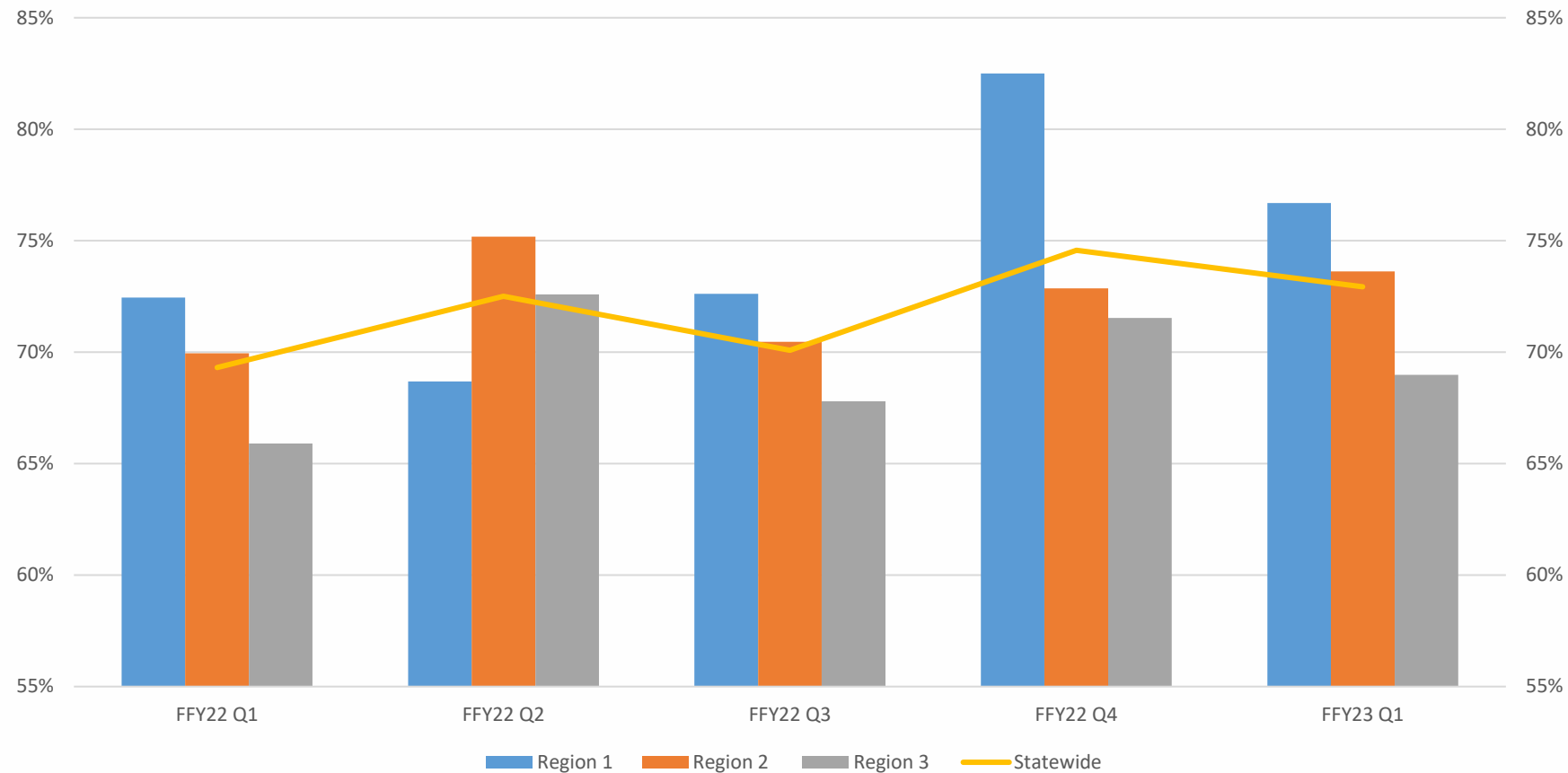# 1. My Counselor does a good job of keeping in touch with me.
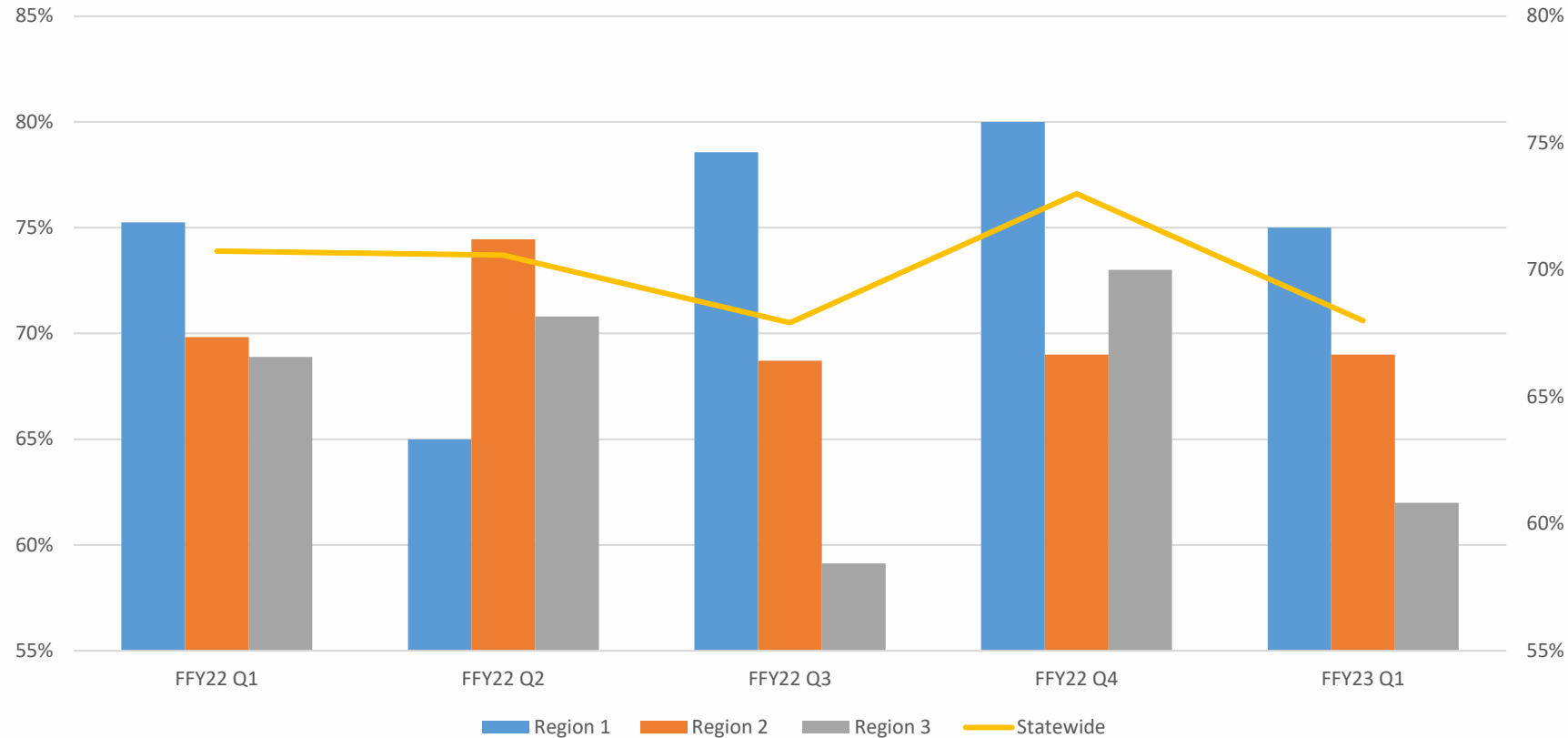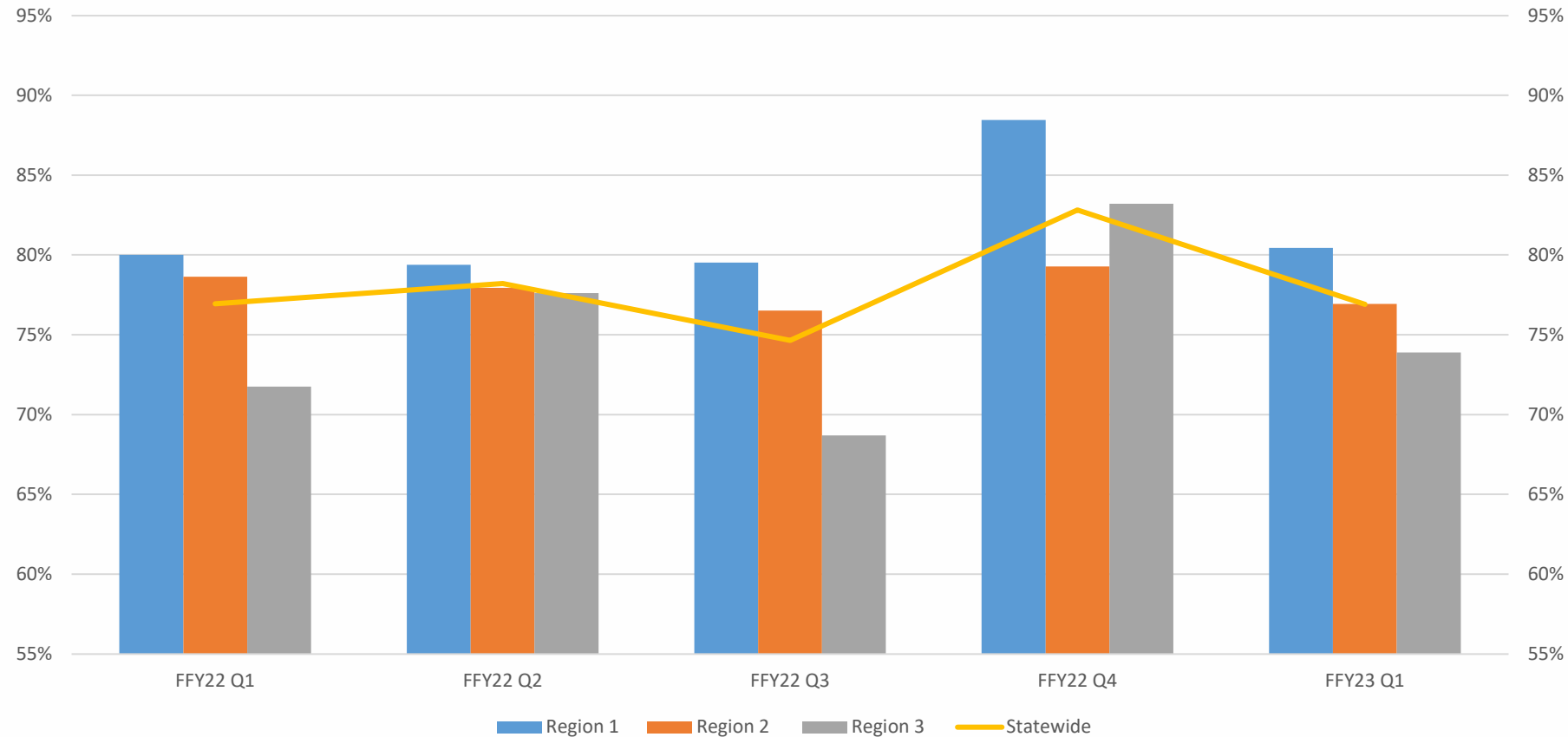

All Regions Margin of Error – 4%

2. My counselor understands what's important to me.

All Regions Margin of Error – 4%

Washington State Department of Social and Health Services
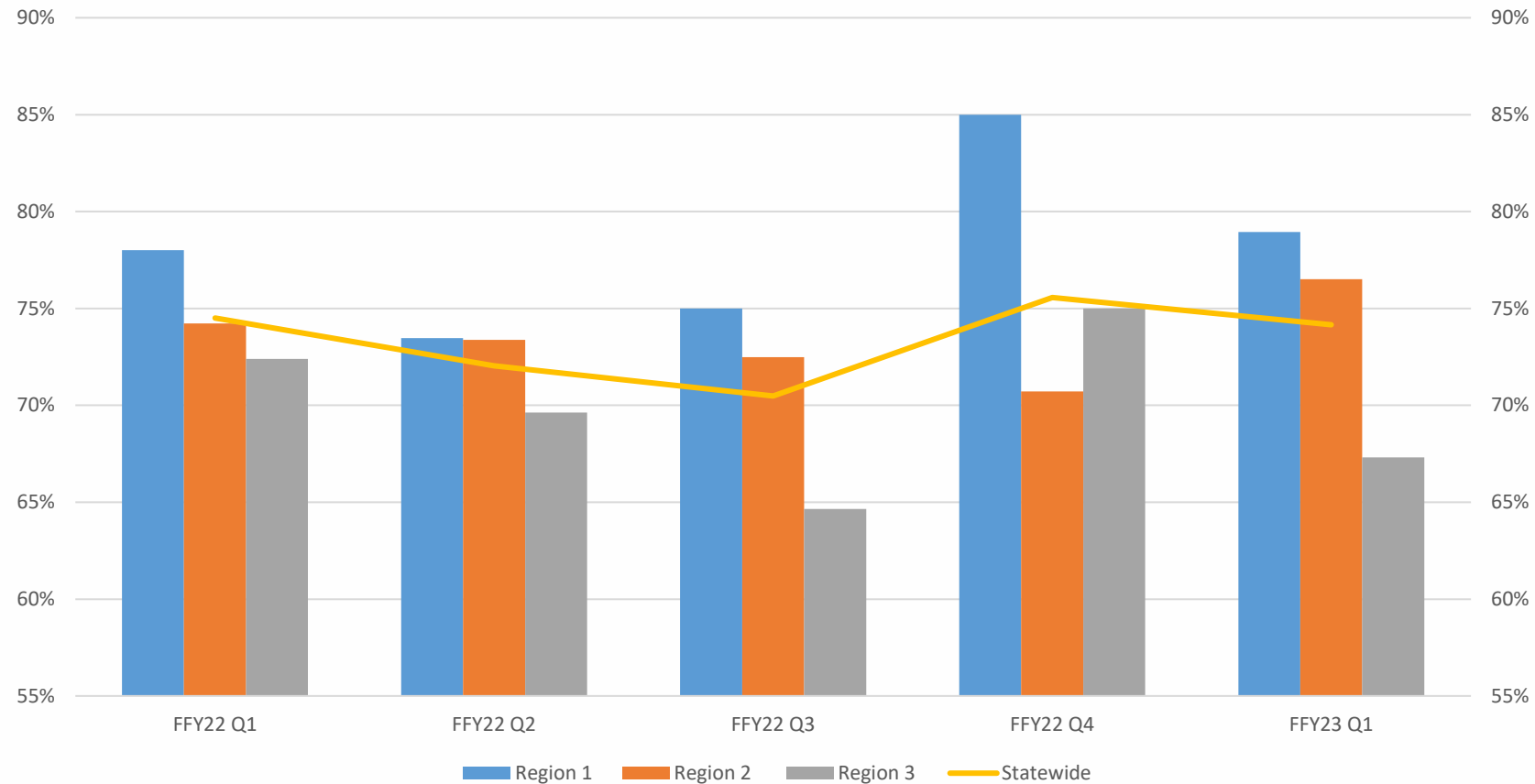
3. My counselor understands how my disability affects me.

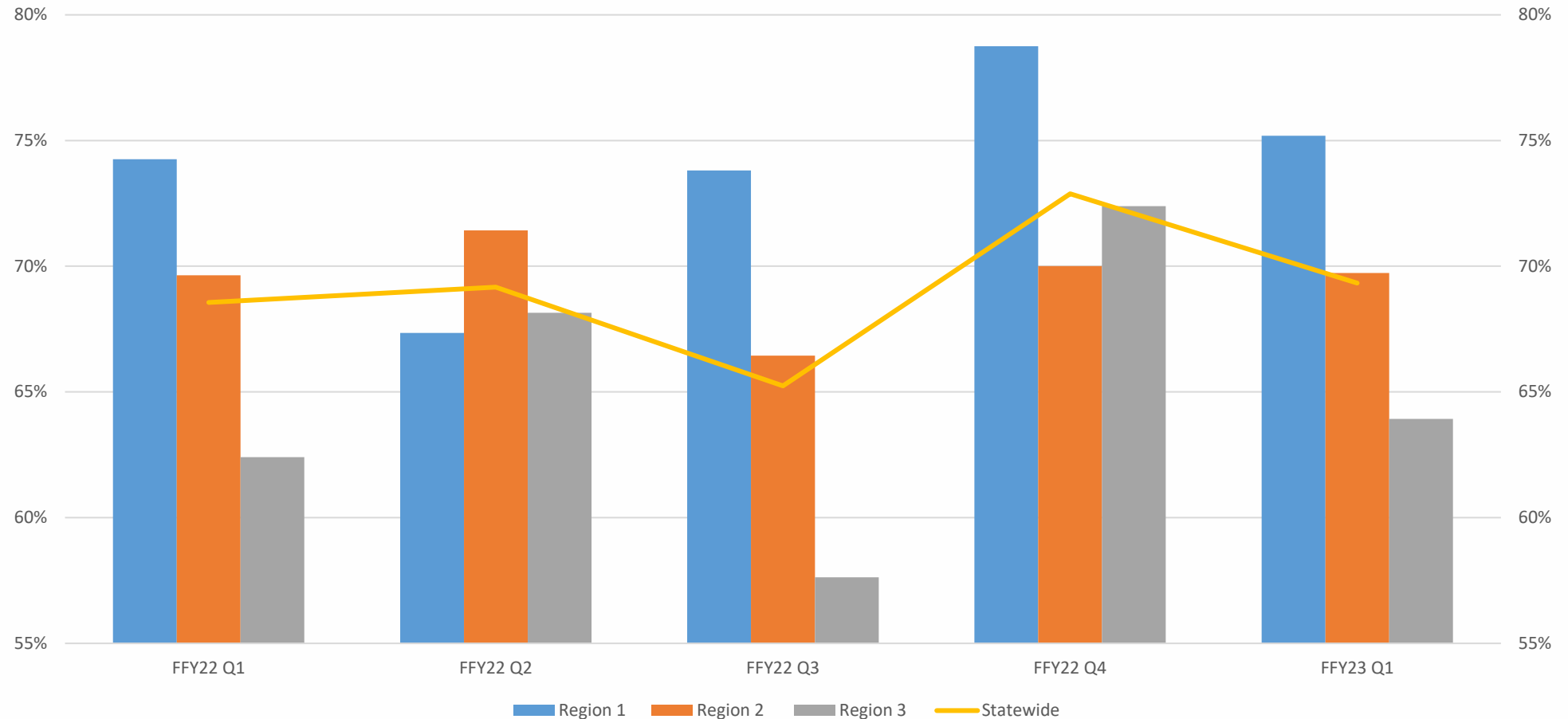All Regions Margin of Error – 4%

4. My counselor cares about my input.

All Regions Margin of Error – 4%

5. DVR moves quickly enough for me.

All Regions Margin of Error – 4%

Washington State Department of Social and Health Services
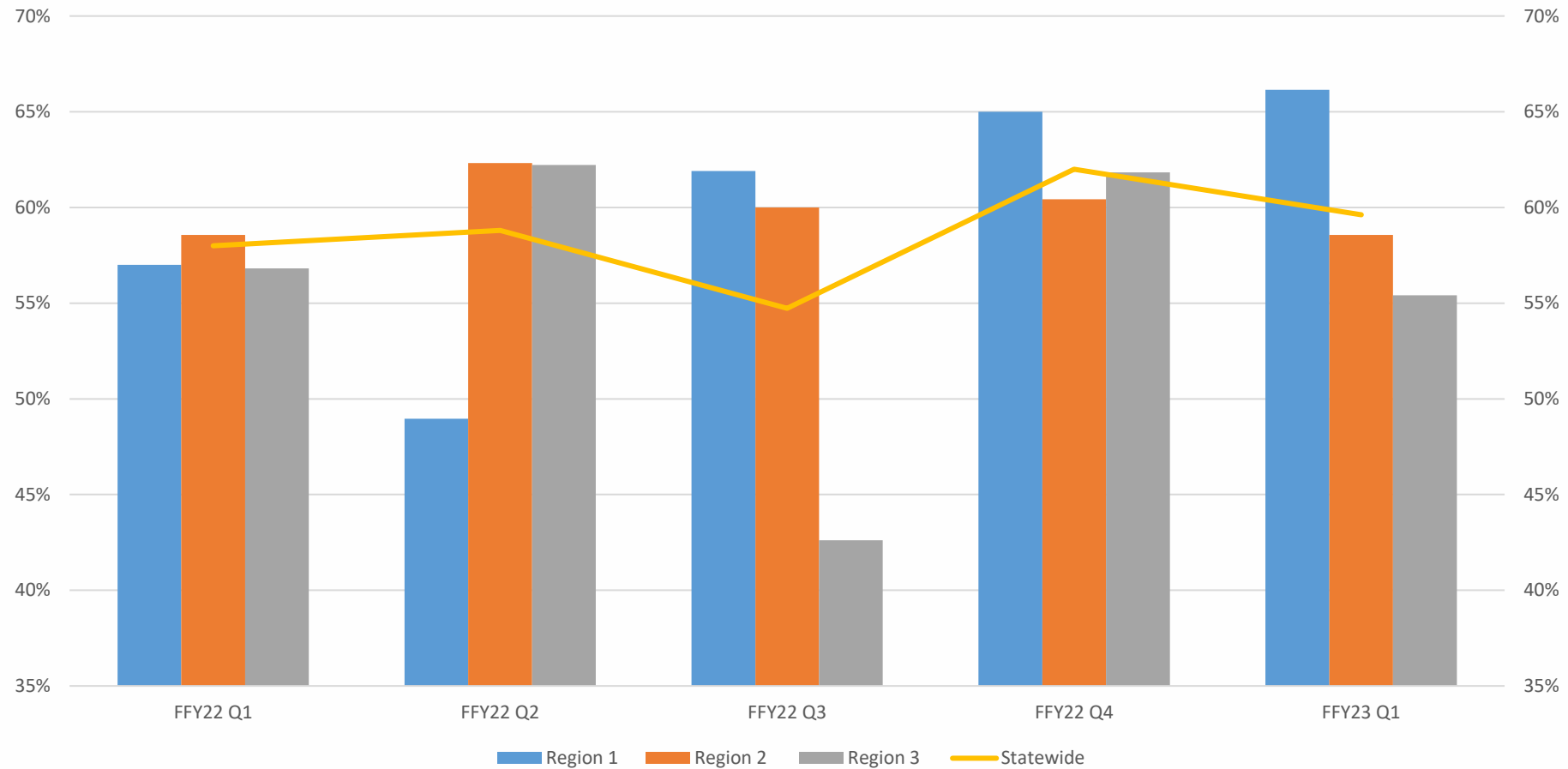
6. Overall, I'm satisfied with DVR.

All Regions Margin of Error – 4%

Field Staff Listening Session – Rapid Engagement

What and Why

Rapid Engagement is:

✓Quick

✓Efficient

✓Active

✓Participatory

✓Cooperative

Why Rapid Engagement:

Lowest Customer Satisfaction =

58-62% agree that DVR moves fast enough

Technology

Already in use:

- ✓ Adobe Fill & Sign
- ✓ Set up patient portals
- ✓ Barcode/Client registry
- ✓ EDMS
- ✓ CMS - STARS

Technology

Needs:

✓ DocuSign or Similar
✓ Texting ability on phones
✓ Customer portal
✓ Adobe Pro for all staff
✓ Online customer application
✓ CMS and EDMS to interface
✓ Hand scanner for RTs
✓ Customer technology training

Partnerships

✓ Community Rehabilitation Programs

✓ Developmental Disabilities Administration

✓ Dept of Behavioral Health and Recovery

✓ Workforce System

✓ Tribal VR Programs

✓ Public School Systems

Increase knowledge and use of Memorandums of Understanding

Service Delivery

- ✓ **Intake and Application**
  - Include RTs
  - Information and Referral handouts

- ✓ **Eligibility**
  - Patient Portal
  - Professional judgement
    - ➢ Customer self-report
    - ➢ VRC impressions
    - ➢ Feedback from family, DDA, CRP, etc.
  - Messaging about DVR timelines

Service Delivery

Case Progress

- ✓ Next meeting

- ✓ Homework

- ✓ Next steps documented

- ✓ Utilize internal VR staff: Business Specialists, Benefits Specialists, ATAPs

Service Delivery

Plan Development

✓Starter Plans
- After vocational assessment
- Begin providing vocational services
- Amend and edit IPE as needed

✓Examples:
- Paralegal
  ➢ Goal aligned with disability limitations, skills, abilities, labor market
  ➢ More assessment needed:
    ▪ Support and accommodation needs
    ▪ Long-term career interest
    ▪ School vs. immediate job
- Self-Employment

Service Delivery

Staffing

✓ Customer engagement and case progress vs. process

✓ Specialized caseloads to improve relationships and streamline referrals

✓ Policies that support counselor decision making

Member Analysis

Short term

- ✓ Case Progress highlights
- ✓ Starter Individualized Plans for Employment
- ✓ Digital Signatures – implementation as soon as possible
- ✓ VRC & RT at intake meeting
- ✓ CRP's – conduct rate study

Long Term

- ✓ Staffing – retention, specialized caseloads
- ✓ Waves Customer portal

Recommendations

✓Encourage Rapid Engagement as a best practice

✓Modernize technology available to DVR field staff and customers
- Implement digital signatures
- Advance records retention technology such texting capabilities

Spokane Units Updates

Presented by: Carla Caballero-Jackson and Jere Jaline

May 2023

Spokane Units Updates

- **Region 1 staff moving customers into plan at a faster rate**

- **Rapid Engagement in process**

- **Increase in intakes**

Month	2019	2020	2021	2022	2023	
January	138	81	33	47	69	
February	85	83	40	41	87	
March	114	68	35	62	99	
April	97	23	47	50	60	as of 4/26/2023
May	89	17	32	50	X	
June	81	38	41	58	X	
July	100	34	33	67	X	
August	93	41	49	75	X	
September	74	41	38	54	X	
October	79	41	51	72	X	
Novermber	94	39	41	73	X	
December	80	41	30	65	X	
	Pre-COVID	COVID	COVID	COVID Recovery	Bouncing back	

More News from Spokane

- DVR Out of Order of Selection June 2023

- New Pullman DVR office

- New staff in the office
- Including two Deaf/Hard of Hearing counselors

- Outreach to schools are very active this year

- New Partnerships/Outreach:
- DDA, Eastern State Hospital, DCYF, CSO, Amazon, WorkSource, WSU, Tribal VR programs

Additional Resources

Date: April 14th, 2023

To: Terry Redmon, DVR Director

From: Shelby Satko, WSRC Executive Director

Subject: DVR Field Staff Listening Session Summary & Recommendations: Rapid
                 Engagement

In preparation for the May 2023 Washington State Rehabilitation Council (WSRC) Quarterly Meeting, our members held Field Staff Listening Sessions on the topic of Rapid Engagement. As the national conversations highlight the advantages of rapid engagement practices in vocational rehabilitation, Council members wanted to hear perspectives directly from field staff about what practices could be implemented statewide to support this practice. We are pleased to present a summary and analysis of the feedback we received, with our recommendations for Division of Vocational Rehabilitation (DVR) leadership at the conclusion of this document.

What is Rapid Engagement? As defined by the VRTAC-QM, it is "a strategy whereby individuals with disabilities are moved through the rehabilitation process (referral to application, application to eligibility determination, eligibility to IPE development) as quickly and efficiently as possible in order to maximize the likelihood that they will be active and full participants in their rehabilitation plans and achieve successful outcomes."

Why is rapid engagement important? As part of Council responsibilities, we administer a quarterly customer satisfaction survey to customers in the following case status. One of the questions that we ask in the survey is does "DVR moves quickly enough for me", and consistently it is the lowest rated score on the survey. In FFY22 the statewide results for this question range from 58-62%.

Vocational Rehabilitation (VR) programs are talking more about Rapid Engagement to seek new ways to meet customers' needs, increase engagement and retention of customers in the VR program.

To gather feedback the council held a combination of individual meetings with leadership as well as four listening sessions in March. A total of 38 DVR staff participated with representation from each region as follows:
- DVR Director
- Regional Administrators: 3
- Deputy Regional Administrators: 3

- Assistive Technology Assessment Practitioner: 1
- Vocational Rehabilitation Supervisors (VRS): 11
- Vocational Rehabilitation Counselors (VRCs): 13
- Regional Transition Consultants (RTCs): 1
- Rehabilitation Technicians (RTs): 6

Attendees were expected to watch VRTAC-QM Rapid Engagement Modules to introduce the philosophy and implementation of rapid engagement prior to attending the listening session. WSRC council members and staff facilitated breakout room discussions, where we heard about DVR staff members' best practices they were already utilizing and their new ideas to support this effort. We carefully analyzed all feedback received and categorized it into three main groups: Technology, Partnerships, and Service Delivery.

Technology

DVR customers are from diverse backgrounds and require service provision that is flexible and easily accessible. Currently, there are various barriers to timely service provision within DVR. One of the areas of focus that came up repeatedly was lack of modern technology. DVR staff are asking for additional and upgraded technology to allow for efficient service provision. The more pressing asks are for the ability to send/receive text messages from customers, and the ability to sign documents electronically. Consistently, customers and staff struggle to sign documents, share documents, monitor documents, and obtain documents, which creates unnecessary delays in case progress. Oftentimes, the inability to sign and share documents electronically is a disability accommodation barrier. Customers who lack transportation or have mobility issues, for example, experience their case plan held up because it is burdensome to come to the office in person, just to sign one document.

Modern technology could greatly reduce the significant time DVR staff spend tracking down and maintaining documentation, resulting in more time available to provide services to DVR customers. Frontline staff report utilizing various technologies to provide services currently and have ideas on what would be most beneficial for customers moving forward.

DVR has access to some software solutions. The staff report using Adobe Fill & Sign to sign some items electronically (this solution is not a digital signature solution, so not accepted by Social Security Administration), helping customers set up and log into their personal patient portals to gather medical records quickly, utilizing Barcode and Client Registry for medical and other DSHS records, tracking all documentation (AFPs, IPEs and other items that age-off) along with appointments on their calendars and using EDMS and STARS for all record keeping. These practices are being reported as integral to providing meaningful engagement to DVR customers.

Additional possible technology solutions noted by staff were DocuSign or another digital signature solution that meets security requirements for Social Security Administration and other providers (note: Developmental Disabilities Administration (DDA) uses DocuSign), secure texting capabilities, customer portal to allow for communication through an app (customer can

message their VRC/RT/VRS team, upload documents, see their next appointment, etc.), access to Adobe Pro for all staff (fillable forms), online application for services, interface between case management system and EDMS, a hand scanner for RTs that uploads to EDMS and customer technology training. The overwhelming majority of staff stated an emergent need for digital signatures; attaining this software is seen as a priority for meaningful and efficient service provision.

Partnerships

For Rapid Engagement to be effective, partnerships with Community Rehabilitation Providers (CRPs), DDA, Department of Behavioral Health and Recovery (DBHR) services, workforce system, Tribal VR, and the public school system, as well as other agencies, need to be utilized throughout the process—from intake to case closure. Working relationships between DVR and CRPs need to be strengthened and restored. Several staff talked about the need for qualified CRPs who have training to meet the needs of customers and who do not have long waitlists. CRPs are experiencing a workforce crisis. The lack of availability to qualified CRPs is a barrier to referring customers in a timely manner and meeting IPE goals.

Consistent feedback from field staff supported the importance of strengthening Memorandums of Understanding (MOUs) with DVR's partners. There seems to be some inconsistency in MOU obligations being followed, and this was heard by staff in all three regions. Each party's obligations in the MOU should be clearly defined, and there should be staff training on MOUs so there is increased understanding. MOUs need to be reviewed, reinforced, and strengthened. Staff advised to follow up with some existing MOUs with agencies such as DDA and WorkSource.

Where WorkSource or other community resources such as the Goodwill employment and training programs are available, utilize partnerships and their services to help self-directed customers with resumé writing, cover letters, interview skills, vocational assessment and labor market exploration.

Service Delivery

During the listening sessions staff shared several service delivery best practices that could be easily implemented statewide. We heard how these simple strategies can increase customer engagement and make work easier for staff.

Intake and Application

To help expedite the intake and application process, offices could develop handouts with Information and Referral resources to share during Intake. Examples include local and regional social service resources (e.g., food banks, housing) as well as employment related (e.g., calendar of classes offered at the local WorkSource). In addition, Rehabilitation Technicians (RT) should be included in the intake appointment. This helps the customer develop a relationship with their rehabilitation team and have an additional point of contact at DVR. RTs can help complete necessary forms, consents, referrals for Benefits Planning, etc., saving time and

ensuring accuracy. Inviting other supports to the intake, such as a DDA Case Manager, CRP, family etc. facilitates coordination of services and clarifies roles.

Eligibility

Staff shared ideas to shift messaging to support determining eligibility as quickly as possible instead of having "up to 60 days", to help customers set up and access their medical records through their Patient Portal and explore other sources of digital records. This can eliminate weeks of delays compared to when DVR requests records directly from providers. Finally, staff said to support the use of customer report, VRC clinical observations and professional judgement instead of relying heavily on medical records to document functional limitations.

Plan Development

Write starter plans that can be edited and amended as needed. This allows the customer to begin receiving services while allowing flexibility to continue the vocational assessment process and exploration of services needed. Additionally, staff can offer WorkStrides & Dependable Strengths workshops for customers and consider a virtual option to reduce staffing impacts and increase opportunities for customer participation.

Case Progress

At the end of each appointment, VRCs and RTs should schedule the next meeting, give the customer homework, document next steps and timelines and make sure to provide a copy for the customer, and utilize internal VR staff to support case progress, e.g., Business Specialists, Benefits Specialists, ATAPs.

Staffing

Staff turnover and finding qualified applicants continue to be an issue across the state. Training and onboarding take longer due to lack of VR backgrounds and the hybrid work environment, and new counselors carry smaller caseloads. VRS approval for services at beginning of Order of Selection had an unintended consequence of impacting staff ability and confidence using professional judgement.

Field staff shared the following strategies to mitigate the issues:
- Focus onboarding on customer engagement and case progress vs. process.
- Consider specialized caseloads to improve relationships with community partners and streamline referral process.
- Train staff on the "why" behind rules, timelines, process, using disability and civil rights advocacy as the foundation.
- Review and develop policies that support counselor decision making.
- Implement overlap days where all staff are in the office together.
- Coach staff to think through problems and issues vs. giving answers.
- Ensure motivational interviewing training is available to help staff engage with customers "where they are at" to support engagement through the VR process.

WSRC Member Analysis
Service delivery section highlights many best practices that could be implemented statewide -
- Short term
  - Case Progress highlights
  - Starter Individualized Plans for Employment
  - Digital Signatures – implementation as soon as possible
  - VRC & RT at intake meeting
  - CRP's – conduct rate study

- Long Term
  - Staffing – retention, specialized caseloads
  - Waves Customer portal

Recommendations
The council would like to advance the following as recommendations for implementation.
- Rapid Engagement as a best practice to maximize the likelihood that customers will be active participants throughout the VR process.
- Modernizing technology available to DVR field staff and customers
  - Implement digital signatures.
  - Advancing records retention technology such as email to text + cell phone to text.

On behalf of the council, I want to express my sincere gratitude to Jen Bean, Chair of the Customer Satisfaction & Program Evaluation subcommittee, and Lesa Dunphy, Chair of the Policy & Planning subcommittee, for the extensive support and expertise they offered throughout the process of conducting the field staff listening sessions. They will provide a joint presentation on the results of Field Staff Listening Sessions at the upcoming WSRC quarterly meeting on May 11th, 2023.

The Council appreciates DVR's support for and attention to field staff feedback and leadership's commitment to reviewing this listening session summary. We look forward to the opportunity to further discuss our summary and recommendations at an upcoming Executive Leadership Team meeting.

DVR Office Map

Key: Region 1, Region 2, Region 3

Map labels (counties):

WHATCOM County · SAN JUAN County · SKAGIT County · OKANOGAN County · FERRY County · PEND OREILLE County · STEVENS County · SNOHOMISH County · ISLAND County · CLALLAM County · JEFFERSON County · CHELAN County · DOUGLAS County · LINCOLN County · SPOKANE County · KING County · MASON County · KITSAP County · GRAYS HARBOR County · GRANT County · KITTITAS County · ADAMS County · WHITMAN County · PIERCE County · THURSTON County · PACIFIC County · YAKIMA County · FRANKLIN County · GARFIELD County · LEWIS County · BENTON County · COLUMBIA County · WALLA WALLA County · ASOTIN County · WAHKIAKUM County · COWLITZ County · SKAMANIA County · KLICKITAT County · CLARK County

Map labels (cities):

Bellingham · Mt. Vernon · Omak · Republic · Colville · Newport · Oak Harbor · Arlington · Pt. Angeles · Pt. Townsend · Everett · Lynnwood · Silverdale · Kirkland · Redmond · North Seattle 1 & 2 · Bellevue · Bremerton · Central Seattle 1 & 2 · Wenatchee · Spokane 1, 2, & 3 · Spokane Valley · SeaTac · Kent · Moses Lake · Shelton · Tacoma · Puyallup · Ellensburg · Aberdeen · State Office · Tumwater · Colfax · Centralia · Pullman · Yakima · South Bend · Toppenish · Kelso · Sunnyside · Kennewick · Walla Walla · Clarkston · Long Beach · Vancouver

Region 1 · Region 2 · Region 3

Legend:

- DVR Offices DVR
- ★ WorkSource
- Region 1
- Region 2
- Region 3

Washington State
Department of Social
& Health Services
Transforming lives

Current as of September 6, 2019

WSRC Commonly Used Acronyms

ACS: American Community Survey (from the Census Bureau)

ADA: Americans with Disabilities Act

AJC: American Job Center

ALTSA: Aging and Long Term Support Administration

ASL: American Sign Language

AT: Assistive Technology

ATAP: Assistive Technology & Assessment Practitioner

BASC: Barriers and Accessibility Solutions Committee

BHA: Behavioral Health Administration

BLS: Bureau of Labor Statistics (Census of Employment and Wages)

BMMP: Business Management Modernization Project

CAP: Client Assistance Program

CARF: Commission on Accreditation of Rehabilitation Facilities

CART: Computer-assisted real-time Translation

CCER: Center for Continuing Education in Rehabilitation

CFR: Code of Federal Regulations

CIL: Center for Independent Living

CMS: Case Management System

CRP: Community Rehabilitation Provider

CP: Cerebral Palsy

CRC: Certified Rehabilitation Counselor

CSNA: Comprehensive Statewide Needs Assessment

DD: Developmental Disability

DDA: Developmental Disability Administration

DES: Department of Enterprise Services

DSB: Department of Services for the Blind

DSE or DSU: Designated State Entity or Designated State Unit

DVR: Division of Vocational Rehabilitation

EDI: Equity, Diversity, and Inclusion

ESD: Educational Service District, also, Employment Security Department

FCS: Functional Community Supports

FFY: Federal Fiscal Year

ID: Intellectual Disability

IDEA: Individuals with Disabilities Education Act

IEP: Individual Education Plan

IL: Independent Living

IRI: Institute on Rehabilitation Issues

JLARC: Joint Legislative Audit and Review Committee (Report on Employment and Community Inclusion Services for People with Developmental Disabilities)

LRE: Least Restrictive Environment

LTS: Long Term Support

MH: Mental Health

MOU: Memorandum of Understanding

OFM: Office of Financial Management

OJT: On-the-job Training

OSERS: Office of Special Education and Rehabilitation Services

OOS: Order of Selection

One-Stop: WorkSource Center

OSPI: Office of the Superintendent of Public Instruction

PAVE: Partnership for Actions Voices for Empowerment (Parent Advocacy)

RCW: Revised Code of Washington

RDA: Research and Data Analysis (research division of DSHS)

Region 10: Federal Region of Washington, per RSA

RFP/RFQ: Request for Proposal/Qualifications

RSA: Rehabilitation Services Administration

SILC: State Independent Living Council

SIPP: Survey of Income and Program Participation (Census Bureau)

SPIL: State Plan for independent living

SME: Subject Matter Expert

SSA: Social Security Administration

SSDI: Social Security Disability Insurance

SSI: Supplemental Security Income

TAP: Talent and Prosperity for All Plan

TBI: Traumatic Brain Injury

TSAT: Transition Self-Assessment Tool

Title 4: of WIOA is the Rehabilitation Act,

      Title 1: under Title 4, which authorizes DVR services and funds

            Section 105 of Title 1: authorizes State Rehabilitation Councils

UI: Unemployment Insurance

VR: Vocational Rehabilitation

VRC: Vocational Rehabilitation Counselor

WAC – Washington Administrative Code
WATAP: Washington Technical Assistance Program
WIOA: Workforce Innovation and Opportunity Act
WISE: Washington Initiative for Supported Employment
WOTC: Work Opportunity Tax Credit
WTECB: Workforce Training, Education, and Coordination Board
WSRC: Washington State Rehabilitation Council
WDC: Workforce Development Council
WOTC: Work Opportunity Tax Credit

WA DVR
AFP: Authorization for Purchase
CBA: Community Based Assessment
JD: Job Development
ELT: Executive Leadership Team
IPE: Individual Plan for Employment
IRWE: Impairment Related Work Expense
ITS: Intensive Training Services
MOU: Memorandum of Understanding
MSD: Most Significantly Disabled
NEO: New Employee Orientation
Pass Plan: Plan to achieve self-support
Pre-ETS: Pre-Employment Services
PES: Post-Employment Services
PHI: Protected Health Information
RA: Regional Administrator or Re
RCD – Rehab Counselors for the Deaf
Region 1: East of the Cascades
Region 2: King County north
Region 3: Pierce County south and all of the peninsula
ROI: Release of Information
RT: Rehabilitation Tech
SDOP: Service Delivery Outcome Plan
SDOR: Service Delivery Outcome Report
SE: Supported Employment
SO: State Office – DVR Headquarters
SOP: Standard Operating Procedure
STARS: DVRs customer database
TWE: Trial Work Experience
YSP: Youth Services Program

121 Program: Tribal Rehabilitation Program (Federal designation)
701 Program: Tribal Rehabilitation Program (WA State designation)