This attachment should include required strategies and how the agency will use these strategies to achieve its goals and priorities, support innovation and expansion activities, and overcome any barriers to accessing the vocational rehabilitation and the supported employment programs. (See sections 101(a)(15)(D) and (18)(B) of the Act and Section 427 of the General Education Provisions Act (GEPA)).

Describe the methods to be used to expand and improve services to individuals with disabilities.

DRS will continue to maintain focus on expanding and improving services to individuals with significant disabilities. The methods/strategies DRS has established to accomplish the Goals and Priorities presented in the FY 2014 State Plan illustrate how DRS expects to continue to fulfill this commitment effectively and efficiently by utilizing skilled personnel and community service providers. DRS will continue working to increase competitive employment outcomes through meeting or exceeding the RSA requirements for evaluation standards and performance indicators. DRS has developed methods to expand services for individuals with disabilities through the increased use of community rehabilitation program (CRP) services. In addition, DRS will focus on expanding services in local communities and increase the number of blind/visually impaired (VI) consumers served throughout the state. DRS will continue to minimize a major obstacle to competitive employment outcomes, which is the transportation barrier, through individualized transportation solutions (ITS) statewide.

Increased effectiveness of services will also be accomplished using several methods:

a. Continued training through the Quality Assurance (QA) Unit on consistency in policy interpretation, implementation, and casework practices will improve service delivery and help ensure equal and effective service provision for DRS consumers.

b. Ongoing QA assessments will continue to help DRS recognize and correct identified areas of concern.

c. Services provided to transitioning youth (TY) with disabilities will increase in quality (through higher consumer satisfaction ratings) and effectiveness (more TY IPE development at an earlier age) by the joint professional training for DRS counselors, school personnel, and CRPs.

d. Both effectiveness and efficiency of services will be enhanced through the continued use of geographic information systems (GIS) to identify potential unserved/underserved minority populations and service areas, allowing for solutions to be developed and implemented in a cost-effective and targeted approach.

Identify how a broad range of assistive technology services and assistive technology devices will be provided to individuals with disabilities at each stage of the rehabilitation process; and describe how assistive technology services and devices will be provided to individuals with disabilities on a statewide basis.

DRS will continue to provide comprehensive statewide rehabilitation technology services that include assistive technology, environmental modification, rehabilitation engineering, fabrication, driver education/vehicle modification services, and bioptic (low vision) driving. Rehabilitation engineers, environmental modification specialists, and assistive technology professionals will travel throughout West Virginia providing assessment, training, and follow-up services to DRS consumers at their workplace or in their homes. DRS also will provide services in an assistive technology laboratory, driver education area, and fabrication shop at Charleston and Morgantown locations. DRS also has designated
liaisons who will continue to work with rehabilitation technology unit staff members to provide support to counselors in each district thereby ensuring that rehabilitation technology services are considered throughout the individual’s rehabilitation process.

Identify what outreach procedures will be used to identify and serve individuals with disabilities who are minorities, including those with the most significant disabilities; and what outreach procedures will be used to identify and serve individuals with disabilities who have been unserved or underserved by the VR program.

The West Virginia Division of Rehabilitation Services will maintain its commitment to serving all individuals with disabilities who are eligible for DRS services, including individuals who are members of minority groups.

a. DRS will continue statewide outreach to all individuals with disabilities, including those with the most significant disabilities, who are interested in preparing for, getting, keeping, or returning to employment in the competitive labor market. DRS transitioned this effort from a state office project team into activities and resources focused on minority outreach as a priority for routine operations in all districts of the Field Services program. To support this approach, DRS convened a forum of leaders from the state’s minority communities to solicit feedback regarding the reputation of DRS within the minority community and to gather recommendations for methods likely to prove relatively more efficacious for minority outreach.

b. DRS will continue to invest in training Field Services management and staff to enhance appreciation for diversity and multicultural competency.

c. DRS will continue to use its geographic information system, case management system, and multiple data sources to identify communities with significant minority populations which appear potentially unserved/underserved.

d. DRS will provide targeted mailings of program information to households in communities with significant minority populations which appear potentially unserved/underserved.

e. DRS will continue state-level support for minority outreach, such as providing management with information and evaluation research products regarding performance trends in serving individuals with disabilities who are members of minority groups.

f. DRS will continue working to ensure that public information products reflect our appreciation for and value of diversity.

These activities will be augmented by a range of ongoing initiatives at the district and branch office levels.

If applicable, identify plans for establishing, developing, or improving community rehabilitation programs within the state.

None

Describe strategies to improve the performance of the state with respect to the evaluation standards and performance indicators.

met S&I requirements by exceeding federal benchmarks for all indicators. In FY 2012, DRS successfully met S&I requirements by exceeding federal benchmarks for all indicators except 1.6 (change in own income as largest source of support), mainly due to the large number of consumers with job retention cases in FY 2012. DRS will continue to achieve this result annually by continuously monitoring performance on S&I at the district and state level. DRS supervisors and administrators will closely monitor field caseloads and activities to ensure an effective and efficient VR service delivery system for West Virginians with disabilities. The State Plan and Program Evaluation (SPPE) Unit will analyze the S&I data and produce monthly, quarterly, and annual S&I reports for field counselors, branch office supervisors and managers, district managers, State Office administrators, and members of the West Virginia State Rehabilitation Council (WVSRC). Each month the SPPE Unit will produce and conduct a statewide dissemination of caseload activity reports by counselor, territory, district, and state. These reports will highlight current production levels, production trends for the fiscal year, and progress in achieving the annual production goals and objectives. Additionally, district managers will submit their quarterly reviews of the S&I performances for their districts to the State Office.

As DRS strives to meet requirements for evaluation standards and performance indicators as detailed in 34 CFR 361.84-361.86, it will continue to stress quality case closures and competitive employment outcomes for its consumers.

Describe strategies for assisting other components of the statewide workforce investment system in assisting individuals with disabilities.

As a mandated partner, DRS works within the workforce development system established by the Workforce Investment Act. DRS collaborates with all workforce partners to ensure access to all programs and services in the statewide workforce system for people with disabilities. DRS provides guidance in the development, maintenance, and continuous improvement of the statewide system as it relates to the needs of individuals with disabilities. These needs are addressed by interactions at local, regional, and state levels, moving forward the development and implementation of the workforce investment system in West Virginia.

Since implementation of the Workforce Investment Act in 2000, DRS has been an active partner of the system and serves on numerous committees and work groups established to develop processes and procedures. The DRS Director serves on the State Workforce Investment Council which continues to provide advice and input into the state’s workforce system. DRS is also represented on each local workforce investment board and actively participates with Business Services Teams at local levels and with statewide initiatives.

DRS is one of eight state agencies that meet monthly as part of the Interagency Collaborative Team (ICT). This team works to overcome barriers to more full integration and flexibility between both mandated and non-mandated workforce partners by addressing such issues as customer flow, case management, assessment tools, marketing, business services, revenue sharing, and infrastructure costs. The ICT has a Memorandum of Understanding that identifies the vision, goals, and objectives of a more fully integrated workforce development system in West Virginia. DRS is available to provide technical assistance on disability issues such as etiquette, assistive technology, and accommodations to the WorkForce WV Career Center.

Describe how the agency's strategies will be used to:

- achieve goals and priorities identified in Attachment 4.11(c)(1);
- support innovation and expansion activities; and
- overcome identified barriers relating to equitable access to and participation of individuals with disabilities in the state Vocational Rehabilitation Services Program and the state Supported Employment Services Program.
State’s Strategies to Achieve Goals and Priorities Identified in Attachment 4.11(c)(1)

In improving its ability to meet the needs of individuals with disabilities, the West Virginia Division of Rehabilitation Services has developed and adopted the following strategies to meet the FY 2014 goals and priorities reported in Attachment 4.11(c)(1). The below strategies identify activities, innovation, and specific performance benchmarks that allow the agency to measure continuing progress toward the desired goals and priorities annually. None of the strategies in Goals and Priorities 1 through 8 involve the use of Title I funds for I&E activities.

**Goal and Priority 1: Exceed the RSA benchmarks for evaluation standards and performance indicators.**

DRS aims to be a top performer on RSA standards and indicators and will continue to make this a goal and priority for the agency. DRS has always surpassed overall requirements established by RSA evaluation standards and performance indicators (S&I). In Fiscal Years (FY) 2004, 2005, 2006, 2008, 2009, 2010, and 2011 DRS met S&I requirements by exceeding federal benchmarks for all indicators. In FY 2012, DRS successfully met S&I requirements by exceeding federal benchmarks for all indicators except 1.6 (change in own income as largest source of support), mainly due to the large number of consumers with job retention cases in FY 2012.

Performance Goal:

DRS has established a performance benchmark for FY 2014 goal and priority 1 of exceeding RSA benchmarks for evaluation standards and performance indicators (S&I). To achieve successful performance on Evaluation Standard 1 (Employment Outcomes), DRS must meet or exceed the performance levels established for four of the six performance indicators in the evaluation standard, including meeting or exceeding the performance levels for two of the three primary indicators (Performance Indicators 1.3, 1.4, and 1.5). To achieve successful performance on Evaluation Standard 2 (Equal Access to Services), DRS must meet or exceed the performance level established for Performance Indicator 2.1.

Strategies:

1.1. Continue to monitor performance on S&I at the district and state level. DRS supervisors and administrators will closely monitor field caseloads and activities to ensure an effective and efficient VR service delivery system for West Virginians with disabilities. The State Plan and Program Evaluation (SPPE) Unit will analyze the S&I data and produce monthly, quarterly, and annual S&I reports for field counselors, branch office supervisors and managers, district managers, State Office administrators, and members of the West Virginia State Rehabilitation Council. Each month the SPPE Unit will produce and conduct a statewide dissemination of caseload activity reports by counselor, territory, district, and state. These reports will highlight current production levels, production trends for the fiscal year, and progress in achieving the annual production goals and objectives. Additionally, district managers will submit their quarterly reviews of the S&I performances for their districts to the State Office. Detailed and early examinations of the S&I statistics by DRS staff members will provide opportunities for DRS to make adjustments or corrections to ensure satisfactory S&I performance at the end of fiscal year.

1.2. Continue to stress quality case closures and competitive employment outcomes for consumers. This action is essential towards successful performance on S&I at the district and state level.

1.3. Continue to observe provisions of the General Education Provision Act (GEPA). DRS will continue to promote equitable access to VR services regardless of gender, race, national origin, color, disabilities, or age. Both the Blind and Visually Impaired Services and Deaf and Hard of Hearing Services units will continue to provide comprehensive compensatory skills and academic training to individuals with sensory impairment.
1.4. Continue to provide comprehensive statewide rehabilitation technology services that include assistive technology, environmental modification, rehabilitation engineering, fabrication, and driver education/vehicle modification services. Rehabilitation engineers, environmental modification specialists, and assistive technology professionals will continue to travel throughout West Virginia providing assessment, training, and follow-up services to DRS consumers at their workplace or in their homes. DRS also will continue to provide centralized services in an assistive technology laboratory, driver education area, and fabrication shop, which are housed at the DRS Office Complexes in Nitro and Morgantown. DRS also will continue to designate liaisons who work with rehabilitation technology unit staff members to provide support to counselors in each district thereby ensuring that rehabilitation technology services are considered throughout the individual’s rehabilitation process.

1.5. Continue to work within the workforce development system established by the Workforce Investment Act.

a. DRS will continue to collaborate with all workforce partners to ensure access to all programs and services in the statewide workforce system for people with disabilities.

b. DRS will provide guidance in the development, maintenance, and continuous improvement of the statewide system, especially as it relates to the needs of individuals with disabilities. These needs will continue to be addressed by interactions at local, regional, and state levels, moving forward the development and implementation of the workforce investment system in West Virginia.

c. DRS will continue cross training of staff members about specific DRS programs and general disability issues in each of the seven workforce regions.

d. DRS will continue to be an active partner of the system and serve on committees and work groups established to develop processes and procedures. The DRS Director will continue to serve on the State Workforce Investment Council which provides advice and input into the state’s workforce system. DRS will also continue to be represented on each local workforce investment board and actively participate with Business Services Teams at local levels and with statewide initiatives.

e. DRS will continue to meet monthly as part of the Interagency Collaborative Team (ICT). This team works to overcome barriers to more full integration and flexibility between both mandated and non-mandated workforce partners by addressing such issues as customer flow, case management, assessment tools, marketing, business services, revenue sharing, and infrastructure costs. The ICT has a Memorandum of Understanding that identifies the vision, goals, and objectives of a more fully integrated workforce development system in West Virginia.

Goal and Priority 2: Improve the consistency of policy interpretation, implementation, and casework practices through a comprehensive quality assurance program.

Quality assurance reviews and decision tree training sessions held in each DRS district indicate that there continues to be a need for staff to become more consistent and cost-effective in their service provision to consumers with significant disabilities. DRS has decided to keep the same strategies due to the large number of new counselors and other field staff.

Performance Goal:

a. DRS has established a performance benchmark for FY 2014 goal and priority 2 at an overall score above 75% on the next quality assurance review.

Strategies:

2.1. Continue to maintain quality assurance specialists in each DRS district. Quality assurance specialists (QAS) will continue to conduct policy and procedure training; update staff members on State Office activities, proposed policy changes, and upcoming goals; review counselor case files; and be available to handle staff member problem cases and clarify policy. QAS will continue to develop and conduct a variety of training on new policy, as well as refresher training on current policy and procedural issues.
during FY 2014. Consistency will be strengthened by using the same training material, which is available via a shared network folder for accessibility purposes as well. Quality Assurance staff members also will work on researching, revising, and developing policy on training, eligibility, economic need, and diagnostic treatment. Maintaining QAS in the six districts will continue to improve the development of consumer services policy, casework practices, and consistency of training and policy interpretation throughout the state.

2.2. Continue to assign quality assurance manager responsibility at the state level with an emphasis on statewide consistency.

2.3. At the state and district level, continue to conduct quality assurance reviews that focus on consistent interpretation of policy, appropriateness of vocational goal determination, and quality of service delivery. There will be two basic reviews in the quality assurance review (QAR) and reporting process. First, individual counselor reviews will allow QAS to review counselors’ cases monthly with the focus being placed on reviewing the individual counselors rather than reviewing by territory. This will allow for a determination of specific training needs among counselors. The second basic review will include looking at district trends. A statewide QAR will be conducted in FY 2014. The QAR will be used to measure counselor performance in completing application forms, the initial diagnostic interview summary (IDIS), the eligibility summary, comprehensive assessment, the Individualized Plan for Employment (IPE), service delivery, Status 18 (training), employment outcomes, unsuccessful employment outcomes, and case management. The purpose of this review is to measure and quantify the quality of casework produced by the West Virginia Division Rehabilitation Services. The case review will identify casework areas in need of quality improvement as well as provide a baseline for measurable internal assessment allowing comparative data analysis. Use of the QAR is also intended to assure adherence to DRS policies.

2.4. In FY 2014, the Quality Assurance (QA) Unit of DRS will conduct training in each of the six DRS districts to ensure uniform application intake, case management, policy interpretation, and service provision. All DRS rehabilitation services associates, vocational rehabilitation counselors, supervisors, branch office managers, and district managers from each district will work through example cases in groups with QA Unit staff facilitating and monitoring for adherence to policy and appropriate case management decisions. Field staff will be able to have questions and concerns addressed by QA unit staff.

2.5. Continue to include representatives from the West Virginia State Rehabilitation Council (WVSRC), the West Virginia Statewide Independent Living Council (WVSILC) and the West Virginia State Client Assistance Program (CAP) in the Division’s policy consultation group. These representatives will fully participate in development and revision of policies relating to case services prior to public comment. Their participation will help broaden the discussion and reduce the potential for different interpretations of the policy changes.

Goal and Priority 3: Create and maintain collaborative relationships with community providers

Responses from the CSNA indicate there still is a need for DRS to continue to improve collaborative relationships with all community providers. Initially, DRS efforts were directed statewide. Findings from the CSNA now point to a need to focus efforts on specific areas where miscommunication between community providers and DRS counselors continues. In addition to a few new strategies, the CSNA confirmed the need to continue with previous strategies.

Performance Goal:

DRS has established two performance benchmarks for FY 2014 goal and priority 3.

a. An overall rating of “Excellent” or “Good” by at least 78% of respondents to the CRP perspectives survey regarding the working relationship with DRS.
b. An overall rating of “Excellent” or “Good” by at least 80% of DRS counselors who provide reviews of CRP service quality.

Strategies:

3.1. Continue to educate field staff, especially the new counselors, about community rehabilitation programs (CRPs) and their services. Use of the new user-friendly vendor guide and counselor CRP site visits will increase awareness of service available service options, which will help to maintain collaborative relationships with CRPs and enhance the availability of services to DRS consumers.

3.2. Continue to maintain regular communications between DRS and community providers in each district and at the state level. Each DRS district will continue to host joint meetings with DRS district and branch office staff and CRPs in those districts to provide opportunities for CRP representatives and DRS personnel to discuss local service needs of DRS consumers. Subsequent to each meeting, the local DRS office will be required to send a brief report to the CRP Program Manager. This process will allow all parties involved in the expansion of community-based services to be kept informed of progress and issues. The Division will continue to examine the information and recommendations collected from various meetings between CRP and DRS staff members.

Progress on communication will continue to be made as the Division acquires more understanding of the issues and barriers facing the CRP and DRS staff members in their service provision to persons with significant disabilities in WV. Ongoing communication activities with CRPs also will include:

a. An e-mail list-serv with all current vendors that will be updated periodically and utilized to send out training opportunities, policy changes, and general updates when needed.

b. DRS counselors in each district will continue to be assigned as CRP liaisons to each CRP and will continue to be required to complete a monthly update regarding the CRP. They will collect this information by visits and/or phone calls. Having CRP liaison that regularly discuss service-related issues specific to the local service area(s) will aid in maintaining collaborative working relationships and enhancing the availability of services to consumers.

c. Two rehabilitation specialists covering all districts in the state will provide technical assistance to CRPs and DRS staff. They will make site visits to CRP and DRS district and branch offices. During these visits, they will provide technical assistance and schedule training and other meetings that need to occur. They will serve as a communication link when issues arise and make themselves available to attend the communication meetings and transition team meetings.

3.3. Conduct site visits to ensure that community providers continue to meet DRS standards and requirements.

3.4. Increase the service provision of acknowledged vendors and work with community providers to expand their service areas to enhance the availability of community services within needed areas.

3.5. Continue to conduct Transition Team meetings at the district level with DRS, WV Department of Education, and CRP staff members. The meetings will be held to promote interagency collaboration by allowing staff from each agency/CRP to become familiar with the different eligibility requirements and service definitions across agencies.

3.6. Continue to conduct cross training and face-to-face meetings with community partners at the local level.

3.7. Continue to assign liaison responsibilities to staff members and provide them guidance about the purpose of DRS participation in community events.

3.8. Monitor the DRS counselors/supervisors/managers’ perception of the quality of CRP services through a survey instrument.

3.9. Monitor and assess the impact of the Quality Assurance unit on the counselor’s case management practices by using data generated from the quality assurance specialists’ review of cases.
**Goal and Priority 4: Increase the availability of job coaching/supportive employment and other validated service gaps within the community.**

Performance Goal:
DRS has established a performance benchmark for FY 2014 goal and priority 4 of eliminating validated CRP service gaps as reported by DRS counselors.

Strategies:

4.1. Identify existing community services (including CRPs, Independent Living, and other community providers), where they are, and where there are best practices. DRS created and will continue to update a user-friendly CRP vendor directory that includes all DRS-acknowledged CRPs and the services each provide by county. This directory will be reviewed during the CRP services component of new counselor training to ensure DRS staff are aware of the CRP services that are available to the consumers they serve.

4.2. Provide additional assessment on the service needs reported by counselors in several areas of the state and the services provided in these areas.

4.3. Identify areas where there are service gaps (unmet needs). Identification and analysis of reasons why districts have low CRP service utilization is crucial. DRS will continue to focus on expanding CRP services in communities where consumers currently reside. This will continue to be accomplished by changing current fees and practices, promoting, educating, expanding, providing funding for, and making available CRP services in all 55 WV counties.

4.4. Continue to expand the pool of job coaches using the methodology of the Student Transition to Employment Project (STEP) after the grant ends in July 2013.

4.5. Continue to incorporate a CRP component in training of DRS field staff. This training segment will increase awareness of CRP service options, especially among the new counselors and rehabilitation services associates, available in the district to ensure understanding of the service definitions, requirements, and authorization codes.

**Goal and Priority 5: Improve access and availability of transportation options at the community level for DRS consumers who need transportation assistance to meet their rehabilitation goals.**

The findings of the CSNA indicate a need for continued efforts to increase the availability of transportation services/options for DRS consumers throughout the state. This is based on examinations of (1) the overall service needs expressed by DRS consumers at application, (2) the service needs of consumers as reported by DRS counselors/supervisors/managers in the survey, (3) the perceptions of CRPs/CSPs on the service needs of consumers, (4) the perceptions of the Consumer Affairs Conference attendees, and (5) the perceptions of WVSILC and CIL members. While we are making progress with this goal, we still have room for improvement, so we will continue with our efforts/strategies.

Performance Goal:
DRS has established a performance benchmark for FY 2014 goal and priority 5 at increasing the number of consumers provided transportation services from the previous fiscal year. The benchmark for FY 2014 is to provide transportation services to more consumers than in FY 2013.

Strategies:

5.1. Continue commitment to reduce transportation barriers for consumers with disabilities and focus on individual transportation solutions (ITS) to satisfy immediate transportation needs.

5.2. Continue to assign responsibility to a staff member in each branch office to maintain a list and working knowledge of local transportation options.

5.3. Continue to participate in local and state initiatives to coordinate and expand transportation resources.

5.4. Continue to encourage planning for transportation needs early in the development of the consumer’s rehabilitation program. At application, DRS counselors will identify transportation issues and focus on
finding solutions to include in the consumer’s Individualized Plan for Employment (IPE). This will ensure that the ability of consumers to reach their vocational goal is not impeded by preventable transportation barriers. Transportation issues also will be addressed by the standard instrument prescribed for routine use by supervisors and quality assurance staff in case reviews.

**Goal and Priority 6: Develop strategies for outreach efforts to minority populations.**

Findings of the CSNA revealed that, weighed against the percentage of minorities in West Virginia, the minority population in the DRS system continues to be well represented. However, a continuing examination of minority populations suggested a few areas where this population may be underserved or unserved. We are making progress with this goal, but still have room for improvement, so we will continue with our efforts/strategies.

Performance Goal:

DRS has established a performance benchmark for FY 2014 goal and priority 6 at attaining a score of 0.85 on RSA Performance Indicator 2.1, the ratio of minority to non-minority service rate.

Strategies:

6.1. Continue to identify and participate in multi-cultural events throughout West Virginia.

6.2. Continue to maintain a website and other public materials that demonstrate diversity. DRS will continue statewide outreach to all individuals with disabilities who are interest in preparing for, getting, keeping, or returning to employment in the competitive labor market. In doing so, DRS will exercise care to ensure that its public information products reflect its appreciation for and value of diversity, including its brochures, posters, flyers, newspapers inserts, and websites, etc.

6.3. Meet and work with representatives of agencies/organizations that serve minority populations in the identified areas.

6.4. Continue to utilize geographic information systems (GIS) technology to locate potential unserved and underserved minority areas. DRS will continue to use its geographic information system, case management system, and multiple data sources to identify communities with significant minority populations which appear potentially underserved.

6.5. Continue to mail informational fliers describing DRS services to households in areas where people with disabilities from minority backgrounds may be underserved or unserved. Information about the vocational rehabilitation services provided by DRS will be sent to all residences along delivery routes for the United States Postal Service that are located in areas of zip codes that meet the potentially underserved criteria listed in Strategy 6.4.

**Goal and Priority 7: Increase the number of blind/visually impaired DRS consumers served by 5% per year and expand services to blind/visually impaired DRS consumers statewide.**

The findings of the CSNA indicate a need to increase the number of blind/VI consumers and expand the number of services to blind/VI consumers statewide. This is based on examinations of (1) the number of blind/VI DRS consumers in the agency’s database for the previous four fiscal years and (2) comments made by attendees of the 2011 Consumer Affairs Conference.

Performance Goal:

DRS has established a performance benchmark for goal and priority 7 to serve 5% more blind/VI consumers than were served in the previous fiscal year.

Strategies:

7.1. Skills trainers will continue to provide daily living skills evaluation and training in consumers’ homes within the local area. Providing more services in the community will improve consumer satisfaction with services. This will also serve as a catalyst for consumer growth in numbers.
7.2. Continue to provide technical assistance to counselors to determine blind/VI consumer needs. DRS counselors will receive training regarding blind/VI program service delivery for consumers in areas such as O&M, Computer Access, and Daily Living Skills, as needed. This training will allow DRS Counselors to increase knowledge of services available and expand services to blind/VI consumers and will improve consumer satisfaction, which will also promote consumer growth in numbers.

7.3. DRS O&M specialists will continue to assist DRS specialty counselors in identifying and contacting non-DRS O&M specialists within their district. This will create better opportunities for DRS counselors to refer blind/VI consumers to O&M specialists who can provide needed services to consumers, thereby improving consumer satisfaction. This will also create better opportunities for O&M specialists to refer their blind/VI consumers who want to work to DRS for services, which will expand the blind/VI consumer body.

7.4. Visually Impaired in Home skills training staff will continue providing services to DRS consumers within their communities. Expanding needed services will improve consumer satisfaction with services, which will serve as a catalyst for consumer growth in numbers.

7.5. Continue to partner with the National Federation of the Blind of West Virginia (NFBWV) to continue community based Braille tutoring through a no-cost grant extension. This service will improve the overall quality of services provided to blind/VI consumers, which will also promote consumer growth in numbers.

7.6. Continue to work with West Virginia Optometric Association to educate optometrists about services that DRS can provide to their visually impaired patients. This will increase the likelihood that optometrists statewide will refer patients to DRS for services, which will expand the blind/VI consumer body.

7.7. Develop a statewide acknowledged vendor list of optometrists who have received training in the services needed to provide low vision evaluation services and Bioptic lens evaluation for the Low Vision Bioptic Driving Program by the end of FY 2014. DRS will sponsor education and training at the Optometric Association training to enlist optometrists to provide low vision evaluation services. Adding this acknowledged vendor list will facilitate the provision of low vision evaluations required by state law prior to training in the Bioptic Driving program. This will increase the availability of services within the community and expedite the process for entrance into the Low Vision Driving program. Reduction of the transportation barrier for visually impaired individuals will increase the number of successful employment outcomes for blind/VI consumers.

7.8. Continue training sessions for the specialty counselors for the blind in a variety of areas, as needed. This will allow these specialty counselors to provide quality services to blind/VI consumers and will improve consumer satisfaction. This will also serve as a catalyst for consumer growth in numbers.

7.9. Continue to develop and maintain working relationships with teachers of the visually impaired statewide, particularly at the West Virginia School for the Blind (WVSB). DRS counselors will hold meetings with teachers and administrators of the WVSB annually. This will enable DRS to receive more referrals of blind/VI students from educational settings who are interested in going to work. This will also enable DRS counselors to better understand blind/VI consumers that are attending school and provide quality services to those consumers, which will improve consumer satisfaction.

**Goal and Priority 8: Expand and improve services to transitioning youth with disabilities.**

CSNA findings indicate a need to improve and expand services (e.g., tutoring, on-the-job training, life skills training, vocational training, career planning, and job placement) to transitioning youth (TY) with disabilities throughout the state. This is based on examinations of (1) the responses from the CSNA survey of DRS field staff pertaining to the service needs and gaps of TY and (2) results of the 2010 and 2011 Consumer Satisfaction Surveys that show satisfaction levels reported by TY have been lower than those reported by all DRS consumers.
Performance Goal:

DRS has established a benchmark for goal and priority 8 of acquiring a baseline of the percentage of Individualized Plans for Employment (IPEs) developed before a secondary student (at time of application) exits the school system.

DRS will expand and improve services provided to transitioning youth (TY) in FY 2014 by developing marketing initiatives and conducting meetings with school officials, TY, family members, and CRPs. These efforts will help to identify ways to better serve TY, improve communication and understanding between all parties involved, increase awareness about DRS services, enhance the employment and training options for TY, and increase employment outcomes for TY through integrated services and higher quality service providers.

Strategies:

8.1. Conduct the annual DRS State Transition Conference to enable DRS staff to share their unique expertise and skills in serving TY. This meeting will generate discussion on topics related to TY service delivery.

8.2. Continue to hold Transition Team meetings and work with the CRP/School Transition Teams in each district to broaden the availability of services to TY and increase collaboration among VR stakeholders.

8.3. Contact financial aid offices at post-secondary institutions to promote timely processing that will lead to enhanced service quality.

8.4. Conduct joint Professional Development Trainings with DRS Transition Counselors, School Transition Coordinators, and CRPs.

8.5. Continue to hold Transition Advisory Team meetings with the purpose of strengthening the district-level Transition Team, planning the annual DRS State Transition Conference, and work with the state-level Transition and Education Programs Supervisor.

8.6. Disseminate DRS Transition brochures/posters for use by Transition Counselors.

8.7. DRS will take over the Student Transition to Employment Project (STEP) and recruit eligible school personnel in areas with an identified need. The project is designed to train special education teachers and aids to become vendors with DRS. Working in close partnership with the DRS School Counselor, this unique project allows for individuals with disabilities who are graduating from high school to receive job placement and training from the teacher or aide who worked with them throughout their high school careers. The purpose of STEP is to provide a more seamless transition from school to work for students with disabilities. STEP methodology allows students to build on previous success with someone they know and trust.

8.8. Continue to meet with WV Department of Education officials in an effort to develop a system to identify students with disabilities who are at high risk for dropping out of high school and provide information for the One Year Exit Survey.