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End-of-Year Annual Report, Year Three

SAN DIEGO STATE UNIVERSITY Research foundation

INTERWORK INSTITUTE

VRTAC-QM

End of year Annual Performance and FIscal Report - year 3

# Executive Summary

At the end of Year Three, the VRTAC-QM completed 18 intensive TA agreements (ITAAs). Our target for the end of Year Three was 17, so we exceeded our target by one ITAA. The VR agencies we have ITAAs with include:

1. Arizona Combined
2. Arkansas Blind
3. Colorado Combined
4. Delaware Blind
5. Florida Blind
6. Florida General
7. Georgia Combined
8. Hawaii Combined
9. Kansas Combined
10. Kentucky Combined
11. Maryland Combined
12. Montana Combined
13. New Jersey General
14. New Mexico General
15. Pennsylvania Combined
16. South Carolina General
17. Washington Blind
18. Wyoming Combined

As of this writing there is a completed ITAA with South Carolina Blind and three more ITAAs being developed with Oklahoma Combined, Oregon General and Virginia General.

Targeted TA has been extremely active for the VRTAC-QM since its inception. To date we have provided at least targeted TA to all 78 VR agencies (100%) in 1,244 targeted TA events serving 9,3310 VR staff. These totals far exceed our target rates in every area. Our communities of practice were very active this year with the addition of the rapid engagement, and innovating and transforming services CoPs.

Universal TA is delivered primarily through our website, which has added content regularly. We have completed multiple webinars, many in partnership with other TA Centers. We developed and presented multiple general sessions at the Spring 2023 CSAVR conference and have recorded numerous podcasts to date that are available on the website..

The VR Grants Management Certificate training through Management Concepts is fully developed and has been very active with 270 courses taken this year and our first group of 49 individuals completing the entire certificate. In addition there are multiple trainings available on the VRTAC-QM website.

The demand for quality program and performance, and fiscal and resource management is very high and we have the capacity to continue activities and wish to continue to receive a non-competing continuation award.

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**Vocational Rehabilitation Technical Assistance Center for**

**Quality Management**

**End-of-Year Annual Reporting Form**

Name of individual filling out form: Chaz Compton

Organization: SDSURF – Interwork Institute

Annual report period: (Oct. 1, 2022 – September 30, 2023)

Date submitted: December 29, 2023

# Section A: Substantial progress toward completion of goals, objectives, and outputs

## Part 1: Program activities, outputs, and products

## Intensive TA agreement development and progress on activities, outputs, and outcomes:

At the end of Year Three, the VRTAC-QM completed 18 intensive TA agreements (ITAAs) with four more scheduled for completion in the first half of Year Four. The Cooperative Agreement called for 17 ITAAs to be completed by the end of Year 3, so we are ahead of our schedule by one ITAA. Table 1 includes a list of all ITAAs by agency, date and project year. The project years have been color-coded as a visual aide.

Table 1

*Intensive TA Agreements by Agency, Date Signed and Project Year*

| **VRTAC-QM Intensive TA Agreements by Agency, Date Signed and Project Year** | | | | |
| --- | --- | --- | --- | --- |
| **Agency** | **Date Signed** | **Revision Date** | **Project Year** | **Joint TAC** |
| Delaware Blind | 5/11/2022 |  | One |  |
| Kansas Combined | 3/26/2021 | 7/13/2021 | One | NTACT:C |
| Montana Combined | 6/4/2021 |  | One |  |
| Pennsylvania Combined | 6/28/2021 |  | One | NTACT:C |
| Arkansas Blind | 1/5/2022 |  | Two |  |
| Florida General | 4/19/2022 |  | Two |  |
| Hawaii Combined | 4/6/2022 | 7/6/2022 | Two | NTACT:C |
| Maryland Combined | 10/15/2021 |  | Two |  |
| New Mexico General | 8/15/2022 |  | Two |  |
| South Carolina General | 5/10/2022 |  | Two |  |
| Washington Blind | 1/12/2022 |  | Two |  |
| Wyoming Combined | 2/15/2022 |  | Two |  |
| Arizona Combined | 3/20/2023 |  | Three |  |
| Colorado Combined | 2/23/2023 |  | Three |  |
| Kentucky Combined | 10/11/2022 |  | Three |  |
| New Jersey General | 11/7/2022 |  | Three | NTACT:C |
| Florida Blind | 7/14/2023 |  | Three | NTACT:C |
| Georgia Combined | 7/26/2023 |  | Three | NTACT:C |

When we complete an ITAA, we establish monthly calls with the VR agency, at least at the beginning of the process), to monitor our progress in completing the activities and achieving the outputs and outcomes. These meetings are driven by a work plan that includes all of the elements of the ITAA and tracks the progress in each area. The overall progress for the center is captured in the formal End-of-Year Program Evaluation report that is submitted 30 days after this report since it is dependent on the information in this report. The work plans for each ITAA have been embedded in this narrative and can be fully opened by double-clicking on the icon. Each work plan is also attached to the final report if that is a preferable way of viewing the files.

This annual report includes an updated narrative of the work in each VR agency for which we have an ITAA. The progress on all of the activities, outputs and outcomes are included on the work plan and in the formal program evaluation report.

### Arizona Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Arizona Combined** | Allison Flanagan |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Arizona-C initially reached out to receive targeted activities focused on training the VR Leadership team on key Federal financial grant management principles. Three sessions were held with that group. The VR Administrator then reached out and asked about intensive assistance. There were significant changes on the DSA level with restructuring financial support services into a shared services model at the DSA and administration levels within the overall division. The program wants to improve the VR program's financial management, resulting in reliable and accurate financial reporting, spending strategies including fiscal forecasting, written policies and procedures, and internal controls.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* During this period, the Fiscal team had one onsite visit for three days, 11 intensive activities, 7 targeted activities, and one universal activity. A large focus was on grounding the DSA and DSU staff on the Fiscal Basics, including a complete markup of the regulatory citations in EDGAR, 2 CFR 200, and also 24 CFR 361, where it intersected on fiscal matters. QM is also working on reviewing and analyzing the AZ-RSA fiscal management and operations to assist with the development of an improvement plan for current accounting practices, specifically with employee expense reports, mass journal adjustments, Pre-ETS auto split, and contract obligations of funds. Also, reviewing the contract monitoring policies and processes to ensure these comply with Federal requirements. Additionally, reviewing the fiscal management and operations and developing an improvement plan related to cost allocation. Working on reviewing, developing, and revising a fiscal forecasting process as needed. QM is also working with AZ-RSA to review and provide recommendations for the new case management system requirements.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* Through the initial review, the QM team recognized a serious misunderstanding of the cadence of spending. It impacted a change so that 30 million dollars did not lapse at the end of the final grant reporting period for 2021 funds.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Accounting practices, specifically with employee expense reports, mass journal adjustments, Pre-ETS auto split, and contract obligations of funds
* Contract monitoring
* Cost allocation
* Fiscal forecasting
* Case management system requirements

As a result, the impact on customers served has been:

* AZ-RSA’s improved fiscal management and operations has improved services to customers.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The team is very eager and willing to work across all levels of the organization.
* The challenge remains within the dynamics of the reporting structure and making some recommended changes to the accounting structure. Staffing changes have occurred within the DSA, causing some reverting to old, incorrect processing in the accounting system. Lack of fiscal reports is proving to be an issue.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* The primary work was completed by QM.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* QM will continue to work through the items identified in the workplan and on the ITAA.

The work plan for Arizona Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Arkansas Blind

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Arkansas-Blind** | Carol Pankow |

1. **What led to the request for TA?**

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* DSB initially reached out to the VRTAC-QM due to their need for technical assistance (TA) and training stemming from their RSA monitoring report and resulting corrective action plan (CAP). The ITAA is focused on Fiscal and Resource Quality Management and General Quality Management.

1. **What activities did you do, or are you doing?**

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* During this period, there have been 67 overall TA activities, and the agency has also participated in the monthly Fiscal Forum Community of Practice and the Financial Management Community of Practice. Eight out of ten ITAA activities are complete. The targeted activities included work by the Program and Performance team and work on the QM Recruitment and Retention pilot. A significant focus was on completing activities required in the Corrective Action Plan. DSB made considerable progress in the resolution of several multi-layered activities, including the rate-setting methodology policy/procedure, SF 425 reporting policy/procedure, contract addendum language, invoice processing policy/procedure, 8 chapters of the consumer services policy/procedure manual were rewritten, the RSA 911 report procedures and QA tool procedures and review were all resolved. Once the agency can promulgate the new policy/procedures and subsequent pieces of training are completed, additional corrective actions will be resolved. The QM team also provided input into the contract monitoring policy/procedure, the RSA-17 reporting policy, and the period of performance policy. Completing the last two policies is predicated on implementing the new grants management system. That has been delayed. There have been monthly meetings focused on the completion of rate-setting activities, and significant progress has been made on that front as well. The rate-setting methodology was utilized to determine rates for job coaching, transportation, Orientation and Mobility training, and the Pre-ETS summer programs. Monthly leadership team coaching continued, and supervisory team coaching was discontinued due to a lack of interest. DSB participated in the QM recruitment retention pilot project and has developed a workplan of activities to implement. John Walsh and Ron Vessell are facilitating this work. Continued follow-up from the all-staff meeting last summer resulted in creating of a training position, which was cited as a significant need. QM staff assisted the DSB team in developing a position description. A hiring freeze delayed the filling of this position. The Arkansas-B Director was recently able to secure approval to fill 15 positions, all of which are currently in the process of being filled. The new training position is filled and starts in October.

1. **What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?**

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* To have the leadership team continue to grow in their knowledge of the fiscal requirements and apply what they have learned to their ongoing operations and completion of the CAP activities. As noted above, significant progress was made in the last RSA CAP response. Progress is tracked monthly on the workplan. A total of 8 out of 21 CAP items have been resolved, which involved very complex work within each of those sections. Other items are close to the final resolution, and we hope this will be completed next year. We are seeing increased confidence and determination in working through roadblocks to complete projects. In the long run, we hope to help them implement strategies to address their staff recruitment and retention issues.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Leadership training
* Rate-setting
* SF 425 and RSA 17 reporting
* Contract addendum language
* Contract monitoring
* Invoice processing
* RSA 911 reporting
* Recruitment/Retention
* Period of Performance
* Staff time and effort reporting
* Consumer Services policies/procedures-Chapter 1 (General Requirements), Chapter 2 (Informed Choice), Chapter 3 (Intake), Chapter 4 (Eligibility), Chapter 5 (Order of Selection, Chapter 6 (IPE), Chapter 13 (Pre-ETS), and Chapter 15 (Supported Employment)

As a result, the impact on customers served has been:

* Service quality is improving with DSB’s enhanced clarity regarding tasks. Staff now have a better understanding of the boundaries. They are also able to better define the expectations for vendors, which leads to better outcomes. DSB is starting to see a rebound in successful closures.

1. **What has worked well and what has been a challenge?**

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* There is a regular rhythm and schedule for the work with good follow through from this tiny DSB team. Even though they have many hats to wear, they have completed many essential activities, as noted above.

The following have been noted as a challenge:

* A challenge has been the delay in the grants management application for managing the Federal grant expenditures. The delay has held up work on completing several of the required CAP activities. Staff turnover remains a persistent challenge, and the recent change in Governors has resulted in a hiring freeze. This freeze has hindered DSB’s ability to address critical staffing gaps. DSB currently has 15 vacant positions that are only now becoming eligible for recruitment.

1. **Describe any work with other TA Centers and how that went or is going?**

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* NTACT:C worked with DSB on the Pre-ETS side of the work and helped them to rewrite their policy/procedure successfully. They are also providing input into Pre-ETS contract questions. That is going well. AR-B also is working with the VRTAC-QE on their supported employment policy and implementation.

1. **Future plans for the work?**

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* QM is continuing to work through the activities outlined in the workplan and is committed to coaching and supporting the cultural changes within the organization to ensure the long-term sustainability of processes and practices—also, implementation of strategies to address staff recruitment and retention.

The work plan for Arkansas Blind is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Colorado Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Colorado Combined** | Sarah Clardy |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* The agency originally reached out and discussed issues with significant turnover in the fiscal, contract, and budget teams within VR. They were unsure if they had the best practices to manage MOE, carry forward, the RSA-17 reporting, and effective funds management. They were interested in pursuing a new CMS. Additionally, the SWAS was set up to do an automatic direct split of all payments with the 78.7/21.3% match applied to every purchase. They were interested in a new strategy that would let them better handle MOE and Match.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* Until only recently, the fiscal team met with the Colorado state team weekly to sort through fiscal activities, largely focused on the Aware case management system. The system was not properly adapted to manage period of performance when the fiscal team began working with them. All system settings and internal controls were evaluated to identify system corrections to allow the agency to accurately track, record and report period of performance. Additionally, we reviewed related staff processes and internal controls so the system is properly supported throughout the Federal fiscal year to preserve the integrity of newly developed controls. The agency also requested assistance with fiscal forecasting and identifying the various data elements to consider in financial decisions. It was unclear at the beginning how much the state was receiving in the non-Federal share and the fiscal team assisted the agency through discussions leading up to established balances. This information was critical in establishing a spending plan for the year and the agency is better equipped to manage finances.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* To ensure the agency is on a sound financial footing with the continued implementation of fiscal forecasting and a spending strategy and documenting fiscal policies and procedures that will survive the turnover in staff. The ultimate goal is zero lapsing dollars at the end of the grant year’s final report. Progress is being tracked on their workplan. At least 6 items have been completed 100%, and many others are in process. No funds were returned from the FFY23 award through reallotment. AWARE parameters and processes were maximized, which will help with the overall management of the funds.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Case Management System
* Fiscal Forecasting
* Spending Strategy

As a result, the impact on customers served has been:

* The effect on customers has not materialized yet. Over the long term, with more effective management of VR funds, CO will have the opportunity to enhance participant outcomes.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The leadership team is committed to doing this work. Despite having a small core team to do all the work, they are making many things happen.

The following have been noted as a challenge:

* Turnover continues to be an issue.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* The primary work was completed by QM.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* Continue development and review of a spending strategy, development of fiscal policies and procedures, and continued work on the CMS fiscal components. Additional conversations will follow with the agency’s budget unit to assist with education on VR’s funding sources. The SVRA has some limitations on funding capacity at the state appropriation level that still needs to be changed to increase the spending capacity. The SVRA asked the fiscal team to be at the table to assist with educating.

The work plan for Colorado Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Delaware Blind

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Delaware Blind** | Sarah Clardy |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Specific Conditions Letter from RSA and RSA request to assist the state agency.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* DVI was required to correct federal financial reports for a designated period to establish financial position. Training was provided around requirements for Period of Performance to allow forensic accounting activities to be conducted and subsequent adjustments to be made to their financials. This included evaluation of the state accounting system and case management system to identify efficiencies. Training was also provided on financial reporting elements, along with follow up reviews of financial data prior to submission to RSA. The QM also trained on internal controls and development of policies and procedures. QM is currently in more of a maintenance phase, ensuring the continued fiscal reporting is being done timely and accurately. We are also advising the agency with questions as they arise and have been supporting the team as they work through the centralization of fiscal staff.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The intended goal was to assist the agency in completing all required activities to help them get released from specific conditions and resolve their CAP findings. Both of those items have been completed. Significant progress has been made in ensuring the accurate and timely completion of Federal financial reporting. Additionally, the leadership team has shown markedly improved knowledge of the Federal fiscal requirements and how they apply to the ongoing administration of the program. The discussions in our monthly check-ins evidence this.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Federal financial reporting
* Internal controls

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* This team has been very responsive and coordinated since the beginning. The director's inclusion of core staff in all training and improvement activities has assisted in building expertise and a knowledge base that will survive any changeover in leadership.

While providing TA the following have been noted as promising practices:

* The directors included core staff within the DSU and DSA, so sustainability throughout the process occurred in order to keep the work moving. This also fostered a greater collaboration between the DSA and DSU to accomplish tasks that were historically stalled like programming adjustments to the case management system to provide automation efficiencies. The DSU is ultimately better supported by the DSA and both sides have a mutual understanding of expectations.

In addition, the following have been noted a challenge:

* The primary challenge throughout was completing the work virtually through zoom with no onsite visits. We’ve learned that certain TA activities take much longer through incremental meeting sessions. The work takes longer to complete. There was also a gap in learning styles identified early in the TA work and it became apparent that a unique approach would offer greater sustainability.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* Primary work completed by the QM.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* We will continue to ensure that accurate and timely Federal financial reporting occurs and assist the agency with implementing a self-review of financial practices so they can self-correct before a situation arises. This will launch with the VR Wellness Check going live this fall.

The work plan for Delaware Blind is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Florida Blind

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Florida Blind** | Carol Pankow |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Director Doyle reached out for assistance as Florida-B has been selected for monitoring by RSA three times in the past seven years, with monitoring that occurred in July 2023. He was looking for assistance in three main areas. Monitoring preparation, completion of the previous CAP activities, and budgeting fiscal forecasting. Assistance required for completion of the CAP involved a review of procedures regarding payroll tracking that included tracking of time spent on pre-ETS and a review of a rate-setting policy/procedure that was developed. The agency has also struggled with fiscal forecasting and understanding its fiscal position. The leadership team had basically no access to concrete budget reports. They had relinquished significant funds during reallotment and let funds lapse at the end of the grant for several years. The DSU primary fiscal staff was on extended leave, and the agency needed help reviewing the limited financial reports to build the financial position. Additionally, Florida-B wants to improve the program's financial management, which results in reliable and accurate financial reporting, spending strategies, fiscal forecasting, written policies and procedures, and internal controls.

They also needed assistance for improved implementation of transition services and pre-ETS, including the review/revision of policies/procedures, vendor contracts, fiscal and programmatic management, effective implementation of the state interagency agreement, and staff training.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* Since January 2023, there have been 35 interactions with Florida-B, including 3 onsite visits and various targeted and intensive activities. The first two onsite visits were geared at training the DSA and DSU team on the fiscal basis, period of performance, complete Federal regulatory markup-EDGAR and 2 CFR 200, rate setting, contract monitoring, match, time and effort reporting, prior approval, fiscal forecasting, budget reporting, and a technology systems walkthrough to identify systems issues related to the period of performance. Additionally, time was spent to prepare the team for their monitoring visit. This involved reviewing the fiscal and program preparation checklists with the entire team, discussing agency practices, identifying shortfalls, and listing TA needs. The third onsite involved participation in the onsite monitoring. Currently, the agency is reviewing the workplan and developing teams to tackle the separate workplan items with support from the QM. A primary focus has been on developing policies for Federal financial reporting, cash management, prior approval, and period of performance. The Federal financial reporting RSA 17 procedure is completed, the prior approval procedure is complete, work is underway on the SF 425, cash management has been reviewed, recommendations made, and the period of performance is in the initial draft state. These areas are selected as they are foundational to having solid, documented fiscal management practices. Period of performance issues were identified onsite, and plans are in play to make adjustments to the CMS to ensure proper reporting. Finally, staff were trained in a new payroll tracking procedure for time spent on pre-ETS activities on July 1st, 2023.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* To start, we needed key staff in both the DSA and DSU to fully understand the Federal regulatory requirements so they could carry out the requirements for the financial management of the grant. Turnover in fiscal staff has led to some errors with reporting and misunderstanding of the Federal requirements. This also helped with the monitoring process so those involved better understood what RSA was looking for throughout their questions in the monitoring review. Work was designed to ensure the FFY22 award was spent with no funds lapsing at the end of 23. The agency has spent all of the 22 funds and will not have any funds lapse. In reallotment, the agency reduced the amount of FFY23 funds to be relinquished from $6 - $8 million. We also fully explored the issues with drawing down the full Federal award and found the agency lacked legislative authority to expend the amount of dollars that could be drawn down. Legislative budget requests were prepared and submitted through the internal departmental process to get into the Legislative process for full authority in the 24-25 cycle. This will allow the agency to actually draw and expend the full amount of funds to assist Floridians who are blind or visually impaired in getting into competitive integrated employment. Along with this was the development of a spending strategy that includes short-term, mid-range, and long-range strategies to assist with the full expenditure of funds. Strategies are geared at both infrastructure needs and those items that will directly relate to customers by increasing rates of providers of services, increasing apprenticeship opportunities, and increasing training opportunities for staff as they provide services, to name a few.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Pre-ETS time keeping procedures
* RSA-17 Reporting
* Cash Management

As a result, the impact on customers served has been:

* Too early to tell. At the initial stages of getting the above-mentioned items into practice. Long term, there will be an impact on customers once FL-B receives the legislative approval needed to draw down all grant funds.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The Florida-B staff have been eager and very engaged. Significant progress has been made in all the areas of focus.

While providing TA the following have been noted as promising practices:

* Participation by the DSA comptroller in the review led to a better understanding of some shortcomings and a willingness to change certain practices, especially related to cash management and how program income is handled.

In addition, the following have been noted as challenges:

* Challenges existed with leadership access to financial reports to understand their true financial position. All the knowledge rested with one individual on the DSU side who was out on an extended leave. Turnover in staff has been challenging, but the dedication of the new DSA fiscal staff in documenting policies and procedures has worked very well.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* VRTAC-QM is working hand in glove with the NTACT: C to tackle the pre-ETS issues, which is going extremely well. Combined, the two TA centers were able to facilitate tracking staff time as of July 1 for pre-ETS that can now be reported on the RSA 17, leading to better and more accurate financial reporting.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* The QM and NTACT: C team will continue to work with the agency through identified work plan items, including completion of policy and procedure development for grants management, implementing a comprehensive fiscal plan and spending strategies, and completion of improvements to the AWARE CMS to comply with the period of performance.

The work plan for Florida Blind is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Florida General

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Florida General** | Bill Colombo |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* An interest in maximizing the use of data reports to inform staff and drive program and performance improvements. Specifically, an area of high priority is assessing the value and utility of their catalog of data reports. This would be followed by recommendations to support the desired outcomes.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

Engagement with the agency has been through recurring scheduled (Zoom) meetings and various ad hoc engagements via Zoom, emails, and phone calls. Due to the nature of the ITAA activities, on-site interactions have not been needed to date.

The agency’s ITAA identified five technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* Performance
  + 2.1 Creation/Operation of a Data Think Tank - 50%
  + 2.2 Identifying improvement areas using agency data/analytics - 10%
  + 2.3 Help agency utilize visual analytics for informed decision-making - 0%
  + 2.4 Revise performance standards for VRCs (and other staff) to align with agency/WIOA standards - 100%
  + 2.5 Develop and implement a program improvement plan to improve the quality of employment outcomes - 0%

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The TA is intended to impact and improve the quality of employment outcomes for VR participants. This will be accomplished by utilizing data reports and analytics to drive and improve decisions impacting outcomes. To be measured by comparing year-to-year quality outcome indicators (wage, hours, benefits) and other key data points defined by the agency.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Implemented a cross-functional “Data Think Tank” team to inform and advance the use of data and analytics as an agency priority through the following objectives:
  + Engage with field staff to assess and identify their level of data use, its purpose, and gaps in driving decision and managing performance.
  + Develop and implement strategies/practices which promote data literacy/use as an essential skill agency-wide to improve performance.
  + Review, analyze, and recommend key data elements and management reports/tools to assist in monitoring progress toward unit/area/agency goals and identify targeted support needs.
  + Review, analyze, and identify services, practices, and other factors positively impacting performance outcomes.

To date the team has engaged in the following activities:

* + Comprehensive review and improvement recommendations for all internal performance management data reports.
  + Initial strategy development on methodology to assess data literacy agency wide.
  + Initial strategy development on accessing provider effectiveness on customer outcomes agency wide. The agency has contracted for the creation of a web-based dashboard. TA will be provided as requested.
  + Provided input on the development and implementation of the new VRC performance evaluation standards. The agency is piloting the new standards.
  + Provided input on the initial work plan for the agency’s MyJourney (web-based career & training planning tool) project. This project planned to kick off fully in ’24. TA will be provided as requested.
* The agency has updated the VRC performance evaluation standards to increase alignment with WIOA performance indicators. TA and guidance have aided this endeavor

As a result, the impact on customers served has been:

* Progress has not advanced to the point of assessing impact.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* The agency has a competent and qualified data unit whose role will be integral to achieving the ITAA outcomes.
* Monthly Zoom based Data Think Tank meetings have allowed statewide participation.
* Regular contact with the agency liaison who has been a consistent presence with historical knowledge of the ITAA.
* The agency has been collaborative and invested throughout the engagement.
* The agency has assigned an executive team champion to the DTT for leadership/guidance/positional authority. Adaptations to the DTT are planned for ’24.

In addition, the following have been noted a challenge:

* The agency has had significant turnover in leadership positions and resulting loss of institutional knowledge. Additionally, the transitional impact appears to challenge key staff capacity.
* The migration to a new case management system has been a competing priority and added additional strain on staff capacity.
* It should be noted priorities and staff capacity may continue to shift due to changes in agency leadership and upcoming RSA monitoring.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* NA.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* TA with this agency will continue through September 2025 or until all ITAA activities are complete.

The work plan for Florida General is embedded below.



### Georgia Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Georgia Combined** | Brittny MacIver |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Georgia Vocational Rehabilitation Agency (GVRA) sought VRTAC-QM assistance and presence during their RSA monitoring in March 2023. The monitoring process revealed various needs, including the identification of staff training needs, revision and development of policies to reduce restrictions on VR participants in accessing services and funding, enhancement of performance accountability understanding, development of internal controls for the WIOA performance accountability system, alignment of the agency's case management system data collection process with WIOA performance indicators to improve reporting accuracy, integration of performance accountability into staff evaluations, identification of areas for improvement in local transition activities statewide, development of forecasting for the 15% Pre-ETS reserve, and provision of staff training on allowable costs, tracking, and reporting.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* VRTAC-QM has provided a blend of three onsite meetings, in addition to numerous video meetings and emails to provide support for various activities. Specifically, VRTAC-QM aided GVRA in conducting a statewide training needs assessment survey and generating a report, presenting insights into specific training needs and feedback from staff. The team also reviewed numerous policies and procedures, offering feedback and technical consultation. VRTAC-QM conducted training sessions on understanding the correlation between the Case Management System and data reporting, along with methods to streamline processes for enhanced data accuracy. Collaboratively with NTACT:C, VRTAC-QM provided technical assistance in developing a fiscal forecast, drawing on examples from other states. The teams also assisted the GVRA team with consultation on allowable costs and authorized activities for Pre-ETS spending. GVRA has formulated a fiscal forecasting plan and is currently in the process of drafting Standard Operating Procedures to align with the assistance provided. In addition, GVRA has implemented changes in staff time recording as well as training, to allocate the allowable costs for Pre-ETS activities.

The agency’s ITAA identified 16 technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* Training
  + 2.1 --100% Complete
  + 2.2 – in progress (meeting scheduled for 11/27/2023)
  + 2.3 -- 75%
* Performance
  + 2.4 –50%
  + 2.5 – Pending
  + 2.6 – Pending
  + 2.7 -- 50%
* VR Regulations and Process
  + 2.8 – 75%
  + 2.9 -- 75%
  + 2.10 -- Pending
  + 2.11 – Pending
* Pre-Employment Transition Services
* 2.12 – 50%
* 2.13 -- 25%
* 2.14 – 75% Complete
* 2.15 -- 25%
* 2.16 -- 100% Complete

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The impact of the work will be evident through various lenses, encompassing the perspectives of VR staff, VR participants, and observable changes in performance data and spending. Here are key indicators of the impact:
* Less restrictive policies, specifically removing ‘needs assessments’ to increase service funds to participants. This will be measured by staff feedback, an increase in service spending for participants, specifically for training services, and anticipation of positive participant feedback.
* Analysis of staff training needs, providing staff training, and monitoring of agency performance data.
* Increased understanding of performance reporting within the case management system, including understanding data, and how to measure and monitor performance. This will be measured by the development of performance reports, internal monitoring, and increased streamlining of processes to improve services.
* Improved policies and procedures and training to provide staff with guidance in serving participants. The result would be a better understanding of policies and procedures and anticipation of positive staff feedback and improved staff retention. This will be measured by internal controls, validation, and retention.
* Increase in Pre-ETS spending, ability to monitor spending and project, forecast and plan for future spending. This will be monitored throughout the federal fiscal year to meet forecast spending needs.

These activities address many challenges nationally which include, accuracy, reliability, and validity of data, the need to increase performance, staff retention, increased spending for VR participant services, increase in training services to lead to better paying high quality employment, and increase in Pre-ETS spending and services for pre-employment transition students. Through these initiatives, we contribute to positive transformations on multiple fronts within the VR landscape.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* Teamwork: The new management team has been able to meet collectively and revise policies and procedures to present policies for public comment.
* Adaptability: The team has been adapting to changing circumstances and adjusting strategies needed to improve services.
* Collaborative Culture: Administration has undergone major changes over the last several years, however, has recently built a culture of collaboration that fosters innovation and problem-solving to address agency needs.
* Staff Positions: The team has a chief financial officer with a fiscal accounting background who has been dedicated in strengthening service spending, forecasting and increasing Pre-ETS spending, and understanding overall reporting to maximize agency impact.
* Continuous Improvement: The team is committed to ongoing learning and improvement to improve overall agency effectiveness.

In addition, the following have been noted a challenge:

* The agency has relatively newer vocational rehabilitation counseling staff and limited training resources developed for performance monitoring, which has created challenges in staff meeting timeliness requirements.
* The agency has developed data reports to monitor progress but continue to revise reports finding that they did not always measure what they hoped to measure (e.g. timeliness in a quarter vs at a given time).
* The team is addressing previous monitoring CAP items and is also addressing items discussed during the 2023 monitoring, making it challenging to prioritize and identify activities that are interconnected.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* VRTAC-QM and NTACT:C developed a joint ITAA plan to assist GVRA in performance and Pre-ETS related needs. Although the VRTAC-QM is leading the ITAA plan and coordinating activities, the two teams are working closely collaborating with GVRA, meeting at a minimum of monthly, if not more frequently to support GVRA. NTACT:C and VRTAC-QM have provided braided consultation regarding Pre-ETS services and spending with utilizing fund sources within the case management system to streamline processes to indicate these services.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* VRTAC-QM will continue to collaborate with NTACT:C to support GVRA through the items identified in the workplan and on the ITAA. Specific activities in the near future include:
  + Meeting with training team to begin planning for upcoming training on various topics, including case management (timeliness), performance, and supervisor training.
  + Following the finalization of updated policies, the team will support GVRA in developing internal controls for processes and performance measures.
  + The team will be supporting GVRA in analyzing accuracy in reporting requirements including post-exit data.
  + VRTAC-QM and NTACT:C will work collaboratively in helping GVRA finalize their Pre-ETS fiscal forecasting and Standard Operating Procedures.

The work plan for Georgia Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Hawaii Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Hawaii Combined** | Chaz Compton |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Hawaii-VR initially contacted the VRTAC-QM due to their need for technical assistance (TA) and training stemming from their RSA monitoring report and resulting corrective action plan (CAP). The ITAA is focused on Fiscal and Resource Quality Management and Program and Performance Management.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* Training was provided onsite for all DVR staff on timely eligibility determinations and IPE development, including rapid engagement. In addition, TA on the SEA agreement and assistance with policies and procedures revision and internal controls development has been provided.
* Fiscal - Technical Assistance specific to Fiscal Management had been delayed until a new fiscal administrator was hired in January 2023. During this reporting period, the VRTAC-QM has provided fiscal training virtually to Hawaii leadership, managers, and field staff on: VR 101 Fiscal Basics for leadership and field staff, including A-DRAN and cost principles. The training was conducted onsite in March 2023 on the topics of: Federal regulatory fundamentals, including a complete markup of EDGAR and UGG, period of performance, internal controls, Federal reporting requirements, contract monitoring, policy and procedure basics, and the changing landscape in VR. An additional on-site visit in June 2023 focused on Rate Setting Methodology, fiscal forecasting, spending strategies and federal reporting.

There have been 25 Technical Assistance activities provided through virtual meetings and emails on specific fiscal topics, including prior approval, unliquidated obligations, accrued leave benefits, purchasing allowances, lease amortization, Randolph Sheppard purchasing threshold, and MOE.

The most recent RSA CAP response resolved three findings specific to Prior Approval (4.4.1) and the Infrastructure Funding Agreement (5.1). In addition, the grant management policy and procedures finding (4.1.1) has been resolved. This results in 8 of the 18 fiscal findings being resolved. The VRTAC-QM has begun work on the rate setting policy and procedures, including the methodology, the financial reporting and fiscal forecasting, including current budget information for a comprehensive spending plan and a comprehensive grant management manual.

Fiscal Forecasting and financial positioning have been a focus during the period to provide a response to the Reallotment process and to begin to understand the areas of fiscal reporting that need improvements.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* Fiscal - VRTAC-QM wants to ensure the Hawaii fiscal policies and procedures, as well as, internal controls are documented in a manner so turnover in staff does not impact the program’s ability to carry out the required grants management duties according to Federal regulatory requirements. The agency had secured a fiscal position but has since lost the employee in that position. The position is intended to be on the DSU side and serves as a bridge between the DSU and DSA. There is an employee temporarily assigned to this position, with the hopes that they will obtain the permanent position and continue the fiscal work that has begun.

The team checks in bi- monthly with Hawaii and assesses completion of the ITAA workplan activities. All Federal reports were corrected (4.1.4 & 4.2.4), submitted to RSA, and accepted by RSA. By having the foundational fiscal knowledge and understanding the DVR leadership is better able to evaluate service delivery opportunities and efficiencies. Additionally, by providing foundational training to the DSA, the VR Administrator is better able to understand and maintain control of the allocation and expenditure of VR funds.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Eligibility and IPE development policies have been revised and updated.
* Fiscal - Developing fiscal forecasting processes, reviewing and reworking the policies and procedures, changing from counselor-level budgets to office or region-level budgets and increased understanding of the services counselors are allowing.

As a result, the impact on customers served has been:

* Eligibility timeframes have been reduced so that the agency has resolved their CAP finding in this area. They have had six months of more than 90% of all applicants being found eligible within the 60-day timeframe.
* Fiscal - Fewer limits on the amounts and types of services being provided, since funds are not limited.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The training seems to have worked well in conjunction with other monitoring efforts for eligibility determinations by the agency.
* Hawaii staff vacancies have been an overall challenge for effective Technical Assistance. The culture of the organization is a challenge with staff turnover, temporary personnel assignments, and overall trust within the organization. The interim Administrator (VR Director) has been granted the permanent position of Administrator, so the priorities within the agency continue to shift resulting in a positive culture change.

While providing TA the following have been noted as promising practices:

* Increased communication amongst the whole team, changes in the level of work being performed, and a wider understanding of the entire program across the team.

In addition, the following have been noted a challenge:

* Fiscal staff turnover has been and continues to be a challenge, with the loss of the most recent hire in June 2023.
* Delays and capacity issues have continued through Yr 3 due to administrative changes. QM has completed site visits for intensive TA in data, reporting, data analysis, CMS needs and performance 2 times this year. Yr 4 will need to include additional intensive TA once the full team is able to meet and reassess needs and priorities.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* The QM Team collaborated with the NTACT-C to focus on Pre-ETS improvements, including the SEA agreement. Additionally, providing significant TA related to tracking and reporting of SWD and Pre-ETS.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* The QM team will continue to work on the activities within the ITAA and workplan. The Fiscal Management activities have slowed down again with another change in the fiscal staff, while the other requirements have been moving forward since the announcement of the Administrator.

The work plan for Hawaii Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Kansas Combined

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| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Kansas Combined** | Chaz Compton |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* The agency requested intensive technical assistance (ITAA) as a result of difficulty in managing their data, case management system, and policies around the WIOA performance accountability system. In particular, they were performing with a 0% MSG rate and new their participants were actively achieving these gains.
* Fiscal - The ITAA for Kansas did not include fiscal activities initially, however, following a VRTAC-QM fiscal onsite visit in May, 2022, they determined it would be helpful to add some fiscal activities deemed appropriate. To date, they have not yet identified specifically what that might include as they have been heavily focused on requirements for a new case management system.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

The agency’s ITAA identified 10 technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* Performance
  + 2.5 -- 100% Complete
  + 2.6 -- 100% Complete
  + 2.7 -- 50%
  + 2.8 -- 30%
* VR Regulations and Process
  + 2.3 -- 50%
  + 2.4 -- 35%
* SWD and Pre-ETS
  + 2.11 -- 25%
  + 2.12 -- 100% Complete
  + 2.13 -- 60%
  + 2.14 -- 100% Complete
  + 2.15 -- 35%
* Targeted activities indirectly relate to all activities in the ITAA but are not specifically identified or tracked. Multiple levels of training have complimented each of the TA activities, with management/leadership, and the field.
* Fiscal - While Kansas has expressed interest in receiving technical assistance with fiscal activities, they have not followed through with meetings to discuss.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Amended the tracking for MSG, CA, SWD and Pre-ETS in KMIS;
* Extensive training for the field;
* Updated policies and procedures;
* RFP for new CMS to improve their ability to meet federal requirements;
* Finalized activities related to this in their CAP;
* Improve their quality assurance plan as an agency; and
* Trust and confidence in their data and understanding of continued challenges.

As a result, the impact on customer served has been:

* A clearer understanding of the functionality (pros and cons) of their current CMS (KMIS), the RSA-911 and WIOA Annual report requirements, as well as making data-informed decisions.
* Policy and training have improved in this area as well as data validation and internal controls at the administrative level.
* Agency is starting to move to program improvement

Fiscal - To be determined once the fiscal activities are identified.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* The new administrative team has drastically improved the agencies functioning. The KS team has improved their data, knowledge, data literacy and continues to identify areas in need. In particular, KS has greatly improved their knowledge and understanding of the performance accountability system and the impact on the field, the agency, and the consumers.
* Agency has made significant progress with updating policies and implementing the WIOA performance measures. Though this may not be reflected in their Title IV or state performance data, they are making incremental improvements overtime.

In addition, the following have been noted a challenge:

* The agency is limited by the abilities of their antiquated case management system. The agency has had to concede on some areas of accuracy/compliance simply by lacking the tools. However, an RFP will go out soon and data mapping and other TA activities will increase their ability to choose and implement a new system.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* TA was provided to this agency in collaboration with NTACT:C. This joint effort has improved the accuracy of their SWD and Pre-ETS tracking and reporting, data analysis, and implementation of the NOI flexibilities.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* TA with this agency is complete or will continue through 2024 or until all ITAA activities are complete. The agency is embarking on post-exit, data validation, and other practices to strengthen their data informed decisions. Also, TA will be provided in the migration phase of implementing a new CMS.
* Fiscal - Fiscal activities to be added will include (but not limited to) work with period of performance, development of a spending strategy to include use of the carryover period, and training around fiscal requirements for the case management system.

The work plan for Kansas Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Kentucky Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Kentucky Combined** | Allison Flanagan |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

For fiscal TA - Kentucky-C reached out to VRTAC-QM in January 2022 following their RSA monitoring in 2021 for fiscal TA specific to centralized fiscal management at the DSA.

For program and performance TA - The agency requested intensive technical assistance as a result of:

* Findings and/or recommendations resulting from the 2021 RSA 107 Monitoring
  + Specific areas (4) requested by the agency include:
    - Implementation of new CMS.
    - Utilization of data for program improvement and analysis.
    - Development and implementation of a program evaluation plan.
    - Program services policy, procedures and internal controls review and development.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* For fiscal - During this reporting period, the VRTAC-QM supported KY-C with 35 Intensive and Targeted activities combined. The topics included period of performance and when an obligation is made as well as match, leave allocation, and CMS recommendations for new conversion. In addition, monthly ITAA check-ins occurred with leadership for ongoing progress updates.
* For program and performance – Engagement with the agency has been through recurring scheduled (Zoom) meetings and various ad hoc engagements via Zoom, emails, and phone calls. Additionally, a site visit was held at the Perkins and McDowell Centers to complete the following:
  + Performance Accountability training for leadership/staff.
  + Assist in analyzing data for WIOA performance indicators, focusing on credentials and skills gains, while aiding leadership in program improvement and data-driven decision-making strategies.

The agency’s ITAA identified seven technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* 2.2 Assist with CMS conversion – 0% (on hold at agency’s request due to delays)
* 2.4 Revise policies/procedures to align with WIOA performance accountability requirements – 75%
* 2.6 WIOA performance accountability training – 100%
* 2.7 Track & report WIOA performance specific to Perkins & McDowell Ctrs. w/focus on CA/MSG – 25%
* 2.8 Program improvement plan for training leading to CA/MSG at Perkins & McDowell Ctrs. – 25%
* 2.9 Strategies for data analysis/decision making Perkins & McDowell Ctrs. – 25%
* 2.10 Develop/review program services internal controls – 75%

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

For fiscal - To ensure the agency is operating with up-to-date policies and procedures that are reflective of Federal regulatory requirements and written in a spirit that is focused on achieving CIE for customers. Also, to develop written fiscal policies/procedures/internal controls that will ensure continuity of completion of critical grants management functions as staff come and go by having thorough written documentation that can be used by any new person coming in the door. By having the foundational fiscal knowledge and understanding the DVR leadership is better able to evaluate service delivery opportunities and efficiencies. Additionally, by providing foundational training to the DSA, the VR Director is better able to maintain control of the allocation and expenditure of VR funds.

For program and performance - The TA is intended to impact the agency’s ability to successfully report accurate and valid data related to RSA-911 quarterly reports and WIOA Annual Report.

* + To be measured by comparing the result of reports against the previous year’s actual numbers and/or rates.

The TA is intended to impact improvements in the area of program evaluation.

* + To be measured by comparing of the case file reviews, and other program evaluation activities will be compared against the previous year’s actual numbers and/or rates

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* The agency’s original case file review process has been updated to ensure greater accountability and regulatory compliance. The new practice is currently in the pilot phase. A second update will follow with the implementation of the new CMS.
* Performance accountability training is being provided on a local/regional level supported through materials provided under TA and directly through an onsite visit.
* Policies and procedures have been developed or revised to guide the timely/valid/accurate (1) submission of the RSA-911 Case Service Report and (2) the 9169 Annual Report. Policy and procedure are being drafted on WIOA performance acct. requirements. Case file review policy/procedure and been updated to reflect the current (pilot) practice and a more comprehensive approach overall.

As a result, the impact on customers served has been:

· NA, activities are in process.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

For fiscal - The KY-C leadership team is committed to doing the work. Staff are pleasant to work with and ask diligent questions to assure they understand the requirements. The pace of staff completing various activities within the ITAA workplan often delays the target dates but the QM staff continue to be available when they are ready to move forward with a specific activity.

For program and performance - While providing TA the following have been noted as promising practices:

* The agency has a competent, qualified, and knowledgeable staff.
* Leadership, managers, and all staff have worked diligently to address monitoring finding and achieve ITAA activities. Excellent collaborators/partners.

In addition, the following have been noted as a challenge:

* Capacity limits due to efforts to transition to a new CMS.
* Significant delays in transitioning to new CMS on the provider end.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* The primary work was completed by QM.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* An ITAA was completed along with a workplan to identify and prioritize the activities. KY-C will begin work with QM on data analysis related to WIOA performance measures and improvement of measures. Additional TA will be provided in CMS conversion on both the fiscal requirements and 911 data requirements. Continued focus on the period of performance within the new CMS system, rate setting policy and procedures will be a priority moving forward.
* ITAA amendments may be needed as a result of delays in the CMS migration.

The work plan for Kentucky Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Maryland Combined

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| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Maryland Combined** | Chris Smith |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* The agency contacted us as they were interested in building a data analysis tool like the one we used for Florida Blind. Maryland was specifically interested in examining outcomes by CRPs by Region.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* In Year 3, analysis using the data tool continued. With significant input from Maryland, the BETA version of the data tool was revised and enhanced to explore addition areas of Maryland service performance, notably; outcomes, employment and authorized expenditures impacted by educational attainment, supported employment and case status prior to closure.
* An initiative is underway to conduct a refresh of the analytic database fueling the data tool. This will expand the cohort of cases being analyzed by approximately 2 years, spanning July-2018 through October-2023.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The intended impact of the work is to help DORS use its data to make informed decisions about the purchase of services for consumers and to identify effective services that lead to high quality outcomes.

As noted in the Year 2 report, One of the early outcomes is that the agency identified multiple areas where their data was not valid or accurate. The subsequent “cleaning” process built trust in their data and therefore in the performance levels revealed by the data tool. The agency was able to use the tool to determine that the expenditures they were making on formal vocational evaluation was not positively impacting outcomes for customers. Consequently, they reassigned their VE staff to become an intake and eligibility unit. This has helped alleviate some work from counselors and allowed them to spend more time counseling with clients. In addition, it has sped up the average eligibility determination time frames according to DORS.

* Year 3 began with promising expansion of the analytic scope of the data tool. As outlined below, momentum on the project slowed as Maryland now grapples with unforeseen significant administrative challenges.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* *TBD*

As a result, the impact on customers served has been:

* *TBD*

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* Through the beginning of Year 3, DORS staff continued to demonstrate commitment to the project. However, when the DOR Assistant State Superintendent left in July, continued prioritization of the project became unclear. This is a significant challenge for Maryland staff, yet they remain as project advocates, educating newly installed executive leadership about the strength of evidence-based decision-making through the analytic data tool.

While abrupt leadership challenges may not be unique to Maryland, how they address this challenge may provide a useful case study for other agencies down the road.

* While providing TA the following have been noted as promising practices:
* To ensure continuity of operations, Maryland has broadened their engagement with VR-TAC for assistance in traversing their current administrative challenges.

In addition, the following have been noted a challenge:

* See above

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* NA.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* We have begun analyzing data with the agency on multiple levels. This analysis will need to program improvement plans in areas where the data identifies a need.

The work plan for Maryland Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Montana Combined

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| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Montana Combined** | Allison Flanagan |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

The agency requested intensive technical assistance (ITAA) as a result of:

* Difficulty in managing their data, challenging transition to a new case management system, and internal controls around the WIOA performance accountability system.
* On the fiscal side: Montana initially reached out to the VRTAC-QM due to their need for technical assistance (TA) and training stemming from their RSA monitoring report and resulting corrective action plan (CAP).

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

The agency’s ITAA identified 6 technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* Performance
  + 2.2 – 100% Complete
  + 2.5 -- 100% Complete
  + 2.6 – 50%
  + 2.7 -- 30%
* VR Regulations and Process
  + 2.3 – Not started
  + 2.4 -- 50%
  + 2.11 -- 100% Complete (without QM support)

Fiscal: The work with Montana has been light at the VR agency’s discretion. There were a total of 14 intensive and targeted activities. They requested assistance with fiscal aspects of order of selection, recognizing they may need to reconsider whether to stay in or formally exit OOS. We discussed fiscal forecasting and the need for a spending strategy to properly inform the agency regarding any future impact on their decision. Montana asked for help with developing a more formal spending strategy when they are ready. The agency also reviewed a list of targeted needs regarding services to groups, Randolph Sheppard questions, use of innovation and expansion, and use of the establishment authority related to provider training.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The TA is intended to impact the accuracy of their data, improve their performance indicator outcomes and have a better understanding of the overall reporting requirements and the ability of their CMS to meet these requirements.

The outcomes will be measured by tracking their data and performance rates from year to year, as well as analyzing quarterly reports/dashboards and other internal control and data validation activities to ensure confidence in the system.

* On the fiscal side - Training was meant to increase knowledge on the fiscal management of the grant and give field staff the tools they need in working with the complexities of the grant requirements. Through participation in two fiscal communities of practice, the agency was happy to report they have spent the FY 22 funds and will not be lapsing any funds at the end of this Federal Fiscal year. They are looking to expand services and opportunities that will benefit customers served. Additionally, the fiscal lead is fully confident in her Federal fiscal reporting and thorough understanding of the requirements. The agency also reported their CAP was closed out. Two of the three ITAA Fiscal activities have been completed. The third activity is around use of the QM Wellness Check that will be available in October of 2023. The SVRA can use this to measure their own progress.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Updated policies and procedures and internal controls;
* TA related to MADISON functionality and RSA-911 compliance; and
* Trust and confidence in their data and understanding of continued challenges

As a result, the impact on customers served has been:

* A clearer understanding of the functionality (pros and cons) of their new CMS (MADISON), the RSA-911 and WIOA Annual report requirements, as well as making data-informed decisions.
* MT hired a data analyst that has help the agency greatly improve their data analysis and accuracy;
* Agency has a better understanding of where they are at, improvements that need to be made for the field and the impact it has on their clients

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The new data analyst has been a great addition to the MT team and it appears their data quality and accuracy in submissions have improved.

The following have been noted as a challenge:

* The agency is limited by the abilities of their new CMS (MADISON) and the limited capacity of staff to tackle all of the priorities. QM has not provided too much support in these areas as of yet because MT has been working on them internally, reaching out when they have targeted needs or have put things on hold/delay.
* The staff is small and wears multiple hats. It has been challenging in getting traction on assisting the agency effectively

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* NA.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* TA with this agency is complete or will continue through 2024 or until all ITAA activities are complete. The agency is continuing their efforts in accuracy, data quality and program improvement.
* On the fiscal side - Internal monitoring using the new QM tool will be conducted in year four. Additional work will be more targeted in nature regarding services to groups policy/procedure development, use of innovation and expansion, use of the establishment authority, and Randolph Sheppard.

The work plan for Montana Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### New Jersey General

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| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **New Jersey General** | Bill Colombo |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

The agency requested intensive technical assistance (ITAA) as a result of:

* Findings and/or recommendations resulting from the 2021 RSA 107 Monitoring
  + Specific areas (4) requested by the agency include:
    - Tracking, reporting, and data analysis for the common performance measures, especially MSGs
    - Help developing the QA unit and what should be included – Vito leads this unit
    - Training on DSA-DSU relationship and roles
    - Fiscal training.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

Engagement with the agency has been through recurring scheduled (Zoom) meeting and various ad hoc engagements via Zoom, emails, and phone calls. Biweekly TA meetings address many QA and data/reporting related issues. An onsite visit is tentatively planned for spring ’24 for TA to focus on development of the agency’s Quality Assurance Unit.

The agency’s ITAA identified four technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* Performance
  + 2.1 Accurately collect, track, and report RSA-911 quarterly report to meet performance acct. requirements – 75%
  + 2.2 Developing strategies for data analysis and data-informed decision-making for the WIOA performance indicators with a focus on Credential Attainment and Measurable Skill Gains – 25%
  + 2.4 Training on WIOA performance accountability requirements, quality assurance, and applicable Federal regulations – 75%
* Program
* 2.3 Development of a program improvement plan for quality assurance (QA) – 25%

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* Positively impact the agency’s ability to successfully report accurate and valid data related to RSA-911 quarterly reports and WIOA Annual Report.
  + To be measured by comparing the result of reports against the previous year’s actual numbers and/or rates.
* Increase the utilization of practices and strategies to improve data analysis and data-informed decision-making
  + To be measured by comparing against the previous year’s numbers and types of actions taken based on data analysis and data-informed decision-making.
* Improvement in quality assurance.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* The agency has established a Quality Assurance Unit and significant TA has clarified multiple misinterpretations and reporting errors (accurate & valid) around the performance accountability requirements.
* Significant TA and troubleshooting in collaboration RSA’s Data Unit resulted in lifting PY’22Q3 MSG rate of 2.1% to PY22Q4 rate of 58.8%. TA included: Manager training, VRC MSG job aids, CMS & 911 data element corrections.
* Other areas of TA have included guidance on regulation pertaining to VR applications, review/recommendations on internal controls manual (on-going), guidance/troubleshooting Aware reports and layouts.

As a result, the impact on customers served has been:

* NA, activities are in process.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* Engagement with the agency has been collegial and cooperative.

In addition, the following have been noted as challenges:

* Progress slowed resulting from significant hiring delays for an assistant director, QA chief, and QA staff.
* Generally, challenged to grasp/retain/implement all performance accountability requirements.
* Inadequate service delivery model in the provision of services to SWD.
* On-going 911 reporting errors requiring guidance/corrections.
* General sense of overwhelm and capacity challenges.
* Inadequate performance data reports compounded by a lack of SME.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* TA was provided to this agency in collaboration with NTACT:C. This joint effort is or was limited and not an ITAA activity.
* Tentative future collaboration/site visit with NTACT:C in ’24.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* TA with this agency will continue through January 2024 or until all ITAA activities are complete.
* Amendments to the ITAA timeline may be needed to accommodate staffing/capacity gaps.

The work plan for New Jersey General is embedded below.



### New Mexico General

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| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **New Mexico General** | Carol Pankow |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Difficulty in managing their data, case management system, and policies around the WIOA performance accountability system. In particular, they are struggling with tracking and reporting data for the MSG/CA indicators and have had to resubmit quarterly reports (directed by RSA) due to inaccuracies and missing performance data. They also struggle with understanding the coding in their CSM and how it aligns with the federal reporting requirements.
* Fiscal - Fiscal TA was requested based on a fiscal training that demonstrated the team needed some additional intensive assistance in the fiscal area.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

The agency’s ITAA identified four technical assistance (TA) activities targeting program and performance areas and four targeting fiscal areas. The TA activities and progress (% complete) are listed below:

* Performance
  + 2.2 -- 50%
  + 2.3 -- 50%
  + 2.4 -- 30%
* VR Regulations and Process
  + 2.1 -- 75%
  + 2.9 – 50%
  + 2.10 – 25%
  + 2.11 – 25%
  + 2.12 – 0%
* 2.5 - Maximizing Federal Share - 10% complete
* 2.6 - Indirect cost allocation plan - 25% complete
* Progress on the ITAA has been very steady and the program/performance team has made three site visits to NM to work closely with them in the identified TA areas during Yr 3. Though significant progress has been made, there are still ongoing data validation needs that are time consuming with slow progress, however, the team is meeting 2-3 times a month to work on activities in addition to other activities in the ITAA.
* Fiscal - There have been 46 TA activities with 29 conducted by the Fiscal team since Oct 1, 2022. An onsite training was conducted with key field and administrative staff the week of June 12, 2023. Both program and fiscal QM staff facilitated this collaborative effort. Training included a Regulations Walk-Through, Fiscal Basics, Internal Controls, Period of Performance, RSA-17, Prior Approval, and Rate Setting. Additionally, a session was held on spending strategies to mitigate the potential $2+ million that was going to be lapsed at the end of FFY 2023. The team was able to come up with a plan to expend part of those funds so they would not be lapsed. A workplan was created with additional activities to focus on addressing the period of performance deficiencies in the CMS and bi-weekly meetings have been held to work through the systems changes that need to occur. Other meetings were held to look at rate setting and contracts feedback and also prioritize possible workplan items discussed during the onsite. QM Program and Fiscal team staff were onsite in September 2023 to assist with the all staff training with sessions on A-DRAN, changing landscape, and critical thinking.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The TA is intended to impact the accuracy of their data, improve their performance indicator outcomes, and for the management team to have a better understanding of the overall reporting requirements and the ability of their CMS to meet these requirements.
* The outcomes will be measured by tracking their data and performance rates from year to year, as well as analyzing quarterly reports/dashboards and other internal control and data validation activities to ensure confidence in the system.
* To date the agency reports 50% progress in the outcome of accurately reporting valid data related to credential attainment and MSG.
* Fiscal - The policies and procedures around the fiscal components are being addressed. Correcting contractual information will better assist the services customers receive with a clear scope of work for vendors, implementation of rates based on a set methodology, and lead to more accurate reporting of services provided in federal reporting. Progress is being made with the technology fixes needed to ensure period of performance is being addressed. Having sound fiscal processes and reporting leads to a more stable financial base which in turn, leads to better decision making and implementation of services for customers served. As a result of our training, the fiscal team better understands the cadence of spending when working between carry forward and a current years’ grant. This will allow them to implement processes of spending down the entire grant by the end of year two instead of moving over to spending the new grant year funds and letting the previous grant have lapsed funds which go back to the Treasury.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Updated policies and procedures and internal controls (in progress);
* RSA-911/Aware data mapping to analyze accuracy in coding and use;
* Assisted with activities in their CAP;
* Train management and the field on all aspects of the performance accountability system to promote better outcomes and tracking of participants; and
* Trust and confidence in their data and understanding of continued challenges.

As a result, the impact on customers served has been:

* A clearer understanding of the functionality (pros and cons) of their CMS (Aware), the RSA-911 and WIOA Annual report requirements, as well as establishing goals for making data-informed decisions.
* Staff have strengthened their skills and knowledge to greatly improve their data analysis and accuracy;
* Agency has a better understanding of where they are at, improvements that need to be made for the field and the impact it has on their clients.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* The RSU team, leadership, and program staff (e.g., data, fiscal) work wonderfully together. It’s refreshing to see any agency dissolve silos and establish roles and understanding across teams. They have the right structure to make vast improvements over the next few years. The current team is strong and is doing a good job of setting the priorities for the organization.

In addition, the following have been noted a challenge:

* The agency is limited by their capacity and knowledge of the requirements but are working diligently to move into compliance and beyond.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* TA was provided to this agency in collaboration with NTACT:C. This joint effort has provided a bridge between education and VR to help with knowledge translation, tracking and reporting efforts, staff training and compliance related to SWD and Pre-ETS.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* TA with this agency will continue through 2025 or until all ITAA activities are complete. The agency is continuing their efforts in accuracy, data quality and program improvement.
* Fiscal - Continued work with period of performance in the CMS and ensuring the technology fixes are made to become fully compliant. Continue to support the strategic spending workgroup to help stay on track. Review policies and procedures including rate setting, Federal financial reporting, and prior approval. Once the CMS/SWAS is finished work will begin on the vendor handbook/portal.

The work plan for New Mexico General is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Pennsylvania Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Pennsylvania Combined** | Rachel Anderson |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* The agency requested intensive technical assistance on the program and performance side as a result of difficulty in managing their data, case management system, and policies around the WIOA performance accountability system. In particular, they were not able to track and report data for the MSG/CA indicators and needed extensive TA to implement new reporting mechanisms in their case management system (CWDS).
* On the fiscal side, At the initial request, PA had significant turnover in the fiscal unit, with new staff lacking knowledge and understanding of VR fiscal requirements. Additionally, they desired to reevaluate their fiscal unit structure and staff responsibilities. They requested TA to assist with staff training and evaluation of organizational structure with recommendations for efficiencies.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

The agency’s ITAA identified 15 technical assistance (TA) activities targeting program and performance areas. The TA activities and progress (% complete) are listed below:

* Training
  + 2.2 -- 100%
  + 2.3 -- 100%
* Performance
  + 2.5 -- 100% Complete
  + 2.6 – 75%
  + 2.7 -- 100% Complete
  + 2.8 -- 100% Complete
  + 2.9 -- 50%
  + 2.10 -- 50%
* VR Regulations and Process
  + 2.11 – 75%
  + 2.12 -- 100% Complete
  + 2.13 -- 90%
* Pre-Employment Transition Services
  + 2.14 – 100% Complete
  + 2.15 -- 75%
  + 2.16 -- 100% Complete
  + 2.17 -- 25%.
* Fiscal - Due to additional shifts in personnel, an onsite visit was conducted in February 2023, to train new staff. TA has been provided in person, covering Fiscal Basics, A-DRAN for the field staff, Regulation Overview, Internal Controls, Period of Performance, and RSA-17 reporting walk through. Additional Fiscal Basics training has taken place for their new BEP Director. There have been 11 intensive TA engagements since Oct 1, 2022.
* In the last few months of Yr3 the new OVR administration has requested QM to provide significant TA in program and performance. We are in the process of reassessing ITAA needs and will become quite intensive again for the following years of the grant.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The TA is intended to impact the accuracy of their data, improve their performance indicator outcomes, and for the management team to have a better understanding of the overall reporting requirements and the ability of their CMS to meet these requirements.
* The outcomes will be measured by tracking their data and performance rates from year to year, as well as analyzing quarterly reports/dashboards and other internal control and data validation activities to ensure confidence in the system. Though this will be an ongoing activity within OVR, there have been improvements in this area.
* On the fiscal side, The intent of the TA is to get all the new staff a full understanding of the grant fiscal requirements. Pennsylvania has done a great job of adjusting with new personnel and continuing services. They are recognizing where some efficiency may be gained and are doing research into the state requirements. The new CFO has been instrumental in getting things back on track and seems to have a deep understanding of the regulations.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Updated policies and procedures and internal controls;
* Developed and implemented elaborations in their CMS (CWDS) related to educational tracking (MSG/CA), IPEs, and application and referrals.
* Finalize activities in their CAP;
* Fixed duplication and accuracy of SWD tracking and reporting;
* Train management and the field on all aspects of the performance accountability system to promote better outcomes and tracking of participants in PA OVR; and
* Trust and confidence in their data and understanding of continued challenges.
* The new CFO has really brought the team together in understanding of the grant.
* Better communication with the entire staff as a result of the program staff changes.

As a result, the impact on customer served has been:

* A clearer understanding of the functionality (pros and cons) of their CMS (CWDS) and potential future elaborations, the RSA-911 and WIOA Annual report requirements, as well as making data-informed decisions.
* PA’s management completely overturned during the ITAA, and new staff have strengthened their skills and knowledge to greatly improve their data analysis and accuracy.
* Agency has a better understanding of where they are at, improvements that need to be made for the field and the impact it has on their clients.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* The new management team has been able to finalize and improve policies and procedures, streamline training, and finalize many of the CWDS requests.
* The ability to get the entire team on the same page has been extremely beneficial.
* Pennsylvania’s reviews comparing what the State mandates with their longstanding practices hold promise; the team has already observed some positive effects stemming from this analysis.

In addition, the following have been noted as a challenge:

* The agency is limited by the abilities of their CMS which is used by all the core programs in PA. They are also limited by the Union that drives many of their approaches to change and staff accountability.
* Because there is a new leadership team, QM will essentially be starting all over with ITAA due to continuing and new identified TA needs. This will result in new activities and restarting old ones.
* Fiscal - The primary challenge for fiscal TA has been staff turnover and retention. Another challenge is ensuring the correct staff is involved and making sure that more than one person is aware of how things are being done, and if the processes are correct. Lately, connecting with the entire team has proven to be a challenge. We had to reschedule our regular meeting, and it took some time before we could arrange a new one.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* TA was provided to this agency in collaboration with NTACT:C. This joint effort has provided a bridge between education and VR to help with knowledge translation, tracking and reporting efforts, staff training and compliance related to SWD and Pre-ETS. Within the Fiscal and Resource Management focus area, we had a blended team approach with NTACT:C for the onsite visit in February 2023. TA was also provided in collaboration with the QE. We partnered on developing a statewide training plan, however, QE activities continued to be put on hold while PA focused on crucial management activities.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* TA with this agency is complete or will continue through 2025.OVR recently met with the ITAA team and has some revisions to the agreement that will be reflected in the Year 4 annual report once OVR has finalized the changes.
* The follow-on work includes ensuring that hard close-outs in the case management system are not self-driven. We are working with them to ensure the Period of Performance requirements in the CMS and the unliquidated obligations are captured correctly and are being reported accurately, and the Pre-ETS CMS is functioning properly.

The work plan for Pennsylvania Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### South Carolina General

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **South Carolina General** | Carol Pankow |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* SCVRD initially contacted the VRTAC-QM due to their need for technical assistance (TA) and training stemming from their recent RSA monitoring. The ITAA is focused on Program and Performance and Fiscal and Resource Quality Management.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

The QM team was onsite twice during this period to conduct field and supervisory staff training. Three virtual trainings for field staff on the cost principles (A= DRAN) were held in August with over 240 staff participating. There were 48 activities undertaken by the Fiscal team and Program and Performance team. A primary focus has been reviewing consumer services and fiscal policies and procedures. Significant progress has been made in reviewing and revising the entire consumer services policy manual. This work is 100% completed, and all policies/procedures are at RSA for review. The SCVRD team has continued the public hearing process on those policy changes necessitating public comment, with the first hearing happening in January and the last hearing in September. Additionally, work began on the fiscal policies and procedures with the completion of the RSA-17 and SF 425 reporting policies and the prior approval policy. The rate-setting methodology was also completed and approved by RSA. The agency is currently in the process of completing a period of performance policy. The contract management and monitoring process has been developed, approved by RSA, and implemented with 100% completion of that activity. QM gave significant input into the agreement between the General and Blind agency, encouraging them to go further than the regulatory requirements and to include other items that made good business sense.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* To ensure the agency operates with up-to-date policies and procedures that reflect Federal regulatory requirements and are written in a spirit focused on achieving CIE for customers. Also, to develop written fiscal policies/procedures/internal controls that will ensure continuity of completion of critical grants management functions as staff comes and go by having thorough written documentation that can be used by any new person coming in the door. 100% of the consumer services policies and procedures have been completely redone. There has been a noticeable change in the agency culture and approach to what they can do versus what they cannot do. There has been progress toward the resolution of the CAP findings, including the resolution of the agreement between the blind and the general agency. Training field staff in the cost principles of A=DRAN will help address the culture of scarcity and provide sound guidance as decisions are made regarding planned expenditures. Ultimately, the hope is to better impact CIE outcomes for customers. 7 of 13 corrective actions have been resolved. The completion dates for the remaining activities had to be adjusted because of a change in key staff members. Other team members have been stepping up to cover the workload, but extra time was needed for documentation and training. We expect to have everything sorted out and completed by March 2024.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* Prior approval
* Rate setting
* Collaboration between the blind and general agencies
* All consumer services policies, including implementing rapid engagement practices
* Contract monitoring

As a result, the impact on customers served has been:

* This is currently a work in progress and will be better reflected in the next report. The work so far has been fundamental, and we are now at a stage where staff are receiving training, and all these elements are actively being put into practice.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

While providing TA the following have been noted as promising practices:

* The dedication of the Commissioner and the key staff to learning and completing these activities has been remarkable. They are all in.

In addition, the following have been noted a challenge:

* There has been frequent turnover in the fiscal team, which has made daily operational work challenging. This has had an impact on the policy/procedure drafting completion. Other SCVRD staff's dedication to assisting in writing the drafts has been instrumental in advancing progress in this area.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* The primary work was completed by QM.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* Continue to focus on the implementation of the new policies and procedures, including the rate setting and contract monitoring. QM will move to more of a support role as questions arise while implementing the new policies and procedures.

The work plan for South Carolina General is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Washington Blind

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Washington Blind** | Insert |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Washington DSB initially reached out for TA related to their Corrective Action Plan as a result of their monitoring. In the course of discussions with them, they branched out in their TA requests to include areas not identified in their monitoring. Leadership was concerned that the isolation and remote work resulting from COVID adversely impacted the culture of the organization and may have resulted in a loss of focus on their primary mission. They also wanted to strike a balance between the need to gather and report data and the need to effectively counsel their participants.
* WA needs significant support in tracking, reporting and data validation of their system, particularly in regards to WIOA performance measures. They also needed support in policy and internal controls and staff training.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* We conducted a staff training needs assessment and started a year-long leadership training with their staff. There are other program and performance areas that we are working on that are included in the attached work plan.
* Analyzed the reporting to ensure coding was accurate and reflective of the work at DSB. Also helped with policies for staff and have helped with a number of trainings.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* The intended goals are to assist the agency to develop their leadership staff, develop a succession plan, complete a staff training needs assessment, conduct strategic planning, and develop or revise need policies and procedures. The agency agreed to purchase the book “The Leadership Challenge” for all leadership staff. The agency decided to pursue other priorities and has put any leadership training on hold. They have been working on reporting and data validation.
* The intended goals are to increase accuracy and validity of their data to truly reflect the work being done at DSB. Some of these goals are driven by their CAP and because of a performance measure in the area of credential attainment. However, DSB is performing well and the performance failure appears to be mostly due to the general agencies performance. We are verifying that this is true and that DSB is functioning well.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* WA DSB has chosen to no longer get assistance with these activities as they have hired outside consultants to support them. They are making great progress and have made organizational changes to support these efforts.
* MSG/CA policies, streamlined tracking in Aware, data analysis of reports, etc.

As a result, the impact on customers served has been:

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The commitment of staff has been great and the engagement level of the director and deputy has been exemplary. One challenge has been finding the time to do the work we hope to do considering the demands on a small agency with limited staff.
* DSB staff are committed to improving all practices related to data, reporting and performance of the agency.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* QM partners very closely with NTACT:C in providing technical assistance around students with disabilities, pre-employment transition services, fiscal and tracking and reporting in this area.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis? Which and why and what? Can you foresee a “next steps” plan with the agency that might need to take place in a future grant cycle?]*

* We will continue working with the agency on their policies and procedures and internal controls and other priorities as they identify them.

The work plan for Washington Blind is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



### Wyoming Combined

|  |  |
| --- | --- |
| 1. **Agency** | 1. **VRTAC-QM Lead** |
| **Wyoming Combined** | Carol Pankow |

1. What led to the request for TA?

*[How did the agency come to QM – directly, through referral by…, what did the agency identify as their priority needs and why?]*

* Initially, DVR reached out to the QM for various targeted technical assistance activities regarding grounding the new VR administrator in the fiscal responsibilities of VR. The work changed as the agency was selected for monitoring in 2022. An ITAA focused on the organization's Fiscal and Resource Quality Management.

1. What activities did you do, or are you doing?

*[How have you interacted with the agency – onsite, videoconferences, email, etc.? Beyond the high-level descriptions of activities in the ITAA, what is the nature of the work you’re doing with the agency? Has work with this agency prompted you/QM to develop new tools, trainings, resources, collaborations, etc.?]*

* There were 49 TA activities during this period, and the Fiscal team carried out 41. Some of these activities spanned a series of events within the same week. The focus during this period has been on developing and executing a spending strategy that successfully handles the carryover funds from 2022 and addresses the spending of the 2023 grant. Through this process, it was noted that the VR program would be short of the non-federal share (match) necessary to draw down the Federal funds needed to manage all expenditures through the end of this Federal Fiscal Year. The program secured an additional $300,000 of match dollars to ensure they can continue to meet customer's needs through the remainder of the year. Many discussions were held about strategies for securing additional long-term match sources, and the DSA gave the VR program the green light to go forward with a proposal for additional state-appropriated dollars in the December 23 legislative session. Other activities have focused on documenting the development of policy/procedure around contract monitoring, Federal financial reporting, internal controls, and the period of performance. Training was conducted with the new DSA fiscal staff assigned to VR to ensure they know and understand the nuances of the fiscal requirements for managing this grant. The QM team has also provided comments regarding implementing the fiscal aspects of the new case management system to ensure the program gets what it needs in terms of functionality. An onsite in July 2023 focused on reorganizing the current workplan and including activities/assignments to meet the approved Corrective Action Plan requirements. Other work was done onsite to support rate setting and contract monitoring policies and practices. A comprehensive review of documents and projections concerning reallotment was conducted, followed by a discussion that provided a detailed understanding of the current financial position, which was essential before funds were relinquished.

1. What is the intended impact of the work and how are you measuring the impact so far? What progress has been made to date? What has changed within the agency and what has been the impact on consumers served?

*[What will change about management in the agency? Will/how will partners see it? Will/how will clients see it? What data has been collected to document the baseline and improvements?] What is the story of the progress, beyond the metrics noted in workplans? Do you feel it is on track? Do you see the agency recognizing the changes they’re making and being committed to the continued push forward? How does this fit in with national-level challenges or impacts or trends you’re seeing/hearing about? Has/how has collaboration with others been improved?]*

* QM wants to ensure that agency fiscal policies/procedures/internal controls are documented so staff turnover does not impact the program’s ability to carry out the required grants management duties according to Federal regulatory requirements. The team checks in weekly with DVR and assesses the completion of the workplan activities. Additional smaller group meetings occur around a particular activity. Having foundational fiscal knowledge and understanding, the DVR leadership can better evaluate service delivery opportunities and efficiencies. Additionally, by providing foundational training to the DSA, the VR Director can better control the allocation and expenditure of VR funds. The VR and DSA fiscal staff demonstrate a higher level of knowledge and understanding as they perform the work needed for this grant. This is evidenced in the regular discussions held with the team. The focus on implementing an effective spending strategy has been able to keep the program from entering into an order of selection that impacts the consumers served in Wyoming.

As a result of the TA, the agency has implemented or reworked practices in the following areas:

* RSA 17 reporting
* Implementing the use of carry forward funding
* Incorporating solid fiscal practices into the new CMS
* Internal budget reporting and understanding between program and fiscal

As a result, the impact on customers served has been:

* Consumer services could be continued without the potential of an OOS due to an initial lack of funds.

1. What has worked well and what has been a challenge?

*[Are the successes and challenges unique to this agency, or useful lessons for others? Have you/how have you begun to overcome/get past the challenges?]*

* The challenge is continued turnover with DSA fiscal staff and ensuring new staff are trained and up to speed with the VR fiscal requirements. This has stabilized in the previous six months. The small team wears many hats, and it can be challenging to complete a task. There is a lot of overthinking of processes and going back over ground that was already covered. The complete review of the workplan, ITAA, and CAP items led to a more structured approach, assignment of duties, and development of small groups to help complete activities.

1. Describe any work with other TA Centers and how that went or is going?

*[Were they engaged from the start? Is the TA “blended and braided” or sequenced and disparate – why? Is QM the lead or the other Center? Is the collaboration likely to last the length of the ITAA agreement/the rest of the grant period?]*

* The NTACT: C has been involved with the Pre-ETS side of the program.

1. Future plans for the work?

*[Once the initial set of ITAA activities is complete, do you foresee continuing work with the agency on a targeted or intensive basis?]* Work will move to focus on activities that assist in the completion of the Corrective Action Plan requirements. We will continue to work on developing the fiscal policies and procedures and focus on implementing the contract monitoring process, rate setting, internal controls, and continued input in the new case management system functionality.

The work plan for Wyoming Combined is embedded below. The file can be opened by right clicking on the picture, choosing object and then open:



## SWOT assessment tools development and assessments conducted

There have been 22 SWOT analyses conducted through the end of Year 3. In addition to our ITAA states, these include Oklahoma Combined, South Carolina Blind,

The assessment tool developed, reviewed and approved by RSA remains the tools that we use in conducting SWOTs. The SWOTs have been conducted via Zoom and also in-person. The assessments are very helpful when developing the ITAAs and have helped to illuminate areas of TA need not specified in the original request from the VR agency.

## Program Evaluation:

The comprehensive annual program evaluation report contains all of the detailed program evaluation information for progress and impact through the end of Year 3.

# Targeted TA

The requests for, and delivery of, targeted TA remains constant and has now touched all 78 VR agencies through the end of the third year of the project. Table 2 identifies the targeted TA for the fourth quarter of Year 3. The totals for the project are found in the update on project measures later in the report. Targeted TA reached a new high of 68 agencies (87%) receiving targeted TA in one quarter this quarter because of the plethora of communities of practice that are currently operating.

## Number of events by type, topic, agency and number served:

Table 2: *Targeted TA and Training during the 4th Quarter of Year Three*

| **Targeted TA in Year 3 Quarter 4** | | |
| --- | --- | --- |
| **Agency** | **TA or Training Topic Area** | **Number Receiving TA** |
| Alabama Combined | State Plan CoP; ITS CoP | 6 |
| Arizona Combined | Pre-ETS - 107 monitoring; fiscal forum; reporting; State Plan CoP; ITS CoP | 22 |
| Arkansas Blind | P&P-internal controls; fiscal management CoP | 4 |
| Arkansas General | fiscal management CoP; P&P-internal controls; fiscal basics training. Pre-ETS fiscal; match and MOE; Monitoring CoP; Pre-monitoring review; CMS Fiscal; Monitoring; indirect cost allocation; State Plan CoP; ITS CoP | 103 |
| California Combined | NRLI; fiscal management CoP; Match and MOE; State Plan CoP; ITS CoP | 19 |
| CNMI Combined | P&P review and revision | 2 |
| Colorado Combined | NRLI; fiscal forum; fiscal management CoP; WIOA reporting and PEQA; ITS CoP | 15 |
| Connecticut Blind | WIOA performance measures; P&P and internal controls; | 4 |
| Connecticut General | Program and performance; monitoring; special projects; ITS CoP | 10 |
| Delaware General | NRLI; fiscal forum; rate setting; pre-ETS fiscal; special projects; State Plan CoP; ITS CoP | 14 |
| District of Columbia | P&P review for pre-ETS | 3 |
| Florida Blind | Monitoring CoP; Monitoring support and participation | 10 |
| Florida General | NRLI; fiscal management CoP; State Plan CoP; ITS CoP | 12 |
| Georgia Combined | Fiscal forum; Monitoring CoP; CMS data collection; pre-ETS fiscal; more data collection; State Plan CoP; ITS CoP | 35 |
| Guam Combined | Monitoring and CAP review | 5 |
| Hawaii Combined | NRLI; fiscal forum; general QM best practices; State Plan CoP; ITS CoP | 9 |
| Idaho General | Period of performance; fiscal forum; State Plan CoP; ITS CoP; eligibility; | 9 |
| Illinois Combined | NRLI; pre-ETS fiscal and TPCAs | 3 |
| Indiana Combined | Monitoring CoP; contracting; ITS CoP | 8 |
| Iowa Blind | Reporting; rate setting; rapid engagement; match/MOE; State Plan CoP; rapid engagement; | 7 |
| Iowa General | NRLI; fiscal forum; State Plan CoP | 6 |
| Kansas Combined | Fiscal forum; pre-ETS fiscal; program evaluation and QA; data analytics; State Plan CoP | 12 |
| Kentucky Combined | NRLI; fiscal management CoP; program improvement; State Plan CoP | 8 |
| Louisiana Combined | Monitoring CoP; State Plan CoP; ITS CoP; Monitoring; | 22 |
| Maryland Combined | NRLI; State Plan CoP; ITS CoP; General QM | 10 |
| Massachusetts General | Training on grant management | 4 |
| Michigan Blind | State Plan CoP; Match/MOE | 5 |
| Michigan General | fiscal management CoP; State Plan CoP; ITS CoP; Match/MOE; CMS fiscal and fiscal forecasting; contracting; SRC; DRAN; DSA-DSU | 30 |
| Minnesota Blind | Fiscal forum; State Plan CoP; ITS CoP | 5 |
| Minnesota General | NRLI; fiscal forum; fiscal management CoP; ITS CoP; fiscal forecasting; P&P-internal controls; contracting; | 17 |
| Mississippi Combined | Pre-ETS fiscal; monitoring CoP; pre-ETS fiscal forecasting | 12 |
| Missouri General | NRLI; fiscal forum; State Plan CoP; ITS CoP; data analytics | 19 |
| Montana Combined | NRLI; fiscal forum; WIOA reporting and PEQA | 10 |
| Nebraska Blind | Fiscal Forum; fiscal forecasting; P&P-internal controls | 6 |
| Nebraska General | State Plan CoP; ITS CoP; TWE and eligibility | 15 |
| Nevada Combined | NRLI; State Plan CoP; ethics training | 129 |
| New Hampshire Combined | NRLI; fiscal forum; ITS CoP; fiscal reporting; pre-ETS fiscal - 107 CAP | 16 |
| New Jersey General | State Plan CoP; ITS CoP; P&P internal controls; 511 requirements | 14 |
| New Mexico General | NRLI; Fiscal Forum; fiscal management CoP; State Plan CoP; ITS CoP | 7 |
| New York Blind | Pre-ETS fiscal - 107 CAP | 3 |
| New York General | State Plan CoP; ITS CoP; pre-ETS 107 CAP; P&P-internal controls and CAP response; | 10 |
| North Carolina Blind | Pre-ETS 107 monitoring and CAP | 4 |
| North Carolina General | ITS CoP; pre-ETS 107 CAP; Match/MOE; Monitoring | 29 |
| North Dakota Combined | WIOA reporting and PEQA; State Plan CoP; ITS CoP; P&P-internal controls and reporting; staff training; | 45 |
| Ohio Combined | State Plan CoP; ITS CoP | 4 |
| Oklahoma Combined | Monitoring CoP; Monitoring support and participation; State Plan CoP; recruitment and retention; pre-ETS fiscal; monitoring; leading change training; | 40 |
| Oregon Blind | Fiscal Forum: fiscal management CoP; pre-ETS 107 monitoring CAP; | 8 |
| Oregon General | Fiscal forum; State Plan CoP; ITS CoP; pre-ETS fiscal and contracts; grant management training; P&P-internal controls fiscal; rate setting tracking and reporting; pre-ETS fiscal; on-site training; fiscal training; monitoring; fiscal reporting | 71 |
| Pennsylvania Combined | Fiscal forum; State Plan CoP; ITS CoP; grant management training | 13 |
| Puerto Rico Combined | ITS CoP; monitoring CoP | 2 |
| Rhode Island | Fiscal forum; State Plan CoP | 5 |
| South Carolina Blind | Fiscal forum; pre-ETS fiscal 107 CAP; Assignment of Obligations; CAP response and plan; fiscal forecasting; P&P-internal controls; fiscal training; contracting | 23 |
| South Carolina General | NRLI; fiscal forum; State Plan CoP; pre-ETS fiscal | 10 |
| South Dakota Blind | WIOA reporting and PEQA | 2 |
| South Dakota General | WIOA reporting and PEQA; State Plan CoP; ITS CoP | 9 |
| Tennessee Combined | NRLI; State Plan CoP | 4 |
| Texas Combined | NRLI; Monitoring CoP; Monitoring support and participation; State Plan CoP; ITS CoP; P&P-internal controls; period of performance; special projects; CMS fiscal-period of performance | 25 |
| Utah Combined | NRLI; WIOA reporting and PEQA; pre-ETS fiscal | 8 |
| Vermont Blind | Pre-ETS fiscal 107 CAP monitoring | 4 |
| Vermont General | NRLI; period of performance; rate-setting | 7 |
| Virgin Islands | Fiscal forum; SRC and the CSNA; pre-ETS CAP; | 14 |
| Virginia Blind | Fiscal forum; ITS CoP; pre-ETS fiscal 107 CAP; | 9 |
| Virginia General | NRLI; State Plan CoP; pre-ETS fiscal training; CMS data collection | 51 |
| Washington Blind | Fisal forum; fiscal management CoP; State Plan CoP | 8 |
| Washington General | NRLI; State Plan CoP | 5 |
| West Virginia Combined | NRLI; ITS CoP | 2 |
| Wisconsin Combined | NRLI; fiscal forum; State Plan CoP; ITS CoP; rapid engagement training; | 279 |
| Wyoming Combined | NRLI; fiscal forum; fiscal management CoP; WIOA reporting and PEQA; State Plan CoP; Data literacy and analysis; P&P-internal controls; WIOA Performance training | 32 |
| **Totals = 68 agencies;  122 targeted TA events (separated by semi-colon in list above). CoPs only counted once per community type.** | | **1367** |

A total of more than 68 SVRAs received some form of targeted TA during the fourth quarter. There were 1,367 VR staff that received the TA directly, though this is not an unduplicated count. Since the inception of the VRTAC-QM, we have provided at least targeted TA to all 78 SVRAs (100%). There have been a total of 1,244 targeted TA events since the QM began and 9,331 SVRA staff that have participated in these events (not an unduplicated count).

## Targeted TA of Note in Year 3, Quarter 4:

1. The fiscal team provided training on fiscal basics to 50 field staff for Arkansas General.
2. Participated in monitoring review for Arkansas General
3. The program and performance team provided training to VR agencies in Region 8. There were forty people present for the training and the topics included CMS data collection, P&P and internal controls for WIOA performance. Program evaluation and quality assurance and reporting.
4. The QM provided monitoring support for VR agencies being monitored in late 2023. Staff attended virtually and in-person as available.
5. The program and performance team spent a considerable amount of time working with Georgia combined to help them with data tracking and their case management system. This in-depth process ultimately led to an intensive TA agreement with the agency.
6. The QM follow-up with multiple state agencies as a result of their 107 monitoring letter for pre-employment transition services. These follow-up meetings resulted in numerous TA events related to reporting and tracking. This TA is provided in partnership with the NTACT:C
7. Provided training for all staff on the new Rehabilitation Counselor Code of Ethics. The training included the Director of the DSA in Nevada and his Deputy Director. Discussion related to the ethics of leadership and how administrative control of the VR program rests with the VR agency, especially the expenditure of funds. Discussed ethical dilemmas and how to resolve them, especially in the post-pandemic world of VR.
8. Provided training for all staff in Nevada on the new Rehabilitation Counselor Code of Ethics. The training included the Director of the DSA in Nevada and his Deputy Director. Discussion related to the ethics of leadership and how administrative control of the VR program rests with the VR agency, especially the expenditure of funds. Discussed ethical dilemmas and how to resolve them, especially in the post-pandemic world of VR.
9. As part of the Recruitment and Retention Pilot Project, Oklahoma is creating three teams to guide change initiatives identified in at 2 day training session by QM team members (RV and JW) on May 23-24, 2023. The QM team met with agency leadership to assist in the creation of these changes teams and discuss training and technical assistance to help these teams form and perform their work. Team leads have been identified. Agency is requesting training to assist these team leads with their roles to effectively manage the teams' work. Based on the interventions with the agency, this technical assistance will be elevated to an ITA Agreement.
10. Virginia General - Two day meeting with all VR managers re pre-ETS and strategic planning for increase in services, outcomes, and expenditures of reserve. Used Data workbooks of VR and Ed data.
11. Also for Virginia General - Assisted agency in troubleshooting and identifying source of reporting errors of services auto-reporting from the plan. Discussed options on how to address reporting errors, which included benefits and drawbacks of each. Also identified a way to streamline process of handling when a student ages out of SWD within the system, reducing the amount of manual work required by agency staff.
12. Provided rapid engagement training for Wisconsin DVR is response to a request generating from the CSAVR conference presentation in April. This was provided in partnership with the VRTAC-QE. The was a mandatory all-staff training for DVR. Chaz Compton provided training on the data, background and purpose of RE, while Kyle Walker from the VRTAC-QE provided an hour of training on customer service and RE.

## VR Grants Management Training Certificate

The final course of the four course VR Grants Management Certificate through Management Concepts was completed and launched in Year 3. There are now three required courses and one elective. The required courses are:

* + - 1. 2050 – 2CFR 200 – Uniform Guidance
      2. 2080 – Cost Principles
      3. 2069 – Internal Controls

Participants can take one elective from a group of courses relevant to the field and to managing grants and complete the certificate. There were 270 courses taken this year and 49 individuals fully completed the certificate.

The feedback we have received is that the courses are challenging, but extremely helpful and a must for people managing the VR grant. This training has become a standard requirement now in many VR agencies and will long outlive the VRTAC-QM.

## Communities of Practice:

### Customized Employment CoP

**Goal:**

The goal of the bi-monthly CE CoP meetings is to facilitate the exchange of information between state agencies that support the improvement of Customized Employment (CE) delivery, sustainability, and program evaluation. This CoP offers state agencies the opportunity to share information, progress, challenges, and questions with other agencies who are implementing CE in their state. Participants report this exchange of information by VR agency CE experts, enhances their ability to deliver and sustain CE services in their state.

The CE CoP is led by VRTAC-QM with VRTAC-QE participating regularly.

**Meeting Summary:**

The CE CoP met once this quarter on Sept 26. Future meetings will occur every other month on the last Wednesday of that month.

The following State VR agencies participated for that meeting were:

Arizona C., California C., Connecticut G., Florida G., Iowa G., Kentucky C., Louisiana C., Michigan G (MRS)., Missouri G., Montana G., North Dakota C., Oklahoma C., Texas C., Virginia G., and Wisconsin C for a total of 14 VR agencies and 24 VR staff.

TA staff participating in this CE CoP included: Sean O’Brien, SDSU – VRTAC-QM, Patricia Henke VRTAC-QM, and Wendy Quarles, SDSU-VRAC-QM who co-facilitate this meeting as well as Emily Brinck, VRTAC-QE.

**Agenda Summary:**

* Updates from VRTAC-QM and VRTAC QE regarding available TA support
* VRTAC-QM developed a survey for CE CoP participants to determine specific Customized Employment topic areas that were essential and important to cover in future meetings. 21 CE CoP members participated in this survey. The following are the 5 key topic areas that emerged as Very Important.
  1. Measuring Quality of Customized Employment (Quality Assurance Planning and Tools)
  2. Rate Setting for Customized Employment
  3. Collaboration (Interagency and other partners)
  4. Building Capacity for Community Rehabilitation Providers
  5. Customized Employment Training and Mentoring
* State updates and cross-agency exchanges shared in meeting:
  1. Montana is partnering with Minnesota to learn more about their Customized Employment model for implementation and sustainability.
  2. Kentucky has shared their materials on the use of the establishment authority to support Customized Employment training Community Rehabilitation Providers.

Colorado, California, Virginia, Kentucky and Iowa have shared their Customized Employment rates and rate structures with the CoP to support newer states to Customized Employment implementation.

### Fiscal Forum and Fiscal Management CoP

The QM Fiscal team has hosted twelve meetings for the Fiscal Forum Community of Practice (CoP) during year three of the grant. Initially, the purpose of this CoP was to provide a virtual gathering space for participants in the Management Concepts courses to ask questions and further debrief on what was learned in the training. The participant's comments and questions drove conversations. Over this past year, the CoP has morphed into a place where fiscal and program staff can discuss common issues, review fiscal communications from RSA, and bring questions for the CoP to discuss and get insight into how other SVRAs handle different fiscal practices. Attendance has ramped up from the high 40s to over 90 participants monthly.

### Rapid Engagement CoP

Rapid engagement is a strategy whereby individuals with disabilities are moved through the rehabilitation process from application to service provision 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. The concept of developing a community of practice (CoP) around this topical area emerged from shared interests of a group of Training Coordinators who are participating in the Training Coordinators/Directors CoP facilitated by CIT-VR. They were seeking training, resources, and technical assistance to assist in implementing these strategies at their agencies.

This CoP is co-facilitated by staff from the Center for Innovative Training in VR (CIT-VR) at The George Washington University and the Vocational Rehabilitation Technical Assistance Center for Quality Management (VRTAC-QM) at San Diego State University. Community members meet on a regular schedule via Zoom. A closed group on the VRTAC-QM Training Portal serve as an online venue to share information and resources, as well as initiate discussion threads to keep the conversation going between meetings.

Objectives:

* Provide a venue for the exchange of ideas and practices to promote innovation and excellence in implementing rapid engagement strategies in State VR agencies.
* Promote collaboration between State VR agencies to drive innovation in improving service delivery processes that will enhance the customer experience and outcomes for individuals receiving VR services.
* Connect community members to Technical Assistance Centers to assist in the coordination of receiving Targeted and Intensive Technical Assistance to implement process and system changes in their organizations.
* Maintain a virtual community hosted on the Training Portal of VRTAC-QM. This community is a closed group hosting discussion boards and resource postings to allow for information sharing and further collaborative work beyond the regularly meetings.

A kick-off meeting occurred on 12/12/2022. After that initial meeting, the community agreed to meet monthly initially and then moved to a bi-monthly schedule after the April 24th meeting.

Topic discussed included at meeting included:

* Eligibility policies and procedures: identify choke points and areas of improvement
* Conflating eligibility process with the comprehensive assessment process
  + Explore Counselor and Supervisors practices
  + Strategies for separating these processes
  + Developing new practices
* Plans to implement rapid engagement strategies
  + Review agency plans
  + Discuss baseline data and how success will be measured.
  + Identify any additional choke points that need to be addressed in service processes.
* IPE Development: identify choke points that delays access to services
  + Explore polices, practices, and organizational culture
  + Explore strategies to transform these processes
* Implication of RSA-TAC-24-01 and streamlining of service processes

Table 3: Meetings Summary:

|  |  |  |
| --- | --- | --- |
| **Date(s)** | **Activities** | **Outputs/*Products*** |
| 12.12.2022  01.23.2023  02.27.2023  03.27.2023 | Monthly Meeting (1 hour)  Monthly Meeting (1 hour)  Monthly Meeting (1 hour)  Monthly Meeting (1 hour) | @ 13 participants  @ 11 participants  @ 16 participants  @ 18 participants |
| 04.24.2023  06.27.2023  08.21.2023  11.06.2023 | Bimonthly Meeting (1 hour)  Bimonthly Meeting (1.5 hours)  Bimonthly Meeting (1.5 hours)  Bimonthly Meeting (1.5 hours) | @ 17 participants  @ 23 participants  @ 21 participants  @ 27 participants |

### Monitoring CoP

The VRTAC-QM and CSAVR have combined efforts to co-facilitate a Monitoring Community of Practice to assist each specific year’s SVRA monitoring group prepare for and meaningfully participate in the RSA 107 monitoring process. Each year, tools are updated to reflect the most current monitoring and technical assistance guide (MTAG) from RSA. This includes an Excel workbook that is used by SVRAs to record answers to the MTAG, and tip sheets on general preparation and fiscal preparation for the review.

Monthly meetings are held for each SVRA monitoring cohort to share their preparation experiences and report in on monitoring observations as they go through the review process. SVRAs shared where they were in the monitoring process, shared observations from the monitoring, and shared resources they used to organize with the other participants.

This year’s schedule and participation numbers are as follows.

February 15th, 2023 -33 participants

March 15th, 2023 -28 participants

April was in person at the CSAVR conference with 17 attendees

May 17th- 2023 – 19 participants

June 21st, 2023 – 23 participants

July 19,2023 – 16 participants

August 16, 2023 – 29 participants

September 20, 2023- 10 participants

This year, all SVRAs attended at least one meeting.

Participants have stated this has been extremely helpful to them to be adequately prepared for the conversations that occur during the monitoring process.

### Innovating and Transforming Services CoP

Innovating and Transforming Services (ITS) CoP

Background: The ITS CoP was developed in response to a request from CSAVR’s Performance and Accountability committee. The committee had an initial meeting with CSAVR member SVRAs that were interested in hearing from each other about how programs were innovating and changing in response to the post-Covid world and the impact of remote work. As agencies faced significant recruitment and retention problems, there is a need to reimagine how to deliver services and engage consumers.

The VRTAC-QM conducted a survey of SVRAs to determine what topics they were interested in as part of the ITS CoP. WE shared the results and began meeting every other month. The topic that received the most votes was how to reduce administrative burden. The members have shared some interesting and innovative ideas in the first few meetings. We have had ServiceSource Florida on as guests to discuss how the public-private partnership works in Florida.

As of this writing, there are 99 members from 36 States across the country participating in the CoP. Table 4 below identifies the States and number of members by State:

Table 4

*ITS Members by State*

| **ITS CoP Members by State** | |
| --- | --- |
| **State** | **Number** |
| Alabama | 1 |
| Arizona | 2 |
| Arkansas | 2 |
| California | 3 |
| Colorado | 5 |
| Connecticut | 1 |
| Delaware | 3 |
| Florida | 3 |
| Georgia | 2 |
| Hawaii | 2 |
| Idaho | 2 |
| Indiana | 2 |
| Louisiana | 3 |
| Maine | 1 |
| Maryland | 1 |
| Massachusetts | 1 |
| Michigan | 12 |
| Minnesota | 5 |
| Missouri | 9 |
| Nebraska | 2 |
| New Hampshire | 4 |
| New Jersey | 3 |
| New Mexico | 1 |
| New York | 2 |
| North Carolina | 1 |
| North Dakota | 1 |
| Ohio | 1 |
| Oregon | 3 |
| Pennsylvania | 7 |
| Puerto Rico | 1 |
| South Dakota | 1 |
| Texas | 2 |
| Virginia | 1 |
| Washington | 5 |
| West Virginia | 1 |
| Wisconsin | 3 |
| **Total** | **99** |

### State Plan CoP

The State Plan CoP generated from discussions with RSA related to the need to provide TA on the development of the VR portion of the State Plan. The VRTAC-QM and RSA were receiving many questions about the State Plan as the end of the year approached. It was decided that the VRTAC-QM would initiate a short-term CoP on the State Plan and launch it in coordination with the Webinar released by RSA on the revised VR portion of the State Plan. As of this writing there are 37 States represented in the CoP and 98 members.

As was the case with the Its Cop, we conducted a short survey of participants prior to the first meeting to find out which sections of the State Plan they were most interested in discussing. The most frequently requested area was the section on goals, priorities and strategies, followed by the CSNA.

The CoP will meet monthly until March 2024 and then be discontinued. Table 5 identifies the States represented in the CoP and the number of people by State.

Table 5

*State Plan CoP States and Numbers*

| **State Plan CoP Members by State** | |
| --- | --- |
| **State** | **Number** |
| Alabama | 5 |
| Arizona | 1 |
| Arkansas | 1 |
| California | 6 |
| Delaware | 2 |
| Florida | 3 |
| Georgia | 2 |
| Hawaii | 2 |
| Idaho | 2 |
| Iowa | 4 |
| Kansas | 1 |
| Kentucky | 2 |
| Louisiana | 3 |
| Maine | 2 |
| Maryland | 1 |
| Michigan | 5 |
| Minnesota | 1 |
| Missouri | 3 |
| Nebraska | 4 |
| Nevada | 3 |
| New Jersey | 4 |
| New Mexico | 1 |
| New York | 1 |
| North Dakota | 2 |
| Ohio | 3 |
| Oklahoma | 1 |
| Oregon | 2 |
| Pennsylvania | 2 |
| Rhode Island | 2 |
| South Carolina | 1 |
| South Dakota | 3 |
| Tennessee | 3 |
| Texas | 3 |
| Virginia | 2 |
| Washington | 6 |
| Wisconsin | 1 |
| Wyoming | 2 |
| **Total** | **92** |

## Executive Leadership Seminar Series - NRLI

The Executive Leadership Seminar Series, commonly referred to as the National Rehabilitation Leadership Institute or NRLI had such a high demand this year that we had to have two cohorts. The training consists of four week-long sessions, three of which are in San Diego and one that is in Washington DC. The training remains the chief way that the VRTAC-QM supports leadership training for VR personnel at the highest level. Each of the participants receives one-on-one executive coaching throughout the entire year of the program and works together with a team of 4-5 colleagues to complete a final project related to identifying and improving an area of the VR program. Table 6 includes the participant list for both cohorts in Year 3.

Table 6

*NRLI Participant List in Year 3*

| **NRLI Members by Agency  Cohorts O and P** | **Cohort O** | **Cohort P** | **Totals** |
| --- | --- | --- | --- |
|  |
| California Combined |  | 3 | 3 |  |
| Colorado Combined | 1 | 1 | 2 |  |
| Delaware General |  | 1 | 1 |  |
| Florida General |  | 1 | 1 |  |
| Hawaii Combined | 1 | 1 | 2 |  |
| Illinois Combined | 1 | 1 | 2 |  |
| Iowa General | 2 |  | 2 |  |
| Kentucky Combined |  | 1 | 1 |  |
| Maryland Combined | 1 | 1 | 2 |  |
| Mississippi Combined | 1 |  | 1 |  |
| Missouri General | 2 | 1 | 3 |  |
| Montana Combined | 1 | 1 | 2 |  |
| Nevada Combined | 2 |  | 2 |  |
| New Hampshire Combined | 1 |  | 1 |  |
| New Mexico General |  | 1 | 1 |  |
| South Carolina General | 1 |  | 1 |  |
| Tennessee Combined |  | 1 | 1 |  |
| Texas Combined | 2 |  | 2 |  |
| Utah Combined |  | 1 | 1 |  |
| Vermont General |  | 1 | 1 |  |
| Virginia General | 2 | 1 | 3 |  |
| Washington General |  | 1 | 1 |  |
| West Virginia Combined | 1 |  | 1 |  |
| Wisconsin Combined | 2 | 1 | 3 |  |
| Wyoming Combined | 1 |  | 1 |  |
| **Totals** | **22** | **19** | **41** |  |

## Program Evaluation:

Full program evaluation results are included in the PE report that follow 30 days after the submission of this report.

# Universal TA

Universal TA and training includes information on outreach activities, website development and analytics, and webinars or conference presentations that are intended for a general audience rather than targeted to a specific VR agency.

## Website Analytics for Year 3

Table 7: Website Traffic Overview: 10/01/2020 – 09/30/2023

| **Overview** | **Counts** |
| --- | --- |
| Unique visitors | 21,261 |
| Page views | 130,761 |
| Visits | 42,049 |
| Returning Visitors | 0% |
| New Visitors | 100% |
| Pages per Visit | 3.1 |
| Average Duration per Visit | 2m 28s |

Table 8: Top 10 Pages Visited: 10/01/2020 – 09/30/2023

| **Pages** | **Page Views** | **Percentage** |
| --- | --- | --- |
| 1. Home | VRTAC-QM | 27,058 | 21% |
| 1. VRTAC-QM Training | VRTAC-QM | 7,995 | 6% |
| 1. VR Program Fiscal Management | VRTAC-QM | 5,349 | 4% |
| 1. VR Grants Management Certificate | VRTAC-QM | 4,444 | 3% |
| 1. About Us | VRTAC-QM | 4,336 | 3% |
| 1. Program & Performance Quality Management | VRTAC-QM | 4,303 | 3% |
| 1. Fiscal & Resource Quality Management | VRTAC-QM | 3,515 | 3% |
| 1. Training Portal | VRTAC-QM | 2,469 | 2% |
| 1. VRTAC-QM CoP | VRTAC-QM | 2,412 | 2% |
| 1. Resources | VRTAC-QM | 1,958 | 1% |

Table 9: Traffic by States – 10 States with Higher Traffic: 10/01/2020 – 09/30/2023

| **Region** | | **Total users** | **New users** | **Engaged sessions** | **Engagement rate** | **Event count** |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Virginia | | 2,424 | 2,347 | 2,778 | 78% | 35,841 |
| 1. California | | 1,426 | 1,363 | 1,804 | 82% | 44,713 |
| 1. Florida | | 920 | 890 | 1,643 | 80% | 17,284 |
| 1. Wyoming | | 1,798 | 1,774 | 1,476 | 75% | 12,823 |
| 1. Washington | | 986 | 958 | 1,455 | 80% | 13,432 |
| 1. New York | | 993 | 942 | 1,297 | 80% | 16,257 |
| 1. Minnesota | | 344 | 308 | 1,139 | 74% | 17,638 |
| 1. Michigan | | 403 | 384 | 961 | 78% | 11,171 |
| 1. Georgia | | 435 | 396 | 946 | 72% | 17,190 |
| 1. Pennsylvania | | 450 | 431 | 935 | 75% | 10,898 |
| **Variable** | **Definition** | | | | | | |
| Engaged Session | The number of sessions that lasted longer than 10 seconds, or had a conversion event, or had 2 or more screen or page views. | | | | | | |
| Engagement rate | % of engaged session (Engaged session divided by Sessions) | | | | | | |
| Event count | Number of times users triggered an event | | | | | | |

Table 10: *Distribution List: Year-to-Date*

| **Distribution List** | **# of Subscriber** |
| --- | --- |
| Program & Performance QM | 1427 |
| Fiscal QM | 1382 |
| General QM of Organization | 1388 |
| **Total Subscribers** | 1464 |

Table 11: *Training Summary*

## Training Summary: 10/01/2020 – 09/30/2023

| **Training** | **Enrollment** | **Certification of Completion** | **CRC Verification** |
| --- | --- | --- | --- |
| Ethics, Supervision, and Technology (QM2021-0301) | 403 | 216 | 216 |
| Managing the Shift (QM2021-0302) | 289 | 105 | 105 |
| Resolving Conflict (QM2021-0303) | 266 | 96 | 96 |
| Non-Delegable Responsibilities (QM2021-0305) | 163 | 15 | 0 |
| SRC (QM2021-0306) | 381 | 92 | 74 |
| Data Validation (QM2022-0101) | 64 | 20 | 20 |
| Case File Review Systems (QM2022-0102) | 90 | 34 | 34 |
| Pre-ETS Tracking (QM2022-0103) | 102 | 24 | 24 |
| Data Literacy Training Series (QM2022-0104) | 197 | 89 | 89 |
| RSA Data Dashboards (QM2022-0105) | 128 | N/A | N/A |
| Credential Attainment Rate (QM2022-0301) | 363 | 112 | N/A |
| Coaching Strategies (QM2022-0302) | 176 | 44 | 44 |
| The Crossword Puzzle of Management - Managing Up and Across (QM2022-0303) | 170 | 47 | 47 |
| Rapid Engagement in Vocational Rehabilitation - Module 1 (QM2022-0304) | 606 | 299 | 299 |
| Performance Management (QM2022-0305) | 206 | 78 | 78 |
| Onboarding - Lessons Learned (QM2022-0306) | 171 | 59 | 59 |
| Advancement in Employment (QM2022-0307) | 205 | 62 | N/A |
| Rapid Engagement Module 2: Training for Counselors (QM2022-0308) | 359 | 166 | 166 |
| Long COVID: Under What Circumstances Is It a Disability? (QM2022-0309) | 168 | 50 | 50 |
| Case Service Report (RSA-911) PD 19-03 Training Series (QM2022-0901) | 63 | 4 | N/A |
| Case Service Report (RSA-911) Training for VR Counselors (QM2022-0902) | 111 | 28 | 28 |
| Enhancing Team Performance in the Eye of Organizational Storms (QM2023-0301) | 150 | 44 | 44 |
| Rapid Engagement in VR Module 3 (QM2023-0302) | 160 | 88 | 88 |
| Rapid Engagement in Vocational Rehabilitation Module 4: Reimagining Student and Youth Engagement: Awareness to Action (QM2023-0303) | 124 | 73 | 73 |
| Pre-ETS Program Planning and Set-Aside Determination (QM2023-0901) | 64 | 22 | 22 |
|  | **5179** | **1867** | **1656** |

## Universal TA of Note in the 4th Quarter:

1. The VRTAC-QM collaborated with the Summit Group for their annual conference in Vermont in August. Our program and performance team presented with the VRTAC-QE and the NTACT:C in joint sessions and helped facilitate the conference.
2. Developed a live webinar on period of performance as a follow-up to the CSAVR Spring conference. Theare were 140 live viewers.
3. See table below for podcasts to date for the VRTAC-QM:

Table 12

*All-Time Downloads for VRTAC-QM podcasts*

| **Title** | **Release** | **Unique Downloads** |
| --- | --- | --- |
| VRTAC-QM Manager Minute: Career Advancement DIF Grant - Oregon General is Taking on Tough Stuff and Seeing Results | 2023-09-01 12:00:09 | 101 |
| VRTAC-QM Manager Minute - Maximizing VR Services: Leveraging Resources so Counselors Can Get Back to Counseling - Wisconsin VR- Stout Partnership | 2023-08-08 18:09:22 | 198 |
| VRTAC-QM Manager Minute: (Part 2) - Where did all the staff go? Addressing your Retention Woes - A Conversation with Dr. Jim Herbert -Penn State. | 2023-07-05 11:22:29 | 108 |
| VRTAC-QM Manager Minute: Where did all the staff go? Addressing your Recruitment Woes- A Conversation with Dr. Jim Herbert -Penn State. | 2023-06-09 15:59:13 | 173 |
| VRTAC-QM Manager Minute: How to Survive a Move in VR Fiscal Support Services and Come Up with a Solution that Works for Everyone- Arizona VR | 2023-05-08 19:13:32 | 196 |
| VRTAC-QM Manager Minute: See how persistence pays off for employee pay increases - Scott Dennis Maryland Combined | 2023-04-03 12:41:16 | 194 |
| VRTAC-QM Manager Minute - SARA: Technology Solutions States Have Proven to Work -Alaska VR and SARA | 2023-03-03 16:41:18 | 254 |
| VRTAC-QM Manager Minute: How to take care of your employees so they take care of your business! Damian Schlinger-North Dakota VR | 2023-02-07 15:24:57 | 287 |
| VRTAC-QM Manager Minute: Be Bold - Moving VR Forward with the Idea Guy- David D'Arcangelo-Massachusetts Commission for the Blind | 2023-01-06 17:52:08 | 206 |
| VRTAC-QM Manager Minute: Florida General— Creative Staffing Solutions that Work | 2022-12-06 03:09:16 | 252 |
| VRTAC-QM Manager Minute: Rethinking Agency Organizational Structure- Ideas that work with Dacia Johnson-Oregon Blind | 2022-11-11 16:06:10 | 213 |
| VRTAC-QM Manager Minute: National Disability Employment Awareness Month - See how Self-Employment Serves a Critical Need in Wyoming with Inge Huband and Nicky Harper | 2022-10-04 18:46:05 | 244 |
| VRTAC-QM Manager Minute: Re-envisioning VR Service Delivery with Dee Torgerson- Minnesota General - Meeting People Where They Are At | 2022-09-08 17:12:13 | 232 |
| VRTAC-QM Manager Minute - Listen to VR Legend RoseAnn Ashby, with her VR Reflections- Looking Back and Looking Forward | 2022-08-08 18:21:01 | 268 |
| VRTAC-QM Manager Minute: Moving the Employment Needle to Quality - Learn How the Massachusetts Rehabilitation Commission has Used Engagement and Partnership to Pave the Path to Quality Employment | 2022-07-11 14:42:22 | 274 |
| VRTAC-QM Manager Minute: Everything is Bigger in Texas- Learn How Texas Leverages SSA Reimbursement | 2022-06-12 08:21:12 | 265 |
| VRTAC-QM Manager Minute: Putting Customers First-How Utah Makes Rapid Engagement Work! | 2022-05-09 16:04:48 | 337 |
| Work Incentives Counseling---Finding the incentive to engage in work incentives counseling with Virginia DARS! | 2022-04-08 13:01:54 | 273 |
| VRTAC-QM: Leveraging Employment First initiatives to improve consumer services across agencies in Colorado. | 2022-03-14 15:27:52 | 273 |
| VRTAC-QM Manager Minute: Get in and Get er’ Done! How Ohio Makes VR Work for Customers! | 2022-02-23 16:15:03 | 320 |
| VRTAC-QM Manager Minute: Get in and Get er’ Done! How California Makes VR Work for Customers! | 2022-02-11 18:36:15 | 582 |
| VRTAC-QM Manager Minute: Education and VR - Let’s Talk Collaboration That Works | 2022-01-10 23:08:01 | 205 |
| VRTAC-QM Manager Minute - Monitoring: Surviving and Thriving Before, During, and After the Process | 2021-12-13 16:25:26 | 218 |
| VRTAC-QM Manager Minute: Is Your Fiscal Management Managed? Building a Solid Foundation for Financial Fitness. | 2021-11-14 01:39:29 | 211 |
| VRTAC-QM Manager Minute: New Employment Initiatives and Practices to Move the Needle with David D’Arcangelo and Natasha Jerde | 2021-10-21 19:39:08 | 193 |
| VRTAC-QM Manager Minute: Planning for Success with Succession Planning so the VR Show can go on… | 2021-09-17 19:07:15 | 292 |
| VRTAC-QM Manager Minute: Bridging the Gap Between the DSA and the DSU so that VR’s Mission Doesn’t Slip Through the Cracks. | 2021-08-16 13:19:41 | 238 |
| VRTAC-QM Manager Minute: Unpacking the VR- State Rehabilitation Council Partnership | 2021-07-07 23:30:40 | 254 |
| VRTAC-QM Manager Minute: Selecting and Retaining Top Talent in a Constantly-evolving Field - inside of a Constantly-evolving World | 2021-06-09 15:14:44 | 282 |
| VRTAC-QM Manager Minute: How is VR Going to Look Post-Pandemic? Join Kristen Mackey, Arizona Combined, Natasha Jerde, MN Blind, and Carol Pankow, VRTAC-QM | 2021-05-10 15:03:33 | 258 |
| **Total** | | **5432** |

## Webinars and other web-based TA or Information:

The following universal TA tools and trainings have been developed as of the end of Year 3:

Trainings and Webinars

* CSAVR Spring 2023 Conference Presentations
  + Period of performance
  + Taking the mystery out of match and making match work for you - part 1
  + Taking the mystery out of match and making match work for you - part 2
  + Effective expenditure of funds
  + Effective expenditure of funds – panel presentation
  + Rate setting guides and methodologies
  + Contracts and contract monitoring – Innovative partnerships and systems
  + Successful strategies for working within your state structure
  + Fiscal forecasting
  + Spending Strategies: Strategic thinking for expansion of program expenditures
* Advancement in Employment
* Advancing in Employment
* Case File Review System – Summit Group Winter Forum
* Case service report (RSA 911) PD 19-03 training series
* Case service report training for VR counselors
* Coaching Strategies for Performance Excellence
* Conflict Resolution- He Says....She Says...They Say and the Ties that Bind them Together- Done in consultation with CSAVR, RSA, and NDRM
* Credential attainment rate
* Data literacy in VR
* Data validation
* Data validation – Summit Group Winter Forum
* Enhancing team performance in the eye of organizational storms
* Ethics, Supervision and Technology
* Ethics, Supervision, and Technology - Ethical Dilemmas, Boundaries and Contemporary Ethical Considerations
* Long Covid
* Managing the Shift: The Art of Moving from Peer to Supervisor without driving Yourself and Others Crazy
  + Module 1 – The essential role of data in the VR program
  + Module 2 – Data: A VR cultural shift
  + Module 3 – Data: VR talent and tools
  + Module 4 – VR data and analytics
* Onboarding- Lessons Learned and a Path Forward
* Performance Management
* Performance Management- #NotyourGreatGrandmothersReviewProcess
* Pre-employment transition services – A collaborative approach part 1 - 370
* Pre-employment transition services – A collaborative approach part 2 - 211
* Pre-employment transition services flexibilities based on the Notice of Interpretation - 750
* Pre-ETS program planning and set-aside determination
* Pre-ETS Tracking – Summit Group Winter Forum
* Presentation Changing Landscape in VR #notyourmothersVR
* Rapid Engagement module 1 part 1 and 2
* Rapid Engagement Module 2
* RSA Data Dashboards
* SRC training series
* Strategies for the reservation of pre-employment transition services funds - 56
* The Crossword Puzzle of Management- Managing Up and Across
* Traits of Effective Manager/Supervisor

**MICRO TRAINING**

5 in 15- Non-Delegable Functions

Fiscal Fitness-Prior Approval

**Media – Podcasts:**

October 2021- New employment initiatives and practices to Move the needle

November- Is your fiscal management managed? Building a solid foundation for financial fitness

December- RSA Monitoring: Surviving and Thriving Before, During, and After the Process.

January Education and VR a Partnership that Works

February-- Rapid Engagement

March- Leveraging Employment First initiatives to improve customer service across agencies in CO

April- Finding the Incentives in Work Incentives Counseling with Virginia DARS

May-Putting Customers First-How Utah Makes Rapid Engagement Work!

June- Everything is Bigger in Texas- Learn How Texas Leverages SSA Reimbursement

July-Moving the Employment Needle to Quality- Learn how the Massachusetts Rehabilitation Commission has used Engagement and Partnership to Pave the Path to Quality Employment.

August- Listen to VR Legend RoseAnn Ashby- Looking Back and Looking Forward

September- Re-envisioning VR with Dee Torgerson- MN General

**Tools, Guides and Content on the Website:**

* Advancement in Employment
* Advancement in Employment
* Agreement between general and blind agency
* Annual reports
* Calculating VR Performance for MSG Tool
* CAP
* Case Service Report (RSA-911) Training Series
* Case Service Report (RSA-911) Training Series
* Cash Management
* Combined/Unified State plan
* Community Rehabilitation Programs (CRPs)
* Competitive Integrated Employment (CIE) including Customized and Supported Employment (coming soon)
* Contract Guide
* Credential Attainment Guide
* Credential Attainment Scenarios
* Developed joint tool with NTACT C on developing a pre-ETS policy/procedure
* Drafted question for RSA on Virtual presence in the state
* Effectiveness in Serving Employers Crosswalk
* Employment First Systems
* Financial Need
* Fiscal Bootcamp Tips
* Fiscal monitoring Tip updated
* Indirect Cost Rates and Cost allocation plans
* Informed Choice
* Informed Choice
* Internal Control Assessment and Plan
* Job Jeopardy FAQs
* Long COVID
* Measurable Skill Gains (MSG) Guide
* Measurable Skill Gains (MSG) RSA-911 FAQ
* Measurable Skill Gains (MSG) RSA-911 FAQ
* Monitoring Prep workbook updated
* Monitoring Tips sheet updated
* OOS
* Organizational Structure
* Other Measures that Matter
* Other Service Providers
* PD 19-03 Implementation Checklist
* PD 19-03 Implementation Checklist
* PD 19-03 Implementation Checklist
* Plenty with 20: The Top 20 Tips for Acclimating New Administrators to VR
* Policy and Procedure Guide
* Policy and Procedures
* Pre-Employment Transition Services (Pre-ETS) RSA-911 FAQ
* Pre-Employment Transition Services (Pre-ETS) RSA-911 FAQ
* Pre-ETS Services Set Aside Determination Guide
* Project Search – MSG FAQ
* Randolph Sheppard
* Randolph-Sheppard Program (Business Enterprise Program)
* Rate setting guide
* Reason for Exit Tool
* Record Retention Tool
* Registered Apprenticeship – RSA-911 Guide
* RSA 17 Instructions
* RSA Formula Grant Programs: Federal Reports and Deadline
* Section 511
* Statewideness
* Strategies for Managing Large Caseloads!
* Systems Thinking & Design
* Transition
* Transition Programs (WIOA/IDEA/Perkins V) Performance Indicator Crosswalk
* Updated Plenty with Twenty Tips
* Updated prior approval tool
* Updated tool for Administrative Regulations Highlights
* Vocational Rehabilitation: MSG & Credential Attainment in Secondary Education
* VR Acronyms
* VR Agency Federal Reports and Deadlines
* VR Agency Federal Reports and Deadlines
* VR Funds for Conferences
* VR Funds for Marketing/Outreach
* WIOA Performance Accountability System: Implementation & Stability Checklist (under construction)
* WIOA Performance Calculations
* WIOA Performance Indicators
* Workforce Development System

# Collaboration with other TA Centers

Our collaboration with the NTACT:C has been very strong through the end of Year 3. We are partners in six ITAAs (Kansas, Pennsylvania, Hawaii,, New Jersey General, Florida Blind, and Georgia). They are partners with us in the next three on the slate for signature as well. Our program and fiscal teams have been conducting joint TA in several states and this has led to joint ITAA development. Other collaboration efforts this year included:

1. We worked closely with the CIT-VR in multiple areas including supervisor training, the monitoring CoP, the recruitment and retention pilot project, the rapid engagement CoP and in leadership training.
2. We conducted a joint training session at the Summit conference with the VRTAC-QE:
3. We meet with the VRTAC-QE regularly to review joint VR agencies and keep each other informed; and
4. We continue to lead the TAC collaborative monthly calls.

# Special Projects

This section includes information on the progress of our special projects.

## Community Reinvestment Act Project:

Purpose

At a time of unprecedented need for State Vocational Rehabilitation Agencies (SVRAs) to secure their match to draw down their full share of federal dollars, there are new potential opportunities for funding through recent changes in the Community Reinvestment Act (CRA).

Low- and moderate-income (LMI) people with disabilities are one of the target populations for financial institutions’ qualified CRA activities. Regulated financial institutions have the opportunity to utilize their private funding to help SVRAs provide expanded workforce development activities that advance employment outcomes for LMI people with disabilities.

The VRTAC CRA Pilot provides SVRAs and financial institutions with the necessary information, resources and technical assistance to enter into a mutually beneficial federal matching partnership.

Quarter 4 Activities – First SVRA-Bank Partnership Established

As this quarter ends, the big news is that the **Florida Division of Blind Services (FDBS) has received a donation from SouthState Bank** in August and is matching it with Federal dollars to provide rehabilitation services to Low- and Moderate-Income individuals that are blind. SouthState Bank based in Winter Haven, Florida, that has 168 branches in South Carolina, North Carolina, Georgia, Florida, Alabama and Virginia. We have altered the original hypothesis and intent of seeking larger investments from a financial institution based on recommendations from Federal regulators. This approach achieved a $10,000 CRA investment from SouthState Bank to FDBS that will be matched with federal funds.

There are ongoing conversations with additional banks to increase the number of bank partnerships and contributions for FDBS.

For FDBS, the bank outreach began in earnest at the Florida Prosperity Partnership annual conference the first week of June. Information about the opportunities for partnerships with SVRAs was shared with banks and attending regulators with a one pager, and the NDI team discussed the opportunities with banks that were present at the event. As a result, there were several banks in attendance that expressed interest in a trial partnership with the Florida Division of Blind Services. SouthState Bank made a commitment to participate in the pilot.

During the introduction meeting on September 13, 2023, leadership from FDBS met with the community development specialist from SouthState Bank to kick off what everyone present hoped would be the first of many similar introductory calls. FDBS Director began with his expression of appreciation for the donation and partnership, which was followed by a discussion of how the partnership would work moving forward. By the end of the introduction, the bank representative and FDBS’s team were discussing opportunities for future growth in the partnership, including the possibility of bank employees providing financial wellness training for FDBS participants and exploring work experience and career opportunities for FDBS participants in bank locations.

Much has been learned by VRTAC-QM’s team in the outreach and establishment of this partnership between FDBS and SouthState Bank that can be applied to expanded opportunities for FDBS and for other VR agencies that may explore this partnership model as well.

Through the foundational work of this project and direct application with the Florida Division of Blind Services, we have learned:

* Look for **outreach** opportunities with regulator supported events similar to the Florida Prosperity Partnership or affiliations of bank CRA officers that exist in many parts of the country
* Invest in **SVRA preparation**, including the completion of the recently developed draft checklist of SVRA questions and the identification of and support to a bank partnership point of contact (POC) within the SVRA
* Draft clear **examples of partnership opportunities** with agency for bank consideration
* Within the SVRA, establish the **ability to accept donation timely** (if an offered donation cannot be quickly accepted, it will likely be lost)
* For the POC, develop an understanding of the **benefits of partnership for the bank**
* Look for opportunity to **promote public recognition for the bank contribution**
* **Start small and look for opportunities to grow** the partnership

Noted Outcomes in this partnership model with FDBS so far:

* FDBS and SouthState Bank are **exploring additional partnership opportunities**
* The experience has supported NDI’s VRTAC-QM team in drafting a **checklist of questions** that can be used to strengthen FDBS’s ability and value as a bank partner – and a starting point for other SVRAs that wish to explore bank partnerships
* The **first milestone leads to the next** with discussions with other banks

Update on goals mentioned in prior report

Initially there was an objective to establish bank partnerships with two SVRAs in the initial two years, and then two more by the end of the project. By the end of the third year (this quarter), there is success in establishing a partnership with one SVRA – FDBS – with current discussions with additional banks which hold great promise in establishing additional partnerships for FDBS.

In the advent of this milestone achieved through trial and error during the first ten quarters, and then moving very swiftly on the foundation of the early lessons learned in the past two quarters, the VRTAC-QM leadership and team believe strongly in using this opportunity to build the model with FDBS for later expansion with other interested SVRAs. In this process, a ‘toolkit’ of resources will be developed to support SVRAs in the future, in their development of bank partnerships.

To date, this team has been engaged in discussions with five SVRAs in the development of Bank partnerships through the development of proposals for partnership opportunities. In the event that one of the other four SVRAs (or others that hear of this opportunity) approach NDI’s team with VRTAC-QM with a commitment to invest in the development of their own expertise in establishing these partnerships with banks, this team will work with that agency with the resources developed through the model developed with FDBS. Should there be more than one, the team will establish a Community of Practice for the participating SVRA points of contact (POCs) to support their learning of the lessons we have learned in working with FDBS. All of this said, moving forward into the fourth year of this project, the major emphasis of the team’s effort is in the development of this model and a toolkit through the work with FDBS.

Hopefully, this shift in emphasis will continue to be supported, with objectives for years 4 and 5 of this project, to focus on:

1. Growth in Bank Partnerships for FDBS in terms of:
   1. Numbers of Bank agreements with FDBS
   2. Scope of Partnership Activity
   3. Amount of Federal VR dollars matched
2. Completion of a SVRA Toolkit which will support other agencies in replication of the bank partnership model
3. Presentation of the model and strategy to VR agencies during the 5th year of project operation

General Team Recommendations:

For sustainability, SVRAs need to understand how to talk to banks and write proposals to banks. While the support of the TA center remains, support should be provided to build SVRA expertise and experience in this area through technical assistance, training and the development of resources/tools. These will include:

* SVRA “Toolkit” (current resources reviewed and revised to comprise toolkit)
* Develop a community of practice for key SVRA professionals
* Develop a checklist for key SVRA professionals

Next steps/goals for next quarter

VRTAC-QM’s NDI team will:

* With the checklist and other resources developed, or in the process of being developed, develop a toolkit for SVRAs to use in establishing bank partnerships;
* Work with FDBS to identify an agency representative that will operate as a bank (and VRTAC-QM) point of contact and provide technical assistance directly to this individual to develop and implement bank partnership activities;
* Focus on partnership development with FDBS and the success for all involved while recording the process and impact as a model that can be shared and possibly replicated by other SVRAS; and
* Review the new Final CRA Rules that will be released in October 2023 and identify alignment in the new rules between CRA, workforce development and disability.

It has been a pleasure for our team with the National Disability Institute to work with the Rehabilitation Services Administration, San Diego State University’s Interwork Institute and all other partners with the VRTAC-QM, in our role in this special project.

## SARA Project:

During the third year of the project, SaraWorks developed a strategy to connect with the VR community and showcase how Sara can increase service delivery as a client communications hub. Highlights of those activities include:

* Pre-existing WINTAC customers renewed Sara services and continued to receive discounts via the VRTAC-QM project.
* SaraWorks conducted outreach campaigns to every VR agency nationwide to gather agency feedback on their pain points and determine a good fit for the VRTAC-QM pilot.
* SaraWorks released new features for the Sara product to benefit VRTAC-QM and non-QM customers with the intent of becoming the singular source of client electronic communications.
* SaraWorks engaged in strategic partnerships with agency case management vendors to decrease the agency administrative and IT department burden to integrate Sara with the agency’s system of record.

**Current VR Agencies using Sara:**

Texas Alaska \* Nevada \*

Mississippi \*\* Maryland

New Hampshire South Dakota Kentucky \*

\* Pre-existing WINTAC customers

\*\* Receiving discounts via VRTAC-QM

How is Sara making an impact on Agencies?

* Text messaging – all agencies that have been contacted are seeking a text messaging option outside of state-issued cell phones. Sara is the only product on the market that automatically creates case notes from text message conversations and transmits them to the agency system of record.
* Email – Counselors who use Sara for sending and receiving client emails benefit from the correspondence becoming a case note that is transmitted to the agency system of record. Staff no longer have to copy and paste from Outlook.
* Appointments – can be scheduled and re-scheduled within the Sara calendar based on the Counselor’s availability. Synchronization with the Counselor’s Outlook or Google calendar is automatic.
* Video Appointments – Sara Video offers Counselors and clients the ability to meet remotely via an integrated and HIPAA compliant tele-counseling platform.
* Electronic Signature – Sara facilitates the electronic signature request for the client, Counselor and third parties. The process is automatically documented via case notes.

Goals for Year 4

* Include 2 Blind agencies in the VRTAC-QM Pilot.
* Work with Libera on a partnership that will enable Wyoming to integrate Sara as part of the VRTAC-QM Pilot.

Implement Sara in New Mexico VR.

## Recruitment and Retention Pilot Project:

**Introduction**

In response to the current crisis in staff attrition and recruitment of new staff in many State VR agencies, the VR Technical Assistance Center for Quality Management (VRTAC-QM) launched a pilot project to assist up to 4 agencies in developing customized strategies to address these issues in their organizations. The pilot project occurred over an 18-month period (March 2022 – August 2023).

The concept of the pilot project was presented at the March 3, 2022, CSAVR Operations & Personnel Sub-Committee meeting at the invitation of the co-chairs, Cynthia Speight (NC-B) and Kristen Mackey (AZ-C). Agency representatives attending this meeting were invited to apply to be part of the initiative and four agencies responded. The four agencies were:

* Arkansas Division of Services for the Blind (AR-B)
* Connecticut Bureau of Rehabilitation Services (CT-G)
* Iowa Vocational Rehabilitation Services (IA-G)
* Oklahoma Rehabilitation Services (OK-C)

**Pilot Project Structure**

The VRTAC-QM team developed a framework for the pilot project to guide how training and technical assistance were provided to agencies in the pilot. There were five components to this framework:

* **Guided Assessment**: Facilitated assessment process with the agency’s leadership team to identify specific factors within their organization and externally that are contributing to the attrition of staff and the related difficulties of recruiting new staff to fill vacancies
* **Work Plans**: Developed work plans based on the data obtained from the assessment process and debriefing sessions with agencies’ leadership teams. These sessions assisted the agencies in identifying priorities and developing a plan of action.
* **Coaching**: Provided ongoing guidance and coaching to the work teams in the agencies charged with implementing the work plan. Coaching was performed both on-site and virtually.
* **Evaluation**: Developed evaluation protocols to measure the progress of implementation of the work plans and assist in modifying the plans based on additional data and feedback from key stakeholders in this process.
* **Outcomes**: Evaluated outcomes and assisted agency leadership in developing strategies to sustain the change effort long term.

**Guided Assessment**

Guided assessment formed the basis of a discovery process for organizational leadership to identify factors contributing to the problem of attrition and assisted agency leadership in developing effective solutions.  The assessment encompassed factors both internal and external to the agency.   Online facilitated sessions were scheduled for a 2-hour period, and follow-up sessions were provided as needed. A *Guided Assessment Tool* was developed for this project to inform the assessment process and is available for use by agencies by accessing it via the [Recruitment and Retention Resources](https://www.vrtac-qm.org/focus-areas/program-performance-qm/vr-program-administration-management/hr) landing page.

To prepare for the assessment, leadership from the four agencies participating in this project was advised to assemble a group of core staff to be part of each phase of the project, from assessment to implementation. Staff recommended to be part of the core team included:

* Members of the Executive Leadership Team
* Human Resources Director
* Staff Development/Training Coordinator
* Field Services Administrators
* Other staff that were determined by agency leadership that could assist in this process.

Documents for Assessment:

Agencies participating in the pilot project were also asked to send key documents prior to their assessment sessions, so that the VRTAC-QM team members would have a greater understanding of each agency in the pilot.   Documents included:

* Comprehensive System of Personnel Development (CSPD) section of the VR portion of the current State Plan.
* If not included in the CSPD section, requested details about the following:
  + Current and historical (3-5 years) attrition rate
  + The number of pending retirements and their positions
  + Average time to fill staff vacancies
  + Details on any current hiring freezes
  + Details on fiscal or administrative issues that impact hiring
* Any trends identified from the following:
  + Stay (Retention) Interviews, (if performed)
  + Exit Interviews, (if performed)
* Current Recruitment Plan
* Details about your current onboarding process
* Other documents that you believe would be helpful to learn more about the organization.

The guided assessments were completed in May and June 2022. They included follow-up sessions in the summer months with agency staff to validate data in the assessment reports and begin identifying priorities for each agency leadership team. Assessments were performed via Zoom by a three-person team composed of VRTAC-QM staff, i.e., two facilitators and one note-taker.

**Work Plans**

Based on the data gathered through the guided assessment process, VRTAC-QM facilitators then assisted agency leadership in identifying core issues contributing to staff attrition and the difficulties in recruiting new staff. Two agencies developed multi-year work plans (AR-B & OK-C), and both are now receiving Intensive Technical Assistance from VRTAC-QM to complete this work. One agency completed its work plan in the project period (CT-G), and one agency paused its participation in the project due to changes in senior leadership (IA-G). (Please see Appendix A for the work plans)

**Outputs/Outcomes & Status Updates**

Arkansas Division of Services for the Blind (AR-B)

A 3-year work plan was developed and finalized in collaboration with agency leadership in December 2022. Below is a summary of the activities and an overview of outputs & outcomes:

* **Activity 1: Assessment** - Provide training and resources to the agency to conduct Employee Engagement Surveys to collect data on the level of employee engagement in the agency and to identify actionable items to increase retention of staff.

**Outputs:**

**Training: Employee Engagement and Organizational Change**

Date: 5/10/2023

Participants: 16

Duration: 6 hours

This session provided training on employee engagement and organizational change. The session included all administrative staff in the agency (n=16). The material provided by Karen Wilson, Coordinator of Client Services for MO-G, on employee engagement was utilized during a 3-hour training on this topic. Ron and I developed 7 hours of content focusing on organizational change that is based on “Leading Change” by John P. Kotter and his eight-step pattern on leading change initiatives. This session also included a kaizen session at the end, which included an appreciative inquiry into what is currently working in the agency and identifying those areas of improvement.

**Next Steps:**

Agency leadership will determine when to implement the employee engagement survey and coaching will be provided by the VRTAC-QM on creating actionable items to improve employee engagement based on the data obtained via the survey.

* **Activity 2: Assessment** - Provide training and resources to the agency to conduct Stay Interviews to collect data to identify actionable items to increase staff retention.

**Status Update:**

This training and implementation will commence in Year 2 of the agency work plan (FFY 2024).

* **Activity 3: Assessment** - Provide training and resources to the agency to conduct 360 Assessments to collect data to identify actionable items to increase retention of staff.

**Status Update:**

This training and implementation will commence in Year 2 of the agency work plan (FFY 2024).

* **Activity 4: Staff Development** - Conduct a one-day workshop on Organizational Change as part of a Leadership retreat, which is connected to the agency's culture change initiative.

**Outputs:**

**Training: Organizational Change**

Date: 6/22/2023

Participants: 40

Duration: 4 hours

This session provided training on the five leadership practices as articulated in "The Leadership Challenge" - Kouzes and Posner. This session was the final session in a 2 1/2 day Annual Field Services meeting entitled "Building Up Success." The core intent of the training was to encourage more leadership throughout the agency to impact positive organizational change that is connected with Intensive TA Agreement.

**5/10/2023 -** A full day training was provided to senior and middle management on leading organizational change and an overview of employee engagement (see above for details). A second session will occur in October of 2023.

**6/22/2023 –** A half-day training session was provided to all staff at the agency during their annual Field Services Retreat that focused on the five leadership practices as articulated in the *Leadership Challenge* by Kouzes and Posner.

* **Activity 5: Staff Development** - Conduct an all-staff retreat to review data from assessment activities and to link it to the mission, vision, and values of the agency.

**Status Update:**

This activity will be provided as part of the Intensive Technical Assistance agreement with the agency (FFYs 2024 & 2025)

* **Activity 6: Compensation** - Develop a plan to increase compensation for staff.

Not yet achieved.

* **Activity 7: Caseload Specialization** - Explore creating a separate Older Individuals who are Blind – Independent Living (OIB-IL) work unit to provide those services.

**Outcomes:** The Secretary of the Arkansas Department of Commerce, the department in with AR-B is situated, approved a hiring freeze waiver to allow the agency to hire 15 positions, i.e., vacancies, including 10 counselor positions which will include 2 counselors to serve only clients under the OIB-IL program. This is an important milestone in creating a separate OIB-IL work unit. They will have a total of 3 counselors in this role and will have an administrator oversee this program, further moving it to a separate work unit.

* **Activity 8: Program Income** - Develop new protocols to secure greater levels of Social Security Administration (SSA) Cost Reimbursement funds.

**Outcomes:** The agency was able to hire a staff person (1 FTE) to focus on the processing of cost reimbursement claims with SSA. The staff person has been trained and is processing the claims manually. Initial results: $82,000 in reimbursements.

**Next steps:** The agency wants to create a more automated system of submitting reimbursement claims, including creation of new MOAs to gain access to employment and Social Security data. Once those agreements are executed, the agency will explore purchasing a software system to assist in managing claims.

* **Activity 9: Staff Development** - Develop a plan to improve staff development functions at the agency.

**Output:** As mentioned above, approval of the hiring freeze waiver will allow the agency to hire a dedicated Training Coordinator (1 FTE). Candidates have been identified and it is anticipated the new person will start in the Fall of 2023.

* **Activity 10: Technology** - Explore technology that can be utilized in the agency to reduce administrative burdens for staff.

**Status update:** The agency is exploring the Ticket Tracker software package to automate components of SSA Cost Reimbursement claims. In addition, SARA (Semi-Autonomous Rehabilitation Assistant), an AI system to assist with client engagement is also being explored.

* **Activity 11: Recruitment** - Develop a comprehensive recruitment plan.

**Status Update**: The new staff person serving as the Training Coordinator will also be tasked with developing a draft recruitment plan.

Connecticut Bureau of Rehabilitation Services (CT-G)

* **Activity 1: Process improvement** – Develop a document to share with the Designated State Agency (DSA) to assist with improving the processes around interviewing and approval of new hires.

**Outputs:**

A letter with recommendations from the VRTAC-QM team was provided to the CT-G leadership. The letter heavily emphasized the difficulties with the steps in the hiring process as operated by the Designated State Agency (DSA). The leadership welcomed the letter and said they would work with the DSA to improve the process, particularly the interview and approval processes.

* **Activity 2: Employee Engagement** – Dr. Karri Wilson (MO-G) provided access to the Employee Engagement survey she developed and assisted the leadership team to implement the survey.

**Outputs/Outcomes:**

Connecticut VR conducted the Employee Engagement survey with all staff. It had a participation rate of 72% and an engagement percentage over 70%. These results were shared with staff, union officials and others. Will select some areas for improvement.

Iowa Vocational Rehabilitation Services (IA-G)

* **Activity 1:** Employment Engagement – The VRTAC-QM team developed a survey for the agency that will focus on way to retain their staff.

**Status Update:** During the pilot project, the agency experienced a change in senior leadership and asked to pause participation in this project.

**Oklahoma Rehabilitation Services (OK-C)**

A 3-year work plan was developed and finalized in collaboration with agency leadership in January 2023. Below is a summary of the activities and an overview of outputs & outcomes:

* **Activity 1: Assessment** - Provide training and resources to the agency to conduct Employee Engagement Surveys to collect data on the level of employee engagement in the agency and to identify actionable items to increase retention of staff.

**Outputs**:

**Training: Employee Engagement and Organizational Change**

Dates: 4/26/2023 – 4/27/2023

Participants: 26

Duration: 10 hours

This session provided training on employee engagement and organizational change. The session included all administrative staff in the agency (n=26). Karen Wilson, Coordinator of Client Services for MO-G, provided free training on employee engagement to other State VR agencies and, through Ron Vessel’s affiliation with that agency, was able to recruit Karen to perform a 3-hour training on this topic. She also offered to provide the agency with her survey instrument, which she developed as part of her dissertation, at no charge. The QM team of Ron Vessel and John Walsh developed 7 hours of content focusing on organizational change based on “Leading Change” by John P. Kotter and his eight-step pattern on leading change initiatives. This session also included a kaizen session at the end, which included an appreciative inquiry of what is currently working in the agency and identifying those areas of improvement.

**Next Steps:** The agency leadership decided to use the employee engagement survey Dr. Wilson developed and will determine when to release the survey.

* **Activity 2: Compensation** - Seek full appropriation (potential) through the legislature on July 1, 2023.

**Outcomes:** Although the agency did not secure the full match through the SFY 2024 budgetary process, they successfully secured raises for most of the agency staff, including a 26% pay increase for direct service staff, including VR Counselors. The agency views this as a major victory, as it was identified that direct service staff compensation was 20% lower than comparable jobs outside of state government. The pay increases took effect on July 1, 2023. Below is a break-down of the three-tiered pay increases:

* + 26% - All direct services positions including VR Counselors
  + 15% - Program Managers, Rehabilitation Technicians, and Executives
  + 10% - All other staff
* **Activity 3: 360 Assessment** - Provide training and resources to the agency to conduct 360 Assessments to collect data to identify actionable items to increase retention of staff.

**Next Steps:** This activity will occur in FFY 2024.

* **Activity 4: Staff Development** - Conduct a one-day workshop on Organizational Change as part of a Leadership retreat, which is connected to the agency's culture change initiative.

**Outputs:**

**Training: Organizational Change**

5/23/2023 – 5/24/2023

Participants: 27

Duration: 9 hours and 30 minutes

This session provided training on leading organizational change. The session included all administrative staff in the agency (n=27). Here is a breakdown of participants by role: Executive Director – 1, Division Administrator – 2, Field Services Coordinator – 4, Programs Managers – 18, Project Coordinators – 2. The content focused on leading organizational change based on “Leading Change” by John P. Kotter and his eight-step pattern on leading change initiatives. This was a second session, with the first occurring from 4/26 – 4/27/23. This second session focused on defining priorities for change, beginning to form guiding teams to facilitate change, and for the group to work on their change vision for the organization.

**Change Teams:** As a result of the May 23 & 24, 2023 training sessions, the agency has decided to implement three change teams that will lead efforts to create process improvements in three main areas:

* + Recruitment and Retention Team
  + Organization Culture & Change
  + Process Improvement

**Next Steps:** VRTAC-QM staff members will assist the agency in training team leads in facilitating team meetings and provide ongoing coaching.

**Training: Employee Engagement and Organizational Change**

4/26/2023 – 4/27/2023

Participants: 26

Duration: 10 hours

This session provided training on employee engagement and organizational change. The session included all administrative staff in the agency (n=26). Here is a breakdown of participants by role: Executive Director – 1, Division Administrator – 2, Field Services Coordinator – 4, Programs Managers – 17, Project Coordinators – 2. Karen Wilson, Coordinator of Client Services for MO-G, provided free training on employee engagement to other State VR agencies. Through Ron Vessel’s affiliation with that agency, was able to recruit Karen to perform a 3-hour training on this topic. She also offered to provide the agency with her survey instrument, which she developed as part of her dissertation, at no charge. The QM team of Ron Vessel and John Walsh developed 7 hours of content focusing on organizational change based on “Leading Change” by John P. Kotter and his eight-step pattern on leading change initiatives. This session also included a kaizen session at the end, which included an appreciative inquiry into what is currently working in the agency and identifying those areas of improvement.

* **Activity 5: Recruitment** - Develop a comprehensive recruitment plan.

**Outcomes:** A dedicated staff person (1 FTE) was hired to lead this effort. This staff person will also be the team lead for the change team focusing on developing strategies around staff retention and recruitment.

* **Activity 6: Training-Understanding Supervision**

**Outputs:** This training was connected to the training that was provided on April 26 & 27, 2023, and May 23 & 24, 2023. See above for details.

* **Activity 7: Communication Plan**

**Next Steps:** Senior leadership has empowered three change teams to develop strategies to improve agencies processes. The team focused on Organizational Culture and Change and will take the lead in developing strategies to improve overall communication in the agency.

* **Activity 8: Employee Recognition** - Develop Recognition Plan

**Next Steps:** The Organizational Culture and Change team will take the lead in developing strategies to recognize the work of agency staff.

**Coaching**

At the CSAVR Fall 2022 Conference in San Antonio, the QM team arranged for a roundtable session with all the project leads of the four State VR agencies participating in the initiative on November 1, 2022. The one-hour session enabled project leads to interact with one another in an information sharing session to learn about each other’s challenges and opportunities for change. The session focused on takeaways from the conference that can be applied to their work plan, discussion of the next steps, including the creation of individualized work plans, and began the conversation on establishing evaluation protocols to measure progress and to define outcomes.

VRTAC-QM staff members also provided coaching via online meetings with senior leadership dedicated to this project.

**Resources Developed:**

[**Recruitment and Retention Resource Page**](https://www.vrtac-qm.org/focus-areas/program-performance-qm/vr-program-administration-management/hr)

* VRTAC-QM Guided Assessment Tool
* Employee Engagement Surveys
* Stay Interviews
* Communication strategies
* Exit interviews
* Compensation
* Organizational structure/Career Pathways for staff
* Process Improvement
* Recruitment methods
* Articles (Retention and Recruitment)

**VRTAC-QM: R&R Pilot Project Team**: Carol Pankow, Crystal Garry, Melissa Diehl, Ron Vessel, and John Walsh

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# Significant program activities, outputs, products and outcomes anticipated by September 30, 2024

Table 13 contains the current status of the VRTAC-QM’s progress in meeting the work plan goals and objectives anticipated for Year 4.

Table 13

*Year X Work Plan Anticipated Activities, Outputs, Products and Outcomes*

|  |  |  |
| --- | --- | --- |
| **Year 4 Work Plan** | | |
| **Domain: Knowledge Development** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Finalize and launch the VR Wellness Check tool | Wellness check complete and available on the website for use by VR agencies. | Q3 |
| Conduct research on issues related to the quality management of the VR program and develop related TA and training | Completed research and informational or training products available to VR agencies on emerging topics related to quality management. Full research on rapid engagement complete. | Update rapid engagement research. Develop updated fiscal tools and guides. Follow-up with recruitment and retention pilot agencies. |
| **Domain: TA and Training** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Management Concepts grants management training available to all SVRAs | At least 400 instances of courses completed by SVRA personnel | Ongoing through the end of the project. |
| QM Executive Leadership Seminar Series training completed for the two existing cohorts and beginning for a new cohort | Two cohorts completed and one beginning. Leadership skills and knowledge increased for participants | Existing cohorts completes in Q2 and new cohorts begins in Q2 |
| Deliver universal TA to SVRAs | Readily available information and resources on quality management strategies and practices on the website and through podcasts, social media, webinars and conference presentations. | Ongoing in Q1-4 |
| Deliver targeted TA to SVRAs | SVRA staff increase their knowledge of quality management practices and strategies and implement them to improve service delivery and outcomes. | Continuous throughout the year. Targeted TA numbers increase with available CoPs. |
| **Domain: TA and Training** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Establish CoPs in quality program and fiscal mgmt. | Continuation of the monitoring CoP, CE CoP, Rapid engagement and ITS COPs. Wrap up of State Plan CoP. Fiscal Management CoP continues. | Continuous - State Plan CoP ends in Q2. |
| Develop fiscal fitness training in various topics | Fiscal fitness trainings on Period of Performance, Waiver of statewideness, Blind and General agency transfer and other topics | Continuous in Q1-4 |
| Develop program and performance micro-trainings | Micro-trainings completed and available on the website on WIOA Section 116 | Ongoing in Q1-4 |
| Provide intensive TA and training on quality program and fiscal management | SWOTs conducted and ITAAs developed for 7 additional SVRAs | Q1-Q4 |
| Conduct the SARA pilot projects in 3 agencies | Pilot started in 3rd SVRAs by the end of Year 4 | Q4 |
| Conduct the CRA pilot projects in 2 States | Pilot started in 2 SVRAs by the end of Year 4 | Q4 |
| **Domain: Coordination and Dissemination** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Collaborate with VRTAC-QE and other TACs to support learning and KD and KT. | Number of TACs and other projects contacted and engaged | Ongoing |
| Follow-up on CSAVR Spring 2023 conference | TA with agencies reaching out as a result of the conference and follow-up presentations at CSAVR | Apr-24 |
| Conference presentations with special focus on Y5 | Completed presentations | Ongoing throughout the year |
| **Domain: Program Evaluation** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Ongoing PE using quant. and qual. methods | Completed eval. methods | Ongoing |

# Challenges, Opportunities and Emerging Issues

Recruitment and retention of staff remains a critical issue for SVRAs. We have followed up on the pilot program in this area by developing an ITAA with Oklahoma that will be completed by mid-year in Year 4. We are also working closely with Arkansas Blind on these issues within their existing ITAA. We have also begun identifying best or promising practices in agencies that have had to use technology or service/organizational structure changes to address caseload demands in the midst of aa shrinking workforce through the ITS CoP. The CoP is an effective way of sharing information and getting agencies to share best practices with each other.

The State Plan admission process emerged as a major issue since it is due in 2024. SVRAs had numerous questions as the process was revised for the 2024 submission. This presented a challenge and an opportunity as discussions with RSA about this need resulted in the State Plan CoP. This CoP is short-term and will end in March 2024.

Issues with DSA overreach seems to have become more common as agencies struggle to keep administrative control of the program. This has given us an opportunity to include DSA staff in our training and TA efforts. In addition, our fiscal team has been communicating regularly with RSA State liaisons about specific agencies and the difficulties they face in this area. This issue presents an opportunity for us and for RSA to help address a problem that the VR agency may be hesitant to confront. When the DSA has direct control over the VR Director’s job, it is a difficult proposition to expect the VR Director to try and stop DSA overreach. Doing so may risk the VR Director’s job. RSA can help by addressing this issue in monitoring and we can help by providing TA in this area to the DSA and DSU.

The ongoing need for SVRAs to expend their federal award and the large sums of reallotment and returned funds led to an opportunity for the QM to work in partnership with the other TACs, RSA and CSAVR to develop TA and training for the spring CSAVR conference. This conference allowed the VRTAC-QM to reach over five hundred people at one time and we will be following up on this content in the Spring conference 2024.

# Impact of COVID-19

The VRTAC-QM and the VR agencies we work with have effectively responded to the pandemic and adapted our work in order to continue to meet the TA and training needs of these agencies. We fully utilize videoconferencing technologies such as Zoom and Teams. While there are periodic interruptions in travel or appointments due to illness or cancelled flights, these are minimal at this point, and we are back to travelling frequently to provide TA and training.

COVID-19 has not impacted our ability to meet our goals and objectives thus far. The shift to remote work may have actually enhanced our ability to connect with VR agencies and discuss their needs. Zoom has allowed us to reach large numbers of people quickly. I believe our targeted TA numbers reflect this. We have reached thousands of people through hundreds of targeted TA events, far surpassing our original goals. Videoconferencing is a major reason for this.

# Section B: Work Plan

The Status of the Year 3 Work plan is included in Table 14. All of the VRTAC-QM’s goals and objectives were achieved except for the VR Wellness Check tool completion, which will be completed by the end of the third quarter of Year 3.

Table 14

*Year 3 Work Plan Progress*

|  |  |  |
| --- | --- | --- |
| **Year 3 Work Plan** | | |
| **Domain: Knowledge Development** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Finalize and launch the VR Wellness Check tool | Wellness check complete and available on the website for use by VR agencies. | Completed and awaiting final RSA review prior to launch |
| Conduct research on issues related to the quality management of the VR program and develop related TA and training | Completed research and informational or training products available to VR agencies on emerging topics related to quality management. Full research on rapid engagement complete in Year 3 | Completed recruitment and retention pilot. Rapid Engagement CoP and research ongoing. ITS CoP established. |
| **Domain: TA and Training** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Management Concepts grants management training available to all SVRAs | At least 300 instances of courses completed by SVRA personnel | Completed and goal achieved. Ongoing courses continue. |
| Complete development of the fourth and final course in the VR Grants Man.Certificate program | Completed course | Completed and launched. |
| QM Executive Leadership Seminar Series training completed for the existing cohort and beginning for a new cohort | One cohort completed and two beginning. Leadership skills and knowledge increased for participants | Completed and two new cohorts almost complete. New cohort established and will begin in Yr. 4 |
| Deliver universal TA to SVRAs | Readily available information and resources on quality management strategies and practices on the website and through podcasts, social media, webinars and conference presentations. | Ongoing in Q1-4 |
| **Domain: TA and Training** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Deliver targeted TA to SVRAs | SVRA staff increase their knowledge of quality management practices and strategies and implement them to improve service delivery and outcomes. | Continuous throughout the year. Targeted TA has exploded due to CoPs, CSAVR and TA needs across multiple areas. |
| Establish CoPs in quality program and fiscal mgmt. | Continuation of the monitoring, SE, and CE CoPs, with the addition of the case review CoP | Multiple CoPs in effect. Case review completed. |
| Launch the recruitment and retention pilot project | Assist four SVRAs to develop a recruitment and retention plan to ensure that quality management strategies and practices are in place that will maximize the ability of the agencies to recruit qualified staff and retain the staff they have. | Completed. |
| Develop fiscal fitness training in various topics | Fiscal fitness trainings on Period of Performance, Waiver of statewideness, Blind and General agency transfer and other topics | Continuous in Q1-4 |
| Develop rate-setting and contract development guide | Completed guides that will result in acceptable rate-setting methodology and improved contract development | The rate setting guide is complete and the contract guide is in review by RSA |
| Develop program and performance micro-trainings | Micro-trainings completed and available on the website on WIOA Section 116 | Ongoing in Q1-4 |
| Complete data quality and literacy training for VR | Completed training available on the website | Complete |
| Provide intensive TA and training on quality program and fiscal management | SWOTs conducted and ITAAs developed for 7 additional SVRAs | Completed |
| Conduct the SARA pilot projects in 3 agencies | Pilot started in 2 SVRAs by the end of Year 3 | Two completed |
| Conduct the CRA pilot projects in 4 States | Pilot started in 2SVRAs by the end of Year 3 | One pilot established |
| **Domain: Coordination and Dissemination** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Collaborate with VRTAC-QE and other TACs to support learning and KD and KT. | Number of TACs and other projects contacted and engaged | Ongoing |
| Collaborate with CSAVR and the other TACs to conduct the 2023 Spring CSAVR conference | Completed conference with presentations directed by the QM | Completed |
| Conference presentations with special focus on Y5 | Completed presentations | Ongoing throughout the year |
| **Domain: Program Evaluation** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Ongoing PE using quant. and qual. methods | Completed eval. methods | Ongoing |

As indicated earlier, the major new initiative has been our leading the CSAVR Spring 2023 conference. We do not anticipate that this initiative will impair our ability to meet our other obligations to provide TA and training. Our supplemental funding continues to help us meet the demand for TA and training through the funding of two full-time positions. New supplemental funding has helped with staffing and travel costs.

# Project Measures Update

The progress of the VRTAC-QM in meeting our project measures and GPRA measures is included in Tables 15 and 16 below. These measures are entered into G5 as well but are included here as well for ease of reference.

Table 15

*Project Measures*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Project Measure 1: Number of ITAAs signed and in progress during the project year** | | | |  |
| **Project Year** | **Original Target** | **Target with Supplement** | **Actual** |  |
| 1 | 3 | 3 | 4 |  |
| 2 | 5 | 7 | 8 |  |
| 3 | 5 | 7 | 6 |  |
| 4 | 5 | 7 | NA |  |
| 5 | 18 | 24 | NA |  |
| **Total** | | | **18** |  |
| **Project Measure 2: Number of ITAAs completed during the project year** | | | |  |
| **Project Year** | **Original Target** | **Target with Supplement** | **Actual** |  |
| 1 | 0 | 0 | 0 |  |
| 2 | 1 | 1 | 1 |  |
| 3 | 2 | 2 | 1 |  |
| 4 | 6 | 6 | NA |  |
| 5 | 9 | 15 | NA |  |
| **Total** | | | 2 |  |
| **Project Measure 3: Number of SWOT assessments and reports completed** | | | |  |
| **Project Year** | **Original Target** | **Target with Supplement** | **Actual** |  |
| 1 | 3 | 3 | 4 |  |
| 2 | 5 | 7 | 9 |  |
| 3 | 5 | 7 | 9 |  |
| 4 | 5 | 7 | NA |  |
| 5 | 0 | 0 | NA |  |
| **Total** | | | 22 |  |
| **Project Measure 4: Number of courses taken by SVRA towards the VR Grants Management Certificate program through Management Concepts** | | | |  |
| **Project Year** | **Original Target** | **Target with Supplement** | **Actual** |  |
| 1 | 0 | 0 | 0 |  |
| 2 | 270 | 270 | 389 |  |
| 3 | 340 | 340 | 268 |  |
| 4 | 360 | 360 | NA |  |
| 5 | 380 | 380 | NA |  |
| **Total** | | | **657** |  |
| **Project Measure 5: Number of targeted training and TA events that QM provided and the numbers of participants during the project year. Note: There was no target number set for events, only participants. Data is included for both in this table.** | | | | |
| **Project Year** | **Original Target Number of Participants** | **Target Number of Participants with Supplement** | **Actual** | |
| **Events** | **Participants** |
| 1 | 100 | 100 | 358 | 3,138 |
| 2 | 125 | 250 | 402 | 2,362 |
| 3 | 125 | 250 | 515 | 3,932 |
| 4 | 140 | 300 | NA | NA |
| 5 | 100 | 200 | NA | NA |
| **Total** | | | **1,275** | **9,432** |
| **Project Measure 6: Number of universal training and TA deliverables on QM completed and are available to SVRA personnel through publications, webinars, and VRTAC-QM website during the project year (includes, trainings, tool kit items, guides, resources and links. Year One includes WINTAC resources available by link. Year 2 is QM only)** | | | |  |
| **Project Year** | **Target** | **Target with Supplement** | **Actual** |  |
| 1 | Not set | Not set | 359 |  |
| 2 | Not set | Not set | 117 |  |
| 3 | Not set | Not set | 81 |  |
| 4 | Not set | Not set | NA |  |
| 5 | Not set | Not set | NA |  |
| **Total** | | | **557** |  |

Table 16

*Project Measures 7 and GPRA Measures*

| **Measure** | **Number** | **Percent** | **Number** | **Percent** |
| --- | --- | --- | --- | --- |
| Project Measure 7: Number and percentage of VR agency personnel reporting that the training and TA is high in quality, relevant, and useful to their work | NA | 75% | 2074 | 94% |
| Project Measure 7a: Intensive TA: Number and percentage of VR agency personnel reporting that the training and TA is high in quality, relevant, and useful to their work | NA | 75% | 392 | 89% |
| Project Measure 7b: Targeted TA: Number and percentage of VR agency personnel reporting that the training and TA is high in quality, relevant, and useful to their work | NA | 75% | 194 | 99% |
| Project Measure 7c: Universal TA: Number and percentage of VR agency personnel reporting that the training and TA is high in quality, relevant, and useful to their work | NA | NA | 1488 | 96% |
| **GPRA Measures** | | | | |
| **Measure** | **Number** | | **Percent** | |
| GPRA Measure a: Number and percentage of participating State VR agencies reporting improved coordination and collaboration with Federal, State, or local organizations as a result of the training and technical assistance | 48 | | 71% | |
| GPRA Measure b: Number and percentage of VR agency personnel reporting that the training and TA is high in quality, relevant, and useful to their work | 2074 | | 94% | |
| GPRA Measure c: Of State VR agencies that received training and TA, the percentage change in consumers achieving an employment outcome compared to the prior year | 348 | | 1.2% increase overall from PY 2021 to PY 2022 | |
| GPRA Measure d: Of State VR agencies that received training and TA, the number and percent of agencies that achieved their negotiated level of performance for the measurable skill gains indicator in the VR Program Year. | 33 | | 65% | |
| GPRA Measure e: The number and percentage of participating State VR agencies that adopt quality management strategies and practices as a result of training and technical assistance provided under this grant. | 52 | | 77% | |