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Semi-Annual Report, Year Three

SAN DIEGO STATE UNIVERSITY Research foundation

INTERWORK INSTITUTE

VRTAC-QM

Semi-Annual Performance and FIscal Report - year 3

# Executive Summary

At the end of the second quarter of Year Three, the VRTAC-QM completed 16 intensive TA agreements (ITAAs). Our target for the end of Year Three is 17, so we are one shy of our goal for the year at the mid-way point. The VR agencies we have ITAAs with include:

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

As of this writing there are two more ITAAs being developed. One is with Florida Blind and one is with Georgia Combined.

Targeted TA continues to be extremely active for the VRTAC-QM. To date we have provided at least targeted TA to 77 of the 78 VR agencies (99%) in 1007 targeted TA events serving 7,169 VR staff. These totals far exceed our target rates in every area.

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 and have recorded 18 podcasts to date that are available on the site. A primary focus area for us this quarter was preparing for the CSAVR Spring conference. In partnership with the VRTAC-QE and the NTACT:C, the VRTAC-QM took the lead role in preparing presentations focused on helping VR agencies address the crisis of relinquished and returned funds. Although the conference took place in the third quarter, all of the preparation occurred this quarter.

We completed the VR Wellness Check tool and have sent it to our IT Department for final development on the QM website. In addition, we have completed the final course of the VR Grants Management Certificate training program through Management Concepts, and the final course will be launched in May.

We began a rapid engagement pilot in partnership with CIT-VR and have expanded our fiscal forum CoP to respond to the demand for ongoing fiscal TA and training. In addition, the demand for leadership training at the Executive level remains significant. NRLI had to begin two separate cohorts this year because the demand was so high. The VRTAC-QM continues to significantly support NRLI through staff time and ongoing training and coaching for participants.

In response to the demand for TA, the VRTAC-QM was able to hire three full-time staff this quarter. There are two new full-time fiscal TA and training providers and one full-time program and performance TA and training provider. Each individual has specific expertise in areas that are a significant focus of our TA and training requests.

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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 – March 31, 2023)

Date submitted: May 1, 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 the second quarter of Year Three, the VRTAC-QM completed 16 intensive TA agreements (ITAAs), one shy of our target of 17 for the entire year. 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 |

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 Mid-Year Program Evaluation report that is submitted by June 30, 2023. 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 report if that is a preferable way of viewing the files.

### Arizona Combined

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| What led to the request for TA? | The program 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. |
| What activities did you do or are you doing? | During this period, the Fiscal team had one onsite visit for three days, 5 intensive activities, 4 targeted activities, and 1 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. Review and provide recommendations for the new case management system requirements. |
| What is the intended impact of the work and how are you measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | 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 21 funds. |
| What has worked well, and what has been a challenge? | 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. |
| Describe any work with other TA Centers and how that went or is going | The primary work was completed by QM. |
| Future plans for the work | QM will continue to work through the items identified in the workplan and on the ITAA. |

The work plan for Arizona Combined has not been completed yet as the ITAA is very new. The work plan will be attached to the next report.

### Arkansas Blind

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| **Arkansas-Blind** |  |
| 1. What led to the request for TA? | 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. Activities | During this period, there have been 32 intensive and 6 targeted activities and the agency has also participated in the monthly Fiscal Forum Community of Practice. 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 set 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 work is underway to prepare 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 the creation of a training position which was cited as a significant need. QM staff assisted the DSB team in developing a position description. However, the hiring process was delayed with the current hiring freeze due to a change in the Governor for Arkansas. |
| 1. What is the intended impact of the work and how are you measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | 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 has been made and is tracked monthly on the workplan. 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. |
| 1. What has worked well and what has been a challenge? | 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. 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 has continued to be an issue, and the recent change in Governors has resulted in a hiring freeze. The freeze has been detrimental to filling key vacant positions. |
| 1. Describe any work with other TA Centers and how that went or is going | 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. |
| 1. Future plans for the work | 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.



### Colorado Combined

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| What led to the request for TA? | 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 o every purchase. They were interested in a new strategy that would let them better handle MOE and Match. |
| What activities did you do or are you doing? | During this period, there have been 13 intensive activities, including an onsite visit in November, 7 targeted activities, and 1 universal activity. We completed a SWOT analysis and wrote the ITAA. 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 34 CFR 361, where it intersected on fiscal matters. While onsite, the team discovered a possible lapse of funds that would occur at the end of the 21 grant final report. Through discussions with the DSA fiscal staff, journal voucher entries could be made so the funds lapsed were reduced by over 2 million dollars. A-DRAN and Internal Controls training was held for the Leadership team and field staff. Significant effort has been put into the current CMS and maximizing how this is used to manage the case services expenditures and reporting. A move was made from a regional budget structure with live implementation on April 1st. Work was also done on mapping out the switch of fund sources to 23 in AWARE. Work has started on fiscal forecasting and developing a spending strategy. Policy work has also begun revising the prior approval policy and developing the RSA-17 reporting policy. |
| What is the intended impact of the work and how are you measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | To ensure the agency is on a sound financial footing with the development of fiscal forecasting and a spending strategy and has documented 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 4 items have been completed 100%, and many others are in process. The agency successfully reduced the amount of lapsed funds with the final 21 report. AWARE parameters and processes were maximized, which will help with the overall management of the funds. |
| What has worked well, and what has been a challenge? | 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. Turnover continues to be an issue. |
| Describe any work with other TA Centers and how that went or is going | The primary work was completed by QM. |
| Future plans for the work | Continue development of a spending strategy, development of fiscal policies and procedures, and continued work on the CMS fiscal components. |

The work plan for Colorado Combined is embedded below.



### Delaware Blind

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| 1. What led to the request for TA? | Specific Conditions Letter from RSA and RSA request to assist the state agency. |
| 1. Activities | 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. |
| 1. What is the intended impact of the work and how are we measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | The intended goal was to provide a level of assistance that allowed DVI to clear items required of their corrective action plan and ultimately be released from specific conditions. They were successful in doing both as of FFY23. The agency now has proper policies, procedures, and internal controls in place for successfully managing the federal award with staff roles clearly defined, along with accountability. Knowing their financial position allows overall better management of the program. See work plan. |
| 1. What has worked well and what has been a challenge? | From the beginning, 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.  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 | Primary work completed by the QM. |
| 1. Future plans for the work | We will continue efforts around policies, procedures and internal controls, including TA related to development of an internal monitoring plan. |

The work plan for Delaware Blind is embedded below.



### Florida General

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| 1. **What led to the request for TA?** |
| The agency requested intensive technical assistance (ITAA) as a result of:   * An catalog of data reports. This would be followed by recommendations to support the desired outcomes. 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 |
| 1. **What activities did you do, or are you doing?** |
| 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 - 40%   + 2.2 - 10%   + 2.3 - Pre-start   + 2.4 – 25%   + 2.5 - Pre-start |
| 1. **What is the intended impact of the work and how are you measuring the impact so far?** |
| The TA is intended to impact and improve the quality of outcome 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. |
| 1. **Has progress been made, and if so, how much?** |
| See #4 |
| 1. **What has changed within the agency and what has been the impact on consumers served?** |
| 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 on-going 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 is in the process of updating VRC performance evaluation standards to increase alignment with WIOA performance indicators. TA and guidance have aided this endeavor.   As a result, the impact on customer served has been:   * NA, activities are in process. |
| 1. **What has worked well and what has been a challenge?** |
| 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. * The agency has been collaborative and invested throughout the engagement. * Agency leadership has stabilized over the most recent period of engagement.   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. |
| 1. **Describe any work with other TA Centers and how that went or is going?** |
| TA was provided to this agency in collaboration with NA. This joint effort is or was NA. |
| 1. **Future plans for the work?** |
| 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.



### Hawaii Combined

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| 1. What led to the request for TA? | Hawaii-C reached out to VRTAC-QM requesting technical assistance following their 2019 Monitoring and subsequent CAP. Initial requests were focused on fiscal findings including internal controls and contract issues as well as training related to eligibility and IPE. |
| 1. Activities | 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.  Technical Assistance specific to Fiscal Management had been delayed until a new fiscal administrator was 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, A-DRAN, Federal reporting requirements, contract monitoring, policy and procedure basics, and the changing landscape in VR.  Technical Assistance has been 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.  Monthly meetings continue to provide an update on the status of the activities within the ITAA workplan. 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. |
| 1. What is the intended impact of the work and how are we measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | 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 has been able to secure a fiscal position on the DSU side that serves as a bridge between the DSU and DSA.  The team checks in 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. |
| 1. What has worked well and what has been a challenge? | 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. Priorities within the agency continue to shift which poses a challenge to focus on specific tasks. |
| 1. Describe any work with other TA Centers and how that went or is going | The QM Team collaborated with the NTACT-C to focus on Pre-ETS improvements, including the SEA agreement. |
| 1. Future plans for the work | The QM team will continue to work on the activities within the ITAA and workplan. The Fiscal Management activities will continue now that the fiscal administrator is on board. |

The work plan for Hawaii is embedded below.



### Kansas Combined

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| 1. **What led to the request for TA?** |
| 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. |
| 1. **Activities** |
| 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. |
| 1. **What is the intended impact of the work and how are we measuring the impact so far?** |
| 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. |
| 1. **Has progress been made, and if so, how much?** |
| The agency reports that they are 25% of the way towards achieving the level of compliance with eligibility determinations that they are hoping for. In addition, they are 50% of the way towards reporting accurate and valid data for the RSA 911 and for CA and MSGs. |
| 1. **What has changed within the agency and what has been the impact on consumers served?** |
| 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. |
| 1. **What has worked well and what has been a challenge?** |
| 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.   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?** |
| 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?** |
| 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. |

The work plan for Kansas is embedded below.



### Kentucky Combined

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| What led to the request for TA? | For fiscal TA - KY-C reached out to VRTAC-QM for technical assistance following their 2021 RSA monitoring. Initial TA questions focused on the RSA-17 reporting and rate setting methodology.  For program and performance TA - The agency requested intensive technical assistance (ITAA) as a result of:   * Findings and/or recommendations resulting from the 2021 RSA 107 Monitoring   + Specific areas (5) 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.   Development and implementation of leave allocation methodology and process for PARS |
| What activities did you do, or are you doing? | For fiscal - During this reporting period, the VRTAC-QM supported KY-C with 10 intensive activities and 1 targeted activity. 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 - the agency is 10% of the way through training on the WIOA performance accountability system requirements, 10% of the way through revising counselor performance expectations to be consistent with the WIOA performance measures, and 50% of the way through the revision of policies and procedures and internal controls. |
| What is the intended impact of the work and how are you measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | For fiscal - To ensure KY-C is on a sound financial footing with the development of fiscal forecasting and a spending strategy and has documented fiscal policies and procedures that will survive staff turnover and centralized fiscal management. Progress is being tracked on their workplan. KY-C continues to work closely with VRTAC-QM on the new CMS conversion, which has been delayed due to deliverables not being met from the vendor. Continued discussion around period of performance as it relates to the new CMS will assist with a new system that will track expenditures to the detail needed and meet the obligation requirements.  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. A second update will follow with the implementation of a new CMS.   Internal performance accountability is being provided on a local/regional level supported through materials provided under TA. |
| What has worked well and what has been a challenge? | 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.   In addition, the following have been noted a challenge:   * Capacity limits due to efforts to transition to a new CMS.   Significant delays in transitioning to new CMS on the provider end. |
| Describe any work with other TA Centers and how that went or is going | The primary work was completed by QM. |
| Future plans for the work | For fiscal-The QM team will continue to work with KY-C on the activities within their ITAA workplan. Continued focus on the period of performance within the new CMS system, rate setting policy and procedures will be a priority moving forward.  For program and performance - KY-C will begin work with QM on data analysis related to WIOA performance measures and improvement of measures. Additional work includes a fiscal focus on leave allocation methodology, policies, procedures and internal controls; rate setting methodology, policies, procedures and internal controls. Additional TA will be provided in CMS conversion on both the fiscal requirements and 911 data requirements. |

The work plan for Kentucky Combined is embedded below:



### Maryland Combined

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| **Maryland Combined** |  |
| 1. What led to the request for TA? | 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. Activities | The primary activity through the end of Year 2 was the development of the database and the scrubbing of existing data. This was a monumental task that required significant hours by Maryland staff and Chris Smith of the VRTAC-QM. This was accomplished and data analysis began at the end of Year 2. The final tool is currently in BETA release and is being used to analyze now in Year 3. |
| 1. What is the intended impact of the work and how are we measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | 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. One of the early outcomes is that the agency identified multiple areas where their data was not valid or accurate. The “cleaning” process has helped get the agency to a place where it can trust its data and begin the process of analyzing it with confidence that what they are seeing is a good reflection of the truth.  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.  The agency reports that they have made at least 25% progress towards their ability to utilize evidence-based decision-making, especially related to CRP services, and they expect this number to increase dramatically through Year 3. |
| 1. What has worked well and what has been a challenge? | From the beginning, DORS staff have been completely committed to the project. They have worked consistently and met agreed upon timelines and outcomes. It has been a challenge for them to set aside this kind of time, but they have done it. |
| 1. Describe any work with other TA Centers and how that went or is going | Not applicable |
| 1. Future plans for the work | 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:



### Montana Combined

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| 1. **What led to the request for TA?** |
| 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?** |
| 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)   On the fiscal side: The work with Montana has been light this quarter at the VR agency’s discretion. There were a total of 4 intensive 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. |
| 1. **What is the intended impact of the work and how are you measuring the impact so far?** |
| 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 |
| 1. **Has progress been made, and if so, how much?** |
| The agency reports a 10% increase in collaboration and coordination with Federal, State and local organizations as a result of the work related to customized employment. There has been a 50% increase in the number and rate of consumers found eligible within 60 days of application as a result of the training received by the VRTAC-QM and 75% progress towards successfully reporting accurate and valid data related to the RSA 911 quarterly report. |
| 1. **What has changed within the agency and what has been the impact on consumers served?** |
| 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 customer 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?** |
| While providing TA the following have been noted as promising practices:   * 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.   In addition, the following have been noted 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.   Staff were eager to participate in fiscal training. 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?** |
| NA |
| 1. **Future plans for the work?** |
| 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 later this year. Additional work may be added to the ITAA in reviewing the new CMS functionality as it relates to period of performance. Also, looking into possible MOE and reallotment TA this upcoming year. |

The work plan for Montana Combined is contained below:



### New Jersey General

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| 1. **What led to the request for TA?** |
| 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?** |
| 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 – 50%   + 2.2 – 10%   + 2.4 – 25% * Program   + 2.3 – 10% |
| 1. **What is the intended impact of the work and how are you measuring the impact so far?** |
| * 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.   + To be measured by the results of case file reviews, and other quality assurance activities compared against the previous year’s actual numbers and/or rates. |
| 1. **Has progress been made, and if so, how much?** |
| See #4 |
| 1. **What has changed within the agency and what has been the impact on consumers served?** |
| 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.   As a result, the impact on customer served has been:   * NA, activities are in process. |
| 1. **What has worked well and what has been a challenge?** |
| 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:   * Capacity limits due to delays in hiring additional quality assurance staff. * Generally, challenged to grasp/implement all performance accountability requirements. * Inadequate service delivery model in the provision of services to SWD. * Repeated reporting errors. |
| 1. **Describe any work with other TA Centers and how that went or is going?** |
| TA was provided to this agency in collaboration with NTACT:C. This joint effort is or was limited and not an ITAA activity. |
| 1. **Future plans for the work?** |
| TA with this agency will continue through January 2024 or until all ITAA activities are complete. |

The work plan for New Jersey General is embedded below:



### New Mexico General

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| 1. **What led to the request for TA?** |
| 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 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. * For fiscal - New Mexico General is under a Corrective Action Plan (CAP) and Program TA has been on-going for a bit, 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?** |
| 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 -- 25%   + 2.3 -- 25%   + 2.4 -- 25% * VR Regulations and Process   + 2.1 -- 50% * Fiscal - * 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 team has made two site visits to NM to work closely with them in the identified TA areas. There have been 6 intensive TA engagements since Oct 1, 2022. Fiscal is planning on intensive on-site training for the week of June 12, 2023. This will include the Regulations Walk-Through, Fiscal Basics, Internal Controls, Period of Performance, RSA-17, Prior Approval and Rate Setting. |
| 1. **What is the intended impact of the work and how are you measuring the impact so far?** |
| 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.  For fiscal - The intent is to shore up the knowledge across the organization and assist the NM team with getting CAP issues resolved. The policies and procedures around the fiscal components will be addressed after the initial fiscal training. In the meantime, we are addressing specific concerns and walking the leadership through the thought processes and requirements to fix some of the items. |
| 1. **Has progress been made, and if so, how much?** |
| To date the agency reports 25% progress in the outcome of accurately reporting valid data related to credential attainment and MSG. Staff knowledge in the fiscal area has increased by at least 10% according to the agency. |
| 1. **What has changed within the agency and what has been the impact on consumers served?** |
| 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 customer 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?** |
| 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. Its 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.   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?** |
| 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?** |
| 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. There is an onsite fiscal training scheduled for June 2023. |

The work plan for New Mexico General is embedded below:



### Pennsylvania Combined

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| 1. **What led to the request for TA?** |
| 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?** |
| 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 -- 90%   + 2.3 -- 90% * 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%   For 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. There have been 7 intensive TA engagements since Oct 1, 2022. |
| 1. **What is the intended impact of the work and how are you measuring the impact so far?** |
| 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 int\o the state requirements. |
| 1. **Has progress been made, and if so, how much?** |
| The agency reports that they are 75% of the way towards increasing the reporting accuracy and validity of data related to the RSA 911 quarterly reports, 90% of the way towards the outcome of reporting accurate and valid data related to CA and MSGs and 50% of the way towards the outcome of increasing staff knowledge related to documenting when costs are reasonable, allowable, allocable and necessary. |
| 1. **What has changed within the agency and what has been the impact on consumers served?** |
| 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.   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?** |
| 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.   In addition, the following have been noted 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. * The primary challenge for fiscal TA has been staff turnover and retention. The ability to get the entire team on the same page has been extremely beneficial. The challenges include making sure 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. |
| 1. **Describe any work with other TA Centers and how that went or is going?** |
| 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. 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?** |
| 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 3 annual report once OVR has finalized the changes. |

The work plan for Pennsylvania Combined is embedded below:



### South Carolina General

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| **South Carolina-G** |  |
| What led to the request for TA? | 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. |
| What activities did you do, or are you doing? | The QM team was onsite twice during this period to conduct field and supervisory staff training.  There were 22 intensive activities undertaken by the Fiscal team and 2 targeted activities performed by the 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 95% completed and has also been reviewed by RSA. The SCVRD team has started a public hearing on those policy changes necessitating public comment, with the first hearing happening in January. Additionally, work began on the fiscal policies and procedures with the completion of drafts of the RSA-17 and SF 425 reporting policies and the prior approval policy. The rate-setting methodology is in the works. 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 a 90% 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. |
| What is the intended impact of the work and how are you measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | To ensure the agency operates with up-to-date policies and procedures that are reflective of Federal regulatory requirements and 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. About 95% 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. |
| What has worked well and what has been a challenge? | The dedication of the Commissioner and the key staff to learning and completing these activities has been remarkable. They are all in. There were some challenges with the fiscal team and policy/procedure drafting completion. The dedication of other SCVRD staff to assist in writing the drafts has helped movement in this area. There has been frequent turnover in the fiscal team, which has made daily operational work challenging. |
| Describe any work with other TA Centers and how that went or is going | The primary work was completed by QM. |
| Future plans for the work | Continue to focus on the development of the fiscal policies and procedures. Training of field staff in the Federal cost principles (A-DRAN). Completion of the rate-setting process. |

The work plan for South Carolina General is embedded below:



### Washington Blind

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| **Washington Blind** |  |
| 1. What led to the request for TA? | 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. |
| 1. Activities | 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. |
| 1. What is the intended impact of the work and how are we measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | 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. We are working together to go through the exemplar practices with them in a series of meetings throughout 2023. |
| 1. What has worked well and what has been a challenge? | 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. |
| 1. Describe any work with other TA Centers and how that went or is going | Primary work completed by the QM. |
| 1. Future plans for the work | We will continue with the leadership training and working with the agency on their policies and procedures and internal controls. |

The work plan for Washington Blind is embedded below:



### Wyoming Combined

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| **Wyoming-C** |  |
| What led to the request for TA? | Originally, 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. |
| What activities did you do or are you doing? | There were 15 intensive activities during this period, 2 targeted activities conducted by the QM Fiscal team and 2 targeted activities conducted by the Program and Performance QM team. Some of these activities spanned a series of events within the same week. The focus during this rating 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 customers' needs through the remainder of the year. Many discussions were held about strategies for securing additional long-term match sources and the VR program was given the green light by the DSA to go forward with a proposal for additional state appropriated dollars in the December legislative session. Other activities have focused on the documentation of the development of policy/procedure around contract monitoring, Federal financial reporting, and the period of performance. Training was conducted with the new DSA fiscal staff assigned to VR to ensure they are aware and understand the nuances of the fiscal requirements for the management of this grant. The QM team has also provide comments regarding the implementation of the fiscal aspects of the new case management system to ensure the program gets what it needs in terms of functionality. |
| What is the intended impact of the work and how are you measuring the impact so far? Has progress been made, and if so, how much? What has changed within the agency and what has been the impact on consumers served? | QM wants to ensure that agency fiscal policies/procedures/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 team checks in monthly with DVR and assesses the completion of the workplan activities. 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 having to enter into an order of selection which impacts the consumers served in Wyoming. |
| What has worked well and what has been a challenge? | The challenge is continued turnover with DSA fiscal staff and ensuring new staff are trained and up to speed with the VR fiscal requirements. Their small staff makes it difficult to complete tasks quickly. We are pacing the work so it is in smaller increments and can get done. |
| Describe any work with other TA Centers and how that went or is going | The NTACT:C has been involved with the Pre-ETS side of the program. |
| Future plans for the work | The program expects the draft monitoring report any day. Depending on the result of that report, additional activities may be added to address those needs identified. We will continue to work on developing the fiscal policies and procedures and focus on the implementation of the contract monitoring process and continued input in the new case management system functionality. Reviewing and advising on the spending plan and projections for FFY 24 are also on deck. |

The work plan for Wyoming Combined is embedded below:



## SWOT assessment tools development and assessments conducted

There have been 16 SWOT analyses conducted through the second quarter of Year 3. All of these resulted in an ITAA. 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 the second quarter of Year 3. The report will be submitted to RSA 90 days after the end of the quarter in order to include information from the semi-annual report.

# Targeted TA

The requests for targeted TA have remained frequent and have touched 77 of 78 (99%) VR agencies through the end of the second quarter of Year 3. Table 2 identifies the targeted TA for the second quarter of Year 3. The totals for the project are found in the update on project measures later in the report.

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

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

| **Agency** | **Request** | **Number Receiving TA** |
| --- | --- | --- |
| Arizona Combined | Fiscal and resource QM; period of performance and CMS data collection; reporting | 12 |
| Arkansas Blind | CMS data collection and reporting; P&P and internal controls; SWD | 1 |
| Arkansas General | Program income; fiscal and resource QM; rate setting and P&P; Monitoring CoP | 5 |
| California Combined | Leadership development and peer mentoring; pre-ETS fiscal; | 58 |
| CNMI Combined | P&P and internal controls; Reporting on post-exit; Post-employment | 8 |
| Colorado Combined | Training on grant management; Leadership training on grants management | 222 |
| Connecticut General | Data analytics for program improvement; Performance improvement | 6 |
| Delaware Blind | P&P and internal controls and reporting | 1 |
| District of Columbia | CAP response and work plan, CMS data collection, and pre-ets fiscal; Reporting and pre-ETS | 8 |
| Florida Blind | Training on assignment of obligations, period of performance, fiscal reporting, grants management and EDGAR; Spending strategies; fiscal and resource QM; fiscal reporting; monitoring CoP; indirect cost/cost allocation and pre-ETS fiscal; Sources of match; | 72 |
| Florida General | Fiscal QM; rapid engagement strategies | 3 |
| Georgia Combined | Monitoring support and program and performance QM; Data analytics; Monitoring CoP; | 27 |
| Guam Combined | Data analytics, P&P and internal controls, reporting and staff training; Monitoring CoP; | 14 |
| Idaho General | P&P and internal controls; fiscal and resource QM | 2 |
| Indiana Combined | P&P and internal controls for fiscal; Monitoring CoP; pre-ETS fiscal; CMS data collection; fiscal QM; | 22 |
| Kansas Combined | Fiscal TA; | 4 |
| Louisiana Combined | P&P and internal controls; Monitoring CoP | 3 |
| Maine General | Community partnerships | 2 |
| Maryland Combined | Leadership training; Consultation on QM; | 140 |
| Massachusetts General | P&P and internal controls; Fiscal QM | 5 |
| Michigan Blind | CMS data collection and reporting; | 1 |
| Michigan General | Pre-ETS fiscal; P&P and internal controls; TPCA review | 17 |
| Minnesota Blind | Fiscal basics training | 13 |
| Minnesota General | Fiscal basics training; fiscal TA; program and performance QM; fiscal and resource QM; | 31 |
| Mississippi Combined | P&P and internal controls; advancing in employment eligibility determination | 4 |
| Multiple States | NRLI; Training Director CoP; Monitoring CoP; Rapid Engagement CoP, SE and CE CoP | 91 |
| Nevada Combined | Monitoring CoP | 2 |
| New Hampshire Combined | P&P and internal controls; case file review QA; fiscal TA | 2 |
| New Jersey Blind | SRC and CAP | 2 |
| New Jersey General | P&P and internal controls-fiscal; More policy review | 3 |
| New Mexico Blind | Monitoring CoP | 1 |
| New Mexico General | CMS data collection | 4 |
| New York General | P&P and internal controls; reporting and CMS data collection | 2 |
| North Carolina Blind | P&P and internal controls; fiscal TA | 3 |
| North Carolina General | Spending strategies, pre-ETS fiscal; Monitoring CoP | 10 |
| North Dakota Combined | P&P and internal controls | 3 |
| Ohio Combined | Monitoring CoP | 2 |
| Oklahoma Combined | Monitoring CoP | 2 |
| Oregon Blind | P&P and internal controls; monitoring CoP; pre-ETS fiscal; CMS data collection; post-exit; | 14 |
| Oregon General | P&P and internal controls, program improvement | 2 |
| Pennsylvania Combined | QA; program consultation; fiscal and resource QM | 4 |
| Puerto Rico Combined | Monitoring CoP | 1 |
| Rhode Island | Leadership training; fiscal TA | 20 |
| South Carolina Blind | Period of performance and fiscal reporting; | 6 |
| South Carolina General | P&P and internal controls; pre-ETS fiscal; period of performance validation | 11 |
| South Dakota Blind | CMS data collection and reporting; | 1 |
| South Dakota General | CMS data collection and reporting; | 2 |
| Tennessee Combined | Monitoring CoP; data analytics; P&P and internal controls; reporting; monitoring CoP; monitoring support | 34 |
| Texas Combined | Monitoring CoP; grants management training | 163 |
| Utah Combined | Reporting; CMS data collection and P&P and internal controls | 4 |
| Vermont Blind | Pre-ETS fiscal and contracting | 5 |
| Vermont General | Fiscal and resource QM; | 7 |
| Virgin Islands | Pre-ETS fiscal; P&P and internal controls; WIOA performance | 9 |
| Virginia General | Personnel costs; P&P | 2 |
| Washington Blind | SSA tracker; fiscal and resource QM; program and performance QM; | 11 |
| Washington General | Policy review and best practices | 1 |
| Wisconsin Combined | Program and performance QM; P&P | 2 |
| Wyoming Combined | Data validation and internal controls | 1 |
| **Totals = 58 agencies (including multiple listings of multiple agencies);  124 targeted TA events (separated by semi-colon in list above including ten events in multiple listings)** | | **1108** |

A total of more than 58 SVRAs requested some form of targeted TA during the second quarter. There were 1108 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 77 of the 78 VR agencies (99%). There have been a total of 1007 targeted TA events since the QM began and 7,169 SVRA staff that have participated in these events (not an unduplicated count).

## Targeted TA of Note in Year 3, Quarter 2:

1. Allison Flanagan provided a virtual training to more than 200 people in Colorado VR on grants management.
2. Provided fiscal training for 27 staff of Florida Blind on assignment of obligations, period of performance, fiscal reporting, grants management and EDGAR.
3. Melissa Diehl conducted an extensive review of a potential contract for pre-employment transition services contract for Indiana. This was an essential activity to help the agency ensure that they were contracted for an allowable cost and an allowable authorized service.
4. John Walsh provided a full day leadership training for administrative staff at Maryland Combined. Training focused on highlighting knowledge and skills that were presented in two webinars co-produced by VRTAC-QM and CIT-VR, Managing the Shift from Peer to Supervisor and Coaching Strategies for Performance Excellence. This is the first training in a series of training events that were co-developed with the agency with the goal of providing professional development activities for those in middle management roles. There were 134 participants.
5. Provided training for Emerging Leaders in Rhode Island. This is the second cohort and consisted of 19 individuals.
6. Provided training to 162 staff at Texas VR on managing the VR grant and the fiscal requirements.

## Communities of Practice:

### Customized Employment Community of Practice (CoP)

**Goal:** The goal of the bi-monthly CE CoP meetings is to facilitate the exchange of information between state agencies that supports 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 lead jointly by VRTAC-QM and Cornell University with VRTAC-QE participating regularly.

**Meeting Summary:**

The CE CoP met twice this quarter on January 25th and February 22nd. Future meetings will occur every other month on the last Wednesday of that month so the next meeting is scheduled for April 26th.

The following State VR agencies participated for that meeting were:

Arizona C., California C., Colorado C., Florida G., Idaho G., Iowa G., Kentucky C., Louisiana C., Michigan G (MRS)., Michigan Blind (BSBP), Minesota G., Montana C., New Jersey G., North Dakota C., Oklahoma C., Pennsylvania C., Texas C., Utah C., Virginia G., and Washington G. for a total of 20 VR agencies and 26 VR staff.

TA staff participating in this CE CoP included: Sean O’Brien, SDSU – VRTAC-QM and Wendy Quarles, Cornell U. who co-facilitate this meeting as well as Emily Brinck, VRTAC-QE and Ellen Condon, National Center on Deaf-Blindness.

**Agenda Summary:**

* Updates from VRTAC-QM, VRTAC QE and Cornell University regarding available TA support
* State roundtable updates and cross-agency exchanges on a variety of topics including:
* Building CE and SE into IPE framework
* Discerning CE’s “Discovery” vs Pre-ETS activities
* CA CE and IPS models including service structure/rates including how they use a “Mini-Discovery” process initially for IPS consumers
* On-going provider capacity challenges in terms of turnover and cultivating high quality staff
* CO CE model; aspects of success related to reducing CE training costs and building provider capacity and CE internal training development utilizing several different CE trainers who are both internal (CO Office of Employment First) and external such as GHA and MGA
* KY recently developed three CE establishment projects/contracts 9-10 provider staff for expanding CE to be implemented March 1st. The upfront costs to complete CE training has been an issue. These grants will help with funding that training. CE training in KY occurs through their UCED (U. of KY) including all 4 CE “Gateways” and 3 associated certifications. Their training model is based on MGA’s CE training model
* NJ summarized their CE training model which is done in coordination with VCU who provides the 40 hour training and mentoring
* OK bringing CE back after several years of inactivity. They are utilizing VRTAC-QE/VCU training/TA for that purpose
* Interest in understanding more about “Group Discovery” which will be explored in future meetings

### Supported Employment CoP

**SE CoP Background**:

VRTAC-QM collaborated with the George Washington University’s Center for Innovative Training in VR (CIT-VR) to help support the continuation of SE CoP meetings initially started under WINTAC in July 2017. CIT-VR is the lead agency in setting up, facilitating and record keeping for these meetings while VRTAC-QM supports these calls especially in the system’s related work. In addition, staff from the VRTAC-QE and subject matter experts from Cornell University participate and provide TA regularly in these calls. Under this new structure, the first meeting was held on 3/19/21 and then, subsequently meets on a bi-monthly basis. These meetings occur every other month on the third Wednesday of that month.

There are currently 70 members that are part of the SE CoP listserv. Meetings generally have approximately 20 members who attend representing up to 19 SVRA (AZ-C, CO-C, FL-G, KY-C, LA-C, MI-B, MO-G, MS-C, MT-C, ND-C, NE-G, NJ-G, NJ-B, OR-G, PA-C, TX-C, UT-C, WA-G.) In addition, there is participation by members of VRTAC-QE (UW-M) and Yan Tang Institute (Cornell). In addition, the SE CoP includes an on-line community with 24 members. The online community serves as a venue to share resources and to have discussion threads on particular topics. The community is only open to members of the SE CoP.

**SE CoP Goal:**

The goal is to improve the delivery of SE services in their agencies resulting in better employment outcomes for those they serve. The SE CoP community serves as a forum for an exchange of ideas, innovation and information to assist members identify challenges and solutions in delivering SE services for their consumers that are in alignment with the Rehabilitation Act of 1973 as amended by WIOA 2014, and related sub-regulatory guidance from RSA including addressing pre and post monitoring questions related to SE.

**Topics Included:**

* + CRP capacity building strategies including addressing:
    - provider turnover
    - Quality
    - training and monitoring of SE services and
    - provider fee structures.
  + States sharing providing overviews of how they have structured and are successfully providing SE services.
  + Strategies to transition folks from Sheltered Employment to SE/CIE.
  + Overview of CIE Placement Verification Tool (CO-C)
  + What protocols are in place to verify provision of services by CRPs.
  + Strategies related to VR agencies partnering with employers to pay them directly to provide supports and training that a CRP would typically provide.
  + Community questions (open forum for discussion)

Output Metrics:

|  |  |
| --- | --- |
|  |  |
| **Date** | 11/16/2022 |
| **Time** | 1:00 - 2:30 pm |
| **Title** | Bi-monthly meeting |
| **Venue** | Zoom |
| **# of Participants** | 20 |
| **Comments** | Attendance included a total of 20 participants representing 12 SVRAs: AZ-C, CO-C, MO-G, MT-C, ND-C, NE-G, NJ-G, NJ-B, PA-C, TX-C, UT-C, & WA-G. as well as representatives from CIT-VR, VRTAC-QM, VRTAC-QE, UNTWISEW and YTI-Cornell |
|  |  |
| **Date** | 1/18/2023 |
| **Time** | 1:00 - 2:30 pm |
| **Title** | Bimonthly meeting |
| **Venue** | Zoom |
| **# of Participants** | 18 |
| **Comments** | Attendance included a total of 18 participants representing 10 SVRAs: MS-C, PA-C, LA-C, MI-B, FL-G, NJ-G, WA-G, MO-G, OR-G, & ND-C as well as representatives from CIT-VR, VRTAC-QM, VRTAC-QE, and YTI-Cornell |
|  |  |
| **Date** | 3/22/2023 |
| **Time** | 1:00 - 2:30 pm |
| **Title** | Bimonthly meeting |
| **Venue** | Zoom |
| **# of Participants** | 18 |
| **Comments** | Attendance included a total of 18 participants representing 11 SVRAs: MS-C, LA-C, FL-G, NJ-G, WA-G, MO-G, CT-G, NE-G, AZ-C, KY-C, and CO-C as well as representatives from CIT-VR, VRTAC-QM, VRTAC-QE, and YTI-Cornell |

### Case File Review CoP

|  |  |
| --- | --- |
| 1. **Agencies** | |
| 1. Delaware Division for the Visually Impaired🞲 2. Hawaii Division of Vocational Rehabilitation🞲 3. Kansas Rehabilitation Services🞲 4. Michigan Bureau of Services for Blind Persons 5. Michigan Rehabilitation Services 6. Minnesota State Services for the Blind 7. Mississippi Department of Rehabilitation Services 8. Montana Vocational Rehabilitation & Blind Services🞲 | 1. New Jersey Division of Vocational Rehabilitation Services🞲 2. Oregon Commission for the Blind 3. Oregon Office of Vocational Rehabilitation Services 4. South Dakota Division of Rehabilitation Services 5. Washington Division of Vocational Services 6. Wisconsin Division of Vocational Rehabilitation 7. Wyoming Division of Vocational Rehabilitation🞲   **🞲ITAA 6 Combined/5 General/4 Blind** |
| 1. **TAC-QM Lead(s)** | |
| * Crystal Garry & Bill Colombo | |
| 1. **What activities did you do, or are you doing?** | |
| * The Case Review Community of Practice/Workgroup (CoP) was established to help State Vocational Rehabilitation agencies (SVRA) identify, understand, and implement case review practices which may partially satisfy the SVRA’s requirement to “monitor its activities under Federal awards to assure compliance with applicable Federal requirements and performance expectations are being achieved” as outlined in 2 CFR 200.329(a). * The CoP has served as a workgroup for which each SVRA representative is actively engaged, on behalf of the respective agency, to develop and present a final product for implementation within the SVRA to promote the quality management of the VR program. | |
| 1. **What is the intended impact of the work and how are you measuring the impact so far?** | |
| * The overarching objective of the CoP is to facilitate the design of an agency-specific tool that the SVRA will use to monitor the compliance and effectiveness of case activities. * The impact of the CoP will be formally assessed by the VRTAC-QM evaluation team on close-out. | |
| 1. **Has progress been made, and if so, how much?** | |
| * The CoP is a time-limited activity with a close cohort of SVRA representatives. This cohort closed-out in January 2023. All members reported value in participating in the CoP and completed or were continuing development of various end products as a part of the CoP objectives. The VRTAC-QM evaluation team will conduct a post-CoP evaluation 3-6 months out. | |
| 1. **What has worked well and what has been a challenge?** | |
| While providing TA the following have been noted as promising practices:   * The invitation by the co-leads to CoP members for a dedicated “Huddle” session to collaborate on agency specific interests around case file reviews. * Presentation’s by SVRA’s with model case file review practices. * Presentations by VRTAC-QM and NTACT:C staff on targeted case file review areas. * Use of the CoP forum for communication and posting resources. * The collection of a significant volume of member created case file review resources, e.g., policy, procedures, review tool/forms, PowerPoint slide decks…   In addition, the following have been noted a challenge:   * Feedback from CoP members during live Zoom sessions. | |
| 1. **Describe any work with other TA Centers and how that went or is going?** | |
| TA was provided to CoP members in collaboration with NTACT:C. Brenda Simmons presented on targeted case file review specific to pre-employment transition services. In addition, she provided direct TA consultations and material reviews with CoP members. Her contributions are valued by the CoP members and co-leads. | |
| 1. **Future plans for the work?** | |
| The Case File Review CoP will be evaluated for effectiveness. A second cohort may be considered for FFY’24 based on the evaluation results, SVRA needs, and internal capacity. The activity has resulted in the development of infrastructure and materials which would aid the implementation of a second cohort or similar topical initiatives. | |

### Fiscal Forum CoP

The QM Fiscal team holds a monthly Fiscal Forum the second Thursday of each month at 2 pm est. This meeting was originally intended to support participants of the Management Concepts courses and answer any follow up questions they have may have. However, that participation and scope has expanded to include staff managing the fiscal aspects of the grant. Participants send questions ahead of time and also bring questions to the meeting. The QM team prepares different topics for each session including any new RSA guidance, QM fiscal additions to the website and tools, and addresses topics related to the life cycle of the grant. Participation has steadily increased and we are seeing over 80 participants regularly.

### Monitoring CoP

VRTAC-QM, in collaboration with CSAVR, facilitates a Monitoring Community of Practice for SVRAs selected for RSA 107 monitoring each year. The VRTAC-QM developed tools to support the CoP participants, including a monitoring prep checklist, fiscal monitoring tips, and an Excel monitoring guide prep workbook. Monthly meetings were set up with SVRAs to go through the tools, offer an opportunity for SVRAs to share their preparation plans, and discuss how the monitoring process was proceeding. All agencies, except for two, participated in the CoP meetings. There were 30 participants this quarter and all indicated they received a lot of value from listening to how their colleagues were preparing and dealing with the monitoring process.

### Rapid Engagement CoP

**Introduction:**

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 new 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 will meet on a regular schedule via Zoom. A closed group on the VRTAC-QM Training Portal will 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.

**Progress to date:**

Monday, December 12, 2022 was the kick-off session for the community. The discussion focused on what the community members want to accomplish by participating in the group and what support can the facilitators provide to assist them to achieve their plans to change services processes to improve the speed and efficiency in moving folks from application to service provision in State VR agencies. (Please refer to the notes from that meeting for core themes). At the completion of the first meeting, members were asked to do the following:

* Review your current agency’s eligibility policies and procedures and to look for choke points that slow down the process.
* Examine your organizational culture related to this topic to see how it contributes to the current status quo.
* Identity choke points
* Identify areas of improvement
* The members also agreed to meet monthly for the next six months, and a schedule of meetings were locked in for that time.

At the January 23, 2023 meeting, members were prepared for the discussion around service processes linked to eligibility determination and identified choke points and areas of improvement. Relevant sections of the CFR regarding eligibility determination were provided to members. (Please refer to the notes from that meeting for the themes that emerged). As is our practice for this community, the action steps are reviewed on what are the next steps to move forward the initiatives in each of the State VR agencies to implement rapid engagement strategies. The action steps for the members were to investigate how counselors/supervisors may be conflating the eligibility process with the comprehensive assessment process. Does that occur in your agency, and how can the two be separated? Members were tasked with reporting out their findings and share resources.

Additional members joined our community and there are currently 31 members who have signed up for our online community hosted on the VRTAC-QM training portal. Membership includes folks in various roles from VR Counselors to Directors. There was a robust discussion on how often the eligibility process and comprehensive assessment are often conflated by Counselor and Supervisors. Strategies were explored to separate the two process and a resource was shared by the representative from ID-G, that provide guidance on the comprehensive assessment process. In addition, the sections of the CFR that cover the comprehensive assessment, i.e, assessment for determining vocational rehabilitation needs, was provided as a resource sheet to the group. The next meeting of the group will occur on March 27, 2023 and members were asked to prepare by gathering the following information to share with the group:

* What are your specific plans for moving the needle to more rapidly engage your consumers?
* What are the baseline data that you are using to lay the foundations for your work? What specific steps are you taking as an agency to increase the speed that you determine eligibility or develop the IPE?
* What are the additional choke points?

## Executive Leadership Seminar Series-National Rehabilitation Leadership Institute:

The demand for The Executive Leadership Seminar Series – NRLI was so significant in Year Three that we had to create two cohorts instead of one. The full list of participants for each cohort is attached to this report and includes name, agency and title. Participants attended the first week-long session in San Diego this quarter and receive individual coaching throughout the year to support their professional development and help them work through challenges they may face in implementing the leadership skills they learn.

## Program Evaluation:

Full program evaluation results are included in the PE report that follows 60 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 a targeted to a specific VR agency.

## Website Analytics for Year 3 Quarter 2

**Website Traffic Overview**

| **Overview** | **Counts** | **Quarterly Difference** |
| --- | --- | --- |
| **Overview** | **Counts** | **Overview** |
| Unique visitors | 4,519 | Unique visitors |
| Page views | 24,420 | Page views |
| Visits | 10,080 | Visits |
| Returning Visitors | 8.4% | Returning Visitors |
| New Visitors | 91.6% | New Visitors |
| Pages per Visit | 2.4 | Pages per Visit |

**Top 10 Pages Visited**

| **Pages** | **Page Views** | **Percentage** |
| --- | --- | --- |
| 1. Home | 4,519 | 19% |
| 1. VRTAC-QM Training | 2,538 | 10% |
| 1. VR Grants Management Certificate | 1,117 | 5% |
| 1. VR Program Fiscal Management | 1,110 | 5% |
| 1. Program & Performance Quality Management | 706 | 3% |
| 1. Fiscal & Resource Quality Management | 662 | 3% |
| 1. About Us | 623 | 3% |
| 1. CoP | 613 | 3% |
| 1. Resources | 612 | 3% |
| 1. WIOA Performance Indicators | 328 | 1% |

**Traffic Overview by States – 10 States with Higher Traffic**

| **Region** | **Total users** | **New users** | **Engaged sessions** | **Engagement rate** | **Event count** |
| --- | --- | --- | --- | --- | --- |
| 1. Virginia | 386 | 357 | 655 | 87% | 7,379 |
| 1. California | 256 | 220 | 441 | 90% | 8,880 |
| 1. Washington | 290 | 260 | 435 | 86% | 2,942 |
| 1. Florida | 215 | 193 | 428 | 87% | 3,870 |
| 1. New York | 226 | 191 | 347 | 84% | 3,388 |
| 1. Texas | 263 | 237 | 339 | 89% | 2,835 |
| 1. Minnesota | 66 | 50 | 330 | 84% | 3,250 |
| 1. Georgia | 136 | 115 | 293 | 79% | 2,968 |
| 1. Pennsylvania | 104 | 80 | 293 | 80% | 3,084 |
| 1. Michigan | 131 | 101 | 282 | 82% | 2,621 |

## Universal TA of Note in the 2nd Quarter of Year 3:

1. The VRTAC-QM has spent a considerable amount of time, energy and resources preparing for the Spring CSAVR conference in Bethesda in April. Our staff took the lead in preparing content for the conference general session and pre-conference sessions. We will report on this more thoroughly in next quarters report since the conference occurred in the third quarter of this year. There were two pre-conference sessions that occurred in this quarter and they are detailed below
2. CSAVR pre-conference presentation - Embracing the possibilities: creating a culture for customer-centric spending for field staff – 395 participants.
3. CSAVR pre-conference session – Why Measures Matter: Harnessing good data to make good decisions at the field level – Approximately 300 participants.
4. Podcast numbers –
5. January podcast numbers- Podcast with David D the Idea Guy – 304 downloads
6. February podcast numbers – 365 downloads
7. March podcasts – 359 downloads
8. There have been 5,994 downloads all time.

## Trainings:

The summary of online trainings and CRC certificate completion is contained in Table 3:

Table 3:

*Training Summary to date*

| **Training** | **Enrollment** | **Certification of Completion** | | **CRC Verification** | |
| --- | --- | --- | --- | --- | --- |
| Ethics, Supervision, and Technology (QM2021-0301) | 50 | | 36 | | 36 |
| Managing the Shift (QM2021-0302) | 37 | | 13 | | 13 |
| Resolving Conflict (QM2021-0303) | 20 | | 7 | | 7 |
| Non-Delegable Responsibilities (QM2021-0305) | 13 | | 6 | | N/A |
| SRC (QM2021-0306) | 73 | | 24 | | 17 |
| Data Validation (QM2022-0101) | 13 | | 5 | | 5 |
| Case File Review Systems (QM2022-0102) | 12 | | 5 | | 5 |
| Pre-ETS Tracking (QM2022-0103) | 16 | | 6 | | 6 |
| Data Literacy Training Series (QM2022-0104) | 167 | | 75 | | 75 |
| \*RSA Data Dashboards (QM2022-0105) | 109 | | N/A | | N/A |
| Credential Attainment Rate (QM2022-0301) | 15 | | 7 | | N/A |
| Coaching Strategies (QM2022-0302) | 28 | | 8 | | 8 |
| The Crossword Puzzle of Management - Managing Up and Across (QM2022-0303) | 38 | | 11 | | 11 |
| Rapid Engagement in Vocational Rehabilitation - Module 1 (QM2022-0304) | 358 | | 216 | | 216 |
| Performance Management (QM2022-0305) | 61 | | 24 | | 24 |
| Onboarding - Lessons Learned (QM2022-0306) | 148 | | 47 | | 47 |
| Advancement in Employment (QM2022-0307) | 170 | | 39 | | N/A |
| Rapid Engagement Module 2: Training for Counselors (QM2022-0308) | 292 | | 132 | | 132 |
| Long COVID: Under What Circumstances Is It a Disability? (QM2022-0309) | 148 | | 39 | | 39 |
| Case Service Report (RSA-911) PD 19-03 Training Series (QM2022-0901) | 26 | | 2 | | N/A |
| Case Service Report (RSA-911) Training for VR Counselors (QM2022-0902) | 41 | | 12 | | 12 |
| \*Enhancing Team Performance in the Eye of Organizational Storms (QM2023-0301) | 117 | | 32 | | 32 |
| \*Rapid Engagement in VR Module 3 (QM2023-0302) | 52 | | 11 | | 11 |
| **Total** | **2004** | | **757** | | **696** |

\* Trainings newly added during the quarter.

## Distribution Lists:

| **Distribution List** | **# of Subscribers** |
| --- | --- |
| Program & Performance QM | 1479 |
| Fiscal QM | 1429 |
| General QM of Organization | 1442 |
| **Total Subscribers** | 1493 |

# Collaboration with other TA Centers

We continue to lead collaboration efforts among the TA Centers as evidence by the following:

1. We have joint ITAAs with the NTACT:C in four agencies: Kansas, Pennsylvania, Hawaii and New Jersey General.
2. Since the launch of the VRTAC-QM in FFY 2021, leadership from both CIT-VR and VRTAC-QM have sought ways to work collaboratively on projects that align with their respective grant projects with the common goals of producing training and tools to increase knowledge and skills of personnel working in State VR agencies. We have collaborated with them on the Supervisor Training series and the rapid engagement training series. Below is a summary of the rapid engagement training series:

Rapid Engagement in VR Training Series

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. This four-module series being developed collaboratively will highlight various facets of rapid engagement that include strategies for administrators and counselors, the role of community partners, and strategies for engaging youth and young adults.

*Module 1: Rapid Engagement in Vocational Rehabilitation: A Call to Action*

This first module in the training series makes the case that streamlining and expediting the processes associated with eligibility determination and IPE development in State VR agencies is a practice that will have positive impacts in maximizing the likelihood that consumers will be active and full participants in their rehabilitation plans and achieve successful outcomes.

* Part 1 – Background and Purpose of Training provides an overview of the data and background on why rapid engagement is an effective strategy and demonstrates the linkages with better outcomes based on data from the RSA 911.
* Part 2 - Administrator’s Perspective focuses on strategies for administrators to assess their current service practices and develop change initiatives to incorporate rapid engagement strategies as part of their service models. Examples are also provided of agencies that successfully implemented these practices, demonstrating important strategies to implement that are linked with better outcomes for VR participants.

*Module 2: Rapid Engagement: Training for Counselors*

This second module in the series is a practical look at how VR counselors can apply rapid engagement strategies in their work to keep individuals with disabilities actively engaged throughout the VR process. The training reviews regulations relevant to the essential VR processes (e.g., handling Referrals, taking Applications, making Eligibility Determinations, developing Individualized Plans for Employment, and providing services leading to employment outcomes). Throughout this discussion, new methods of service delivery consistent with regulatory requirements are specifically highlighted so that counselors can provide efficient and effective support to individuals with disabilities seeking VR services. The training concludes with some case examples that will allow VR counselors to Apply the information presented throughout this module so that they can more readily implement rapid engagement strategies in their service delivery practices.

*Module 3: The Essential Role of VR Partners and Providers*

This presentation focuses on the delivery of services outside of a State VR agency, emphasizing the importance of State VR agencies playing a lead role in the development of partners and resources needed to provide services in the most efficient manner. In addition, this presentation focuses on the importance of understanding current inter-agency processes and improving them to reflect the principles of rapid engagement highlighted in the previous presentations.

Participants are encouraged to read RSA Technical Assistance Circulars 15-01 and 15-02 that provide guidance around resource identification, partnership development and continuous improvement of processes to meet the needs of the customers and reach the vision of competitive integrated employment for persons including those with the most significant disabilities.

*Module 4: Reimaging Student and Youth Engagement: Awareness to Action (Coming 5/2023)*

This module will explore the following factors that can hinder or facilitate VR professions engagement with students and youth. The following areas will be addressed:

* Explain the inherent power differential that exists within the Youth-Transition Relationship.
* Explain why shifting the power differential in the transition-relationship from being the “adult” to being an active "Adult Ally" supports student and youth engagement and meaningful involvement.
* Explain a process that can help adults recognize and shift from being the adult to being an active Adult Ally.
* List strategies to support continuous engagement of students and youth

| **Title of Training** | **Q1**  **FY23** | **Q2**  **FY23** | **Q3**  **FY23** | **Q4**  **FY23** | **Since date published** |
| --- | --- | --- | --- | --- | --- |
| **Module 1: A Call to Action**  **(8/22/2022)** |  |  |  |  |  |
| Page Views | \* | \* | \* | \* | \* |
| Enrolled |  | 358 |  |  | 521 |
| Feedback |  | 61 |  |  | 101 |
|  | | | | | |
| **Module 2: Training for Counselors**  **(11/28/2022)** |  |  |  |  |  |
| Page Views | \* | \* | \* | \* | \* |
| Enrolled |  | 292 |  |  | 292 |
| Feedback |  | 132 |  |  | 132 |
|  | | | | | |
| **Module 3: Training for Counselors**  **(11/28/2022)** |  |  |  |  |  |
| Page Views | \* | \* | \* | \* | \* |
| Enrolled |  | 52 |  |  | 52 |
| Feedback |  | 11 |  |  | 11 |
|  | | | | | |
| **Module 4: Reimaging Student and Youth Engagement: Awareness to Action (coming 5/2023)** |  |  |  |  |  |
| Page Views |  |  |  |  |  |
| Enrolled |  | n/a |  |  | n/a |
| Feedback |  | n/a |  |  | n/a |
|  | | | | | |

1. We meet with the VRTAC-QE on a bi-weekly basis to review joint VR agencies and keep each other informed; and
2. We continue to lead the TAC collaborative monthly calls.

# Special Projects

## Community Reinvestment Act Project:

**Purpose**

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

**Quarter 2 Activities - Overview**

The NDI Team began the federal fiscal year with the objective of having two SVRA and Financial Institution partnerships established by the end of the project year. These partnerships were to include bank contributions to be used by SVRAs to match federal funds with which they would generate career outcomes for SVRA participants meeting SVRA outcome objectives and Bank desired outcomes from their investment.

**Activities with Financial Institutions and Regulators**

The NDI Team has consulted with the bank and regulatory representatives advisory group of the Center for Disability-Inclusive Community Development (managed by NDI) to process the feedback received from discussions with banks the previous year, to articulate the lessons learned and suggestions that can be drawn from those lessons. Facilitated calls with bank representatives were held on February 15 and March 22, and another with bank regulators will occur on May 9, 2023. The Office of the Comptroller of the Currency (OCC) and Federal Deposit Insurance Corporation (FDIC) regulate and monitor bank activities, including those related to the Community Reinvestment Act (CRA).

The Project Team is using the insights from these advisory groups to create a better informed but natural process for SVRAs and financial institutions to partner together. Already, this additional input is shaping the team’s original partnership ‘hypothesis’ to have a clearer test in the objective to draw down matching funds.

The feedback from bank representatives has provided valuable insight into addressing solutions to challenges identified during the previous quarter. The NDI team identified key questions based on assumptions we have heard from banking partners and regulators on this approach. An example of the questions that were asked for the banking partners to address included:

Do financial institutions prefer not to give investments to a government agency such as Vocational Rehabilitation? (*this was identified as a challenge in our initial outreach to banks last year with the SVRA proposals)*

If yes, how do financial institutions give to programs that support a government agency?

If giving the funds to an intermediary, do financial institutions prefer to give to a CDFI or CBO like United Way?

VR employment outcomes may take 2-4 years for results. Is that too long for a one-year investment since employment outcomes may not be available within one year?

The cost per employment outcome may be $10,000 per year. Is this cost per individual too high to be an attractive CRA activity? If yes, what are possible solutions, as that is the total cost (on average) for case management, training and job placement services?

What is the average number of people served that financial institutions like to see under CRA investment?

How would a bank like to be contacted by a SVRA?

Who is the best person at a bank for SVRA staff to contact (correct point person) for this type of activity?

The example questions highlighted above were all questions that a SVRA would potentially receive from a financial institution. This insight allows us to develop a template for SVRAs to use in addressing questions. The feedback also allows the NDI team to tighten up the approach to building partnerships between the two. During the current quarter, the NDI team is analyzing the feedback received. The feedback will then be used for the regulator roundtable based on what we have learned from the banking partners. This additional layer of soliciting additional feedback from the regulators is that the approach will be analyzed by the group that provides oversight to financial institutions. Because this approach is new, banks ask if banking regulators will approve this type of activity. Hopefully, this due diligence will strengthen a partnership that is both viable and sustainable for SVRAs.

The NDI team will continue to identify organizations that can operate as financial agents or intermediaries in passing bank funds through to SVRAs in these partnerships. (We are currently exploring the potential of working with other private agencies as potential financial agents or intermediaries as this has been a hiccup in terms of a couple of banks expressing initial interest but had concerns with providing a donation to a government agency.)

**SVRA Activities**

The efforts of primarily 4 SVRAS (Iowa General, Indiana Combined, Florida Blind and Ohio Combined) have established initial proposals to banks for partnerships and supported NDI’s VRTAC team in identifying several issues for discussion with bank representatives for their feedback in shaping guidance and support to SVRAs in proposals and partnership moving forward.

Current SVRA activity status:

**Indiana Combined** –t*he agency has developed a proposal related to an emphasis of improving the digital literacy of participants and exploring other ideas in order to present multiple partnership options to banks.* ***Current Status: completing final draft of presentation to banks.***

**Florida Blind** – *The Florida Department of Education’s Division of Blind Services have explored the legality and advisability of bank partnership to draw federal match under state statutes and have found that this strategy is both allowable and beneficial for all involved. They have four scenarios in which this strategy might be used which include apprenticeship, professional certification and training and high school equivalency.* ***Current Status: Final Draft of Presentation, but will re-review and strengthen in the coming quarter.***

**Ohio Combined** *– Opportunities for Ohioans with Disabilities (OOD) have completed a proposal narrative, with a focus on strengthening the Randolph-Sheppard activities of the agency.* ***Current Status: Final Draft of Presentation.***

**Iowa General** – *Iowa Vocational Rehabilitation Services (IVRS) have a completed proposal available for presentation to banks which focuses on increasing the SSA disability benefits planning and advisement available to VR participants.* ***Current Status: A final version of a partnership proposal is available for presentation, and the SVRA is considering other partnership opportunities, including service opportunities to establish bank partnerships.***

**Texas Combined** – *Texas’ Vocational Rehabilitation Division is interested in developing partnerships with banks to increase work-based learning opportunities, particularly on-the-job training. They have set a floor of a one-million-dollar donation from a bank if a partnership on this scale can be developed after the RSA responses are provided to the questions presented by VRTAC-QM.* ***Current Status: On Hold*** *waiting for RSA response to questions.*

**RSA Activities**

We have submitted the following questions submitted to RSA in February 2021, which would help build the relationships between selected banks and SVRAs. We do not believe that RSA is able to answer these questions at present and continue to proceed with pilot activity the team is currently working on with the agencies.

Questions that remain unanswered:

Contributions by private entities, per 361.60 (b)(3) are to be deposited in the state agency’s account. Can these funds be initially deposited into another state account (i.e. Treasury, the SDA, etc.) and then be transferred to the SVRA account?

361.60 (b)(2)(cc)(ciii) states in part can use the donated funds for “…any other purpose under the vocational rehabilitation services portion of the Unified or Combined State Plan, provided the expenditures do not benefit in any way the donor, employee, officer, or agent, any member of his or her immediate family . . .” Does “in anyway” include IPE vocational rehabilitation services provided to an individual who is an employee in a business with multiple locations and hundreds or thousands of employees?

Banks are by the very nature shares financial or other interests because of loans or other financial dealings with a myriad number of businesses and organizations. Would 361.60 (b) (2) (cc) (ciii) apply to these entities and, if so, might a SVRA determine and document that an individual, entity or organization shared such a financial interest?

Are there any requirements of contributions by private entities *(other than those identified in 361.60 (b)(2)(cc)(ciii))*; § 361.60 Matching requirements; §361.27 Waiver of statewideness; 361.62 Maintenance of effort requirements; § 200.303 Internal controls; and § 200.306 Cost sharing or matching) VRTAC-QM should review?

Can RSA point us to any states with internal controls best practices for contributions by private entities or general non-federal match controls?

Is an agreement or MOU needed for a private entity’s donation to a SVRA and, if so, what is required to be in the agreement or MOU?

Update on goals mentioned in prior report

SVRA commitment to bank partnership in meeting agency objectives:

As noted in the SVRA activity earlier in this report,

4 SVRAs have proposals prepared for bank partnership opportunities, and the NDI VRTAC-QM team is generating feedback from banking leaders on components of these proposals for use in identifying areas for improvement.

1 SVRA is developing strategies for possible bank partnerships (Texas Combined).

In the development of proposals or presentations to banks, the VRTAC team has worked with the SVRA agencies to clarify detail in partnership activity, including the numbers of individuals in the low- and moderate-income (LMI) population that will be included in the activity, and what the impact will be for those individuals. This is information that will be necessary for banks in order to receive CRA credit for their participation. Tools utilized in this activity include the use of a “Creating your Story” template developed by an advisory group of bank representatives and regulators for the Center of Disability Inclusive Community Development, and the sharing of an infographic developed by the Iowa Vocational Rehabilitation Services for presentation purposes.

Earlier this year, the team noted that “Banks may be able to benefit from this more concrete description of how a bank investment would be used in support of VR services to advance employment outcomes for individuals with disabilities.” Feedback from discussions with banks and regulators indicate the importance of this emphasis, and the support to those agencies in developing their presentations to banks centers on these components most relevant to banks regarding how their activity meets CRA criteria. This is an area of emphasis for the NDI team in its support to SVRAs. In a couple of proposals, the return on investment (cost per client outcome) for some activities may be considered high by banks, but we’ve yet to test bank responses. These include the high cost of business investment per individual entrepreneur in the Ohio Business Enterprise activity and a couple of Florida Blind’s partnership opportunities as the residential and support costs are included for participants. Each bank will consider the ROI on their own terms, however, and the team is currently exploring each of these issues with banks for their feedback.

With the completion of the discussions with the banks and regulators, and revising the strategies moving forward – we anticipate using available resources for this project to add expertise to the team in

Supporting SVRAs in developing successful proposals for bank partnership

Engaging banks in partnership

**Next steps/goals for next quarter:**

Complete roundtables with regulators, on May 9th with representatives from OCC and FDIC, to discuss lessons learned and solutions, for their feedback and recommendations for SVRAs moving forward.

Adjust approach in support of SVRAs with an objective of two bank-SVRA partnerships in 9 months.

Develop sustainable strategy to increase expertise and experience of VR leadership in bank partnership.

Explore United Way and Goodwill contacts for each of the potential pilot states as potential intermediaries or fiscal agents in situations where a bank may hesitate to establish a financial agreement directly with a VR agency.

Host meeting with United Way representatives and banking partners in Florida to discuss potential pilot.

**Conclusion**

A lot has been learned through the discussions with SVRAs, bank representatives and bank regulators in the past year that provide a deeper understanding of how the partnerships with banks can be established for the mutual benefit of both entities – and individuals with disabilities.

**Progress with financial institutions**

Discussions with financial institutions up to this point has been on a formative level to explore possibilities for partnership, but they have not come to the point of making specific presentations to banks on partnership opportunities for a specific SVRA yet. Our outreach with banks has served to identify the factors that might make a VR partnership attractive to banks and the critical information that the VR agencies will need to include in their presentations so that the activity will most readily resonate with banks and their community impact planning. Our team has received initial feedback from banks and regulators related to various components of the different proposals and has identified a list of lessons learned and possible suggestions for proposal improvement. The team initiated a series of roundtable discussions in the past quarter with banking professionals and regulators and hopes to complete them in May.

Our team has run across a concern raised in which a bank might have an issue with investing directly in a “state government” level agency. We are currently exploring the strategy of identifying potential intermediaries that might operate as a pass through for funding and work with the VRTAC’s team to support banks and SVRAs in their partnership activity.

**Progress with regulators: contacts at federal and state(s) levels**

As a result of consultation with the Center for Disability Inclusive Community Development and their CRA Advisory Committee, the VRTAC team has adopted a strategy of meeting with the OCC and FDIC bank regulators operating in the areas in which there are SVRAs interested in participating in this pilot. Our initial meeting with regulators operating in the Florida area has clarified the importance of providing additional information and assurances in advance of discussions with banks. As assurances are given of accountability in SVRAs’ commitment and ability to report service data that will support banks in meeting their CRA criteria, the regulators will be in a position to support banks in their partnerships with SVRAs. The team is in a process of engaging the regulators operating over banks in each of the areas encompassing the SVRAs participating in the VRTAC pilot.

**Progress with VR**

With the support of CSAVR and other VRTAC partners, this team has engaged 5 SVRAs that have an interest in participating in this pilot. Four have completed draft partnership strategies and plans that will be used by the VRTAC team in facilitating the development of bank partnerships. The team has identified potential areas to address to enhance SVRA partnership focus and will emphasize proposal strengthening and presentation during the bank and regulator roundtables to be completed in the next quarter.

## SARA Project:

During FY 2023 Q2, SaraWorks engaged with state Vocational Rehabilitation agencies regarding a Sara pilot funded by the VRTAC-QM project. SaraWorks provided Sara demonstrations to prospective administrators and IT staff.

Sara Team Members

Cody Dixon, Patti Carter – SaraWorks

Chip Kenney, Meera Adya, and Chaz Compton - SDSU

Agencies Who Contacted SaraWorks

SaraWorks was not contacted by state agencies during this quarter.

Sara Demonstrations

SaraWorks did not conduct any Sara demonstrations during this quarter.

Progress on Previously Contacted

1. Arkansas Commission of Blind: Cody provided a demonstration and Arkansas wants to proceed with a pilot. Cody Dixon sent them a contract on March 29, 2023. They will be the first pilot state agency.
2. Wyoming: uses Libera as their CMS. SaraWorks is working with Libera to establish a partner agreement. No update from Wyoming this quarter. SaraWorks is developing a new API that will make it easier to integrate with Libera.
3. New Mexico: NM reached out for an additional demo. Cody Dixon is trying to get that scheduled.
4. Rhode Island Division of Vocational Rehabilitation: SaraWorks gave a demonstration and is waiting for their feedback. No update this quarter.
5. Vermont Division of Vocational Rehabilitation: They interested in Sara but have other projects with higher priority that have to be finished first. No update this quarter.
6. SaraWorks initiated a research campaign to determine agency challenges that Sara may solve. Counselor turnover and consistent communications with their clients were listed as the biggest issues by the agencies. Most customers agreed that Sara would be the solution to their challenges, but integration with their CMS vendor remains the biggest barrier to a Sara implementation. SaraWorks anticipates that the new API will help mitigate this barrier.

Scheduled SARA Demonstrations

1. A second demo is scheduled with New Mexico at their request.

Challenges in Getting Projects Started

1. Case Management System (CMS) vendor working with SaraWorks on the Sara implementation.
2. Agency IT and business resources availability.

What do you need for the success of a project?

1. Active participation from the Case Management System vendor
2. Available agency IT and business resources

## Recruitment and Retention Pilot:

**Overview**

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 four agencies that requested to be part of this pilot project are AR-B, CT-G, IA-G, and OK-C.

The VRTAC-QM team for this project will provide technical assistance that will include:

* **Guided Assessment**: facilitation of an 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**: based on the data obtained from this assessment, assist the leadership team in identifying priorities and developing a multi-year work plan to address identified factors contributing to this problem.
* **Coaching**: provide ongoing guidance and coaching to the work team in the agencies charged with implementing the work plan.
* **Evaluation**: development of evaluation protocols to measure the progress of implementation of the work plan, and assist in modifying the plan based on additional data and feedback.
* **Outcomes**: evaluation of outcomes and assisting agency leadership in developing strategies to sustain the change effort.

**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 solutions.  The review encompassed factors both internal and external to the agency.   The online sessions were scheduled for a 2-hour period, and follow-up sessions as needed.  The QM team developed a *Guided Assessment Tool* to inform the assessment process.

Agencies were 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 should include:

* Members of the Executive Leadership Team
* Human Resources Director
* Staff Development/Training Coordinator
* Field Services Administrators
* Other staff that you determine could assist in this process, e.g., if there is a unit/office in your organization where attrition is high and systemic and/or very low, you may want to consider including a member of the staff from that unit/office.

Documents for Assessment:

Agencies participating in the pilot project were also asked to send key documents prior to their assessment session, so that team members have a greater understanding of each agency in the pilot.

* 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 by a three-person team, i.e., two facilitators and one notetaker via Zoom.

**Work Plans**

All four agencies in the cohort are currently working with QM team members to finalize their priorities to address and develop a multi-year work plan.

**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.

**Evaluation**

The team has met with VRTAC-QM evaluation staff and is outlining the evaluation methodology that will be used.

**Project Updates:**

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

VRTAC-QM Team: Ron Vessell and John Walsh

The Guided Assessment tool developed by VRTAC-QM was shared with DSB leadership in late May of 2022. The initial guided assessment session via Zoom occurred on June 2, 2022, with three additional follow-up sessions in the following months. Agency leadership is now ready to begin the project's next phase by developing a Work Plan.

Arkansas DSB functions as an independent commission but has undergone departmental re-alignment. This adds to some uncertainty and stress about navigating a new department leadership serving in a similar role as a DSA while remaining an independent commission. Commission members are learning about a new environment as well as the staff.

AR-DSB has been affected by the “great resignation” of the pandemic years. This includes retirements and people moving on to other opportunities. They have 61 0f 78 positions filled. A mandate by the Governor of a 100% return to the offices was negative on morale following the shutdown phases of the pandemic.

With recruitment, pay is an issue. Pay is not commensurate with the General VR agency or other agencies in state government. VRCs make $38-$48k, depending on certifications. Staff receive a bonus of $700-1500 a year after ten years of tenure. Benefits have been described as good.

Applicants that graduated from RSA Long term training programs have dried up. The staff sees this as more of a recruitment issue than retention at this moment. Recruitment is difficult in the southern part of the state. AR-DSB is developing a new onboarding process.

VRTAC-QM Recommendations:

Recruitment:

* Develop a 5-year plan for increasing pay
* Outreach to distance learning graduate programs to recruit new staff
* Expand recruitment efforts by using staff as recruiters, i.e., recruitment ambassadors
* Dedicate an HR position to focus on recruitment.

Retention:

* Implement employee engagement surveys each 2 years and develop actions on the staff feedback.
* Stay interviews as a strategy to include direct supervisors in retention efforts and actions on feedback.
* Coaching with supervisors to utilize coaching strategies in their supervision.
* Hire a dedicated staff person for training and staff development.
* Revamp the onboarding process for new staff.
* Supervisor training on leadership principles.

Actions: (Q1 and Q2 - FFY 2023)

QM staff worked with the leadership of AR-B to develop a 3 year work plan in order to implement recommendations from the comprehensive assessment. The work plan was completed in early December of 2022. Below is a summary of the activities in the work plan:

* 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.
* Activity 2: Assessment - Provide training and resources to the agency to conduct Stay Interviews to collect data to identify actionable items to increase retention of staff.
* 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.
* 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.
* 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,
* Activity 6: Compensation - Develop a plan to increase compensation for staff.
* Activity 7: Caseload Specialization - Explore creating a separate OIB-IL work unit to provide those services.
* Activity 8: Program Income - Develop new protocols to secure greater levels of SSA Cost Reimbursement funds.
* Activity 9: Staff Development - Develop a plan to improve staff development functions at the agency.
* Activity 10: Technology - Explore technology that can be utilized in the agency to reduce administrative burdens for staff.
* Activity 11: Recruitment - Develop a comprehensive recruitment plan.

Training in Employee Engagement Surveys, Organizational Change, and Stay interviews are planned and will begin in May 2023.

A change in Governor has resulted in a hiring freeze and the request to employ a dedicated recruitment specialist is on hold at this time.

Connecticut Bureau of Rehabilitation Services (BRS)

VRTAC-QM Team- Ron Vessell and Carol Pankow

The Guided Assessment tool developed by VRTAC-QM was shared with BRS leadership in late May of 2022. The initial guided assessment session via Zoom occurred on June 23, 2022, with two additional follow-up meetings in August and September. Agency leadership is now ready to begin the project's next phase by developing a Work Plan.

The Department of Rehabilitation Services was created back in 2011 and was later merged with the Aging Department in 2017. The agency is now known as the Connecticut Department of Aging and Disability Services and houses both the general blind vocational rehabilitation programs. Additionally, the Connecticut overall governmental structure has changed and consolidated many core functions such as IT, HR, and Fiscal into a centralized delivery structure. This change has posed some challenges for BRS to navigate.

BRS also faced a statewide retirement initiative embedded within the collective bargaining process. The agency went from 140 employees to below 100. Additionally, they were on order of selection but got off the order just before the pandemic hit. They had not refilled positions as client numbers were down but are now working on an aggressive hiring process to bring them back up to 120 employees while facing continual retirements.

Despite an excellent pay scale for counselors, BRS faces challenges with the HR hiring process and getting enough qualified candidates that make it through the lengthy process. BRS is also struggling with navigating the telework expectations of employees with customers' needs in providing the right level of service. Staff is leaving for private practice, upward mobility, and the administrative burden has pushed people to walk away from the benefits packages and take risks. Some longer-term historical, cultural issues need to be addressed.

VRTAC-QM Recommendations:

Recruitment:

* Look at ways to grow and train their own staff to meet needs
* Use different methods for advertising positions (e.g., social media, using existing staff, other web platforms, outreach to distance learning institutions)
* Move forward with creating avenues for applicants (e.g., undergrads, community colleges, etc.)
* Work with the DSA to improve the timing of all steps in the hiring process.

Retention

* Explore the use of stay interviews and making changes as a result of information received from employees
* Conduct a consumer survey to ascertain their service needs and relate back to the telework structure
* Explore employee engagement surveys
* Move forward with “Rapid Engagement” processes-produces a greater feeling of learning and growing in work with customers.
* Improve employee access to top leadership-review communications and implement field visits.

Actions: (Q1 and Q2 FFY 2023)

A letter with recommendations from the 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 DSA. The leadership welcomed the letter and would work with the DSA to improve the process, particularly the interview and approval processes.

Also, CT G was introduced to Dr. Karri Wilson, and her Employee Engagement survey model. The agency conducted the Employee Engagement Survey with good results and will use the feedback to move forward with efforts to improve employee engagement.

Iowa Vocational Rehabilitation Services (IVRS)

VRTAC-QM Team: Melissa Diehl and Crystal Garry

The Guided Assessment tool developed by VRTAC-QM was shared with the Iowa Vocational Rehabilitation Services (IVRS) leadership in late May of 2022. The initial guided assessment session via Zoom occurred on May 24, 2022, with two additional follow-up meetings in August and October. Agency leadership is now ready to begin the project's next phase by developing a Work Plan.

IVRS is committed to providing high quality services to its consumers to help them thrive in competitive integrated employment. As such, the agency continues to consider ways to onboard well-skilled professionals to lead this charge. Still, the agency’s capacity to attract, select, and retain top talent has become increasingly challenging, ultimately impacting IVRS’s ability to fulfill its mission as efficiently and effectively as possible.

Specifically, IVRS noted that, despite IVRS’s efforts to partner with multiple colleges and universities, leverage social media job boards, offer generous counselor starting salaries, and despite Iowa’s reasonable cost of living, struggles with recruitment due to various reasons such as legislative oversight of the full-time employment (FTE) positions and a limited pool of qualified candidates. In particular, IVRS finds recruitment for more rural regions of the state problematic. Moreover, IVRS has found that even revamping onboarding practices has not considerably increased or strengthened overall retention rates. Consequently, IVRS has implemented a variety of surveys and assessments (e.g., staff survey, supervisor survey, staff exit survey) to better understand its areas of strengths, weaknesses, and potential opportunities.

VRTAC-QM Recommendations:

Recruitment

* Share employment opportunities with the Rehab Net
* Provide list of all Masters programs in rehab counseling for recruitment

Retention

* Explore achievement awards and recognition for staff
  + Non-monetary (e.g., flex-time, “Employee of the week/month/year” and “Most…” titles)
  + Monetary (e.g., bonuses, gift cards, lunch)
* Explore tuition reimbursement further to enhance capability from within
* Consider the method/mode and timing of training
  + Individual vs. Group
  + Virtual vs. In-person
  + Lecture style vs. Interactive style
  + Single training vs. repeated training
* Explore creative staffing opportunities
  + Flex locations/time for staff
  + Continued/further exploration of how staff is used vs. how contracts and other solutions
  + Adopt Transition Caseloads and balance between travel, schools, case management, etc.
  + Consider caseloads and assignments based on staff strengths and demands of the caseload vs. location
  + Consider survey of existing staff such as general feedback survey and “Stay Interviews”, or other mechanisms for intentional check in with staff
* Address Morale and Self-care in an ongoing way rather than when issues arise
  + Morale seems impacted by staff vacancies, unknown timeline to fill vacancies, sense of inconsistency of use of staff.
  + Built in time at different levels of the agency
    - Discuss at performance reviews, staff meetings
    - Training opportunities

Actions: (Q1 & Q2 FFY 2023)

IVRS leadership decided to prioritize retention of staff and VRTAC-QM assisted with the development of a retention survey that will be distributed to staff. The survey was developed and reviewed by IVRS leadership in February of 2023. IVRS is currently determining next steps and when they want to disseminate the survey to staff. Results will be disaggregated to keep staff responses confidential. Results will be reviewed by IVRS leadership for strategies to be implemented. IVRS is committed to ensuring that communication with staff is paramount.

Oklahoma Department of Rehabilitation Services (OK-DRS)

VRTAC-QM Team: Ron Vessell and John Walsh

The Guided Assessment tool developed by VRTAC-QM was shared with OK-DRC leadership in late May of 2022. The guided assessment session via Zoom occurred on June 29, 2022, with three additional follow-up sessions in the following months. Agency leadership is now ready to begin the project's next phase by developing a Work Plan.

Compensation at OK-DRC is not competitive with similar occupations in the public or private sectors. It was noted that it is 20% below the statewide level for this sector. An employee benefit allowance was frozen for the last seven years. With rising medical insurance costs, employees are now burdened with large out-of-pocket expenses, and salaries have remained largely flat. Recruitment of counseling staff has been difficult, especially through the two primary rehabilitation counseling programs in the state, as one program is no longer CACREP accredited, and the other offers a dual track program, i.e., RC and LPC.

The leadership acknowledges that morale is low in the agency. The last statewide staff recognition program occurred more than a decade ago. The impact of the pandemic was also felt at the agency as the leadership tries to find the right balance for hybrid work, i.e., client services and worker desire to work from home. The role of the VR Counselor has changed to include many more administrative functions, which has also impacted overall workforce morale.

VRTAC-QM Recommendations:

Recruitment:

* Develop a 5-year plan for increasing pay,
* Outreach to distance learning graduate programs to recruit new staff
* Dedicate an FTE whose sole role is to perform outreach to recruit staff
* Workgroup to explore how to use Workday to their best advantage?
* Expand recruitment efforts by using staff as recruiters, i.e., recruitment ambassadors
* Implement local recruitment strategies for areas of the state where recruitment is difficult
* Change tuition assistance eligibility from 1 year of employment to 6 months
* Develop a work group to explore changing in staffing patterns and operational needs

Retention:

* Implement employee engagement surveys every two years and develop actions on the staff feedback.
* Stay interviews as a strategy to include direct supervisors in retention efforts and actions on feedback.
* Guided discussion with middle management on Change Management
* Support and expand the cultural component of continuous improvement to continue to improve service delivery processes
* Explore staff recognition activities and incorporate them into culture
* Develop a communication plan to better share information with staff and key stakeholders
* Expand staff access to senior leadership including more visit to regional offices

Actions: (Q1 & Q2 FFY 2023)

QM staff worked with the leadership of OK-C to develop a 3 year work plan in order to implement recommendations from the comprehensive assessment. The work plan was completed in January 2023. Below is a summary of the activities in the work plan:

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.

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

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.

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.

Activity 5: Recruitment - Develop a comprehensive recruitment plan.

Activity 6: Training-Understanding Supervision

Activity 7: Communication Plan

Activity 8: Employee Recognition - Develop Recognition Plan

OK C leadership was introduced to Dr Karri Wilson and her Employee Engagement Survey process and intend to conduct the survey on a every two year process.

Training was requested on Organizational Change for all executive, managerial and supervisory staff and will be conducted in April and May 2023.

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

# Significant program activities, outputs, products and outcomes anticipated by September 30, 2023

Table 4 contains the current status of the VRTAC-QM’s progress in meeting the work plan goals and objectives anticipated for Year 3.

Table 4

*Year 3 Work Plan Anticipated Activities, Outputs, Products and Outcomes*

|  |  |  |
| --- | --- | --- |
| **Year 3 Work Plan** | | |
| **Domain: Knowledge Development** | | |
| **Activity** | **Outcome** | **Status** |
| Finalize and launch the VR Wellness Check tool | Wellness check complete and available on the website for use by VR agencies. | Completed at being developed by IT. Beta in August and launch by 9-30-23. |
| 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 | Rapid engagement has developed to a focus area of ours. Ongoing research and training is occurring and will continue through the project. Fiscal and program research is ongoing and incorporated in tools and training. |
| **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 | Final course will launch in May 2023. There have been over 400 enrollments to date. |
| Complete development of the fourth and final course in the VR Grants Management Certificate program | Completed course | Course fully develop and will launch in May 2023 |
| 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 | Existing cohort completes in Q2 and two new cohorts began 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. Preparation for CSAVR Spring conference has been a major focus with two pre-sessions completed in this quarter. |
| 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 remains heavy and has far exceeded expected numbers and established target rates for events and participants. |
| Establish CoPs in quality program and fiscal mgmt. | Continuation of the monitoring, SE, and CE CoPs, with the addition of the case review CoP | Several CoPs operating and added including the fiscal forum, monitoring CoP, Rapid Engagement CoP and the innovative and transforming services CoP launch in the third quarter in partnership with the VRTAC-QE. |
| 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. | This began in Q1 and will continue throughout the year |
| 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 | Developed and available on the website. Specific tools developed for the CSAVR conference. |
| Develop rate-setting and contract development guide | Completed guides that will result in acceptable rate-setting methodology and improved contract development | Complete |
| 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 | Completed |
| Provide intensive TA and training on quality program and fiscal management | SWOTs conducted and ITAAs developed for 7 additional SVRAs | There are 16 ITAAs completed which leaves one more due by the end of the year. |
| Conduct the SARA pilot projects in 3 agencies | Pilot started in 2 SVRAs by the end of Year 3 | One beginning in Arkansas Blind. |
| Conduct the CRA pilot projects in 4 States | Pilot started in 2SVRAs by the end of Year 3 | No projects started yet |
| **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 | Partnering with the VRTAC-QE on a new CoP. Four ITAAs in partnership with NTACT:C |
| Collaborate with CSAVR and the other TACs to conduct the 2023 Spring CSAVR conference | Completed conference with presentations directed by the QM | Complete as of this writing. |
| Conference presentations with special focus on Y5 | Completed presentations | CSAVR complete in the second and third quarter of Year 3. We are also partnering with the Summit Group for the PE and QA conference in August. |
| **Domain: Program Evaluation** | | |
| **Activity** | **Outcome** | **Projected Completion** |
| Ongoing PE using quant. and qual. methods | Completed eval. methods | Ongoing |

# Challenges, Opportunities and Emerging Issues

As indicated earlier, we partnered with the other TACs to conduct the CSAVR Spring conference. This was to help address the issue of returning and relinquishing funds. The conference was a success and we will have evaluation information for the annual report. The conference was a great opportunity for us to share information with SVRAs and attendance was at a record level at more than 500 attendees.

We have been able to grow the fiscal team to six individuals in this quarter with the hiring of Chris Merritt and Katie Marchesano. This is an opportunity for us to more effectively respond to the fiscal demand for TA and training. In addition, we were able hire Brittny MacIver for the program and performance team this quarter. Brittny has specific expertise in case management systems, specifically AWARE. Her expertise has already proven invaluable in working with SVRAs as they struggle with data and quality assurance.

We remain attentive to emerging issues in the field and respond accordingly with new tools and TA. The VR funding issue has been paramount in the last year and will remain a focus of ours as we help VR agencies maximize their Federal funds and expend dollars on allowable services that help participants obtain and maintain employment consistent with their primary employment factors.

We will respond to our challenges and opportunities by continuously assessing our capacity to mee the demand for TA and training and adjusting resources accordingly. Evidence of this is our increase in fiscal TA staff this year. We will continue to consult with our RSA Project Officer and discuss demands and capacity. Although taking challenges on like the CSAVR conference can be challenging, it helps us contribute to the field and develop content and training that is helpful to VR programs across the country.

# 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 2 Work plan is included in Table 5. All of the VRTAC-QM’s goals and objectives were achieved except for the VR Wellness Check tool completion, which will be completed at the end of Year 3. It should also be noted that the CRA and SARA pilot projects have not progressed as quickly as we had hoped, so even though these projects are pilots, they have not achieved their anticipated project start dates.

Table 5

*Year 3 Work Plan*

|  |  |  |
| --- | --- | --- |
| **Year 3 Mid-Year Report on Work Plan Progress** | | |
| **Domain: Knowledge Development** | | |
| **Activity** | **Outcome** | **Status** |
| Develop the Cooperative Agreement with RSA | Completed Cooperative Agreement | Complete |
| Establish website | Website launched | Complete |
| Establish VR Wellness Check Tool | Benchmark-QM complete | 90% complete |
| Survey all SVRAs on QM needs and priorities | Survey completed | Complete |
| Comprehensive Review of quality management program and fiscal strategies and practices | Completed review | Complete |
| Identify gold standard benchmarks for the VR Wellness Check using analytical framework and selection criteria | Benchmarks identified and populated in Benchmark-QM | Complete |
| **Domain: TA and Training** | | |
| **Activity** | **Outcome** | **Status** |
| Management Concepts grants management training available to all SVRAs | Training is available through the VRTAC-QM website | 3 of 4 courses available |
| NRLI seminar series training provided for varying levels of managers in the VR program | Leadership training established | Complete |
| Targeted and universal TA is provided to SVRAs on quality program and fiscal management | Delivery of TA using website and other methods | Ongoing - surpassed all targets except the ITAA number, which is one shy halfway through the year. |
| Establish CoPs in quality program and fiscal mgmt. | CoPs established and meeting | Ongoing and new ones added |
| Establish RSA Monitoring CoP | CoP established and meeting. Helping agencies to understand the monitoring process and support one another through the process. | Complete and renewed each year with a new round of agencies being monitored. |
| Continue supported employment CoP | CoP meeting and sharing information and best practices related to SE. | Complete and ongoing each year |
| Continue customized employment CoP | CoP meeting and sharing information and best practices related to CE. | Complete and ongoing each year |
| Conflict Resolution Webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| Ethics, Supervision and Technology Webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| Managing the 15% reserve Webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| NOI webinar in partnership with NTACT C | Webinar complete, posted on website and viewed by VR staff | Complete |
| Non-Delegable Responsibilities and Organizational Structure Unpacked Webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| Peer to Supervisor Webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| Remote Supervision Webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| SRC (4 part series webinars) | Webinar complete, posted on website and viewed by VR staff | Complete |
| Credential attainment webinar | Webinar complete, posted on website and viewed by VR staff | Complete |
| Develop training in partnership with the VR Summit Group for case reviews, pre-ETS and data validation | Completed training posted to the website that develops skills of VR staff in the identified areas. | Complete |
| Provide eligibility and IPE training for VR agencies | Completed training that improved timely eligibility determinations and IPE development and increases quality outcomes. | Scheduled for Wisconsin and Maryland in the second half of the year |
| Develop Rehab Data workgroup tools in partnership with RSA | Completed tools for use by VR program staff | MSG, pre-ETS, and trend data tool completed. |
| Prior approval tool | Completed tool available on the website to help agencies ensure they successfully complete and receive prior approval | Complete |
| Monitoring checklist in general review area and fiscal area | Completed tool on the website and available for use by VR agencies that helps them prepare for monitoring. | Complete |
| Staff time and effort reporting tool | Completed tool available on the website for use by VR agencies to report time and effort and reduce errors in staff time reporting | Complete |
| Manager Minute podcasts | Completed podcasts on a variety of quality management topics that are recorded and posted to the website that can be accessed by VR staff to increase identification and adoption of QM strategies and practices. | 18 complete with many others on the way |
| Monitoring prep workbook | Completed workbook available on the website to help VR agencies prepare for monitoring. | Complete |
| Create micro trainings | Develop micro-trainings on quality program and fiscal management for use by VR staff on the website and that will help them identify and adopt QM strategies and practices | Three complete and several in-development |
| Provide intensive TA and training on quality program and fiscal management | SWOT analysis and ITAA completed for each SVRA | 16 ITAAs completed and 16 SWOTs completed |
| Conduct the SARA pilot projects | Pilot started in 4 SVRAs | One started |
| Conduct the CRA pilot projects in 4 States | Pilot started in 4 SVRAs | Delayed |
| Conduct recruitment and retention pilot | Pilot started in 4 SVRAs | Launched and ongoing |
| **Domain: Coordination and Dissemination** | | |
| **Activity** | **Outcome** | **Status** |
| Establish QM committee | Committee est. and meeting | Complete |
| Collaborate with VRTAC-QE and other TACs to support learning and KD and KT. | Number of TACs and other projects contacted and engaged | 4 formal partnerships in an ITAA with NTACT:C. Collaborated with VRTAC-QE and NTACT:C in the CSAVR conference. |
| Conference presentations with special focus on Y5 | Completed presentations | 17 conference presentations to date including CSAVR, NCSAB and NCRE |
| **Domain: Program Evaluation** | | |
| **Activity** | **Outcome** | **Status** |
| Ongoing PE using quant. and qual. methods | Completed eval. methods | Ongoing |

# Project Measures Update

The progress of the VRTAC-QM in meeting our project measures and GPRA measures is included in Tables 6 and 7 below. These measures are entered into G5 as well but are included here as well for ease of reference.

Table 6

*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 | 4 |  |
| 4 | 5 | 7 | NA |  |
| 5 | 18 | 24 | NA |  |
| **Total** | | | **16** |  |
| **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 | 0 |  |
| 4 | 6 | 6 | NA |  |
| 5 | 9 | 15 | NA |  |
| **Total** | | | 1 |  |
| **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 | 4 |  |
| 4 | 5 | 7 | NA |  |
| 5 | 0 | 0 | NA |  |
| **Total** | | | 16 |  |
| **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 | 124 |  |
| 4 | 360 | 360 | NA |  |
| 5 | 380 | 380 | NA |  |
| **Total** | | | **513** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **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 | 247 | 1,669 |
| 4 | 140 | 300 | NA | NA |
| 5 | 100 | 200 | NA | NA |
| **Total** | | | **1007** | **7,169** |
| **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 | Added 23 |  |
| 4 | Not set | Not set | NA |  |
| 5 | Not set | Not set | NA |  |
| **Total** | | | **499** |  |

Table 7

*Project Measures 7 and GPRA Measures (Year 3 to date only except for Universal)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 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 | **Number** | **Percent** | **Number** | **Percent** |
| NA | 75% | 141 | 86% |
| 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% | 69 | 92% |
| 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% | 72 | 80% |
| 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 | 1,571 | 99% |
| **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 | 30 | | 91% | |
| 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 | 141 | | 86% | |
| 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 | 2,665 | | No data available until the end of 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. | 34 | | No new data available until the end of PY 2022 | |
| 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. | 50 | | 95% | |