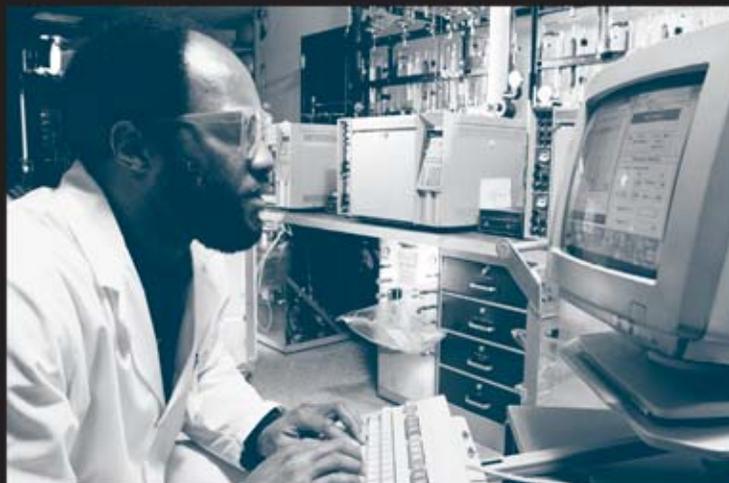




VA Vocational Rehabilitation and Employment Task Force



2004

Report to the Secretary of Veterans Affairs

The Vocational Rehabilitation and Employment Program for the 21st Century Veteran



“ Restore the capability of veterans with disabilities to the greatest extent possible and improve the quality of their lives and that of their families.”

– Strategic Goal One, Department of Veterans Affairs
Strategic Plan 2003-2008.



DEPARTMENT OF VETERANS AFFAIRS
Washington DC 20420

March 2004

The Honorable Anthony J. Principi
Secretary of Veterans Affairs
Washington, DC 20420

Dear Mr. Secretary:

It is with pleasure that the VR&E Task Force presents its report, *The Vocational Rehabilitation and Employment Program for the 21st Century Veteran*.

Based on your leadership and direction, we conducted an unvarnished, top-to-bottom independent examination, evaluation, and analysis of the VR&E Program. You challenged us to make recommendations that will provide veterans with service-connected disabilities – especially those who have sustained injuries in Iraq and Afghanistan – the opportunities and services that can enable them to obtain and maintain suitable employment.

Many critiques have been written about the VR&E Program. In all candor, the Task Force found little evidence that VR&E efforts to obtain jobs for rehabilitated veterans have been as successful as Congress intended. While specific statistical information is lacking to assess the impact on the individual veteran, we know that many veterans do not achieve their rehabilitation goals. The program name has changed several times, but the emphasis and direction continues to be education over a long period of rehabilitation.

The Task Force contends that the time for change has arrived and consequently recommends a new paradigm for vocational rehabilitation and employment: a comprehensive, integrated service delivery system that serves disabled veterans from their military service through discharge, counseling, and transition to employment. Our proposed delivery system is aligned with modern vocational rehabilitation practices that focus on veterans' abilities, not their disabilities, an approach that promotes equal opportunity and access to the mainstream of American life.

We are confident that our recommendations can rebuild the existing program into a proactive, employment-driven 21st Century program that can effectively serve veterans with disabilities. Timely implementation will require a strategic vision, organizational leadership, appropriate resources, and most important, the support of VR&E employees. Moreover, success will be predicated on a new way of thinking about the Department's responsibility to the disabled veteran with an employment handicap.

The Task Force wishes to thank all those who assisted our deliberations, in particular the staff of the Veterans Benefits Administration and the Vocational Rehabilitation and Employment Service. We appreciate the opportunity to have been of service to you, the Department of Veterans Affairs, and our Nation's veterans.

Sincerely,

A handwritten signature in cursive script that reads "Dorcas R. Hardy".

Dorcas R. Hardy
Task Force Chairman

Department of Veterans Affairs
Vocational Rehabilitation and Employment Task Force

Report to the Secretary of Veterans Affairs



Honorable Dorcas R. Hardy
Task Force Chairman



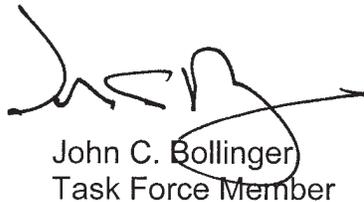
Ronald W. Drach
Task Force Member



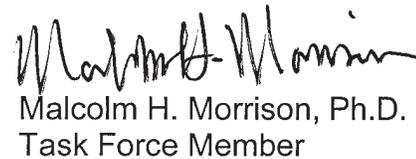
Peggy Anderson
Task Force Member



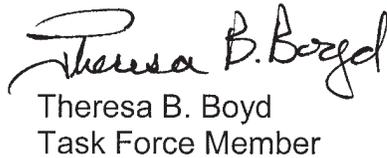
Michael H. McLendon
Task Force Member



John C. Bollinger
Task Force Member



Malcolm H. Morrison, Ph.D.
Task Force Member



Theresa B. Boyd
Task Force Member



Edward R. Reese, Jr.
Task Force Member



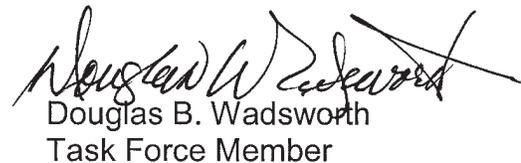
Anthony B. Campirell, Ph.D.
Task Force Member



Sue Suter
Task Force Member



Patrick F. Chorpenning
Task Force Member



Douglas B. Wadsworth
Task Force Member

Foreword

Why Not Be the Best?

During every war of the last century – and more recently in peacetime – America has provided a vocational rehabilitation program to return its veterans with service-related disabilities to the national workforce.

One, because this nation has an industrial-size work ethic and two, because our culture and our self-worth put great value on individual productivity.

A paycheck determines where we live, where our children go to school, and where we play. We believe that the opportunity to work should be equitably available to all Americans, and certainly to those who have defended our nation.

Our gratitude to our disabled servicemen and women is great, and work is the best gift we can give. We can pay no greater tribute than to return them to their jobs or prepare them to enter new jobs, depending on their needs. In this country, we accommodate our co-workers' disabilities so we can harness their abilities for the good of all.

Our social policy has not always worked perfectly – disabled veterans are still on the lowest rung of the employment ladder – but we have tried and we will continue to try until we succeed.

Our world, our country, our lives changed forever on September 11, 2001. Attacked, not by nations, but by international terrorists who had lived among us, we now face a never-ending war like none we have ever known. In this new century, our enemies bear no flags, lurk in shadows, and slay the innocent.

All the rules changed on that dreadful day, disappearing like the smoke that drifted away from two tall towers, the Pentagon, and a Pennsylvania countryside. But we will adapt and do as we have always done – we will fight for freedom for ourselves and for others as we are doing in Afghanistan and Iraq.

For the disabled warriors of this century, and for those who fought before, we must shore up our veterans' Vocational Rehabilitation and Employment program. Why not build on its strengths, learn from its failures, and make it the best it can be?

To serve those who serve us, we must make the commitment and bear the price because *what they give up* is greater and *what they give us* is priceless.

Table of Contents

	Page
Transmittal Letter to the Secretary of Veterans Affairs	i
Foreword	iii
Table of Contents	v
Executive Summary	1
Index of Recommendations	11
Chapter 1 Background	23
• Overview of Vocational Rehabilitation for Veterans	23
• Past Criticisms of VR&E Program	26
• Task Force Charter	27
• How the Task Force Worked	28
Chapter 2 21st Century World of Disability	31
• Introduction: A Change in Attitudes	31
• The Public Sector and a National Disability Policy	32
• The Independent Living Movement	35
• Work in the 21 st Century	35
Chapter 3 VR&E Service Today	41
• How the VR&E Program Is Administered Today	41
• The VR&E Work Process	43
• VR&E Workload Analysis	47
• Demographics of Veterans Being Served	52
Chapter 4 VR&E for the 21st Century: A New Service Delivery System	61
• New Five-Track Employment Process and Integrated Service Delivery System	61
• 21 st Century VR&E Service Delivery System Operational Concept	65
• Chapter 31 Eligibility, Entitlement, and Application Process	80
• Implementation Strategies for the Five-Track Employment Process	82
Chapter 5 Integrating VR&E Services and Strategies	85
• Integration of Services within VBA	85
• Integration of VHA and VR&E Services	86
• Integration of DoD and VR&E Services	88
• Integration of DOL and VR&E Services	90
• Integration of State Vocational Rehabilitation and VR&E Services	92
• Integration of the VR&E Services with the Wider World of Vocational Rehabilitation	93

	Page
Chapter 6 Task Force Recommendations	95
• Program Recommendations.....	95
• Organization Recommendations.....	106
• Work Process Recommendations	121
• Integrating Capacities Recommendations	134
 Chapter 7 Moving Forward: The Need for Change.....	 161
 More Challenges Ahead: A Final Word from the Task Force Chairman	 165
 Appendices	
1 Task Force Charter	A-1
2 Task Force Membership Information	A-3
3 Agenda for Fact-Finding Sessions.....	A-7
4 Site Visit Agenda and Survey Guide.....	A-13
5 Comments from VR&E Staff.....	A-19
6 Summary of Past Reports and Recommendations	A-27
7 Comments from 2002 Veterans Satisfaction Survey.....	A-31
8 Federally-Funded Employment Programs for Veterans	A-37
9 Legislative History	A-39
10 Overview of Title 38 Chapters.....	A-41
11 Description of Five-Track Employment Process.....	A-49
12 Draft Job Descriptions for New Positions.....	A-69
13 Technical Guidance for Online Employment Services	A-77
14 Best Practices	A-87
15 Draft Memorandum of Understanding with State VR Administrators	A-97
16 Index of Recommendations: Implementation Timeframe.....	A-101
17 Acronyms.....	A-115
18 Glossary	A-117
19 Bibliography	A-127

Executive Summary

INTRODUCTION

In years past, the Vocational Rehabilitation and Employment Program was proudly called the Department of Veterans Affairs “crown jewel.” Today, the Task Force believes that the jewel – and the pride – can be restored to an even greater brilliance. It will take effort, but the Department of Veterans Affairs must build a new, comprehensive, employment-driven service delivery system

“It will take effort, but the Department of Veterans Affairs must build a new, comprehensive, employment-driven service delivery system responsive to 21st Century needs of service-connected disabled veterans.”

responsive to 21st Century needs of service-connected disabled veterans.

No VA mission is more important at this time in our history – especially now when the United States is at war – than enabling our injured soldiers, sailors, and airmen and other veterans with disabilities to have a seamless transition from military service to a successful rehabilitation and on to suitable employment after service to our Nation. For some severely-disabled veterans, this success will be

measured by their ability to live independently, achieve the highest quality of life possible, and realize the hope for employment given advances in medical science and technology.

Today, the Veterans Benefits Administration’s Vocational Rehabilitation and Employment (VR&E) Service is vested with delivering timely and effective vocational rehabilitation services to veterans with service-connected disabilities. Unfortunately, the VR&E Program remains the subject of criticism after many previous studies and reports have recommended changes. The most persistent criticisms from the Congress, the General Accounting Office, and others over

“...the Task Force heard testimonials from veterans that if not for the efforts of a VR&E counselor, they would not have succeeded in turning their lives around and achieving their career goals.”

the last 10 years and more have been that the VR&E Service has not implemented the types of changes necessary to comply with the intent of Title 38, U.S.C. Chapter 31 to enable veterans to obtain and maintain suitable employment.

This report by the VA Task Force on Vocational Rehabilitation and Employment responds to the Secretary’s charge in May 2003 to give the program an “...unvarnished, top-to-bottom independent examination, evaluation and analysis.” The report provides

recommendations that address the fundamental issues that have prevented reform of the VR&E Service. It is essential that these recommendations be implemented in a timely manner – and in their entirety – so that veterans can receive the services needed to work and live productively in the 21st Century.

The Task Force wants to state at the outset that it has been impressed with the dedication and desire of the VR&E Service staff and contract professionals to do a good job for veterans. While this report highlights those things that are wrong with the VR&E Program, there are many things that are done right. During visits to VA Regional Offices, the Task Force heard testimonials from veterans

“...the VR&E Service has become an island within a VBA processing and production culture where the emphasis on one of VA’s historic missions – counseling and rehabilitation – has significantly diminished.”

that if not for the efforts of a VR&E counselor, they would not have succeeded in turning their lives around and achieving their career goals. From our perspective, the VR&E officers in the field and their staffs have done a superb job of weathering what has been a long period in which there has been limited leadership, strategic vision, and commitment from Central Office (CO) to improve the program. We also commend the Under Secretary for Benefits for taking the initiative to ask the Secretary to solicit this outside,

independent assessment and to aggressively work to seek the advice of the Task Force to improve the leadership and management of the program even while the Task Force was completing its report.

KEY FINDINGS

The Task Force found the VR&E Service – its program, organization and people, current work processes, and internal capacities for management and integration – under stress. Comments from VR&E staff reflect their concerns that the demands and expectations being placed on the VR&E Service are exceeding

Feeding the Dragon: “Counselors, who have little or no clerical support, often carry a caseload of more than 200 clients. In a workday I can see two veterans and the rest of the time is spent feeding the documentation and accountability dragon.” – Comment from the field.

the organization’s current capabilities to effectively deliver an array of comprehensive services.

The VR&E Service Has Not Been a VBA Priority

Over the past decade, the Veterans Benefits Administration (VBA) has reduced its focus on the ultimate VA mission of returning veterans with service-connected disabilities to the workforce and the preeminent role of vocational rehabilitation in achieving that goal. Since the “war to end all wars,” men and women have made career and personal sacrifices to serve our Nation. As General Omar Bradley stated 45 years ago, “... In the modern concept of rehabilitation, disability compensation has

an important, but secondary role.” While VA’s focus on claims processing has been appropriate to address timeliness and backlog issues, the processing of claims has become the dominant end goal of VBA, rather than being one of the means to accomplish the Department’s strategic goal of successful transition and rehabilitation of veterans with disabilities.

The VR&E Service is the only business line within VBA that delivers a personalized service. In many instances, face-to-face contact with the veteran is required over several years to facilitate achievement of successful transition and employment. As a result, the VR&E Service has become an island within a VBA

processing and production culture where the emphasis on one of VA's historic missions – counseling and rehabilitation – has significantly diminished.

In this environment, the administration and oversight of the VR&E Program have not been a VBA leadership, management, and resource priority. While VBA's other lines of business benefited from investments in technology, organizational capacities, process improvements, and human capital, the VR&E program stagnated. As a result, major deficiencies have been created over time in the core capacities that are essential to have an effective and efficient VR&E organization – CO leadership and accountability; the ability to effectively plan and manage field operations, the workforce, and projects; technology planning and use; and the full range of data collection, analysis, and evaluation activities. These deficiencies have led to inconsistent administration of regulations and policies, lax standards of practice and protocols, ineffective oversight of contract services, concerns about data and fiscal integrity, training that is not comprehensive, limited use of technology solutions, and a weakened CO staff tasked to perform program management and oversight functions.

The VR&E Service Has Limited Capacities to Manage the Growing Workload

The VR&E Service is neither data centric nor an integrated organization in its planning and management. This may be the result of a philosophy that exists within the organization that the VR&E Service is not a process. On the contrary, it is a process that can be measured, standardized, and managed. However, the VR&E Service does not presently have the data and management information to effectively analyze those factors that drive the demand for services and the population of veterans applying for these services. Further, the VR&E Service does not have the productivity and performance measurement systems to:

- know and understand the labor hours required to provide services,
- manage the case workload and available VBA personnel and contract resources,
- distinguish among veterans receiving short vs. long-term services,
- design and implement interventions to reduce the number of veterans who drop out of the program or have to interrupt their rehabilitation plans,
- oversee a national contract services strategy and employment process, or
- provide for long-term evaluation of program outcomes.

These limited VR&E Service capacities exist at a time that is reminiscent of the period in the early 1990s when the Compensation and Pension (C&P) Service's management capacities declined and its workload reached a crisis stage that was compounded by timeliness and backlog issues. In terms of the VR&E workload, the following facts are a major concern:

- The number of veterans applying for Chapter 31 benefits increased by 73 percent from 37,829 in FY 1992 to 65,298 in FY 2003.
- The number of veterans in various active phases of the Chapter 31 program was 58,155 at the end of FY 1992 compared to 97,158 at the end of FY 2003, a 67 percent increase.

- Annually, about 20 to 25 percent of new applicants are veterans who previously had to drop out of the program and then reapplied.
- In FY 2003, about 12 percent of the veterans in the program had to interrupt their rehabilitation plans primarily due to health problems,

“Annually, about 20 to 25 percent of new applicants are veterans who previously had to drop out of the program and then reapplied.”

family and financial issues, and problems arising from their disabilities.

The VR&E Service and VBA Office of Field Operations do not currently analyze the underlying dynamics and complexities that drive the VR&E workload composition and trends. The potential for these workload trends to continue, or even increase, into a crisis situation should not be discounted. The

Task Force also believes there is great uncertainty about the total number of veterans being provided services.

Workload Is Undercounted

At present, the number of unique veterans being served in some capacity during a fiscal year is *not* reported. The number of veterans who are in various active phases of the Chapter 31 program (97,158 at the end of FY 2003) does *not* include veterans:

- in discontinued status,
- receiving Chapter 36 counseling,
- referred by VHA or other organizations for counseling,
- evaluated 60 days after achieving their vocational rehabilitation goal, or
- in receipt of counseling that does not result in Chapter 31 program participation.

Further, the VR&E reported workload does not account for evaluations conducted on veterans who were found not entitled to Chapter 31 services.

VR&E data suggest that as many as one-third of the participants in the VR&E program at any one time do not progress directly through the program without interruption for one reason or another. In FY 2002, the average number of days to rehabilitation (application to job ready status) for a veteran who went straight

“Despite the tens of thousands of VR&E program participants in a given year, the number of veterans rehabilitated by obtaining a job or achieving independent living goals averages only about 10,000 a year for several years.”

through the program without any interruption in his or her plan of rehabilitation was 1,095 days. For a veteran who was discontinued from the program, the average number of days a veteran was in rehabilitation before he or she was discontinued was 1,625 days. These factors suggest that there may be an inherent ceiling on the success rate for getting through the current serial vocational rehabilitation process unless the VR&E Service implements interventions that will ensure veterans do not have to discontinue or

interrupt their rehabilitation. The rehabilitation statistics are of concern. Despite the tens of thousands of VR&E program participants in a given year, the number

of veterans rehabilitated by obtaining a job or achieving independent living goals averages only about 10,000 a year for several years.

VR&E System Must Be Redesigned for the 21st Century Employment Environment

In order for VA to fulfill its mission “to care for him who shall have borne the battle, and for his widow and his orphan,” the delivery of vocational employment services for disabled veterans must be changed – and in fact, it must become a totally new program. Previous reforms of the VR&E Program have not been successful. This is due in large measure to the fact that the VR&E Service has been modifying a multi-step, serial process system that is wedded to an outdated, traditional view of vocational rehabilitation that emphasizes veteran training.

In the view of the Task Force there are six principal reasons why VA should transform the VR&E Service now, not later. These reasons are presented in more detail in Chapter 7.

- The U.S. is at war. The treatment of our injured service members and their seamless transition and rehabilitation to achieve their quality of life and employment goals must become cardinal priorities. Vocational rehabilitation and employment must become the organization’s paradigm for focusing VA’s attention and resources on the challenge.

“The sense of urgency has never been more acute than now. The VR&E Service is facing a new challenge for which it is ill prepared to meet.”

- This sense of urgency has never been more acute than now. The VR&E Service is facing a new challenge: the thousands of Guard and Reserve personnel who have been mobilized from their civilian jobs and who will return directly to employment or to college.

“To a large extent, the VR&E system has been doing business using the same approach within the same paradigm and work process for more than 40 years.”

- Significant numbers of veterans – in war and during peacetime – will continue to experience illnesses or impairments that impact their lives forever. The advances in medical rehabilitation, biomedical technology, rehabilitation engineering, and assistive technology will enable many disabled veterans who were not previously employable to now be employed and for veterans to be employed for longer periods of time after military service than in previous generations.

“To a large extent, the VR&E system has been doing business using the same approach within the same paradigm and work process for more than 40 years.”

- After every war, programs must adjust to the needs of the veteran and the environment. The structure of the VR&E Program and its process are now out of sync with providing the type and timeliness of employment-driven services needed today and in the future because of the economic shift that has impacted the 21st Century labor market. This shift has reduced the demands for physical labor in favor of service and knowledge-based skills.

- The VR&E Program is also out of sync with 21st Century attitudes towards persons with disabilities. The economic shift in the labor market has marched in tandem with a seismic shift in societal attitudes toward persons with disabilities, especially since the passage of the Americans with Disabilities Act (ADA) in 1990, the world's first comprehensive civil rights legislation for people with disabilities. Twenty-first Century views of disabilities have shifted from the negative aspects of *disabilities* to a focus on the *abilities* of persons with disabilities with a rapid return-to-work strategy.
- There are also strong indicators pointing to the fact that the current VR&E program, organization, and traditional vocational rehabilitation process are stressed. These signs include high caseloads among the VR&E staff and increasing demand for both vocational rehabilitation training and independent living services. Essential functions of employment readiness, job placement, and marketing are not being performed either adequately or in a standardized way across the system, and veterans are dissatisfied with the current level of employment services.

SUMMARY OF RECOMMENDATIONS

In order to be effective in the 21st Century, the Task Force recommends that the VR&E Service refocus its organization and implement a new, integrated service delivery system based on an employment-driven process. The Task Force refers to this new service delivery approach as the Five-Track Employment Process. This new process includes five specialized program and service delivery options based on informed choice for disabled veterans:

- Reemployment of veterans with their previous employers,
- Access to rapid employment services with new employers,
- Self-employment for veterans,
- Long-term (traditional) vocational rehabilitation services including education, and
- Independent Living services with the possibility of employment when appropriate.

The Task Force has made further recommendations about changes that must be made to rebuild the VR&E program for the 21st Century, including the implementation of this new service delivery strategy. While the changes proposed by the Task Force are strategic in direction, scope, and timing for the VR&E Service, the Task Force believes these changes must also be addressed by the entire Department.

The Task Force's recommendations were shaped, in large part, by comments received from VR&E field staff combined with VBA survey feedback from Chapter 31 program participants. Implementation of this proposed integrated service delivery model and other changes will require major adjustments to the VR&E organization, program, work processes, and the integrating capacities that support the delivery of services. The following changes define the key operational features of this new VR&E service delivery system.

Program Changes

- Streamline eligibility and entitlement criteria for the most seriously disabled veterans to speed Chapter 31 service delivery.
- Expand the Chapter 36 Educational and Vocational Counseling Program to fully use its inherent capabilities to assist veterans.
- Improve administration of VA's role in the Disability Transition Assistance Program (DTAP) to be led by the VR&E Service with a near-term emphasis on returning Guard and Reserve personnel.
- Redesign the Independent Living Program to be more encompassing and integrated with VHA and community-based services.
- Create new programs to supplement the Veterans Health Administration's (VHA) Compensated Work Therapy Program and the current VR&E Program to provide a seamless bridge of services and options for veterans with mental illness or in need of life rehabilitation as the key to employability.
- Leverage partnerships with VHA, Department of Defense (DoD), Department of Labor (DOL) and a new agreement with state departments of vocational rehabilitation to provide rehabilitation and employment services to veterans with disabilities.

It's a Flood: "Allocate more counseling staff...Where will the vets from the Iraq conflict be heading? Where are the guys from Desert Storm who are growing increasingly ill coming? Where are the thousands of vets who have been laid off due to the poor economy coming? It's not a trickle, it's a FLOOD." – Comment from the field.

Organizational Changes

- Redesign the VR&E Central Office and implement systems for leadership; centralized program and fiscal direction, control and accountability; strategic and operational management; and knowledge of 21st Century disability, rehabilitation, and employment best practices.
- Increase Central Office staffing to enhance current capacities that are understaffed and to add new 21st Century capacities.
- Create four new VR&E specialist positions – Employment Readiness, Marketing and Placement, Independent Living, and Contract/Purchasing – and increase the number of VR&E field staff.

Work Process Changes

- Implement the new Five-Track Employment Process using triage techniques for rapid assessment of veteran needs so as to quickly direct the veteran into specialized services emphasizing the concept of veteran's choice and allowing for movement among the tracks.
- Specialize the workforce to achieve efficiency and effectiveness improvements as well as responsiveness.
- Incorporate the use of trained contract professional counselors as an inherent part of the process.

- Mandate and enforce the use of evidence-based best practices, including Functional Capacity Evaluation to shift the focus from a veteran's disabilities to his or her abilities for employment.
- Develop in-house VR&E capacities to make greater use of online services for employment readiness, job development, job search, and job placement so that VR&E performance is not totally dependent upon organizations outside the control of VR&E.
- Improve the design and administration of the traditional vocational rehabilitation work process to promote staff efficiency and effectiveness.

Integrating Capacities

- Design and implement a centralized training program to address consistency and proficiency of the staff and provide a program of professional continuing education.
- Develop and implement new work measurement, workload management, and performance measurement systems as well as operation analysis capabilities.
- Implement a long-term research and program evaluation agenda to assess the life cycle outcomes of the vocational rehabilitation program.
- Standardize the use of the CWINRS information system and implement systematic training along with priority upgrades to address deficiencies.

Measurements Are Full of Holes:
"The entire measurement system and the manner in which we determine success is full of holes. Some statistics are so easy to manipulate that they are totally invalid. How can we purchase a computer for a veteran and say that we have enhanced his ability to live independently to the extent that we can call it a 'rehabilitation'." – Comment from the field.

- Leverage technology to implement priority solutions to facilitate the new VR&E service delivery model, enable electronic education certification, and automate VR&E requests to VHA for medical services to Chapter 31 veterans.
- Integrate VHA and VBA services to better serve those populations of veterans needing specialized independent living and other services to speed the delivery of Chapter 31 benefits.

A list of 110 recommendations follows this Executive Summary.

Estimated Number of New FTE Positions

The Task Force believes that VBA should consider adding more than 200 new FTE positions to the VR&E workforce in Central Office and the Regional Offices. In the area of Independent Living, the Task Force recommends creating Independent Living Specialist positions and VBA management should determine the number of these IL positions based on appropriate geographic areas. These new positions are discussed in Chapters 4 and 6.

ORGANIZATION OF THE REPORT

To address the scope and complexity of the tasks included in the Secretary's charter, this report is organized into seven chapters plus separate appendices:

Chapter 1, Introduction, provides a synopsis of the VR&E Program. It describes the legislative history of the program emphasizing the cyclic eligibility changes for 10 and 20 percent disabled veterans, the dramatic shift in the purpose and intent of the program, and the Charter for the VR&E Task Force with a description of how the Task Force was organized and accomplished its mission.

Chapter 2, 21st Century World of Disability, describes the greater world of disability that exists today and within which the VR&E Service and program operate. This description provides the context for understanding the trends and issues associated with the knowledge and technology of disability, rehabilitation, and the employment of persons with disabilities. This chapter expresses the concern of the Task Force that VR&E has not kept up with this larger world of disability outside of VA. As VR&E rebuilds its program into a comprehensive, integrated service delivery system, it must do so within the context of this larger environment that continues to lead the way for persons with disabilities.

Chapter 3, VR&E Today, presents the Task Force's findings as they relate to the administration of VR&E today. The chapter includes a description of the characteristics of the VR&E system upon which these findings are based. This system is described in terms of the VR&E work process, the workload associated with this process, the organization that administers this process, and the attendant statistical exhibits.

Chapter 4, VR&E for the 21st Century: A New Service Delivery System, discusses the Task Force's conclusions that the service delivery system used by the VR&E Service is not designed to readily provide employment services. In order to be effective in the 21st Century, the Task Force recommends that the VR&E Service implement a new Five-Track Employment Process. This chapter provides a description and operational concept for this model system. It also provides considerations regarding the implementation of this service delivery system.

Chapter 5, Integrating Services and Strategies: A Continuum of Care, discusses the issues associated with achieving better integration of services with other agencies. The integration of services across agencies is essential if veterans with service-connected disabilities are to achieve the goal of successful transition and employment. The Task Force focused on how best to integrate the efforts of four primary federal and state agencies – VA (VBA and VHA), Department of Defense, Department of Labor, and State Vocational Rehabilitation (SVR) agencies – to achieve the goal of seamless delivery of services. This chapter also addresses the need for the VR&E Service to join the mainstream communities that have advanced the knowledge and technologies related to disability, rehabilitation, and employment for persons with disabilities.

Chapter 6, Recommendation, presents 110 recommendations for consideration by the Secretary. These recommendations are organized into four categories – program, organization, work processes, and integrating capacities. These recommendations identify near-term, mid-term, and long-term actions to improve performance of the VR&E Service. Where appropriate,

recommendations are cross-referenced to each other. This Chapter also includes a charter compliance matrix that aligns each category of recommendations with specific elements of the Task Force charter.

Chapter 7, Moving Forward: The Need for Change, provides the summary thoughts and conclusions of the Task Force. These include the reasons VR&E must change the way it does business and the top recommended priorities that the Task Force believes the Department of Veterans Affairs should focus on immediately.

Additional Thoughts

The consensus of the Task Force is that the publication of this report at this time – when the U.S. is at war – presents an opportunity to modernize the VR&E Program for the 21st Century veteran. In the overall scheme of the Department of Veterans Affairs, the VR&E Program is not large. Although the VR&E Program is the smallest with regard to resources within VBA, the Task Force believes it has the most critical mission and is the only program and service where face-to-face interaction with the veteran is required to deliver benefits.

The recommendations in this report can transform the organization. Success will depend on leadership commitment, timely action, and persistence in the face of today's policy and resource constraints. VA's goal should be to transform

“Although the VR&E Program is the smallest with regard to resources within VBA, the Task Force believes it has the most critical mission and is the only program and service where face-to-face interaction with the veteran is required to deliver benefits.”

the VR&E Program into the premier 21st Century vocational employment program, not to merely reform the current VR&E Program. Today's service members – whether they serve in Iraq, Afghanistan, or some other country, or at home – will soon become tomorrow's veterans. They deserve to be served by the premier vocational employment program and nothing less should be considered acceptable. The VR&E Service and Program must be modernized to be on the leading edge – even breaking new ground – in leveraging 21st Century technology and knowledge to improve the life of disabled veterans.

More Challenges Await: A Final Word

The report also includes a separate message from the Task Force Chairman in which she outlines major challenges for today and tomorrow that were beyond the scope of the Task Force charter.

Index of Recommendations

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

PROGRAM RECOMMENDATIONS		
P-1	Eligibility	95
P-1.1	Use Chapter 36 Counseling benefits as part of the triage process for administering the use of Chapter 31 for pre-discharged military members and post-discharged veterans. (Near-Term)	
P-1.2	Remove the limiting periods for use of Chapter 36 counseling benefits. (Near-Term)	
P-1.3	Establish a system to accelerate the delivery of Chapter 31 rehabilitation services to those veterans in most critical need by changing the definitions of 38 U.S.C §§ 3101 and 3102. (Mid-Term)	
P-2	Employment	99
P-2.1	Implement a new, five-track employment-driven VR&E service delivery system and a broad-based strategy to consistently communicate to veterans and stakeholders that the purpose of the VR&E Program is employment. (Mid-Term to Long-Term: Priority)	
P-2.2	Create the position of VR&E Assistant Director for Employment Services to provide leadership and elevate the visibility and importance of veterans' employment within VA and to outside stakeholders. (See Recommendation on Central Office Organization and Staffing.) (Near-Term)	
P-2.3	Create new staff positions and add staff for an Employment Readiness Specialist (56 FTE) and a Marketing and Placement Specialist (56 FTE) to facilitate implementation of the five-track employment-driven service delivery model. (See Recommendations on Workforce Management and Chapter 4.) (Near-Term to Long-Term)	
P-2.4	Transfer the 45 FTE Employment Specialist positions in VR&E back to professional counseling positions. (See Recommendations on Workforce Management.) (Near-Term to Long-Term)	
P-2.5	Develop new policies and procedures to implement the new, five-track employment-driven service delivery system with priority given to Guard and Reservists in Tracks 1 and 2. (Near-Term: Priority)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

P-2.6	Develop and implement initial and recurring training programs for Employment Marketing and Placement Specialists and Employment Readiness Specialists. (Near-Term)	
P-2.7	Make better use of special appointing authorities to help veterans obtain federal employment. (Mid-Term)	
P-2.8	Provide an interim information system capability and long-term solution to support a redesigned comprehensive employment services program. (See Recommendations on Information Technology.) (Near-Term; Priority)	
P-2.9	Enhance existing online employment services. (Near-term)	
P-3	Independent Living	102
P-3.1	Establish a VR&E Service CO staff position dedicated to lead and manage the IL program. (Near-Term)	
P-3.2	Create and staff Independent Living Specialists positions with personnel experienced in social work, counseling psychology, and disability. (See Recommendation on Workforce Management.) (Near-Term)	
P-3.3	Review IL “best practices” such as those implemented in the Tampa VAMC and the St. Petersburg VARO as well as various state models as exemplified by the State of Alabama Independent Living Program. (Near-Term)	
P-3.4	Provide consistent and uniform training for IL specialists. (See Recommendation on Training.) (Near-Term)	
P-3.5	Initially, focus VHA/VR&E integration on Centers of Excellence for spinal cord injury, traumatic brain injury, blind rehabilitation, and stroke. Establish protocols for a VHA/VR&E team approach (One VA) under the leadership of the IL specialist. (Mid-Term)	
P-3.6	Review funding sources and create and maintain an inventory of IL services and assistive technology devices that can be provided across VA. (Mid-Term)	
P-3.7	Initiate a study of the population of veterans currently in the VR&E IL Program and those receiving IL services; use this data and other research to develop estimates of the future demand for IL services and the types of services that might be needed to support veterans. (Mid-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

P-4	Partnerships	103
P-4.1	Establish a Veterans Rehabilitation and Employment Working Group led by VA Central Office and composed of representatives from VHA, VBA and VR&E, DOL, DoD and the Council of State Administrators of Vocational Rehabilitation to develop and implement local, regional, and national policies, strategies, and plans for continued collaboration and improved integration of rehabilitation and employment of veterans with disabilities. (Mid-Term)	
P-4.2	Initiate a Memorandum of Understanding (MOU) with the Council of State Administrators of Vocational Rehabilitation (CSAVR) and the Rehabilitation Services Administration (RSA) to facilitate formal partnerships with state vocational rehabilitation agencies to leverage employment opportunities for veterans with disabilities. (Near-Term)	
P-4.3	Establish a pilot project with the VBA Montgomery Regional Office and the Alabama Department of Rehabilitation Services to guide the development and design of collaborative business processes that could be implemented nationwide. (Near-Term)	
P-4.4	Negotiate a new Memorandum of Agreement with DOL to improve and standardize nationwide the DVOP-VR&E business processes and relationships for more effective and efficient delivery of services to veterans with disabilities seeking employment. (Mid-term)	
P-4.5	Enter into proactive collaborative relationships with other key local, regional, and national organizations such as the Office of Federal Contract Compliance Programs, state employment agencies, and other entities such as the growing national employment network of state employment personnel, business representatives, and others. (Mid-Term)	
ORGANIZATION RECOMMENDATIONS		
O-1	Organizational, Program, and Fiscal Accountability	106
O-1.1	Provide the VR&E Service Director greater line-of-sight authority over VR&E field staff and operations, resources and personnel evaluation, selection, assignment, and promotion. (Near-Term to Long-Term)	
O-1.2	Establish clear lines of responsibility and authority within the VR&E Service for administration of the program and delivery of services. (Near-Term to Long-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

O-1.3	Set formal performance goals for VR&E Officers, VR&E staff, Regional Office Directors, and Service Center Managers and hold these individuals accountable for performance. (Near-Term to Long-Term)	
O-1.4	Implement a systematic project integration and change management process. (Near-Term to Long-Term)	
O-1.5	Expedite the transfer of voucher processing to RO Finance Offices; provide additional FTE as necessary to support this transition and workload. (Near-Term)	
O-1.6	Develop an integrated protocol for seamless management by VR&E and the CFO of voucher audit operations and establish performance standards to ensure timeliness of payments and purchases. (Near-Term)	
O-1.7	Implement a process and system for tracking and documenting the purchase of individual and cumulative Chapter 31 services and products purchased by RO staff for each veteran; put in place processes for analysis and executive oversight and review of nationwide data, trends in purchasing, and appropriateness of these purchases to the mission. Routinely provide visibility of this data and information to CO and field staff, RO Directors and the VBA CFO. (Near-Term to Mid-Term)	
O-1.8	Enforce a nationwide protocol for threshold approval (level of funds and types of purchases) of single and cumulative services and products procured by VR&E staff, VR&E Officers, and RO Directors. Develop this protocol in coordination with the CFO and Office of Field Operations to ensure that all aspects of fiscal control and program integrity are addressed. Provide RO Directors the authority to establish more restrictive fiscal controls based on local circumstances. (Near-Term)	
O-1.9	Enhance the functionality of CWINRS on a priority basis to address CFO requirements for internal control and financial management. Enhance the functionality of CWINRS for management and oversight of all discretely-procured contractor services and products by veteran, counselor, and type of goods or services; establish cumulative expenditure thresholds for purchase of goods and services and establish a second level of pre-approval tied to these thresholds. (Near-Term to Mid-Term)	
O-2	Central Office Organization and Facilities	110
O-2.1	Implement a new organizational structure for the VR&E CO organized under four Assistant Director positions – Counseling and Outreach Programs, Employment Programs, Rehabilitation Programs, Field Operations. (Near-Term; Priority)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

O-2.2	Create an Assistant for Program Integration position reporting to the Deputy Director. (Near-Term; Priority)	
O-2.3	Enhance current CO capacities for: Management and Operational Analyses; Employment Services; Staff Training and Professional Education; Contract Management; Policy and Procedures; Quality Assurance; Finance and Resource Management; Information Technology; Administration of the Chapter 36 Program; Data and Program Coordination with DoD, DOL, and other federal agencies involved with veterans' small business and employment programs (Near-Term; Priority)	
O-2.4	Create new Central Office capacities for: Assistive Technology; Veteran Rehabilitation and Employment Research, Development and Planning; Program Analysis and Evaluation; Project Management; Field Operations; Disabled Transition Assistance Program (Mid-Term)	
O-2.5	Provide additional facilities for VR&E CO to improve productivity of current staff and for new staff. (Near-Term; Priority)	
O-3	Central Office Staffing	113
O-3.1	Increase the current direct staffing level of the VR&E Central Office staff from 33 to a goal of about 55-60 to more appropriately reflect the level of resources needed to execute the mission of the VR&E Service and support new and required capacities. (Near-Term to Mid Term)	
O-3.2	Relocate the VR&E Central Office positions that were out-based at the Regional Offices back to Central Office to improve staff effectiveness. Consider consolidating the VR&E Quality Review Team at the C&P Star Team location. (Near-Term to Mid-Term)	
O-3.3	Provide contractor support services for VR&E CO. Contractor support services should be prioritized for management support; operational, process, and requirements analysis; project management and integration. (Near-Term; Priority)	
O-4	Workforce Management	114
O-4.1	Reevaluate and update the March 2003 VR&E Workforce and Succession Plan with concrete actions and milestones to mitigate the risks cited in the plan. (Mid-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

O-4.2	Develop and implement workforce productivity and staffing analyses to develop a set of analytical tools for estimating future workload, task, and labor hour requirements, staff sizing, and skill mix. (See Recommendation on Program Analysis and Evaluation.) (Mid-Term to Long-Term)	
O-4.3	Create Assistant VR&E Officer positions and a systematic and centrally-managed selection and training program for personnel to fill these positions. (Near-Term)	
O-4.4	Remove the freeze on hiring to fill all VR&E positions; change VBA policies so as not to constrain hiring for VR&E positions to local RO FTE ceilings. (Near-Term; Priority)	
O-4.5	Provide VR&E with additional and temporary FTE positions to facilitate early hiring and training to mitigate the service impacts of anticipated personnel attrition. (Near-Term and Mid-Term)	
O-4.6	Create new staff positions and add staff for an Employment Readiness Specialist (56 FTE) and a Marketing and Placement Specialist (56 FTE) to facilitate implementation of the five-track employment service delivery system. (See System in Chapter 4.) (Near-Term to Long-Term)	
O-4.7	Transfer VR&E's 45 FTE Employment Specialist staff positions back to professional counseling positions. (Near-Term to Long-Term)	
O-4.8	Create a new Independent Living Specialist position. (See Job Description in Appendix 12.) (Near-Term)	
O-4.9	Increase current field staffing levels to provide dedicated FTE to plan and implement VA's responsibilities in DTAP and execute a consistent, national DTAP program at all DoD installations and Military Treatment Facilities. (Mid-Term)	
O-4.10	Create and staff a new VR&E position at the RO for a contract/purchasing specialist and implement a training program for these staff in coordination with the VBA CFO and contract management staff. (See Recommendation on Workforce Management.) (Mid-Term)	
O-4.11	Relocate the VR&E Central Office staff that was out-based at the Regional Offices back to Central Office to improve staff effectiveness. (See Recommendation on CO Staffing.) (Near-Term and Mid-Term)	
O-4.12	Consolidate the VR&E CO Quality Assurance (QA) staff and increase the size of the QA staff. (See Recommendation on Performance Measures and Quality Review.) (Near-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

WORK PROCESS RECOMMENDATIONS		
WP-1	Workload Management	121
WP-1.1	Implement a VR&E Service CO process for visibility and management of the national VR&E workload to include an inventory management system and setting of consistent, nationwide priorities and strategies for workload management. (Near-Term to Mid-Term)	
WP-1.2	Streamline and standardize the scope and content for counselor case file documentation to include the use of the Needs Assessment Inventory. (Near-Term to Mid-Term)	
WP-1.3	Provide for electronic transcription capabilities to facilitate more efficient use of available counselor resources through voice activated software and/or the use of transcription services. (Near-Term)	
WP-1.4	Develop national and local RO forecasts of Chapter 31 veterans exiting rehabilitation and entering job ready status in FY 2004 (and beyond as necessary) and develop interim strategies and plans to more effectively manage this population of veterans until the Five-Track Employment Process is fully implemented. (Near-Term)	
WP-1.5	Initiate a VR&E Service CO led nationwide project using contractors to follow-up with Chapter 31 veterans in interrupted or discontinued status and for tracking of veteran employment status. (Near-Term to Mid-Term)	
WP-2	Contract Services	125
WP-2.1	Continue to use contract services to supplement the VR&E workforce in providing counseling, employment, and rehabilitation services. (Near-Term to Long-Term)	
WP-2.2	Revise the VBA Office of Field Operations resource allocation model to base RO funding for contract services on local estimates of the volume and types of services and the actual costs of services rather than the RO's percentage of the national workload. (Near-Term; Priority)	
WP-2.3	Revise the current VR&E Services National Contract Statement of Work to provide definitions of the specific content of each service to be provided; standardize paper and electronic formats for submission of all contractor developed evaluations, plans, case narratives, counseling or other requirements; establish a performance management and quality review process, and establish a VR&E contract service provider training and accreditation program. (Near-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

WP-2.4	Develop a contract management training program for all VR&E Officers, supervisors, CO staff, and those VR&E field staff with direct responsibility for contract administration and supervision of contract services. (Near-Term)	
WP-2.5	Create and staff a new VR&E position at the RO for a contract/purchasing specialist and implement a training program for these staff in coordination with the VBA CFO and contract management staff. (Mid-Term)	
WP-3	Case Management and Specialization	128
WP-3.1	Change the current VR&E case management model to a model based on specialization of work processes and the workforce. (Mid-Term)	
WP-3.2	Provide RO VR&E staffs maximum flexibility to specialize their staff resources. (Near-Term)	
WP-4	Priority Service at VHA	130
WP-4.1	Implement a system within VHA and VBA to provide priority health care related services to Chapter 31 program participants. (Near-Term)	
WP-5	Functional Capacity Evaluation (FCE)	130
WP-5.1	Implement Functional Capacity Evaluation as a key process in a strategic redesign of the 21st Century Veteran Counseling, Employment, and Rehabilitation Program. (Long-Term)	
WP-5.2	Design and implement pilot FCE projects as a first step toward implementation; consider co-locating this project office with the VBA C&P Exam Project at Nashville to leverage VBA resources program and technical capabilities. (Near-Term; Priority)	
WP-6	Disability Transition Assistance Program (DTAP)	132
WP-6.1	Assign primary responsibility for the planning and administration of VA responsibilities in the DTAP program within VBA to the VR&E Service and designate a DTAP Manager. (Near-Term)	
WP-6.2	Set goals and measures of success to improve the administration of VA responsibilities TAP and DTAP. (Near-Term)	
WP-6.3	Develop standardized information briefings and materials to ensure service members are provided comprehensive counseling that is consistently delivered. (Mid-Term)	
WP-6.4	Establish a program with the DOD to deliver DTAP services at every Military Treatment Facility using VBA personnel or trained contractors. (Mid-Term to Long-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

WP-6.5	Provide dedicated funding to support the administration of DTAP. (Near-Term)	
INTEGRATING CAPACITY RECOMMENDATIONS		
IC-1	Regulations and Manuals	134
IC-1.1	Work with General Counsel to publish updated Chapter 31 regulations consistent with the new Five-Track Employment Process and the integrated service delivery system within 9 months of the date of the VR&E Task Force Report. (Mid-Term)	
IC-1.2	Implement a change management process to control and integrate the various VR&E Service CO and field initiatives now underway to make changes in the process, regulations, manuals, policies, and technology functionality for administering VR&E Program. (Near-Term to Mid-Term)	
IC-1.3	Impose communications discipline with the VR&E Service CO for timely response to field requests for guidance. (Near-Term)	
IC-1.4	Update the VR&E Program baseline of regulations, manuals, and policies through an integrated change control process to be consistent with the new five-track service delivery system and the recommendations of the Task Force. (Mid-Term to Long-Term)	
IC-2	Performance Measures	136
IC-2.1	Design and implement a new VR&E process and outcomes performance measurement system for the five new VR&E service delivery tracks; base the outcomes performance measures on the concept of "Maximum Rehabilitation Gain;" coordinate with and use the expertise of the Department of Veterans Affairs Program Evaluation Service in the design, testing, and implementation of this new system; also seek the technical assistance of CARF in this effort. (Mid-Term)	
IC-2.2	Initiate a study of other federal, state, and private sector vocational rehabilitation service organizations to benchmark process and outcomes performance measures and quality assurance processes; coordinate with and use the expertise of the Department of Veterans Affairs Program Evaluation Service in this study and also seek the technical assistance of CARF in this effort. (Mid-Term)	
IC-2.3	Change the current methods used to measure VR&E claim timeliness so that the "timeliness clock" starts when the VR&E Division gets the Form 1900 application and a service-connected disability rating from the Veterans Service Center. (Near-Term; Priority)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

IC-2.4	Reevaluate the rules for calculating the current timeliness measures for cases that are transferred to another RO. (Mid-Term; Priority)	
IC-2.5	Implement a new C&P performance measure for Veterans Service Center Memo Rating timeliness; incorporate this measure in the performance evaluation criteria for Service Center Managers. (Near-Term; Priority)	
IC-2.6	Remove the number of discontinued cases from calculation of the VR&E rehabilitation rate (Near-Term; Priority)	
IC-2.7	Do not count Independent Living cases in the current formula for computing the rehabilitation rate; create a new performance measurement system for IL. (Near-Term)	
IC-2.8	Change the final measurement of employment success from 60 days to 90 days with case closure, and follow-up at 120 days and 180 days by Central Office, RO, or Quality Review staff. (Mid-Term)	
IC-2.9	Implement a new VHA timeliness performance measure for Form 8861 requests from VR&E for services to Chapter 31 veterans. (Near-Term)	
IC-3	Quality Review Process	141
IC-3.1	Redesign the Quality Assurance Review process to reflect the new five-track VR&E service delivery system. (Mid-Term to Long-Term)	
IC-3.2	Seek technical assistance from CARF to facilitate improvements to the Quality Review process. (Near-Term)	
IC-3.3	Conduct an independent review in 6 months of the VR&E Quality Review Process now being implemented. (Mid-Term)	
IC-4	Information and Systems Technology	142
IC-4.1	Remove the VBA policy constraints impacting VR&E productivity and service delivery to install T-1 lines for all VR&E out-based locations. (Near-Term; Priority)	
IC-4.2	Hire a systems integration contractor to provide sustaining support to the VR&E Service for process and requirements analysis, technology assessments and recommendations, assistive technology consultation, and project management. (Near-Term; Priority)	
IC-4.3	Elevate the VA funding priority of CWINRS, accelerate the development and production incorporation of financial and process enhancements, and expand the scope of the current Phase II CWINRS Functional Requirements Analysis. (Near-Term; Priority)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

IC-4.4	Develop and conduct an initial and recurring training course on CWINRS report functionality and analysis for all VR&E field and Central Office staff. (Near-Term; Priority)	
IC-4.5	Provide VR&E service contractors training on the use of CWINRS and access to CWINRS for data entry and reports. (Near-Term; Priority)	
IC-4.6	Fully use CWINRS capabilities for Chapter 36; provide nationwide tracking of Chapter 36 participants and access to case information. (Near-Term)	
IC-4.7	Create a systems capability for VR&E to request and track VHA appointments and services for Chapter 31 veterans. This effort should be linked, establishing clear priority in VHA for Chapter 31 veterans who need services for timely employment readiness and to complete rehabilitation plans. (Near-Term; Priority)	
IC-4.8	Leverage IT capabilities to more efficiently administer Chapter 31 training and education programs and certifications and to track the progress of veterans in training and education programs. (Mid-Term)	
IC-4.9	Partner with the VA Learning University to develop a 21st Century online higher education program for Chapter 31 veterans and VR&E staff. (Long-Term)	
IC-4.10	Initiate a long-term project to develop the functional requirements for a 21st Century VBA counseling, employment, and rehabilitation program information system capability. (Long-Term)	
IC-5	Training	149
IC-5.1	Establish a VR&E Training and Education Office to be located at the VR&E Central Office and provide dedicated staff. (Near-Term)	
IC-5.2	Accelerate the VR&E Training Needs Assessment planned for FY 2005 to begin in FY 2004. (Near-Term)	
IC-5.3	Develop and conduct formal initial training courses and a recurring training program with the VBA Training Academy using community as well as private sector and university-based experts and advocates in the field of disability, rehabilitation, and employment of persons with disabilities. (Near-Term)	
IC-5.4	Create a program of professional continuing education and initiate a technical assistance relationship with the Commission on Accreditation of Rehabilitation Facilities. (Near-Term to Mid-Term)	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Page

IC-6	Resource Management	154
IC-6.1	Develop an improved VR&E Resource Requirements Model. (Mid-Term to Long-Term)	
IC-6.2	Modify the VR&E Resource Allocation Model to base contract funding on the forecasted estimate of the volume and types of services and the actual unit cost history for those services at each RO. (Mid-Term to Long-Term)	
IC-6.3	Provide the VR&E Service Director some measure of control over the allocation of resources. (Near-Term)	
IC-6.4	Restrict the ability of RO Directors to redirect VR&E funds. (Near-Term)	
IC-7	Program Analysis and Evaluation (PA&E)	157
IC-7.1	Defer the VA Program Evaluation of the VR&E Program scheduled for FY 2005; first invest in rebuilding the VR&E Service data and analysis (strategic and operational) capabilities. (Long-Term)	
IC-7.2	Develop and fund a short and long-term research and study agenda focused on VR&E served veterans and program outcomes. (Long-Term)	
IC-7.3	Develop and fund efforts to develop a set of evidenced based practices to guide development and implementation of VR&E policies, procedures, and policies. (Near-Term)	

Chapter 1

Background

Overview of Vocational Rehabilitation for Veterans

This report provides the findings and recommendations of the Department of Veterans Affairs Task Force chartered by the Secretary to identify changes necessary to rebuild the Vocational Rehabilitation and Employment Service to best provide service-disabled veterans the opportunities and services they need for working and living productively in the 21st Century. (For purposes of this report, the name Vocational Rehabilitation and Employment Service means the Central Office organization and field structure. In practice, the name refers only to the Central Office.)

The VR&E Service is one of five business lines within the Veterans Benefits Administration that provides benefits and services to veterans. The VR&E Service primarily delivers Chapter 31 rehabilitation services to assist veterans with service-connected disabilities to compete for and keep jobs in the civilian workforce. For those veterans with a serious employment handicap, and for whom employment is not currently an option, the program provides a wide range of independent living services. The VR&E Service also provides benefits and services to eligible family members.

The VR&E Service administers four benefits programs authorized under Title 38 U.S.C. and the Task Force endeavors were focused on two of these programs –

The purposes of Chapter 31 are “to provide for all services and assistance necessary to enable veterans with service-connected disabilities to achieve maximum independence in daily living and, to the maximum extent feasible, to become employable and to obtain and maintain suitable employment.” – 38 U.S.C. § 3100

Chapter 31 (Training and Rehabilitation for Veterans with Service-Connected Disabilities) and Chapter 36 (Educational Vocational Counseling). An overview of the four programs, including Chapter 18 (Vocational Training for Vietnam Veterans’ Children with Spina Bifida) and Chapter 35 (Dependents Education Assistance), is provided in Appendix 10.

The VR&E Service delivers the benefits of these four programs through a decentralized service delivery network composed of 56 VBA

Regional Offices and 138 out-based offices. This network is staffed with a VR&E workforce of about 1,000 professional Vocational Rehabilitation Counselors and support specialists along with a complement of contract counselors and other professionals.

Three key features distinguish the VR&E service delivery strategy from the service delivery strategies of VBA’s other lines of business. First, the VR&E

Service provides individualized services that require face-to-face interaction with the veteran to deliver the benefits and services in contrast to VBA's other lines of business that focus on claims processing. Second, the life cycle of an active VR&E case may extend over four or more years. Third, VR&E has the largest out-based network of service delivery points of any VBA business line. The VR&E Service workload is predominately driven by two factors: the number of veterans applying for rehabilitation and training benefits and services (Chapter 31, Title 38); and the number of veterans who actually enter into the development and implementation of a rehabilitation plan. The number of veterans applying for Chapter 31 benefits increased by 73 percent – from 37,829 in FY 1992 to 65,298 in FY 2003. During the same time period, the number of veterans in various active phases of the Chapter 31 program was 58,155 at the end of FY 1992 compared to 97,158 at the end of FY 2003; a 67 percent increase. It is important to note, however, that despite the tens of thousands of program participants, the number of veterans rehabilitated by obtaining a job or achieving independent living goals has averaged only about 10,000 a year for several years.

Evolution of Vocational Rehabilitation for Veterans

Vocational rehabilitation began as a government service to war-injured veterans and disabled citizens during the World War I era. In 1917, the War Risk Insurance Act of 1914 was amended to provide rehabilitation and vocational training for veterans with dismemberment injuries, injuries to their sight or hearing, and other injuries resulting in permanent disability.

Although the legislative history of VA's vocational rehabilitation program has not been as dynamic as the Compensation and Pension Program or perhaps VBA's other lines of business, the basis for the program has changed substantively since it was first created. At the same time, the organization that has administered this program within VBA has also evolved. The following legislative history of the VR&E Program provides a context for understanding many of the issues that have impacted reform.

Legislative History

Since the original legislation establishing what is now the VR&E Program, there have been several pieces of legislation that have made the program what it is today.

- 1918–Public Law 65-178 expanded eligibility for other disabilities that were vocationally “handicapping.”
- 1943–Public Law 78-16 established the vocational rehabilitation program for veterans of World War II.
- 1962–Public Law 87-815 authorized vocational rehabilitation benefits for veterans who served during peacetime, but created more restrictive eligibility criteria for those who served in peacetime as compared to those who served in World War II or the Korean Conflict. Veterans with 10 percent and 20 percent service-connected disability were not eligible for vocational rehabilitation.

- 1974–Public Law 93-508 relaxed eligibility and entitlement provisions of the program to allow 10 and 20 percent service-disabled veterans to receive vocational rehabilitation benefits.
- 1977–Public Law 95-202 directed VA to engage in greater efforts to encourage veterans to use vocational rehabilitation and counseling services. This change and the subsequent legislative change in 1980 were the result of Congressional scrutiny of the program.
- 1980–Public Law 96-466 changed the purpose of the program to include independent living and services necessary to ensure that veterans with service-connected disabilities not only obtained but maintained suitable employment. This legislation also changed the success criteria for the program to achievement of suitable employment and provided for intensive outreach and comprehensive, individualized plans for rehabilitation services.
- 1990–Public Law 101-508 eliminated entitlement for veterans with a 10 percent service-connected disability.
- 1993–Public Law 102-568 changed the law again so that those with a 10 percent service-connected disability were once again entitled to benefits.
- 1996–Public Law 104-275 limited participation in Self Employment and Home Bound Training to veterans with severe service-connected disabilities who require self-employment to achieve vocational rehabilitation.

“...until 1980, successful rehabilitation was defined as the completion of training for suitable employment, not actual employment.”

This legislative history has consistently broadened the scope of services to be provided by the program and continually changed the eligibility of 10 and 20 percent service-connected disabled veterans for vocational rehabilitation benefits. It is also important to keep in mind that until 1980, successful rehabilitation was defined as the completion of training for suitable employment, not actual employment. A more detailed narrative on legislative history is contained in Appendix 9.

Evolution of the VR&E Service

VA’s vocational rehabilitation programs evolved after the two World Wars, the Korean War, and the Vietnam Conflict. During this period, the organizational structures to administer the rehabilitation program also changed. In the past, vocational rehabilitation was part of various VBA organizations such as the Veterans Services Division that was composed of full-time, career benefits counselors who met face-to-face with veterans. This structure integrated VBA’s counseling workforce. This division was disbanded in the mid-1990s and the Compensation and Pension Service assumed responsibility for staffing what are now called Contact Teams at each Regional Office. In this model, there are no longer full-time, career benefits counselors. At one time, vocational rehabilitation was also in the same structure with what is now VBA’s Education Service. Since the mid-1980s, VBA’s vocational rehabilitation organization has not been stable in terms of structure and alignment within VBA. In 1986, the Vocational

Rehabilitation and Counseling Service was again combined with the Education Service. The perception that Chapter 31 is an education and training program has been reinforced through the years given VR&E's alignment with the Education Service.

“Since the early 1980s, there have been at least 24 separate external and internal reviews, reports, and audits of the VR&E program.”

In 1990, the Vocational Rehabilitation and Education Service was reorganized as the Vocational Rehabilitation Service. In 1993, the name of the organization was changed to the Vocational Rehabilitation and Counseling Service. More recently, in 1999, the name of the Central Office

organization and field structure was changed to the Vocational Rehabilitation and Employment Service. Over the past two decades the reorganizations, realignments, and name changes do not portray a stable organization. This may in part be one reason that the purpose and intent of the 1980 legislation that fundamentally changed the program have not been fully implemented.

Past Criticisms

VA's Vocational Rehabilitation and Employment Program has been the subject of continuing criticism. Since the early 1980s, there have been at least 24 separate external and internal reviews, reports, and audits of the program. A summary of these reports appears in Appendix 6. Task Force members or staff reviewed these documents as part of its fact-finding efforts and identified a number of recurring themes that resonate throughout these reports. Themes are:

- Weak VBA and VR&E Central Office leadership and accountability.
- Lack of program direction and outdated policies and procedures.
- Limited data and analysis to effectively manage the program.
- Emphasis on long-term education for veterans rather than a priority focus on employment.
- Low success rates and a high attrition rate of program participants.
- Failure to provide follow-up support for “rehabilitated” beneficiaries.
- Poor planning and implementation of improvement projects.
- Failure to effectively coordinate nation-wide partnerships with VA and DOL.
- Need for a more aggressive and proactive approach to serving veterans with serious employment handicaps.
- Outdated work process techniques.
- Lack of comprehensive rehabilitative services.

The most significant and persistent criticism has been that VR&E has still not fully implemented the type of changes – program, organization, and work processes – necessary to comply with the intent of the law, that is to provide suitable employment for veterans. This is not the first time that an independent group has reached this conclusion. In its 1999 report, *The Congressional Commission on Servicemembers and Veterans Transition Assistance*, identified major

deficiencies in all federal programs serving veterans including serious problems with the Vocational Rehabilitation and Counseling Service (as mentioned above, the name change to Vocational Rehabilitation and Employment occurred in 1999). The Commission concluded:

"...if VA has not made significant improvements in achieving the program's employment purpose in 2 years, the Commission recommends that the responsibility for delivering the services be opened to full competition to outside entities."

These criticisms have increased in recent years in reports from the General Accounting Office (GAO), the Veterans Service Organizations' Independent Budget, VA's Office of the Inspector General, and from VR&E internal reports.

The Task Force commends the VR&E Service for the efforts that have been taken, particularly in the most recent past, to refocus its efforts on employment. Beginning in the mid-1990s, the VR&E Service initiated a number of internal Task Forces and projects with the intent of reforming the program. These efforts were well intended, but in the view of the Task Force, these efforts did not focus on the fundamental problems impacting improved performance nor were they effectively planned and managed. As a result of unsuccessful reform plans combined with reduced program management and oversight by Central Office, the VR&E Officers in the field have been left to individually implement the program with little direction from Central Office.

"...VR&E Officers in the field have been left to individually implement the program with little direction from Central Office."

Task Force Charter

In 2002, the Under Secretary for Benefits expressed his concerns about whether or not the VR&E program was meeting the intent of the law as it relates to the rehabilitation of service-disabled veterans, and if the VR&E Service was providing appropriate management oversight of the program. Because of these concerns, the Under Secretary for Benefits recommended to the Secretary of Veterans Affairs that the Secretary establish an independent task force to review the VR&E program. The Secretary of Veterans Affairs approved this recommendation in December 2002, and a charter for the VR&E Task Force was signed in May 2003.

The Secretary appointed 12 members to the Task Force and membership represented a diverse group of public and private sector experts from the disability, veterans service organizations, vocational rehabilitation, clinical, and consulting communities. The Secretary of Veterans Affairs appointed the Chairman and Task Force Executive Director; the Veterans Benefits Administration provided a liaison for all Task Force requests. The VR&E Task Force members are identified, along with biographical sketches, in Appendix 2. The Secretary's charter (Appendix 1) called for the Task Force to:

- Conduct a functional and organizational assessment of the VR&E service.
- Evaluate eligibility criteria, procedures, and processes for determining

how a veteran is approved for training, employment, or independent living services.

- Appraise current VR&E processes, information systems, and management controls.
- Determine consistency in the administration of the VR&E Program across VBA regional offices.
- Examine clinical rehabilitation practices and employment placement services used by other federal, state, local, or private organizations serving disabled persons, including veterans.

At the first Task Force meeting, the Secretary directed the members to

“...give our program an unvarnished, top to bottom independent examination, evaluation and analysis...I want to ensure that veterans, and America, receive the maximum return from the dedication and energy invested by VA employees who have dedicated their lives to transforming disabled veterans into productive participants in civilian society.”

The Secretary further asked the Task Force to recommend effective, efficient, up-to-date methods, materials, metrics, tools, technology, and partnerships to provide disabled veterans the opportunities and services they need for working and living productively in the 21st Century.

How the Task Force Worked

The work of the Task Force was carried out through a series of public fact-finding sessions, field visits, and analyses of previous studies and reports on the VR&E Program. Task Force members were organized into three subcommittees to conduct fact-finding research. Each of the following subcommittees considered ways to make VR&E a key player in building a “One VA solution” – a VA that works internally and externally to provide a seamless continuum of service for veterans, especially those with service-connected disabilities:

- The Internal Assessment Subcommittee reviewed the organizational structure, leadership and management, policy development, internal processes, workforce issues, measures, and information systems for the purpose of proposing sound business principles for managerial and data systems.
- The Service Integration Subcommittee assessed the independent living program and other services and proposed reforms across the Department of Veterans Affairs and other partner agencies as needed in order to serve those veterans who are most in need of the service.
- The Employment Subcommittee evaluated both internal (VA) and external (non-VA) employment services in order to propose state-of-the-art practices that would focus the VR&E Service on job placement as the measure of success.

Task Force Fact-Finding Activities

The Task Force held three public fact-finding meetings in Washington, DC to solicit the comments and recommendations of Congressional Committee staffs, the General Accounting Office, Veterans Service Organizations, Veterans Benefits Administration, and partnership organizations such as the Veterans Health Administration (VHA) and the Department of Labor (DOL). The Task Force also received public comments from a variety of professional organizations and private sector national firms prominent in the fields of disability, rehabilitation, and employment of persons with disabilities. Task Force subcommittees worked independently and together to integrate the results of their work. Appendix 3 identifies the individuals and organizations that provided comments to the Task Force.

Fact-finding activities also included a total of 17 field visits. To facilitate these field fact-finding activities and to achieve consistency in its analysis, the Task Force developed an interview guide and a standardized agenda for site visits. (See Appendix 4.) Field activities included visits to 12 VA

Regional Offices where the Task Force conducted interviews with VR&E staff and held focus group sessions with veterans service organization representatives, VR&E contractors, and Chapter 31 participants. Field visits also included trips to the Veterans Benefits Academy, the DOL National Veterans Training Institute, the Tampa VA Medical Center, the Walter Reed Army Medical Center, the U.S. Navy Medical Research Center, and the Department of Defense Computer/Electronic Accommodations Program (CAP). In addition, Task Force members conducted interviews with current and former VR&E Central Office staff and two expert panels composed of VA Regional Office Directors and VR&E Service Officers.

“The Task Force greatly appreciates the field’s dedication and desire to see improvements in how the VR&E Service does business.”

Additionally, the Task Force encouraged the VR&E staff to submit their comments and suggestions, with the promise of confidentiality, to the Task Force Executive Director on what works and does not work in the VR&E Service. The Task Force received dozens of email responses providing about 100 pages of insightful commentary based on the experiences of vocational rehabilitation counselors and other staff in the field. The Task Force wants the VR&E staff to know that each response was carefully read and considered. The Task Force greatly appreciates the field’s dedication and desire to see improvements in how the VR&E Service does business. A synopsis of VR&E staff comments is provided in Appendix 5. In addition, VBA’s Surveys and Research Staff discussed comments from veterans participating in the Chapter 31 program on the 2002 Veterans Satisfaction Survey. Survey comments are summarized in Appendix 7.

Past Studies and Reports

The Task Force or staff reviewed past studies and reports that have been produced on the VR&E Program over the past two decades by the Congress and Congressional oversight committees, Veterans Services Organizations, the General Accounting Office, and the Office of the VA Inspector General. VR&E internal evaluations, VBA customer surveys, and the Department’s Strategic

Plan were also reviewed. The Task Force looked at regulations and other policy guidance that provide the basis for the VR&E Program. Additionally, the Task Force explored the changing world of employment, 21st Century approaches to vocational rehabilitation, emerging technologies, society's growing focus on ability as opposed to disability, and other forward-looking themes.

Study Constraints

The work of the Task Force was impacted by two constraints – (1) the lack of consistency, standardization, and management of VR&E practices across all VA Regional Offices and (2) the absence of enriched workload, operational, and performance data to include longitudinal information on Chapter 31 participants. Task Force site visits revealed the administration of the VR&E Program to be inconsistent. We found vast differences in the philosophy and purposes of the VR&E Program and how services are delivered locally. The Task Force also noted differences in the management capabilities among the VR&E Officers and supervisors. It was apparent to the Task Force members who made site visits that the VR&E Central Office leadership and management style over the past decade has been timid in demanding and enforcing standardized policies and procedures.

Another constraint that impacted the efforts of the Task Force was the limited amount of data that has been collected over time on the VR&E workload, the veterans being served by the program, and the long-term outcomes of the program. The data that does exist has not been organized, analyzed, and widely disseminated so that VR&E Officers in the field can use the information in a consistent and productive way. Based on Task Force interviews, it appears that the VR&E capabilities for data collection and analysis have been allowed to atrophy over a number of years.

The Task Force expended a significant amount of time and effort delving into the available data in order to gain insight into the VR&E Service workload and veterans being served. While the Task Force recognizes the limitations of the data, we believe that the data presented in Chapter 3 and Appendix 8 provide a reasonable picture of the VR&E workload, veterans being served, and overall performance of the organization.

Chapter 2

21st Century World of Disability

Introduction: A Change in Attitudes

For decades, society has imposed attitudinal and institutional barriers that have resulted in people with disabilities living lives of dependency, isolation, segregation, and exclusion. But this old world of disability is fading and a new 21st Century world of disability is emerging. It is essential that the VR&E Service keep pace with the emerging disability trends of the 21st Century.

A seismic shift in societal attitudes toward persons with disabilities has occurred in the last 25 years and especially since the passage of the Americans with Disabilities Act (ADA) in 1990. This law, and its subsequent implementation, dramatically improved attitudes toward and services for persons with disabilities. According to the statute:

“...the Nation’s proper goals regarding individuals with disabilities are to assure equality of opportunity, full participation, independent living, and economic self-sufficiency for such individuals....”

The ADA was the world’s first comprehensive civil rights law for people with disabilities, ensuring Americans with disabilities equal opportunity and access to the mainstream of American life. The ADA prohibits job-related discrimination against people with disabilities by requiring reasonable accommodations on the job and access to state and local programs and services, including public and private transportation, public accommodations and telecommunications carriers.

The VR&E Service has not kept up with this larger world of disability outside of the VA. VR&E’s best efforts regarding employment of veterans have resulted in only 10 percent of those participating in the VR&E program obtaining employment. To be successful in the future, the VR&E Service must appreciate that there is a greater and more exciting world of disability outside of their program that can partner with the VA, can be leveraged to benefit the veteran, and is on the cutting edge regarding employment of persons with disabilities. As VR&E rebuilds its program into a comprehensive, integrated service delivery system it must do so within the context of this larger environment which continues to lead the way for persons with disabilities.

The foundation of any 21st Century vocational rehabilitation program must be an appreciation of the abilities of an individual – moving the focus from disability to ability. Today, sidewalk curb-cuts, employer education and support of job accommodations, adaptive techniques and technology, and opportunities for persons with disabilities to achieve a better quality of life – to be included, not excluded, from the mainstream – are becoming the norm.

According to Robert Silverstein, Director of the Center for the Study and Advancement of Disability Policy in Washington, DC, a “new paradigm” of disability has emerged. Disability is considered a normal part of the human condition. Rather than seeing the disability as a medical condition only, and, therefore, “fixing” the individual, the new paradigm sees disability as the interaction between the individual and his or her environment. The “environment” includes the social, economic, and political aspects of a person’s life. The focus of this new paradigm is to eliminate the attitudinal and institutional barriers that preclude people with disabilities from fully participating in every aspect of American life. This is the philosophy and framework that should be the basis for all of the Veterans Affairs programs, in particular the VR&E Service.

“Disability is considered a normal part of the human condition. Rather than seeing the disability as a medical condition only, and, therefore, “fixing” the individual, the new paradigm sees disability as the interaction between the individual and his or her environment.”

Global View

Accommodation and inclusion for people with disabilities has become a global movement. In November 2001, the World Health Organization (WHO) announced a new international tool to describe and measure health and disability. The tool, the International Classification of Functioning, Disability, and Health (ICF), moves our thinking beyond the purely medical model

of disability to an integrated model that considers the effects of the physical and social environment on people with disabilities. The new classification system shifts the focus to how people live with their health conditions and how these can be improved to achieve a productive, fulfilling life.²

While the ICF is being debated in the United States, in some developed countries ICF and its model of disability have been introduced into legislative and social policy. The intent is to make ICF the world standard for disability data and social policy monitoring.

The Public Sector and a National Disability Policy

All public and private organizations in the field of rehabilitation struggle with numerous challenging policy decisions. Most of this effort appears to be spent on analyzing and discussing how best to promote training opportunities with the goal of returning to work. Thus far, no one organization, nor one specific approach, has been found to be best throughout the world. In fact, many programs still miss the mark in assisting people with disabilities train for, find, and keep jobs appropriate for their interests, skills, and abilities.

Unfortunately, in spite of good intentions, there remains no comprehensive, coordinated national disability policy. There are many public sector policies and definitions of disability that contradict the new principles regarding disability. For example, in order to receive needed cash supports and health benefits, an individual with a disability must prove that he or she cannot work. Once the individual receives a benefit check for his or her impairment, the person is strongly encouraged to return to work. In most cases, outside of the VA, individuals who return to work lose some cash support and health benefits.

The ADA and the new disability paradigm emphasize that even individuals with severe disabilities can work, provided they receive appropriate supports, such as personal assistants, job accommodations, assistive technology, and other assistance. These contradictions in expectations and public disability policies often lead people with disabilities, including veterans with disabilities, to lives of poverty and dependence. These differences in definitions and program goals present a confusing maze of red tape for the person with a disability and his or her family members, and create dependency on the system.

To address this discrepancy in public policy, the U.S. public sector, with strong encouragement from people with disabilities and other disability organizations, has taken much of the lead in removing disincentives to work and promoting the belief that it is what one *can do*, not what one *cannot do* that matters, especially on the job. The Rehabilitation Services Administration of the U.S. Department of Education, the funding source for State Vocational Rehabilitation Agencies, has developed a list of principles that can guide other agencies. The VR&E Service should consider adopting similar principles as part of its mission statement. These principles are:

“Individuals with disabilities, including those with the most significant disabilities, are capable of achieving competitive, high-quality employment in integrated settings and living full and productive lives in their communities.”

- Individuals with disabilities, including those with the most significant disabilities, are capable of achieving competitive, high-quality employment in integrated settings and living full and productive lives in their communities.
- Major barriers to the employment and independence of individuals with disabilities are the low expectations and misunderstandings society, some grantee agencies, service providers, or consumers themselves have about their abilities, capacities, commitment, creativity, interests, and ingenuity.
- Individuals with disabilities are able to make informed choices about their own lives – including their employment options, the types of services they need, the selection of service providers – and are able to assume responsibility for their decisions.
- The primary role of Vocational Rehabilitation Agencies and other Rehabilitation Services Administration-funded entities is to empower individuals with disabilities by providing the information, skill training, education, confidence, and support services individuals need to make informed choices about their professional and personal lives.
- The most effective Vocational Rehabilitation, Independent Living, Training and other programs result from a strong alliance between individuals with disabilities, grantee agencies, service providers, and organizations representing each. These alliances encourage accountability

through systematic and ongoing assessments of a grantee's policies, programs and practices.

The Social Security Administration (SSA) is another example of a federal agency that is working to adapt its programs to the "new paradigm" for beneficiaries with disabilities. The administration realizes that as long as a cash benefit is conditional on demonstrating a lack of ability to work, disincentives to work will

"As a result of changes in disability programs, medicine, rehabilitation, technology, attitudes, and the economy, it is increasingly difficult for a program to be able to neatly draw a line between those who can and those who cannot work."

be inherent to the system. As a result of the many changes in disability programs, medicine, rehabilitation, technology, attitudes, and well as the impact of the economy, it is increasingly difficult for a program to be able to neatly draw a line between those who can and those who cannot work.

The Social Security Advisory Board, an independent, bi-partisan group, is asking the question whether the age-old SSA definition

of disability, which is at the heart of existing disability programs (Supplemental Security Income and Social Security Disability Insurance), and has an impact on other federal programs, is consistent with society's new beliefs about disability and work, including the goals articulated in the ADA.³

Likewise, the Task Force believes that the VR&E Service, along with the Social Security Administration and other federal agencies, should be a major participant and preferably a leader in this complex policy discussion, both within and outside the VA.

Informed Choice and Self-Empowerment

The new thinking about disability is evident through the integration of the concepts of consumer choice and self-empowerment into some federal and state vocational rehabilitation programs. Informed (or consumer) choice refers to an ongoing process where the individual and the vocational rehabilitation counselor work together to collect and evaluate information that will be utilized by the individual to make informed choices about goals and services that will lead to an employment outcome. The counselor acts as a facilitator/advisor in this process, not the decision maker. Implementation of informed choice ensures that the individual:

- Makes his or her own decisions related to employment outcome, services, providers, and procurement methods;
- Has access to enough information to weigh the possible values and consequences of various choices;
- Has a range of options from which to choose;
- Learns decision-making skills and makes decisions in ways that are important to him or her and takes personal responsibility for implementing the choices.

Ideally, this self-empowerment and partnership with rehabilitation professionals should lead to more effective programs for employment and self-sufficiency of persons with disabilities. That has not been, nor will it be, the case where Vocational Rehabilitation programs maintain the values of paternalism that have been the hallmark of vocational rehabilitation services during the early years. The strong belief in and the implementation of both consumer choice and self-empowerment should be fundamental attributes of a rebuilt service delivery system for the 21st Century veteran.

The Independent Living Movement

The Independent Living (IL) Movement, which began in the late 1960s as a social and civil rights movement, is an example of the new way of thinking about disability. The IL philosophy holds that individuals with disabilities have the right to live with dignity and appropriate supports in their own home, fully participate in their communities, and control and make decisions about their own lives. The more than 600 Centers for Independent Living (CIL) in the U.S. are governed and managed by people with disabilities and have established an excellent reputation for quality services to participants.

The IL philosophy and approach includes consumer control, peer support, self-help, self-determination, equal access, and individual and systems advocacy. In other words, it's not the disability that limits the individual, it's the environment.

Independent Living and the VA

The entire Department of Veterans Affairs must include IL principles such as empowerment, productivity, community inclusion, and employment in all of its programs. Currently, within the VR&E Service there is a lack of sufficient direction and staff training, specialized personnel, and integration with the VHA and the larger community-based IL movement to comprehensively serve a disabled veteran. Individual VR&E offices have implemented their own approaches to IL services and have emphasized only quality of life issues and personal goals (which are important), with little attention paid to potential employment opportunities.

In addition to peer support and self-determination, the success of community IL programs is rooted in partnerships. IL Centers work with state vocational rehabilitation agencies, state employment agencies, school districts, transportation and housing programs, policymakers, businesses, universities, and other disability organizations. The VR&E Service should join these partnerships to better serve their veterans through collaboration with community-based Centers for IL and the state and national IL networks.

Work in the 21st Century

We are living in a new economy – powered by technology, fueled by information, and driven by knowledge. America does not face a worker shortage but a skills shortage. The challenge is to invest in workers who are already participating in the workforce, and to identify and tap into untapped labor pools.⁴ For VR&E the challenge is to ensure that America's service-connected disabled veterans are equally represented in our new 21st Century economy.

Employers are more willing to hire people with disabilities now, but there are not enough disabled applicants to meet the demand.⁵ The skills, abilities, and potential for growth are there – in the community of Americans with disabilities, especially veterans with years of military service – but they haven't yet been tapped. With a concerted effort, this disconnect can be corrected.

Several factors and trends are influencing the workplace and the way employees are hired today and in the future:

- The employee's ability for learning, self-motivation, self-management, teamwork, and adaptability,⁶ are factors that can apply to any worker, regardless of disability.
- Americans are working longer. Forty-two percent of people over 65 are either working full-time (19 percent) or are working and retired at the same time (23 percent).⁷
- The use of computers and the Internet in workplaces will become more pervasive and the functions performed using computers will dramatically increase. The influence of technology will go beyond new equipment and faster communications, as work and skills will be redefined and reorganized.
- Assistive technology has opened new opportunities for people with disabilities. From large screen monitors to voice recognition software to alternative keyboards and telecommunications systems, technology is removing barriers for people with disabilities.
- Increased global competition will continue to affect the type of work being done in American workplaces, creating new high-skilled jobs and lessening demand for low-skilled work.
- The impact of globalization on all Americans will continue to grow as more of the economy is involved in producing exports or competing with imports.⁸

21st Century Employment for People with Disabilities

As discussed above, once on a job, it's ability, not disability that counts. The challenge for people with disabilities is getting the job. In recent years, the federal government has focused on the employment of underrepresented groups, including individuals with disabilities. Starting with the ADA, a number of reforms are aimed at assisting people with disabilities in gaining employment and self-sufficiency. Initial federal government reforms include those related to the current Workforce Investment System and the Social Security Return to Work programs. On June 18, 2001, President Bush highlighted employment in his New Freedom Initiative. The President's subsequent Executive Order 13217, directed federal agencies to review the programs and policies that create barriers for people with disabilities to live independently and participate fully in community life, including employment.

The passage of the Ticket to Work and Work Incentives Improvement Act (P.L. 106-170) in 1999 brought about return to work reform for disabled Social Security beneficiaries. In addition to providing work incentives outreach, the TWWIIA legislation provided individualized benefits planning and support, protection and advocacy, Medicaid buy-in, and extended Medicare. The Social Security Administration has created Employment Networks so that the individuals have a choice of employment services, vocational rehabilitation services, and/or other support services leading to self-sufficiency.

The Department of Labor under the Workforce Investment system has created One-Stop Career Centers to provide integrated employment and training services. The One-Stop System is based on four principles – universal access, customer choice, service integration, and accountability. The Task Force observed that in several ROs One-Stop Career Centers are collocated with VR&E offices to provide better access for veterans.

Limited Impact on Workforce

All of the changes in the new workforce and new workplace should benefit people with disabilities, but that is not yet the case.

In spite of these reforms, there is little definitive evidence that disability policies have resulted in substantial increases in the numbers of people with disabilities participating in the workforce, especially as compared to other underrepresented groups. As a result, the number of individuals entering the Social Security Supplemental Security Income (SSI) and Disability Insurance (DI) systems has climbed dramatically. Using the Current Population Survey (CPS) data, the overall employment rate of persons with disabilities in the United States in 1999 was 33.0% compared to 85.7% for people without disabilities. The median household income of persons with disabilities overall was \$16,304 compared to \$32,001 for people without disabilities.

The employment rate for veterans with disabilities is similar. The 2001 VA National Survey of Veterans, conducted from February-November 2001, provides information similar to the Bureau of Labor Statistics regarding labor force participation of male Vietnam-era veterans. Based on answers to a question on work status during the previous week, the survey shows that 61 percent of service-connected disabled male Vietnam-era veterans were in the labor force, 27 percent of veterans with a disability rating of 60 percent or higher were in the labor force but 80 percent of non service-connected disabled Vietnam-era veterans were in the labor force. Congress, GAO reports, Veterans Service Organizations and VA's own internal reports have told us that federal veterans employment and training programs – including VR&E – succeed in finding jobs for only a small percentage of veterans who participate.

More Research Needed

Though our Nation has the legislative framework to increase the employment of people with disabilities, there is limited cumulative data regarding best practices with regard to finding employment and/or returning individuals with disabilities to work. There is a need to identify the practices that will assist

individuals in finding successful employment outcomes. Consideration could be given to such ideas as:

- Government must clearly highlight the importance of employment for people with disabilities;
- Government plays an important role in creating incentives and disincentives for promoting employment outcomes for people with disabilities, including affordable health insurance;
- “Benefits Planners” must be available to assist individuals in navigating the complex cash benefit/health insurance systems. Individuals are fearful that by going to work, they will lose their cash benefits and health insurance; and
- Some individuals may need lifelong support to stay in the job.

Much of the research on disability and accommodation is being conducted by colleges and universities, often funded by the federal government. Ideally, a cumulative body of research on the national employment environment would look at:

- Employer attitudes
- Disability as a social and cultural construct, rather than a medical condition
- How new reforms (TWWIA, Workforce Investment Act) impact the trends in labor market activity, advancements in self-sufficiency, independence, inclusion, and integration
- Various types of employment such as self-employment and entrepreneurial enterprises
- Relationship of earned income levels to the receipt of public benefits
- What’s been successful and what has not worked with regard to employment for people with disabilities

Individuals with disabilities also need to be included in policy development, program design, research, and evaluation of current programs. The disability community is currently interested in identifying the impact of the new reforms, including the relationship between employment and cash benefits, and creating an employment policy that provides incentives to go to work.

Why Is the New Disability Paradigm Important to VA?

In the past, neither the VA nor most veterans with disabilities have seen themselves as part of the larger disability community. Federal, state, and community services and supports and new ways of thinking that are available to nonveterans with disabilities often have not been utilized or even available to veterans with disabilities. Evidence of this is the lack of partnerships between the VA and some state Vocational Rehabilitation Agencies and the recommendation by the Task Force for the VA to implement Memoranda of Understanding with these state VR agencies.

In becoming more involved in the larger disability community, the Task Force believes that the veteran can benefit from this paradigm shift and the services and supports that are available throughout the disability network. This is especially relevant in the areas of employment and independent living. We believe that VR&E has a responsibility to provide the most comprehensive and appropriate services to its veterans and should champion the broader disability perspective—full inclusion for veterans with disabilities in their communities and in the workplace.

Federal Government Is a Model

As we look at initiatives in the public and private sectors, we see some success. A successful employment program includes:

- Services and supports that are driven by the person with a disability;
- Custom-tailored services to meet the needs of the individual and the employer; and
- Incentives and technical support provided to the individual and the employer.

The federal government is one model for this kind of system. First, the federal government's Executive Branch remains the Nation's leader in veterans' employment, with 446,890 veterans as of September 30, 2000⁹. Despite a shrinking federal workforce, an aging population, and a decreased pool of veterans, the percentage of veterans in the federal civilian workforce of about 1.8 million remains steady at 26.1 percent. The Department of Defense alone employed 52 percent of the veterans in federal service.

As for veterans with disabilities, the government hired 3,476 of 30 percent or more disabled veterans in FY 2000, up more than 13 percent from 1999. Disabled veterans make up 17.5 percent of the federal civilian workforce. DoD and VA account for 75.3 percent of all disabled veterans in the federal workforce. New hires of veterans increased by 11.2 percent; disabled veterans made up 3.1 percent of all new hires.

The Office of Personnel Management currently has an active campaign urging agencies to recruit veterans and urging veterans to consider federal civil service jobs. The veterans preference that Congress has granted gives veterans an edge in competing for federal jobs.

Every Executive Branch entity is required to have an affirmative action plan to recruit, hire, and promote disabled veterans. Agencies report data to the U.S. Office of Personnel Management (OPM), which maintains a central database. If DoD, VA, and other agencies can lead in hiring veterans, including veterans with disabilities—why can't federally-funded veterans employment and training programs help veterans find jobs? The answer is *they can* and that's what this report is about. (See ground-breaking work in the New York RO in Appendix 14-C.) The Task Force asked hard questions and came up with one overarching solution: a new, comprehensive service delivery system built around an employment-driven process.

21st Century Challenge

Many companies, large and small, have demonstrated commitment to America's veterans. With National Guard and Reservists returning from Iraq, many more companies are willing to hire service-connected disabled veterans, but they may not know where to turn. Now, more than ever, VR&E must reach across agency lines and approach both public and private sector organizations to make opportunities for veterans who want to enter or re-enter the workforce.

According to DoD, \$14 billion in public funds are invested each year in the training and education of service members. At the point service members join the civilian labor force, these veterans are not only highly skilled, but they are extensively cross-trained and infused with the work ethic necessary to meet the demands for increased productivity in the modern economy. They are a 21st Century-Ready Workforce with expertise that readily satisfies many of the skills that employers want.¹⁰

Using the partnerships, expertise, and technology that are available, including the new thinking regarding individuals with disabilities and work, it is the role and challenge to VR&E to match these men and women with the most appropriate employment opportunities. This can be done as VR&E rebuilds a service delivery system that values work, integration, independence, and informed choice for veterans with disabilities.

¹ *Emerging Disability Policy Framework: A Guidepost for Analyzing Public Policy*, Robert Silverstein, Iowa Law Review, Aug. 2000, Vol. 85, No. 5, p. 1695.

² The International Classification of Functioning, Disability and Health (ICF) was developed by 65 member countries over a 7-year period. "WHO Publishes New Guidelines to Measure Health," Press Release, WHO/48, November 15, 2001. <http://www.who.int/inf-pr-2001/en/pr2001-48.html>

³ *The Social Security Definition of Disability*, Social Security Advisory Board, October 2003, p. 7

⁴ *futurework – Trends and Challenges for Work in the 21st Century*, Department of Labor, 2000.

⁵ Vocational Rehabilitation & Employment Hire a Vet, undated pamphlet.

⁶ "Work in the 21st Century: Implications for Selection," Karen E. May, *The Industrial-Organizational Psychologist* (TIP), December 1995.

⁷ "American Perceptions of Aging in the 21st Century," report of the National Council on the Aging, 2002.

⁸ *futurework – Trends and Challenges for Work in the 21st Century*, Department of Labor, 2000 (This citation applies to bullets 3-6).

⁹ *Annual Report to Congress on Veterans' Employment in the Federal Government, Fiscal Year 2000*, U.S. Office of Personnel Management, August 2001, <http://www.opm.gov/employ/veterans/fy2000v4.pdf>

¹⁰ DOL Assistant Secretary Frederico Juarbe, Jr. in testimony before the House Committee on Veterans Affairs." Feb. 5, 2003.

Chapter 3

The VR&E Service Today

Overview

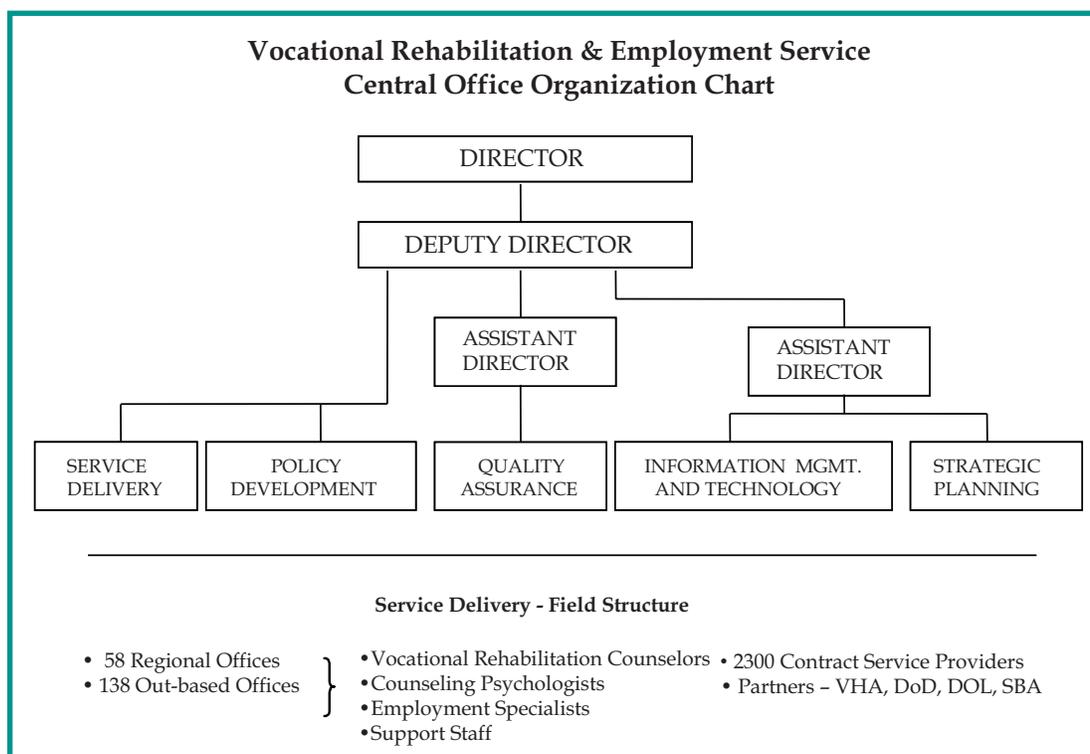
This chapter provides an overview of the Vocational Rehabilitation and Employment Program as it existed at the time of the Task Force assessment. This chapter also provides a profile of the veterans being served by the VR&E Program and summary statistics on administration of the program. In other chapters throughout the report, there are more detailed discussions and findings on specific topics that appear in this chapter, such as program administration, workforce, work process, core capacities, and eligibility and entitlement determinations.

How the VR&E Program Is Administered Today

The VR&E Program is administered through a Veterans Benefits Administration (VBA), VR&E Service Central Office headquarters staff, and a decentralized network of field offices. Each of VBA's 56 Regional Offices has a VR&E Division headed by a VR&E Officer that reports to the Regional Office Director. These Regional Office staffs have been further decentralized into 138 out-based offices to facilitate veteran access to VR&E counselors. Exhibit 1, on the next page, depicts the current Central Office structure.

The VR&E Service and Program is a unique line of business within VBA. Several key factors distinguish VR&E's mission and service delivery strategy from VBA's other lines of business. These factors include:

- Along with C&P, VR&E is the only other VBA business line with offices in every Regional Office.
- VR&E is the only VBA business line where the primary function is not the processing of claims or requests for benefits.
- VR&E is the only business line that requires face-to-face interaction with the veteran (initially and over a sustained period of time that may be as long as 4-5 years) in order to deliver benefit services. VBA's other business lines can deliver their services without ever having met face-to-face with the veteran.
- VR&E has the largest decentralized service delivery network of any VBA business line. With 138 out-based locations, it also has the largest span of program supervision and control of any VBA line of business. This structure creates staffing requirements for supervision and management to ensure achievement of quality and performance standards.

**Exhibit 1 Current Organization Chart**

- The VR&E program of services requires the deployment and management of professional staff to develop and implement employment, counseling, and rehabilitation programs that are individualized for each veteran.
- When deemed appropriate, VR&E uses contract professional counselors and other specialists to perform evaluation, case management, and employment services.
- VR&E must integrate a variety of benefits and services provided by social service and rehabilitation organizations at the federal, state and local levels of government as well as services provided by private sector and not-for-profit organizations to effectively provide case management services.

In October 2003, the VR&E workforce was composed of 903 staff members consisting of 601 professional staff, 220 technical support staff and 82 management support staff. Professional staff consists of Counseling Psychologists, Rehabilitation Specialists, and Vocational Rehabilitation Counselors. The VR&E Service is in the midst of consolidating two professional staff positions that account for 67 percent of the VR&E field staff. This change will essentially replace a workforce composed of a mix of Counseling Psychologists (CP) with master's degrees and above and Vocational Rehabilitation Specialists (VRS) with undergraduate degrees and above. The new staff position replacing these two positions is the Vocational Rehabilitation Counselor (VRC) position. This position requires a minimum of a master's degree and experience in specialized fields. The VR&E Service Central Office

	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
Counseling Psychologist	331	326		311	297	284	280	273	227	221	218	164
Rehabilitation Specialist Staff	204	207										
Rehabilitation Specialist Staff (different series)	29	31										
Clerical	143	149		165	156	143	120	120	108	130	138	103
Other Tech				41	55	57	55	63	69	73	100	102
Voc Rehab Spec				206	198	188	168	156	107	109	85	38
Voc Rehab Counselor							28	76	185	288	364	429
Employment Specialist									18	20	17	47
Total	707	713	701*	723	706	672	651	688	714	841	922	883

* FY 1994 FTE information extracted from VA COIN P-38 Report

Exhibit 2

estimates that 84 percent of its remaining CPs and 66 percent of VSRs will be retirement eligible within the next 5 years. Exhibit 2 displays end-of-fiscal-year staffing levels for FY 1992 through FY 2003.

The VR&E Work Process

The VR&E Service's rehabilitation work process has remained relatively unchanged for many years. Task Force interviews with long time current and former VR&E staff indicate that the core work tasks that must be accomplished by the VR&E staff have remained virtually unchanged over a long period of time. Some changes have been made in how this process is implemented such as the use of the case management concept and the implementation of information technology, but these changes have not altered the core work of the staff. A condensed overview of this process appears in Exhibit 3.

Key Process Characteristics

While this process may still be appropriate in selected cases in the 21st Century, there are certain characteristics of this process that make it outdated as the standard process for meeting 21st Century needs. The key process characteristics that make this core VR&E process out of step with the needs of the 21st Century include:

- The process is composed of sequential steps that each veteran must progress through to receive services. Because it is a standard process, it is a "one size fits all veterans" process.
- The process is long in terms of calendar time for the veteran to be ready for employment. In FY 2002, the average number of days that a veteran was in the program – from application through ready for employment – was 1,095 days.

- The length of calendar time a veteran is in this process creates more opportunities for fact-of-life problems to arise in the life of the veteran and thus interrupt the veteran's rehabilitation process.

- This process does not give priority to those veterans with serious disabilities. Those veterans with serious disabilities are treated the same as those veterans with a 10 percent service-connected disability who have a serious employment handicap.

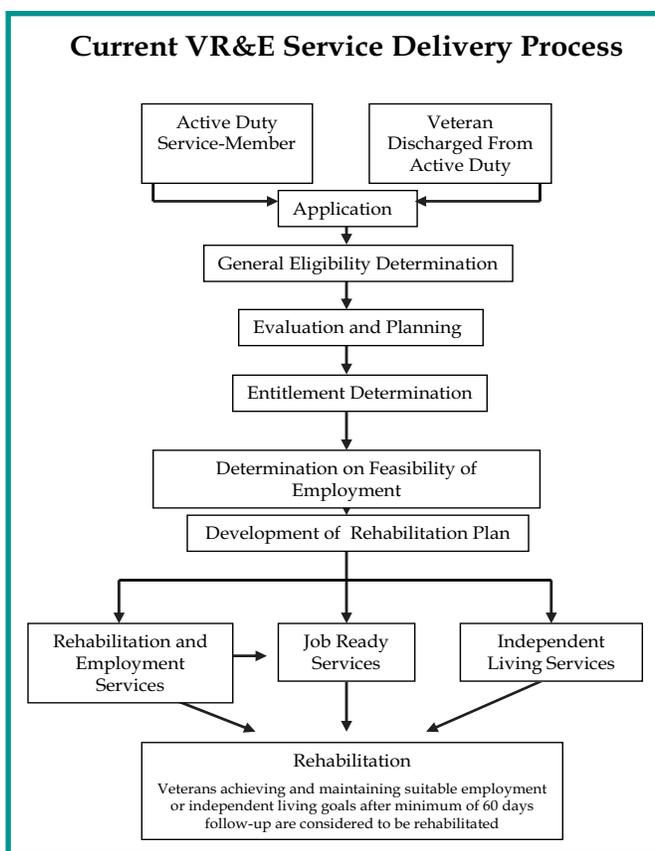


Exhibit 3

- Employment or the provision of Independent Living services are outputs of this long, multi-step process rather than upfront considerations.
- The primary focus of this process appears to be the disabled veteran as education and not employment. As of August 31, 2003, 85 percent of Chapter 31 recipients were in undergraduate school. More specifically, this process often does not offer “informed choice” options to the disabled veteran who has the need, desire and/or ability to:
 - o Return to a previous job after active duty with a need of VR&E services because job performance is affected by disability;
 - o Obtain immediate employment;
 - o Pursue self-employment; or
 - o Review other options to more appropriately meet their needs.

Key Steps in the VR&E Process

The requirements and guidelines for the Chapter 31 vocational rehabilitation program are contained in Title 38 U.S.C. A summary of these requirements and guidelines are contained in Appendix 10. While the following process elements – application, eligibility, entitlement, and rehabilitation – are applicable in all VA Regional Offices, the Task Force recognizes that variances in administration and

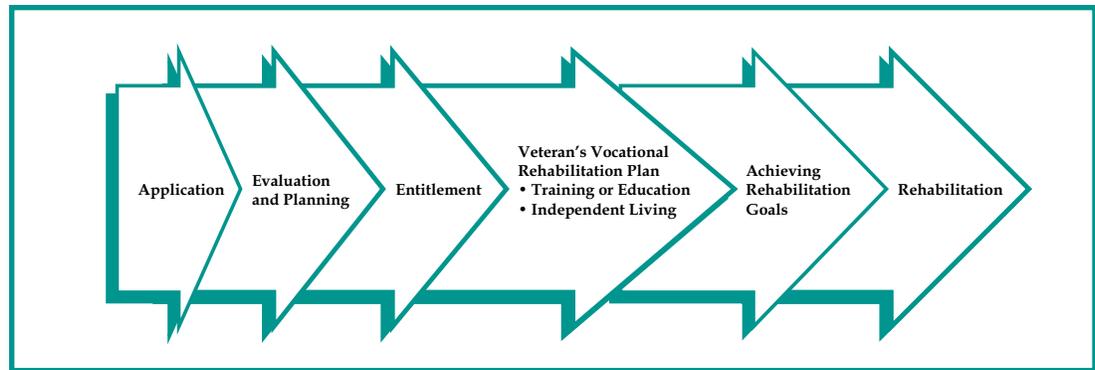


Exhibit 4

oversight of the Chapter 31 program do occur across the system. Exhibit 4 shows the key work elements in the current process.

Application. This work process begins with a veteran making an application (VA Form 28-1900) for VR&E benefits. Today the veteran also has the option of submitting the form on the Internet and mailing supporting documents. In all cases, VR&E cannot process the application for benefits and services without a Memo Rating or a final disability rating decision from the VBA Compensation and Pension Service.

Eligibility. To be eligible for benefits, the service member must be on active duty awaiting discharge due to a disability or be a veteran with a compensable disability incurred after September 15, 1940. The veteran is eligible for the Chapter 31 program up to 12 years from the date VA notifies the veteran that he or she has a qualifying compensable disability or that they have received an increased compensation rating. If certain conditions prevent the veteran from participating in a program of rehabilitation or if a veteran is determined to have a serious employment handicap, the 12-year limit may be waived. If a veteran meets the general criteria for eligibility, a VR&E employee creates a folder, including electronic files in both the Benefits Delivery Network (BDN) and the CWINRS systems.

Entitlement. At present, veterans are entitled to vocational rehabilitation if they have a service-connected disability rated at 20 percent or more and an employment handicap. Entitlement is also applicable if the veteran has a service-connected disability rated at 10 percent and a serious employment handicap. After a Vocational Rehabilitation Counselor finds a veteran eligible based on basic eligibility requirements, the counselor must determine whether or not a veteran is entitled to the benefits in the program. The subjective criteria used by a counselor in determining if a veteran has an employment handicap are defined below.

- Employment Handicap (E.H.) is an impairment of the individual veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests. The impairment results in substantial part from a service-connected disability. For veterans rated

at 20 percent or more, a finding of employment handicap results in a finding of entitled.

- Serious Employment Handicap (S.E.H.) represents a significant impairment of a veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests. The S.E.H. results in substantial part from a service-connected disability. For veterans rated at 10 percent and for veterans whose 12-year period of basic eligibility has passed, the finding of an S.E.H. is necessary to establish entitlement.

The Counselor must also determine if the veteran has experienced restrictions on employability caused by:

- The veteran's service-connected disabilities
- The veteran's non service-connected disabilities
- Deficiencies in education and training
- Negative attitudes about people with disabilities
- The impact of alcoholism and drug abuse
- Consistency with abilities, aptitudes, and interests
- Other pertinent factors

The Vocational Rehabilitation Counselor then makes the entitlement determination—the veteran has an employment handicap, a serious employment handicap, or no employment handicap. If the veteran is not entitled, he or she is usually informed in person followed by a letter with appellate rights included. If the veteran is found to be entitled, the counselor then must determine if employment is feasible (the language of the law). If employment is not feasible, the veteran is evaluated for Independent Living Services.

Rehabilitation. Once the veteran's eligibility and entitlement to benefits have been determined, the VR&E Counselor evaluates the needs of the veteran and works with the veteran to develop a plan of rehabilitation. Most often, the rehabilitation plan begins with an undergraduate education program or a shorter term training program. At the conclusion of training or school, the veteran is then determined ready for employment. Prior to 1980, successful rehabilitation was considered to be synonymous with completion of vocational rehabilitation (school or training). After 1980, successful rehabilitation was determined by attainment of suitable employment as defined in a rehabilitation plan. The rehabilitation phase of the process includes several key components:

- Evaluation and Planning
- Extended Evaluation
- Rehabilitation to Employability
- Independent Living
- Job Ready Status
- Interrupted Status

VR&E Workload Analysis

In the early 1980s, the VR&E Service instituted a case status method to measure and account for workload. This approach replaced a method based on the use of End Product codes that accounted for and gave labor-hour credit for accomplishment of discrete work activities and completion of specific work products. This system was based on the same End Product code concept that is still used by the VBA Compensation and Pension Service. The VR&E Service case status categories include:

- Applicant Status
- Evaluation and Planning Status
- Extended Evaluation Status
- Independent Living Status
- Rehabilitation to Employability Status (Training or Education)
- Job Ready Status
- Interrupted Status

Workload Summary

For the purposes of this report, the Task Force used FY 2003 reported data as the baseline for our observations and conclusions. These observations and conclusions were also based on our analysis of previous fiscal year data when it was available or where we could make reasonable estimates in consultation with VR&E and VBA staff. Exhibit 5 shows the number of veterans applying for Chapter 31 benefits for FY 1992 through FY 2003, while Exhibit 6 displays the year-end VR&E workload by case status for FY 1992 through FY 2003.

Analysis of the VR&E workload highlights several points.

- The number of veterans applying for Chapter 31 benefits increased by 73 percent from 37,829 in FY 1992 to 65,298 in FY 2003.
- The number of veterans in various active phases of the Chapter 31 program was 58,155 at the end of FY 1992 compared to 97,158 at the end of FY 2003; a 67 percent increase.
- Annually over 70 percent of the rehabilitation plans that are written call for training or education.
- The annual performance of the VR&E Program equates to about 10,000 veterans being successfully rehabilitated (about 7,500 veterans employed 60 days after being hired and about 2,000 to 2,500 veterans achieving Independent Living goals).
- Annually, about 20 to 25 percent of new applicants are veterans who previously had to drop out of the program (discontinued) and then reapplied.
- In FY 2003, about 12 percent of the veterans in the program had to interrupt their rehabilitation plans primarily due to health problems, family and financial issues, and problems arising from their disabilities.

The VR&E workload of 98,339 program applicants and participants on August 31, 2003, is shown in Exhibit 7; the data has been sorted by Regional Office total workload. This workload is distributed by the following statuses:

Veterans Applying for Chapter 31 Benefits FY 1992 - FY 2003

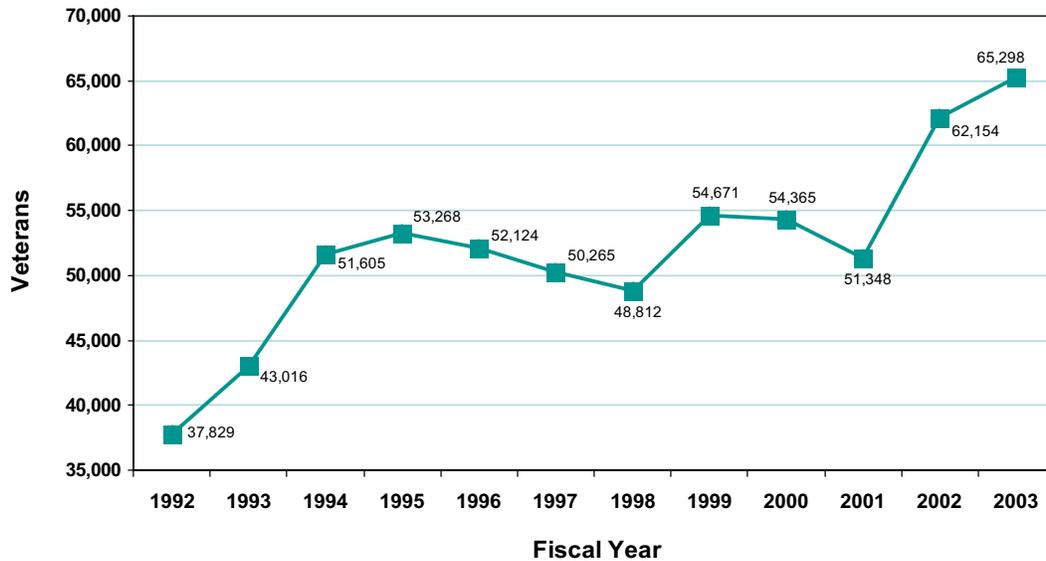


Exhibit 5

End of Year VR&E Workload by Case Status Number of Unique Veterans Being Served FY 1992 to FY 2003

Status	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003
Applicant	10,380	11,893	14,606	11,684	8,435	7,718	8,351	8,882	7,086	6,502	8,643	7,988
Evaluation and Planning	7,184	9,695	11,084	13,182	14,031	11,271	10,097	9,768	9,999	10,156	12,478	18,606
Extended Evaluation	373	461	524	682	800	910	976	950	975	1,280	1,707	2,712
Independent Living	50	124	165	230	277	371	506	703	1,231	2,270	3,209	3,221
Rehab to Employability	25,626	31,090	34,662	37,275	41,059	43,606	42,625	41,048	41,438	43,241	44,425	49,043
Employment Services	3,343	3,847	3,959	4,324	4,830	5,142	5,380	5,004	4,562	4,228	4,637	5,540
Interrupted	9,207	9,129	9,786	9,817	9,417	9,847	10,732	11,215	10,629	11,425	12,938	10,048
Total	58,155	68,232	76,780	79,189	80,845	80,862	80,665	79,569	77,920	81,103	90,039	97,158

Exhibit 6

• Applicant Status	8,163	8.3 percent
• Evaluation and Planning	17,411	17.7 percent
• Extended Evaluation	2,708	2.8 percent
• Independent Living	3,603	3.7 percent
• Rehabilitation to Employability	49,128	50.0 percent
• Job Ready	5,829	5.9 percent
• Interrupted	11,497	11.7 percent

The VR&E national workload is concentrated in a fewer number of Regional Offices than is the C&P workload. About 23 percent of the national workload is concentrated in five Regional Offices and these five offices plus another 9 Regional Offices account for 50 percent of the national workload. Eighteen of VBA's Regional Offices each have less than one percent of the national workload and account in total for about 10 percent of the national workload.

Workload Issues

There are major challenges to the analysis of the VR&E workload. First, there are significant deficiencies in the collection and analysis of VR&E workload information. The system and management problems that have led to these deficiencies are described in Chapter 1 and discussed in the recommendations contained in Chapter 6. Secondly, the data that is available only provides a snapshot of the veterans who are in a VR&E program of service at a point-in-time. A veteran may be in the VR&E program over a period of multiple fiscal and calendar years. Exhibit 8 provides program statistics at the end of FY 2003. VR&E Service provided this data.

Currently, there is no data or information that links the veteran's case status in a fiscal year to the fiscal year that the veteran entered the program so that the performance of a specific veteran cohort group entering the program in a fiscal year can be measured over a period of time. For example, the number of veterans who are reported as to have gained employment in a fiscal year is not related to the year in which they entered the program or completed a particular phase of rehabilitation.

The limitations of the current VR&E data make the issues identified below regarding the VR&E workload even more significant in terms of their potential impact on veteran demands for services and resource requirements.

- The VBA may be under reporting the actual number of veteran demands on the VR&E Service and program. Such a practice may result in fewer resources being allocated to the VR&E Program than are necessary to deliver timely and effective services given the workload. For example, the number of unique veterans being served by the VR&E Program in some capacity during a fiscal year is not reported. The number of veterans counted in the VR&E workload (97,158 at the end of FY 2003) does not include veterans in discontinued status, veterans receiving Chapter 36 education and career counseling, veterans referred by VHA or other organizations for counseling, veterans evaluated 60 days after achieving their vocational rehabilitation goal, or veterans in receipt of counseling

	Applicant	Evaluation & Planning	Extended Evaluation	Independent Living	Rehabilitation to Employability	Job Ready	Interrupted	Total
ST PETERSBURG	429	1,145	80	154	2,732	242	490	5,272
WACO	458	683	197	73	2,722	262	470	4,865
HOUSTON	422	698	239	102	2,273	292	426	4,452
ATLANTA	355	895	41	66	1,976	138	564	4,035
MONTGOMERY	257	538	96	107	2,166	306	449	3,919
SEATTLE	365	754	18	57	1,693	306	450	3,643
ROANOKE	287	569	9	12	1,604	216	587	3,284
CLEVELAND	229	497	289	162	1,475	173	222	3,047
WASHINGTON	205	703	63	47	1,459	78	381	2,936
DENVER	168	631	15	163	1,463	174	263	2,877
PHOENIX	320	365	61	159	1,451	257	233	2,846
CHICAGO	312	401	42	40	1,233	184	585	2,797
PORTLAND	137	656	197	80	1,162	103	223	2,558
OAKLAND	203	619	84	93	962	141	367	2,469
COLUMBIA	124	193	60	28	1,580	161	250	2,396
LOS ANGELES	342	391	51	166	935	90	392	2,367
WINSTON-SALEM	418	238	50	25	1,159	203	242	2,335
NASHVILLE	112	321	19	21	1,366	198	251	2,288
LOUISVILLE	109	336	14	76	939	197	250	1,921
DETROIT	130	253	19	57	948	65	367	1,839
HONOLULU	87	401	18	448	612	35	206	1,807
NEW ORLEANS	190	384	68	84	789	72	162	1,749
NEW YORK	78	301	115	163	811	57	165	1,690
INDIANAPOLIS	123	288	208	54	757	61	186	1,677
MUSKOGEE	177	85	12	24	1,101	73	179	1,651
PHILADELPHIA	154	233	49	51	754	159	245	1,645
BOSTON	92	245	17	229	679	91	249	1,602
SALT LAKE CITY	68	275	82	48	805	86	176	1,540
SAN DIEGO	304	345	32	23	655	67	113	1,539
MILWAUKEE	93	311	21	23	742	88	180	1,458
BALTIMORE	125	279	32	4	913	35	68	1,456
NEWARK	58	258	35	10	725	63	122	1,271
ST LOUIS	145	85	6	23	757	100	126	1,242
LITTLE ROCK	50	251	51	44	632	51	107	1,186
ALBUQUERQUE	282	236	20	92	428	37	58	1,153
ST PAUL	59	218	66	58	467	89	145	1,102
ANCHORAGE	44	295	12	35	473	62	152	1,073
SAN JUAN	61	201	5	0	483	50	204	1,004
BUFFALO	83	65	3	2	542	69	74	838
HUNTINGTON	25	156	35	53	372	63	127	831
LINCOLN	50	139	16	13	483	53	59	813
HARTFORD	33	142	8	86	413	39	86	807
RENO	60	147	15	23	375	60	82	762
WICHITA	56	153	0	8	414	47	52	730
SIOUX FALLS	19	114	36	72	334	52	99	726
JACKSON	75	145	13	12	307	39	98	689
PITTSBURGH	31	111	8	5	319	35	100	609
DES MOINES	24	85	29	37	260	64	63	562
PROVIDENCE	37	116	7	96	160	21	90	527
FORT HARRISON	37	83	20	46	193	58	76	513
TOGUS	7	104	0	1	278	39	48	477
FARGO	15	79	7	17	212	37	58	425
MANCHESTER	12	49	0	3	248	33	25	370
WILMINGTON	17	59	8	8	158	13	18	281
WHITE RIVER JCT	10	21	3	20	110	21	12	197
MANILA	0	66	7	0	69	24	25	191
TOTAL	8,163	17,411	2,708	3,603	49,128	5,829	11,497	98,339

Exhibit 7: Regional Office Workload by Volume

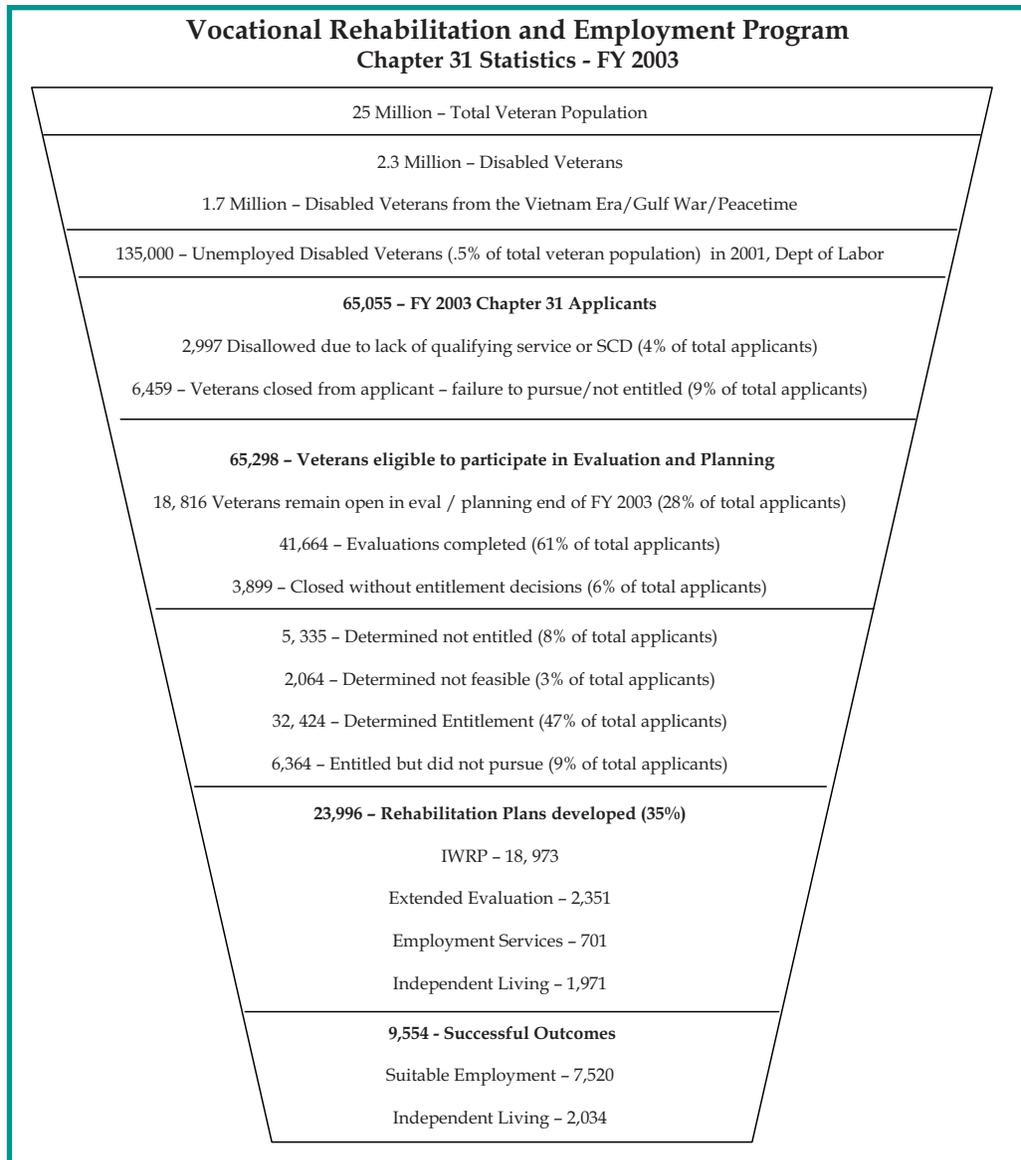


Exhibit 8

that does not result in Chapter 31 program participation. Further, the VR&E reported workload does not account for evaluations conducted on veterans who were found not entitled to Chapter 31 services or coordination with VHA on shared management of selected veterans.

- This data suggest that there may be an inherent ceiling on the success rate for veterans getting through the current serial vocational rehabilitation process unless the VR&E Service implements interventions to reduce the risk of veterans having to discontinue or interrupt their rehabilitation. Data also suggest that as many as one-third of the participants in the VR&E program at any one time do not progress directly through the program without interruption for one reason or another. This factor takes into account the 12 percent or so of veterans who have their rehabilitation plans interrupted and that annually about 22 to 25 percent

of those veterans entering the program were previously discontinued from the VR&E program. This means that a significant number of veterans in the program are always in flux. This population of veterans essentially “churn” in the process over an extended period of time which is frustrating for the veteran as well as resource consuming for the VR&E Service.

- Despite the tens of thousands of VR&E program participants in a given year, the number of veterans rehabilitated by obtaining a job or achieving independent living goals has averaged only about 10,000 a year for several years. (See Exhibit 9.) In FY 2002, the average number of days to rehabilitation (application to job ready status) for a veteran who went straight through the program without any interruption in his or her plan of rehabilitation was 1,095 days. For a veteran who was discontinued from the program, the average number of days a veteran was in rehabilitation before they were discontinued was 1,625 days.
- The potential for the workload trends cited above to continue or even increase into a crisis situation should not be discounted by VBA’s leadership and management. The VR&E Service and VBA Office of Field Operations do not currently analyze the underlying dynamics and complexities that drive the VR&E workload composition and trends using available data. A contributing factor to assessing the uncertainty of the VR&E workload is that VR&E Service’s productivity and performance measurement systems do not provide VBA with the system capabilities to:
 - o know and understand the labor hours required to provide services,
 - o manage the case workload and available VBA personnel and contract resources,
 - o design and implement interventions to reduce the number of veterans who drop out of the program or have to interrupt their rehabilitation plans,
 - o oversee a national contract services strategy and employment process, or
 - o facilitate long-term evaluation of program outcomes.

What Benefits Do Chapter 31 Veterans Receive?

The Task Force reviewed the range of services and benefits that Chapter 31 participants may receive in order to reach the stated employment objective in their vocational rehabilitation plans. These include counseling and evaluation, vocational training benefits (tuition, fees, books, supplies, etc.), non-taxable monthly subsistence allowance (See chart in Appendix 10-A.), medical benefits, case management services, Independent Living services, and employment services.

Demographics of Veterans Being Served

The Task Force was also interested to learn about the veterans being served by the VR&E Program. The number of applicants for Chapter 31 services by combined degree of disability and the number of veterans found entitled

for VR&E vocational rehabilitation services is contained in Exhibit 10. The information displayed in Exhibit 10 on the number of FY 2002 applicants and entitlements does not reflect a uniform cohort of veterans. In some instances, a veteran's entitlement is not determined in the same fiscal year that a VA Form 28-1900 was submitted.

The VA 2001 National Survey of Veterans provided some additional insights about those served by the Chapter 31 program. For example, 21 percent of service-connected disabled veterans reported using vocational rehabilitation services. The highest usage of these program benefits was reported by veterans who indicated they had a 50 percent or greater disability. The majority of veterans (85 percent) who had used these benefits reported that the services provided were important in helping them meet their goals.

While this information was helpful, the Task Force wanted to learn more detail about the population of veterans receiving benefits. This proved to be a challenging task. We did learn that in 1998, Congressman Jack Quinn (R-NY) requested that VA provide certain information on veterans receiving VR&E benefits. In response to this request, VBA produced what has been subsequently called the "Quinn Report." This report arrayed veteran data in many formats such as gender, disability rating, educational level, length of service, and others. Although this data was available, it was not widely distributed within the VR&E Service CO, and field offices were unaware of its existence.

The Task Force requested that VBA produce a "Quinn Report" for FY 2002, but the end product was not as informative as the FY 1999 Quinn Report. The Task

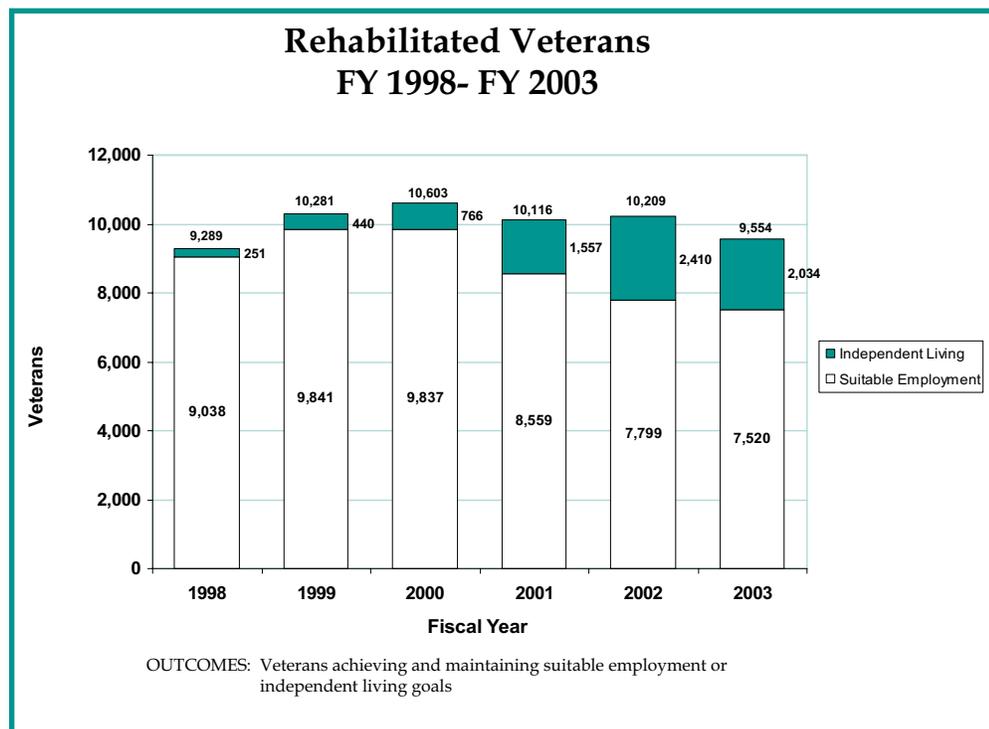


Exhibit 9

Force decided to create its own database that contained data extracted from the Benefit Delivery Network (BDN) file provided by the VBA Office of Performance Analysis and Integrity (PA&I). This cumulative data represented the total number of VR&E recipients and applicants in open case status on August 31, 2003. The number of records in the database was 98,721 unique veterans, very close to the number in the point-in-time analysis displayed in Exhibit 7. The summary profile of veterans receiving VR&E benefits below is based on this data.

Demographic Summary

- 81 percent (80,095) are male, while 19 percent (18,626) are females.
- 46 percent (45,859), the largest portion, are between the ages of 36-50.
- 31 percent (30,117) are between the ages of 21 and 35.
- 2 percent (1,784) of this population is over the age of 65.
- The number of those between the ages of 18 to 20 is negligible.

Branch of Service and Rank

- 51 percent of the program participants served in the Army; 20 percent were in the Navy. These figures are comparable with the percentages found in DoD's reported active duty military member file.
- A majority of Chapter 31 recipients and applicants had a military rank of "enlisted." In fact, 96 percent (86,785) were discharged with the rank of "enlisted" while only 4 percent (3,164) had rank of Officer or Warrant Officer.

Applicants for Vocational Rehabilitation and Veterans Entitled to Vocational Rehabilitation By Combined Degree of Disability In FY 2002

Combined Degree of Disability	Number of Applicants	Percent of Total Applicants	Number of Entitled	Percent of Total Found Entitled	Percent Entitled By Combined Disability Rating
0%	56	0.09%	4	0.01%	7.14%
10%	7,765	12.68%	1,492	4.34%	19.21%
20%	11,398	18.61%	5,899	17.17%	51.75%
30%	10,912	17.82%	6,423	18.70%	58.86%
40%	8,193	13.38%	5,710	16.62%	69.69%
50%	5,018	8.19%	3,594	10.46%	71.62%
60%	4,062	6.63%	3,472	10.11%	85.48%
70%	2,870	4.69%	2,521	7.34%	87.84%
80%	1,520	2.48%	1,550	4.51%	100.00%
90%	623	1.02%	623	1.81%	100.00%
100%	3,324	5.43%	2,623	7.64%	78.91%
Other	5,509	8.99%	442	1.29%	8.02%
Total	61,250	100%	34,353	100%	56.09%

Exhibit 10

Service-Connected Disability Overview

In examining the service-connected diagnostic codes, the most common condition is associated with the musculoskeletal system, most frequently arthritis, and lumbosacral strain. There were a total of 803 conditions identified. For 51 percent of the service-connected diagnostic codes, there were less than 25 veterans with each of those conditions. For 95 percent of the conditions identified, there were less than 1,000 veterans with each of those conditions. The combined rating for this group of veterans showed that

- 25 percent (24,836) had a combined rating between 0-20
- 38 percent (36,279) had a rating between 30-40
- 37 percent had a rating between 50-100
- 43 percent (38,296) had a serious employment handicap
- 57 percent (50,881) did not have a serious employment handicap

Veterans with Ten Percent Combined Degree Disability Rating

There were a total of 5,310 VR&E recipients and applicants with a 10 percent combined degree disability rating. In this group:

- 47 percent (2,477) are between the ages of 36-50
- 34 percent (1,793) are between the ages of 21-35
- 18 percent (963) are between the ages of 51 and 65
- 1 percent of this population is over the age of 65

The service-connected diagnosis that was most prominent in this population pertained to the musculoskeletal system, with 838 veterans having an indication for this condition. Thirty-nine percent (2,036) of veterans with a 10 percent combined degree disability rating applied for the program within 2 years of discharge from the military. The smallest percentage applied 26 or more years after discharge at 12 percent (65). The majority of veterans in this group, 80 percent (2,412), are in a program in an undergraduate school. Twelve percent (349) are in vocational or technical school for a non-college degree. A smaller percentage is in non-vocational Chapter 31 programs at 3 percent (90), while 2 percent (65) are in graduate school.

Twenty Percent Combined Degree Disability Rating

Twenty percent (19,490) of VR&E recipients and applicants have a 20 percent combined degree disability rating. In this cohort:

- 47 percent (8,485) of veterans are between the ages of 36-50
- 41 percent (7,970) of veterans are in 21-35 age group
- 14 percent (2,823) of the recipients/applicants are between 51 and 65.
- 1 percent of this population is over the age of 65.

The service-connected diagnosis that was most prominent in this population also pertained to the musculoskeletal system, with 4,008 participants having an indication for this condition. The next most prominent condition, with 3,208 veterans having an indication for it, was impairment of the knee. Of the 19,345 VR&E recipients/applicants with a 20 percent combined degree disability rating

(with an application date), 57 percent (10,938), applied for the VR&E program within two years of being discharged from the military. The next largest group, 23 percent (4,474) applied within three to ten years of leaving the military; and, the smallest percentage, 8 percent (1,519) applied after twenty-six years or later. The majority of veterans in this group, 85 percent (11,788), are in some program at an undergraduate school. Eight percent (1,150) of veterans in this group are in a non-college degree program such as a vocational/technical program. Three percent (375) are in a graduate school program.

Veteran Educational Background and Use of VA Educational Benefits

An analysis showed that:

- 52 percent (51,528) had 12 years of education.
- 1 percent (1,171) had 9-11 years.
- Even fewer had 0-8 years of education.

Of the 98,721 Chapter 31 recipients and applicants, 62,432 (63 percent) had not previously used a VA education benefit. The Task Force did not ask how many of the 98,721 veterans were eligible for the Vietnam Era GI Bill or had contributed to the Montgomery GI Bill. The Task Force heard comments on several occasions that some veterans consider Chapter 31 to be a transition program given that Chapter 31 benefits are more generous than the Montgomery GI Bill (Chapter 30 and Chapter 1606) and the Veterans Educational Assistance Program (Chapter 32). Here are some comparisons:

- Chapter 31 benefits include a monthly subsistence allowance based on number of dependents and whether the veteran is in full or part time training program; Chapter 30 does not provide a subsistence allowance.
- Chapter 31 pays full cost of tuition, books, fees, and necessary equipment such as a computer and assistive devices. Under Chapter 30, the veteran receives a monthly benefit and the veteran has to pay all education expenses.
- Eligibility for Chapter 31 is 12 years after most recent C&P rating; Chapter 30 is 10 years after discharge from duty status.
- Chapter 31 benefits last 48 months; Chapter 30 benefits last 36 months.

See more details in the chart in Appendix 10-B.

Time Interval from Discharge to Application for VR&E Benefits

The Task Force looked at the time interval between a service-member's discharge date from active duty and the time the veteran applied for Chapter 31 services. Fifty-six percent of VR&E applicants and recipients applied for the Chapter 31 program within 2 years of discharge from the military. Of the 54,791 veterans applying within 2 years:

- 40 percent (21,756) had a combined disability rating between 30 and 40;
- 36 percent (20,035) had a rating of 50 or higher; and
- 24 percent (13,000) had a rating between 0 and 20.

The smallest percentage of applicants and recipients applied 26 or more years after discharge. In fact, this group accounted for 11 percent (10,495) of the total, with 6 percent (5,413) of the veterans having a combined disability rating of 50 or more, 3 percent (2,892) having a rating between 30 and 40, and 2 percent (2,180) having a rating between 0 and 20.

Independent Living Services (ILS) Program

There were a total of 3,628 veterans in the Independent Living Services program.

- 7 percent are female
- 93 percent are male.
- 61 percent are between the ages of 51-65.
- 20 percent are between the ages of 36 and 50.
- 4 percent of this population are 35 and under.

A combined rating of disability was available for 3,395 (94 percent) veterans in this program. Most of the veterans in the ILS program have a combined rating between 60 and 100 percent. Only 16 percent of the veterans in this program have a combined rating between 0 and 50 percent. The service-connected diagnosis that was most prominent in the Independent Living population was Post-Traumatic Stress Disorder (PTSD), with 1,533 participants having an indication for this condition.

Earned Wages

VR&E reported in a May 9, 2003 briefing that the average annual earnings prior to rehabilitation training was \$5,800 for 6,241 veterans who were striving for a professional, technical, or managerial occupational goal while the average annual earnings at rehabilitation was \$31,111. The system average for 8,559 veterans was \$4,961 annual earnings prior to training and \$28,517 earnings at rehabilitation.

The Task Force is concerned about the integrity of these reported earning values. These values appear to be based on self reported data. Based on discussions with VR&E staff, there has been no independent verification and validation of this reported data. Eligibility and determination criteria for Chapter 31 services do not include assessment of current earned wages.

To gain further insight into this issue, the Task Force conducted a match of Chapter 31 participants against Social Security Master Earning Files. This match was conducted to determine the level of earned wages without any identification of the veteran. The term “wages” refers to monies received for employment and self-employment, including tips. Wages do not include any benefits paid from federal, state, or private pension plans, benefits programs such as Social Security or VA, nor interest, capital gains, or dividend income. The monthly subsistence allowance paid to Chapter 31 participants is tax-free and not considered as earned wages.

The distribution of the 98,721 applicants and recipients in the database included veterans in each of these case status categories below. The guidance for conducting this match *only* included VR&E recipients in rehabilitation to

employability status, job ready status, and interrupted status. The Task Force culled out veterans in case statuses 1-3 based on the assumption that a vocational rehabilitation plan may not be in place and veterans in independent living case status were probably earning low wages given they were classified by VR&E as having a serious employment handicap. These assumptions may need to be tested at a later date.

- Case Status 1 - Applicant - 8,221
- Case Status 2 - Evaluation and Planning - 17,601
- Case Status 3 - Extended Evaluation - 2,726
- Case Status 4 - Independent Living - 3,628
- Case Status 5 - Rehabilitation to Employment - 49,151
- Case Status 6 - Job Ready (Employment Services) - 5,837
- Case Status 8 - Interrupted - 11,557

The information presented on “earned wages” for veterans participating in the Chapter 31 Program was not analyzed in detail. However, the data tabulation yielded a wide range of wages earned in 2002, and the data output was stratified by \$5,000 increments (see Exhibit 11). Of the 66,545 VR&E participants selected in the data base, a 99.98 percent match was achieved. Because it appears that many Chapter 31 participants are working in some capacity – be it intermittent, part-time, or full time – it can be assumed that many veterans are in the program to improve their earning capabilities.

Return on Investment

This chapter addresses the numbers of veterans VR&E served as well as program staffing levels. However, additional data capacities will be needed for VR&E to develop a Return on Investment (ROI) analysis such as that produced in the Department’s evaluation review of the VBA Education Program. An ROI would be useful to program managers as well as Congressional committees, and could be used to compare VR&E with state vocational rehabilitation programs.

Using analytical tools developed by the West Virginia University’s Research and Training Center, state vocational

Earned Income Levels				
Earnings	Frequency	Percent of Total	Cumulative Frequency	Cumulative Percent
0-4,999	29,589	44.47	29,589	44.47
5000-9999	6,602	9.92	36,191	54.40
10,000-14,999	5,525	8.30	41,716	62.70
15,000-19,999	5,001	7.52	46,717	70.22
20,000-24,999	4,656	7.00	51,373	77.22
25,000-29,999	3,913	5.88	55,286	83.10
30,000-34,999	3,176	4.77	58,462	87.87
35,000-39,999	2,541	3.82	61,003	91.69
40,000-44,999	1,872	2.81	62,875	94.50
45,000-49,999	1,231	1.85	64,106	96.35
50,000-54,999	803	1.21	64,909	97.56
55,000-59,999	560	0.84	65,469	98.40
60,000-64,999	330	0.50	65,799	98.90
65,000-69,999	217	0.33	66,016	99.22
70,000-74,999	170	0.26	66,186	99.48
75,000-79,999	102	0.15	66,288	99.63
80,000-84,999	197	0.30	66,485	99.93
85,000-89,999	18	0.03	66,503	99.96
90,000-94,999	5	0.01	66,508	99.96
95,000-99,999	10	0.02	66,518	99.98
100,000-104,999	4	0.01	66,522	99.98
105,000-109,999	4	0.01	66,526	99.99
>110,000	6	0.01	66,532	100.00

Exhibit 11

rehabilitation agencies have been effective in collecting and analyzing data related to their success in assisting persons with disabilities achieve employment, and become taxpayers. The statistically valid methodology has been in use since 1992, and its use is standardized for all state vocational rehabilitation programs. According to the Rehabilitation Services Administration, graduates of state vocational rehabilitation programs in 2002 are paying more than \$1 billion annually in taxes of various kinds. Those individuals who received assistance from state vocational rehabilitation programs and went to work will:

- Earn \$3.5 billion in wages in their first year of work;
- Pay back the cost of their rehabilitation services, through taxes in 2-4 years;
- Benefit the combined federal and state tax treasuries by 2 to 4 dollars in revenues for every VR dollar spent over subsequent years of work; and
- Benefit themselves with \$10 in earnings for every VR dollar spent over their subsequent years of work.

The Alabama Department of Rehabilitation Services has used this approach to determine its cost benefit as: "For every \$1.00 invested in each consumer we serve in the state VR program, that consumer, when employed, returns to the economy over their work life \$18.79." Input data includes total annual program expenditures, total number of rehabilitations, average number of years remaining in the individual's work life, average income increase, and a discount rate based on the relationship of the economic growth rate and the length of economic activity.

The Task Force recognizes that an ROI analysis for the VR&E Program will require additional data collection including the components of taxpayer benefits, longitudinal earnings information, increased disposable income, and economic impacts. Moreover, efforts to project revenues and estimate taxes paid on return-to-work veterans would need to be based on reliable demographic and economic assumptions. As previously described, VR&E could use earned income information from the Social Security Administration as an indicator of taxable wages. When the enhancements recommended for CWINRS are implemented, VR&E should be able to know the amounts spent for evaluation, counseling, training, education, and employment placement for each individual veteran. In addition, accurate direct and indirect program costs would provide the base for extremely useful analysis for management, budgeting, and comparative purposes.

"The data that we have been able to organize paints a picture of increasing workload demands on an outdated work process and system that under reports its workload, does not account for the increasing complexity of that workload, and does not understand the underlying trends that will impact the future workload."

Summary

The VR&E Service and Program today is under stress. The data that we have been able to organize paints a picture of increasing workload demands on an

outdated work process and system that under reports its workload, does not account for the increasing complexity of that workload, and does not understand the underlying trends that will impact the future workload. As a result of this situation, there is great uncertainty associated with the VR&E workload and it is likely that the VR&E Service has been under resourced to meet existing demands. As an example, mobilized Guard and Reserve personnel will begin to better understand VR&E benefits and may create new demands on the system. While the Task Force was able to develop a snap-shot of the veteran population being served by the VR&E Service on a national level, there is no equivalent data at the Regional Office level to guide local decision making about the veterans they are serving. Clearly, significant efforts should be made to systematically and routinely analyze the VR&E population data.

In general, the current VR&E service delivery system is out-of-date, data poor, and understaffed to meet the needs of today's veterans with service-connected disabilities. The current situation raises many questions about how to best serve the needs of these veterans. The Task Force's answers to those questions will unfold in coming chapters: a new employment-driven service delivery system, integrated services across agencies, and recommendations with implementation timeframes.

Chapter 4

VR&E for the 21st Century: A New Service Delivery System

Overview: New Employment-Driven Service Delivery System

The Task Force concluded that the service delivery system used by the VR&E Service is not designed to readily provide employment services to veterans with the most serious service-connected disabilities. The current system, including all support functions, provides traditional vocational rehabilitation with an emphasis on training. As such, this approach has been previously characterized as a “same size fits all veterans” process that is composed of many sequential steps with the focus on employment and independent living services not coming until the end of this process.

New Five-Track Employment Process

In order to be effective and efficient in the 21st Century, the Task Force recommends that the VR&E Service implement a new employment-driven process as the cornerstone of a new service delivery system. We refer to this new process as the Five-Track Employment Process, which is depicted in Exhibit 12.

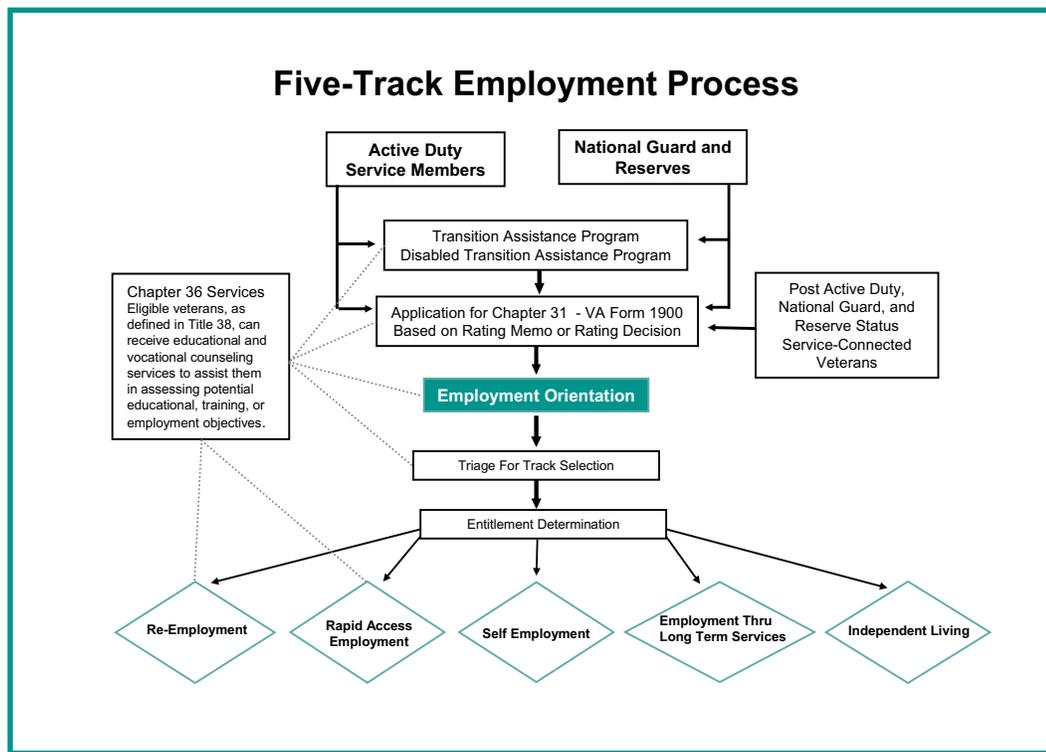


Exhibit 12

This new process includes five specialized program and service delivery options for veterans with disabilities. The operational concept for this new service delivery strategy is summarized later in this chapter. This process provides the following services to veterans:

- Reemployment of veterans with their previous employers
- Access to rapid employment services with new employers
- Self-employment for veterans
- Long-term (traditional) vocational rehabilitation services including education
- Independent living services with the possibility of employment as appropriate

This employment-driven process is part of a larger system that describes how VR&E operates. This chapter of the report describes the essential operational features of this larger VR&E delivery system including this new employment-driven process, the operational concept for this improved systems approach to delivery of VR&E services, and considerations for how this concept should be implemented.

More details about this process and other considerations about how this process works are provided in Appendix 11. A key component of this strategy is integration of the VR&E Service's capabilities with those of VHA and other agencies such as DoD, DOL, state agencies for rehabilitation, and the wider vocational rehabilitation community. Chapter 5 addresses the integration of multi-organizational operations to facilitate the delivery of services.

Key Features of the 21st Century VR&E Service Delivery System

The new employment process is part of a dynamic system for delivering services to veterans. This larger systems view is depicted in summary form in Exhibit 13. This system begins with a detailed understanding of the characteristics of the current and future veteran population that may place demands on the VR&E system and concludes with the successful transition of the veteran to sustainable and suitable employment or achievement of a higher quality of life that could lead to employment.

This larger systems view must also include serving unique populations of veterans, such as Native Americans, who often live in rural and isolated areas. These veterans with disabilities often face numerous obstacles including lack of access to employment and economic opportunities, lack of transportation, unavailable and unaffordable housing, lack of services and supports, and a lack of access to health care providers.

In its 21st Century Service Delivery System, the Task Force encourages VR&E to gather data on the service needs of unique populations of disabled veterans and provide proactive outreach to veterans in rural areas in culturally sensitive ways.

The Task Force makes further recommendations about changes that must be made to rebuild this total VR&E system and program for the 21st Century and

Five-Track Employment Process

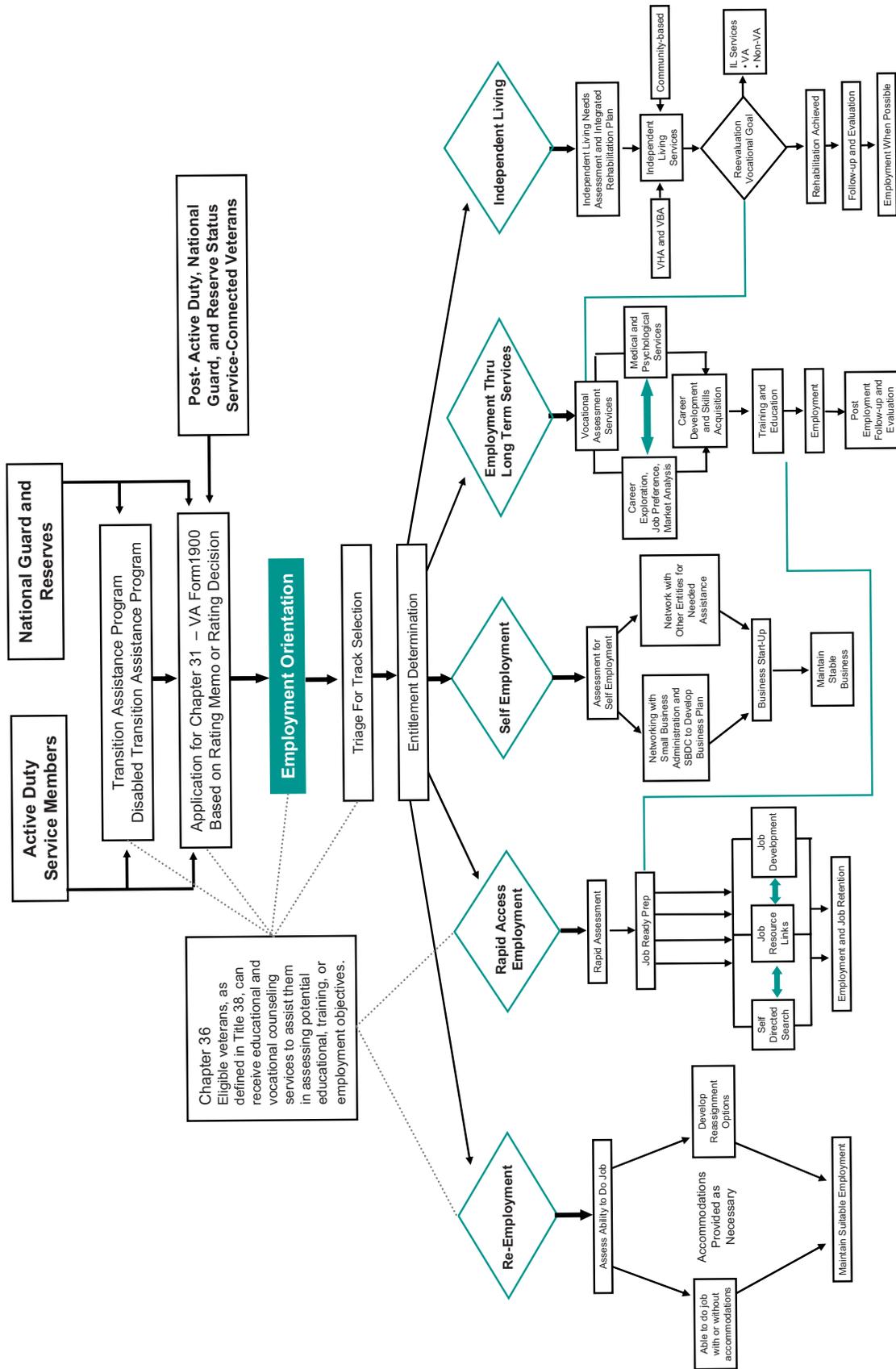


Exhibit 13

facilitate operation of this new service strategy. The changes proposed by the Task Force are strategic in direction, scope, and timing, not just for the VR&E Service, but also for VA. Implementation of this proposed integrated service delivery process and other changes will require major changes to the VR&E organization, program, work processes, and the integrating capacities that support delivery of services. Chapter 6 of the report presents and discusses the recommendations concerning these needed changes to reform the VR&E Service.

These changes define the key operational features of this new VR&E Service Delivery System. The key features of this system are highlighted in Exhibit 13, and the operational concept for this new system is summarized later in this Chapter.

Process Improvements

- Streamlined eligibility and entitlement criteria for the most seriously disabled veterans desiring to use Chapter 31 services.
- Expansion of the Chapter 36 Educational and Vocational Counseling Program to fully utilize the inherent capabilities of this program to assist veterans.
- Use of triage techniques for timely assessment of veteran needs to quickly direct the veteran into specialized services and the appropriate track in the service delivery process.
- Movement within the new Five-Track Process based on the individual needs of veterans.
- Emphasis on the concept of the veteran's choice as to suitable employment.
- Changes in the traditional vocational rehabilitation work process to facilitate staff efficiency and effectiveness.
- Incorporation of Functional Capacity Evaluation as a VR&E best practice to shift the focus from veterans' disabilities to their abilities for employment.
- Proactive outreach through improved services to unique populations in rural and isolated areas.

Staffing and In-house Capacities

- Creation of four new VR&E staff positions – Employment Readiness Specialist, Marketing and Placement Specialist, Independent Living Specialist, and Contracting/Purchasing Specialist.
- Development of in-house VR&E capacities for employment readiness, job development, job search, and job placement so that VR&E's performance is not totally dependent upon organizations outside the control of VR&E.
- Application of technology to modernize VR&E service delivery.
- Development of in-house capacities to gather data regarding service needs of Native Americans and other unique populations.

Service Integration and Partnerships

- Proactive outreach through improved administration of the VBA's role in the Disabled Transition Assistance Program (DTAP) coordinated by DOL.

- Aggressive integration of VHA and VBA services to better serve those populations of veterans needing specialized independent living and other services to speed delivery of Chapter 31 benefits.
- Leveraging partnerships with other organizations directly engaged in providing rehabilitation and employment services to persons with disabilities so these capabilities can assist veterans with disabilities.

21st Century VR&E Service Delivery System Operational Concept

The operational concept for this new service delivery system is driven by the goal of placing the veteran in the track of service that is most appropriate to meet his or her needs as quickly as possible to shorten the time to deliver comprehensive employment services to the veteran.

Several Task Force members who are experienced in employment services said that employers have demonstrated their readiness to hire veterans to fill immediate staffing needs. As the Task Force sees it, the purpose of the program is clear: The VR&E service is to quickly and efficiently prepare veterans for employment and work with them to find suitable jobs.

In order to do this, the VR&E Service must retool its comprehensive vocational evaluation, educational, and employment services to the contemporary, real-time employment needs of individual veterans. The VR&E process today essentially places veterans in a multi-year process to prepare veterans for jobs that may not exist in three or more years due to the dynamic nature of the economic environment and constant changes in the labor market. This highlights the imperative that the VR&E Service must become proactive and implement a new operational concept using state-of-the-art employment readiness, job placement, and marketing methods that will lead to high rates of employment for veterans.

This operational concept cannot be implemented without considerations about the populations of veterans that may need VR&E Services, the application process, and entitlement to the program. These pieces, which are part of the larger system that must be reformed, are discussed following our discussion of the five-track Process.

Staffing for the Improved System

This operational concept calls for the creation of three new VR&E field staff positions for the new Five-Track Employment Process. These positions are the Employment Readiness Specialist (ERS), the Marketing and Placement Specialist (MPS), and the Independent Living Specialist (ILS). These positions, along with a contract purchasing specialist, are discussed in Chapter 6 Recommendations on Workforce Management and Staffing. The Task Force has also provided a draft set of qualifications and duties for the ERS, MPS, and IL positions. See Appendix 12.

Employment Readiness Specialist (ERS)

The primary focus of this position is to provide job readiness, job seeking, and reemployment services to disabled veterans in order to make veterans more competitive in the labor market. The Employment Readiness Specialist will

also lead the Triage Team and must foster coordination and cooperation with the Employment Marketing and Placement Specialist, the Independent Living Specialist, and vocational rehabilitation counselors. The ERS will use state-of-the-art technology to facilitate the range of readiness assessment tools. The experience of many of the Task Force members who have worked directly with employers who hire people with disabilities indicates that job readiness and job search services are critical to enhancing the VR&E employment activities intended to generate employment outcomes for veterans. Without employment-ready veterans, there is no point in developing partnerships with employers willing to hire veterans with disabilities.

The intent of this position is to fill the gap in employment-related services created by the large VRC caseloads and the significant size of the territories for the current Employment Specialist. The Task Force was concerned with data from the 2002 Survey of Veteran's Satisfaction with Employment Services:

- A major area of concern to veterans was job search.
- Almost one-fourth (23.5 percent) of those submitting comments wrote in to request more help with job hunting.
- The most common types of employment services respondents reported needing were resume preparation and development (27.5 percent) and job hunting strategy (26.4 percent).
- The more important determining factor in the employment status of the veteran is whether or not the counselor was actively involved during the job search.
- Veterans view job search assistance to be the most important service provided.

In this and previous surveys, VR&E scored consistently lower on the Job Ready Phase than in the other two phases of evaluation & planning and rehabilitation services. The new ERS position should help bring up these veterans' satisfaction scores.

Ideally, every Regional Office (RO) should have one ERS who is dedicated to the performance of the core tasks of this position. Operationally, ERSs should be based in the area or region served by the RO that has the largest number of veterans. This approach facilitates face-to-face employment readiness services as often as possible in a designated service area. For the remainder of the region outside the service area for the ERS, this individual can provide job readiness services via group classes, video conferencing, online resources and networking with other agencies. ERSs should also develop resource teams outside their service area to help provide job readiness services to veterans in outlying areas. Resources might include state Vocational Rehabilitation Services, State Department of Labor One Stop Career Centers, Disabled Veteran's Outreach Program (DVOP), and contract employment service providers.

Employment Marketing and Placement Specialist (EMPS)

The marketing and placement specialist will be responsible for direct employer development and veteran job placement in designated "high volume" service

areas. These employment specialists will use state-of-the-art technology capabilities to facilitate all aspects of the employment marketing and placement tasks related to employment and reemployment. Additionally these specialists will establish local employer development and placement teams in outlying areas beyond the primary service area and will be expected to use state-of-the-art employment technology. The local teams will involve both internal and external resource networks. The marketing and placement specialist will be required to do customized marketing with employers based on the job skills of the employment-ready disabled veterans. This should be done in lieu of blanket marketing to all employers so as not to set up a system with a glut of employers wanting to hire veterans but no job-ready veterans to meet the employer's needs. These employment specialists will also identify and track the employer contacts and "accounts" being developed by VR&E staff around the country using new VR&E technology systems.

Independent Living Specialists (ILS)

This is a new position that implements the Task Force's recommendation to make IL a specialist rather than a generalist area of service. The volume of Independent Living cases does not currently justify the Task Force recommending additional staffing to fill this new position. However, we do recommend that a dedicated staff person be added to the Central Office staff to manage the Independent Living program.

Outreach and Disabled Transition Assistance Program (DTAP)

VR&E outreach efforts have been limited and are essentially performed by the C&P Service's outreach program that is targeted at generating claims. Within VBA, the administration of DTAP should be transferred to the VR&E Service, fully resourced and staffed and standardized in terms of content and presentation. See Chapter 6.

The Task Force believes that VBA's corporate goal should be to focus on the successful transition and employment of disabled veterans. This means that the end goal for VBA should not be whether or not the veteran filed a C&P claim. Filing a C&P claim, providing rehabilitation services, and facilitating employment are all means to accomplishing the goal. In this redesigned outreach concept, a VR&E staff member should make personal contact with each service member medically discharged either through group presentations or one-on-one sessions as early in the separation process as possible. Given the distribution and locations of Military Treatment Facilities, it may be more feasible for VR&E to use contractors to accomplish this goal.

Chapter 36 Educational and Vocational Counseling

VR&E's current operational concept essentially requires that a veteran be found eligible and entitled to Chapter 31 benefits after receiving a service-connected disability (SCD) rating from the C&P Service before the veteran can even have an opportunity to receive counseling. By counseling, the Task Force means professional counseling about any problems including personal issues related to career choice and preparation, testing, school or job training, job selection, and search.

The Task Force believes that the implementation of Chapter 31 is overly restrictive. In our view, a counselor should be able to provide assistance to the veteran without a C&P rating up to the point of actually writing a rehabilitation plan. The Task Force also believes that a veteran eligible for Chapter 36¹ services should be able to receive counseling from VBA at any time on any problem before or after discharge without regard to any time limits or number of visits. The Task Force views Chapter 36 as the primary means to provide these counseling opportunities to all veterans. However, Chapter 36 services are currently underutilized. Contractor counselors serving large military installations deliver almost all Chapter 36 services now delivered by the VR&E Service.

Because Chapter 36 under Title 38 is somewhat buried under VR&E, one of the shortfalls is the organization's inability to execute these services for veterans, other than Chapter 31, who are eligible for vocational educational counseling through VR&E. These include those eligible for Chapters 18, 30, 32, 35, which we discussed in Chapter 1 and Appendix 10-A. In FY 2003, only about 5 percent of those eligible actually received these benefits under Chapter 36.²

It seems safe to say that the non Chapter 31 veteran receives negligible impartial, professional counseling. The Task Force does not count the group counseling through TAP at the time of separation because it normally provides only an overview of general information. VR&E has not used all available funding to outsource Chapter 36 counseling and, in recent years, funds available to provide this counseling have not been fully obligated. VR&E needs to use this funding, and, moreover, needs to provide an outreach program that will increase veteran benefit usage rates.

VR&E staff in some Regional Offices perform a few counseling services and Task Force discussions with field personnel suggest that some field staff are not knowledgeable about the provisions of Chapter 36 counseling. For the Chapter 36 counseling that is provided, the VR&E Service has not provided the oversight and guidance necessary to establish best practices and provide systematic follow-up with the veteran. One important step is for VR&E to ensure that both VR&E counseling staff and contract counselors receive standardized training that provides accurate and complete information related to education and training options available under all benefit programs. The Task Force encourages all Regional Offices to provide vocational/educational guidance counseling services on military bases in their respective states and also to those veterans who were unable to take advantage of such counseling prior to separating from the service.

Operationally, both the triage concept described below and the initial counseling provided by VR&E employment and counseling staff and contract counselors can be provided under the provisions of Chapter 36 or Chapter 31.

Triage Team and Specialization

The Task Force uses the term triage to mean the timely assessment of the needs of a veteran seeking employment or personal assistance by a team of VR&E Employment Readiness Specialists, Marketing and Placement Specialists,

Vocational Rehabilitation Counselors, and other professionals as needed to quickly direct the veteran into a track of specialized service. We use the term Triage Team in the same sense that C&P Service uses the Triage Team to assign work to the appropriate functional expert or to complete the work on the case within the Triage Team unit as soon as possible. The team approach should continue to operate within the specialized service tracks. The Employment Readiness Specialist should lead the Triage Team.

Rather than place a veteran in a long, linear, and multi-step evaluation process, the operational concept is to use the expertise and experience of the two employment specialists and counselors to work as a team to meet with the veteran and then provide the veteran with timely information to enable the veteran to make an informed choice about his or her options. This choice will lead to providing the veteran with specialized services as quickly as possible. The triage operational concept, coupled with specialization of the work force, allows for a better match of veteran needs with the knowledge, skills and experience of individual staff members.

Functional Capacity Evaluation

Functional Capacity Evaluation is a mature technology (knowledge, systems, and procedures) that is being used in many settings, such as workers' compensation and disability insurance programs, to provide a systematic method of measuring a person's ability to perform meaningful physical tasks on a safe and reliable basis. The Task Force believes that the use of Functional Capacity Evaluation (FCE) should be an essential component of the 21st Century VR&E operational concept. The Task Force had the opportunity to observe an FCE being conducted during two site visits.

Currently, FCE technology is used infrequently by individual VR&E staff and the VR&E Service has not established uniform standards, policies, and best practices of its use. Ideally, the Task Force believes that DoD and VA owe all veterans with service-connected disabilities data and information on their residual abilities from an FCE as part of the career transition, planning, discharge, disability determination, and vocation rehabilitation processes, when this is appropriate. Again, this is part of the continuum of service that should begin in DoD and continue at VA.

The disability compensation program is designed in part to recognize the life cycle impacts of a veteran's disabilities by providing monetary benefits. However, DoD and VA do not provide veterans with information on their baseline residual abilities given their SCD status and, prospectively, how these abilities will change over the veteran's life cycle. The Task Force believes that armed with this information, veterans would be able to make better decisions about career planning and employment that would result in more efficient and effective rehabilitation and employment processes with more successful outcomes. In this new service delivery process, FCE technology should be part of the testing and assessment protocols for selected cases. Chapter 6 of this report provides recommendations on implementing Functional Capacity Evaluation.

Five-Track Employment Process

The following section of this Chapter provides an overview on the functions and tasks associated with each component of the Five-Track Employment Process. A detailed narrative on the description, characteristics, and implementation strategies for the Five-Track Employment Process is provided in Appendix 11.

(1) Reemployment Service Delivery within the Five-Track Employment Process

There is an urgent need to create this service delivery track on an interim basis as well as for the long term. This track of services is designed for those individuals who have served on active military service or in the National Guard or Reserves who are now returning to their previous employer.

This track is designed to provide early intervention through rapid VR&E response to a veteran's need for services to successfully return to previous employment or transition to new employment. The flow of services in this track is shown in Exhibit 14. This service delivery track provides for services both to the veteran returning to work and the employer, as highlighted below.

VR&E Services to the Veteran Employee

- Develop a comprehensive return-to-work plan with the employee.
- Work with the employer to enhance productivity that might be affected by the veteran's disability and related issues.
- Provide a continuum of service to the employee through job stabilization.
- Create options to transition the veteran employee to alternative vocational options if necessary because of the inability to accommodate the veteran in the job.
- Work collaboratively with the employer and VA health care personnel to provide those services necessary to mitigate the risk of the veterans not being able to sustain their job performance.

VR&E Services to the Employer

- Conduct an initial assessment of the issues impacting the veteran's return-to-work. This includes performance of job tasks, interactions

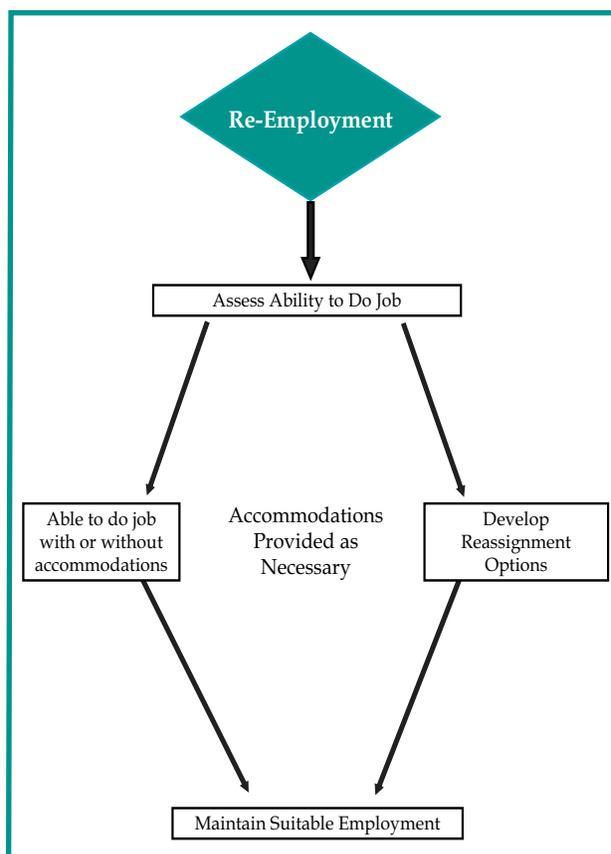


Exhibit 14

with coworkers, access to guaranteed benefits, and compliance with company policies and procedures.

- Perform a job task analysis when needed to identify specific performance issues.
- Identify the requirements to provide reasonable physical and technology job accommodations such as physical access, technology, scheduling, etc.
- Clarify veteran employee capabilities and challenges related to the veteran's medical condition.
- Facilitate the provision of specific job accommodations (if needed).
- Develop modified or alternative duty and/or transitional job options in return-to-work plans allowing the returning veterans the option of a time-limited job assignment while adjusting to his or her disabling condition.
- Provide the veteran counseling on their reemployment rights, and facilitate assistance to the veteran by the Department of Labor.

The VR&E Service does not currently provide these reemployment services to veterans or to employers. There is a need for a more timely response and delivery of critical services to restore or maintain employment for disabled veterans. Frequently, employers do not have the expertise or resource linkages to accomplish this reemployment outcome for disabled veterans without assistance from rehabilitation professionals. Indeed, there are many benefits to employers that VR&E can use in its marketing efforts – the employer retains a productive worker, has help in complying with federal mandates for returning veterans, and gets access to technical expertise in customized accommodation options, and all at no cost. Although DTAP training sessions can be the largest single referral source of veterans who wish to return to work, VR&E will need to do outreach to business and industry, including marketing to immediate supervisors, human resource managers, safety officers, benefits staff, and others.

Implementation of this new service delivery track will require that VBA invest in staff with proper skills, policies and procedures, training, and new IT functionality. Operationally, the processes and staff to implement this track should be fast, flexible, and pragmatic in delivering services. VR&E Central Office and field staff must also become knowledgeable about the range of VA and DoD program benefits available to Guard and Reserve personnel as well as the employment rights of returning service members.

(2) Rapid Access Employment (RAE) Services within the Five-Track Employment Process
Immediate employment can certainly be an important goal for many disabled veterans who do not wish to pursue, or are unable to pursue, long term educational goals or who have a need for immediate income. RAE service delivery is targeted to those disabled veterans who have expressed a desire to seek employment soon after separation or who already have the necessary skills to be competitive in the job market in an appropriate occupation. A depiction of this appears in Exhibit 15.

The veteran may identify the desire for immediate employment during the TAP or DTAP process, Chapter 36 counseling session, or upon making direct application to VR&E. The point from an operation perspective is that VR&E

should expedite services to those seeking immediate employment; those services should not be burdened by the bureaucratic red-tape of detailed and lengthy assessments and development of detailed rehabilitation plans. For example, service members who are to be medically discharged and desire immediate employment should be provided those services even before they are officially separated from service if that is what the service member desires. Service members who ask for immediate employment services during Chapter 36 counseling should be referred to the VR&E Triage Team for assessment and delivery of appropriate services. This service delivery track will also present the VR&E program in a much more favorable light to the employers when employment outreach efforts are conducted.

Ideally, the VR&E Triage Team (employment and rehabilitation staff) should make recommendations to the veteran on the suitability of a job as it relates to the abilities of the veteran not his or her limitations. While the goal of the employment service is to assist veterans in attaining suitable employment consistent with their physical or mental condition, it is ultimately the veterans who make the choice as to whether or not the job appropriately meets their needs, not the VR&E staff member. In this track the Employment Readiness Specialist (ERS) plays the primary role as Triage Team Leader.

After the choice for immediate employment is made, the ERS will be responsible for oversight and integration of the various services that need to be provided to the disabled veteran for entry into the labor market. Employment services should include:

- Rapid Assessment of Transferable Skills
- Job Readiness Preparation
- Self-directed, but monitored Job Search or VR&E Job Development Services
- Development of Employment Resource Networks and Links
- Provision of Job Accommodations (when needed)
- Employment
- Post Employment Follow-up and Evaluation to ensure job retention

(3) *Self-employment Services within the Five-Track Employment Process*
Rehabilitation of a veteran through

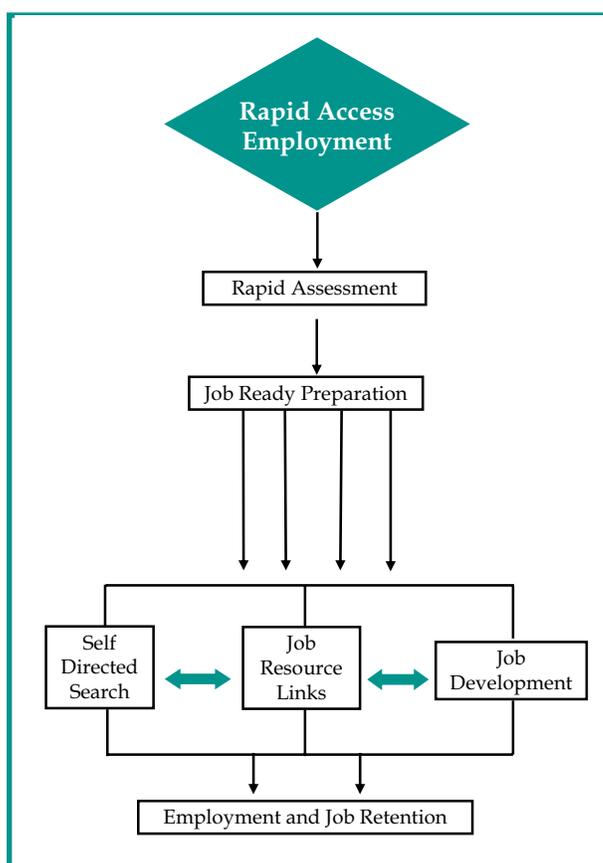


Exhibit 15

the self-employment track in a small business may be an option in two situations, 1) if the veteran's access to the normal channels of access to suitable employment is limited due to the veteran's disability or 2) other circumstances in the veteran's life warrant consideration of self-employment as an additional option. VR&E staff have historically not considered self-employment as a viable employment option. This is understandable given the complexity of guiding a self-employment case and the associated risks. In some cases, self-employment can be considered for disabled veterans who have limited access to employment, need flexible work schedules, or who need a more accommodating work environment than is normally achievable in traditional work places. The Task Force believes that well-planned and properly-resourced businesses are a reasonable option for persons with disabilities. Further, changing business needs increase opportunities for self-employment.

Recently de-activated or discharged members of the National Guard and Reserve are prime candidates for self-employment support. In March 2003, GAO testified to Congress that a 2000 DOD survey showed that 7 percent of Reservists were self-employed or worked without pay in their family businesses or farms. Many of these members suffer significant damage to their small business while mobilized and following their return. Self-employed members who are disabled while serving may face additional and significant challenges as they return to self-employment.

Services provided in this track, as depicted in Exhibit 16, should include the critical components identified below to ensure delivery of quality services to disabled veterans who have both the interest and the aptitude to pursue self-employment.

- Establish formal technical assistance agreements with the Small Business Administration District Offices to ensure full and coordinated access to all SBA programs and services.
- Network with other small business assistance groups.
- Facilitate business start-up and assessment.
- Maintain stable employment and long-term evaluation.

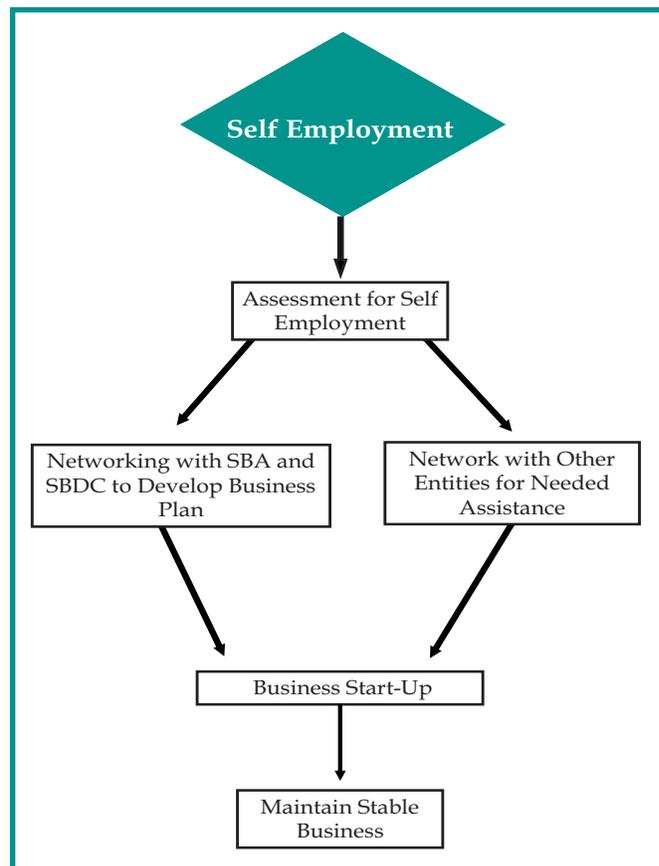


Exhibit 16

In this self-employment service process, VR&E should facilitate the provision of technical assistance to veterans rather than providing direct consulting services. VR&E staff should continue to provide these applicants all the other traditional services necessary to support the veteran.

The Task Force was made aware that Public Law 104-275 contains provision for VA to provide support to the most seriously disabled service-connected veterans who have aspirations to pursue self-employment opportunities. VR&E indicated about 39 veterans had business plans approved in FY 2003, but success rates for self-employment veterans are not known by VR&E. There is an approval process in place – albeit not a standardized approach used across the system – that requires a veteran to submit a business plan, marketing information, financial proposal, and risk management assessment for review by VBA or an independent panel of small business experts. Within VBA, there are different approval levels predicated on the amount of financial support that VA will provide. At present, VA Regional Office Directors can approve self-employment plans up to \$100,000 and proposals above \$100,000 require VBA Central Office approval.

The proposed self-employment option in the Five-Track Employment Process does not preclude VR&E from continuing to provide start-up stocks, materials, or goods for the most seriously disabled veteran in accordance with the provisions of PL 104-275. As indicated above, the focus of self-employment services should principally be on providing guidance, information, and referrals to Chapter 31 veterans who want to enter into a self-employment opportunity. VR&E may want to consider loans, not grants, if a veteran is unable to secure financing of initial capital requirements for a self-employment business opportunity.

During the writing of this report, the Small Business Administration let the Task Force know that SBA is the largest provider of lending to small businesses in the United States. The 2000 GAO Report (GAO/GGD-00-158), *Credit Costs & Risks of Proposed VA Small Business Loan Guarantee Program*, recommended consideration of expertise-sharing between VA and SBA to expand SBA guaranteed business loan opportunities to veterans. SBA and VA agreed with this conclusion. SBA is currently exploring special lending for veterans, service-disabled veterans, and members of the Reserve and National Guard and remains open to exploring partnering options with VA in this regard.

Self-employment should be viewed as a specialized function, and VR&E should designate specific employment or vocational rehabilitation counselor staff members at the Regional Office or on a geographic or area basis as the lead to facilitate all self-employment cases. The low volume of demand for this service and the technical assistance requirements do not support an investment to acquire a full complement of “in-house” self-employment service capabilities.

Operationally, VR&E should rely on the Small Business Administration as a point of entry to an array of self-employment services. SBA has 8,000 locations nationwide, which includes its resource partners, including about 1,000 Small Business Development Centers. SBA has particular and statutory interest in

ensuring that all service-disabled veterans have full access to all of the federally-supported services and programs offered by SBA and its resource partners. Every SBA District Office has an assigned Veterans Business Development Officer (VBDO) on staff. This official could coordinate for local VR&E staff and participants to access all SBA programs, services, and partners. The Task Force suggests that VR&E and SBA explore a national agreement to coordinate access to programs at the national and local level and also to explore funded contracts if necessary.

The VR&E Central Office should establish a set of protocols and standards to ensure that the program is administered consistently nationwide. VR&E should rely on the Small Business Administration to coordinate technical assistance to:

- Assess the capability of persons interested in starting their own business
- Guide the disabled veteran in the development of a feasible business plan
- Link the disabled veteran to financial resources

The first year of a new business is the most critical in the determination of the success of the business. VR&E should routinely work with SBA, or a Small Business Development Center, to monitor and assess the implementation of the veteran's business plan on a regular basis. This will include identification of job accommodations, the need for additional resources, and facilitation of Chapter 31 services to support the veteran. Consequently, VR&E staff must continue to provide needed rehabilitation services and support past the first year to ensure stable "employment."

There are several other entities that provide assistance to individuals interested in starting new businesses. VR&E CO should take the lead to establish national relationships and strategic partnerships with organizations such as Small Business Administration, VA's Center for Veteran's Enterprises, SCORE (Service Corps of Retired Executives), and lending institutions. In this regard, VR&E CO may want to seek the advice and assistance of VBA's Loan Guaranty Service that has extensive knowledge and experience with the private sector lending community.

(4) Employment Through Long Term Services within the Five-Track Employment Process
When employment is more of a long-term goal or the other tracks do not achieve success, the VR&E Triage Team and the veteran may want to consider the feasibility of achieving success through the traditional vocational rehabilitation approach. Exhibit 17 shows the different elements of this track. The VR&E traditional case management approach to service delivery service was described earlier along with the work process and workload management issues that drive the need for changes.

The major components of this track include the following:

- Traditional Vocational Assessment Services
- Testing and Evaluation
- Career Guidance/Job Preference/Market Analysis

- Medical and Psychological Services
- Career Development and Skills Acquisition
- Training and Education
- Employment (post education and training)
- Post Employment Follow-up and Evaluation

To meet the needs of the service-connected disabled veteran, the Training and Education component must emphasize non-traditional training and educational courses and experience, including on-the-job training (OJT), apprenticeships, internships, job shadowing, work monitoring, work-study programs, and public-private job partnering programs in addition to higher education, which is the emphasis in the current approach.

The administrative process that is currently used by the VR&E Service to implement the Chapter 31 program of services can be burdensome for veterans, lengthy in terms of chronological time, and labor intensive for VR&E staff. As discussed in this report, VR&E's current operations are under stress. Recommendations to improve delivery of these services are in Chapter 6 of this report.

The operational concept for this track in the new VR&E system is based on:

- Specialization of the work force and only selective use of life cycle case management for each applicant by the same counselor.
- Use of technology to automate certification, monitoring of veteran education, training progress, and interface with educational institutions.
- Standardization of best practices and reduction of paperwork.
- Design and implementation of interventions to mitigate the risk of a veteran's rehabilitation plan being interrupted or a veteran being discontinued from the program.

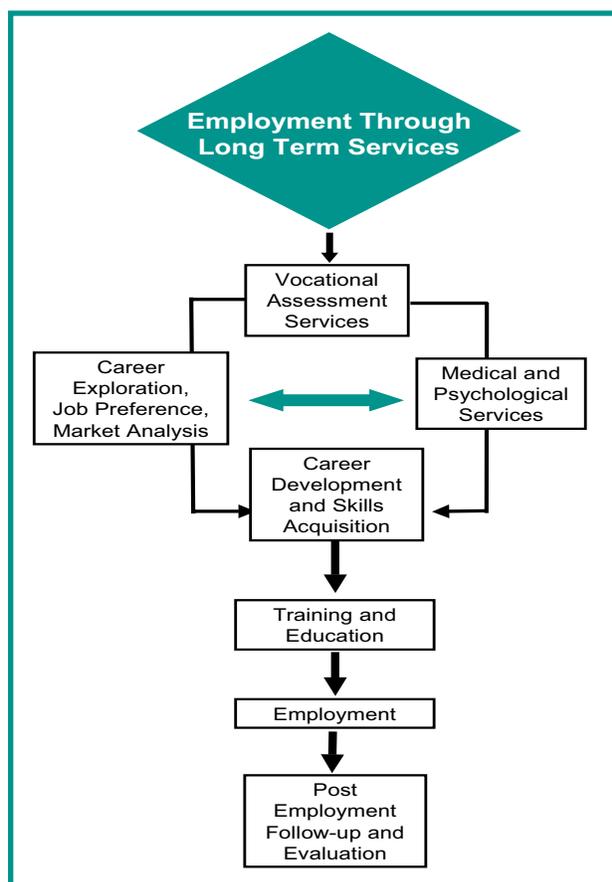


Exhibit 17

(5) Independent Living (IL) Services within the Five-Track Employment Process

Independent living services are critical to many veterans. These services can make the difference in disabled veterans' improving their quality of life and achieving their goals to the point that paid or volunteer employment is feasible, as new technologies and approaches become available. Based on a conference call to the VR&E offices in areas with the highest use of IL services, it appears to the Task Force that Independent Living services are being used as an alternative to employment in some areas with few employment opportunities. The intent of the VR&E Service providing Independent Living services is an excellent one, but the effort lacks sufficient direction, standard of practices, protocols designed to quickly assist the veteran, and specially-trained staff. It also lacks integration with VHA and the larger community-based independent living movement. A flow chart for Independent Living Services is shown in Exhibit 18.

There also appear to be differing philosophies about the scope and intent of the program even though the VR&E Service has published guidance on administration of the program. As a result, the delivery of Independent Living services has been inconsistent across VBA's Regional Offices. Individual VR&E Service offices have implemented their own approaches to Independent Living services without sufficient and tailored training of specialized staff. Many VR&E offices delivering Independent Living services emphasize only quality of life issues and personal goals, with little attention paid to potential employment opportunities. The seemingly arbitrary annual Congressional cap on the number of Independent Living participants (currently 2,500 new cases per year) may contribute to the inconsistent administration of the program.

The limitation on the maximum number of months Independent Living services may be utilized also hinders effective service delivery. Currently, Independent Living services may be delivered for 24 service months with an option for another 6 months of services. The VR&E Service may authorize an additional 24

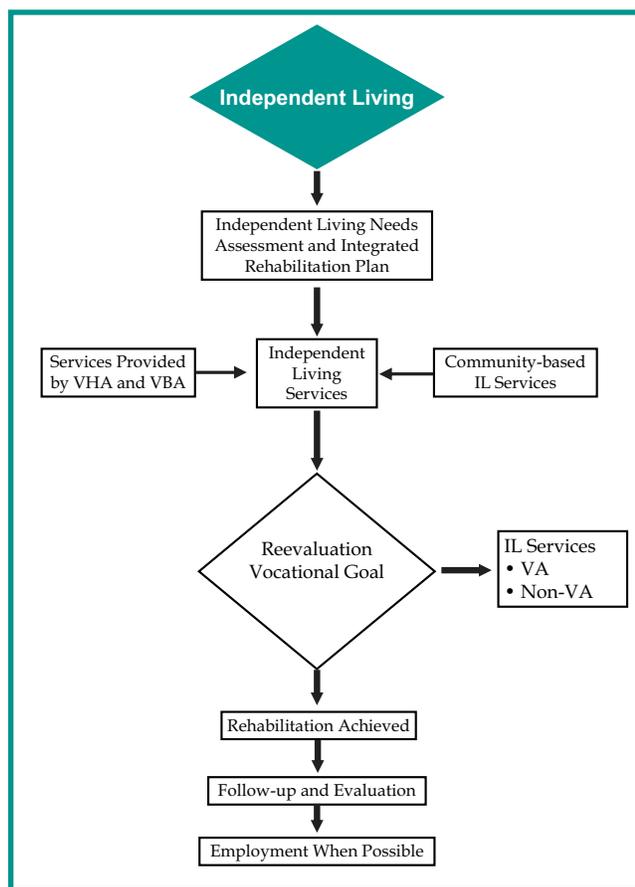


Exhibit 18

service months of Independent Living benefits following discontinuance of the veteran from the program.

Since the disabling conditions creating the need for Independent Living services are not temporary, the VR&E Service case manager must also work to put in place a program of services that will sustain the veteran beyond the period the VR&E Service can provide specific Independent Living services. The development and implementation of a sustainment plan must begin before the end of the 30-month period, and this requires that the VR&E staff broker community-based and other services for the veteran and his or her family. From the Task Force interviews with the VR&E staff, it does not appear that development and management of a sustainment plan is an inherent part of the process. In the view of the Task Force, there is nothing in the current rules and procedures for Independent Living that prevents a VR&E case manager from brokering non-VA services, providing continual monitoring of the veteran, and providing brokered interventions to solve problems impacting the veteran during the post-30 month period or for the life cycle.

The Independent Living recommendations provided in Chapter 6 are designed to improve the administration of this program. The key operational features of this redesigned service delivery strategy include:

- Establish a new focus for the program based on achieving independence for the veteran and informed choice about empowerment, employment, and productivity.
- Change the focus of Independent Living to a delivery of services strategy supporting a flexible plan of rehabilitation rather than a dedicated plan.
- Shift local administration of all Independent Living cases from vocational rehabilitation counselors to a new Independent Living specialist staff that is well trained and has extensive experience in social work and facilitation of community-based resources.
- Leverage the Centers for Independent Living and other community-based resources through contract support arrangements for technical assistance and case management of VR&E Independent Living cases to provide short term and sustaining services to veterans.
- Consider improving coordination and eventual integration of the assistive housing programs (now administered by Loan Guaranty Service) and the ancillary equipment program (now administered by the C&P Service) into the VR&E Service.
- Assess abolishing the Legislative cap on the number of annual new Independent Living cases.
- Improve coordination and accountability between the VA and VR&E for the provision of integrated services.

Other Key Elements

We will now look more closely at other integral elements of the new 21st Century service delivery system, all of which must be considered if the process is to work.

The New Veteran

Currently, the VR&E Service does not analyze active duty and Guard and Reserve force levels, discharges, or trends in order to assess the potential impact on workload, nor does the Service adjust its operations to meet the evolving needs of these service members. Meeting the needs of all veterans is important, and VBA should understand that Guard and Reserve service members present different challenges for VR&E Service than service members discharging from active duty for three primary reasons:

- Guard and Reserve members can currently apply for VR&E benefits under existing regulations while they remain in the Guard and Reserve or even when mobilized. Recent estimates indicate 300,000 Guard and Reserve members have been called up to active duty status since September 11, 2001.
- Many Guard and Reserve personnel are typically employed (30 percent are estimated by DoD to be in college full-time or part-time³) before being mobilized. Being able to rapidly return to employment is therefore a major issue for Guard and Reserve personnel. While Guard and Reserve personnel have return-to-work rights in their former positions, experience indicates that they do not always return to former positions. The amount of time the individual is mobilized and the progression of any previous service-connected disability (SCD) may create a need for the veteran to seek employment assistance to provide job accommodations in order to return to his or her previous job or seek other employment.
- Guard and Reserve personnel who are medically discharged after an injury or with other problems face additional challenges. Many of these veterans will not be able to return to their previous civilian career fields and positions.

The Task Force believes that VBA operations should be based on a thorough understanding of the six populations of veterans that drive the VR&E Service workload.

Medically Discharged

Based on C&P Service data, the Department of Defense annually discharges approximately 14,000 active duty and Guard/Reserve service members for medical reasons. These service members may be 1) medically discharged, or 2) placed on the Temporary Disabled Retired List for up to 2 years and then placed on the Permanent Disabled Retired List, or 3) determined not to have a disability, or 4) given severance pay. The proposed operational concept for VR&E outreach and DTAP are designed to proactively provide outreach services to these medically discharged veterans.

Discharged with a Service-Connected Disability (SCD)

There are two categories of veterans in this population. The first population includes those active duty and Guard/Reserve veterans who filed disability claims with VBA prior to discharge through the Compensation and Pension (C&P) Service's Benefits Delivery at Discharge process. The second category of veterans includes those who file disability claims some period of time, perhaps years, after they have been discharged from service.

Discharged without a Service-Connected Disability

There is a large population of active duty and Guard/Reserve veterans who have never filed a claim for disability compensation with VBA. Even though these veterans have not filed a disability claim, they may need transition assistance, education and vocational counseling, assistance with personal problems, and employment assistance, much of which could be offered under Chapter 36.

Under current regulations governing the VR&E process, veterans cannot receive Chapter 31 counseling or other assistance from the VR&E Service unless their disability claim has been approved.

Demobilized with a Service-Connected Disability

Guard and Reserve service members may submit claims for service-connected disabilities each time they are demobilized from active duty. Those veterans who are demobilized with a SCD may receive disability payments from VBA while remaining in the Guard and Reserve. Once Guard and Reserve personnel are demobilized from active duty, they may need transition assistance, education and vocational counseling, assistance with personal problems, and employment assistance.

Mobilized with a Service-Connected Disability

This group of Guard and Reserve personnel includes those who receive monthly payments from VBA based on a previously-filed claim for SCD. Monthly disability payments are adjusted for those days that Guard and Reserve members are on drill or training status and when they are mobilized.

Demobilized without a Service-Connected Disability

Most Guard and Reserve personnel have not filed a claim for a SCD. However, these personnel may also have a need for transition assistance, education and vocational counseling, assistance with personal problems, and employment assistance, which could be offered under Chapter 36.

Eligibility, Entitlement, and the Application Process

In the view of the Task Force, the current eligibility, entitlement, and application process factors hinder the timely delivery of VR&E services. As highlighted repeatedly in this report, the path to receiving VR&E services goes through the Compensation and Pension (C&P) Service. The C&P Service effectively functions as a gate to receiving timely rehabilitation and employment services.

Eligibility and Entitlement

Task Force recommendations on eligibility and entitlement (See Recommendations on Eligibility in Chapter 6 of this report) are driven by two objectives. The first objective is to focus as early as possible the leadership, management capacities, and resources of the VR&E Service on the population of disabled veterans who have the most serious disabilities. The second objective is to create a system that bypasses the C&P “Memo Rating”⁴ gate for as many veterans as possible so that VR&E can accelerate the delivery of services to those most in need.

Rather than making VR&E a post-C&P claims issue, the Task Force believes it is essential that VR&E services be focused upfront in VBA’s interaction with the veteran and as early as feasible given the desires of the veteran. Further, we believe that until such time that the VR&E Service counselor or contract counselor actually writes a plan for rehabilitation, a “Memo Rating” should not be required to provide assessment and counseling services.

“Eliminate entitlement decisions. Most applicants are entitled anyhow. The June 2003 Chapter 31 statistical report shows that the program nationally finds 88% (including the 10 percent-ers)...entitled to service. This increases to 91% without the 10%ers. By eliminating the decisions, the VRCs could concentrate on what services a disabled vet needs, regardless of rating, to get back into the job market.”

– Comment from the field.

To this end, the Task Force has proposed four changes in eligibility and entitlement criteria. The recommendations associated with these changes appear in Chapter 6 of this report:

- Make any member of the uniform services who is medically separated from the military automatically entitled to VR&E services. In the view of the Task Force, these members have already been found to have a serious employment handicap since the Department of Defense has made a determination that they are no longer fit for duty anywhere in the world. VR&E’s immediate focus should be on determining the abilities of these veterans and providing them assistance to make informed choices about their future.
- Revise the entitlement criteria and provide priority to those veterans with a combined service-connected disability of 50 percent or greater and those receiving Special Monthly Compensation for loss or loss of use of a limb.
- Remove the statutory annual 2,500 case cap on Independent Living cases and change the negative language in the law. Seek congressional action to remove the terminology “achievement of a vocational goal currently is not reasonably feasible” for severely disabled veterans and substitute with “employment is not an immediate goal.”
- Remove the limiting periods for use of Chapter 36 Education and Vocational Rehabilitation Counseling benefits so that any veteran at any time can seek counseling assistance from a VR&E counselor or contract counselor.

Application for Services

Additional efficiencies in VR&E operations can be gained by changes in the VA Form 28-1900 process. Currently, C&P Service policy calls for the Service Center to include a VA Form 1900 Application for VR&E Services with the Notification of Award Letter sent to each veteran who is found entitled for disability compensation benefits and each time that a service-connected veteran receives an increased rating.

This process may be well intended, but Task Force field interviews consistently indicated that sending out VA Form 1900 when ratings are increased generates additional and unproductive work for VR&E. Based on Task Force field visits it appears that many veterans who make application do not show up for appointments and, of those who do show for their appointments, many veterans decline the service. In some situations, as the Task Force learned during field visits, veterans are completing and submitting VA Form 1900 they receive in the mail from the Service Center because they somehow believe that submitting the “1900” to VR&E is tied to their receiving or maintaining their increased benefits.

If VBA believes that VA Form 1900 should be automatically forwarded to the veteran, then as matter of policy, VR&E staff should develop a protocol to screen questionable applications by calling the applicant to determine their actual interest in the program before even scheduling an appointment. This operational approach would expedite delivery of services and has been demonstrated to be successful in the Denver Regional Office.

Implementation Strategies for the VR&E Five-Track Employment Process

From a practical standpoint, the Task Force believes there are a number of operational factors that must be considered in implementing a new service delivery process. These principal factors include:

- Widely dispersed Regional Offices and out-based network of staff and support contractors.
- Uneven distribution of the VR&E workload across the system.
- Significant regional and local differences in terms of economic growth and job opportunities.
- Differences in veteran population demographics may drive different needs and demands for individualized services from Regional Office to Regional Office.
- The location of certain Regional Offices and out-based locations in relation to military installations and Military Treatment Facilities.
- The level of performance provided by partner organizations (DVOP, state vocational rehabilitation, VHA and others).

Because of these factors, the VR&E Service should tailor the implementation of this process based on the above factors. In general, the Task Force recommends that this process be implemented without consideration of existing Regional Office jurisdictional boundaries and current structures. For example, how the VR&E Service implements this process in St. Paul, where there are no military

installations, will be different than how the process is implemented in Regional Offices where there are numerous and large military installations such as San Diego, St. Petersburg, and Atlanta. Regional solutions involving more than one Regional Office may be appropriate where the local VR&E workload is not dynamic and geographical factors are prominent. For example, the regional approach may be appropriate in the New England area. Implementation of an integrated process for all of the Regional Offices in Texas may be appropriate to leverage resources and achieve better utilization and coordination of partnership organizations.

The Task Force is aware of the constraints that impact the VR&E Service's capacities for planning and management of complex organizational and program changes. In consideration of these fact-of-life constraints, the Task Force recommends that the VR&E Service begin this process by designing and implementing two operational strategies and associated pilot projects that bracket the extreme variations in operational factors that impact how this service process is implemented. The VR&E Service should use the experience from implementing these two strategies to design and implement the service delivery process VBA-wide. These two strategies are summarized below and appear in more detail in Chapter 6 of this report.

Low Workload, Multi-RO Operations Strategy

This strategy is designed to serve economic and geographical areas containing multiple Regional Offices where each Regional Office has a small workload and dynamic economic environments. Seventeen of VA's Regional Offices each have less than one percent of the VR&E Service national workload and account in total for about 10 percent of the national workload. This strategy is driven by economic, geographical, and employment considerations rather than the location of Regional Offices. The staffing, skills mix, organizational structure, and sites should be driven by the needs to serve a large geographical area. The Task Force recommends this process project be implemented first in the New England area. The VR&E Service may also want to consider implementing this type of network strategy in a Western State with a Regional Office serving as the lead for developing and implementing a regional strategy.

"The new process puts employment upfront and embraces access, customer choice, and service integration."

Large Workload Operations Strategy

This strategy is designed to serve an area characterized by high workload, economic and job growth, and large military installations. Based on FY 2003 data, about 23 percent of the VR&E Service's national workload is managed by five VR&E offices and 14 VR&E offices account for a total of about 50 percent of the national workload. The Task Force recommends the VR&E Service implement this strategy by first focusing on the high volume VR&E offices. This includes St. Petersburg, Atlanta, Montgomery, and in Texas with a statewide program integrating Houston and Waco VR&E operations. Implementation of the process in Montgomery is designed to develop the policies and procedures for leveraging the capabilities of State Vocational Rehabilitation (SVR) organizations. The results of this project in Montgomery should be used to guide the development

and design of specific work processes to further the VR&E Service's relationship with other SVR organizations.

Operational Summary

The operational concept described above identifies the key features of the new VR&E Five-Track Employment-driven Service Delivery Process, and more detailed information is provided in Appendix 11. The features of this new process emphasize a proactive process that rapidly tracks a veteran into a specialized set of services that are targeted to meet the veterans' needs. This new process is in contrast to the current service delivery process that is composed of many sequential steps with a focus on employment and independent living services coming at the end of this long process. The new process puts employment upfront and embraces access, customer choice, and service integration.

The Task Force recognizes that implementation of this new way of doing business presents a number of resource and management challenges to VBA and the VR&E Service. Additional FTE and dollar resources will be required to implement this process along with strong program management capabilities. The Task Force identifies the priorities associated with the recommendations to implement this process and improve overall VR&E performance in Chapter 6 of this report.

¹ An individual is eligible for Chapter 36 if she or he is eligible for educational assistance under Chapter 30, 31, or 32 of Title 38 or Chapter 106 or 107 of Title 10.

²According to FY 2002 VR&E data (latest available) on Persons in Education Programs for Entitlements, 430,717 veterans were participating in Chapters 30, 32, 34 and Section 1606 education programs. In the FY 2003 VR&E Quarterly Statistical Report, Chapter 36 counseling was conducted for 18,915 veterans (18,664 by contractors and 251 completed cases for Chapters 30, 32, 35, 36, 18, and Section 1606). This roughly computes to less than a 5 percent usage rate.

³ 30 percent estimate was provided in a phone call by John O'Hara, Executive Director, the Task Force, to the Employer Support of the Guard Reserve Office at the Department of Defense.

⁴ A memo rating is a preliminary disability rating decision completed by VBA based upon examination of available medical evidence. The memo rating allows VR&E to begin working with the veteran before a permanent rating decision has been made.

Chapter 5

Integrating Services and Strategies: A Continuum of Care

Introduction

The integration of services across agencies is essential if veterans with service-connected disabilities are to achieve their goal of successful transition and employment. The Task Force focused on how best to integrate the efforts of four primary federal and state agencies – VA (VBA and VHA), the Department of Defense (DoD), the Department of Labor (DOL), and State Vocational Rehabilitation (SVR) Agencies – to achieve the goal of seamless delivery of services. In addition, it is essential that VR&E strengthen its ties and partnerships with veterans service organizations, state directors of veterans affairs, county veteran service officers, and other stakeholders.

The concept of integrated and seamless delivery of services to veterans has been advanced by formal relationships between the DoD and VA. These agreements are designed to extend the continuum of care and services necessary to facilitate the successful transition from being injured to being a successfully rehabilitated veteran. VA's relationship with DOL on veterans' employment is another in the series of these types of relationships. Despite abundant long-standing and consistent recommendations about fully implementing these and other formal relationships, the Task Force believes that these agreements have not been fully implemented to achieve the level of operational service delivery that is envisioned by the Congress. The Task Force supports the concept of partnerships and integration of multi-organization services to facilitate efficiency and effectiveness in the delivery of services.

Focus on Integration of Services within VBA

Currently, VBA administers benefit programs outside of the VR&E Service that address the rehabilitation and independent living needs of veterans. The Loan Guaranty Service administers the Specially Adaptive Housing Program for disabled veterans eligible for a grant to modify their homes to accommodate their needs. The Compensation and Pension (C&P) Service makes payments to disabled veterans toward the purchase of a vehicle that can then be adapted through a VHA-funded program.

Within the Loan Guaranty and C&P Services, benefit claims can be processed without face-to-face contact with the veteran to assess the total needs of the veteran and how these benefits are integrated into the overall continuum of services. Today, these programs function independently within VBA with insufficient interaction between the Loan Guaranty Service, C&P Service, and the VR&E Service staff concerning the population of veterans applying for

and receiving these services. There is also no follow-on assessment of what the impact of these benefit has been on meeting the needs of veterans and improving their quality of life.

These two claims benefit programs are delivering services to veterans that may be better provided in the context of professional case management services. The case management concept provides the means to integrate a range of assessments and services – VA and community-based – to achieve a specific outcome and to improve the quality of a veteran’s life. In this model, Loan Guaranty and C&P provide services that should be integrated with a range of assessment, counseling, long-term case management, and other services to achieve the best outcome for the veteran. The C&P Service also administers two additional programs – 1) VA’s responsibilities for the Transition Assistance Program (TAP) and 2) an outreach program to homeless veterans – that may be more effective if integrated with the VR&E Service.

In designing a 21st Century VR&E service delivery system, the Task Force recommends that VBA consider integration of the Loan Guaranty and Compensation and Pension benefit programs that contribute to rehabilitation and independent living into the VR&E Service. At the minimum, there should be enhanced cooperation between VBA elements in order to better meet the needs of a service-connected veteran. Those filing claims for these two benefits are by definition veterans who might have the type of disabilities that may drive the need for additional services. The current VBA alignment of these benefits tends to act as a barrier to identifying the total needs of severely-disabled veterans, timely provision of services, and life cycle case management of services.

Focus on Integration of VHA and VR&E Services

Long before the concept of *One VA* became the Department’s standard, numerous commissions, committees, and panels have correctly recognized the potential strength of a formal relationship between VHA and VBA’s Vocational Rehabilitation and Employment Program. The Task Force considered a number of opportunities to achieve better integration of VHA and VBA services for veterans receiving VR&E benefits.

Realignment of VR&E Service and Independent Living to VHA

The Task Force debated the pros and cons of whether the VR&E Service should be realigned from VBA to VHA. We also discussed separating and moving VR&E’s Independent Living Program to VHA.

In considering the value of realigning the VR&E Service and Program to VHA, the Task Force recognizes the VR&E Service is a human service delivery organization that exists within an administrative claims processing organization. Providing these individualized services is fundamentally different from processing claims, a work process that does not require face-to-face interaction with the veteran. This situation has certainly fostered a number of organizational problems for the VR&E CO organization and Service. We also recognize that there is a rich set of resources within VHA in terms of various professions and programs that could be more effectively used to serve Chapter 31 veterans.

The Task Force concluded that the VR&E program, along with the IL Program, should remain within the VBA. The judgment of the Task Force was that leaving the VR&E Service in VBA provides the best “home base” from which to make the systemic changes necessary to finally rebuild this program. It is far from certain that the problems that have plagued the VR&E Service could have been or would be solved in the future by simply moving the VR&E Service into a much larger and more complex organization that has significant challenges already. Such realignment would also create a set of unique problems for the VR&E Service in dealing with VBA. VHA is an organization that is faced with a myriad of complex policy, resource, and service delivery challenges already. Frankly speaking, the Task Force was concerned that if the VR&E Service and its programs were transferred to VHA that they would become “swallowed-up” in the vastness of the organization and not receive the priority and attention needed to make the transfer successful much less achieve the improvements in performance to justify the change.

“VBA and VHA must work together to achieve shared goals and outcomes through mutual support in their common mission.”

VHA-VR&E Integrated Operations

VBA and VHA must work together to achieve shared goals and outcomes through mutual support in their common mission. The Task Force strongly encourages a “team approach” utilizing the multidisciplinary strengths of both VHA and VR&E staffs. The welfare of disabled veterans is dependent on the ability of all VA professional groups to have input into the vocational rehabilitation plan. This team approach should be extended to Independent Living (IL) services. The Task Force recommends that VHA and the VR&E Service initiate projects to formalize and standardize VA-wide the operational processes and administration for improved life cycle delivery of services to veterans. Such an effort to better serve veterans was initiated by the New York Regional Office and the Northport VA Medical Center. (See Appendix 14.)

Centers of Excellence

VHA and the VR&E Service should develop a model for VHA specialty centers of excellence and VR&E Divisions to deliver seamless and comprehensive IL and other services that focus on special disabilities, specifically traumatic brain injury (TBI), spinal cord injury (SCI), stroke, and blind rehabilitation. This model should be based on the joint Tampa VAMC and St. Petersburg VR&E Division activities involving veterans with special disabilities. (See Appendix 14) In the view of the Task Force, veterans will benefit if VHA and the VR&E Service identify and mandate a VA-wide set of best practice work processes for the range of assessments, case management, and provision of VA and community based-services needed to help veterans transitioning from VHA centers of excellence.

Case Management

The Task Force has learned that there is a population of veterans who may enter the system through the Chapter 31 program but are first in need of what we have called “life rehabilitation” services before they can start or

complete vocational rehabilitation. At the same time, there are veterans who start in VHA and are referred to the VR&E Division at some point in their treatment. Currently, the Chicago VR&E Division and area VHA facilities have an informal process for tracking the status of veterans for whom they share responsibility. This case management process for shared veterans should be formalized into a best practice and standardized.

Mental Health Programs

VR&E should determine the need for new VHA-VR&E Service joint programs to supplement the Compensated Work Therapy (CWT) Program and provide specialized programs for Post Traumatic Stress Disorder (PTSD) veterans. Based on information provided by VBA's C&P Service, the number of veterans with neuro-psychiatric conditions has increased 8 percent during the period of FY 2000 through FY 2003. During this period, the number of veterans with these same conditions who are seeking vocational rehabilitation is increasing. Veterans with these conditions tend to require more frequent face-to-face interaction with their counselors over a longer period of time and present significant challenges for VR&E staff in providing initial employment assistance and sustaining the veteran on the job.

Task Force field visits revealed that VR&E counselors may not be fully trained to work with these types of cases and may not be taking advantage of VHA's CWT Program. The CWT Program provides rehabilitation services to individuals with mental illness, including access to vocational rehabilitation models that have been demonstrated in clinical studies as effective in increasing employment outcomes for individuals with these diagnoses.

VHA-CWT has the infrastructure in place to provide vocational services in a collaborative model with the VR&E Service.

“DoD and VA must work together as a team to successfully transition disabled service members to rehabilitated veterans.”

In the near term, the Task Force recommends that VHA and the VR&E Service develop, implement, and mandate a set of processes and protocols for service delivery to this population of veterans. The Task Force is also concerned about the need for a bridge program between CWT and the VR&E Service's rehabilitation and employment

programs for this growing population of veterans. VA should consider initiating some review effort to assess how best to provide a transition program for these veterans.

Focus on Integration of DoD and VR&E Services

DoD and VA must work together as a team to successfully transition disabled service members to rehabilitated veterans. Based on our assessment of the VR&E Service's work processes, the Task Force identified five opportunities for improved integration activities between DoD and VR&E to improve service delivery.

VA-DoD Joint Strategic Plan

During the work of the Task Force, we discovered that the VA-DoD Joint Strategic Plan does not reference vocational rehabilitation and employment as a benefit for eligible veterans. The agreement also does not include goals,

objectives, and plans that would promote a seamless coordination of services for veterans with a service-related disability who desire rehabilitation and employment. This agreement should be updated to recognize the role and function of vocational rehabilitation and employment services as well as to provide plans of actions and milestones to achieve better and more responsive integration of services.

To that end, the VR&E CO should appoint a senior staff member to be an active participant with DoD to further this relationship for delivery of VR&E services and coordinate all DoD-VR&E data, system, and process issues. To the best of our knowledge, the VR&E Service has not had a proactive working relationship with the staff in the Office of the Under Secretary of Defense for Personnel and Readiness and those of the military services responsible for education, training, and transition assistance.

Disabled Transition Assistance Program (DTAP)

It is essential that VR&E staff become proactive in the delivery of services, including administration of VA's role in DTAP. To that end, the Task Force believes that the VR&E Service should work with DoD to establish a representative office at every Military Treatment Facility either on a full time or intermittent basis as deemed feasible. In some locations the use of trained contract counselors may be more cost efficient.

Verification of Military Experience and Training

Veterans seeking VR&E assistance can bring with them their Verification of Military Experience and Training (VMET) document (DD Form 2586). These forms are available only from Army, Navy, Air Force, and Marine Corps Transition Support Offices. VMET documents are intended for separating or retiring service members. These documents are available to service members from their local Transition Support Offices within 12 months of their separation or 24 months of their retirement. The VMET form contains information that can be helpful in the triage process and for more complete assessments. However, VR&E staff indicated to Task Force members that the use of VMET data is not part of the VR&E Service's best practices and some VR&E staff members are not aware that this information exists.

To improve operations of the VR&E process and speed delivery of services, the Task Force recommends that the VR&E Service take two actions. First, the VR&E Service should make use of the VMET data a best practice and standardize its use. Second, the VR&E Service should work with DoD to facilitate the means to allow the VR&E staff to have direct online access to VMET data so that when a veteran comes to VBA for services, this information can be accessed to facilitate the triage and employment process.

Education Credit for Military Experience and Training

Many Chapter 31 veterans decide to improve their employment opportunities by entering into a training or educational program. It would be beneficial if veterans could find out if their military experience and training could be applied as educational credit before they begin their vocational training.

The Task Force suggests that DoD and VR&E work in a collaborative effort aimed at assisting veterans who want to apply their military experiences for educational credit. A veteran's vocational rehabilitation plan would be enhanced if a summary of completed military training programs, as well as any education coursework the veteran might have taken through DoD tuition assistance or appropriate life experiences, could be translated into potential educational credits. For veterans successful in receiving educational credit for their military experiences, the Task Force assumes that veterans will complete their vocational training program earlier. This could lead to more efficient use of VR&E Program dollars and result in service-connected veterans becoming employment-ready more quickly. The Task Force understands that the Coast Guard and the Army National Guard are already using commercial software packages to assist veterans in determining what military experiences might qualify for educational credit.

Computer/Electronic Accommodations

A key component of the Five-Track Employment Process is the ability of VR&E to make assessments of the need for job accommodations and to facilitate those accommodations. This is an area where DoD could provide significant capabilities to support VR&E's employment services. The DoD Computer/Electronic Accommodations Program (CAP), within the Office of the Assistant Secretary of Defense for Health Affairs, provides nationwide technical assistance to more than 50 federal agencies by providing assistive technology and services for employees with disabilities. Currently CAP provides these services to VA for its employees. The Task Force envisions CAP as a way for VR&E Service to have a one-stop assistive technology capability that can be called upon at any time to assist a veteran on a cost reimbursable basis. A DoD-VR&E joint approach would facilitate the provision of services not currently provided at all VA Regional Offices, standardize these services, and continue the seamless delivery of services to veterans by staff who know and understand the assistive technology needs of the veteran.

Focus on Integration of DOL and VR&E Employment Services

In considering how to improve the performance of the VR&E Service, the Task Force spent time understanding the role of the Department of Labor Veterans' Employment and Training Service's (VETS) Disabled Veterans Outreach Program (DVOP) and the relationship of the state DVOP staff to the VR&E employment process. VETS administers two grant programs – for DVOP specialists and the Local Veterans' Employment Representative (LVER) program – that fund staff at state employment service offices. According to DOL, in FY 2003 there were about 1,195 DVOP staff and about 1,090 LVER staff. These staffing levels represent a slight reduction from the FY 2001 staffing levels of about 1,300 DVOP specialists and about 1,200 LVERs.

Our assessment of the role of the DVOP is based on interviews with VR&E field staff and VSO field representatives. Task Force members also visited the National Veterans Training Institute (NVTI) in Denver, Colorado where we observed two training courses. While visiting the NVTI, Task Force members participated in

four focus group discussions with class attendees. The Task Force was also aware of the concerns and conclusions of the *Congressional Commission on Servicemembers and Veterans Transition Assistance* regarding veterans' employment and the VETS DVOP program. The Task Force also reviewed recent General Accounting Office Reports on the Veterans Employment and Training Service.

The Task Force did not assess the feasibility of transferring DOL's Veterans' Employment and Training Service to VA and integrating it with the VR&E Service although the *Congressional Commission on Servicemembers and Veterans Transition Assistance* recommended in its 1999 report that Congress consider combining these programs at VA if certain goals were not met. The Task Force took the position that as long as the DVOP exists in its present form, the VR&E Service needs to do all it can to obtain consistent field performance from the program on a nationwide basis.

The impression received during Task Force fact-finding visits was that the relationship between the DVOP and VR&E is not working as well as it could be. There are, however, locations where the DVOP process is considered by the VR&E staff to work very well. For example, in St. Paul, the local DVOP is co-located in the VR&E RO office and works aggressively with the staff. In San Diego, the VR&E staff performs virtually no employment function thus relying on the DVOP process to facilitate employment for veterans. Overall, the problems noted by the *Congressional Commission on Servicemembers and Veterans Transition Assistance* and more recently by the GAO still exist.

"The Task Force took the position that as long as the DVOP exists in its present form, the VR&E needs to do all it can to obtain consistent field performance from the program on a nationwide basis."

In brief, the VETS legislative mandate for DVOP implementation is to provide grants to the states to deliver these services. State authorities responsible for direction and control of DVOP staff hire these state employees as the state agency believes appropriate. We understand that these grants do not mandate the use of specific work processes or skill, experience, and knowledge requirements for DVOPS and LVRS. At the state level, it is normally the State Vocational Rehabilitation Agency (SVR) that proactively addresses issues of rehabilitation and employment for persons with disabilities.

Since the DVOP strategy does not mandate a standardized nationwide process, each local VR&E office has developed local policies and procedures that are unique to that location. As a result there is inconsistency across the nation in how local VR&E staff work with DVOP specialists. We also heard concerns during our interviews at the Regional Offices that DVOP specialists are often not skilled and trained to deal with persons who have disabilities.

The challenges faced by local VR&E offices in dealing with the DVOP may become even more significant. The 1998 Workforce Investment Act (WIA) created a One-Stop Center System at the state level to integrate and streamline the delivery of services. This One-Stop Center concept has evolved into a

decentralized employment center concept with multiple centers in a state serving areas or regions. The operations and resources of these Centers are controlled by local Workforce Boards. There are now literally hundreds of these autonomous Centers and Boards nationwide. This approach significantly increases the number of organizations and the variety of ways of doing business that VR&E Service staff must interface with on a routine basis. The GAO has raised concerns about the functioning of the DVOP within the One-Stop environment in a September 2001 Report on *Veterans' Employment and Training*.

To improve the working relationship of the VR&E Service with DOL, the VR&E Service should consider taking two actions:

- The VR&E service may not want to tie accomplishment of its performance goals to the performance of the DVOP. The DVOP is implemented in a myriad of approaches across the nation and there is no consistency in the process and how it works. Some are good – as in the VR&E/DVOP relationship in San Diego – but others are not. Rather than looking at the DVOP as being “the” employment function for the VR&E Service, the VR&E Service should consider taking advantage of the DVOP on a case-by-case basis as one of several relationships that might be of assistance to supplement the Five-Track Employment Service Delivery System.
- The VR&E Service should consider initiating a proactive strategy as a way to dramatically improve the performance of the DVOP in supporting the VR&E program and gain the active support and cooperation of state authorities responsible for administering the DVOP. The specific recommendations to implement this strategy appear in Chapter 6.

Focus on Integration of VR&E and State Vocational Rehabilitation (SVR) Services

While working to improve the VR&E-DVOP process, the VR&E Service should establish partnerships with the network of state agencies devoted to providing vocational rehabilitation and employment services to persons with disabilities.

“The Task Force was surprised to learn during its fact-finding activities that the VR&E Service has not leveraged the resources and capabilities of state rehabilitation agencies...”

The Task Force was surprised to learn during its fact-finding activities that the VR&E Service has not leveraged the resources and capabilities of State Vocational Rehabilitation Agencies (SVRs) even though these agencies have the expertise and resources to deal with persons with disabilities that DVOP specialists do not have. Under the Rehabilitation Act of 1973, as amended, the Rehabilitation Services Administration oversees a

federal-state partnership in 50 states and territories that provide rehabilitation and employment.

The Task Force understands that there are cases in which VR&E staff members have worked with SVR agencies. However, there is no coordinated VR&E strategy and operational plan to formalize this partnership and make it an inherent component of the service delivery strategy. The Task Force recommends

that the VR&E Service take two actions to leverage the capabilities of SVR agencies.

- Initiate a Memorandum of Understanding (MOU) with the Council of State Administrators of Vocational Rehabilitation (CSAVR) and become an active participant in the CSAVR community. The Task Force has provided a draft MOU in Appendix 15.
- Establish a pilot project with a SVR agency to develop the policies and procedures for leveraging the capabilities of SVR agencies in other states. We recommend that this project model be implemented at the Montgomery Regional Office with the Alabama Department of Rehabilitation Services. The results of this project should be used to guide the development and design of specific work processes.

As this Task Force was concluding its work, we learned that a milestone was reached recently in a cross-agency effort to develop common performance measures for federal job training and employment programs, an effort that obviously impacts VR&E, DOL, and other federal agencies as well as states. DOL's Employment and Training Administration issued a Training and Employment Guidance Letter to the state workforce liaisons and agencies with background and particulars on a common measures policy.¹ This undertaking is part of the President's Management Agenda to improve the management and performance of the federal government, specifically program effectiveness in this case. VA is represented at these cross-agency meetings; VR&E will want to keep on top of discussions and decisions.

Focus on Integration with Stakeholders

Much has been written on improving cooperation between VA, veterans service organizations, state directors of veterans affairs, county veteran service officers, and other organizations that assist veterans. The Task Force suggests that the level of cooperation between VR&E and other stakeholders be taken up a notch. The term "strategic partnership" is more appropriate. As an example, VR&E should seek advice from the National Association of State Directors of Veterans Affairs on how to better integrate services at both the state and local level for disabled veterans who are seeking vocational rehabilitation services or employment. Full partnerships and cooperation are vital elements in assuring timely service to service-connected disabled veterans. A well-developed network is in place and it should be used to improve outreach efforts to inform veterans about VR&E services as well as to generate potential employment opportunities.

Integration of the VR&E Services with the Wider World of Vocational Rehabilitation

The wide world of vocational rehabilitation is composed of a variety of organizations. These organizations include the Centers for Independent Living; national organizations such as the National Council on Disability, National Council on Independent Living, the Commission on Accreditation of Rehabilitation Facilities, and the National Organization of Disability Examining Physicians; academic institutions; and private sector disability, rehabilitation, and employment firms or associations.

It appears that the leadership and management of the VR&E Service has been isolated from this larger vocational rehabilitation community. This has been apparent as we identified needs for continuing professional education and training of the workforce, the organization's limited capacities to stay on

"It is critical that the VR&E Service be in the mainstream of disability, rehabilitation, employment knowledge, and technology."

top off emerging knowledge and technology for rehabilitation, and the absence of a proactive agenda for corporate participation in this larger community. We noted in our field visits that on an individual basis, some counselors have made efforts to tap into this larger community, but these efforts met with limited results because there was not a commitment by the VR&E leadership and a corporate strategy to leverage this community.

Achieving an integrated and seamless service delivery system for disabled veterans must include the VR&E Service establishing relationships and participating with other organizations in this larger world. It is critical that the VR&E Service be in the mainstream of disability, rehabilitation, employment

"Many disabled veterans are not receiving suitable vocational rehabilitation and employment services required to provide a smooth transition into the workforce." – FY 2005 VSO Independent Budget

knowledge, and technology. To achieve this goal, the leadership of the VR&E Service should establish proactive relationships with these and other organizations so that the VR&E Service can leverage the capabilities of this larger world to improve the quality of life and employment opportunities for disabled veterans.

Integrated Operations Summary

The concept of an integrated and seamless service delivery system is the accepted strategy for improving the delivery of a variety of benefits to disabled veterans. The new VR&E employment-driven service delivery system incorporates the integration of multi-agency services and relationships as an inherent component. This new service delivery system emphasizes:

- Improving the integration of services within VA for vocational rehabilitation and employment,
- Strengthening partnerships with DoD, DOL, SBA, VSOs, state directors, county officers, and other stakeholders,
- Leveraging state vocational rehabilitation capabilities, and
- Connecting the VR&E Service into the world of rehabilitation.

In the past, the VR&E Service has not effectively planned and managed the organizational relationships essential to achieve the goal of integrated and seamless delivery of services. The recommendations provided in Chapter 6 identify specific actions to facilitate the integration of services in the future.

¹ Guidance Letter No. 15-03, dated Dec. 10, 2003.

Chapter 6

Recommendations

INTRODUCTION

This Chapter presents recommendations to rebuild the VR&E Service and Program. These recommendations are aligned under four categories:

- Program
- Organization
- Work Process
- Integrating Capacities

We use the term Integrating Capacities to refer to those internal VR&E organizational capabilities that are necessary to effectively plan and manage central office and field operations and to integrate the diverse activities of the VR&E Service. Exhibit 19 identifies the recommendations included in each of the four categories – program, organization, work process, and integrating capacities.

These recommendations identify actions that are suggested to begin in the near-term (3-6 months), mid-term (6 months) and long-term (12 months +) to improve performance of the VR&E Service and program. An index of recommendations with suggested implementation timeframes is provided in Appendix 16. Where appropriate, these recommendations are cross-referenced to each other and other associated details that appear in the appendices. Exhibit 20 is a charter compliance table that shows the alignment of each recommendation with one or more elements in the Task Force charter.

The following recommendations include a discussion of the underlying issues, information that supports the recommendation, and a description of the recommendation.

PROGRAM RECOMMENDATIONS

P-1 Eligibility

- Use Chapter 36 counseling benefits as part of the triage process for administering the use of Chapter 31 for pre-discharged military members and post discharged veterans. (Near-Term)
- Remove the limiting periods for use of Chapter 36 counseling benefits. (Near-Term)
- Establish a system to accelerate the delivery of Chapter 31 rehabilitation services to those veterans in most critical need by changing the definitions of 38 U.S.C §§ 3101 and 3102 to:

- o Make all service members who have been found medically unfit and are pending discharge or who have been discharged for a disability incurred or aggravated in the line of duty automatically eligible and entitled to VR&E services and benefits. Adjudication of a claim for service-connected disability and a VR&E determination of an employment handicap are not required for determining eligibility and entitlement. (Mid-Term)
- o Make all service-connected disabled veterans with a combined SCD rating of 50 percent or greater automatically eligible and entitled for VR&E services and benefits. (Mid-Term)
- o Make all veterans in receipt of Special Monthly Compensation (SMC) for loss of or loss of use of a limb automatically eligible and entitled to VR&E services and benefits without a determination of an employment handicap. (Mid-Term)
- o Seek congressional action to remove the terminology “achievement of a vocational goal currently is not reasonably feasible” for severely-disabled veterans and substitute with “employment is not an immediate goal.” (Long-Term)

DISCUSSION – ELIGIBILITY

These recommendations are driven by two primary objectives. The first objective is to focus the VR&E Program priorities on the population of disabled veterans that have the most serious disabilities that impact attaining quality of life and employment. This does not mean that the VR&E program should cease to serve all veterans who are eligible and entitled, but rather that VR&E should establish priorities to serve those who are most in need first. The second objective is to create a system that eliminates the need for a disability rating as a prerequisite for receiving VR&E Services so as many seriously-disabled veterans as possible can receive services on an accelerated basis.

“ There should be no time limit on a veteran’s being able to receive counseling – vocational, education, personal problems and employment – from the VR&E Program.”

Greater Opportunities for Counseling

As a first step in accelerating the delivery of services to veterans, the Chapter 36 counseling program should be expanded to become the means by which initial counseling is provided to veterans seeking VR&E assistance. Currently, VR&E Program contractors deliver virtually all of the Chapter 36 counseling that is provided at military installations as part of the Transition Assistance

Program. Today service members who are within 6 months of being separated from the military or who have been separated for no more than 12 months may receive this counseling.

There should be no time limit on a veteran’s being able to receive counseling – vocational, education, personal problems and employment – from the VR&E Program. Based on discussions with the General Accounting Office, it appears that the eligibility time limits on using Chapter 36 counseling may be inconsistent with the time limits on eligibility for the TAP and Disability

Transition Assistance Programs. As the Task Force understands it, service members are eligible to attend TAP and DTAP up to two years before retirement and one year prior to separation. TAP and DTAP are available to retired and separated veterans on a space available basis. The time limit restrictions on the veteran's use of Chapter 36 should at least allow service members to seek VR&E counseling assistance consistent with the limits of the TAP and DTAP programs.



Exhibit 19

VR&E Services to Those in Critical Need

Task Force members discussed at length how best to identify the populations of veterans in most critical need of VR&E benefits and services. The recommendations above identify the three groups of veterans with disabilities for whom eligibility and entitlement should be automatic.

The term “automatic entitlement” does not mean that VBA is excused from verifying a veteran’s status within the following three groups of service-connected veterans, and the Task Force suggests that VBA develop a streamlined verification approach. The design of any “streamlined” process for eligibility and determination decisions must ensure that VBA is able to meet its inherently governmental and fiduciary responsibilities with regard to approving the disbursement of appropriated funds.

Based on available data in VBA’s C&P Service, DoD annually discharges approximately 14,000 service members for medical reasons. For all intents and purposes, these service members were already found to have a serious enough employment handicap that makes their continued employment by DoD infeasible. A further employment handicap determination by VR&E staff is redundant and delays delivery of services until after the service member files a compensation and pension claim and a disability “Memo Rating” is issued. Providing automatic eligibility and entitlement to these service members will allow VR&E counselors to work with service members during that critical period

Task Force Recommendations P = Program O = Organization WP = Work Process IC = Integrating Capacities	Task #1 Conduct a functional and organizational assessment of the VR&E Service	Task #2 Evaluate eligibility criteria, procedures, and processes for determining veteran's entitlement to Chapter 31 services	Task #3 Appraise current VR&E processes, information systems, and management controls	Task #4 Determine consistency in the administration of the VR&E program in Regional Offices	Task #5 Examine clinical rehab practices and employment placement services utilized by others serving disabled persons
P-1 Eligibility		✓			
P-2 Employment		✓	✓		✓
P-3 Independent living		✓	✓		✓
P-4 Partnerships	✓		✓		✓
O-1 Accountability	✓	✓		✓	
O-2 Central Office Organization and Facilities	✓			✓	
O-3 Central Office Staffing	✓			✓	
O-4 Workforce Management	✓		✓		
WP-1 Workload Management					
WP-2 Contract Services	✓	✓	✓	✓	
WP-3 Case Management and Specialization		✓	✓	✓	
WP-4 Priority Service at VHA			✓		✓
WP-5 Functional Capacity Evaluation		✓	✓		✓
W-6 Disability Transition Assistance Program		✓	✓	✓	
IC-1 Regulations and Manuals		✓	✓	✓	
IC-2 Performance Measures			✓	✓	
IC-3 Quality Review Process			✓	✓	
IC-4 Information Technology			✓	✓	
IC-5 Training			✓	✓	
IC-6 Resource Management			✓	✓	
IC-7 Program Analysis and Evaluation			✓	✓	

Exhibit 20 : Charter Compliance Table

of time when they may be in prolonged discharge status. The parameters and specifics for medically-discharged service members should be jointly developed by DoD and VBA. Available data on the veterans serviced by the VR&E Program indicates that approximately 83 percent of those veterans with a rated disability of 50 percent or greater are found entitled to benefits. It would be more efficient and effective if these veterans were found automatically eligible and entitled to VR&E benefits. This would eliminate the time now expended for determination of entitlement based on an employment handicap.

The Task Force also believed that it was important to send a clear message that those who have lost limbs or lost the use of a limb be automatically entitled to VR&E services and benefits. This means that these veterans should not have to wait until they receive a disability “Memo Rating” and a determination of an employment handicap. Or, if already separated, they should not have to wait for an employment handicap determination.

Refocusing Independent Living Entitlement

Currently, the Independent Living entitlement is based on a determination of employment infeasibility. The Task Force expended considerable time in discussions about the focus and structure of the Independent Living Program. The Task Force felt that the current entitlement criteria is negative in focus and assumes that those veterans who would benefit from Independent Living services cannot be employed. The Task Force does not believe that this is the appropriate message that should be sent to veterans.

Veterans who may benefit from gaining independence in daily living are faced with significant challenges due to their disabilities. The view of the Task Force as well as the larger Independent Living community is that these disabilities do not necessarily mean that employment could not be an attainable goal. As a result, Independent Living programs should be structured to provide the means and hope for achieving the goal of employment, however that goal might be defined for an individual veteran.

P-2 Employment

- Implement a new five-track employment-driven VR&E service delivery system and a broad based strategy to consistently communicate to veterans and stakeholders that the purpose of the VR&E Program is employment. (Mid-Term to Long-Term; Priority)
- Create the position of VR&E Service Assistant Director for Employment Services to provide leadership and elevate the visibility and importance of veterans’ employment within VA and to outside stakeholders. (Near-Term) (See Recommendation on Central Office Organization and Staffing.)
- Create new staff positions and add staff for an Employment Readiness Specialist (56 FTE) and a Marketing and Placement Specialist (56 FTE) to facilitate implementation of the five-track employment-driven service delivery system. (Near to Long-Term) (See Recommendations on Workforce Management and Chapter 4.)

- Transfer the current 45 FTE Employment Specialist staff positions in VR&E back to professional counseling positions. (See Recommendations on Workforce Management.) (Near to Long-Term)
- Develop new policies and procedures to implement the new, five-track employment-driven service delivery system with priority given to Guard and Reservist in Tracks 1 and 2. (Near-Term; Priority)
- Develop and implement initial and ongoing training programs for Marketing and Placement Specialists and Employment Readiness Specialists. (Near-Term)
- Make better use of special appointing authorities to help veterans obtain federal employment. (Mid-term)
- Provide an interim information system capability and long-term solution to support a redesigned comprehensive employment services program. (Near-Term; Priority) (See Recommendations on Information Technology.)
- Enhance existing online employment services. (Near-Term)

DISCUSSION – EMPLOYMENT

These recommendations identify the essential changes that are necessary to enhance the current VR&E service delivery strategy as it relates to employment. The central thrust of the Task Force’s recommendations is to redesign the current service delivery concept used by the VR&E Service and field offices to provide an integrated service delivery system and strategy based on the Five-Track Employment Process. This system and its essential characteristics are described in Chapter 4.

Implementation of this change should begin with creating leadership and clear lines of authority and responsibility for administration of the VR&E employment program. Historically, top leadership in the VR&E Service and VBA has not demonstrated a commitment to providing employment services. The Task Force believes that it is essential that the importance of the employment mission of VR&E be embodied in a leadership position within the VR&E Service at a high enough level that sends a clear message that employment is important to VBA and to external organizations.

Successful implementation of this new service delivery system must be paced by the availability of staffing and skill resources adequate to do the job. Beginning in the late 1990s, the VR&E Service transferred 45 FTE counseling positions into Employment Specialist positions. This decision effectively reduced the productivity of the counselor workforce at a time when the VR&E workload was increasing. Actions to fill some of the new employment positions with employees who had been rehabilitation specialists compounded this workload problem. The workforce recommendations above, discussed in more detail later in this chapter, are designed to finally recognize the requirements for dedicated employment staffing and properly resource this requirement. Implementation of this workforce management recommendation should include returning the current employment positions to counseling positions. These positions should be redistributed within the VR&E Divisions based on consideration of workload and performance.

The Task Force believes that VR&E could make better use of special appointing authorities to assist veterans in obtaining federal employment. There are several special non-competitive appointing authorities available to facilitate the placement of certain disabled veterans into federal jobs. These authorities allow a federal agency to hire these disabled veterans through a non-competitive process if they are qualified to do the job. These authorities include:

- Section 3112, title 5, US Code allows for the appointment of service-connected disabled veterans rated 30 percent or more to any job for which they are qualified without regard to grade restrictions.
- Section 4214, title 38, US Code allows for the appointment of certain disabled veterans to any job for which they are qualified up to and including GS-11. This is commonly known as the Veterans Recruitment Authority (VRA) and formerly known as the Veterans Readjustment Authority.
- Section 315.604, title 5, Code of Federal Regulations (CFR) allows for the appointment of a disabled veteran who completes a program of vocational rehabilitation to a position for which the veteran has been trained in that program.

Consistency in the administration of the employment program can be achieved by developing a set of evidence-based policies and practices to guide implementation of the program. This will be reinforced through a systematic training program. As discussed earlier, the VR&E Service will need to develop new guidance to implement the new service delivery system. Recommendations on Regulations and Manuals address the essential activity that must be initiated to deal with this issue.

The design of CWINRS, the core information system supporting VR&E operations, has limited capabilities to facilitate management of the current employment program. There is an urgent need for the VR&E Service to acquire some interim systems capability to support the new service delivery system. As discussed in Recommendations on Information Technology, the VR&E Service may want to consider negotiating with state vocational rehabilitation and employment agencies for use of their systems on an interim basis.

Finally, the Internet has infiltrated everyday life for most Americans, and has had a serious impact on major life decisions, including careers. Job sites are among the most popular sites on the Internet and many job seekers routinely submit resumes by email. The Internet provides important resources and tools to help both veterans and their counselors in America's Job Bank activities.

Our recommendations will re-focus the online information and application form more directly on employment services and make it easier for a veteran to navigate the VBA/VR&E Webpages, a goal that is compatible with the President's Management Agenda on electronic government. See Appendix 13 for recommendation details and technical guidance to improve VA's online employment services.

P-3 Independent Living Recommendations

- Establish a VR&E Service CO position dedicated to lead and manage the IL program. (Near-Term)
- Create and staff Independent Living Specialists positions with personnel experienced in social work, counseling psychology, and disability. (Near-Term) (See Recommendation on Workforce Management.)
- Review IL “best practices” such as those implemented in Tampa VAMC/ St. Petersburg RO as well as various state models as exemplified by the State of Alabama Independent Living Program. (Near-Term)
- Provide consistent and uniform training for IL specialists. (Near-Term) (See Recommendation on Training.)
- Initially, focus VHA/VR&E integration on Centers of Excellence for spinal cord injury, traumatic brain injury, blind rehabilitation, and stroke. Establish protocols for a VHA/VR&E team approach (*One VA*) under the leadership of the IL specialist. (Mid-Term)
- Review funding sources and create and maintain an inventory of IL services and assistive technology devices that can be provided across VA. (Mid-Term)
- Initiate a study of the population of veterans currently in the VR&E IL Program and those receiving IL services; use this data and other research to develop estimates of the future demand for IL services and the types of services that might be needed to support veterans. (Mid-Term)

DISCUSSION – INDEPENDENT LIVING

The recommendations above are designed to improve the consistency in the administration of the overall program. These recommendations will also facilitate implementation of a refocused Independent Living Program and operational concept as discussed in Chapter 4.

In the view of the Task Force, administration of the IL program requires specialized knowledge and skills for efficient and effective administration of the program. This specialization and emphasis on consistency should begin with establishing leadership of the program at the VR&E Service. The VR&E Service should consider hiring someone for this position who has management experience in leading an IL organization or program. Consistent with the concept of specialization, the VR&E Service should also create and staff IL staff positions consistent with the operational concept described in Chapter 4.

Consistency in administration of the program can be achieved by developing a set of evidence-based policies and practices to guide implementation of the program reinforced through a systematic training program. It was clear from the Task Force’s review of current training and documentation of the program that there is significant room for improvement. The VR&E Service should conduct a rigorous review of existing policies and procedures in light of evidence-based best practices used by organizations engaged full time in the administration of Independent Living programs. As soon as new baselines are developed for policy and procedures, VR&E should develop and implement a new training program using many of these external resources.

A critical element in this refocused program is the integration of VHA and VR&E capabilities to strengthen delivery of services and life cycle case management to improve the outcome for the veteran. The Task Force recommends that VHA and the VR&E Service consider working to build a *One VA* approach by first focusing on veterans in VHA Centers of Excellence for spinal cord injury, traumatic brain injury, blind rehabilitation, and stroke. These evidence-based protocols can be expanded to include other disabilities as determined appropriate. Another key element in this refocused program is the development of a comprehensive inventory list of all IL services, benefits, and funding that are available through VHA and VBA. The Task Force was surprised to learn that VA has not developed such an inventory. This information should be developed for each VHA VISN area, regularly maintained, and distributed VA wide.

The Task Force is also concerned about the limited amount of data and information that is available on veterans currently receiving IL services and the number of potential veterans who may be in need of such services. The inconsistent administration of the IL program makes it difficult to draw conclusions about the population of veterans being served. The VR&E Service should initiate efforts to characterize the population of veterans currently in the IL program and also those receiving IL services. This information should be used to facilitate a comprehensive VA analysis to estimate the future demand for IL services and the characteristics of the population of disabled veterans seeking those services, as well as to make decisions on the scope and content of the program and the resource requirements to administer the program in the future.

“ The Task Force is also concerned about the limited amount of data and information that is available on veterans currently receiving IL services and the number of potential veterans who may be in need of such service.”

P-4 Partnerships

- Establish a Veterans Rehabilitation and Employment Working Group led by VA Central Office and composed of representatives from VHA, VBA and VR&E, DOL, DoD and the Council of State Administrators of Vocational Rehabilitation to develop and implement local, regional and national policies, strategies, and plans for continued collaboration and improved integration of rehabilitation and employment of veterans with disabilities. (Mid-Term)
- Initiate a Memorandum of Understanding (MOU) with the Council of State Administrators of Vocational Rehabilitation (CSAVR) and the Rehabilitation Services Administration (RSA) to facilitate formal partnerships with state vocational rehabilitation agencies to leverage employment opportunities for veterans with disabilities. (Near-Term)
- Establish a pilot project with the VBA Montgomery Regional Office and the Alabama Department of Rehabilitation Services to guide the development and design of collaborative business processes that could be implemented nationwide. (Near-Term)
- Negotiate a new Memorandum of Agreement with DOL to improve and standardize nationwide the DVOP-VR&E business processes and

relationships for more effective and efficient delivery of services to veterans with disabilities seeking employment. (Mid-term)

- Enter into proactive collaborative relationships with key local, regional, and national organizations such as the Office of Federal Contract Compliance Programs, state employment agencies, and other entities such as the growing national employment network of state employment personnel, business representatives, and others. (Mid-Term)

DISCUSSION – PARTNERSHIPS

Task Force fact-finding interviews indicated that the VR&E Service has not been proactive in leading the development of national collaborative partnerships to increase the opportunities for facilitating employment services and placement for veterans. Some local VR&E Division offices have established relationships with organizations to facilitate employment of veterans, but these appear to be limited in scope and not part of a national VR&E Service collaborative strategy and plan. For many years, employers have partnered with rehabilitation organizations to increase hiring opportunities for persons with disabilities. The Task Force is concerned that the VR&E Service has not been a proactive member of this broader community of organizations that have long standing relationships and capabilities to facilitate employment for veterans with disabilities.

Of particular concern is that VR&E Division offices have not established significant or consistent collaboration with state vocational rehabilitation agencies. As reported to the Task Force by the President of the Council of State Administrators of Vocational Rehabilitation, state vocational rehabilitation agencies are rarely able to fill all job leads that have been developed through their employer networks. Because of the expertise of the agencies and their established employment networks, such partnerships could prove to be quite productive in leveraging resources to increase employment opportunities and successful outcomes for veterans with disabilities.

As a first step in creating a proactive and sustainable partnership strategy, the VA should consider establishing and leading a high level Veterans Rehabilitation and Employment Working Group. Such an effort will demonstrate to veterans, VA staff, and the rehabilitation and employment communities the commitment of the VA for change in VR&E and improved employment opportunities for veterans. This working group could be instrumental in developing and implementing a broad-based communications strategy and campaign to educate veteran employment stakeholders, veterans, and employers about the goals, programs and services of the redesigned VR&E service delivery strategy and system.

This leadership initiative should be accompanied by actions to initiate partnership agreements with several key organizations. One of the most critical of these agreements should be with the Council of State Administrators of Vocational Rehabilitation (CSAVR) and the Rehabilitation Services Administration (RSA). This agreement should be used to lay the foundation for agreements between local VR&E Division offices and state vocational rehabilitation agencies for development and integration of processes for the

identification of employment resources, shared case management activities for plan development and employment services, and opportunities for shared training. The Task Force recommends that VBA “jump-start” the state vocational rehabilitation agency partnership strategy by initiating a pilot project between the Montgomery RO and the Alabama Department of Rehabilitation Services.

As discussed in Chapter 5, the strategic and working relationship between the DOL veterans’ employment programs and VR&E must be improved. In finalizing the new memorandum of agreement with DOL, the VR&E Service should consider including the following provisions:

- Measurable outcomes that are time-dated, including data reflecting the number of disabled veterans jointly assisted by DVOPS and local VR&E Division offices (noting services provided) indicating those that result in employment.
- Nationwide, consistent in-service training for DVOPS to increase their effectiveness in marketing and placing veterans with disabilities. Topical areas in this training should include, but not be limited to, information on disabilities, job accommodations, and dealing with employer concerns specific to a veteran’s disability. Training should also focus on demonstrations of existing best practices from around the country.
- Conduct national and local quarterly reviews of strategic plan progress.
- Initiate state and local conference calls between DVOPS and VR&E staff to review employment issues such as staffing of disabled veterans seeking employment, shared employer development, best practices in placement, and troubleshooting to improve local activities.
- Develop a State Plan for DVOPS to include specific and measurable goals that foster active involvement by the DVOPS in the placement of veterans with disabilities. The DOL Employment and Training Administration Advisory System issued common measures policy in its Training and Employment Guidance Letter 15-03, on December 19, 2003.¹ This guidance should be made available to every VR&E Office.
- The Assistant Secretary for Veterans Employment and Training and the Director of VR&E should develop and implement a joint training program to assure the maximum utilization of the DVOP’s skills in labor market information and other areas that assist the disabled veteran find employment consistent with the goals of the training program.
- The DVOP should also be instrumental in providing employment assistance/services to the disabled veteran who wants immediate employment services or return to work with a previous employer rather than pursuing a more formal training or education program.

The VR&E Service should also consider establishing partnership relationships with other agencies as identified in the above recommendation. One of the key agencies is the state employment office. The VR&E Service should work with directors of state employment offices to negotiate unrestricted access by the VR&E Division employment staff to the state’s America’s Workforce System

database that provides comprehensive information on all listed job vacancies as well as the ability to “direct-refer” qualified and pre-screened disabled veterans. A large number of employers post their job vacancies with state employment offices using this system.

ORGANIZATION RECOMMENDATIONS

O-1 Accountability

Organizational Accountability

- Provide the VR&E Service Director greater line-of-sight authority over VR&E field staff and operations, resources and personnel evaluation, selection, assignment, and promotion. (Near-Term to Long-Term)
- Establish clear lines of responsibility and authority within the VR&E Service for administration of the program and delivery of services. (Near to Long-Term)
- Set formal performance goals for VR&E Officers, VR&E staff, Regional Office Directors, and Service Center Managers and hold these individuals accountable for performance. (Near-Term to Long-Term)
- Implement a systematic project integration and change management process. (Near-Term to Long-Term)

Program and Fiscal Accountability

- Expedite the transfer of voucher processing to RO Finance Offices; provide additional FTE as necessary to support this transition and workload. (Near-Term)
- Develop an integrated protocol for seamless management by VR&E and the CFO of voucher audit operations and establish performance standards to ensure timeliness of payments and purchases. (Near-Term)
- Implement a process and system for tracking and documenting the purchase of individual and cumulative Chapter 31 services and products purchased by RO staff for each veteran; put in place processes for analysis and executive oversight and review of nationwide data, trends in purchasing, and appropriateness of these purchases to the mission. Routinely provide visibility of this data and information to CO and field staff, RO Directors, and the VBA CFO. (Near-Term to Mid-Term)
- Enforce a nationwide protocol for threshold approval (level of funds and type of purchases) of single and cumulative services and products procured by VR&E staff, VR&E Officers, and RO Directors. Develop this protocol in coordination with the CFO and Office of Field Operations to ensure that all aspects of fiscal control and program integrity are addressed. Provide RO Directors the authority to establish more restrictive fiscal controls based on local circumstances. (Near-Term)
- Enhance the functionality of CWINRS on a priority basis to address CFO requirements for internal control and financial management. Enhance the functionality of CWINRS for management and oversight of all discretely-procured contractor services and products by veteran, counselor and type of goods or services; establish cumulative expenditure thresholds for purchase of goods and services and establish a second level of pre-approval tied to these thresholds. (Near-Term to Mid-Term)

DISCUSSION – ACCOUNTABILITY

Organizational Accountability

Accountability for administration of the program and implementation of VR&E projects has been diffused throughout the VR&E Service central office and field organization. The Under Secretary for Benefits has already taken actions to begin to strengthen the leadership and management of the VR&E Service. VBA should also consider providing the VR&E Service Director with some line-of-sight authority for field administration of the program. As discussed previously in this report, the VR&E Program is fundamentally different from all the other VBA lines of business. As a result, there is limited knowledge of the VR&E domain within VBA's line organization and within the Office of Field Operations. This line-of-sight authority may well be essential to achieving nationwide consistency in administration of the program.

Task Force interviews with current and former VR&E Service central office staff highlighted deficiencies in internal management of the organization. One of the primary reasons for this situation appears to be that clear roles and responsibilities had not been established for functions and individuals as well as establishment of a system of accountability.

“ ... the VR&E Program is fundamentally different from all the other VBA lines of business.”

Prior to the convening of the Task Force the Under Secretary for Benefits had also taken action to emphasize Regional Office Director accountability for VR&E Division performance. The Task Force suggests that VBA consider formalizing this emphasis and also establishing some measure of accountability for the role of the Service Center Manager in providing timely “Memo Ratings.”

The Task Force observed some of the same problems in the VR&E Service's project, integration, and change management processes that were observed by the VA Claims Processing Task Force in its assessment of C&P Service's processes. The variability in how changes are planned and implemented within the central office and across VR&E Division offices as well as the acceptance of such variability by VR&E Service leadership in the past may be part of the cause for the significant inconsistency in administration of the program. There also does not appear to be a systematic project planning and management process in place as well as mechanisms to integrate the multiplicity of actions that have been started within the VR&E Service central office. The Task Force encourages the VR&E Service to implement a formal project, integration, and change management process.

Program and Fiscal Accountability

The Task Force's review of VR&E's internal management processes identified several crosscutting issues associated with the decision process for purchasing goods and services, the administration of these payment transactions, and the payment and fiscal accountability processes associated with the program. These issues impact information technology functionality in CWINRS, policy, and procedures in the CFO and VR&E organizations, and the organizational capacity of the organization to perform a range of analysis activities.

Internal Controls

In 1996, the VR&E organization assumed responsibility for the Chapter 31 voucher audit function from the Regional Office Finance Office. Based on discussions with RO Directors and CFO staff, it appears that this function was not completely transferred to VR&E in all ROs. In March 2003, the VBA CFO identified the VR&E voucher audit as a high-risk function for VBA and actions are now underway to transfer this function back to the Finance Office organizations in the Regional Offices. The Task Force supports the initiative to assign this function to RO Finance Offices as part of the CFO's efforts to strengthen internal control capabilities for the VR&E program. In implementing this transfer, VBA should consider three factors.

- The CFO has identified the need for over 50 functional enhancements to CWINRS to satisfy requirements for VR&E internal control and improve financial oversight. Based on discussions with the CFO and VR&E staffs, it appears that not all of the CFO's critical functional requirements for CWINRS were incorporated in the design of V1.0 of CWINRS. These priority enhancements are not funded. (See Recommendations on Information Technology.)
- Part of the reason for transferring the voucher audit function to VR&E was to reduce payment time and the number of handoffs. To ensure this transfer does not add delays to the current process, the VR&E Service and the CFO should consider developing an integrated set of protocols to facilitate a smooth integrated workflow process for this critical function. Appropriate performance standards should also be established for the voucher audit to focus management attention on the timeliness and accuracy of this function.
- Potentially, this transfer will require additional Finance FTE. Based on discussions with CFO and VR&E CO staff, there is limited information describing how the FTE issue was addressed in 1996 when the function was transferred to VR&E. The question of FTE requirements for Finance and for VR&E to support financial management tasks should be addressed on a priority basis before this transfer is implemented.

Approval Thresholds for VR&E Purchases

The VR&E Service has established cumulative *calendar year* dollar thresholds for Chapter 31 program expenditures to a single Chapter 31 participant for purchases of services and products. Based on Task Force discussions with Regional Office Directors, VR&E Officers and other staff, there appear to be concerns about these thresholds.

- There are concerns that the \$25,000 threshold exceeds the current threshold review level that exists in the only other business line function that resides in all Regional Offices, the Compensation and Pension Program. In the C&P business line, any retroactive payment over \$25,000 must be referred to the RO Director for review and a fourth signature. The VR&E threshold levels address cumulative calendar year payments to a particular veteran, but do not address retroactive award payments.

This difference in threshold levels and review requirements may be one of the reasons why there appears to be confusion in the field concerning the specifics of these VR&E threshold levels.

- CWINRS does not provide report-out functionality to determine the total dollar amount of awards or payments made on behalf of a particular veteran. Presently, the invoice cost of a contracted service or purchased item is entered into CWINRS. Currently, VR&E payments are made through three systems – BDN, FMS, and by Credit Card. If credit card purchases are not entered into CWINRS, then individual veteran’s case expenditures will be erroneous. There needs to be a “single” payment system that enables tracking and reports to be made on expenditures. However, CWINRS does not provide an audit against the total cost entered. Actual expenditures for a specific program of service for a veteran can go well beyond the initial cost entered into the system without any management alerts, notification, or reviews that some threshold limit has been reached. Electronic and program functionality should be incorporated into CWINRS to require approval before an award or a payment is processed.

Program Control

Since activation of the CWINRS software application in 2001, the VR&E staff has processed over 1,000,000 invoices for payment. Each invoice (payment invoice) includes the purchase of one or more vocational rehabilitation or counseling services (contracted counseling, testing, employment placement) or products (computers, tuition, books, etc). These 1,000,000 voucher transactions may represent several million individual purchase transactions.

VR&E has not established effective program control policies and procedures to document and analyze the number and type of services or products that are included in each invoice that is processed for payment. For example, VR&E does not know how many of a particular item or service (such as computers) have been procured for Chapter 31 beneficiaries. As previously discussed, the auditing of VR&E purchases of services and products amounts to ensuring that the total dollar amounts appearing on invoices are correct, not whether or not the services or items purchased are appropriate. Even though invoice level data to include the number and dollar value of payments is available on a case-by-case basis, the VR&E CO staff does not even routinely analyze this information to indicate procurement trends or assess the appropriateness of what is being procured. This information could potentially provide VR&E management with data to improve the quality of the program, training strategies, set policies and/or justify funding and legislative requirements. Further, there is limited data to characterize the labor effort associated with the processing of these transactions and the discrete actions necessary to plan and execute the purchase of individual services and products.

Additionally, CWINRS does not have the functionality to provide visibility and management of all discretely procured contractor services and products by veteran, counselor, and type of good or service. (See Recommendations

on Information Technology.) Functionality should be added to CWINRS on a priority basis to provide for tracking and analysis of discretely purchased services and products.

Until such time that this system capability does exist, VR&E should develop a standard work-around capability to document the specific purchase of services and products and provide on-going analysis of this data at the local and national levels. VBA may also want to consider initiating a contracted effort to analyze the historical payment and invoice transactions that are in CWINRS to establish a baseline of what has been procured to date. Such an effort would be a major administrative task, but unless this data is mined from existing invoices VR&E will have limited visibility of what has been procured and how to use this information to develop additional program control guidance on purchasing.

O-2 Central Office Organization and Facilities

- Implement a new organizational structure for the VR&E CO organized under four Assistant Director positions – Counseling and Outreach Programs, Employment Programs, Rehabilitation Programs, Field Operations. (Near-Term; Priority)
- Create an Assistant for Program Integration position reporting to the Deputy Director. (Near-Term; Priority)
- Enhance current CO capacities for: (Near-Term; Priority)
 - o Management and Operational Analyses; Employment Services
 - o Staff Training and Professional Education; Contract Management
 - o Policy and Procedures; Quality Assurance
 - o Finance and Resource Management; Information Technology
 - o Administration of the Chapter 36 Program
 - o Data and program coordination with DoD, DOL, and other federal agencies involved with veterans small business and employment programs
- Create new Central Office capacities for: (Near-Term Planning; Mid-Term Implementation)
 - o Assistive Technology
 - o Veteran Rehabilitation and Employment Research, Development, and Planning
 - o Program Analysis and Evaluation; Project Management
 - o Field Operations; Disabled Transition Assistance Program (DTAP)
- Provide additional facilities for VR&E CO to improve productivity of current staff and for new staff. (Near-Term; Priority)

DISCUSSION – CENTRAL OFFICE RECOMMENDATIONS

The key and pacing milestones to achieving successful vocational rehabilitation for veterans is to create a VR&E Central Office organization with capacities to develop and execute counseling, employment, and rehabilitation policies and programs for the 21st Century. To a large extent, the VR&E Service does not have the capacities and staffing essential for success. VBA should immediately take

action to enhance the capacities of the VR&E CO as the pacing action for other changes. The capacities of the VR&E Service CO should be increased first to improve the successful implementation of the recommendations proposed by the Task Force.

Central Office Organization and Structure

In proposing a recommended organizational structure for the VR&E CO, the Task Force wanted to provide a structure that would facilitate direct line-of-sight responsibility and accountability for the key policy and program areas that comprise VR&E services. The key features of this structure include:

- Providing a highly visible focus on employment inside and outside VA to emphasize the singular importance of this mission.
- Aligning resources around VR&E's core functions.
- Returning VR&E to one of its roots – counseling – and providing visibility and structure to the Chapter 36 program.
- Recognizing the specialized nature of the various elements of the rehabilitation mission from research to the use of 21st Century technologies.
- Emphasizing Field Operations and the importance of efficient and effective use of VR&E's workforce at out-based locations. The Field Operations focus will also more closely align VR&E with VBA's other lines of business and provide for improved communications and coordination with the Office of Field Operations.
- Integrating the various support services that facilitate VR&E's core mission is essential for timely planning and successful execution of projects and initiatives to implement policies and programs. This approach will also enhance VR&E's ability to better communicate and advocate in VBA's resource allocation process.
- Partnering with VHA to further the goal of *One VA* and a continuum of care for veterans with service-related disabilities. (See Chapter 5.)

The CO organizational structure depicted in Exhibit 21 includes four assistant director positions. We recognize that this is a heavy structure. However, we believe that for the near-term this focus and specialization is essential to effectively control and manage the organization. At some point in the future VBA may want to consider a structure with three assistant directors.

The Task Force considered the advantages of out-basing CO functions. We believe such an approach, in the near-term, would be counter productive to achieving the level of discipline, integration and focus that is needed to effectively plan and manage change and operations. However, we believe that the effectiveness of the QA function would benefit from out-basing. VR&E CO should consider consolidating its QA staff at the same physical location as the C&P Star Team to improve coordination between C&P and VR&E. This approach would leverage C&P QA lessons learned and QA data capabilities to support VR&E's efforts to reinvigorate its QA program. Since the C&P and VR&E

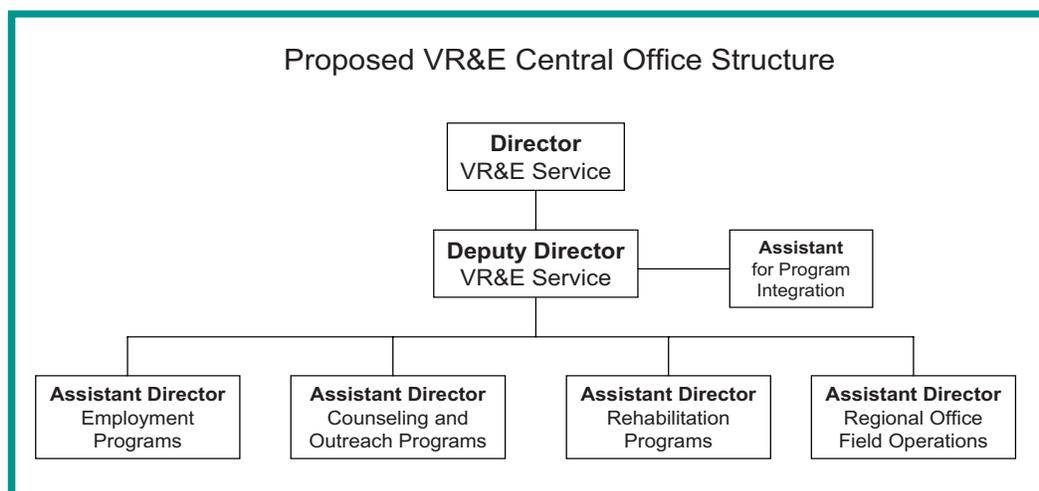


Exhibit 21

business lines are the only service delivery programs that exist at all ROs, we believe such collocation would provide synergy benefiting both programs.

Enhancing Current Organizational Capacities. VR&E CO must also enhance current organizational capacities and invest in the creation of new CO capacities to operate effectively in the 21st Century. Creation of these capacities will require further design changes to the organization, additional staff, resources, and facility improvements.

As previously discussed, VR&E's internal capacities for management and other functions were eroded over the last 10 years. Other existing capacities have been constrained to the point that they are not sufficient to keep pace with demands. This is clearly the case with information technology, finance, contracting, and analysis capacities. For example, there is only one person remaining in VR&E who has the VR&E institutional memory on the logic and business rules for the DOOR and COIN TAR reporting system, work measurement, and other key data and performance systems. VR&E must enhance these key capacities:

- Management and Operational Analyses
- Employment Services
- Staff Training and Professional Education
- Contract Management
- Policy and Procedures
- Finance and Resource Management
- Information Technology
- Quality Assurance
- Chapter 36 Program Administration
- Data and program coordination with DoD, DOL and other federal agencies involved with veterans small business and employment programs

Adding New Organizational Capacities. VR&E's organizational capacities have not evolved to add the functions necessary to make it a 21st Century rehabilitation organization. VR&E must add new capacities to include:

- Assistive Technology
- Veteran Rehabilitation Research, Development, and Planning
- Veteran Employment Research and Program Development
- Program Analysis and Evaluation
- Project Management
- Field Operations
- Disabled Transition Assistance Program (DTAP)
- Functional Capacity Evaluation
- Coordination with State Departments of Vocational Rehabilitation and State Departments of Veterans Affairs

Facilities

The current space allocated to VR&E CO is inadequate to sustain efficient and effective management operations of current staff and to facilitate group activities. The current space allocation will also not accommodate recommended staff increases and new staff capacities. Further, VR&E CO needs more dedicated and technology-equipped conference room capabilities and space to incorporate an assistive technology laboratory and a future employment center lab.

O-3 Central Office Staffing

- Increase the current direct staffing level of the VR&E Central Office staff from 33 to a goal of about 55-60 to more appropriately reflect the level of resources needed to execute the mission of the VR&E Service and support new and required capacities. (Near-Term and Mid-Term)
- Relocate the VR&E Central Office positions that were out-based at the Regional Offices back to Central Office to improve staff effectiveness. Consider consolidating the VR&E Quality Review Team at the C&P Star Team location. (Near-Term and Mid-Term)
- Provide contractor support services for VR&E CO. Contractor support services should be prioritized for management support; operational, process, and requirements analysis; project management and integration. (Near-Term; Priority)

DISCUSSION – CENTRAL OFFICE STAFFING

The current level of CO staffing allocated to VR&E (33) is inadequate to successfully execute the current mission. Additional staffing is required to enhance current organizational capacities and support the new capacities that must be added into the CO organization for it to be successful. The Task Force believes that the current level of 33 should be increased to a goal of about 55-60 excluding potential additions to enhance VR&E's Quality Review staff. (See Recommendation on Performance Measures and Quality Reviews.) The current VR&E CO FTE includes the Director, Deputy Director, and administrative support positions. It is clear from the Task Force's assessment of CO business operations that the current staff has not been as effective and productive as it could have been. Recent leadership changes in the VR&E CO will certainly improve this situation. However, productivity improvements are not expected to offset the need for additional CO staffing.

In assessing CO staffing needs, the Task Force conducted interviews with present and former CO staff members and considered the scope and volume of work. We also considered the allocation of FTE to other Washington DC. based VBA CO organizations and the unique aspects of the VR&E mission and service delivery network. For this assessment we used data from a September 30, 2003 COIN PAI P-38 Report that identifies the total number of VA employees. We used data from this report to compare the number of VR&E CO staff to that of the Education Service and Loan Guaranty Service. We selected these two program services for comparison purposes since they have about the same number of FTE and they also have a field structure. The relevant data from this report appears in Exhibit 22 and is based on the number of total employees.

Both Education and Loan Guaranty administer programs based on sets of objective rules. Face-to-face interaction with the veteran is not required to process these benefit applications. The nature of the Education and Loan Guaranty business lines and service delivery has allowed VBA to consolidate benefit processing and achieve reductions in FTE.

Additional staffing needs to be added now so the VR&E Service organization will have the resources to make the fundamental changes necessary to implement

VBA Business Line Staffing Levels			
	Central Office Staffing Levels	Field Staffing Levels	Processing and Service Delivery Structure
Education	49	656	4 Education Processing Centers, staff presence at most ROs
Loan Guaranty	94	838	9 Regional Loan Centers, 2 Eligibility Centers, staff presence at most ROs
VR&E	33	887	Processing and delivery of Chapter 31 services at 56 Regional Offices and 138 out-based sites

Exhibit 22

these recommendations and create the capacities required to be a successful organization. Clearly, new leadership and management actions can improve the productivity and effectiveness of the current staff. However, these gains will not offset the need for additional staff resources.

We suggest VBA provide VR&E 10 new positions as soon as possible and an additional 15-20 within 6-12 months. There is a critical, high priority need to provide new positions to revitalize management and operations analysis and support finance and contract management, training, process, and information technology requirements analysis. We also suggest that VBA provide priority funding for VR&E CO to procure contractor support services to bridge the gap with resources.

O-4 Workforce Management

- Reevaluate and update the March 2003 VR&E Workforce and Succession Plan with concrete actions and milestones to mitigate the risks cited in the plan. (Mid-Term)
- Develop and implement workforce productivity and staffing analyses to develop a set of analytical tools for estimating future workload, tasks, and labor hour requirements, staff sizing, and skill mix. (Mid-Term to Long-Term) (See Recommendation on Program Analysis and Evaluation.)

- Create Assistant VR&E Officer positions and a systematic and centrally-managed selection and training program for personnel to fill these positions. (Near-Term)
- Remove the freeze on hiring to fill all VR&E positions; change VBA policies so as not to constrain hiring for VR&E positions to local RO FTE ceilings. (Near-Term; Priority)
- Provide VR&E with additional and temporary FTE positions to facilitate early hiring and training to mitigate the service impacts of anticipated personnel attrition. (Near-Term and Mid-Term)
- Create new staff positions and add staff for an Employment Readiness Specialist (56 FTE) and a Marketing and Placement Specialist (56 FTE) to facilitate implementation of the five-track employment-driven service delivery system. (Near-Term to Long-Term) (See System in Chapter 4 and Job Descriptions in Appendix 12.)
- Transfer the 45 FTE Employment Specialist positions back to counseling positions. (Near-Term to Long-Term.)
- Create a new Independent Living Specialist position. (Near-Term to Long-Term) (See Job Description in Appendix 12.)
- Increase current field staffing levels to provide dedicated FTE to plan and implement VA's responsibilities in DTAP and execute a consistent, national DTAP program at all DoD installations and Military Treatment Facilities. (Mid-Term)
- Create and staff a new VR&E position at the RO for a contract/purchasing specialist and implement a training program for these staff in coordination with the VBA CFO and contract management staff. (Mid-Term) (See Recommendation on Workforce Management.)
- Relocate the VR&E Central Office staff that was out-based at the Regional Offices back to Central Office to improve staff effectiveness. (Near and Mid-Term) (See Recommendation on CO Staffing.)
- Consolidate the VR&E CO Quality Assurance (QA) staff and increase the size of the QA staff. (Near-Term) (See Recommendation on Performance Measures and Quality Review.)

DISCUSSION – WORKFORCE MANAGEMENT

The Task Force reviewed VBA's Workforce and Succession Plan (March 2003) and interviewed CO and field staff to identify the major issues of concern and how these concerns are being addressed. We also reviewed the VR&E Resource Allocation Model used by the Office of Field Operations (OFO) to distribute FTE. VR&E CO was also responsive in providing additional information on the VR&E workforce for our assessment.

In October 2003, the VR&E field workforce of 903 was composed of 601 professional staff, 220 technical support staff and 82 management support staff. The primary focus of VR&E's March 2003 Workforce and Succession Plan was on the new professional staff position of Veterans Rehabilitation Counselor (VRC). VR&E CO created this new position by consolidating two professional positions,

Counseling Psychologists (CP) and Vocational Rehabilitation specialists (VRS). CP and VSR position reductions are being accomplished through attrition. VR&E CO estimates that 84 percent of CPs and 66 percent of VSRs will be retirement eligible and will be retire within the next five years.

VR&E CO Management of the Workforce

“ The Task Force believes that the VR&E CO should take an active role in the management of the VR&E workforce.”

The Task Force believes that the VR&E CO should take an active role in the management of the VR&E workforce. We recommend that VBA and VR&E CO take several actions to improve VR&E CO’s capacity to effectively manage the workforce:

- Provide greater policy and resource control of VR&E’s FTE to the VR&E Service Director. VR&E

service delivery is fundamentally different than claims processing. The expertise to align FTE resources with the VR&E service delivery strategy resides in the VR&E CO. There should be a shared responsibility for FTE management between the Office of Field Operations and the VR&E CO.

- Reevaluate and update the March 2003 Workforce and Succession plan with concrete actions and milestones to mitigate the risk factors impacting the workforce.
- Conduct a workforce productivity and staffing analysis. This effort should deliver a new work measurement baseline and analytical model for relating workforce size and composition to caseloads and performance (process outputs and outcomes). (See Recommendation on Program Analysis and Evaluation.) This effort should also include development of a set of analytical tools for estimating future VR&E workload and workload drivers, task and labor hour requirements, staff sizing, and skill mix. We suggest that VR&E CO consult with the Department of Veterans Affairs Program Evaluation Service to formulate and carry out this long-term analysis activity. We also recommend that VR&E CO solicit the active participation of VBA’s Orlando Training and Analysis Group in this effort.
- VR&E CO should create one or more Assistant VR&E Officer positions at the RO’s (based on VR&E Division size) as a means to provide continuity and leadership for the VR&E program. VR&E CO should centrally manage the selection, training, and placement of Assistant VR&E Officers and VR&E Officers to achieve the best fit of capabilities to manage the VR&E service delivery system. This effort should include developing career broadening opportunities for those selected for these positions with C&P and VBA’s other business lines.

New FTE Positions

The Task Force made an estimate of the number of new FTE positions that VBA should consider adding to the VR&E workforce. The reasons for these increases are discussed in other sections of the report. We believe that these estimates may be reduced based on an actual Region by Region assessment of how the Task Force recommendations will be implemented. These estimates do not include

transferring 47 FTE Employment Specialist staff positions back to professional counseling positions. This recommendation does not require new FTE positions, and is discussed in Chapter 4. The Task Force strongly believes that these reclassified positions should remain in the VR&E field division structure.

In the area of Independent Living, the Task Force recommends creating specialized Independent Living positions, but has made no specific recommendations regarding the number of new FTE positions. The Task Force believes that the administration of the IL program requires specialized knowledge and skills in both the VR&E CO and in the Regional Offices, but believes that the specific number of new positions will be based on individual RO assessments. This recommendation is discussed further in Chapter 4.

The new FTE positions are:

VR&E Central Office Staff:	27
Employment Staff: (56 Employment Readiness Specialists; 56 Marketing/Placement Specialists)	112
VR&E Contracting/Purchasing Staff: (Actual number to be based on RO workload demands)	56
Quality Assurance Staff:	8
Total:	228

Current VR&E FTE Hiring Freeze

As of the start of this Task Force, VR&E's field operations were being impacted by an earlier VBA decision to freeze hiring to fill VR&E staff positions. The Task Force understands this decision was made to deal with priority staffing issues in RO Veteran Service Centers so that VBA could remain within FTE ceiling constraints. However, this freeze came at a time in FY 2002 (and continues) when ROs were provided the flexibility to convert Readjustment Benefit funding from contractor support to buying new VR&E FTE. The theory was that funding to sustain these new Readjustment Benefit financed positions would come in the future from VBA's General Operating Expense budget. Some ROs were able to convert these funds to buy FTE before the freeze was imposed while others were not able to complete the hiring process.

As discussed later, the Task Force was unable to obtain data from VR&E CO on how many FTE positions are impacted by the freeze and how many total FTE positions were created through use of the Readjustment Benefit financing approach. However, based on our field visits we believe that the number of positions impacted by the freeze is having significant impact on selected ROs. Given the size of the VR&E workforce and the number of out-based service

delivery sites, such a freeze that impacts a small number of positions may have large service delivery impacts.

The Task Force recommends that VBA consider two actions to address this problem. First, VR&E CO, in coordination with VBA's Office of Field Operations, should determine the number of VR&E FTE positions being impacted by this freeze and the ROs where this freeze is having the most impact on service delivery. Secondly, VBA should provide policy and funding guidance to allow these VR&E positions to be filled on a priority basis and sustained.

Workforce Size and Composition

As described earlier, the VR&E Service is in the midst of consolidating two staff positions that account for 67 percent of the VR&E field staff. This change will essentially replace a workforce composed of a mix of Counseling Psychologists (CP) with master's degrees and above and Vocational Rehabilitation Specialists (VRS) with undergraduate degrees and above. The new position, Vocational Rehabilitation Counselor (VBC), requires a minimum of a master's degree and experience in specialized areas. The VR&E field staff also includes some technical support and management/administrative staff.

Workforce Size

Based on our observations noted in this report, VR&E should be able to realize some field staff productivity improvements through better training, standardization, specialization, and improved management of the contracted workforce to deal with the increase in the number of Chapter 31 applicants. However, these productivity gains will not eliminate the need for additional VR&E field staff. The new five-track employment-driven service delivery system will also impact the current workforce. The Task Force recommends VBA consider several actions to deal with near-term and long-term VR&E workforce issues.

- Provide dedicated field FTE (or contract funding) positions to support a redesigned and centrally managed DTAP program. Currently, there are no dedicated VBA FTE positions allocated to the planning, execution, and management of this program. We make no specific recommendation on the size of this DTAP staff, but rather the size and mix of the staff should be based on the scope, content, and operational service delivery strategy for a redesigned DTAP program. FTE positions for VR&E CO management of the DTAP program are included in Recommendations on CO Organization and Staffing.
- Provide a pool of temporary FTE positions to facilitate early hiring and training of replacement VR&E staff in advance of attrition. Currently there is no overall strategy and master plan for how and when new VR&E staff will be acquired and trained. VBA's experience in dealing with the critical C&P workforce management issues clearly demonstrated the benefit of a comprehensive top down strategy and plan for hiring and training to mitigate the impacts of workforce attrition.

- Add 112 field FTE positions to VR&E to implement the recommended five-track employment-driven service delivery system. As discussed below, this includes 56 Marketing and Placement Specialist positions and 56 Employment Readiness Specialist positions. The Task Force based this preliminary estimate of new FTE positions on allocating two new positions to each of the 56 RO stations that have a reportable VR&E workload. This estimate will change as VR&E CO considers the myriad of factors that will lead to designing different service delivery field structures to implement the five-track process and the results of recommended pilot initiatives. These factors and associated service delivery options are discussed in Chapter 4.

“ Add 112 field FTE positions to VR&E to implement the recommended five-track employment-driven service delivery system.”

- Transfer VR&E’s 47 FTE Employment Specialist staff positions back to counseling positions; implement and integrate this change consistent with the strategy for acquisition of the 112 FTE new employment staff positions. At the time VR&E CO implemented its employment strategy, 47 professional FTE counseling staff positions were transferred to Employment Specialist staff positions. This resource allocation decision reduced the productivity of the VR&E professional labor force at a time when VR&E’s caseload was in excess of 200 per counselor and the number of Chapter 31 applicants was increasing.

Workforce Composition

There are five workforce composition issues that merit discussion:

- Consolidation of two positions to create the VRC position
- Additional support staff requirements
- Creation of two new employment staff positions
- Independent Living, and
- Potential needs for other specialized professional staff.

VRC Position

Preliminary analysis of the VRC position by the VBA Training Analysis Group indicates the VRC position may now be responsible for 42 percent more tasks than either the CP or VRS positions. Our field interviews highlighted concerns about the assumptions used to make the decision to implement the case management concept. There were also concerns expressed in the field, as well as within the Task Force, that the VRC position description was written so narrowly in terms of academic and experience requirements that it may impact the organization’s capacity to hire new staff.

The Task Force encourages VR&E CO to take a fresh look at the assumptions driving the decision to consolidate these two positions. It is not clear to the Task Force that case management (one counselor managing all process activities for a veteran) is always an efficient and effective use of resources. This conclusion

is supported by comments from field staff and our direct observations of the dynamics of managing current high caseloads. This issue is discussed in more detailed in Recommendations on Process.

Technical Support Staff

The VR&E process seems to be more dependent on technical support staff than may be recognized. The internal VR&E RO process has become more complex over time and the current level and mix of support staff may not be adequate. This same observation was made about the C&P process in earlier studies and reports. Currently, the data is not there to justify increases in the size and composition of the support staff workforce. However, it is clear that the process generates a large volume of procurement purchases, invoices, payment vouchers, and contractor reports. The introduction of CWINRS created new requirements for data entry, report generation and analysis.

The Task Force encourages VR&E CO to analyze the utilization of the support staff and the workload drivers that are impacting this workforce. There may be opportunities to improve productivity of the support staff through work process changes, standardization, and training. The need for additional support staff should be evaluated as part of the overall workforce analysis effort recommended by the Task Force.

Employment Staff

The third area of concern relates to the skill set requirements for the new positions – Employment Readiness Specialist and Marketing and Placement Specialist – to support the redesigned five-track employment process proposed by the Task Force.

In the *VR&E Employment Specialist Pilot Initiative Report*, VR&E CO identified an array of qualifications and experience for the employment specialist position currently in the field. These criteria included what the Task Force concurs are characteristics commonly seen in the staff of successful private sector employment search and placement organizations. While VR&E CO stated these as qualification requirements, these requirements were not uniformly implemented by all the ROs that created employment specialist positions. ROs filled 14 employment specialist positions with Vocational Rehabilitation Specialists. This may explain some of the significant variations observed in the field concerning the role and function of the employment specialist.

The VR&E Service must take the initiative to implement a standardized set of qualifications for these two new employment positions and guide the hiring process. The knowledge, skills and abilities required to execute the VR&E employment program are fundamentally different from those of counselors and some individuals now filling employment specialists positions.

To facilitate this process, the Task Force created a draft set of qualifications (knowledge, skills and abilities) and requirements (work experience) for these two positions. This information appears in Appendix 12 to the report and can be used to create VBA position descriptions. Task Force members with extensive

experience in the range of public sector and private employment activities developed these qualifications and requirements descriptions.

Independent Living (IL)

The management of IL cases should be centralized under a new IL specialist position. A set of suggested qualifications and requirements for this position is included in Appendix 12. These qualifications are based on the view that the provision of IL services may be more effectively provided by a specialist with a social work background, preferably someone from the IL community.

This report does not make a recommendation to increase the size of the VR&E field staff to support this new position. The volume of IL cases (3 percent of the national VR&E workload) suggests that retraining selected VR&E staff, hiring new personnel based on attrition, use of specialized contractors and IL Centers may adequately address this need for now. The VR&E Service may also want to consider regional based IL specialist service delivery strategies to support large geographical areas that have multiple ROs with small IL caseloads. The question of additional IL staffing should be revisited based on the results of an IL demand study.

Other Specialized Staff

It is likely that the redesign of the VR&E employment-driven service delivery system, introduction of Functional Capacity Evaluation (FCE) and other changes to configure and align VR&E to be effective in the 21st Century will create the need to add to the mix of skill sets in the VR&E Service. For example, the introduction of FCE into the process may generate requirements for clinical and technical skills. There may also be a need to add new skills to facilitate services to the growing number of PTSD veterans seeking service. VR&E must be positioned to take advantage of the rapid advance of assistive technologies to facilitate job accommodations particularly in the knowledge-based economy. The Task Force encourages VR&E CO to think outside the boundaries of the current counseling paradigm in conducting the workforce analysis recommended by the Task Force to ensure that all skill set needs are considered.

WORK PROCESS RECOMMENDATIONS

WP-1 Workload Management

- Implement a VR&E Service CO process for visibility and management of the national VR&E workload to include an inventory management system and setting of consistent, nationwide priorities, and strategies for workload management. (Near-Term to Mid-Term)
- Streamline and standardize the scope and content for counselor case file documentation to include the use of the Needs Assessment Inventory. (Near-Term to Mid-Term)
- Provide for electronic transcription capabilities to facilitate more efficient use of available counselor resources through voice activated software and/or the use of transcription services. (Near-Term)
- Develop national and local RO forecasts of Chapter 31 veterans exiting rehabilitation and entering job ready status in FY 2004 (and beyond as necessary) and develop interim strategies and plans to more effectively

manage this population of veterans until the Five-Track Employment Model is fully implemented. (Near-Term)

- Initiate a VR&E Service CO led nationwide project using contractors to follow-up with Chapter 31 veterans in interrupted or discontinued status and for tracking of veteran employment status. (Near-Term to Mid-Term)

DISCUSSION – WORKLOAD MANAGEMENT

Based on Task Force members' interviews with VR&E Service CO staff and field visits, it is clear that the VR&E Service CO has not been on top of the growing VR&E workload problem. As previously discussed in this report, the symptoms of a process under great stress are evident: significant increases in the number of Chapter 31 applicants and participants, high interrupted and discontinued rates, and uneven distribution of counselor case loads. Task Force fact-finding activities did not identify activities at the CO and in the field that are similar to inventory and workload management processes that have been effective in managing the C&P and other VBA business line operations. In addition to the recommendations above and discussed below, this report also identifies other recommendations that will improve management of the workload.

National Workload Strategy

The Task Force believes that as a first step the VR&E Service CO should develop an orientation towards management of field operations. The proposed VR&E Service CO organization structure proposed in a previous recommendation includes an organizational element with responsibility and authority for VR&E field operations. This organizational focus must be implemented through the development of capabilities (policies, procedures, data collection, analysis, and tools) to provide visibility and management of the national VR&E workload. These tools should include capabilities for inventory management and setting of consistent, nationwide priorities, and strategies for workload management.

OFO and C&P Service have made significant strides in improving their capacities for workload management and implementing consistent, nationwide priorities. We suggest that the VR&E Service CO enlist the aid of the OFO and the C&P Service to develop the capabilities necessary to implement a nationwide workload visibility and management system.

Streamline and Standardize Case Documentation

One of the most consistent field complaints to the Task Force concerned the hands-on labor intensive nature of the work process. There appear to be three areas of concern: the impact of the case management concept, CWINRS data entry requirements, and the need to standardize the paper work.

As discussed in a subsequent recommendation, the implementation of the case management concept made each counselor responsible for the life cycle of activities for individual veterans in the program. This may involve interacting with the veteran multiple times over many years. Given the requirements to document assessments, rehabilitation plans, changes, and subsequent evaluations the management of case documentation can become a major barrier to counselor efficiency. Our fact-finding efforts did not identify any analyses that were done concerning the impact of case management documentation

before implementation of the concept. It was not possible for the Task Force to make a judgment as to the appropriateness of the current way case information is documented. However, it seems reasonable to conclude based on our field observations and case load factors that the VR&E Service should determine the actual scope and content of what is meant by case documentation and then mandate a standard. The objective of this effort should be to streamline the scope and content of documentation required, not increase it.

“ We suggest that the VR&E Service CO enlist the aid of the OFO and the C&P Service to develop the capabilities necessary to implement a nationwide workload visibility and management system.”

Recommendations that appear later in this section of the report address a number of CWINRS issues.

In the context of case documentation, the introduction of CWINRS increased the amount of “touch labor” work required by the counselors. Task Force discussions with VR&E Service staff responsible for CWINRS did not indicate the “man-machine” interface in terms of usability was a primary consideration in the design of CWINRS. As discussed later, the Task Force found some deficiencies in the training that accompanied the introduction of CWINRS. This situation may have contributed to some of the frustration that exists in the field concerning the use of the system and our later recommendations will address the need for better training. In the meantime, the VR&E Service should begin an effort to carefully look at how counselors actually use CWINRS and how it is integrated into the process in terms of who (which VR&E specialist) actually does data entry operations. This information should be used to partition work to perhaps improve efficiency of operations and more properly align data entry to the most appropriate VR&E specialist.

Inconsistency is evident in the administration of the VR&E Program. This has also been evident in the variety of locally generated forms and documents used to administer the program. The Inventory Needs Assessment worksheet is an example of one of the problems contributing to inefficiency in the process. This worksheet was developed by the VR&E Service CO and provided to the field for implementation and use. The worksheet is an efficient method to rapidly collect data and information from the veteran to facilitate the initial interview process. Many field offices did not implement the use of the form. Some offices that do use it do not allow the veteran to fill out the form thus forcing the counselor to accomplish additional work which creates more frustration on the part of the counselor. To compound matters, there are no provisions to electronically capture the data on this worksheet for future use or incorporation into CWINRS. Implementation of an automated on-line worksheet would certainly speed the process. This example is presented to highlight the need for the VR&E Service to analyze the work it does in terms of its consequences and its overall integration into the process.

Use of Electronic Transcription Services

A near-term option to improve efficiency and reduce counselor word processing activities might include the use of voice activated software or the use of a transcription service. Task Force interviews indicated that both options had

been explored by staff in several local offices, but there had been no concerted VR&E wide effort to implement such a national capability. Transcription services have been widely used in the past within the VA community and the Task Force encourages the VR&E Service to consider both options at the earliest possible date.

Job Ready Status Workload

At the time of Task Force fact-finding visits to the field, there were approximately 54,000 veterans in a Chapter 31 plan of rehabilitation and ready for employment. During visits to the field, the Task Force found that local VR&E offices did not use available data to forecast the population of veterans exiting rehabilitation, their degree programs, colleges, and planned career field and then use this population data to develop employment strategies and plans. We also found that the VR&E Service CO did not look at such national data and trends. In no case could we find the use of such data. It makes little sense to the Task Force to place veterans in a long period of rehabilitation and then not forecast and look strategically at the alignment of the job market and the skills and expectations of those being rehabilitated.

The implementation of the Five-Track Employment Process and its associated principals will address this problem along with leadership and increased management attention. Such data should also be used as part of the VR&E Service and local RO strategic planning to ensure organizational priorities, resources, and programmatic guidance are properly targeted to optimize a veteran's employment goals. Until such time as the Five-Track Process is fully implemented, the VR&E Service must develop interim policies and procedures to provide top-level visibility and strategic management of this population.

Interrupted and Discontinued Cases

The large number of interrupted cases (11,497 as of August 31, 2003) presents significant challenges to the VR&E staff. As previously discussed, there has not been a concerted effort to research the interrupted and discontinued case problem and then to design and implement interventions to mitigate the risk of

“ The large number of interrupted cases (11,497 as of August 31, 2003) presents significant challenges to the VR&E staff.”

a veteran dropping out temporarily or permanently from the program. Unless the number of interrupted and discontinued cases can be reduced there may be an inherent ceiling on the success rate of the program. The Task Force recommends that the VR&E Service take two actions to deal with this problem.

- Initiate a funded project with the goal of researching the interrupted and discontinued case problem and then using this data and information to design interventions to mitigate the risks of veterans either temporarily or permanently dropping out of the program. These interventions should be formally tested and evaluated to determine their value and then those with high payoff should be implemented as best practices.
- Initiate a strategy to use trained contractors to routinely follow-up and provide case management services to those in interrupted and discontinued status. This concept might also be used to provide oversight and contact with those in school.

WP-2 Contract Services

- Continue to use contract services to supplement the VR&E workforce in providing counseling, employment, and rehabilitation services. (Near-Term to Long-Term)
- Revise the VBA Office of Field Operations resource allocation model to base RO funding for contract services on local estimates of the volume and types of services and the actual costs of services rather than the RO's percentage of the national workload. (Near-Term; Priority)
- Revise the current VR&E National Contract Statement of Work to provide definitions of the specific content of each service to be provided; standardize paper and electronic formats for submission of all contractor-developed evaluations, plans, case narratives, counseling or other requirements; establish a performance management and quality review process; and establish a VR&E contract service provider training and accreditation program. (Near-Term)
- Develop a contract management training program for all VR&E Officers, supervisors, CO staff, and those VR&E field staff with direct responsibility for contract administration and supervision of contract services. (Near-Term)
- Create and staff a new VR&E position at the RO for a contract/purchasing specialist and implement a training program for these staff in coordination with the VBA CFO and contract management staff. (Mid-Term)

DISCUSSION – CONTRACT SERVICES

VR&E uses an extensive network of local and national contractors to supplement its FTE workforce in delivering services to program applicants and recipients. This contractor network provides a range of services to include specialized testing and evaluations, Chapter 36 career and transition counseling, and employment services such as interviewing skills, resume development, job search, and job placement. This assessment and recommendations concerning contract services are based on a review of the rationale and acquisition strategy for the national contract program, the statement of work for this contract, contract proposals and pricing and discussions with contractors and VR&E staff.

Benefits of Contract Services Strategy

There is great variation across the ROs in terms of the use and management of contract services. There is also a view in some ROs that VR&E should reduce its dependence on contract services. The Task Force believes that the use of contract services is an essential element of VR&E's service delivery strategy and that this strategy should be continued. The Task Force believes that there are several key benefits of this contract services strategy. This strategy:

- Provides eligible veterans with community-based access to counseling and other services. Timely access is a key success factor in service delivery to veterans in remote and other areas not near ROs and for veterans who cannot easily visit the RO for such services. The use of contractors thus provides a key capability for outreach.

- Increases VR&E's workforce surge capacity to rapidly respond to workload increases and changes in the types of services required.
- Gives VR&E an "insurance policy" to mitigate the productivity impacts of workforce attrition due to forecasted retirements.
- Allows VR&E staff access to specialized services that would not normally be available in most ROs. It is not feasible and affordable to provide every VR&E office with FTE to provide every type of core and specialized services.
- Facilitates execution of mission areas such as DTAP and Independent Living that were not resourced with additional staff. VR&E has used contractors to supplement its workforce to execute new programs that have been added to its mission without an increase in staff.

The Task Force was impressed with the dedication and commitment of the contract counselors and specialists we interviewed. These contract counselors also expressed their desire to become more integrated into VR&E business operations and services. We believe that the problems associated with effectively using contract services relate to the VR&E CO's limited capacities to effectively plan and manage the National Acquisition Contract, the current basis for allocation of contract services funding to the ROs and the need to create organizational capacities and standards for improved contract management and supervision of contract service providers.

VR&E National Acquisition Contract

In FY 2001, the VR&E CO implemented a national contract strategy to qualify vendors to provide 17 different types of services that could be provided to the ROs. This pool of vendors includes independent contractors, small businesses and large regional, and national firms specializing in a range of rehabilitation and employment services. The objective of this strategy was to standardize the provision of services across all VR&E offices, supplement and complement existing VR&E FTE, and to achieve compliance with procurement requirements. Prior to this initiative, each RO developed their own statement of work for contract services and administered their own contracts.

There are several deficiencies in the implementation of this national contract strategy. The statement of work does not provide specific and detailed standards of performance for each contract service in terms of work content and documentation. The Task Force heard at several ROs that the provisions of the national contract were significantly less robust than the RO contracts that had been previously in place. Discussions with contractors also indicated that there were various interpretations about the work content of each contract service. We also reviewed the proposed contract prices for services on the National Contract. The prices in the contract vary so greatly from contractor to contractor and by region as to be a concern. It did not appear that the VR&E Service CO staff had made any effort to reconcile these differences or modify the contract to ensure that the actual work content for a specific contract service was the same for all contractors. For example, VR&E CO does not collect and analyze data on the number of actual contract services performed by each contractor and for each Chapter 31 beneficiary.

The Task Force is also concerned that VR&E CO did not fully use the inherent capabilities and leverage that regional and national contractors could provide particularly regarding employment services. Regional and national contractors possess infrastructure capabilities in terms of management, technology, established networks of professional staff, institutional quality, and performance measurement systems. We believe that VR&E CO should consider using these capabilities to achieve a more systematic process and outcomes.

The VR&E Service should consider several actions to improve the management and execution of the current National Acquisition Contract.

- Require standardized formats and media for all deliverable evaluations, assessments, test results, and records of counseling.
- Implement detailed performance standards for contracted services so that contractors know what is expected of them. This should include development of appropriate process and outcome performance measures for contract services. Specify best practices to standardize the scope and details of work for each service.
- Establish a mandatory accreditation and training program to ensure that all VR&E contract service providers nationwide have the knowledge and abilities to perform consistently to a set of best practices and performance standards for each contracted service. This should also include knowledge of veteran benefits, key regulations and policies, and the ability to provide information to enable referrals to appropriate VA resources.

To the veteran, the person who is providing them assistance is a “VA person.” How these providers perform in the eyes of the veteran is a critical element in determining the veteran’s perception of VA. The goal of VBA should be to train and manage the provider workforce in such a way that the providers are fully integrated into the VR&E process and their participation is seamless to the veteran and the process.

Capacities for Improved Management of Contract Services

Management of the range of contract activities (services and purchase of goods and products) has not been a strength of the VR&E CO. As discussed in the section of the report dealing with Financial and Program Controls, VR&E CO has not created the processes and performance measures necessary to effectively exercise oversight of the volume and complexity of contract activities. The issues associated with the National Acquisition Contract provide additional evidence of these capacity shortfalls. At the RO level, the volume and the complexity of VR&E contract services and associated financial transactions are part of the workload that is not readily visible and is not accounted for in reportable workload metrics. The decision to transfer the voucher audit function back to the RO Finance Division supports observations about the complexity and capacity issues associated with this workload.

The Task Force recommends that VBA and VR&E CO implement two recommendations to increase the capacity necessary to more effectively manage contract and associated procurement activities.

1) Develop an initial and follow-on contract management and contractor management training program for all VR&E Officers, supervisors, CO staff, and those VR&E field staff with direct responsibility for contract activities. Field interviews indicated that in the past some efforts had been made to provide some level of contracting officer technical representative (COTR) training. However, our impression is that this training was not comprehensive and field staff felt that they needed additional training opportunities and that this effort should be part of a continuous contract management training program.

2) Create and staff a new VR&E position at ROs for a contract/purchasing specialist at each RO and implement a training program for these staff in coordination with VBA CFO and contract management staff. The volume of procurement actions being initiated by VR&E counselors and processed through CWINRS requires trained, experienced, and dedicated staff to manage procurement actions and associated financial activities on the VR&E side of the process.

Today, these actions and activities are not standardized across VR&E offices. As the voucher audit function is transferred back to RO Finance Divisions, VR&E staff in coordination with the VBA CFO should examine the VR&E technical and process requirements for purchasing and associated activities to determine the knowledge, skill and ability requirements to perform this work. Dedicated FTE should be provided to support these critical activities. Clearly, not all ROs generate the volume of work to justify additional and dedicated FTE positions. As a result, the VR&E Service and OFO should work together to develop and implement regional approaches to improve the management of these activities.

During site visits to Regional Offices, the Task Force asked questions about different aspects of contract management and oversight. Subsequently, the Task Force requested the Office of the VA Inspector General to review the award and pricing of contracts for evaluation, case management, and employment services. The IG was asked to evaluate contract award and administration procedures, reasonableness of prices paid, and adequacy of internal controls. The Office of the Inspector General provided VBA leadership with an exit briefing in February 2004. Overall, the preliminary IG findings support the Task Force conclusions that VBA should give focus to improving contract management and oversight.

WP-3 Case Management and Specialization

- Change the current VR&E case management model to a model based on specialization of work processes and the workforce. (Mid-Term)
- Provide RO VR&E staffs maximum flexibility to specialize their staff resources. (Near-Term)

DISCUSSION – CASE MANAGEMENT AND SPECIALIZATION

In 1998, VR&E merged the work tasks of counseling psychologists and rehabilitation specialists into a new position called vocational rehabilitation counselor. In 2001, VR&E adopted a case management organizational and process model that assumed each vocational rehabilitation counselor could perform all the VR&E tasks necessary from beginning to end for a veteran. The life cycle of these tasks could extend over a two to four year calendar period of time or potentially cover five or more fiscal years.

Prior to implementation of this model, VR&E staff at each RO specialized in certain tasks. While there was some overlap of duties, the roles of the staff in these two positions were distinct. For example, counseling psychologists determined veteran eligibility and entitlement to benefits and performed the initial evaluations and assessments on veterans. Based on these evaluations and assessments, the counseling psychologists developed a rehabilitation plan tailored for each veteran. These plans were then passed to a vocational rehabilitation specialist to implement the plan and provide on-going assistance to the veteran during the implementation period. These specialists were organized around educational, training, and other types of rehabilitation facilities. Each specialist managed all veterans who attended a specific institution. This approach was viewed as efficient and fostered the development of long-term relationships between VR&E rehabilitation specialists and institutions of higher learning. The counselor and specialists worked as a team to provide interventions as necessary to facilitate successful rehabilitation.

Interviews with VR&E field and supervisory staff and a review of the available documentation on the case management pilot project indicate that these two policy decisions have not yet proven to be effective and efficient for the workforce. These two changes occurred at a time when the VR&E workload was increasing and essentially impacted the available number of labor hours to work cases. Task Force members with experience in social service delivery suggested that this strategy has not been demonstrated to be more effective or efficient even in an unconstrained resource environment. This experience also suggests that the case management strategy requires more FTE to implement and sustain than a specialization process strategy.

The infeasibility of combining these positions is supported by preliminary analysis performed by the VBA Training Analysis and Development Group in Orlando. Their work indicates that the VRC position is now responsible for 42 percent more tasks than either the CP or VRS positions. This estimate is based on an assessment of only 13 percent of the total estimated work tasks assumed for the VRC position. As a result of the limitations on the analysis, the actual VRC job could contain as much as 170 percent more tasks than either the CP or VRS jobs. These estimates also do not account for other specialized tasks such as Independent Living, DTAP, assistive technology, contract management, contract services, procurement, and financial management.

Given the current VR&E workload and the potential for it to increase, continuation of the case management concept for all veterans in the program may not be the best use of resources nor provide the ability to deal with the growing workload. The VR&E Service should reconsider the decision to implement the case management concept and provide flexibility to VR&E Officers to specialize their workforce. It is important to emphasize that VR&E employees in all positions, whether combined into a VRC position or separated into a specialist position, should still be held accountable for successful rehabilitation outcomes.

WP-4 Priority Service at VHA

- Implement a system within VHA and VBA to provide priority health care-related services to Chapter 31 program participants. (Near-Term)

DISCUSSION – PRIORITY SERVICE AT VHA

Annually, the VR&E field staff submits about 15,000 requests to VHA facilities for Chapter 31 recipients who need a variety of clinical and support services.

The number of Form 8861 requests to VHA for Chapter 31 veterans is only a

“ The VR&E Service should reconsider the decision to implement the case management concept and provide flexibility to VR&E Officers to specialize their workforce.”

small fraction of the total annual number of annual services provided by VHA. However, these Chapter 31 veterans are typically in a plan of rehabilitation or ready to move into employment. The timely delivery of these services is therefore critical to preclude the interruption of rehabilitation. Currently, VR&E does not capture data or information on the nature of these service requests, timeliness, service outcomes, and the number of services contracted-out by VR&E

because of VHA timeliness and service issues. However, during our interviews with VR&E field staff the issue of VHA timeliness in providing services was consistently raised as a major problem. The VR&E Service and VHA should collaborate on developing a priority system for VHA providing Chapter 31 services. (See Performance Measures and Information Technology.)

On January 2, 2004, the Secretary of Veterans Affairs issued a directive that all veterans with service-connected medical conditions will receive priority access to health care from the Department. This new directive provides that all veterans requiring care for a service-connected disability – regardless of the extent of their injury – must be scheduled for a primary care evaluation within 30 days of their request for care. If a VA facility is unable to schedule an appointment within 30 days, the facility must arrange for care at another VA facility, at a contract facility, or through a sharing agreement. The directive does not apply to care for medical problems not related to a service-connected disability.

Based on the assumption that some Chapter 31 participants may have non-service disabilities that could impact their rehabilitation plan, it is recommended that VHA and VBA develop a mutual policy statement regarding the provision of health care services to veterans who are participating in Chapter 31. A system to provide priority health care related services to Chapter 31 program participants should be in compliance with applicable laws and regulations that govern the Chapter 31 program.

WP-5 Functional Capacity Evaluation (FCE)

- Implement Functional Capacity Evaluation as a key process in a strategic redesign of the 21st Century Veteran Counseling, Employment, and Rehabilitation Program. (Long-Term)
- Design and implement pilot FCE projects as a first step toward implementation; consider co-locating this project office with the VBA C&P Exam Project at Nashville to leverage VBA resources program and technical capabilities. (Near-Term; Priority)

DISCUSSION – FUNCTIONAL CAPACITY EVALUATION

Functional Capacity Evaluation (FCE) is a mature technology (knowledge, systems and procedures) that is being used in many settings (workers' compensation, disability insurance programs, etc.) to provide a systematic method of measuring a person's ability to perform meaningful tasks on a safe and reliable basis. For example, the VA Medical Center in Tampa now uses one type of FCE technology to support employee and veteran evaluations.

An FCE essentially establishes a clearer understanding of the impact of an injury or illness on someone's ability to function in work related activities and in daily living. FCEs are therefore ability-based in design and focus on the impact of an impairment on a person's functional capabilities, something that often cannot be measured in clinical terms. FCE technology is also being used to establish the extent of a disability since a disability rating does not provide an appropriate index of the residual abilities of a person to perform certain types of work activities. For this reason, FCE technology is ideally suited to facilitate assessment of rehabilitation potential and employment suitability. It is these applications of FCE technology that make FCE a critical 21st Century tool for VR&E.

The current VA disability process does not provide veterans and their VR&E counselors with the data and information necessary to understand the residual abilities of the veteran to perform certain types of work. Disability determinations typically focus on the negative aspects of a veteran's circumstances, that is, trying to quantify a veteran's pain or level of dysfunction. The disability determination process sends a steady "drum-beat" of messages to the veteran about what they cannot do. Data and information from an FCE shifts this focus from the negative diagnosis and disability message to a positive rehabilitation message of what the veteran *can* do by focusing on how well the veteran can function given the level of pain or dysfunction. This positive focus on abilities makes FCE technology invaluable to the vocational rehabilitation counselor and veteran in understanding how these abilities can be used for more successful near and long-term career planning and setting and achieving employment goals.

Introduction of the FCE early in the process can also establish an abilities baseline for the veteran to assess how the veteran's abilities change over time. This comparative information can be essential to achieving better career planning and employment outcomes given the age of many veterans seeking initial and repeat VR&E assistance and the dynamic nature of the work environment. Today, a veteran receives a discharge physical exam or a VA physical exam to support initial Compensation and Pension (C&P) disability determinations and subsequent exams provide comparative data to support further C&P SCD decisions. However, the veteran does not receive any information to make informed career and employment decisions based on their abilities at the time of the initial SCD decision, at the time of initial and repeat application for Chapter 31 benefits or when an increase in SCD benefits are requested. In some cases, VR&E counselors may not have access to even a contemporary physical exam for those veterans who filled a C&P claim in the past.

Ideally, all veterans should receive data and information on their residual abilities from an FCE as part of the career transition, planning, discharge, disability determination, and vocational rehabilitation processes. The disability compensation program is designed in part to recognize the life cycle impacts of a veteran's disabilities by providing monetary benefits. However, DoD and VA do not provide veterans with information on their baseline residual abilities given their SCD status and prospectively, how these abilities will change over the veteran's life cycle. If veterans were provided this information, they would be informed to make better decisions about career planning and employment that would result in more efficient and effective rehabilitation and employment processes with more successful outcomes.

The Task Force recommends that VA adopt FCE technology as an integral part of the VR&E process. Given the long-term organizational, resource and process consequences of this enhancement, VBA should consider initiating this effort with a Pilot Project beginning in FY 2004. The goals of this pilot project should be to tailor the off-the-shelf technology (systems, knowledge and protocols) into an operational capability for the VA environment that can be implemented nationwide. This Pilot Project should also address the criteria for use of FCEs and implementation planning to rollout this capability (resources, training, policies and procedures, workforce, etc) across all Regional Offices and coordination with VHA hospital based FCE plans and capabilities.

VBA may want to consider co-locating the Pilot Project Office with the Compensation & Pension Examination Project (CPEP) Office in Nashville to leverage program, on-going contract and technical resources. CPEP is well situated to actively participate with health and administrative experts in a FCE pilot. CPEP's experiences in working with the two VA administrations, quality improvement processes, expertise in electronic exam request, fulfillment, and return processes could significantly contribute to the rapid implementation of a successful prototype FCE program. Based on preliminary discussions, CPEP would use existing electronic processes and infrastructure (e.g. CAPRI, AMIE and VistA) combined with electronic templates.

This approach will also facilitate long-term integration of the FCE with the C&P and discharge physical examination process. VBA may also want to consider establishing a relationship with the Naval Health Research Center in San Diego to leverage their on-going applied FCE research and lab activities as well capitalize on the San Diego RO's excellent VR&E DTAP program to develop a fast track early pilot test on discharging Navy personnel applying for Chapter 31 benefits.

WP-6 Disabled Transition Assistance Program (DTAP)

- Assign primary responsibility for the planning and administration of VA's responsibilities the DTAP program within VBA to the VR&E Service and designate a DTAP Manager. (Near-Term)
- Set goals and measures of success to improve the administration of VA's responsibilities in TAP and DTAP. (Near-Term)

- Develop standardized information briefings and materials to ensure service members are provided comprehensive counseling that is consistently delivered. (Mid-Term)
- Establish a program with the DoD to deliver DTAP services at every Military Treatment Facility using VBA personnel or trained contractors. (Mid-Term to Long-Term)
- Provide dedicated funding to support the administration of DTAP. (Near-Term)

DISCUSSION – DTAP

Improved administration of VA's part of DTAP is a critical factor for the success of the redesigned VR&E service delivery system. The Task Force believes that VBA's corporate goal should be to focus on the successful transition and employment of disabled veterans. This means that the end VBA goal should not be processing a claim. Processing a claim is one of the means to facilitate accomplishing the goal.

Interviews with VBA staff suggest that the TAP/DTAP mission has not enjoyed a high priority within the ROs and the VR&E organization. There is no dedicated staff or funding for TAP/DTAP. In VBA's current outreach scenario, a Compensation and Pension (C&P) staff member makes contact with a disabled service member in a treatment facility and then may refer the service member to VR&E for DTAP services. These C&P staff members are not trained in counseling or dealing with persons who have disabilities. Their focus is on filing a disability claim. In this process, DTAP could play a critical role in focusing the VBA process and the disabled service member from the start on the ultimate goal of employment if VR&E staff were the first VBA representative to contact the service member.

Task Force interviews with field staff indicate that the DTAP program is not consistently administered across the nation. For example, the VR&E Service has not synthesized, distributed, and mandated a set of best practice DTAP protocols and information. In San Diego, a contractor to VR&E has developed what appeared to the Task Force to be a comprehensive and much in demand DTAP presentation, but this information has not been used to improve the content and presentation of DTAP organization wide. In the Washington, DC VR&E Division office, a contractor is used to do DTAP outreach at Military Treatment Facilities, but they have not had the benefit of the program in San Diego. Some VR&E Divisions do not appear to have DTAP capabilities.

Leadership and responsibility for administration of the DTAP Program must be delegated and accountability imposed within the VR&E Service CO and in the field. Leadership of the program also involves setting clear goals for the program and establishing measures of success to determine the near and long-term benefits of the program in improving the decisions made by disabled veterans and the outcomes of the services delivered to them.

As discussed in Recommendations on Eligibility and Entitlement, those service members being medically discharged should be automatically entitled to VR&E services. Consistent with this recommendation, and the need for VR&E services, the VR&E Service should develop and implement a service delivery strategy and plan to provide DTAP counseling at every DoD Military Treatment Facility.

This does not mean that the VR&E Service must permanently assign staff to each

“ Leadership and reponsibility for administration of the DTAP Program must be delegated and accountability imposed within the VR&E Service CO and in the field.”

facility. Rather, the VR&E Service should work with DoD to establish a relationship with each facility to increase the visibility of the program and provide a means to deliver DTAP services. This may include using contractors or VR&E staff on a full time or part time basis as required.

It is essential that VBA give visibility and priority to the TAP/DTAP mission by providing dedicated

funding. As a first step in this process, VBA may wish to consider developing a strategic plan for TAP/DTAP and using that information to identify funding requirements.

INTEGRATING CAPACITY RECOMMENDATIONS

IC-1 Regulations and Manuals

- Work with General Counsel to publish updated Chapter 31 regulations consistent with the new Five-Track Employment Process and the integrated service delivery system within 9 months of the date of the VR&E Task Force Report. (Mid-Term)
- Implement a change management process to control and integrate the various VR&E Service CO and field initiatives now underway to make changes in the process, regulations, manuals, policies, and technology functionality for administering the VR&E Program. (Near-Term to Mid-Term)
- Impose communications discipline within the VR&E Service CO and for timely response to field requests for guidance. (Near-Term)
- Update the VR&E Program baseline of regulations, manuals, and policies through an integrated change control process to be consistent with the new five-track service delivery system and the recommendations of the Task Force. (Mid-Term to Long-Term)

DISCUSSION – REGULATIONS AND MANUALS

At the time the Task Force convened, the VR&E Service had drafted changes to the VR&E regulations and forwarded these changes to the Office of the VA General Counsel for review. Task Force interviews with VR&E Service CO staff and a review of available documentation suggests a confusing situation.

One of the keys to achieving consistency in administration of a program is to have a well integrated set of current regulations, manuals, policy directives, and work processes where the system wide impact of changes are assessed before they are implemented. Once the decision is made to implement the change, the implementation impacts of the change are managed through an integrated project management process.

Using this model, discussions with VR&E Service CO staff did not indicate that the new draft regulations followed this process. It appears that the VR&E Service has used a self-directed team approach for such activities and that the impacts of these changes have not been well assessed or integrated with other initiatives to ensure they are consistent. Discussions with staff did not provide information on how these proposed changes related to the VR&E manual, the work process, technology functionality, or resources. Further, it was not clear that the implementation of these regulatory changes had been planned.

The Task Force was also concerned about the number of different analysis efforts of the VR&E “as is” work process that were underway and not integrated. For example, the VA CIO had recently completed a contract analysis of the VR&E work process to support a VA architecture analysis project. This analysis made assumptions about VR&E’s work processes and FTE requirements as well as the knowledge, skill, and abilities required to perform these processes. However, VBA’s Technical Training and Evaluation Group is the organization that has the expertise to support task and skill analyses was unaware of this effort. At about the same time, another information technology effort this time led by VBA was beginning to document the VR&E work process.

These and other activities have been pursued as independent projects and there has been no technical and programmatic integration of these projects. The Task Force was unable to determine who within the VR&E Service had the management responsibility for integrating these various activities.

VR&E CO has limited capacities to “stay-on-top” of these projects to ensure their integration. There appear to be multiple baselines of business process assumptions being used to make decisions and develop capabilities but no one has validated the results of these analyses and ensured the integration of the associated technical work and products.

The Task Force also heard repeated criticisms from the field about the untimely VR&E Service CO response to field queries. The persistent nature of these comments also raised concerns among field staff about the knowledge and abilities of the CO staff.

The management of the various initiatives, projects, and communications impacting VR&E’s regulations, manuals, policies, and initiatives appear to be fragmented and uncoordinated. In light of this situation, the VR&E Service should consider several actions.

- The VR&E Service should implement a change management and integration process to assess the impacts of changes on regulations, manuals, technology, functionality, work processes, and training before decisions are made and to ensure proper integration and planning of change. This effort should include actions to impose communications discipline within the CO and to the field.
- In the longer term, the VR&E Service should develop and implement a well planned and integrated strategy and program to modify the

underlying regulatory and policy guidance. This should be done in such a way that all the impacts of these changes are thoroughly understood and the associated implementation plans are effectively managed. These regulations and manuals should be modified to also reflect the five-track service delivery system and strategy.

- It is essential that the VR&E Service's capacities for technical and program integration be increased by providing additional FTE and contractor support to manage and integrate these activities. (See Recommendation on CO Organization.)

IC-2 Performance Measures

- Design and implement a new VR&E process and outcomes performance measurement system for the five new VR&E service delivery tracks; base the outcomes performance measures on the concept of "Maximum Rehabilitation Gain;" coordinate with and use the expertise of the Department of Veterans Affairs Program Evaluation Service in the design, testing, and implementation of this new system; also seek the technical assistance of CARF in this effort. (Mid-Term)
- Initiate a study of other federal, state, and private sector vocational rehabilitation service organizations to benchmark process and outcomes performance measures and quality assurance processes; coordinate with and use the expertise of the Department of Veterans Affairs Program Evaluation Service in this study and also seek the technical assistance of CARF in this effort. (Mid-Term)
- Change the current methods used to measure VR&E claim timeliness so that the "timeliness clock" starts when the VR&E Division with jurisdiction gets the Form 1900 application *and* a service-connected disability rating from the Veterans Service Center. (Near-Term; Priority)
- Reevaluate the rules for calculating the current timeliness measures for cases that are transferred to another RO. (Mid-Term; Priority)
- Implement a new C&P performance measure for Veterans Service Center Memo Rating timeliness; incorporate this measure in the performance evaluation criteria for Service Center Managers. (Near-Term; Priority)
- Remove the number of discontinued cases from calculation of the VR&E rehabilitation rate (Near-Term; Priority)
- Do not count Independent Living cases in the current formula for computing rehabilitation rate; create a new performance measurement system for IL. (Near-Term)
- Change the final measurement of employment success from 60 days to 90 days with case closure, and follow-up at 120 days and 180 days by Central Office, Regional Office or Quality Review Staff. (Mid-Term)
- Implement a new VHA timeliness performance measure for Form 8861 requests from VR&E for services to Chapter 31 veterans. (Near-Term)

DISCUSSION – PERFORMANCE MEASURES

Based on interviews with CO staff, it appears that in previous years VR&E leadership made a policy decision to deemphasize a range of operations, program, and management analysis activities. We do not know if the organization's capacities (policies, procedures, processes, and staff) for analysis were appropriate and effective before the decision was made to deemphasize VR&E's analysis activities.

Implementing new performance measurement and quality review systems are critical success factors for effective VR&E service delivery. For the purposes of this report, the Task Force is concerned about two types of performance measurement – outcome measures and process output measures. Outcome measures focus on how well the mission of the organization (rehabilitation expressed as employment or achievement of independent living goals) is accomplished. Process output measures provide insight into the efficiency of the work process relative to a range of factors such as cost, number of cases managed, number of veterans served, etc.

The current performance measurement system does not provide an accurate picture of the complexity of measuring the delivery of individualized services. Additionally, the current system provides limited visibility and tracking of process output measures to assess the efficiency, productivity, and cost effectiveness of current VR&E work processes. This problem is discussed in more detail later in Program and Operational Analysis and Evaluation.

The Task Force commends VR&E CO for reinstating a Quality Review process after several years. However, additional resources and leadership attention are required to mature the current process and make changes to accommodate the new five-track service delivery strategy.

The VR&E Service should consider pursuing a strategy to improve the performance measurement and quality review systems. The redesign of both the performance measurement and the quality review systems should be paced by four factors:

1. Design features of the new VR&E Five-Track Employment Delivery System
2. Implementation of the new system
3. Results of the recommended benchmarking analysis, and
4. Management concepts of VR&E's senior leadership

Redesign of these two management systems is a strategic initiative and will require further analysis, careful planning, and sustained implementation including evaluation to achieve success. In the meantime, VR&E should make changes in its current performance measures to present a more accurate picture of VR&E controllable performance.

Redesign the VR&E Performance Measurement System

The Task Force recommendation to implement an integrated five-track employment service delivery system drives the need for the VR&E CO to create new sets of outcome and process performance measures for this new system. The development of these new measures should be integrated with the design of a new work measurement system for VR&E and changes to CWINRS or other information systems so that appropriate data is collected for measurement and analysis. (See Task Force Recommendation on Program and Operational Analysis and Evaluation.)

The VR&E Service should consider basing this new system on the concept of Maximum Rehabilitation Gain (MRG). Prior to the late 1990s, VR&E used a performance measurement system based on the concept of MRG. This concept was abandoned when the VBA Balanced Scorecard was implemented. VA's leadership desired a more explicit outcome measure consistent with those of the other business lines. As a result, the MRG approach was replaced by the single calculation of rehab rate. VR&E CO was able to set the rules such that a successful rehabilitation could be considered if a veteran attains employment in an occupation unrelated to the occupational objective established in the rehabilitation plan if certain criteria are met.

The Task Force encourages VR&E CO to work with the Office of Field Operations in developing this new performance measurement system. To support this effort, the VR&E Service should conduct benchmarking studies of the outcomes and process output performance measurement systems used by other federal, state, and private sector rehabilitation organizations to identify candidate measures to guide this design. The VR&E Service may want to coordinate this effort with the Department of Veterans Affairs Program Evaluation Service and also use the technical assistance of CARF in formulating the design and implementation of a new system.

"The Task Force encourages VR&E CO to work with the Office of Field Operations in developing this new performance measurement system."

Improving the Current Performance Measurement System

Until such time as a new system can be designed and operationally tested, the Task Force has identified several issues with the current measurement system that should be addressed.

Rehabilitation Rate. The key measure that is used today to measure outcome success is the rehabilitation rate. The use of rehabilitation rate as a universal outcome measurement indicator is driving VR&E workload reporting mechanisms, management decisions, and behavior of the workforce. There are several problems with the use of this single outcome measure to assess outcomes performance.

The current calculation of the rehab rate makes no distinction between independent living (IL) cases and other rehabilitation cases. IL service delivery includes the direct and indirect provision of a wide variety of VA and community-based benefits, medical, and social services.

Improvement in the quality of life of an IL veteran is not realistically measured by a quantitative rehab rate. This is much different than the case of a veteran who goes through the program without interruption, graduates from a school, and then is employed. Quantitative measurement can be easily applied to this later case. IL cases should be removed from the calculation of the rehabilitation rate and new outcome measures should be created for the IL program.

The VR&E Service may also want to cease using the discontinued rate in the calculation of the rehabilitation rate for now. Since VR&E is a program of individualized services, the veteran can elect to suspend, discontinue, and resume the program at any time. These decisions are not controllable by VR&E staff. Inclusion of the discontinued rate in the calculation of the rehab rate suggests that VR&E staff members are accountable for the decision of each veteran who interrupts or discontinues the program. In this context, use of the discontinued rate is unfair to the VR&E staff. Further, inclusion of this rate may encourage counselors to retain Chapter 31 veterans in interrupted status or in active status for extended periods of time rather than taking a “hit” on outcomes performance. This behavior can contribute to high caseloads and presents an incomplete picture of the dynamics of the workload.

There is some VR&E survey data that suggest the reasons veterans interrupt their rehabilitation plans and why some veterans go into discontinued status. The principal reasons appear to be medical problems, family and financial considerations, and changes in disability status. However, this data has not been analyzed and the factors that drive these and other specific reasons for interrupted and discontinued cases have not been studied. As discussed in other sections of the report, VR&E CO should initiate research to determine the potential for designing and implementing interventions to mitigate the risk factors for interrupted and discontinued cases. Mitigating the risk factors for interrupted and discontinued cases would have significant payoff for VR&E in terms of workload and for the veteran in terms of achieving rehab success and achieving it earlier. This research may also identify actions that are controllable by VR&E counselors that would mitigate a veteran from going into interrupted or discontinued status. Accountability could then be assigned to a counselor for failure to take the appropriate actions.

The VR&E CO should also work to standardize the rules for determining interrupted and discontinued status. Interviews with field staff indicated wide variation in how determinations are being made for these two case status categories and how this determination is being documented. VR&E CO should also develop output and outcome process measures to provide greater visibility and tracking of cases in these status categories. VR&E CO should particularly track those veterans who have exited discontinued status and reentered active case status.

Timeliness

Currently, the VR&E timeliness performance measure includes the C&P processing time for Memo Ratings. Inclusion of this C&P timeliness factor in the overall VR&E timeliness measure serves to reduce management visibility of the Memo Rating process and its contribution to the Chapter 31 application and entitlement determination process. VR&E performance timeliness rule should be changed so the timeliness clock for VR&E starts when the VR&E Division receives a Memo Rating from the Service Center.

The VR&E Service should also establish a new performance measure for Memo Rating Timeliness. Currently, there is limited VBA wide visibility and emphasis on Memo Ratings to support VR&E. While the processing of a Memo Rating is a pacing item for the VR&E Divisions, our field visits suggested that Memo Rating Timeliness is not a priority goal for most RO Service Center Managers. Inclusion of Memo Rating Timeliness in the Service Center Manager's performance evaluation would provide a measure of accountability supporting the VR&E process.

Our field interviews also highlighted concerns about the apportionment of timeliness measures for Chapter 31 cases that are transferred from one RO to another RO. The individualized nature of VR&E services makes it impossible to promptly continue working a transferred case as compared to C&P where a claim can still be processed after transfer to another RO as long as the claims folder documentation is available. Although VR&E staff could not provide the Task Force with data on the number of cases transferred, we believe that this problem has reached the level in some locations where it must be addressed. The VR&E Service should develop new timeliness rules for transferred cases addressing concerns about resetting the timeliness clock based on some case controllability criteria.

Measurement of Employment Success

VR&E currently measures the success of rehabilitation (employment) 60 days after a Chapter 31 veteran has been employed. The Task Force heard from a number of employment experts as well as VR&E staff that the 60-day measurement period may not be long enough to measure sustainability of employment for the veteran with disabilities. Since long-term studies of veteran employment have not been accomplished, the VR&E Service should continue to measure veteran employment status beyond the 60-day point. This can be accomplished by measuring employment status at 90 days, with case closure, with further follow up at 120 days and again at 180 days by either CO, RO, or quality review staff. The point is to let the veteran know that VR&E is there for him or her if he or she is no longer in the job.

VHA Performance Measures for Chapter 31 Services

As discussed earlier, VR&E counselors are concerned about VHA's response time to Form 8861 requests. Delay in providing these services may be a contributing factor for individual veterans interrupting their

rehabilitation or dropping out of the program. There is limited visibility of these critical requests within the system. VHA should consider establishing a timeliness performance measure for responding to Form 8861 requests from VR&E. (See Recommendation on VHA Priority Chapter 31 Service and Information Technology.)

IC-3 Quality Review Process

- Redesign the Quality Assurance Review process to reflect the new five-track VR&E service delivery system. (Mid-Term to Long-Term)
- Seek technical assistance from CARF to facilitate improvements to the Quality Review process. (Near-Term)
- Conduct an independent review in 6 months of the VR&E Quality Review Process now being implemented. (Mid-Term)

DISCUSSION – QUALITY REVIEW PROCESS

The Task Force commends the VR&E Service for its efforts to reinstitute a systematic quality review process. The details of this process in terms of policies, procedures, and standards are still evolving and are not yet mature. This was evident from our interviews in the field. There appears to be some confusion among field staff about how the process is being implemented and the results of the quality reviews accomplished to date.

A quality review process assumes standardization of policies and regulations so that the QA process can detect variations in implementation. However, there are significant variations in how VR&E policies and regulations are implemented in the field. We have also documented the lack of centralized and disciplined program direction, control, and training from the CO. In this environment, it may be difficult to realistically assess the relative benefits of the QA process so far. The VR&E Service should continue to improve the quality review process and improve communications with the field about the details of the process and its outcomes. Clearly this process needs to mature, but the VR&E Service should standardize the administration of the Chapter 31 program in the field. At the same time, VR&E CO should make changes to the quality program to keep pace with the service delivery changes proposed by the Task Force.

The VR&E Service should consider several changes to enhance the success of this effort.

- Redesign the quality review process to be consistent with implementation of the five-track VR&E service delivery system. VR&E CO must develop quality indicators for the new VR&E service delivery tracks and appropriate quality process policies and guidance for these new service delivery processes. The quality assurance and the field staffs must then be trained to these new standards.
- Consolidate the QA staff at a central location. The current out-based concept appears inefficient and costly as discussed in the Recommendation on CO Organization and Staffing. This out-based approach essentially turns a critical staff resource into an itinerant workforce. The VR&E quality process would benefit by consolidating the

QA function at the Nashville RO to leverage the expertise and experience of the C&P Service in implementing their quality review process.

- Increase the size of the quality review team. The current number of staff devoted to the quality program may be inadequate given the subjective nature of the program and the highly decentralized field structure. The VR&E Service should consider increasing the size of this staff as it makes decisions on consolidating the quality staff at one location.
- Solicit technical assistance from CARF to improve the QA process. The VR&E Service should establish a formal relationship with CARF for technical assistance. While VR&E CO has established a relationship with George Washington University to review its plan for QA, CARF can leverage significant experience and knowledge that would otherwise be unavailable to facilitate this activity.
- Conduct a formal assessment of the VR&E QA program in 6 months. The Task Force did not make a formal assessment of the methods used by the QA program given that the program is still evolving. The VR&E Service should formally assess the progress of the quality assurance program and how well it is integrated with the other change activities arising from this report.

IC-4 Information and Systems Technology

- Remove the VBA policy constraints impacting VR&E productivity and service delivery to install T-1 lines for all VR&E out-based locations. (Near-Term; Priority)
- Hire a systems integration contractor to provide sustaining support to the VR&E Service for process and requirements analysis, technology assessments, and recommendations, assistive technology consultation, and project management. (Near-Term; Priority)
- Elevate the VA funding priority of CWINRS, accelerate the development and production incorporation of financial and process enhancements, and expand the scope of the current Phase II CWINRS Functional Requirements Analysis. (Near-Term; Priority)
- Develop and conduct an initial and recurring training course on CWINRS report functionality and analysis for all VR&E field and Central Office staff. (Near-Term; Priority)
- Provide VR&E service contractors training on the use of CWINRS and access to WINRS for data entry and reports. (Near-Term; Priority)
- Fully use CWINRS capabilities for Chapter 36; provide nationwide tracking of Chapter 36 participants and access to case information. (Near-Term)
- Create a systems capability for VR&E to request and track VHA appointments and services for Chapter 31 veterans. This effort should be linked establishing clear priority in VHA for Chapter 31 veterans who need services for timely employment readiness and to complete rehabilitation plans. (Near-Term; Priority)
- Leverage IT capabilities to more efficiently administer Chapter 31 training, education, and certifications and to track the progress of veterans in these programs. (Mid-Term)

- Partner with the VA Learning University to develop a 21st Century online higher education program for Chapter 31 veterans and VR&E staff. (Long-Term)
- Initiate a long-term project to develop the functional requirements for a 21st Century VBA counseling, employment, and rehabilitation program information systems capability. (Long-Term)

DISCUSSION – INFORMATION AND SYSTEMS TECHNOLOGY

Since the early 1990s VBA has made significant investments in modernizing its information technology infrastructure and providing new system capabilities to support its five lines of business – Compensation and Pension, Insurance, Loan Guaranty, Education, and VR&E. VR&E was the last VBA business line to benefit from this modernization investment with the fielding of Corporate WINRS (CWINRS) Version 1.0 in late 2001.

Although VR&E was included in the original concept for modernizing the business software applications supporting VBA’s lines of business, VR&E’s IT needs were not considered until more recently. VR&E’s mission-critical application, CWINRS, is based on the functionality of a software application developed by VR&E staff in four Regional Offices in the early 1990s. This RO developed application was redesigned to operate in the VBA enterprise IT and network environments. CWINRS supports VR&E service delivery at 57 Regional Offices and 138 out-based locations

Access for Out-Based Service Delivery

The most urgent technology issue impacting VR&E service delivery and productivity is that 52 of VR&E’s 138 out-based locations cannot efficiently use CWINRS capabilities because of VBA policy decisions limiting access to T-1 lines. Currently, 86 out-based sites have network access through T-1 lines, a VA Medical Center or through other means. The remaining locations are dependent on using dial-up modem capabilities for access.

As a result, network access is not reliable and system response time is slow. Interviews with RO-based VR&E staff at several ROs indicated that a number of users of CWINRS are experiencing response time and “system lock-up” problems when using CWINRS.

Reliable access and timely system response are critical success factors for VR&E. VR&E is the only VBA line of business where face-to-face contact with the veteran is required for delivery of benefit services. Although VBA supported VR&E’s “Access Initiative” to enhance face-to-face outreach, it appears that the resource and technology consequences of the policy decision to out-base VR&E staff were not fully considered before the decision was made and implemented. CWINRS is so intertwined in VR&E service delivery that lack of reliable access and timely system response has directly degraded the productivity of out-based staff and their ability to provide services to veterans. This problem is the source of high frustration on the part of out-based VR&E staff members

“ The most urgent technology issue impacting VR&E service delivery and productivity is that 52 of VR&E’s 138 out-based locations cannot efficiently use CWINRS capabilities because of VBA policy decisions limiting access to T-1 lines.”

Discussions with the VBA CIO indicate that VA is considering a future effort to transition CWINRS to a Web-based version of the application that would facilitate improved access and response times. However, this effort is not funded and is not being pursued as a high priority initiative. Therefore this potential future project may not be a solution to the problems of CWINRS reliable access and timely response. The best solution is immediate installation of T-1 lines in all VR&E out-based sites.

VR&E Capacities for Process and IT Integration and Management

VR&E has only one CO staff member dedicated to managing technology requirements, programs and training. Systematic management of process and technology requirements analyses are limited as are the capacities for the management of complex projects. These and other challenges have been previously noted in various studies and assessment reports on VBA's business line management of technology modernization programs.

VR&E CO has also not been as effective as it could have been in planning for, justifying, and using technology solutions. VR&E will likely become more dependent on technology to implement its program of services and must improve its capacities for technology management and use. The Task Force recommends that some of the increase in VR&E CO staffing recommended by the Task Force be allocated to IT management. We also recommend that VBA fund VR&E CO to acquire the services of a systems integration contractor to create an organizational capacity for technology management. The systems integration contractor should provide on-going business process analysis; develop functional requirements for enhancements to current systems and new systems; identify technology and data centric solutions to facilitate counseling, employment and rehabilitation programs; and provide project and program management support services.

Priority Enhancements to CWINRS

VR&E is in the midst of developing Phase II Functional Requirements for CWINRS. The goal of this effort is to develop business rules to enable processing of Chapter 31 award benefits through CWINRS rather than to process awards through the Benefits Delivery Network (BDN) System. The original scope of the Phase II CWINRS Program included significant functional enhancements for a broad range of capabilities to support VR&E. VA made a policy decision in April 2003 to reduce the scope of the Phase II Program to only include the functionality necessary to move Chapter 31 award processing and associated activities off of the BDN to CWINRS. The current schedule calls for production rollout of Phase II WINRS in December 2006.

There appear to be about 172 functional enhancements to WINRS that are not included in the Phase II Program. The Task Force identified 172 enhancements based on a review of various VR&E and IT documents and interviews. These enhancements also do not include any new requirements associated with implementation of a comprehensive employment program or those new enhancements to implement changes to the current VR&E process resulting from the recommendations of this Task Force.

These enhancements do not appear to be funded for development and production. Based on discussions with VR&E and VBA CFO staff, the following enhancements should be considered for priority funding and implementation.

- Ad hoc query and report generation capability. (Near-Term; Priority)
- All financial management requirements identified by the VBA CFO including those requirements to facilitate FMS/CWINRS integration. (Near-Term; Priority)
- Management and oversight of all – contractor services and products by veteran, counselor and type of goods or services. (Near-Term; Priority) (See Recommendation on Contract Management)
- Establish cumulative expenditure thresholds for purchase of goods and services; establish second level of pre-approval tied to these thresholds. (Near-Term; Priority) (See Recommendation on Financial Management)
- Expand functionality for case management narrative text and attachment of externally generated professional evaluations and case histories. (Near-Term) (See Recommendation on Work Process.)
- Provide an interim information system capability to support a redesigned comprehensive employment services program. (Near-Term; Priority)

VR&E Management and Operations Reports

Currently VR&E uses a series of DOOR, COIN TAR and CWINRS reports to manage the program. These reports are created based on sets of business rules and logic. Based on a review of the Phase II CWINRS Statement of Work (SOW), it does not appear that the current SOW addresses the need for analysis of the underlying data that is used to generate these reports; the functionality and business rules of all DOOR and COIN TAR reports and the report formats supporting VR&E; cross walks this information to the current WINRS data and report architecture; and uses the results of this analysis to identify additional functional requirements for WINRS. If this analysis is not accomplished it is likely that when BDN is turned off that VR&E will have less management data and information than they do today. There are four other issues that relate to VR&E report capabilities.

- Since the development of the initial set of reports for CWINRS, there has been limited funding to support development of ad hoc query and other report capabilities to more fully exploit the data in CWINRS. This funding situation has limited the ability of the PA&I staff to support VR&E. VBA should provide priority funding to PA&I to allow them to create the reports necessary to allow VR&E to optimize use of the data that is available in CWINRS. VBA should also provide a yearly funding stream to support development of a more comprehensive report generation capability.
- Another concern relates to the use of the current reports capability of CWINRS. The Task Force is concerned that VR&E CO and field staff are not fully using the inherent functionality and report generation capability of CWINRS. During several field visits, VR&E staff indicated that certain

data was not available from CWINRS to support various management and program oversight functions. However, the VBA PA&I staff was able to generate reports from CWINRS to address most of the questions we asked of the field staff. We believe that while VR&E may have conducted some level of initial training on CWINRS, this training was not as effective as it could have been. Further, no institutional CWINRS training program has been established to improve consistent use of CWINRS and mine its report capability. It is essential that VR&E CO take prompt action to train CO and field staff in using CWINRS. (See Recommendations on Training.)

- The St. Petersburg RO has developed an automated workload management tool. This systems capability pulls data from multiple VBA data base sources into a single user-friendly Access database. This capability would significantly enhance the St. Petersburg VR&E staff's ability to manage their workload that accounts for 6.6 percent of the national VR&E workload if the CWINRS database could be accessed on some periodic basis to populate the St. Petersburg VR&E database. This tool may have the potential to be rapidly implemented in ROs that have high volumes of VR&E workload. We encourage VBA to take aggressive action to provide St. Petersburg this CWINRS data on a priority basis and support evaluation of this management tool.
- Finally, the VR&E CO's corporate knowledge of the spectrum of DOOR and COIN TAR reports and associated business rules and logic resides in one person at the VR&E CO. This situation creates a major risk for VR&E. VR&E must take prompt action to mitigate this risk by training additional staff and enhancing current CWINRS reports functionality.

Interim and New Support Capabilities

Employment Capabilities. A critical need exists to provide the field with an interim systems capability to support a redesigned employment process until such time as an enterprise-wide business application can be developed and implemented based on a mature employment process. The Employment System currently in use by the Alabama Department of Rehabilitation Services might serve as a model for such an interim system. Other state based systems might also be models for interim capabilities. Priority funding will be needed to develop an initial set of requirements for an interim employment system, survey off-the-shelf applications, and implement interim capabilities at the earliest date.

Chapter 31 Service Requests to VHA. A technology solution should be implemented to provide VR&E an automated capability to request appointments and services for Chapter 31 veterans. Currently, VR&E uses CWINRS to print a Form 8861 that is then forwarded to VHA requesting services. Since CWINRS was activated in September 2001, VR&E has submitted 33,000 paper form requests to VHA or about 15,000 on an annual basis. The current process does not facilitate rapid feedback and coordination of services and appointments as well as data collection and

analysis of the volume and nature of VHA service supporting Chapter 31 veterans. An automated capability would speed appointment requests, provide more rapid communications to coordinate services, and provide faster closure of cases. VHA should take the lead in working with VR&E to baseline the requirements for an improved process and implement a systems capability to support VR&E case management activities for Chapter 31 veterans.

Contract Counselor Access to CWINRS. VR&E relies on a network of professional contract counselors to perform a range of services. According to VR&E reports, virtually all of the annual volume of Chapter 36 counseling is provided on a contract basis. The VBA CIO should initiate a study with VR&E to determine the capabilities and security protocols needed to provide VR&E contract counselors with access to CWINRS. VBA should then provide VR&E contractors access to CWINRS based on established protocols and training. (See Recommendation on Training.)

Administration of Education and Training Programs. VR&E manages a number of coordination activities associated with VR&E Chapter 31 veterans attending training and educational institutions. These activities also include regular contact with the veteran to assess progress and with appropriate school officials to coordinate administration of the program. The U.S. Department of Education, VBA's Education Service, and the military services have invested in capabilities to leverage IT to facilitate the administration of education programs that have similarities to the VR&E program. The VR&E Service with support of the CIO should initiate efforts to determine how to best leverage IT capabilities to make VR&E's administration of Chapter 31 training and education programs more efficient. This effort should also include using IT capabilities to more systematically communicate with veterans in school status, receive progress reports from schools to monitor progress, facilitate financial transactions, and receive final transcripts.

Distance Learning Program and Online Higher Education

Some service-connected disabled veterans with employment handicaps may lack the mobility to participate in traditional classroom-based higher education. Online learning for higher education overcomes mobility issues and is an accepted alternative to traditional classroom-based higher education. The use of web-based education is also a proven method for increasing access to educational opportunities for an organization's employees.

The U.S. Army, in a contractual partnership with an integrator who aggregates the services of 27 colleges and universities and a wide range of other vendors, has been operating the *eArmyU* online education program to provide enlisted soldiers with the ability to earn higher education degrees anytime and anywhere. The integrator provides a 24X7 help desk, negotiates class rates, and tracks an individual's participation in the program. Several unique aspects of the *eArmyU* program include a technology package that consists of a laptop computer with an Internet Service Provider account as well as educational counselors. Since the program's

inception in January 2001, over 36,000 soldiers have participated and approximately 27 percent of the program participants had never attended college before.

The VA Learning Online (VALO) currently provides unlimited access to a managed library of web-based courses to all VA employees. VALO selects and deploys a comprehensive on-line library of over 1,200 courses in partnership with a commercial Application Service Provider. VALO seeks collaborative arrangements with business and academia to offer its commercial off-the-shelf web-based training and maintains a 24X7 help desk. Over 38,000 VA employees have taken courses through VALO.

VBA should consider the following strategies to improve distance learning and online educational opportunities for both Chapter 31 veterans and VR&E staff:

- Partner with VA Learning University (VALU) to develop a concept proposal report on an *eArmyU* and VALO type program and portal, which would provide Chapter 31 veterans with access to a wide range of online higher education courses and degree programs.
- VA Learning University should expand its inventory of web-based courses that would enable VR&E staff to update their skills in such areas as functional capacity evaluation, vocational counseling, and contract management. VBA could also promote the use of online training courses to address continuing education requirements for VR&E licensed professionals.
- If a decision is reached to establish a certification requirement for VR&E contractors, one element of a training module should include online training courses on such topics as VA benefits and services, case management, independent living assessment, and employment placement.

IT Vision for VR&E

The current functionality of CWINRS reflects a 1990s or earlier view of VBA's vocational rehabilitation business. Absent strong CO leadership and management to acquire IT solutions, several Regional Offices took the initiative to develop an IT solution to support operations. This solution formed the basis for the current 2003 functionality of CWINRS.

For now and the immediate future, CWINRS will be the core business system application supporting VR&E operations. While efforts need to continue to improve CWINRS, it is time for the VR&E Service to also focus on longer term systems solutions to facilitate a 21st Century counseling, employment, and rehabilitation program. Task Force recommendations provide guidance on the key elements of a redesigned counseling, employment, and rehabilitation program. This guidance must be turned into an operational service delivery and business process baseline that will drive new system requirements.

VBA should also consider creative acquisition approaches to providing VR&E new system capabilities. While VR&E is an important mission area, C&P needs will continue to drive the priority of VBA resource allocation. Funding of

bottoms-up development and fielding of new VR&E system solutions in a timely manner may not be feasible given these fact-of-life resource considerations. Creative acquisition approaches might include use of commercial-off-the-shelf systems or lease or fee-for-service arrangements.

IC-5 Training

- Establish a VR&E Training and Education Office to be located at the VR&E Central Office and provide dedicated staff. (Near-Term)
- Accelerate the VR&E Training Needs Assessment planned for FY 2005 to begin in FY 2004. (Near-Term)
- Develop and conduct formal initial training courses and a recurring training program with the VBA Training Academy using community as well as private sector and university-based experts and advocates in the field of disability, rehabilitation, and employment of persons with disabilities. (Near-Term)
- Create a program of professional continuing education and initiate a technical assistance relationship with the Commission on Accreditation of Rehabilitation Facilities. (Near-Term and Mid-Term)

DISCUSSION – TRAINING

In assessing the VR&E training program, Task Force members conducted interviews with VR&E CO and field staff, fact-finding at the VBA Training Academy, and meetings with the VBA Technical Training and Evaluation staff. The Task Force also reviewed available documentation such as VR&E's Training Proposal for FY 2004-2007.

Historically, training has not been a priority for the VR&E Service. The training that has occurred in VR&E has been ad hoc relying on the use of periodic conferences, video broadcasts, and newsletters. These efforts have not been tied to an overall strategy, plan, and program. VR&E has also not documented the training that has been delivered in terms of those who attended and the outcomes of the training that was delivered.

For the most part, VR&E Officers at the ROs have been left on their own to create training programs and use on-the-job training approaches for new employees. The cumulative impact of this situation has contributed to wide variation in how the VR&E program is administered in the field and the interpretation of regulations and rules, inconsistent development of the skills of the workforce, and loss of productivity. The need and desire for a comprehensive training and professional education program was a consistent theme heard by the Task Force during visits to VR&E field offices.

VR&E CO Training Capacity

It is essential that VR&E build a CO capacity for staff training and professional education. While the VR&E Service has designated a training coordinator for the VR&E Service, this position is not located in the CO and it does not appear that this position is dedicated to the training function. VR&E should create a full-time Training and Education Manager position at the CO as soon as possible.

The VR&E CO staffing increases proposed by the Task Force should include additional staffing for the training and education function. The VR&E Service should also develop a job description and process tasks to standardize the role and function of VR&E training coordinators in the ROs.

VR&E's Future Training Strategy

In 2002, VR&E began an effort to take a more strategic approach to training. Working with the VBA Technical Training and Evaluation staff in Orlando,

“Historically, training has not been a priority for the VR&E Service.”

VR&E created a training approach based on developing a set of computer-based training capabilities. This approach uses the Instructional Systems Development (ISD) methodology to create a technical baseline of knowledge, skills, and abilities required to perform work tasks. This information is then used to develop a series of computer-based training aids and interactive courses. This is the same model followed by the C&P Service. ISD is a powerful tool for analysis and provides significant data and information that an organization can use to support variety of activities to analyze and improve work processes and achieve a better alignment of the workforce with those processes.

VR&E CO has formalized this approach in its Training Proposal for FY 2004–2005. Although this proposal has yet to be acted on and funded by VBA, the Task Force commends VR&E for taking this significant step. There are several concerns about the VR&E Service's training strategy and capacity to plan and execute a training program.

- VR&E's strategy to use the ISD process as a long-term means to develop a training program is sound. As demonstrated by the experience of the C&P Service, the ISD process is not the best way to provide short term training capabilities to meet near-term, urgent needs. The VR&E Service may want to consider shifting its current focus to providing more near-term, priority training.
- VR&E should continue to work with the VBA Technical Training and Evaluation Group to further refine the scope and content of the program and complete the initial job guide activity. The work of the VBA's Technical Training and Evaluation Group can be used to support process improvement activities and should be integrated with other similar efforts already underway.
- VBA should accelerate and fund the Training Needs Assessment planned for FY 2005 so that it begins in FY 2004. Under the current plan, implementation of any development of identified training and education programs is not scheduled until FY 2006 and later. The scope of this assessment should be expanded to include leadership and management needs as well as analysis and determination of continuing professional education program requirements. VR&E should actively involve the staff from the VBA Training Academy and the Technical Training and Evaluation in conducting this assessment.

- There are also concerns about VBA's priority in funding VR&E's training requirements. During the course of the time this Task Force has been at work, VBA deferred funding for VR&E's planned FY 2004 training conference. While VBA has focused appropriately on the need to invest in the training needs of C&P, the current VR&E Training Strategy must be funded for earlier implementation. The more near-term training course requirements identified below should be funded early in FY 2004.

Near-Term, Priority Training Needs

The VR&E Service should consider implementing the following training courses as soon as feasible in FY 2004. These courses should be designed and conducted using the expertise and capabilities of the VBA Training Academy staff in coordination with outside experts from the disability, rehabilitation, employment, and academic communities. These courses should be designed to fit into a sustaining training program for each topical area.

- ***Leadership and management training for VR&E RO supervisors, officers and CO staff.*** Leadership and management are not key strengths of the VR&E organization. This training should be designed to strengthen capacities for organizational, business line and process management, and management analysis. Interviews with RO Directors, Office of Field Operations staff, and feedback from VR&E staff highlighted the need for VR&E supervisors and officers to improve their knowledge, skills, and abilities to lead and manage a VBA line of business. In some ROs like Los Angeles, the RO Director has recognized this need and initiated mentoring activities for key VR&E staff. This effort resulted in significant improvements in VR&E RO management and programs. We suggest that VR&E CO work with the OFO and selected RO Directors to identify high priority leadership and management needs and solicit their participation in designing and delivering this course(s).
- ***Training for VR&E employment staff and associated VR&E staff members.*** VR&E should develop a comprehensive training program for employment staff that conforms to the proposed employment operational concept recommended by the Task Force. Task Force recommendations on employment are far reaching and represent a fundamental shift in how VR&E does its work. Therefore, the VR&E Service should develop a series of initial training courses and a follow-on training program to develop staff skills, knowledge, and abilities to facilitate operations of this new five-track employment process. The VR&E Service should also develop an employment orientation course for all VR&E service and field staff as well as all contractors so that the VR&E community is well versed in the new direction for the program, the process, and desired outcomes.
- ***Training in regulations, procedures, policies and operations.*** The Task Force observed significant variations in the field regarding the intent of regulatory and manual requirements, case management processes, and the overall implementation of the VR&E program. The Task Force has also observed what we perceive to be a lack of strong CO leadership

and direction to specify and enforce the disciplined and consistent use of mandatory guidance. The Independent Living training program described below provides an example of the lack of CO leadership regarding training and enforcement of standardization.

- ***Training for Independent Living Program and Services.*** The initial course should be designed to inform all staff as to the specific standards and policies for how the program will be administered. The VR&E Service should also leverage the capabilities of academic institutions and Centers for Independent Living to develop this training program. There is a critical need to standardize the implementation of this program. During field visits, the Task Force observed significant differences in philosophy about the scope and administration of this program. Such variations impact organizational efficiency and effectiveness and more importantly, service to veterans.

For example, the recent May 2003 training broadcast titled “Independent Living: Process & Resources” provided the Task Force insights on why such variations occur. Rather than have CO staff define the details of regulations and policies and prescribe how the process is to be implemented, the broadcast relied on VR&E field staff to present their ideas of how to interpret regulations and policies and how to implement the program. Rather than standardize the process and use of regulations and policies, the broadcast reinforced the notion that each RO and each counselor can interpret how the process and rules should be implemented. This current approach only serves to encourage more variation in the program.

- ***Optimize the use of CWINRS functionality and reports for management analysis (tools and techniques).*** The VR&E Service and field staffs are not effectively using the inherent CWINRS capabilities that do exist. The VR&E Service used a train-the-trainer concept to train the field staff when CWINRS was implemented in 2001. Discussions with VR&E field staff indicated that this training varied greatly from RO to RO and there has been no subsequent training on the use of CWINRS and how to use its reports functionality for management analysis. The VR&E Service should seek the active participation of the VBA Performance Analysis and Integrity (PA&I) staff in the development and implementation of this training.
- ***Training for Regional Office Directors and Service Center Directors on VR&E benefits and work processes.*** During Task Force visits to regional offices it was clear that not all RO Directors and Service Center Managers understand VR&E benefits, programs, and processes. This may have contributed, in part, to the isolation that some VR&E staff feel within the ROs and the communications problems that appear to exist that impact productivity and service. VBA should consider the most appropriate way to provide an initial training course to all RO Directors and Service Center Managers and then provide continuing training.

- ***Training for contract counselors providing counseling and rehabilitation services for VR&E.*** The current National Contract statement of work has not adequately addressed standards of performance. This has resulted in variations in how contract services are used and the content of the work performed. Customer survey data of Chapter 31 veterans also indicates that VR&E has not trained contract counselors in VR&E policies, procedures, and program benefits. This Task Force also interviewed contract providers at several ROs. We were impressed with their capabilities, attitude, and commitment to working with veterans. However, the contractors felt there was a need for training. The Task Force recommends that training should be formalized as a requirement so that no contractor can function as a surrogate VBA counselor or service provider until they have been accredited through this training program.
- ***Training for veteran service officers on VR&E benefits, regulations, policies, and processes.*** Task Force interviews with veterans service organization (VSO) representatives at several ROs highlighted the need for VSOs to be better informed about VR&E program benefits and associated work processes. VSOs do not appear to have the same level of knowledge and understanding of the VR&E program as they do for C&P. This is particularly the case for employment services. The VR&E Service in coordination with the VSO community should consider developing a training course and program on benefits and processes for VSO representatives.

“ The current National Contract statement of work has not adequately addressed standards of performance.”

Professional Education and Accreditation

The VR&E Blue Ribbon Panel made several recommendations related to requirements that VR&E provide professional training and development for staff. The Task Force is also concerned about the need for VBA to invest in professional education for the VR&E staff. We believe that VR&E CO has not been successful in implementing previous recommendations on professional education because of a lack of understanding by VBA on the need for professional continuing education, inadequate VR&E Service resources dedicated to training management, and limited budgets to fund programs.

The VR&E staff should be on the cutting edge of 21st Century counseling, employment, rehabilitation knowledge, and technology. To that end, the VR&E Service should develop an institutional capability to provide a program of continuing professional education developed by the VR&E Service, leverage VHA professional education programs, and use continuing education programs administered outside of VA. VBA should fund this professional education program and implement policies to allow use of administrative leave to attend continuing professional education events.

In developing this program, the VR&E Service should also consider the advantages of accreditation by the Commission on Accreditation of

Rehabilitation Facilities (CARF). Accreditation offers some advantages. However, it may be premature to make the decision to pursue accreditation at this time. As discussed in this report, the VR&E Service has limited capacities for planning and implementation of change and projects. In terms of relative VR&E Service priorities, we suggest that accreditation should not be viewed as a near-term tactical priority or a critical strategic need.

As an interim strategy, the Task Force recommends that VR&E CO establish a formal relationship with CARF for technical assistance to support a variety of improvement efforts. This technical assistance should include the design of a sustainable professional education program. We note that VHA has a long-standing relationship with CARF so this would be a broadening of an existing VA relationship. We recommend that VBA provide some funding to initiate this effort in FY 2004.

The Task Force also recommends that VR&E CO establish more formal relationships with Schools of Vocational Rehabilitation to leverage their capabilities to be part of the team effort to create and sustain this professional education program. This effort should be tied to a VR&E CO initiative to identify to these schools the future skills, knowledge, and abilities that VR&E counselors will need to deal with 21st Century veterans and their needs. Based on the anticipated attrition of VR&E counselors and the small number of schools of vocational rehabilitation, VR&E may have leverage to influence curriculum design.

An integral part of this effort should include use of the capabilities of the VBA Technical Training and Evaluation staff to perform an analysis of the knowledge, skills, and ability requirements for counselors and rehabilitation specialists to deal with 21st Century veterans. This analysis is also essential to size the future workforce in terms of skills and skills mix. (See Recommendation on Workforce.)

IC-6 Resource Management

- Develop an improved VR&E Resource Requirements Model. (Mid to Long-Term)
- Modify the VR&E Resource Allocation Model to base contract funding on the forecasted estimate of the volume and types of services and the actual unit cost history for those services at each RO. (Mid-Term to Long-Term)
- Provide the VR&E Service Director some measure of control over the allocation of resources. (Near-Term)
- Restrict the authority of RO Directors to redirect VR&E funds. (Near-Term)

DISCUSSION – RESOURCE MANAGEMENT

The Task Force commends the Office of Field Operations (OFO) for taking the lead in trying to improve the methodology for allocating VR&E FTE and contract dollar resource requirements. However, several concerns need to be addressed.

Resource Requirements

The VR&E Resource Allocation Model bases FTE allocations primarily on workload, but also recognizes the requirement to allocate FTE to support succession and training. However, this model is based on assumptions that may be highly uncertain. There are three key assumptions of concern. These assumptions are that the size of the current workforce is appropriate to the workload and level of performance, the professional staff ratio of 1 to 100 cases is a valid basis for planning, and the workload is a basis for determining the allocation of contract funding.

As noted previously in this report, there is limited analytical data to support comprehensive analysis of the VR&E workload. In 1983, the VR&E Service abandoned the use of its End Product code work measurement system. This system was based on the same concept still used by the C&P Service to manage its workload. The VR&E End Product code system was replaced with a case status approach that limited the visibility and tracking of VR&E's discrete workload. This resulted in a reduced emphasis on workload and productivity management. While the most recent focus on

VR&E resource allocation is a positive step, there does not appear to be data to relate the current size of the VR&E workforce to a workload and productivity baseline. In other words, there is no data to support the assumption that the workforce is appropriately sized.

“ The Task Force commends the Office of Field Operations (OFO) for taking the lead in trying to improve the methodology for allocating VR&E FTE and contract dollar resource requirements.”

Based on discussions with VR&E staff, the professional staffing ratio of 1 staff member to each 100 cases appears to be based on anecdotal information that is frequently used in social service case management settings for estimating workforce requirements. This raises the question as to whether or not such a ratio is the appropriate basis to use in allocating constrained resources. While this ratio may be appropriate as an initial departure point for planning, Task Force fact-finding in the field did not uncover VR&E data to suggest that this is an appropriate factor for use in this model. The Task Force found significant variations in caseload per staff member within VR&E Division offices and nationwide. Further, there appears to be significant differences in the content of work performed for different type cases. If the planning ratio is appropriate, then the actual requirements for VR&E staff exceed the current FTE allocation.

The Office of Field Operations (OFO) has made a good faith effort to understand the VR&E workload and deal with how best to allocate constrained FTE resources among the ROs. However, the resource allocation model is not a requirements model. The fundamental dilemma faced by OFO is that VR&E does not have valid workload requirements and productivity models to provide information to estimate total resource requirements. As addressed in Recommendations on Workforce, significant work must be undertaken by the VR&E Service to develop the analytical baseline for determining workload requirements and productivity. As part of this effort, the Task Force encourages the VR&E Service and OFO to jointly develop appropriate resource allocation methods based on new workload and productivity models. This effort must

also take into account the recommendations of the Task force concerning the implementation of the five-track service delivery system and strategy.

Allocation of Contract Funds

The FY 2001 VA budget transferred \$30 million from the Readjustment Benefits account to the General Operating Expense (GOE) account. The purpose of this funds transfer was to finance VR&E's contracted workload and to allow ROs to have the option to "buy" additional FTE positions. Allocation of funds to the ROs to purchase contract services was based on the ROs percentage of the national VR&E workload. The proposed allocation of contract funds for FY 2004 is also based primarily on the percentage distribution of the VR&E national workload.

There are risks in basing the allocation of contract funding solely on the percentage of workload. An allocation formula based on workload may be appropriate if the cost and distribution of contract services are the same in all ROs, but that is not the case based on Task Force analysis of the VR&E National Contract Strategy. The current model formula may create inequities in dollar allocations because of the wide nationwide variation in contract costs for the same type of contract services. While one RO may be allocated more "contract dollars" than another RO, the actual costs for services at the first RO may be higher than the costs at the second RO. The result is that the first RO may actually provide a lower volume of contract services than the RO that has a smaller allocation of "contract dollars." This situation may have led to some of the issues associated with VBA's concerns about utilization of contract funds. As reported to the Task Force during interviews, this problem often shows up in the field at the end of the year as unobligated funds and the need to reprogram funding to support RO contract requirements.

The OFO may want to consider modifying its Resource Allocation Model for contract services to a methodology based on the forecasted estimate of the volume and types of services and the actual unit cost history for those services at each RO. In order for OFO to modify this model, the VR&E Service should take action to develop the data and information necessary on the volume and type of contract services. VR&E Division offices should be able to make reasoned estimates of the number and types of services by fiscal year. This effort will require that the VR&E Service and VR&E Officers make explicit decisions about the contract services strategy nationwide and at the RO; use this data to track how the actual utilization of services compares to estimates; and use this information to develop a management system for effective use of contract services resources.

As noted elsewhere in this report, CWINRS does not currently have the functionality to provide data on the number and type of contract services by RO. Additionally, there is no alternate data collection system to provide visibility and management of actual delivered contract services. Until such time as a system solution through CWINRS can be implemented, the VR&E Service should consider developing guidance and direction for the ROs to routinely collect and report data on the volume and types of contract services delivered along with unit costs. The VR&E Service should consider instituting on-going analysis

of this nationwide data and information as well as provide visibility of this information to RO Directors and VR&E Officers. This information should also be used to inform VBA decisions about resource allocation and the strategy for use of contract services.

VR&E Service Control of Resources

As understood by the Task Force, the VR&E Service Director has virtually no control over allocation of resources to execute the VR&E mission. As a result, there may be a disconnect between VR&E Service development of policy and its implementation in the field. While the VR&E Service may develop appropriate policies and initiatives, the current resource allocation and control process does not allow the Service Director to make the life-cycle resource decisions to execute those policies and service delivery changes. It is possible that this is one of the contributing factors to the inconsistency in administration of the program and the problems of accountability within VR&E. The Task Force also heard numerous complaints from the field that funds allocated to support VR&E Division offices are often redirected to other offices within the RO. The Task Force was not able to determine the degree to which this has been the case.

It is clear that the VR&E Service Director does not have the visibility and some measure of control over resource allocation to the field that is necessary to ensure consistent administration of the program and execution of comprehensive changes. Implementation of the recommendations of the Task Force will require additional funding and tight linkage of this funding and the initiatives arising from these recommendations if VR&E is to be successful. At least in the near-term, VBA should consider providing the VR&E Service Director greater visibility and control over funds allocation (including contract funds). This action should also include restrictions on RO's redirecting VR&E Division resources.

IC-7 Program Analysis and Evaluation (PA&E)

- Defer the VA Program Evaluation of the VR&E Program scheduled for FY 2005; first invest in rebuilding VR&E Service data and analysis (strategic and operational) capabilities. (Long-Term)
- Develop and fund a short and long-term research and study agenda on VR&E served veterans and program outcomes. (Long-Term)
- Develop and fund efforts to develop a set of evidenced-based practices to guide development and implementation of VR&E policies, procedures, and policies. (Near-Term)

“ As understood by the Task Force, the VR&E Service Director has virtually no control over allocation of resources to execute the VR&E mission.”

DISCUSSION – PROGRAM ANALYSIS AND EVALUATION

For the purposes of this report, the Task Force uses the term PA&E to refer to a broad range of strategic and tactical data-centric functions that we believe are essential if VR&E is to improve its planning, service delivery, and operations management capacities. These functions include strategic and policy analyses, program evaluation, research to develop evidence-based practices, program

evaluation, veteran demand forecasting, and analysis of field operations. VR&E is not a data-centric organization. Task Force direct observations of daily VR&E CO activities, interviews with staff, and review of previous reports make it clear that over the past decade VR&E Service leadership has placed less and less emphasis on the collection of data and its analysis to influence decision makers. The report has documented this theme repeatedly. This trend began in 1983 when the VR&E Service abandoned the End Product code system and the associated workload and productivity management systems were no longer populated with detailed data for analysis of the process. This trend continued into the 1990s when the VR&E Service leadership abandoned the quality review process and ceased the systematic analysis of operations. This trend was continued into this decade with the introduction of CWINRS where there has been limited use of the data and information that is available from the system to provide enterprise-wide oversight and management of the workload.

The VR&E Service is now in the situation where a concerted and priority VA effort is necessary to rebuild the analytical capabilities of the VR&E organization. This effort is essential if the VR&E Service and field offices are to have ready access to the data and information needed to make the strategic and tactical decisions necessary to forecast and manage the workload and then to assess the outcomes of the program. A number of recommendations appear in the report that address specific actions that need to be taken. Actions are required 1) to develop and implement a new workload forecasting and management system, 2) implement a new productivity management system to include estimation of workforce requirements, 3) an improved performance measurement system, and 4) information technology capabilities to enhance the access to use of available data. VA should support these and the following actions on a priority basis with funding and departmental expertise.

The Task Force recommends that VA defer the VR&E Program Evaluation scheduled for FY 2005. In our view a full, formal evaluation is premature given the state of data and analysis within the VR&E Service. It is clear that there is minimal aggregate information available about the demographics, characteristics, and diagnostic categories of participants, or other positive rehabilitation outcomes that have resulted from participation. VA should defer the evaluation for now and facilitate building the capabilities necessary to support VR&E operational and program analysis and evaluation.

There is a critical need to develop a short-term and long-term research and study agenda to advance the knowledge and understanding of the VR&E veteran population and the long-term outcomes of the program. Research and study projects should include:

- Tracking and monitoring the vocational rehabilitation and long-term, multi-year employment outcomes of Enduring and Iraqi Freedom disabled veterans. This effort should begin immediately.
- Assessment of the vocational rehabilitation and employment outcomes

of VR&E served veterans who have mental health disabilities. The VR&E Service may want to consult with the VHA Northeast Program Evaluation Center (NEPEC) to conduct this study given their experience in the evaluation of mental health programs.

- Analysis of the causes for veterans interrupting or discontinuing vocational rehabilitation and employment programs and identification of interventions to mitigate the risks of veterans leaving the program.
- Development and implementation of a series of longitudinal studies that track the outcomes of specific cohort groups of disabled veterans as they go through the VR&E program and then over the life cycle to assess long-term, multi-year outcomes.
- Expansion of the 1999 VR&E “Quinn Report”² methodology to develop and regularly update a comprehensive set of statistics on the population of veterans served by the VR&E Program.

As previously discussed in this report, the VR&E Service is an island within the larger disability and employment of persons with disabilities community. This may be one reason why many of the VR&E staff interviewed lacked familiarity with research done within VHA and outside VA on rehabilitation and employment of persons with disabilities.

There are also concerns that the VR&E Service may not be basing its policy and process decisions on evidenced-based practices. In VHA, the Office of Research and Development (ORD) oversees four areas of research including laboratory science, clinical science, health services, and rehabilitation. The VR&E Service should consider establishing a collaborative effort with the rehabilitation section of ORD and the research function the Task Force proposes be created within the VR&E Service (See Recommendation on CO Organization.) to study the impact of varying VR&E services on outcomes with the goal of adopting evidence-based practices.

¹ The purpose of this guidance was to inform states and grantees of the Employment and Training Administration’s policy on common performance measures for federal job training and employment programs. These common performance measures were developed from guidance expressed in OMB Director’s Memorandum M-02-06. This document is on the DOL Website at http://wdr.doleta.gov/directives/corr_doc.cfm?DOCN=1535

² As discussed in Chapter 3, in 1999 VBA produced the Quinn Report, which was named after the requestor—Congressman Jack Quinn (R-NY). The report’s data were arrayed in many formats, such as gender, disability rating, educational level, length of service, and others.

Chapter 7

Moving Forward: The Need for Change

The Task Force is convinced that the VR&E Service and Program must be rebuilt, not merely “tinkered with” or changed along the margins – in fact, it must become a totally new service and program for disabled veterans to achieve success in the 21st Century. In the view of the Task Force there are six principal reasons why VA should transform the VR&E Service and Program now, not later.

- The U.S. is at war. The treatment of our injured service members and their seamless transition and rehabilitation to achieve their quality of life and employment goals must become cardinal priorities. In this environment, vocational rehabilitation must take on a greater sense of urgency as the organizing paradigm for focusing the attention and resources of VA to achieve the ultimate goal of successful transition and employment for service-connected disabled veterans.
- This sense of urgency has never been more acute than now. The VR&E Service is facing a new challenge: the thousands of Guard and Reserve personnel who have been mobilized from their civilian jobs and who will return directly to employment or to college. Many of our injured are mobilized Guard and Reserve service members who bear the additional burden of perhaps having to make a career change. The VR&E Service and Program must be more responsive to meeting their needs now and in the future.
- Significant numbers of veterans – in war and during peacetime – will continue to experience illnesses or impairments that impact their lives forever. The advances in medical rehabilitation, biomedical technology, rehabilitation engineering, and assistive technology will enable many disabled veterans who were not previously employable to now be employed and for them to be employed for longer periods of time after military service than in previous generations. These factors coupled with the shift to the services and knowledge-based workplaces as well as the dynamics of those workplaces mean that veterans may need new and varied employment-driven services more than one time as they cycle through any number of jobs over a sustained post-military career. The VR&E Service and Program must be modernized to be on the leading edge – even breaking new ground – in leveraging 21st Century technology and knowledge to improve the life of disabled veterans.

- After every war, programs must adjust to the needs of the new veteran and the environment. The structure of the VR&E Program and its process are now out of sync with providing the type and timeliness of employment-driven services needed today and in the future because of the economic shift that has impacted the 21st Century labor market. This shift has reduced the demands for physical labor in favor of service and knowledge-based skills. Additionally, the dynamic nature of the labor market – high turnover rate of jobs, industries, and career fields – places a premium on providing rapid employment services to disabled veterans, which the current VR&E process is not designed to provide.
- The VR&E Program is also out of sync with 21st Century attitudes towards persons with disabilities. The economic shift has marched in tandem with a seismic shift in societal attitudes toward persons with disabilities, especially since the passage of the Americans with Disabilities Act (ADA) in 1990, the world’s first comprehensive civil rights legislation for people with disabilities. Twenty-first Century views of disabilities have shifted from the negative aspects of *disabilities* to a focus on the *abilities* of persons with disabilities with a rapid return-to-work strategy.

Employers place a value on the capabilities of a person to perform a job and less on what a veteran cannot do because of his or her disability. In today’s labor market, sidewalk curb-cuts, employer education and support of job accommodations, adaptive techniques and technology, and opportunities for persons with disabilities to achieve a better quality of life – to be included, not excluded, from the mainstream – are becoming the norm. The “world of disability” has dramatically changed. While the larger disability community has made the adjustment to these changes, the VR&E Program has not done so. To a large extent, the VR&E system has been doing business using the same approach within the same paradigm and work process for more than 40 years. The VR&E paradigm must change or it will become more and more outdated.

- Strong indicators point to the fact that the current VR&E program, organization, and traditional vocational rehabilitation process are stressed. These signs include: high caseloads among the VR&E staff; increasing demand for both vocational rehabilitation training and independent living services; essential functions of employment readiness, job placement, and marketing not performed either adequately or in a standardized way across the system; and veterans dissatisfied with the current level of employment services. Veterans deserve to be served by a service delivery process that is effective – doing the right thing – and efficient – making the best use of available resources.

Priority Actions to Build a 21st Century VR&E Service and Program

VA must rebuild VR&E for the 21st Century by making systemic changes in the infrastructure, programs, staffing, technology, and the processes by which services are delivered to service-connected disabled veterans. The recommendations contained in this report are comprehensive and reflect the

scope and detail of those activities that are necessary to provide a systems solution to meeting these 21st Century challenges for successful transition of disabled veterans back to their communities and into employment. The task for VA is that these changes must be tackled in their entirety – the new employment-driven system cannot be implemented piecemeal. The changes the Task Force is proposing must be addressed as a whole.

As VA meets this challenge, the Task Force offers our recommendations on a set of priorities that VA may want to consider in prioritizing resource allocations and setting a management agenda for implementing these changes. We believe that VA should consider focusing on these five priority actions:

- Build VR&E Service Central Office capacities to lead, manage, and execute the elements of change. This is a key precedence and pacing action. It is critical that current capacities be enhanced and new capacities be created first before proceeding with change or change will proceed with increasing risk.
- Make changes in the VR&E program to streamline eligibility; to resource, plan, and execute the Five-Track Employment Process; and to plan and execute the Functional Capacity Evaluation pilot project. We recognize that some time will be required to put in place the requisite legislative, regulatory, and policy changes to fully implement the proposed eligibility changes. In the meantime, we encourage VA to use existing legislative and policy authority to provide interim guidance to begin making these changes in the VR&E process.
- Fund telecommunications for out-based VR&E sites to improve processing and productivity using CWINRS capabilities; take actions to rapidly upgrade the user and report functionality of the CWINRS system.
- Standardize the VR&E work processes and implement a specialization-based approach to more effectively and efficiently use the workforce.
- Conduct an implementation review of the recommendations contained in this report 6 months after the report is issued.

These recommendations must be approached with a heightened sense of urgency and proactive leadership and management to get ahead of the challenges of serving disabled veterans in the 21st Century. The Task Force has been impressed with the hard work and commitment of the VR&E staff and VA's new leadership. We extend our gratitude to the many staff and individuals in the fields of rehabilitation, business, academia, and disability who have assisted with our report. We should always be guided in our purpose and commitment by the challenge that Secretary gave the Task Force when we started:

"...Disabled veterans are the reason VA exists...veterans are not well served if their servants adhere to once sound doctrines rendered obsolete by changes in our society, economy and in the population we serve."

More Challenges Await: A Final Word from the Task Force Chairman

Addressing the benefit, rehabilitation, and employment needs of persons with disabilities – and especially veterans with service-connected disabilities – continues to be difficult, and often controversial. One thing is certain: The Department of Veterans Affairs cannot afford to fail the veteran who has given so much in the service of our Nation in previous wars and now in this age of terrorism.

There is no doubt in my mind that VA's Vocational Rehabilitation and Employment Program can become the *best* public rehabilitation program in the country, given appropriate resources and leadership. The new comprehensive, integrated 21st Century VR&E Employment-Driven Delivery System, which is proposed by the Task Force, builds on the strengths of the past and provides a continuum of service delivery, from military service to career counseling, appropriate retraining, and education, to employment or transitional independent living services with the ever-present goal of employment. The new system can provide the answer to a disabled veteran's transition to civilian society – a job.

A commitment by the Department of Veterans Affairs to modernize its Vocational Rehabilitation and Employment program will necessitate a major shift in attitude and approach. The current reality is that the VR&E program – despite the legislation of 1980 – continues to operate as a VA education benefit for disabled veterans. It provides a larger stipend than the GI Bill program, and is accompanied by some counseling, as necessary. The new program, on the other hand, addresses the continuum of “life cycle” needs that a veteran with disabilities experiences, of which education may – or may not – be a necessary part. The focus will be the rehabilitation and employment needs of the 21st century service-connected disabled veteran.

Because the United States is at war, and will likely be in conflict situations for the foreseeable future, *there must be a sense of urgency* on the part of the entire Department as well as the Vocational Rehabilitation and Employment Service to create this new 21st century service delivery system.

I respectfully suggest that no more reports or discussions are needed, just immediate and concrete actions that are supported by the Administration,

“I respectfully suggest that no more reports or discussions are needed, just immediate and concrete actions that are supported by the Administration, the Department, and the Congress.”

the Department, and the Congress. If this vital program, with its potential for becoming the most outstanding vocational rehabilitation system within the federal government, is unable to quickly and effectively serve the 21st Century veteran, then one must consider other options. These options include: 1) contracting the program out with clear and stringent requirements to follow the employment intent of the law, or 2) recognizing that the mandated employment focus of the program is not possible and re-integrating VR&E into the Education Service of the Veterans Benefits Administration, adding an additional stipend for disabled veterans.

Having served in various state and federal governmental positions, including Commissioner of Social Security and Assistant Secretary of Human Development Services, I have worked with numerous social services policies and programs. Cash benefit services, such as the VA Compensation and Pension Service or Social Security provide support through direct payments. These programs require development of automated claims processing methodologies. Direct and personal services are those provided by VR&E or social service agencies. Different skills, personalities, and approaches are needed for each part of the delivery system. VR&E stands as an island in the sea of the Veterans Benefits Administration, a claims processing organization. VR&E is not connected to the claims processing functions, nor do other business lines have any particular appreciation or understanding of its function. Both cash and direct benefits are needed to support the veteran. Development of a seamless, integrated delivery system is the challenge.

Many have suggested that the entire VR&E program should become a part of the Veterans Health Administration, which has more of a hands-on service delivery focus. Just as the Task Force rejected the idea of moving the VR&E Independent Living program to VHA at this time, that same thinking can be applied to moving all of VR&E to VHA. VR&E needs to address its own shortcomings

first, wherever it is housed, before participating in another reorganization.

“Building the new service delivery system cannot be done slowly, nor sequentially.”

If implemented with commitment and enthusiasm, the Task Force’s recommendation to rebuild the VR&E Service can be successful. Building the new service delivery system cannot be done slowly, nor sequentially. It must be driven

with clear and focused timeframes; and it must be done believing that each veteran’s future depends upon an effective new approach. Leadership and management will be key; timeframes that some may deem unreasonable should become standard; processes must be streamlined and supported by technology; and veterans must recognize that they, too, have an individual responsibility to complete their vocational rehabilitation plan and secure employment in a timely manner.

Future Policy Considerations

Throughout the discussions and deliberations of the Task Force, several broad policy issues were raised that were not thoroughly addressed, either because they were not directly within the scope of this Task Force’s work or, in several

cases, they were far more complex than our time permitted. Some issues were just too controversial at this particular point in time, but their “tipping point” will come and thoughtful policymakers and managers should be prepared to consider their breadth, shape, and impact upon VR&E. As the Veterans Benefits Administration proceeds to modernize VR&E, these longer term policy considerations, which cross the business lines of VBA, should be discussed and addressed. Each issue below will arise in the foreseeable future; each issue will have a significant consequence for the successful future of a 21st century VR&E program.

Role of Counseling and Transition Assistance in the Veterans Benefits Administration

Historically, VBA had a focus on personal counseling about requested benefits and services through face-to-face contact with the veteran. Today, the Compensation and Pension Service provides outreach services to veterans through the Veterans Service

Centers but the focus is “you are entitled to benefits from the VA and here is the claim to file.” This is not counseling in the traditional sense, rather a method to ensure that veterans receive cash benefits to which they are entitled. Since the VR&E Program is the only benefit that is provided face-to-face to the veteran, VR&E, with its professional counseling staff, should provide all outreach services to veterans, regardless of whether or not the veteran is disabled. A veteran with financial or life cycle or any other issues should be able to access counseling services at a VR&E office. Such a policy may necessitate additional resources beyond what is recommended at this time to rebuild the VR&E program.

“Some issues were just too controversial at this particular point in time, but their “tipping point” will come and thoughtful policymakers and managers should be prepared to consider their breadth, shape, and impact upon VR&E.”

Need for New Programs

This report highlights the need for clear and comprehensive data about the population that is served by VR&E. Without such data, as well as research, we will not be able to project who the service-connected disabled veterans of the future will be, nor what their needs will be. Questions that should be addressed include:

- Will their injuries and disabilities be considerably different than those of recent veterans?
- Will the technology used on battlefields or in medical rehabilitation impact more significantly the veteran’s future ability to be a productive member of civilian society?
- How will medical advances, as projected by the Institute of Medicine or the National Institutes of Health, impact the VR&E program?

The Task Force’s analysis of types of disabilities of veterans entering the VR&E program found that the number of veterans determined disabled due to neuropsychiatric illnesses is increasing. The increase in mental conditions is also being seen by other public benefit programs such as Social Security Disability Insurance. It appears that the majority of veterans in the Independent

Living program are those with Post-Traumatic Stress Disorder (PTSD). Yet, as this report clearly states, Independent Living status within the VR&E program should not be the sole response to their needs. An assessment of the impact of an increased number of mental health disabilities on the VR&E services should be conducted as soon as possible. The outcome will likely conclude that new programs should be developed jointly with VHA to address the needs of these veterans. Of equal importance will be the development of a methodology that guides how VR&E interacts with VHA to plan for new solutions to disabling conditions.

Impact of an Aging Veteran Population on Services

Every social services delivery policymaker is well aware of the general aging of the population. The question should be raised as to the expected impact of the graying of veterans upon VR&E. Issues such as the aging of the general workforce could mean less discrimination against older veterans in the workplace and therefore more older applicants for VR&E services. As veterans age, many are filing additional claims for disability compensation, and many may initiate or renew their requests for VR&E services. VR&E should be proactive in addressing at least the following questions: Should VR&E accept all disabled veterans regardless of age? Is age a criterion for prioritization of expected services? How should VR&E balance its resources vis-à-vis age of applicant and number of times services have been requested?

Impact of Disability Determination

The VA disability benefits adjudication system has been the subject of discussion and controversy for many years. Congress recently established, as part of the 2004 Defense Authorization Act, the Veterans' Disability Benefits Commission to study the compensation benefit structure and complete a report in 2005. They are directed to examine the appropriateness of such benefits and the appropriate

“Ideally the Commission’s deliberations will provide a framework for many policy decisions related to the VA’s disability criteria that will be updated to reflect the current state of science, medicine, technology and labor market conditions.”

benefit determination standards, compare veterans’ benefits with other public and private sector disability benefits and, perhaps most important, “consult with Institute of Medicine of National Academy of Sciences with respect to medical aspects of contemporary disability compensation policies.”

Ideally the Commission’s deliberations will provide a framework for many policy decisions related to the VA’s disability criteria that will be updated to reflect the current state of science,

medicine, technology, and labor market conditions. Such recommendations could be the catalyst that moves veterans’ disability policy toward use of scientific advances and incorporates economic and social changes that have already redefined the relationship between impairments and the ability to work within the private sector. Such discussion and modern approaches could significantly impact the workload and processes of VR&E.

For example, currently there are nearly 175,000 veterans with a 60 percent or more disability rating who have applied and receive a determination that they are “Individually Unemployable.” The designation of “Individually Unemployable” entitles the veteran to a 100 percent rating with commensurate compensation. Yet the adjudication process never includes the views of a vocational rehabilitation counselor as to whether or not the beneficiary could participate in the labor force or whether a strong vocational rehabilitation or counseling program would be effective in assisting the veteran achieve employment, perhaps using assistive technology or other types of supports. The questions that are raised are: Without input into the IU determination process from a trained rehabilitation expert, should IU veterans or those applying for IU status be served by the VR&E program? How can an individual be officially designated “unemployable” (a label that should be an anathema) and allowed to participate in an employment program at the expense of another veteran who wants and needs a job?

It is recognized that over the years, the Congress and the courts have expanded the scope and complexity of veterans’ disability benefits. It is hoped that the Commission will conduct a thorough review of the benefits schedule and challenge the status quo. They might begin by asking how a tender scar, migraine, or mild asthma can be the sole “disability” for which a veteran receives compensation according to a rating schedule and is thereby automatically eligible for VR&E services, in the same manner as a severely-disabled veteran.

The GI Bill for the Future

The Task Force learned that more than 75 percent of those who enter the VR&E program proceed through a rehabilitation plan that includes a goal of a college degree. Though the data is not clear, one can assume (given the number of discontinued and interrupted participants) that most veterans spend far more than 4 years attaining their degree. Equally important, most of these “students” never exhausted their GI Bill benefits. One assumes that is because the VR&E education benefits are considerably more generous than the current GI Bill. This pattern raises some questions: Does this mean that deficiencies exist in the current GI Bill? Or are veterans with disabilities just looking for the best deal? Should there be changes in the GI Bill that might make it more appealing to veterans with disabilities? What should they be?

In 1998, the then Vocational Rehabilitation and Counseling Program wrote a strategic management document that addressed the reasons that the program desperately needed to change in order to provide effective services to disabled veterans. The reasons for change were:

- Inadequate focus on employment,
- Customer perceptions and expectations are out-of-step with the program’s intent,
- Inability to monitor outcomes and provide feedback to the program;
- Inadequate IT support for the program,
- Inadequate access for veterans,
- Inadequate coalitions with peer organizations and partners, and
- Inefficient business processes.

Despite such introspection, not much has changed. This 2004 Task Force Report not only urges management to rebuild the VR&E program but also provides a clear road map as to how to accomplish the objective. There is no excuse for lack of success.

The Charge

Unfortunately, there are not as many successful social service delivery programs as one would like. Positive outcomes for adults, as measured by an individual's

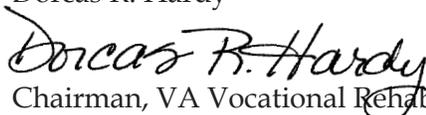
"...I believe the mighty band of nearly 1,000 VR&E staff has the resourcefulness and dedication to build a new service delivery system for veterans with service-connected disabilities."

independence and employment, are often difficult to attain. But I believe the mighty band of nearly 1,000 VR&E staff has the resourcefulness and dedication to build a new service delivery system for veterans with service-connected disabilities. With leadership, appropriate resources, a broad and creative approach, and what I term "cheerleading support," *they can reinvent themselves, they can get energized, and they can be the best program serving the 21st century veteran.* VR&E can become the model public sector

rehabilitation and employment program – and just in time for those 21ST Century service members returning from Iraq, Afghanistan, or anywhere else in the world where freedom calls.

It has been a privilege to chair this Task Force and present our report.

Dorcas R. Hardy


Chairman, VA Vocational Rehabilitation
and Employment Task Force

Appendices

	Page
1 Task Force Charter	A-1
2 Task Force Membership Information	A-3
3 Agenda for Fact-Finding Sessions	A-7
4 Site Visit Agenda and Survey Guide	A-13
5 Comments from VR&E Staff	A-19
6 Summary of Past Reports and Recommendations	A-27
7 Comments from 2002 Veterans Satisfaction Survey	A-31
8 Federally-Funded Employment Programs for Veterans	A-37
9 Legislative History	A-39
10 Overview of Title 38 Chapters	A-41
11 Description of Five-Track Employment Process	A-49
12 Draft Job Descriptions for New Positions	A-69
13 Technical Guidance for Online Employment Services	A-77
14 Best Practices	A-87
15 Draft Memorandum of Understanding with State VR Administrators	A-97
16 Index of Recommendations: Implementation Timeframe	A-101
17 Acronyms	A-115
18 Glossary	A-117
19 Bibliography	A-127

Appendix 1

Task Force Charter

DEPARTMENT OF VETERANS AFFAIRS VOCATIONAL REHABILITATION & EMPLOYMENT (VR&E) TASK FORCE CHARTER

- A. **OFFICIAL DESIGNATION**: Department of Veterans Affairs (VA) Vocational Rehabilitation & Employment Task Force
- B. **OBJECTIVES AND SCOPE OF ACTIVITY**: The Task Force will conduct an independent review of the Vocational Rehabilitation & Employment (VR&E) Program within the Veterans Benefits Administration (VBA). The Task Force will make recommendations to the Secretary of Veterans Affairs on improving the Department's ability to provide comprehensive services and assistance to veterans with service-connected disabilities and employment handicaps in becoming employable, and obtaining and maintaining suitable employment. The Task Force will also assess independent living services provided by VR&E.
- C. **PERIOD OF TIME NECESSARY FOR THE TASK FORCE TO CARRY OUT ITS PURPOSES**: The Task Force recommendations shall be submitted in writing to the Secretary approximately 120 days after the Task Force is established.
- D. **OFFICIAL TO WHOM THE TASK FORCE REPORTS**: The Task Force will report its findings and recommendations to the Secretary of Veterans Affairs.
- E. **AGENCY RESPONSIBLE FOR PROVIDING THE NECESSARY SUPPORT FOR THE TASK FORCE**: The Veterans Benefits Administration will provide administrative support as required for the Task Force. The Veterans Health Administration and VA Staff Offices will provide pertinent information and support as necessary. The executive director of the Task Force, appointed by the Secretary, is assigned the responsibilities of the Designated Federal Official (DFO).

The VR&E Task Force members will be selected for expertise in organizational assessment, functional analysis, and improving operational processes within the context of vocational rehabilitation and employment services. Attention will be given to equitable geographic distribution as well as to ethnic and gender representation.

Department of Veterans Affairs
Vocational Rehabilitation and Employment Task Force
Page 2

F. **DUTIES FOR WHICH THE TASK FORCE IS RESPONSIBLE:**

The duties and responsibilities of the Task Force will focus on training, employment, and independent living services. The Task Force will engage in the following activities: (i) conduct a functional and organizational assessment of the Vocational Rehabilitation and Employment Service; (ii) evaluate eligibility criteria, procedures, and processes for determining how a veteran is approved for training, employment, or independent living services as governed by applicable provisions of Chapter 31 of title 38, United States Code; (iii) appraise current VR&E processes, information systems, and management controls; (iv) determine consistency in the administration of the VR&E Program across VBA regional offices; and (v) examine clinical rehabilitation practices and employment placement services being utilized by other Federal, state, local or private organizations serving disabled persons, including veterans.

G. **ESTIMATED ANNUAL OPERATING COSTS IN DOLLARS AND**

FTE: The estimated cost of operating the VR&E Task Force is \$450,000 and 2 FTE.

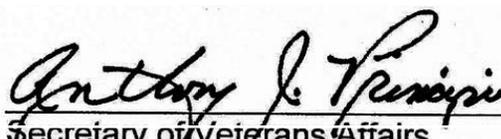
H. **ESTIMATED NUMBER AND FREQUENCY OF MEETINGS:**

The Task Force will meet as frequently as necessary to accomplish its mission. It is expected that the Task Force will hold 6-8 meetings. A Federal government official will be present at all meetings. All meetings of the Task Force shall be held in conformance with the requirements of the Federal Advisory Committee Act

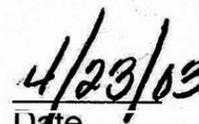
I. **TASK FORCE TERMINATION DATE:** The Task Force will terminate not later than one year after it is established.

J. **DATE THE CHARTER IS FILED:**

Approved:



Secretary of Veterans Affairs



Date

Appendix 2

Task Force Membership Information

Members	Honorable Dorcas R. Hardy Task Force Chairman President, Dorcas R. Hardy & Associates Former Commissioner of Social Security Administration Spotsylvania, VA	Ronald W. Drach, Director Strategic Planning and Legislative Affairs DOL Veterans' Employment and Training Service Washington, DC
	Peggy Anderson State Coordinator Employer Development Alabama Dept. of Rehabilitation Services Birmingham, AL	Michael H. McLendon President, McLendon & Associates Athens, GA
	John C. Bollinger Deputy Executive Director Paralyzed Veterans of America Washington, DC	Malcolm H. Morrison, Ph.D., Consultant President, Morrison Informatics Mechanicsburg, PA
	Theresa B. Boyd Senior Consultant for Rehabilitation, VBA Washington, DC	Edward R. Reese, Jr. National Service Director Disabled American Veterans Washington, DC
	Anthony B. Campinell, Ph.D. Associate Chief Consultant VHA Psychosocial Rehabilitation Programs Lowell, MA	Sue Suter, Consultant Former Commissioner Rehabilitation Services Administration Department of Education Bethesda, MD
	Patrick F. Chorpenning, Director Arizona Department of Veterans' Services Phoenix, AZ	Douglas B. Wadsworth, Director VBA Regional Office Salt Lake City, UT

Staff	John R. O'Hara Task Force Executive Director VA Office of Policy, Planning, and Preparedness Washington, DC	Jack E. Hudson VBA Liaison to Task Force Deputy Director VBA Tiger Team Cleveland, OH
	Patricia B. Wood Task Force Editor-in-Chief Senior Advisor Social Security Administration Washington, DC	Terrence Graham Management Analyst VA Office of Policy, Planning, and Preparedness Washington, DC

Member Bios

Dorcas R. Hardy is President of Dorcas R. Hardy & Associates, a government relations and public policy firm serving a diverse portfolio of clients in the health services, insurance, and financial industries. Primary interests of the company include seniors' marketing strategies, entitlement reform policies, and retirement and disability financing. As U.S. Commissioner of Social Security from 1986-1989, she was the Chief Executive Officer of the nation's social insurance programs, responsible for providing monthly income to more than 40 million people at an annual cost of nearly \$400 billion, with 67,000 employees. Ms. Hardy also served as Assistant Secretary of Human Development Services for the U.S. Department of Health and Human Services and was Chairman and President of a Tucson rehabilitative technology company. She is a member of the Virginia Board of Rehabilitative Services and a writer and advisor to *Stroke* magazine.

Peggy Anderson is State Coordinator of Employer Development, Alabama Department of Rehabilitation Services. She also serves as their Americans with Disabilities Act (ADA) coordinator and sits on the executive leadership team. She is a regional and national consultant on employer partnerships, disability management issues, and employment of people with disabilities to rehabilitation organizations, government entities and private sector employers. Ms. Anderson has worked with employers and people with disabilities in rehabilitation since 1976 as a: state coordinator of employer partnerships; trainer and consultant on disability management issues and ADA; project director of placement; and placement specialist and employer consultant.

John C. Bollinger became deputy executive director for the Paralyzed Veterans of America (PVA) in January 1992. Previously, he served as the organization's national advocacy director and was responsible for all civil rights disability issues affecting the members of PVA. Mr. Bollinger joined PVA in 1987 as associate director of legislation. From June 1989 to January 2001, he served on the Executive Committee of the President's Committee on the Employment of People with Disabilities. Prior to his employment at PVA, he worked for the Department of Veterans Affairs (VA) from 1972 to 1987. Mr. Bollinger served in the U.S. Navy and was retired in 1970 due to a service-connected disability.

Theresa B. Boyd is a senior consultant for rehabilitation in the Vocational Rehabilitation and Employment Service at VA's Central Office in Washington, D.C. With over 22 years of experience in the field of rehabilitation, Ms. Boyd has provided rehabilitation services in private-for-profit, state-federal, and federal government rehabilitation organizations. Ms. Boyd began her career in vocational rehabilitation as a casework supervisor for Vocational Placement Services, Inc., a private rehabilitation company headquartered in Richmond, VA. She went on to work as a rehabilitation counselor and vocational evaluator for the State of Virginia's Department of Rehabilitative Services.

Anthony B. Campinell, Ph.D. is the Associate Chief Consultant of the Psychosocial Rehabilitation (PR) Programs of the Veterans Health Administration's Mental Health Strategic Health Group. Mr. Campinell, a U.S. Marine Corps, Vietnam veteran, has worked in the VA for over 20 years. He was the former Compensated Work Therapy (CWT) Program Manager at the Bedford, MA VA Medical Center (VAMC) for many years, and now has responsibility for therapeutic work programs and residential rehabilitation programs in the VA Hospital system.

Patrick F. Chorpenning was appointed by Governor Jane Dee Hull as the Director of the Arizona Department of Veterans' Services on August 6, 1999. In January 2003, he was reappointed by Governor Janet Napolitano. The Department is comprised of four Divisions – Administrative, Fiduciary, Arizona State Veteran Home and Veterans Service – and has seven offices. An Advisory Commission, consisting of nine members representing various veteran organizations provides public policy advice to the Governor and the Director regarding veterans' issues. Prior to his appointment as the Director of the Arizona Department of Veterans' Services, Mr. Chorpenning served as the Research Analyst for the Arizona House of Representatives. Mr. Chorpenning is a Vietnam combat veteran.

Ronald W. Drach is Director of Strategic Planning and Legislative Affairs, Department of Labor, Veterans' Employment and Training Service. Prior to his present appointment, Mr. Drach was President of R.W. Drach Consulting, a consulting company he established after retiring from the Disabled American Veterans (DAV) following 23 years as National Employment Director. Mr. Drach is a combat disabled veteran who began his career as a receptionist with the Department of Veterans Affairs in Pittsburgh PA. Mr. Drach completed the Vocational Rehabilitation and Employment Program in 1972.

Michael H. McLendon is a founder of McLendon & Associates, a management consulting established that provides a range of services to U.S. public and private sector as well as international clients. Mr. McLendon has worked in a variety of settings to include state and local government, Federal agencies, health care, social service delivery, emergency management, high technology, and defense. Mr. McLendon has served as a consultant and advisor for the National Academy of Public Administration, Carl Vinson Institute of Government at the University of Georgia, World Bank, Asian Development Bank, U.S. Agency for International Development, the Institutes for Defense Analyses and other organizations. Mr. McLendon has worked on a number of VA projects and most recently, he served on the Secretary's Compensation & Pension Task Force. Mr. McLendon is a retired Air Force officer and a Vietnam veteran. In December 2003, Mr. McLendon was appointed as the Deputy Assistant Secretary for Policy in the Department of Veterans Affairs.

Malcolm H. Morrison, Ph.D. is a nationally recognized authority in the field of management information analysis in healthcare. Dr. Morrison formed Morrison Informatics in 1996, combining more than two decades of education and experience in aging, long-term care, disability and rehabilitation/post-acute healthcare, with expertise in management information analysis. Before co-founding Morrison Informatics, he was a VP with Continental Medical Systems, a subsidiary of Horizon/CMS, one of the nation's largest post-acute care providers. Dr. Morrison previously directed research and information services for the National Association of Rehabilitation Facilities and served as Director of Disability Research and Demonstration Programs with the Social Security Administration in Washington D.C. and Baltimore.

Edward R. Reese, Jr., a disabled combat veteran of the Persian Gulf War, was appointed National Service Director for the Disabled American Veterans (DAV) in June 2002. As National Service Director, Mr. Reese manages all activities of the DAV's National Service Program, which employs more than 400 professional National Service Officers (NSOs) and support staff in 72 offices throughout the United States and Puerto Rico.

Sue Suter, former Commissioner, Rehabilitation Services Administration of the Department of Education, and former Deputy Director of the Office of Disability of the U.S. Department of Health and Human Services where she coordinated the President's Freedom Initiative with disability organizations, states, universities, businesses and service providers. She previously served as Director, Illinois Departments of Rehabilitation Services, Public Aid, and Children and Family Services. She was appointed by President Reagan to serve as Commissioner of Rehabilitation Services at the U.S Department of Education and later was President of the World Institute on Disability. As President of Suter and Co., Ms. Suter has consulted on disability issues and public policy.

Douglas B. Wadsworth was appointed as the Director of the Salt Lake City Veterans Benefits Administration Regional Office in December of 1981. The Regional Office serves about 159,000 Utah and 68,000 Alaska veterans for VA Benefits Programs, including vocational rehabilitation, compensation, and pension. He was assigned responsibility for the Vocational Rehabilitation & Employment Program in Idaho in 1995. Mr. Wadsworth has been innovative in establishing several milestone efforts to assist veterans and their dependents to secure their lifestyle, including pilot efforts in job placement services, transitional housing for homeless veterans, benefits for recently released servicemen and women, enhanced and aggressive home loan and servicing programs, and innovative approaches to automatic data processing for Regional Office operations. He retired from the United States Naval Reserve in May 1998 with the rank of Captain.

Appendix 3

Agenda for Fact-Finding Sessions

VA Vocational Rehabilitation & Employment Task Force

May 8, 2003

Conference Room 542, 1800 G Street, NW, Washington, DC

9:00	Open Fact-finding Session	John O'Hara, Task Force Executive Director
9:05	Chairman's Remarks	Honorable Dorcas R. Hardy
9:10	Welcome to the Veterans Benefits Administration (VBA)	William Stinger Deputy Under Secretary for Benefits
9:20	VA 101 – Overview Briefing on the Department of Veterans Affairs	Gary Steinberg DAS for Planning and Evaluation
9:40	Overview of VBA	Robert Epley Deputy Associate Under Secretary for Benefits
10:15	Briefing on Vocational Rehabilitation and Employment (VR&E) Program	Jeffrey Alger, Acting Director, VR&E Jerry Braun, Ph.D., Deputy Director, VR&E
1:00	Overview on findings and recommendations from prior studies. Overview on outcomes.	David Dean, Ph.D. University of Richmond
2:30	Remarks and comments from Veterans Service Organizations on VR&E Program	Jim Doran, AMVETS Carroll Williams, American Legion Dave Gorman, Disabled American Veterans Louis Irwin, Paralyzed Veterans of America John McNeil, Veterans of Foreign Wars
4:00	Remarks from Under Secretary for Benefits	Honorable Daniel L. Cooper

May 29, 2003

Room 230, 810 Vermont Avenue, NW, Washington, DC

9:00	Open Fact-finding Session	Honorable Dorcas R. Hardy
9:15	General Accounting Office	<p>Cynthia Bascetta, Director Education, Workforce and Income Security - Veterans Benefit Issues, GAO</p> <p>Irene Chu Assistant Director</p>
10:00	VA Congressional Committee Staff	<p>Darryl Kehrer HVAC Subcommittee on Benefits Majority Staff Director</p> <p>Mary Ellen McCarthy HVAC Subcommittee on Benefits Minority Staff Director</p> <p>Jonathan Towers SVAC, Majority Staff Counsel</p>
11:00	VR&E briefing on evaluation process and case management. Demonstration of WINRS and review of Intranet WINRS reports.	<p>Jeffrey Alger, Acting Director, VR&E Program</p> <p>Jerry Braun, Ph.D., Deputy Director, VR&E</p>
1:00	<p>Private Sector Discussion on:</p> <ul style="list-style-type: none"> • Evaluation Process • Case Management 	<p>CorVel Corporation Duane Bigelow VP, National Product Manager</p> <p>Debbie Smith, Case Manager Intracorp</p> <p>Rob Gelb, National Accounts Manager, Intracorp</p> <p>Connie Miller, Director, Case Mgt Products</p> <p>George Moore & Associates George Moore, President</p> <p>Pat Summer, Case Manager GENEX Services, Inc.</p> <p>Melissa Davey Vice President, Managed Disabilities</p>

May 29, 2003 continued

2:40 Private Sector Panel on Functional Capacity Evaluation in the 21st Century

Mark Dakos
Chief Operating Officer,
Hanoun, Inc

Leonard Matheson, Ph.D.
Washington University

Robert May, M.D.
Director, National Association of
Disability Evaluating Professionals

May 30, 2003

Room 230, 810 Vermont Avenue, NW, Washington, DC

9:00 Open Fact-finding Session

Honorable Dorcas R. Hardy

9:10 Department of Labor - Veterans

Honorable Frederico Juarbe
Assistant Secretary,
Veterans Employment & Training
Department of Labor

10:10 Department of Education State

Commissioner Joanne Wilson
Rehabilitation Services
Administration
Department of Education

11:00 Veterans Health Administration

Honorable Robert Roswell, M.D.
Under Secretary for Health

- Overview of VHA

- CWT

Anthony Campinell, Ph.D.

- Physical & Rehab Med

John Jacobson

1:00 Association of State Directors of Veterans Affairs

George Basher
Director, Division of Veterans' Affairs
New York State

2:00 Close Fact-finding Session

June 23, 2003

Room 230, 810 Vermont Avenue, NW, Washington, DC

9:00 Open Fact-Finding Session

Honorable Dorcas R. Hardy

9:10 Overview Presentation on VR&E Independent Living Services

Jerry Braun, Ph.D.
Deputy Director, VR&E

Bruce Holderman, VR&E
Missy Freeley, VR&E

10:00 Overview Presentation on VR&E Self-Employment Services

Peter Foyet, VR&E
Bob Roundtree, VR&E

June 23, 2003 continued

- | | | |
|-------|--|--|
| 11:00 | Discussion of Self-Employment Programs at Small Business Administration. | William Elmore
Associate Administrator for Veterans Business Development |
| | Role of VA Office of Small and Disadvantaged Business Utilization | Scott Denniston
Director, VA Office of Small and Disadvantaged Business Utilization |
| | | Gale Wagner |
| 1:00 | Panel Discussion
VA Regional Office Directors | Vince Crawford – St. Paul, MN
Stewart Liff – Los Angeles, CA
Michael Olson – Chicago, IL
Frank Pierce – Seattle, WA
Jack Ross – Cleveland, OH
Thomas Wagner – Houston, TX |
| 3:00 | Overview Presentation on VR&E Employment Services. | Jeanette Mendy
Employment Specialist, VR&E
Washington, DC |
| 4:00 | Task Force Discussions | |

June 24, 2003

Room 230, 810 Vermont Avenue, NW, Washington, DC

- | | | |
|-------|---|---|
| 9:00 | Open Fact-Finding Session | Honorable Dorcas R. Hardy |
| 9:05 | VR Policy and VR Employment | Dr. Margaret Giannini
Director, Office of Disability Services
Department of Health & Human Services |
| 9:30 | Overview on Accreditation and Discussion of Metrics in Vocational Rehabilitation Programs | Paul Andrew
Commission on Accreditation of Rehabilitation Facilities |
| 11:15 | Enhancing Human Potential Through Technology | Janet Fiore
Chief Executive Officer, The Sierra Group |
| 1:00 | VR Employment Strategies | Jenn Rigger
VR Program Specialist, Rehabilitation Services Administration, Department of Education |
| 1:30 | Independent Living Services | Anne-Marie Hughey
Executive Director, National Council on Independent Living |

June 24, 2003 continued

- | | | |
|------|---|--|
| 2:15 | Assisting Veterans Seeking Opportunities for Self-Employment | Dave Clagett
Vice President, National Veterans Business Development Corporation |
| 3:00 | Overview of VBA Education Program | Judith Caden
Director, Education Program, VBA |
| 3:30 | Economic Participation: Finding Jobs for Disabled Individuals | Nancy Starnes
VP and Director, Community Partnership Program, National Organization on Disability |
| 4:00 | Task Force Discussions | |

October 22, 2003

Room 530, 810 Vermont Avenue, NW, Washington, DC

8:00 a.m. Meeting of Task Force to discuss and vote on recommendations presented by subcommittee chairs.

February 18, 2004

Paralyzed Veterans of America, 801 18th Street, NW, Washington, DC

10:00 a.m. Meeting of Task Force to discuss content and presentation of report.

Appendix 4

Site Visit Agenda and Interview Guide

The VR&E Task Force visited the following VA Regional Offices:

Atlanta, GA	San Diego, CA
Baltimore, MD	St. Paul, MN
Chicago, IL	St. Petersburg, FL
Denver, CO	Waco, TX
Manchester, NH	Washington, DC
Montgomery, AL	Winston-Salem, NC

Standard Agenda for Visits

The Task Force developed an interview survey guide to ensure consistency in addressing program issues. VA Regional Offices provided read-ahead materials and the following standard agenda was used when conducting a site visit:

1. Introductory Meeting with Director and Regional Office Leadership Team
2. VR&E Staff – discussion and exchange of information on “how work is done” pertaining to VR&E services. Topics will include administrative functions of oversight, management controls, standardization, fiscal integrity, and quality review. Focus of discussions will center on:
 - Intake and evaluation process
 - Vocational Rehabilitation plan development, training approval, and implementation
 - Self-employment
 - Independent living
 - Employment Services
 - Case Management and workload
 - Use of contractors
 - Paying for services provided by VA – approval, payment, audit
 - Outcome measures
 - Employee training
 - External communications and outreach efforts
3. Brief overview of DTAP, if applicable
4. Information exchange session with VSO representatives
5. During the day, conduct short interviews with VR&E staff
6. If time permits, meet with veterans who are currently enrolled in vocational rehabilitation training or have completed training.
7. Exit interview with Director

Interview Guide

The Task Force asked the following types of questions during site visits to VA Regional Offices.

Internal Assessment

Mission and Strategic Plan

1. Who should be served and how?
2. How is mission communicated and enforced?
3. What are most veterans looking for when they come through your door?
4. Are their expectations in line with the VR&E mission?
5. What do you do as outreach to veterans?
6. Do you conduct any type of customer satisfaction survey?
7. If so, what are results? What can be improved?
8. Are you aware of the Department's strategic goal to assist disabled veterans?

Workforce and Workload

1. FTE staffing levels for recent years? What is 2004 projection?
2. How are FTE allocated?
3. Total contracted staff? What is basis for size?
4. Do you have an employment specialist? What is role and could it be expanded?
5. Plan for Workforce aging and recruitment?
6. How is workload defined? How should workload be defined?
7. How to forecast?
8. How do you define productivity?
9. What is distribution of caseloads for different kinds of specialists? What can be improved?
10. Could more rehab counselors work on employment?
11. Could veterans with less severe disabilities be self-directed?

Accountability and Performance Measures

1. As an office, what are you measuring?
2. Are performance goals tied to employment outcomes?
3. Discuss performance evaluations.
4. Do you have CO guidance for core jobs? Who is authorized to use credit card to procure goods or services?
5. Are regulations in place to define what can be procured?
6. What spending controls are in place (or are needed)?
7. What improvements are needed?
8. What needs to be measured that isn't being measured?

Training

1. Describe methodology and program.
2. Ensure uniform doctrine, procedures, and standards for staff and contractors? Use of Orlando training group's capabilities?
3. What are you doing about educating -or reeducating - counselors to focus on jobs?
4. What improvements are needed?

Procurement and Contracts

1. What is rationale for outsourcing?
2. Standard statement of work?
3. Type of contract?
4. Provide listing of all staff support contracts with contractor names and costs.
5. Basis for competition and selection?
6. Evaluation criteria?
7. Turnover rate?
8. How is quality managed?
9. How are contractors held accountable?
10. Ideas for improvements?

Corporate WINRS

1. Do you use all features?
2. Do you have CO managerial and functional guidelines?
3. Do all staff and contractors have access?
4. Do all use?
5. Is it easy and fast to use including out stations?
6. What data elements are missing that would help focus on employment goal?
7. How do you use it as a management tool?
8. Ideas for improvements?

Best Practices/Special Projects

1. What makes your office unique?
2. What are you doing that could be adopted by other offices?
3. What best practices have you heard of that you might be willing to adopt?

Service Integration**Screening and Pre-Screening**

1. Please describe your time line, approach, and resources.
2. What is your opinion on using a pre-screening effort to better inform service-connected veterans about VR&E?

Seamless Continuum of Services

1. Do you have a presence at DoD or VHA facilities? If so, please describe.
2. What is your opinion on how to achieve seamless service?

Assessment Resources

1. What assessment tools or resources would you like to have that you don't have?
2. What are obstacles?

Chapter 36

1. Do you use this authority for providing up front assessment and career planning?
2. If yes, please explain.

Performance Measures

1. What performance measures do you have for evaluation and assessment, including timeliness?
2. What performance measures would you design to make improvements?

Outreach

1. What do you do as outreach to veterans and stakeholders on VR&E mission and services?
2. How could this be improved?

Employment**Measures**

1. Do you have employment-focused goals?
2. What are your employment placement figures for recent years?
3. How do these compare with other offices?
4. How do they compare with employment placement figures of other organizations serving disabled persons, including veterans?
5. What are job placement results of veterans in training?
6. If no figures are available, how do you know that VR&E has success?
7. If yes, can they be made available?

Staff Functions and Training

1. What are the training and experience of VR&E staff in employment and employability functions?
2. Do you have an employment specialist?
3. Describe duties, performance standards, training, and supervision.

4. What is relationship between the VRC, supervisor and employment specialist?
5. Could many veterans be self-directed in job search?
6. Could Voc Rehab resources then be directed toward job placement?
7. Ideas for improvement
8. What management approaches would inspire and motivate staff and veterans to reach their greatest potential?

Methods

1. How are you assisting disabled veterans with their job search?
2. What works best?
3. Are your approaches consistent with other offices?

Placement Resources

1. What resources are you using to help veterans compete for job?
2. Do you use the Internet, job software and other electronic resources?
3. What resources do you need that you don't have?

Partnerships

1. Do you partner with other agencies, companies, or nonprofits? Describe.
2. What is the relationship between your staff and DOL VETS funded state staff?
3. Is it more than referral?
4. Do you have staff with authorized access to job postings, including employer name, at the employment service office?
5. Ideas for improvements?

Vocational-Technical Training and OJT

1. Why do so few veterans pursue vocational or technical fields, apprentice training, or on the job training?
2. Is this an issue to be tackled?

Employers

1. What is your outreach to potential employers?
2. What is your office culture as it relates to the employer as a customer?
3. What records, if any, do you keep on local employers who have employers in meetings, advisory panels, are hiring and/or recruiting veterans?
4. What services if any do you offer employers on behalf of disabled veterans?
5. How do you deal with identifying and providing accommodations for more severely disabled veterans?
6. How do you measure if a veteran gains employment?

Barriers

1. What are barriers to employment?
2. Location? Few available jobs? Economy?
3. What are you doing to overcome?

Independent Living

1. What are your greatest concerns about this service?
2. Could state-of-the-art technology mean that additional severely disabled veterans might be able to join the workforce?
3. Are there protocol standards in place to make an assessment?
4. How does VR&E measure success?
5. What is level of coordination with VHA?
6. Do you use contractors to make assessment?
7. How do you measure performance of contractors?

Self-Employment

1. What is expected of a veteran seeking financial support from VR&E?
2. What type of assessment process is in place? Is there a standard used

- throughout the system or is each Regional Office on own to make determination?
3. Who is involved in the process – from start to approval?
 4. Does VR&E require a follow-up or feedback from veteran?
 5. Does regional office use non-VA organizations to educate veteran about self-employment?
 6. What outside experts does VR&E use to help assess a business plan?
 7. Are there standards in place to make a determination?
 8. Can you share some success stories? Some failures?
 9. Are there current dollar thresholds for self-employment?
 10. How does VR&E measure success – what is a good measurable outcome?
 11. What are your ideas on improvement?

12. How does VR&E reduce barriers to self-employment?

Summary

Name the three things that the Department of Veterans Affairs, VBA, or VHA could do in the continuum of service that would impact such things as:

- Reducing application time for VR&E services
- Improving assessment accuracy
- Promoting standardization of decisions
- Measuring impact that VA services have on the veteran's life
- Increasing percentage of disabled veterans that successfully compete for employment.

Appendix 5

Comments from VR&E Staff

Early in its work, the VR&E Task Force sought the confidential suggestions from VR&E staff in Central Office and Regional Offices. Some staff emailed a paragraph or two while others attached five or six pages. Many of the recommendations address employee concerns. Here are a few samples.

Need for Central Office Leadership/Lack of Consistency

Clarification Needed – VBA should define functions, roles, scope, policy oversight, and span of control of VR&E central office staff...Lines of authority, performance review, policy determination, and program oversight need to be clarified.

Be Assertive – One of the major VR&E issues is accountability. This administration has been effective with compliance in C&P because of the direct and assertive approach they have taken with Directors. This same strategy needs to be employed with VR&E Officers, even though they are highly educated professionals, as well as the Directors.

Little Consistency – There has been little consistency in administering services nationally, and offices tend to explore ways that will work for them, given their diminished resources.

Black Hole – Guidance in the form of Regulations, Manuals, Policy Letters, etc. are desperately needed...We have been told that these are being “worked on”, and the proposed regulations have been sent to General Counsel for review. Our perception is that they have just entered the “black hole” never to be seen again in our lifetime.

Need Clear Cut Guidelines – Without clear, consistent guidance, the field will continue to try to do the best job they

can in a locally developed manner...I think VR&E needs some more clear cut guidelines that the veteran may not be entitled to the CH 31 program. They are leaving their (federal) jobs not because they cannot perform it but because they have met the criteria for receiving retirement pay.

Provide Centralized Training – Unlike most other programs, there is no centralized VR&E training program. Since VR&E is usually so short staffed, whenever a new counselor is hired, they are given caseload responsibilities with little or no formal training.

Need Changes to IL – Independent Living programs have gotten out of control and we need regulatory changes to ensure consistent delivery from office to office. Training staff will not do it. GC Opinions have opened a door so wide, there will continue to be variances from office to office depending on workload priorities.

Add All Veterans to Survey – Conduct a customer satisfaction survey with all VR&E veterans. In years past, VBA has only asked questions of veterans receiving vocational rehabilitation training and employment services. It is essential that VBA also ask veterans who are receiving independent living services and self-employment support. This information should be published on the VBA Internet site and made available to VA Regional Offices.

Resource Allocation/Fiscal Integrity

Let VR&E Headquarters Control Dollars – Remove Regional Directors from their involvement in VR&E and give resource allocation authority to VR&E headquarters. VR&E headquarters evaluates professional program performance, but has no control on allocations of resources. VARO directors...have control of resource allocation, a situation which places VR&E field staff in competition for resources with service center compensation and pension benefit administration. The RO directors do not have a thorough understanding of the complexities of our program and look at the program statistics in a rather concrete way.

Stop Taking Dollars Away – No amount of planning can be effective when funding is given and taken away like it has been for this program. For example, this past year, we used about \$50,000 in contracting dollars per month through March, only to have all of our contracting dollars stopped for several months.

Maintain Fiscal Integrity – Separate contracting type functions from VR&E staff. At present, a VR&E staff person could be developing a plan, approving a plan, approving payment of invoice, and making payment with credit card. Further, VR&E staff should not have latitude to negotiate established national rates with contractors, change approved tasks within a statement of work, or to act as a contracting official to secure goods and services for the government. Even if a VR&E employee has a contracting warrant, an appropriate degree of financial integrity should be maintained.

More Scrutiny Needed – Purchasing supplies, equipment, and services are a crucial and significant part of the

administration of the VR&E program. Moreover, a lot of money is involved with relatively little scrutiny attached. Yet tight controls are not in place, nor is there consistent policy guidance in writing. This area needs to be examined much more closely.

Staffing and Case Loads

Need Staff for Placements – Secure additional professional staff to handle job placement since the employment specialist is not responsible for obtaining employment for veterans.

IL Specialist Needed – Independent Living Services require expertise, time for research and coordination of services, are there any plans to assign specialized staff in this task (i.e. abreast of latest technology, assess needs and ability to provide recommendations that can be measured/quantified)?

It's a Flood – Allocate more counseling staff. Two years ago, the VA got busy and hired a bunch of new comp claims people to help clear up the backlog. Where do you suppose those newly finished claims end up? Where will the vets from the Iraq conflict be heading? Where are the guys from Desert Storm who are growing increasingly ill coming? Where are the thousands of vets who have been laid off due to the poor economy coming? It's not a trickle, it's a FLOOD.... Cut our caseloads to a manageable level. Don't give us contractors – they're not vets, and they don't care, except about their fees.

Need Clerical Support – There has to be some way to build into the resource allocation formula a way to gain clerical support without hurting our FTE numbers too badly. Counselor morale and job satisfaction will suffer if we continue to load on our counselors an additional administrative burden. Still, I know that

I'd hire counselor over a clerical person, any day.

Feeding the Dragon—Counselors, who have little or no clerical support, often carry a caseload of more than 200 clients. In a workday I can see two veterans and the rest of the time is spent feeding the documentation and accountability dragon. When my case load gets above 100, something must slip.

High Case Load—Ethical rehab practice standards set case loads at 125. So why is the national average around 200? With the very recent relaxing of the regulations (thank you) for allowing contracting of certain services utilizing RBA monies, this will assist us greatly. But oversight of these contracts can also be demanding work. During my tenure and experiences with contract counselors servicing veterans some 7+ hours or more away, I did as much, if not more, work in managing that contract.

Purchase Cards Take Work—The use of the purchase card in VR&E is labor intensive. By the time the use of the purchase card was approved, all the tasks involved on a single transaction were probably not considered. Specifically, issues like reconciliation, receiving reports, disputes, follow up to vendors, rebates, storage, etc. were probably not seen as a potential problem. In small offices this has to be accomplished by the counselor, limiting their time to do the professional work.

Clerical Tedium Tripled—The new CWINRS systems is a marvel—despite all the grumbling I can see the Big Picture. However, when I am asked to do all clerical functions, including typing my own reports, scheduling, printing, folding, and mailing all my own letters, checking each receipt, entering it in CWINRS, and then copying it and filing it, along with meeting my vets, returning their calls

and e-mails, interacting with the schools, vendors, and VA hospital, the million and one duties that are required, and I am supposed to accomplish all that is expected with absolutely no assistance. The amount of clerical tedium has tripled since I started.

Frustrated—I have two drawers of “pending” work, and more files on my desk. I have never been so frustrated in my career. My case load is 215+ and I travel each quarter to location, where it is so rural, even cows won't live there.

Bring RNI Back—When we were given the RNI (Rehabilitation Needs Inventory), it seemed like a great idea to let the vet write in his own words and state what his needs were. “Let him put his voice in the file.” Terrific. Then, someone in Washington decided it was too much for the vet to fill out. I was so disappointed! It was a very effective tool—now, when we sit with that stack of questions and ask each one to the vet—we don't get good answers. When the vet takes the form home and has time to consider and ponder his response, it is much more effective. Please bring that back the way it was intended.

What Happened to Case Management?—In VR&E Letter 28-02-13, dated Nov. 18, 2002, we were told that full implementation of the VR&E Case Management Model was expected to be in place by the end of FY 2003. Many of us in the field had been involved in the Pilot Study and had already implemented much of this model with very positive results. Unfortunately, since that time we have seen a steady, systematic evisceration of the model. This is most evident in the current VR&E Quality Assurance Program which stresses rigid adherence to the ineffectual protocols which the Case Management Model was intended to replace.

Eligibility/Entitlement

Concentrate on Services – Eliminate entitlement decisions...Most applicants are entitled anyhow. The June 2003 Ch31 statistical report shows that the program nationally finds 88% (including the 10%ers) of the Ch31 applicants entitled to services. This increases to 91% without the 10%ers. By eliminating the decisions, the VRC's could concentrate on what services a disabled vet needs, regardless of rating, to get back into the job market. The same purpose could be accomplished, since now some need further training and others not. This would require a change in the law.

Update Processing – Update initial processing of applications (GED Processing). It has remained essentially unchanged for the past 30 years. We have just moved the process from paper and pencil to a computer and called this progress. All this part of the process accomplishes is confirmation that the applicant is a veteran with a compensable service-connected disability. At this point the only "benefit" they can receive is the vocational evaluation to determine their rehabilitation needs. This part of the process creates a Chapter 31 master record in BDN and a new record in CWINRS. Yet, it takes two employees to complete this action – one with the claims establishment (CEST) command and another one to authorize (CAUT) the action. No other actions can be taken until a Counseling Psychologist or a Vocational Rehabilitation Counselor determines need and develops a rehabilitation plan with the veteran. Everything up to the appointment with the counselor should be completely automated as part of the compensation award process with vestigial records being created when the award action is done. The fact that no services can be provided until the counselor and veteran develop a viable

plan would still provide ample separation of establishment and authorization duties but minimize the degree of fragmentation.

Priority To Those Most in Need – Priority should be given to service members with catastrophic injuries that are pending medical discharge from active duty or veterans with +60% rating. Next priority would be given to service-connected veterans separated from DoD within past 2 years or service-connected veterans with less than 60% rating.

Limit Needed – How many federal programs should someone be getting – SSI, SSDI, VA disability AND voc rehab?? There should be a limit. My least favorite client is the 81 year old who has not planned at all for his future, served 2 years, and now wants some training.

Reduce Reliance on Training – During entitlement determination, address barriers to employability in order to reduce reliance on training. The program has done an excellent job in defining entitlement issues, and assuring accuracy of such determinations. However, quite often there is a lack of congruence between program planning and the barriers to employability found during the entitlement determination. Quite often training is still looked at as a first choice.

Training May Not Be Needed – The first question that we should be asking is "What is preventing a particular disabled veteran from securing suitable employment?" The answer may involve the need for additional educational skills or the need for new vocational skills, but often the "barrier to employability" is the veteran's SC (service-connected) or NSC (non service-connected) disabling conditions, lack of labor market information, under use of transferable skills, or general anxieties, all of which can be addressed and overcome without the need for training.

Eliminate Automatic Eligibility for Individual Unemployability (IU) – If the veteran is in receipt of IU, then automatically they should not be eligible for Vocational Rehabilitation. Now I know that they can work up to 11 months without affecting their IU, but I have never ever seen someone return to work after having been granted IU.

Individual Unemployability Is a Disincentive – If a veteran is found to be rated IU while in training and the veteran does not obtain employment, then our balanced scorecard would not reflect a negative outcome. On that note, it is recommended that if a veteran is actively in the Chapter 31 program, then the IU should not even be considered an option for rating. IU states unable to work and Chapter 31 is employment driven. Lastly, if a veteran is receiving IU, then the option for Chapter 31 should not be considered. Our goal as Rehab Professionals is to foster independence not dependence on government programs. The Chapter 31 program is meant to have veterans retrained in an occupation in which the taxes that they pay, by being employed, are returned back into the system so other veterans can benefit. If a majority of veterans are completely dependent on government support, then taxes will not be paid into the system.

Add “Employment” to VA Form 1900 – The VAF 1900 should read “Disabled Veterans Application for Vocational Rehabilitation and Employment.” Often veterans fill the form without the knowledge of what is the goal of the program and feel it provides other type of services as “voluntary entertainment, therapy, recreation, etc.” I am aware veterans are always qualified to benefit from IL, therefore the note under the title of the form should remain.

Wrong Information – Information the veterans are receiving from DTAP is

often misleading regarding the goal of the Chapter 31 program. Often they are told they are entitled to the program because they have a disability rating. The service organization is also sending applications for the program to veterans who are 80 years old who are not interested in employment or independent living. Often the veteran has a caregiver who completes the application automatically without understanding what the form is asking them.

Outcome Measures

Redefine Measures – Redefine VR&E program outcome measures that will enable VA to measure if the program is meeting intent of Congress and if veterans are benefiting from services.

Triage and Measure – Triage VR&E applicants and have a performance measure for each category of applicant.

Invalid Statistics – The entire measurement system and the manner in which we determine success is full of holes. Some statistics are so easy to manipulate that they are totally invalid. How can we purchase a computer for a veteran and say that we have enhanced his ability to live independently to the extent that we can call it a “rehabilitation.”

Rehabilitation Rate is Misleading – The Rehabilitation Rate, currently used, encourages the wrong behavior and is misleading. This rate is derived by dividing the number of veterans rehabilitated by that number plus the number of veterans who are discontinued from the program each month. The problem with this measure is that a) it encourages an office to delay or simply not discontinue a veteran from the program; and b) if one station rehabilitates 300 veterans and discontinues 100, while another

rehabilitates three and discontinues one, they both wind up with the same rate. It may be better to measure an office by looking at the ratio of rehabilitated veterans to the workload.

System Set Up For Failure—Currently, once rehabilitation services are initiated, any outcome other than a declaration of rehabilitation or the death of the veteran is viewed as an abject failure of case management and counted negatively in program measurement. This includes circumstances such as the individual's condition deteriorating, being awarded Individual Unemployability or Social Security benefits, electing to take a less than suitable job, or getting an inheritance from Aunt Tillie. There are a number of instances in which the veteran makes a sound, well-reasoned decision to discontinue rehabilitation services that have absolutely nothing to do with the quality or timeliness of services. Yet, these carry the same degree of negativity as ignoring the veteran's legitimate needs. The current case status system and associated reason codes should be revised to include some neutral outcomes excluded from the outcome ratios as well as an expanded reason code selection to clarify the real reason for the action.

Develop a Neutral Code—Approximately 30% of the veterans beginning Chapter 31 receive a rating of individual unemployability (IU) before they complete their IWRP. Of these, more than half do not need Independent Living services and do not plan to go to work. When these veterans are discontinued, this is counted as a negative closure in calculating the Rehabilitation Rate. A neutral code needs to be developed similar to the 99 code for veterans dying while in the Chapter 31 program.

Restore MRG—Restore the Maximum Rehab Gain or its equivalent, so that

discontinued cases are not measured as failures...The VR&E community generally believes that most cases that are eventually discontinued actually leave the program better because of good evaluations and case management services giving them a clearer picture of themselves.

Start Clock When Veteran Starts—Do not count veterans who never start rehabilitation plans and who cannot be contacted. I do not know when the clock should be started, perhaps when the veteran actually starts a program and \$xxx has been spent, but it is unfair to require counting a case in the formula when a veteran disappears, goes to jail, etc. right after a plan is written.

Start Clock When Station Starts—Start the clock on days to entitlement when the VR&E station actually has control of the case.

Information Technology and the Internet

Need Online Tools—Provide access to Internet tools to help find veterans that have "disappeared."

Intranet Site to Share Info—Establish a "best practices" intranet web site that will enable VR&E employees to share information and successful strategies.

Out-of-Date Software—We are still on Windows 95. What's the problem here? Should we be almost 10 years behind?

CWINRS

CWINRS for ALL—Ensure that WINRS is accessible from every station, including out posts.

Access to CWINRS—We need easy and reliable access to CWINRS for out-based

staff members. As it is, our out-based counselors must input data into both CWINRS and BDN to be certain data is being properly recorded. CWINRS is an excellent case management program, but enhancements are needed to make it fully reliable.

Tools Needed – Add more sorting tools. Such as: ability to search by name, a tickler system that notifies the counselors it's time to review or contact the veteran, place to post the veterans resume.

More IT Resources – Provide sufficient IT resources and services at the Headquarters level so that reporting mechanisms within VR&E's primary data system, CWINRS, can be developed and utilized VBA wide.

Hit and Miss – WINRS – This is hit and miss. Sometimes it works sometimes it does not. IRM staff unable to solve WINRS issues. One must still go back and forth to BDN, Cast, and to WINRS to update files. 3xs the work.

Make Mandatory – Make usage of CWINRS mandatory at all Regional Offices for all VR&E staff. Need to provide specific guidelines.

Improvements Take More Time – The BDN and CWINRS programs have vastly improved the movement of information in our program, but now take (depending on who you talk to) 40 to 50% of our time to enter, update, print and monitor.

Flexibility Needed – Make WINRS more reliable, more flexible, and more forgiving in terms of correcting entries.

Appendix 6

Summary of Past Reports

Task Force members and staff reviewed summaries or read in full more than two decades of external and internal reports, commentaries, and audits of the VR&E program.¹

- More than a dozen of these mostly critical reports, dated from 1980-2002, came from the General Accounting Office, sometimes aimed specifically at the Vocational Rehabilitation and Employment Program (or earlier programs under different names), and sometimes aimed at federal employment programs in general.
- One especially critical report, dated 1999, was the *Congressional Commission on Servicemembers and Veterans Transition Assistance*², which targeted all federal veterans programs.
- More than half a dozen were internal VR&E reports, dated 1996-2002, which usually accepted the criticism and indicated reforms to improve the program.
- One report, dated 2003, came from VA's Inspector General and questioned the accuracy of VA data used to compare the rehabilitation rate for FY 2000.
- A recent report, *The Independent Budget for Fiscal Year 2004* – now in its 17th year – was prepared by four veterans service organizations: AMVETS, Disabled American Veterans, Paralyzed Veterans of America, and Veterans of Foreign Wars of the United States.

Sadly, all external reports say the same thing: VR&E has failed to achieve what the law intends – suitable employment for veterans with service-connected disabilities. This is the target that eludes VR&E even today, despite commendable efforts in recent years to re-focus the program on employment.

Common themes run through the reports:

- Lack of Central Office leadership and guidance
- Lack of program direction
- Lack of accountability for program results and poor-decision making
- Lack of adequate program data
- Outdated policies and procedure manuals
- Perception of VR&E as a training program
- Emphasis on training, not employment services
- Too process-driven and not focused on employment results
- Declaring veterans rehabilitated without ensuring that they achieve suitable employment
- Failure to plan or provide any follow-up activities with “rehabilitated” beneficiaries to ensure that the goal of long-term employment was actually successful
- High attrition rate of program participants
- Low success rate
- Need for VA to emphasize serving veterans with serious employment handicaps

- Outdated case management techniques
- Lack of comprehensive rehabilitative services
- Failure to coordinate within VA and with the Department of Labor and other agencies

GAO and others criticized the then Vocational Rehabilitation and Counseling Program (VR&C) for moving too slowly in implementing the mandates of the 1980 amendments, which added employment as the mission of the program. Indeed, it took VA more than 11 years after the amendments were enacted to finalize the section of its procedural manual implementing the 1980 changes that address employment assistance for veterans.³ (Similarly, VR&E counselors today are waiting for updated regulations and a policy manual – program guidance promised 2 years ago.)

The *Veterans Transition Assistance Report* pointedly said that the “program intended to enable these veterans to secure employment has proven ineffective.” It recommended a drastic step if improvements were not seen:

If VA has not made significant improvements in achieving the program’s employment purpose in 2 years, the Commission recommends that the responsibility for delivering the services be opened to full competition to outside entities.

VR&E Response to Criticism

In August 1996, a group of VR&E employees called the Design Team – part of a government-wide reinvention initiative – submitted a report with a number of recommendations that would improve the organizational culture, streamline operations, automate business practices, and start a marketing program.

According to the *Veterans Transition Assistance Report*, by September 1998 the Design Team report had yet to be released to the VR&C program stakeholders and even the Design Team members were unaware of its status. The *Veterans Transition Assistance Report* also said that VA indicated that elements of the Design Team Report were incorporated in its 1998 strategic planning business case. It appears to this Task Force that VBA and VR&C lost considerable time in announcing and then starting the implementation of these recommendations.⁴

VBA officials, in responding to a GAO criticism, cited a variety of reasons⁵ (with which this Task Force agrees) for the relatively low rehabilitation rates.

- Misconceptions on the part of veterans about the intent of the program and the difficulty therefore to provide employment services early on in the rehabilitation process.
- VR&C staff lacked the necessary training to engage in job placement activities.
- Onerous counselor caseloads, which are much higher than the optimal of about 125 cases per counselors.

VR&E Business Case Series

After years of criticism, the VR&C leadership began publishing a series of business case reports, which were largely strategic plans to achieve a “far-reaching transformation” of the program.

- *The Business Case: The Track to Employment* in 1998 identified core problems and solutions for the program's inadequate focus on employment, customer expectations being out-of-step with the program's intent, inability to monitor outcomes and provide feedback, inadequate IT support, and inadequate access for veterans. "Employment outcomes" replaced "courses completed" as the measure of success.
- *Vocational Rehabilitation & Employment: The Business Case Continues...* in 2000 reported progress in a flurry of initiatives and showed that the number of rehabilitations increased every year from 1991 to 1999. This second report revealed past and present problems as well as successes.
- *The Disabled Veteran's Working Partner for Rehabilitation Success: Business and Clinical Journal 2002* appears to be more of a marketing publication than a straight-forward program evaluation and strategic plan.

While we understand the natural inclination of any agency to put its best foot forward, this report down played issues, or at least was less forthcoming than the other two reports. For example, the second business case discussed in detail the results of the new customer survey,⁶ in which veterans gave their lowest marks for the job ready phase of VR&E. The third business case only mentioned the survey, choosing to ignore customer dissatisfaction with employment services. We do, however, commend the report for demonstrating success in terms of real people, each with a unique set of disabilities, skills, and desires, who found a path that best suited their interests and abilities through VR&E.

It appears that the business case reports were also intended to be a tracking mechanism of sorts for the various recommendations and implementation actions over several years. If so, a publication appearing every 2 years is not a timely systematic tracking process setting forth who is accountable and when the action will be done. We found no systematic, continuing follow-up within VR&E or VBA, which we believe shows a lack of Central Office leadership, management, and accountability.

OIG Finds Inaccurate Reporting

The Task Force was especially concerned over the 2003 report of VA's Office of Inspector General that data used to compute the rehabilitation rate reported for FY 2000 were not accurate. This was one in a series of audits assessing the accuracy of data used to measure VA's performance in accordance with the Government Performance and Results Act of 1993. VR&E reported 65 percent rehabilitated. OIG reviewed the folders of 90 randomly selected veterans for FY 2000 and found that 7 of these left VR&E during prior or subsequent years. The VA regional office incorrectly classified 15 of 57 veterans as rehabilitated. VBA Headquarters officials could not readily ascertain the cause(s) of the discrepancies. They speculated that pressure to achieve the performance measure target for the rehabilitation rate may have influenced some of the inappropriate decisions to declare veterans rehabilitated. Among other things, the OIG recommended appropriate training for staff and strengthened oversight by Headquarters.

We note that VA's FY 2003-2008 Strategic Plan acknowledges that audits have shown significant problems with data reliability in other parts of the department. VA has initiatives and strategies to address this issue.⁷

In retrospect, VR&E's turnaround effort in recent years did not produce an organizational transformation, but our Task Force does agree that there were many improvements in the program by the year 2000, most notably the introduction of the Corporate WINRS case management information system, the employment specialist pilot, and the first customer survey. Nevertheless, we do not believe that VR&E or its parent organization VBA have carried these efforts to their fullest potential, largely because the Central Office paid little attention to the program, as we describe in this report.

Blue Ribbon Panel Report

At that time, however, things looked promising. VR&E set up a Blue Ribbon Panel of outside rehabilitation experts who were upbeat in their findings when their report came out in 2001. In general, the Task Force agrees with the Blue Ribbon Panel's recommendations, most of which have not been fully realized.

¹ For a list of all the reports and other resources we reviewed, please see the Bibliography in Appendices. For brief summaries of reports from 1976-99, see pages 88-89 in the January 1999 report of the *Congressional Commission on Servicemembers and Veterans Transition Assistance*.

² Hereafter we will refer to this report as the Veterans Transition Assistance Report.

³ Outcome-Based Assessment of the Chapter 31 Program, Dr. David H. Dean, University of Richmond, Richmond, VA (unpublished presentation to the Task Force).

⁴ GAO in 1996 found VA to be in the early stages of implementation. However, the VA strategic plan issued at the end of FY 1997 lacked a detailed plan as to how VBA intended to measure overall effectiveness of its VR program.

⁵ The Job Ready Phase, An Analysis from the 2002 Survey of Veterans Satisfaction with the VA Vocational Rehabilitation and Employment Program, Sept. 2003, by Rhoda Britt, VBA Surveys and Research Staff, Office of Performance Analysis and Integrity.

⁶ VA FY 2003-2008 Strategic Plan, p. 6-1.

Appendix 7

Comments from 2002 Veterans Satisfaction Survey

The Job Ready Phase

An Analysis of Verbatims from the 2002 Survey of Veterans Satisfaction with the VA Vocational Rehabilitation and Employment Program

Surveys and Research Staff
VBA Office of Performance Analysis and Integrity
September 2003

Introduction

This report presents the results of a content analysis of the written comments, or “verbatim,” from the “2002 Survey of Veterans Satisfaction with the VA Vocational Rehabilitation and Employment (VR&E) Program, Job Ready Phase.” In every survey that the Surveys and Research staff conducts, respondents are given the option of writing in additional comments on the last page of the questionnaire on ways to improve service, or to give more detail about a specific personal experience. Since generally people are only willing to provide more detail on areas that they feel are *very* important to their satisfaction with the program, these verbatims provide extremely helpful insights into the best ways to achieve higher veteran satisfaction with service. This report will outline the major issues that were mentioned by the veterans in the job ready phase and will also provide a sampling of the comments for each issue.

Methodology

In previous survey administrations the verbatims were bundled with the survey reports and given to the program for review. However, since the VR&E survey was conducted at only the National level in 2002, the Surveys and Research Staff retained the verbatims from all three phases of the survey (Evaluation and Planning, Rehabilitation, and Job Ready) in order to do an in-depth analysis and provide a summary to the VR&E service. The survey was sent in December 2002 to the total population of 8,147 veterans who were in the job ready phase or who had been deemed rehabilitated within the previous four months. A total of 3,885 respondents completed the questionnaire for a response rate of 53.0 percent. Of these 3,885 respondents, 54.3 percent or 2,111 veterans submitted verbatims.

The 2,111 verbatims were reviewed and sorted into nine categories. A significant percentage (17.9 percent) of the veterans wrote about more than one issue, therefore the percentages that follow will total over 100 percent.

Overview

Of the 2,111 veterans who provided comments at the end of the questionnaire, almost a third (30.6 percent) wrote in to compliment the VR&E program. Almost one-fourth (23.9 percent) of the respondents who submitted comments wrote to complain about their counselors; and 23.5 percent of respondents wrote in to request that there be

more help with the job search phase of the program. Additionally, 17.9 percent of the respondents wrote in to suggest changes to the program regulations or an increase in benefits, and 9.6 percent remarked on their dissatisfaction with their career choice and/or rehabilitation plan.

Roughly five percent or less of the respondents mentioned other issues such as delays in receiving benefits, not receiving enough information about the program, school problems, or miscellaneous issues that could not be easily categorized. Due to the small number of comments in these categories, they will not be covered in this report.

Complimentary Remarks

Almost a third of the veterans submitting comments (30.6 percent) wrote in to compliment the program, with 457 veterans writing in only positive remarks, and another 190 including a compliment about a certain aspect of the program along with complaints about other aspects. Many were very pleased with the tuition assistance that enabled them to attend school, and many of the positive comments were directed at counselors who exceeded the veteran's expectations. The following are a sampling of the verbatims that complimented the program for outstanding service:

"This is a very, very good program! My needs were met very quickly. There are a lot of good people working for the veterans and this program shows it."

"Ever since being involved with the VA in any capacity, I have been 100% satisfied and treated with the greatest respect possible. Everyone I've been in contact with were kind, passionate, respectful, and went way beyond the call of duty."

"My counselor was a virtual Godsend. She was attentive, conscientious, caring, and personable -always going that extra mile to make sure I received everything I needed to succeed in the program. Thanks to her, I now have a promising career and I know I couldn't have done it without her! Thanks for the opportunity to comment on this wonderful, worthwhile program!"

"The program helped put me where I'm at now - owner of my own business. The counselor gave me good advice and was there when I needed him."

Specific Job Ready Phase Issues

Problems with Counselor

Overall, 23.9 percent of the respondents who submitted verbatims mentioned having problems with their counselor, with 314 respondents writing in with this issue as their only complaint and an additional 192 respondents mentioning it as one of several issues. Several specific aspects of counselor interaction were criticized, but the two most frequently mentioned issues were rudeness/lack of understanding and difficulty maintaining an adequate amount of contact. A common request was to have counselors who are sympathetic to the hardships disabled veterans face and who are actively

interested in their well-being. Many felt as if they were just another case file and that the counselor did not have sufficient time or motivation to understand their individual situation. Many also expressed concern at the caseloads of the counselors, feeling that they were too overworked to be really effective. It was clear from these comments that the veteran's relationship with the counselor has tremendous influence on their satisfaction with the program, as so many of the benefits and services provided by the program are at the discretion of the counselors. The following are a sampling of the comments:

"Please don't treat veterans like they are just a number. I personally feel like this program will work with tremendous results if and only if the counselors truly put their hearts and minds into the program as well. It has been my unfortunate experience, that most of the VA representatives and counselors, of whom most are prior veterans, have an 'I don't care' attitude."

"I feel the VA should use a person with a military background who genuinely cares about a veteran in that very important position. I feel that my VA counselor did not. She said the program was a 'welfare program' and she felt it was not fair for veterans to receive the benefits over any one else."

"The program is striving to take care of veterans but it is in need of more counselors. [It takes] too long to meet and see them. Hours need to be changed to maybe one late night a week or every couple of weeks to meet with those who do work or have to travel great distances."

"The VA and its representatives need to be more easily accessible. It has taken me 3 to 4 months of repeated phone calls (on a weekly basis) to get a hold of my counselors at the VA. They never return calls and are very unresponsive."

Job Search

Another major area of concern to veterans was the job search. Almost one-fourth (23.5 percent) of those submitting comments wrote in to request there be more help with job hunting, with 332 veterans writing in solely about this issue and 164 mentioning it as one of several issues. A common multiple issue verbatim was one that praised almost every other aspect of the program such as the training and subsistence provided, but criticized the lack of help in the final phase. Many expressed surprise at being sent out on their own to find a job after having received so much support and guidance from their counselor throughout their schooling. Many also felt it was unfair to expect disabled veterans to be able to compete in the general job market and requested that VA set up a network of disabled veteran-friendly employers. The following are a sampling of the comments:

"The person who knew about the job I ended up with wasn't a Voc Rehab counselor but in some other job in the office there. That was good but it seemed almost accidental. I feel like that kind of in-office networking should be a regular part of what happens."

“After school I have tried several times to obtain help with job placement and have yet to receive any real help. The VA spent a lot of time and money sending me to school. I feel it would help round out the program if they would work with me on job placement. I am still doing the same job as I was when I went to school. Kind of a waste for both of us.”

“I feel that VA could improve the program by requiring students to do an internship with a government official or VA office so they can enhance their skills. The only problem I had with the program is that every job I applied for told me that my degree was good, but I need more experience. I had to take a job with an employer that doesn’t help my skills in my field.”

“I think that developing a job network for disabled veterans would be excellent. This network should include employers, job description, waiver of age limits to enter Federal jobs and help networks.”

Program Regulations and Benefits

A slightly smaller percentage of the respondents (17.9 percent) wrote in to suggest changes to the program regulations or increases in the subsistence allowance. Of this 17.9 percent, 295 veterans commented only on program changes and an additional 84 made suggestions after commenting on other issues. The most often-mentioned suggestions were for increases in funds for subsistence and school supplies, and an increase in the amount of schooling allowed. Many veterans indicated that they were the sole wage earner for their family and complained about the difficulty of supporting the family on the subsistence payments while in training. Others suggested more flexibility in allowing them to continue their education past the minimum required for their field, due to the difficult job market. A common complaint was that the program would not approve more than a two-year degree, which they felt was unrealistic in today’s job market for most careers. The following are a sampling of the comments:

“The program would be better if computer equipment and supplies were added. It’s hard to learn to program computers if you don’t have the software or equipment.”

“The program needs to be updated with the times to provide more, although tuition was paid, the monthly allowance was \$400 less than the GI Bill. If the program is designed to provide disabled veterans with the additional assistance they need, and the veteran has paid into the GI Bill, why must he or she forgo one for the other? I had to take on another job to cover my monthly bills. Also, a degree alone does not make one competitive in today’s job market. The program needs to include business licenses and certification courses.”

“I recommend allowing veterans with a high degree of drive, who require less than 48 months of training/education, to pursue graduate degrees. Make us into good tax payers.”

“Please include a program that allows veterans to sustain part-time employment while going through the VR&E program. The monthly subsistence isn’t enough to live off while going through training. I think your completion rate will go up. Combine going to school with part-time employment at a Federal agency.”

“The subsistence allowance is very small to support my family during my rehabilitation. It is kind of difficult for me to buy my books and supplies from my own money and then get reimbursed at a later date, because reimbursement takes a long time and I don’t have enough money to advance for my supplies.”

Career Choice/Rehabilitation Plan

Another 9.6 percent of the respondents submitting verbatims wrote about their dissatisfaction with the rehabilitation plan and career chosen for them, with 146 veterans writing only about this issue and 56 including it as one of several issues. Although a relatively low percentage wrote about this issue, it should still be cause for concern since the veteran’s rehabilitation plan is the foundation of the entire program. A common complaint was the lack of choices given to the veteran when deciding on a career path, and in some cases the total lack of concern for accommodating their disability. Some veterans felt pushed into certain areas that were currently good job markets (e.g., information technology), despite having no interest or aptitude in the field. Many also complained that the counselor was simply not knowledgeable regarding employment markets and thus could not effectively counsel them on what career goal to pursue. Another issue mentioned repeatedly was not being allowed sufficient schooling to meet the rehabilitation goal agreed on by their counselor and themselves. The following are a sampling of the comments:

“I do wish that when I originally started the program that my career goals had been more closely screened. I finished a degree in Professional Aeronautics and have been unable to find suitable employment. When visiting with the job placement specialist I was told that I would never find a job and basically wasted time and money. I have since had to decide on another career path – I feel that if I had been screened a little more appropriately this could have been avoided!”

“Counselors initially handling case had a ‘one size fits all’ attitude towards rehabilitation. Seemed to shuffle majority of his clients into computer training. That is a ‘hot’ career field but it is ill-suited to kinesthetic/tactile learners.”

“VA could improve by testing interest of person and testing aptitude, then matching these two for a training program. I did not finish my program because the counselor only wanted me to go into an area of training where I had no interest or background. This was a set up for failure.”

"My disability was never taken into consideration. Jobs and job leads were not realistic. I have a disability with my right leg and no job lead gave this any consideration. I retired from a job driving a fork lift because it was too stressful on my leg. I was given a job lead driving a fork lift in and out of a freezer and lifting 50 pound loads by hand. I am 55 years old with a bad knee and I have not had one suitable job offer from this program."

Summary

It is clear from the large volume of verbatims for this phase, clustered around four specific issues, that many veterans are frustrated and disappointed by the service provided during this phase of the program. This is also validated by the specific overall satisfaction question on the survey: just over half (52.1 percent) stated they were very or somewhat satisfied with the employment services provided during the job ready phase. In general, the verbatims show that many veterans feel counselors need to show a more caring and compassionate attitude toward them, and make an effort to truly understand their individual needs and aspirations. They also expect counselors to be more accessible and to have more interaction with them during the search for employment.

Many have the expectation that the program will see them through to successful employment by providing contacts and job opportunities specifically for disabled veterans, instead of releasing them to conduct a search independently after their schooling is finished. These expectations may well be unrealistic, but in any case veterans should be told exactly what to expect at the beginning of the program to prevent these kinds of disappointments. From the comments provided it seems there is great inconsistency among different counselors in just how much job search help is provided, some received excellent referrals and help with resume preparation and interview skills, but many others reported receiving no help at all or not even being aware they were eligible for job search help.

Also, a significant number of veterans wrote in to suggest changes to the program regulations and an increase in the amount of subsistence provided, because the current program structure is not adequately meeting their needs. In fact, the survey asks those respondents who have withdrawn from the program their reasons for doing so, and some of the major reasons were medical problems (23.2 percent of those who voluntarily withdrew), financial difficulties (23.2 percent), and family responsibilities/difficulties (25.3 percent). While there is little the VR&E program can do about these issues in the short-term, these verbatims will hopefully provoke serious thought about policy changes to ensure the long-term success of the program.

Finally, and perhaps the most important issue of all, is that almost 10 percent of the respondents who submitted additional comments expressed their unhappiness with the career goal itself. This is an area that has a tremendous impact on veterans' satisfaction with the entire program as well as the success of their rehabilitation. If buy-in to the rehabilitation plan is not established at the beginning and maintained throughout the training and job search phases, a successful outcome is extremely unlikely, no matter how much the quality in other service areas improves.

Appendix 8

Federally-Funded Employment Programs for Veterans

Introduction

Published data and reports from the General Accounting Office (GAO) and Department of Labor's Bureau of Labor Statistics (BLS) provide detailed information on vocational rehabilitation and employment programs. This appendix outlines federally-funded training and employment services, including those programs specifically designated for veterans.

GAO Report, GAO-03-589, "Multiple Employment and Training Programs – Funding Performance Measures for Major Programs," April 2003, details the estimated number of program participants who received employment and training services by federal programs. Forty-two of the 44 programs in the current review served more than 30 million participants (page 13). The Department of Labor's Employment Service provided assistance to an estimated 19 million participants in FY 2002. Of the 42 programs:

- Seven programs – which are not named as "veterans" programs – serve the most number of individuals, approximately 27 million participants.
- Thirty-five smaller programs serve three million participants including five veterans-named programs that serve slightly more than one million veterans.

Veterans participating in "veterans-named" programs account for an estimated 3.56 percent of the 30 million participants in federal employment and training services programs in FY 2002.

Veterans Training and Employment Programs

The Department of Labor's (DOL) Local Veterans' Employment Representative (LVER) Program provided job development, placement, and support services to 523,534 veterans and separating military service members and spouses in FY 2002. Veterans may include disabled veterans, homeless veterans, veterans with combat experience, wartime, selected medal recipients, economically or educationally disadvantaged veterans, or veterans in need of a State license or certification to practice or work in their trained field. Department of Labor Assistant Secretary for Veterans Employment and Training Service's (VETS) Annual Report to Congress 2000 indicates that 150,086 veterans and other eligibles entered employment as a result of services during Program Year (PY) 1999. Similarly, 14,291 disabled veterans and 6,700 special disabled veterans¹ entered employment as a result of services provided by LVERs.

DOL's Disabled Veterans' Outreach Program (DVOP) develops jobs and job training opportunities for disabled and other veterans through contracts with employers. The program also promotes and develops on-the-job training and apprenticeship. According to the Assistant Secretary for VETS Annual Report to Congress 2000, 459,814 disabled veterans were served in FY 2002. Over 138,000 veterans and other eligibles entered employment in PY 1999. Of the 153,655 Vietnam-era veterans registered by DVOPs, 47,297 entered employment. DVOPs registered 50,400 disabled veterans and 16,702 entered employment. DVOPs also registered 25,155 special disabled veterans and 8,273 special disabled veterans entered employment.

The Department of Veterans Affairs Vocational Rehabilitation and Employment (VR&E) program provides for services and assistance to veterans with service-connected disabilities to prepare for, obtain, or maintain suitable employment and for severely disabled veterans to achieve maximum independence in daily living. In FY 2002, 69,634 veterans participated in the VR&E program. (VR&E statistics for 2002 indicate that 65,154 veterans with disabilities were found eligible to participate in evaluation and planning; 667 received employment services and 7,773 participants were rehabilitated with suitable employment.)

DOL's Homeless Veterans' Reintegration Program provides funds for demonstration programs to expedite the reintegration of 12,142 (FY 2002) homeless veterans into the labor force. Participants are "eligible veterans." In PY 1999, 4,639 homeless veterans were enrolled in to the program and 2,383 were placed or entered into unsubsidized employment.

DOL's Veterans' Workforce Investment Program supports employment and training programs through grants or contracts to meet the needs for assistance of recently-separated veterans, service-connected disabled veterans, campaign/conflict veterans, and veterans who have significant barriers to employment. In FY 2002, 4,600 veterans were served. In PY 1999, numbers included 3,162 participants, of which 2,115 were Vietnam-era veterans, 933 were recently separated veterans and 683 were disabled veterans. A total of 2,114 veterans were placed in employment.

It should be noted that new legislation, Public Law 107-288, Jobs for Veterans Act, requires "priority of service" for veterans in all Department of Labor funded programs.

By combining data elements from GAO Report, GAO-03-589, we found that a total of 1,068,724 participants were served by veterans-named federal training and employment programs. VA's Vocational Rehabilitation and Employment Program assisted 69,634 Disabled Veterans exclusively (6.5 percent of total participants) in FY 2002. The Department of Labor assisted 92.4 percent of total participants as a mix of 987,948 Special Disabled Veterans, Disabled Veterans, Eligible Veterans, and Eligible Persons. Labor also assisted 12,142 Homeless "Eligible Veterans" (1.1 percent of total participants).

It is very likely that veterans with or without disabilities are also participants in other federal training and employment program that are not veterans-named programs. As an example, the Veterans Health Administration's Compensated Work Therapy (CWT) program provides vocational and psychosocial rehabilitation to enable veterans to return to working and living as independently as possible in the community. In FY 2002, CWT provided services to 14,828 unique individuals. Of the program participants, 3,480 or 40 percent of the 8,700 discharged veterans were employed.

¹ A qualified "special" disabled veteran is: (1) a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under the laws administered by the U.S. Department of Veterans Affairs for a disability rating of 30 percent or more; or, rated at 10 percent to 20 percent if it has been determined that the individual has a serious employment disability; or, (2) a veteran who was discharged or released from active duty because of a service connected disability.

Appendix 9

VR&E Legislative History

After World War I

Vocational rehabilitation began as a government service to war-injured veterans and disabled citizens during the World War I era. In 1917, the War Risk Insurance Act of 1914 was amended to provide courses for rehabilitation and vocational training in cases of dismemberment, injuries to sight or hearing, and other injuries resulting in permanent disability. Eligibility for vocational rehabilitation was established retroactively to the date the United States entered World War I-April 6, 1917. Individuals disabled in service between World War I and II had no opportunity to benefit from vocational rehabilitation, as the program did not exist.

After World War II

In 1943, Public Law 78-16 reestablished the vocational rehabilitation program for veterans of World War II. Achievement of vocational rehabilitation was again defined as completing suitable vocational training, just as it had been during the World War I era. The maximum entitlement was four years, and no veteran could receive rehabilitation beyond six years after the war's end. Approximately 621,000 disabled veterans received vocational rehabilitation training following their service in World War II.

Benefits in Peacetime

Recognizing for the first time the nation's debt to disabled veterans of peacetime military service, Congress established Public Law 87-815 in 1962. This public law authorized vocational rehabilitation benefits for veterans who served during peacetime between World War II and the Korean Conflict. However, eligibility was more restrictive than for wartime disabled veterans. Veterans with 10 percent and 20 percent service-connected disability ratings were not eligible for vocational rehabilitation services. The restrictiveness of this peacetime legislation also applied to the vast majority of Vietnam era veterans who received reduced benefits from August 1964 to January 1975, a period some have argued to have been their time of greatest need.

Relaxed Eligibility and Entitlement

Public Law 93-508 enacted in 1974, relaxed eligibility and entitlement provisions of the veterans' vocational rehabilitation program. The legislation allowed the delivery of rehabilitation services to 10 percent and 20 percent service-connected disabled veterans whom VA determined to be in need of vocational rehabilitation services. The term "vocational rehabilitation" continued to be defined as training to restore employability lost as a result of a service-connected disability. Thus, veterans who successfully completed training for suitable employment were determined to be rehabilitated.

Congressional Scrutiny

In the late 1970s, the veterans' vocational rehabilitation program came under sustained congressional scrutiny. Congress directed VA to engage in greater efforts to encourage veterans to use available vocational rehabilitation and counseling services. In 1977, Public Law 95-202 mandated that the Veterans Administration review its vocational

rehabilitation program and compare it to the authority provided the state-federal vocational rehabilitation program under the Rehabilitation Act of 1973. The review concluded that the vocational rehabilitation program was in need of substantial revision to bring it up-to-date with current rehabilitation practices. In response to these findings, the VA Administrator created a task force to improve the program.

Suitable Employment and Independent Living Added

The work of the task force resulted in the creation of the current VA Vocational Rehabilitation Program through the enactment of the Veterans' Rehabilitation and Education Amendments of 1980 (Public Law 96-466). The purpose of the program was changed to enable veterans with service-connected disabilities to achieve maximum independence in daily living and, to the maximum extent feasible, to become employable and to obtain and maintain suitable employment. This change expanded the scope of vocational rehabilitation beyond just training to include both suitable employment and independence in daily living, and fundamentally changed the philosophy and purpose of the program.

Apart from suitable employment, Public Law 96-466 added another new dimension to VA's vocational rehabilitation program – that of independent living. VA was now mandated to provide rehabilitation services to the most severely disabled veterans, even though they may never become competitively employed.¹ This new aspect of the program was designed to provide services that enable severely-disabled veterans to live and function as independently as possible. By adding this component to its rehabilitation program, VA was following the lead established by other non-veteran public vocational rehabilitation programs.

Changes in Eligibility Requirements

Eligibility requirements tightened again in 1990, when Public Law 101-508 increased the level of disability required for program entitlement from 10 to 20 percent. Veterans with 10 percent disability rating already in the program or who had previously applied for the program could continue to receive rehabilitation services. However, this program eligibility restriction was short-lived. By 1993, Public Law 102-568 changed the requirements again so that certain veterans with 10 percent disability ratings could participate in the program.

Currently, veterans are eligible for program services if they have a 20 percent or higher compensable service-connected disability and VA determines they have an employment handicap. The law defines an employment handicap as an impairment of a veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests. Veterans with a 10 percent service-connected disability also may be eligible if they meet the additional criterion of having a serious employment handicap. The law defines a serious employment handicap as a significant impairment of a veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests. The eligibility period generally extends for 12 years, beginning on the date VA notifies the veteran of a qualifying rating. Veterans found eligible for services can receive up to 48 months of benefits during the 12-year period.

¹ Recent advances in medicine, technology, and public attitudes make employment a possibility for severely-disabled veterans.

Appendix 10-A

Overview of Title 38

United States Code

Chapters 18,31,35,36

Chapter 18

Vocational Training and Rehabilitation for Children with Spina Bifida or Other Covered Birth Defects.

Purpose

Vietnam veterans' children who have spina bifida or other covered birth defects may receive a vocational oriented program of training, education, employment services, and other supportive assistance designed to allow the child to achieve suitable employment.

Program Length

A child's program must be planned to provide no more than 24 months of training to prepare the child for employment. A child may receive up to an additional 24 months of training if the initially planned program proves unsuccessful in getting the child employed.

Program Description and Limitations

This program mirrors the Chapter 31 vocational rehabilitation and employment program for service-disabled veterans, with certain exceptions. A child can receive the full range or evaluative, program planning, training, and employment services that a service-disabled veteran can receive. In addition to the limitation on training program length, the following exceptions apply to what would normally be provided under Chapter 31:

- No subsistence allowance and no Revolving Fund advances
- No automobile adaptive equipment
- No more than 30 days of extended evaluation of employability
- No independent living programs, although limited supportive services are permitted to a child in a vocational program

Chapter 31

Training and Rehabilitation for Veterans with Service-Connected Disabilities

Legislative Intent

Title 38, U.S.C., Chapter 31, Section 3100, directs the VR&E Program to provide services and assistance necessary to enable veterans with service-connected disabilities to become employable, and to obtain and maintain suitable employment; or if necessary, to achieve independence in daily living to the maximum extent feasible.

Objective

Job acquisition, in a suitable work situation, is the stated objective of the vocational rehabilitation program (38 Code of Federal Regulations 21.1). During the evaluation process, personal assessments, occupational research and individual life goals are reviewed relative to future job considerations. The second stated objective of the

vocational rehabilitation program is to provide entitled seriously disabled veterans all services necessary to enable them to achieve maximum independence in daily living.

Scope

VR&E counselors develop rehabilitation plans that will assist veterans in accomplishing their program goals of suitable employment. Chapter 31 services can include: comprehensive evaluation services, vocational exploration and counseling, educational and personal adjustment counseling, financial assistance for vocational and educational training expenses, medical treatment, tutorial assistance, reader or sign language interpreter services, employment services, case management services, work adjustment training, and adult basic instruction. Suitable employment is defined as employment that:

- Is both stable and continuing,
- Is consistent with a veteran's pattern of interests, aptitudes, and abilities; and
- Does not aggravate a veteran's disabilities.

While the primary focus of the VR&E program is providing necessary assistance to enable service-connected disabled veterans to prepare for, achieve, and maintain suitable employment, the program also serves veterans whose service-connected disabilities impact their capacity to seek out and maintain suitable employment. VR&E provides independent living services to assist veterans in becoming more independent in their daily living activities. Entitlement to independent living services and assistance pertains when a vocational goal by a veteran is not reasonably feasible, the veteran shall be entitled to a program of independent living services and assistance designed to enable such veteran to achieve maximum independence in daily living. The term "independence in daily living" means the ability of a veteran, without the services of others or with a reduced level of the services of others, to live and function within the veteran's family and community.

Eligibility and Application

Title 38 of the United States Code, Section 3101, states that the term "employment handicap" means an impairment resulting in substantial part from a disability (which diminishes a veteran's ability) to prepare for, obtain, or retain employment consistent with the veteran's abilities, aptitudes, and interests. Although the veteran's disability is not the only criteria upon which an employment handicap may be determined, it plays a predominant role in the process of defining the existence of an employment handicap.

In the past, Congress established an eligibility requirement of 30% combined service-connected rating. At present, a person shall be entitled to a rehabilitation program under the terms and conditions of Chapter 31 if the veteran has a service-connected disability rated at 20 percent or more that was incurred or aggravated in service on or after September 16, 1940; or is hospitalized or receiving outpatient medical care, services, or treatment for a service-connected disability pending discharge from the active military, naval, or air service, and the Secretary determines that the person is suffering from a disability which will likely be compensable at a rate of 20 percent; and is determined by the Secretary to be in need of rehabilitation because of an employment handicap. Eligibility is also applicable if the person is a veteran who has a service-connected disability rated at 10 percent which was incurred or aggravated in service on or after

September 16, 1940; and is determined by the Secretary to be in need of rehabilitation because of a serious employment handicap.

Veterans meeting basic eligibility requirements submit VA Form 28-1900; the veteran has the option of providing VA with a completed paper form or submitting the form electronically over the Internet. VA Form 28-1099 provides the veteran with basic information on entitlement as well as a brief explanation on the different services that might be provided.

Period of eligibility is defined as up to 12 years from the date VA notifies a veteran that they have a qualifying compensable disability. If certain conditions prevented the veteran from participating in a program of rehabilitation or if a veteran is determined to have a serious employment handicap, the 12-year limit may be waived.

Determination

The elements that are to be considered in the determination of an Employment Handicap are detailed in 38 CFR 21.51 and the following definitions provide guidance to VR&E counselors:

- Employment Handicap (E.H.) is an impairment of the individual veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests. The impairment results in substantial part from a service-connected disability. For veterans rated at 20% or more, a finding of employment handicap results in a finding of entitled.
- Serious Employment Handicap (S.E.H.) represents a significant impairment of a veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests. The S.E.H. results in substantial part from a service-connected disability. For veterans rated at 10% and for veterans whose 12-year period of basic eligibility has passed, the finding of an S.E.H. is necessary to establish entitlement.

The VR&E Counselor must determine if the veteran has experienced restrictions on employability caused by:

- The veteran's service-connected disabilities
- The veteran's non service-connected disabilities
- Deficiencies in education and training
- Negative attitudes toward people with disabilities
- The impact of alcoholism and drug abuse
- Consistency with abilities, aptitudes and interests
- Other pertinent factors

An employment handicap exists when *all* of the following conditions are met:

- The veteran has an impairment of employability;
- The veteran's service-connected disability materially contributes to the impairment;

- The veteran has not overcome the effects of the impairment through employment in an occupation consistent with his or her pattern of abilities, aptitudes, and interests.

Relationship of Disability to Employment Handicap

The veteran's service-connected disability need not be the sole or primary cause of the employment handicap but it must "materially contribute" to the impairment. That is, its effects must be identifiable, measurable, or observable.

The Court of Veterans Appeals (COVA) in *Davenport v. Brown* (1995) set aside regulations that required a causal nexus relationship between a veteran's service-connected disability and an employment handicap or serious employment handicap. Public Law 104-275 redefined the terms "employment handicap" and "serious employment handicap" to include a requirement for impairment resulting in substantial part from a service-connected disability effective with applications received on or after October 9, 1996.

Once determined that a veteran has an employment handicap, the issue of a service-connected-disability substantial contribution to the employment handicap has been established.

The primary difference between an employment handicap and a serious employment handicap under Public Law 104-275, is one of degree of vocational impairment, not service-connected disability. Guidance for VR&E counselors is contained in 38 CFR 21.51, VBA Circular 28-97-1, and VR&E Service Policy Bulletin 99-1.

Program Services

The Chapter 31 program provides the following services and benefits to help veterans achieve the stated objective of their vocational rehabilitation plan:

a) Counseling and Evaluation

Every applicant for Chapter 31 benefits receives an individualized evaluation of his or her need for services which includes a comprehensive assessment of interests, aptitudes, abilities, limitations imposed by disability, and rehabilitation needs.

b) Vocational Training Benefits

Chapter 31 provides school tuition, fees, books, and training supplies. Specific tools, such as computers, art supplies, mechanical tools, and the like may be provided as required of the educational or training program. Tutoring services are provided to meet the individual's needs.

c) Monthly Subsistence Allowance

Veterans in approved vocational rehabilitation training are paid a non-taxable monthly subsistence allowance. Effective October 1, 2003, the following monthly rates are in effect:

Monthly Subsistence Allowance

Type of Training	Training Time	No Dependents	One Dependent	Two Dependents	Each Additional Dependent
Institute of Higher Learning*	Full Time	\$464.97	\$576 .76	\$679 .66	\$49.55
	¾ Time	\$349.37	\$433.20	\$508.15	\$38.10
	½ Time	\$233.77	\$289.65	\$340.46	\$25.42
OJT, Farm Cooperative, Apprenticeship	Full Time	\$406.54	\$491.63	\$566.59	\$36.85
	Full Time	\$464.97	\$576 .76	\$679 .66	\$49.55
Extended Evaluation	¾ Time	\$349.37	\$433.20	\$508.15	\$38.10
	½ Time	\$233.77	\$289.65	\$340.46	\$25.42
	¼ Time	\$116.87	\$144.82	\$170.23	\$12.68
Independent Living	Full Time	\$464.97	\$576.76	\$679.66	\$49.55
	¾ Time	\$349.37	\$433.20	\$508.15	\$38.10
	½ Time	\$233.77	\$289.65	\$340.46	\$25.42

*Institutional training also includes unpaid or nominally paid OJT or work experience in a federal, state, local, or Indian tribal government agency.

d) Medical Benefits

Chapter 31 program recipients are entitled to every medical service necessary to assist him or her in completing the program of services. These benefits include the full range of medical and dental services required for the individual's needs.

e) Case Management Services

A Vocational Rehabilitation and Employment Service case manager is assigned to each Chapter 31 recipient. This case manager is responsible for ensuring the delivery of all services to the recipient, and for offering all necessary assistance to help the recipient successfully complete the program of services.

f)Independent Living Services

Veterans who are determined to be unable to achieve suitable employment are offered a comprehensive evaluation of their needs as well as all services necessary to assist them to achieve maximum independence in their daily living. Such services may include medical treatment, special instruction in daily living activities, purchase of special equipment and/or supplies, and modification of their living quarters.

g) Employment Services

Most Chapter 31 participants have a program goal of attaining and retaining suitable employment. Case managers are tasked with assisting participants in identifying, applying for, and retaining suitable jobs for at least 60 days. Program participants who are enrolled in a training program which involves primarily a classroom setting often wait until their training programs are nearing completion to avail themselves of job placement services.

Duration of Chapter 31 Rehabilitation Programs

The duration for a veteran's participation is defined by specific type of VR&E service and provisions are in place for extensions should that determination be made:

- Extended evaluation (when VA is unable to determine reasonable feasibility for achievement of a vocational goal) – up to 12 months with additional extensions if necessary of up to 6 months
- Achievement of a vocational goal – up to 48 months (extensions may be granted for veterans determined to have a serious employment handicap and if certain other conditions apply)
- Achievement of an independent living goal – up to 24 months

Chapter 35 Special Restorative Training

Eligibility

Spouses and children who otherwise qualify for Dependent's Education Assistance under Chapter 35, United States Code, may receive special restorative training to overcome or lessen mental or physical disabilities.

Benefits

A spouse or child receives comprehensive evaluative services from a Vocational Rehabilitation and Employment Service counselor to determine the best program of services. A case manager then assists the spouse or child throughout the program of services.

For high tuition programs, the spouse or child may also receive accelerated payment of the Educational Assistance Allowance. The normal entitlement limit may be extended to allow the spouse or child to achieve the goals of the special restorative training program

Chapter 36 Educational and Vocational Counseling

Eligibility

Staff members of the Vocational Rehabilitation and Employment (VR&E) Service may provide educational and vocational counseling to the following individuals:

- Service members within 180 days of planned discharge or release from active duty under conditions other than dishonorable
- Veterans within 1 year after discharge or release from active duty under conditions other than dishonorable
- Individuals currently eligible to receive any VA administered program of educational assistance; for example, Chapter 30 or 35 under title 38 United States Code

Services

This counseling may include vocational and other related testing, interpretation of test results, guided job exploration, development of one or more suitable vocational goals, and identification of training facilities that could help the veteran qualify for employment in a chosen vocational goal.

Appendix 10-B

Educational Benefits and Services

An overview of Chapter 31 educational related benefits is listed in Appendix 10-A. Non-VR&E educational benefits include the Montgomery GI Bill for Active Duty or Selected Reserve and the Veterans Educational Assistance Program. An overview of these education programs follows:

- **The Montgomery GI Bill - Active Duty (MGIB)** program provides up to 36 months of education benefits. This benefit may be used for degree and certificate programs, flight training, apprenticeship/on-the-job training, and correspondence courses. Remedial, deficiency, and refresher courses may be approved under certain circumstances. Generally, benefits are payable for 10 years following your release from active duty. This program is also commonly known as Chapter 30. The rate for Montgomery GI Bill (Chapter 30) benefits for approved full-time studies is \$985 effective October 1, 2003. When MGIB eligibility is based on an obligated period of active duty of two years, the amount of MGIB education benefits increases from the current full-time monthly rate of \$546 to \$800 effective October 1, 2003.
- **The Montgomery GI Bill - Selected Reserve (MGIB-SR)** program is available to members of the Selected Reserve that includes the Army Reserve, Navy Reserve, Air Force Reserve, Marine Corps Reserve and Coast Guard Reserve and the Army National Guard and the Air National Guard. This benefit may be used for degree and certificate programs, flight training, apprenticeship/on-the-job training, and correspondence courses. Remedial, deficiency, and refresher courses may be approved under certain circumstances.
- **The Veterans Educational Assistance Program (VEAP)** is available if the veteran first entered active duty between January 1, 1977 and June 30, 1985 and the veteran elected to make contributions from his or her military pay to participate in this education benefit program. The veteran's contributions are matched on a \$2 for \$1 basis by the Government. This benefit may be used for degree and certificate programs, flight training, apprenticeship/on-the-job training, and correspondence courses. Remedial, deficiency, and refresher courses may be approved under certain circumstances.

Under Chapter 31, educational opportunities are an enabling factor and a component of a vocational rehabilitation plan to assist the veteran in obtaining or maintaining suitable employment. The Montgomery GI Bill provides the veteran with a monthly educational benefit to help defray the cost of tuition, books, and fees. When comparing Chapter 31 to Chapter 30, there are differences and the exhibit below outlines some basic distinctions between the two programs:

Comparison of Chapters 31 and 30 Education Benefits and Services

Type of Service or Benefit	Chapter 31	Chapter 30
Time period that a veteran can use service or benefit	12 years after most recent C&P rating decision	10 years after discharge from duty status
Eligibility Determination	Yes	Yes
Entitlement Decision	Yes	No
Duration of Benefits	48 months	36 months
Counseling and Evaluation Services	Yes	No
Vocational Training Benefits	VA pays the full cost of tuition, fees, and books at an institution of higher learning approved by VR&E Counselor. A computer and other aids or services to assist the veteran can be purchased by VA.	Limited monthly benefit. Current amount for full time student is \$985.
Monthly Subsistence Allowance	Yes, the amount depends on number of dependents and status of veteran in training.	No
Medical Benefits	Yes, if veteran's vocational plan is impacted.	No
Case Management Services	Yes	No
Independent Living Services	Yes	No
Employment Services	Yes	No

Appendix 11

A New Five-Track Employment Process

The new Five-Track Employment Process is the cornerstone of the new integrated, employment-driven service delivery system discussed in Chapter 4. The Task Force recognized that although significant numbers of veterans will continue to experience impairments, advances in medical rehabilitation, biomedical technology, and rehabilitation engineering will enable many veterans with service-connected disabilities to be employed for long periods of time after military service. The Five-Track Employment Process addresses the whole person and provides a wider array of assistance to help the disabled veteran from one end of the spectrum to the other. The Five-Track process will provide assistance for the veteran to rapidly return to a previous job, get a new job, stay on a current job, and, at the same time, become more independent in their home and community.

The Task Force concluded that a new VR&E employment program process is required to meet the needs of the 21st Century veteran:

- 1) those who require immediate employment services directed at rapid return-to-work with their previous employers or new employers,
- 2) those who require longer term services, including education, leading to employment,
- 3) those seeking self-employment, and
- 4) those for whom employment is not currently possible but who would benefit most from independent living.

The Task Force designed the new process based on data about veterans currently served by VR&E and the expected demand for services over the next 20 years. The process, properly implemented using state of the art employment readiness, job placement, employer development, and marketing methods, will lead to higher rates of employment for veterans. We conducted a broad review and examination of VR&E employment policies, programs, and operations along with best practices in other disability employment programs. This produced recommendations to:

- 1) modify current employment service tracks,
- 2) redefine and expand employment services to disabled veterans and employers,
- 3) increase employment-focused staff resources,
- 4) improve and expand collaboration both within VA and with outside organizations,
- 5) improve information technology support,
- 6) provide strengthened leadership, and
- 7) provide consistent training for all VR&E staff.

Task Force members with experience in employment services told us that employers have demonstrated that they will enthusiastically hire job-ready returning veterans to fill immediate staffing needs. The responsibility, therefore, of the VR&E is to quickly and

efficiently prepare disabled veterans and make them available to employers. In order to do this, the VR&E must build its comprehensive vocational evaluation, educational and employment services to address contemporary, real-time employment needs. In this new process, all veterans with disabilities who are ready for employment must be identified and marketed to the employer to accomplish employment outcomes. This will require differentiating the services of the program to more accurately meet employment needs. It will also require the necessary levels of staffing, appropriate support resources, and developing partnerships with employers.

The current program provides primarily one basic option for service delivery – training and education – and this option is not necessarily the most efficient or effective strategy for some types of veterans with disabilities seeking employment, especially those who need to return-to-work soon after completing military service. This is certainly the case for injured Guard and Reserve members returning from Iraq and Afghanistan, many of whom left employment to serve. VR&E's 2002 figures show the predisposition to turn to training first: 23,436 rehabilitation plans were developed in 2002.

- 17,145 were in training and education
- 2,561 were in extended evaluation
- 667 were in employment services
- 3,063 were in independent living

VR&E program statistics show essentially the same breakdown in recent years. Most participants enter training (only to be interrupted or discontinued later) and only a small number go directly into employment services. The Task Force findings are in no way intended to limit the veteran's choices, including, training, but rather are intended to ensure that the training is tied to viable employment and labor market goals.

When Task Force members visited Regional offices, they learned that the workloads of current VR&E field staff are very high, that staffing levels are inadequate, and that essential functions of employment readiness, job placement, employer development, and marketing are not always being performed either adequately or in a standardized way across the country. The Task Force also found that many employment specialists were assigned multiple and varied roles that prevented them fully providing employment services. Under circumstances of increasing complexity and demand for services, the VR&E program must be significantly changed if it is to serve the needs of 21st Century disabled veterans.

Our proposed integrated employment-driven system requires major, on-going changes to the VR&E organization, program, and operations in order to provide increased efficiency and effectiveness for veterans seeking employment. The recommendations require both integrating the existing components and establishing new components to improve VR&E Services. VR&E goals will not be accomplished by implementing only selected parts of the recommendations.

The VR&E Service and the Five-Track Employment Process

To emphasize the importance of implementing the entire VR&E employment-driven system, the Task Force identified the following recommendations. The Task Force

used information on current and projected veterans with service-connected disabilities, reviewed the VR&E organization, program, and operations, and examined other Department of Veterans Affairs programs and services. The Task Force also reviewed Department of Labor veterans programs and services, Department of Defense programs and services, and current medical and vocational rehabilitation programs in the United States. We also solicited input from private sector employers who have active and effective partnerships with rehabilitation agencies. These employers include companies such as Manpower, Inc., Liberty National, and The Southern Company. The Task Force recommends that VR&E:

- Establish a new, employment-driven process that differentiates disabled veterans who need immediate employment or return-to-work from those who do not and provide services appropriate to the needs of the individual.
- Improve collaboration between VR&E and VHA, to include the establishment of specialized programs for veterans with severe and chronic impairments.
- Strengthen linkages between VR&E, VSOs, State VR programs, the U.S. Office of Personnel Management, and State Employment Service Offices.
- Strengthen the coordination between VR&E, DVOPS and LVERS.
- Provide essential information technology support for VR&E staff with access to employment and employer databases.
- Revise VR&E performance standards.
- Provide strong and consistent VA, VBA, and VR&E leadership to support, execute, and maintain improvements for VR&E.

Finally, and most important, the VR&E must implement a new process that includes five program tracks providing options for disabled veterans (see Exhibit 13):

1. **Reemployment Track** will provide disabled veterans and their employers with services needed for veterans (usually National Guard and Reservists) to return to jobs they held prior to active duty.
2. **Rapid Access Employment Track** will provide assessment and rapid access to employment services to disabled veterans. This track can also be used for all types of veterans, including National Guard and Reserve veterans.
3. **Self-employment Track** will use up-to-date best practices for developing businesses and be coordinated with major federal, state, and local business development programs.
4. **Employment through Long-term Service Track** will encompass the more traditional VR&E service program with training and education and would be available for all Chapter 31 participants.
5. **Independent Living Track** will focus on outreach and specialized services to improve the quality of life for disabled veterans who qualify under federal guidelines and would encourage possible employment when appropriate.

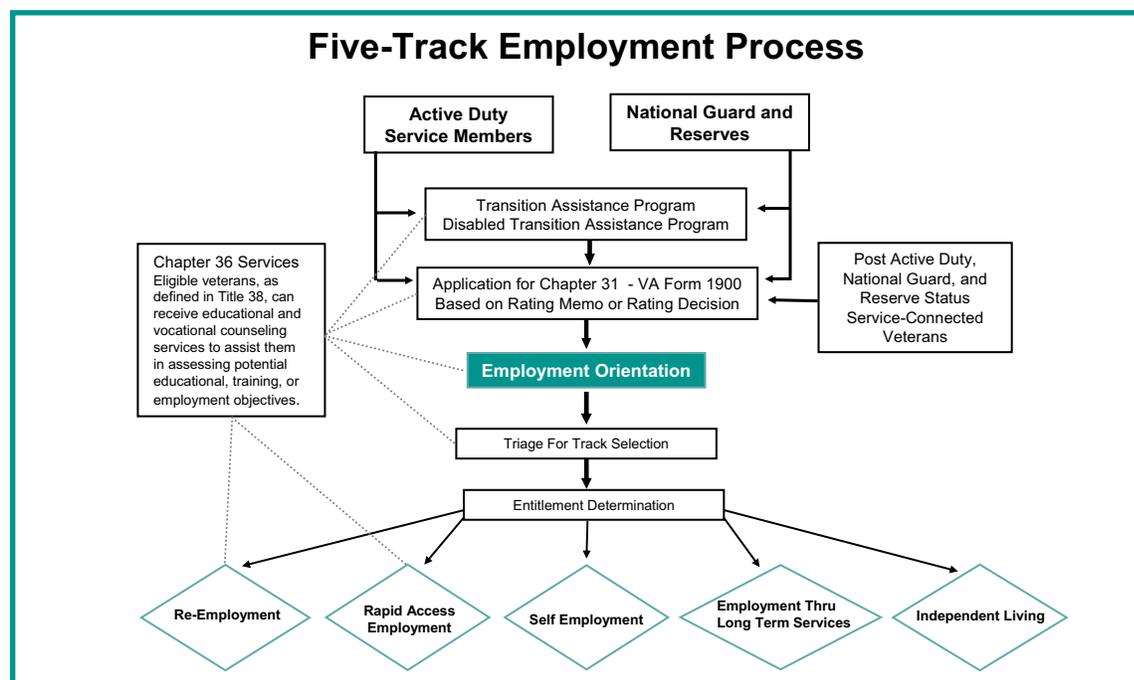


Exhibit 12

The Five-Track Employment Process will:

- Begin with VR&E Employment Orientation group sessions for veterans who have filed a Form 1900.
- Provide individualized assistance to disabled veterans after the employment orientation, for selection of the appropriate track through a triage team.

This triage team will be led by the new Employment Readiness Specialist with assistance from designated VRCs, the new Marketing and Placement Specialists, and the new Independent Living Specialist as appropriate. The focus of the triage team will be to work closely with each disabled veteran to facilitate “informed choice” by that veteran into the track which best addresses the disabled veteran’s interests, abilities and goals. VR&E Staff will need to address specific triage responsibilities and tasks in a comprehensive implantation strategy.

- Provide flexibility and allow participants to move between tracks to best prepare them for employment.
- Require that VR&E adequately staff and train for the new five-track system. The staffing would include a new classification for Employment Readiness Specialist (ERS) and would re-align the duties for the current classification of Employment Specialist (ES) to that of a Marketing and Placement Specialist to assure effective employer development and job placement for disabled veterans. It will also include a new Independent Living Specialist classification. See Appendix 12 for draft job descriptions.

Description of the Five-Tracks

Track 1 - Reemployment

This track, as depicted in Exhibit 14, is for veterans with service-connected disabilities

who have served on active military service or in the National Guard or Reserves and who are now returning to companies where they worked prior to active duty. In this track there are two critical features that must be incorporated into the VR&E process to ensure successful return-to-work: a) early intervention; and b) rapid response and delivery of needed services to maintain employment.

Implementation of Track 1 will require VR&E to change its approach. The service delivery system currently in place in the VR&E program will have to be modified for the return-to-work track because the traditional rehabilitation approach cannot be successful with previously-employed veterans. This is primarily due to the need for a more timely response and delivery of critical services to restore or maintain employment for the veteran. Oftentimes, employers do not have the expertise or resource linkages to accomplish this outcome. Specific services need to be developed and delivered to both the veteran and the employer of that veteran that focus on effective return-to-work practices that result in job retention. Specific services need to be developed and delivered to both the disabled veteran and his or her employer very soon after discharge from active military service. Services should focus on effective return to work practices that will result in job retention.

The service and process components critical to successful reemployment and job retention in this track include the following:

1. Assess Ability to Perform Essential Job Tasks

When disabled veterans return to previous employment, the first determination to be made is whether or not there are any physical or mental impairments that impact the veteran's ability to:

- access their job site;
- perform essential job tasks;
- comply with company policies and procedures.

VR&E representatives need to go beyond assessment of medical records to address the above items. This assessment must also include dialogue with, and possibly on site visits to, the veteran's employer with specific review of the following, as appropriate, based on existing impairments:

- Path of travel to work station
- Survey of work station
- Review of job description, with emphasis on essential functions

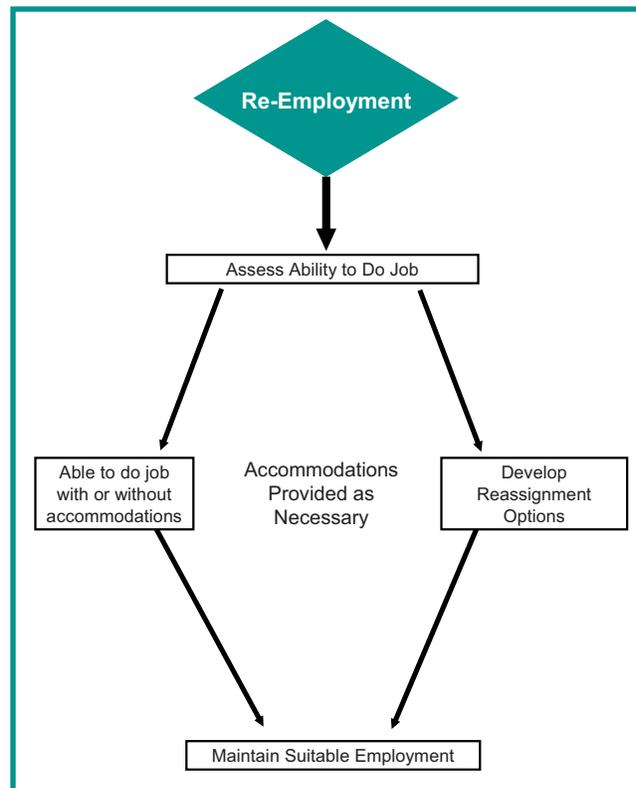


Exhibit 14

- Review of company policies and procedures where compliance is affected by veteran's physical or mental impairments

2. Determine Need for Accommodations

If job site accommodations are necessary for disabled veterans to perform essential job functions, it is critical that those accommodation options be identified for the employer as soon as possible. With the information obtained above, VR&E staff will provide the employer with this information in a timely manner and provide follow-through assistance in identification of resources, vendors, and other resources necessary to implement the purchase, use or application of the accommodation. Resources and processes identified below in "Maintain Stable Employment" apply here as well.

3. Provide Accommodations including Assistive Technology

When the need for accommodations arises, VR&E will coordinate the provision of all the necessary accommodations, to include the use of assistive technology, as is the case for all of the tracks.

4. Develop Reassignment Options If Needed

When a disabled veteran is unable to perform the essential functions of his or her job, even with the use of reasonable accommodations, or when the accommodations are deemed unreasonable, VR&E staff will work closely with the veteran, the employer, and other accommodation resource personnel in identifying options for reassignment within the same company, or with another employer, in accordance with the Uniformed Services Employment and Re-employment Rights Act (USERRA) and Americans with Disabilities Act (ADA) mandates.

5. Maintain Stable Employment

Once the disabled veteran has returned to work and is successfully performing the essential functions of the job, VR&E will conduct routine follow-up with the employer and the veteran to ensure maintenance of employment. This follow-up should address the following:

- Impact of physical or mental impairments on performance of job duties and compliance with policies
- Effectiveness of accommodations, if provided and essential to performance of job
- Quality of job performance
- Satisfaction of both veteran and employer
- Troubleshooting for any new issues that impact employment

Benefits to Veterans and Employers

The Reemployment Track allows both the veteran and company to benefit:

Services to the Veteran/Employee

- Development of a comprehensive return to work plan with employees
- Counseling and education on medical and emotional issues
- Job-site partnering to enhance productivity that might be affected by the disability and related issues
- Continuum of direct communication from initial meeting through job stabilization

- Option to transition veteran/employee to alternative vocational options if necessary because of inability to accommodate current job

Services to Employer

- Initial assessment of issues impacting return-to-work. This includes performance of job tasks, interactions with coworkers, access to guaranteed benefits and compliance with company policies & procedures
- Job task analysis when needed to identify specific performance problems
- Job demands identification to then provide corresponding research in options for reasonable accommodation
- Clarification of veteran capabilities and challenges related to medical condition
- Provision of specific accommodations (if needed)
- Development of modified or alternative duty and/or “transitional” job options in return-to-work plans to allow returning veterans the option of a time-limited job assignment while adjusting to his or her disabling condition

Benefits and Services to Health Care Providers

- Sharing of appropriate medical records (according to requirements of the Health Insurance Portability and Accountability Act (HIPAA)) with company personnel involved in return- to-work issues. This may include company nurse or physician, ADA or EEOC staff, immediate supervisor, or other appropriate personnel
- Customized return-to-work releases, merging specific job demands with specific work restrictions and also offering information about specific abilities.
- Rapid links to the technical experts who will provide assistive equipment
- Networking with physician offices (under HIPAA requirements) and appropriate employer representatives

Marketing to Employers

In marketing to employers, it is important that VR&E emphasize the no-cost benefits:

- Retain productive worker
- Facilitate compliance with federal mandates for returning veterans into employment previously help prior to active duty
- Minimize job-related frustration
- Reduce lost workdays after return-to-work due to early intervention and problem solving
- Provide access to technical expertise and customized accommodation options
- Provide seamless service delivery from initial return-to-work through job stabilization and long-term job retention

Outreach and Referral Services

There will be some situations when a disabled veteran returns to work without any initial barriers. Once on the job, however, the veteran may encounter barriers or may discover a disabling condition that had previously been undetected. In this case, there is a need for special outreach to alternate referral sources to assist this individual.

Such outreach should be included in the comprehensive marketing done by the VR&E Marketing and Placement Specialists. These Specialists are the first point of contact for employers who contact VR&E seeking assistance with job retention issues for disabled

veterans. The outreach effort should include the following business and industry personnel:

- Human resource managers
- Company nurses or safety officers
- Company Employee Assistance Program (EAP) representatives (more likely to be aware of situations such as PTSD, addiction issues or other mental health conditions not readily apparent upon return-to-work).
- Benefits coordinators
- Payroll supervisors
- Occupational health & safety personnel
- Risk managers
- Disability insurance carriers including short-term disability, long-term disability, and workers compensation since they are the entities who provide coverage for these employees.
- Third Party Administrators managing occupational and/or non-occupational claims
- Employee's foreman or supervisor
- Employee/veteran
- Employee family member

It is important that VR&E properly train staff to deliver a return-to-work program with quality and effective solutions that meet the needs of both the veteran and the employer.

Track 2 - Rapid Access to Employment

This track, as shown in Exhibit 15, focuses on disabled veterans who have expressed a desire to seek employment soon after separation or who, in consultation with their VR Counselor, conclude that they already have the necessary skills set to qualify for competitive employment in an appropriate occupation. This decision will be made collaboratively between the disabled veteran and the "triage team." In this track the Employment Readiness Specialist (ERS) plays the primary role in direct service delivery.

After the choice for immediate employment is made, the ERS will be responsible for assisting the disabled veteran in identifying the needed resources to prepare the veteran for entry into the labor market. Employment services, which are discussed in more detail below, will include:

1. Rapid Assessment Services

Each disabled veteran seeking immediate employment will be assisted in identifying the specifics of his or her employment readiness by clarifying:

- Marketable skills
- Strengths and weaknesses
- Physical or mental impairments that may be barriers to employment and that may need to be accommodated
- Job goals (not limited to one, but to include multiple job preferences)
- Needed credentials, if any, for desired job (Note: If required credentials are missing, the veteran would temporarily leave this employment track and take advantage of the track offering the Training and Education component)

- Level of disabled veteran's motivation to obtain and maintain employment
- Specifics related to employment, such as desired wage range, date available for employment, desired shift, willingness to relocate and where, etc.

Once this information is clarified, the VRC will develop, with input from the veteran, a specific employment plan that should include the following:

- Specific actions needed to accomplish an employment outcome
- Resources needed to implement each action
- Individual(s) or organizations responsible for each action (to include the disabled veteran's responsibilities)
- Desired timelines for each action

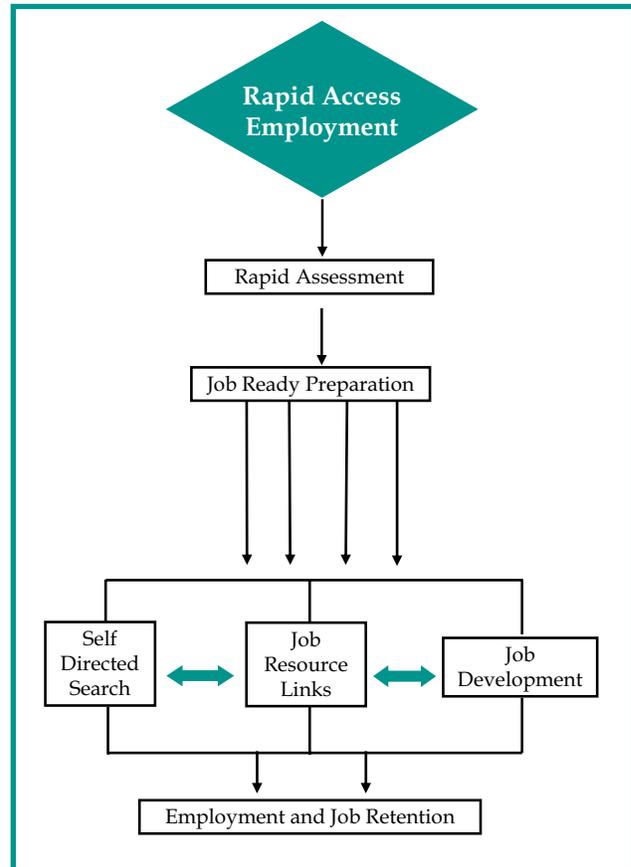


Exhibit 15

If the above information is not identifiable, the VRC has the option to move the veteran into the “Employment through Long-term Services” track for more detailed assessment.

2. *Employment Readiness Preparation*

All appropriate services needed to enhance the “marketability” of the disabled veteran to potential employers will be addressed in job readiness preparation and will include, but not be limited to:

- Resume preparation
- Job interview preparation
- Discussion about disclosure of disability
- Dialogue preparation for any needed accommodations

3. *Self-directed Job Search or VR&E Job Development*

During this phase of the employment process, the disabled veteran will have the responsibility of participating in self-directed job search and/or be offered job development assistance by VR&E staff, depending on the functional capabilities of the disabled veteran. For those with the ability to do so, self-directed job search assistance will be provided and may include the following services provided by the ERS, or other local resources arranged by the ERS:

- Registration at the local state employment service and instruction on how to use their electronic job search systems

- Training on other electronic job search internet systems
- Access to VR&E information about local labor markets and existing employer relationships developed by VR&E staff

For disabled veterans in need of VR&E job development assistance, the following services will be provided by either VR&E staff or other local resource personnel:

- Identification of actual vacancies related to the disabled veteran's job preferences
- Establishment of contacts with employers who have vacancies, identifying specific requirements
- Marketing and referral of qualified disabled veterans to the employer
- Follow-up with the disabled veteran and the employer after referral
- Marketing of hiring incentives such as OJT reimbursement or tax credits, when appropriate, to the employer

4. Linkage to Employment Resources

In the delivery of services in this "Rapid Access to Employment" track, the VR&E Officer will be expected to provide the VRCs with the necessary resources to accomplish the desired employment outcome. Those resources will include, but not be limited to, the following:

- VR&E Employment Readiness Specialist
- Marketing and Placement Specialist
- State DOL (DVOP)
- State Vocational Rehabilitation Services
- One-Stop Career Centers
- VR&E Job Labs or Job Clubs
- America's Job Bank and VR&E's Enhanced Online Employment Services, as described in Chapter 6 and Appendix 11.
- Job Readiness Materials such as resume writing software, Internet-linked computers for use in job labs, etc.
- Other locally available resources

5. Provision of Job Accommodation Services

For disabled veterans whose physical or mental impairments are such that they present a barrier to employment and/or the performance of essential job tasks, the VR&E will:

- Specifically identify each barrier
- Utilize available resources to determine reasonable accommodations that will minimize or remove the barriers. These resources may include the human factors engineers at the Job Accommodation Network, technology specialists available through the state vocational rehabilitation programs, or other local resources.
- Identify and provide, as needed, assistive technology
- Arrange for the purchase, delivery, set-up, and effective use of the accommodation at the job site
- Routinely follow-up with the employer and the employed veteran after hire to ensure the effectiveness of the accommodation.

6. Employment

It is expected that the outcome of this track will be the successful competitive employment of disabled veterans.

7. Post-Employment Follow-up and Evaluation

In order to ensure that disabled veterans successfully retain their jobs, formalized follow-up services after he or she is on the job is expected. These services will include, at the very least, telephone contact with the veteran (and the employer, if there was direct involvement with that employer by VR&E staff or their representative). This follow up will address issues such as level of satisfaction by veteran and employer and troubleshooting to address any issues that might threaten continued employment.

With the new VR&E Employment Readiness Specialists functioning full time and helping to set up a network of parallel service providers, a number of quality outcomes can be expected in the implementation of the rapid access track. This new approach will:

- Provide the Marketing and Placement Specialists with specific job candidates to be marketed to employer contacts as opposed to the generic “Hire A Vet” theme without identification of specific veterans who are available to go to work. This approach is much preferred by employers because they get with job-ready candidates.
- Provide employers with an “employment-ready” pool of competitive candidates for job vacancies in their companies.
- Present the veteran in the most “favorable” light to the employer.
- Ensure that employment readiness services will not be short-changed when there are excessively large VRC caseloads and/or territories.

In addition, the new approach should significantly improve the disabled veteran satisfaction survey ratings in the Job Ready Status, increase the number of disabled veterans entering the “employed status” at closure, and provide VR&E staff with a continually growing number of employers who wish to hire additional disabled veterans because of their satisfaction with “first hires” from the program (i.e. repeat business – a critical component of an effective employment program)

Involve Partners and Stakeholders

The Veterans Service Organizations, through more active partnership with VR&E, could make significant contributions to increasing employment opportunities for disabled veterans. Many of their constituents may either be employers themselves or work in organizations that might be amenable to hiring well-trained disabled veterans. VSO members may also have valuable business contacts that if shared with VR&E could result in employment opportunities for disabled veterans.

However, it appears that some VSO members have little understanding of, or pay much attention to, the employment focus of the VR&E Program. VR&E is too often viewed as a G. I. Bill Program for disabled veterans. Educational training may be considered to be the goal of veterans participating in a VR&E Program.

In the regularly scheduled quarterly briefings/meetings with VSOs, the VR&E Officers should include discussion of specific issues related to employment. These meetings will

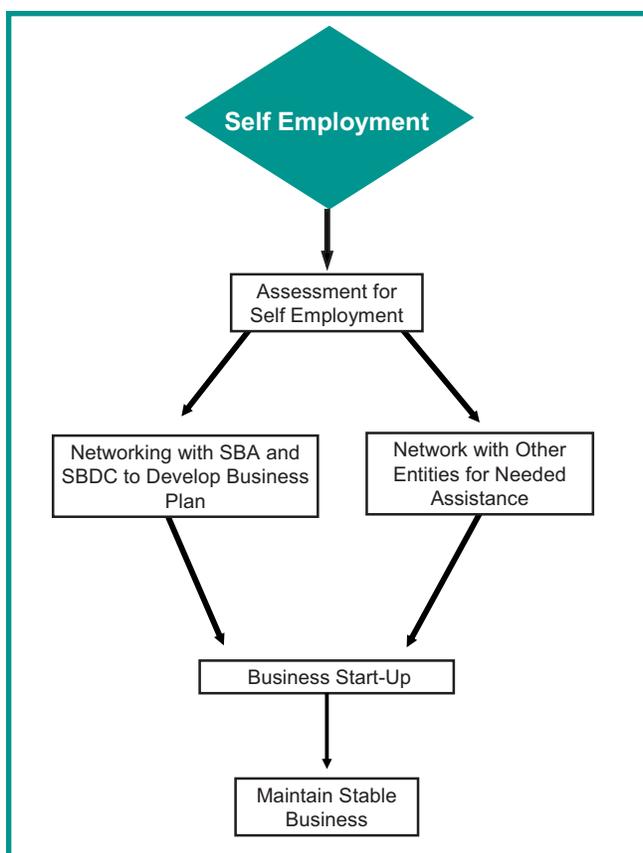


Exhibit 16

provide VR&E with a forum to discuss the latest trends, policies, procedures, and legislative activities in VR&E and the potential impact on disabled veterans. VR&E will also have an opportunity to solicit advice and counsel on increasing employers' awareness of the VR&E Program and on expanding employment opportunities for disabled veterans.

The Marketing and Placement Specialist should generate activities that increase the awareness and involvement of VSOs in the employment of disabled veterans. The MPS should:

- Work collaboratively with VSOs in the recognition of employers who have hired veterans with disabilities.

- Set up interactive sessions between VSOs and employers.
- Encourage VSOs to link their websites to the VR&E website and promote the program.

The Director of VR&E should continue to schedule regular meetings (at least quarterly) with the leadership of the VSOs to discuss the latest trends, policies, procedures and legislative activities in vocational rehabilitation and the potential impact on disabled veterans. However, these meetings should include specific issues relating to employment in order to strengthen the focus on this outcome. This effort should also continue to be replicated at the regional and local offices.

Further, VR&E staff should become a member of the rapidly growing initiative to develop a national employment network with employers throughout the country who wish to actively recruit people with disabilities into their workplace through CSAVR, RSA and other organizations. State Vocational Rehabilitation agencies are currently attempting to respond to nationally-based employers who want to leverage partnerships with VR nationally in order to generate referrals of qualified candidates with disabilities. Such employers are becoming more and more aware of the fact that the labor market is shrinking and that outreach to non-traditional groups of job candidates is smart business. State VR does not presume to be able to meet all the employment needs of such employers. It would seem prudent to include disabled veterans in the mix of job candidates identified in the development of this national network.

Likewise, Marketing and Placement Specialists should initiate outreach to new or existing Business Leadership Networks (BLN) that are currently being formed or are in a growth phase, state by state, to offer the VR&E program as a source for recruiting veterans with disabilities. During the past 5 years employers throughout the country have begun to come together to form working liaisons amongst themselves to address issues specific to disability in the workplace and to share best practices. These networks have grown consistently and many are already affiliated with state VR agencies that provide “behind the scenes” technical assistance, which includes recruiting of job candidates with disabilities. The US BLN movement is also growing and attempting to better organize state chapters with a national mission and strategic plan. Annually these employers conduct a “BLN Summit” to address the issues.

VR&E Officers should also make direct contact with directors of the state Employment Service offices to negotiate unrestricted access by the Marketing and Placement Specialists to the state’s AWS (America’s Workforce System) database. This access would give designated VR&E staff comprehensive information on all listed job vacancies, as well as the opportunity to “direct-refer” qualified and pre-screened disabled veterans.

- Access to this system must be seriously respected and designated VR&E users must place a top priority of pre-screening referrals to these jobs.
- Users of the system must be trained by the state employment service staff and given special access codes and request the option to have the system access available on their desktop computers
- Users of the system must ensure that they will do data entry into the AWS system to provide production updates on referrals and hires.

Thousands of employers post their job vacancies within state employment office AWS systems that feed into America’s Job Bank. Access to the “unsuppressed” portion of this system (giving company names for jobs posted, along with the option to do direct candidate referral) is carefully guarded because of employer preference and in order to properly manage the information.

Giving selected VR&E unsurpressed access to the AWS creates a win-win for everyone. More of the job vacancies posted at the employment service could be filled. More disabled veterans could be referred to these job vacancies by VR&E staff who are better able to market those veterans to employers.

Stress Employment Goal with Veterans

VR&E staff must ensure veterans understand that the primary goal of the VR&E Program is employment and encourage their motivation towards obtaining employment throughout their rehabilitation program.

- Explain the different employment tracks and assist disabled veterans in making informed choices about the most appropriate track to meet their needs. .
- Develop realistic goals based upon vocational assessment, career exploration and counseling, and labor market data prior to beginning a rehabilitation plan.
- Justify training (educational or short-term) with career requirement data.

- Keep veterans focused on employment throughout the rehabilitation process by engaging veterans in assignments related to employment research such as labor market data gathering, draft of resume, and informational interviews with real employers.
- Initiate job readiness and job club activities and interventions with veterans earlier in their rehabilitation programs. These services will now be more readily available in the newly established Rapid Access to Employment track.

Unsuccessful program closures can occur for a variety of reasons. Many times the motivational levels of VR&E disabled veteran consumers to return to work or to obtain employment is or can become significantly low. Lack of motivation will deter or prevent a positive employment outcome both for the veteran and for the VR&E Program. Waiting to confront lack of motivation until the veteran is referred to employers or asked to participate in self-directed job seeking activities may prove to be too late. Consequently, motivational issues need to be addressed early on and throughout the rehabilitation process. Revising the veteran's strategy to obtain employment or switching service delivery tracks may assist in boosting the veteran's motivation.

Track 3 - Self-Employment

Services provided in this track will include critical components to ensure delivery of quality services to disabled veterans who have both the interest and the aptitude to pursue self-employment (see Exhibit 16):

1. Network with the Small Business Administration and Small Business Development Centers

The SBA and SBDCs have the expertise to assist VR&E staff in:

- assessing the capability of persons interested in starting their own business;
- guiding the disabled veteran in the development of a feasible business plan;
- linking the disabled veteran to financial resources.

These organizations should be the primary resource used by VR&E staff when disabled veterans choose self employment.

2. Network with Other Entities

There are several other entities that provide assistance to individuals with start up businesses. VR&E staff would be expected to work with organizations such as SCORE (Service Corps of Retired Executives), the 8a Status (access to non-competitive contracts with the federal government), and lender organizations. In addition, develop or update strategic partnerships with Rehabilitation Services Administration, VA's Center for Veteran's Enterprises, Department of Labor's Office of Disability and Employment Policy, and government Offices of Small and Disadvantaged Business Utilization.

3. Business Start-Up

The VR&E staff will monitor the implementation of the disabled veteran's business plan on a regular basis. This will include identification of needed accommodations or additional resource links.

4. Maintain Stable "Employment"

The first year of a new business is the most critical in the determination of the

success of the business. Consequently, VR&E staff will continue to provide needed rehabilitation services and support throughout this first year in order to ensure stable “employment.” VR&E staff may not be considering self-employment as a viable employment option on a consistent basis. In some cases, self employment can be considered for disabled veterans who have limited access to employment, need flexible work schedules, or who need a more accommodating work environment than is normally achievable in traditional work places. Research demonstrates that well-planned and properly resourced businesses are a reasonable option for persons with disabilities. Further, changing business needs increase opportunities for self-employment.

The VR&E Task Force recommends that VR&E develop and implement a self-employment initiative that incorporates the following activities:

- Survey VR&E staff to determine current activities regarding self-employment services.
- Follow progress of self-employed veterans to identify best practices and opportunities to improve service.
- Review existing literature and program experience to identify best practices.
- Clarify VR&E policy on developing self-employment programs.
- Provide state of the art training in best practices to VR&E staff.
- Establish pilot resource centers to support VR&E staff in the development of self-employment services and to serve as a model for identifying and exporting best practices.
- Develop a resource guide to assist staff in self-employment planning.
- Conduct an outcome study to measure the long-term impact of self-employment.

Track 4 - Employment Through Long-term Services

When employment is more of a long-term goal, the disabled veteran will follow the more traditional route of training and education. The major components of this track, as shown in Exhibit 17, will include the following:

- Traditional Vocational Assessment Services
- Testing and Evaluation
- Career Guidance/Job Preference/Market Analysis
- Medical and Psychological Services
- Career Development and Skills Acquisition
- Training and Education
- Employment
- Post Employment Follow-up and Evaluation

We have not included the details of these components because they are widely used in VR&E. However, the Task Force urges VR&E to create and implement the interventions that are necessary to help the veteran stay in school. We know from VA statistics that a large number of participants discontinue or interrupt their program, which means

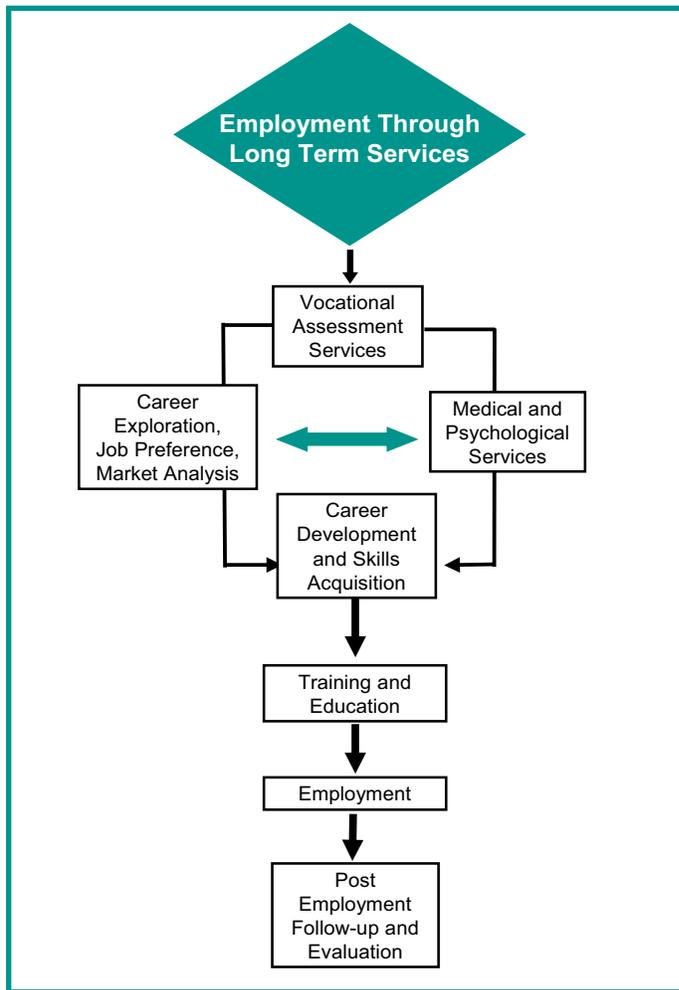


Exhibit 17

they never reach suitable employment as defined in their rehabilitation plan.

Track 5 - Independent Living Services

The term "independence in daily living" means the ability of a veteran with few supports, to live and function within the family and community. Independent Living services are critical to many veterans. These services can make the difference in disabled veterans' improving their quality of life and achieving their goals to the point that paid or volunteer employment is feasible, as new technologies and approaches become available.

It appears to the Task Force that Independent Living services are currently being used as an alternative to employment in some areas where there may be few employment opportunities, and/or where the barriers presented by the disability and the environment are "determined" by VA staff to

be too difficult to accommodate in a job situation. The Task Force noted that the single largest group of veterans for whom an employment plan is not considered feasible was for veterans with psychiatric disabilities.

The Task Force believes that the intent of the VR&E Service providing Independent Living services is an excellent one, but that the effort lacks sufficient direction, standards of practices, and protocols designed to quickly assist the veteran. The Task Force also believes that specially trained IL staff must be available, and that VR&E Independent Living services must be integrated with the VHA and the larger community-based independent living movement.

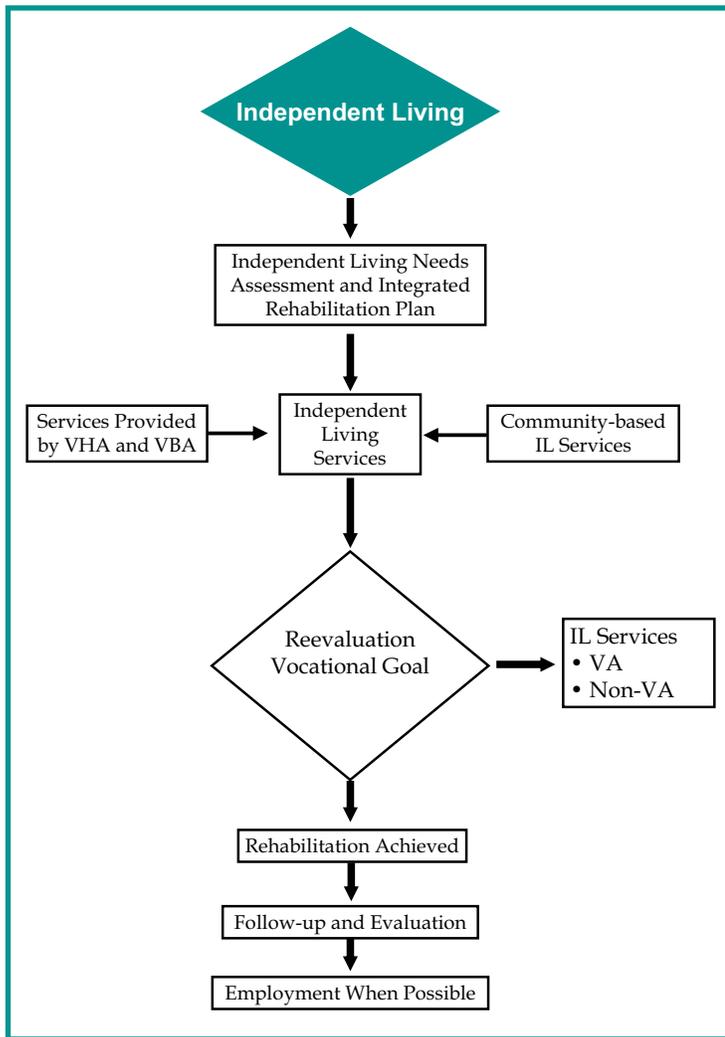
With the above reasons in mind it is clear to see that Independent Living services may be necessary in any/all of the Five-Track Employment Driven Model tracks. For example, a veteran may need Independent Living services while attending school or in training, or during the job search.

As discussed in Chapter 4, the delivery of Independent Living services has been inconsistent across VBA's Regional Offices. Individual VR&E Service offices have implemented their own approaches to Independent Living services without sufficient and tailored training of specialized staff. Many VR&E offices delivering Independent Living services emphasize only quality of life issues and personal goals, with little

attention paid to potential employment opportunities. The major components of an Independent Living Program are below, and the Task Force urges VR&E to develop a standardized delivery for these and other components that may be identified. Exhibit 18 is a graphic overview of this track.

The VBA Independent Living program must incorporate the expectation that all veterans have the potential for achieving suitable paid or voluntary employment,

regardless of the disability. Independent Living Services include the following components:



1. Reevaluation of a Vocational Goal

Based on the expectation that employment can be a goal for each veteran, this component requires a periodic vocational assessment. The assessment would be conducted in Track 4-Employment Through Long-term Services. If employment is feasible, the veteran will work in Track 4. If the veteran and VA conclude that employment is not an immediate goal, the veteran could be referred to both VA and non-VA community-based services. The assessment would be done every 6 months.

2. Needs Assessment Services

This component assesses the veteran’s abilities, aptitudes, and interests to determine if a serious employment handicap exists.

Exhibit 18

A quality evaluation interview which includes objective data from tests is necessary to develop an understanding of a person’s pattern of abilities, aptitudes, and interests. An assessment will help determine whether the veteran is currently employable in suitable employment, and whether current or desired employment is consistent with a veteran’s abilities and interests.

3. Develop IL Plan

The Independent Living Specialist develops, with the veteran, an IL Plan that identifies

the independent living goals based on the veteran's assessment and interests. VR&E will work with both VA and non-VA resources to define the appropriate types and scope of IL services. The plan may address the following:

- Needs Assessment
- Testing and Evaluation
- Core Services (resources, housing assistance, personal assistant, transportation, assistive technology)
- Independent Living Skills Training
- Medical and Psychological Services
- Peer Support Program
- Linkage to Community Services
- Employment Services When Appropriate

Characteristics of Independent Living Services – Track 5

The following are examples of characteristics and activities that an Independent Living Employment Track should have:

- Socialization skills such as reading, writing, or literacy assistance
- Decision making/life control skills
- Fitness/exercise/health maintenance
- Self-esteem needs
- Safety/self-defense needs
- Nutrition
- Health care needs provided by a VA Medical Center through coordination with the vocational rehabilitation counselor
- Housing referral and assistance
- Personal Care Attendant selection and management
- Identification and coordination of Family Adjustment counseling services
- Transportation
- Recreation
- Financial management
- Referral for Legal Issues/Legal assistance
- Benefits review and analysis
- Assistance with adjustment to disability and other personal adjustment
- Assistance with referrals for spiritual needs
- Evaluation of independent living needs as required by federal law
- Driver evaluation and training
- Assistive animals
- Assistive technology to help with speech, communications, mobility, etc.
- Adaptive equipment needed to participate in recreational and leisure activities
- Information on Independent Living services and referral for community-based services
- Continuing guidance and support
- Assistance in obtaining volunteer opportunities
- Assistance in obtaining prosthetics/orthotics equipment
- Modifications to improve access and eliminate barriers

Most importantly, it is crucial that veterans hospitalized in the VHA medical care system for SCI, TBI, and other catastrophic disabilities have better access to Independent Living services. These disabilities severely impinge on the veteran's ability to achieve the fullest community integration possible in housing, employment, and social and leisure activities. Improving access to Independent Living services for these individuals should be among the highest priorities for VR&E, and to do so, the partnership between VR&E and VHA must be strengthened.

Conclusion – The New Five-Track Employment Process

The new Five-Track Employment Process is the core of the VR&E integrated service delivery system. As noted in the description above, the five-track model is individualized for each veteran with a disability, and is not necessarily used sequentially. Because veterans have different needs at different points in their lives, the Task Force believes that options and choices must be available to meet these needs—as demonstrated by the five-tracks. The five-track process must be integrated in all the functions within the total VE&E employment-driven system; this will require a “rebuilding” of the VR&E system, not merely “tinkering around the edges.” The VR&E Service must serve ALL veterans, acknowledging the diversity of the veterans who are being served and the different needs that each one brings on his or her road to employment and self-sufficiency.

Appendix 12-A

Draft Job Description

Employment Readiness Specialist

Department of Veterans Affairs
Veterans Benefit Administration
Vocational Rehabilitation and Employment Program

Employment Readiness Specialist GS-12 Job Description

Overview

Working under the direction of a VR&E Officer, and with latitude to exercise independent judgment, the Employment Readiness Specialist (ERS) provides job readiness and job-seeking services to Chapter 31 disabled veterans to enhance their competitiveness in the labor market. These services may be performed at the time the veteran enters the VR&E program or at any time that is appropriate along VR&E's Five-Track Employment Process. The ERS may also provide these services to Chapter 36 veterans when appropriate as in group settings, but Chapter 31 veterans have priority, especially in one-on-one services.

Duties and Responsibilities

1. Serves as the "triage" team leader to help disabled veterans make an "informed choice" regarding the appropriate track that best meets their needs with the understanding that veterans can move between tracks. The other members of the team are the Vocational Rehabilitation Counselor (VRC), the Marketing and Placement Specialist (MPS) and the Independent Living Specialist (IL) if appropriate.
2. Conducts employment-focused orientation for disabled veterans.
3. Provides rapid access to employment evaluation activities – employment needs analysis.
4. Conducts pre-employment Job Readiness Evaluation.
5. Identifies, with the Vocational Rehabilitation Counselor and the Marketing and Placement Specialist, the most common job readiness and job-seeking needs of veterans preparing to re-enter the workforce and provides the appropriate one-on-one services to disabled veterans. These services may include but not be limited to:
 - Resume preparation
 - Interviewing assistance
 - Career search activities
 - Discussion of disability and related accommodations
 - Assistive technology needs
 - Labor market information
 - Re-employment information, assistance and/or referral
 - Self-directed job search via networking and electronic databases
 - Follow-up on interviews and other job search activities
6. Conducts employment readiness classes (in addition to the one-on-one sessions noted above) with veterans ready to go to work but lacking important traits in employment readiness. Classes will be conducted at the base of operation on a

routine basis. They will also be conducted throughout the regional office jurisdiction based on clustered job readiness needs of the veterans as identified by VRCs, MPSs or ERSs. Remote site classes may be conducted via video conferencing to minimize travel time.

7. Incorporates VR&E and other online resources into all aspects of service delivery – orientations, workshops, one-on-one sessions.
8. Prepares and provides labor market information briefings to counselors.
9. Provides Employment Services Performance Data for local office.
10. Maintains and continually updates a database of job-ready disabled veterans.
11. Maintains any program and administrative data required for CWNRS.
12. Assists in developing an effective employment services delivery plan for the local VR&E office with emphasis on partnerships with DVOPS, state VR, One Stop Career Centers and others.
13. Develops job clubs, job labs, or job readiness resource rooms for use by veterans in job readiness preparation and self-directed job search.
14. Provides support to VR&E staff and job seeker regarding job development, community resources, applicable computer software, and Internet services.
15. Assists the Marketing and Placement Specialist with disabled veterans' job referral, follow-up on job interviews, job placement, and post-hire follow-up to ensure maximum communication in the hiring and retention process.
16. Facilitates the job accommodation process in concert with both the VRC and the Marketing and Placement Specialist.
17. Facilitates the development of local job readiness networks and resources for areas of assignment beyond the direct service delivery area.
18. Develops an inventory of local self-employment resources, including Small Business Administration programs, services, and partners.

Factor 1: Knowledge, Skills and Abilities Required by the Position

- Knowledge of team dynamics and skill in building and leading a team.
- Skill in balancing different views and positions and helping people make decisions.
- Skill in one-on-one counseling and interviewing.
- Responsiveness to needs of veterans with service-connected disabilities.
- Knowledge of the re-employment rights of National Guard members and Reservists and the responsibilities of employers.
- Knowledge of employment resources, resume writing, job interviewing techniques.
- Ability to research and conduct job-ready workshops.
- Ability to communicate with people at all levels and to reach out to other agencies, organizations, and companies to get resources and set up collaborative projects.
- Knowledge of local labor market and ability to keep current on economic and labor market trends.
- Basic knowledge of assistive technologies and other accommodations.
- Competence on a computer and experience in Internet search.

Factor 2: Supervisory Controls

This position is under the general supervision of the Vocational Rehabilitation and Employment Officer. The incumbent performs the full range of duties with minimal

supervisory guidance. The VR&E Officer provides administrative direction and assists the ERS in achieving measurable outcomes in job readiness services.

VR&E will write the other factors:

Factor 3: Guidelines, Factor 4: Complexity, Factor 5: Scope and Effect, Factor 6: Personal Contacts, Factor 7: Purpose of Contacts, Factor 8: Physical Demands, and Factor 9: Work Environment.

Appendix 12-B

Draft Job Description

Marketing and Placement Specialist

**Department of Veterans Affairs
Veterans Benefit Administration
Vocational Rehabilitation and Employment Program**

Marketing and Placement Specialist (MPS) GS-12 Job Description

Overview

Working under the direction of a VR&E Officer, and with latitude to exercise independent judgment, the Marketing and Placement Specialist (MPS) has a twofold focus: 1) the development of employer partnerships or contacts with companies that have staffing patterns that meet the needs of disabled veterans served by VR&E and 2) the successful placement of veterans into job vacancies developed with those employers or identified through networking with other resources such as the state employment service, state vocational rehabilitation, state directors of veterans affairs, One-Stop Career Centers, or DVOPS.

Duties and Responsibilities

1. Serves on the “triage” team to help disabled veterans with “informed choice” into the appropriate track that best meets their needs. The other members of the team are the Vocational Rehabilitation Counselor (VRC), the Employment Readiness Specialist (EPS) and the Independent Living Specialist (ILS) if appropriate.
2. Focuses on ability, not disability, when working with the job-seeking veteran and the potential employer.
3. Markets to targeted employers based on vocational goals of the job-ready disabled veterans. This marketing will include:
 - Identification of key contacts who make hiring decisions within the company
 - Identification of the staffing patterns and job vacancies within the company
 - Identification of employer hiring pre-requisites
4. Markets and provides special employer incentives such as on-the-job training reimbursement and available tax credits.
5. Provides re-employment information, assistance and/or referral.
6. Incorporates VR&E Website, electronic databases, and other online resources into job searches, marketing, and placement activities.
7. Maintains and promotes a positive image of the Vocational Rehabilitation and Employment program through active networking and ongoing contacts in support of a successful outcome for job placements. Brings together the job seeker and the employer and works with the Job Readiness Specialist to provide the veteran with resources needed to obtain and maintain employment.
8. Stays abreast of disability legislation, job markets, and effective marketing and promotional strategies. Educates employers regarding reasonable accommodation and rehabilitation technology accommodations.

9. Places qualified veterans into job vacancies developed with employer contacts, or through the state employment service offices and DVOPS, or through local collaborative networks.
10. Develops partnerships with the Department of Labor, Small Business Administration, local and state agencies, and private sector businesses and employment services. Assists members of the employment community to hire from the trained, job-ready applicant pool.
11. Troubleshoots problems in order to ensure job retention and responds in a timely fashion to both the employer and the disabled veteran.
12. Follows up 90-day post placement, with subsequent follow-up after case closure if requested.
13. Maintains employment activities data base.
14. Maintains any program and administrative data required for CWNRS.
15. Assists in developing an effective employment services delivery plan for the local VR&E office with emphasis on partnerships.
16. Markets to and becomes initial “point of contact” for employers who need assistance with return-to-work cases of disabled veterans whose job is affected by disability.
17. Facilitates the creation of local job development and placement networks.
18. Provide necessary services to employers in the re-employment track.
19. Works with the Employment Readiness Specialist, VRC, and/or the ILS to provide necessary self-employment services.

Factor 1: Knowledge, Skills and Abilities Required by the Position

- People skills – ability to connect with eligible veterans and with employers.
- Ability to work independently and as part of a team.
- Enthusiasm and commitment to developing job leads and placing the veteran in suitable employment.
- Skill in one-on-one counseling and interviewing.
- Responsiveness to needs of veterans with service-connected disabilities.
- Knowledge of the re-employment rights of National Guard members and Reservists and the responsibilities of employers.
- Knowledge of employment resources, resume writing, job interviewing techniques, and self-employment resources.
- Ability to communicate with people at all levels and to reach out to other agencies, organizations, and companies to get resources and set up collaborative projects.
- Knowledge of local labor market and ability to keep current on economic and labor market trends.
- Basic knowledge of assistive technologies and other accommodations.
- Competence on a computer, the Internet, and TTY.

Factor 2: Supervisory Controls

This position is under the general supervision of the Vocational Rehabilitation and Employment Officer. The incumbent performs the full range of duties with minimal supervisory guidance.

The VR&E Officer provides administrative direction and assists the Marketing Placement Specialist in achieving measurable outcomes such as number of jobs leads developed, number of veterans assisted, number of veterans put in jobs either directly or

indirectly, and number of employer accounts or contacts (unduplicated count) and the number of work activities with these employers. The employee has the responsibility for independently planning, designing and implementing the duties of this position.

VR&E will write the other factors:

Factor 3: Guidelines, Factor 4: Complexity, Factor 5: Scope and Effect, Factor 6: Personal Contacts, Factor 7: Purpose of Contacts, Factor 8: Physical Demands.

Factor 9: Work Environment

The employee must be willing to travel and work unusual hours as needed to accomplish employment placements. The employee will be assigned a manageable territory in the region with the most opportunities for the type of employer development that meets the needs of the “job ready” veterans. This may or may not be in the same location as the Employment Readiness Specialist. Region-wide employer development and placement assistance will now require the development of stronger local networks by the Marketing and Placement Specialist beyond their service area. The service area will include a territory within the region within which the MPS does active employer contact in order to minimize travel time. Beyond that area, the MPS will establish networks to facilitate employer development, dialoguing with that network to link disabled veterans to available job leads.

Appendix 12-C

Draft Job Description

Independent Living Specialist

**Department of Veterans Affairs
Veterans Benefit Administration
Vocational Rehabilitation and Employment Program**

Independent Living Specialist GS-12 Job Description

Overview

Working under the direction of a VR&E Officer, and with latitude to exercise independent judgment, the Independent Living Specialist (ILS) is the specialized Rehabilitation Counselor or Social Worker who has an in-depth understanding of all core services, advocacy, community resources, outreach, and technologies that empower severely disabled veterans to live independently within the community. In addition, the ILS should always consider employment as a possible outcome due to the availability of new, innovative assistive technology and the veteran's own desire to work. The ILS, preferably a veteran, may have personal or professional experience in living with a disability.

Duties and Responsibilities

1. Serves on the "triage" team as appropriate to help disabled veterans with "informed choice" into the appropriate track that best meets their needs. The other members of the team are the Vocational Rehabilitation Counselor (VRC), the Job Readiness Specialist, and the Marketing and Placement Specialist (MPS).
2. Has knowledge of disability issues and a commitment to the Independent Living philosophy.
3. Promotes the independence of veterans with disabilities by facilitating and supporting their full integration and participation in all aspects of community life.
4. Ensures that veterans with disabilities have the same rights, options, and control over choices in their lives as do people without disabilities.
5. Develops and oversees the implementation of the Independent Living Plan in partnership with the veteran.
6. Arranges and oversees the delivery of core services as needed – needs assessment, information and referral to appropriate resources, benefits, housing assistance, personal assistant registry, transportation, assistive technology, independent living skills training, self-employment, and employment services when appropriate.
7. Provides periodic follow-up and updates services and supports to ensure success of IL goal.
8. Is knowledgeable of basic assistive technologies and keeps updated on new developments and approaches. This includes low-tech devices such as canes, ramps, and reaching tools, as well as high tech equipment such as augmentative

- communications devices, adaptive computer equipment, durable medical equipment and more.
9. Provides or secures training on IL services, devices, and updated approaches for VR&E counselors and other staff as needed.
 10. Advises or brings in experts to advise counselors and procurement staff on assistive technology and other equipment as needed.
 11. Develops a peer support program, including local policies and procedures.
 12. Provides advocacy, community education, and outreach services.
 13. Networks with all persons and organizations that supply resources and services to persons with disabilities in the service area.
 14. Works with community leaders to increase awareness and open up opportunities for veterans with severe disabilities.
 15. Works with the Job Readiness Specialist and the Marketing Placement Specialist to develop employment and self-employment opportunities as needed.
 16. Provides IL Performance Data and any other data needed for local office.
 17. Maintains and continually updates a database of veterans who have achieved independent living.
 18. Maintains any program and administrative data required for CWINRS.

Factor 1: Knowledge, Skills and Abilities Required by the Position

- Knowledge and ability to work as part of highly-motivated rehabilitation team.
- Self-motivated with good organizational and coordination skills.
- Skill in one-on-one counseling and interviewing.
- Responsiveness to needs of veterans with service-connected disabilities.
- Experience and/or training in service delivery to persons with disabilities and their families.
- Ability to successfully relate to and communicate with people with disabilities, their families, other organizations, agencies, volunteers, and stakeholders.
- Knowledge of federal, state, and private/nonprofit organizations that provide benefits or services to persons with disabilities.
- Ability to reach out to other agencies, organizations, and companies to get resources and set up collaborative projects.
- Familiarity with federal and state laws, regulations, and programs that impact the IL community.
- Knowledge of medical terminology and awareness of cultural and social issues pertaining to the IL community.
- Competence on a computer, the Internet, standard office equipment, and TTY.

Factor 2: Supervisory Controls

This position is under the general supervision of the Vocational Rehabilitation and Employment Officer. The incumbent performs the full range of duties with minimal supervisory guidance. The VR&E Officer provides administrative direction and assists the Independent Living Specialist in achieving measurable outcomes in providing IL services and all attendant duties.

VR&E will write the other factors:

Factor 3: Guidelines, Factor 4: Complexity, Factor 5: Scope and Effect, Factor 6: Personal Contacts, Factor 7: Purpose of Contacts, Factor 8: Physical Demands, and Factor 9: Work Environment.

Appendix 13

Technical Guidance for Online Employment Services

This guidance is a companion piece to the recommendation “Enhance existing online employment services (Near-Term),” which appears in Chapter 6 under P-2 Employment. We offer suggestions to improve VR&E’s presence on the Web, which includes the VR&E Website, the VR&E America’s Job Bank, and VBA’s Veterans Online Application (VONAPP). The purpose is to focus these online resources primarily on Chapter 31 employment services rather than education and to improve navigation and readability. Here are the topics in this guidance:

- Recommendation Details
- New Language and Positioning
- Helpful Employment Links
- Usability Test Guidelines
- Proposed New Metatags for Webpages

Recommendation Details

Improve and incorporate VBA/VR&E’s online employment information and services into the new Five-Track Employment Process by (1) focusing on employment services and improving the usability of the VBA online application form (VONAPP), VR&E Website, and the DVA version of America’s Job Bank site and (2) developing ongoing training components on online services for staff and eligible veterans.

- Assign an official in the new Office of the Assistant Director for Employment Services to oversee VR&E’s online employment services effort. (Near-Term)
- Re-word and update the VR&E Website <http://www.vba.va.gov/bln/vre/index.htm> to focus more on Chapter 31 employment services than education. (Near-Term; Priority)
- Integrate the VR&E Website (above) and the DVA America’s Job Bank Website <http://dva.jobsearch.org/> for jobseekers and employers into the agency-wide employment services program, including individual counseling and workshops for veterans. (Mid-Term)
- Update the VR&E Website and DVA America’s Job Bank Website links to other employment resources, such as the Department of Labor, Department of Defense, and the U.S. Office of Personnel Management. (Near-Term; Priority)
- Put the Web addresses (URLs) on the VR&E Website, DVA America’s Job Bank Website, and VONAPP on appropriate VR&E and other VA promotional materials to veterans and employers. (Mid-Term)
- Add employment services to VONAPP <http://vabenefits.vba.va.gov/vonapp/main.asp> (Near-Term; Priority)
- Write and apply appropriate metatags with site title, keywords, and content description for the VR&E Website, DVA America’s Job Bank Website and VONAPP so that major search engines will find and display these Web pages when disabled veterans look for career resources on the Internet. (Near-Term; Priority)

- Conduct one-on-one usability tests and/or group usability tests with two or three small focus groups to test the effectiveness of the changes before and after the improvements on the VR&E Website, DVA America’s Job Bank Website, and VONAPP. (Near-Term)
- Train Vocational Rehabilitation Counselors, Employment Readiness Specialists, Marketing Placement Specialists and other VR&E staff as needed to use the VR&E Website, the VR&E DVA America’s Job Bank Website, VONAPP, and other appropriate Internet employment resources in and out of government. (Mid-Term)
- Apply appropriate software to maintain and use Web usage statistics¹ on the VR&E Website, the DVA America’s Job Bank Website, and VONAPP as performance measure outputs and as a management tool for Regional Offices and Central Office. (Near-Term)
- Collaborate with the VBA Survey and Research staff to determine veterans’ usage and satisfaction with the Online Employment Services provided by the VR&E Website, the DVA America’s Job Bank Website, and VONAPP. (Mid-Term)
- Employ online surveys, such as the American Customer Satisfaction Index, to determine veterans’ satisfaction on the VR&E Website, the DVA America’s Job Bank Website, and VONAPP. (Mid-Term)

DISCUSSION

The Internet has infiltrated everyday life for most Americans, and has had a serious impact on major life decisions, including careers.² Job sites are among the most popular sites on the Internet and many job seekers routinely submit resumes by email. The Internet provides important resources and tools to help both veterans and their counselors in America’s Job Bank activities.

Our recommendations will re-focus the online information and application form more directly on employment services and make it easier for a veteran to navigate the VBA/VR&E Webpages, a goal that is compatible with Electronic Government in the President’s Management Agenda.

The *Congressional Commission on Servicemembers and Veterans Transition Assistance* report recognized the potential of an electronic platform and the Internet in providing employment services in its 1999 report. It envisioned that the Department of Labor would work with the Department of Defense and VA to design and maintain a customized, separate Veterans and Servicemembers Internet Site (VASIS) for servicemembers, veterans, and employers on DOL’s powerful electronic platform – what was then called America’s Career Center Kit. Then, as now, America’s Job Bank, one of four online services on the platform, was the largest and most frequently used job bank on the Internet. Everyday, 50,000 job seekers had access to almost a million jobs; 25,000 employers registered jobs. The Commission wanted DoD and VA to use this automated platform “rather than continue to fund and use their own outdated, in-house America’s Job Bank systems.”³

Today VA and DoD use DOL’s electronic platform and database for their Job Banks, but there is no career one-stop Website for veterans and servicemembers. The three departments maintain their own employment-focused or transition assistance Websites.

Indeed, there is a proliferation of such Websites – sponsored by government, business, and nonprofits – including some targeted to the National Guard and Reservists. See Internet Resources in our Bibliography (Appendix 19) for a partial list. It is beyond the scope of our Task Force to propose a fully integrated, cross-agency effort, but we understand that the agencies do work together on online projects of mutual interest, such as the Transferable Skills Identifier.

We have focused on how VR&E can improve its existing Websites for veterans with disabilities and integrate its online resources and those of other agencies into the new Five-Track Employment Process.

America's Job Bank

With DOL's permission, VR&E purchased a site from America's Job Bank (AJB), a grantee of Labor, for the rock bottom price of \$12,000, which includes ongoing maintenance and updates. This Webpage bears the VR&E name, but it sits on America's Job Bank's powerful databases for jobseekers' resumes and employers' job postings. While a job is in the AJB queue (approximately a 24-hour period after a job announcement is posted and awaits approval by the state), veterans' employment service providers can refer veterans to that job ahead of other candidates.

These and other features make it a valuable nationwide resource, but we received conflicting information as to how much it is used by VR&E Staff. One VR&E Officer pointed out that counselors in her state more often used a similar state Website. This is certainly an acceptable practice, but VR&E staff should give more consideration as to how the nationwide Job Bank can be more effectively used, especially for employers.

Web-based Customer Surveys

The Task Force believes that it is important to use Web-based survey tools to find out what customers – veterans and the public – think of the VA Website. We understand that VA is already working with the Federal Quality Consulting Group (FCG) <http://www.fcg.gov/> to implement such a survey tool. FCG is the executive agent for the American Customer Satisfaction Index (ACSI), which is a cross-industry measure of the quality of goods and services produced in both the public and private sectors of the national economy. The ACSI, developed by the University of Michigan Business School, has been successfully used by the federal government since 1994. The ACSI also allows federal agencies to benchmark their performance against comparable best-in-class entities.

New Language and Positioning

VA Homepage <http://www.va.gov/>

VA's Website has many helpful features for veterans and the general public. The introduction "How May We Serve You?" is especially user friendly. However, a visitor's first impression of VR&E on the homepage is that employment services take a back seat to vocational rehabilitation because of the size of the fonts used. Voc Rehab shouts. Employment Services whispers. The look is something like this.

Vocational Rehab & Employment Services

We understand that VR&E has requested enlarging the font for Employment Services to no avail. Our Task Force respectfully submits the same request.

VR&E Home Page <http://www.vba.va.gov/bln/vre/index.htm>

Change the wording of the link entitled Ch 31 Job Bank to Job Bank (or better: America's Job Bank) on this and other pages. Newcomers have no idea what Chapter 31 is and they should not have to know.

Throughout the site, change the wording of On-Line Self Help to Online Forms or Online Self Help and Forms.

VR&E Welcome Page http://www.vba.va.gov/bln/vre/voc_rehab.htm

The page is text heavy. Web studies and usability tests, such as those conducted by FirstGov.gov, show that users do not read large blocks of text. They look for descriptive links and headings. Rewrite and reformat this page using descriptive links and headings, which is what users prefer.

Move the Job Bank link in the left column near the bottom of the column to near the top, under the link for VA Home Page.

Also, proof read what you post. In the first paragraph are directions to the webmaster that should have been removed: (hyperlink to vocational-educational counseling page)

VR&E Employer Page http://www.vba.va.gov/bln/vre/for_employers.htm

The link "For Employers" (with jobs) is an email to the VR&E National Employment Coordinator. This link should go to VR&E's Job Bank, <http://dva.jobsearch.org/> which provides tools for employers to register and post their own jobs. It is important that VR&E staff promote this important, time-saving resource for employers, veterans, and VR&E staff.

VBA's Veterans Online Application (VONAPP)

<http://vabenefits.vba.va.gov/vonapp/main.asp>

Focus on Employment. Veterans may use this online form to "apply for compensation, pension and vocational rehabilitation benefits." There is no mention of employment services anywhere on the introductory pages to the form. To keep the focus on employment, we recommend adding "employment services" in the heading, which now reads "If you are applying for Compensation, Pension, or Vocational Rehabilitation." The new wording would be:

If you are applying for Compensation, Pension, or Vocational Rehabilitation and Employment Services:

Similar wording should be used in the table of internal links and throughout the text.

Helpful Employment Links

Here are other online government or military employment resources that may be helpful to veteran job seekers, including National Guard and Reservists. They could be added to the bottom of VR&E's Employment Resources Webpage http://www.vba.va.gov/bln/vre/emp_resources.htm

eVets Transition Site <http://www.dol.gov/elaws/evets.htm>

Transition from Soldier to Civilian
<http://www.acap.army.mil/>

Veterans Information on Federal Employment
<http://www.opm.gov/veterans/index.asp>

USA Jobs <http://www.usajobs.opm.gov/>

The Job Page (Federal and State Jobs)
<http://www.thejobpage.gov>

Usability Test Guidelines

The VR&E Website would benefit from one-on-one usability tests and usability focus groups with a small number of people in each. Many agencies use contractors with this kind of expertise to improve their Websites and make them more user friendly. However VR&E staff can conduct their own preliminary usability tests to determine if a site is easy to navigate. Here are some guidelines.

Usability Tests for the VA/VBA/VR&E Websites and VONAPP

The purpose of usability tests is to see if a range of individuals can navigate a Website – that is, find information they may need or want. VR&E can start with its own staff or colleagues from other offices. Start by assigning a test leader who will take the following steps:

- Make a list of about 10 or 12 tasks on the VR&E Website. (See sample tasks below.) Write out the correct URL and most obvious of the paths.
- Reserve a computer training room so that each person can work on a computer.
- Ask 9 or 10 colleagues to take an hour-long usability test. If some don't show, you can conduct the test with fewer people. Ideally you would have a mix – assorted ages, races, male/female, different jobs, but all should be people who are computer literate and use the Internet.
- Invite a note taker and 2 or 3 silent observers, who may also take notes. No person should take names. The note taker and observers should be people who have a stake in the outcome – the people responsible for the web content and services and their supervisor(s). These people can be involved in designing the tasks.

- Prepare task sheets for the participants, providing space for each to provide name, age, male/female, race, job title or type of work. All of this is optional because some people will not want to provide some of the information. Provide a number for each task and enough space to write his/her path to the Webpage or information they are asked to find. Do NOT provide the task because you may not use some of the tasks or you may change the order of the tasks as you go along.
- Conduct the test. Make sure ahead of time that each computer browser is open and on the VA Homepage. Ask each person to introduce him/herself. Keep everything light. Explain that there are NO wrong answers and that you are trying to determine ease of navigation. If a person can't find something, it's a navigational problem, not the participant's problem. Use all or some of the tasks, depending on time. Allow no more than 3 or 4 minutes for each unless you see that everyone is struggling. No one should speak or ask for help, but you can repeat the question.

When time is up, ask who found the Webpage or answer and to tell you how he/she did it, since there are often many paths to the page. At the end you can ask each person to make up a task. Discuss the results. Ask participants for their ideas about improving the site. (You can also do this at the end of each question, but take care of the time.) Cut everything off at the end of the hour and ask the note taker to help you collect the task sheets. Thank everyone for helping out.

Sample Task Questions

During the test, use the wording of each question, which includes no acronyms or jargon that the average veteran would probably not know.

1. Start from the VA homepage www.va.gov.

You are a veteran who believes he/she may be eligible for the VR&E program and you want to find out if you can file online. File means that you can fill out and submit the form electronically.

Answer: VONAPP <http://vabenefits.vba.va.gov/vonapp/main.asp>

2. Start from the VA homepage www.va.gov

You are an employer who has new jobs to post and you are interested in hiring a veteran, possibly a veteran with a disability. You have heard that there is a national online database to do the posting directly. Find the Website.

Answer: VR&E Job Bank <http://dva.jobsearch.org/> (Note to facilitator: One link for Employers is an email address. That is not the answer since the employer wants to post his or her own jobs.)

3. Start from the VA homepage www.va.gov

You are studying to be a vocational rehab counselor at a university. You want a general overview or definition of independent living services.

Here is one answer: <http://www.vba.va.gov/bln/vre/ilp.htm> , but there may be others, especially if the participant uses the VA search engine.

Proposed New Metatags for Websites

The Task Force found that the VR&E Homepage, VR&E Welcome Page, DVA Job Bank Website, and VONAPP had few or no metatags – coding that helps search engines find and display appropriate Web pages when users put keywords in search boxes of search engines. In this case, we want disabled veterans to find VR&E’s career resources and VBA’s online application form when they use major search engines.

To find metatags, click on “View” in the top bar of the browser, then “Source.”

Below are selected metatags as they currently appear, followed by wording we recommend for each site’s title, keywords, and content description.

Current Metatags for VR&E Homepage <http://www.vba.va.gov/bln/vre/index.htm>

```
<title>Vocational Rehabilitation & Employment Services</title>
<meta NAME="Vocational Rehabilitation and Employment"
CONTENT="Vocational Rehabilitation and Employment Service Web Page">
<meta NAME="keywords" CONTENT="Vocational Rehabilitation,
Employment, Counseling, Vocational, Independent Living, Disability">
```

Proposed Current VR&E Homepage Metatags

The Task Force proposes that the title be customized for the VR&E page:

Title: Vocational Rehabilitation and Employment Program for veterans with service-connected disabilities; Veterans Benefit Administration, Department of Veterans Affairs

Keywords: Veterans, vets, vocational rehabilitation and employment, service-connected disabilities, service-related disabilities, jobs, employment services, job bank, employment resources, career resources, vocational rehabilitation, independent living, apply, apply online, application form, employers, hire a disabled veteran, disability, ability to work, vocational rehabilitation, Chapter 31, transition assistance, Veterans Affairs, Veterans Administration

Description: VA’s Vocational Rehabilitation and Employment Program provides job readiness services, employment services, counseling, vocational rehabilitation and independent living services to eligible veterans with service-connected disabilities.

Current Welcome to Vocational Rehabilitation and Employment Service Page http://www.vba.va.gov/bln/vre/voc_rehab.htm

```
<META content="Vocational Rehabilitation and Employment Service Web Page"
name="Vocational Rehabilitation and Employment">
<META
content="Vocational Rehabilitation, Employment, Counseling, Vocational,
Independent Living, Disability"
```

Proposed Welcome to Vocational Rehabilitation and Employment Service Page

Use VR&E Homepage metatags.

Current VR&E Job Bank Website Metatags

<http://dva.jobsearch.org/>

```
<title>Home Page</title>
```

There are no other metatags and "home page" is not a suitable title.

Proposed VR&E Job Bank Website Metatags

This site uses a design and technology created by America's Job Bank sponsored by the Department of Labor. We used the metatags for that site as a starting place and added keywords specific to VR&E.

Title: America's Job Bank for Veterans, Veterans Affairs, Vocational Rehabilitation and Employment Service, job search engine, jobs

Keywords: jobs, job search, dream job, job openings, job bank, job search, veterans, veterans with service-connected disabilities, resumes, sample resumes, careers, career search, job search engine

Description: Disabled veterans, are you looking for your dream job? Post your resume, set up an automated job search. Search through our database of over one million jobs nationwide.

Current VBA VONAPP Metatags

```
<title>Welcome to the Electronic Department of Veteran Affairs</title>
```

```
<meta name="keywords" content="Department of Veterans
Affairs", veterans, "veterans benefits", "VA benefits", vets, compensation,
pension, "vocational rehabilitation", VA, VBA, "VA Regional Offices",
", "Veterans Administration">
```

```
<meta name="description" content="Veterans Benefits
Administration interactive benefits applications. Veterans Benefits
Administration is an organizational element of the U.S. Department of Veterans
Affairs. Site allows applicants to apply for certain VA benefits on line.">
```

Proposed VBA VONAPP Metatags

Title: Veterans Benefits Administration interactive benefits application forms for compensation, pensions, and vocational rehabilitation and employment services.

Keywords: Online Form, Veterans, benefits, compensation, pension, vocational rehabilitation, employment, veterans with service-connected disabilities, disabled veterans, apply for, application form, online application, independent

living, Department of Veterans Affairs, Veterans Administration, Veterans Benefit Administration

Description: Official U.S. Department of Veterans Affairs (V A) website, which enables veterans to apply for benefits using the Internet. U.S. military veterans and some service members within six months of separation or retirement can apply online for compensation, pension, and with a service-connected disability can apply online for vocational rehabilitation and employment services.

Conclusion

This guidance primarily deals with making a few edits and corrections to VR&E Web pages and the VBA online form to make them easier for veterans and the public to navigate. VBA and VR&E should consider a total overhaul to the Website to keep in step with the implementation of the new integrated, employment-driven service delivery system.

¹ Many federal agencies use WebTrends or a similar software

² *The Web as a Way of Life*, Robyn Greenspan, May 21, 2002,
http://cyberatlas.internet.com/big_picture/demographics/article/0,,5901_1142561,00.html

³ Congressional Commission on Servicemembers and Veterans Transition Assistance Report, January 1999, pp 63-67.

Appendix 14-A

Best Practices

Job Search Workshop

Denver Regional Office
Vocational Rehabilitation and Employment Division
Contact Person: Mr. Gregory Bittle
Telephone Number: (303) 914-5550

In late 1999, a comprehensive Job Seeking Skills (JSS) one-day workshop was developed specifically for Colorado/Wyoming Chapter 31 program participants. The following organizations collaborated to produce this effective practice:

- Denver/Cheyenne VR&E
- US Dept. of Labor (DOL), Veterans Employment and Training Service (VETS)
- State of Colorado Veterans
- State of Colorado, Disabled Veterans Outreach Program (DVOP)

Here is what resulted from the initial discussion:

- A Memorandum of Understanding was developed between DOL-VETS and VA-VRE.
- A one-day, six-hour JSS workshop, done monthly in Denver and Colorado Springs, CO, was developed and initiated.
- A PowerPoint slide presentation was developed.
- A 6-page workbook used during the JSS workshop by participants was developed and produced.
- A JSS workshop was developed and is now conducted by Denver VR&E Employment Specialist and State of Colorado DVOPS.
- A requirement that all Chapter 31 program participants attend the JSS prior to receiving the two-month employment adjustment allowance (usually around \$1000).

Post JSS customer satisfaction surveys have been very positive (95% + ratings) and this “free” workshop allowed Denver/Cheyenne VR&E to reduce employment services contract costs by over \$200,000/year. Some areas covered during the JSS seminar:

- **Job Search** – considerations, planning, execution, how to identify companies and resources, networking
- **Resumes** – formats, examples, purpose, cover letters, job applications, federal applications, KSA’s (knowledge, skills and abilities)
- **Interviewing** – types, first impressions, techniques, questions and answers, role playing
- **Reference Information Documents** – contacts, phone numbers, and Websites

Appendix 14-B Best Practices Model Partnership VHA and VBA Vocational Rehabilitation Program

James A. Haley VA Medical Center, Tampa, FL
Contact Person: Ms. Linda McGann
Telephone Number: (813) 972-2000, Extension 6092

St. Petersburg Regional Office
Vocational Rehabilitation and Employment Division
Contact Person: Ms. Ruth Fanning
Telephone Number: (727) 319-7902

The document describes the current collaborative process and mechanism for providing employment and/or independent living services to veterans and active duty military members under the Chapter 31 benefit. The individuals receiving these services are the shared clients of the Vocational Rehabilitation Program at the James A. Haley Veterans' Hospital (hereafter referred to as the Tampa VA) and the Vocational Rehabilitation and Employment section of the St. Petersburg Regional Office.

The practice model has evolved over the last 20+ years and is the product of ongoing collaborative efforts, shared strategic planning, and continuous interaction between the vocational rehabilitation providers on the hospital side and the staff of the VR&E section at St. Petersburg. It should be noted that the VR program at the Tampa VA serves all categories of veterans, service-connected, non-service connected, and active duty members, as opposed to the VR&E program, which serves only the service-connected population and active duty members who have been discharged or are waiting medical retirement and have been awarded a memorandum rating by VBA.

It is believed that the success of this model is attributable to a large extent to the fact that the staff at Tampa VA has achieved a high level of specialization in serving individuals who have sustained severe, often catastrophic injuries such as traumatic brain injury, spinal cord injury, amputation, and others. Likewise the VR&E section has sought to achieve counselor and contractor specialization in managing this type of complex injury. Fluctuating staffing patterns and needs in the VR&E section have resulted in recent changes in the assignment of cases to counselors and contractors of the St. Petersburg regional office. The current model of collaboration was developed specifically for the brain injury population, which has been prioritized for services for some 10+ years. The model now generalizes to all types of severe disability, and forms the framework for managing all such clients, particularly those who need independent living services.

Identification of clients eligible to apply for Chapter 31 services/intake process

The dedicated Voc Rehab Specialist for that program assesses all individuals admitted to the acute brain injury rehabilitation program. If the client is deemed eligible to apply

for Voc Rehab services under Chapter 31, the VRS assists client or family member in completing application and forwarding to the St. Petersburg office with relevant medical information. VR&E section is notified by telephone of forthcoming application and entitlement and feasibility determination. Chapter 31 applications are also completed for appropriate individuals with brain injury who are admitted to non-acute beds or who present to Voc Rehab at Tampa VA as outpatients at any point in the continuum of recovery.

All individuals admitted to the spinal cord injury/dysfunction acute rehabilitation bed service are given an orientation to employment and independent living services available to them. Consults for individual voc rehab assessment are generated by the treatment team on an as needed basis. The Chapter 31 application process is facilitated by either the VRS at the Tampa VA or the VBA liaison out-stationed there and is then handled similarly to the above. Applications for individuals with spinal cord injury now receive the same prioritization as those for individuals with brain injury. The Voc Rehab Specialist at Tampa also assists in the Chapter 31 application process for individuals in the post-acute phases of recovery whenever the treatment team or OP provider generates a consult to them.

All patients admitted to the inpatient Chronic Pain Rehabilitation Program are screened by the Voc Rehab staff at Tampa; appropriate individuals are assisted with the Chapter 31 application process.

All clients in the outpatient Alcohol and Drug Abuse Treatment Program are provided group education by the Voc Rehab staff at Tampa regarding the vocational services available to them. Individual attention is provided on the basis of a consult generated by the treatment team. Clients in need of Chapter 31 services – often in pain – are assisted with the application process.

Appropriate individuals not involved in one of the above treatment programs are educated to the Chapter 31 benefit and assisted with the application process in response to consults generated by inpatient or outpatient providers or in response to a need identified during a walk-in assessment.

In summary, all clients seen by the Voc Rehab Program at the Tampa VA are assisted in applying for Voc Rehab under Chapter 31 and provided education in the determination process if they are eligible to apply and present with a need for either employment or independent living services. If independent living needs are identified or anticipated and the individual is hospitalized in one of the rehabilitation programs at the Tampa VA, the Voc Rehab Specialist provides liaison between the treatment team and the VR&E counselor or contractor who is assigned to the case by the St. Petersburg Regional Office. Individual members of the team that is treating the client are asked to provide recommendations for ongoing therapy in a post-acute or community based setting. The recommendations are faxed to the VR&E counselor or contractor and form the basis for developing the independent living plan. This may be done during the acute rehabilitation admission, during a post-acute follow-up admission, or during an admission requested by the Voc Rehab Specialist at any point in the continuum.

Counselor/contractor assignment and plan development

Once received by the St. Petersburg Regional Office, the application/client is assigned to a VR&E counselor or contractor. The VR&E provider then makes entitlement and feasibility determination and plan development is initiated. Whenever possible, the VR&E contractor assigned to the case has face-to-face contact with the Chapter 31 applicant or a responsible party during their inpatient stay in one of the Tampa VA rehabilitation programs. These face-to-face meetings are coordinated by either the Voc Rehab Specialist or the Social Worker at Tampa VA, both in terms of time and location. Client/family input is obtained from the onset of plan development and continues after the individual returns to his or her discharge environment.

Requests for medical services for Chapter 31 clients

All requests for medical services needed by individuals during the Chapter 31 entitlement and feasibility determination or during the delivery of Chapter 31 services are facilitated by the Voc Rehab Specialist at Tampa VA. All requests are forwarded to Voc Rehab at Tampa, where they are logged in, triaged as needed, then routed to the appropriate clinic or provider. The VRS at the Tampa VA provides ongoing education to medical center providers regarding prioritization of these requests and the importance of documenting interventions appropriately. The paper document on which these requests are made is currently problematic, in that providers at Tampa VA have been directed by hospital administration to decline all paper consults/requests for services. It is unclear at this time how the Voc Rehab Specialist's role in this process will change if the process for requesting medical services becomes automated (electronic), as has been suggested will occur at the national level.

Vocational evaluations for individuals in need of employment services

To the extent that staffing in the Tampa Voc Rehab Program permits, Vocational Evaluations are conducted for Chapter 31 clients seeking employment services. At the request of a VR&E counselor or contractor, these individuals may be provided a battery of tests/assessments (aptitude, interest, IQ, transferability of skills, situational assessment via the non-paid work experience or a compensated work therapy placement, and others).

Cross-Training

The staff of the Tampa VA Voc Rehab Program and the staff of the St. Petersburg VR&E are frequently involved in cross-training programs. This is accomplished in various forums: workshops, conferences, teleconferences, and specialized training opportunities for the contractors. These cross-training experiences frequently result in process improvements to the benefit of both sides and improved efficiency in serving our shared clients.

Stakeholder Input/Collaborative Strategic Planning

The VR&E Program at the St. Petersburg Regional Office and its entire staff are viewed as primary stakeholders of the Voc Rehab Program at the Tampa VA. Our missions overlap in the provision of Voc Rehab services to that population of Veterans/active duty members who are eligible to apply for the Chapter 31 benefit and are subsequently found entitled and feasible for an employment or independent living plan. For that population of veterans/active duty members, the outcome measures utilized by the Voc Rehab Program at Tampa are interdependent on the processes and outcomes utilized

by the VR&E Program at St. Petersburg. Our client and family satisfaction instrument frequently reveals issues, concerns, and feedback that crosses both of the programs. A stakeholder satisfaction survey instrument is utilized to obtain feedback from the counselors and contractors in the VR&E section at St. Petersburg regarding the services that we provide to them. The effectiveness measure used by the VR program at Tampa (change in vocational or independent living status at 3 month follow-up after discharge from services) is closely dependent on the VR&E processing of Chapter 31 applications and timely interventions on their part for the population of veterans/active duty members who apply. The Voc Rehab Program at Tampa conducts an annual strategic planning activity, and one or more of the Regional Office staff has participated in this collaborative strategic planning retreat for the past 3 years. Through this avenue, the needs of the VR&E Program at St. Petersburg are identified and incorporated into the strategic plan for the Voc Rehab Program at Tampa.

Out-stationing of VBA Counselor/Regional Office Liaison at Tampa VA

A unique and positive contributor to the development of a strong partnership between VBA St. Petersburg and VHA Tampa has been the long-standing out-stationing of a Veterans Benefits Counselor and Regional Office Liaison at the Tampa VA Hospital. This individual has been and continues to be an invaluable resource for the staff of the Tampa VA Voc Rehab Program.

Appendix 14-C

Best Practices

“No Man Is An Island”

Independent Living Initiative

New York Regional Office
Vocational Rehabilitation and Employment Division
Contact Person: Mr. Bernard Finger
Telephone Number: (212) 807-7229, Extension 3028

The “No Man is an Island” pilot project is a joint effort of the New York Regional Office Vocational Rehabilitation and Employment Division and the Comprehensive Day Treatment Program at the Northport VAMC. Pooling the resources of these separately-funded programs into an integrated and cohesive whole, the goal of the pilot project is to make fuller use of present VA resources to assist a population of seriously-disabled hospitalized veterans. Currently, 60 disabled veterans are at various stages in their training. This population of veterans, consists of seriously-mentally ill veterans who have been unable to manage in the world of work or with normal socialization. Their predominant diagnoses are schizophrenia, bipolar disorder and PTSD along with many physical and medical needs. Post training testing results have thus far demonstrated the following benefits: (1) a reduction in hospitalizations (no veteran in training has needed inpatient hospitalization), (2) a marked decrease in appointment cancellations by the veterans, (3) fewer psychological symptoms of distress reported, and (4) an overall gain in measures of quality of life particularly in the areas of self-esteem, learning, and socialization. This program is now being expanded to the Hudson Valley and Albany, NY VAMCs for both the mentally ill and spinal cord disabled veterans receiving treatment at these institutions.

For those that need more real-time interactive learning, we came across information on the new Digital Wall Display – interactive blackboards. These boards display written material, text, charts, moving pictures and audio – all of which can be transmitted instantaneously to any WINDOWS PC in the world, turning an off-site PC into a portable interactive blackboard. The thinking excites the imagination. We can develop an electronic interactive arena that aids in the reduction of isolation and involves the incarcerated veteran in the learning process. Our partners in this endeavor will be the New York Institute of Technology and the State Board of Cooperative Education Services (BOCES).

VR&E staff, in conjunction with the University, BOCES, and VHA staff will develop the curricula, transmission styles, testing, and feedback mechanisms that will be used, and we will share our experience with the US Department of Education, through their state-funded counterpart. This is indeed ground-breaking and very rewarding work and may indeed serve as the pathway to general learning, as our society evolves into a an e-society.

Disabled Veterans Small Business Initiative

The New York Regional Office, VR&E Division, has forged a partnership with representatives from the Region II, US General Services Administration, and the Small Business Administration to make opportunities available for veteran-owned and service-disabled veteran-owned businesses, through the initiation of series of outreach workshops, each to be geared around specific industry groups, the first of which was held on Tuesday, June 24, 2003 for the IT and construction services industries.

The New York Regional Office hosted the first in this series on June 24, 2003 in our third floor conference room to help veterans, disabled-veterans, and their families:

- Learn about federal opportunities available in Information Technology and Construction
- Learn about GSA's, SBA's and VA's various veterans programs and services
- Network with small business decision makers, including representatives from GSA's Federal Supply Service, Public Buildings Service, and Federal Technology Service Representatives from the Region II Social Security Administration, including members of their "Ticket to Work" staff.

Section 502 of Public Law 106-50, the Veterans Entrepreneurship and Small Business Development Act of 1999, sets a 3 percent government-wide goal for participation by small businesses owned and controlled by service-disabled veterans in federal contracting and subcontracting. The law is implemented through letters issued to agencies by the Small Business Administration (SBA).

The New York VR&E Division is dedicated toward providing economic support and empowerment for every service-connected disabled veteran and small-business disabled-veteran entrepreneur and to provide resource information for service-disabled veterans who are considering business ownership through coupling service-disabled veterans with local SBA-sponsored technical and managerial assistance. Our services are open to individuals who were discharged or released from active duty because of a service-connected disability, who are entitled to compensation under laws administered by the Secretary of Veterans Affairs.

The above conference-workshop is one of many planned to offer our disabled veterans information on Evaluating Franchise Opportunities; Writing a Business Plan; and Raising Capital, as well as the Stages for Entrepreneurial growth as defined by the Veterans Business Outreach Program. These stages include: (1) pre-business plan workshop, (2) concept assessment, (3) preparing a business plan, and (4) entrepreneurial training.

Federal Executive Board "One-Stop Government"

Staffs from the VR&E Division and Veterans Benefits and Services Division Field staff personnel have also joined to provide a VBA presence at Federal Executive Board "One-Stop Government" events. These involve a joint federal-state local agency task force dedicated to bringing real time services to the local community. In these events, representatives from federal, state, and local government agencies, including the Social Security Administration, the Internal Revenue Service, the Department of Housing

and Urban Development, the Food and Services Administration, the Administration on Aging, the Health Resources and Services Administration, the New York City Department for the Aging, the New York City Human Resources Administration, and the state office for Elderly Pharmaceutical Insurance Coverage, provide One-Stop, coordinated services to members of the local community. These events help citizens see their local, state, and federal government working together to provide them benefits and services. Many participants come to these events for their first encounter with a public service organization.

Together we have served more than 1,500 New York citizens through these events. What we did was special! Like any new concept, its development took time and hard work. However, the final product, delivered over these past two years, represented a level of care and intervention far beyond what is normally expected in government. The level of cooperation among the agencies involved was exemplary.

New York State's Disabled Veterans' Outreach Program (DVOP)

The Vocational Rehabilitation and Employment Division (VR&E) has an MOU that allows employees from New York State's Disabled Veterans' Outreach Program (DVOP) to work as an integral part of the New York Regional Office's rehabilitation team. The VR&E staff provides the education and vocational training that gives disabled veterans the basic skills needed to do the job; while the New York State employees assist in locating employment opportunities for veterans by using their own extensive network of employee/employers contacts as well as the Department of Labor Job Bank. The partnership has significantly increased the number of disabled veterans the New York Regional Office has helped. In Fiscal Year 1995, there were 79 disabled veterans rehabilitated with average salaries of \$24,867. In Fiscal Year 2002, there were 285 rehabilitations with working veterans earning an average salary of \$30,840 (per CWINRS Reports).

SSA Jobs Linkage

The Regional Social Security Administration, Human Resources Center Director was contacted by the New York Regional Office VR&E Division. In response, SSA agreed to set aside 35 percent of their forthcoming job openings, in two classifications for the New York Regional Office VR&E participants: Teleservice Representative (TSR) GS 5 target 7 (requires two years of college, any degree) and Claims Representative (CR) GS 7 target 11 (requires a Bachelors Degree).

Accommodation will be provided by SSA, but under the guidance of the VR&E Division. Additionally, at the request of New York VR&E, SSA agreed to find work duties for temporary paid internships for VR&E disabled veterans that could automatically be converted to career conditional appointments. VR&E has invited SSA to send a HR representative to meet with their counselors to help facilitate the job matching process.

This integration and interagency support was enhanced through other cooperative activities. For instance, the VR&E Division has provided key support to the SSA "Ticket to Work" initiative, to help SSA Disability claimants (our disabled veterans), become self-supporting. The Division also has provided substantial support to the Federal Executive Board "Government Working Together in your Community" initiative, in which SSA plays a lead role.

United States Postal Service

Staff from the division worked with employees of Veterans Benefits and Services Division (VBSD) and the medical staff of the US Post Office, to find ways to expedite the information needed by the U.S. Postal Service's Personnel and Medical Departments to expedite the placement of our veterans. The joint team was able to define the records that were needed and were able to get the Postal Service's Medical Officer to considerably reduce documentation requirements. The results of the partnership with the U.S. Post Office are significant. Since the beginning of this partnership in October 28,1999, the VR&E Division has referred 220 disabled veterans. Of these, 92 had disabilities rated over 30 percent. The Vocational Rehabilitation and Employment staff has thus far helped place 79 disabled veterans and there are 30 awaiting placement. In addition to the above, a number of other qualified veterans, some disabled (who were not found eligible for Chapter 31) were referred to USPS for postal positions and were hired.

Services For Incarcerated Veterans (Initial Stages)

In addition, to the many veteran(s) groups served by this program, New York VR&E, in conjunction with the Veterans Integrated Service Network (VISN) 3 and 4, also serves currently incarcerated, soon to be released work permit prisoners, and newly released ex-convicts. For those with long-term convictions, we plan to develop a virtual e-based learning system to meet their needs.

We believe that it is possible to set up a computer using the Remote Access feature that comes with the newer Windows Operating Systems. The remote computer could then be configured by the System Administrator to allow access to specific files or programs. Other programs could be blocked to limit access as well. We are on the verge of being able to construct individualized structured programs of study for our incarcerated veterans. Better yet, these courses will not be time-bound, but will be provided through the use dedicated website chat rooms, where the students can log on at any time of the day and night. (Some of our veterans can only function in the wee hours of the morning when the dark and silence provide safety and peace.)

Additional Planned VR&E - VHA Activities

ABCs of Cooking

This program will provide the foundation for veterans who are living on their own to prepare healthy and nutritious meals. They will gain the skills and knowledge utilized by kitchen personnel, including safety procedures, sanitation, kitchen management, and food cost control. They will also learn how to prepare simple recipes that demonstrate their acquired knowledge of the basic food groups. Upon successful completion, veterans will have learned the skills necessary to safely manage their kitchen environment, purchase foods that are nutritious, and prepare well-balanced meals for themselves.

Desktop Publishing

This program will be available to veterans that have completed the basic computer training and have shown a strong interest in art, photography and writing. Utilizing Microsoft Desktop Publisher, they will learn general desktop publishing and design techniques, layout, typography, writing, printing, publishing, and other facets of

graphic art, which will enable the CDTP to create a veteran-published newsletter. Upon successful completion, veterans will have acquired the knowledge to publish a newsletter while building skills that can be applied in the future to other types of projects.

ABC Program

The purpose of the ABC program is to enhance the academic proficiencies of severely-disabled service connected veterans in the areas of vocabulary, writing, reading, and mathematics. In order to motivate the students to be successful, lessons will challenge students to write their own journals. Materials will be provided by the Western Suffolk Board of Cooperative Educational Services to enable the veterans to create their own journals for possible publication through resources provided by the VAMC. Upon successful completion of the program, veterans will be able to communicate and relate at a higher academic level more effectively. In addition, we will teach the participants how to use mathematics in daily life activities. By meeting the above objectives and goals for the ABC program, these veterans will become more confident in their ability to interact with others.

Appendix 15

Memorandum of Understanding with State VR Administrators

Partnership Between
Council of State Administrators of Vocational Rehabilitation
And
The U. S. Department of Veterans Affairs

Background

Included in this Task Force Report to the Secretary are several recommendations to strengthen partnerships with businesses and employers, universities, community rehabilitation programs, and other state and federal vocational rehabilitation programs. Under the Rehabilitation Act of 1973, as amended, the Rehabilitation Services Administration in the U.S. Department of Education oversees a federal/state partnership in fifty states and territories that provides rehabilitation and independent living services to individuals with disabilities.

An individual is eligible for the state vocational rehabilitation program if the person has a significant disability that impedes his or her ability to obtain or maintain employment. The state program provides employment services, education and training, independent living services, supported employment, assistive technology, and transition services for youth with disabilities.

The tenets of the program are that the individual has informed choice, and has an opportunity to maximize his or her capabilities to achieve independence.

In order to make use of existing expertise, and avoid duplicating services, many state vocational rehabilitation agencies have Memorandums of Understanding (MOUs) with other agencies/organizations that serve individuals with disabilities. Examples of such MOUs are: local school districts, State Workforce Investment Boards, employment networks, community rehabilitation programs, universities, Boards of Higher Education, the Social Security Administration, the Worker's Compensation Agency, etc.

Rather than "reinvent the wheel," we recommend that the Department of Veterans Affairs' Vocational Rehabilitation and Employment staff in the states work in partnership with the state vocational rehabilitation agency. This partnership already exists in some states, and should be pursued in other states.

Following is a draft Memorandum of Understanding with the Council of State Administrators of Vocational Rehabilitation (CSAVR) to initiate a partnership between state VR agencies and the Department of Veterans Affairs. Membership in CSAVR represents the state vocational rehabilitation agencies.

Memorandum of Understanding

I. Purpose

In order to advance, improve, and expand the work opportunities for veterans with disabilities, the Council of State Administrators of Vocational Rehabilitation (CSAVR) and the Department of Veterans Affairs (VA) herein commit themselves to working cooperatively in implementing the objectives set forth in this Agreement.

The CSAVR is an advisory body to the Rehabilitation Services Administration in the U.S. Department of Education, on policy, regulations and the administration of programs serving persons with disabilities. CSAVR provides a forum for the collective deliberation of State Vocational Rehabilitation agencies on all issues affecting the provision of vocational rehabilitation services to persons with disabilities, and informs the public about the effect of disability on the lives of persons with disabilities, particularly with respect to employment and economic dependence.

II. Statement of Need

The CSAVR and VA believe that quality employment outcomes for veterans with disabilities can be increased and improved through a closer working relationship between State Vocational Rehabilitation agencies and the VA Vocational Rehabilitation and Employment Program.

III. Terms of Cooperation Agreement

The CSAVR and VA will communicate to their respective networks the desire for the State and local VA offices to establish cooperative agreements and the intended outcome of such agreements.

The CSAVR and VA will act as liaisons to their respective agencies to facilitate the establishment of cooperative agreements between State VR agencies and VA regional offices. Such agreements are intended to identify opportunities where collaboration and partnership can result in improved services and increased employment outcomes for veterans with disabilities.

The CSAVR and VA will share information and coordinate activities, as appropriate, to carry out and support the objectives of the cooperative agreement.

The CSAVR and VA will create mechanisms to share case data and initiate cross-matching activities (within the HIPAA guidelines) to identify disabled persons served by both entities. This initiative is intended to enhance services for veterans with disabilities in a more cost effective and comprehensive manner.

The CSAVR and VA will also provide technical assistance and support to any State VR and DVA office that requests their assistance in facilitating the development of a state/local agreement.

IV. Authority

The Rehabilitation Act of 1973, As Amended

This agreement does not in itself authorize the expenditure or reimbursement of any funds. Nothing in this agreement shall obligate the parties to expend appropriations or other monies, or to enter into any contract or other obligation.

Further, this agreement shall not be interpreted to limit, supercede, or otherwise affect either party's normal operations or decisions in carrying out its mission, statutory, or regulatory duties. Nothing in this agreement shall be interpreted as altering any eligibility requirements for any VA program or activity authorized under _____ or for the public VR program authorized under Title 1 of the Rehabilitation Act.

V. Effective Date

This agreement shall become effective upon the date of signature of the underlined parties and shall remain in effect for _____. This agreement may be terminated at any time upon 30 days advance notice by one party to the other, and may be amended by the written agreement of either parties, and/or their designees.

CSAVR

VA

Appendix 16

Index of Recommendations

Implementation Timeframe

Priority recommendations are highlighted in green.

Implementation

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Near Mid Long

PROGRAM RECOMMENDATIONS				
P-1	Eligibility			
P-1.1	Use Chapter 36 Counseling benefits as part of the triage process for administering the use of Chapter 31 for pre-discharged military members and post-discharged veterans. (Near-Term)	x		
P-1.2	Remove the limiting periods for use of Chapter 36 counseling benefits. (Near-Term)	x		
P-1.3	Establish a system to accelerate the delivery of Chapter 31 rehabilitation services to those veterans in most critical need by changing the definitions of 38 U.S.C §§ 3101 and 3102. (Mid-Term)		x	
P-2	Employment			
P-2.1	Implement a new, five-track employment-driven VR&E service delivery system and a broad-based strategy to consistently communicate to veterans and stakeholders that the purpose of the VR&E Program is employment. (Mid-Term to Long-Term; Priority)		x	x
P-2.2	Create the position of VR&E Assistant Director for Employment Services to provide leadership and elevate the visibility and importance of veterans' employment within VA and to outside stakeholders. (See Recommendation on Central Office Organization and Staffing.) (Near-Term)	x		
P-2.3	Create new staff positions and add staff for an Employment Readiness Specialist (56 FTE) and a Marketing and Placement Specialist (56 FTE) to facilitate implementation of the five-track employment-driven service delivery model. (See Recommendations on Workforce Management and Chapter 4.) (Near-Term to Long-Term)	x	x	x
P-2.4	Transfer the 45 FTE Employment Specialist positions in VR&E back to professional counseling positions. (See Recommendations on Workforce Management.) (Near-Term to Long-Term)	x	x	x
P-2.5	Develop new policies and procedures to implement the new, five-track employment-driven service delivery system with priority given to Guard and Reservist in Tracks 1 and 2. (Near-Term; Priority)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

P-2.6	Develop and implement initial and recurring training programs for Employment Marketing and Placement Specialists and Employment Readiness Specialists. (Near-Term)	x		
P-2.7	Make better use of special appointing authorities to help veterans obtain federal employment. (Mid-Term)		x	
P-2.8	Provide an interim information system capability and long-term solution to support a redesigned comprehensive employment services program. (See Recommendations on Information Technology.) (Near-Term; Priority)	x		
P-2.9	Enhance existing online employment services. (Near-Term)	x		
P-3	Independent Living			
P-3.1	Establish a VR&E Service CO staff position dedicated to lead and manage the IL program. (Near-Term)	x		
P-3.2	Create and staff Independent Living Specialists positions with personnel experienced in social work, counseling psychology, and disability. (See Recommendation on Workforce Management.) (Near-Term)	x		
P-3.3	Review IL “best practices” such as those implemented in Tampa VAMC and the St. Petersburg VARO as well as various state models as exemplified by the State of Alabama Independent Living Program. (Near-Term)	x		
P-3.4	Provide consistent and uniform training for IL specialists. (See Recommendation on Training.) (Near-Term)	x		
P-3.5	Initially, focus VHA/VR&E integration on Centers of Excellence for spinal cord injury, traumatic brain injury, blind rehabilitation, and stroke. Establish protocols for a VHA/VR&E team approach (One VA) under the leadership of the IL specialist. (Mid-Term)		x	
P-3.6	Review funding sources and create and maintain an inventory of IL services and assistive technology devices that can be provided across VA. (Mid-Term)		x	
P-3.7	Initiate a study of the population of veterans currently in the VR&E IL Program and those receiving IL services; use this data and other research to develop estimates of the future demand for IL services and the types of services that might be needed to support veterans. (Mid-Term)		x	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

P-4	Partnerships			
P-4.1	Establish a Veterans Rehabilitation and Employment Working Group led by VA Central Office and composed of representatives from VHA, VBA and VR&E, DOL, DoD and the Council of State Administrators of Vocational Rehabilitation to develop and implement local, regional, and national policies, strategies, and plans for continued collaboration and improved integration of rehabilitation and employment of veterans with disabilities. (Mid-Term)		x	
P-4.2	Initiate a Memorandum of Understanding (MOU) with the Council of State Administrators of Vocational Rehabilitation (CSAVR) and the Rehabilitation Services Administration (RSA) to facilitate formal partnerships with state vocational rehabilitation agencies to leverage employment opportunities for veterans with disabilities. (Near-Term)	x		
P-4.3	Establish a pilot project with the VBA Montgomery Regional Office and the Alabama Department of Rehabilitation Services to guide the development and design of collaborative business processes that could be implemented nationwide. (Near-Term)	x		
P-4.4	Negotiate a new Memorandum of Agreement with DOL to improve and standardize nationwide the DVOP-VR&E business processes and relationships for more effective and efficient delivery of services to veterans with disabilities seeking employment. (Mid-Term).		x	
P-4.5	Enter into proactive collaborative relationships with key local, regional, and national organizations such as the Office of Federal Contract Compliance Programs and state employment agencies and other entities such as the growing national employment network of state employment personnel, business representatives, and others. (Mid-Term)		x	
ORGANIZATION RECOMMENDATIONS				
O-1	Organizational, Program, and Fiscal Accountability			
O-1.1	Provide the VR&E Service Director greater line-of-sight authority over VR&E field staff and operations, resources and personnel evaluation, selection, assignment, and promotion. (Near-Term to Long-Term)	x	x	x
O-1.2	Establish clear lines of responsibility and authority within the VR&E Service for administration of the program and delivery of services. (Near-Term to Long-Term)	x	x	x

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

		Near	Mid	Long
O-1.3	Set formal performance goals for VR&E Officers, VR&E staff, Regional Office Directors, and Service Center Managers and hold these individuals accountable for performance. (Near-Term to Long-Term)	x	x	x
O-1.4	Implement a systematic project integration and change management process. (Near-Term to Long-Term)	x	x	x
O-1.5	Expedite transfer of voucher processing to RO Finance Offices; provide additional FTE as necessary to support this transition and workload. (Near-Term)	x		
O-1.6	Develop an integrated protocol for seamless management by VR&E and the CFO of voucher audit operations and establish performance standards to ensure timeliness of payments and purchases. (Near-Term)	x		
O-1.7	Implement a process and system for tracking and documenting the purchase of individual and cumulative Chapter 31 services and products purchased by RO staff for each veteran; put in place processes for analysis and executive oversight and review of nationwide data, trends in purchasing, and appropriateness of these purchases to the mission. Routinely provide visibility of this data and information to CO and field staff, RO Directors and the VBA CFO. (Near-Term to Mid-Term)	x	x	
O-1.8	Enforce a nationwide protocol for threshold approval (level of funds and types of purchases) of single and cumulative services and products procured by VR&E staff, VR&E Officers, and RO Directors. Develop this protocol in coordination with the CFO and Office of Field Operations to ensure that all aspects of fiscal control and program integrity are addressed. Provide RO Directors the authority to establish more restrictive fiscal controls based on local circumstances. (Near-Term)	x		
O-1.9	Enhance the functionality of CWINRS on a priority basis to address CFO requirements for internal control and financial management. Enhance the functionality of CWINRS for management and oversight of all discretely-procured contractor services and products by veteran, counselor and type of goods or services; establish cumulative expenditure thresholds for purchase of goods and services and establish a second level of pre-approval tied to these thresholds. (Near-Term to Mid-Term)	x	x	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

O-2	Central Office Organization and Facilities			
O-2.1	Implement a new organizational structure for the VR&E CO organized under four Assistant Director positions – Counseling and Outreach Programs, Employment Programs, Rehabilitation Programs, Field Operations. (Near-Term; Priority)	x		
O-2.2	Create an Assistant for Program Integration position reporting to the Deputy Director. (Near-Term; Priority)	x		
O-2.3	Enhance current CO capacities for: Management and Operational Analyses; Employment Services; Staff Training and Professional Education; Contract Management; Policy and Procedures; Quality Assurance; Finance and Resource Management; Information Technology; Administration of the Chapter 36 Program; Data and Program Coordination with DoD, DOL, and other federal agencies involved with veterans' small business and employment programs (Near-Term; Priority)	x		
O-2.4	Create new Central Office capacities for: Assistive Technology; Veteran Rehabilitation and Employment Research, Development and Planning; Program Analysis and Evaluation; Project Management; Field Operations; Disabled Transition Assistance Program (Mid-Term)		x	
O-2.5	Provide additional facilities for VR&E CO to improve productivity of current staff and for new staff. (Near-Term; Priority)	x		
O-3	Central Office Staffing			
O-3.1	Increase the current direct staffing level of the VR&E Central Office staff from 33 to a goal of about 55-60 to more appropriately reflect the level of resources needed to execute the mission of the VR&E Service and support new and required capacities. (Near-Term to Mid-Term)	x	x	
O-3.2	Relocate the VR&E Central Office positions that were out-based at the Regional Offices back to Central Office to improve staff effectiveness. Consider consolidating the VR&E Quality Review Team at the C&P Star Team location. (Near-Term to Mid-Term)	x	x	
O-3.3	Provide contractor support services for VR&E CO. Contractor support services should be prioritized for management support; operational, process, and requirements analysis; project management and integration. (Near-Term; Priority)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

O-4	Workforce Management			
O-4.1	Reevaluate and update the March 2003 VR&E Workforce and Succession Plan with concrete actions and milestones to mitigate the risks cited in the plan. (Mid-Term)		x	
O-4.2	Develop and implement workforce productivity and staffing analyses to develop a set of analytical tools for estimating future workload, task, and labor hour requirements, staff sizing, and skill mix. (See Recommendation on Program Analysis and Evaluation.) (Mid-Term to Long-Term)		x	x
O-4.3	Create Assistant VR&E Officer positions and a systematic and centrally-managed selection and training program for personnel to fill these positions. (Near-Term)	x		
O-4.4	Remove the freeze on hiring to fill all VR&E positions; change VBA policies so as not to constrain hiring for VR&E positions to local RO FTE ceilings. (Near-Term; Priority)	x		
O-4.5	Provide VR&E with additional and temporary FTE positions to facilitate early hiring and training to mitigate the service impacts of anticipated personnel attrition. (Near-Term and Mid-Term)	x	x	
O-4.6	Create new staff positions and add staff for an Employment Readiness Specialist (56 FTE) and a Marketing and Placement Specialist (56 FTE) to facilitate implementation of the five-track employment service delivery system. (See System in Chapter 4.) (Near-Term to Long-Term)	x	x	x
O-4.7	Transfer VR&E's 45 FTE Employment Specialist staff positions back to counseling positions. (Near-Term to Long Term)	x	x	x
O-4.8	Create a new Independent Living Specialist position. (See Job Description in Appendix 12.) (Near-Term)	x		
O-4.9	Increase current field staffing levels to provide dedicated FTE to plan and implement VA's responsibilities in DTAP and execute a consistent, national DTAP program at all DoD installations and Military Treatment Facilities. (Mid-Term)		x	
O-4.10	Create and staff a new VR&E position at the RO for a contract/purchasing specialist and implement a training program for these staff in coordination with the VBA CFO and contract management staff. (See Recommendation on Workforce Management.) (Mid-Term)		x	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

O-4.11	Relocate the VR&E Central Office staff that was out-based at the Regional Offices back to Central Office to improve staff effectiveness. (See Recommendation on CO Staffing.) (Near-Term and Mid-Term)	x	x	
O-4.12	Consolidate the VR&E CO Quality Assurance (QA) staff and increase the size of the QA staff. (See Recommendation on Performance Measures and Quality Review.) (Near-Term)	x		
WORK PROCESS RECOMMENDATIONS				
WP-1	Workload Management			
WP-1.1	Implement a VR&E Service CO process for visibility and management of the national VR&E workload to include an inventory management system and setting of consistent, nationwide priorities and strategies for workload management. (Near-Term to Mid-Term)	x	x	
WP-1.2	Streamline and standardize the scope and content for counselor case file documentation to include the use of the Needs Assessment Inventory. (Near-Term to Mid-Term)	x	x	
WP-1.3	Provide for electronic transcription capabilities to facilitate more efficient use of available counselor resources through voice activated software and/or the use of transcription services. (Near-Term)	x		
WP-1.4	Develop national and local RO forecasts of Chapter 31 veterans exiting rehabilitation and entering job ready status in FY 2004 (and beyond as necessary) and develop interim strategies and plans to more effectively manage this population of veterans until the Five Track Employment Process is fully implemented. (Near-Term)	x		
WP-1.5	Initiate a VR&E Service CO led nationwide project using contractors to follow-up with Chapter 31 veterans in interrupted or discontinued status and for tracking of veteran employment status. (Near-Term to Mid-Term)	x	x	

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

WP-2 Contract Services				
WP-2.1	Continue to use contract services to supplement the VR&E workforce in providing counseling, employment, and rehabilitation services. (Near-Term to Long-Term)	x	x	x
WP-2.2	Revise the VBA Office of Field Operations resource allocation model to base RO funding for contract services on local estimates of the volume and types of services and the actual costs of services rather than the RO's percentage of the national workload. (Near-Term; Priority)	x		
WP-2.3	Revise the current VR&E Services National Contract Statement of Work to provide definitions of the specific content of each service to be provided; standardize paper and electronic formats for submission of all contractor-developed evaluations, plans, case narratives, counseling or other requirements; establish a performance management and quality review process; and establish a VR&E contract service provider training and accreditation program. (Near-Term)	x		
WP-2.4	Develop a contract management training program for all VR&E Officers, supervisors, CO staff, and those VR&E field staff with direct responsibility for contract administration and supervision of contract services. (Near-Term)	x		
WP-2.5	Create and staff a new VR&E position at the RO for a contract/purchasing specialist and implement a training program for these staff in coordination with the VBA CFO and contract management staff. (Mid-Term)		x	
WP-3 Case Management and Specialization				
WP-3.1	Change the current VR&E case management model to a model based on specialization of work processes and the workforce. (Mid-Term)		x	
WP-3.2	Provide RO VR&E staffs maximum flexibility to specialize their staff resources. (Near-Term)	x		
WP-4 Priority Service at VHA				
WP-4.1	Implement a system within VHA and VBA to provide priority health care services to Chapter 31 program participants. (Near-Term)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

		Implementation		
		Near	Mid	Long
WP-5	Functional Capacity Evaluation (FCE)			
WP-5.1	Implement Functional Capacity Evaluation as a key process in a strategic redesign of the 21st Century Veteran Counseling, Employment, and Rehabilitation Program. (Long-Term)			x
WP-5.2	Design and implement pilot FCE projects as a first step toward implementation; consider co-locating this project office with the VBA C&P Exam Project at Nashville to leverage VBA resources program and technical capabilities. (Near-Term; Priority)	x		
WP-6	Disability Transition Assistance Program (DTAP)			
WP-6.1	Assign primary responsibility for the planning and administration of VA's responsibilities in the DTAP program within VBA to the VR&E Service and designate a DTAP Manager. (Near-Term)	x		
WP-6.2	Set goals and measures of success to improve the administration of VA's responsibilities in TAP and DTAP. (Near-Term)	x		
WP-6.3	Develop standardized information briefings and materials to ensure service members are provided comprehensive counseling that is consistently delivered. (Mid-Term)		x	
WP-6.4	Establish a program with the DoD to deliver DTAP services at every Military Treatment Facility using VBA personnel or trained contractors. (Mid-Term to Long-Term)		x	x
WP-6.5	Provide dedicated funding to support the administration of DTAP. (Near-Term)	x		
INTEGRATING CAPACITY RECOMMENDATIONS				
IC-1	Regulations and Manuals			
IC-1.1	Work with General Counsel to publish updated Chapter 31 regulations consistent with the new Five-Track Employment Process and the integrated service delivery system within 9 months of the date of the VR&E Task Force Report. (Mid-Term)		x	
IC-1.2	Implement a change management process to control and integrate the various VR&E Service CO and field initiatives now underway to make changes in the process, regulations, manuals, policies, and technology functionality for administering the VR&E Program. (Near-Term to Mid-Term)	x	x	
IC-1.3	Impose communications discipline with the VR&E Service CO for timely response to field requests for guidance. (Near-Term)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

IC-1.4	Update the VR&E Program baseline of regulations, manuals, and policies through an integrated change control process to be consistent with the new five-track service delivery system and the recommendations of the Task Force. (Mid-Term to Long-Term)		x	x
IC-2	Performance Measures			
IC-2.1	Design and implement a new VR&E process and outcomes performance measurement system for the five new VR&E service delivery tracks; base the outcomes performance measures on the concept of "Maximum Rehabilitation Gain;" coordinate with and use the expertise of the Department of Veterans Affairs Program Evaluation Service in the design, testing, and implementation of this new system; also seek the technical assistance of CARF in this effort. (Mid-Term)		x	
IC-2.2	Initiate a study of other federal, state, and private sector vocational rehabilitation service organizations to benchmark process and outcomes performance measures and quality assurance processes; coordinate with and use the expertise of the Department of Veterans Affairs Program Evaluation Service in this study and also seek the technical assistance of CARF in this effort. (Mid-Term)		x	
IC-2.3	Change the current methods used to measure VR&E claim timeliness so that the "timeliness clock" starts when the VR&E Division gets the Form 1900 application and a service-connected disability rating from the Veterans Service Center. (Near-Term; Priority)	x		
IC-2.4	Reevaluate the rules for calculating the current timeliness measures for cases that are transferred to another RO. (Mid-Term; Priority)		x	
IC-2.5	Implement a new C&P performance measure for Veterans Service Center Memo Rating timeliness; incorporate this measure in the performance evaluation criteria for Service Center Managers. (Near-Term; Priority)	x		
IC-2.6	Remove the number of discontinued cases from calculation of the VR&E rehabilitation rate (Near-Term; Priority)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

IC-2.7	Do not count Independent Living cases in the current formula for computing the rehabilitation rate; create a new performance measurement system for IL. (Near-Term)	x		
IC-2.8	Change the final measurement of employment success from 60 days to 90 days, with case closure and follow-up at 120 days and 180 days by Central Office, RO, or Quality Review staff. (Mid-Term)		x	
IC-2.9	Implement a new VHA timeliness performance measure for Form 8861 requests from VR&E for services to Chapter 31 veterans. (Near-Term)	x		
IC-3	Quality Review Process			
IC-3.1	Redesign the Quality Assurance Review process to reflect the new five-track VR&E service delivery system. (Mid-Term to Long-Term)		x	x
IC-3.2	Seek technical assistance from CARF to facilitate improvements to the Quality Review process. (Near-Term)	x		
IC-3.3	Conduct an independent review in 6 months of the VR&E Quality Review Process now being implemented. (Mid-Term)		x	
IC-4	Information and Systems Technology			
IC-4.1	Remove the VBA policy constraints impacting VR&E productivity and service delivery to install T-1 lines for all VR&E out-based locations. (Near-Term; Priority)	x		
IC-4.2	Hire a systems integration contractor to provide sustaining support to the VR&E Service for process and requirements analysis, technology assessments and recommendations, assistive technology consultation, and project management. (Near-Term; Priority)	x		
IC-4.3	Elevate the VA funding priority of CWINRS, accelerate the development and production incorporation of financial and process enhancements, and expand the scope of the current Phase II CWINRS Functional Requirements Analysis. (Near-Term; Priority)	x		
IC-4.4	Develop and conduct an initial and recurring training course on CWINRS report functionality and analysis for all VR&E field and Central Office staff. (Near-Term; Priority)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

		Near	Mid	Long
IC-4.5	Provide VR&E service contractors training on the use of CWINRS and access to CWINRS for data entry and reports. (Near-Term; Priority)	x		
IC-4.6	Fully use CWINRS capabilities for Chapter 36; provide nationwide tracking of Chapter 36 participants and access to case information. (Near-Term)	x		
IC-4.7	Create a systems capability for VR&E to request and track VHA appointments and services for Chapter 31 veterans. This effort should be linked, establishing clear priority in VHA for Chapter 31 veterans who need services for timely employment readiness and to complete rehabilitation plans. (Near-Term; Priority)	x		
IC-4.8	Leverage IT capabilities to more efficiently administer Chapter 31 training and education programs and certifications and to track the progress of veterans in training and education programs. (Mid-Term)		x	
IC-4.9	Partner with the VA Learning University to develop a 21st Century online higher education program for Chapter 31 veterans and VR&E staff. (Long-Term)			x
IC-4.10	Initiate a long-term project to develop the functional requirements for a 21st Century VBA counseling, employment, and rehabilitation program information system capability. (Long-Term)			x
IC-5	Training			
IC-5.1	Establish a VR&E Training and Education Office to be located at the VR&E Central Office and provide dedicated staff. (Near-Term)	x		
IC-5.2	Accelerate the VR&E Training Needs Assessment planned for FY 2005 to begin in FY 2004. (Near-Term)	x		
IC-5.3	Develop and conduct formal initial training courses and a recurring training program with the VBA Training Academy using community as well as private sector and university-based experts and advocates in the field of disability, rehabilitation, and employment of persons with disabilities. (Near-Term)	x		

Priority recommendations are highlighted in green.

P = Program, O = Organizational, WP = Work Process, IC = Integrating Capacities

Implementation

Near Mid Long

IC-5.4	Create a program of professional continuing education and initiate a technical assistance relationship with the Commission on Accreditation of Rehabilitation Facilities. (Near-Term to Mid-Term)	x	x	
IC-6	Resource Management			
IC-6.1	Develop an improved VR&E Resource Requirements Model. (Mid-Term to Long-Term)		x	x
IC-6.2	Modify the VR&E Resource Allocation Model to base contract funding on the forecasted estimate of the volume and types of services and the actual unit cost history for those services at each RO. (Mid-Term to Long-Term)		x	x
IC-6.3	Provide the VR&E Service Director some measure of control over the allocation of resources. (Near-Term)	x		
IC-6.4	Restrict the ability of RO Directors to redirect VR&E funds. (Near-Term)	x		
IC-7	Program Analysis and Evaluation (PA&E)			
IC-7.1	Defer the VA Program Evaluation of the VR&E Program scheduled for FY 2005; first invest in rebuilding the VR&E Service data and analysis (strategic and operational) capabilities. (Long-Term)			x
IC-7.2	Develop and fund a short and long-term research and study agenda focused on VR&E served veterans and program outcomes. (Long-Term)			x
IC-7.3	Develop and fund efforts to develop a set of evidenced based practices to guide development and implementation of VR&E policies, procedures, and policies. (Near-Term)	x		

Appendix 17 Acronyms

ADA: Americans with Disabilities Act	EMPS: Employment Marketing and Placement Specialist
AJB: America's Job Bank	ERS: Employment Readiness Specialist
ATN: America's Training Network	ES: Employment Service
BDD: Benefits Delivery at Discharge	FTE: Full Time Equivalent
BDN: Benefits Delivery Network	FY: Fiscal Year
BVA: Board of Veterans' Appeals	GAO: General Accounting Office
C&P: Compensation and Pension Service	GOE: General Operating Expenses
CAP: Computer/Electronic Accommodations Program (DoD)	GPRA: Government Performance and Results Act
CAVC: Court of Appeals for Veterans Claims	HIPAA: Health Insurance Portability and Accountability Act, 1996
CFO: Chief Financial Officer	ICF: International Classification of Functioning, Disability, and Health
CIL: Centers for Independent Living	IEAP: Individualized Employment Assistance Plan
COIN: Computer Output Identification Number	IEEP: Individualized Extended Evaluation Plan
COVA: Court of Veterans Appeals	IHL: Institute of Higher Learning
CPS: Current Population Survey	IILP: Individualized Independent Living Program
CSAVR: Council of State Administrators of Vocational Rehabilitation	IL: Independent Living
CWINRS: An automated case management system	ISD: Instructional Systems Development
CWT: Compensated Work Therapy	IU: Individual Unemployability
DAS: Deputy Assistant Secretary	IWRP: Individualized Written Rehabilitation Plan
DoD: Department of Defense	JAN: Job Accommodation Network
DOL: Department of Labor	JTPA: Job Training Partnership Act
DOOR: Distribution of Operational Resources	KSA: Knowledge, Skills, and Abilities
DTAP: Disabled Transition Assistance Program	LVER: Local Veterans' Employment Representative
DV: Disabled Veterans	MOU: Memorandum of Understanding
DVOP: Disabled Veterans' Outreach Program	

NEPEC: Northeast Program Evaluation Center	TWWIIA: Ticket to Work and Work Incentives Improvement Act
NVTI: National Veterans Training Institute (DoL)	USC: United States Code
ODEP: Office of Disability Employment Policy (DOL)	USERRA: Uniformed Services Employment and Reemployment Rights Act
OFO: Office of Field Operations	VA: Department of Veterans Affairs
OJT: On the job training	VACO: VA Central Office
OPM: Office of Personnel Management	VALU: VA Learning University
PA&I: Program Analysis and Integrity	VAMC: VA Medical Center
PM&R: Physical Medicine and Rehabilitation	VARO: VA Regional Office
PTSD: Post-Traumatic Stress Disorder	VETS: Veterans' Employment and Training Service (DOL)
PY: Program Year	VHA: Veterans Health Administration
RAE: Rapid Access Employment	VMET: Verification of Military Experience and Training
RNI: Rehabilitation Needs Inventory	VR&C: Vocational Rehabilitation and Counseling (Pre-FY 2000)
RO: Regional Office	VR&E: Vocational Rehabilitation and Employment (Post-FY 2000)
ROI: Return on Investment	VRS: Vocational Rehabilitation Specialist
RSA: Rehabilitation Services Administration (Education)	VSO: Veterans Service Organizations
SBA: Small Business Administration	WHO: World Health Organization
SBDC: Small Business Development Center	WIA: Workforce Investment Act
SC: Service-Connected	WINRS: Automated case management system.
SCD: Service-Connected Disability	
SCI: Spinal Cord Injury	
SCORE: Service Corps of Retired Executives	
SMC: Special Monthly Compensation	
SSA: Social Security Administration	
SSI: Supplemental Security Income	
SSN: Social Security Number	
SVRA: State Vocational Rehabilitation Agency	
TAP: Transition Assistance Program	
TBI: Traumatic Brain Injury	

Appendix 18

Glossary

AMERICA'S CAREER INFORMATION NETWORK (ACINet): Website with wages, employment trends, occupational requirements, state-by-state labor market conditions, millions of employer contacts nationwide, and the most extensive career resource library online. It is funded by the Department of Labor and is a component of the agency's CareerOneStop.

AMERICA'S JOB BANK (AJB): The largest and one of the busiest job banks on the Internet. Job seekers can post their resume where thousands of employers search every day, search 1 million job postings, and find their dream job. Employers can post job listings in the nation's largest online labor exchange, create customized job orders, and search resumes automatically to find the right people fast. It is funded by the Department of Labor and a component of the CareerOneStop. America's Job Bank (AJB) is the largest and one of the busiest job banks on the Internet. VR&E uses America's Job Bank database and design for a similar Website for veterans.

AMERICA'S SERVICE LOCATOR (ASL): The newest part of America's CareerOneStop funded by the Department of Labor. Employers and jobseekers can find the services they need at a convenient Career One-Stop Center by entering their zip codes.

APPLICANT: Status of a veteran whose application, VA Form 28-1900, has been received and is being reviewed by VR&E to see if he or she is eligible for Chapter 31 services.

BALANCED SCORECARD: A measurement system used by the Veterans Benefits Administration. It consists of five core performance measures that are used throughout the organization.

BENEFITS DELIVERY NETWORK (BDN): The major computer system used by the Department of Veterans Affairs to process claims, records and fiscal awards. This data base is the source of the veteran's master records. Also, know as the TARGET system (a carry over name from the original installation in the late 1970s).

BUSINESS LINE: In VBA, all processes and functions that directly relate to or support one of the major benefit programs as outlined in Title 38 USC. VBA has six business lines: Compensation, Pension, Education, Loan Guaranty, Vocational Rehabilitation and Employment, and Insurance.

CAREER ONE STOP (formerly known as America's Career Kit): A suite of electronic tools including: America's Job Bank, America's Career InfoNet, and America's Service Locator. The tools were developed and are maintained through the leadership of the U.S. Department of Labor and in partnership with state workforce agencies, local workforce service delivery providers and education and training institutions and private sector organizations.

CASE MANAGER: The employee responsible for oversight of all services provided to a participant. The Case Manager provides direct services in those areas he or she has expertise; others may provide supportive or ancillary services.

CHAPTER 18: A Title 38 USC Program to provide vocational training and rehabilitation for Vietnam veterans' children with spina bifida and other covered birth defects.

CHAPTER 31: A Title 38 USC Program to provide for all services and assistance to enable veterans with service-connected disabilities to achieve maximum independence in daily living, and, to the extent feasible, to become employable and to obtain and maintain suitable employment.

CHAPTER 35: A Title 38 USC Program to provide special restorative training to spouses and children who might otherwise qualify for Dependents Educational Assistance in Chapter 31.

CHAPTER 36: A Title 38 Program to provide Educational and Vocational Counseling to honorably discharged veterans within 180 days of planned discharge or 1 year after discharge or to others eligible to receive other VA programs.

CLAIM: Also called application. A communication of any kind from a veteran or his or her representative requesting a determination of entitlement or evidencing a belief in entitlement to a specific benefit.

COMPUTER OUTPUT IDENTIFICATION NUMBER (COIN): A code number that identifies specific collections of management data.

COMBINED DEGREE: The combined degree of disability is expressed as a percentage (from zero to 100 in increments of 10) and represents the overall disabling effect of service-connected disabilities on a veteran.

CONTRACT SERVICE PROVIDER: A contractor hired to provide specific services.

CORPORATE WINRS (C-WINRS): An automated Case Management system used by VR&E staff to track and manage caseloads and program costs.

DEPARTMENT OF DEFENSE (DoD): The federal agency responsible for the management of members of the United States Armed Forces, to include the Army, Navy, Air Force and Marines.

DEPARTMENT OF LABOR (DOL): A federal agency that is the funding source for the Veterans Employment and Training Service (VETS). State Employment Services' veterans programs include the Disabled Veterans' Outreach and Local Veterans' Employment Representative programs.

DEPENDENTS: Qualifying dependents for VA benefit purposes are a veteran's spouse and child (natural child, adopted child, or stepchild). A veteran's mother or father may also be considered a dependent generally if there is financial need and he or she is otherwise entitled.

DISABILITY COMPENSATION: A monetary benefit paid to veterans for service-connected disability.

DISABLED TRANSITION ASSISTANCE PROGRAM (DTAP): A workshop implemented jointly by DoD, DOL, and VA, along with representatives of Veterans Service Organizations, to provide benefit information and assistance to disabled service members who are transitioning from military service to civilian life. Each agency's responsibilities are outlined in a memorandum of understanding.

DISABLED VETERANS' OUTREACH PROGRAM (DVOP): Program funded by the Department of Labor that provides employment and employability development services to disabled veterans and to economically disadvantaged veterans through a system of state-employed specialists. DVOP specialists also inform service members about to separate from active duty through the Transition Assistance and the Disabled Transition Assistance Programs.

DISALLOWED (DISALLOWANCE): The process or status of a veteran or a dependent who is found not eligible or not entitled for the specific benefits for which he or she applied.

DISCONTINUED: Status of a case that does not result in successful completion of either an evaluation or a planned set of services.

ELIGIBILITY DETERMINATIONS: A legal decision, which may be made by an Adjudicator or VR&E staff member, indicating that a veteran meets the requirements for Chapter 31 benefits.

EMPLOYMENT HANDICAP: An impairment of the veteran's ability to prepare for, obtain, or retain employment consistent with the veteran's abilities, aptitudes and interests.

EMPLOYMENT SERVICES: A series of services to help the Chapter 31 participant find suitable employment. These services include resume preparation, interviewing assistance, assistive technology as needed, labor market information and self-directed job search via networking and electronic databases.

EMPLOYMENT SPECIALIST: A VR&E employee whose duties include providing job ready services and working with employers to help veterans with service-connected disabilities obtain suitable jobs.

ENTITLED: A term applied to a veteran who was found entitled for Chapter 31 benefits based on a service-connected disability and an employment handicap.

EVALUATION AND PLANNING: The stage in the vocational rehabilitation process in which entitlement to services is determined. The veteran's need for specific rehabilitation services is evaluated, and if entitled, the veteran and the Counselor develop a plan of services that will be necessary to obtain and maintain suitable employment.

EVALUATION FOR ENTITLEMENT FOR A PROGRAM OF REHABILITATION SERVICES: The process used to determine degree of service-connected veteran's employment handicap, the course of rehabilitation, and the feasibility in obtaining a vocational goal.

EXTENDED EVALUTATION: Status of a veteran with a serious employment handicap to allow more time to determine the current feasibility of the veteran's achieving a vocational goal when this decision reasonably cannot be made on the basis of information developed during the initial evaluation. See also INDIVIDUALIZED EXTENDED EVALUATION PLAN.

FISCAL YEAR: A 12-month period at the end of which all accounts are completed in order to furnish a statement of financial condition. The federal government's Fiscal Year begins on October 1 and ends on September 30.

FUNCTIONAL CAPACITY EVALUATION (FCE): Technology that provides a systematic method of measuring a person's ability to perform meaningful tasks on a safe and reliable basis.

INDEPENDENT LIVING (IL): A program tailored to the Chapter 31 veteran whose service-connected disability or disabilities and overall condition make employment goals infeasible at that time. The program might incorporate such devices and services as assistive technology, IL skills training, or connection to community-based support services to improve the quality of life with the hope of employment later. An IL determination is made by VR&E counselor who may use personal interviews, consultation with other professionals who may be providing medical or support services, feedback from family members, and additional assessment if necessary to decide the services needed.

INDEPENDENT LIVING STATUS: The status when the focus is to help the veteran gain maximum independence in daily living. By definition, all veterans entering this status must have been found to possess a Serious Employment Handicap and the acquisition of a vocational goal has been determined to be not reasonably feasible at that time.

INDIVIDUALIZED EMPLOYMENT ASSISTANCE PLAN (IEAP): A plan written by the VR&E Case Manager and the veteran when the veteran has the skills making them employable and is, at a minimum, 60 days from job seeking. The plan takes into account the most current and projected labor market information and defines the vocational goal. The plan can include acquiring tools the veteran may need in his or her job search, information about employer incentives, or identification of the need for short term or supplemental training.

INDIVIDUALIZED EXTENDED EVALUATION PLAN (IEEP): A plan written with a veteran based upon current evidence of record including psychometrics, medical reports, and socioeconomic data. Employment or employment-based training may not be currently feasible.

INDIVIDUALIZED INDEPENDENT LIVING PROGRAM (IILP): A rehabilitation plan for participants for whom regular vocational training or employment is not considered to be currently feasible. This plan emphasizes tasks and functions that would increase the independence of the veteran for normal daily living skills.

INDIVIDUALIZED WRITTEN REHABILITATION PLAN (IWRP): This plan outlines the rehabilitation services including, if appropriate, the participant's training needs in order to become employable. The plan takes into account the veteran's transferable skills, limitations due to the disabilities, test results, work experience, education, military background and interests. Analysis of the data and the most current and projected labor market information form the basis of the plan.

INDIVIDUAL UNEMPLOYABILITY (IU): Compensation is paid at the 100 percent rate for veterans who are determined to be unemployable as a result of their service-connected disability.

INTERNATIONAL CLASSIFICATION OF FUNCTIONING, DISABILITY, AND HEALTH (ICF): An international classification protocol announced by the World Health Organization in 2001. It describes and measures health and disability by focusing on how people live with their health conditions and how these individuals can achieve productive, fulfilling lives.

INITIAL EVALUATION: The stage in the vocational rehabilitation process in which entitlement to services is assessed.

INSTITUTE OF HIGHER LEARNING (IHL): Usually a university, college or community college. Institutional training also includes unpaid or nominally paid OJT or work experience in a Federal, State, local, or Indian tribal government agency

INTERRUPTED STATUS: A temporary break in the training program during which a specific re-entrance date is scheduled or there exists a clear indication that the participant will re-enter training.

JOB READY: Status of veterans who are determined to be ready, willing and able to participate in job developmental activities.

LOCAL VETERANS' EMPLOYMENT REPRESENTATIVE (LVER): An employee of the State Employment Service who provides job development, placement, and support services to veterans.

MEMORANDUM OF UNDERSTANDING (MOU): A written statement outlining the terms of an agreement between two or more organizations.

MEDICAL FEASIBILITY: The physical and medical capacity to initiate and pursue a planned program of training or employment services.

MEDICAL REHABILITATION: Professional services and treatment programs (other than those types of vocational rehabilitation services provided under Chapter 31) as are necessary to restore, to the maximum extent possible, the physical, mental and psychological functioning of an ill or disabled person.

MEMO RATING: A preliminary disability rating decision completed by the Veterans Benefits Administration based upon examination of available medical evidence. The memo rating allows VR&E to begin working with the veteran before a permanent rating decision has been rendered.

ONLINE EMPLOYMENT RESOURCES: Employment services for veterans such as resume preparation and job searches that are on the Internet. These include the VR&E Webpage <http://www.vba.va.gov/bln/vre/vec.htm>, VR&E's Job Bank for veteran job seekers and employees <http://dva.jobsearch.org>, which uses the same database as DOL's America's Job Bank. <http://www.ajb.org>. DOL also maintains eVets <http://www.dol.gov/elaws/evets.htm>, a transition site for veterans.

ON-THE-JOB-TRAINING (OJT): A mode of training where the participant learns an occupation while working in a specific job as a trainee. Commonly lasts from a minimum of six months to a maximum of 24 months. A specific training outline is prepared before training to ensure that the participant is working towards the full skills of a journeyman in that occupation.

ORIGINAL CLAIM: A claimant's first application for a particular benefit.

ORIGINAL PLAN: An original Vocational Rehabilitation Plan.

OUTBASED PERSONNEL: VR&E staff in locations other than VA Central Office or in VA Regional Offices. Out-based personnel may be located in government buildings or in leased space.

OUTCOME MEASURE: An indicator used to gauge whether or not a program is achieving its intended results.

OUTCOME: Accomplishment of program objective attributable to program outputs.

PEACETIME VETERANS: Those veterans who served during a period not statutorily defined as a period of war.

PRISONER OF WAR (POW): Veterans who were forcibly detained (confined) by an enemy or hostile force while serving in active military status.

RANGE OF DISABILITIES: Extent of disability expressed as a percentage from zero percent (for conditions that exist but are not disabling to a compensable degree) to 100 percent, in increments of 10 percent. A disability is evaluated according to the VA Schedule for Rating Disabilities.

RATING SCHEDULE: Schedule for evaluating a disability for service-connected compensation. It is found in Title 38, Code of Federal Regulations, Part 4.

RE-ENTRANCE INTO TRAINING: An authorized resumption of training following a period of interruption, discontinuance or rehabilitation.

RE-EVALUATION COUNSELING: The process for a veteran who was approved for vocational rehabilitation but for a specific reason, has been asked to return to the counseling relationship for further services to either modify the plan or change the overall vocational goal.

REGIONAL OFFICE (RO): The Veteran Benefits Administration has 56 regional offices, at least one in each state (except Wyoming).

REHABILITATED: Status of a participant who has maintained suitable employment for a period of at least 60 days after achieving their vocational rehabilitation plan goals or the status of a veteran who was assessed 60 days after achieving their independent living rehabilitation plan goals.

REHABILITATION: A systematic process by means to which persons with physical or mental handicaps are provided the medical, social, education and vocational services they need to attain independence in the community and/or suitable gainful employment.

REHABILITATION COUNSELOR: See Vocational Rehabilitation Counselor (VRC).

REHABILITATION SERVICES: The stage in the vocational rehabilitation process in which veterans in training may receive a number of available benefits such as medical services, training opportunities, and counseling services.

REHABILITATION TO THE POINT OF EMPLOYABILITY STATUS: Status of participants who are receiving direct services such as training, counseling, medical assistance, mental health support, materials and supplies, and self-employment guidance.

REHABILITATION SERVICES ADMINISTRATION (RSA): The agency in the Department of Education that administers and oversees the State Vocational Rehabilitation Program.

SERIOUS EMPLOYMENT HANDICAP: A significant impairment, caused in part by a service-connected disability, in the veteran's ability to prepare for, obtain, or retain employment consistent with his or her abilities, aptitudes, and interests.

SERVICE-CONNECTED DISABILITY: A disabling condition that has resulted or was aggravated from an injury or illness while the veteran was serving on active duty in the military.

SPECIAL ADAPTIVE EQUIPMENT: Aids and devices, such as special tape recorders, listening devices, adaptive hardware and software, that enable a person to undertake and pursue employment and improve one's quality of life.

SPECIAL EMPLOYER INCENTIVE: This special incentive program pays employers for additional expenses which they incur when either providing direct employment or training Chapter 31 veterans in an OJT position.

SPECIAL RESTORATIVE TRAINING: Special training assistance above what is normally required. Usually dictated because of a severe disability or special problems caused by a physical or mental disability.

SPECIALIZED VOCATIONAL TRAINING: A special course of vocational training for an eligible dependent who requires this mode of training because of a mental or physical handicap.

SUBSISTENCE ALLOWANCE: A monthly payment to a disabled veteran while pursuing a program of vocational rehabilitation. The amount of allowance is based upon the veteran's type of training, amount of training time, and number of dependents.

SUITABLE EMPLOYMENT: A job that is consistent with the veteran's interests, aptitudes and abilities, and compatible with the limitations of any disabling condition present.

TRANSITION ASSISTANCE PROGRAM (TAP): A workshop with benefit information and resources for service members who are separating from the military and transitioning to civilian life. It is authorized by legislation and jointly implemented by DoD, DOL, and VA as agreed upon in a memorandum of understanding.

TITLE 38 UNITED STATES CODE: The Code of Federal Regulations that pertains to Veterans Benefits.

VETERANS EDUCATIONAL ASSISTANCE PROGRAM (VEAP): An educational program administered by the VA, also known as Chapter 32.

VETERAN: A person who served in the active military services for a time period prescribed by Congress and who has been discharged or released under conditions other than dishonorable.

VETERANS BENEFITS ADMINISTRATION (VBA): An organization in the Department of Veterans Affairs responsible for administering a variety of benefit programs. The programs include compensation, pension, vocational rehabilitation and employment, education, home loan guaranty, and life insurance.

VETERANS' EMPLOYMENT AND TRAINING SERVICE (VETS): DOL agency that administers and/or funds a number of employment and training programs, including job search and job placement services.

VETERANS SERVICE CENTER: A division within the VA Regional Office that handles compensation and pension claims. This office also provides assistance to veterans and their dependents by providing general information about VA benefits and assists them in filing applications.

VETERANS SERVICE ORGANIZATIONS (VSO): Organizations chartered by Congress or state governments to assist veterans in receiving benefits. These organizations provide support and advocacy for veterans.

VOCATIONAL REHABILITATION AND EMPLOYMENT OFFICER: VR&E official who supervises the VR&E staff within a state, a geographic area within a state or sometimes a region that may include more than one state. The VR&E Officer is located at a Regional Office and is responsible for oversight of program services being delivered.

VOCATIONAL REHABILITATION COUNSELOR (VRC): VR&E employee who provides the full range of rehabilitation services, encompassing responsibilities, which in the past were performed by the Counseling Psychologists and the Vocational Rehabilitation Specialist.

VOCATIONAL REHABILITATION SPECIALIST (VRS): VR&E employee who has the primary responsibility of serving as the Case Manager for a Chapter 31 participant. The VRS facilitates the veteran's process to becoming employable.

WARTIME VETERAN: Those veterans who served during a period statutorily defined periods of war such as World War I, World War II, Korea, Vietnam, and Persian Gulf.

Appendix 19 Bibliography

Task Force members or staff reviewed the following reports or other documents that have made recommendations or comments on the VR&E program or related programs in the Department of Veterans Affairs, Department of Labor, and other agencies. This list also includes the VR&E legislation.

The White House

Budget and Performance Integration: Common Performance Measures, Office of Management and Budget.

<http://www.whitehouse.gov/omb/budintegration/common.html>

President's Task Force to Improve Health Care Delivery For Our Nation's Veterans, May 2003.

New Freedom Initiative: Compilation of Individual Federal Agency Reports of Action to Eliminate Barriers and Promote Community Integration, Report to the President on Executive Order 13217 <http://www.hhs.gov/newfreedom/final/>

New Freedom Executive Order 13217: Community-based Alternatives for Individuals with Disabilities <http://www.whitehouse.gov/news/releases/2001/06/20010619.html>

President's Management Agenda

http://www.whitehouse.gov/omb/budintegration/pma_index.html

Congress

Congressional Commission on Service Members and Veterans Transition Assistance, January 1999, Honorable Anthony J. Principi, Commission Chairman.

CRS Report for Congress – Assistive Technology Act: Programs and Funding, Congressional Research Service, Sidath Viranga Panangala, Order Code RS21385, Updated June 10, 2003.

CRS Report for Congress – Rehabilitation Act: Programs and Funding, Sidath Viranga Panangala, Order Code RL31378, Updated April 28, 2003.

Transcription, Oversight of VA's Vocational Rehabilitation, House of Representatives, Subcommittee on Benefits, Committee on Veterans' Affairs, Washington, DC, February 4, 1998.

http://commdocs.house.gov/committees/vets/hvr020498.000/hvr020498_0.HTM

38 USC Chapter 31 – Training and Rehabilitation for Veterans with Service-Connected Disabilities. <http://uscode.house.gov/download/38C31.doc>

Veterans Service Organizations (VSO)

The Independent Budget for Fiscal Year 2005: A Comprehensive Budget and Policy Document Created by Veterans for Veterans, prepared by AMVETS, Disabled American Veterans, Paralyzed Veterans of America, Veterans of Foreign Wars of the United States.

The Independent Budget for Fiscal Year 2004: A Comprehensive Budget and Policy Document Created by Veterans for Veterans, prepared by AMVETS, Disabled American Veterans, Paralyzed Veterans of America, Veterans of Foreign Wars of the United States.

General Accounting Office (GAO)

GAO, 2003. *VA Benefits: Fundamental Changes to VA's Disability Criteria Need Careful Consideration*, Testimony Before the Committee on Veterans' Affairs, U.S. Senate, GAO-03-1172T, Sept. 3, 2003.

GAO, 2003. *Review of Veterans' Preference and the "Rule of 3,"* GAO-03-966R, August 3, 2003.

GAO 2003. *Small Business: The National Veterans Business Development Corporation's Progress in Providing Small Business Assistance to Veterans*, GAO-03-434, April 2003.

GAO, 2002. *Business Tax Incentives: Incentives to Employ Workers with Disabilities Receive Limited Use and Have Uncertain Impact*, GAO-03-39, December 2002.

GAO, 2001. *Veterans Affairs: Status of Achieving Key Outcomes and Addressing Major Management Challenges*, GAO-01-752.

GAO, 2001. *Veterans' Employment and Training Service: Further Changes Needed to Strengthen Its Performance Measurement System*, GAO-01-757T.

GAO, 2001. *Veterans' Employment and Training Service: Proposed Performance Measurement System Improved, but Further Changes Needed*, GAO-01-580.

GAO, 2000. *Veterans' Employment and Training Service: Better Planning Needed to Address Future Needs*, GAO/T-HEHS-00-206.

GAO, 1998. *Vocational Rehabilitation: Opportunities to Improve Program Effectiveness*, GAO/T-HEHS-98-87.

GAO, 1997. *Veterans' Employment and Training Service: Focusing on Program Results to Improve Agency Performance*, GAO/T-HEHS-97-129.

GAO, 1997. *The Results Act: Observations on VA's August 1997 Draft Strategic Plan*, GAO/T-HEHS-97-215.

GAO, 1997. *Veterans Benefits Administration: Focusing on Results in Vocational Rehabilitation and Education Programs*, GAO/T-HEHS-97-148.

GAO, 1997. *VA Disability Compensation: Comparison of VA Benefits with Those of Workers' Compensation Programs*, GAO/HEHS-97-5.

GAO, 1997. *VA Disability Compensation: Disability Ratings may not Reflect Veterans' Economic Losses*, GAO/HEHS-97-9.

GAO, 1996. *Vocational Rehabilitation: VA Continues to Place Few Disabled Veterans in Jobs*, GAO/HEHS-96-155.

GAO, 1996. *People with Disabilities: Federal Programs Could Work Together More Efficiently to Promote Employment*, Letter Report, 9/3/96, GAO/HEHS-96-126.

GAO, 1992. *Vocational Rehabilitation: VA Needs to Emphasize Serving Veterans with Serious Employment Handicaps*, GAO/HRD-92-133.

GAO, 1992. *Vocational Rehabilitation: Better VA Management Needed to Help Disabled Veterans Find Jobs*, GAO/HRD-92-100.

GAO, 1984. *VA Can Provide More Employment Assistance to Veterans Who Complete Its Vocational Rehabilitation Program*, GAO/HRD-84-39.

GAO, 1980. *New Legislation and Stronger Program Management Needed to Improve Effectiveness of VA's Vocational Rehabilitation Program*, GAO/HRD-80-47.

You may search for GAO reports on <http://www.gao.gov>

Department of Veterans Affairs

The Job Ready Phase: An Analysis from the 2002 Survey of Veterans Satisfaction with the VA Vocational Rehabilitation and Employment Program, by Rhoda Britt, Surveys and Research Staff, Office of Performance Analysis and Integrity, VBA, Sept. 2003.

Strategic Plan: 2003-2008, Office of the Secretary, July 2003.

Sixth Progress Report on the Compensated Work Therapy (CWT)/Veterans Industries (VI) Program, Fiscal Year 2002, Northeast Program Evaluation Center, VA Connecticut Health Care System, West Haven, CN, Catherine Leda Seibyl, MSN, MPH, June 26, 2003.

Outcome-Based Assessment of the Chapter 31 Program, Presentation to the VR&E Task Force, May 8, 2003, Dr. David Dean, University of Virginia.

Seventh Annual Report, Advisory Committee on the Readjustment of Veterans, March 2003.

VA Responses to Recommendations Submitted to the Secretary of Veterans Affairs on March 31, 2003, by the Advisory Committee on the Readjustment of Veterans.

Accuracy of VA Data Used to Compare the Rehabilitation Rate for FY 2000, Office of the Inspector General, Report No. 01-01613-52, Feb. 6, 2003.

Delivering on the Promise: US Department of Veterans Affairs Self-Evaluation to Promote Community Living for People with Disabilities, Report to the President on Executive Order 13217 (New Freedom Initiative), 2002.

The Disabled Veteran's Working Partner for Rehabilitation Success: Business and Clinical Journal 2002, Vocational Rehabilitation & Employment, 2002.

On Track to Employment: Employment Specialist Pilot Initiative Final Report, Vocational Rehabilitation & Employment, 2002.

Vocational Rehabilitation & Employment: Blue Ribbon Panel of Rehabilitation Experts Final Report, 2001, ed. Maureen McGuire-Kuletz & Richard S. Luck.

2001 National Survey of Veterans, Susan Krumhaus, Project Officer.

Veterans Benefits Administration Vocational Rehabilitation & Employment Service: Return on Investment Analysis Final Report, VR&E ROI-ROIA-01-2.00, SRA, 2001.

Case Management Demonstration Project, VR&E Case Management Task Force, 2001.

The Business Case Continues, Vocational Rehabilitation 2000.

Business Case: Track to Employment 1998, Vocational Rehabilitation and Counseling Service.

FY 1997 Annual Report to the Secretary of Veterans Affairs, Veterans Advisory Committee on Rehabilitation (VACOR), 1997.

Final Report, VR&C Design Team, Transmittal Memo signed by Acting Under Secretary for Benefits, Stephen L. Lemons, February 12, 1997.

Design Team Report and Design Team Report - Book II. Vocational Rehabilitation and Counseling, 1996.

The Veterans Benefits Administration: An Organizational History: 1776-1994, November 1995.

Final Report of Audit: VA Vocational Rehabilitation Program, Office of the Inspector General, Report # 8R6-B99-045, March 21, 1988.

U.S. Department of Labor

Common Measures Policy, Training and Employment Guidance Letter No. 15-03, Dec. 10, 2003.

Employment Situation of Vietnam-Era Veterans, 2001, Bureau of Labor Statistics Press Release, June 28, 2001. <http://www.bls.gov/news.release/vet.toc.htm>

Response to the Congressional Commission on Servicemembers and Veterans Transition Assistance Report: Providing Quality Services for All America's Veterans to Help Them Succeed in a 21st Century Economy, Veterans' Employment and Training Service, undated.

U.S. Department of Education

Longitudinal Study of the Vocational Rehabilitation Services Program, Draft Final Report: Results of the VR Program, prepared by RTI International, October 2002.

U.S. Department of Defense

Comments on the Report of the Congressional Commission on Servicemembers and Veterans Transition Assistance, Undated.

Social Security Administration

The Social Security Definition of Disability, Social Security Advisory Board, October 2003, p. 7

State of Alabama

State of Alabama Independent Living Service Policy and Procedure Manual.

U.S. Office of Personnel Management

Annual Report to Congress on Veterans' Employment in the Federal Government, Fiscal Year 2000, August 2001. <http://www.opm.gov/employ/veterans/fy2000v4.pdf>

Federal Civilian Employment Distribution by Veteran Status: Executive Branch Agencies, Worldwide, September 30, 2000.

<http://www.opm.gov/feddata/demograp/table8mw.pdf>

Veterans: Getting Their Preference? Office of Merit Systems Oversight and Effectiveness, December 2000.

Academia and Nonprofits

What Works and Looking Ahead: U.S. Policies and Practices Facilitating Return to Work for Social Security Beneficiaries, prepared by Suzanne M. Bruyere and Thomas P. Golden, Cornell University and Ilene Zeitzer, Disability Policy Solutions. Prepared for UK/US Pathways to Work in the 21st Century, Seminar and Workshop, May 1-2, 2003, Washington, DC. Funded by Rockefeller Foundation, New York, NY.

The 34th Walter J. Zeiter Lecture: Creating the Future of PM&R: Building on Our Past, Bruce M. Gans, MD, Archives of Physical Medicine and Rehabilitation, v. 84, July 2003, pp. 946-949.

Accomplishments of State Assistive Technology Projects, 1999-2001: Providing Assistive Technology for Employment, Community Living, Telecommunications, Education, and Health Care, RESNA Technical Assistance Project, December 2001.

International Classification of Functioning, Disability and Health (ICF), World Health Organization, (WHO), <http://www3.who.int/icf/icftemplate.efm>

WHO Publishes New Guidelines to Measure Health, Press Release, WHO/48, November 15, 2001. <http://www.who.int/inf-pr-2001/en/pr2001-48.html>

Emerging Disability Policy Framework: A Guidepost for Analyzing Public Policy, Robert Silverstein, Iowa Law Review, Aug. 2000, Vol. 85, No. 5, p. 1695.

Developing Effective Partnerships with Employers as a Service Delivery Mechanism; Institute on Rehabilitation Issues, June 1997, Stout Vocational Rehabilitation Institute, Research and Training Center, University of Wisconsin-Stout, Menomonie, WI 54751.

Internet Resources

Vocational Rehabilitation and Employment Webpage
<http://www.vba.va.gov/bln/vre/vec.htm>

VR&E: America's Job Bank for veteran job seekers and employers
<http://dva.jobsearch.org/>

America's Job Bank, Department of Labor <http://www.ajb.org>

eVets Transition Site <http://www.dol.gov/elaws/evets.htm>

Veterans Information on Federal Employment
U.S. Office of Personnel Management <http://www.opm.gov/veterans/index.asp>

USA Jobs, U.S. Office of Personnel Management <http://www.usajobs.opm.gov/>

Transition from Soldier to Civilian <http://www.acap.army.mil/>

Career Page for Returning Reservists and Guardsmen
<http://www.military.com/Careers/Home/1,13373,,00.html>

American Bar Association: Call to Preparedness
Mobilizing the Bar to Provide Legal Help to Military Personnel/Reservists
<http://www.abanet.org/legalservices/helpreservists/home.html>

Employer Support of the Guard and Reserve <http://www.esgr.org/>

Job Accommodation Network <http://www.jan.wvu.edu>

VA Learning Online (For VA Employees) <http://www.vcampus.com/valo/>

Veterans Online Application (VONAPP)
<http://vabenefits.vba.va.gov/vonapp/main.asp>

WorkSupport.com <http://www.worksupport.com/>
Information, Resources, and Research on Work and Disability Issues, partially supported by the Department of Education.

News Clippings

Pink slips greet returning soldiers; Many U.S. military go from front lines to unemployment lines, by Timothy W. Maier, December 27, 2003, copyright News World Communications, Inc.

Reservists Filing Complaints: More Report Discrimination in Returning to Jobs
<http://www.washingtonpost.com/wp-dyn/articles/A24036-2003Nov10.html>

Some Returning Troops Get Cold Shoulder From Employers, National Politics, by Miles Benson, September 15, 2003.

Seeking Benefits, Disabled Soldier Face New Battle, Wall Street Journal, August 12, 2003.

Acknowledgements

The Secretary's Vocational Rehabilitation and Employment Task Force extends its gratitude to the Veterans Benefit Administration, VR&E employees, and members of the VR&E Service, in particular Judith Caden, Director, and Jerry Braun, Ph.D., Deputy Director, who provided advice and assistance.

The Task Force also thanks Henry Jurkowski, VR&E Service Central Office; Susan Perez and her staff in the VBA Office of Program Analysis and Integrity; Dat Tran, Malini Sangha, and Michael Moore, Office of Policy, for their support of the Task Force's data collection and analysis efforts. We also appreciate VR&E Officers Gregory Bittle, Denver; Catherine Kruger, Chicago; Larry Lapelle, Huntington, WV; and Scott Nielsen, Phoenix, for sharing their program knowledge.

We are also grateful for the travel and administrative assistance of MaryAnn Brady, VA Regional Office and Insurance Center, Philadelphia, PA; the desktop publishing work of Charo Robinson, Office of Planning and Evaluation; and the Task Force Report cover design of Joe Nguyen, Office of Acquisition and Materials Management.

Jack Hudson, Deputy Director, VARO Cleveland, was an effective liaison between VBA and the Task Force. Patricia Wood is highly commended for her insights and editorial abilities while serving in a detail assignment from the Social Security Administration. John O'Hara, Task Force Executive Director, worked tirelessly to support every aspect of the Task Force.

Many other individuals within and outside the Department of Veterans Affairs contributed to the Task Force with the common purpose of improving the delivery of vocational rehabilitation services to veterans with service-connected disabilities. We sincerely appreciate the contribution of each person.

Vocational Rehabilitation and Employment 2004 Task Force Report to the Secretary

www.va.gov/opp/vre_report.htm



Department of Veterans Affairs
Office of the Secretary
810 Vermont Avenue, NW
Washington, DC 20420