

Wisconsin Department of Workforce Development, Division of Vocational Rehabilitation

Comprehensive Statewide Needs Assessment

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PUBLIC
CONSULTING GROUP

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1 EXECUTIVE SUMMARY

The Comprehensive Statewide Needs Assessment (CSNA) is a report required every three years by the Rehabilitation Services Administration (RSA), a federal agency of the U.S. Department of Education, Office of Special Education and Rehabilitative Services. This CSNA—prepared for the Wisconsin Department of Workforce Development, Division of Vocational Rehabilitation (DVR)—assesses the needs of individuals in Wisconsin who have disabilities in their pursuit of competitive, integrated employment. The CSNA seeks to effectively assess DVR consumer needs to advise DVR future policy and decision making so DVR can best serve consumers and meet their rehabilitation needs.

DVR is a federal/state program whose mission is to obtain, maintain, and advance employment for people with disabilities by working with DVR consumers, employers, and other partners. DVR serves both employers and individuals with disabilities who face substantial barriers to employment by providing employment services and counseling to people with disabilities, providing or arranging for services that enable individuals to go to work, and providing disability employment training and technical assistance to employers.

DVR contracted with Public Consulting Group LLC (PCG) to assist with the completion of this Comprehensive Statewide Needs Assessment.

1.1 METHODOLOGY

PCG used multiple data sources to develop the analysis and recommendations within this report including:

- Secondary data sources (American Community Survey (ACS) 1- and 5-year estimates, Bureau of Labor Statistics (BLS), Job Center of Wisconsin, and the Wisconsin Department of Workforce Development website)
- Participant, service provider, DVR staff, employer, and non-participant surveys
- Key informant interviews, focus groups, and community meetings
- Case management data

1.2 FINDINGS

PCG collected and analyzed data (as described in the methodology section of this report) to assess the rehabilitation needs of individuals with disabilities residing in Wisconsin. These key findings are broken down by a variety of perspectives, including by population, as described below:

- **Individuals with a most significant disability, including their need for supported employment services.** Overall, individuals with a most significant disability make up the majority of DVR's population. They are represented highest in the age group 18 to 34 and have the lowest rate of employment at case closure at 44% (see Table 95 for complete detail). Our analysis indicated that individuals

with a most significant disability have an unmet need for mental health supports. In fact, mental health services are repeatedly mentioned as a needed service by a variety of populations. In addition, the number of Supported Employment (SE) providers and available job coaching for SE for DVR consumers has been declining. One DVR staff member mentioned that DVR may not be able to compete with higher reimbursement rates for Individualized Placement and Support (IPS) services, causing service providers to reduce their DVR job coach hours to increase their IPS job coaching hours. IPS is a supported employment model that helps individuals with significant mental health and substance use disorders find jobs. IPS is offered within 20 out of 72 counties in Wisconsin. DVR collaborates with the engaged IPS counties and Department of Health Services to help support this program. IPS payments to the providers through the counties are set up differently than DVR funding. Other staff commented, from their perspective, that there were not sufficient SE providers to meet the need and the number of providers seemed to be declining. Staff identified that a lack of SE trained service provider staff may contribute to the unmet need for this service category.

DVR saw comparable rates of competitive integrated employment outcomes for those with a most significant disability (44.1%) and those with a significant disability (48.1%) determination, suggesting that DVR services are well-suited to meet the needs of these populations. However, within specific categories of individuals with disabilities, such as those with mental health issues, there are clearly unmet needs; these services were widely seen as inadequate in both the quality and quantity of services received.

- **Individuals with disabilities who are minorities or who have been unserved or underserved by DVR.** Race is a major factor in the likelihood of success in Wisconsin. While Asian and White individuals closed their case with employment 58% and 49% of the time respectively, Black or African American individuals closed their case with employment only 33% of the time, a pattern which was also observed in rates of DVR spending. Native Americans also saw meaningfully different outcomes than the majority of DVR consumers (see Table 96). Similar rates of DVR staff found all racial and ethnic minority groups to be potentially underserved (see Table 61). Additionally, Black or African American individuals face structural barriers to employment that others do not. Their unemployment rate is almost twice as high as among the population overall¹. PCG's experience suggests a disparity like this is common across multiple state vocational rehabilitation (VR) agencies and many social service programs.

¹ [State Unemployment by Race and Ethnicity – 2024 Q4 – Economic Policy Institute](#)

Other frequently mentioned groups of underserved and unserved individuals included those with behavioral and mental health concerns, struggling with substance use, who reside in rural areas, who are transient or unhoused, and are incarcerated or in the juvenile justice system. Mental health services was the service category that service providers and staff were most likely to report as inadequate. The most common service need identified for these underserved populations was transportation, along with increased outreach and training for specific populations. Similar to needs identified for individuals with a most significant disability and minority groups, DVR staff identified transportation, job coaches, and supported employment providers as those that needed to improve services to underserved populations.

- **Individuals with disabilities served through other components of the statewide workforce investment system.** Generally, there is good coordination between DVR and other partners in the statewide workforce system when it comes to serving individuals with disabilities. When it works well, the different systems do a good job coordinating services and funds to ensure that individuals have a seamless stream of services to meet their needs. Post-pandemic circumstances find that DVR and workforce center staff work to coordinate in person meetings with one another and mutual consumers, and also leverage the use of virtual meetings. According to workforce center staff, DVR, especially DVR Business Services staff, has shown new interest in working with its local workforce center partners. These arrangements have great potential for meeting consumer needs that cannot be met by DVR but might be met by a workforce center partner. These types of relationships can improve the planning and coordination of services to meet consumer needs.
- **Youth with disabilities and students with disabilities, including their need for pre-employment transition services (Pre-ETS) or other transition services.** Findings on the adequacy of Pre-ETS services were mixed. One positive is that DVR is spending at least 15% on the Pre-ETS required services, meeting RSA spending goals. As many youth receive services from schools, centers for independent living, or other community providers, there is no singular, all-inclusive count of those currently receiving transition services, which makes it difficult to estimate how many are unserved/underserved.

When surveyed about the adequacy of Pre-ETS services, many DVR staff indicated that the majority of Pre-ETS service types were not always adequate. However, staff did not flag individuals transitioning from high school to work' as an underserved group within the same survey. Although the majority of service provider staff who work with students transitioning from education to the workforce noted that the adequacy of Pre-ETS services sometimes fell short, service providers were still more likely to rate Pre-ETS services highly compared to other service types. Additionally, previously conducted surveys among school-based

transition staff report good relationships with DVR, and that many individuals decline DVR support until they are prepared to take concrete steps toward employment.

Working to make students more aware of DVR services that help individuals prepare for work, which cover costs of accommodations, training, and education could better help serve this population.

- **The need to establish, develop or improve service providers within Wisconsin.** CSNA results suggest that, despite recent increases in DVR's provider payments, provider staffing levels are below optimal. Staff turnover, along with a shortage of qualified service provider staff, in addition to Stout Vocational Rehabilitation Institute (SVRI) staff, causes difficulties in all aspects of the VR process, from application to case closure. For more than five years, DVR has identified a decrease in the capacity of service providers who have a DVR service agreement to deliver authorized services in a timely manner, causing delays in consumer progress and, in some cases, resulting in provider waitlists. DVR and service provider staff alike noted a shortage of service providers in specialty areas such as deaf and hard of hearing, fluency in foreign languages (e.g., Spanish and Somali) and self-employment and service provider shortages in rural areas. As such, DVR needs to identify other methods to make addressing these needs more economically feasible for a service provider, such as encouraging circumstances that allow providers to participate in virtual/remote services or acquiring additional staff dedicated to recruiting service providers. DVR has discussed with two schools in the University of Wisconsin system a possible partnership related to recruitment of additional service providers. DVR has reviewed a service provider recruitment model used by another state vocational rehabilitation agency for possible use. DVR has also streamlined some of the reports required of service providers under our statewide service technical specifications and increased provider rates in recent state fiscal years (fee increases were effective July 1, 2023) By investing in the growth of service providers, DVR can expand consumer provider choice and invest in services demonstrated to yield results and a higher successful case closure rate.

1.3 RECOMMENDATIONS AND CALL TO ACTION

Throughout this evaluation, PCG has identified DVR's strengths and successful practices along with opportunities for growth and improvement. We summarize our CSNA recommendations in this section. Our recommendations touch upon many of the themes discussed in the Results and Analysis section of this report. For each of our recommendations we have provided a 'Call to Action.' These are the immediate next steps that DVR could take if the decision is made to begin implementing our recommendations. We have presented here a summary of the recommendations. More

detail on these recommendations can be found in the 'Recommendations' section of this report. Detailed figures and evidence can be found throughout this document.

While this section highlights potential improvements or areas for further research, we would like to emphasize that the majority of those participating in this CSNA expressed unreservedly positive sentiments. This included consumers, staff, providers, and Wisconsin businesses, stretched across all forms of data collection. This is unsurprising, considering DVR's high rates of successful case outcomes across all populations. Even those groups who perform less well than others by this metric still enjoy meaningful rates of successful outcomes.

DVR has the opportunity to continue the improvement cycle by building upon current strengths and successful practices while addressing the needs identified throughout this CSNA. PCG proposes the following recommendations to increase the efficacy of DVR services and funds, with the goal of improving and increasing successful outcomes for DVR consumers.

The goal of the CSNA process is to assess consumer needs to advise future policy and decision-making so DVR can best serve their consumers and meet their rehabilitation needs. PCG collected and analyzed both quantitative and qualitative data to assess the required areas of need to meet this goal. Our results and analyses describe the successes and strengths that DVR, along with other partners, have worked hard to achieve. They also identified opportunities to improve access and service delivery to improve outcomes for Wisconsinites with disabilities. DVR is well-positioned to continue to grow and change to support optimal outcomes for Wisconsinites with disabilities seeking employment.

1.3.1 Recommendation 1: Equitably Support Unserved / Underserved Individuals

PCG recommends that DVR address the needs of underserved individuals, including those who are minorities. Specifically, non-White, non-Asian individuals served by DVR do not receive the same levels of service. In addition, in qualitative research, staff and providers routinely cited concerns about the ability of DVR services to address the needs of individuals with mental health related disabilities, and the unhoused population of Wisconsin. These issues were entwined with concerns about serving individuals who were currently, or had previously been, incarcerated. In 2020 and 2022, DVR engaged in formalized assessments of the experiences of DVR's underserved and minority populations. Recommendations from these assessments continue to inform improved services to underserved populations.

1. Further understand barriers and needs – PCG recommends further exploration and analysis to clarify and confirm unserved and underserved populations. ,

- a. Determine when individuals from minority groups stop receiving services.

- b. Schedule qualitative interviews with providers, advocates, and minority consumers.
 - c. Perform linear regression of service spending by race.
 - d. Perform a more comprehensive analysis to understand how much of the difference in case outcome is attributable solely to different labor market conditions.
- 2. Align resources to support priorities** – PCG recommends that DVR explore payment structures that support the programmatic priorities of the agency.
- a. Create a unique expense category for mileage expenses reported by service providers with a statewide service agreement.
 - b. Consider expanding successful rate schedule improvements to reward providers for serving priority populations.
- 3. Examine and adjust policies and procedures** – PCG recommends that DVR review policy and in-the-field practice with the goal of improving services for underserved populations.
- a. Explore additional communication methods and work with providers to implement them across DVR’s stakeholder networks.
 - b. Examine and evaluate efficiencies (common criteria) between DVR and Tribal VR eligibility determinations.
 - c. Develop a standardized correctional institution approach.
 - d. Provide additional VR assistance for the incarcerated population.
 - e. Identify additional sources of mental health services.
 - f. Align job pipelines with Wisconsin “50 Hot Jobs” and in-demand occupations.

1.3.2 Recommendation 2: Maximize capacity of service providers and VR staff

PCG’s research indicates there is an opportunity to improve the quality of services delivered by both DVR and service provider staff. Our qualitative research from DVR and service provider staff (focus groups, community meetings, interviews), and quantitative surveys, results strongly indicate that DVR and its service partners’ capacity to provide quality services is being hampered by a combination of DVR and service provider staff shortages, turnover, and a need for more mental health expertise. Staff turnover, whether DVR or service provider, tends to slow down consumer progress as both the DVR counselor and/or service provider staff need time to learn about the consumer, about the consumer’s employment plan and about the progress of the plan. Both staff need to cultivate their working relationship.

- 1. Train and retain existing VR and service provider staff** – PCG recommends that DVR explore training opportunities for VR and service provider staff that target identified areas of need.

Training needs for existing and future DVR staff

- a. Improve DVR staff communication and understanding of provider operations.
- b. Explore providing mental health training for DVR staff so they can more effectively serve individuals with mental health needs.
- c. Support DVR staff advancement through caseload specialization.

Training needs for existing and future service provider staff

- a. Create opportunities for provider understanding of DVR operations.
- b. Support the development and delivery of cultural competency training for provider staff.

2. Improve recruitment pipelines and collaboration for a qualified staffing source – PCG recommends that DVR explore opportunities for collaboration within WI and at the national level to adopt cutting edge practices in recruitment and retention.

- a. Establish a WI-based workgroup.
- b. Connect at the national level

3. Examine and adjust policies and procedures – PCG recommends DVR examine and revise policies and procedures to increase capacity of VR and service provider services.

- a. Continue DVR's ongoing VRC and VRS job restructuring efforts.
- b. Explore expansion of virtual services.
- c. Collaborate with existing service providers to determine if they can offer under-provided services.

1.3.3 Recommendation 3: Review administrative processes to maximize efficacy

By reducing administrative burdens, staff can maximize the time they spend delivering services and support to consumers. To complement our recommendation to maximize the capacity of service providers and VR staff, DVR has an opportunity to streamline processes and leverage technology to reduce time spent on administrative tasks to maximize the impact of available resources and services.

1. Continue provider collaboration to streamline processes and documentation – PCG recommends continuing to collaborate with providers to streamline processes and documentation.

- a. Continue the use of the Service Provider Advisory Group.

2. Increase consistent interpretation and application of technical specifications across offices and within DVR staff – PCG recommends improving consistent interpretation of technical specifications between offices and within DVR staff and

making consistent clarifications available to service providers and other stakeholders, as necessary.

- a. Identify specific technical specifications for improved consistency.
 - b. Develop training content and schedule for statewide delivery.
3. **Add revised case markers to capture more VR successes** – PCG recommends adding revised case markers to capture more VR successes as well as tracking signed Individual Plans for Employment (IPEs), progress in measurable skills gains, and progress in credential attainment.
- a. Determine a list of additional case markers.
 - b. Amend the current case management system to reflect new markers or write these markers into requirement for new case management system.
 - c. Train appropriate staff on definitions and processes.

1.3.4 Recommendation 4: Enhance partnerships

DVR works with multiple partner agencies to fulfil consumers' needs. Partnerships and collaboration are necessary for both DVR and their partners to successfully deliver effective services. As the VR agency, DVR is not necessarily the funding stream for all possible consumer needs.

1. **Continue DVR education and outreach to secondary and post-secondary education settings** – PCG recommends that DVR continue to strengthen training and resources for secondary and post-secondary settings in order to increase education and outreach and get information to potentially eligible individuals as quickly as possible.
 - a. Review and revise informational approaches.
 - b. Continue to educate and coordinate with secondary and postsecondary organizations.
 - c. Review DVR policy about secondary and post-secondary services and amend if necessary to fit post-pandemic operations.
2. **Explore solutions to address transportation barriers** – PCG recommends DVR explore systemic and individual solutions for circumventing transportation barriers.
 - a. Work with transportation and community partners to support systematically improved access to services and systems.
 - b. Identify successful transportation strategies or strategies changing the need for transportation in different Wisconsin localities and situations and post them on DVR's website.
 - c. Educate staff on local strategies that meet or partially meet transportation needs of DVR consumers.

3. **Build stronger ties with community housing groups** – PCG recommends that DVR collaborate with housing partners to increase knowledge of and access to available housing resources.
 - a. Build stronger ties with community housing groups and advocacy organizations.
 - b. Provide community-specific housing resources to area offices.

2 INTRODUCTION

2.1 ACRONYMS AND GLOSSARY

The following terms are used throughout this document. The full meaning of each of these commonly used acronyms is provided here for reader ease of reference.

TABLE 1: ACRONYMS USED

Acronym	Description
ACS	American Consumer Survey
BLS	Bureau of Labor Statistics
CE	Customized Employment
CFR	Code of Federal Regulations
CIE	Competitive Integrated Employment
CIL	Centers for Independent Living
CCoT	County Communities on Transition
COVID	Coronavirus Disease of 2019
CSNA	Comprehensive Statewide Needs Assessment
DHS	Wisconsin Department of Health Services
DIF	Disability Innovation Fund
DOC	Wisconsin Department of Corrections
DOT	Wisconsin Department of Transportation
DPI	Wisconsin Department of Public Instruction
DVR	Wisconsin Division of Vocational Rehabilitation
DWD	Wisconsin Department of Workforce Development
FFY	Federal Fiscal Year (October 1—September 30)
IDEA	Individuals with Disabilities Education Act
IEP	Individualized Education Plan/Program
IPE	Individualized Plan for Employment
IPS	Individual Placement and Support
JCW	Job Center of Wisconsin
LEA	Local Education Agency/Authority
LGBTQ+	Lesbian, Gay, Bisexual, Transgender, Queer (and more)
LMIC	Labor Market Information Center
N/A	Non-Applicable
PCG	Public Consulting Group LLC
Pre-ETS	Pre-Employment Transition Services
PY	Program Year (July 1—June 30)
RSA	Rehabilitation Services Administration
SE	Supported Employment
SFY	State Fiscal Year (July 1—June 30)

Acronym	Description
SOC	Standard Occupation Code
START	Statewide Transition Action and Resource Team
SVRI	Stout Vocational Rehabilitation Institute
TAG	Transition Action Guide
TIG	Transition Improvement Grant
VR	Vocational Rehabilitation
WDA	Workforce Development Area
WIOA	Workforce Innovation and Opportunity Act

2.2 PURPOSE

The RSA requires that states conduct a CSNA every three years. This CSNA assesses the needs of individuals with disabilities who live in Wisconsin in their pursuit of competitive, integrated employment. The report seeks to effectively understand DVR consumer needs to inform future DVR policy and decision-making. This effort will help DVR to best serve its consumers and meet their rehabilitation needs.

The goal of the CSNA process is to assess consumer needs to advise future policy and decision making so DVR can best serve their consumers and meet their rehabilitation needs. PCG collected and analyzed quantitative and qualitative data to assess the required areas of need to meet this goal. Our results and analyses describe successes and strengths that DVR, along with other partners, have worked to achieve. They also identified opportunities to improve access and service delivery to improve the outcomes of individuals in Wisconsin with disabilities. Key opportunities for growth include equitably supporting unserved and underserved individuals, exploring solutions to transportation issues, addressing workforce and staffing challenges, building stronger ties with community housing groups, strengthening efforts to reach the incarcerated population, and expanding the definition of “success” by looking at signed IPEs, measurable skills gains and credential attainment for cases that close without employment. DVR is well-positioned to continue growth and change that supports optimal outcomes for Wisconsinites with disabilities seeking employment.

The CSNA is designed to review and assess implementation of the requirements of §361.29 Section 101(a)(15) of the Rehabilitation Act of 1973, as amended, and produce useful and timely information. This assessment must include the rehabilitation needs of individuals with disabilities residing within the state, particularly the DVR service needs of--

- (l) Individuals with the most significant disabilities, including their need for supported employment (SE) services

- (II) Individuals with disabilities who are minorities and / or have been unserved or underserved by the vocational rehabilitation (VR) program carried out under this title
- (III) Individuals with disabilities served through other components of the statewide workforce investment system (other than the VR program), as identified by such individuals (and personnel assisting such individuals) through the components
- (IV) Youth and students with disabilities, including their need for pre-employment transition services, or other transition services

The CSNA must also include an assessment of the needs of individuals with disabilities for transition services and pre-employment transition services (Pre-ETS), and the extent to which such services provided under this Act are coordinated with transition services provided under the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.) to meet the needs of individuals with disabilities.

Finally, the CSNA must include an assessment of the need to establish, develop, or improve community rehabilitation programs within the state.

2.3 BACKGROUND

DVR contracted with Public Consulting Group LLC (PCG) to conduct this Comprehensive Statewide Needs Assessment (CSNA).

The Wisconsin Department of Workforce Development, Division of Vocational Rehabilitation (DVR) is a federal/state program designed to obtain, maintain, and advance employment for people with disabilities by working with DVR consumers, employers, and other partners. DVR offers a variety of programs to meet the diverse needs of individuals in Wisconsin with disabilities. DVR programs and services help Wisconsinites overcome obstacles, face new challenges, and live more independently.

The Vocational Rehabilitation (VR) program, the cornerstone of DVR, is designed to obtain, maintain, and advance employment for people with disabilities by working with DVR consumers, employers, and other partners. DVR provides appropriate and comprehensive programs, services, and resources in a timely and effective manner to help individuals with disabilities in Wisconsin find new careers and gain and retain employment. VR services are designed to empower Wisconsinites with disabilities to become gainfully employed and self-sufficient. In addition to VR services, DVR provides Pre-ETS in partnership with local and state educational agencies.

2.3.1 Report Data Limitations

This CSNA report uses multiple data sources as clarified throughout this document. It also relies upon secondary data sources where necessary and appropriate. We have

referenced the primary data source at the beginning of each report section and cited additional sources used, if any, in the paragraphs that follow.

Estimates produced by different secondary data sources may not perfectly align with one another. For example, estimates of population size obtained from different data sources may differ slightly from one another throughout this report. This does not mean that one or both sources are inaccurate or incorrect: non-census survey data may have methodology differences that produce somewhat different results. Specific data points (counts, percents, figures, etc.) are less important in this analysis than the overall trends, and these trends should be evident across multiple data sources.

The most important data source in this report is the American Community Survey (ACS). For more information about the ACS, see [3.1 Secondary Data Sources](#) in the Methodology section of this report. We have used both the 1-year and 5-year ACS estimates repeatedly throughout this document.

Additionally, it is important to note that all estimates produced using DVR data reflects data on FFY 2023, generated in February 2024. Many factors change within any given time span, and any specific figure in this report will not reflect specific factors at the time this report is published- much less when it is read. These estimates serve as benchmarks against which future data can be compared, as well as serving to inform the recommendations here. It should also be noted that DVR staff was aware of many of the analysis cited within this report and was taking action to address many concerns raised. However, the results of these efforts are extremely unlikely to be reflected in the data here as they were launched as data was being collected.

Finally, a distinction must be made between certain types of data. Surveys, focus groups, and interviews all provide insight into individuals' perceptions of the world. These are often meaningful, informed by their knowledge, and point toward problems which are necessary to address. They are also often biased by the individuals' position, their knowledge, past experience, and even their mood on the particular day they were asked. This is particularly true for interviews and focus groups, which heavily weight the opinions and views of the individuals willing to participate. All such data, while valuable and informative, should be viewed with reasonable skepticism and within the framework of all other available data.

2.4 METHODOLOGY

In this section we explain how PCG used multiple data sources to develop the analysis and recommendations in this report. We incorporated information from various data sources, including existing case management data; DVR participant, provider and community partner, staff, employer, and non-participant survey data; and stakeholder focus group and interview data. We describe our data collection methods in the paragraphs that follow.

DVR CSNA Data Sources



2.5 SECONDARY DATA SOURCES

PCG relied on publicly available data sources to make population level estimates and statements about the Wisconsin population and Wisconsinites with disabilities. This data included the U.S. Census Bureau’s American Community Survey (ACS), Bureau of Labor Statistics (BLS) career growth projections, Wisconsin Department of Public Instruction’s Individuals with Disabilities Education Act (IDEA) indicator data, and Job Center of Wisconsin (JCW) data.

The ACS is the largest on-going data collection survey performed by the US Census Bureau and constitutes the most up-to-date and complete data on US residents. It is widely used by public and private entities to understand the population. The Rehabilitation Services Administration (RSA) suggests that agencies rely on the ACS as a resource for the CSNA process.

This assessment uses two forms of the ACS: the 1-year and 5-year estimates. The 1-year ACS estimate reports the results of a single year of ACS surveys, with data weighted to reflect the population at that point in time. The ACS 1-year data sources are extremely accurate and are useful for measuring and understanding large groups within states. As such, we use them whenever they are available. The ACS 5-year estimates combine data from the most recent five years of ACS data collection. By combining measurements across the prior five years, these estimates have much larger sample sizes, allowing for more precision and providing more detail about smaller population and sub-population groups. However, the 5-year data may be out-of-date, and it has difficulty capturing rapid changes or new information as the data is combined across five years. Because the 5-year data is more accurate at representing small populations, we use it as the default source throughout this report.

2.6 SURVEYS

PCG collaborated with DVR to design, develop, and administer the surveys listed in Table 2 to DVR participants (consumers), providers and community partners, staff, employers, and non-participants (those who have not received DVR services). Our surveys gathered information about individual experiences, basic demographics, program successes and challenges, barriers, and services used or needed. We also collected DVR services data, including individuals' experiences and perceptions of services.

TABLE 2: SURVEY STAKEHOLDER GROUPS

Survey Stakeholder Groups
Participant
Provider and Community Partner
DVR Staff
Employer
Non-Participant

Our assessment of community partners included surveying community groups that support individuals who are seeking a job. We also collected basic information about them. Lastly, our surveys identified opportunities for growth, including satisfaction with basic services, potential service gaps, and potential unserved or underserved populations.

Table 3 displays the different surveys used for this report and the qualifying populations they targeted.

TABLE 3: SURVEYS AND QUALIFYING POPULATIONS

Survey	Qualifying Populations
Participant	Also known as consumers. Individuals with a disability who currently, or in the past, had an open case with DVR.
Provider and Community Partners	Providers and community partners who contract with DVR to provide services to support employment outcomes.
DVR Staff	DVR employees who support participants.
Employer	Community businesses who employ individuals with disabilities.
Non-Participant	Individuals with disabilities who reported no open case with DVR in the recent past.

Table 4 summarizes survey dissemination—the tools, survey start and end dates, methods of contact, and frequency of reminders for the different survey populations.

TABLE 4: SURVEY DISSEMINATION

Survey Tool	Start Date	End Date	Method of Contact	Frequency of Reminders
Participant	04/22/24	07/02/24	Email	Biweekly reminders
Provider and Community Partners	07/22/24	08/19/24	Email	Biweekly reminders
DVR Staff	06/04/24	06/28/24	Email	Biweekly reminders
Employer	09/11/24	10/08/24	Email	N/A
Non-Participant	10/01/24	11/01/24	Open Access Link	N/A

2.6.1 Participant Survey

PCG designed the participant survey for individuals with disabilities who are currently working with DVR or who have worked with DVR in the recent past. Survey questions targeted CSNA-required information as well as consumer satisfaction. Specifically, the survey asked about participants’ experiences, the services they had received, service usage and coordination with DVR partners, and barriers to employment.

To administer the survey PCG leveraged Qualtrics, a web-based, accessible, and well-tested survey platform. DVR provided PCG with a file containing 27,431 records comprised of currently active cases, and cases closed within the prior three years. The file included e-mail addresses for 85.9% of DVR and 90.4% of Pre-ETS participants (under the age of 25). Participants received an e-mail invitation explaining the survey purpose, and contents that included a unique link to access the survey. The survey introduction contained instructions for survey completion and how to request accommodation, if needed. PCG provided an e-mail address for questions or assistance.

We were able to connect a participant’s survey results to their DVR case record to access participant demographic characteristics (e.g., race, case status, services used) which meant we did not have to include these as additional survey questions. This helped us to shorten our survey, and properly weight and fully analyze our survey responses.

Weighting participant survey data to match the characteristics of the entire population allowed us to make statements that applied to the entire DVR participant population rather than only to those individuals who responded to the participant survey. We used raked weighting, adjusting data to match population characteristics by age categories, race, case status, primary disability categories, and participant WDA.

PCG released the participant survey on April 22, 2024, and closed it on July 2, 2024. We successfully sent out 20,372 e-mails (22,834 sent minus 2,462 failed/bounced), resulting in a total of 1,920 survey responses for a 9.42% survey response rate. While it is difficult to compare survey response rates across different populations, in our experience this

survey response rate is relatively high compared to similar surveys PCG has administered. Upon further review we deemed 1,522 to be usable records, though individuals were free to skip any questions they did not wish to answer. As such, the exact number of individuals providing responses varies from question to question. Table 5 details e-mail distribution, total responses, and response rate.

TABLE 5: PARTICIPANT SURVEY DETAILS

Survey	Total Emails Sent	Failed/Bounced Emails	Total Responses	Response Rate
Participant	22,834	2,462	1,920	9.42%

2.6.2 Provider and Community Partner Survey

PCG designed and distributed the provider and community partner survey to individuals representing a variety of organizations, including service providers and organizations that provide services to individuals with disabilities who may or may not be associated with DVR. The survey asked what DVR could do to increase the quality of services, what are the challenges with providing services, and what are the unmet needs of their populations.

To administer the survey PCG again leveraged Qualtrics, the web-based, accessible, and well-tested survey platform. We used a respondent-driven, or ‘snowball’ survey distribution strategy to mitigate the limited availability of contact information. Providers and community partners received an e-mail invitation from DVR explaining the survey purpose and contents, including an anonymous link to access the survey. The survey introduction contained instructions for survey completion and how to request accommodation, if needed. Survey recipients were encouraged to further distribute the survey to other organizations with whom they work as part of our snowball survey distribution strategy.

PCG released the provider and community partner survey on July 22, 2024, and closed it on August 19, 2024. We received a total of 125 survey responses, 105 of which were 100% complete and 20 of which were partially complete. Due to the method of distribution, response rates cannot be calculated. Upon deeper analysis we deemed 110 to be usable records. Individuals could choose to skip any questions they did not wish to answer, resulting in a varying number of responses for each question.

2.6.3 DVR Staff Survey

PCG designed and distributed the DVR staff survey to current DVR employees who worked directly with DVR participants. The survey gathered data on how participants receive services and asked about potential service gaps and participants’ needs.

Again, PCG leveraged Qualtrics to administer the survey. DVR provided PCG with a contact list containing 274 e-mail addresses of current DVR staff who worked directly with DVR participants. Staff received an e-mail invitation explaining the survey purpose and

contents that included a link to access the survey. The survey introduction contained instructions for survey completion and how to request accommodation, if needed. PCG provided an e-mail address for questions or assistance.

PCG released the DVR staff survey on June 4, 2024, and closed it on June 28, 2024. Both PCG and DVR sent reminder e-mails on a regular basis encouraging staff to complete the survey. We successfully sent out 274 e-mails (274 sent minus 0 failed/bounced) and received a total of 133 survey responses for a 48.5% survey response rate. After a detailed review we deemed 103 to be usable records. Individuals had the option to skip any questions they chose not to answer, leading to a different number of responses for each question. Table 6 details e-mail distribution, total responses, and response rate.

TABLE 6: DVR STAFF SURVEY DETAILS

Survey	Total Emails Sent	Failed/Bounced Emails	Total Responses	Response Rate
DVR Staff	274	0	133	48.5%

2.6.4 Employer Survey

PCG designed the employer survey to represent a multitude of organizations, including community employers. The survey asked what DVR could do to increase engagement with employers, better collaborate with employers, and identify any unmet needs of employers and persons with disabilities.

PCG again leveraged Qualtrics to develop a respondent-driven, or ‘snowball’ survey distribution strategy to maximize responses. DVR collaborated with the Job Center of Wisconsin (JCW) to distribute the survey to JCW-registered employers using an online database where employers post job leads, and job seekers interact. Over 1,000 employers access this program. Employers received an e-mail invitation explaining the survey purpose and contents, including an anonymous link to access the survey. The survey introduction contained instructions for survey completion and how to request accommodation, if needed. We encouraged survey recipients to further distribute the survey to other employers, including those who do not yet work with DVR, as part of the snowball survey distribution strategy.

DVR/JCW released the employer survey on September 11, 2024, and PCG closed it on October 8, 2024. We received a total of 241 survey responses. After additional analysis we deemed 139 to be usable records as many of the potential respondents opened the survey but decided to close it out before answering any questions. Individuals were free to skip any questions they did not want to answer so the response count varied by question.

2.6.5 Non-Participant Survey

DVR and PCG targeted the non-participant survey to individuals who did not receive services from DVR. We distributed the survey to Centers for Independent Living (CIL), National Alliance on Mental Illness Wisconsin, Office for Deaf and Hard of Hearing, Wisconsin Office for the Blind and Visually Impaired, Guest House of Milwaukee, and other organizations serving people who are potentially eligible for services but have not received them. The survey questions were similar to those of the participant survey with the exception of questions on barriers, other providers individuals have worked with, and demographic information.

PCG leveraged Qualtrics to administer the survey. We used a respondent-driven, or 'snowball' survey distribution strategy to mitigate the limited availability of contact information. DVR provided PCG with a contact list containing e-mail addresses for CILs and other organizations serving people who are potentially eligible for services but have not received them. In addition to PCG efforts, DVR shared the non-participant survey with organizations that assist individuals who might be eligible for services but have not received them. These entities received an e-mail invitation explaining the survey purpose and contents that included a link to access the survey. The survey introduction contained instructions for survey completion and how to request accommodation, if needed. PCG provided an e-mail address for questions or assistance. Survey recipients were encouraged to distribute the survey to other organizations with whom they work as part of our snowball survey distribution strategy

Because we had no option to connect respondents' survey results to their DVR case record to access demographic characteristics (e.g., race, case status, services used), we had to include these as additional survey questions.

PCG released the non-participant Survey on October 1, 2024, and closed the survey on November 1, 2024. We received a total of 48 responses. Upon further review about 43 individuals provided at least one valid response, though individuals were free to skip any questions they did not wish to answer. As such, the exact number of individuals providing responses varies from question to question. We expected this survey to yield a lower response rate as the target population has no ties with / has not received services from DVR.

2.7 FOCUS GROUPS, KEY INFORMANT INTERVIEWS, AND COMMUNITY MEETINGS

PCG conducted a series of focus groups, key informant interviews, and community meetings with a variety of audiences to learn more about individuals' experiences with DVR, DVR-provided services, DVR strengths, and potential service gaps. PCG and DVR worked together to identify a wide variety of diverse groups and organizations for PCG to speak with. In many instances DVR provided PCG with an initial introduction or "warm

handoff” to these entities to encourage participation. PCG then followed up via e-mail or phone to schedule virtual meetings.

Table 7 summarizes the audiences and the number of participants.

TABLE 7: SUMMARY OF FOCUS GROUP, KEY INFORMANT INTERVIEW, AND COMMUNITY MEETING PARTICIPATION

Audience	Date(s)	Type	Attendance
Provider	2/28/24 – 3/4/24	Focus Group	26
DVR Staff	3/6/24 – 3/11/24	Focus Group	31
DVR Directors and Supervisors	3/12/24	Focus Group	8
DVR Staff	3/15/24 – 3/28/24	Interview	4
National Alliance on Mental Illness Wisconsin	4/1/24	Interview	1
WI Employment First Conference	5/21/24	Focus Group	10
Centers for Independent Living	6/27/24	Focus Group	5
DVR Tribal Liaisons	7/17/24	Focus Group	4
Tribal VR Directors	7/18/24	Focus Group	2
WI Department of Transportation (DOT) Specialized Transportation	9/9/24	Focus Group	3
DVR Consumers	9/10/24	Focus Group	4
WI DWD Criminal Justice (Title I partner)	9/11/24	Interview	1
WI DWD Workforce (Title I partner)	9/11/24	Interview	1
WI DWD Workforce (Title I partner)	10/16/24	Interview	1
Virtual Consumer Community Meeting	9/12/2024	Focus Group	5
Targeted Virtual Consumer Community Meeting	9/12/24 – 9/26/24	Focus Group	10
WI DWD Criminal Justice (Title I partner)	9/24/2024	Interview	1
Business – Duluth Trading Post	10/2/2024	Interview	1
Business – SSM Health	10/7/2024	Interview	1
K-12 Education	10/14/2024	Interview	1
K-12 Education	10/16/2024	Interview	1
Post-Secondary Disability Services – DVR staff	11/14/2024	Focus Group	6
Post-Secondary Disability Services – College Staff	11/19/2024	Focus Group	4
Post-Secondary Disability Services-UW-Madison	11/18/2024	Focus Group	3

PCG conducted focus groups with DVR staff and supervisors, Tribal VR Directors, and DVR Tribal Liaisons, CILs, service providers, workforce development staff and adult protection/juvenile justice staff, and employers. PCG used Microsoft Teams videoconferencing platform to conduct all focus groups. PCG recorded these sessions to ensure accuracy of results reporting. PCG held one in-person community meeting and one virtual community meeting for the general public, advocates, and participants.

In addition to focus groups, PCG conducted one-on-one interviews with key stakeholders to gain a greater perspective, depth of knowledge, and understanding of their experiences with DVR services. Trained PCG staff members conducted interviews over the platform preferred by the interviewee (Zoom, Microsoft Teams, or telephone). Our approach and the information we collected was designed to fill in gaps from other data sources, with a focus on targeted populations.

For a list of focus group and interview protocols see the [Appendix](#).

2.8 CASE MANAGEMENT DATA

PCG collected case management data (demographic characteristics, consumer service usage, and service expenditures) from DVR's case management system for all cases that were open at any point between July 1, 2022, through June 30, 2023. DVR provided this data to PCG in February 2024. If an individual was found to have multiple cases, we focused on the most recent case or support for that individual. The data included 26,599 unique participants.

2.9 QUANTITATIVE ANALYSIS

Next, we analyzed DVR's case management data. If an identical Consumer ID appeared multiple times within the data, we maintained the record with the most recent Application Date. This allowed us to maintain one unique record per consumer in the event that a consumer had applied for more than one service.

PCG then performed several data transformations, including collapsing individuals' data spread across several records into a single case record:

- **Race:** We considered all present data on race as valid. For records containing data with multiple identified races, we considered the most recent record as valid.
- **Disability:** We considered all present data on disability as valid. For records containing data with multiple disabilities, we considered the most recent record as valid.
- **Total Cost of Services:** If a case had multiple costs, we added the costs together. We only counted one instance for duplicate services, i.e., where the costs, services, and time periods were exactly the same for two records. In this instance we eliminated one record.

Additionally, we recategorized and rolled up certain groups into higher level “summary” groups for reporting purposes, and to maintain consistency with ACS definitions.

2.10 QUALITATIVE ANALYSIS

Qualitative data analysis can help us understand the views and needs of any group and learn about previously undetected concerns. Qualitative data gathering encourages individuals to express their needs and perspectives as they understand and experience them. Individuals use their own words, increasing the chances they will feel heard. Qualitative data is also less likely to be affected by any bias(es) that researchers or funding organizations may inadvertently introduce into other quantitative data gathering instruments or analyses. PCG has incorporated qualitative data from focus groups, community meetings, interviews, and surveys into this report, informing both broad themes and detailed findings about specific experiences.

PCG analyzed all qualitative data using grounded analysis, that is, we reviewed data without preconceived ideas of what may be present, to encourage themes to emerge naturally from the data. We allowed the qualitative research to speak for itself, rather than building upon themes we identified in the quantitative research. After reading and reviewing all qualitative data (including notes and recordings of focus groups, interviews, and open-ended survey comments), we created summary documents that distilled our qualitative data into findings. We used Microsoft CoPilot Artificial Intelligence to help us summarize large amounts of qualitative information. PCG staff reviewed these Artificial Intelligence summaries for accuracy and completeness. Once we had identified our qualitative themes, we searched for links or supporting materials in order to tie our qualitative and quantitative research themes together. These themes informed our findings and recommendations.

3 OVERALL PERFORMANCE

3.1 DVR COORDINATION WITH PARTNERS AND STAKEHOLDERS

This section highlights DVR's current coordination with existing partners and stakeholders, including educational entities, workforce development partners, and other partners that DVR regularly interacts with in both the public and private domains. Under WIOA, DVR is required to coordinate services with many parts of the workforce development system, most specifically educational agencies. These relationships and partnerships influence, and impact services and the population served by DVR, and this is seen throughout the data provided in this report.

3.1.1 Educational Coordination



This section highlights DVR's coordination with education entities, including the identification and outreach procedures for students with disabilities who need transition services.

DVR works with many agencies to conduct activities that reach and assist youth and students with disabilities. Highlights of these activities include:

- Assisting youth and families in the transition from secondary school to work and/or post-secondary;
- Centers For Independent Living to assist with a transition to independent living and provide Pre-ETS;
- Project SEARCH; and
- Providing the five (5) required Pre-Employment Transition Services.

Coordination with Education Services

DVR has an interagency agreement with the Wisconsin Department of Public Instruction (DPI) to facilitate the transition of students with disabilities from school to employment as required by the Workforce Innovation and Opportunity Act (WIOA). It outlines DVR and Local Education Authority (LEA) responsibility to provide Pre-ETS to students with disabilities from age 14 to 21 in a secondary, postsecondary, or other recognized education program. The agreement was developed to ensure that DVR and DPI meet all WIOA and IDEA federal standards to transition students with disabilities.

DVR's interagency agreement defines necessary relationships, policies, and procedures between DVR, DPI, and the Department of Health Services (DHS). It is designed to create a common understanding and establish collaborative services efforts to improve employment outcomes for students with disabilities who may be eligible for DVR services. DVR, DHS, and DPI jointly developed a Transition Action Guide (TAG), published on DVR's website, that puts this interagency agreement into practice. The agreement facilitates the development of a coordinated service plan in support of the students' long-

term employment and independent living goals and outlines the financial responsibility of DVR and Local Education Agencies (LEAs) when providing transition services to students.

DVR, in collaboration with schools (per WIOA), provides students with pre-ETS. Pre-ETS are available statewide to all students with disabilities in need of such services regardless of whether they have applied or been determined eligible to receive DVR services. A student is defined as someone with a disability who is in high school or in a secondary, postsecondary, or other recognized education program and is 14 to 21 years old. DVR has met their 15% annual federal grant allocation set aside requirement since federal fiscal year (FFY) 2015. Each workforce development area (WDA) is given an expenditure target and develops a plan to reach their individual goal.

As part of these plans, each WDA develops a strong relationship with local school districts and Workforce Development Boards. Summer work experience, workplace readiness training to develop social and independent living skills, and other work-based learning experiences have been—and will continue to be—implemented.

Transition in Wisconsin begins at age 14. Students with disabilities are recommended to apply for DVR services at least two years before high school graduation. Student Individualized Plan for Employment (IPE) are developed as soon as possible and not later than 90 days after DVR eligibility determination.

The transition planning document under IDEA is the Individualized Education Program or Plan (IEP), and under the Rehabilitation Act it is the Individualized Plan for Employment (IPE). The IEP is an educational plan that must have appropriate measurable post-secondary goals based on age-appropriate assessments related to training, education, employment, and where appropriate, independent living skills. 34 CFR § 300.320(b). The IPE is a vocational plan that can have an educational component. Some students will have an IEP, some will have an IPE, and some will have both.

When a student qualifies for services under the IDEA, transition begins when the student turns age 14 (or younger, if appropriate) and may last through age 21 while the student has an active IEP. 34 CFR § 320(b), Wis. Stat. § 115.787(2)(g). If the student has both an IEP and an IPE, the documents will outline activities and services necessary for the student to move toward their post-school employment goal. Both the IEP and IPE should have the same post-school employment goal. Therefore, even though there are differences in orientation, activities and services specified in each plan can overlap.

Consultation and Technical Assistance

DVR has designated high school transition staff to provide leadership, information and referral, and advocacy and technical assistance. Designated DVR transition staff leads for the Statewide Transition Action and Resource Team (START) promote collaboration among consumers, parents, adult service providers, and other service agencies.

Department of Public Instruction's (DPI) Transition Improvement Grant (TIG) provides transition training and technical assistance to staff. START and TIG collaborate to share joint resources whenever possible.

Together, START and TIG have developed cross agency resources and trainings to provide technical assistance to DVR staff, special education staff from local high schools, and service providers who provide services funded through DVR and the local school district.

County Communities on Transition (CCoT) also meet to create relationships and improve transition services to students in their local communities. CCOTs are a vital mechanism to share transition best practices across the state. Each CCoT consists of individuals from local schools, DVR, service provider agencies, long-term support agencies, Aging and Disability Resources Centers, parents, and employers.

Transition Planning for Individualized Education Programs

DVR staff are assigned to each Wisconsin public high school. DVR Staff connect with the special education staff at each school, outreach to students with disabilities interested in Competitive Integrated Employment (CIE), set up school office hours, participate in job fairs and parent teacher conferences, and attend individualized education program (IEP) meetings when invited and available.

DVR recommends that students be referred to DVR services at least two years before existing high school. Ideally, both the IPE and IEP should include Pre-ETS provided by DVR and the school in a way that best promotes the success of the student through their transition from high school to post-secondary education or employment.



DVR performs many tasks to facilitate the transition of students with disabilities from school to DVR employment services such as:

- Assign DVR staff to each public high school in the state.
- Ensure that each consumer's IPE is coordinated with the employment goal included in the school's IEP and, where appropriate, the ISPs of long-term care service providers.
- DVR liaison attends parent teacher conference nights and resource fairs at their local schools.
- Engage students in activities that facilitate IEP development within 90 days of eligibility determination, in coordination with the student's school, before the student leaves high school.
- Maintain interagency agreement with DPI and DHS (Wisconsin's Medicaid agency). DVR uses this agreement as the official guiding document in coordination of transition activities for students with disabilities.
- Promote the use of the TAG as included in the interagency agreement between DHS, DVR, and DPI to define roles for DVR and LEA during IEP development.

Identification and Outreach Procedures for Students with Disabilities Who Need Transition Services

DVR school liaisons hold office hours with local high schools and provide DVR information to local special education staff to share with students. DVR staff also provide orientation information, attend IEP meetings when invited, and participate in parent teachers conference nights and transition fairs.

DVR staff assigned to each Wisconsin public high school have strong relationships with staff to ensure seamless identification of students with disabilities interested in CIE. Students may fill out a referral form to receive five core Pre-ETS services, or they can apply to DVR to see if they are eligible to receive all DVR services necessary and appropriate to achieve their employment goal, including Pre-ETS. Counselors share VR program information (including scope of VR services), eligibility requirements, and application procedures during these outreach efforts.

3.1.2 Workforce Development



DVR collaborates with the Wisconsin Department of Workforce Development (DWD) core partners and local workforce operators to enhance services for DVR consumers, transition youth, and students participating in Pre-ETS. Partnering with workforce development maximizes employment opportunities while helping individuals pursue their vocational goals. Collaboration enriches DVR employer engagement activities through agreements with service providers and Centers for Independent Living for employability skill training and paid work-based learning experiences for students with disabilities. These efforts enhance employer experience with, and understanding of, how people with disabilities can contribute to meeting their workforce needs.

DVR is a core partner with the workforce system through:

- Collaborative case management and co-enrollment as needed
- Collaboration on targeted outreach activities
- Enhanced consumer referrals among core partners
- Participation in evaluation and continuous improvement strategies
- Specific strategies to strengthen communications across partners (such as business outreach activities)

The DVR administrator, administration staff, and field management maintain relationships with workforce development system partners. The administrator serves on the Governor's Council on Workforce Investment. DVR management or staff serve on boards of local workforce development areas (WDA). Regional staff participate in local committees with One-Stop operators and partner programs. Regional committees support effective communication, interagency planning, and cross-informational training. Moreover,

collaboration improves access to services for individuals with disabilities to maximize benefit from WIOA partners.

3.1.3 Initiatives with Other Partners

This section describes DVR initiatives with other partners including federal, state, and local agencies and programs.

Interagency Cooperation and Federal, State and Local Agencies and Programs

DVR cooperates with other federal, state, and local agencies that contribute to the vocational rehabilitation of Wisconsinites with disabilities or who are responsible for administering programs to develop opportunities for competitive, integrated employment. Collaborations are uniquely tailored to each person's needs and interests. This individualized approach is one of the cornerstones of DVR services.

DVR collaborates with a number of organizations, including:

- **Wisconsin Department of Health Services (DHS).** DVR and DHS collaborate on a program to enroll Home and Community Based Services (HCBS) consumers in VR. Early research shows a substantial increase in HCBS consumers competitive employment when they enroll with DVR. WI DVR should continue collaboration to improve access to supported employment services and long term employment supports, financial coordination of these services and service provider quality and capacity.
- **Tribal Nations Within Wisconsin.** DVR has designated staff liaisons to each of the 11 Federally recognized Tribes within Wisconsin. There is a long-standing, effective partnership between these programs to share referrals, expertise, resources, and services to meet each individual consumer's specific needs.
- **Wisconsin Department of Corrections (DOC).** DVR and interested individual correctional institutions help individuals with disabilities who are being released from custody. Prior to release, DVR can determine an individual's service eligibility and occasionally begin an IPE. When released from custody, justice involved individuals can be directed to the VR office which will help them develop/implement their IPE.

Wisconsin Department of Public Instruction (DPI). DPI is a partner in a DVR Disability Innovation Fund-Career Pathways grant from the federal Rehabilitation Services Administration to assist people with disabilities in gaining new skills and industry-recognized credentials for high-growth occupations in health care, manufacturing, digital technology, and construction. This project aligns both DVR's and DPI's initiatives in developing career pathways for youth and adults. The grant ends September 30, 2026.

- **University of Wisconsin Stout (UW Stout).** DVR has an innovative partnership with UW Stout to help staff conduct intakes, gather disability documentation, and draft eligibility/OOS Assessments for DVR staff to review. These processes can often be a barrier to receiving services in a timely manner. This partnership appears to be effective at maintaining a timeliness of eligibility determination which expedites the Employment Plan development. The timeliness of case approval can be seen in more detail in Closure Outcomes.

3.1.3.1 Arrangements to Provide Supported Employment

DVR enters into individual service provider agreements with a variety of community agencies and private companies to deliver supported employment (SE) services. From the 2024-2027 Combined State Plan (p. 291) “Supported Employment services are available in all counties in Wisconsin which could include typical Supported Employment, Individual Placement and Support, or Customized Employment. In Program Year 2022 WI DVR transitioned 747 individuals to long term supports, 741 of these resulted in a successful closure for Wisconsin DVR. This was approximately 24 percent of WI DVR closures. WI DVR also provides specialized services prior to supported employment to assist individuals in finding employment to meet their individual goals and interests as well as matching their skills. Individuals in Supported Employment are provided supports until they are deemed to be stable in employment and then they are transitioned to long term supports. In Wisconsin long term supports are provided by Medicaid funded managed care and county mental health agencies.”

Community agencies or private companies/individuals who enter into service provider agreements to provide SE services agree to meet the requirements and performance benchmarks that support Employment First initiatives. SE consumers may also find job search help and support from organizations where they live e.g., churches, food pantries, or a local ARC chapter which do not receive funds from DVR. DVR intends to increase the statewide network of effective SE providers whose focus is on vocational objectives, goals, rehabilitation needs, and consumer priorities.

The need for SE services continues to exceed the general availability of SE services statewide, particularly in rural areas. As such, DVR continues to put priority on working with service providers to expand the availability of SE services and the availability of employment opportunities for SE consumers. In focus groups, DVR field staff indicated, based on their conversations with some SE service providers, that DVR’s SE rates were insufficient to cover costs. Therefore, some of those service providers re-allocated their staff’s time from serving DVR consumers to serving consumers with other organizations whose rates covered the provider’s costs. DVR adjusted their rate schedule in 2023, and the impact of this may not yet be fully felt by the time that this research was conducted.

3.2 LANDSCAPE OF SERVICES

In this section we describe the events and activities that have impacted, and may continue to impact, DVR service delivery. We also highlight the conditions (landscape) under which DVR has operated for the past several years.

Figure 1 displays pertinent DVR service statistics as outlined in the Wisconsin Rehabilitation Council's Annual Report for Federal Fiscal Year (FFY) 2023

Figure 1: FFY2023 DVR Services Overview



3.2.1 Division of Vocational Rehabilitation Services

DVR has made progress towards implementing its State Plan Goals and Priorities. At the time of this evaluation, the most recent complete data set describes FFY 2023 (October 1, 2022, through September 30, 2023), provided to PCG by the State of Wisconsin. Note that DVR statistics generally align with State Fiscal Years or Program Years, not Federal Fiscal Years, and data here may not perfectly align.

3.2.2 Barriers and Salient Topics

DVR achieved many successes and continues to address barriers to better services and outcomes. We discuss these barriers in more detail below.

Qualified Personnel and Retention

The Vocational Rehabilitation program employs a wide variety of staff to deliver statewide services. From the 2024-2027 State Plan, within each of the 11 workforce development areas (WDA), DVR employs 24 field managers / supervisors who have supervisory responsibilities for the staff that cover that WDA.



Additional DVR staff provide leadership and administrative support.

There are thirty-three (33) positions in central administration, including the Designated State Unit Administrator, caseload management / fiscal computer system, policy, program development, quality assurance, data analysis, special project management, business services, and training.

DVR continues to experience counselor recruitment and retention issues. The agency has experienced a turnover rate of 6.9% to 12.9% in recent state calendar years. Recruiting and retaining counselors with master's degrees in Rehabilitation Counseling continues to be a factor in maintaining staffing levels.

While recruitment and turnover are a concern for DVR, according to the research of Dr. James Herbert at Pennsylvania State University (Herbert et. Al, 2023), most public vocational rehabilitation agencies experience similar recruitment and retention problems. According to data collected in May 2024 for the WIOA State Plan (2024-2027), DVR had 158 current Vocational Rehabilitation Counselors and 53 current Vocational Rehabilitation Specialists. DVR identified a current need for an additional nine (9) Vocation Rehabilitation Counselors and three (3) Vocational Rehabilitation Specialists. DVR projects a need for an additional five (5) Counselors over the next five years. Allocation of positions for local Workforce Development Areas (WDAs) statewide is based on several factors including referrals, applications, eligibility, IPEs, and caseloads. The current ratio of qualified Vocational Rehabilitation Counselors to consumers is approximately 1 counselor to 90 consumers. DVR has two position classifications in addition to counselors to assist with managing workload, recruitment, and staff retention.

One position is a Vocational Rehabilitation Specialist, designed to allow counselors more time to focus on counseling, providing case management, and project management support. The second position is a Financial Specialist-Senior, which focuses on the purchasing and receiving of services with consumers and service providers. The current ratio for employed Vocational Rehabilitation Counselors and Vocational Rehabilitation Specialists to consumers is approximately 1:84 (WIOA State Plan, 2024-2027).

In program year (PY) 2021, DVR served 26,436 individuals, and in PY2022 they served 27,431. So far in PY2023 DVR has served 28,462 individuals. DVR anticipates that case numbers will continue to increase, and DVR could be serving approximately 31,500 individuals in 5 years.

Pre-Employment Transition Services (Pre-ETS)

DVR reserves 15% of its federal funding to provide Pre-ETS to students with disabilities who are eligible, or potentially eligible, for VR services. These services supplement transition planning and services delivered by the school system. DVR works with a variety of organizations including Centers For Independent Living to provide the required Pre-ETS. Required Pre-ETS are Job Exploration Counseling, Workplace Readiness Training, Self-Advocacy Training, Counseling about Post Secondary Education, and Work-Based Learning. Comparing the number of youth with disabilities in grades 8 through high school with Individual Education Plans (IEPs) (17,244) against the number of youth ages 14-18 with open DVR cases suggests there is an estimated 14,781 potentially eligible students for Pre-ETS.

3.2.2.1 Unemployment and Labor Force Participation

Unemployment and labor force participation rates are important metrics to understand the overall employment landscape of a state. We use data published by the United States (US) Census Bureau's American Community Survey 2022 1-year estimates to better understand these factors. The American Community Survey is an annual survey conducted by the US Census Bureau that provides information such as education, income, and occupational status. This vital information helps drive decision-making by local organizations and community leaders. For more information about the ACS, refer to the Secondary Data Sources section of this report.

Table 8 displays the labor force participation count and percent of working age individuals with a disability in Wisconsin. ACS data indicates that just short of half of individuals with disabilities are employed. Almost half of individuals with disabilities are not participating in the labor force. While only 3% of individuals are identified as unemployed, a large percentage of individuals are not seeking work, so they are not considered to be participating in the labor force. Individuals identified as 'Not in the labor force' include individuals that were not employed during the survey and had not actively looked for work (or been on a temporary layoff) in the last three weeks.

There are 726,125 individuals in the civilian, non-institutionalized population in Wisconsin that self-identify as having a significant disability (SD), according to the 2022 American Community Survey. Slightly over half of these individuals (364,947) are of working age, generally defined as between the ages of 18 and 64. This constitutes 10.4% of the state's total working age population. Of this number, 178,337 individuals are employed and an additional 11,785 reported being unemployed (and actively seeking work). This results in a 6.2% unemployment rate within this group – a rate that is over double the overall age 18-64 unemployment rate over the same period.

Furthermore, BLS reports that April 2024, Wisconsin had an unemployment rate of 2.9%.

FIGURE 2: EMPLOYMENT RATES BY DISABILITY STATUS

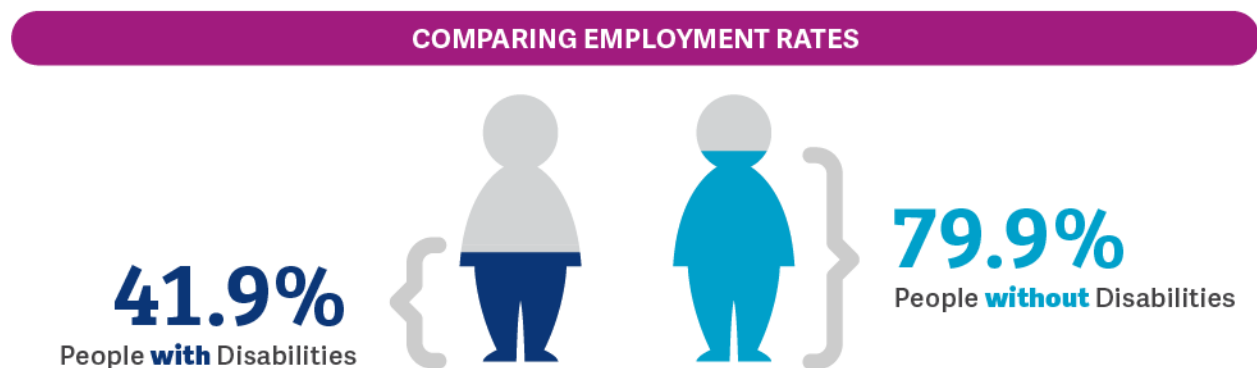


TABLE 8: LABOR FORCE PARTICIPATION RATES OF INDIVIDUALS WITH A DISABILITY (2022 1-YEAR ACS)

	Disability %	Disability % ACS (VR Service Age)	No Disability %	No Disability % ACS (VR Service Age)
Not in labor force	47.9%	53.9%	14.9%	17.4%
Civilian employed	48.9%	41.9%	83.01%	79.9%
Unemployed	3.2%	4.1%	2.1%	2.6%

3.2.2.2 Employment Demand in Wisconsin

According to the 2023 Bureau of Labor Statistics for all occupations, the average hourly wage in Wisconsin is \$28.61 / \$59,500 annually with 2,885,990 individuals employed.

When considering employment demand in Wisconsin, the projected long-term increases in particular jobs and the most common jobs can be used to examine employment demand. PCG accessed official employment and occupational growth estimates

produced Projections Central on behalf of the US Department of Labor². PCG combined these with occupational data about average occupational requirements and wages compiled by the Bureau of Labor Statistics³ to help inform DVR about potential needs in the WI labor force. Table 9 provides the ten careers projected to have the largest number of job openings in 2032. These are careers which will likely have the highest demand for additional workers in a sustained way. DVR staff may wish to identify employers in their area with high labor demand to form contacts and connections to ensure a regular source of potential employment opportunities. Further, as shown in Table 10, these careers tend to require little formal education or prior work experience. This makes them ideal for individuals working to enter the labor force. However, this also means that they are relatively low paid—only one features median wages above the statewide median, and half feature median wages about two-thirds of the statewide median.

² [Labor Market Projections – Long-Term Projections \(2022-2032\) – Projections Central](#)

³ [Occupational projections and worker characteristics : U.S. Bureau of Labor Statistics \(bls.gov\)](#)

TABLE 9: TOP 10 OCCUPATIONS BY NUMBER OF OPENINGS IN WISCONSIN WITH PROJECTED 2032 GROWTH

Occupation Title	Employment 2022	Projected Year 2032	Change Level	Change Percent	Average Annual Openings
Fast Food and Counter Workers	63,860	73,350	9,490	14.9%	14,850
Home Health and Personal Care Aides	77,810	92,320	14,510	18.6%	11,710
Cashiers	65,340	63,900	-1,440	-2.2%	11,540
Retail Salespersons	70,600	74,700	4,100	5.8%	10,470
Laborers and Freight, Stock, and Material Movers, Hand	58,100	65,020	6,920	11.9%	8,740
Customer Service Representatives	68,720	65,850	-2,870	-4.2%	8,170
Stockers and Order Fillers	42,260	47,670	5,410	12.8%	7,490
Waiters and Waitresses	29,630	35,320	5,690	19.2%	6,830
Office Clerks, General	62,780	60,470	-2,310	-3.7%	6,790
Heavy and Tractor-Trailer Truck Drivers	54,310	57,900	3,590	6.6%	6,460

TABLE 10: TOP 10 OCCUPATIONS BY NUMBER OF OPENINGS IN WISCONSIN WITH AVERAGE REQUIREMENTS AND WAGES

Occupation Title	Typical education needed for entry	Work experience in a related occupation	Median annual wage, 2022	% Of Median Wage
Fast Food and Counter Workers	No formal educational credential	None	\$27,930	60.3%
Home Health and Personal Care Aides	High school diploma or equivalent	None	\$30,180	65.2%
Cashiers	No formal educational credential	None	\$28,240	61.0%
Retail Salespersons	No formal educational credential	None	\$30,600	66.1%
Laborers and Freight, Stock, and Material Movers, Hand	No formal educational credential	None	\$36,110	78.0%
Customer Service Representatives	High school diploma or equivalent	None	\$37,780	81.6%
Stockers and Order Fillers	High school diploma or equivalent	None	\$34,220	73.9%
Waiters and Waitresses	No formal educational credential	None	\$29,120	62.9%
Office Clerks, General	High school diploma or equivalent	None	\$38,040	82.1%
Heavy and Tractor-Trailer Truck Drivers	Postsecondary nondegree award	None	\$49,920	107.8%

Table 11 provides occupational growth data for the ten occupations in Wisconsin with the largest percentage growth, and more than 1,000 total openings by 2032. These are high growth occupations which will likely present new opportunities that individuals looking to work with DVR may be interested in pursuing. Likewise, each of these occupations has a number of support and additional occupations linked to their industry that may see additional growth even if they, themselves, are not the fastest growing.

Wages and requirements for entry among these careers tend to be somewhat higher, including many that require post-secondary degrees. Accordingly, the median wages are also more likely to be at or above the statewide median. These are shown in Table 12.

TABLE 11: TOP 10 PROJECTED HIGHEST GROWTH OCCUPATION IN WISCONSIN FOR 2032

Occupation Title	Employment 2022	Projected Year 2032	Change Level	Change Percent	Average Annual Openings
Ushers, Lobby Attendants, and Ticket Takers	1,740	2,790	1,050	60.3%	620
Cooks, Restaurant	17,020	25,360	8,340	49.0%	3,900
Nurse Practitioners	5,090	6,990	1,900	37.3%	500
Musicians and Singers	770	1,040	270	35.1%	130
Computer Numerically Controlled Tool Programmers	1,160	1,540	380	32.8%	180
Logisticians	4,430	5,870	1,440	32.5%	590
Fitness Trainers and Aerobics Instructors	10,350	13,320	2,970	28.7%	2,110
Molders, Shapers, and Casters, Except Metal and Plastic	1,200	1,520	320	26.7%	170
Data Scientists and Mathematical Science Occupations, All Other	790	1,000	210	26.6%	80

Occupation Title	Employment 2022	Projected Year 2032	Change Level	Change Percent	Average Annual Openings
Amusement and Recreation Attendants	3,200	4,050	850	26.6%	850

TABLE 12: TOP 10 PROJECTED HIGHEST GROWTH OCCUPATION IN WISCONSIN FOR 2032 AVERAGE REQUIREMENTS AND WAGES

Occupation Title	Typical education needed for entry	Work experience in a related occupation	Median annual wage, 2022	% Of Median Wage
Ushers, Lobby Attendants, and Ticket Takers	No formal educational credential	None	\$27,650	59.7%
Cooks, Restaurant	No formal educational credential	Less than 5 years	\$34,110	73.7%
Nurse Practitioners	Master's degree	None	\$121,610	262.6%
Musicians and Singers	No formal educational credential	None	N/A	N/A
Computer Numerically Controlled Tool Programmers	Postsecondary nondegree award	None	\$60,800	131.3%
Logisticians	Bachelor's degree	None	\$77,520	167.4%
Fitness Trainers and Aerobics Instructors	High school diploma or equivalent	None	\$45,380	98.0%
Molders, Shapers, and Casters, Except Metal and Plastic	High school diploma or equivalent	None	\$39,590	85.5%
Amusement and Recreation Attendants	No formal educational credential	None	\$27,780	60.0%

Finally, PCG has included the top ten statewide '[Hot Jobs](#)' as outlined by the Wisconsin Department of Workforce Development. These are provided below.

TABLE 13: TOP 10 WISCONSIN 'HOT JOBS' PROJECTED GROWTH IN WISCONSIN FOR 2032

Occupation	Employment 2022	Projected Year 2032	Change Level	Change Percent	Average Annual Openings
Heavy and Tractor-Trailer Truck Drivers	54,310	57,900	3,590	6.6%	6,460
Sales Representatives, Wholesale and Manufacturing, Except Technical and Scientific Products	34,650	36,520	1,870	5.4%	3,640
Maintenance and Repair Workers, General	34,080	36,360	2,280	6.7%	3,520
General and Operations Managers	28,000	30,220	2,220	7.9%	2,610
Construction Laborers	20,510	22,950	2,440	11.9%	2,350
Accountants and Auditors	25,060	26,500	1,440	5.7%	2,390
Sales Representatives of Services, Except Advertising, Insurance, Financial Services, and Travel	16,650	17,550	900	5.4%	2,020
Welders, Cutters, Solderers, and Brazers	17,010	19,150	2,140	12.6%	2,120
Industrial Machinery Mechanics	12,420	15,580	3,160	25.4%	1,500
Carpenters	21,550	22,830	1,280	5.9%	2,160

TABLE 14: TOP 10 WISCONSIN 'HOT JOBS' AVERAGE REQUIREMENTS AND WAGES

Occupation Title	Typical education needed for entry	Work experience in a related occupation	Median annual wage, 2022	% Of Median Wage	Occupation Title
Heavy and Tractor-Trailer Truck Drivers	Post secondary non-degree	None	Short-term on-the-job training	\$50,110	108%
Sales Representatives, Wholesale and Manufacturing	High school diploma	None	Moderate-term on-the-job training	\$64,100	138%
Maintenance and Repair Workers, General	High school diploma	None	Moderate-term on-the-job training	\$45,900	99%
General and Operations Managers	Bachelor's degree	5 years or more	None	\$111,940	242%
Construction Laborers	No formal educational	None	Short-term on-the-job training	\$46,780	101%
Accountants and Auditors	Bachelor's degree	None	None	\$72,210	156%
Sales Representatives of Services	High school diploma	None	Moderate-term on-the-job training	\$59,720	129%
Welders, Cutters, Solderers, and Brazers	High school diploma	None	Moderate-term on-the-job training	\$49,390	107%
Industrial Machinery Mechanics	High school diploma	None	Long-term on-the-job training	\$60,420	130%
Carpenters	High school diploma	None	Apprenticeship	\$51,030	110%

3.3 POTENTIAL SERVICE POPULATION

This section relies on American Community Survey (ACS) 5-year estimates.

The potential DVR service population represents individuals with disabilities who are not currently being served by DVR, but who could potentially be served by DVR. Individuals are considered part of the service population if they are:

1. Currently unemployed
2. Likely to desire DVR services
3. Not receiving DVR services

According to the 2022 ACS there are 710,445 individuals in the civilian population in Wisconsin that self-identify as having a disability. However, a large portion of this population is very unlikely to seek out VR services because, due to their age, they are rarely seeking employment. 43.1% of individuals with a disability in Wisconsin are over the age of 65. In addition, the ACS does not ask employment questions of individuals who are under the age of 16. As such, we have limited our potential service population analysis to the working age population of Wisconsin (age 16 to 64).

Slightly over half of the 710,445 individuals with a disability in Wisconsin (50.6% or 359,865) are of working age. Individuals with disabilities constitute 9.6% of the state's total working age population. However, not all these individuals are currently considered to be in the labor force. To be in the labor force, an individual either needs to be currently employed, or they need to be actively seeking employment. According to the Bureau of Labor Statistics (BLS), an individual is considered unemployed only if they have [undertaken job search activities in the prior four weeks](#). Among those 359,865 working age individuals with a disability in Wisconsin, 40.4% (145,346) are currently employed, while 4.1% (14,904) are unemployed.

There is an 8.9% unemployment rate among working age Wisconsinites with a disability, a rate that approaches three times the unemployment rate (3.1%) of individuals in this age range without a disability. About eight in ten working-age individuals without a disability are currently employed.

Individuals currently receiving VR services who are not employed cannot be considered unserved, while individuals who are not currently seeking employment are also not seeking VR services. Thus, they should not be considered unserved. To calculate the potential service population, we removed individuals who are currently using DVR services from the estimated population of unemployed individuals with a disability:

**Unemployed individuals with a disability – currently in-service VR cases =
potentially unserved individuals**

Table 15 displays the number of working age unemployed individuals with a disability from the 2022 ACS 5-year estimates and subtracts the DVR open caseload of 12,652

working age individuals (status codes 10 to 20, of working age, 2023 data) to arrive at a total of 2,252 potentially unserved individuals.

TABLE 15: POTENTIAL DVR SERVICE POPULATION (MINIMUM ESTIMATE)

Number of Working Age Unemployed Individuals with a Disability	DVR Open Caseload	Number of Potentially Unserved Individuals
14,904	12,652	2,252

DVR noted that they are currently seeing an influx of individuals over age 65 seeking services according to anecdotal accounts from field staff. However, according to the ACS 5-year estimates, only 0.3% or 765 of Wisconsinites with a disability over the age of 65 were currently considered unemployed. Inclusion of this estimate would have a negligible impact on our estimate of potentially unserved individuals. As such, we have forgone factoring this estimate into our report to maintain consistency.

The number of potentially unserved individuals can fluctuate depending upon the number of individuals with disabilities who are in the labor force. As such, DVR education and outreach to people with disabilities may actually increase the potential pool of unserved individuals. This is because individuals who are not employed but are not currently looking for work are not considered ‘unemployed’ by official definitions. As such, they are categorized as not in the labor force. According to ACS, there are 194,033 (53.9%) working age individuals in Wisconsin with a disability that are not in the labor force, the largest group of working age individuals with a disability in Wisconsin. We have not included these individuals among the ‘unemployed’ as they are not actively seeking work.

It is possible that certain DVR activities could induce individuals with disabilities to return to the labor force. They would then be categorized as ‘unemployed’ as they actively use DVR services. The Bureau of Labor Statistics produces estimates on the rate at which people who are not in the labor force but want a job or are marginally attached to the labor force⁴. BLS considers individuals marginally attached to the labor force if they are discouraged (have not looked for work in the prior four weeks, and express reasons such as the lack of availability jobs, lack of jobs they qualify for, or reasons related to discrimination), or if they are not in the labor force due to medical or temporary caretaking needs.

The BLS estimates that nationally, about 4.8% of individuals with a disability who are not in the labor force fall into this category. If this rate holds true for Wisconsin, it will raise the number of potentially unserved individuals from 2,252 to 11,565 by including the 9,313

⁴ [Persons with a Disability – Labor Force Characteristics 2023](#)

(194,033 * 0.048) individuals of working age with a disability who are not actively seeking work but currently want a job.

TABLE 16: POTENTIAL UNSERVED POPULATION (MAXIMUM ESTIMATE)

Number of Working Age Unemployed or Would Like a Job with a Disability	DVR Open Caseload	Number of Potentially Unserved Individuals
24,217	12,652	11,565

Individuals who want a job but are not in the labor force could benefit from receiving information on DVR programs and services that help individuals achieve employment. They could also benefit from services to help them determine if entering the workforce is right for them. This might lead some of them to actively begin searching for employment, thus increasing the number of unemployed, working aged people with a disability in Wisconsin and, by extension, the pool of potentially unserved individuals.

3.3.1 Potential Pre-ETS Service Population

In addition to traditional VR services that help individuals gain and maintain employment, RSA requires that DVR reserve 15% of their funds to provide students with disabilities ages 14-21 with Pre-Employment Transition Services (Pre-ETS). No one agency is solely responsible for the provision of all transition services. Many individuals receive services from schools, VR, or other community providers and as such, there is no singular, all-inclusive count of those who receive transition services. PCG has formulated several methods of identifying the potential service population, but none should be viewed as definitive.

The Wisconsin Department of Public Instruction, in their [2022-2023 IDEA Performance Indicator data](#), estimates that there are about 17,244 students with Individualized Education Plans (IEPs) in grades eight through high school. Not all students with an IEP will qualify for full VR services or will be interested in DVR services. However, without reliable access to data on the specific eligibility of students or the services these students are receiving, we have provided a cautious, high-end estimate of potentially unserved students.

Table 17 provides the number of individuals who have IEPs. This likely understates the number of youth potentially available by DVR or other WIOA providers because it does not account for individuals outside of a public-school setting, or individuals who may be eligible for transition services but who do not have an IEP.

TABLE 17 POTENTIALLY UNDERSERVED SPECIAL EDUCATION STUDENTS

Count of Students (8 th Grade through High School) with IEPs
17,244

As stated, not every student with an IEP is eligible for full DVR services. In addition, individuals who are attending a public school and have been identified as needing the support of an IEP are potentially already receiving transition services through a non-VR source. There are also individuals out of high school who are no longer tracked using the IDEA metrics presented above, who may still be of an eligible age to receive some level of services from DVR. The following paragraphs explore how many of these individuals may be underserved.

The ACS estimates that there are 60,003 individuals aged 14 to 24 with a disability in Wisconsin that potentially qualify for services. Roughly 53.9%, or 32,348 of these individuals are currently enrolled in public or private school or college. The remaining 46.1% or 27,655 have not attended school within the three months prior, (as seen in Table 18) and all of these students could potentially receive transition services. They are very unlikely to be considered unemployed based on the definition presented above, as it is unlikely that they are currently looking for employment.

TABLE 18: YOUTH WITH DISABILITIES BY SCHOOL ATTENDANCE

School Status	Age 14 to 18	Age 19 to 21	Age 22 to 24	Total
Not attending school	2,064	12,446	13,145	27,655
Attending public school or college	19,234	6,164	2,658	28,056
Attending private school or college	1,907	2,005	380	4,292
Total	23,205	20,615	16,183	60,003

4 RESULTS AND ANALYSIS

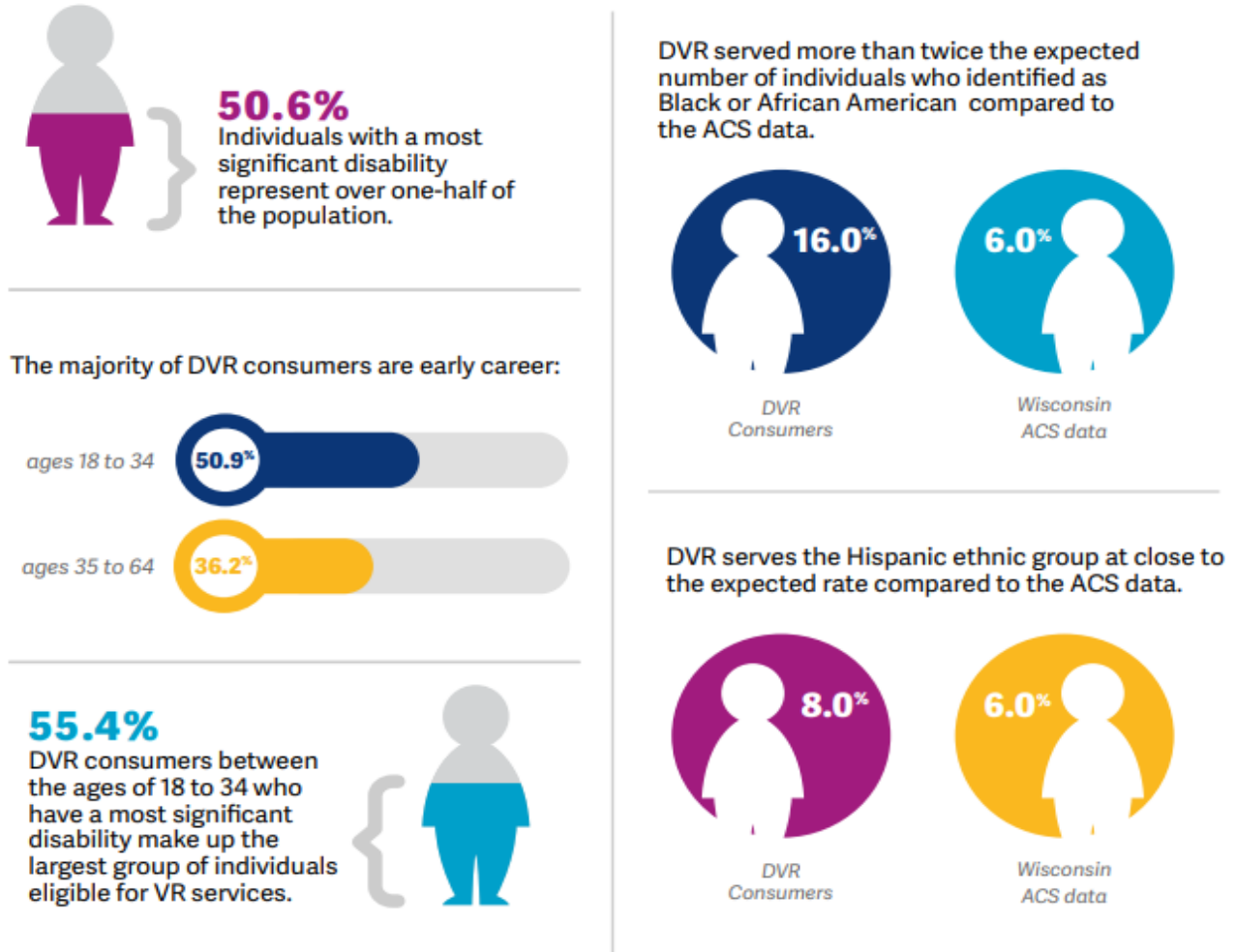
In this section we present our detailed findings, including the results of specific questions we asked and topics we explored during our project research and information gathering phase. We have included more detail on how we collected, categorized, and analyzed data in the Methodology section of this report. For further insight into the topics presented here, see the Summary of CSNA Required Analysis section of this report, where we have highlighted the most important and interesting results.

In this section we primarily use DVR program year (PY) 2022 case management data, the ACS 1-year estimates for 2022, and the ACS 5-year estimates for 2018-2022. We have used the DVR case management data whenever we refer to the DVR population. We have used ACS 1-year data to refer to the larger population of individuals with a disability (ACS %) and used the ACS 5-year estimates to refer to the smaller population of service age individuals with a disability (ACS VR Service Age).

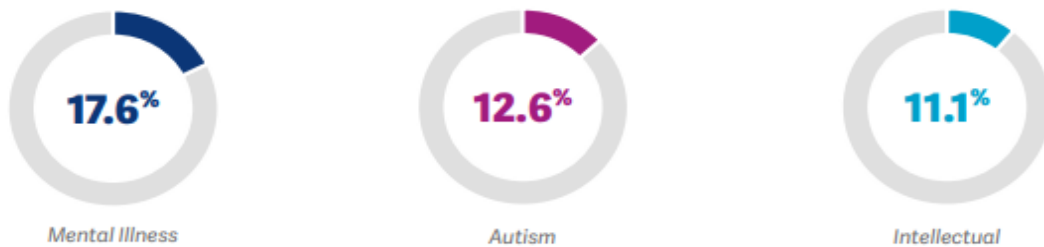
4.1 DEMOGRAPHIC DATA

Below we present the results of our demographic analysis of the DVR population (consumers receiving services), including significance of disability, geographic information, age, race and ethnicity, and primary disability.

FIGURE 3: DEMOGRAPHICS HIGHLIGHTS



The largest caseloads by primary disability are mental illness, autism, and intellectual.



Highlights of our demographic data analysis include:

- Individuals with a most significant disability represent over one-half of the population.
- The majority of DVR participants are early career; ages 18 to 34 followed by ages 35 to 64.

- DVR consumers between the ages of 18 to 34 who have a most significant disability make up the largest group of individuals eligible for VR services.
- DVR served more than twice the expected number of individuals who identified as Black or African American compared to the ACS data
- DVR serves the 'Hispanic' ethnic group at close to the expected rate compared to the ACS data.
- The largest caseloads by primary disability are mental illness, autism spectrum disorder, and intellectual/developmental disability.

PCG gathered demographic data on cases closed in PY2022. Table 19 illustrates grouped DVR case statuses. The largest group, Ready for Employment (22.7%), comprised almost a quarter of the total. More than twice as many cases closed without employment (26.5% Closed as Applicant, Closed After IPE, Closed Before IPE, and Closed Potentially Eligible) versus closed with employment (11.0% Closed Employed).

TABLE 19 CASE STATUSES WITH SERVICES GROUPED

Status – Detailed	Status – General	Count	Percent
Potentially eligible	Open - Not Yet in Service	564	2.1%
Applicant	Open - Not Yet in Service	1,738	6.5%
Wait List	Open -Not Yet in Service	1	0.0%
IPE Development	Open – In Service	1977	7.4%
Counseling Only	Open – In Service	361	1.4%
Physical and Mental Restoration	Open – In Service	141	0.5%
Training	Open – In Service	4,952	18.6%
Ready for Employment	Open – In Service	6,031	22.7%
In Employment	Open - Employed	843	3.2%
Closed As Applicant	Closed	837	3.1%
Closed - Employed	Closed	2,918	11.0%
Closed - After IPE	Closed	3,678	13.8%
Closed - Before IPE	Closed	2,287	8.6%
Closed - Potentially Eligible	Closed	269	1.0%
Total		26,597	100.0%

4.1.1 Significance of Disability

This section describes the distribution of disability significance for DVR cases within Program Year 2022. Significance of disability is a federally specified measure determined by the number of functional limitations identified during the eligibility process. The categories from least to most significant (impacted) include non-severe disability, significant disability, and most significant disability. PCG analyzed the overall DVR population by significance of disability. Individuals with a most significant disability accounted for more than one-half of the population at 50.6%.

An individual with a **non-severe disability** is an individual who has a physical, mental, or sensory impairment or combination of impairments but does not otherwise meet the criteria for functional limitations and service need for either an individual with a significant disability or a most significant disability.

An individual with a **significant disability** is an individual who has a severe physical, mental or sensory impairment, or combination of impairments, that creates significant limitations in one or more functional capacities that prevents successful employment. They are expected to require multiple DVR services that contribute to the achievement of competitive, integrated employment over an extended period of time to complete.

An individual with a **most significant disability** is an individual who has a severe physical, mental, or sensory impairment, or combination of impairments, that creates significant limitations in two or more functional capacities that prevents successful employment.

Because of the complex nature of determination, individuals cannot assess their own significance of disability. In fact, there tends to be notable differences between assessments in professional settings. As such, there are no population statistics that confirm the rate of service for different levels of disability.

Table 20 displays significance of disability for individuals in our sample. Individuals with a ‘most significant disability’ (50.6%) were the largest group and ‘Non-Severe Disability’ (0.2%) the smallest.

TABLE 20: SIGNIFICANCE OF DISABILITY

Significance of Disability	Count of DVR Population	Percent of DVR Population
Most Significant Disability	13,468	50.6%
Significant Disability	10,041	37.8%
Non-Severe Disability	57	0.2%
Undefined	3,032	11.4%
Total	26,598	100%

Table 21 and Table 22 show the same group of individuals by WDA region. While some variation is expected, significance of disability is not necessarily linked to region so we would expect this distribution to be more-or-less random. However, several regions display different patterns of determination. Region 7 has a large number of ‘Undefined’ individuals (29.0% vs 11.4% statewide); these are, individuals whose specific disability and level of need has not yet been assessed. This is due to a large number of cases listed as ‘Potentially Eligible’ (16.1% of individuals in Region 7, as seen in Table 23). DVR staff have noted this is most likely due to an effective and popular summer program for youth with disabilities and that program may have interacted with timing of the data provided. Also, A Potentially Eligible consumer does not have their eligibility determined

therefore a primary disability is not reported to RSA. Region 9 has more individuals assessed with a most significant disability (63.1%) versus 50.6% statewide.

TABLE 21: SIGNIFICANCE OF DISABILITY BY REGION (WDA REGIONS 1-6)

Significance of Disability	1	2	3	4	5	6
Most Significant Disability	45.8%	47.2%	51.8%	54.0%	49.5%	53.6%
Significant Disability	41.1%	41.2%	39.6%	35.8%	37.1%	34.7%
Non-Severe Disability	0.6%	0.3%	1.0%	0.0%	0.0%	0.1%
Undefined	12.5%	11.2%	7.6%	10.2%	13.3%	11.6%

TABLE 22: SIGNIFICANCE OF DISABILITY BY REGION (CONTINUED; WDA REGIONS 7-11)

Significance of Disability	7	8	9	10	11
Most Significant Disability	35.9%	57.6%	63.1%	52.3%	45.5%
Significant Disability	35.0%	29.8%	31.3%	39.9%	39.3%
Non-Severe Disability	0.0%	0.1%	0.0%	0.1%	0.0%
Undefined	29.0%	12.4%	5.6%	7.8%	15.2%

TABLE 23: PERCENT OF CASES IN POTENTIALLY ELIGIBLE STATUS WITHIN WDA

WDA	% Potentially Eligible
1	3.4%
2	0.2%
3	0.3%
4	2.1%
5	2.2%
6	2.1%
7	16.1%
8	3.4%
9	0.0%
10	0.3%
11	3.8%

4.1.2 Geographic Distribution

In this section PCG analyzed the population served by DVR in PY2022 and compared it to the population of individuals with a disability in Wisconsin. We define the DVR population as any case that was open at any point in PY2022, regardless of outcome or

status. PCG provides comparisons to two different definitions of the Wisconsin population with a disability—the ACS percentage represents all individuals in Wisconsin with a disability according to the ACS 1-year estimates. The ACS (VR Service Age) population refers to Wisconsin individuals ages 14 to 64 with a disability from the ACS 5-year estimates.

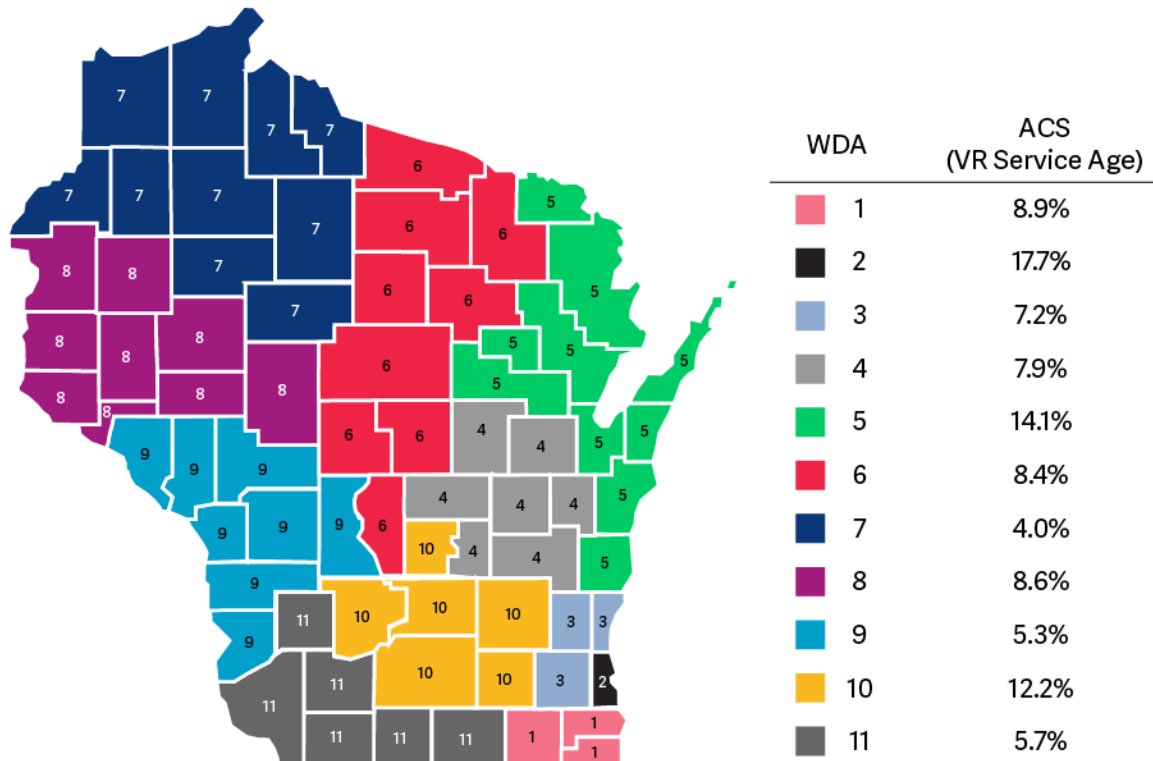
PCG analyzed data from the eleven DVR WDAs. In Table 24 we compare the DVR population served in PY2022 to the ACS population with a disability by WDA. WDA 2 had the largest population of individuals with a disability, and WDA 7 had the smallest across all measures. The distribution of the DVR-served population roughly correlates to the distribution of the population of Wisconsin. This is what we would expect of a service provider serving a large proportion of the potential service population and suggests there are few geographic barriers to receiving services.

TABLE 24: POPULATION BY WDA

WDA	DVR %	ACS %	ACS (VR Service Age)
1	8.5%	8.6%	8.9%
2	18.5%	16.6%	17.7%
3	9.7%	8.9%	7.2%
4	9.9%	10.5%	7.9%
5	9.2%	11.3%	14.1%
6	7.1%	8.3%	8.4%
7	4.2%	4.1%	4.0%
8	7.4%	8.4%	8.6%
9	5.4%	5.4%	5.3%
10	14.1%	12.4%	12.2%
11	6.1%	5.6%	5.7%

The graphic below illustrates the eleven DVR WDAs and provides a visual reference for understanding their geographic locations. It supports and helps to conceptualize the population distribution within each WDA.

FIGURE 4: WISCONSIN'S WORKFORCE DEVELOPMENT AREAS (WDA)



4.1.3 Age

The majority of DVR consumers are between the ages of 18 to 34 (50.9%) followed by ages 35 to 64 (36.2%). Compared to the ACS estimates, individuals between the ages of 18 to 34 are represented over three times the rate of services provided at random, and those between the ages of 5 to 17 and 35 to 64 are served at close to the expected rate. Conversely, the DVR service population age group 65 and older are represented at lower-than-expected rates compared to the ACS population for these same age group.

The age distribution may reflect the expected tendency of younger individuals to seek employment supports as they first establish their careers. While the majority of participants across all age groups were categorized as most significantly disabled, the percentage of individuals categorized with a most significant disability generally increases with age in the overall population of individuals with a disability. This may be due to several factors:

- While DVR's service population does not align with the population with a disability, the differences present are expected given DVR services, goals, and the focus of the WIOA legislation.

- DVR focuses on career exploration and counseling, services that tend to be more useful for individuals who are early in their career.
- RSA mandates that 15% of DVR spending target students and youths, further supporting this trend.
- Individuals who are older may choose to leave the workforce once they become most significantly disabled (more likely with age).



DVR’s service population is significantly younger than the population of Wisconsin as a whole. DVR should consider the preferences of this younger population and tailor its approach to communication and service delivery accordingly.

Data

PCG analyzed DVR service population age groups as shown in Table 25. All DVR service population age groups from the age 5 to 64 are represented at higher rates compared to ACS populations for those same age groups. Notably, DVR service population age group 18 to 34 are represented over three times the expected rate of the ACS population for that age group. Conversely, DVR service population age groups 65 and older are represented at lower-than-expected rates compared to the ACS populations for these same age groups. The ACS (VR Service Age) represents the percentage of the Wisconsin population ages 14 to 64, the demographic typically served by VR.

TABLE 25: POPULATION COMPARED TO ACS POPULATION WITH A DISABILITY BY AGE

Age	DVR %	ACS %	ACS (VR Service Age)
Under 5	0%	0.3%	N/A
5 to 17	10.1%	7.0%	4.8%

Age	DVR %	ACS %	ACS (VR Service Age)
18 to 34	50.9%	15.3%	24.7%
35 to 64	36.2%	35.0%	70.5%
65 to 74	2.6%	18.6%	N/A
75 and older	0.3%	23.9%	N/A

Table 26 displays the DVR population by significance of disability and age. **DVR consumers who are between the ages of 18 to 34 who have a most significant disability (55.4%) make up the largest age group of individuals eligible for VR services.** While age 75 and older represent the smallest percentage of individuals with a most significant disability (24.3%), they were the largest ‘Significant Disability’ age group at 61.5%.

In Table 26 individuals are considered undefined when no eligibility finding was present in the data provided by DVR. The majority of these cases were those in a pre-eligibility determination status.

TABLE 26: POPULATION—SIGNIFICANCE OF DISABILITY BY AGE

Age	Most Significant Disability	Significant Disability	Non-Severe Disability	Undefined
Under 5	0%	0%	0%	0%
5 to 17	43.8%	31.8%	0%	24.5%
18 to 34	55.4%	34.1%	0.1%	10.5%
35 to 64	47.3%	43.3%	0.3%	9.2%
65 to 74	34.9%	53.9%	2.1%	9.2%
75 and older	24.3%	61.5%	3.9%	10.3%

4.1.4 Race and Ethnicity

Racial and ethnic minorities are equitably represented in the DVR service population. In fact, DVR’s PY22 service population suggests racial and ethnic minority individuals are somewhat over-represented compared to the statewide distribution, even after accounting for individuals outside of service age ranges.

PCG collected race and ethnicity information on consumers who responded to the participant survey. Table 27, Table 28, and Table 29 present caseloads by race, DVR participants by race and age, and caseloads by ethnicity, respectively. The largest groups as a percent of DVR caseload are ‘White’ (73.2%) and ‘Not Hispanic’ (90.5%). The case management data and the ACS data categorize race differently, which leads to discrepancies in the race categories available in each dataset. As a result, some race categories in the ACS data may not be applicable or present in the case management data, and vice versa. This difference in categorization is important to consider when analyzing and comparing these datasets. These discrepancies are recorded in the table below as “non-applicable,” or “N/A.”

DVR served more than twice the expected number of individuals who identified as Black or African American compared to the ACS data.

Table 27 shows that DVR served more than twice the expected number of individuals who identified as Black or African American (16.0%) compared to the ACS data which reports 5.97% of Wisconsinites as Black or African American.

TABLE 27: CASELOADS BY RACE

Race	DVR %	ACS %	ACS (VR Service Age)
White	73.2%	80.40%	79.9%
Black or African American	16.0%	5.97%	10.3%
American Indian or Alaska Native	3.0%	*	1.3%
Asian	1.9%	2.94%	1.8%
Native Hawaiian or Other Pacific Islander	*	*	*
Some Other Race Alone	N/A	1.96%	1.9%
Population of two or more races	3.7%	7.93%	4.7%
Undefined	1.9%	N/A	N/A

*=less than 1%

Table 28 displays DVR participants by race and age. The greatest percentage of non-white consumers fall in the 5 to 17 age range (26.4%) followed closely by the 65 to 74 age range (26.2%). While individuals categorized as ‘White’ make up the majority of the population served across all age categories, younger individuals are more racially diverse. Those who identify as 'Black or African American' are represented highest in age group 65 to 74 (21.4%) but are fairly evenly distributed across ages 5 to 64.

American Indian or Alaskan Native and other multi-racial individuals are mostly more highly represented in the 5- to 17-year-old group, after which the rates at which they appear decrease. Black or African American individuals become a larger part of the service population as age increases, up until 74 years of age, while Whites remain mostly steady across all age categories up until age 75 and older, where they increase.

Those who identify as 'American Indian or Alaska Native' are represented highest in age group 5 to 17 (6.2%) but are fairly evenly distributed across the remaining age groups.

DVR staff suggested that this is likely driven by a popular summer program for youth in northwestern Wisconsin. The Pre-ETS Summer Tribal program coordinated with specific Tribes and enrolled students who are considered Potentially Eligible for VR services. This is the correct categorization for these individuals under current WI DVR policy.

TABLE 28: DVR PARTICIPANTS BY RACE AND AGE

Race	5 to 17	18 to 34	35 to 64	65 to 74	75 and older
White	73.5%	74.4%	71.5%	71.6%	83.3%
Black or African American	11.8%	14.4%	19.2%	21.4%	9.0%
American Indian or Alaska Native	6.2%	2.8%	2.6%	1.2%	2.6%
Asian	2.5%	2.4%	1.0%	0.9%	0%
Native Hawaiian or Other Pacific Islander	0.3%	0.2%	0.2%	0.3%	0%
Multi Race	5.6%	4.4%	2.4%	2.4%	3.8%
Undefined	0%	1.4%	3.1%	2.2%	1.3%

Table 29 displays caseloads by ethnicity. DVR served the ethnic group ‘Hispanic’ (8.0%) at about the rate that ‘Hispanic’ is represented in the overall WI population according to the ACS data (7.6%).

TABLE 29: CASELOADS BY ETHNICITY

Ethnicity	DVR % of Total	ACS % of Total - 2022	ACS (VR Service Age)
Not Hispanic	90.5%	92.4%	94.2%
Hispanic	8.0%	7.6%	5.8%
Undefined	1.5%	N/A	N/A

Table 30 displays significance of disability by race and priority. The majority of each group falls in the ‘most significant disability’ category. This table shows that non-white individuals are less likely to have a most significant disability (44.7% vs. 52.8%).

This difference is driven in large part by individuals who are American Indian. Almost 1-in-5 American Indians are potentially eligible but do not have a significance of disability finding on record. This likely reflects the significant American Indian participation in DVR-sponsored potentially eligible Pre-ETS programs coordinated with the Tribes in northern Wisconsin and the timing of the data set rather than a true difference in the rate of disability findings. Consumers considered “Potentially Eligible” do not have an eligibility determination.

TABLE 30: POPULATION SIGNIFICANCE OF DISABILITY BY RACIAL OR ETHNIC MINORITY

Significance of Disability	White	Non-White
Most Significant Disability	52.8%	44.7%
Significant Disability	37.0%	40.0%
Non-Severe Disability	0.3%	0.1%
Undefined	10.0%	15.3%

4.1.5 Primary Disability

In this section we have evaluated DVR consumers' primary disability information. We have not made any comparisons to the wider population in this section. The ACS collects disability information as a series of questions on functional limitations to everyday life and does not attempt to understand or report on individual diagnosis or groups of diagnoses. DVR data is more specific and built for the purpose of providing VR services rather than general information. As such, comparisons between the two data sources are not possible.

Table 31 shows DVR caseload by primary disability. The largest primary disability is 'Mental Illness' (17.6%) followed by 'Autism' (12.6%) and 'Intellectual' disabilities (11.1%). The 'Eligibility Undetermined' disability represents individuals who recently applied for services but haven't yet had their documentation reviewed/needs assessed and Potentially Eligible cases who do not have their eligibility determined or tracked.

TABLE 31: PRIMARY DISABILITY OF DVR CASELOAD

Primary Disability	Percent
Mental Illness	17.6%
Autism	12.6%
Intellectual	11.1%
Orthopedic	9.5%
Learning Disabilities	7.2%
Attention-Deficit/Hyperactivity Disorder	6.9%
Other Physical	6.3%
Brain Injuries	1.7%
Deaf / Hard of Hearing	3.4%
Blind / Visual	2.0%
Congenital Condition or Birth Injury	1.3%
Alcohol and Other Drug Abuse	0.9%
Other	8.1%
Eligibility Undetermined	11.3%

Examining disability prevalence by significance of disability further highlights mental health needs. As shown in Table 32, mental illness is documented as the most prominent

disability among both those considered most significantly disabled (19.9%) and significantly disabled (20.0%). Mental health is not only widely needed, but also, most prominent among the populations most in need.

TABLE 32: PRIMARY DISABILITY BY SIGNIFICANCE OF DISABILITY

Primary Disability	Most Significantly disabled	Significantly Disabled	Non-Severe Disability
Attention-Deficit/Hyperactivity Disorder	6.2%	10.1%	0.0%
Alcohol and Other Drug Abuse	0.8%	1.1%	0.0%
Autism	18.7%	8.2%	1.7%
Blind / Visual	2.0%	2.5%	0.0%
Brain Injuries	2.6%	1.1%	0.0%
Congenital Condition or Birth Injury	2.0%	0.8%	0.0%
Deaf / Hard of hearing	1.1%	6.9%	82.8%
Intellectual	18.2%	5.1%	0.0%
Learning Disabilities	5.0%	12.3%	0.0%
Mental Illness	19.9%	20.0%	1.7%
Orthopedic	8.9%	13.3%	5.2%
Other	9.6%	8.5%	1.7%
Other Physical	4.9%	10.1%	6.9%

4.2 SERVICE UTILIZATION AND OUTCOMES

PCG analyzed participant services and outcomes in the DVR program. We have presented our DVR services analysis (using case management data) alongside staff, service provider, and community partner perceptions of these services. We have also analyzed the results of DVR outcomes data.

DVR staff perceptions of services highlights are identified in section [4.2.2 DVR Staff Perceptions of Services](#):

- More than three-quarters agree that services are rendered in convenient locations, that DVR offices are open at convenient times, and that consumers can easily navigate meeting places.
- Only one-third of DVR staff reported having the time to do the tasks expected of them.
- The majority of DVR staff reported that service providers did not have enough staff.
- DVR staff selected referrals to community resources as the most commonly needed supportive service for DVR consumers.

- 9-in-10 staff reported that at least some of the consumers they work with required counseling or mental health services.
- DVR staff reported transportation, mental health care, and housing as the greatest basic needs for DVR consumers and criminal offences were the most often cited legal barrier for DVR consumers.
- Limited work experience was the most commonly reported job-related barrier for DVR consumers.
- DVR staff perceive Asian, Hispanic, Black or African American, transient and homeless, and those who are blind or have vision loss as most unserved / underserved.

Service provider perception of services highlights are identified in section [4.2.3 Service Provider Perceptions of Services](#):

- Almost nine-in-ten service providers would recommend DVR services to individuals with disabilities in their communities.
- Service providers were least likely to agree that DVR provided enough consumer information to them to provide effective services, and also less likely to agree that problems they raised to DVR were resolved productively.
- Low rates paid by DVR, insufficient staffing levels, and difficulty working with DVR systems were identified as the top three greatest challenges to working with DVR. Service providers said the most effective method of improving DVR services would be to raise service rates. DVR recently increased rates when this data was collected, and that adjustment is unlikely to factor into provider assessments of current rate adequacy.

Employer perception of service highlights are identified in section [4.2.4 Employer Perception of Services](#):

- Almost 50% of employers worked with DVR to connect a DVR job seeker to permanent employment.
- Of those employers who created a customized employment opportunity, 12-out-of-13 employers reported this program as very successful or somewhat successful.
- About 88% of employers indicated that they would recommend DVR services to their colleagues.
- Most employers were either very interested or somewhat interested in learning about the services DVR provides directly to businesses.
- More than 70% of all employers were very interested or somewhat interested in using DVR's talent pool of job seekers with disabilities to meet business needs.
- Employers cited concerns about individuals meeting the physical demands or roles, reliable transportation, and lack of applicants or referrals from service providers as barriers to hiring individuals with disabilities.

Closure and career outcome highlights for employment wages and hours of participants who exited VR services in PY2022:

- The top three job placements per DVR case closures were office and administrative support, food preparation and serving, and production.
- Individuals with a non-severe disability had the highest successful closure rate of 91.2%, followed by significant disability (48.1%) and most significant disability (44.1%) respectively.
- The race 'Asian' had the highest successful closure rate at 58%. Black consumers had a successful closure rate of 33%, the lowest of any race measured and 16-percentage-points lower than White individuals.

4.2.1 Services and Expenditures

PCG analyzed variations in average number of services and average expenditures (total cost of services) across DVR populations to highlight groups that may be unserved or underserved, leading to opportunities for improvement.

We compared consumers' length of time in services to demographic information such as significance of disability, racial and ethnic groups, age groups, and type of services. We only analyzed cases that contained both service start and end (closure) dates. There were 1,931 DVR cases that included spending for only non-service-related items such as eligibility determinations, assessments, transportation, and Pre-ETS assessment services. We removed these cases from our analysis as DVR did not provide significant services to these individuals, or they were determined ineligible for services.

FIGURE 5: SERVICES AND EXPENDITURES HIGHLIGHTS



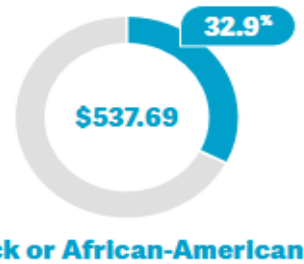
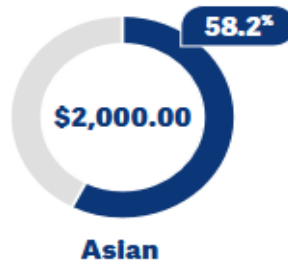
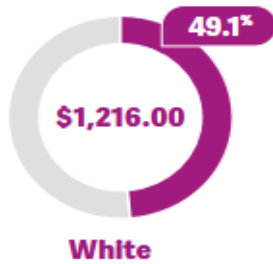
709.6 days

Those who are MSD have the highest average number of services and the longest average length of service regardless of their outcome compared to other disability categories.

Those who are White and MSD averaged 710.9 days in service vs. non-White and MSD who averaged 705.0 days in service, a difference of less than 1.0% (0.7%).



White and Asian Wisconsinites had higher average total cost of services than Black or African American Wisconsinites.



White and Asian Wisconsinites received notably higher median spending and had higher rates of successful closure compared to their Black and African American counterparts.

Those who did not obtain and retain employment spent an average of **86 fewer days** in services.



Highlights of our services and expenditure findings include:

- Individuals determined to have a most significant disability spent a greater average number of days in services after the eligibility was determined but prior to case closure, compared to other disability categories.
- Individuals who are White and most significantly disabled spent on average 710.9 days in service compared to individuals who are non-White and most significantly disabled who spent on average 705.0 days in service, a difference of less than 1% (0.7%.)
- White and Asian Wisconsinites had higher average total cost of services than Black or African American Wisconsinites.
- White and Asian Wisconsinites received notably higher median spending and had higher rates of successful closure compared to their Black or African American counterparts,
- Individuals who did not obtain and retain employment spent an average of 86 fewer days in services.

Data

Table 33 shows the average number of service days by significance of disability and closure reason. Those who were most significantly disabled and were Closed Employed had the highest average service days (788.2). Those who had a non-severe disability and Outcome Other than Rehabilitated after IPE Services had the lowest average service days (153.3).

Individuals who were most significantly disabled have the longest average length of service (709.6) no matter their outcome. This is unsurprising, as this group is likely to have the highest level of need and require more supports. Closure with employment also took more time than other outcome reasons across all significance of disability categories.

TABLE 33: MEAN AVERAGE NUMBER OF SERVICE DAYS BY SIGNIFICANCE OF DISABILITY AND CLOSURE REASON

Significance of Disability	Count	Outcome Other than Rehabilitated after IPE Services	Closed - Employed	Combined Average
Most Significant Disability	3,904	647.8	788.2	709.6
Significant Disability	2,857	643.8	673.2	657.9
Non-Severe Disability	34	153.3	193.3	189.8
All Cases	6,795	645.8	731.4	685.2

Table 34 shows the mean average service expenditure by significance of disability. Those categorized as 'Non-Severe Disability' had the highest average cost of services (\$4,925.40). DVR staff noted that most individuals with non-severe disabilities seek financial assistance receiving assistive technology such as hearing aids. These sorts of

technologies have disproportionately high service costs but present little burden on DVR’s staff or provider network.

Due to the small number of cases categorized as ‘non-severe disability’ one significant cost outlier had a large impact on average service spending. While this case did not have the highest cost in the data set, the relatively small number of non-severe disability cases in the data set overall meant that this case had an outsized impact on average cost of services. If this single case were removed, those categorized as ‘Non-Severe Disability’ would have had a \$2,242.23 average cost of services.

TABLE 34: MEAN AVERAGE SERVICE EXPENDITURES BY SIGNIFICANCE OF DISABILITY

Significance of Disability	Count	Average Total Cost of Services
Most Significant Disability	3,904	\$ 2,339.42
Significant Disability	2,857	\$ 1,682.43
Non-Severe Disability	34	\$ 4,925.40

Table 35 shows the average service days by racial or ethnic minority status and significance of disability. As seen below, there is relatively little difference (<1.0%) in the average case duration between individuals who are ‘White’ and ‘Non-White’ if they have the same significance of disability. However, the sample sizes of those with a ‘Non-Severe Disability’ were too small to support analysis.

TABLE 35: AVERAGE SERVICE DAYS BY RACIAL OR ETHNIC MINORITY STATUS AND SIGNIFICANCE OF DISABILITY

Significance of Disability	White	Non-White	% Difference
Most Significant Disability	710.9	705.0	0.8%
Significant Disability	658.4	656.5	0.3%
Non-Severe Disability	*	*	*
Total	686.4	681.5	0.7%

* Suppressed for small sample size

Additionally, Table 36 shows that the average expenditures provided to Hispanic and Non-Hispanic participants were very similar.

TABLE 36: AVERAGE EXPENDITURE AND NUMBER OF SERVICES BY RACE OR ETHNICITY - HISPANIC

Race or Ethnicity	Average Total Cost of Services
Hispanic	\$1,988.03
Non-Hispanic	\$2,091.32
Undefined	\$1,581.43

Next, we analyzed average expenditures (total cost of services) by age group. Table 37 delineates average service expenditures by age group for all eligible participants. Those

75 and older had the largest average expenditure at \$3,057.70 while the age group '35 to 64' had the second largest average expenditure at \$2,116.32. Individuals under the age of 18 had the lowest average costs of services at \$1,151.75.

While this is a large difference among the oldest consumers of services, older individuals are likely to have higher needs. This population is also a relatively small percentage of DVR's service population, and this may affect the mean average. Younger individuals are most likely to have higher Pre-ETS spending and more of their average cost is taken up in those categories.

TABLE 37: AVERAGE SERVICE EXPENDITURES BY AGE GROUP

Age	Average Total Cost of Services
5 to 17	\$1,151.75
18 to 34	\$2,050.92
35 to 64	\$2,116.32
65 to 74	\$2,069.89
75 and Older	\$3,057.70
All Ages	\$2,076.12

Table 38 details the average total cost of services by WDA. Individuals living in WDA 8 had the highest average expenditure at \$2,905.41. Generally, southeastern Wisconsin (Regions 1, 2, and 10) had lower average service costs.

TABLE 38: AVERAGE SERVICE EXPENDITURE BY WDA

WDA Region	Average Total Cost of Services
1	\$1,915.07
2	\$1,579.91
3	\$2,546.71
4	\$2,588.18
5	\$1,933.46
6	\$2,103.00
7	\$1,904.51
8	\$2,905.41
9	\$2,536.69
10	\$1,593.91
11	\$1,961.42

Table 39 shows the average expenditure (total cost of services) by race or ethnicity. Asian Wisconsinites had the highest average expenditure at \$2,820.69 and participants without a defined race had the lowest average expenditure at \$1,362.73, about half that of the highest group.

These differences may be due, in part, to differences in geographic distribution. It is often more difficult to identify providers in rural areas, and these providers may have higher costs. The groups with the lowest average spending tend to be concentrated in urban WDA 2 (Black or African American: 57.1% of this population, Multi Race: 20.1%, Undefined: 31.6%). While Native Americans are also highly concentrated in WDA 7 (42.2%), their low spending may be more driven by the relative youth of that cohort.

TABLE 39: AVERAGE EXPENDITURE BY RACE OR ETHNICITY

Race or Ethnicity	Average Total Cost of Services
Asian	\$2,820.69
White	\$2,194.66
American Indian or Alaska Native	\$1,628.23
Black or African American	\$1,635.64
Native Hawaiian or Other Pacific Islander	*
Multi Race	\$1,552.97
Undefined	\$1,362.73

*Suppressed due to small sample size

Table 40 details racial distribution by geography (WDA). While White and Asian populations are disbursed throughout the state, other racial groups tend to be high concentrated in a small number of WDAs. American Indian or Native Americans are heavily concentrated in WDA 7, while Black, multi-racial, and those without a defined race in the data are most prevalent in WDA 2. As such, differences in practice, needs, or providers in those areas could have an outsized impact on the service population by race.

TABLE 40: PARTICIPANT RACE BY WDA

WDA	American Indian	Asian	Black	Native Hawaiian or Pacific Islander	Multi-Race	Undefined	White
1	2.5%	7.8%	11.6%	*	8.6%	7.1%	8.1%
2	6.9%	16.6%	57.1%	*	20.1%	31.6%	10.2%
3	1.7%	13.6%	3.7%	*	9.8%	5.9%	11.3%
4	5.6%	9.0%	3.8%	*	8.0%	7.9%	11.6%
5	15.6%	11.4%	2.8%	*	10.1%	8.5%	10.2%
6	5.6%	10.0%	1.2%	*	5.9%	5.3%	8.4%
7	42.2%	1.4%	0.4%	*	7.2%	2.2%	3.4%
8	10.0%	5.6%	1.3%	*	5.6%	5.5%	8.7%
9	3.6%	2.4%	1.1%	*	4.5%	5.1%	6.5%
10	3.8%	18.0%	13.3%	*	16.0%	16.2%	14.5%
11	2.6%	4.2%	3.6%	*	4.0%	4.9%	7.0%

*Suppressed due to small sample size

To better understand these differences in spending, PCG analyzed all spending medians by race. The following subsection works entirely in median spending (as opposed to mean) to better compensate for outlier spending and is inclusive of all types of spending reported among closed cases, regardless of age or service. As such, the averages presented here may differ from elsewhere in this report. However, this approach makes understanding differences in case spending more comprehensive and allows us to mitigate smaller sample sizes.

Table 41 shows median spending by race, including the percentage of total median spending that represents.

TABLE 41: MEDIAN TOTAL SERVICE SPENDING BY RACE

Race	Median Spending (\$)	Median Spending (% of total median)
American Indian	\$550.00	54.00%
Asian	\$2,000.00	196.50%
Black	\$537.69	52.80%
Hawaiian Pacific	\$1,103.50	108.40%
Multi Race	\$635.00	62.40%
Undefined	\$500.00	49.10%
White	\$1,216.00	119.50%
Total	\$1,017.97	100.00%

This shows that non-White, non-Asian participants receive notably lower spending, in addition to lower rates of successful closure. This may be due to DVR’s payment models, which strongly lean toward milestone payments for different services. Individuals with whom DVR loses contact are not likely to complete important milestones required for payment.

To support this analysis, PCG analyzed the number of days between major case events for individuals of different races. The following tables reflect all cases that have a listed date for completion regardless of spending, as capturing cases that did not receive services is critical to this analysis. Counts will differ from other date analyses in this section.

Table 42 displays the mean average days between major case benchmarks recorded in DVR case management data. All racial groups meet RSA guidelines for timeliness⁵. While

⁵ [Cerf :: 34 CFR 361.41 -- Processing referrals and applications. erg :: 34 CFR 361.45 -- Development of the individualized plan for employment.](#)

there are differences in case timeliness by race, these are generally small. The only exceptions are small groups who are more prone to outlier values.

TABLE 42: MEAN AVERAGE DAYS BETWEEN CASE BENCHMARKS BY RACE

Race Category	Application to Eligibility (Days)	Eligibility to IPE (Days)	IPE to Service Start (Days)	Service Start to Closure (Days)
American Indian	43.1	62.4	27.8	513.0
Asian	39.3	53.1	39.9	695.1
Black	42.5	61.7	43.1	737.5
Hawaiian/Pacific Islander	40.7	81.2	45.7	453.0
Multi Race	41.2	57.6	41.4	661.9
Undefined	44.8	68.2	39.5	432.0
White	39.5	56.5	36.6	686.4

Analysis

PCG analyzed data to identify trends related to average expenditures (total cost of services). Identifying variations in these metrics across DVR populations allowed us to highlight groups that may be unserved or underserved, leading to opportunities for improvement.

Significance of Disability

Several trends emerge when we consider length of time in services. Individuals determined with a most significant disability spent a greater average number of days in services compared to other disability categories. Additionally, individuals who did not obtain and retain employment spent an average of 86 fewer days in services, likely due to factors such as personal motivation and service structure. First, individuals who do not secure employment may disengage from services earlier because they feel discouraged and/or perceive services as ineffective. Disengaging from services is both a cause of and an effect of the perception of ineffective services. Additionally, some individuals may face personal or external barriers such as health, family responsibilities, or transportation challenges, limiting their ability to fully participate in, or benefit from, services. Some combination of these factors may contribute to the shorter average time spent in services among those who do not obtain and retain employment.

PCG reviewed average expenditures and average number of services by disability priority. Individuals with non-severe disabilities had the highest average cost of services (\$4,925.40), while individuals with the most significant disabilities had a lower average total cost of services (\$2,339.42). However, this difference in headline numbers was driven by a single outlier case with a non-severe disability. Excluding this one case from

analysis lowers the average service cost of individuals with a non-severe disability to \$2,242.23.

Differences in average expenditure may be related to respective population sizes. In particular, individuals who have the most significant disabilities represent the majority (3,904) of analyzed cases. Due to this larger group size, particularly expensive case outliers will have less of an impact on the average expenditures. Continuously monitoring average service spending and number of services utilized by significance of disability will allow DVR to maintain a focus on the individuals who most need services and provide insight into outliers which may provide a misleading picture of DVR services.

Individuals Who Belong to a Minority Group

PCG reviewed average days of service, average number of services, and average expenditures (average total cost of services) by racial or ethnic minority status. Differences were small, and more likely to be driven by differences in service need and availability than by systemic inequality or barriers to service entry. Our findings showed that individuals in the ethnic group 'White' and disability priority most significantly disabled spent on average 710.9 days in service, followed by individuals in the ethnic group Non-White and most significantly disabled who spent on average 705.0 days in service, a difference of 0.7% less time in services compared to individuals who identified as 'White.'

PCG also looked at average expenditures and average number of services by race and ethnicity. Individuals who identified as 'Asian' had the highest average cost of services at \$2,820.69, compared to 'Undefined'- those whose race was not yet included in their case record- with the lowest average expenditures at \$1,362.73 and 'Multi Race' with the second lowest average expenditures at \$1,552.97.

While these differences in spending by race may be driven, in part, by geography and differences in group size, they merit further exploration by DVR on an ongoing basis. Asian and White Wisconsinites are no more likely to be found to have more significant disabilities than other racial groups but enjoy a higher level of spending. This extends across almost all service categories, in which Asian and White participants receive much higher levels of median spending than individuals from other groups.

DVR's milestone-based payment structure may make this an exogenic factor, that is, both a cause of, and caused by, low rates of successful closures. Cases that do not complete services do not get paid, making providers less likely to devote resources to similar cases, leading to fewer cases that close successfully, etc. DVR should consider alternative payment methodologies to reward providers for remaining in contact with challenging caseloads.

Additionally, because groups with lower-than-average spending tend to be concentrated in a handful of WDAs, DVR may need to assess the practices of those WDAs to ensure they are providing services and payment in alignment with DVR state policy. Minor

differences in practice, requirement, or communication could have an outsized impact on heavily concentrated groups.

Analysis of case duration suggests that, during processes in which DVR is the primary actor, there are not meaningful differences between racial groups. Cases advance on roughly the same timeline and begin services at similar rates. Differences in case outcome stem primarily from service-receipt phases. DVR should research the preferred communication strategies of minority consumers, including potential ways to make methods of communication more stable, and update policy to require these methods be available from all providers.

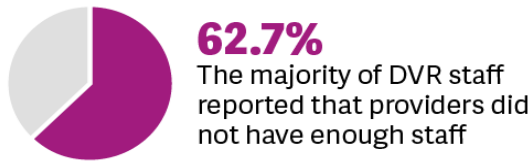
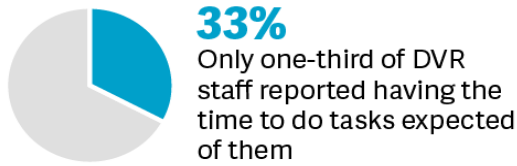
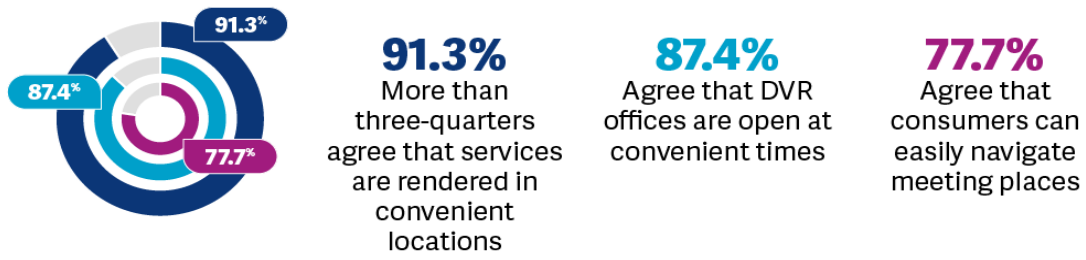
4.2.2 DVR Staff Perceptions of Services

This section outlines DVR staff perceptions collected from the PCG staff survey and supported by feedback gathered from staff participants in PCG-facilitated focus groups and interviews.

DVR staff perceptions of services highlights include:

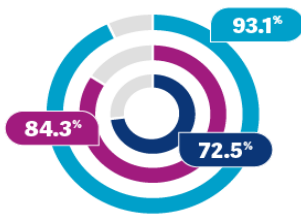
- More than three-quarters agree that services are rendered in convenient locations (91.3%), that DVR offices are open at convenient times (87.4%), and that consumers can easily navigate meeting places (77.7%).
- Only one-third of DVR staff reported that they had the time to do tasks expected of them.
- The majority of DVR staff reported that providers did not have enough staff (62.7%).
- 9-in-10 staff reported that at least some of the consumers they work with required counseling or mental health services.
- DVR staff reported transportation (93.1%), mental health care (84.3%), and housing (72.5%) as the greatest basic needs.
- DVR staff mentioned Asian (64.5%), Hispanic (63.2%), and African American or Black (61.8%) populations as the racial or ethnic groups currently unserved or underserved by DVR services.
- DVR staff mentioned transient and homeless populations (62.8%), individuals with English as a second language (47.7%), and individuals residing in rural areas as groups DVR is currently not serving well enough (45.3%).
- DVR staff mentioned individuals who are blind or have vision loss (77.4%), individuals who are deaf or hard of hearing (56.5%), and individuals with traumatic brain injuries (51.6%) as the disability groups currently unserved or underserved by DVR services.

FIGURE 6: STAFF PERCEPTIONS OF SERVICES HIGHLIGHTS

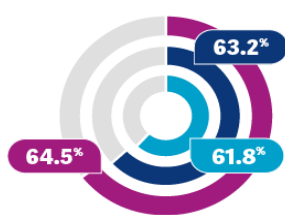


9-in-10

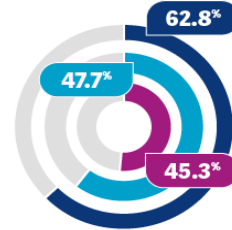
Staff reported that at least some of the consumers they work with required counseling or mental health services.



DVR staff reported **transportation, mental health care, housing**, as the greatest basic needs.

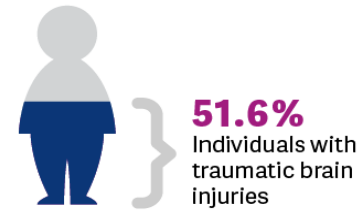
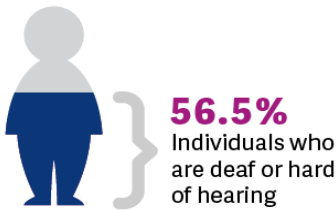
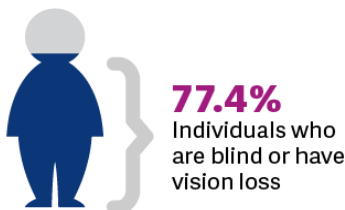


DVR Staff mentioned **Asian, Hispanic, and African American/Black** populations as the racial or ethnic groups currently unserved or underserved by DVR services



DVR Staff mentioned **transient and homeless populations, individuals with English as a second language, and individuals residing in rural areas** as groups DVR is currently not serving well enough

DVR Staff mentioned disability groups currently unserved or underserved by DVR services



4.2.2.1 Overview of Services and Jobs

Overall, DVR staff report that DVR services are generally accessible to the consumers they work with. As seen in Table 43 more than three-quarters (91.3%) agree that services are rendered in convenient locations, that DVR offices are open at convenient times (87.4%), and that consumers can easily navigate meeting places (77.7%). The least commonly agreed upon sentiment was that individual consumers help develop their own IPE (71.8%). However, this may be explained by the fact that not all staff who were surveyed worked directly with consumers or performed the same tasks; almost as many were unsure about IPE development (13.6%) as disagreed with this sentiment (14.5%).

TABLE 43: STAFF PERCEPTION OF SERVICE ACCESSIBILITY

Question	Agree	Disagree	Unsure
The consumers I work with receive DVR services in a convenient location.	91.3%	5.8%	2.9%
The DVR office is open at times that work for my consumers.	87.4%	5.8%	6.8%
The consumers I work with can get around easily in the places we meet.	77.7%	17.5%	4.9%
The consumers I work with help to develop their own IPE (Individual Plan for Employment).	71.8%	14.5%	13.6%

As seen in Table 44, DVR staff were less positive when asked whether they have the resources necessary to do their job well. While about three-quarters (72.8%) of staff responded that they have the support they need from other DVR staff, only one-third (33.0%) reported having the time to do the tasks expected of them. A narrow majority (54.4%) felt they have the resources necessary to address consumer needs. These results are consistent with feedback gathered in focus groups; staff feel that there are large gaps in DVR’s workforce and that turnover is unsustainable. These sentiments are common across VR agencies nationally.

TABLE 44: STAFF JOB NEEDS AND RESOURCES

Question	Agree	Disagree	Unsure
I have the support from other DVR staff necessary to address the needs of my consumers.	72.8%	19.4%	7.8%
I have the resources necessary to address the needs of my consumers.	54.4%	42.7%	3.8%
I have enough time in my day to do the tasks that are expected of my role.	33.0%	63.1%	3.8%

Asked what most frequently prevents them from addressing consumer needs, DVR staff were most likely to reiterate concerns about staffing and workloads (60.8%). A majority of respondents were also concerned about provider effectiveness (53.9%) as seen in Table 45.

TABLE 45: ADDITIONAL STAFF JOB NEEDS

Reported Staff Needs	Count	Percent
Staffing needs or workload distribution	62	60.8%
Access to service providers that can address consumer needs effectively	55	53.9%
Limited time to devote to each consumer	46	45.1%
Processes or procedures that cause delays	34	33.3%
Coordinating services with service providers	28	27.5%
Something else	15	14.7%
Insufficient technology or tools to support service delivery	13	12.7%
Professional development or training	7	6.9%

Almost all responding staff (99%) reported authorizing services from DVR’s network of service providers, and more than three-quarters (79.4%) felt providers were effective in helping consumers get or keep a job as seen in Table 47. Respondents were then asked a series of questions about DVR’s relationship with providers. Table 46 shows that while still positive, staff were generally *less positive* about provider services than services provided directly by DVR.

TABLE 46: STAFF RELATIONSHIPS WITH PROVIDERS

Question	Agree	Disagree	Unsure
DVR and the service providers in my area have a good working relationship that allow for seamless service delivery.	77.7%	13.6%	8.7%
Service providers fulfill their commitments to the consumers I work with.	62.1%	25.2%	12.6%

TABLE 47: STAFF PERCEPTIONS OF PROVIDER SUPPORTING EMPLOYMENT

Question	Yes	No	Unsure
Do you feel that the service providers help your consumers get or keep a job?	79.4%	7.8%	12.8%

When asked about gaps in provider services, DVR staff respondents were most likely to say that providers did not have enough staff (62.7% of those providing an answer), with

slightly less than a majority also citing rate of turnover (49.0%), and a lack of service provider expertise (46.1%) as seen in Table 48. This is similar to results reported in other states- direct service provider roles are often lower wage and see frequent turnover. This limits the ability for individuals to develop the expertise necessary to accomplish their goals well and increases stress in ways that further damage staff longevity.

TABLE 48: STAFF PERCEPTIONS OF PROVIDER SERVICES GAPS

Perceived Service Provider Gaps	Count	Percent
Not enough staff	64	62.7%
Turnover/too many staff changes	50	49.0%
Not enough service providers with the expertise to meet diverse needs of consumers	47	46.1%
Takes a long time for a consumer to get a job	45	44.1%
No connections to the sorts of employers consumers are interested in working with	35	34.3%
Takes a long time to initiate services	34	33.3%
Poor communication or lack of contact between the service providers	24	23.5%
Other	21	20.6%
No gaps	1	1.0%

4.2.2.2 Adequacy of Services

The DVR staff survey asked staff to rate the adequacy of a variety of services provided or authorized by DVR. Staff were asked whether a given service was always adequate, sometimes adequate, not often adequate, or never adequate.

Staff were most likely to report that vocational counseling services and job placements were sometimes or always adequate (90.7% and 89.0% respectively). While post-employment services and self-employment supports were reported to be never or rarely adequate (17.7% and 32.8% respectively), 30%–33% of staff said they were ‘Unsure’ about these services that are somewhat infrequently part of an IPE as seen in Table 49.

TABLE 49: STAFF ASSESSMENT OF EMPLOYMENT SERVICES

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Vocational counseling	47.5%	43.2%	0.0%	1.7%	7.6%
Academic education	34.5%	51.3%	0.0%	2.5%	11.8%
Vocational assessment	30.8%	43.3%	1.7%	12.5%	11.7%

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Tuition assistance	24.4%	56.3%	0.0%	10.9%	8.4%
Job Centers of Wisconsin	23.5%	44.5%	2.5%	12.6%	16.8%
Technical training	20.3%	53.4%	0.0%	8.5%	17.8%
Job coaching	12.6%	66.4%	0.0%	15.1%	5.9%
Job placements	9.2%	79.8%	0.0%	6.7%	4.2%
Post-employment services	7.6%	42.9%	3.4%	14.3%	31.9%
Self-employment supports	2.5%	31.9%	7.6%	25.2%	32.8%

In Table 50 DVR staff selected technological aids and devices as the assistive technology most likely to be somewhat or always adequate (82.8%). In addition, a noticeable number of staff also selected 'Unsure' for three out of the five assistive technology services, suggesting that perhaps their caseloads infrequently require these types of services, or they are unfamiliar with these service offerings.

TABLE 50: STAFF ASSESSMENT OF ASSISTIVE TECHNOLOGY SERVICES

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Technological aids and devices	41.4%	41.4%	0.0%	5.2%	12.1%
American Sign Language interpreting	32.8%	38.8%	0.9%	13.8%	13.8%
Orientation and mobility services	27.6%	34.5%	1.7%	9.5%	26.7%
Speech to text support	24.1%	37.1%	1.7%	6.0%	31.0%
Durable medical equipment	14.7%	27.6%	0.0%	5.2%	52.6%

The staff survey included questions about other services sometimes used by consumers to clarify how widely staff perceived the need for, and adequacy of, these service offerings

as seen in Table 51. Staff selected Referrals to community resources (91.3%) as the most commonly needed supportive service by some or most of the consumers they work with. Transportation is similarly in high demand, with a majority of staff (99.0%) reporting it was required in at least some of their cases, and no staff (0.0%) reporting it was never needed. Importantly, housing, referrals to community resources, and benefits planning were also reported as needed according to every staff member responding to the survey (0.0% saying none).

TABLE 51: STAFF PERSPECTIVE ON NEED FOR SUPPORTIVE SERVICES

Service/Support	Most/All	Some	Few	None	Unsure
Referrals to community resources	56.3%	35.0%	3.9%	0.0%	4.9%
Family and caregiver support	25.2%	50.5%	13.6%	4.9%	6.8%
Group and Peer Support	24.3%	44.7%	21.4%	1.9%	7.8%
Housing	15.5%	59.2%	19.4%	0.0%	5.8%
Independent living skills training	17.4%	61.2%	1.9%	12.6%	6.8%
Medical Care	34.0%	41.8%	12.6%	1.9%	9.9%
Social Security benefits planning	30.1%	63.1%	2.9%	0.0%	3.9%
Transition from high school to adult services	25.5%	53.9%	5.9%	5.9%	8.8%
Transition from institution to community	6.8%	35.9%	35.9%	10.7%	10.7%
Transportation	60.8%	29.4%	8.8%	0.0%	1.0%

When assessing the adequacy of these services, staff were most likely to say that Social Security benefits planning was sometimes or always adequate for consumers (89.1%). Like assistive technology services, it is notable that a significant number of staff selected 'Unsure' for seven out of ten of the support services. Notably, staff reported that housing (42.1%), transportation (39.6%), and group and peer support (21.3%) were never or rarely adequate as seen in Table 52.

TABLE 52: STAFF ASSESSMENT OF SUPPORTIVE SERVICES

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Referrals to community resources	11.5%	74.3%	0.9%	5.3%	8.0%
Family and caregiver support	6.2%	61.9%	0.0%	9.7%	22.1%

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Group and Peer Support	6.2%	43.4%	1.8%	19.5%	29.2%
Housing	2.6%	35.1%	4.4%	37.7%	20.2%
Independent living skills training	6.1%	51.8%	0.9%	13.2%	28.1%
Medical Care	9.0%	55.9%	1.8%	5.4%	27.9%
Social Security benefits planning	60.0%	29.1%	0.0%	4.5%	6.4%
Transition from high school to adult services	20.7%	52.3%	0.0%	7.2%	19.8%
Transition from institution to community	4.5%	35.1%	1.8%	16.2%	42.3%
Transportation	7.2%	46.8%	4.5%	35.1%	6.3%

Table 53 highlights DVR staff responses to questions about the need for mental health supports. Two-thirds of staff felt that all identified mental health supports were needed either ‘Most/All’ or ‘Some’ of the time. Notably, 9-in-10 staff reported that at least some of the consumers they work with required counseling or mental health services.

TABLE 53: STAFF PERSPECTIVE ON CONSUMERS' MENTAL HEALTH SUPPORT NEEDS

Service/Support	Most/All	Some	Few	None	Unsure
Behavioral supports	32.0%	51.5%	11.7%	0.0%	4.9%
Counseling	50.5%	41.8%	3.9%	0.0%	3.9%
Mental health services	44.7%	46.6%	4.9%	0.0%	3.9%
Substance use services	5.8%	55.3%	31.1%	0.0%	7.9%

Table 54 describes staff perception of the adequacy of mental health services. Across the board, a very large proportion of staff described these services as never or rarely adequate. These echoes sentiments expressed in staff focus groups—staff routinely designated individuals with mental health-related disabilities as underserved.

TABLE 54: STAFF ASSESSMENT OF MENTAL HEALTH SERVICES

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Behavioral supports	5.5%	54.1%	3.7%	20.2%	16.5%
Counseling	6.4%	59.6%	2.8%	16.5%	14.7%

Service/Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Mental health services	6.4%	56.0%	3.7%	20.2%	13.8%
Substance use services	4.7%	46.7%	1.9%	18.7%	28.0%

4.2.2.3 Pre-Employment Transition Services (Pre-ETS)

Table 55 delineates how respondents felt about the adequacy of Pre-Employment Transition Services (Pre-ETS). Staff most frequently reported work-based learning experiences (75.7%), and counseling on post-secondary education options (75.0%) as always or sometimes adequate. Notably, similar to assistive technology services, about one-in-five staff were 'Unsure' for all of the Pre-ETS services.

TABLE 55: STAFF ASSESSMENT OF PRE-ETS SERVICES

Service	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Job exploration counseling	23.1%	49.1%	0.9%	6.5%	20.4%
Work-based learning experiences	26.2%	49.5%	0.0%	4.7%	19.6%
Counseling on post-secondary education options	26.9%	48.1%	0.0%	6.5%	18.5%
Workplace readiness training	20.6%	49.5%	0.0%	10.3%	19.6%
Instruction in self-advocacy	17.8%	45.8%	0.0%	14.0%	22.4%
Pre-employment transition coordination	18.7%	48.6%	0.0%	11.2%	21.5%

4.2.2.4 Barriers Affecting Employment Outcomes

PCG collected DVR staff perceptions on the barriers and challenges consumers face. Over 75% of DVR staff who responded to our survey agreed that there were services that consumers needed that were not currently being provided by DVR. The largest disparities between the demand for services and the perceived adequacy of those services were:

- Transportation
- Mental health services
- Housing

Additionally, these were the most often cited needs during staff and provider focus groups. According to DVR case management data, transportation services are frequently provided by DVR, although mental health services are not.

Transportation was the most frequently cited barrier, followed by mental health services and housing, reinforcing earlier survey response findings.

Data

Table 56 displays DVR staff perspectives on the basic needs that affect consumer employment outcomes. At 93.1%, transportation was the most frequently cited barrier, followed by mental healthcare (84.3%), and housing (72.5%). This reinforces earlier survey response findings—findings that transportation, mental health, and housing services were inadequate—and highlights major needs within the consumer population.

TABLE 56: STAFF PERSPECTIVE ON BARRIERS TO EMPLOYMENT – BASIC NEEDS

Need	Count	Percent
Transportation	95	93.1%
Mental health care	86	84.3%
Housing	74	72.5%
Job search knowledge	73	71.6%
Childcare	55	53.9%
Literacy barriers	45	44.1%
Technology access like access to the internet	44	43.1%
Medical care	41	40.2%
Language barriers	35	34.3%
Having enough food	28	27.5%
Some other basic need(s)	8	7.8%

Among staff who answered, the most often cited barrier to career advancement was ‘Criminal offenses’ (92.3%). A majority of staff also indicated that consumers faced ‘Discrimination related to their disability’ (64.8%). Table 57 provides details on the legal barriers to employment faced by consumers.

TABLE 57: STAFF PERSPECTIVE ON LEGAL BARRIERS TO EMPLOYMENT

Legal Barrier	Count	Percent
Criminal offenses	84	92.3%
Discrimination related to their disability	59	64.8%
Discrimination related to another aspect of their identity like race gender or sexual orientation	34	37.4%
Immigration status	18	19.8%
Court-ordered debt or wage garnishment	15	16.5%
Some other legal need	5	5.5%

Table 58 displays DVR staff feedback on consumer job-related challenges. The most frequently encountered barrier was a mismatch between a consumer’s skills and experience and the demands of the job market such as a ‘Limited work experience (81.8%), ‘Limited relevant job skills’ (75.8%), and ‘Job options don’t match their education or experience’ (60.6%).

TABLE 58 STAFF: JOB-RELATED BARRIERS TO EMPLOYMENT

Barrier	Count	Percent
Limited work experience	81	81.8%
Limited relevant job skills	75	75.8%
Job options don't match their education or experience	60	60.6%
Employer attitudes toward people with disabilities	58	58.6%
Difficulty with online applications	56	56.6%
Poor job market or a lack of opportunities	52	52.5%
Lack of opportunities to explore careers	39	39.4%
Some other job-related need	8	8.1%

Table 59 displays DVR staff perceptions of the financial barriers faced by consumers when trying to advance their career. More than three-fifths of those responding (80.4%) noted ‘Potential change in financial benefits’ as a barrier, while an additional two-thirds (60.7%) mentioned ‘Potential change in medical benefits.’ This underlines the need for effective benefits counseling programs, which, according to staff, are both available and almost always adequate.

TABLE 59: STAFF PERCEPTIONS OF FINANCIAL BARRIERS TO EMPLOYMENT

Barrier	Count	Percent
Potential change in financial benefits	45	80.4%
Potential change in medical benefits	34	60.7%
Money management or financial literacy skills	29	51.8%

Barrier	Count	Percent
Costs related to education or training	22	39.3%
Need for additional benefits	22	39.3%
Some other financial need	7	12.5%

Table 60 shows the percentage of staff who felt consumers needed DVR services that were not provided. Over two-thirds of respondents (76.0%) agreed that there was an unmet need for services. Note that while this is a relatively high percentage, only 78 staff answered this question.

TABLE 60: STAFF PERSPECTIVE ON SERVICES THAT WERE NOT PROVIDED

Response	Percent
No	24.0%
Yes	76.0%

Staff who reported that DVR does not currently provide all the services that consumers need were asked to specify those unmet needs. Many staff highlighted the need for assistance with vehicle maintenance, affordable housing, mental health care, transportation, and financial literacy education. There were calls for increased financial support for rent assistance, childcare, food, utilities, expanded access to post-secondary education, medical care, and dental services. Some staff emphasized the importance of offering more support to help consumers develop independent living skills, job preparation, interpersonal skills, and work adjustment training.

4.2.2.5 Underserved / Unserved Groups

In this section we discuss DVR staff perceptions of the adequacy of services for individuals who are a part of a minority group, whether racial, ethnic, those with a specific disability, or other characteristics.

Table 61 shows the racial or ethnic groups that DVR staff feel are currently unserved or underserved by DVR. According to staff survey respondents, the top three unserved / underserved groups were ‘Asian’ Wisconsinites (64.5%), ‘Hispanic’ Wisconsinites (63.2%), and ‘Black or African American’ Wisconsinites (61.8%). Staff identified ‘White’ (5.3%) as the racial or ethnic group that is least unserved or underserved. Interestingly, this perception runs counter to some of the trends observed in our analysis of DVR’s case outcome and case spending data, where Asian Wisconsinites had above average rates of spending and case closure success, Hispanics saw no major differences, and Black Wisconsinites saw both lower than average

The most frequently identified need for unserved or underserved racial or ethnic groups as identified by DVR staff was outreach on the availability of services.

spending and case closure success. These findings suggest that staff may be unaware of differences in case outcomes by race or may not consider case outcome as part of their assessment of who is underserved.

TABLE 61: STAFF PERCEPTION OF UNSERVED OR UNDERSERVED RACIAL OR ETHNIC GROUPS

Racial or Ethnic Group	Count	Percent
Asian	49	64.5%
Hispanic	48	63.2%
African American/Black	47	61.8%
Refugee populations	44	57.9%
American Indian or Alaskan Native	44	57.9%
White	4	5.3%
Other	7	9.2%

Table 62 shows staff responses on the service needs for unserved or underserved racial or ethnic groups. The most frequently identified need was for ‘Outreach on the availability of services,’ ‘Additional services focused on their communities,’ and ‘Cultural awareness training for DVR staff.’

TABLE 62 STAFF: SERVICE NEEDS FOR UNSERVED OR UNDERSERVED RACIAL OR ETHNIC GROUPS

Service Need	African American	American Indian	Asian	Hispanic	Refugees
Outreach on the availability of services	70%	89%	73%	73%	84%
Additional services focused on their communities	63%	66%	48%	48%	63%
Cultural awareness training for DVR staff	54%	77%	65%	65%	77%
Greater access to DVR offices in or near their communities	37%	57%	35%	35%	44%
Language translators	2%	7%	48%	48%	72%
Other	4%	5%	6%	6%	5%
Count	46	44	48	48	43

Table 63 outlines staff perceptions of other groups who are underserved by DVR. Nearly two-thirds of respondents selected ‘Transient and homeless populations’ (62.8%), the only group with greater than a majority identifying them as underserved. Those whose primary language was not English (47.7%), and individuals in rural areas (45.3%) were next most commonly identified. Interestingly, while individuals transitioning from high

school to work was an option provided within the survey instrument, no staff flagged it as a potentially underserved group.

TABLE 63: STAFF PERCEPTION OF OTHER GROUPS UNDERSERVED BY DVR

Other Underserved Group	Count	Percent
Transient and homeless populations	54	62.8%
Individuals with English as a second language	41	47.7%
Individuals residing in rural areas	39	45.3%
Individuals with the most significant disabilities	36	41.9%
Individuals who are incarcerated or in the juvenile justice system	34	39.5%
Individuals who are self-employed	20	23.3%
Individuals with disabilities pursuing career paths requiring advanced degrees	18	20.9%
Veterans	15	17.4%
Individuals in the LGBTQ+ community	13	15.1%
Individuals living in poverty	8	9.3%
Religious minorities	7	8.1%
Other	1	1.2%

Table 64 identifies the services that DVR staff believe are needed for the underserved populations identified above. Staff mentioned 'Improved transportation options' (93.7%), 'Increased outreach about available programs and services' (81.0%), and 'Increased training for service providers' (81.0%) as most needed for these populations.

TABLE 64: SERVICES NEEDED FOR UNDERSERVED POPULATIONS

Service	Count	Percent
Improved transportation options	74	93.7%
Increased outreach about available programs and services	64	81.0%
Increased training for service providers (employment specialists or job coaches)	64	81.0%
Ways to address language barriers	43	54.4%
Increased training for DVR staff	37	46.8%
Cultural awareness training for staff	34	43.0%
Other	5	6.3%

The survey also queried staff about underserved groups by disability type. As seen in Table 65, 77.4% of staff selected 'Individuals who are blind or have vision loss'. Many of these individuals may be receiving services from the Wisconsin Office for the Blind and

Visually Impaired located under the Wisconsin Department of Health Services.. These responses are not included in the table below.

TABLE 65: UNDERSERVED BY DISABILITY TYPE

Disability Type	Count	Percent
Individuals who are blind or have vision loss	48	77.4%
Individuals who are deaf or hard of hearing	35	56.5%
Individuals with traumatic brain injuries	32	51.6%
Individuals with mental health disabilities	27	43.5%
Individuals with autism	20	32.3%
Individuals with mobility or manipulation disabilities	15	24.2%
Individuals with intellectual and developmental disabilities	13	21.0%
Individuals with some other type of disability	8	12.9%

*Multiple responses allowed; totals may not sum to 100%

4.2.2.6 Individuals Belonging to a Minority Group

PCG analyzed staff perceptions of minority populations that could be potentially underserved or underserved by DVR. According to staff survey respondents, the top three unserved and underserved groups were ‘Asian’ Wisconsinites (64.5%), ‘Hispanic’ Wisconsinites (63.2%), and ‘Black or African American’ Wisconsinites (61.8%). These findings represent staff perceptions, and merit further exploration. DVR staff report the perception that all individuals from all minority groups are underserved at similar rates. PCG’s analysis of case management, case spending, and case closure outcomes that indicate DVR services are most effective for Asian Americans, and least effective for Black or African Americans (although Black or African Americans are overrepresented as a percent of open cases). This suggests that DVR’s staff training has been highly effective at raising awareness of the needs of minority consumers in Wisconsin, but may additionally benefit from incorporating more information on DVR’s successes with populations such as Asian Americans.

When asked about how to reduce this gap, staff mentioned the need to ‘Outreach on the availability of services’ (70% of respondents in the smallest group), ‘Additional services focused on their communities’ (48%), and ‘Cultural awareness training for DVR staff’ (54%). While DVR case management data indicates that these groups are equitably represented, staff perceptions reflect a desire for further outreach and communication on service availability, cultural awareness training, and developing closer ties with important community stakeholders.

4.2.3 Service Provider Perceptions of Services

DVR provides a variety of in-house services and services contracted through service providers to meet the needs of Wisconsinites with disabilities. This section outlines service provider perceptions collected from the PCG service provider survey and

supported by feedback gathered from service provider participants in PCG-facilitated focus groups and interviews.

Service provider perception of services highlights include:

- Almost nine-in-ten service providers would recommend DVR services to individuals with disabilities in their communities.
- Service providers were least likely to agree that DVR provided enough consumer information to them to provide effective services, and also less likely to agree that problems they raised to DVR were resolved productively.
- Low rates paid by DVR, insufficient staffing levels, and difficulty working with DVR systems were identified as the top three greatest challenges to working with DVR.
- Service providers said the most effective method of improving DVR services would be to raise service rates.

Overall, providers are extremely enthusiastic about WI DVR. Over 89% would recommend WI DVR services to individuals with disabilities in their communities.

4.2.3.1 Overview of Relationship with DVR

Overall, service providers are extremely enthusiastic about DVR. Almost nine-in-ten (89.1%) would recommend DVR services to individuals with disabilities in their communities as seen in Table 66.

TABLE 66: SERVICE PROVIDER RECOMMEND DVR SERVICES

Response	Percent
Yes	89.1%
No	3.6%
Unsure	7.3%

DVR requested that PCG begin the service provider survey with a series of questions evaluating the working relationship between service providers and DVR. Table 67 contains service provider responses. Generally, most service providers agreed with the many positive sentiments about DVR, their staff, and services. Service providers were least likely to agree that DVR provided enough consumer information for them to provide effective services (32.1% disagreed), and that problems they raised to DVR staff were resolved productively (22.9% disagreed).

TABLE 67: SERVICE PROVIDER RELATIONSHIP WITH DVR

Statement	Agree	Disagree	Unsure
DVR fulfills commitments to my organization.	86.2%	11.9%	1.8%

Statement	Agree	Disagree	Unsure
DVR and the service providers in my area have a good working relationship.	83.6%	14.5%	1.8%
I can bring up problems to DVR staff I work with without concern.	78.0%	16.5%	5.5%
The DVR staff I work with understand my organization and the sorts of services I offer.	77.3%	16.4%	6.4%
DVR fulfills commitments to the clients I work with.	77.1%	11.9%	11.0%
The relationship between DVR and the service providers in my area allow for seamless service delivery to clients.	76.1%	18.3%	5.5%
When I bring up problems to DVR staff, I work with they are addressed in a way that benefits everyone involved.	67.9%	22.9%	9.2%
DVR provides me with the information I need about clients to provide effective services.	61.5%	32.1%	6.4%

When asked to identify the three greatest challenges of working with DVR, service providers were most likely to reference ‘Low rates paid by DVR’ for services (63.6%), followed by ‘Insufficient staffing levels’ (38.2%), and ‘Difficulty working with DVR systems (33.6%)’ as seen in Table 68.

TABLE 68: SERVICE PROVIDER GREATEST CHALLENGES WORKING WITH DVR

Challenge	Count	Percent
Low rates paid by DVR	70	63.6%
Insufficient staffing levels	42	38.2%
Difficulty working with DVR systems	37	33.6%
Insufficient referrals for the services we provide	20	18.2%
Staff training needs	20	18.2%
Insufficient customers of the sort we serve	10	9.1%
Something else	39	35.5%
Unsure	6	5.5%

Service providers were given the opportunity to provide feedback on what they felt would be most effective for improving DVR services. They were given nine potential avenues of change and asked to rank them from 1-9, with 1 being the most potentially effective method of improving services and 9 being the least effective. In Table 69 PCG combined responses, ranking 1 and 2 as most effective, 3 and 4 somewhat effective, and 4 and above not very effective. Perhaps unsurprisingly, service providers felt that increasing DVR rates for provided services would be most effective (48.2% of providers ranked this

as a 1 or 2). This would allow service providers to increase staff salaries, potentially reducing turnover and increasing employee qualifications. Almost as popular as increasing DVR rates was DVR improving internal processes to become more efficient (41.8% of providers ranked this as a 1 or 2).

TABLE 69: SERVICE PROVIDER METHODS OF IMPROVING DVR SERVICES

Improvement	Most Effective (1-2)	Somewhat Effective (3-4)	Not very Effective (5-9)
Raise the rates paid for services	48.2%	19.1%	19.1%
Improve processes to make DVR more efficient and effective	41.8%	28.2%	16.4%
Create new methods to transport clients	27.3%	21.8%	37.3%
Provide payment incentives for identified outcomes such as employment or credential attainment	12.7%	30.9%	42.7%
Making more training or educational opportunities available to provider staff	11.8%	25.5%	49.1%
Provide clear training or credential goals for provider staff	10.0%	18.2%	58.2%
Provide more references or pathways for identifying new staff	9.1%	8.2%	69.1%
Provide more references for new clients	5.5%	15.5%	65.5%
Something else	6.4%	5.5%	74.5%

4.2.3.2 Adequacy of Support Services

When asked about their perception of the adequacy of employment-related supports, service providers were least likely to feel that services provided by Job Centers of Wisconsin met consumer needs, with 77.8% stating that these services were ‘Not Always Adequate’ followed by academic education (69.7%), job placements (67.6%) and job coaching (65.7%).

The top three services mentioned during focus groups and interviews that would improve successful employment outcomes were ‘Job Coaching,’ ‘Job Placement,’ and ‘Counselor Support.’

Data

Service provider respondents were asked their perception of the adequacy of employment-related supports. Table 70 shows that post-employment services were the most frequently reported as always or sometimes adequate (76.9%). Service providers were least likely to feel that services provided by Job Centers of Wisconsin met consumer needs, with 40.8% stating that these services were never or rarely adequate followed by

self-employment supports (27.7%), vocational counseling (17.6%) and vocational evaluation (16.7%).

TABLE 70: SERVICE PROVIDER ADEQUACY OF EMPLOYMENT-RELATED SUPPORTS

Support	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Vocational evaluation	13.9%	40.7%	13.9%	2.8%	28.7%
Vocational counseling	16.7%	47.2%	16.7%	0.9%	18.5%
Technical training	11.1%	50.0%	11.1%	2.8%	25.0%
Academic education	10.1%	57.8%	10.1%	1.8%	20.2%
Tuition assistance	16.8%	28.0%	8.4%	0.9%	45.8%
Job placements	26.9%	61.1%	5.6%	0.9%	5.6%
Job Centers of Wisconsin	13.9%	37.0%	26.9%	13.9%	8.3%
Job coaching	28.6%	59.0%	5.7%	1.0%	5.7%
Self-employment supports	5.6%	20.4%	19.4%	8.3%	46.3%
Post-employment services	34.3%	42.6%	5.6%	0.0%	17.6%

In Table 71 a majority of service providers indicated that the quality of each of the support services listed were always or sometimes adequate, including Social Security benefit planning, although 'Unsure' received a fair number of responses as well.

TABLE 71: SERVICE PROVIDER QUALITY OF SUPPORT SERVICES

Support Service	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Referrals to community resources	17.3%	61.5%	1.9%	12.5%	6.7%
Family and caregiver support	13.3%	51.4%	1.0%	20.0%	14.3%
Group and peer support	6.7%	43.3%	6.7%	15.4%	27.9%
Housing	5.7%	41.9%	4.8%	26.7%	21.0%
Independent living skills training	5.8%	42.7%	4.9%	22.3%	24.3%
Medical care	10.5%	41.0%	4.8%	6.7%	37.1%
Social Security benefit planning	27.6%	50.5%	0.0%	8.6%	13.3%
Transition services from institutional settings to the community	10.4%	34.9%	2.8%	13.2%	38.7%
Transportation	9.4%	35.8%	6.6%	41.5%	6.6%

4.2.3.3 Pre-Employment Transition Services (Pre-ETS)

Table 72 shows that the majority of service provider staff responded ‘Yes’ (91.8%) when asked by the survey if they work with students transitioning from education to the workforce.

TABLE 72: SERVICE PROVIDER STUDENTS TRANSITIONING FROM EDUCATION TO THE WORKFORCE

Response	Percent
Yes	91.8%
No	8.2%

Service provider staff who provide Pre-ETS services were most likely to feel that work-based learning experiences were always or sometimes adequate in their communities (86.1%). Service providers were more likely to rate Pre-ETS services highly compared to other sorts of services, with more than one-in-five or one-in-six rating every required Pre-ETS service as ‘Always adequate’ as seen in Table 73.

TABLE 73: SERVICE PROVIDER QUALITY OF PRE-ETS SERVICES

Service	Always Adequate	Sometimes Adequate	Never Adequate	Rarely Adequate	Unsure
Job exploration counseling	18.8%	55.4%	2.0%	12.9%	10.9%
Work-based learning experiences	38.6%	47.5%	0.0%	6.9%	6.9%
Counseling on post-secondary education options	14.9%	44.6%	2.0%	19.8%	18.8%
Workplace readiness training	24.0%	46.0%	3.0%	17.0%	10.0%
Instruction in self-advocacy	20.0%	46.0%	3.0%	23.0%	8.0%
Pre-employment transition coordination	21.0%	55.0%	2.0%	15.0%	7.0%

DVR provided PCG with the results of a previous survey administered to school-based transition counselors, completed in January of 2024. These results suggest that, while schools have processes in place for working with youth and students with disabilities, many students with disabilities and their families are not familiar with DVR or the services they provide. They reported that DVR staff are not as frequently involved because employment goals are not top-of-mind until later in a student’s academic career.

In the transition partner survey, many expressed they have good working relationships with the DVR staff they work with, but that DVR processes can be slow or are not followed when they are in place. They seek more information about students’ work with DVR and job coaches, more training for special education teachers and paraprofessionals, and generally better, more consistent integration of services across the spectrum. When asked about the process for referrals and vocational plan management with DVR, as well

as coordinating DVR visits to the school, one survey participant noted that communication was primarily through email and lacked a formal process. They explained that the transition coordinator helps families complete the application, after which they “play the waiting game.” They suggest that keeping school staff well-informed and performing outreach to make students and families more aware of DVR services would be effective ways of increasing the adequacy of services.

4.2.3.4 Underserved or Unserved Groups

PCG asked service providers about whether they felt certain groups were underserved or unserved by DVR. Service providers were allowed to select as many groups as they wanted. As seen in Table 74, service providers most often selected ‘People who are homeless’ (53.6%), ‘People who live in rural areas of the state’ (49.1%), and ‘People who have criminal convictions’ (47.3%).

PCG analyzed service provider feedback on populations that may be unserved or underserved:

- Individuals with mental health conditions
- Individuals who are unhoused or transient
- Individuals in rural areas
- Individuals with substance use disorder or who have criminal convictions

With the exception of those in rural areas, these unserved or underserved populations are similar to those identified by DVR staff. While rural areas were not identified in other areas of research as being of particular challenge, rural consumers are more likely to rely on transportation services that consumers, service providers, and DVR staff frequently report as barriers. Of note, service providers used open-text survey response fields to express dissatisfaction with DVR’s mileage and travel reimbursement policies. It is possible that they perceive that it is more difficult to provide services to rural consumers because their organizations have difficulty managing these expenses.

TABLE 74: SERVICE PROVIDER UNSERVED OR UNDERSERVED GROUPS

Group	Percent
People who are homeless	53.6%
People who live in rural areas of the state	49.1%
People who have criminal convictions	47.3%
Individuals living in poverty	34.5%
People who are LGBTQ+	13.6%
Veterans	11.8%
Religious minorities	4.5%
Other	2.7%
I believe all groups of individuals in Wisconsin are being adequately served by DVR	10.9%

Table 75 delineates the diagnosis or disabilities that service providers believe are currently unserved or underserved by DVR. Service providers were asked to select all that applied. The top two responses were ‘People with a mental health condition’ (43.6%) followed by ‘People with substance use disorder’ (38.2%). Both of these populations are disproportionately represented among the unhoused.

TABLE 75 SERVICE PROVIDER UNSERVED OR UNDERSERVED SPECIFIC DIAGNOSIS OR DISABILITY CATEGORIES

Group	Percent
People with a mental health condition	43.6%
People with substance use disorder	38.2%
People with intellectual disabilities	27.3%
People with physical disabilities	24.5%
People who are racial or ethnic minorities	23.6%
People who are between the ages of 14 to 21	20.0%

4.2.3.5 Barriers

DVR queried service provider survey respondents about barriers to receiving DVR services. As in the DVR staff survey, service provider respondents provided feedback on basic needs, job related challenges, financial needs, and other barriers for the individuals that they serve.

As demonstrated in Table 76, service providers are most likely to respond that the basic need preventing consumers from advancing their career is ‘Transportation’ (84.5%), followed by ‘Mental health care’ (63.6%) and ‘Job search knowledge’ (53.6%). These findings are similar to the barriers most frequently expressed by DVR staff.

TABLE 76: SERVICE PROVIDER BASIC NEEDS BARRIERS TO CAREER ADVANCEMENT

Basic Need Barrier	Count	Percent
Transportation	93	84.5%
Mental health care	70	63.6%
Job search knowledge	59	53.6%
Housing	51	46.4%
Technology access, like access to the internet	41	37.3%
Childcare	37	33.6%
Literacy barriers	34	30.9%
Having enough food	22	20.0%
Language barriers	22	20.0%
Medical care	21	19.1%
Some other basic need	14	12.7%

Basic Need Barrier	Count	Percent
None of these	2	1.8%

In Table 77 the consumer justice related barrier most frequently mentioned by service providers was ‘Criminal offenses’ (62.7%). Note that only 12.7% of responding service providers selected ‘None of these’ as a barrier.

TABLE 77: SERVICE PROVIDER CONSUMER JUSTICE-RELATED BARRIERS TO CAREER ADVANCEMENT

Justice Barrier	Count	Percent
Criminal offenses	69	62.7%
Discrimination related to their disability	52	47.3%
Discrimination related to another aspect of their identity, like race, gender, or sexual orientation	26	23.6%
Court-ordered debt or wage garnishment	6	5.5%
Immigration status	2	1.8%
Some other legal need	9	8.2%
None of these	14	12.7%

In Table 78, ‘Potential change in financial benefits’ (76.4%) was the most common financial barrier followed by ‘Potential change in medical benefits’ (64.5%) and ‘Money management or financial literacy skills’ (62.7%). Again, these financial barriers were similar to those mentioned by DVR staff. Fortunately, this is a barrier DVR seems to address well. Similar to DVR staff, service providers also generally felt that benefits counseling needs were frequently always adequate. These services may just be frequently required.

TABLE 78: SERVICE PROVIDER CONSUMER FINANCIAL BARRIERS TO CAREER ADVANCEMENT

Financial Barrier	Count	Percent
Potential change in financial benefits, such as Social Security	84	76.4%
Potential change in medical benefits, such as Medicare or Medicaid	71	64.5%
Money management or financial literacy skills	69	62.7%
Costs related to education or training	27	24.5%
Need for additional benefits (medical coverage, dental coverage)	23	20.9%
Some other financial need	6	5.5%
None of these	5	4.5%

In Table 79 ‘Limited relevant job skills’ and ‘Limited work experience’ were the job-related barriers most cited by service providers (70.9% each), similar to DVR staff. This is

unsurprising considering that many consumers come to DVR because they lack meaningful employment experience.

TABLE 79: SERVICE PROVIDER CONSUMER JOB-RELATED BARRIERS TO CAREER ADVANCEMENT

Job Related Barrier	Count	Percent
Limited relevant job skills	78	70.9%
Limited work experience	78	70.9%
Limited education or training	59	53.6%
Employer attitudes toward people with disabilities	57	51.8%
Difficulty with online applications	53	48.2%
Job options don't match their education or experience	45	40.9%
Poor job market or a lack of opportunities	42	38.2%
Lack of opportunities to explore careers	32	29.1%
Some other job-related need	10	9.1%
None of these	2	1.8%

4.2.4 Employer Perception of Services

This section outlines employer perceptions collected from the PCG employer survey and supported by feedback gathered from employers who participated in PCG-facilitated interviews.

Employer perception of service highlights included:

- Almost 50% of employers surveyed worked with DVR to connect a DVR job seeker to permanent employment.
- Of those employers who created a customized employment opportunity, 12-out-of-13 employers reported this program as very successful or somewhat successful.
- About 88% of employers indicated that they would recommend DVR services to their colleagues.
- Most employers were either very interested or somewhat interested in learning about the services DVR provides directly to businesses.
- More than 70% of all employers were very interested or somewhat interested in using DVR's talent pool of job seekers with disabilities to meet business needs.
- Employers cited concerns about individuals meeting the physical demands or roles, reliable transportation, and lack of applicants or referrals from service providers as barriers to hiring individuals with disabilities.

PCG found that most employers are interested in learning more about the services DVR provides to employers. Employers most frequently learned about DVR services for employers through contact with DVR staff (55.6%).

Employers most frequently noted barriers included the physical demands of roles, need for communication, interpersonal and problem-solving skills, lack of transportation, lack of referrals from service providers, and lack of individuals' ability to work full-time hours. Employers also identified additional supports or services DVR could provide that may help them hire individuals with disabilities including:

- Disability awareness training
- Training on creating accommodations
- Transportation for employees hired through DVR
- Online portal to facilitate shared access to paperwork, timelines, and other resources for employers, participants, and DVR
- Hiring events
- Education on the abilities and skills of applicants
- Financial support for internships

While employers report the services above would be beneficial to boost the number of individuals with a disability who are hired, additional barriers could be addressed through the creation of customized employment opportunities. When asked, 30.2% of employers reported they had worked with DVR to create a customized employment opportunity for a job seeker with a disability. Of those that had created a customized employment opportunity, 12 out of the 13 employers reported it was either very or somewhat successful (92.3%). When asked what worked best about customized employment for their business, employers mentioned strong DVR support and the program benefit allowing employment to be customized to the skills and abilities of the consumer.

When asked if their business worked with DVR in the last year, most employers were unsure (12.2%) or did not work with DVR (55.4%). About a third (32.4%) had worked with DVR as seen in Table 80.

TABLE 80: EMPLOYER PARTNERSHIP WITH DVR

Question	Yes	No	Unsure
Has your business worked with DVR in the last year?	32.4%	55.4%	12.2%

4.2.4.1 Overview of Services

As seen in Table 81, many employers who had worked with DVR learned of DVR services from contact with DVR staff (55.6%) and recruiting or resource events (26.7%). Individual

contacts with businesses seem like the most effective method of recruiting active partners, though this sample is relatively small.

TABLE 81: EMPLOYER EDUCATION ON DVR SERVICES

Method of Contact	Count	Percent
Contact with DVR staff	25	55.6%
Recruiting or resource event	12	26.7%
Workforce system partner referral	7	15.6%
Disability employment agency	6	13.3%
Another business owner	2	4.4%
Other	10	22.2%

The survey asked employers who had worked with DVR to identify if DVR worked with their business to connect a job seeker to a list of services. Almost one-half of respondents reported DVR worked with their business to connect a DVR job seeker to Permanent employment (48.9%). Respondents also reported that DVR collaborated with their business to Engage with young adults or students with disabilities to gain work experience (31.1%), An internship (26.7%), and to Support a person with a disability working in their business (24.4%) as seen in Table 82.

TABLE 82: EMPLOYER DVR ASSISTANCE IN CONNECTING A DVR JOB SEEKER

Service	Count	Percent
Permanent employment	22	48.9%
Engage with young adults or students with disabilities to gain work experience	14	31.1%
An internship	12	26.7%
Support a person with a disability working in your business	11	24.4%
Short-term employment	8	17.8%
Train your staff about disability-related barriers in employment and solutions	5	11.1%
Participate in an apprenticeship	3	6.7%
Something else	5	11.1%

When asked to select the services or supports that DVR provided to their business, most responding employers who had worked with DVR reported having been provided with information on career opportunities and supports like internships and job coaching (37.8%), and that DVR provided assistance recruiting talent to meet business workforce needs (33.3%) as seen in Table 83.

TABLE 83: EMPLOYER SERVICES OR SUPPORTS PROVIDED BY DVR

Service	Count	Percent
Provided information about DVR services and supports such as paid internships, job coaching, or other supports or services	17	37.8%
Provided assistance recruiting talent to meet business workforce needs	15	33.3%
Customizing a job role or responsibilities to meet both business needs and job seeker abilities	7	15.6%
Provided information about financial incentives (Ex: Work Opportunity Tax Credit, Disabled Access Credit, Barrier Removal Tax Deduction)	7	15.6%
Coordinated the implementation of a reasonable accommodation	6	13.3%
None of these	11	24.4%
Something else	7	15.6%

DVR helps businesses connect with DVR’s talent pool of job seekers with disabilities. When asked if DVR helped their businesses, more than a third (37.8%) of employers reported that DVR helped to find job matches between their business and qualified applicants with disabilities. Employers also indicated that DVR helped them recruit qualified applicants with disabilities (28.9%) and retain employees with disabilities (13.3%) as seen in Table 84.

TABLE 84: EMPLOYER DVR ASSIST IN TALENT POOL OF JOB SEEKERS WITH DISABILITIES

Service	Count	Percentage
Find job matches between your business and qualified applicants with disabilities	17	37.8%
Recruit qualified applicants with disabilities for positions in your business	13	28.9%
Retain employees with disabilities	6	13.3%
Some other assistance	9	20.0%

When asked what other services DVR provided to support their business goals, 44.4% of employers who worked with DVR said DVR supported their business with invitations to recruiting events and other workforce events, as shown in Table 85.

TABLE 85: EMPLOYER DVR ASSIST IN BUSINESS GOALS

Service	Count	Percentage
Invitations to recruiting events and other workforce events in your area	20	44.4%
Information about resources your business needed	5	11.1%

Service	Count	Percentage
Disability awareness training	4	8.9%
Some other service	6	13.3%

About a third (30.2%) of those who have worked with DVR in the past reported that they had worked with DVR to help create a customized employment opportunity for an individual with a disability. This is shown in Table 86. Customized employment can be a struggle for some employers, and this rate of participation suggests effective advocacy of this employment strategy.

TABLE 86: EMPLOYER CUSTOMIZED EMPLOYMENT OPPORTUNITY

Response	Count	Percent
Yes	13	30.2%
No	30	69.8%

Employers who worked with DVR to create a customized employment opportunity for a job seeker with a disability were then asked to identify how successful customized employment was for their business. Notably, 12 out of the 13 employers (92.3%) reported it as either 'Very successful' or 'Somewhat successful' as seen in Table 87. Only one responding employer reported that this effort was unsuccessful.

TABLE 87: EMPLOYER SUCCESS OF CUSTOMIZED EMPLOYMENT

Response	Count	Percent
Very successful	5	38.5%
Somewhat successful	7	53.8%
Somewhat unsuccessful	1	7.7%

When asked what worked best about customized employment for their business, employers mentioned strong DVR support and the program benefit allowing employment to be customized to the skills and abilities of the consumer. When asked if they would recommend DVR services to their colleagues, most respondents answered yes (87.8%) as seen in Table 88. This is similar to the rates at which service providers would recommend DVR services.

TABLE 88: EMPLOYER RECOMMENDATION OF DVR SERVICES

Response	Count	Percent
Yes	36	87.8%
No	5	12.2%

Employers were then asked to explain why they did or did not recommend DVR services to their colleagues. For those who do not recommend, reasons included challenges in

accessing DVR services to meet ongoing employment needs despite a willingness to collaborate with DVR and potential candidates, difficulty in finding suitable candidates, and a perception that DVR does not listen, respond, or share responsibilities. Conversely, those who do recommend DVR services recounted positive experiences such as DVR’s effectiveness in helping them find qualified staff, support for disabled veterans, friendly and helpful staff, and clear communication with employers regarding individual needs and limitations.

4.2.4.2 Interest in Services

The employer survey gauged employers’ interest in a variety of services provided by DVR. Employers were asked if they were very interested, somewhat interested, not very interested, or report that they needed more information before expressing a level of interest. The survey repeated this for each of the services offered by DVR to businesses and employers. As seen in Table 89, 50% or more were either very interested or somewhat interested in learning more about each of the services DVR provides, with one exception. Employers were most interested in training existing staff in disability-related barriers in employment and creating an inclusive workplace (72.% very or somewhat interested).

Conversely, employers were less likely to be interested in coordinating DVR-funded internships (31.7% not very interested), engaging with young adults or students with disabilities to help them gain work experience (29.6%), and learning more about engaging in adult and youth apprenticeship programs (25.6%) although many did indicate they needed more information. DVR may need to shape employer-focused services around helping complement existing workforces and create new opportunities via expanding education.

TABLE 89: EMPLOYER DVR INTERESTED SERVICES

Service	Very Interested	Somewhat Interested	Not very Interested	Need more Information
Coordinating DVR-funded internships in my business	12.7%	33.3%	31.7%	22.2%
Providing work experience opportunities to individuals who are part of the DVR program	16.0%	38.4%	23.2%	22.4%
Recruiting individuals who are part of the DVR program into my workforce	19.5%	38.3%	18.8%	23.4%
Learning more about engaging in adult and youth Apprenticeship Programs	25.6%	30.8%	25.6%	17.9%
Engaging with young adults or students with disabilities to	19.1%	33.0%	29.6%	18.3%

Service	Very Interested	Somewhat Interested	Not very Interested	Need more Information
help them gain work experience				
Supporting a person with a disability in your workplace	27.1%	35.6%	17.8%	19.5%
Training your staff about disability-related barriers in employment and solutions, and how to create an inclusive workplace	32.8%	39.7%	13.8%	13.8%

Employers were asked to express their interest in DVR services to make the workplace or work tasks accessible to individuals with a disability. As seen in Table 90, more than 50% of all responding employers were either very interested or somewhat interested in each service. However, more than 30% of employers were not interested, or expressed the need for more information pertaining to customizing a job role or responsibilities. Customized employment can challenge the way job roles are often viewed by employers and can sometimes require dedicated advocacy from DVR staff and individuals seeking these roles.

TABLE 90: EMPLOYER INTEREST IN WORKPLACE OR WORK TASKS

Service	Very Interested	Somewhat interested	Not very interested	Need more information
Customizing a job role or responsibilities to meet both business needs and job seeker abilities	18.3%	34.6%	30.8%	16.3%
Learning more about financial incentives (Ex: Workplace Opportunity Tax Credits)	26.4%	41.5%	18.9%	13.2%
Learning more about DVR services and supports such as paid internships, job coaching, or other supports or services	22.3%	40.8%	20.4%	16.5%
Assistance recruiting talent to meet business workforce needs	29.5%	37.1%	22.9%	10.5%

As seen in Table 91, more than 70% of all employers were most likely to report they were very interested or somewhat interested in connecting with DVR's talent pool of job seekers with disabilities to meet their business needs. These are the services employers

are most interested in, on net. This is unsurprising, considering prevailing low unemployment conditions in Wisconsin and continued need for labor, particularly in early career roles.

TABLE 91: EMPLOYER INTEREST TO MEET EMPLOYMENT BUSINESS NEEDS

Service	Very Interested	Somewhat interested	Not very interested	Need more information
Recruit job seekers for positions in your business	28.4%	42.2%	20.6%	8.8%
Find job matches between your business and job seekers	30.4%	41.2%	21.6%	6.9%
Hire qualified individuals with disabilities for your business	31.4%	42.2%	13.7%	12.7%
Retain employees with disabilities	35.6%	41.6%	11.9%	10.9%

As seen in Table 92, more than two-thirds of employers are either very interested or somewhat interested in receiving other DVR services to support business goals. Of these services, employers were most interested in receiving information about resources (74.8%), and disability awareness training or ways to create an inclusive work culture and workforce (73.3%),

TABLE 92: EMPLOYER INTEREST IN OTHER DVR SERVICES TO SUPPORT BUSINESS GOALS

Service	Very Interested	Somewhat interested	Not very interested	Need more information
Disability awareness training or ways to create an inclusive work culture and workforce	32.2%	41.1%	20.0%	6.7%
Information about resources your company needs or may benefit from	38.5%	36.3%	15.4%	9.9%
Invitations to recruiting and other workforce events	31.5%	37.0%	21.7%	9.8%

4.2.4.3 Support and Barriers

When asked about additional support or services DVR could provide to better meet business needs, employers suggested expanded veteran services, disability awareness training, training on creating accommodations and a culture of inclusion, and transportation for employees hired through DVR. They also recommended creating an online portal to facilitate shared access to paperwork, timelines, and other resources for the employer, consumer, and DVR. Additionally, one employer noted it would be helpful

if DVR assigned a dedicated staff member to each employer to ensure more consistent communication and interaction. Many of these suggested supports reflect concerns expressed by other means of data collection, particularly a need for transportation services and a concern about perceptions of individuals with disabilities by potential employers.

Employers were then asked to identify barriers they encountered when hiring individuals with disabilities. They cited concerns about individuals meeting the physical demands of certain roles, the need for strong interpersonal and problem-solving skills, and reliable transportation. Employers also noted that business needs often require more than part-time hours, which can be challenging when individuals have income caps related to certain benefits. Additionally, lack of receiving applicants or referrals from a service provider can sometimes pose a hiring barrier. A focus on pairing employment with benefits counseling services—or providing employers with information on the advantages of wages over benefits—may help alleviate some of these concerns.

When asked about the most important services DVR could provide to support business needs, employers highlighted the value of hiring events, awareness and inclusivity training, increased referrals, education on individuals' specific abilities, financial support for internships, and funding to support extensive accommodation requests.

4.2.5 Closure Outcomes

To understand the VR program consumer outcomes, PCG analyzed DVR case records containing case status and reason for closure. All cases with a closure date or closed case status were analyzed. For ease of analysis, we have collapsed these reasons into a smaller number of similar outcomes—other outcomes, closed successful, and closed unsuccessful as defined below.

- **Other Outcomes:** Cases with a closure reason beyond DVR's control. These include institutionalization, health/medical reasons, death, or not meeting criteria for services. It also includes individuals who exited DVR services before DVR could determine eligibility, no matter their reason for closure. The following exit reasons are considered 'other outcomes':
 - Death
 - Health/Medical
 - Ineligible (due to criteria)
 - No disabling conditions
 - Transferred to another agency
 - Not interested in competitive integrated employment
 - Reserve forces called to active duty
- **Closed Successful:** Cases closed with competitive, integrated employment.

- **Closed Unsuccessful:** Cases closed for all other reasons, including , falling out of contact with DVR, or lack of interest in DVR services. This category includes cases determined eligible, but an IPE was not initiated.

PCG analyzed case closure reasons by significance of disability, race, and ethnicity for PY2022. The data show that individuals with non-severe disabilities, those ages 35-64, and those who are Asian experience more positive outcomes under the current DVR service model. Other groups such as youth (ages 5-17), elders (over 65), and Black individuals are less successful than their peers. These trends may be impacted by factors such as region, barriers, or socio-economic status.

FIGURE 7: CLOSURE OUTCOMES HIGHLIGHTS



Notable findings include:

- Individuals with a non-severe disability had the highest successful closure rate at 91.2% and individuals who have a most significant disability had the lowest successful closure rate at 44.1%.
- The age group 35 to 64 had the highest successful closure rate at 47.3% while those ages 5 to 17 had the lowest successful closure rate at 10.6%.
- The race ‘Asian’ had the highest successful closure rate at 58.2%. The race ‘Black’ had the lowest successful closure rate at 32.9%, the lowest of any race measured and 16-percentage-points lower than ‘White’ individuals.
- The ethnicities ‘Hispanic or Latino,’ ‘Not Hispanic or Latino,’ and ‘Undefined’ all had similar successful closure rates of about 40.0%.

Data

Table 93 summarizes closure reasons documented in DVR’s case management data (RSA 911 data). The highest percentage of cases had a closure reason of ‘Closed Unsuccessful’ after IPE Services at 50.1%.

TABLE 93: RSA CASE CLOSURE REASONS

RSA Case Exit Reason	Participant Count	Percentage
Closed Unsuccessful	3,403	50.1%
Closed Successful	3,126	46.0%
Other Outcomes	266	3.9%

Table 94 displays case closure by disability significance. Individuals with a non-severe disability had the highest successful closure rate at 91.2%. Individuals who have a most significant disability had the lowest successful closure rate at 44.1%. This difference is unsurprising: individuals with the most significant disabilities have the greatest barriers to employment and the most pressing need(s) that may prevent them from achieving successful outcomes.

TABLE 94: DVR CASE CLOSURE BY SIGNIFICANCE OF DISABILITY

Disability Significance	Closed Successful	Closed Unsuccessful	Other Outcomes
Most Significant Disability	44.1%	50.9%	5.1%
Significant Disability	48.1%	49.5%	2.4%
Non-Severe Disability	91.2%	8.8%	0.0%

Table 95 shows case closure reason by consumer age. The age group 35-64 had the highest successful closure rate at 47.3% while those under the age of 18 had the highest unsuccessful closure rate at 89.4%. Younger individuals are less likely to seek employment outcomes and more frequently fall out of contact with DVR in favor of

receiving other types of services. DVR may want to update methods of tracking case closures to better represent the outcomes of individuals under the age of 18 as these figures may not capture individuals closing with skill gains, training, and new opportunities that are important outcomes of VR services but are not themselves CIE.

TABLE 95: DVR CASE CLOSURE REASON BY AGE

Consumer Age	Closed Successful	Closed Unsuccessful	Other Outcomes
5 to 17	10.6%	89.4%	0.0%
18 to 34	46.3%	51.3%	2.4%
35 to 64	47.3%	46.8%	5.9%
65 to 74	43.3%	49.4%	7.3%
75 and older	33.3%	60.6%	6.1%

Table 96 shows case closure reason by race. The group of individuals who identify as 'Asian' had the highest successful closure rate at 58.2%. During the analyzed time period, the successful closure rate of individuals who identify as 'Black,' the largest minority group served by DVR, was 32.9%, the lowest of any race measured and 16-percentage-points lower than 'White' individuals.

Importantly, White and Asian individuals are more likely to have a case closure of closed successfully and have been shown to have higher average DVR expenditures (average total cost of services) as seen in the Services and Expenditures section of this report. Unemployment in Wisconsin is higher among Black residents (5.9% vs. 2.9% overall)⁶. These trends may contribute to differences in outcomes.

TABLE 96: DVR CASE CLOSURE REASON BY RACE

Race	Closed Successful	Closed Unsuccessful	Other Outcomes
Asian	58.2%	41.0%	0.8%
White	49.1%	47.0%	3.9%
Native Hawaiian or Other Pacific Islander	*	*	*
Black	32.9%	62.9%	4.1%
American Indian or Alaska Native	37.2%	58.1%	4.7%
Multi Race	38.1%	58.6%	3.3%
Undefined	38.1%	55.9%	5.9%

*Suppressed for small sample size

⁶ [State Unemployment by Race and Ethnicity – Economic Policy Institute – 2024 Q2](#)

Table 97 displays case closure reason by ethnicity. ‘Hispanic or Latino,’ ‘Not Hispanic or Latino,’ and ‘Undefined’ all had a successful closure rate of about 40%. All three ethnicities had an unsuccessful closure rate of about 50% or higher.

TABLE 97: DVR CASE CLOSURE REASON BY ETHNICITY

Ethnicity	Closed Successful	Closed Unsuccessful	Other Outcomes
Hispanic or Latino	44.0%	53.8%	2.2%
Not Hispanic or Latino	46.3%	49.6%	4.1%
Undefined	39.2%	58.8%	2.0%

4.2.6 Career Outcomes

To better understand the quality of outcomes, PCG reviewed and analyzed data related to job placements. The most common job placements, as represented in DVR case closure data, appear in Table 98 displaying the number of placements in those jobs since 2023. The most common placements were in office and administrative support occupations followed by food preparation and serving and production occupations.

TABLE 98: MOST COMMON CAREER OUTCOMES BY STANDARD OCCUPATION CODE (SOC) (2022)

Most Common Career Outcomes	Number of Placements
Office and Administrative Support Occupations	727
Food Preparation and Serving Related Occupations	501
Production Occupations	376
Building and Grounds Cleaning and Maintenance Occupations	293
Sales and Related Occupations	232
Transportation and Material Moving Occupations	208
Personal Care and Service Occupations	153
Education, Training, and Library Occupations	79
Healthcare Practitioners and Technical Occupations	73
Management Occupations	70

PCG selected Standard Occupational Codes (SOC) most closely representing the categories of placements used by DVR to perform wage and occupational requirement analysis for these occupations. We could not find a close match to a specific, recorded category for three of the occupations. Note that even among those careers identified, PCG relies on ‘Other’ categories and not specific occupations. This is a major limitation of this analysis, and as such, it should be viewed as general background information and not specific to any individuals working with DVR or the specific jobs in which they find employment.

Table 99 shows the SOC and median wages for these positions, as well as the percentage of the median Wisconsin wage (\$46,310 annually). Notably, all but one of the identified occupations has lower than median wages.

TABLE 99: AVERAGE WAGES OF DVR MOST COMMON CAREER OUTCOMES

Most Common Career Outcome	SOC Code Used	Median Occupational Wage	Percent Median Wisconsin Wage
Office and Administrative Support Occupations	43-9199	\$38,660.00	83.5%
Food Preparation and Serving Related Occupations	35-9099	\$30,840.00	66.6%
Production Occupations	51-9199	\$35,490.00	76.6%
Sales and Related Occupations	41-9099	\$44,120.00	95.3%
Transportation and Material Moving Occupations	53-7199	\$38,800.00	83.8%
Personal Care and Service Occupations	31-1120	\$30,180.00	65.2%
Education, Training, and Library Occupations	25-9099	\$47,650.00	102.9%

As is frequently the case, lower wages are paired with lower barriers to entry than many other careers require. As Table 100 demonstrates, only one of the most common identified occupations typically requires more than a high school diploma or equivalent, and none require work experience in a related occupation. This may be part of why these occupations are common among DVR outcomes. DVR participants tend to be earlier in their careers, with generally less work experience and lower levels of education.

While Wisconsin’s Labor Market Information Center (LMIC) projects consistently high demand for the career outcomes shown in Table 99, Production Occupations, Sales and Related Occupations, Transportation and Material Moving Occupations, and Education, Training, and Library Occupations can be found on the LMIC’s list of the “50 Hottest Jobs 2022-2032.” For more information on LMIC’s list of the “50 Hottest Jobs 2022-2032,” please reference the appendix.

TABLE 100: ENTRY REQUIRES OF DVR MOST COMMON CAREER OUTCOMES

Most Common Job Placements	SOC Code Used	Typical Education Needed	Typical Required Work Experience	Typical On-the-job Training Needed
Office and Administrative Support Occupations	43-9199	High school diploma	None	Short-term

Most Common Job Placements	SOC Code Used	Typical Education Needed	Typical Required Work Experience	Typical On-the-job Training Needed
Food Preparation and Serving Related Occupations	35-9099	None	None	Short-term
Production Occupations	51-9199	High school diploma	None	Moderate term
Sales and Related Occupations	41-9099	High school diploma	None	None
Transportation and Material Moving Occupations	53-7199	None	None	Short-term
Personal Care and Service Occupations	31-1120	High school diploma	None	Short-term
Education, Training, and Library Occupations	25-9099	Bachelor's degree	None	None

4.3 CONSUMER FEEDBACK

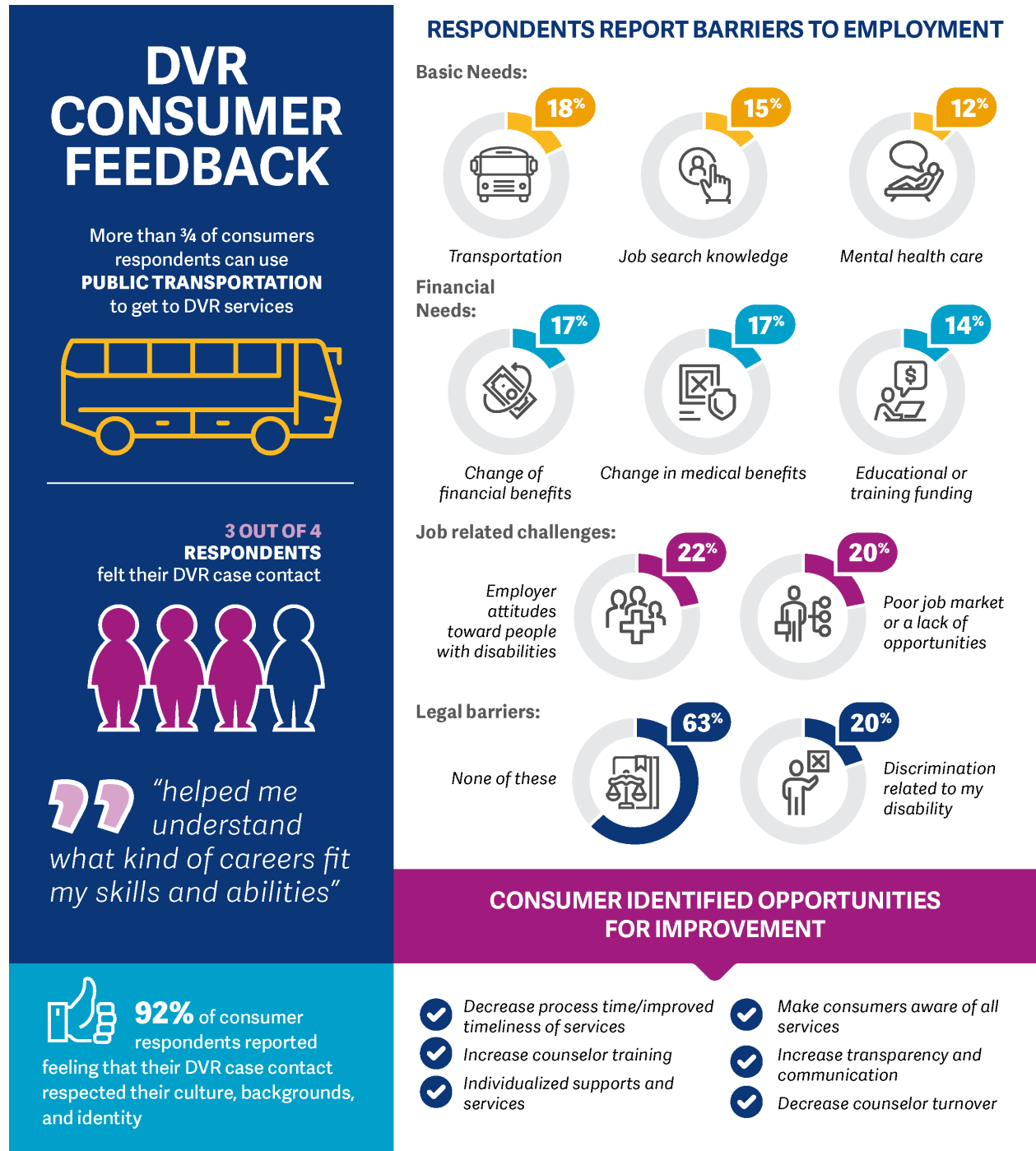
PCG analyzed consumer feedback by gathering data from surveys, focus groups, and key informant interviews. This section summarizes the consumer feedback we collected through all data gathering methods (including consumers' characteristics and their VR, Pre-ETS, and transition-aged youth experiences).

Focus group participants (consumers) generally had good things to say about their DVR counselor and the service provider staff who helped them find employment. In one case, a participant felt his DVR counselor may have saved his life by helping the participant become and stay sober.

Regarding what could be improved, participants mentioned DVR counselors and service provider staff who did not return phone calls, e-mails, or who did not follow up on the tasks outlined in an Individual Plan for Employment (IPE). Participants cited the relatively few businesses and employers in rural Wisconsin; they noted the difficulty with finding employment when there are few employers. When they did find jobs, these jobs were often low-paying and with the same employer. Depending on participant job goals, rural Wisconsin does not always have employers offering job shadowing or permanent job hire.

Below we have summarized consumer feedback on DVR's strengths and where DVR needs to improve.

FIGURE 8: CONSUMER FEEDBACK HIGHLIGHTS



Strengths:

- 75% or more of consumers provided positive responses to questions about their experience with DVR, their services, and their staff.
- 92.1% of respondents reported feeling that their DVR case contact treated them with respect regarding their culture, background, and identity.
- In general, focus group consumers generally had good things to say about their DVR counselor and the service provider staff who helped them find employment.

Areas for improvement:

- ‘Transportation’ (18.4%), ‘Job Search Knowledge’ (15.1%), and ‘Mental health care’ (11.9%) were identified as consumers’ top basic needs.
- ‘Discrimination related to my disability’ (19.9%), and ‘Discrimination related to another aspect of my identity’ (5.5%) was reported as the highest legal barriers that affected their ability to find or keep a job or advance their career.
- ‘Potential change in financial benefits such as Social Security’ (16.9%), ‘Potential change in medical benefits such as Medicare or Medicaid’ (16.6%), and ‘Costs related to education or training’ (13.7%) were reported as the highest financial need that affected consumers’ ability to find or keep a job or advance their career.
- More than 70% of consumers felt the money they have, or will have, will not last.
- ‘Employer attitudes toward people with disabilities’ (22.2%) and ‘Poor job market or a lack of opportunities’ (20.0%) were the most frequently reported job-related challenges.
- 23.9% of consumers disagreed with the statement “My DVR case contact helped me understand what kind of careers fit my skills and abilities.”
- Several consumers expressed capacity concerns and the impact it had on services. Several mentioned numerous counselors throughout the duration of their case.
- Consumers also recommend that DVR clarify and simplify participant processes; reduce wait times; expand programs across locations and areas; and increase considerations for additional supports for participants with higher needs to help secure employment and logistics to employment.

Other recommendations (themes) from consumers included:

- Decrease process time / improve timeliness of services
- Increased training for counselors
- Individualized supports and services
- Make consumers aware of all services available to them
- Increase transparency and communication throughout the process
- Counselor turnover and high caseloads make it difficult for consumers to receive adequate services

4.3.1 Consumer Experience with Services

“My counselor and job developer helped me get through personal obstacles to get a job and I would not get a job without their help.”

PCG held interviews and focus groups with DVR consumers. Individuals were very thankful for the training and employment services DVR gave to them. Consumers shared stories of excellence in finding employment meeting their interests, feeling like a priority, and great support from their counselor and job developer to work through tasks to support their employment goals.

Across methods, consumers reported a positive experience with services. When identifying barriers and challenges, many consumers mentioned the need for additional communication from DVR and their service provider. Additionally, consumers requested an information clearinghouse, transportation services, and other services not offered by DVR, such as a Medicare specialist.

Consumers were positive overall in their responses to multiple choice questions examining the person-centeredness of VR service delivery, and in particular about their individual case contact. Over three quarters of consumer respondents agreed or strongly agreed that their case contact explained the following:

- Helped them understand what kind of careers fit their skills and abilities
- Respected their culture, background, and identity
- Talked about their choices when developing their IPE
- Respected their choices
- Considered their interests, strengths, abilities and needs when developing the IPE
- Involved them in making decisions
- Made their role clear and what was expected of them in the VR process
- Followed through on the things they said

It is notable that 24% of consumers disagreed with the statement ‘My DVR case contact helped me understand what kind of careers fit my skills and abilities’. The majority (92.1%) indicated that their DVR case contact treated them with respect when asked specifically about background, culture, and identity.

Open-ended consumer responses about DVR counselors focused on staff capacity, including turnover, counselor qualifications, and resource knowledge. Positive trends included experiences of extreme helpfulness, kindness, and understanding. Trends to note included consumers having multiple counselors. One consumer stated, “They need more counselors for manageable caseloads in order to best serve individuals in need and to have time to develop diverse contacts instead of relying on current employers.”

Consumers also mentioned difficulty with communication. It’s important to note here that, in open ended feedback, consumers revealed limited awareness of which staff were directly employed by DVR compared to those employed by service providers and tended to use ‘counselor’ as a general term for any person involved in their case. As such, difficulties mentioned with staffing should not be dismissed but instead understood as a network-wide issue that impacts consumers, rather than truly about any single position or organization. Internal DVR data does not suggest widespread staffing shortages.

4.3.1.1 General VR Services

Table 101 delineates how consumer survey respondents feel about the services they received from DVR. Just over 90% of respondents agreed that they could get around easily in DVR offices, meet with their DVR counselor virtually if they wanted, and that they helped to develop their plan or IPE. Just over 25% of the respondents did not feel they were provided with the technology or equipment they needed to receive services, received the testing or assessments they needed, or felt like services were provided quickly enough after they applied.

TABLE 101: CONSUMER SERVICES RECEIVED FROM DVR

Service	Agree	Disagree
I was able to get around easily in DVR offices.	92.8%	7.2%
I could choose to meet with my DVR counselor virtually if I wanted.	90.8%	9.2%
I helped develop my plan or IPE	90.7%	9.3%
I could choose a location that worked for me when I met with my DVR counselor	88.6%	11.4%
DVR staff were available at times that worked for my schedule.	87.0%	13.0%
DVR provided the accommodations I needed to receive services.	86.7%	13.3%
I was able to use public transportation or other transportation services to get to DVR services.	76.1%	23.90%
I received the testing or assessments I needed.	74.9%	25.1%
DVR provided me with the technology or equipment I needed to receive services. For example, talk-to-text software, a screen reader, a mobility device, or a communication device.	74.7%	25.3%
I feel like services were provided quickly enough after I applied.	74.3%	25.7%

The survey asked consumers if there were services they needed that were not provided by DVR. The survey then solicited additional information based on individuals’ responses. More than two-thirds of respondents stated they had received all the services they needed (69.9%) as seen in Table 102. The most common responses for services they didn’t

receive included jobs, all of them, communication, job coaching, training educational support, and transportation.

TABLE 102: CONSUMER NEEDED SERVICES

Response	Percent
No	69.9%
Yes	30.1%

The participant survey asked consumers if they would recommend DVR services to a friend. Table 103 shows that the majority of respondents would recommend DVR services (81.5%). Respondents were then asked why they would either recommend or not recommend DVR services to a friend. Many respondents expressed gratitude and gratefulness for DVR services in advancing their careers, while others noted areas for growth such as additional staff training on how to work with individuals with disabilities, and increased communication practices.

TABLE 103: CONSUMER RECOMMEND SERVICES

Response	Percent
Yes	81.5%
No	18.5%

Consumer survey respondents were asked if there was anything else they would like to share about their experience with DVR. Several reoccurring themes included:

- Decrease process time
- Increase training for counselors
- Individualized supports and services
- Let consumers know all of the services available to them
- Increase transparency and communication throughout the process
- Increase in timeliness of services
- Decrease counselor turnover and high caseloads (makes it difficult for consumers to receive adequate services)

In focus groups and interviews, consumers shared service perceptions that spanned a spectrum of positivity. While some felt they received the assistance they needed, others suggested improvements. One respondent said, "Having someone to advocate for me has given me much needed hope that I would get a job. That hope bolsters the self-esteem and motivation required to land a job." Others said, "My child never got a job in the last 2 ½ years." Another respondent felt family was required to do more of the logistics coordination between DVR and the employment provider.

4.3.1.2 Consumer Counseling Experience

We obtained feedback on a consumer’s counselor experience in multiple ways, including survey open-ended comments, through focus groups, and through individual interviews. In the open-ended online survey comments consumers provided a wide range of responses, from positives like “Great services-above and beyond” to needed improvements such as “Needing more resources,” “Clarified processes,” and “Difficult with wait times.”

Table 104 shows how consumers felt about their experiences with their DVR case contact according to a series of survey questions. Over 70% of respondents agreed with each of the statements in the table. Notably, almost all respondents (92.1%) agreed with the statement ‘My DVR case contact respected my culture, background, and identity.’

TABLE 104: CONSUMER EXPERIENCES

Statement	Agree	Disagree
My DVR case contact respected my culture, background, and identity.	92.1%	7.9%
My DVR case contact involved me in making decisions.	88.8%	11.2%
My DVR case contact respected my choices.	88.0%	12.0%
My DVR case contact made clear my role and the expectations of me in the VR process.	86.6%	13.4%
My DVR case contact talked to me about my choices when developing my plan for employment.	85.8%	14.2%
My DVR case contact considered my interests, strengths, abilities, and needs when developing my plan for employment.	83.8%	16.2%
My DVR case contact followed through on the things they said.	82.3%	17.7%
My DVR case contact helped me understand what kind of careers fit my skills and abilities.	76.1%	23.9%

In the qualitative feedback, consumers demonstrated a wide range of experiences that were largely positive. Some individuals noted that DVR staff were extremely helpful, nice, understanding, kind, tentative, genuine, patient, easy to communicate, and amazing. In contrast, others noted that staff needed to communicate more. One said they were "Very disappointed in the lack of communication and follow through from DVR", and another noted "Maybe you can't tailor your services to precisely what a person needs, but you can do better than just treat someone like a number."

One emerging theme for additional consideration and exploration is counselor capacity. Consumer comments said, “Counselors need a manageable caseload in order to best serve individuals in need, and to have time to develop diverse contracts instead of relying only on current employers.” Again, it should be noted that consumers tend to refer to a wide scope of individuals involved in their case as ‘counselors,’ whether they are directly employed by DVR or not. Others noted that they needed help finding resources but did not get it (e.g., medical supplies, eyeglasses, vehicle, transportation assistance, counseling, housing, childcare, legal aid, etc.). Several consumers mentioned that frequent counselor turnover was frustrating. These staff retention comments echo counselor and provider staff concerns also.

“I do think that there is a huge turnover in staff, and it complicates the process of getting needs and services met on time.”

Comments collected from all data collection methods also highlight how consumers perceive a need for training and retention of DVR and service provider staff.

To further understand consumers’ experiences with VR counselors, PCG examined perceptions of processes and policies. Trends that emerged included the need to clarify and simplify the process for consumers, reduce waiting times, expand programs across locations and areas, and increase considerations for additional supports for participants with higher needs to help secure employment and logistics for employment. Positive sentiments included, “They went above and beyond because they really care about the people they are helping,” and “My DVR person was amazing. They were resourceful and knowledgeable and helped me with everything I needed.” However, others said the process was confusing at times, that they waited months after applying, service provider waitlist was too long and noted a “supreme lack of communication.” While this was in answer to a question about DVR staff, consumers are often unclear about who is and is not employed directly by DVR.

4.3.1.3 Transition-Aged Youth

For individuals ages 24-29, the survey asked if they had received any services to help them find a career or plan for further education while in school. Table 105 shows that an equal number of respondents (50%) reported that they had and had not received services to help them find a career or plan for further education while in school. All individuals under age 24 were asked about the services they received while in school, in addition to those responding yes.

TABLE 105: CONSUMER SERVICES RECEIVED WHILE IN SCHOOL

Response	Percent
Yes	50.0%
No	50.0%

In Table 106 half of the respondents felt that they received information on their options for education after high school, and that they had received guidance to explore what kinds of careers they might want to pursue. However, an additional 18% to 31% indicated they did receive the service in question but needed more of it.

TABLE 106: CONSUMER SERVICES THAT STUDENTS WERE OFFERED

Service	No, but I need this	No, I do not need this	Yes	Yes, but I need more of this service
Have you received guidance help to explore what kind of careers you want to pursue?	13.8%	8.4%	52.1%	25.7%
Have you learned more about careers by visiting workplaces or trying out different types of jobs?	20.9%	9.2%	43.5%	26.4%
Have you received information on your options for education after high school?	16.2%	16.4%	49.3%	18.1%
Have you received training to get the skills you need to succeed at work?	22.8%	9.7%	35.6%	31.9%
Have you received training in self-advocacy?	29.1%	15.9%	32.4%	22.7%

4.3.1.4 Employment Service Providers

DVR often works with service provider agencies that provide employment services to help job seekers get and keep a job. In Table 107 almost three quarters of respondents (70.1%) reported receiving services from one of these providers. Among those respondents who reported receiving services from a provider, 70.2% reported that they felt that the service provider helped them to get or keep a job.

TABLE 107: CONSUMER EMPLOYMENT SERVICE PROVIDERS

Response	Had worked with an Employment Service Provider	Found these services useful.
Yes	70.1%	70.2%
No	29.9%	29.8%

When asked about problems they had working with employment service providers, most stated they had not experienced problems (21.0%). Reported problems in Table 108 included 'Takes a long time to get a job' (20.0%), and that providers lacked the necessary connections in the industries individuals were interested in (14.1%). The top answers for respondents who selected 'Other' (7.4%) were untimely services, lack of employment

opportunities, poor communication, and staff lacking knowledge to work with individuals with disabilities.

TABLE 108: CONSUMER EXPERIENCE WHEN WORKING WITH THE SERVICE PROVIDER

Response	Count	Percent
None of the these	306	21.0%
Takes a long time to get a job	292	20.0%
No connections to the sorts of employers I am interested in working with	205	14.1%
Not enough providers who know how to work with people like me	165	11.3%
Poor communication or lack of contact with my job coach	155	10.6%
Staff turnover, too many staff changes	118	8.1%
Not enough staff	108	7.4%
Other	108	7.4%

4.3.1.5 Support Services

In addition to services offered through the VR program, the participant survey gathered information about other organizations that support consumers. Table 109 shows the percentage of respondents who received services from other DVR partners. Wisconsin Medicaid/Medicare (15.7%), Social Security Administration (14.7%), and Aging and Disability Resource Centers (14.0%) were the most commonly reported DVR partners. This is unsurprising, as many individuals who qualify for DVR services likely also qualify for services from those partners. The service population of DVR tends to be lower income and higher need and rely on a network of services and partners for many basic needs.

TABLE 109: CONSUMER DVR PARTNER SERVICES

Partner	Count	Percent
Wisconsin Medicaid/Medicare	420	15.7%
Social Security Administration	392	14.7%
Aging and Disability Resource Centers	373	14.0%
Local Food Pantry	171	6.4%
Technical schools and colleges disability services	168	6.3%
Local School	163	6.1%
Specialized transportation services	151	5.7%
Public transportation	145	5.4%
College or university disability services	142	5.3%
Staffing or temp hiring agency	115	4.3%
Local housing authority	79	3.0%
Community mental health center	78	3.0%
Independent Living Centers	56	2.1%

Partner	Count	Percent
Community rehabilitation program	36	1.4%
Homeless shelters	26	1.0%
Veteran's agencies	25	1.0%
Someone else	129	4.83%

Multiple responses allowed; totals may not sum to 100%.

Consumer respondents who said they worked with a community partner/group were asked how well DVR and the community partner/group coordinated services for them. More than 75% reported that the coordination of services went 'Very well' or 'Somewhat well' as seen in Table 110. This suggests that, at least among the groups that DVR participants work with most frequently, coordination of services is routine.

TABLE 110: CONSUMER DVR AND COMMUNITY PARTNERS/GROUPS COORDINATION OF SERVICES

Response	Percent
Very well	46.4%
Somewhat well	29.2%
Not well at all	14.2%
Not very well	10.2%

Some DVR consumers also partner with the Job Centers of Wisconsin. As shown in Table 111, about 70% of respondents either 'Did not work with the Job Centers of Wisconsin' or were 'Unsure' if they had. Of those who worked with the Job Centers of Wisconsin, the majority selected 'Online, using virtual job center resources' (16.4%). Virtual resources can be a major boon to any organization as they are easy to access on demand, require fewer resources than physical materials, and can be easily updated.

TABLE 111: CONSUMER USE OF THE JOB CENTERS OF WISCONSIN

Response	Percent
Did not work with the Job Centers of Wisconsin	45.9%
Unsure	23.1%
Online, using virtual job center resources	16.4%
In person, at a physical job center location	14.6%

The survey asked consumers a series of questions to help identify their needs. These questions broke needs out across four dimensions; basic needs like food and housing, job-related needs, justice-involved needs, and financial needs. Table 112 reports basic needs that consumers experienced while trying to find or keep their job or advance their career.

Some respondents provided detailed responses that were not included in the question (11%). The top responses for these ‘Other’ responses were disability, mental health, lack of previous experience, and lack of services and supports.

TABLE 112: CONSUMER BASIC NEEDS THAT AFFECT EMPLOYMENT OUTCOMES

Need	Count	Percent*
Transportation	552	18.4%
Job Search Knowledge	451	15.1%
Mental health care	355	11.9%
Medical care	226	7.6%
Housing	198	6.6%
Technology access	188	6.3%
Having enough food	171	5.7%
Literacy barriers	87	2.9%
Language barriers	49	1.6%
Childcare	38	1.3%
None of these	351	11.7%
Some other basic need(s)	329	11.0%

*Multiple responses allowed; totals may not sum to 100%

Table 113 displays the legal barriers experienced by consumers. The survey prompted respondents to select all that applied. Most frequently respondents selected ‘None of these’ (62.7%), and ‘Discrimination related to my disability’ (19.9%). It appears that the most common form of discrimination faced by DVR consumers relates to disability, and the experience appears quite widespread if 1-in-5 individuals reported it in a survey.

TABLE 113: CONSUMER LEGAL BARRIERS THAT AFFECT EMPLOYMENT OUTCOMES

Legal Barrier	Count	Percent*
Discrimination related to my disability	312	19.9%
Discrimination related to another aspect of my identity, like race, gender, or sexual orientation.	86	5.5%
Criminal offenses	70	4.5%
County-order debt or wage garnishment	25	1.6%
Immigration status	2	0.1%
None of these	985	62.7%
Some other legal need	90	5.7%

*Multiple responses allowed; totals may not sum to 100%.

Justice-involved consumers have the usual range of disabilities – i.e., attention-deficit / hyperactivity disorder and depression – and somewhat unique physical disabilities due to gunshot wounds. Ideally, the application and eligibility steps are completed by DVR while the individual is still residing in a criminal justice facility. DVR can help justice-involved individuals by translating the skills they have learned while incarcerated to employment

skills. Most frequent needs for justice-involved individuals are housing, transportation, and a script which an individual can use to explain their incarceration and why they would make a good employee. By enrolling eligible incarcerated individuals, when a consumer is released, they can go straight to VR and begin working on their employment plan.

Given the still present stigma of a criminal record, DVR’s reputation with employers is key to helping justice-involved individuals find worthwhile jobs. In addition to further training for potential jobs, individuals released from incarceration need orientation on how the world has changed since they were first incarcerated.

Table 114 illustrates the financial needs consumers experienced when trying to find or keep their job or advance their career. The top response was ‘None of these’ at 33%. For those experiencing financial challenges, ‘Potential change in financial benefits, such as Social Security’ (16.9%), and ‘Potential change in medical benefits such as Medicare or Medicaid’ (16.6%) were most frequently cited. These programs are extremely difficult for individuals to navigate, and employment can have meaningful consequences for benefit eligibility.

TABLE 114: CONSUMER FINANCIAL NEEDS THAT AFFECT EMPLOYMENT OUTCOMES

Financial Need	Count	Percent
Potential change in financial benefits, such as Social Security	311	16.9%
Potential change in medical benefits such as Medicare or Medicaid	306	16.6%
Costs related to education or training	252	13.7%
Money management or financial literacy skills	142	7.7%
Need for additional benefits (medical coverage, dental coverage)	118	6.4%
None of these	607	33.0%
Some other financial need	106	5.8%

Table 115 shows that more than two-thirds of consumers are at least somewhat concerned that their money will not last. According to the Center on Disability Research, individuals with a disability are about twice as likely to be in poverty as those without a disability⁷.

TABLE 115: CONSUMER FINANCIAL SITUATION

Question	Very well	Somewhat	Very Little	Not at all
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⁷ [Disability Fact Book – Center on Disability Research – 2022 – Accessed November 20, 2024](#)

I am concerned the money I have, or will have, won't last	39.8%	32.7%	13.4%	14.1%%
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Table 116 shows job-related challenges. Consumer respondents most frequently selected ‘Employer attitudes toward people with disabilities’ (22.2%) and ‘Poor job market or a lack of opportunities’ (20.0%) as the greatest job-related challenges that affect employment outcomes. Staff and providers were more likely to attribute barriers to job skills, education, and other items under the control of individuals than employer or job-market barriers. This may represent a difference in perception of ability and needs for counseling. Most individuals who selected “Other” identified challenges such as transportation, their disability, and lack of services and support. Many of these perceived challenges can be met with greater education, either targeting employers or individuals seeking jobs.

TABLE 116: CONSUMER JOB-RELATED CHALLENGES THAT AFFECT EMPLOYMENT OUTCOMES

Challenge	Count	Percent
Employer attitudes toward people with disabilities	501	22.2%
Poor job market or a lack of opportunities	451	20.0%
Limited relevant job skills	326	14.4%
Limited work experience	237	10.5%
Limited education or training	103	4.6%
Lack of opportunities to explore careers	90	4.0%%
Job options don't match my education or experience	75	3.3%
Difficulty with online applications	44	2.0%
None of these	311	13.8%
Some other job-related need	119	5.3%

4.3.1.6 Consumer Survey Findings by Race

The survey posed a series of questions to help identify individuals’ needs. PCG analyzed these questions by race to gain a better understanding of the needs and barriers of the different racial categories. Primarily we focus on the difference between individuals who are White (n=656) and individuals who are Black or African American (n=86), as these are the groups large enough to consistently support specific analysis. Note that each individual question may have slightly more or fewer respondents, and all responses are weighted. This was necessary because of other findings show potential differences in service spending and outcomes by race. Other racial groups are not presented specifically because their rates within the population served are simply not large enough.

Exploring the series of questions on DVR services revealed small differences by race across almost all areas of service. These results are presented in Table 117. The only area in which Black or African American consumers were meaningfully more likely to agree to a statement was in the availability of testing or assessments (6.8-percentage

points more likely to agree). While none of the differences shown are large (all are under 10% and do not rise to the level of statistical significance), the consistency of these results across multiple aspects of service delivery suggests some underlying differences.

TABLE 117: CONSUMER SERVICE QUESTIONS BY RACE (WHITE VS. BLACK OR AFRICAN AMERICAN)

	White	Black or African American	Difference
I received the testing or assessments I needed	74.2%	81.0%	6.8%
I was able to use public transportation or other transportation services to get to DVR services	75.6%	76.0%	0.4%
DVR provided the accommodations I needed to receive services	86.8%	85.7%	-1.1%
I could choose to meet with my DVR counselor virtually if I wanted	90.8%	89.1%	-1.7%
I feel like services were provided quickly enough after I applied	75.2%	70.6%	-4.6%
I helped develop my plan or IPE (Individual Plan for Employment)	91.4%	86.1%	-5.3%
DVR staff were available at times that worked for my schedule	87.7%	82.1%	-5.6%
I could choose a location that worked for me when I met with my DVR counselor	89.5%	83.2%	-6.3%
DVR provided me with the technology or equipment I needed to receive services	75.5%	68.8%	-6.7%
I was able to get around easily in DVR offices	93.4%	86.0%	-7.4%

Many of the differences in perception of services may be explained by cases receiving fewer services or completing fewer services. As shown in Table 118, Black or African American consumers are notably less likely to report they did not need additional services from DVR compared to Whites. Considering the spending patterns and outcomes seen in other sections, Black or African American consumers do notice a difference in the level of service provided to them even if it has only a small impact on their perceptions of DVR services overall.

TABLE 118: CONSUMER OVERALL EXPERIENCE QUESTIONS BY RACE (WHITE VS. BLACK OR AFRICAN AMERICAN)

	White	Black or African American	Difference
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Were there any services you needed from VR that were not provided to you? (% no)	71.5%	55.5%	-16.0%
Would you recommend DVR services to a friend? (% yes)	81.7%	78.3%	-3.4%

When analyzing consumer experience with the DVR case contact, Black or African American consumers again were consistently less likely to agree with positive statements than White consumers. These are shown in Table 119. The largest of these (respect for choices) represents about a 10% difference in response. While these differences are not large within individual questions, the consistency of these differences across questions suggests Black or African American consumers have meaningfully more difficulty working with DVR than White consumers.

TABLE 119: CONSUMER EXPERIENCE QUESTIONS BY RACE (WHITE VS. BLACK OR AFRICAN AMERICAN)

	Black or African American	White	Difference
My DVR case contact helped me understand what kind of careers fit my skills and abilities.	75.0%	76.3%	-1.3%
My DVR case contact made clear my role and the expectations of me in the VR process.	84.8%	86.9%	-2.1%
My DVR case contact talked to me about my choices when developing my plan for employment.	83.1%	86.1%	-3.0%
My DVR case contact involved me in making decisions.	85.0%	89.4%	-4.4%
My DVR case contact followed through on the things they said.	77.5%	83.3%	-5.8%
My DVR case contact considered my interests, strengths, abilities, and needs when developing my plan for employment.	78.8%	84.7%	-5.9%
My DVR case contact respected my culture, background, and identity.	86.5%	93.2%	-6.7%
My DVR case contact respected my choices.	81.1%	89.1%	-8.0%

Table 120 shows basic needs experienced by consumers while trying to find or keep their job or advance their career. Across all race categories transportation was the greatest

need, with the Black or African American population reporting the highest need at 19.6%, followed by White (18.6%), and Other Race (17.2%). Across basic needs, populations are not likely to report significantly different levels of need in any area, though individuals who are Black or African American are somewhat more likely to report a need than individuals who are White. This difference is not statistically significant.

TABLE 120: CONSUMER BASIC NEEDS THAT AFFECT EMPLOYMENT OUTCOMES BY RACE

Need	Black or African American	White	Other Race
Housing	6.4%	5.3%	8.3%
Transportation	19.6%	18.6%	17.2%
Childcare	3.5%	1.0%	1.7%
Having enough food	7.4%	5.4%	7.9%
Medical care	7.1%	7.9%	7.9%
Mental health care	10.9%	12.3%	13.1%
Technology access, like access to the internet	8.3%	6.1%	7.2%
Language barriers	1.3%	1.6%	2.4%
Literacy barriers	5.1%	2.8%	2.4%
Job search knowledge	12.8%	15.4%	14.1%
Some other basic need(s)	8.7%	11.9%	8.6%
None of these	9.0%	11.6%	9.0%

Table 121 shows the legal barriers that consumers experienced by race. Of identified legal barriers across all race categories more than 20% of all respondents selected 'Discrimination related to my disability'. Individuals who are White reported 22.7%, followed by Black or African American (21.6%), and Other Race (21.3%) respectively. Individuals who are Black or African American are notably more likely to report discrimination due to aspects of their not related to disability than individuals who are White.

TABLE 121: CONSUMER LEGAL BARRIERS THAT AFFECT EMPLOYMENT OUTCOMES BY RACE

Legal Barrier	Black or African American	White	Other Race
Criminal offenses	5.6%	5.2%	4.4%
Immigration status	0.0%	0.1%	0.7%
Discrimination related to my disability	21.6%	22.7%	21.3%
Discrimination related to another aspect of my identity	13.6%	5.0%	8.8%

Court-order debt or wage garnishment	3.7%	1.6%	1.5%
Some other legal need	8.0%	6.5%	5.9%
None of these	47.5%	58.9%	57.4%

Table 122 illustrates the financial needs consumers experienced when trying to find or keep their job or advance their career. Costs related to education or training were the greatest identified financial need across all races. The ‘Other’ race category reported this as the greatest need (20.1%), followed by ‘Black or African American’ (18.0%), and ‘White’ (15.4%).

TABLE 122: CONSUMER FINANCIAL NEEDS THAT AFFECT EMPLOYMENT OUTCOMES BY RACE

Financial Need	Black or African American	White	Other Race
Potential change in financial benefits, such as Social Security	14.6%	15.0%	12.7%
Potential change in medical benefits such as Medicare or Medicaid	13.2%	14.8%	13.2%
Costs related to education or training	18.0%	15.4%	20.1%
Need for additional benefits	9.3%	11.2%	9.3%
Money management or financial literacy skills	14.6%	10.6%	12.7%
Some other financial need	10.2%	8.6%	7.4%
None of these	20.0%	24.4%	24.5%

When asked about if they are concerned the money they have or will have won’t last, about two-thirds of respondents of all race categories are at least somewhat concerned that their money will not last. Of respondents, those who are Black or African American (71.1%) were the most concerned, followed by Other Race (64.8%), and White (62.1%) as seen in Table 123.

TABLE 123: CONSUMER FINANCIAL SITUATION BY RACE

Race	Very well	Somewhat	Very Little	Not at all
Black/African American	37.8%	33.3%	11.1%	8.1%
White	33.3%	28.8%	12.6%	13.4%
Other Race	37.5%	27.3%	9.4%	8.6%

Table 124 shows job-related challenges by race. Consumers most commonly identified employer attitudes toward people with disabilities as a challenge that affects employment

outcomes. Of respondents, consumers of ‘Other Race’ (13.7%) identified this as the greatest job-related challenge followed by ‘White’ (13.6%), and ‘Black or African American’ (13.5%).

TABLE 124: CONSUMER JOB-RELATED CHALLENGES THAT AFFECT EMPLOYMENT OUTCOMES BY RACE

Barrier	Black or African American	White	Other Race
Employer attitudes toward people with disabilities	13.5%	13.6%	13.7%
Poor job market or a lack of opportunities	13.8%	12.0%	13.5%
Limited relevant job skills	10.7%	12.3%	10.5%
Limited work experience	9.5%	12.6%	12.9%
Limited education or training	11.6%	9.7%	11.7%
Lack of opportunities to explore careers	7.6%	9.1%	9.9%
Job options don't match my education or experience	8.3%	9.5%	11.4%
Difficulty with online applications	5.5%	6.5%	5.3%
Some other job-related need	8.6%	6.6%	5.3%
None of these	11.0%	8.1%	5.8%

4.3.2 Individuals with Disabilities who are not currently served by DVR

Individuals with disabilities who are not served by DVR or are served by other parts of the workforce development system are a required focus of the CSNA process. However, these individuals are difficult to contact on DVR’s behalf – they are defined by a lack of participation with DVR. Therefore, DVR does not have meaningful contact with these individuals, and individuals have little incentive to participate in data collection. However, PCG’s non-participant survey was successful, see the Methodology section for more detail on how it was conducted.

Individuals who self-reported that they qualified for the survey were asked a series of questions about the barriers they face to their careers, about the groups they work with, and the services they may require. Overall, their responses to these questions were like the responses of individuals with disabilities being served by DVR. While every individual’s disability and circumstance are unique, many barriers are defined by broad societal factors that impact individuals no matter who they work with.

4.3.2.1 Barriers

The survey asked individuals a series of questions to help identify barriers to employment they may have faced. These questions broke needs out across four dimensions; basic needs like food and housing, justice-involved needs, financial needs, and job-related needs. The survey promoted respondents to select all that applied. Table 125 reports basic needs that non-consumers experienced while trying to find or keep their job or advance their career. Non-consumers most expressed the need for medical care (39.0%), mental health care (34.1%), and transportation (31.7%). These are also the sorts of needs reported by program participants, service providers, and DVR staff. While these are important needs, DVR cannot fully address any of them independently. This emphasizes the need for continued partnership and collaboration among a network of providers.

Some respondents provided detailed responses that were not included in the question (9.8%). These responses included handicap access, physical health barriers, large gaps in work history, and other disability related needs.

TABLE 125: NON-CONSUMER BASIC NEEDS THAT AFFECT EMPLOYMENT OUTCOMES

Need	Count	Percent
Medical care	16	39.0%
Mental health care	14	34.1%
Transportation	13	31.7%
Housing	11	26.8%
Job search knowledge	11	26.8%
Having enough food	10	24.4%
Childcare	9	22.0%
Technology access, like access to the internet	6	14.6%
Language barriers	5	12.2%
Literacy barriers	2	4.9%
Some other basic needs	4	9.8%

*Multiple responses allowed; totals may not sum to 100%

Table 126 displays the legal barriers experienced by non-consumers. About two-thirds of respondents selected discrimination related to my disability (65.9%) and an additional one-third of respondents (34.1%) identified discrimination related to another aspect of my disability as the most common legal barriers.

TABLE 126: NON-CONSUMER LEGAL BARRIERS THAT AFFECT EMPLOYMENT OUTCOMES

Legal Barrier	Count	Percent
Discrimination related to my disability	27	65.9%
Discrimination related to another aspect of my identity	14	34.1%
Court-order debt or wage garnishment	5	12.2%
Immigration status	4	9.8%

Criminal offenses	2	4.9%
Some other legal need	1	2.4%

*Multiple responses allowed; totals may not sum to 100%

Table 127 illustrates the financial needs non-consumers experienced when trying to find or keep their job or advance their career. For those undergoing financial challenges, more than half of respondents reported the potential change in financial benefits, such as Social Security (53.7%), and the need for additional benefits (medical coverage, dental coverage) (51.2%) as the greatest needs. Increased education and outreach on financial management may be influential in getting more referrals/engagement and easing these perceived needs. It is notable that a much lower rate of individuals utilizing VR services were concerned about changes in benefits limiting their employment opportunities, which may represent the utility of benefits counseling, or the ability of more DVR consumers to get jobs which make benefits less critical to their livelihood.

TABLE 127: NON-CONSUMER FINANCIAL NEEDS THAT AFFECT EMPLOYMENT OUTCOMES

Financial Need	Count	Percent
Potential change in financial benefits, such as Social Security	22	53.7%
Need for additional benefits (medical coverage, dental coverage)	21	51.2%
Potential change in medical benefits, such as Medicare or Medicaid	17	41.5%
Costs related to education or training	17	41.5%
Money management or financial literacy skills	8	19.5%
Some other financial need	2	4.9%

*Multiple responses allowed; totals may not sum to 100%

As seen in Table 128, about two-thirds of respondents are at least somewhat concerned that their money will not last. This echoes previously noted findings that individuals with a disability are more likely to not have checking or savings accounts at banks or credit unions and may primarily use cash for transactions.

TABLE 128: NON-CONSUMER FINANCIAL SITUATION

Response	Very Well	Somewhat	Very Little	Not at all
I am concerned the money I have, or will have, won't last	31.7%	34.1%	22.0%	12.2%

Table 129 shows job-related challenges. Non-Consumer respondents most reported a poor job market or a lack of opportunities (56.1%), employer attitudes toward people with disabilities (48.8%), and limited relevant job skills (43.9%) as the greatest job-related

challenges. Many of these perceived challenges can be met with greater education, either targeting employers or individuals seeking jobs.

TABLE 129: NON-CONSUMER JOB-RELATED CHALLENGES THAT AFFECT EMPLOYMENT OUTCOMES

Barrier	Count	Percent
Poor job market or a lack of opportunities	23	56.1%
Employer attitudes toward people with disabilities	20	48.8%
Limited relevant job skills	18	43.9%
Lack of opportunities to explore careers	17	41.5%
Limited work experience	11	26.8%
Job options don't match my education or experience	11	26.8%
Limited education or training	10	24.4%
Difficulty with online applications	7	17.1%
Some other job-related need	3	7.3%

*Multiple responses allowed; totals may not sum to 100%

4.3.2.2 Transition-Aged Youth

For individuals aged under 24, the survey asked if they had received services to help them find a career or plan for further education while in school. In Table 130 more than half of respondents felt that they received information on their options for education after high school, and that they had received guidance to explore what kinds of careers they might want to pursue. However, an additional 7.7% to 30.8% indicated that while they did not receive some of these services, they would benefit from receiving them.

TABLE 130: NON-CONSUMER SERVICES RECEIVED

Service	Count	Yes	Yes, but I need more of this service	No, but I need this	No, but I do not need this
Help explore what kind of careers you might want to pursue?	13	23.1%	61.5%	15.4%	0.0%
Learn more about careers by visiting workplaces or trying out different types of jobs?	13	30.8%	53.8%	7.7%	7.7%
Information on your options for education after high school?	13	53.8%	30.8%	7.7%	0.0%
Training to get the skills you need to succeed at work?	13	38.5%	46.2%	15.4%	0.0%
Training in self-advocacy?	13	7.7%	46.2%	30.8%	7.7%

4.3.2.3 Employment Service Providers

Often individuals may receive services from employment service providers that assist with employment. Of respondents who had received services from an employment service provider, more than three quarters of respondents (83.9%) reported that they felt these services helped them to get or keep a job.

TABLE 131: NON-CONSUMER EMPLOYMENT SERVICE PROVIDERS

Response	Found these services useful
Yes	83.9%
No	6.5%
Unsure	9.7%

When asked about their experience working with the employment service provider, an equal number of respondents reported it takes a long time to get a job, and that there were not enough providers who know how to work with people like themselves (36.6%) as seen in Table 132. Many of these challenges can be addressed through enhanced education, focusing either on employers or employment service providers.

TABLE 132: NON-CONSUMER EXPERIENCE WHEN WORKING WITH THE SERVICE PROVIDER

Experience	Count	Percent
Takes a long time to get a job	15	36.6%
Not enough providers who know how to work with people like me	15	36.6%
No connections to the sorts of employers I am interested in working with	14	34.1%
Turnover, too many staff changes	12	29.3%
Poor communication or lack of contact with my job coach	9	22.0%
Not enough staff	6	14.6%
Other	2	4.9%

*Multiple responses allowed; totals may not sum to 100%

4.3.2.4 Support Services

In addition to working with employment service providers, the non-participant survey gathered information about other groups that provide supports individuals need to go to work. Table 133 shows the percentage of respondents who received services from DVR partners. Community rehabilitation program (39.0%), community mental health center (31.7%), and staffing or temp hiring agency (31.7%) were the most reported DVR partners. This suggests that those not receiving VR services are finding other sources of funding or engaging in services free to individuals.

TABLE 133: NON-CONSUMER DVR PARTNER SERVICES

Partner	Count	Percent
Community rehabilitation program	16	39.0%
Community mental health center	13	31.7%
Staffing or temp hiring agency	13	31.7%
Independent Living Centers	12	29.3%
Aging and Disability Resource Centers	12	29.3%
Wisconsin Medicaid/Medicare	10	24.4%
College or university disability services	9	22.0%
Social Security Administration	9	22.0%
Public transportation	8	19.5%
Specialized transportation services	6	14.6%
Technical schools and colleges disability services	6	14.6%
Homeless shelters	5	12.2%
Local food pantry	5	12.2%
Local school	5	12.2%
Local housing authority	3	7.3%
Veteran's agencies	1	2.4%

*Multiple responses allowed; totals may not sum to 100%

Non-consumer respondents who said they worked with a community partner/group were asked how well services were coordinated for them. About 75% reported that the coordination of services went very well or somewhat well as seen in Table 134. This suggests that, at least among the groups that non-consumers work with most frequently, coordination of service is routine.

TABLE 134: NON-CONSUMER COMMUNITY PARTNERS/GROUPS COORDINATION OF SERVICES

Response	Count	Percent
Very well	10	25.6%
Somewhat well	19	48.7%
Not very well	5	12.8%
Not well at all	4	10.3%
Unsure	1	2.6%

Some non-consumers also partner with the Job Centers of Wisconsin. As illustrated in Table 135, 60% of respondents worked with the Job Centers of Wisconsin either at a physical job center location (15%) or online using virtual job center resources (45%). Virtual resources provide numerous advantages to organizations, including on-demand accessibility, reduced reliance on physical materials, and ease of updates.

TABLE 135: NON-CONSUMER USE OF THE JOB CENTERS OF WISCONSIN

Response	Count	Percent
Online, using virtual job center resources	18	45.0%

Did not work with the Job Centers of Wisconsin	14	35.0%
In person, at a physical job center location	6	15.0%
Unsure	2	5.0%

When asked about their experiences working with community partners/groups, respondents highlighted several positive aspects. They noted that these individuals demonstrated a caring demeanor, understood their unique needs, were highly knowledgeable, assisted in job placement, and maintained strong communication and collaboration with other community partners/groups. One respondent specifically praised their communication practices, stating: “the communication channels between community partners are kept open, enabling timely sharing of important information and work progress. Whether through online platforms or face-to-face communication, information can be accurately conveyed to avoid misunderstandings and delays caused by information asymmetry.”

On the other hand, when asked about areas for improvement with community partners/groups, respondents suggested several changes. These included offering more personalized services, increased communication, improving resource integration, providing additional training and education on various disability types, clarifying roles to prevent duplication of efforts, and increasing community engagement through public awareness campaigns or volunteer programs. Addressing the need for enhanced communication, one respondent specifically remarked: “strengthen communication frequency with regularly scheduled meetings, workshops, or online communication platforms to ensure timely sharing of information and avoid work repetition or omission caused by poor communication.”

The survey asked individuals if they had used support services to be successful in their work. Table 136 shows that of services received, individuals most received independent living skills training (51.2%), community resources (48.8%), and Social Security benefits counseling (43.9%).

TABLE 136: NON-CONSUMER SUPPORT SERVICES RECEIVED

Service Received	Count	Percent
Independent living skills training	21	51.2%
Community resources	20	48.8%
Social security benefits counseling	18	43.9%
Connections to medical care	14	34.1%
Family and/or caregiver support	13	31.7%
Group and peer support	12	29.3%
Help with housing	8	19.5%
Wisconsin DVR	8	19.5%
Moving from a group home facility to independent living	6	14.6%

Service Received	Count	Percent
Help with transportation	3	7.3%
Something else	1	2.4%

*Multiple responses allowed; totals may not sum to 100%

Respondents were then given the opportunity to share additional feedback for DVR on support services. Respondents noted that while the support services were extremely helpful, there is room for improvement. Respondents emphasized the need for more easily accessible options, the importance of maintaining consistent and proactive approaches, and the critical role of timely responses and follow-up. Additionally, they highlighted that personalized support tailored to individual circumstances would significantly enhance the effectiveness of services provided.

4.4 COORDINATION OF SERVICES

DVR coordinates services with other programs to fulfill WIOA and meet the service needs of VR eligible individuals with disabilities. This section discusses the coordination of services for the Individuals with Disabilities Education Act (IDEA), Workforce Development, service providers, businesses, and Tribal VR.

Coordination of services highlights include:

- The need for more supported employment providers has been mentioned several times.
- Coordinating agencies, service providers, educators, and staff requested more training opportunities for providers, families, and staff.
 - Requested training topics included mental health, intellectual and developmental disabilities, DVR processes, and best practices.

4.4.1 Coordination of services under DPI's Individuals with Disabilities Education Act (IDEA)

PCG primarily collected data for this section from interviews with K-12 educators and the legal requirements for IDEA (Statute Chapter 33, Subchapters I-IV)

The biggest key to success is the relationship between the DVR counselor and school staff. DVR counselors are good at explaining the DVR process to families and provide many ways for families to participate—phone, virtual, in-person, constant communication (even when student was working with other providers). DVR provided regular updates on the status of the student.

However, coordination and communication between the DVR counselor and the schools can always be improved. Ongoing training and coordination between DVR and school staff helps explain the different roles and functions of DVR staff and school staff. More importantly the training and coordination regularly explains the DVR process and the substantial benefits a student gains from participating in DVR programs.

We identified several challenges with DVR's services to students:

- Students with mental illness and/or behavioral issues resulting in unsafe or violent behaviors have few if any services to address this need.
- Inconsistencies in messages, meetings, and policy interpretation by DVR counselors and school staff can make it difficult to provide a quality DVR experience for students.
- Families are used to their school's consistency of services. DVR is a different service model, one that can have higher counselor turnover. Providers and students/families need to be made aware of and prepared for these differences.

Regular meetings between DVR and schools would be a good opportunity for each entity to clarify and understand each other's conflicting policies. An approved handout outlining DVR step-by-step participation, including what is meant by eligibility categories 1, 2 and 3—would help answer families' questions. Some families don't understand the differences and how their child's disability (and subsequent services) fit within each category. In general, little is known about DVR, especially by parents. Also, students with hidden disabilities who could qualify for services don't seem as interested ("I'm not like that"). One interviewee said DVR should consider producing marketing materials without pictures of people with disabilities in order to reach a broader audience, including those students with hidden disabilities.

Unmet needs that were discussed included not enough providers such as job developers or vocational evaluators—low supply complicated by position turnover. Another unmet need is job shadow opportunities. Transportation is an issue regardless of whether the student lives in an urban, suburban, or rural area. Another difficulty is transportation providers cannot cross county lines.

4.4.2 Coordination with Workforce Development

PCG primarily collected data included in this section from our four (4) key informant Workforce Development interviews.

It goes a long way towards facilitating coordination and collaboration when two entities understand each other's programs. This understanding between DVR and Workforce Development strongly supported improvements in the dual enrollment of each program's consumers. Silos are an issue and can be literal employees in cubicles next to each other don't know each other or each other's roles. Prior to COVID, DVR and Workforce were physically co-located within the job centers, a welcoming environment that made it easier to collaborate but still challenges with collaboration. According to at least two of the key informants. Post-COVID and remote work have definitely made it more difficult to collaborate. While both DVR counselors and job center staff do work occasionally at the American Job Center (AJC), it can be "hit or miss" if the individuals needing to collaborate or brainstorm about ways to collaborate are at the AJC. Whereas pre-COVID a DVR counselor who was having a meeting with a DVR consumer, could walk down the hall and have a conversation with a Workforce representative or a representative from an education or training organization, now they must schedule virtual or possibly in-person

meetings between DVR consumers and job center partners which can be difficult and time-consuming.

To continue good collaboration for purposes of dual enrollment and blending of services, it would be beneficial to schedule DVR counselors, Workforce staff, educational and training organizations at the job centers on a given day.

While not universally available at all AJC's, at least one of the key informants described a Pre-COVID AJC that had availability of representatives from post-secondary organizations, routine employer "meet and greets," representatives from training schools, and representatives from organizations offering apprenticeships. Despite these challenges, overall, everyone does a good job at matching consumers' job goals with the services consumers need to achieve these goals.

4.4.3 Businesses

PCG primarily collected data included in this section from interviews with key business/employer individuals.

Businesses are natural DVR partners: coordination and collaboration can be a mutually beneficial way to fill labor needs with a qualified workforce. To better understand the strengths and opportunities for improvement in the DVR-business relationships, PCG spoke with two employers who were currently working with DVR. They discussed the following strengths and areas for improvement:

- **DVR is a valued partner:** Both employers reported having a great relationship with DVR. Strong communication is a strength. DVR is great at describing consumers' needs and then providing the necessary support for successful placement. Kudos to their DVR team. Once business has been working with DVR for four years and has had a very good experience.
- **Consumers' preparation for work is mixed:** One employer noted that consumers were about 50/50 ready for work. They were willing to learn and adapt to work but were not always clear about what the work would entail. The other employer felt consumers were prepared for work but had concerns about the job coaches understanding of their role. They noted that job coaches have to realize their role is essential to the consumer's success and they must practice good work skills (same as the consumer).
- **Some employers may require additional education to address barriers and issues:** One employer felt that a lack of employer awareness prevents the employment of persons with disabilities. Additional education is needed for employers to lower barriers to employing DVR consumers such as understanding accessibility and assistive technology, simplifying the application process, ensuring that online application processes are accessible to visually impaired individuals, and simplify job descriptions (only include what is needed to do a job).

- **Occasional shortfall of service provider staff:** Occasionally there are not enough service provider staff to provide job support to consumers. Service providers seem to be overwhelmed with meeting consumer needs and attending meetings.
- **Help consumers retain their jobs and advance within the company:** Consumers need to feel included in the company from the first day and at different points along their employment journey. Consumers should be included in all employee gatherings, meetings, and social events. Employers should build a network “hub and spoke model” where all parties come together to share and process information, problem solve employment issues and support the ongoing employment of persons with disabilities.
- **DVR counselors' business training.** Many DVR counselors appear to lack a solid understanding of business practices, priorities and the nature of running a business. An online “Business 101” course could help that situation. Improved connections with business owners could help counselors appreciate the constraints and barriers faced by employers when DVR requests a job shadow, work-based experience, or trial work experience.
- **Business support of DVR.** Overall, employers agreed that they would recommend DVR services to other businesses. Across experiences, employers perceived working with DVR as a positive opportunity.

“I feel the most important aspect of working with our VR services is the relationships we have with VR workers. They are professional and communicate well.”

4.4.4 Tribal Nations Vocational Rehabilitation

- Strong relationships between Tribal DVR Liaisons and Tribal VR allow for increased collaboration, service delivery, and opportunities for consumers. This partnership helps consumers with shared cases benefit from both Tribal VR and DVR resources. DVR participation in tribal community events helps increase awareness of DVR services.
- Tribal VR has had to cut their spending and rely more on DVR for services for shared cases. DVR and Tribal VR still coordinate which entity will purchase which item or service for a shared case, however, the reduction in spending and increased reliance on DVR for certain services can cause challenges in crafting employment plans for Tribal members who are not eligible for DVR. Tribal members who are not eligible for DVR services cannot have DVR paying for their services.

4.4.5 Service Provider Capacity

To assess the capacity of Wisconsin’s service providers, PCG gathered and analyzed feedback from our CSNA interviews, focus groups, surveys, and the 2024-2027 WIOA State Plan. In general, stakeholders report positive engagement and partnership between DVR and service providers. For example, Table 137 depicts consumer respondent’s perceptions about the coordination of community partners and DVR. Almost 80% of service provider respondents ‘Strongly agree’ or ‘Agree’ that DVR and the partners worked well together. Just over 20% of consumers did not agree that DVR and partners worked well together.

TABLE 137 CONSUMER: COMMUNITY PARTNER AND DVR EXPERIENCE

Response	Percent
Strongly agree	35.7%
Agree	43.9%
Disagree	14.3%
Strongly disagree	6.1%

Generally, relationships between DVR and its service providers operate at a quality level. Strengths mentioned include regular meetings and communication between service providers and DVR staff, directors, and administrators. This strength leads to quality services when there are no waitlists, when service referrals are completed promptly, and when payments are made in a timely manner.

However, the service providers capacity to provide quality services is being affected by a combination of staff shortages / turnover, service demands, and policy issues as delineated in the paragraphs that follow.

Issues of disruption in the supply chain for consumer services. A shortage of counselors, service provider staff, and Stout Vocational Rehabilitation Institute (SVRI) staff, as well as DVR staff turnover, causes difficulties in all aspects of the process, from application to case closure. Rapid Engagement has been a positive change in that it has increased the number of individuals applying for service, however, the influx of more consumers with increasingly complex needs has further strained an already strained service system. The average time from application to eligibility is under 40 days.

The 2024-2027 WIOA State Plan indicates that DVR has a target of reducing service provider wait list counts by 20% by June 30, 2028. DVR has identified a decrease in the capacity of service providers to deliver authorized services in a timely manner. This has caused delays in consumer progress. DVR has defined a service provider waitlist as a situation in which a DVR service provider is unable to 1.) initiate service(s) within 30 calendar days of receiving a DVR service authorization or 2.) continuing services for 30 calendar days for an existing authorized consumer. The causes of service provider waitlists are complex and numerous: high staff turnover; low pay; inadequate training;

competition for employees in the general economy; lack of professional growth opportunities; lack of consistent credential requirements or qualifications; unpredictable work schedules; changeable work locations; work-related travel requirements; reporting requirements; programmatic complexity; funding and fee differences between schools/DVR and long term care agencies; the changing nature of work for people with disabilities; and a shift from sheltered work to competitive integrated employment.

CSAVR recently published the results of a provider capacity survey which showed many of these trends are national and not exclusive to Wisconsin. Staying abreast of national trends and solutions will be critical to confronting provider capacity shortfalls⁸.

Reducing disparate policy interpretations and report requirements. Service providers identified a wide variability in policy interpretation of statewide specifications from WDA to WDA, and even from office to office within a single WDA. This variability can affect the service providers understanding of DVR expectations—from expected service outcomes to DVR consumer expectations. When the variability becomes overwhelming and unmanageable, it has discouraged service providers from working with an office or an individual counselor. While service providers and DVR both acknowledge the value of flexibility and interpretation, it can be problematic. For example, monthly report variability can be difficult for a counselor who reads monthly reports from multiple service providers. Different report formats and content (sequence and amount) can make reading monthly reports a long and arduous task. Narrowing and simplifying policy variability can increase system efficiency and improve the relationship between DVR and service providers. Most all service providers recommended some form of regular meetings between WDA managers and service providers to get to know one another, discuss problems, review new DVR policies, obtain clarification on existing DVR policies, and address any other topics that may arise.

A shortage of service providers in specialties and in rural areas. Focus groups held with DVR and service provider staff identified specific unmet needs in the area of mental health. As the number of consumers with serious mental health needs increases, the availability of mental health services—psychiatrists and psychologists—remains flat or is even declining in certain areas. This increase in mental health needs affects both service providers and DVR because most staff are not trained in counseling consumers with serious mental health issues and service provider resources are insufficient for these individuals. Complicating the situation, Individual Placement and Support (IPS) funding sources tend to offer higher service rates (reimburse for more services and costs than DVR's rates) and some Supported Employment providers are re-allocating staff time to IPS consumers as a matter of economics which reduces available services for DVR consumers. Considering the results of service provider and staff surveys, increasing

⁸ [Provider Capacity Survey – CSAVR – 2024 – Accessed November 20, 2024](#)

engagement and partnership with mental health service providers and agencies could help alleviate capacity concerns.

Service providers would like to provide services in unserved and underserved areas. However, the combination of low service rates and low demand generally makes it economically unfeasible to open offices in these areas. While service providers may send staff to meet with individuals on a case-by-case basis, the low service rates and limited reimbursable expenses make having a staff person gone all day an unsustainable option. DVR and service providers continue to test different service options. For example, virtual services can mitigate long travel times, but these rely on consistent internet service that is not always available.

The Provider Portal eases the administrative burden on provider staff. They can submit monthly reports and invoices through the Portal which minimizes handling of documents, loss of documents and expedites payment. The Portal allows electronic signatures on documents which expedites the process for both DVR staff and service providers – no need to schedule face-to-face meetings with a consumer to just have consumers sign documents.

4.5 WISCONSIN REHABILITATION SERVICES CAPACITY

PCG gathered capacity data primarily from individual interviews and DVR staff and manager focus groups. We explored capacity from several different angles, including staffing, skills, and administrative structure.

In the DVR 2024-2027 State Plan, DVR projects they will need approximately twenty-two new counseling and VR specialist staff over the next five years to meet growing service demands. DVR would ideally like to have 167 VR counselors and 56 VR specialists but at the time the state plan was written, DVR had 158 counselors and 53 VR specialists.

Staff shortages and turnover can have a major impact on DVR's capacity to provide high quality services on a consistent basis. The shortage of qualified rehabilitation counselors is a national issue not limited to Wisconsin. There does not appear to be a long-term interest in social service and social work career paths; enrollment in social work baccalaureate programs has decreased nationally, and the rate of awarded graduate degrees has not kept pace with population growth⁹.

Staffing shortages are likely to continue for DVR, complicating the shortage is rehabilitation counselor turnover. Rates of counselor turnover were reported as problematic by DVR staff, independent providers, and DVR program participants. While counselors exit for a variety of reasons, one of the most prevalent is salary. Insurance

⁹ [2022-2023 State of Social Work Education in the United States – Council on Social Work Education; 2024](#)

companies, health care companies, and return to work companies offer higher compensation. According to the Bureau of Labor Statistics, nationally, the median average wage for a social worker employed in vocational rehabilitation services was 74.1% of someone employed in healthcare services¹⁰. Additionally, these outside positions are thought to have less stress and more desirable job tasks, an inviting opportunity for many counselors. Paperwork and data entry tasks seem to overshadow the “counseling and guidance” aspects of the job, which is what drew many individuals to pursue rehabilitation counseling.

Declining overall enrollments at both undergraduate and graduate rehabilitation counseling programs as well as VR program statements about the difficulty finding qualified rehabilitation counselors to fill vacancies would seem to indicate that the supply of rehabilitation counselors may not fill current and future demand. Public VR Directors generally state that the departure of public rehabilitation counselors for more lucrative, less stressful positions with private organizations further aggravates the demand/supply equation.

Another factor impacting capacity is **ensuring staff have the skills they need to deliver quality services**. In our interviews, service providers shared their perception that DVR needs more qualified staff who will stay with the agency long term. Interviewees suggested developing specialized staff who can meet the unique needs of the following populations:

- Mental health conditions, especially seriously mental illness
- Traumatic brain injury
- Intellectual and developmental disabilities
- Autism spectrum disorder
- Deaf and hard of hearing

Third, **DVR can address capacity by examining existing administrative structures to identify opportunities to create efficiencies**. Identifying opportunities to streamline processes and leverage technology can reduce time spent on administrative tasks. By reducing administrative burdens, staff can maximize the time they spend delivering services and supports to consumers.

The option to hold virtual and remote meetings with consumers is a major benefit for both consumers and staff. They can be time savers, allowing staff to meet with multiple individuals who live hours from an office while reducing transportation burdens on both parties. In the past, a staff person might have spent long hours driving to meet a consumer and then driving home. Staff have found that an in-person meeting for the initial session better establishes the working relationship between counselor and consumer and virtual

¹⁰ [Occupational Outlook Handbook – Bureau of Labor Statistics; 2024](#)

meetings generally work well for follow-up meetings. Virtual meetings are more convenient and easier to schedule for both staff and consumers. A consumer can request an in-person meeting anytime. The virtual option has helped mitigate staff shortages, but it is not a final solution.

DVR is constantly looking for ways to become more efficient in its business processes, such as making Vendor Portal and payment process refinements. DVR has modified job duties so that VR specialists can perform certain tasks counselors were doing that did not necessarily require a counseling skill set. This has allowed counselors to focus more on “counseling and guidance” than on data entry and paperwork and helped them manage their caseloads. Communication between staff, between management and staff, and between staff and service providers will remain a crucial element of translating DVR’s staff capacity into service for consumers.

5 SUMMARY OF CSNA REQUIRED ANALYSIS

Below we provide aggregated results from our surveys, interviews, focus groups, community meetings, and case management data for the period July 1, 2022, to June 30, 2023. PCG collected and analyzed data (as described in the Methodology section of this report) to assess the rehabilitation needs of individuals with disabilities residing in Wisconsin. We have broken out these key findings by population and described them in detail in the subsections that follow.

5.1 INDIVIDUALS WITH THE MOST SIGNIFICANT DISABILITIES, INCLUDING THEIR NEED FOR SUPPORTED EMPLOYMENT SERVICES

Overall, individuals with the Most Significant Disabilities make up the majority of the DVR population, are represented highest in age group 18-34, and have the lowest successful closure rate of 44.1% compared to the next highest closure rate of 48.1% for consumers with a significant disability. Most significantly disabled individuals are 50.6% of the DVR consumer population. In addition, individuals with a most significant disability were represented highest in young adults ages 18-34 compared to the age group '75 and older' which had the smallest percentage of individuals in the 'most significant disability' group.

CSNA analysis indicates that individuals with a most significant disability have an unmet need for mental health supports. Mental illness comprises a large segment of consumers with a most significant disability. One in five DVR consumers over the past three years was listed as having a disability related to mental illness and mental health services are repeatedly mentioned as a service need. Further, the incidence rate of co-occurring mental health conditions in individuals with intellectual and developmental disabilities is high: with research indicating rates between 37 and 45%.¹¹ With the considerable rate of individuals with a primary diagnosis, in addition to the rates of co-occurring mental health disorders, we know that mental health is a considerable need for individuals who are most significantly disabled.

The number of Supported Employment (SE) providers and the number of available hours for Supported Employment for DVR consumers has been declining, according to qualitative research conducted with these providers as well as a few comments by DVR staff. Analysis indicates that higher reimbursement for services by other entities, and lack of trained service provider staff, may contribute to the unmet need for this service category

¹¹ Lineberry, S., Bogenschutz, M., Broda, M., Dinora, P., Prohn, S., & West, A. (2023). [Co-Occurring Mental Illness and Behavioral Support Needs in Adults with Intellectual and Developmental Disabilities](https://doi.org/10.1007/s10597-023-01091-4). *Community mental health journal*, 59(6), 1119–1128. <https://doi.org/10.1007/s10597-023-01091-4>

as a whole. DVR recently increased rates twice for most categories of service and this change may not yet have been fully absorbed by the service provider population at the time this research was conducted.

However, most significantly disabled successful closures are not substantially less than the successful closures of consumers with a significant disability. (Rates of success are only slightly below individuals with significant disabilities.) Individuals with a most significant disability, broadly written, were not a major concern of staff or providers in focus groups, and spending patterns for DVR services show that individuals with a most significant disability routinely receive high levels of spending. In survey responses, they were no less likely to recommend DVR services, nor were they more likely to report there were services they required which were not received. These outcomes suggest that DVR services are well suited to meeting the needs of many individuals with a most significant disability.

However, within specific categories of individuals with disabilities, there are clear unmet needs. Services for individuals with mental health related disabilities—the largest group within the most significantly disabled category—were widely seen as inadequate in both quality and supply. Additionally, service providers felt that rates were inadequate to support SE services provided to DVR cases.

5.2 INDIVIDUALS WITH DISABILITIES WHO ARE MINORITIES OR WHO HAVE BEEN UNSERVED OR UNDERSERVED BY DVR

Below is an analysis of individuals who are minorities and groups who have been unserved or not served well enough.

5.2.1 Individuals Who are Minorities

Some groups of minorities are represented in the DVR service population at rates different than expected when considering their rates in the whole population. Black or African American represented 16% of DVR caseloads and 10.3% of the general population. White represented 73.2% of DVR caseloads and 80.4% of the general population. Other minority group participation in DVR was less than their representation in the general population.

Race is a major factor in the likelihood of success in Wisconsin. Individuals who were Asian closed their case with employment 58.2% of the time, White individuals 49.1%, and Black or African American 32.9%. Though some of these differences are likely due to structural barriers to employment, this pattern was also observed in rates of VR spending. Black or African American individuals received, on median, around 52.8% of the median case spending. Black or African American consumers were notably more likely than Whites to report that there were services they needed but did not receive (about a 16-percentage point difference).

However, DVR staff did not report Black or African American consumers as being more likely to be underserved compared to other racial or ethnic minority groups. Survey results indicate that DVR staff were as likely to report that Black or African American individuals were unserved as they were to report that Hispanic and Asian individuals were unserved. (Hispanic individuals have almost identical case spending and outcomes compared to White individuals, and Asian individuals have somewhat better outcomes and a higher median case spending.) Individuals who were Black or who lived in urban areas did not rise as a topic of discussion in focus groups or interviews consistently. Black or African American consumer survey respondents were somewhat less likely to agree to a variety of positive statements about their VR case contact, but most indicated respect for their autonomy and choices, and respect for cultural background and identity. These results suggest that DVR's efforts to improve staff awareness of the struggles of racial and ethnic minority individuals have been effective, but that DVR staff may benefit from additional information celebrating the successes of minority populations for whom services have been effective.

These represent meaningful disparities in service that, unlike many other needs that arose in this analysis, were not highlighted by DVR staff. This could be due to knowledge of prevailing socio-economic status factors. Additionally, given the concentration of the Black or African American population into WDA 2, many DVR counselors likely have minimal Black or African American individuals within their caseloads, so these differences become effectively unobservable to them. In addition to interventions to help improve the rates of successful closures among Black or African American consumers, DVR should continuously monitor outcomes by racial groups in reports and communications with staff.

Native American populations also saw different outcomes than the majority of DVR consumers (see Table 96). While they were a much lower portion of the population, Native American individuals are a large enough group that DVR may need to take specific action. Cases with Native American individuals closed at a lower rate than many other populations (37.2%) and had lower median case spending by DVR. Qualitative outreach suggested that, while relationships between DVR and Tribal VR programs were generally good, it could be strengthened. Additionally, there were a large number of young Native American individuals classified as 'Potentially Eligible' in DVR case management data. According to DVR staff, this was likely due to a particular summer program in WDA 7 that is extremely popular. However, it highlights a potential need for improved case coordination—youth who are already part of a community that becomes aware of this program and would like to participate in DVR services would need to apply to DVR and have their eligibility determined according to the criteria of DVR. When a consumer is eligible for services in both a Tribal VR Program and DVR, it is easier to blend and braid services for that consumer.

Findings indicated that service needs for members of minority groups had similar trends to the overall service needs of the DVR population. Technology, physical access to services, and a good supply of businesses that could hire DVR consumers are needed to

address underserved and unserved minority groups. Furthermore, individuals who are minorities have transportation, job coaching, and training needs. More than half of staff express the desire for more training in working with those populations they identify as underserved.

5.2.2 Unserved and Underserved Groups

Interview and focus group participants were asked if they felt there were any high-risk populations who were being underserved by VR. Generally, all focus group and interview respondents identified at least one underserved or unserved population. Likewise, survey data from staff, service providers, and consumers revealed some trends that suggest specific areas for improvement.

The most frequently mentioned groups of underserved and unserved individuals include:

- Those with behavioral and mental health concerns, including those struggling with substance use needs
- Those residing in rural areas
- Those who are transient or are unhoused
- Those who are incarcerated or involved with the juvenile justice system

Both DVR staff and service providers reported individuals who are unhoused or transient were in need of services. This population was the only potentially underserved group identified by a majority of respondents in both sets of surveys and was a frequent topic of discussion in focus groups. Outreach to individual housing and homeless services providers in Milwaukee and Madison both showed a limited knowledge of DVR, their services, or how to reach out to their staff among those providers. Working in partnership with these groups and incorporating them into the network of DVR stakeholders should be a priority.

These individuals often have complex needs and combinations of disabilities and behaviors that are challenging from an employment perspective. Some of these needs are compounded by other groups that DVR stakeholders frequently identified as underserved, such as those with mental health needs.

In qualitative feedback and in surveys, staff and service providers reported individuals with mental health needs were frequently underserved. Staff and providers noted that training for service provider staff was not always adequate to work with individuals with serious behavioral problems. Individuals with mental health needs may also experience different barriers to work, and be seeking different forms of employment, than individuals with other forms of disability. Addressing the service needs of those with mental health related disabilities is a major concern of DVR stakeholders.

Mental health services were also the category of service which providers and staff were least likely to report as being adequate. Less than 5% of these groups reported mental health related services as being always adequate. This group of services also had the

highest rate of being reported as never or rarely adequate. Combined with the growth of this group of mental illnesses in the wider population, these services will increasingly be in demand.

In addition, service providers and staff were concerned about the needs of those who are or have recently been incarcerated. This arose in qualitative research and was identified by large groups of staff (39.5%) and providers (47.3%). Obviously, this group has at least some overlap with other reportedly underserved groups. Qualitative interviews with criminal justice stakeholders discussed large differences in how different DVR offices worked with their institutions, and that handoffs between DVR and criminal justice rehabilitation varied in quality.

The most common service need identified for these underserved populations was transportation, as well as increased outreach and increased training for specific populations. Similar to needs identified for individuals with a most significant disability and minority groups, DVR staff identified transportation, job coaches, and supported employment providers as those that needed to improve services to underserved populations.

5.3 INDIVIDUALS WITH DISABILITIES SERVED THROUGH OTHER COMPONENTS OF THE STATEWIDE WORKFORCE INVESTMENT SYSTEM

Generally, there is good coordination between DVR and other partners in the statewide workforce system when it comes to serving individuals with disabilities. Both those who participated in VR services and non-participants reported coordination between service providers working very or somewhat well (75.6% of DVR consumers and 74.3% of non-consumers). Those who are not currently working with DVR reported using community-based resources like community rehab programs, mental health centers, and local staffing agencies.

One important difference between consumers and non-consumers was the reported prevalence of discrimination. About two-thirds (65.9%) of respondents who were not VR consumers reported experiencing discrimination related to their disability, though this sample was small. Only one-in-five (19.9%) of individuals working with DVR reported experiencing this barrier. Advertising DVR's ability to reduce barriers related to discrimination may help involve more individuals who may otherwise not believe they can achieve employment.

In qualitative research channels, individuals from other parts of the workforce investment system like the Wisconsin Job Centers and Centers for Independent Living reported strong relationships with DVR and their staff. These providers echoed concerns about unmet mental health needs expressed by groups working with unhoused populations. By building capacity to address the mental health needs of individuals, DVR could become

an important coordinator of services and help more individuals reach employment and independence.

Likewise, businesses who had worked with DVR reported good relationships, with 87.8% of those who worked with DVR willing to recommend it. Likewise, those who had not worked with DVR expressed interest in DVR services for employers, and learning more about how to make their businesses more welcoming and capable of employing individuals with disabilities. Considering that these were businesses who were largely working with other aspects of Wisconsin's workforce development system, there is obviously an appetite for more services and job opportunities for those with disabilities.

When it works well, the different systems do a good job of blending and braiding services and funds to ensure that consumers have a seamless stream of services to meet their needs. Post-pandemic circumstances present some challenges to that collaboration. With WIOA partners working hybrid models, remote work, and one or two days in the office, the camaraderie and ability to stop by an office to discuss a consumer's needs has declined, as reported in interviews and focus groups. Partners' scheduled time in the offices or physical locations rarely coincide without significant coordination. Referrals happen mostly remotely and by computer whereas pre-pandemic, there were more face-to-face referrals. While they do not necessarily impact the quality of services and are not noticed by individuals being served, these do impact the quality of employment with both DVR and other aspects of workforce investment. This presents further challenges to capacity within the system as a whole.

DVR has shown more interest and activity in collaborating with the workforce centers and has been less siloed since the pandemic. For example, DVR has begun inviting workforce center staff to DVR orientations for new staff. According to workforce center staff, DVR has shown considerable interest in collaboration with the local workforce center partners. This collaboration has high potential for meeting consumer needs that cannot be met by DVR but might be met by a workforce center partner. This improved collaboration by all partners improves planning and service coordination to better meet consumer needs.

5.4 YOUTH WITH DISABILITIES, AND STUDENTS WITH DISABILITIES, INCLUDING THEIR NEED FOR PRE-EMPLOYMENT TRANSITION SERVICES OR OTHER TRANSITION SERVICES

PCG assessed the needs of individuals with disabilities for transition services and Pre-Employment Transition Services (Pre-ETS), and the extent to which such services provided under this Act are coordinated under the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.) in order to meet the needs of individuals with disabilities. RSA requires that DVR reserve 15% of their funds to provide students with disabilities ages 14-21 with Pre-Employment Transition Services (Pre-ETS). DVR is spending at least 15% on the Pre-ETS required services, meeting RSA spending goals.

As WIOA promotes cross-agency collaboration for VR to serve youth and students with disabilities, the assessment of services must include a qualitative assessment of coordination. Many youths receive services from schools, CILs, VR, or other community providers. As such, there is no singular, all-inclusive count of those who are currently receiving Pre-ETS (besides those served by DVR), which makes it difficult to accurately pinpoint how many are underserved or unserved. Many of the unserved / underserved population are most likely receiving services from providers that are easier for the student to access and fit the student's schedule. And some of the unserved/underserved students have probably chosen not to participate in Pre-ETS.

When surveyed about the adequacy of Pre-ETS services, many staff indicated that the majority of Pre-ETS service types were not always adequate. However, staff did not flag 'Individuals transitioning from high school to work' as an underserved group within the same survey. And although the majority of service provider staff who work with students transitioning from education to the workforce noted that the adequacy of Pre-ETS services sometimes fell short, service providers were still more likely to rate Pre-ETS services highly compared to other service types. Individual consumers working with DVR most frequently reported receiving Pre-ETS services they required, even if some reported needing more services in a given area. Less than a third reported not receiving any given Pre-ETS service they determined they needed.

In DVR's independent survey of school-based transition coordinators, reviewed as part of this effort, respondents often reported that students and families are not interested in working with DVR until they're preparing to leave educational environments. This generally means until they're in their junior or senior year of high school, or later for individuals pursuing post-secondary education. Working to make students more aware of DVR services that help individuals prepare for work, or which cover costs of accommodations, training, and education could better help serve this population.

In the area of post-secondary education, all stakeholders providing feedback mentioned the importance of constant and regular communication between DVR, Disability Services, high school staff, and families about the consumer's expectations and readiness for college. Both DVR and Disability Services staff stressed the importance of explaining to prospective college students the dramatic differences between their experiences in high school and the expectations in college. The level of wraparound services does not follow the student from high school to college, and a student with disabilities needs good self-advocacy skills, a clear educational goal, and a support network to increase their chances of a successful post-secondary experience.

5.5 THE NEED TO ESTABLISH, DEVELOP, OR IMPROVE COMMUNITY REHABILITATION PROGRAMS WITHIN WISCONSIN

The CSNA must include an assessment of the need to establish, develop, or improve community rehabilitation programs in Wisconsin. Exploration should be given to new and innovative methods to provide services when service providers either cannot fill positions

or staff leave after a short time on the job. From a service provider perspective there is a need to balance the economics of service provider sustainability with providing service in unserved/underserved areas with low consumer numbers and/or low service demand. If there are insufficient billable hours, the service provider loses money if they station a staff member in an area, or only periodically send a staff member to the area.

Provider staffing levels are below optimal:

- Turnover and shortages of service provider staff, and Stout Vocational Rehabilitation Institute (SVRI) staff causes difficulties in all aspects of the DVR process, from application to case closure.
- For more than five years, DVR has identified a decrease in the capacity of service providers who have a DVR service agreement to deliver authorized services in a timely manner. This has caused delays in consumer progress and in some cases provider waitlists. It may also hamper DVR's efforts to reduce service provider wait list counts by 20% by June 30, 2028, as indicated in Wisconsin's 2024-2027 WIOA State Plan.
- DVR and service provider staff alike noted a shortage of service providers in specialties and in rural areas. For example, as the number of consumers with serious mental health needs increases, the availability of mental health services, psychiatrists, and psychologists, remains flat or is even declining in certain areas. As DVR caseloads become increasingly populated with consumers who have serious mental health conditions, DVR counselors feel less prepared to work with these consumers. Most DVR and service provider staff were not trained to work with—or provide direct services to—consumers with serious mental health issues, hence both DVR and service provider staff were least likely to report mental health services as 'always adequate.'

As such, DVR and service providers could consider other approaches to meet the needs while making the methods more economically feasible for a service provider. Approaches to consider:

- Identify current services that can be provided remotely, identify consumers who are comfortable with remote/virtual services and then encourage service providers to hire staff who only provide virtual/remote services. DVR can encourage providers to consider recruiting both from Wisconsin and outside Wisconsin.
- To complement virtual/remote services, develop services and trainings that can be delivered on any platform (desktop, laptop, tablet, cell phone) regardless of type of service connection (Wi-Fi, internet, cell phone plan). YesLMS headquartered in Wisconsin offers training on any platform and any connection. Arkansas VR has a QR code on its flyers which consumers can use to begin the application process from their phones.

- Assign current DVR staff or hire additional staff dedicated to recruiting and increasing the number of service providers and potentially increasing the number of employers willing to hire DVR consumers.
- Encourage service provision in underserved/unserved areas and improve statewide coverage, with special rates or add-on rates if a provider is willing to serve a consumer in a specific area of need. Ohio VR has two add-on rates – Critical Need Rate (CNR) and Extra Travel Allowance (ETA). A counselor can authorize a CNR (in addition to the regular service rate) for a provider to serve a consumer in an area without a service provider for that service. The ETA can be added at the discretion of the counselor for serving clients in an area without a service provider.
- If a current provider shows interest in adding a service to its offerings and it is appropriate, follow past experiences and consider providing an enhanced rate or an add-on rate to the current rate to support start-up costs, staff training and staff recruitment. The enhanced rate would be time limited and based on criteria jointly established by DVR and the provider.
- To increase the number of trained CE and SE providers, consider determining necessary competencies to provide Customized Employment and Supported Employment and identify/develop less expensive and locally developed alternatives to current credentials.
- The availability of remote work options creates another competitive integrated employment opportunity for consumers. It could also be a great option for consumers who have limited or no access to transportation. To prepare for remote work, some consumers may need training on the skills and differences of remote work, e.g., participating in virtual meetings, working from home, basic troubleshooting skills with computer issues.
- Because the low volume of consumers with self-employment job goals can make it difficult for a DVR staff person to stay current with business development and business plans, consider partnerships with the local SCORE chapter, retired businesspeople, or an active business to mentor consumers interested in self-employment.
- Using models like Implementation Science and Everett Rogers' Diffusion of Innovation to help service providers.

By investing in the growth of service providers, DVR not only expands consumers' choice of provider(s) but also invests in successful services demonstrated to yield results and a higher successful case closure rate. The results of this CSNA suggest several areas for service provider improvement.

Supporting individuals with significant mental health needs is frequently reported as a need in Wisconsin. Incentivizing service provider staff training around mental health supports, and methods of accessing mental health treatment, could significantly improve the capacity of the workforce investment system to work with these individuals. Identifying

evidence-based training like micro-credentialing for working with those with mental health related disabilities could be an important first step.

Meaningful differences emerged in case outcomes and perceptions of services between minority racial groups in this needs assessment. Black or African American individuals had less successful outcomes and were notably more likely to report not receiving needed services. They also form a large portion of DVR's service population. Examination of case closure and spending patterns revealed difficulty keeping this population engaged in services, communicating with them, and completing milestones necessary for payment. Encouraging service providers to add cultural competency training to staff training requirements could mitigate some of these issues and improve outcomes. Additionally, providers working with these communities should be encouraged to develop the capacity to communicate using the tools and methods most used by these populations. Those methods could include face-to-face, email, texting, or a mixture of the three as well as the location of meetings if requested. For texting, service providers and DVR will need to confirm both have the ability and legal authority to text with consumers and text with each other. Flexibility, predictability, and follow-through are keys to keeping engaged with consumers.

While there were no quantitative findings of differences in rural areas, these populations were a concern for DVR staff, providers, and other stakeholders as seen in our qualitative research. Transportation needs and limited job market opportunities were common concerns. While Wisconsin is mostly rural by land area, approximately 30% of the population lives in a rural area and approximately 25% of DVR's service population lives in a rural county. Rural services are often a challenge for VR agencies. Rural areas typically have limited opportunities for employment and place higher demands on accommodations. However, DVR could work to overcome some of these barriers. These positions often require skills that are well within the capacity of people with significant physical or interpersonal disabilities and can also be well compensated. Expanding access to broadband internet connections and providing training in remote work skills could present a meaningful alternative to this long-challenging population.

6 RECOMMENDATIONS

PCG has included our CSNA recommendations in this section. Our recommendations touch upon many of the themes discussed in the preceding sections of this report. For each of our recommendations we have provided a ‘Call to Action.’ These are the immediate next steps that DVR can take to begin implementing our recommendations.

While this section highlights potential improvements or areas for further research, it needs to be emphasized that the majority of those participating in any aspect of data collection for this CSNA expressed unreservedly positive sentiments. This includes consumers, staff, providers, and WI businesses; and stretches across all forms of data collection. DVR’s service population equitably represents the existing population of working age individuals with disabilities and serves a larger than expected portion of that population.

Overall, DVR serves the population of individuals with disabilities seeking employment in WI well, including individuals who are minorities, individuals with the most significant disabilities, and youth and students with disabilities. The unserved population is small.

Throughout this evaluation, PCG has identified DVR’s strengths and successful practices along with opportunities for growth and improvement. DVR has the opportunity to continue the improvement cycle by building upon current strengths and successful practices while addressing the needs identified throughout this CSNA. Leveraging the results and analysis of this evaluation, there is an opportunity to make decisions to align and refine the DVR system to be most impactful with the resources available. PCG proposes the following recommendations to increase the efficacy of DVR services and funds, with the goal of improving and increasing successful outcomes for DVR consumers. These recommendations are organized in several areas that influence the efficacy of the agency: education and capacity, policy and processes, and resource alignment.

6.1 EQUITABLY SUPPORT UNSERVED / UNDERSERVED INDIVIDUALS

PCG recommends that DVR address the needs of underserved individuals, including those who are minorities. Specifically, non-White, non-Asian individuals served by DVR do not receive the same levels of service. In addition, in qualitative research, staff and providers routinely cited concerns about the ability of DVR services to address the needs of individuals with mental health related disabilities, and the unhoused population of Wisconsin. These issues were intertwined with concerns about serving individuals who were currently, or had previously been, incarcerated. Many of these issues have been addressed in DVR’s 2022 Diversity Needs Assessment Action Plan.

To equitably support unserved and underserved individuals, we take a multipronged approach to systems intervention:

1. Further understand barriers and needs

2. **Align resources to support priorities**
3. **Examine and adjust policies and procedures**

We have included recommendations for each of these categories in the paragraphs that follow.

6.1.1 Further Understand Barriers and Needs

In addition to racial and ethnic disparities, a very large proportion of staff indicated that mental health services were not always adequate. These sentiments echo those expressed in staff focus groups—staff routinely designated individuals with mental health-related disabilities as underserved. **PCG recommends further exploration and analysis to clarify and confirm unserved and underserved populations, building on the work that DVR is currently implementing based on assessments done in 2020 and 2022.**

Call to action: *to accomplish this recommendation, PCG identifies the following immediate actions that can be taken to support DVR making databased decisions.* **Further explore service and spending disparities by race and ethnicity.** This evaluation should use both qualitative and quantitative approaches to fully identify the existence of real disparity, the timing of necessary interventions in the case lifespan, and what causes these differences from the viewpoints of stakeholders involved. These elements can be combined to create a meaningful plan of action to address differences in outcomes.

1. **Determine when individuals from minority groups stop receiving services.** How much spending is occurring within the first two months of service compared to non-minority White consumers? Are there certain service delivery point(s) at which minority groups begin to stop receiving services? Notably, DVR data does not indicate that cases are proceeding to services at notably different rates of speed. Differences are most likely to occur within the 'Receiving Services' period of time.
2. **Schedule qualitative interviews with providers, advocates, and minority consumers** to identify the root cause(s) of service / spending disparities and reasons for case closure that is more nuanced than what is available in DVR case management data. WDA 2 held consumer focus groups in 2020 that helped inform an Equity Action Plan for that region. Recently, they also conducted a consumer survey at various points in the VR process. DVR plans to continue these efforts and may take this approach statewide as it proves effective.
3. **Perform linear regression of service spending by race.** Use significance of disability, region, disability type, age, and employment status as control variables (at minimum). This will help DVR see what difference in average spending is attributed solely to race. This step is optional and may not be necessary to address DVR's larger goals but will provide meaningful context.

4. **Perform a more comprehensive analysis to understand how much of the difference in case outcome is attributable solely to different labor market conditions.** Black and African American individuals in Wisconsin face a higher general unemployment rate than the Wisconsin population as a whole. At least some of the differences in case outcomes are likely due to this large societal condition over which DVR has little ability to exert control. Consider reviewing where individuals live as well as race to understand differences.

6.1.2 Align resources to support priorities

Across the country, VR agencies are exploring ways to align service provider reimbursement with agency programmatic priorities. **PCG recommends that DVR explores payment structures that support the programmatic priorities of the agency.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Create a unique expense category for mileage expenses reported by service providers with a statewide service agreement.** Some variation in service spending across race and region may be partially driven by mileage expenses. Currently, these expenses are captured under the line items for the actual service rendered for service providers with statewide service agreements. Moving mileage expenses from other service line items to its own expense category will give DVR a clearer picture of a.) actual mileage expenses and b.) the size and scope of any remaining disparities in service expenditures across different populations.
2. **Consider expanding successful rate schedule improvements to reward providers for serving priority populations.** Cases that do not complete services do not get paid, making providers less likely to devote resources to similar cases, leading to fewer cases that close successfully. DVR has identified alternative payment methodologies such as the Rapid Hire Incentive Program and Preferred Hire Retention Outcome as ways of rewarding providers for successful outcomes. These programs could be expanded or replicated to help incentivize providers to target services toward groups that may not be as well served.

Populations that historically exit services early put both DVR and providers at a financial disadvantage because both will have put in effort without reaping the financial benefits of a.) hitting milestones and b.) moving individuals to competitive integrated employment.

6.1.3 Examine and adjust policies and procedures

In addition to realigning funds, adjusting policies and procedures to support effective delivery of services is critical to improving delivery and outcomes. **PCG recommends that DVR review policy and in-the-field practice with the goal of improving services for underserved populations.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Explore additional communication methods, and work with providers to implement them across DVR's stakeholder networks.** The most common reason for VR case closure is an inability to contact consumers. DVR and provider staff may not be using the forms of communication most effective for reaching out to certain consumer populations. DVR could research the best form(s) of communication for each individual type of outreach. Certain types of communication may work better for some tasks than others, such as e-mail and electronic signature software for gathering information and completing documentation, and text or phone calls for routine updates.

Short message service/text messaging is a preferred form of communication among large segments of the US population and tends to be a more reliable and timely form of contact than alternatives such as e-mail. DVR could select and purchase a software package that will allow staff to use their computers to send text messages, negating the need for an agency-issued cellphone. Service providers who do not have other options for texting could also purchase a texting software. DVR could consider drafting language for service agreements/technical specifications strongly recommending that service providers match up, when possible, a consumer's communication preferences with a staff member who can accommodate that preference. Where it is not already occurring, DVR staff could learn a consumer's communication preferences at intake/application.

2. **Examine and evaluate efficiencies (common criteria) between DVR and Tribal VR eligibility determinations** The DVR and Tribal VR eligibility determinations are not interchangeable; however, it could expedite the eligibility determination process if both DVR and Tribal VR groups could agree which data elements collected by the other would be accepted by both, rather than collecting those data element again as part of each eligibility determination process. This could not only reduce potential wait times, but also reduce the administrative burden on Tribal VR staff, DVR staff and individual consumers and avoid unnecessary duplication/collection of consumer information. This could further enhance the partnership and trust between Tribal VR programs and DVR.
3. **Develop a standardized correctional institution approach.** DVR, in conjunction with the Wisconsin Department of Corrections (DOC), should develop a standardized approach to collaborating with correctional facilities—how often DVR staff are onsite, what DVR staff can do onsite (information sessions, eligibility determinations, referrals, and other pre-release activities), with the goal of making the availability of VR services more equitable across the state. DVR and DOC should then promulgate clear directions to DVR staff and all stakeholders. Even if some correctional facilities choose not to participate, adding those who are willing collaborators would help connect justice-involved individuals with disabilities to VR

services before they are released. DVR has already begun to make progress on their approach to correctional facilities; a joint Disability Innovation Fund (DIF) Grant with the WI Department of Public Instruction includes grant-funded DVR staff to provide more frequent service to justice-involved youth at educational institutions and at American Job Centers. . DVR could also explore creating a Memorandum of Understanding/Memorandum of Agreement between DVR and DOC that outlines a standard approach for DVR service for incarcerated individuals with disabilities.

4. **Provide additional VR assistance for the incarcerated population.** In conjunction with DVR staff, career counselors at American Job Centers, psychologists and corrections counselors, develop scripts which formerly incarcerated consumers can use to explain gaps in their employment history and identify transferrable skills learned while incarcerated. DVR staff and/or service providers can practice the scripts with formerly incarcerated consumers. Develop scripts Business Services Consultants and service providers can use when having discussions with employers who might provide job opportunities for formerly incarcerated consumers.
5. **Identify additional sources of mental health services.** Mental health services fell into the category of service least likely to be reported as always adequate. These services are in high demand and are among the most widely reported unmet needs in Wisconsin. Identify additional sources of mental health care, such as out-of-state providers and telehealth service providers who meet state licensing requirements.
6. **Align job pipelines with Wisconsin “50 Hot Jobs” and in-demand occupations.** The career categories that DVR consumers are most likely to exit into (see Table 98) do not align with the sorts of careers most likely to be highly in demand in Wisconsin (see Table 13), and/or those jobs for which growth is predicted. Helping DVR staff develop connections and knowledge within those industries will help DVR staff better prepare consumers for the future of Wisconsin work and address the most common job-related barriers reported by staff.

6.2 MAXIMIZE CAPACITY OF SERVICE PROVIDERS AND VR STAFF

Throughout this evaluation, research indicates that there is an opportunity to improve the quality of services delivered by both DVR and service provider staff. Both DVR and service providers have staff shortages and turnover, although both concerns seem greater among service providers. Job Coaches are a crucial position that helps DVR consumers understand their new job and helps support consumers in that job. However, our research indicated that Job Coaches have one of the highest levels of turnover and shortages of individuals interested in the position. Also, certain areas of the state have particular difficulty recruiting DVR counselors to fill vacancies. These two examples often mean there is insufficient staff to get all the work done. Data gathered during focus

groups, community meetings, interviews, and surveys strongly indicate that DVR and its service providers' capacity to provide quality services is being hampered by a combination of staff shortages, turnover, and a need for more mental health expertise. CSNA analysis indicates that service provider and DVR staffing shortages and turnover can have a major impact on DVR's capacity to provide high quality services on a consistent basis.

The shortage of qualified rehabilitation counselors is a national issue not limited to Wisconsin. Declining overall enrollments at both undergraduate and graduate rehabilitation counseling programs as well as VR program statements about the difficulty finding qualified rehabilitation counselors to fill vacancies would seem to indicate that the supply of rehabilitation counselors may not fill current and future demand. Public VR directors generally state that the departure of public rehabilitation counselors for more lucrative, less stressful positions with private organizations further aggravates the demand/supply equation.

Complicating staffing shortages is the rate of rehabilitation counselor turnover, reported as problematic by DVR staff, providers, and consumers. While counselors exit for a variety of reasons, one of the most prevalent is higher salary and compensation offered by insurance, healthcare, and return-to-work companies in the private sector. These outside positions are perceived as having less stress and more desirable job tasks (e.g., less paperwork, data entry and more counseling and guidance). Meanwhile, according to the Bureau of Labor Statistics, these industries feature higher average pay than state government positions.¹²

DVR can intervene to increase capacity in several ways:

- 1. Train and retain existing VR and service provider staff**
- 2. Improve recruitment pipelines and collaboration for a qualified staffing source**
- 3. Examine and adjust policies and procedures**

The following narrative outlines PCG's recommendations in these three areas.

¹² Bureau of Labor Statistics, U.S. Department of Labor, *Occupational Outlook Handbook*, Social Workers, at <https://www.bls.gov/ooh/community-and-social-service/social-workers.htm> (visited September 27, 2024).

6.2.1 Train and retain existing DVR and service provider staff

Research indicates that training plays a key role in retaining staff.¹³ Employees feel better about their jobs when they have the skills needed to execute successfully and feel more committed to their employer. Given the high turnover rates that VR and service providers are experiencing, this evidence-based approach should be considered as one method for stabilizing the workforce. **DVR’s services providers are community agencies and private businesses who enter into service agreements with DVR to provide a core group of employment services to DVR consumers. Service providers are not DVR employees, which may limit or restrict DVR’s ability to implement certain recommendations listed in this report. PCG recommends that DVR explore training opportunities for VR and service provider staff that target identified areas of need.**

Call to action: DVR has the opportunity to engage with both their existing DVR staff and its network of providers to better serve identified underserved populations. PCG has formulated a group of recommendations for both staff directly employed by DVR—for which DVR can take direct action—and providers, over which DVR has, at best, indirect authority. As such, PCG has created two separate sets of recommendations, focusing separately on DVR staff and providers.

Training Needs for Existing and Future DVR Staff

DVR staff must be prepared to serve individuals with mental health conditions and different cultural experiences. The CSNA results show that these individuals are in need of services specific to their circumstance, and that staff feel they are sometimes unprepared to provide general services to these individuals; creating a perception that they are underserved.

- 1. Improve DVR staff communication and understanding of provider operations.** Developing a better understanding of each other’s operations and why decisions are made the way they are could help both DVR staff and providers improve relationships with one another. Providing webinars such as “Business 101” to DVR staff is one approach for increasing trust and strengthening the partnerships and service planning between DVR and its network of providers. Also consider more regularly scheduled meetings between DVR and service providers to resolve operational misunderstandings.

¹³ Shiri, R., El-Metwally, A., Sallinen, M., Pöyry, M., Härmä, M., & Toppinen-Tanner, S. (2023). The Role of Continuing Professional Training or Development in Maintaining Current Employment: A Systematic Review. *Healthcare (Basel, Switzerland)*, 11(21), 2900. Retrieved from: [The Role of Continuing Professional Training or Development in Maintaining Current Employment: A Systematic Review](#) (retrieved October 30, 2024).

- 2. Explore providing mental health training for DVR staff so they can more effectively serve individuals with mental health needs.** The CSNA analysis indicated that DVR staff feel that the system is not equipped to effectively support individuals who have mental health diagnoses. This includes specific mental health services and broader VR services for individuals with mental health needs. DVR staff stated that they sometimes feel unable to meet the needs of individuals with mental health disabilities, even though their role is not direct provision of mental health services, suggesting they feel they are not always prepared to provide other sorts of services. Individuals with intellectual and developmental disabilities experience co-occurring mental health conditions at a higher rate than the general population. Given that these two are the largest populations served by DVR, providing training to DVR staff across the system on the specific needs of these populations could be pivotal to improving the quality of services and outcomes.
- 3. Support DVR staff advancement through caseload specialization.** Several DVR populations have staff who primarily focus on specific populations, such as those who are deaf and hard of hearing. These consumers benefit from working with DVR staff who are more familiar with statewide resources, and who have effective approaches to employment and an understanding of these consumers' unique needs.

DVR should encourage staff to develop specialization across disability or cultural groups within the service population. This will give staff deeper expertise in extremely complex topics and may, given the ability to provide many VR counselor services remotely, be of greater benefit to consumers than geographically linking caseloads. Specialization could also provide DVR staff with an opportunity for advancement while strengthening ties to the communities with which they work. However, mental health related disabilities and needs are extremely prevalent across the DVR service population. As such, developing staff who specialize here may prove challenging, as all staff will require at least some expertise in this area.

Training Needs for Existing and Future Service Provider Staff

DVR does not have the authority to directly provide or require training of provider staff. However, DVR does have the ability to make trainings and materials available to provider staff, and establish training programs where providers can choose to enroll their staff. For example, DVR requires service providers to complete the "Computer Security Awareness" course available on DVR's website, and ethics training every five (5) years. DVR provides suggestions for online ethics courses, and criteria for acceptable ethics training should providers wish to select a different ethics training or develop their own. DVR can leverage this framework to support delivery of additional training.

- 1. Create opportunities for provider understanding of DVR operations.** Mirroring the suggestion above, make "DVR Operations and Services" sessions available to service providers. For example, sessions could include DVR technical

specifications (reviewing and understanding existing materials) and DVR funding sources, grants, and federal reporting requirements (how they inform DVR policy and action in ways that impact provider requests, requirements). DVR could create trainings and informational sessions on these topics and post them to their website, similar to how DVR approaches provider ethics training.

2. **Support the development and delivery of cultural competency training for provider staff.** CSNA analysis indicates that DVR serves certain populations who have less successful outcomes compared to their peers, in particular, those who are Black or African American and Native American. Service provider staff may benefit from enhancing service delivery with practices in cultural competency that build upon a person-centered approach and align with the jobseeker's priorities and values.¹⁴ If DVR provides cultural competency training to its own staff, DVR should consider also making this training available to providers through its website, similar to the Security Awareness Training. Or DVR could provide a recorded training video or suggest other sources of cultural competency training. DVR could require this training for provider staff who work closely with populations who have less successful outcomes.

6.2.2 Improve recruitment pipelines and collaboration for a qualified staffing source.

VR agencies across the country, along with national organizations, are considering how to increase the pipeline of quality staff into VR and service provider organizations. While the approach to increasing volume varies, the goal is always the same: get more qualified staff. While some states are assessing requirements for becoming a VR counselor, other states are working collaboratively with other agencies with similar goals to establish pathways for staff to stay in the system. For example, establishing a micro-credential path may increase the number of service provider staff capable of working with a wider range of disabilities. In the same vein, organizations are exploring opportunities to create steps for service provider employees to advance into VR agencies. **PCG recommends that DVR explores opportunities for collaboration within WI and at the national level to adopt cutting edge practices in recruitment and retention.**

Call to action: DVR can take the following actions to implement this recommendation:

¹⁴ Henry, J. S., Kulesza, E. T., Williams Awodeha, N. F., Hicks, S. B., Middleton, R. A., & Robinson, M. (2023). A Way Forward With Multicultural Considerations, Advocacy, and Accessibility Across the 2023 Revised Code of Professional Ethics for Rehabilitation Counselor Educators and Practitioners. *Rehabilitation Counseling Bulletin*, 66(4), 274-282. <https://doi.org/10.1177/00343552221146164>

1. **Establish a WI-based workgroup** comprised of service providers, other providers, VR, and post-secondary partners, with an objective of identifying opportunities to recruit and keep disability employment staff in the field. For example, DVR could replicate the [Minnesota Department of Transportation Planning Internship Program](#), whose goals include exposing MnDOT to new talent in state-level transportation planning. DVR staff and their partners can work together to resolve systemic challenges.
2. **Connect at the national level** with organizations, like CSAVR, who are leading the way in finding solutions to the new staffing reality that VR agencies face. By staying plugged in, DVR can support early adoption of innovative practices.

6.2.3 Examine and adjust policies and procedures.

In addition to training and increasing pipelines, examining and adjusting policies and procedures related to open access to service delivery is another way to maximize capacity. For example, allowances for virtual service delivery could allow providers from across the state to deliver services to individuals, regardless of location. **PCG recommends DVR examine and revise policies and procedures to increase the capacity of VR and service provider services.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Continue DVR's ongoing VRC and VRS job restructuring efforts.** DVR's efforts to continually reassess VRC and VRS job responsibilities so it can move responsibilities from VRC staff to VRS staff where it is appropriate should be commended. DVR plans to perform a time study in the near future to continue its good efforts here and will include the Financial Specialist position in this work as well. DVR also allows area managers the flexibility to determine what positions they post based on the specific job duties they are looking to obtain, another best practice. DVR has recently met with the University of Wisconsin-Stout on micro-credentialing. Micro-credentialing can be a manageable and low-cost method for non-VRC staff to add competencies to their skill set and give them opportunities to compete for DVR positions with more responsibility and compensation. Micro-credentialing can "grow" needed talent from within and adds another option for recruiting and hiring needed talent. These ongoing efforts will help DVR remain flexible and address many of the staff and workforce needs raised by this needs assessment.
2. **Explore expansion of virtual services.** DVR can explore the expansion of virtual or hybrid services. For consumers, VR can support continued acquisition of broadband internet to increase access to services as well as remote-work jobs. Further, DVR can consider the expanded provision of remote VR and service provider services.

- 3. Collaborate with existing service providers to determine if they can offer under-provided services.** Both DVR staff and service providers reported that there are categories of service—specifically, mental health and supported employment—that are under provided. Although it is outside the scope of DVR’s mission to provide mental health services, it may require little effort, and improve partnerships, for DVR to inquire if an existing provider has an interest and competency to add supported employment and/or mental health services to its offerings. DVR staff and service providers both clearly expressed that they would like to receive additional training on mental health topics and provide other sorts of services to individuals with mental health-related needs. Depending on interest and competencies, DVR and service providers could develop training plans to increase staff competencies in supported employment and mental health services. Working with existing providers who can draw on their knowledge of a service area and DVR policies and procedures can help increase provider revenue, help maintain solvency and shorten implementation time.

6.3 REVIEW ADMINISTRATIVE PROCESSES TO MAXIMIZE EFFICACY

By reducing administrative burdens, staff can maximize the time they spend delivering services and supports to consumers. To complement recommendation 6.2 Maximize capacity of service providers and VR staff, DVR has an opportunity to streamline processes and leverage technology to reduce time spent on administrative tasks in an effort to maximize the impact of available resources and services. CSNA analysis identified several key opportunities within administration: continued streamlining of provider reporting, increased consistency of statewide service technical specifications interpretation, and refining case closure statuses to better reflect VR successes. In sum, PCG makes the following recommendations to review and revise administrative processes for greater efficiency.

6.3.1 *Continue provider collaboration to streamline processes and documentation.*

DVR can build upon previous successful efforts to reduce provider reporting burden that began with streamlining reports in July 2024. DVR can work with service providers to further develop standardized forms and clear requirements for invoicing. In addition to the actual templates, the group can work to determine the most effective processes for storing and submitting these documents. **PCG recommends continuing to collaborate with providers to streamline processes and documentation.**

Call to action: DVR can take the following actions to implement this recommendation:

- 1. Continue the use of the Service Provider Advisory Group** to review report’s recommendations and develop plans with timelines to resolve the recommendations pertinent to DVR and service provider working arrangements and relationships.

6.3.2 Increase consistent interpretation and application of technical specifications across offices and within DVR staff.

A combination of focused interventions, training, reinforcement and tracking/evaluation can reduce inconsistent and variable technical specification interpretation by both DVR and service providers. Consistent interpretation by both DVR and service providers can expedite the process from application through invoicing and payment. The consumer wins. **PCG recommends improving consistent interpretation of technical specifications between offices and within DVR staff, and making consistent clarifications available to service providers and other stakeholders, as necessary.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Identify specific technical specifications for improved consistency.** Working with the Service Provider Advisory Group, create a priority list of inconsistently interpreted technical specifications for each WDA. Prioritize which specifications would have the greatest impact if there was improved consistency in interpretation. Provide training on those specifications.
2. **Develop training content and schedule for statewide delivery.** After determining priorities, DVR should consider developing a training and a schedule for delivery. Consider drawing upon previous successful training for approaches to new training.

6.3.3 Add revised case markers to capture more VR successes.

DVR can create additional markers that denote cases that closed with measurable skills gains or determine other potentially meaningful measures of case success. DVR leadership can then define case closures that meet a variety of outcomes that are not necessarily competitive integrated employment, but merit inclusion in the definition of VR success. These case markers do not necessarily need to interact directly with RSA case closure statuses but could be useful in demonstrating to stakeholders the many varied ways that DVR services can benefit an individual beyond closure with employment. DVR could pull this data from its current case management system and develop reports to track this information. DVR is currently working to update their case management system and can use this opportunity to capture the full range of potential successful outcomes beyond closure with employment. **PCG recommends adding revised case markers to capture more VR successes as well as tracking signed Individual Plans for Employment, progress in measurable skills gains and progress in credential attainment.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Determine a list of additional case markers** that reflect the desired distinction.

2. **Amend the current case management system to reflect new markers or write these markers into requirement for new case management system.** DVR is currently working on case management revisions, which is a good opportunity to define and capture the new markers.
3. **Train appropriate staff on definitions and processes** related to implementing new codes.

6.4 ENHANCE PARTNERSHIPS

Partnerships and collaboration are necessary for both DVR and their partners to be successful in delivering effective services. As the VR agency, DVR is not necessarily the funding stream for all needs a consumer might have. In this section, we outline recommendations related to partnerships that improve not only successful DVR outcomes, but better outcomes for partners as well.

6.4.1 *Continue DVR education and outreach to secondary and postsecondary education settings*

CSNA data indicates that additional education and outreach activities could increase awareness and utilization of Pre-ETS and post-secondary utilization of services. Data indicates that parents know little about DVR – how to access and effectively use services in sequence with other transition services available. Further, qualitative data indicates that DVR services are often not sought out until students are ready to transition to the workforce. Providing more information about DVR services and funding for students, particularly students seeking post-secondary educational opportunities, could help enroll more students and provide a greater number of services. **PCG recommends that DVR continue to strengthen training and resources for secondary and postsecondary settings to increase education and outreach and get information to potentially eligible individuals sooner.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Review and revise informational approaches.** DVR should review current informational materials, including handouts and website information, and approaches to providing information, with input from consumers parents, K-12 and post-secondary and rewrite as necessary in plain language and formats that more accurately and easily describe DVR and its services, and what to expect in high school and post-secondary.
2. **Continue to educate and coordinate with secondary and postsecondary organizations** to support DVR entering the picture earlier, and more often.
3. **Review DVR policy about secondary and post-secondary services and amend if necessary to fit post-pandemic operations** and determine if DVR staff have the capacity to become involved with secondary settings at an earlier stage.

Interviews and focus groups with DVR staff, providers, and other transition-involved stakeholders suggest that some DVR practices may be a barrier to youth involvement in DVR. In particular, making sure that DVR staff are available and able to use up-to-date communications methods such as virtual/teleconferencing and text messaging were considered critical, as was universal availability of electronic forms.

6.4.2 Explore Solutions to Address Transportation Barriers

Transportation is the most in demand support service across all methods of data collection and all populations. Consumers, non-consumers, VR staff, and service providers all agreed transportation services were lacking and a barrier to finding or enhancing employment. Throughout these recommendations, alternative ways to deliver services have been recommended. For example, consumers using remote, virtual services may circumvent this barrier. A VR counselor could work with the individual to procure the technology and infrastructure needed to use virtual services, in addition to writing a referral for virtual employment services. **PCG recommends DVR explore systemic and individual solutions for circumventing transportation barriers.**

Call to action: DVR can take the following actions to implement this recommendation:

- 1. Work with transportation and community partners to support systematically improved access to services and systems** to help DVR increase access to services. For example, there may be another partner interested in applying for a grant to establish upgrade technologies like internet service in rural areas. Alternatively, DVR could also partner with state transportation and public transit providers to lend expertise and perspective in how to effectively expand services to meet the needs of the underserved. Although DVR's expertise does not extend to implementing transportation solutions—a role that might be more suited to Wisconsin Department of Transportation and Independent Living Centers—DVR's ability to inform and influence future transportation policies and priorities through closer collaboration with transportation partners should ultimately benefit DVR consumers, i.e., what does the disability community need most re: transportation to be able to obtain and maintain employment? DVR is involved with other agencies and transportation partners through the DOT Non Driver Advisory Committee. Building these relationships will strengthen all involved agencies to achieve mutual goals.
- 2. Identify successful transportation strategies or strategies changing the need for transportation in different Wisconsin localities and situations, and post on DVR's website.** Transportation is a national challenge, faced by employment and social service agencies outside the borders of Wisconsin and VR. While no agency has found a 'silver bullet' solution, DVR should continue to monitor national strategies which may be usefully implemented within Wisconsin, or within localities within Wisconsin.

3. **Educate staff on local strategies that meet or partially meet transportation needs of DVR consumers.** In addition to systemic work to enhance and increase access to services and systems, VR counselors and providers should be well versed in ways to deliver services when transportation is a challenge, such as remote service provision, or online training programs.

6.4.3 Build Stronger Ties with Community Housing Groups

Housing is a fundamental human need—it is very difficult to maintain employment when this is a concern. Data gathered across data collection sources strongly indicate that housing is a major barrier among many portions of the population served by DVR. Notably, housing was reported as a need according to every respondent of the DVR staff survey. Like transportation challenges, it's a complex issue with many confounding factors, but also many community partners who have a vested interest. **PCG recommends that DVR collaborate with housing partners to increase knowledge and access of available housing resources.**

Call to action: DVR can take the following actions to implement this recommendation:

1. **Build stronger ties with community housing groups and advocacy organizations.** DVR has an opportunity to conduct mutually beneficial activities like educating partners on consumers served by DVR and services DVR provides. Conversely, DVR could work with these groups to hold application and eligibility events, and provide information to DVR consumers who may not have it.
2. **Provide community-specific housing resources to area offices.** While waitlists are often long, Wisconsin does have local housing authorities in major metro areas that provide support to individuals with disabilities. By increasing staff and consumer's familiarity with these organizations, their processes, and their eligibility criteria, DVR may be better able to help individuals navigate the housing process.

7 CONCLUSION

The goal of the CSNA process is to assess consumer needs to advise future policy and decision making so DVR can best serve their consumers and meet their rehabilitation needs. PCG collected and analyzed quantitative and qualitative data to assess the required areas of need to meet this goal. Our results and analyses describe successes and strengths that DVR, along with other partners, have worked to achieve. The outcomes also identified opportunities to improve access and service delivery to improve outcomes of individuals in Wisconsin with disabilities. Key opportunities for growth include equitably supporting unserved and underserved individuals, exploring solutions to transportation issues, addressing workforce and staffing challenges, building stronger ties with community housing groups, strengthening efforts to reach the incarcerated population, and creating a new closure status to capture measurable skills gains. Given its strengths and partnerships, DVR is well-positioned to continue growth and change that supports optimal outcomes for Wisconsinites with disabilities who are seeking employment.

8 APPENDIX

The CSNA appendix has been included as a separate document to this report. The appendix contains copies of the focus group protocols and survey instruments, along with additional informative tables.

Wisconsin Department of Workforce Development Division of Vocational Rehabilitation

Comprehensive Statewide Needs Assessment Appendix

February 24, 2025

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1 INTRODUCTION

The Comprehensive Statewide Needs Assessment (CSNA) is a report that is required by the Federal Rehabilitation Services Administration (RSA) every three years. This Wisconsin Division of Vocational Rehabilitation (DVR) CSNA assesses the needs of individuals in Wisconsin who have disabilities in their pursuit of competitive, integrated employment. The CSNA seeks to effectively assess DVR consumer needs to advise DVR future policy and decision making so DVR can best serve their consumers and meet their rehabilitation needs.

DVR is a federal/state program whose mission is to obtain, maintain, and advance employment for people with disabilities by working with DVR consumers, employers, and other partners. DVR serves both employers and individuals with disabilities who face substantial barriers to employment by providing employment services and counseling to people with disabilities, providing or arranging for services that enable individuals to go to work, and providing disability employment training and technical assistance to employers.

WI DVR contracted with Public Consulting Group LLC (PCG) to assist with the completion of the CSNA.

2 FOCUS GROUP & INTERVIEW PROTOCOLS

PCG conducted a series of focus groups and interviews with a variety of audiences to learn more about individuals' experiences with DVR, the services provided by DVR, DVR strengths, and potential service gaps. PCG and DVR worked together to identify a variety of groups and organizations to represent appropriate audiences. PCG reached out to individuals via email and phone for recruitment in order to increase participation.

PCG conducted groups with individuals receiving DVR services, youth who received Pre-ETS, DVR staff and supervisors, Tribal VR Directors and DVR Tribal Liaisons, Centers For Independent Living, Service Providers, Workforce Development Staff, Juvenile Justice Staff, Employers, and Educational Professionals. PCG used Microsoft Teams videoconferencing platform to conduct all focus groups. Microsoft Teams was chosen because of the relatively high degree of familiarity and accessibility. We recorded these sessions to ensure accuracy of reporting the results of each focus group, in addition to taking notes. PCG held one in-person community meeting and one virtual community meeting for the general public, advocates, and participants.

PCG conducted one-on-one interviews with key stakeholders to gain a greater depth of knowledge and perspective, in addition to focus groups. Trained PCG staff conducted interviews over the platform preferred by the interviewee (Zoom, MS Teams, or phone). Information filled in gaps from other data sources, with a focus on targeted populations.

2.1 SERVICE PROVIDER AND COMMUNITY PARTNER FOCUS GROUP PROTOCOLS

Service Provider and Community Partner Focus Groups

Introduction

Hello, everyone. Thank you for attending our focus group today.

My name is <<moderator name>>. I am a <<job title>> with Public Consulting Group. I am joined by <<name>>. They will be taking notes during our discussion.

Our goal is to collect your honest feedback on what is going well in Wisconsin and what can be improved to better serve individuals with disabilities. PCG is conducting focus groups as part of the Comprehensive Statewide Needs Assessment process for Wisconsin Division of Vocational Rehabilitation (DVR).

Participant Rights

Before starting, we would like to go over your rights in this focus group.

- Participation is voluntary. You can stop participating in a focus group or interview at any time for any reason.
- Possible risks of participation are loss of confidentiality and answering uncomfortable questions. We cannot guarantee that you will benefit directly from this activity. Although, the information collected will be used to improve services you may be eligible for.
- We will make every effort to keep information confidential. Information will be used to inform recommendations and identify the needs of underserved populations. Any use of the information collected will not reveal your identity. We asked that all focus group members keep the information they hear confidential.

Ground Rules

Before we begin, I would like to review some guidelines to follow during this meeting to help make sure everyone has a fair chance to contribute.

1. There are no right or wrong responses - everyone's perspective is important and appreciated. You don't have to answer any questions that you don't feel comfortable with.
2. Be respectful – There may be differences in opinions, but it's important that we treat each other with respect. To encourage an open space for sharing, try your best not to interrupt and seek understanding instead of judgment.

Disclaimer & Introductions

First, I'd like to go around and ask you each to introduce yourselves. If you would like to and are comfortable, can you give us your name and describe your role?

Thank you for your time and participation in this process. Your insights and feedback are valuable in helping us complete this needs assessment. Again, I would like to remind everyone that we are going to keep everything said here anonymous and would ask for all of you to do the same.

Service Provider Focus Group Questions

1. Let's start by talking about when things work well- can each of you describe the key parts of a quality VR experience for a person with a disability.
2. For whom do you feel DVR currently does a good job of providing a quality experience?
 - a. Why is that?
 - b. What does it look like when a customer is well served?
3. From your perspective, what populations of individuals with disabilities aren't as well served with a quality experience by DVR?
 - a. Associated with a specific disability?
 - b. Does geographic location play a factor?
 - c. Racial/ethnic minorities
 - d. Socio Economic Status (SES)
 - e. LGBTQ+
 - f. Age
4. Thinking of the populations you identified as not being served well, what barriers do you encounter when trying to provide a quality experience?
 - a. What about when trying to provide services for...
 - Youth and students with disabilities leaving Pre-ETS?
 - Individuals with the most significant disabilities?
 - Individuals with disabilities who are minorities?
 - Individuals with disabilities being served by workforce agencies other than DVR?
5. When you're working with an individual with disabilities, what do you see them having difficulty with?
 - a. Are there common strengths you see too?

- b. From your experience, what kinds of customers are more or less likely to return for services after initial contact?
- c. What factors influence whether a customer returns for services?
- d. What makes the engagement between the consumer and you positive? What can turn it negative?
6. What would improve the quality of vocational rehabilitation experience for people with disabilities
 - a. Do you have any training needs?
7. In your opinion, in what services does the supply of service provider staff not meet the demand for services?
 - a. What sort of service providers do you think there should be more of?
 - b. Why is that?
8. What gaps in services exist?
9. How does your organization inform consumers of services?
 - a. Are there efforts focused on reaching particular populations?

2.2 STAFF FOCUS GROUP PROTOCOLS

Staff Focus Groups

Introduction

Hello, everyone. Thank you for attending our focus group today.

My name is <<moderator name>>. I am a <<job title>> with Public Consulting Group. I am joined by <<name>>. They will be taking notes during our discussion.

Our goal is to collect your honest feedback on what is going well in Wisconsin and what can be improved to better serve individuals with disabilities. PCG is conducting focus groups as part of the Comprehensive Statewide Needs Assessment process for Wisconsin Division of Vocational Rehabilitation (DVR).

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Thank you for your time and participation in this process. Your insights and feedback are valuable in helping us complete this needs assessment. Again, I would like to remind everyone that we are going to keep everything said here anonymous and would ask for all of you to do the same.

Staff Focus Group Questions

1. Let's start by talking about when things work well- what makes for a quality experience for both counselor and consumer and service provider?
2. From your perspective, what isn't working so well? Are there certain populations of individuals with disabilities who aren't as well served as others?
3. What barriers or issues (by either a service provider or DVR) do you see when trying to provide a quality experience to a consumer?
4. What gaps in services exist?

5. What would improve the quality of vocational rehabilitation experience for people with disabilities?
 - a. Do you have any training needs?

2.3 EMPLOYER INTERVIEW PROTOCOLS

Employer Interviews

Introduction

Hello, everyone. Thank you for attending our interview today.

My name is <<moderator name>>. I am a <<job title>> with Public Consulting Group.

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Thank you for your time and participation in this process. Your insights and feedback are valuable in helping us complete this needs assessment. Again, I would like to remind everyone that we are going to keep everything said here anonymous and would ask for all of you to do the same.

Employer Interview Questions

1. Let’s begin by talking about when things work well – what makes for a quality work exploration/employment experience for the employer and person with a disability?
2. From your perspective, what isn’t working so well in the process to help people with disabilities find a job?
3. How prepared to work are consumers referred to by a job coach/job developer?
4. What barriers or issues do you see that can interfere with a person receiving services that lead to employment?
5. How about retaining a job or advancing within a company?
6. What gaps or snags do you see in the employment process?
7. Do you have any other comments?

2.4 PARTICIPANT FOCUS GROUP PROTOCOLS

Participant Focus Groups

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Disclaimer & Introductions

First, I'd like to go around and ask you each to introduce yourselves. If you would like to and are comfortable, can you give us your name and describe your role?

Participant Focus Group Questions

1. Let's begin by talking about when things work well. What makes for a quality experience for both counselor, consumer, and service provider?
2. From your perspective, what isn't working so well? Are there certain populations of individuals with disabilities who aren't as well served as others?

3. What barriers or issues (by either a service provider or DVR) do you see that can interfere with a consumer receiving quality services?
4. What gaps in service exist?
5. Do you have any other comments?

3 SURVEY PROTOCOLS

Wisconsin Division of Vocational Rehabilitation (DVR) conducted a statewide, comprehensive assessment of the service needs of individuals with disabilities as part of the Comprehensive Statewide Needs Assessment (CSNA). We are gathering input from partners and employers that support individuals with disabilities. This process involves conducting a series of surveys with various stakeholder groups to evaluate the need for DVR services in Wisconsin from multiple perspectives. Stakeholder input will help better understand how well vocational rehabilitation (VR) services assist individuals with disabilities in achieving their employment goals and the ways in which statewide DVR services can be improved for individuals with disabilities in Wisconsin.

3.1 SERVICE PROVIDER AND COMMUNITY PARTNER SURVEY PROTOCOLS

Wisconsin Division of Vocation Rehabilitation (DVR) is conducting a statewide, comprehensive assessment of the service needs of individuals with disabilities as part of the Comprehensive Statewide Needs Assessment (CSNA). As part of this, we are working to gather input from community partners that support individuals with disabilities. Service Provider and Community Partner input will help better understand how well vocational rehabilitation services assist individuals with disabilities in achieving their employment goals and the ways in which statewide DVR services can be improved.

We appreciate your participation in this survey. The survey should take about 15 minutes to complete. You may skip any question you don't want to answer, or you feel are not applicable to you.

The answers are confidential. Provider responses to the answers will be combined with other individuals who respond. This information will help us identify how services can improve.

The survey is being administered by the Public Consulting Group on behalf of the Wisconsin Division of Vocational Rehabilitation (DVR).

Your Organization

Org01

What type of organization do you work for?

- 1 For-profit service provider agency

- 2 Non-profit service provider agency
- 3 Advocacy organization
- 4 Government organization
- 5 K-12 School District
- 6 Secondary education institution
- 7 Other (please specify:
[OPEN TEXT])

Org02

What is your role in your organization? Please select the one that is most appropriate for you.

- 1 Administrative staff (Executive, manager)
- 2 Supervisory staff
- 3 Direct service worker
- 4 Independent contractor
- 7 Other (please specify:
[OPEN TEXT])

Org03

Which of the following groups of individuals with disabilities does your organization serve? (Please select all that apply)

- 10 Blindness and visual disabilities
- 11 Deafness and hearing loss
- 12 Intellectual and/or developmental disabilities
- 13 Communication disabilities
- 14 Manipulation impairments
- 15 Mobility impairments
- 16 Respiratory disabilities
- 17 Traumatic brain injuries
- 18 Mental health disabilities
- 19 Substance use disorders
- 95 Other (please specify:
[OPEN TEXT])
- 98 Unsure

Org05

Does your organization specialize in serving any of the following groups of people with disabilities? (Please select all that apply)

- 1 People with the most significant disabilities
- 2 People with disabilities from racial, cultural, or ethnic minority groups
- 3 Youth and students with disabilities transitioning to adulthood (e.g., age 14-21)
- 7 Other (please specify:
[OPEN TEXT])
- 9 Our organization does not specialize in working with any of these groups of people

Org06

Which Workforce Development Areas (WDA) do you serve? Please select all that apply.

- 10 WDA 1 – Southeastern
- 11 WDA 2 – Milwaukee
- 12 WDA 3 – Waukesha-Ozaukee-Washington (WOW)
- 13 WDA 4 – Fox Valley
- 14 WDA 5 – Bay Area
- 15 WDA 6 – North Central
- 16 WDA 7 - Northwest
- 17 WDA 8 – West Central
- 18 WDA 9 - Western
- 19 WDA 10 – South Central
- 20 WDA 11 – Southwest
- 98 Unsure *[EXCLUSIVE]*

Provider Partnership

Services14

DVR often works with service provider agencies that provide services to help job seekers find and keep a job. DVR is hoping to learn more about your perceptions of this relationship and areas in which it could be strengthened.

How strongly would you agree or disagree with the following statements: The relationship between DVR and the service providers in my area allow for seamless service delivery to clients.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services15

DVR and the service providers in my area have a good working relationship.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services16

DVR fulfills commitments to the clients I work with.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree

9 Unsure

Services17

DVR fulfills commitments to my organization.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services18

DVR provides me with the information I need about clients to provide effective services.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services21

The DVR staff I work with understand my organization and the sorts of services I offer.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services19

I can bring up problems to DVR staff I work with without concern.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services20

When I bring up problems to DVR staff I work with they are addressed in a way that benefits everyone involved.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Rec01

Would you recommend the services provided by WI DVR to individuals with disabilities in your community?

- 1 Yes
- 2 No
- 9 Unsure

Rec02

Why do you say that?
[OPEN TEXT]

Capacity of Community Rehabilitation Providers

Capacity01

DVR is hoping to learn more about building additional provider capacity. Which of the following are the biggest challenges your organization faces in serving more individuals with disabilities? Please select the three most important factors. [SELECT 3]

- 10 Difficulty working with DVR systems
- 11 Insufficient customers of the sort we serve
- 12 Insufficient referrals for the services we provider
- 13 Insufficient staffing levels
- 14 Low rates paid by DVR
- 15 Staff training needs
- 95 Something else (Please specify:
[OPEN TEXT])
- 99 Unsure [EXCLUSIVE]

Capacity02

Which of the following actions by DVR would be most effective in helping your organization serve more individuals with disabilities? Please rate the following in order of how effective you believe they would be, with one being the most effective.

- 10 Create new methods to transport clients
- 11 Improve processes to make DVR more efficient and effective
- 12 Making more training or educational opportunities available to provider staff
- 13 Provide clear training or credential goals for provider staff
- 14 Provide more references for new clients
- 15 Provide more references or pathways for identifying new staff
- 16 Provide payment incentives for identified outcomes such as employment or credential attainment
- 17 Raise the rates paid for services
- 95 Something else (Please specify:
[OPEN TEXT])

Pre-ETS Services

The next set of questions are about specific types of services that individuals in your community may need to find a job, keep a job, or advance their career. DVR hopes that

your experience with the clients you serve can provide insights into what sorts of services may not be adequately available to the individuals you serve. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to address the needs of individuals with disabilities.

Pre-ETS01

Does your organization work with students transitioning from education to the workforce?

- 1 Yes
- 2 No *[GO TO EMPREL01]*

PreETS02

Job exploration counseling, which helps young people explore what kinds of careers may be right for them.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

PreETS03

Work-based learning experiences, where young people get hands-on experience at jobsites by doing the job.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

PreETS04

Counseling on post-secondary education options.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

PreETS05

Workplace readiness training, to help young people prepare for a workplace setting and demands.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

PreETS06

Instruction in self-advocacy, to learn how to request accommodations and lead discussions on their needs and rights.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

PreETS07

Pre-employment transition coordination, to help make services seamless between educational and workplace settings.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

PreETS08

[ASK OF THOSE RATING AT LEAST ONE SERVICE ≥ 3 IN PreETS02 through PreETS07 excluding Unsure]

You rated some of the Pre-ETS services in your community as inadequate. Please share why you believe these services may not meet the needs of the individuals you serve.
[OPEN TEXT]

PreETS09

What other services are needed by students with disabilities your organization works with to achieve their employment goals?
[OPEN TEXT]

Employment Related Supports

EmpRel01

The following questions ask about employment related supports and services that individuals in your community may need to find a job, keep a job, or advance their career. Please let us know if the following types of services are adequately available and of adequate quality to the individuals you serve.

Vocational evaluation

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel02

Vocational counseling

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel03

Technical training

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel04

Academic education

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel05

Tuition assistance

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel06

Job placements

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel12

Job Centers of Wisconsin

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate

8 Unsure

EmpRel07

Job coaching

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel08

Self-employment supports

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel09

Post-employment services, services rendered while an individual is employed but prior to their VR case closing.

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

EmpRel10

[ASK OF THOSE RATING AT LEAST ONE SERVICE >=3 IN EMPREL01 through EMPREL09 excluding Unsure]

You rated some of the employment-related support services in your community as inadequate. Please share why these services may not meet the needs of the individuals you serve.

[OPEN TEXT]

EmpRel11

What other employment-related services do you believe the individuals your organization works with need in order to find a job, keep a job, or advance their career?

[OPEN TEXT]

Support Services

Support01

The following questions ask about supports and support services that individuals in your community may need in order to find a job, keep a job, or advance their career. Please

let us know if the following types of services are adequately available and of adequate quality to the individuals you serve.

Referrals to community resources

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support02

Family and caregiver support

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support03

Group and peer support

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support04

Housing

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support05

Independent living skills training

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support06

Medical care

- 1 Always adequate
- 2 Sometimes adequate

- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support07

Social Security benefit planning

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support08

Transition services from institution to community

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support09

Transportation

- 1 Always adequate
- 2 Sometimes adequate
- 3 Rarely adequate
- 4 Never adequate
- 8 Unsure

Support10

[ASK OF THOSE RATING AT LEAST ONE SERVICE \geq 3 IN SUPPORT01 through SUPPORT09 excluding Unsure]

You rated some of the support services in your community as inadequate. Please share why these services are inadequate.

[OPEN TEXT]

Support11

What other supportive services do you believe the individuals your organization serves need to find a job, keep a job, or advance their career?

[OPEN TEXT]

Group Needs

CSNAGroup01

[IF SERVE THE MOST SIGNIFICANTLY DISABLED IN ORG05]

Earlier, you indicated that your organization specializes in serving individuals with the most significant disabilities. What do you believe are the three most pressing needs in helping individuals with the most significant disabilities achieve their employment goals?
[3 OPEN TEXT BOX]

CSNAGroup02

[IF SERVE MINORITY INDIVIDUALS IN ORG05]

Earlier, you indicated that your organization specializes in serving people with disabilities from racial, cultural, or ethnic minority groups. What do you believe are the three most pressing needs in helping individuals from racial, cultural, or ethnic minority groups achieve their employment goals?
[3 OPEN TEXT BOX]

CSNAGroup03

[IF SERVE YOUTH IN ORG05]

Earlier, you indicated that your organization specializes in serving students with disabilities who are transitioning to adulthood (i.e., age 14 to 21). What do you believe are the three most pressing needs in helping students transitioning to adulthood achieve their employment goals?
[3 OPEN TEXT BOX]

Barriers to Achieving Employment Goals

Barrier01

What challenges do your clients frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 10 Housing
- 11 Transportation
- 12 Childcare
- 13 Having enough food
- 14 Medical care
- 15 Mental health care
- 16 Technology access, like access to the internet
- 17 Language barriers
- 18 Literacy barriers
- 19 Job search knowledge
- 95 Some other basic need(s) (Please specify:
[OPEN TEXT])
- 99 None of these *[EXCLUSIVE]*

Barrier02

What legal challenges do your clients frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 1 Criminal offenses

- 2 Immigration status
- 3 Discrimination related to their disability
- 4 Discrimination related to another aspect of their identity, like race, gender, or sexual orientation
- 5 Court-ordered debt or wage garnishment
- 9 Some other legal need (Please specify:
[OPEN TEXT])
- 8 None of these [EXCLUDE]

Barrier03

What, if any, financial challenges do your clients frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 1 Potential change in financial benefits, such as Social Security
- 2 Potential change in medical benefits, such as Medicare or Medicaid
- 3 Costs related to education or training
- 4 Need for additional benefits (medical coverage, dental coverage)
- 5 Money management or financial literacy skills
- 6 Some other financial need (Please specify:
[OPEN TEXT])
- 8 None of these [EXCLUDE]

Barrier04

What job-related challenges do your clients frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 1 Employer attitudes toward people with disabilities
- 2 Poor job market or a lack of opportunities
- 4 Limited relevant job skills
- 5 Limited work experience
- 6 Limited education or training
- 7 Lack of opportunities to explore careers
- 8 Job options don't match their education or experience
- 9 Difficulty with online applications
- 95 Some other job-related need (Please specify:
[OPEN TEXT])
- 99 None of these [EXCLUDE]

Barrier05

Do you feel the DVR staff you've worked with treat individuals with disabilities with respect regarding their culture, background, and identity?

- 1 Yes
- 2 No (Specify: In what way?
[OPEN TEXT])
- 8 Unsure

Barrier06

What other challenges do people with disabilities face to achieving their employment goals do you feel DVR should work to address?

[OPEN TEXT]

Barriers07

The “unserved” population includes people with disabilities who are not receiving vocational rehabilitation services from DVR but are interested in working.

Which of the following groups of individuals with disabilities do you believe are most likely to be unserved or underserved? Please select all that apply.

10 People with intellectual disabilities

11 People with physical disabilities

12 People who are between the ages of 14 to 21

13 People who are racial or ethnic minorities

14 People with a mental health condition

15 People with substance use disorder

16 People who have criminal convictions

17 People who live in rural areas of the state

18 People who are LGBTQ+

19 People who are homeless

20 Veterans

22 Individuals living in poverty

23 Religious minorities

95 Other (please specify:

[OPEN TEXT])

99 I believe all groups of individuals in Wisconsin are being adequately served by VR [EXCLUSIVE]

Final Questions

Final01

How have DVR services improved the ability of the individuals you work with to get a job, keep a job, find the right job, and/or excel in their career?

[OPEN TEXT]

Final02

Is there anything else you'd like to add about Wisconsin Division of Vocational Rehabilitation or its services?

[OPEN TEXT]

Thank you!

Thank you very much for completing this survey! The results will be summarized in the Comprehensive Statewide Needs Assessment. Your perspective as a vocational rehabilitation community partner is critical to that effort.

If there are other community partners who you think would be interested in completing this survey, please share the link below.

[SURVEY LINK]

3.2 STAFF SURVEY PROTOCOLS

Wisconsin Division of Vocational Rehabilitation (DVR) wants to learn more about the vocational rehabilitation experiences and needs of individuals with disabilities. The information will be used to improve services. Staff answers are confidential.

DVR staff have experience and insight into a wide range of cases, and we hope that this survey will allow us to better understand what parts of the work we all provide that is going well, and where we can strengthen the services we provide.

Public Consulting Group is conducting this survey. If you have questions about this survey or need accommodation or help completing the survey, PCG established a contact.

The survey should only take about 20 minutes to complete.

Staff can skip any questions that they did not want to answer.

Your Role and Experience at WI DVR

IVRole06

Which of the following best describes the communities that you serve? Please select all that apply.

- 1 Urban
- 2 Suburban
- 3 Rural

Job01

The next few questions are about your position at DVR. All questions in this survey are anonymous, and no results will be presented in any way that could make any respondent identifiable.

How strongly would you agree or disagree with the following statements: I have enough time in my day to do the tasks that are expected of my role.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Job02

I have the resources necessary to address the needs of my consumers.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Job03

I have the support from other DVR staff necessary to address the needs of my consumers.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Job04

What barriers do you feel most frequently prevent you and other DVR staff from addressing the needs of their consumers?

- 10 Limited time to devote to each consumer
- 11 Coordinating services with service providers
- 12 Staffing needs or workload distribution
- 13 Processes or procedures that cause delays
- 14 Insufficient technology or tools to support service delivery
- 15 Access to service providers that can address consumer needs effectively.
- 16 Professional development or training
- 95 Something else (Please specify:
[OPEN TEXT])

Jobs05

What additional resources or support would most help you address the needs of your consumers?

[OPEN TEXT]

Experience of Services

Services01

The following questions ask you about the DVR services your consumers receive. Please let us know how strongly you agree or disagree with each statement. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

The consumers I work with receive DVR services in a convenient location.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services03

The consumers I work with can get around easily in the places we meet.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services04

The DVR office is open at times that work for my consumers.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services08

The consumers I work with help to develop their own IPE (Individual Plan for Employment).

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services10

What else should DVR know about the services provided to consumers?

[OPEN TEXT]

Services09

Are there services that your consumers need that are not provided by DVR?

- 1 Yes (What are these services? *[OPEN TEXT]*)
- 2 No

Service Providers

Services11

DVR often works with service provider agencies that provide employment services to help job seekers find and keep a job. The next group of questions are about services your consumers may have received from these service providers.

Do you authorize your consumers to use services from service providers?

- 1 Yes
- 2 No *[Go to EmpRel03]*
- 3 Unsure

Services15

How strongly would you agree or disagree with the following statements:
DVR and the service providers in my area have a good working relationship that allow for seamless service delivery.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services16

Service providers fulfill their commitments to the consumers I work with.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 9 Unsure

Services12

Do you feel that the service providers help your consumers get or keep a job?

- 1 Yes
- 2 No
- 3 Unsure

Services13

What gaps occur with the services provided to consumers by the service providers with whom you work with? Please select all that apply.

- 10 Takes a long time for a consumer to get a job
- 11 Not enough staff
- 12 Not enough service providers with the expertise to meet diverse needs
- 14 No connections to the sorts of employers consumers are interested in working with
- 15 Turnover/too many staff changes
- 16 Poor communication or lack of contact between the service providers
- 17 Takes a long time to initiate services
- 95 Other
- [OPEN TEXT]
- 99 No gaps

Employment Related Supports

EmpRel03

Please rate the quality of the following services in your community, whether they are provided directly by DVR or by outside service providers. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to

address the needs of people with disabilities. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

How would you assess the quality of the following:

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
a. Vocational assessment					
b. Vocational counseling					
c. Technical training					
d. Academic education					
e. Tuition assistance					
f. Job Centers of Wisconsin					

EmpRel04

How would you assess the quality of the following:

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
g. Job placements					
h. Job coaching					
i. Self-employment supports					
j. Post-employment services					

EmpRel05

[ASK OF THOSE RATING AT LEAST ONE SERVICE <=3 IN EMPREL03/04]

You rated some of the employment-related support services in your community as inadequate. Why do you believe these services to be inadequate?

[OPEN TEXT]

Assistive Technology

Tech03

Please rate the quality of the following services in your community, whether they are provided directly by DVR or by outside service providers. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to address the needs of people with disabilities. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

How would you assess the adequacy of the following:

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
a. Durable medical equipment					
b. Orientation and mobility services					
c. Technological aids and devices					
d. Speech to text support					
e. ASL interpreting					

Tech04

[ASK OF THOSE RATING AT LEAST ONE SERVICE <=3 IN TECH03]

You rated some of the assistance technology services in your community as inadequate. Why do you believe these services to be inadequate?

[OPEN TEXT]

Supportive Services

Support01

How many consumers with whom you work with need the following services to achieve their goals? You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

	None (1)	Few (2)	Some (3)	Most/All (4)	Unsure (9)
a. Referrals to community resources					
b. Family and caregiver support					
c. Group and peer support					
d. Housing					
e. Independent living skills training					

Support02

How many of the people with disabilities with whom you work with need the following services to achieve their goals? You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

	None (1)	Few (2)	Some (3)	Most/All (4)	Unsure (9)
f. Medical care					
g. Social Security benefits planning					
h. Transition services from high school to adult services					
i. Transition services from institution to community					
j. Transportation					
k. Housing					

Support03

Please rate the quality of the following supportive services in your community, whether they are provided by DVR or by an outside service provider. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to address the needs of people with disabilities. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
a. Referrals to community resources					
b. Family and caregiver support					
c. Group and peer support					
d. Housing					
e. Independent living skills training					

Support04

Please rate the quality of the following supportive services in your community, whether they are provided directly by DVR or by outside service providers. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to address the needs of people with disabilities. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
f. Medical care					
g. Social security benefits planning					
h. Transition services from high school to adult services					
i. Transition services from institution to community					
j. Transportation					
k. Housing					

Support05

[ASK OF THOSE RATING AT LEAST ONE SERVICE <=3 IN Support03/04]

You rated some of the support services in your community as inadequate. Why do you believe these services to be inadequate?

[OPEN TEXT]

Mental Health Services

MHS01

How many of the consumers with whom you work need the following mental health services to achieve their goals?

	None (1)	Few (2)	Some (3)	Most/All (4)	Unsure (9)
a. Behavioral supports					
b. Counseling					
c. Mental health services					
d. Substance use services					

MHS02

Please rate the quality of the following mental health services in your community, whether they are provided directly by DVR or by outside service providers. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to address the needs of people with disabilities. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you.

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
a. Behavioral supports					
b. Counseling					
c. Mental health services					

d. Substance use services					
---------------------------	--	--	--	--	--

MHS03

[ASK OF THOSE RATING AT LEAST ONE SERVICE <=3 IN MHS02]

You rated some of the mental health services in your community as inadequate. Why do you believe these services to be inadequate?

[OPEN TEXT]

Pre-ETS Services

We are particularly interested in learning about pre-employment transition services (Pre-ETS) for students (age 14-21) with disabilities.

PreETS01

Please rate the quality of the following Pre-ETS services in your community, whether they are provided directly by DVR, by outside service providers, or by schools. Please let us know if they are never adequate, rarely adequate, sometimes adequate, or are always adequate to address the needs of individuals with disabilities. You can also select “unsure” if you don’t know or if you feel the question isn’t relevant to you. [RADIO BUTTONS, MUTUALLY EXCLUSIVE]

	Never adequate (1)	Rarely adequate (2)	Sometimes adequate (3)	Always adequate (4)	Unsure (9)
A. Job exploration counseling					
B. Work-based learning experiences					
C. Counseling on post-secondary education options					
D. Workplace readiness training					
E. Instruction in self-advocacy					
F. Pre-employment transition coordination					

PreETS03

What other services and/or supports are needed by students (age 14-21) with disabilities to achieve their employment goals? Please describe.

[OPEN TEXT]

Barriers to Receiving Services

Barrier01

What challenges do your consumers frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 10 Housing
- 11 Transportation
- 12 Childcare
- 13 Having enough food
- 14 Medical care
- 15 Mental health care
- 16 Technology access, like access to the internet
- 17 Language barriers
- 18 Literacy barriers
- 19 Job search knowledge
- 95 Some other basic need(s) (Please specify:
[OPEN TEXT])
- 99 None of these [EXCLUDE]

Barrier02

What legal challenges do your consumers frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 1 Criminal offenses
- 2 Immigration status
- 3 Discrimination related to their disability
- 4 Discrimination related to another aspect of their identity, like race, gender, or sexual orientation
- 5 Court-ordered debt or wage garnishment
- 9 Some other legal need (Please specify:
[OPEN TEXT])
- 8 None of these [EXCLUDE]

Barrier03

What, if any, financial challenges do your consumers frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 1 Potential change in financial benefits, such as Social Security
- 2 Potential change in medical benefits, such as Medicare or Medicaid
- 3 Costs related to education or training
- 4 Need for additional benefits (medical coverage, dental coverage)
- 5 Money management or financial literacy skills
- 6 Some other financial need (Please specify:
[OPEN TEXT])
- 8 None of these [EXCLUDE]

Barrier04

What job-related challenges do your consumers frequently face while trying to find a job, keep a job, or advance in their career? Please select all that apply.

- 1 Employer attitudes toward people with disabilities
- 2 Poor job market or a lack of opportunities
- 4 Limited relevant job skills
- 5 Limited work experience
- 6 Limited education or training
- 7 Lack of opportunities to explore careers
- 8 Job options don't match their education or experience
- 9 Difficulty with online applications
- 95 Some other job-related need (Please specify:
[OPEN TEXT])
- 99 None of these [EXCLUDE]

BarrierG01

What racial or ethnic groups are currently unserved or underserved by DVR services? Please select all that apply.

- 1 African American/Black
- 2 American Indian or Alaskan Native
- 3 Asian
- 4 White
- 5 Hispanic or Latino
- 6 Native Hawaiian or other Pacific Islander
- 7 Refugee populations
- 95 Other (Please Specify:
[OPEN TEXT])
- 99 None [EXCLUSIVE]

BarrierG02

[ASK IF BARRIER02<>99; ask of each group identified]

What are the service needs for [GROUP]?

- 1 Language translators
- 2 Outreach on the availability of services
- 3 Cultural awareness training for DVR staff
- 4 Greater access to DVR offices in or near their communities
- 5 Additional services focused on their communities
- 95 Other (Please specify:
[OPEN TEXT])

BarrierG03

Which specific diagnosis or disabilities are currently unserved or underserved by DVR services? Please select all that apply.

- 10 Individuals with autism
- 11 Individuals with traumatic brain injuries
- 12 Individuals with mental health disabilities
- 13 Individuals with intellectual and developmental disabilities

- 14 Individuals who are deaf or hard of hearing
- 15 Individuals who are blind or have vision loss
- 16 Individuals with mobility or manipulation disabilities
- 95 Individuals with some other type of disability (Please specify:
[OPEN TEXT])
- 99 None [EXCLUSIVE]

BarrierG04

Among those groups served by DVR, who do you feel DVR is currently not serving well enough? Please select all that apply.

- 10 Individuals with the most significant disabilities
- 12 Individuals residing in rural areas
- 13 Individuals with disabilities pursuing career paths requiring advanced degrees
- 14 Individuals in the LGBTQ+ community
- 15 Religious minorities
- 16 Veterans
- 17 Individuals transitioning from high school to the workforce
- 18 Transient and homeless populations
- 19 Individuals living in poverty
- 20 Individuals who are incarcerated or in the juvenile justice system
- 21 Individuals with English as a second language
- 22 Individuals who are self-employed
- 95 Other (Please specify:
[OPEN TEXT])
- 99 None [EXCLUSIVE]

BarrierG05

[ASK IFBARRIER04<>99]

What is needed to improve services for underserved populations? Please select all that apply.

- 1 Cultural awareness training for staff
- 2 Improved transportation options
- 3 Increased outreach about available programs and services
- 4 Increased training for DVR staff
- 5 Increased training for service providers (employment specialists or job coaches)
- 6 Ways to address language barriers
- 95 Other (Please specify:
[OPEN TEXT])

Final Questions

Final01

What about working with DVR goes well for most of your consumers?

[OPEN TEXT]

Final02

What is one thing you would change about the experience of working with DVR for your consumers?

[OPEN TEXT]

Final03

Is there anything else you'd like to share about DVR or its services?

[OPEN TEXT]

Demographics

Demo10

The following questions are used only to categorize responses. All responses are anonymous and will be reported only in combined form with other responses.

What sex were you assigned at birth, on your original birth certificate?

- 1 Male
- 2 Female
- 3 I don't know, or I'd prefer not to answer

Demo11

Do you currently describe yourself as male, female, or transgender?

- 1 Male
- 2 Female
- 3 Transgender
- 8 I don't know, or I'd prefer not to answer

Demo01

Which of the following best represents how you think of yourself?

- 1 Gay or lesbian
- 2 Straight (not gay, lesbian, or bisexual)
- 3 Bisexual
- 7 Something else
- 8 I don't know, or I'd prefer not to answer

Demo12

Are you Hispanic or Latino/a?

- 1 Yes, I am Hispanic or Latino/a
- 2 No
- 8 I don't know, or I'd prefer not to answer

Demo13

Which of the following do you consider yourself? Please select all that apply.

- 1 American Indian or Alaska Native

- 2 Asian
- 3 Black or African American
- 4 Native Hawaiian or Other Pacific Islander
- 5 White
- 7 Some other race (Please specify:
[OPEN TEXT])
- 8 I don't know, or I'd prefer not to answer [EXCLUSIVE]

Demo03

Do you have a tribal affiliation?

- 1 Yes (Please specify: [OPEN TEXT])
- 2 No
- 9 I'd prefer not to say

3.3 EMPLOYER SURVEY PROTOCOLS

Wisconsin Division of Vocational Rehabilitation (DVR) is conducting a statewide, comprehensive assessment of the service needs of individuals with disabilities as part of the Comprehensive Statewide Needs Assessment (CSNA). We are gathering input from partners and employers that support individuals with disabilities. Your input will help better understand how well vocational rehabilitation (VR) services assist individuals with disabilities in achieving their employment goals and the ways in which statewide DVR services can be improved for individuals and your business.

The survey should take about 10 minutes to complete. You may skip any question you don't want to answer, or you feel are not applicable to you.

Employer answers are confidential. This information will help identify how services can improve for individuals with disabilities and your business.

Public Consulting Group LLC (PCG) is conducting this survey. If you have questions about this survey or need accommodation or help to complete this survey, PCG created contact if assistance was needed.

Thank you in advance for your valuable feedback

Intro01

Wisconsin Division of Vocational Rehabilitation (DVR) provides information and services to employers who have hired or are interested in hiring job seekers with disabilities.

Has your business worked with DVR in the last year?

- 1 Yes
- 2 No [GO TO INT01]
- 8 Unsure [GO TO INT01]

Bus01

How did you learn about DVR services for employers? (Check all that apply)

- 1 Contact with DVR staff
- 2 Recruiting or resource event
- 3 Workforce system partner referral
- 4 Another business owner
- 5 Disability employment agency
- 7 Other:
[OPEN TEXT]

Bus02

Did DVR work with your business to connect a DVR job seeker to...
(Check all that apply)

- 10 An internship
- 11 Short-term employment
- 12 Permanent employment
- 13 Participate in an apprenticeship
- 14 Engage with young adults or students with disabilities to gain work experience
- 15 Support a person with a disability working in your business
- 16 Train your staff about disability-related barriers in employment and solutions
- 95 Something else (Please specify:
[OPEN TEXT])

Bus03

DVR customizes services to meet both employer and job seeker needs. Please check the services or supports DVR provided to your business.

- 10 Customized a job role or responsibilities to meet both business needs and job seeker abilities
- 11 Coordinated the implementation of a reasonable accommodation
- 12 Provided information about financial incentives (Ex: Work Opportunity Tax Credit, Disabled Access Credit, Barrier Removal Tax Deduction)
- 13 Provided assistance recruiting talent to meet business workforce needs
- 14 Provided information about DVR services and supports such as paid internships, job coaching, or other supports or services
- 95 Something Else (Please specify:
[OPEN TEXT])

Bus03a

DVR helps businesses connect with DVR's talent pool of job seekers with disabilities. Did DVR assist your business (Check all that apply)

- 1 Recruit qualified applicants with disabilities for positions in your business
- 2 Find job matches between your business and qualified applicants with disabilities
- 3 Retain employees with disabilities
- 7 Other (Please specify:

[OPEN TEXT]

Bus04

What other services did DVR provide to support your business goals?

- 1 Disability awareness training
- 2 Information about resources your business needed
- 3 Invitations to recruiting events and other workforce events in your area
- 7 Some other service not previously discussed (Please specify:
[OPEN TEXT])

Bus05

DVR works with business to match unmet business needs with job seekers who can meet those needs. Sometimes positions are *customized* to best match a business' needs with an individual's abilities. In the last year, has your business worked with DVR to create a customized employment opportunity for a job seeker with a disability?

- 1 Yes
- 2 No [GO TO BUS06]

Cust02

How successful was customized employment for your business?

- 1 Very successful
- 2 Somewhat successful
- 3 Not successful or unsuccessful
- 4 Somewhat unsuccessful
- 5 Very unsuccessful

Cust03

What do you feel worked best about customized employment for your business?

[OPEN TEXT]

Bus06

Would you recommend DVR services to your colleagues?

- 1 Yes
- 2 No

Bus06a

What makes you say that? Why or why not?

[OPEN TEXT]

Bus07

What additional support or services can DVR provide to best meet your business needs?

[OPEN TEXT]

Service Interest

Int01

DVR provides many services directly to businesses. Please let us know which of the following services you are interested in learning more about.

	Very interested (3)	Somewhat interested (2)	Not very interested (1)	Need more information (8)
a. Coordinating DVR-funded internships in my business				
b. Providing work experience opportunities to individuals who are part of the DVR program				
c. Recruiting individuals who are part of the DVR program into my workforce				
d. Learning more about or engage in Adult and Youth Apprenticeship Programs				
e. Engaging with young adults or students with disabilities to help them gain work experience				
f. Supporting a person with a disability in your workplace				
g. Training your staff about disability-related barriers in employment and solutions-and how to create an inclusive workplace				

Int02

DVR often works with businesses to make the workplace or work tasks accessible to individuals with a disability. Please let us know your interest in learning more about these services.

	Very interested (3)	Somewhat interested (2)	Not very interested (1)	Need more information (8)
a. Customizing a job role or responsibilities to meet both business needs and job seeker abilities				
b. Learning more about financial incentives (Ex: Workplace Opportunity Tax Credits)				
c. Learning more about DVR services and supports such as				

paid internships, job coaching, or other supports or services				
d. Assistance recruiting talent to meet business workforce needs				

Int03

DVR helps business connect with DVR's talent pool of job seekers with disabilities. Please let us know your interest in working with DVR to meet your business needs using the following services.

	Very interested (3)	Somewhat interested (2)	Not very interested (1)	Need more information (8)
a. Recruit job seekers for positions in your business				
b. Find job matches between your business and job seekers				
c. Hire qualified individuals for your business				
d. Retain employees with disabilities				

Int04

Please let us know about your interest in other services DVR can provide to support your business goals.

	Very interested (3)	Somewhat interested (2)	Not very interested (1)	Need more information (8)
a. Disability awareness training or ways to create an inclusive work culture and workforce				
b. Information about resources your company needs or may benefit from				
c. Invitations to recruiting and other workforce events				

Final01

What barriers do you face hiring individuals with disabilities?

[OPEN TEXT]

Final02

What would be the most important service DVR could provide to best support your business needs?

[OPEN TEXT]

Contact01

DVR would like to reach out to someone at your organization to discuss opportunities expressed in this survey. If you would like someone to reach out, please provide your contact information below.

[FORM FIELDS]

Name: *[first and last name]*

Business location: *[City]*

Email: *[email]*

Phone: *[area code – XXX-XXXX]*

Thank you for participating. If you know anyone else who may be interested in participating, please provide them this link: [LINK]

Thank you!

Thank you very much for completing this survey! The results will be summarized in the Comprehensive Statewide Needs Assessment. Your perspective as a partner is critical to that effort.

If there are other employers you think would be interested in completing this survey, please share the link below.

[SURVEY LINK]

3.4 NON-PARTICIPANT SURVEY PROTOCOLS

Wisconsin Division of Vocational Rehabilitation (DVR) wants to learn more about the needs of individuals with disabilities. This information is intended to improve services. Your answers are confidential.

We want you to complete this survey because you may be eligible to receive services from DVR. We want to be prepared to meet the needs of people who have not worked with DVR before.

Public Consulting Group is conducting this survey. If you have questions about this survey or need accommodations or help completing this survey, please contact [CONTACT INFORMATION].

This survey will take about 15 minutes to complete.

You may skip any question you don't want to answer. If you have worked with DVR many times, please tell us about your most recent time.

Demo08

If you take this survey on behalf of someone else, please answer these questions as if you were them. We are most interested in the experiences and views of participants in DVR. Please try to respond from their perspective as much as you can.

Are you completing this survey yourself, or are you responding on behalf of [NAME]?

- 1 I am [NAME]; I am completing the survey independently
- 2 I am completing this survey on behalf of a person with disabilities who received services from Wisconsin DVR. My relationship to them is:
[OPEN TEXT]

Barriers to Employment

Barrier01

Please let us know if any of the following are barriers you have faced when trying to find a job, keep your job, or advance your career. If you haven't experienced any barriers in a given area, please select "None of these."

What challenges have you faced while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 10 Housing
- 11 Transportation
- 12 Childcare
- 13 Having enough food
- 14 Medical care
- 15 Mental health care
- 16 Technology access, like access to the internet
- 17 Language barriers
- 18 Literacy barriers
- 19 Job search knowledge
- 95 Some other basic need(s) (Please specify:
[OPEN TEXT])
- 99 None of these [EXCLUDE]

Barrier02

What kinds of legal barriers have you had while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Criminal offenses
- 2 Immigration status
- 3 Discrimination related to my disability
- 4 Discrimination related to another aspect of my identity, like race, gender, or sexual orientation
- 5 Court-order debt or wage garnishment
- 9 Some other legal need (Please specify:
[OPEN TEXT])
- 8 None of these [EXCLUDE]

Barrier03

What kinds of financial barriers have you had while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Potential change in financial benefits, such as Social Security

- 2 Potential change in medical benefits, such as Medicare or Medicaid
- 3 Costs related to education or training
- 4 Need for additional benefits (medical coverage, dental coverage)
- 5 Money management or financial literacy skills
- 6 Some other financial need (Please specify:
[OPEN TEXT])
- 8 None of these [EXCLUDE]

Barrier05

How well does the following statement describe your financial situation: I am concerned the money I have, or will have, won't last.

- 1 Very well
- 2 Somewhat
- 3 Very little
- 4 Not at all
- 8 Unsure

Barrier04

What job-related barriers have you had while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Employer attitudes toward people with disabilities
- 2 Poor job market or a lack of opportunities
- 4 Limited relevant job skills
- 5 Limited work experience
- 6 Limited education or training
- 7 Lack of opportunities to explore careers
- 8 Job options don't match my education or experience
- 9 Difficulty with online applications
- 95 Some other job-related need (Please specify:
[OPEN TEXT])
- 99 None of these [EXCLUDE]

Transition-Related Services

AGE

How old are you?

- 1 Under 18
- 2 18 to 29
- 3 30 to 39
- 4 40 to 49
- 5 50 to 59
- 6 60 or older
- 9 I'd prefer not to say

PreETSScrn02

[IF AGE>2; GO TO EMPSER01]

Did you receive any services to help you find a career or plan for further education while you were in school?

- 1 Yes
- 2 No *[GO TO EMPSER01]*
- 3 Unsure *[GO TO EMPSER01]*

PreEts01

The following questions ask about services that students and young people are offered to help make the transition from school to college, working, or living more independently. Sometimes, these services are provided by DVR, but they are also provided in schools or other settings. Please let us know if you have received this service, and if you need more help, regardless of where you initially received the service.

Have you received guidance help to explore what kind of careers you might want to pursue?

- 1 Yes
- 2 Yes, but I need more of this service
- 3 No, but I need this
- 4 No, but I do not need this
- 9 Unsure

PreEts02

Have you learned more about careers by visiting workplaces or trying out different types of jobs? Examples might include job shadowing, apprenticeships, internships, volunteering, or work experiences.

- 1 Yes
- 2 Yes, but I need more of this service
- 3 No, but I need this
- 4 No, but I do not need this
- 9 Unsure

PreEts03

Have you received information on your options for education after high school?

- 1 Yes
- 2 Yes, but I need more of this service
- 3 No, but I need this
- 4 No, but I do not need this
- 9 Unsure

PreEts04

Have you received training to get the skills you need to succeed at work? This could include any skill you need to get and keep a job, social skills like asking questions or professionalism, or work skills.

- 1 Yes

- 2 Yes, but I need more of this service
- 3 No, but I need this
- 4 No, but I do not need this
- 9 Unsure

PreEts05

Have you received training in self-advocacy? For example, requesting accommodations, leading meetings about you and your needs, or help advocating for the choices you want to make.

- 1 Yes
- 2 Yes, but I need more of this service
- 3 No, but I need this
- 4 No, but I do not need this
- 9 Unsure

Employment Service Providers

The next questions are about working with agencies that provide services directly to people with disabilities.

EmpSer01

Did you receive services from a service provider?

- 1 Yes
- 2 No [GO TO Partner01]
- 3 Unsure [GO TO Partner01]

EmpSer02

Do you feel that the service provider helped you to get or keep a job?

- 1 Yes
- 2 No
- 3 Unsure

EmpSer03

Did you experience any of the following when working with the service provider? Please select all that apply.

- 10 Takes a long time to get a job
- 11 Not enough staff
- 12 Not enough providers who know how to work with people like me
- 14 No connections to the sorts of employers I am interested in working with
- 15 Turnover, too many staff changes
- 16 Poor communication or lack of contact with my job coach
- 95 Other
- [OPEN TEXT]
- 99 None of these

Community Partners/Groups

DVR often works with partners and groups in the community to make sure you have the support you need to go to work. The next questions ask about services you may have received from these groups. The questions also ask about how working together helped you.

Partner01

Have you worked with any of the following community partners/groups? Please select all that apply.

- 10 Independent Living Centers
- 13 Community mental health center
- 14 Aging and Disability Resource Centers
- 15 Staffing or temp hiring agency
- 17 Community rehabilitation program
- 18 Local housing authority
- 19 Homeless shelters
- 20 Local Food Pantry
- 21 Public transportation
- 22 Specialized transportation services
- 23 Veteran's Agencies
- 24 Local school
- 25 College or university disability services
- 26 Technical schools and colleges disability services
- 27 Wisconsin Medicaid/Medicare
- 28 Social Security Administration
- 95 Someone else (Who was that?)
- [OPEN TEXT]
- 98 Unsure

Partner02

[ASK IF PARTNER01<98]

How well did DVR and the community partners/groups you worked with coordinate services for you, in general?

- 1 Very well
- 2 Somewhat well
- 3 Not very well
- 4 Not at all well
- 8 Unsure

Partner05

Did you work with the Job Centers of Wisconsin? Please select all the ways in which you worked with them.

- 1 In person, at a physical job center location
- 2 Online, using virtual job center resources
- 3 Did not work with the Job Centers of Wisconsin

8 Unsure

Partner03

When thinking of the community partners/groups you worked with, what went well?

1 [OPEN TEXT]

Partner04

When thinking of the community partners/groups you worked with, what do you think could be improved?

1 [OPEN TEXT]

Support Services

Support01

Sometimes individuals need supports to be successful in work. Please let us know if you have worked with anyone to get the services below. Select all that apply to you.

- 10 Community resources
- 11 Family and/or caregiver support
- 12 Group and peer support
- 13 Help with housing
- 14 Independent living skills training
- 15 Connections to medical care
- 16 Social security benefits counseling
- 17 Moving from a group home facility to independent living
- 18 Help with transportation
- 95 Something else (SPECIFY: What was that?
[OPEN TEXT])
- 97 None of these [GO TO MHS01]
- 98 Unsure

Support02

What else would you like us to know about the support services DVR helped to connect you with?

1 [OPEN TEXT]

Final Questions

Final04

Is there anything else you would like DVR to know about you or your needs?

- 1 [OPEN TEXT]
- 2 Nothing
- 8 Unsure

Tell Us About You

Demo01

The following questions are used only to categorize responses. All responses are anonymous and will be reported only in combined form with other responses.

What sort of disability do you have? Please select all that apply.

- 10 Cognitive or learning disability
- 11 Mobility or dexterity related disability
- 12 Sensory disability such as blindness or deafness
- 13 Mental health related disability
- 14 Communicative disability
- 16 Some other physical disability (Please specify:
[OPEN TEXT])
- 17 Some other mental or emotional disability (Please specify:
[OPEN TEXT])

Demo10

What sex were you assigned at birth, on your original birth certificate?

- 1 Male
- 2 Female
- 3 I don't know, or I'd prefer not to answer

Demo11

Do you currently describe yourself as male, female, or transgender?

- 1 Male
- 2 Female
- 3 Transgender
- 8 I don't know, or I'd prefer not to answer

Demo01

Which of the following best represents how you think of yourself?

- 1 Gay or lesbian
- 2 Straight (not gay, lesbian, or bisexual)
- 3 Bisexual
- 7 Something else
- 8 I don't know, or I'd prefer not to answer

Demo12

Are you Hispanic or Latino/a?

- 1 Yes, I am Hispanic or Latino/a
- 2 No
- 8 I don't know, or I'd prefer not to answer

Demo13

Which of the following do you consider yourself? Please select all that apply.

- 1 American Indian or Alaska Native

- 2 Asian
- 3 Black or African American
- 4 Native Hawaiian or Other Pacific Islander
- 5 White
- 7 Some other race (Please specify:
[OPEN TEXT])
- 8 I don't know, or I'd prefer not to answer [EXCLUSIVE]

Demo03

Do you have a tribal affiliation?

- 1 Yes (Please specify:
[OPEN TEXT])
- 2 No
- 9 I'd prefer not to say

Demo04

What language do you mostly speak at home?

- 10 English
- 11 Spanish
- 12 Chinese (including Mandarin and Cantonese)
- 13 Vietnamese
- 14 Russian
- 15 American Sign Language
- 95 Something else (Please specify:
[OPEN TEXT])

Demo09

Which of the following describes your current work status? Please select all that apply to you.

- 10 Working full time
- 11 Working part time
- 12 Going to school or in training
- 13 Retired
- 14 Looking for work
- 95 Something else (Please specify:
[OPEN TEXT])

3.5 PARTICIPANT SURVEY PROTOCOLS

Wisconsin Division of Vocational Rehabilitation (DVR) wants to learn more about the vocational rehabilitation experiences and needs of individuals with disabilities. This information will be used to improve services. Your answers are confidential.

We want you to complete this survey because you received services from Wisconsin Division of Vocational Rehabilitation. Your information, including your email, was provided to us by VR.

Public Consulting Group is conducting this survey. If you have questions about this survey or need accommodations or help completing this survey, please contact [CONTACT INFORMATION].

This survey will take about 15 minutes to complete.

You may skip any question you don't want to answer. If you have worked with DVR many times, please tell us about your most recent time.

Demo08

If you take this survey on behalf of someone else, please answer these questions as if you were them. We are most interested in the experiences and views of participants in VR. Please try to respond through their view as much as you can.

Are you completing this survey yourself, or are you responding on behalf of [NAME]?

1 I am [NAME]; I am completing the survey independently

2 I am completing this survey on behalf of a person with disabilities who received services from Vocational Rehabilitation. My relationship to them is:

[OPEN TEXT]

Serv01

The following questions ask you about the vocational rehabilitation (VR) services you received or are receiving. Please let us know how strongly you agree or disagree with each statement. You can also say you're unsure if you don't know, or if you feel the question doesn't apply to you.

I received VR services in a convenient place.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

8 Unsure

9 Not applicable to me

Serv02

I could use public transportation to get to VR services.

1 Strongly agree

2 Agree

3 Disagree

4 Strongly disagree

8 Unsure

9 Not applicable to me

Serv03

I could get around easily in VR offices.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv04

VR staff were available at times that work for me.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv13

I could choose a location that works for me when I meet with my VR counselor.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv05

VR provided the accommodations I needed to receive services. For example, large print materials, help filling out forms, or interpreters.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv06

VR provided me with the technology or equipment I needed to receive services. For example, talk-to-text software, a mobility device, or a communication device.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv09

I received the testing or assessments I needed.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv10

I helped develop my plan or IPE (Individual Plan for Employment).

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv14

I feel like services were provided quickly enough after I applied.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Serv12

Were there any services you needed from VR that were not provided to you?

- 1 Yes (What were these services?
[OPEN TEXT])
- 2 No

Vocational Rehabilitation Counselor

Exp02

Next, we would like to know more about your experiences with your vocational rehabilitation counselor. Please let us know how strongly you agree or disagree with each statement. You can also say you're unsure if you don't know, or if you feel the question doesn't apply to you.

My VR counselor helped me understand what kind of careers fit my skills and abilities.

- 1 Strongly agree
- 2 Agree
- 3 Disagree

- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Exp03

My VR counselor respected my culture, background, and identity.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Exp04

My VR counselor talked to me about my choices when developing my plan for employment.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Exp05

My VR counselor considered my interests, strengths, abilities, and needs when developing my plan for employment.

- 1 Strongly agree
- 2 Agree
- 3 Disagree
- 4 Strongly disagree
- 8 Unsure
- 9 Not applicable to me

Exp06

What else would you like us to know about working with your VR counselor?

- 1 [OPEN TEXT]

Barriers to Employment

Barrier01

The next set of questions ask about barriers to employment you may have faced. Please let us know if any of the following are barriers you have faced. If you haven't experienced any barriers in a given area, please move on to the next question.

What challenges have you faced with your basic needs while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Housing
- 2 Transportation
- 3 Childcare
- 4 Having enough food
- 5 Medical care
- 6 Mental health care
- 9 Some other basic need(s) (Please specify:
[OPEN TEXT])
- 8 None of these *[EXCLUDE]*

Barrier02

What kinds of legal barriers have you had while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Criminal offenses
- 2 Immigration status
- 3 Discrimination related to my disability
- 9 Some other legal need (Please specify:
[OPEN TEXT])
- 8 None of these *[EXCLUDE]*

Barrier03

What kinds of financial barriers have you had while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Potential loss of financial benefits
- 2 Potential loss of medical benefits such as Medicare or Medicaid access
- 3 Educational or training funding
- 4 Need additional benefits (medical coverage, dental coverage)
- 9 Some other financial need (Please specify:
[OPEN TEXT])
- 8 None of these *[EXCLUDE]*

Barrier04

What job-related barriers have you had while trying to find a job, keep a job, or advance your career? Please select all that apply.

- 1 Employer attitudes toward people with disabilities
- 2 Poor job market or a lack of opportunities
- 4 Limited relevant job skills
- 5 Limited work experience
- 6 Lack of opportunities to explore careers
- 7 Job options don't match my education or experience
- 8 Difficulty with online applications
- 9 Some other job-related need (Please specify:
[OPEN TEXT])
- 8 None of these *[EXCLUDE]*

Transition-Related Services

PreETSScrn

[ASK IF AGE >=25 and AGE <=29; ELSE: PREETS01]

Did you receive any services to help you find a career or plan for further education while you were in school?

- 1 Yes
- 2 No *[GO TO EMPSER01]*
- 3 Unsure *[GO TO EMPSER01]*

PreEts01

[ASK IF AGE <=24; ELSE EMPSER01]

The following questions ask about services that students and young people are offered to help make the transition from school to college, working, or living more independently. For each question, please answer yes or no. If you answer no, please let us know if you do or do not need that service.

Have you received guidance help to explore what kind of careers you might want to pursue?

- 1 Yes
- 2 No, but I need this
- 3 No, I do not need this
- 8 Unsure

PreEts02

Have you learned more about careers by visiting workplaces or trying out different types of jobs? Examples might include job shadowing, apprenticeships, internships, volunteering, or work experiences.

- 1 Yes
- 2 No, but I need this
- 3 No, I do not need this
- 8 Unsure

PreEts03

Have you received information on your options for education after high school ends?

- 1 Yes
- 2 No, but I need this
- 3 No, I do not need this
- 8 Unsure

PreEts04

Have you received training to get the skills you need to succeed at work? This could include any skill you need to get and keep a job, social skills like asking questions, or work skills.

- 1 Yes
- 2 No, but I need this
- 3 No, I do not need this
- 8 Unsure

PreEts05

Have you received training in self-advocacy? For example, requesting accommodations, leading meetings about you and your needs, or help advocating for the choices you want to make.

- 1 Yes
- 2 No, but I need this
- 3 No, I do not need this
- 8 Unsure

Employment Service Providers

EmpSer01

Vocational Rehabilitation sometimes works with employment consultants to help job seekers get the services and supports they need to get and keep a job. The next group of questions are about services you may have received from job coaches.

Did you use services from a job coach?

- 1 Yes
- 2 No [GO TO Partner01]
- 3 Unsure [GO TO Partner01]

EmpSer02

Do you feel that job coach helped you to get or keep a job?

- 1 Yes
- 2 No
- 3 Unsure

EmpSer03

Were there gaps in service provided by the job coach you worked with?

- 10 Takes a long time to get a job
- 11 Not enough staff
- 12 Not enough providers who know how to work with people like me
- 13 Not enough staff with the skills needed to support different needs
- 14 No connections to the sorts of employers I am interested in working with
- 15 Turnover, too many staff changes
- 16 Poor communication or lack of contact with my job coach
- 95 Other
- [OPEN TEXT]
- 99 None of these

Community Service Partners

Partner01

VR often works with partners and groups in the community to make sure you have the support you need to go to work. The next questions ask about services you may have received from these groups. Questions also ask about how working together helped you.

Have you worked with any of the following service partners? Please select all that apply.

- 10 Independent Living Centers
- 11 WorkOne
- 12 Case management providers
- 13 Community mental health center
- 14 Area agency on aging
- 15 Staffing or temp hiring agency
- 17 Community rehabilitation provider
- 18 Local housing authority
- 19 Public transportation
- 20 Medi-Cab services
- 21 Veteran's Service/Veteran's Affairs
- 22 Local school
- 23 College or university disability services
- 24 Wisconsin Medicaid/Medicare
- 95 Someone else (Who was that?)
- [OPEN TEXT]
- 98 Unsure

Partner02

[ASK IF PARTNER01<98]

How well did VR and the vocational rehabilitation partners you worked with coordinate services for you, in general?

- 1 Very well
- 2 Somewhat well
- 3 Not very well
- 4 Not at all well
- 8 Unsure

Partner03

When thinking of the community partners you worked with, what went well?

- 1 [OPEN TEXT]

Partner04

When thinking of the community partners you worked with, what do you think could be improved?

- 1 [OPEN TEXT]

Support Services

Support01

Sometimes individuals need supports to be successful in work. VR may connect you with these services. Please let us know if VR has helped you get any of the services below. Select all that apply to you.

- 10 Community resources
- 11 Family and/or caregiver support
- 12 Group and peer support
- 13 Help with housing
- 14 Independent living skills training
- 15 Connections to medical care
- 16 Social security benefits counseling
- 17 Moving from a group home facility to independent living
- 18 Help with transportation
- 95 Something else (SPECIFY: What was that?)
[OPEN TEXT]
- 97 None of these [GO TO MHS01]
- 98 Unsure

Support02

What else would you like us to know about the support services VR helped to connect you with?

- 1 [OPEN TEXT]

Final Questions

Final02

What about working with Wisconsin Division of Vocational Rehabilitation has gone well?

- 1 [OPEN TEXT]
- 2 Nothing
- 8 Unsure

Final01

What is one thing you would change about working with Wisconsin Division of Vocational Rehabilitation?

- 1 [OPEN TEXT]
- 2 Nothing
- 8 Unsure

Final03

Is there anything else you would like to add about Wisconsin Division of Vocational Rehabilitation or its services?

- 1 [OPEN TEXT]
- 2 Nothing
- 8 Unsure

Tell Us About You

Demo01

The following questions are for categorization purposes only.

Which of the following best represents how you think of yourself?

- 1 Bisexual
- 2 Gay or lesbian
- 3 Straight
- 5 Something else [What do you prefer? OPEN TEXT]
- 8 Not sure
- 9 I'd prefer not to say

Demo03

Do you have a tribal affiliation?

- 1 Yes (Please specify: [OPEN TEXT])
- 2 No
- 9 I'd prefer not to say

Demo04

What language do you mostly speak at home?

- 10 English
- 11 Spanish
- 12 Chinese (including Mandarin and Cantonese)
- 13 Vietnamese
- 14 Russian
- 15 American Sign Language
- 95 Something else (Please specify: [OPEN TEXT])

Demo09

What are you currently doing? Please select all that apply to you.

- 10 Working full time
- 11 Working part time
- 12 Going to school or in training
- 13 Retired
- 95 Something else (Please specify: [OPEN TEXT])

4 ADDITIONAL INFORMATION TABLES

Additional information tables were used to supplement the CSNA such as data from Wisconsin's Labor Market Information Center and Open-Ended Survey Responses.

4.1 WISCONSIN'S LABOR MARKET INFORMATION CENTER "50 HOTTEST JOBS 2022-2032"

Wisconsin's Labor Market Information Center (LMIC) publishes projected growth occupations that must meet the following criteria:

- Median salary must be above the state median
- Percentage change must be greater than the state average
- Have the most projected earnings

Please refer to the embedded file below to view the "50 Hottest Jobs" in Wisconsin between 2022 and 2032.



Wisconsin's Labor
Market Information