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DEDICATION

To all Tribal Vocational Rehabilitation Program staff, past, present, and future, who provide comprehensive and culturally-relevant services to Tribal members with disabilities in their communities.
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  - Mary Meruvia, Director, Mississippi Band of Choctaw Indians VR Program and former CANAR Secretary
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Signed,

The TVR Institute
Laura Maudsley
McKenzie Tham
Elizabeth Boland
Donna Adamson
FOREWORD

Well done, TVR Institute!

This TVR Handbook is a much-anticipated product showcasing the five years of curriculum development for the TVR Award of Completion. The Northwest Indian College Tribal Vocational Rehabilitation Institute has accomplished a task that will have long lasting impact on the profession of Tribal Vocational Rehabilitation (TVR) Services Provision.

In 1975, when Elmer Guy with the Navajo Nation first received state funding to operate a VR program in the way it deemed appropriate for its members with disabilities, the growth of Tribal VR was not foreseen. Priscilla Sanderson, former director of the past funded American Indian Rehabilitation Research and Training Center at Northern Arizona University, when learning of the current number of Tribal VR agencies said, “That is astounding! I am so excited about this good news. Can you imagine that? We did not know that we would make a huge difference during our earlier advocacy period.”

However, today, the professional identity as a TVR Services Professional remains new, largely due to staff turnover with Tribal VR agencies. Tribes need Tribal VR staff who are familiar with their communities, understand the cultural mores, and speak the language. Finding such an individual with formal VR training, in often very rural and isolated communities, is difficult. The NWIC TVR Institute has enabled Tribal VR Staff to begin building the professional identity in Tribal VR by offering undergraduate distance education college coursework that could potentially give a staff member a good start toward a bachelor’s degree. These efforts will have long-lasting impacts as staff, through education, will build a professional identity as a Tribal VR Professional. Over time, the identity developed will correct staff turnover concerns that threaten some agencies, and our movement as a whole.
Various excellent Tribal VR capacity-building efforts have been funded and carried out over the years. At one time, the PET-AIR (Post-Employment Training, American Indian Rehabilitation) Program offered a graduate-level degree, and the Oyate Program offered undergraduate-level credits for training in Tribal VR. Now, the NWIC TVR Institute offers classes in Tribal VR foundations where students can earn undergraduate-level college credits leading to an Award of Completion in TVR Studies. A formal educational degree not only provides direct skills, but also builds one's professional identity. This type of formal training is the best way to strengthen Tribal VR agencies through retention of trained and qualified Tribal staff.

Tribal VR Staff have always been eager to receive training that will enable them to provide the best possible services to their Tribal members who experience disability. Richard Corbridge is a man whose name is known by most in Tribal VR. He is the former Region X RSA Commissioner, who later became a technical assistance provider through his company, REHAB.ETC, that was formed after, he recollects, the “phone kept ringing for technical assistance.” He was active in the curriculum development of the TVR Institute and taught several courses as well. However, it’s the educational degree that will solidify the Tribal VR professional identity and will allow Tribal VR staff to choose life-long careers with Tribal VR agencies.

Data shows that Tribal VR works! Outcomes are comparable to state VR, and Tribal VR is changing communities, one person at a time. People thrive in their own communities, working with VR Professionals who speak their Native language and have understandings of ways of being and ways of doing in one’s own community. The impacts are great for Tribal Communities. Tribal members experiencing disability are able, with Tribal VR services, to add to the success of their communities through their own talents being added to the Tribal workforce. This adds value not only to the individual’s life, but to the Tribal society with full contribution from all its members, including those who experience disability. Outside of mainstream employment outcomes, many individuals are able to be self-supporting after Tribal VR services in ways of life that are traditional in their own tribes.
Subsistence employment is an example of this fact. Many other individuals have been able to gain self-employment outcomes in a plethora of careers, surely some in the production and sale of traditional arts of their Tribe.

This handbook not only captures the history of Tribal VR that we certainly can’t forget, but the knowledge gained over time for both Tribal VR Professionals and VR Professionals as a whole who want to be more effective in working with American Indian and Alaska Native individuals who experience a disability. Best practice Tribal VR techniques are outlined with the addition of considerations of how these techniques can best be used in Tribal communities for the most success. We encourage you to use this handbook in as a resource in your TVR Institute classes at NWIC as well as in other capacity-building efforts with yourself, a colleague within your own agency, or in the state VR Agency.

We are Tribal VR!
Mary Lundy Meruvia, M.Ed., CRC
Mississippi Band of Choctaw Indians
Vocational Rehabilitation Services Program, 1988–present
Philadelphia, Mississippi
May 2020
First, let us say “Thank you!” for taking on this important work. Tribal Vocational Rehabilitation (TVR) programs reach far beyond the individuals sitting in your offices. They reach into tribal communities, tribal families and tribal nations, providing opportunities for healing and strengthening. TVR is the kind of work that, when carried out with integrity and honor, provides that same opportunity for all who walk through those doors.

This handbook is based on the TVR Institute Curriculum, and covers topics related to TVR services including the history of TVR, communication, assessment and eligibility, IPE development, case management, the job search process, and resource management. Throughout the handbook, you will find discussion questions designed to get you thinking about the processes in your own TVR program, as well as your experience in each of these areas. These discussion questions encourage deeper interactions between TVR staff members and may serve as inspiration for improvement in your TVR offices. There are also numerous case studies relevant to TVR, as well as prompts for potential projects one can complete to gain a better understanding of the concepts and materials presented.
Module Description

This module provides an overview of Tribal vocational rehabilitation (TVR) and includes a review of the history of TVR, a discussion of the relationship between state vocational rehabilitation (VR) agencies (state VR, Services for the Blind, or combined agencies) and TVR programs, and the roles and responsibilities of TVR counselors in partnering with and serving individuals with disabilities. The reader will be introduced to TVR grants and the profession, the process of providing TVR services, disability etiquette, and laws and regulations guiding program operation.

Learning Objectives

At the end of this module, the reader should be able to

- Define Tribal vocational rehabilitation (TVM);
- Describe points of history for TVR and state vocational rehabilitation (VR);
- Describe the relationship and differences between the TVR programs and state VR agencies;
- Describe concepts required in written agreements between TVR programs and state VR agencies;
Describe the sole authorities of TVR programs;
- Describe the importance of holistic TVR services;
- Describe how TVR programs conduct outreach to potential applicants;
- Describe considerations for developing program policies and procedures; and
- Identify particular events in the history of TVR and VR in the US.

Tribal Vocational Rehabilitation Overview

Tribal vocational rehabilitation (TVR) is a program that was developed by the federal government to meet the needs of Tribal citizens who were not fully benefitting through the other state and federal VR service systems. The program runs through the Rehabilitation Services Administration (RSA) in the US Department of Education, and utilizes the federal definitions of American Indian and Alaska Native (AI/AN) when referring to Tribal members. The official title for TVR programs is “American Indian Vocational Rehabilitation Services (AIVRS) Projects,”1 and the purpose is to provide services for members with disabilities living on or near Indian reservations who are interested in obtaining an employment outcome. TVR programs are unique in that cultural and traditional practices and Tribal languages are often part of a program’s model and service provision, so that services are relevant and appropriate for each Tribal community. TVR counselors collaborate with Tribal members to manage and overcome barriers resulting from disabilities that have hindered successful employment outcomes. TVR provides culturally relevant and appropriate TVR services comparable to state VR agencies, and services are community-based when available.

1 For the purposes of the Handbook, the term “TVR” is used instead of “AIVRS,” and the term “program” is used instead of “project” because program is the term used by most at the Tribal level.
TVR is a comprehensive and holistic program that considers all aspects of participants’ lives as they relate to employment. TVR follows well-defined processes and procedures in compliance with federal regulations and tribal practices, guided by timeframes. There are numerous steps in the process that a participant and counselor work on together. Examples of these include evaluation of an individual’s disability (or disabilities), impediments and challenges, assessment, diagnosis and planning, vocational counseling, employment plan development, case management, referrals, consultation with other agencies, evaluation and research, job analysis, job development, and research of service providers and costs. Each participant’s plan is unique, and it may take a significant amount of time for a participant to achieve rehabilitation and the employment goal.

Before TVR programs existed, most American Indians and Alaska Natives with disabilities who required vocational rehabilitation were served by VR offices in their states. An examination of this system found that their VR needs were not being met, as services were not being provided appropriately, if at all. Often, Tribal members simply did not seek out VR services because (a) there was no awareness of the services provided, (b) state VR agency offices were not located on the reservations, (c) there were no American Indian or Alaska Native VR counselors or staff employed by state VR agencies, or (d) the state VR agencies had limited contact and follow-up with participants on the reservations, due to a variety of factors such as lack of cultural knowledge and understanding, the rural locations of reservations, and widespread mistrust of the government.
COMMON ACRONYMS IN TVR

- **AI/AN**: American Indian/Alaska Native
- **AIVRS**: American Indian Vocational Rehabilitation Services
- **CANAR**: Consortia of Administrators for Native American Rehabilitation
- **CRC**: Certified Rehabilitation Counselor
- **DSB**: Division or Department of Services for the Blind, at the state level
- **DVR**: Division or Department of Vocational Rehabilitation, at the state level
- **ED**: US Department of Education, which funds AIVRS programs
- **EDGAR**: Education Department General Administrative Regulations
- **IEP**: Individualized Education Program (in K–12 schools)
- **IPE**: Individualized Plan for Employment
- **OJT**: On-the-Job Training
- **OMB**: Office of Management and Budget
- **PES**: Post-Employment Services
- **Rehab Act**: Rehabilitation Act of 1973, as amended
- **RC**: Rehabilitation Counseling
- **RSA**: Rehabilitation Services Administration in the US Department of Education
- **TVR**: Tribal Vocational Rehabilitation
- **VR**: Vocational Rehabilitation
- **WIOA**: Workforce Innovation and Opportunity Act

TVR Funding

The overall funding for the AIVRS/TVR program is a percentage of the combined federal funds allocated to the state VR agencies. TVR programs are five-year discretionary grants with 90 percent of the total cost of the program from federal funds and 10 percent from of the total cost of the program from Tribal match. As of the writing of this book, there are 86 TVR programs nationwide that compete for federal grants to fund their vocational rehabilitation programs. The programs usually compete every five years but they are not all on the same funding cycle. During each grant competition, new programs are funded, and sometimes an established TVR
program might not earn enough points in the competition and lose its funding. The federal government oversees these grants through the Rehabilitation Services Administration (RSA), which is housed in the United States Department of Education, Office of Special Education and Rehabilitative Services (OSERS). Each TVR grant budget includes a 10 percent “match” requirement, which means that the Tribe must provide a cash or in-kind match of no less than 10 percent of the total cost of the program. Types of match sources can vary, but they are usually Tribal, non-federal funds.

TVR programs design their own grants to meet specific criteria, which means that TVR program designs are not uniform. Factors such as size of the Tribe, population served, budget, priorities of the Tribe, participant needs, resources, and prevalence of disability all impact the grant design. Thus, the objectives of one TVR program can be quite different from another. When working in TVR, it can be useful to have an understanding of what is included in the grant of that particular program, as well as where the program is in the grant cycle.

**DISCUSSION QUESTIONS**

- What do you know about the approved grant application that funds your program? How does your knowledge impact how you do your job?
- What are the goals and objectives of the grant? What are the target outcomes?
- What is the geographic service area for your program?
- Do you serve members from one Tribe or do you serve members from multiple Tribes?
Steps in the Tribal Vocational Rehabilitation Process

TVR process steps for all programs include the following:

**Outreach**

TVR programs conduct outreach and public awareness activities in the community about the TVR program and process, referrals, services, and who may be eligible. It is important to reach out to potential participants at Tribal events that are scheduled throughout the year. TVR employees who are not Tribal may want to attend events with a co-worker or friend. There are many ways to perform outreach to the community, including offering workshops, participating in cultural, community, or employment-related events, providing program information to potential referral programs and agencies, connecting with Tribal Elders and organizations, serving on boards and committees, and partnering with schools. For details about allowable outreach activities, see 2 CFR § 200.421(b)(4) or 2 CFR § 200.421(d)(2).

**Application**

Once the TVR staff is known in the community, potential participants start to come in or are referred to apply. The TVR process starts when the application for services is completed. Some TVR programs have orientations for new referrals and applicants to ensure that potential participants better understand the program requirements and processes.

Once individuals are ready to see if they are eligible for services and sign the TVR application, the 60-day countdown starts. By law, TVR counselors have 60 days to determine whether or not the person is eligible. The 60-day deadline can be extended if more time is needed to gather disability documentation, but the reason for the delay must be documented in the case file after discussion with the participant. It is likely that the 60-day requirement was put into place because participants across the country felt that they were not being served fast enough.
**Intake & Assessment**

During the intake and assessment stage of the TVR process, counselors conduct initial interviews to gather information; request medical, psychological and other pertinent information and documentation; and set up assessments and evaluations. These are used to determine if applicants are eligible for TVR services based on their disabilities and the impediments those disabilities present.

**Eligibility Determination**

The eligibility determination is a significant milestone in the TVR process. Once eligible for services, an individual is more commonly referred to as a “participant” or “consumer.” The TVR counselor is one of the only staff who signs the eligibility determination, along with the TVR manager or director. This is one of the sole authorities of the TVR program.

The following criteria are used to determine eligibility:

1. Is the applicant a member of a federal or state-recognized American Indian or Alaska Native Tribe?
   
   The Tribe or the Tribal organization has determined the Tribes that will be served. Some programs serve all federal- and state-recognized Tribes, while others serve only members of the applicant Tribe(s) or Tribes in the region.

2. Does the applicant live on or near the reservation?
   
   The definition of “on or near the reservation,” in reference to the TVR program’s service area, is determined by the Tribe or Tribal organization in the grant application.

3. Does the applicant have physical or mental impairments?
   
   According to the Rehabilitation Act, a physical or mental impairment is a condition that “substantially limits one or more major life activities.” For the purposes of TVR, impairments must be
supported by documents such as medical, psychological, or educational records or reports.

4. Does the physical or mental impairment cause substantial impediments to employment?

A substantial impediment to employment is when the impediments prevent an individual “from preparing for, entering into, engaging in, advancing in or retaining employment consistent with the individual's abilities and capabilities” (34 CFR § 371.6(b)).

5. Is there a reasonable expectation that the individual can benefit from TVR services and become employed?

This means that, aside from cases in which an applicant’s disability may be determined too severe for the person to benefit, an applicant is presumed to be able to benefit from the provision of TVR services.

6. Does the applicant require TVR services in order to achieve an employment outcome?

In order to achieve an employment outcome, the counselor must verify that the applicant requires the provision of TVR services.

**Individualized Plan for Employment (IPE)**

After the eligibility determination, the next step in the TVR process is the development and implementation of the Individualized Plan for Employment, also referred to as the IPE. The IPE is a collaborative document, which means that the participant, and/or the participant’s representative, and the counselor have involvement in the development of the IPE. The IPE records the vocational goal and the types, quantity, duration, goals and objectives, services, and the service providers that are to be used to assist participants reach their employment goal. Like the Eligibility Determination, the TVR counselor (and/or the TVR manager) has the sole authority to sign off on the IPE after the participant (or the participant’s guardian or
representative) authorizes the elements of the plan, the payment of services, and the move toward successful employment.

While there is no timeframe requirement for TVR programs to get IPEs in place after eligibility determination, the state VR programs do have a 90-day timeline for this. This is good to know when TVR cases are shared with state VR programs.

**Service Provision and Employment**

Once the IPE is developed, signed, and implemented, the participant begins the process of TVR service provision and addressing barriers to employment. Any changes to the planned services, including the addition of services, require an amendment to the IPE. If the vocational goal changes or if the path to the employment goal is significantly modified, a new IPE must be developed.

During the provision of services under the IPE, the counselor oversees how services are being provided and maintains contact with the participant to track progress. The counselor also works with the Tribal accounting department to ensure that services are paid for in a timely manner.

**Employment and Follow-Up**

Once a participant starts working, the TVR counselor closely monitors the participant for 90 consecutive days or more. It is essential that the counselor communicate regularly with the participant during this critical time, as sometimes the pressure of starting a new job can reveal previously unknown issues. This monitoring helps ensure that all barriers and issues, including those which may have newly surfaced, are addressed.

**Closure**

The end goal of TVR is successful long-term employment, so participants are not considered successfully rehabilitated and “closed” until they have been able to maintain jobs for a minimum of 90 days.

It is important to note that a TVR case may also be closed if the participant has not become employed or leaves the job before 90 days pass. Such instances may occur if the participant has moved away, is no longer
participating with the IPE, or is no longer interested in going to work. The counselor will try to get participants back on track if possible, but sometimes it does not work out.

Following closure, TVR counselors or other program staff need to keep in touch with participants who are working in order to capture data about income and employment status that is required for reporting.

Post-Employment Services (PES)

Any services that come after successful closure of the participant’s file are considered Post-Employment Services or PES. These services only require an amendment to the IPE and should be limited in scope and duration. If it starts to look as if the services needed would be complex or comprehensive, the participant will need to reapply for TVR services rather than receive PES.

The Tribal Vocational Rehabilitation Profession

TVR is considered a profession or career just like any other type of counseling or social service work. Individuals can be trained in a variety of fields in order to prepare to work as a TVR counselor. A master’s degree is not required to work as a TVR counselor, unlike similar positions in state VR programs. There are many positions in a TVR program that involve different levels of knowledge, skill, and responsibility. Individuals may start with the program as a TVR counselor or program manager, or work their way up from program assistant or rehabilitation technician. Some of the most successful TVR counselors do not have a
formal education, but have brought knowledge of their communities and their Tribal cultures, taken the available training, and steadily built their knowledge and skills over time.

Professionalism is essential in TVR work. Counselors often arrive in TVR programs with a variety of unique backgrounds. As a profession, vocational rehabilitation values education and professional development as essential to TVR program success. Professional development can include advancing formal education, brushing up skills, learning new information in a particular area, and continuing education and training opportunities, as well as career pathways through degree programs.

One of the key elements in TVR is that services are provided to Tribal members with a more holistic approach that can be found in other VR programs. Addressing the traditional and cultural aspects of a participant’s disability experience, and overcoming barriers, are critical to a successful outcome. Therefore, traditional practitioners, counseling, and healing services are important components of meeting the needs of the participants and providing culturally appropriate services.

**Basic Principles of Rehabilitation Philosophy**

While counselors have their own preferences for how they provide TVR services, there are many guiding principles and values that are the foundation of rehabilitation philosophy. The following list is taken from *Rehabilitation Counseling: Basics and Beyond, 5th ed.* (Patterson, Bruyère, Szymanski, & Jenkins, 2012, p.29).

1. Every human being has an inalienable value and is worthy of respect for his own sake.

2. Every person has membership in society, and rehabilitation should cultivate their full acceptance.

3. The assets of people with disabilities should be emphasized, supported, and developed.

4. Reality factors should be stressed in helping the person [with disabilities] cope with his environment.
5. Comprehensive treatment involves the “whole person,” because life-areas are interdependent.

6. Treatment should vary and be flexible to deal with the special characteristics of the person [with disabilities].

7. Every person should assume as much initiative and participation as possible in the rehabilitation plan and its execution.

8. Society should be responsible, through all possible public and private agencies, for the providing of services and opportunities to [people with disabilities].

9. Rehabilitation programs must be conducted with interdisciplinary and interagency integration.

10. Rehabilitation is a continuous process that applies as long as help is needed.

11. Psychological and personal reactions of the individual [with disabilities] are ever present and often crucial.

12. The rehabilitation process is complex and must be subject to constant reexamination—for each individual and for the program as a whole.

13. The severity of a [disability] can be increased or diminished by environmental conditions.

14. The significance of a disability is affected by the person’s feelings about the self and his or her situation.

15. The client is seen not as an isolated individual but as part of a larger group that includes other people, often the family.

16. Predictor variables, based on group outcomes in rehabilitation, should be applied with caution to the individual case.

17. Self-help organizations are important allies in the rehabilitation effort.

18. Provision must be made for the effective dissemination of information concerning legislation and community offerings of potential benefit to persons with disabilities.
19. Basic research can profitably be guided by the question of usefulness in ameliorating problems, a vital consideration in rehabilitation fields, including psychology.

20. Persons with disabilities should be called upon to serve as co-planners, co-evaluators, and consultants to others, including professional persons.

**Educational Pathways in TVR**

Often, TVR staff do not have bachelor’s or master’s degrees when they start working for TVR programs. Many have backgrounds in behavioral health, social services, education, human services, and customer service. Because of the steep learning curve involved in the TVR process, training, continuing education, and professional development are essential elements of a successful TVR counselor.

A bachelor’s degree in social services, counseling, or psychology is a good foundation that will prepare TVR staff to understand human behavior, how to help others reach goals, and how to become skilled communicators. There are a variety of programs available to those who may not have completed their undergraduate education prior to working in TVR, including in-person training, online courses, and hybrid degree choices.

For many TVR counselors, the next step is graduate work. Graduate coursework leading to a master’s degree in rehabilitation counseling (RC) can typically be completed in two to three years. Many programs offer online-only or hybrid options for students who need more flexibility in their academic schedules. Potential coursework includes medical and psychosocial aspects of disability, theory and practice of counseling, assessment, case management, and educational and community services. Coursework includes learning how to assess and interact with participants, as well as how to navigate social service and legal systems. Before enrolling in a program, students should check to see if it is accredited by the Council for Accreditation of Counseling and Related Educational Programs (CACREP). An accredited degree program opens up more career options and is guaranteed to provide the requisite training and
coursework. It also can impact the ability to obtain counselor licensure depending on which state the Tribe is located in.

In addition to coursework, rehabilitation counseling students in master’s programs must complete practicum and internship hours, which involve working a minimum of 700 hours in a rehabilitation counseling setting. This field experience training is supervised by qualified rehabilitation counselors. Many universities help to arrange practicums and internships, and can provide leads for jobs based on interests and availability.

Counselors can find employment without having professional credentials, but will broaden their opportunities by obtaining the Certified Rehabilitation Counselor (CRC) or Licensed Professional Counselor (LPC) credentials (the titles vary from state to state). Obtaining the CRC credential entails taking an exam administered by the Commission on Rehabilitation Counselor Certification (CRCC). The quickest path to certification is to earn a master’s degree from a CACREP-accredited program and take the exam either right before or right after graduation. Other paths to obtaining the CRC credential involve experience in the field prior to being allowed to take the exam. The length of experience required depends on the graduate degree program. The CRC credential must be renewed every five years by either retaking the exam or accumulating 100 continuing education hours. Individuals who are CRCs and relocate out of state will not have to go through the certification process in their new states, as certification is a national credential.

Another option for those interested in rehabilitation counseling work is to become Licensed Professional Counselors (LPC), or similar title, depending on the state. Licensure involves qualifying to take a state licensing exam (usually requiring a master’s degree, specific coursework, and a specified number of hours of supervised clinical experience) and passing it. There are also continuing education requirements for maintaining licensure, which vary across states. Requirements for licensure when relocating will also vary depending on requirements of the new state.
Professional Organizations

Many professional organizations support work and provide professional development opportunities in the rehabilitation and counseling fields, including the following:

- Consortia of Administrators for Native American Rehabilitation (CANAR), an organization of TVR program administrators and staff that serves as a means of collaboration and cooperation between TVR programs, the federal funding agency, state VR, and other stakeholders.

- American Counseling Association (ACA), a professional and educational organization that is dedicated to the growth and enhancement of the counseling profession and maintains a list of State Professional Counselor Licensure Boards.

- American Rehabilitation Counseling Association (ARCA), a division of ACA that includes rehabilitation counseling practitioners, educators, and students who are concerned with continually improving the profession.

- Center for Continuing Education in Rehabilitation (CCER), an organization that provides professional development opportunities to individuals employed in the field of rehabilitation.

- Commission on Rehabilitation Counselor Certification (CRCC), the certification body for rehabilitation counselors.

- Council for Accreditation of Counseling and Related Educational Programs (CACREP), the accrediting body for graduate programs in counseling.

- International Association of Rehabilitation Professionals (IARP), a global association for professionals involved in private rehabilitation.

- National Council on Rehabilitation Education (NCRE), a professional organization dedicated to quality services for people with disabilities through education and research.
- National Rehabilitation Counseling Association (NRCA), a professional organization representing rehabilitation counselors working with people with physical, sensory, mental, developmental, intellectual, and emotional disabilities to overcome functional and social barriers to employment, independent living, and social integration.

- ADA National Network, consisting of 10 regional ADA centers and an ADA Knowledge Translation Center that provides information on the Americans with Disabilities Act.

- National Clearinghouse for Rehabilitation Training Materials (NCRTM), an online resource center that provides continuing education classes and a digital library.

- Rehabilitation Counselors and Educators Association (RCEA), a division of the National Rehabilitation Association that represents rehabilitation counselors and educators.

- National Association of Multicultural Rehabilitation Concerns (NAMRC), an organization that promotes cultural diversity and disability through advocacy for excellence and equity in rehabilitation research, education, and practice.

**DISCUSSION QUESTIONS**

- How did you obtain your current position? What role did professional development play in bringing you to your current position in TVR?

- Have you created a professional development plan? If so, what does it look like? If not, what might it look like?

- What level of education have you obtained in the rehabilitation field? How do you think that impacts your experience of the work?

- Do you plan to seek further education in rehabilitation? Why or why not?

- What are the academic rehabilitation programs (bachelor’s or master’s level) that you are familiar with in your local area (if there are any)? What are the online programs that you are familiar with?
Definition of Disability

What is a disability? Definitions can vary widely. According to the National Center for the Dissemination of Disability Research, “There is no uniform definition of disability, since government agencies define disability differently. Further clouding the picture, some health demographers do not define disability as completely as do rehabilitation demographers.” Keeping this in mind, there are some distinctions in disability that the TVR counselor should be aware of.

In disability awareness, there is often talk about visible versus invisible disabilities. This is an important element in the experience of disability for the participant. A visible disability is something that can be seen or is obvious. Consider a participant who uses a wheelchair to ambulate—that individual would be considered to have a visible disability. On the other hand, some individuals have disabilities that are not so readily seen or identified. These kinds of disabilities are referred to as invisible disabilities. Examples of these include emotional or mental health problems, learning disabilities, alcohol/drug addiction and deafness.

Another classification often used in disability is congenital versus acquired disability. A congenital disability is one that a participant is born with. Examples of this include Down's Syndrome, a heart condition, or Cerebral Palsy. For participants with a congenital disability, family dynamics and family systems may heavily influence the participant’s ability to succeed in employment. An acquired disability, on the other hand, is something an individual develops over the course of their life. An example of this would be someone who was injured in an accident. As this disability
occurs some time after birth, a participant may struggle with issues of life roles and adjustment secondary to the disability acquisition.

Knowing how the term “disability” is defined by the Tribe, the community, the program, and partner programs can help in the understanding of how the definition used in vocational rehabilitation is unique. The following are some examples of how TVR partners define disability:

- The Rehabilitation Act: The term “disability” means a physical or mental impairment that for such individuals constitutes or results in a substantial impediment to employment.

- TVR: In TVR, a disability can be defined as the combination of impairment and impediment. According to the World Health Organization, an impairment is a “loss or abnormality of psychological, physiological, or anatomical structure or function.” Functional limitations refer to a reduction in an individual’s function due to an impairment, and are the building blocks of impediments to employment, which are the ways that a person is unable to complete activities related to employment.

- K-12 Education: The definition of disability used in the public K-12 school system is based on the Individuals with Disabilities Education Act (IDEA), which provides 13 disability categories. These federal definitions guide how states define who is eligible for free appropriate public education: autism, Deaf-Blindness, deafness, emotional disturbances, hearing impairments, intellectual disabilities, multiple disabilities, orthopedic impairments, other health impairments, specific learning disabilities, speech or language impairments, Traumatic Brain Injury, and visual impairments.

- Post-Secondary Education: Colleges and universities typically serve students with the following disabilities: vision impairments, hearing impairments, psychiatric disabilities, mobility impairments, systemic disabilities, learning disabilities, Attention Deficit/Hyperactivity Disorder, and Traumatic Brain Injury. Self-advocacy and reaching out for services is usually necessary in higher education. It is important to note that under Section 504 of the
Rehabilitation Act, institutions of higher education are required to provide accommodations to students with any verified disability.

- The Americans with Disabilities Act (ADA): The term “disability” means, with respect to an individual:
  a) a physical or mental impairment that substantially limits one or more of the major life activities of such individual;
  b) a record of such an impairment; or
  c) being regarded as having such an impairment.

- The Social Security Act: The term “disability” means
  a) the inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or has lasted or can be expected to last for a continuous period of not less than 12 months, or
  b) in the case of an individual who has attained the age of 55 and is blind (within the meaning of “blindness” as defined in 42 USC § 416(i)(1)), inability by reason of such blindness to engage in substantial gainful activity that requires skills or abilities comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time. Citation: USC § 423 (d)(1).

**Tribal Communities and Disability**

As a best practice, TVR counselors must always strive for cultural competence and humility. This means acknowledging that the TVR environment is unique and that various Tribes may view disability differently than the above definitions. There are some common cultural threads among Tribes relating to disability, health, and wellness that tend to embrace disability differently and more inclusively than non-Tribal culture. In most
Tribal communities, members with disabilities are considered important members of the Tribal community, just like everyone else. Thus, as a TVR counselor working in a Tribal environment, part of becoming a competent professional is learning about how the Tribe perceives disability. This knowledge can help a TVR counselor serve participants and their families appropriately, consistent with Tribal practices.

**DISCUSSION QUESTIONS**

- Why do you think it is important to define disability in TVR?
- What is your personal understanding or description of what a disability is? Has this changed over time?
- How do you see your Tribe defining “disability”? Where does culture fit into that definition?
- If your program serves members from multiple Tribes, how does the definition of “disability” differ?
- Does your Tribe have certain beliefs or customs regarding disability? What are examples of these?
- How was the concept of “disability” perceived by Tribal community members in years, decades, or centuries past? How do you think that the perception has changed, or not?
- Are some kinds of disabilities perceived differently than others in your community? If so, why do you think that is?
- How do you think that awareness about disabilities (in general or related to a particular disability) can be improved in your community?
- Describe a cultural approach, such as a story, philosophy, or metaphor, that could be used (or is currently used) to address or explain disability to someone within your community.
Disability Etiquette

Lack of awareness about disabilities can lead to discrimination against participants diagnosed with disabilities. Hurtful phrases, unkind language, and stereotypes can be directed at people with disabilities. As counselors become attuned to the world of disability, they become more aware of personal biases and assumptions. By being aware, getting educated, teaching others, and modeling inclusive behaviors, counselors help ensure that others see people with disabilities as just that: people.

Disability etiquette is important to understand when working in TVR. How participants with disabilities are viewed and communicated about shapes the relationships with them. Disability etiquette posits that participants do not want to be treated differently than the general population. In TVR work, the connection between societal viewpoints and employment is clear. If society were to see people who have disabilities as productive, contributing members of communities, then other issues such as finding employment or creating accommodations would be easier to address.

**Person-First Language**

When referring to an individual with a disability, only use descriptors if necessary. If it is necessary, then use person-first language. Person-first language emphasizes the person first, not the disability, and is an essential part of disability etiquette. For example, refer to a person with a disability by using phrases such as: “a person who,” “a person with,” or “person who has.” A good example of this is referring to a participant as a “person with schizophrenia” instead of “a schizophrenic.” People’s disabilities do not define them, which is an important distinction to remember when working in TVR.
Conversational Etiquette

When talking to a person with a disability, it is considered appropriate to look at and speak directly to that person, even if an interpreter is being used. Some specific etiquette tips are listed below.

For those who have hearing impairments:

To get the attention of a person who is deaf or hard of hearing, tap the person on the shoulder, wave a hand, or flicker the lights. Look directly at the participant and speak clearly, naturally, and slowly. Not all people who have hearing impairments can lip-read. Those who can will rely on facial expressions and other body language to help in understanding. Show consideration by standing or sitting under or near a light source and keeping hands and food away from the mouth when speaking. Keep mustaches well-trimmed. Do not shout at participants who have hearing impairments. If needed, use a pen and paper or other written form of communication to facilitate the communication process.

Some families develop their own communication systems with participants, and some participants do not use sign language, especially if they did not go to school.

For those who use wheelchairs:

When talking with a person in a wheelchair, it is best practice for the counselor to also sit in a chair in order to facilitate level eye contact.

For those who have visual impairments:

When greeting a participant with significant vision loss, introduce all those who are in the room. An example would be, “On my right is Candice Redwing.” When conversing in a group, give a vocal cue by starting with the name of the person to whom you are speaking. Speak in a normal tone of voice, indicate in advance when moving from one place to another, and let the participant know when the conversation is at an end.
For those who have speech impairments:

When speaking to an individual with a speech impairment, listening carefully is essential. Do not speak for a participant with a speech difficulty. When necessary, ask short questions that require short answers or nods or shakes of the head. Never pretend to understand a participant. Instead, repeat what is understood and work to establish whether this is what the participant is trying to communicate. If needed, use written communication to clarify points of the conversation.

**Language for Alcohol and Substance-Related Disorders**

The Diagnostic and Statistical Manual 5 (DSM-5) no longer uses “addiction and dependence” for any alcohol or substance issue. All alcohol and substance use disorders are now diagnosed on a continuum of mild, moderate, or severe. Keep these new, more accurate definitions in mind and be cautious of labeling participants who are struggling with alcohol and substance related disorders.

**Resources**

An Understanding Disabilities in American Indian and Alaska Native Communities: Toolkit Guide can be found at https://ncd.gov/rawmedia_repository/53edc4ab_c8c7_4786_8f04_35a40855075c.pdf.

A video on disability etiquette can be found at https://www.youtube.com/watch?v=Gv1aDEFlXq8.
DISCUSSION QUESTIONS

- Why do you think that disability etiquette is important to know and practice?
- How have you seen disability etiquette is practiced in your community? What is an instance of when disability etiquette was not practiced in your community?
- What is an example of how a lack of awareness can lead to unintended stereotypes and discrimination?
- How might using outdated terminology to describe a disability affect the relationship between a counselor and a TVR participant?
- How do you suppose the people who use the wheelchairs feel about people touching their wheelchairs or wheeling them around without their permission?
- What are other examples of disability etiquette that you can think of or have experience with?
- What is an example of using “person first” language?
- Are there community partners whom you work with who you think could benefit from training in disability etiquette?
- How do you feel your community does in terms of disability etiquette and treating people with disabilities as equals?
- How can disability etiquette be important for those with hidden disabilities?
- How does your TVR program provide disability awareness training for new Tribal staff?
- For those who have worked with people with vision impairments, what are helpful suggestions for effective communication?
- For those who have worked with people with speech impairments, what are communication strategies that you have found helpful?
- For those who have worked with people with hearing impairments, what are helpful tips to foster effective communication?
Thinking About TVR Holistically

One of the ways TVR programs are unique is their holistic focus on Tribal culture, community, and the participant. In TVR, Tribal culture and community are integrated into the services provided for participants. This type of integration helps TVR counselors to consider and address the needs of the whole person. Having a holistic perspective of a participant’s life can help clarify how impairments and impediments affect a participant’s ability to be successful in the world of work. People are multi-faceted and complex. When one aspect of a person’s life is changed, it may also change other aspects in a domino effect, and significant adjustment may be necessary. By addressing rehabilitation needs holistically, TVR counselors can more effectively help participants find root causes of problems or imbalances, and more appropriate solutions.

Approaching vocational rehabilitation holistically also helps participants feel respected and cared for. TVR counselors help participants assess management of different areas of their lives, and when areas in their lives are not being adequately addressed, a counselor can help participants explore how to restore balance. TVR counselors can also help participants identify priorities in their lives and then carve out routines that support what they have identified as most important. By knowing participants’ values and priorities, TVR counselors can better help them to find work environments that will be good matches.
DISCUSSION QUESTIONS

- What does “holistic” mean to you? How does this differ from “wellness” or a “whole-person” approach?
- What are ways you can describe how different aspects of a person’s life are linked together?
- What is an example of a root problem that could cause a person many other issues?
- How do you think culture is related to holistic TVR services?
- What are examples of typical barriers to employment that are not related to a participant’s impairment(s)?
- How could you help participants think about strategies to bring balance to their lives?
- What tools or resources are available in your community to help participants restore balance in their lives?
- Some Tribes or TVR programs use a cultural model, such as the Medicine Wheel, to describe movement through the TVR process. How has your program used such a model?

Tribal Sovereignty in Vocational Rehabilitation

Historically, state VR agencies have not been able to adequately serve American Indian/Alaska Native communities. Currently, there are around 573 federally recognized Tribes throughout the United States and at least 250 distinct Tribal languages spoken. The cultural uniqueness of Tribal communities is vast, and often state VR staff have little competency regarding AI/AN cultures. Many Tribal communities are rural and remote, and this contributes to a sense of disconnection from state VR services. In addition, there is often a lack of trust between AI/AN individuals and state services, which may contribute to poor AI/AN outcomes in state VR systems.
There are many factors that make TVR more successful than state VR in addressing the needs of AI/AN participants. One of the most important factors is that TVR programs are located within Tribal communities. Most TVR staff members are from the Tribal community and are familiar with local culture, customs, and resources. Some TVR staff members are able to speak the local Tribal languages. In addition to location and cultural competency, there is further need for TVR services based on social determinates. Historically, AI/AN communities have high unemployment rates and high rates of disability when compared to the general population. True accessibility to VR services has not been historically available in Tribal communities, and because state VR has not been able to address the disability needs of Tribal members with cultural competence and awareness, Tribes are able to apply for grants to serve their own communities.

**DISCUSSION QUESTIONS**

- State VR programs have, historically, not been able to adequately serve Tribal communities. There are many reasons behind this. What are some reasons you can think of? What particular factors exist in your own community?
- What are other reasons TVR programs are essential in Tribal communities?
- What is it about your TVR program that you feel makes it successful?

**Tribal and State Partnerships and Written Agreements**

The Rehabilitation Act, as amended, covers a couple of requirements concerning the relationships between Tribes and states. Section 101 requires states to develop collaborative agreements, such as a memorandum of understanding (MOU), with Tribes concerning the provision of VR services. These agreements cover such things as the sharing of cases
and other resources. Section 121 covers the Tribal responsibility to consult with states during the process of developing the grant application. These requirements are meant to promote shared responsibility and collaboration between Tribes/TVR programs and states/state VR programs. It is important to remember that the TVR-state VR MOU is a “director-to-director” agreement, meaning that it is between the Tribal leader and the state VR director, rather than with the regional state VR office(s). Although the Tribal leader signs the agreement, the program director is usually the point of contact and the Tribe’s representative in the MOU.

One of the advantages to working collaboratively with the state programs is that this engagement has the potential to increase the TVR program’s capacity to serve more participants. This is because both TVR and state VR can serve the same participant at the same time and share costs. In addition, both are able to count that participant as a successful closure when the participant achieves the employment goal. There are a variety of reasons a referral may be made to the state VR, including funding opportunities, access to resources, expertise, and participant need. Generally, a state VR program will make a referral to a TVR program if they see an unmet cultural need with an AI/AN participant.

Congress mandates that all state VR Programs, Services to the Blind VR Programs, and Combined Programs serve all eligible individuals with disabilities in the state, including American Indians and Alaska Natives. By collaborating with the state programs, TVR programs collectively ensure that AI/AN participants receive the fullest scope of vocational rehabilitation services possible.
DISCUSSION QUESTIONS

• What are the relationships like between your TVR program and the state VR program(s)?

• In some states, all of the TVR programs sign the same cooperative agreement or MOU and meet once or twice per year to make changes to their agreements. How does this work in your state?

• If you have a participant you are thinking about sharing with the state VR office, what is your first step to make this happen?

• How do your TVR program and state VR agency benefit by working together?

• What are positive things that you see coming from your program's MOU with state VR agencies?

• Why might some participants choose to work with the state VR program instead of the Tribal TVR program?

• How does your TVR program reach out to the state VR agency and how does the state VR reach out to your program?

• What would you say are the biggest barriers and challenges that your program has faced in developing a relationship with state VR?

• What are some ideas that you can share about building effective collaborations with state VR agencies?

History of the Rehabilitation Act

The Rehabilitation Act provides information and guidance about what vocational rehabilitation is and how it should operate. This piece of legislation has had a long evolution shaped by important milestones in the nation's history. Regular amendments to the Rehabilitation Act are important to ensure that the act continues to evolve and meet the needs of people with disabilities. The Rehabilitation Act focuses on disability rights, advocacy, and protection for people with disabilities, and is an important resource and reference for TVR staff.
Prior to the Rehabilitation Act, the types of services now provided by TVR and state VR programs were mostly philanthropic and voluntary charities. Throughout the late 1800s and early 1900s, it is likely that few AI/AN participants benefitted from these charities. What did come of these activities that benefits AI/AN participants today was a call for advocacy for individuals with disabilities. This movement led to the first iteration of the Rehabilitation Act in 1973 and continues to influence subsequent revisions and amendments of the Rehabilitation Act, the latest of which occurred in 2014.

**DISCUSSION QUESTIONS**

- Have you ever read through or searched the Rehabilitation Act? What was your experience?
- Why do you think that the Rehabilitation Act has been amended so many times? Why do you think the amendments are important?
- How did your Tribal members who had disabilities receive assistance to work before there were TVR programs?

**Code of Federal Regulations for Tribal Vocational Rehabilitation**

The Code of Federal Regulations (CFR) is the codification of the general and permanent rules and regulations (sometimes called administrative law) published in the Federal Register. There is a paper publication and an electronic version, called the e-CFR, which can be found at https://www.ecfr.gov. These rules and regulations provide further, specific guidance for the various programs across the federal government and in the Department of Education, including Tribal and state VR agencies. There may be instances in which there are references to the state VR regulations (34 CFR
§ 361), but TVR programs are advised by RSA not to refer to the state VR regulations for clarification or elaboration. There are some references to 34 CFR § 361 in this handbook, but they are for informational purposes only.

The CFR is divided into many different titles that represent broad subject areas. All regulations specific to vocational rehabilitation that are cited will start with the number 34 which refers to the Department of Education. In a CFR reference or citation, the 34 will usually be followed by “CFR.” For TVR, the “34 CFR” will be followed by the number 371, which refers to section focused on AIVRS (TVR). Any letters and numbers that come after refer to more specific parts of the section.

**AIVRS (TVR) Program Assurances**

An “assurance” is an obligation required by the federal government that is agreed to in TVR grant proposals. In every TVR grant proposal that is funded, the Tribal government has pledged that it would uphold certain assurances, which are listed below. These can also be found in the Code of Federal Regulations at 34 CFR § 371.21.

a) Effort will be made to provide a broad scope of vocational rehabilitation services in a manner and at a level of quality at least comparable to those services provided by the designated State unit (sections 121(b)(1)(B) of the Rehabilitation Act of 1973, as amended; 29 USC 741(b)(1)(B)).

   *Explanation for TVR:* The quality of TVR programs will be at least as good as the state VR agencies. A TVR program should offer services to participants that are of equal quality with state VR services.

b) All decisions affecting eligibility for vocational rehabilitation services, the nature and scope of available vocational rehabilitation services, and the provision of such services will be made by a representative of the Tribal vocational rehabilitation program funded through this grant and such decisions will not be delegated to another agency or individual (sections 121(b)(1)(D) of the Rehabilitation Act of 1973, as amended; 29 USC 741(b)(1)(D)).
Explanation for TVR: Only staff in the TVR program can decide whether or not a participant is eligible, or what and how services will be provided. For example, a Tribal government cannot decide that someone is or is not eligible for TVR.

c) Priority in the delivery of vocational rehabilitation services will be given to those American Indians with disabilities who are the most significantly disabled (sections 101(a)(5) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(5)).

   Explanation for TVR: If there is limited funding, such that not everyone who qualifies can receive VR services, those who have the most significant disabilities will be served first.

d) An order of selection of individuals with disabilities to be served under the program will be specified if services cannot be provided to all eligible American Indians with disabilities who apply (sections 101(a)(5) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(5)).

   Explanation for TVR: TVR programs must have systematic plans in place if funding doesn't allow them to serve all participants who qualify.

e) All vocational rehabilitation services will be provided according to an individualized plan for employment which has been developed jointly by the representative of the Tribal vocational rehabilitation program and each American Indian with disabilities being served (sections 101(a)(9) of the Rehabilitation Act of 1973, as amended; 29 USC 721 (a)(9)).

   Explanation for TVR: All Individualized Plans for Employment (IPEs) are written by the participant and assisted and agreed to by the counselor. In other words, the participant and counselor work together to develop the IPE.

f) American Indians with disabilities living on or near Federal or State reservations where Tribal vocational rehabilitation service programs are being carried out under this part will have an opportunity to participate in matters of general
policy development and implementation affecting vocational rehabilitation service delivery by the Tribal vocational rehabilitation program (sections 101(a)(16) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(16)).

Explanation for TVR: When TVR programs develop their own policies and procedures that are unique to the needs of their people, they will involve program participants in the development and review process.

g) Cooperative working arrangements will be developed with the DSU [direct service unit], or DSUs, as appropriate, which are providing vocational rehabilitation services to other individuals with disabilities who reside in the State or States being served (sections 101(a)(11)(F) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(11)(F)).

Explanation for TVR: The state VR agency and the TVR program must develop a cooperative working agreement to guide the sharing of cases and other resources.

h) Any comparable services and benefits available to American Indians with disabilities under any other program, which might meet in whole or in part the cost of any vocational rehabilitation service, will be fully considered in the provision of vocational rehabilitation services (sections 101(a)(8) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(8)).

Explanation for TVR: If there is funding available to pay for services or parts of services by another agency or program, TVR should use those funds first before using program funds. For example, participants should use their medical insurance to help pay for doctor visits before using program funds.

i) Any American Indian with disabilities who is an applicant or recipient of services, and who is dissatisfied with a determination made by a representative of the Tribal vocational rehabilitation program and files a request for a review, will be afforded a review under procedures developed by the grantee comparable to those
under the provisions of section 102(c)(1)-(5) and (7) of the Act (sections 102(c) of the Rehabilitation Act of 1973, as amended; 29 USC 722(c)(1)-(5) and (7)).

Explanation for TVR: TVR programs must have procedures and referrals in place for participants who are unhappy with their TVR decisions or services. Examples of this include grievance and appeal procedures and the Client Assistance Program (CAP).

j) The Tribal vocational rehabilitation program funded under this part must assure that any facility used in connection with the delivery of vocational rehabilitation services meets facility and program accessibility requirements consistent with the requirements, as applicable, of the Architectural Barriers Act of 1968, the Americans with Disabilities Act of 1990, section 504 of the Act, and the regulations implementing these laws (sections 101(a)(6)(C) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(6)(C)).

Explanation for TVR: TVR offices and facilities must be accessible to people with disabilities.

k) The Tribal vocational rehabilitation program funded under this part must ensure that providers of vocational rehabilitation services are able to communicate in the native language of, or by using an appropriate mode of communication with, applicants and eligible individuals who have limited English proficiency, unless it is clearly not feasible to do so (sections 101(a)(6)(A) of the Rehabilitation Act of 1973, as amended; 29 USC 721(a)(6)(A)).

Explanation for TVR: TVR programs must make every effort to ensure that staff is available to communicate with participants who speak the native Tribal language, use American Sign Language, or use a communication device.
DISCUSSION QUESTIONS

• What has been your experience looking up information in the Code of Federal Regulations?
• Can you imagine looking up information in the Code of Federal Regulations or the Rehabilitation Act? Why or why not?
• Why do you think that the state VR agency’s CFRs are no longer used as a reference for TVR programs?
• Have you seen the assurances in your grant? How are they addressed?
• In what kind of situation might a TVR program not be able to serve all participants who qualify for TVR services?
• How do you answer questions that come up during service provision that you do not have an established policy or procedure for? Where do you turn for help?

Legislation That Impacts Current TVR Policy and Procedure

The laws and regulations that guide TVR programs are often cumbersome and confusing. Despite this, it is important to understand the value and significance that these laws and regulations have for the successful implementation of TVR programs. In addition to the Rehabilitation Act and Code of Federal Regulations described above, the following also affect TVR programs and the provision of services.

Workforce Innovation and Opportunity Act

The Workforce Innovation and Opportunity Act (WIOA) of 2014 is a United States public law that consolidates job training programs into a single funding stream. It is designed to strengthen and improve the nation’s public workforce system and help Americans, including youth and those with significant barriers to employment, into high-quality jobs and careers. It also
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provides direction to assist employers to hire and retain skilled workers. WIOA can be found at https://www.congress.gov/113/bills/hr803/BILLS-113hr803enr.pdf.

EDGAR

The acronym “EDGAR” stands for Education Department General Administrative Regulations. These regulations establish uniform administrative requirements for all Department of Education grants and agreements. TVR programs must also abide by these regulations because they are funded by the Department of Education. Examples of topics included in EDGAR are rules on records retention, equipment purchases, and financial reporting. EDGAR sections relevant to TVR grants are 75, 77, 79, 81, 82, 84, 86, 97, 98, and 99. EDGAR can be found at https://www2.ed.gov/policy/fund/reg/edgarReg/edgar.html.

Office of Management and Budget

The Office of Management and Budget (OMB) establishes principles and standards for determining costs for federal awards carried out through grants, cost reimbursement contracts, and other agreements with state and local governments. This regulation, 2 CFR 200, can be found at https://ecfr.io/Title-02/cfr200_main.

TVR Policies and Procedures

Policies and procedures are essential elements to any successful TVR program and are required by the Rehabilitation Act, section 102(d). They are included in the “special application requirements,” or assurances, in the TVR grant proposal. Policies establish the rules by which the program runs, describe how the law and regulations apply to a TVR program, and clarify any generalities found in the law and regulations. In TVR programs, policies instruct staff about the rules of the program and inform others about how the Tribe plans to operate the TVR program. Policies help create an environment in which all applicants are equally served, and they also
provide guidelines to ensure that program funds are managed carefully to ensure that funds are spent appropriately and that as many participants are served as possible. Quality policies are written in clear, concise, simple language, are used and updated regularly, and include clear references to the laws, regulations, and other guiding materials. Good policy development creates ownership among TVR staff by including them in the process of policy creation alongside advisory boards and management staff.

Procedures, on the other hand, represent an implementation of policy and should evolve over time as new tools emerge, new processes are designed, and forms change. Quality procedures are tied to policy and are also used and updated regularly. Procedures make the distinction between policy and procedure clear and explain how the procedure helps the program achieve its goals and ensure understanding and compliance. Procedures should be developed with the participant in mind, be understandable, and easy to follow by all TVR staff. When feasible, procedures should offer TVR staff options, as procedures that are unnecessarily restrictive may limit their usefulness in real world settings.

Policies are needed because they

- Establish the rules by which the program runs and services are provided;
- Describe how the law and regulations apply to the TVR program situation;
- Clarify any generalities found in the law and regulations;
- Instruct TVR staff about particular program processes and guidelines;
- Inform others about how TVR program officials plan to operate the program;
- Help ensure that services are provided equally to all who will be served; and
- Are required!
Policies and procedures can cover a wide range of topics, which might include

- The purpose of the program;
- Grant overview (e.g., goals and objectives);
- Definitions;
- Forms;
- Ethics (e.g., CRCC, Tribal);
- Legal citations;
- Assurances;
- Confidentiality;
- Appeals process;
- Eligibility determination;
- Considerations for common disabilities (e.g., behavioral health, substance abuse);
- Order of selection;
- Assessment;
- Individualized Plan for Employment;
- Comparable services and benefits;
- TVR services;
- Ownership and care of purchased services and goods;
- Economic need considerations;
- Case closure; and
- Case record requirements.
Community Involvement in Policy Development

When developing TVR program policies and procedures, it is expected that community partners and individuals with disabilities be an essential part of the development team. These partnerships help provide guidance to TVR staff about how to make decisions, provide services, and operate programs in a way that ensures compliance with laws and regulations.

The regulations at 34 CFR § 371.21(f) require that: “American Indians [and Alaska Natives] with disabilities living on Federal or State reservations where service programs are being carried out under this Part will have an opportunity to participate in matters of general policy development and implementation affecting vocational rehabilitation service delivery on the reservation.”

This regulation makes it clear that American Indians and Alaska Natives with disabilities are to be included in the development of TVR program policies. It is up to each TVR program to determine how to put this into practice, and methods will vary between programs. It is recommended that the program policies include a policy describing how the TVR program plans to implement the requirement and how efforts are documented for program reporting.
DISCUSSION QUESTIONS

• How have your TVR program’s policies and procedures been helpful to you in your work? How do you think that they are helpful in the operation of your program?

• Is it clear to you and your TVR team why the policies and procedures are what they are? Do you have questions regarding why a certain policy or a specific procedure exists?

• After reviewing your program’s policies, are there any that you think need some revision, especially based on your experience with applying them? How would you like to see them changed?

• After reviewing your program’s procedures, are there any that you think need updating to reflect current practices?

• How often are your program policies and procedures reviewed? Who participates in this process?

• How does your program involve American Indians and Alaska Natives with disabilities in the development and review of policies and procedures?

• Does your program involve an advisory committee in program policies and policy development? If so, who serves on the advisory committee?

• What process does your program follow to get policies approved by your Tribe?

• Do you and other members of the TVR team feel ownership of the policies? Why is this an important aspect to implementing policies? If you do not feel ownership, what are some things that could be done to change this perspective?

• What is an example of a procedure that offers options to TVR counselors?

• What do you think makes a procedure easy to understand and follow?
History of TVR (AIVRS) Programs

The signing of Public Law 93-638, the “Indian Self-Determination and the Education Assistance Act” of 1975, was a key event in the process of Indian Nations gaining the responsibility to operate TVR programs and services for their own people and communities. Not long after this, the Navajo Nation was awarded a VR services demonstration grant by the Arizona Department of Economic Security’s Rehabilitation Services Administration. The Navajo Nation Vocational Rehabilitation Program was founded and operated by Elmer J. Guy, Ph.D. Guy worked diligently with Herb Leibowitz, Ed.D., from the RSA Region IX office in San Francisco, to develop the program and then later partnered with him to work on the 1978 amendment to the Rehabilitation Act, which created the American Indian Rehabilitation (AIVR) program, which eventually became the AIVRS programs. At the same time, the Navajo Nation began to work with Congress to advocate for American Indians and Alaska Natives to provide VR services to tribal members in their own communities and reservations.

The success of the Navajo Nation VR demonstration grant provided the foundation for the establishment of AIVR through the 1978 reauthorization of the Rehabilitation Act. AIVR became part D, section 130, which allowed American Indian Tribes to apply for discretionary grants to provide VR services to tribal members on their reservations. In 1981, the Navajo Nation was the first to receive a grant under section 130. Also put into place was a set-aside to provide funding for AIVR programs through section 110 of the Rehabilitation Act. The Shoshone-Bannock, Chippewa Cree and Salish Kootenai tribes applied for and were awarded section 130 grants in 1985.
In the 1986 reauthorization of the Rehabilitation Act, language was included for AIVRS programs to 1) allow the provision of culturally-relevant services traditionally used by Indian Tribes and 2) extend TVR services to tribal members living beyond reservation boundaries, as “near reservation.” By 1990, 13 AIVR programs were in operation.

In January 1993, the Consortia of Administrators for Native American Rehabilitation, or CANAR, was established to advance and improve rehabilitation services by

- providing a forum to enable administrators of Native American rehabilitation to study, deliberate, and act upon matters affecting rehabilitation with the ultimate goal of expanding quality rehabilitation services to Native American people with disabilities;

- providing a resource to organize and convey the collective position of administrators of Native American rehabilitation on issues affecting rehabilitation on reservations, trust territories, Alaska Native villages, and on a national level to disseminate the collective position to service providers, related facilities, companies and concerned citizens;

- providing a means of communication with related organizations and governmental bodies on matters related to rehabilitation service provision, education and research;

- conducting and supporting research demonstrations that lead to an improvement of rehabilitation services for Native Americans with disabilities on reservations, trust territories, Alaska Native villages, and at the national level;

- promoting and maintaining service outcomes that develop a professional identity for practitioners in rehabilitation whose career goals are in rehabilitation services, education, and administration of Native American rehabilitation programs; and

- conducting and supporting efforts to increase the number of Native American practitioners in vocational rehabilitation.
During the process of the reauthorization of the Rehabilitation Act in 1996, CANAR presented 22 amendments to the act that would significantly impact TVR programs in a positive manner. 20 of the recommended Amendments became law. The CANAR 22, as presented on October 29, 1996, are listed below.

CANAR 1: That American Indians be included as members on the State Rehabilitation Advisory Councils.

CANAR 2: That American Indians be included as members on the Statewide Independent Living Councils.

CANAR 3: To require the Commissioner of RSA to fund all AIR proposals that are considered to be of high quality by peer review.

CANAR 4: To ensure continued funding of high quality AIR programs, a 10 point or higher priority be given to proposals that continue Tribal VR programs already in operation.

CANAR 5: To extend the length of time an AIR project is funded from 3 years to 5 years.

CANAR 6: To require RSA to provide annual on-site technical assistance and monitoring for AIR grantees.

CANAR 7: To require seven types of discretionary grants funded under the Act to provide services to American Indians to supplement the AIR projects.

CANAR 8: That the State VR agencies and the AIR projects be required to develop strategies for ensuring those members of Tribes living near the reservations who are VR eligible, receive VR services.

CANAR 9: That the Act require RSA to design a reporting system for the AIR projects that will generate a national database for reporting rehabilitation outcomes.

CANAR 10: That Section 14 be amended to enable the Secretary/Commissioner to employ evaluation studies of AIR projects by persons with knowledge of the program but not immediately involved in administration of the AIR program.
CANAR 11: Amended the Act to enable funds allocated to a State VR agency that cannot be used by that agency to be available to any AIR projects in the State that can effectively use the funds.

CANAR 12: Amend Section 21 of the Act to financially assist American Indian Community Colleges to prepare students for Vocational Rehabilitation and related careers.

CANAR 13: Add language in the Act that will encourage State VR agencies to work with the AIR programs.

CANAR 14: Increase the percentage of Title I appropriations for the AIR projects.

CANAR 15: Include language that allows State VR agencies to use Innovation and Expansion funds for collaborative programs, projects and activities to improve the system for delivering VR services in American Indian Communities.

CANAR 16: Services to groups had already been handled in regulations at 34 CFR 369.4(b) in the definition of VR services.

CANAR 17: Encourage/require grantees of long term training grants to recruit students from American Indian Communities and especially from AIR programs.

CANAR 18: Require applicants for discretionary grants under the Act to describe how they will serve American Indians.

CANAR 19: The Act should contain language that will enable our communities to participate in the Independent Living programs and services available under Title VII of the Act.

CANAR 20: Include language that ensures RSA will maintain a schedule of reviews for the AIR programs similar to the requirements for PWIs and CILs.

CANAR 21: Expand the definition of employment outcome beyond occupational careers in competitive and integrated settings. Make the definition broad enough to include self-employment, home-based-employment, and employment electronically linked to the workplace.
CANAR 22: Include language that authorizes AIR funding to establish Community Rehabilitation Programs.

CANAR maintains an active role in TVR, and works to support programs, provide training, and act as a liaison between programs and RSA. The organization hosts two TVR conferences per year and continues to advocate on behalf of the over 85 programs operating across the country.

Laws and Regulations Related to Tribes and Tribal Vocational Rehabilitation

This section describes laws and regulations that are related to Tribes, TVR, and people with disabilities since the late 1800s.

1887 – Dawes Act

The General Allotment Act of 1887, known commonly as the Dawes Act, encouraged AI/AN people to move off reservations in exchange for US citizenship and land. The intent was for the assimilation of AI/AN people into white/majority culture and contained six goals:

- breaking up of Tribes as a social unit,
- encouraging individual initiatives,
- furthering the progress of native farmers,
- reducing the cost of native administration,
- securing parts of the reservations as Indian land, and
- opening the remainder of the land to white settlers for profit.

1928 – Meriam Report

The “Problem of Indian Administration,” or Meriam Report, combined narratives with statistics to describe the conditions on reservations. The
Meriam Report, written by the Institute for Government Research, was used to reform American Indian legislation. Overall, the report found that the federal government was failing in protecting individuals who were American Indian. The Institute team, composed of a specialist in legal aspects, an Indian advisor, a specialist in general economic conditions, and a specialist in health, among others, visited 23 states and spent seven months completing the report, which documented critical economic, social, and health disparities on reservations. It also highlighted low quality education and abuse in boarding schools.

1934 – Johnson-O'Malley Act

The Johnson-O'Malley Act subsidized education, medical care, and other services provided by states to American Indian populations. It was specific to the state of Minnesota when first passed, however continues to be a source of funding for American Indian students today across the country.

1943 – Indian Reorganization Act

The Indian Reorganization Act, also called the Wheeler-Howard Act, was passed in 1943 with the intention of decreasing federal involvement in Tribal government. The Indian Reorganization Act ended allotment and returned “surplus” land to the Tribes. It encouraged Tribes to govern themselves using constitutions and charters, and established a credit system to allow Tribes to buy land, increase educational attainment, and establish other Tribal programs.

1947

In 1947, the Office of VR and the Bureau of Indian Affairs (BIA), the oldest agency within the Department of Justice, signed a Cooperative Relationship Memorandum to focus efforts to serve American Indians with disabilities because “there is a very limited chronicle of integration of vocational rehabilitation services by the Tribal or federal service agencies.” It never went very far, but this memo was the first acknowledgment that VR services for American Indians were neither sufficient nor integrated.
Mid-1940s to 1970 – The Termination Period

During this time period, a variety of laws were passed with the intent of assimilation of AI/AN populations into dominant white culture. US citizenship was granted to AI/AN populations with the intent of decreasing the involvement and the responsibility of the federal government in Indian affairs.

1970 – End of the Termination Period

In 1970, the Termination Period officially ended. Activism played a significant role and led to decades of self-determination and restoration of Tribal governments.

1973

In 1973, the ban on practicing Native Hawaiian healing traditions was overturned.

1975 – Indian Self-Determination and Education Assistance Act

The Indian Self-Determination and Education Assistance Act was a reversal of federal policy regarding relationships with AI/AN Tribes. This act shifted the focus of government action from termination to self-determination. With this act, the federal government could contract with tribal governments for federal services. This act also created avenues for Tribes to establish their own schools, and health care and social services programs.

1976 – Indian Health Improvement Act

The Indian Health Improvement Act created avenues for Indian Health Services to bill Medicare and Medicaid for their services. This act also acknowledged the need for culturally acceptable options for healthcare for AI/AN patients and proposed Tribal-specific healthcare plans as a solution to that need.
1978 – American Indian Religious Freedom Act

The American Indian Religious Freedom Act of 1978 protects the rights of AI/AN Tribes to exercise their traditional spiritual beliefs. This includes ceremonies, access to sacred land, and the use and possession of sacred objects. AI/AN people are the only Americans whose specific religious practices are covered by federal law.

1978 – The Rehabilitation, Comprehensive Services, and Developmental Disabilities Amendments of 1978

The Rehabilitation, Comprehensive Services, and Developmental Disabilities Amendments of 1978 provided TVR services grants to Indian Tribes located on federal and state reservations. Despite the passage of these amendments, funding continued to be an issue for Tribes nationwide.

In 1978, a tri-state grant was entered into by the state VR agencies in Arizona, New Mexico, and Utah that provided funds to the Navajo Nation to start a TVR program. This program, which was able to pull away from state funding in 1983, set the precedent for future TVR programs. Navajo was the first Tribe to receive funds directly from the federal government, with an initial grant of $650,000. They were the only TVR program in the country until 1985.

1986 – The Rehabilitation Act Amendments of 1986

The Rehabilitation Act Amendments of 1986 expanded grants to any governing body of recognized Indian Tribes. These grants allowed for Tribes to apply for funding for TVR programs.


The Rehabilitation Act Amendments of 1992 increased the percentage of federal funding for TVR grants. By 1992, there were 14 TVR programs nationwide.
1992 – Consortia of Administrators for Native American Rehabilitation (CANAR)

After passage of the amendments to the Rehabilitation Act in 1992, considerable action was taken to enhance cultural competence in rehabilitation service delivery. The amendments required the Rehabilitation Services Administration (RSA) to develop a national strategic plan, known as the Rehabilitation Cultural Diversity Initiative (RCDI), that would implement priority training on issues of cultural diversity to all programs funded under the Rehabilitation Act.

Between 1992 and 1993, several RCDI meetings were coordinated by the Region VIII Rehabilitation Continuing Education Program (RRCEP) to address the current service delivery system in TVR. As the state VR system often conflicted with Tribal norms, there were high rates of unsuccessful closures among AI/AN populations in the state system. The intent of these meetings was to improve culturally-centered VR service provisions on reservations nationwide. As a result, on January 22, 1993, the Consortia of Administrators for Native American Rehabilitation (CANAR) was formed.

Once established, CANAR began to function as a national platform to advocate for effective rehabilitation service delivery to AI/AN individuals with disabilities. CANAR also began to serve as the official voice of the TVR programs. Since it was established in 1993, CANAR has continued to grow. In 2003, CANAR incorporated as a 501 (c)(3) non-profit organization. It is currently based in Louisiana, with offices in Las Vegas, Nevada.

1998 – Title IV of the Workforce Investment Act

In 1998, The Rehabilitation Act became Title IV of the Workforce Investment Act. This Act allowed TVR programs to assume disability based on Social Security (both SSI and SSDI) benefits. In addition, it required TVR program representation in the State Rehabilitation Councils (SRC). This act expanded the scope of TVR services to include technical assistance to individuals with disabilities to pursue self-employment, telecommuting, and business enterprises. It also expanded the scope of services to groups by including technical assistance to help schools with their transition planning for students with disabilities.
2017 – 34 CFR Section 371 Regulation Revisions

In 2017, the federal regulations for AIVRS programs were updated in order to be consistent with statutory definitions as well as to add a subpart related to new requirements for the Training and Technical Assistance set-aside (percentage of the AIVRS appropriation). In addition, new sections were included in a subpart that requires written policies, informed choice, and special requirements pertaining to the protection, use, and release of personal information. Other items included

1. A change of the title of the regulation to “American Indian Vocational Rehabilitation Services program;”

2. Expansion of the purpose to serve “on or near the reservation” to be consistent with the 1998 amendments to the Rehabilitation Act;

3. Insertion of “including culturally appropriate services;” and

4. A change in the AIVRS grant duration from “up to three years” to “up to 60 months.”

DISCUSSION QUESTIONS

- How does knowing the history of laws and legislation related to AI/AN people and TVR make a difference in your work?
- What role do you see CANAR playing in support of TVR? How do you think advocacy for TVR could be improved on a national level?
- What are some milestones for Tribal sovereignty specific to your region or state?
- What legislative changes would you like to see that could positively affect individuals with disabilities?
Laws and Regulations
Related to Vocational Rehabilitation

1917 – Smith-Hughes Act

Federal rehabilitation legislation began in vocational education through the Smith-Hughes Act. This act established the Federal Board of Vocational Education for retraining dislocated industrial workers. State funding for vocational education went to support areas such as agriculture and industry, which were affected significantly by industrialization.

1918 – Soldiers’ Rehabilitation Act

The Soldiers’ Rehabilitation Act authorized VR services for World War I veterans by establishing vocational training and placement for veterans with disabilities who were returning from war.

1920 – Smith-Fess Act

The Smith-Fess Act went beyond the Soldiers’ Rehabilitation Act and authorized vocational guidance, occupation adjustment, and placement services for civilians with physical disabilities. This program provided federal funds at a 50 percent matching rate to state VR agencies for counseling, vocational training, and job placement services for people with physical disabilities. The Smith-Fess Act brought about a significant increase in VR programs nationwide as funding options became more available.

1921 – Veteran’s Bureau Act

The Veteran’s Bureau Act established the Veteran’s Bureau, which became the Veteran’s Administration, and later the U.S. Department of Veterans Affairs.
1935 – Social Security Act

The Social Security Act of 1935 gave permanent status to VR and other federal programs for the first time. Prior to this, there had been minimal and non-committal funding for VR programs from the federal government. The Social Security Act established the state-federal VR program as a program that could only be discontinued by an Act of Congress.

1936 – Randolph-Sheppard Act

The Randolph-Sheppard Act enabled individuals classified as legally blind to operate vending stands and food service facilities in federal buildings.

1938 – Wagner-O’Day Act

The Wagner-O’Day Act made it mandatory for the federal government to purchase designated products from workshops for persons with blindness.

1943 – Bardon-LaFollette Act

The Bardon-LaFollette Act expanded VR services to include individuals with mental disabilities. It established the Office of Vocational Rehabilitation in the Federal Security Agency and established VR regional offices. It also provided the first federal-state VR support specifically for people with blindness and visual impairments.

1954 – Vocational Rehabilitation Act Amendments

The 1954 Vocational Rehabilitation Act Amendments increased the funding for VR services, provided funding for the extension and improvement of existing programs, and provided funding for research and training programs to colleges and universities. It also made funding available to help prepare professional VR personnel.

1965 – Vocational Rehabilitation Act Amendments

The 1965 Vocational Rehabilitation Act Amendments established the National Commission on Architectural Barriers. This resulted in better access for people with disabilities to facilities that are designed, built,
altered, or leased with federal funds. These amendments also deleted economic need as a requirement for service, increased the federal share of federal-state VR programs to 75 percent, and provided extended evaluations for individuals with significant or severe disabilities. Additionally, more flexibility and greater resources were provided to the federal-state VR program.

**1967 – Vocational Rehabilitation Act Amendments**

The 1967 Vocational Rehabilitation Act Amendments established a National Center for Deaf-Blind Youths and Adults. The amendments also authorized grants to state VR agencies for pilot projects for the provision of VR services to individuals with disabilities who were migratory agricultural workers, in addition to special funding for Comprehensive Statewide Planning for VR.

**1968 – Vocational Rehabilitation Act Amendments**

The 1968 Vocational Rehabilitation Act Amendments further increased the federal share of federal-state VR programs to 80 percent and continued the expansion of VR programs.

**1973 – Rehabilitation Act of 1973**

The Rehabilitation Act of 1973 introduced the Individual Written Rehabilitation Plan (IWRP), which preceded the IPEs used today in VR. The act also introduced post-employment services and established a priority of services for those with severe disabilities. Pilot projects were created to explore the ideas of Independent Living (IL) programs and Client Assistance Programs (CAPs). In addition, the act eliminated any residency requirements for services, mandated participant involvement in state agency development, stressed program evaluation, and initiated legislation to prohibit discrimination against persons with disabilities in federally funded programs.

**1974 – Rehabilitation Act Amendments of 1974**

The Rehabilitation Act amendments of 1974 extended the authorization of appropriations in the Rehabilitation Act of 1973 for one year, transferred
RSA to the Department of Health, Education, and Welfare (HEW), strengthened the Randolph-Sheppard Act of 1936, and provided for the convening of a White House conference on "Handicapped Individuals."

**1978 – Rehabilitation, Comprehensive Services, and Developmental Disabilities Amendments of 1978**

The Rehabilitation, Comprehensive Services, and Developmental Disabilities Amendments of 1978 expanded the quality and scope of reader services for individuals with blindness and interpreter services for people with deafness. In addition, the amendments established independent living services as part of federal-state VR programs. The amendments also established the National Institute of Handicapped Research, later renamed the National Institute on Disability and Rehabilitation Research, and now named the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR). Also established were Rehabilitation Research and Training Centers (RRTCs), Comprehensive Rehabilitation Centers, the Helen Keller Center for Deaf-Blind Youths and Adults, and the National Council on the Handicapped (later renamed the National Council on Disability).

**1984 – Rehabilitation Act Amendments of 1984**

The Rehabilitation Act Amendments of 1984 required a Client Assistance Program (CAP) in each state and inserted the word “qualified” before “personnel” for training programs.

**1986 – Rehabilitation Act Amendments of 1986**

The Rehabilitation Act Amendments of 1986 added the definition of “supported employment” to the act, established supported employment as an acceptable employment outcome, and provided funding for state-supported employment programs. These amendments also added rehabilitation engineering as a VR service, added scholarship “payback” requirements to the RSA training programs, and began gradually decreasing the federal share of the federal-state VR programs from 80 percent towards 75 percent.
1988 – Technology-Related Assistance for Individuals with Disabilities Act

The Technology-Related Assistance for Individuals with Disabilities Act provided financial assistance to states to help develop and implement participant-responsive statewide programs of technology-related assistance for individuals with disabilities. This act also mandated a study by the National Council on Disability on financing assistive technology, established a national information and program referral network, provided for training and public awareness, and funded demonstration and innovation projects.

1990 – Americans with Disabilities Act

The Americans with Disabilities Act (ADA) of 1990 was a civil rights milestone for people with disabilities. The ADA prohibited discrimination against people with disabilities in employment, transportation, communications, public accommodations, and other services.


The Rehabilitation Act Amendments of 1992 replaced the term “handicapped” with the more socially acceptable term “disabled.” The 1992 amendments also brought a focus on cultural diversity and increased funding for TVR programs. RSA was required to develop a strategic plan known as the Rehabilitation Cultural Diversity Initiative (RCDI) to address outreach and services to people of cultural diversity with disabilities.

The 1992 amendments halted the retreat of the federal share for state VR programs by fixing it at 78.7 percent, and also focused on participant control and participation. This is reflected in the establishment of mandatory State Independent Living Councils (SILCs) and State Rehabilitation Advisory Councils (SRCs).


In 1998, the Rehabilitation Act was incorporated into the larger umbrella of the Workforce Investment Act (WIA). Because WIA had a focus on building the workforce, there was more of an emphasis on “employment” rather
than “rehabilitation.” One example of this change in focus was reflected in the switch from the IWRP (the Individual Written Rehabilitation Plan) to the redesigned Individualized Plan for Employment (IPE). In addition, WIA provided the presumption that those who receive Social Security Disability Insurance (SSDI) are eligible for VR and meet the definition of having significant disabilities. Expanded VR services included technical assistance to individuals with disabilities to pursue self-employment, telecommuting (working from home), and business enterprises. The scope of services to groups was expanded by including technical assistance to help schools with their transition planning for students with disabilities.

2014 – Rehabilitation Act Amendments of 2014

These are the latest amendments to the Rehabilitation Act to date. The Rehabilitation Act is now housed under the umbrella of the Workforce Innovation and Opportunity Act (WIOA). The most significant changes related to TVR are increased mandates for services to youth with disabilities. WIOA articulates that state VR is now required to set aside at least 15 percent of federal funding to provide pre-employment transition (pre-ETS) activities and services to students with disabilities who are or may be eligible for VR services. The pre-ETS services that are required are job exploration counseling, work experiences, counseling and guidance on transition services, independent living, self-advocacy, and educational opportunities.

DISCUSSION QUESTIONS

- Which of these laws had the most impact on you and your experience of working in TVR? Why?
- What surprises you most about the history of VR?
- Why do you suppose that there was so much legislation around blindness so early on in disability legislation?
Potential Assignments

1. Prepare a PowerPoint presentation that provides knowledge and understanding of the Tribal traditions, foods, and cultural practices of the reservation or service area you work with. Include pictures or stories unique to your Tribe.

2. Create an art project that represents or reflects your Tribe or Nation. Include a reflection that identifies:
   
   a) What Tribe and Tribal community you are from;
   
   b) What the art symbolizes; and
   
   c) Why you chose to represent your Tribe and/or community in this way.

3. Imagine that you have the opportunity to participate in a podcast about your Tribe and its experience with TVR. What would you say? How would you describe your TVR program and its achievements? Write out a script and record your 8 to 10 minute podcast for your co-workers to listen to.
Module Description

This module introduces the TVR program as an investment in people and reviews methods for TVR staff to communicate in ways that show respect to program applicants and participants at all points of the process. Topics include the counseling relationship, applicable counseling theories and techniques, adjustment to disability, informed choice, confidentiality, ethics, and historical and intergenerational trauma. Additionally, this module reviews strategies for developing a strong partnership with the Tribe or Tribal organization’s governing body.

Learning Objectives

At the end of this chapter, the reader should be able to

- Define why an application form for TVR should be a comprehensive document;
- Describe the key purposes for an intake interview as well as the kind of information to be collected;
- Identify key points in the TVR process at which participants should be notified of their rights and responsibilities;
- Define the purpose and value of “informed choice” in the TVR process;
Describe the importance, practice, and challenges to maintaining confidentiality in a TVR program;

Describe the options applicants and participants have if they disagree with the actions of the TVR program in their cases;

Describe or characterize motivational interviewing and its use within the TVR process; and

Describe why it is important to have a good working relationship with the Tribe or Tribal organization’s governing body.

Tribal Vocational Rehabilitation Counseling Role

It is important in TVR, as with any profession, to understand the role of a TVR counselor. This can also be referred to as scope of practice. A scope of practice describes the particular duties of the job; the expectations of the employer; the required knowledge base and expertise, certification, or licensure; and what services can be provided according to the counselor’s level and type of education. Counselors should think about the distinction between behavioral health counselors and TVR counselors. While both behavioral health counselors and TVR counselors encourage participants to discuss emotions and experiences, TVR counselors are specifically focused on helping individuals adjust to their disabilities and address barriers to employment, particularly in preparation for success in the work environment.

Because of the close relationship that is often established between TVR counselors and their participants, it is not uncommon for participants to share experiences or seek guidance from TVR counselors that falls beyond
their scope of practice. It is important to be clear about the role of the TVR counselor in the participant’s TVR experience. For example, if participants are sharing past experiences of abuse, it might be appropriate to remind them that a mental health counselor or spiritual healer may have a more appropriate scope of practice around this issue and can help in a more effective way. A TVR counselor will also want to note how the abuse and related conditions impede and impact participants’ disabilities, whether they are ready to pursue TVR services, and what kinds of services may be needed to support them in their IPEs. This may also be a situation in which the TVR counselor considers a referral to ensure that the participant is receiving appropriate, holistic services in order to ensure a higher likelihood of success in a TVR program.

**DISCUSSION QUESTIONS**

- Why do you think it’s important to define the role of a TVR counselor?
- What qualities and skills do you think are necessary for a TVR counselor to successfully counsel participants?
- How does defining a role correlate with expertise, experience, and job duties?

**Setting up the Counseling Relationship**

Because Tribal communities can be very small and interconnected through family, social, cultural, and work relationships, it is very common that TVR counselors and TVR participants know each other and have histories together before an individual applies for TVR services. When this happens, it is important for the TVR counselor to acknowledge the current relationship, but to also be upfront about the roles of the counselor and the participant during the TVR process. If a very close family member or personal friend is assigned to the TVR counselor, it is up to the counselor to talk with the TVR program director to disclose the relationship and to
determine if the case can be assigned to a different counselor. This can help TVR counselors avoid situations in which they may not be able to be professional and objective because of close personal relationships.

A significant factor that will determine the effectiveness of a TVR counselor is how well the counselor can connect with participants. A counselor who can build a strong bond with the participant and others in the participant’s care team will have greater success than a counselor who is not successful at creating these bonds. Some key personal attributes that can facilitate the creation of strong bonds include

- Warmth: viewing other people in a positive light and accepting them as they are;
- Genuineness: being transparent, real, honest, and authentic in interactions; and
- Basic Relating Skills: behaviors such as having an open body posture, making eye contact (if appropriate), reflecting what others are saying in order to clarify what was heard, paying attention to nonverbal cues, allowing silence, paraphrasing, and asking open-ended questions.

The following sections describe the process of establishing the counseling relationship with program applicants and participants. These steps may not be needed if the counselor and participant already know each other. There will be times, however, when the counselor and the participant are not previously acquainted and it will be necessary to set up the counseling relationship.

**Building Rapport**

Building rapport is the process of establishing a positive professional relationship with a participant. Establishing rapport is important because it communicates respect and appropriate concern for the participant. This will, in turn, help to build trust with the participant and prepare a strong foundation for the important guidance and counseling to come. Rapport is also important because it can reduce anxiety over time and directly impacts
the willingness of the participant to continue with counseling. This positive professional relationship provides an opportunity for the participant to develop a feeling of connection to the counselor. This connection is an essential part of the counseling relationship.

In building rapport, both personal and environmental factors come into play. The setting in which counselors meet with applicants and participants should feel safe and inviting. This means that the space should be clean, uncluttered, private, and comfortable. Because family members often accompany applicants and participants to TVR meetings, it is helpful to have extra chairs and some books or toys for younger family members.

Personal factors that can affect the rapport-building process include things such as how the counselor dresses, the counselor’s mood and manner, and the counselor’s self-care. When providing services, it is important that counselors be aware of their mood and how it might impact sessions with the participants. Counselors should dress professionally, but not so much as to be intimidating. The good self-care of counselors should be reflected in their appearance.

It is essential that rapport begins when the counseling relationship begins. This guides the process in a positive direction. When first meeting with applicants, the initial goal of a counselor is to help applicants feel comfortable enough to share their necessary personal information and experiences. Important steps that the TVR counselor should take during the intake to help build rapport include the following:

- Preparing for the meeting.

  Read the information already gathered about the applicant, including researching known impairments the TVR counselor may not be familiar with. Know the applicant’s name and key things about them learned from their applications and orientation.

- Providing an introduction.

  Give a personal introduction, including an explanation of family and interrelationships if the counselor and participant do not know each other. Share previous work experiences as they relate
to the TVR counselor role. Explain the role and purpose for working with the applicant.

- Explaining areas to be covered or assigned.

  Provide the applicant with an overview of what will be discussed in meetings before delving into topics, and address applicant questions and concerns.

- Explaining the plan of approach for the session and involve the applicant.

  Provide the applicant with information about the TVR process and the goal of each meeting in order to help reduce anxiety. This can include time length and the topics that will be covered.

- Paying attention to cues.

  Notice the applicant’s verbal and nonverbal body language. If it seems that the applicant is ready to leave before everything is covered, take the applicant’s lead and end the meeting early. If the applicant’s demeanor seems to change negatively while discussing a topic, change topics and return to it at a later time.

**Active Listening**

Active listening is one of the most important skills for TVR counselors to have. Active listening means that counselors are engaged in the sessions with the participants and shows that they are hearing what is being said. There are a variety of techniques that can show active listening in the counseling setting. Nonverbal cues that someone is listening can include head nods, open posture, eye contact, and smiling. Verbal cues can include repeating back key phrases or providing verbal encouragers such as “Yes,” or “I understand what you mean.” Asking clarifying questions and responding appropriately to what is being presented also show participants that their counselors are actively listening.

Today’s busy world can provide distractions through multiple time demands. One of the essential skills in counseling is to put those distractions aside and be present for a participant’s session. This means turning
the computer off, setting the cell phone on silent, and focusing solely on
the participant’s needs in the moment. It is also appropriate to ask the par-
ticipant to provide the same courtesy. Not only will this facilitate better
conversation, it is a good skill to model for participant vocational success
in the future.

**Empathy**

Empathy is the ability to accurately understand and experience the feelings
of another person. While empathy is a natural ability for some people, it
is a skill that can also be learned and improved upon. Empathy requires
counselors to set aside their own beliefs, opinions, and judgements and
to “meet people where they are.” To be effective in the counseling rela-
tionship, it is not enough for a counselor to just have empathy. It must
then be communicated to the participant. This communication validates
the participant’s perspective and builds stronger rapport in the counseling
relationship. One of the biggest factors that will determine the success of
the counseling relationship is the degree of empathy the counselor is able
to have with the participant.

Reflective listening is a concrete skill that a counselor can use to dem-
onstrate empathy with participants. Reflective listening shows participants
that the counselor is listening to them and is attuned to the conversa-
tion at hand. Reflections can be of content, affect (emotion), or meaning.
Often, reflective listening involves reflecting back the emotions under-
neath participant statements. These reflections show empathy and build
rapport with participants.

Asking open-ended questions is another counseling skill that can com-
municate empathy with a participant. Open-ended questions are those
that cannot be answered with a factual answer, such as yes or no. This is
in contrast to closed-ended questions, which are fact-based. An example
of a closed-ended question might be confirming a participant’s address
or social security number. An example of an open-ended question might
include things like, “Tell me more about that,” or “What were you thinking
about when that happened?” Open-ended questions invite participants to
share more of their stories. This then leads to more conversation and can
increase rapport with participants.
Empathy has innumerable benefits in the counseling relationship. Empathy communicates respect and acceptance of a person, encourages collaboration, and provides a safe environment for examining sensitive topics. It may also help participants with better self-understanding and feelings of security.

**The Power of Vulnerability**

While it may seem counterintuitive, not having all the answers can work to a counselor’s advantage when it comes to setting up the counseling relationship and establishing rapport with participants. While TVR counselors should be well versed in the TVR process and the basics of case management, it is nearly impossible to understand the ins and outs of all the conditions and barriers participants present with. In addition, a counselor may not know all of the resource options for services, even with the strongest resourcing skills. By acknowledging that they do not have all of the answers, and reassuring that they will work on the problems together, counselors can help balance relationships and build trust.

**Meeting participants “where they are”**

Meeting participants “where they are” means learning about what participants are living with, feeling, thinking, and experiencing at the time, and accepting who, what, and where they are in their lives. There are many possibilities in TVR, different things that can be done in the provision of services, but it still comes down to where participants are in their lives and how their disabilities are affecting them. A counselor has to start there. Participants may have ideas about what they could have achieved, bad decisions they have made, or opportunities they may have missed, but it is important to assure them that they are taking an important step by coming to TVR and recognize their willingness to start new phases of their lives.

**What is not helpful in the counseling relationship**

While there are many skills important in the counseling relationship, there are also some things that should be avoided. For one, it is generally not helpful to explain the cause or causes of a person’s difficulties. Be
cautious of timing when giving participants information. Giving advice or opinions should come from a place of collaboration and respect, and only when requested. Ask if participants are seeking advice or knowledge, and respect their answers. It is also important to avoid judgement and to value individuals for the separate, unique people they are. In this, counselors must acknowledge their own biases and know whether they can understand the participant’s perspective, despite their own backgrounds.

Lastly, a counselor will want to be aware of signs of codependency in the counselor-participant relationship. Codependency is when one person in a relationship relies on the other to meet emotional and self-esteem needs. It can also describe a relationship in which one person enables the other to maintain or continue addictive, aggressive, careless, or unreliable behavior, even at the former’s own expense. Codependency is a risk in situations such as counselor-participant relationships, especially if participants begin to rely on the counselor to help move through difficult points in their lives. Counselors need to be aware of the possibility of such patterns and to make sure that they maintain proper boundaries in interactions with participants.

**Self-care**

Personal restoration is essential for counselors. Listening to the emotions and worries of participants can be stressful, and it is essential for TVR counselors to be aware of their own needs. Self-care practices can include traditional ceremonies, exercise, restful sleep, personal counseling, family time, and leisure activities. Spending time in nature, connecting with friends, healthy eating, and spending peaceful time alone or with family can all be beneficial. More information on self-care can be found in Module 5.

**The Working Alliance**

Effective TVR services for participants require a team approach, which starts with the counselor and participant working together. This collaboration with the participant is known as the working alliance. Creating the structure of the working alliance between the counselor and participant
starts at the first meeting. The intake interview typically occurs within the first few contacts with the participant, so the manner in which the intake interview is conducted can have a significant impact on the working alliance. It is important to address and understand the participant’s expectations and then clarify with the participant how those expectations may actually be met. A part of this clarification involves communicating the roles and responsibilities of the participant and counselor in the TVR process. It is useful to periodically reassess participant expectations as the working alliance evolves.

**DISCUSSION QUESTIONS**

- What do you think are qualities of an effective TVR counselor?
- What personal values do you think are common among TVR counselors?
- What have you found are the best techniques or ideas for how to build rapport with participants? What are some things you’ve learned about this?
- What do you think is the role of humor in building rapport?
- What do you think is the value of being a Tribal or community member, or insider, in building rapport?
- How do you know when someone is listening to you? What things get in the way of being able to practice active listening skills?
- How might disability impact relationship-/rapport-building with participants?
- How might culture impact relationship-/rapport-building with participants?
- What does empathy mean to you, and what do you think is the role of empathy in TVR counseling?
- How do you practice self-care? What things would you like to try?
- Are there unwritten rules of etiquette or protocol in your community that are important to observe when meeting with a participant for the first time? If yes, what are they?
Theories of Counseling

There are many approaches to counseling that a counselor might use with a TVR participant. Some counseling theories and strategies used in TVR are (a) person-centered counseling, (b) the transtheoretical model of change, (c) motivational interviewing, (d) behavioral therapy, (e) cognitive behavior therapy, (f) family systems theory, and (g) family-centered strategy.

**Person-Centered Counseling**

Person-centered counseling was created by the American psychologist Carl Rogers, who believed that everyone is different and thus everyone’s view of their own worlds and abilities to manage their worlds should be trusted. Proponents of this type of counseling believe that everyone has the power to find the best solutions for themselves and are capable of making appropriate changes in their lives. When it was introduced, this approach differed from more traditional views of counseling which emphasized the role of the practitioner as the expert and leader. This practice allows participants to take the reins of their rehabilitation and use their own experiences as platforms of healing. The success of person-centered counseling relies on three conditions:

1. Unconditional positive regard of the participant;

2. Empathetic understanding of the participant’s thoughts and feelings; and

3. Congruence, in which counselors are true and accessible so that participants view them as honest and transparent.

This approach is appropriate for participants who may need to develop more self-confidence, a stronger sense of identity, and the ability to build healthy relationships. It can also be useful for participants who are experiencing grief, depression, anxiety, or other behavioral health conditions. Participants who are more motivated are more likely to be successful in using this method as person-centered counseling requires a great deal of self-improvement and self-reflection. The counselor never offers
suggestions or opinions, but instead allows participants to do most of the talking and work through their problems aloud. This person-centered process facilitates self-discovery, self-acceptance, and a means toward positive healing and growth.

**Transtheoretical Model of Change (TTM)**

The transtheoretical model of change, also called the stages of change model, describes five stages an individual goes through when trying to make a change in life. Much like the motivation to change, the TTM stages are not necessarily linear, and participants often move between the stages, depending on a variety of factors. The five stages of change are described below:

1. Pre-contemplation, “I don’t need to make a change.” The goal with participants in this stage is to facilitate doubt (by leaning into the resistance).

2. Contemplation, “Maybe I do.” The goal with participants in this stage is to explore the ambivalence toward making a change.

3. Preparation, “I’ve got to do something.” The goal with participants in this stage is to tip the balance, increase commitment, and prepare for change.

4. Action, “I’ve started.” The goal with participants in this stage is to develop action steps.

5. Maintenance, “How do I do it?” The goal with participants at this stage is to do relapse skill training to prepare them for when things do not go as planned.

There is a sixth stage that is not part of the original model but is often used as a follow up. The stage is Relapse, “What went wrong?” The goal with participants in this stage is to identify obstacles, problem solve, and start again.
Motivational Interviewing

Motivational interviewing (MI) is a counseling technique based on the foundational principles of person-centered counseling and the transtheoretical model of change. MI is a counseling strategy that follows a process to help individuals resolve their ambivalence and move toward healthy change. MI philosophy holds that humans are ambivalent, or uncertain, about change and that the role of the counselor is to facilitate change using the participant’s own motivation. In MI, change is elicited from the participants, not suggested to them by the counselor.

In the MI technique, the counselor creates an atmosphere that is conducive to change by using the following five techniques. First, the counselor expresses empathy, demonstrating nonjudgmental understanding of the participants’ perspectives. Second, the counselor works to develop discrepancy by helping participants explore the gaps between their current behavior and the lives they would like to lead. Third, the counselor avoids falling into the trap of being the one whose arguments for change awaken resistance in the participants (avoiding argument). Fourth, the counselor accepts the reality of ambivalence and invites the participants to enter into the process of problem solving (rolling with resistance). Finally, the counselor supports self-efficacy, encouraging the participants’ sense of the possibility of change.

Principles of MI

RULE is an acronym often used to denote the principles of MI:

- Resist the righting reflex. At times, participants do not view change as possible or necessary. Resistance will be increased if the counselor insists that participants have problems, argues for the benefits of change, tells the participants how to change, or warns them of the consequences of not changing. Increased resistance to change is a clear indication that change is not likely to occur. The goal of the counselor is to reduce the resistance by not actively fighting against it or trying to fix things.

- Understand participants’ motivations.
- Listen to participants.
- Empower participants.

**Behavioral Therapy**

Behavioral therapy stems from the belief that behavior is learned. Behaviorists believe that everyone is born with a blank slate and that people learn to act in certain ways through a complex series of reinforcements. Behaviorists often break down behaviors into antecedent (A), behavior (B), and consequences (C). They then look at what triggers behaviors in participants and what reinforces them. In this, behaviorists are often looking to change those reinforcements, so that the individuals are able to change their behavior. Counseling based on behavioral therapy is focused very much on the here and now, and often does not see value in examining past issues, events, or dreams. It is often used in working with individuals with intellectual disability, particularly autism. Some prominent behaviorists include Ivan Pavlov and B. F. Skinner.

**Cognitive Behavior Therapy (CBT)**

Cognitive behavior therapy's underlying assumption is that how an individual thinks largely determines how that person will feel and behave. CBT emphasizes the learning process and the influences of the environment, while underscoring the importance of cognitive mediating and information processing factors when working with participants. This model uses techniques aimed at modifying the participant’s faulty perceptions, evaluations, and processing of events, while using behavioral performance or cognitive-based techniques. It is often used in working with individuals with anxiety, depression, panic disorders, and addiction. Some famous CBT theorists include Aaron Beck, Albert Bandura, and Donald Meichenbaum.
Counseling Theories Related to Families

Although it is beyond the scope of practice for a TVR counselor to provide counseling to the family members of a participant, it is important for counselors to understand the dynamics that can happen within families while providing services to the participant. To that end, the following practices are introduced here.

Family Systems Theory

The family systems theory, introduced by psychiatrist Murray Bowen, suggests that individuals cannot be understood in isolation from one another, but rather as a part of their families, as the family is an emotional unit. Families are systems of interconnected and interdependent individuals, none of whom can be understood in isolation from the system. Each family member has a role to play and rules to respect in this system, and patterns naturally develop as family members behave or trigger other family members’ behaviors in predictable ways.

Family-Centered Strategy

Family-centered treatment derives from counseling practitioners’ efforts to find simple, practical, and common-sense solutions for families faced with a) forced removal of children from the home or b) dissolution of the family due to external and internal stressors and circumstances. In family-centered treatment, the participant is not just the individual, but rather the whole family unit. Intervention takes place in the home and in the community, and services necessarily include working to access local support resources in the community.

Resources:

- A biography of Carl Rogers, the founder of humanistic psychology, along with his theories and summaries of his books, can be found at https://www.positive-parenting-ally.com/carl-rogers.html#carl-rogers.

- Native American Motivational Interviewing: Weaving Native American and Western Practices, A Manual for Counselors in
Native American Communities can be found at https://www.samhsa.gov/sites/default/files/programs_campaigns/samhsa_hrsa/native-american-motivational-interviewing.pdf.

- A video of William Miller talking about motivational interviewing can be found at https://www.youtube.com/watch?v=6EeCirPyq2w.

- A video of Aaron Beck, Judith Beck and Amy Wenzel describing cognitive behavioral therapy techniques for anxiety disorders can be found at https://www.youtube.com/watch?v=3maymp7K4q0.

- A video of Donald Meichenbaum describing cognitive behavioral therapy can be found at https://www.youtube.com/watch?v=nwlyc3Hasvo.

- Family systems theory information can be found at https://www.genopro.com/genogram/family-systems-theory/.

- More information on the family-centered strategy can be found at http://www.familycenteredtreatment.org/mission-and-history.

**DISCUSSION QUESTIONS**

- Which of the counseling theories have you heard of before?
- Which methods or techniques do you use in your work?
- What do you think is the value of having multiple theories to use in TVR?
- How do you choose which counseling approach to take with a TVR participant?
- An eclectic model of counseling, in which elements are drawn from various approaches, is often considered an approach in itself. What models do you draw from to create your own eclectic model of TVR counseling?
- What other theories have you used or heard about in the TVR environment?
- What kinds of cultural concerns do you think might arise from using these counseling approaches in your program?
Adjustment to Disability

The Adjustment Process

When individuals first learn about or become aware of their disabilities, there may be a period of adjustment, or even grieving, as they discover how it may impact their lives. Many circumstances can influence a person's adjustment to disability, such as the individual's life stage, the level of family or community support, and psychological health. Early stages of grieving may include shock, anxiety, and denial. Some individuals have been grieving acquired disabilities for a significant amount of time, while others seem to adjust much more rapidly or the conditions are new for them. The emotional roller coaster that can accompany grieving may evolve into an experience of depression, anger, hostility, or fear. A primary goal of rehabilitation counseling is to help participants acknowledge their limitations, adjust to their impairments in a healthy way, and regain a sense of control and empowerment in their lives.

Congenital, Acquired, and Progressive Disabilities

There are different ways that a disability condition may begin. Congenital disabilities are those that are present at birth. Acquired disabilities develop after birth or later in life and may be more difficult to adjust to because there can be awareness of the loss of sensation, function, or ability. Progressive disabilities are those that change, usually with an increase of severity and limitation, over time.

Helping Participants to Self-Identify

Self-identity is rooted in what a person associates with, and what a person associates with is ultimately related to who that person is, for all identity is ultimately in relationship to something, or someone else. An Alaska Native
person may identify as indigenous to Alaska, for example, and then that becomes part of that person’s identity. The same person might identify as a member of a village or reservation, a parent, brother or sister, an athlete, or an employee.

When some of the criteria used to build an identity are somehow changed or altered, this may present a great challenge, as well as an opportunity for growth. For example, perhaps someone in her twenties is a dedicated canoe puller, but then she severely injures her back, so canoe pulling is no longer possible for her. She feels a tremendous loss as the use of her body, her friendships, her ability to work, her spiritual practices, and her entire personal identity are affected.

It may be the case for some participants that they are unsure of their own disability diagnosis, are mislabeled, or feel reluctant to take on or identify with a particular disability condition. These are important considerations for adjustment to disability, and can be issues that come up during the TVR process.

**Early Stages of Adapting to Disability**

A variety of assessments have been created to measure a person’s adaptation to impairment and illness. Many are specific to a person’s impairment, but none of the tools are specific to American Indian and Alaska Native populations.

If a person is in the early stages of adaptation to disability, the use of person-centered counseling, as described earlier in this module, can be helpful. Person-centered counseling techniques include showing unconditional positive regard and empathy for a person. For participants who exhibit feelings of depression or anger about their limitations or disabilities, it can be helpful to encourage them to identify and talk about their feelings. Strength-based counseling can also be effective. This technique can include the counselor pointing out strengths or successes as well as asking the participant to identify them as well. Feelings of depression, anger, and hostility can also be appropriately expressed through activities of storytelling, spiritual healing, art, and music. Intervention needs to be participant-specific and focused on finding the right activities to give participants the space to express feelings that they have been holding on to.
In addition, helping participants to look forward to a vision of their new futures can be a productive counseling activity.

Educating participants about their disabilities and talking through questions and concerns that they have is an important aspect of healing and adapting. TVR counselors have a responsibility to become educated about a participant’s impairments, and to connect with medical and professional communities that can help answer questions and provide detailed insight. Understanding medical terminology and keeping abreast of medical treatments and medications can greatly help a TVR counselor interpret medical documentation and answer a participant’s questions.

As participants work through their feelings of adjustment or grief, it is important to help uncover and reinforce their strengths. Functional assessment is a pivotal way to uncover these strengths while also recognizing, and eventually addressing, their barriers and needs. One of the most effective ways to help participants understand their limitations and abilities is by putting them in real work experiences, which will be covered in Module 3. This way, participants can see first-hand how they fit into the workplace and what accommodations would be useful to help them complete essential job functions of jobs they are interested in. It is especially important for counselors to be present and closely monitor this process so that they can help participants to problem-solve frustrating situations.

It can also be helpful to help participants understand what their values are, so that they can have an awareness of how particular jobs may or may not be meaningful to them. Knowing a participant’s values can also provide a focal point for future goals and visions, especially when participants are moving through the stages of the adjustment and grieving process.

**Later Stages of Adapting to Disability**

Once participants are in the later stages of adapting to disability, nearing acceptance of their limitations and developing a renewed vision of their strengths, more action-oriented approaches can be useful. Motivational interviewing (MI) techniques can help individuals make changes in their lives that will help with adapting to their disabilities.

TVR counselors are in an important position to help people with disabilities find balance in their lives. They can play a role in helping
participants to change their perceptions of what is possible and what is healthy. When counselors encourage and model proper nutrition, self-care, weight management, community involvement, and exercise, they are helping people avoid issues that may further complicate impairments. Suggestions can be gentle, small, and incremental, and offering resources to help support people in their commitment to more balanced living is important. Sometimes making changes such as cutting down on smoking or limiting sugar in the diet can have other positive effects, such as better sleep or an increased ability to focus.

In the later stages of adaptation to disability, it is appropriate for participants to go through training or learn new vocational skills. Soft skills and job-specific skills that will help them retain employment are also important during this time. It can be helpful to match participants with mentors, support groups, and community activities that will provide social support, encouragement, and problem-solving for long-term living with their disabilities.

**Disability over Time**

No two peoples’ experiences of a disability are ever the same. For some people, conditions or impairments may resolve or, perhaps, go into remission, which is when signs and symptoms are reduced or diminished over a period of time. For others, conditions or impairments may progress or become more serious over the years.

**Family Adjustment to Disability**

Just as individuals adapt to their disabilities, their families go through an adjustment process too. It can be helpful to think of the family as a system or organism, in which change to one part alters and affects all the other parts. TVR counselors can enhance their work with families of participants by understanding ways that disability may influence family functioning and how the ways the family as a unit copes and the ways that the participant copes are deeply dependent on and influenced by each other.

Numerous changes often occur following the onset of a disability. Families dealing with a disability must consider and face the changes
brought about by disability if they hope to fully accept the new aspects 
and consequences of the family member’s disability and to move forward. 
There are several strategies to help families in this adjustment, and to 
built resilience.

- Having access to information and frequently asked questions about a 
family member’s disability to help a family feel more in control. This 
could include
  - Information about the condition;
  - Details about what to expect in the present and in the future;
  - How to prepare for periods of uncertainty or difficulty (such as 
reoccurrence of disability-related symptoms);
  - Whom to speak with in the community who is knowledgeable 
about the disability and its associated conditions; and
  - Programs that are available to provide support or information 
about the family member’s disability.

- Discussing familial role changes, expectations, and hopes and 
dreams for the future, such as
  - Loss of the person they used to know;
  - Loss or change in a previously held relationship;
  - Loss or alteration of life dreams because of disability;
  - Loss or change in finances, medical insurance, and resources;
  - Loss of close friends or social support; and
  - Loss of spirituality because of disability.

- Assisting TVR participant families with adjustment through such 
things as
  - Exploring familial feelings and beliefs about disability or people 
with disabilities;
  - Allowing family members to express and convey grief and loss;
  - Identifying stress issues and triggers when dealing with disability;
  - Breaking stressors down into manageable components;
Module 2

- Understanding the ways that life is affected by disability;
- Recognizing useful and applicable coping strategies that are already in place;
- Building and maintaining social and familial support;
- Learning to effectively cope with negative societal barriers, myths, and situations;
- Exploring the family vision of what a “better” life looks like;
- Learning resiliency-based skills; and
- Considering the positive side of disability.

DISCUSSION QUESTIONS

• Have you ever considered that someone with a disability might be in a process of grieving?
• How can you educate yourself and your participants about particular disabilities?
• What do you do when you don’t know the answer to participants’ questions about their disabilities?
• How might you learn more about your participants’ values?
• What do you think a counselor’s role is assisting a family in their adjustment to the participant’s disability?
• How do you help participants find balance in their lives?
• What is a story that you can share about a person who has successfully adapted to his/her disability?
• Why do you think a person might become depressed following a newly acquired disability? When or why might depression while grieving become major depression?
Strategies for Working with Participants with Challenging Behaviors

Providing TVR services to participants with challenging behaviors is something all TVR programs deal with. These participants may have no motivation or be unreliable, inattentive, disrespectful, disruptive, impulsive, or oppositional. They may also be under the influence of drugs or alcohol or experiencing behavioral health conditions. When working with participants with challenging behaviors, facilitating a working alliance is essential. Additionally, being able to show warmth, genuineness, and empathy to a participant who has challenging behaviors is a necessary skill when working in TVR.

Some might say that anger, fueled by a survival instinct, helped humanity’s ancestors compete for critical resources and survive in extreme situations. Anger is a primal emotion that all humans experience, however it can be particularly difficult when encountered in a TVR setting. Anger can create division, escalate emotions, and push people away, and it is important that the TVR counselor be aware of this. Someone who presents as angry can become labeled and feared, thus creating a distance between TVR staff and the participant in future meetings.

In social services fields, including TVR, angry participants are sometimes not treated well. TVR staff may think that a participant should be grateful or should make more of an effort to get along even when frustrated. This attitude can be a difficult one to have when in the process of building a working alliance, and it does not support the development of a positive and effective TVR counselor-participant relationship. In addition, angry participants often do not feel like they have a voice or power in their lives. Frequently, participants who are labeled as difficult or challenging struggle to be heard, which increases their frustration and can lead to further challenging behaviors. Although one of TVR’s primary goals is to give participants voice and choice, it is possible that this has not been the experience of the participant in the past or with other programs.

There are multiple strategies that can be used in TVR to work with participants with challenging behaviors. When possible, it is helpful to remember personal boundaries and to take a moment to become centered
before interacting with the participant. Another strategy is for counselors to acknowledge what their personal triggers or “hot-button topics” might be when working with a participant with challenging behaviors. These could arise when the participant challenges what is loved, treasured, or valued; violates a sense of morality; exposes an insecurity; or points out a hated truth. TVR counselors need to know what can upset them personally, and be cognizant that some participants are going to have a talent for finding triggers. It is also important for counselors to be aware of what it feels like to be triggered and to have some basic strategies to avoid reactionary responses. Examples for this include using a mantra, visualization exercises, taking deep breaths, or even stepping back or away from the participant or situation when appropriate. An exercise that can be useful for participants who struggle with anger is to ask them to write down their hot topics and what happens when their buttons are pushed. Insights from this exercise might give the counselor a common language to use when the participant starts to feel angry.

When participants are escalating, it is essential that the TVR counselor not escalate with them. This may sound easy, but can be quite challenging in heated situations. The image of the hurricane could be helpful: the TVR counselor should be the “eye” and not get pulled into the fray of the storm. Counselors in this situation need to believe that they have all the time in the world to solve this problem and should slow down. It is recommended that the counselor not match the participant who is ramping up. Instead talk slowly, softly, and with intent. The participant will (hopefully!) mirror the calm. When speaking, always know what will be said next. Take a breath, take a moment to ground, and think before speaking. In addition, training is preparation, so while in the situation, remember any training and policies or procedures concerning this issue.

Some further tips to dealing with participants with challenging behaviors include

- Taking time to cool off;
- Thinking about the person as a person—remember the humanness of conflict;
Knowing the aim of the meeting (What is the intention?);

Trying to understand what the other person is saying, and may be feeling and thinking;

Finding something that can be agreed upon and start from there;

Never making assumptions; and

Forgetting the past and remaining present.

When working with participants with challenging behaviors, TVR counselors also have to be aware that there is a line between best practice and safety. When participants’ behaviors begin to escalate, particularly if they are angry, the TVR counselor must first assess the safety of the situation before moving on to the meeting’s planned topics. Safety is always a priority in the TVR setting. Some tips for when participants cross that “safety line” include

- Being aware of personal tendencies for response in a crisis situation;
- Ending the meeting if the situation feels dangerous;
- Recalling and using the program or Tribal procedures for aggressive behavior in participants;
- Knowing the emergency words and where the emergency alarms/buttons/exits are, as well as the hiding places;
- Recalling who is available to help and remember that including more staff can diffuse a situation; and
- Calling 911 if needed.
DISCUSSION QUESTIONS

- What kind of challenging behaviors have you experienced with participants?
- What kinds of things are hot-button topics for you?
- What kinds of skills do you bring to a challenging interaction?
- What is an example of a participant with challenging behavior whom you have worked with? What skills did you find useful in that interaction?
- How do you think working with challenging behaviors can be helpful for strengthening counselors’ abilities to do their job well?
- How do you think a participant’s family could help if the participant is exhibiting challenging behaviors during the TVR process?
- When participants hold on to issues that are behind challenging behaviors, it may stop them from moving forward in their rehabilitation. How could the counselor help the participants work on their issues?
- How do you think storytelling could help in addressing challenging behaviors?
- How would you describe the difference between a challenging and a dangerous behavior?
- What strategies are in place in your office in case a TVR staff member feels unsafe when meeting with a participant?

Conflict Resolution

There are numerous reasons that conflict may occur between two people, and many of them stem from ineffective communication. According to Rebecca Holland, former director of Jemez Pueblo VR, barriers to communicating effectively can include differences in perception or culture, and speakers’ different attitudes, assumptions, expectations, and motivations. To avoid conflict, one must focus on speaking clearly and listening carefully. Respect is important on both sides of a conversation. When meeting, speak in a way that does not put any blame on the other person, and ensure
that the message and intention are clear. When listening, don’t just “hear” others talking, but actually listen to what they are saying. Demonstrate full attention to other speakers, and that what they have to say is important.

When conflict arises regardless of multiple attempts to be an effective communicator, it may become apparent that people tend to have different conflict resolution styles, as described below.

- **Competition Style:** People with this style value only their own opinions and goals, and are not interested in preserving relationships. This style is rather aggressive and unwilling to negotiate, and people who use this type of communication are unlikely to explore ideas or methods other than their own.

- **Avoidance Style:** Those who use this communication style prefer to avoid confrontation at all costs and withdraw from having difficult (although sometimes important) conversations. They are unlikely to resolve any conflict and, instead, ignore it in hope that it goes away.

- **Accommodation Style:** People using this type of communication relinquish control of situations and their own needs in order to keep the peace. They value relationships more than their personal goals and may give in too quickly to other parties’ wishes, even to their own detriment.

- **Compromise Style:** With this communication style, parties present their goals and reasoning and seek a middle ground while prioritizing fairness. This style is useful for quick solutions, and reflects some concern for both parties’ goals and the relationship as a whole.

- **Collaborative Style:** The collaborative style of communication is more time-consuming than a compromise, but also values both parties’ goals and seeks an agreement overall. A satisfactory outcome to the conflict and the preservation of the relationship are desired by both parties, and the relationship is likely to improve after tensions are resolved.
The best practices for resolving conflict are leading with effective communication, listening to what other parties have to say, understanding what their values and goals are, and focusing on solutions that benefit everyone. When the two parties cannot reach an agreement or compromise on their own, it can be helpful to bring in an agreed-upon third party or mediator to help both parties express their needs, identify the points of contention, and develop solutions.

**DISCUSSION QUESTIONS**

- How have you had to use conflict resolution in your role as a TVR counselor?
- In what types of instances in the TVR process do you think that conflict resolution techniques could be useful?
- What aspects of conflict resolution do you think could be used in daily conversation?
- Where could you get training to develop conflict resolution skills?
- What types of conflict resolution skills have you observed being used by others that you think would be effective?

**Communication during Outreach**

TVR program outreach is the process of promoting awareness of the purpose and services of the program to the community or communities, schools, and other Tribal programs and providers. A program may have a staff person specifically designated to do outreach, or it may be the responsibility of all TVR staff to take part. Activities can include participation in community and cultural events and information fairs, providing articles for newsletters or websites, creating brochures or information sheets for Tribal resource centers, presenting at general council meetings, going door-to-door in the community, hosting informational or cultural classes, sponsoring training on job search websites or job accommodations, media,
and much more. Outreach strategies must be designed specifically to the needs and practices of the Tribal community, but there are endless creative ways to get the word out to community members. In some communities, it is also important to share information in the respective native language.

Outreach also includes educating the staff of other programs and departments who provide services to the same population within the same area, such as the health clinic, treatment centers, and human resources departments at the Tribe and other local entities, such as schools and employers. This type of outreach benefits from the development of relationships and trust with other providers for smooth and efficient referrals between programs.

**Communication at the Beginning of the TVR Process**

**Application for TVR Services**

Individuals are considered to have submitted applications for TVR when they (or their representatives) have done one of the following:

- Completed and signed program application forms; or
- Otherwise requested services by providing the information necessary to assess eligibility and are available to start the TVR process (34 CFR § 361.41(b)(2)).
A sample TVR application can be found at the end of this module.

**TVR Program Orientation**

An orientation is when TVR staff provide an overview of the program purpose, services, and requirements to applicants. A program may do orientation individually or with a group, and attending an orientation session may be required before an applicant can move on to the intake. Some programs do not hold formal orientation sessions, but incorporate the sharing of this information into the intake and subsequent participant meetings.

Orientation often occurs after an individual has submitted the application for services but before the intake. Typical topics include the following:

- A description of the program and its purpose;
- A review of the TVR process and eligibility requirements;
- A description of the types of services that can be provided in order to address barriers and obtain, maintain, or retain employment;
- Confidentiality, storage of information, and release of information;
- CAP, grievance processes, and participant rights and responsibilities;
- Informed choice; and
- Providing answers to applicant questions.

**Timeline for Application to Eligibility**

Once an individual has submitted an application for vocational rehabilitation services, the TVR counselor will explain the 60-day timeline for eligibility determination, including the two exceptions. The exceptions are:

- Unforeseen circumstances beyond the control of the TVR program that prevent an eligibility determination being made within 60 days with the stipulation that the TVR program and the individual agree to a specific extension of time; or
Establishment of a trial work experience for individuals with significant disabilities to explore the individual's abilities, capabilities, and capacity to perform in work situations, as described in 34 CFR § 361.42(e).

**Intake**

Intake occurs shortly after an application for TVR services has been submitted and involves gathering information about a person that can be used to determine eligibility for TVR. Programs may have the TVR counselor or program staff such as the program assistant do intakes, while other programs may do the intake during orientation. Information to gather during intake interviews or orientations includes:

- Demographic (e.g., name, date of birth, address, marital status, Tribal affiliation, family size);
- What the applicant knows about and wants from TVR;
- Disability information;
- Work history, goals, and transferable skills;
- Educational history and goals;
- Releases of information for providers;
- Questions about rights and responsibilities; and
- Observations, such as
  - Participant (and/or family) concerns and barriers;
  - Physical presentation (e.g., dress, movement, eye contact);
  - Interpersonal/behavioral (e.g., how they get along with others, mood);
  - Motivation; and
  - Attendance and timeliness.
Information to share during intake interviews includes

- The TVR Process;
- Outcome of TVR is employment;
- Participant rights;
- Participant responsibilities;
- TVR responsibilities;
- Grievance procedures and due process;
- Client Assistance Program;
- Confidentiality; and
- Similar benefits/comparable services.

A sample TVR intake form can be found at the end of this module.

**Intent to Achieve Employment Outcome**

The regulation regarding assessment for determining eligibility and priority for services, 34 CFR § 361.42(a)(4)(2), states, “The applicant’s completion of the application process for vocational rehabilitation services is sufficient evidence of the individual’s intent to achieve an employment outcome, and no additional demonstration on the part of the applicant is required.” This means that if a person applies for TVR services, he or she intends to obtain employment. However, it is still important for the TVR intake staff or the counselor to make sure that applicants understand that the goal of TVR is for participants to obtain employment outcomes, because some people may have disabilities but are not interested in working. In such situations, it may be more appropriate to refer them to different programs for their needs to be met.
DISCUSSION QUESTIONS

• Why is orientation useful? When might orientation not be useful or necessary?

• What are your thoughts about how your TVR program handles individuals who come in interested in TVR?

• What does an application for services look like in your program?

• How long does it typically take between application and eligibility determination at your program?

• Why do you think the people who wrote the Rehabilitation Act, as amended, and the Code of Federal Regulations decided on 60 days for eligibility determination?

• How does the 60-day timeline feel for you as a counselor? How do you think the 60-day timeline might feel to your applicants?

• What does the intake interview process look like in your TVR program?

• What do you think could be challenges and difficulties a person might experience in order to make it to the TVR program office and ask for help?

• What is a strategy for assessing and working with a participant who might be unlikely to return for a second appointment? How could this be identified in advance?

• How can the intake interview process set the tone for the participant’s experience in the program? What could the counselor do or not do that might make a lasting impression on a participant?

• What do you think is a good way to start out when meeting with an applicant for the first time?

Communication about Informed Choice

Informed choice for TVR programs was updated in the AIVRS regulations in 2017 in order to guide programs in providing choices to TVR participants. The text from 34 CFR § 371.43(e) is provided below:

(e) Informed Choice. Each individual who is an applicant for or eligible to receive vocational rehabilitation services must be afforded the
opportunity to exercise informed choice throughout the vocational rehabilitation process carried out under programs funded under this part. The Tribal Vocational Rehabilitation unit must develop and maintain written policies and procedures that require it

1. To inform each applicant and eligible individual, through appropriate modes of communication, about the availability of, and opportunities to exercise, informed choice, including the availability of support services for individuals with cognitive or other disabilities who require assistance in exercising informed choice, throughout the vocational rehabilitation process;

2. To assist applicants and eligible individuals in exercising informed choice in decisions related to the provision of assessment services;

3. To develop and implement flexible procurement policies and methods that facilitate the provision of vocational rehabilitation services, and that afford eligible individuals meaningful choices among the methods used to procure vocational rehabilitation services;

4. To provide or assist eligible individuals in acquiring information that enables them to exercise informed choice in the development of their IPEs and selection of

   i. The employment outcome;
   
   ii. The specific vocational rehabilitation services needed to achieve the employment outcome;
   
   iii. The entity that will provide the services;
   
   iv. The employment setting and the settings in which the services will be provided; and
   
   v. The methods available for procuring the services;

5. To ensure that the availability and scope of informed choice is consistent with the obligations of the Tribal Vocational Rehabilitation unit;

6. Information and assistance in the selection of vocational rehabilitation services and service providers: In assisting an
applicant and eligible individual in exercising informed choice
during the assessment for determining eligibility and vocational
rehabilitation needs and during development of the IPE, the Tribal
Vocational Rehabilitation unit must provide the individual or the
individual’s representative, or assist the individual or the individual’s
representative in acquiring, information necessary to make an
informed choice about the specific vocational rehabilitation services,
including the providers of those services, that are needed to achieve
the individual’s employment outcome. This information must
include, at a minimum, information relating to the

    i. Cost, accessibility, and duration of potential services;
    ii. Consumer satisfaction with those services to the extent that
        information relating to consumer satisfaction is available;
    iii. Qualifications of potential service providers;
    iv. Types of services offered by the potential providers;
    v. Degree to which services are provided in integrated settings;
       and
    vi. Outcomes achieved by individuals working with service
        providers, to the extent that such information is available; and

7. Methods or sources of information: In providing or assisting
the individual or the individual’s representative in acquiring the
information required under paragraph (c) of this section, the Tribal
Vocational Rehabilitation unit may use, but is not limited to, the
following methods or sources of information:

    i. Lists of services and service providers.
    ii. Periodic consumer satisfaction surveys and reports.
    iii. Referrals to other consumers, consumer groups, or disability
        advisory councils qualified to discuss the services or service
        providers.
    iv. Relevant accreditation, certification, or other information
        relating to the qualifications of service providers.
v. Opportunities for individuals to visit or experience various work and service provider settings.

The process of providing informed choice involves the (a) the counselor learning about and explaining the known options available to a participant and (b) the participant doing their own research of possible options, to support the participant to choose their employment goal, determine the kinds of services they want to receive, and service providers that they want to work with. TVR counselors and participants need to be able to discuss the pros, cons, limitations, consequences, advantages, costs, and qualities of each option a participant has throughout the process. Providing and explaining options promotes participant empowerment and ownership of their TVR experience.

When informing participants about choices they have throughout the TVR process, it is essential that the TVR counselor has the skills to recognize when a participant may need additional information, and to teach participants to ask when they have questions and to do further research. In addition, TVR counselors will want to provide alternative options about employment goals, available services, and resources when an applicant or participant has unrealistic expectations or goals. One of the ways a TVR counselor can be prepared for this is through understanding the program’s policies and procedures and by understanding purchasing options and service procurement.
Jared

While you were on vacation, an individual came in for services and filled out an intake packet that you are now reviewing. You learn that this individual is Jared, who is 37 and enrolled Nez Perce, but who has recently moved to the Hopi reservation to be near relatives. He has worked as a ranch and farmhand for most of his life. Two years ago, he experienced an auto accident that resulted in the amputation of his left leg. He has been receiving Social Security Disability Income (SSDI) but wants to go back to school, with the ultimate dream of becoming a veterinarian or starting a shelter for neglected animals. In thinking about your future meetings with Jared, how will you communicate with him about informed choices when it comes to selecting his employment goal?

Bella

Bella, who is 27 and experiences an intellectual disability, has come in with her mother, hoping that she might be able to find part-time work with the Tribe. Bella has never worked before, but volunteered for three years at the Head Start program after she finished high school. She stopped volunteering because her family needed her to help with an ailing family member at home. That family member passed a year ago, and Bella wants a part-time job because she dreams of being able to save money to be able to take her nieces and nephews on a vacation to Disneyland. You notice that it takes Bella longer to process what you are saying and that her mom steps in to clarify communication frequently. How would you tailor your communication about informed choices with Bella?

Carol

Carol has recently moved with her family from Oklahoma to Nevada to be closer to her husband’s family, and she accepted a job working as a TVR counselor with a neighboring Tribe. Before accepting this position, she had six years of experience as a TVR counselor in Oklahoma. What could be her approach to gaining the knowledge necessary about the new area where she lives in order to be able to offer participants informed choices?
CASE SCENARIO EXAMPLES FOR PRACTICING
THE PROVISION OF INFORMED CHOICE (continued)

Jeb

Jeb is a 22-year-old who experiences epilepsy. After talking with him and going through an interest inventory, he has decided that he wants to be an Uber driver so that he can earn a part-time income on his terms. You are concerned about his employment choice because of the risks of having an epileptic seizure while driving. His doctor has not stated outright that Jeb cannot drive and does not seem to be concerned about Jeb driving himself to get around in the community. However, Jeb has shared that he has had minor seizures while driving. Your co-workers and supervisor are advising you against supporting his employment goal. How would you handle this situation and practice informed choice at the same time?

DISCUSSION QUESTIONS

- Why is it so important to give participants as many choices as possible throughout their TVR experiences?
- When might it be hard to truly give participants informed choices?
- How might you improve your ability to help participants to understand the potential consequences of the decisions they make?
- How hard is it for you to give participants the freedom to make decisions that you believe are not in their best interests? How do you work through such a situation?
- Describe a time when it was clear to you that a participant needed more information to make a truly informed choice.
- What is a policy or procedure in your program that might help a participant make a decision?
Communication about Participant Grievances

Several options are available to participants when they do not agree with a decision the TVR program has made or actions that the program has taken, including (a) the Client Assistance Program, (b) Administrative Review, and (c) Mediation and Fair Hearings.

**Client Assistance Program**

The Client Assistance Program (CAP) in each state was created to help VR participants advocate for their needs. At times, TVR participants do not agree with decisions made by the TVR program, but they may not know how to advocate for themselves. Any person applying for or receiving services from a TVR program has the right to contact the CAP for assistance.

There are many common instances in which contacting the CAP can be useful for participants, such as

- When applicants are found ineligible and do not agree with that determination;
- When participants and the TVR program cannot agree on employment goals;
- When programs do not use providers that participants have selected through informed choice;
- When participants disagree about services included (or not included) in their IPEs;
- When participants do not receive requested post-employment services (PES);
- When participants disagree with counselors’ decisions to close their case; or
When applicants or participants do not understand rights or services available to them under the Rehabilitation Act.

There are many ways that the CAP can help educate and advocate for applicants and participants in TVR programs:

- Finding ways to solve problems with the assistance of the TVR counselor or director;
- Referring to other agencies that may assist an individual;
- Helping TVR participants understand the services available to them and their rights under the Rehabilitation Act; or
- Helping with the appeal process, if needed.

Client Assistance Programs are required in every state and are used by agencies such as TVR programs, state VR programs, and VR programs for the Blind. CAP can also be useful to TVR counselors when it comes to components in the grievance process or identifying individuals to help with mediation.

Administrative Reviews

An Administrative Review (AR) is a more informal way for participants to resolve issues or disagreements with the TVR program. An AR is conducted by a supervisor or manager not directly involved in a participant’s case. In the review, both sides supply documents that support their positions in the disagreement, which are then examined. At the end of the review, a written report is made with the review findings. If participants are not satisfied with those decisions, they have the right to request mediation and/or a fair hearing or to contact CAP, if they have not already.

Mediation and Fair Hearing with an Impartial Hearing Officer

If a participant chooses not to have an administrative review to resolve a disagreement, or if the participant disagrees with the decision made in the AR or with CAP, the participant may choose to pursue mediation or a fair hearing.
Mediation is a voluntary problem-solving process that is facilitated by a qualified, impartial mediator. The goals of mediation are to fully understand both sides of the conflict, explore options for resolving the problem(s), and reach mutually satisfactory solutions. Mediation can happen while waiting for a fair hearing.

A fair hearing is a process established at the state level in which the applicant/participant and the TVR program present information, witnesses, and documents. An attorney, a representative from CAP, or any other person may represent the participant during the hearing if needed. An administrative law judge or an impartial hearing officer (IHO) makes a decision after hearing all of the information presented, reviewing documents submitted, and consulting relevant laws and regulations. When engaging in a fair hearing, the Tribal attorney should be consulted and included in the proceedings, depending on the policy of the Tribe, as the program is under the Tribe and not a stand-alone program.

The term “impartial hearing officer” means an individual who

- Is not an employee of a public program (other than an administrative law judge, hearing examiner, or employee of an institution of higher education);
- Is not a member of the State Rehabilitation Council described in section 105;
- Has not been involved previously in the vocational rehabilitation of the applicant or eligible individual;
- Has knowledge of the delivery of vocational rehabilitation services, the federal and state rules governing the provision of such services, and training with respect to the performance of official duties; and
- Has no personal or financial interest that would be in conflict with the objectivity of the individual.
When to Share Information about the Participant Grievance Process and CAP

Information about CAP and the grievance process needs to be shared at the following points in the TVR process:

- Application, intake, and orientation;
- Eligibility Determination;
- IPE development, modification, or amendment; and
- Case closure.

Title 34 CFR § 371.21(i) states, “Any American Indian [or Alaska Native] with disabilities who is an applicant or recipient of services, and who is dissatisfied with a determination made by a representative of the tribal vocational rehabilitation program and files a request for a review, will be afforded a review under procedures developed by the grantee comparable to those under the provisions of section 102(c)(1)-(5) and (7) of the Act.” For more detailed information about the participant grievance process at the state level, consult 34 CFR § 361.57.
CASE SCENARIO EXAMPLES
ABOUT PARTICIPANT GRIEVANCES

Isabel

Isabel has a mental health condition and works with a job coach and four co-workers to provide housekeeping services at a resort. She needs to be able to communicate better with her job coach to ask for more cleaning supplies, for assistance with tasks, about taking breaks or getting her meals, or just asking for help. Isabel obtained an augmentative communication device from her Tribal VR program, but she needs training on how to use it. The TVR counselor believes she only needs two hours of instruction on the device. Isabel and her guardian believe that she needs at least twenty hours of instruction by a speech therapist. Isabel is scared to go against her TVR counselor’s recommendation, but the problems are starting to pile up. How would you handle this situation? What are Isabel's options for filing a grievance?

George

George is a Tribal VR participant who has been found eligible based on impairments and impediments related to alcohol and substance use. George missed a meeting with his TVR counselor because he forgot to write it down, and then never received a letter from his TVR counselor that requested he check in within two weeks otherwise his file would be closed. Six weeks after the letter was sent, George came into the TVR office and discovered that the counselor had closed his case for lack of communication. He was very upset. How would you handle this situation? What are George’s options for filing a grievance?

Roberta

Roberta experiences sensorineural hearing loss, which is a permanent loss that cannot be corrected. The TVR program covered $250 toward her hearing aids, which was the part of the expense that her medical coverage did not pay for. The hearing aids help a little, but she still has a challenging time completely understanding those around her, and problems seem to occur more frequently when those around her think that she is ignoring them. Roberta is about halfway through her training program to become a certified nursing
CASE SCENARIO EXAMPLES
ABOUT PARTICIPANT GRIEVANCES (continued)

assistant, and recently asked if the program could help purchase a smartphone so that she could use text messaging to augment her ability to communicate. Both the TVR counselor and the counselor’s supervisor agree that this is not a necessary expense. Roberta feels that the TVR program is being closed-minded and not appreciating what a life-changing difference a smart phone could bring to her life. How would you handle this situation? What are Roberta’s options for filing a grievance?

Will

Will is a well-respected member of the Tribal community who recently worked for five years as the director of the Elders’ program. In the last several years, he has been experiencing major depressive episodes, and he lost his job with the Elders a year ago because of poor attendance. He was hesitant to come in for TVR services and was feeling hopeless about ever working at the Tribe again. TVR was the only Tribal program he shared any information with related to his mental health—all other services, such as psychiatric treatment, were provided off reservation. A month and a half into his new job as a naturalist at the native plant nursery, he discovered that one of his co-workers knew about his struggles with depression. Will was very upset by this and came into the TVR office to find out how there could have been a breach of confidentiality. How would you handle this situation? What are Will’s options for filing a grievance?

DISCUSSION QUESTIONS

• What might participants do when they disagree with a TVR program decision? Whom might they talk to?

• What do you know about CAP in your state? What has been your experience with CAP?

• What has been your experience with participant grievances?

• What is the grievance process in your program?
Communication about
Confidentiality Practices and Requirements

To accomplish the goals and objectives of TVR grants, TVR programs are required to work with medical, psychological, and vocational information about applicants and participants. Medical and psychological documentation is often necessary for the assessment and treatment of impairments and impediments. Confidentiality practices should be noted on the application for services, which individuals (or their representatives) sign when they apply to the program. Copies should be provided to the applicants so that they are aware that their information will be kept confidential.

TVR staff often handle information protected by the Health Insurance Portability and Accountability Act, also known as HIPAA. Because of this, TVR employees should make an effort to uphold the highest standards of confidentiality. To learn more about HIPAA standards for handling confidential information, training materials are available through the US Department of Health and Human Services at https://www.hhs.gov/hipaa/for-professionals/training/index.html.

Policies and Procedures around Participant Confidentiality

According to a June 13, 2019 letter to AIVRS programs from RSA Training and Service Programs Division Acting Director Mary Lovley, “The regulations at 34 CFR § 371.44(a)(1) require the development, adoption, and implementation of written policies and procedures to safeguard the confidentiality of all personal information, including photographs, and lists of individuals receiving services under the AIVRS program and current stored personal information.” Sections 371.44(a)-(e) give further guidance for appropriate practices around required confidentiality. Also from the letter: “Sections 371.44(c)-(e) address situations in which the Tribal VR project may or must release confidential information both with and without the consent of the applicant or individual receiving VR services. In order to ensure that the Tribal VR project can demonstrate compliance with these requirements, the written policies and procedures need to address each of these situations.”
Explaining Confidentiality to Applicants and Participants

A TVR counselor needs written consent to discuss a participant with other providers or sources, except for a few particular circumstances. Best practice states that the release of information (ROI), also referred to as a consent form, should be as specific as possible. How and what information to be shared should be clearly stated on the form and made clear to the participant. Being transparent with participants not only follows best practice and the law, it also can be a significant factor in building rapport. A sample ROI can be found at the end of this module.

With a signed ROI in place, participant information may be released, for example, to the finance office if additional information is required to process a purchase. Some vendors may also require a participant’s name when an item or service is purchased under an assessment activity or the IPE. In order for the name or information about the participant to be released to an outside person or entity, including other Tribal departments, the participant will need to sign an ROI granting permission for this.

When informing participants about confidentiality, be sure to do the following:

- Explain the purpose for releasing or obtaining information;
- Explain if providing information is mandatory or voluntary;
- Explain when informed written consent is needed;
- Identify the authority of the program to collect information;
- Explain the options for the length of time the consent form covers;
- Identify other agencies to which information is routinely released or gathered with participant consent; and
- Identify the categories of sensitive information to be disclosed (alcohol/drug abuse treatment/referral, sexually transmitted diseases, HIV/AIDS-related treatment, behavioral health, or psychotherapy), that the participant must specifically release, if applicable.
Common Confidentiality Challenges for TVR Programs

Discussing confidential disability issues and impediments to employment with the applicant is part of the application process. These discussions help the TVR counselor determine the course of action necessary to help the person address functional limitations and to prepare for employment. While these meetings are happening and disability documentation is gathered, the following should be considered:

- This process can be negatively impacted by a lack of confidential meeting space, which can also impede the full participation of applicants and participants who must feel comfortable in order to discuss their physical and mental impairments during meetings with the TVR counselor.

- TVR programs should maintain fax machines, computers, printers, photocopiers, and mailboxes that are solely for the use of the TVR program. These items should be well protected by the TVR unit to ensure that confidential documents are secure.

- Locking filing cabinets behind locking doors provide essential safe storage for case files and related information when not being used by TVR staff.

- Information systems should require password protection for computer access, voicemail, databases, email, and electronic document storage.

Appropriate Disclosure of Confidential Information

It is inappropriate to release names of applicants and participants from the program unit without participant consent, even if requested by an authority such as the Tribal Council. Information about applicants and participants is only released under limited circumstances without consent, such as for public health purposes or when participants may be at risk of harming themselves or someone else. In addition, TVR staff should be aware that participants are entitled to examine their own case files at
any time. Case files should always contain only essential, objective, and professional documentation.

**Confidential Communication**

Maintaining confidentiality of the information shared in the TVR counseling relationship builds a foundation of trust and maintains personal and programmatic integrity. All information shared in the TVR counseling relationship is considered confidential and may not be shared unless otherwise specified by the applicant or participant. This is generally completed using a release of information (ROI) form. When sharing confidential information, as detailed in an ROI, it is important to share only what is necessary and relevant for the other provider. TVR counselors should be prepared to describe what information will be expected from applicants and participants, what information will be recorded in case files, what information may be requested from or shared with others, and how case files are kept and stored during the TVR process and after services are complete.

**Limitations of Confidentiality**

TVR counselors are mandated reporters. Mandated reporters are people who have regular contact with vulnerable people such as children, people with disabilities, and Elders. Mandated reporters are legally required to make reports when abuse is observed or suspected or when there is suspicion that individuals may harm themselves or someone else. It is important to explain the types of information TVR counselors are required to report as mandated reporters early in the counseling relationship.

Counselors should also explain any other circumstances in which other staff in the TVR program might have access to participant names, contact information, or case-file data, such as if case files are periodically reviewed by a supervisor to evaluate the quality of services, or if the case is discussed with the group during a team meeting.
Maintaining Confidentiality in Various Types of Communication

TVR counselors must make reasonable efforts to ensure that methods of obtaining, sharing, and transmitting information are secure. There are many ways in which confidential information is shared with other individuals and agencies, and there are many precautions to take depending on what type of communication is being used.

- **In Person:** When sharing participant information directly with another person, it is important to ensure that information is shared in a confidential space. It is inappropriate to share information where others, such as co-workers, other participants, or the general public, can hear the information being shared.

- **Phone:** Although a common method of information sharing, there are considerations for sharing confidential information over the phone. While not common, it is possible for someone to impersonate another person to gain access to confidential information. Unlike face-to-face conversations, callers cannot identify each other visually and may have difficulty identifying another person’s voice, especially if the callers are not well-known to each other. It is also possible that others may gain access to a person’s phone and listen to messages. It is recommended that TVR counselors not leave any confidential information in messages by phone. Programs may want to develop policies on sharing information over the phone to provide guidelines about sharing with third parties.

- **Email:** It is suggested that when sending emails with confidential information, TVR counselors should use email encryption for protection. This can usually be set up by an information technology (IT) professional at the Tribe. Email signatures with a statement
about confidentiality may make an unintended email recipient aware that the sender considers the contents confidential and may stop a recipient from forwarding the email. Apart from making the recipient aware, email signatures do not offer any legal protections for the sender and do not replace the protection of email encryption. It is also possible for IT administrators to have access to staff emails, including those of TVR counselors.

- **Text:** Like emails, text messages are limited in their ability to keep information confidential. Text messages may be read by others who gain access to another person’s phone. As with phone messages, it is recommended that TVR counselors not send any confidential information via text message.

- **Fax:** Information sent using fax machines is at risk of being intercepted and copied by unintended individuals. It is possible to set up a fax that uses encryption, so this is recommended when possible. Be sure to regularly check recipients’ fax numbers and ensure that the information is not left in or on the fax machines. Cover pages can help direct the confidential information to the appropriate recipients if the faxes are going to shared fax machines, but they do not prevent faxes from being read by others.

- **Social Media:** It is up to TVR participants to choose whether they want to use social media (e.g., Facebook Messenger) to communicate with their TVR counselors. If they do choose such methods, they must be informed of the possible risks to keeping their information private and confidential. If TVR counselors use social media for communicating with participants, they must maintain profiles separate from their personal accounts. Counselors must not post any personally identifiable participant information on social media, unless the participant has specifically consented in writing for them to do so. Also, no highly sensitive or specifically protected participant information should be shared on social media at any time.

- **Mail:** It is recommended that when sending confidential information through the mail, the envelope should be marked
“Confidential” and the mail be sent as “Certified” and hand delivered to a post office if possible.

- Case notes: In meetings with TVR counselors, participants often share a lot about their lives that is not relevant to their TVR cases. Rather than detail everything that was discussed in the case notes, it is best to keep professional, succinct, and complete records of the events of the cases as they relate to the disabilities, impediments to employment, IPE development, service provision, and employment, and keep more personal or extraneous participant details out of the case files.

**DISCUSSION QUESTIONS**

- Why do you think confidentiality is so important?
- How do your program’s policies and procedures address the guidance around participant confidentiality provided in 34 CFR § 371.44?
- How do you communicate your respect for confidentiality to participants?
- What safeguards does your TVR program have in place to protect participant information?
- If you have ever experienced a breach in confidentiality personally or professionally, what was it like? How did it affect you and your TVR program?
- What do you know about HIPAA?
For most decisions, TVR counselors can rely on laws, regulations, policies, and procedures for guidance. However, not all decisions a TVR counselor is required to make come with clear guidance. Such “gray areas” can be challenging to navigate, especially if the consequences of those decisions could have a significant impact on a participant or applicant in the TVR program.

There are some common areas when working in TVR in which ethical dilemmas tend to be present. For example, because many Tribal communities are rural and close-knit, confidentiality can often be challenging due to dual relationships. These are pre-existing relationships that counselors may have with participants from before they applied for program services. Two other areas in which ethical concerns may arise include professional boundaries between participants and counselors and issues surrounding counselor competence.

The work of TVR counselors involves a power difference that can make participants vulnerable. Counselors are entrusted to protect and advocate for applicants and participants, and serve them in a respectful and professional manner. This includes having an established course of action for when ethical situations arise, especially those common in TVR settings. Sometimes case-related decisions can have big impacts on participants and can involve a lot of responsibility for the counselors making the decisions.

### Six Principles of Ethical Behavior for Counselors

The Code of Professional Ethics for Rehabilitation Counselors (CRCC, 2017) outlines six principles of ethical behavior. These principles represent an ethical commitment to participants, and they embody a fundamental spirit of caring and respect for participants. The six principles are
1. Autonomy: to respect the rights of participants to be self-governing within their social and cultural framework;

2. Beneficence: to do good to others and to promote the well-being of participants;

3. Fidelity: to be faithful, to keep promises and honor the trust placed in rehabilitation counselors;

4. Justice: to be fair in the treatment of all participants and to provide appropriate services to all;

5. Nonmaleficence: to do no harm to others; and

6. Veracity: to be honest.

As a TVR counselor thinking through any challenging decisions, it is important to keep these principles in mind at all times to help guide case-related decisions.

**Ethics in Confidentiality**

Confidentiality is a significant concern in TVR counseling. In Tribal programs, confidentiality can be particularly challenging. Some common ethically challenging situations that can affect confidentiality include

- Sharing office spaces with other programs;
- Meeting participants outside the office;
- Interacting at community gatherings and social events;
- Sharing participant-identifiable information with employers or potential employers;
- Sharing participant information with family members;
- Dealing with the presence of potentially contagious diseases;
- Dealing with a participant who presents with suicidal or homicidal ideation;
Sharing information in group counseling sessions; and

Sharing information in team meetings.

Be sure to always talk with participants and get their written consent when releasing their confidential information and personal details.

An excellent way to prevent ethical situations from arising with participants is to routinely explain limitations and obligations for safeguarding confidential information. As mandated reporters, counselors may need to report potentially confidential information without a release. They should only share what is relevant and necessary to fulfill their mandated reporting obligations. This principle applies when sharing information with a release as well.

**Relationships with Participants**

It is common for TVR counselors to interact with program participants outside of work with whom they have pre-established relationships. This is called a dual relationship and can be a particularly challenging ethical concern in the Tribal environment. Tribal communities are often rural and well-connected. When an applicant has a personal relationship with one of the TVR counselors, it is best practice to assign the applicant to another counselor’s caseload or to the TVR manager. If this is not possible, it is important that the counselor remain as objective as possible, and define and establish professional boundaries. Formalizing once informal relationships helps maintain confidentiality and avoid favoritism. It can be helpful to seek the insight of the supervisor or another professional when serving the participant to assist with objectivity.

When it comes to social situations, the Code of Professional Ethics for Rehabilitation Counselors (CRCC, 2017) makes it clear that counselors should not have social media relationships with participants. When counselors run into participants in public, it is appropriate for the counselor to avoid participants unless they initiate interactions. If that does happen, it is appropriate to keep interactions minimal and remind participants that any conversation about their case should take place in more professional and private settings.
When a counselor identifies a dual relationship with a participant, it is important that boundaries are established at the onset of the professional relationship. This is also important if the TVR counselor and the participant do not have an existing relationship. Setting boundaries may include being clear with participants about calling or stopping in unannounced, developing friendships or sexual relationships, accepting gifts, bartering, excessive counselor self-disclosure, extending meeting times, or making special allowances. Counselors may be susceptible to having poor boundaries because of a desire to take care of others, attempting to meet their own social needs, having a desire to please, or when working with participants with particularly challenging behaviors. That said, if proper boundaries are not established, counselors are more likely to feel taken advantage of, become burned out, feel unfulfilled in their work, and struggle with work/life balance. Poor boundaries may also lead to counselors being placed in ethically-challenging situations.

**Counselor Competence**

When providing TVR services to participants, it is important that counselors be clear in their TVR role and scope of practice. This clarity also protects counselors from stepping into job tasks they are not qualified to do. When counselors are presented with tasks that they have not been trained for, the responsibility then becomes one of making referrals, and possibly getting training to perform additional tasks or services. There is much to learn in TVR, so it is an essential counseling task to prioritize training and education to support gains in competence.

**Best Practices for Ethical Dilemmas**

Even with the guidance of the *Code of Professional Ethics for Rehabilitation Counselors* (CRCC, 2017), TVR counselors may find themselves in ethical decision-making situations that are not clearly covered in the Code. When counselors are unable to find concrete guidance about a situation, ethical reasoning should still take place. Below is a six-step ethical decision-making model that can be used in challenging situations:
1. Identify the Ethical Dilemma
   - This is the most critical step—recognizing the problem. Once the problem has been identified, the counselor must clearly state the ethical question, considering all aspects. If the decisions at hand are a simple matter of right and wrong, no process of ethical decision-making is required.

2. Collect Information
   - Gather information to make an informed decision. This includes the values of the parties involved. Consult with others when possible.

3. State the Options
   - Brainstorm to identify all possible options. Often the best decision is not the first to come to mind. This step forces the counselor to stop and view the situation from all angles. It requires an open mind to recognize that there is often more than one answer to a problem.

4. Apply the Ethical Principles to the Options
   - Focus on the six ethical principles (autonomy, beneficence, fidelity, justice, nonmaleficence, and veracity) and ethical values and concepts provided by the Code of Professional Ethics for Rehabilitation Counselors (CRCC, 2017). One or more of these will apply to most situations. State how each alternative will impact the ethical principles by developing a list of pros and cons. Do this for each option. This process will help to see what ethical principles are in conflict in the situation.

5. Make the Decision
   - While keeping in mind the pros and cons that have been listed, look over the options. Then weigh the seriousness of the cons, remembering that the participant’s needs are always prioritized. Most of the time, the decision becomes obvious. The counselor should “replay” each principle against the decision to see if it still
holds up. Document all steps taken, showing careful, reasonable, and prudent consideration of each factor and the decision made. Talk conclusions through with others if needed.

6. Implement, Document, and Evaluate the Decision

- Often, this portion of the decision-making model is omitted. Once a decision is made, implementation of the decision and documentation of the process are essential parts of ethical decision-making. After implementation, evaluate the outcome, which will help inform the next ethical decision-making process.

DISCUSSION QUESTIONS

- What, if any, type of ethics training have you had? What were your takeaways from it?
- What kinds of cultural practices or Tribal beliefs might challenge your ethics when working in TVR, such as a participant bringing you a gift?
- What other systems might interfere with making sound ethical decisions as a TVR counselor?
- Have you had an ethical dilemma with participants or their cases? What happened and how was it resolved?
- How do you think that knowing the six-step ethical decision-making model can be useful when in an ethical dilemma?
- If there was a time where you felt pushed to do something that was outside of your scope of practice or unethical, how did you deal with the situation?
Historical and Intergenerational Trauma

Trauma in Tribal Communities

There are two aspects of long-enduring trauma in Tribal communities that are important to be aware of as a TVR counselor. The first is historical trauma, which is the cumulative experience of traumatic events that affect an individual and continue to affect subsequent generations. American Indians and Alaska Natives have been deeply affected by European invasion, which shattered many communities through forced relocation, warfare, broken treaties, boarding school experiences, and foreign-brought diseases. This trauma led to a breakdown of families and Tribal structure, a weakening of spiritual ties, and the loss of entire Tribal communities.

The second is intergenerational trauma, which occurs when the unresolved effects of trauma are internalized, and then passed from one generation to the next. Trauma from abuse, neglect, lack of resources, and other painful experiences that may have happened in the grandparents’ or great-grandparents’ generations can continue to affect family members in the following generations, which can in turn affect the next, and so on. Thus, the trauma experienced by individuals’ ancestors may still influence them in the present time.

Historical Trauma Experienced by AI/AN Populations

An essential piece of cultural competence and humility in working with AI/AN populations is understanding historical trauma. Often, historical trauma within the AI/AN communities refers to the experiences of many
populations that occurred as a result of European colonialism and expansion into North America. As settlers came to the Americas and moved west, many AI/AN populations were negatively impacted, and some were destroyed all together. This type of invasion was unknown to the AI/AN populations, and they were at a disadvantage against colonial armies and explorers armed with guns. As expansion continued, AI/AN populations were subjugated, discriminated against, tortured, killed, and mistreated. Examples of historical traumas that occurred included retaliation for forming alliances; removal from the traditional homelands; introduction of new diseases; murdering of Tribal people for bounties; discarding or destroying the native lifestyle; governmental regulation; disregard for traditional leaders, practices, language, and Tribal consensus in decisions; encouragement of alcohol use; confinement to often unfamiliar locations with limited resources; and the removal of children and destruction of families.

**Boarding Schools**

One of the most significant traumas that AI/AN populations endured during the European invasion was boarding schools for Tribal children. The boarding schools were modeled after an Apache prisoner-of-war experiment. In this experiment, captive men were shackled and moved thousands of miles from their homelands. Their long hair was cut, and they were required to wear European-style military uniforms. The men were forced to learn to speak English and subjected to strict military protocols. Many were severely mistreated, and suicide was a common occurrence. While many prisoners survived, most left the prison severely traumatized. The experiment was considered a success by researchers because the men stopped speaking their language and learned Western customs.

After the experiments, US Army Lieutenant Richard Pratt went to Congress and requested funding for the similar education of all American Indians. By 1902, there were 25 federally funded non-reservation schools across 15 states and territories, with a total enrollment of over 25,000 American Indian students. The purpose of boarding schools was to eliminate American Indian culture, including language and traditional practices. Abuse was rampant in these facilities. According to many survivors, children were chained, whipped, beaten, denied medical care, not allowed to see their
families, used as servants, malnourished, and deprived of basic food and hygiene. In many instances, when children died, parents were not notified.

It is clear that the systematic abuse and oppression of AI/AN cultures that occurred during the European colonialization and expansion of the Americas has had a lasting impact on AI/AN communities. In particular, intergenerational trauma becomes an important consideration when working with Tribal people. As there was such widespread trauma within previous AI/AN populations, those who are descendants of survivors continue to struggle with effects of that trauma.

**Decolonization**

Indigenous decolonization describes ongoing processes to contest and reframe narratives about indigenous community histories and the effects of colonial expansion, genocide, and cultural assimilation. Indigenous people engaged in this work seek to reposition knowledge within indigenous cultural practices by using independent spiritual, social, and physical restoration. Decolonization is a healing journey that often uses the Medicine Wheel and other models as tools for examining the physical, mental, spiritual, and emotional aspects of a person and a community, and identifying areas that need healing. Since colonialism affected and continues to affect Tribes and Tribal people, true decolonization can only be achieved when all of these components have been addressed and the outstanding needs have been met in some way.

**Effects of Trauma**

Experiencing a traumatic event, or living with or having a close relationship with someone who has, can cause people to have strong feelings such as fear, sadness, guilt, anger, and grief. Some people can recover quickly with the support of family and friends, but for others a traumatic event, historical trauma, or intergenerational trauma can lead to mental health issues such as post-traumatic stress disorder (PTSD), depression, anxiety, or alcohol and drug use. Trauma can also impact relationships with and between family members, friends, employers, and the community. Subtle effects of trauma can include exhaustion, confusion, dissociative episodes, anger, agitation, sadness, and physical arousal.
Addressing Historical and Intergenerational Trauma

In recent years, many organizations have started looking at Adverse Childhood Experiences, or ACEs, when working with people who have traumatic events in their histories. ACEs are strong, frequent, or prolonged events that occur in childhood, including violence, abuse, and family breakups. These events can cause trauma in children and may be linked to chronic health problems, mental illness, chronic stress, or substance use disorders later in life. Strategies for addressing ACEs include fostering resilience through developing healthy relationships, learning to regulate emotions, and building supportive community systems thorough such things as education, creating healthy habits, and cultural practices.

Trauma-Informed Care

Trauma-informed care is a treatment approach that recognizes, understands, and considers the traumatic events, and the effects of those events, in an individual's life. The intent of this approach is not to treat symptoms or issues related to forms of trauma, but rather to provide support services in a way that is accessible and appropriate to those who have experienced trauma. When services do not use a trauma-informed approach, the likelihood of triggering or exacerbating trauma symptoms or re-traumatizing an individual may increase. Because trauma is so common, the counselor does not necessarily need to question participants about their experiences. Rather, they can just assume that the individual may have this history, and act accordingly with patience and care. Trauma-informed care promotes the open-mindedness and compassion that all participants deserve, because anyone can have a history that impacts their rehabilitation and the TVR counselor-participant relationship.

Considerations When Providing Services

When providing services to participants who are experiencing the effects of trauma, it is important for TVR counselors to remain patient and compassionate, and to be aware how a participant's behavior may be a manifestation of trauma. It is also useful for counselors to be aware of their own unconscious participation in the perpetration of trauma as an unconscious
learned behavior, and how that may affect the counselor-participant relationship and the TVR process. When complications due to trauma arise that affect the counseling relationship or the TVR process, a counselor is encouraged to seek assistance from a supervisor or another counselor with experience helping those with trauma issues. Together co-workers can develop a strategy for providing referrals or other assistance to participants in order to help them move forward.

Resources

- The video *The Wellbriety Journey to Forgiveness* is a documentary about American Indian boarding schools and intergenerational trauma, and the journey of reconciliation and healing. It can be found at https://www.youtube.com/watch?v=vZwF9NnQbWM.


- The book, *A Gathering of Wisdoms. Tribal Mental Health: A Cultural Perspective* by the Swinomish Tribal Mental Health Project, offers insights from Native American mental health workers, Tribal Elders, a psychologist, a psychiatrist, and a community mental health center administrator.

- A comprehensive list of books for those interested in learning more about American Indian/Alaska Native culture, history, and other subjects has been compiled by the First Nations Development Institute. It can be found at https://www.firstnations.org/knowledge-center/books/.
DISCUSSION QUESTIONS

- How do you believe that historical trauma has impacted your community?
- How have you seen the effects of historical or intergenerational trauma reflected in your life or your participants’ lives?
- What methods are used in your community to address and resolve historical trauma?
- What additional information about trauma have you found most useful in your TVR work?
- How do you think that trauma affects the TVR process?
- What methods do you use to identify the effects of trauma?
- What are next steps to help a participant with the effects of trauma?
- What questions or insights do you have about historical or intergenerational trauma?

TVR Program Relationships with Tribal Governance

Most Tribal governments are involved in the creation and continuation of TVR grants. It is a requirement that Tribal governments agree to support the activities described in a TVR grant application through the “special application requirements,” or assurances, as described in Module 1. Even though Tribal governments sign off on TVR grants, many Tribal government officials are unaware of the commitments that have been made. Thus, it is important to educate Tribal governments about the intent and processes of TVR, and how TVR grants are based on government-to-government
relationships (Tribal-to-federal). It is also important to explain the requirement of the no-less-than 10 percent match based on the total project cost, and to request that amount if a cash match was included in the grant proposal.

There are several common misunderstandings that can occur in Tribal governments when it comes to TVR programs and providing program services. Perhaps most common is the misperception that Tribal governments can have a say in who is (or is not) eligible for TVR and what services can be provided to participants. This may involve a particular participant who has bypassed the grievance and appeal process and gone right to Tribal government to protest a decision that has been made about TVR services. The assurances state clearly, “Decisions affecting eligibility for vocational rehabilitation services, the nature and scope of available vocational rehabilitation services, and the provision of such services will be made by a representative of the Tribal vocational rehabilitation program funded through this grant, and such decisions will not be delegated to another agency or individual [including Tribal governments]” (34 CFR § 371.21).

Whenever possible, it is important to be proactive about the TVR relationship with Tribal government. When working with Tribal government, consider the relationship collaborative. Stay positive and keep conversations professionally focused as much as possible. Setting boundaries (such as not gossiping) early in the relationship will help foster those professional relationships. Inquire if there is a need that program staff can meet that will help Tribal government accomplish one of its goals.

Having positive working relationships with individuals who make up Tribal government can also be a significant asset in TVR work. Make a point of learning who is in Tribal government, what their roles are, and what kinds of perceptions they have of TVR. Schedule regular meetings with the Tribal government as a whole, or at least meet with individual members on a regular basis, even if it is only a couple of times per year. This time can be used to educate them about aspects of TVR and focus on mutual goals.

Relationship building also means brushing up on conflict resolution skills. It is important to be prepared for conflict and handle it in a tactful
and professional manner that resolves with an even stronger bond in place. In TVR, this conflict can often be pressure from the Tribal government to run the program a certain way, make exceptions, or fit the program better into their governmental structure. These kinds of situations can be a concern for TVR programs and can challenge hard-fought relationships with the Tribe. When such situations occur, a TVR counselor can start with policy, procedure, the grant application, and legislation (CFR) to guide the process. Staffing these situations with other TVR staff is often useful as well. Supervisors or more experienced counselors may have had this issue in the past and successfully navigated it already. Seeking advice from professional mentors or Elders can also be helpful in working through conflicts with the Tribal government. In the end, the responsibility of TVR counselors is to their participants, and this needs to be communicated in a calm, non-judgmental, professional manner whenever conflict arises.

**Tribal Organizational Structure and Lines of Authority**

When operating and providing services within the Tribe or Tribal organization, it can be very helpful, and even essential, to know how the Tribe is organized and where the TVR program sits within the organization. The Tribal organizational chart will show the department in which TVR is located and the other programs within the department.

TVR is located in different departments or sections from Tribe to Tribe. In one Tribe TVR might be located in Employment and Training, in another, Social Services, and in another the Health Clinic or Education. The department that the program is in can be an indicator of what the Tribal administration thinks TVR is, such as “an education program,” or “an employment program.” These perceptions can affect how the program is able to operate within the Tribal structure.

The organizational chart outlines the lines of authority or chain of command, showing who the TVR supervisor reports to and who that person’s supervisor is, on up to the Tribal General Manager, Executive Director, or other top administrator. If the authority runs along other lines not shown on the organizational chart, it is important to determine that as well.
DISCUSSION QUESTIONS

- How aware do you think your Tribal government is of the special application requirements, or assurances?
- What efforts has your program made to educate Tribal government?
- What are misperceptions about TVR made by Tribal governments that you’ve encountered or heard about?
- What are ways you or others you know about have overcome Tribal governments’ misperceptions?
- What are goals that your TVR program and the Tribal government might share?
- What are some cultural issues in your community to consider when interacting with the Tribal government?
- How do you respond to pressure from Tribal leaders or even a participant’s family members?
- How do you protect confidentiality when interacting with Tribal government?
- How do you use the chain of command in your department to navigate a situation effectively and appropriately?
- How comfortable are you with conflict resolution? How have you had to use it when meeting with individuals from Tribal government?

Potential Assignments

1. Choose a counseling theory that speaks to you, either one from the module or one you find on your own. Do some research and write a 5–9 page research paper on that theory of counseling. In the paper, address

   a) The philosophy of the theory and the associated technique(s);
   b) Why you chose the theory and what makes it relevant to your work;
   c) How this theory does or does not fit into AI/AN culture; and
d) If you were to use this theory in a TVR setting, what factors could contribute to success? What might prevent it from being useful?

2. Choose a counseling theory that speaks to you. Create a presentation using PowerPoint/Prezi which provides an overview, and discuss
   a) Why you chose this theory;
   b) How this theory and associated technique(s) might be effective in working in a TVR setting; and
   c) The barriers that might be present when using this theory and associated technique(s) in the TVR setting.

3. Do some research on the history of your TVR program’s relationship with Tribal government. Write a reflection paper which addresses the following:
   a) What kind of history does your TVR program have with Tribal government?
   b) What is good about this relationship?
   c) What could be improved in this relationship?
   d) Give three concrete ideas of what you could do to improve Tribal relationships with your program. Of the three, try one out and reflect on what that was like and how that gesture might impact the long-term relationship between TVR and Tribal government at your program.
Tribal Vocational Rehabilitation Program
Application For Services

NAME: ___________________________________________ DOB: __________

First M.I. Last

PHYSICAL ADDRESS: ____________________________

Street City Zip

MAILING ADDRESS: ____________________________

(If different than above) P.O. Box/Street City Zip

TELEPHONE NUMBERS:

Cell: __________________________ Voicemail OK? Yes No

Home: __________________________ Voicemail OK? Yes No

Message: __________________________ Voicemail OK? Yes No

EMAIL ADDRESS: __________________________

TRIBE: __________________________________________ VETERAN: Yes No

SSN: ____________________________ FEMALE / MALE (Circle one)

By signing below, I certify the following:

I understand that I am applying to the North Intertribal Vocational Rehabilitation Program (NIVRP) for vocational rehabilitation services that will assist me to achieve or maintain an employment outcome.

I understand that the North Intertribal Vocational Rehabilitation Program will gather information about my disability that is necessary to determine my eligibility for vocational rehabilitation services. I understand that any information gathered about me will be kept confidential in accordance with 34 CFR § 371.44, and will be released only with my consent and as necessary to achieve my rehabilitation or to comply with Tribal, Federal and State laws. I also understand that it could take up to 60 days to determine my eligibility and if there is a need to go beyond these 60 days that I will be asked to sign an eligibility extension form.

I have been informed of my rights and responsibilities as a TVR program applicant and participant, and that I have the right to choose a representative to help me with the TVR process.

I understand that anytime I am dissatisfied with a decision made by the NIVRP staff that I have the right to have that decision reviewed by:

1) An Administrative Review, and/or;
2) An Impartial Review/Fair Hearing.

I also understand that I have unlimited access to the Client Assistance Program (CAP), which will assist me to resolve differences between myself and the TVR program.

__________________________________________________
APPLICANT SIGNATURE DATE

__________________________________________________
REPRESENTATIVE SIGNATURE DATE
TVR Intake Form

Applicant Name: ____________________________________________________________ DOB: __________

Date Applied for Services: __________________________________ SSN: __________

TRIBAL ENROLLMENT STATUS (Required):
Tribe: __________________________________ Member / Enrollment Number: ________________

______ Copy of Tribal Member / Enrollment Card or Documentation (in file)
______ Requested from Tribe (Release Needed)
______ Requested from ___________________________________________ (Release Needed)

SERVICE AREA DOCUMENTATION (Required):
Lives in service area?  Yes  No
Type of documentation used to verify residency: _________________________________

Referred to NIVRP by: _______________________________ Phone Number (if needed): ______________

Have they been involved with VR before?  Yes  No
If yes, when and where? __________________________________________________________

What conditions affect their ability to work? _______________________________________

______________________________________________________________

How do they believe the condition(s) prevent(s) them from getting a job, keeping a job or performing the
essential duties of a job? ____________________________________________

What are their most recent jobs?

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<tr>
<th>Job Title</th>
<th>Dates</th>
<th>Rate of Pay</th>
<th># hrs/week</th>
<th>Reason for Leaving</th>
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Are there cultural or social activities which limit their availability for work?  Yes  No
If yes, explain: ________________________________

Do they want cultural/traditional activities to be a part of the IPE?  Yes  No
If yes, explain: ________________________________

Are any assistive devices or other technology needed for work? ________________________________
MEDICAL BACKGROUND:

Are there any other conditions that could affect employment?

- Vision/Hearing/Speech
- High Blood Pressure
- Blood Disorder
- Allergies/Rashes
- Seizures/Convulsions
- Heart
- Head Injury/Stroke
- Chronic Pain
- Tumor/Cancer
- Stomach/Intestines
- Blackouts/Fainting
- Other:

Have they ever been unconscious?  Yes  No  If yes, explain: ________________________________

Are there problems or concerns with any of the following?

- Stamina or strength
- Getting along with others
- Working too slow
- Following instructions
- Anxiety or panic
- Absences from work
- Concentration
- Reading or writing
- Anger or short temper
- Other:

Have they seen provider(s) for emotional or mental health:  Yes  No
Name: _________________ Reason: _________________ Last seen: _________________
Name: _________________ Reason: _________________ Last seen: _________________
Name: _________________ Reason: _________________ Last seen: _________________

Is there a history of involvement with AA?  Yes  No
Are they currently involved in AA?  Yes  No  If yes, times per week: _______________________

Have they had outpatient treatment?  Yes  No  Name of program: _______________________

Any inpatient treatment?  Yes  No  Where/when? ____________________________________________________________________________

Is there another form of treatment which they utilize to maintain sobriety?  Yes  No
If yes, explain: ____________________________________________________________________________

Medical Insurance:  Medicaid  Medicare  Employer  IHS/CHS  Veteran’s  Other: ________________

Physicians/Specialists seen for conditions: (Releases Needed)
Name: _________________ Reason: _________________ Last seen: _________________
Name: _________________ Reason: _________________ Last seen: _________________
Name: _________________ Reason: _________________ Last seen: _________________

Medications currently being taken:
________________________________________________________________________________________

Use of any medically prescribed assistive aids (e.g., brace, cane, hearing aids, braces): ________________
TVR Intake Form (continued)

LEGAL BACKGROUND:

Have they had a DWI?  
Yes  ❌  No  ❌  If yes, when?  ________________________________

Have they had a felony conviction?  
Yes  ❌  No  ❌  If yes, explain:  ________________________________

Have they been incarcerated:  
Yes  ❌  No  ❌  If yes, explain:  ________________________________

Are they on probation/parole?  
Yes  ❌  No  ❌  If yes, explain:  ________________________________

EDUCATION BACKGROUND:

High School Diploma?  Yes  ❌  No  ❌  GED?  Yes  ❌  No  ❌  Highest grade completed  _____________

Any Certificates/licenses?

Do they have any education or training after high school?

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<tr>
<th>College or Training Program</th>
<th>Dates Attended</th>
<th>Program of Study</th>
<th>Did you Receive a Degree or Certificate?</th>
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Was/l's school difficult for them?  Yes  ❌  No  ❌  If yes, explain?  ________________________________

Did they have an IEP in school?  Yes  ❌  No  ❌  For what years?  _____________  Do they hope to further their education?  Yes  ❌  No  ❌  Explain:  ________________________________

LIVING SITUATION:

Living with family  Rent  Own  Couch surfing  Homeless

Who all lives there?  ________________________________

Are Independent Living issues evident?  Yes  ❌  No  ❌  If yes, explain:  ________________________________

MARITAL STATUS:

Single  Married  Separated  Divorce  Partnership  Widowed

Dependents:

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<th>Name</th>
<th>Relationship</th>
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TVR Intake Form (continued)

COMPARABLE SERVICES AND BENEFITS: (Releases Needed)

- Substance Use treatment
- WIA/NEW/WWIETP
- Mental/behavioral health
- Labor and Industries (L&I)
- DVR/TVR
- Social Security
- DSHS (TANF/GAU)
- Other: ___________________
- Financial Aid
- Tribal TANF/GA
- Employment Security
- Tribal Higher Ed
- Other: ___________________
- Tribal Clinic/CHS
- Other: ___________________
- Other: ___________________

INCOME AND EXPENSES

Total Monthly Income: $ ______________

Source of Income: Enter amount and frequency

Wages $ ______ per _______

TANF $ ______ per _______

SSI $ ______ per _______

SSDI $ ______ per _______

GA/GAU $ ______ per _______

Food Stamps $ ______ per _______

Other $ ______ per _______ Source: ___________________

Other $ ______ per _______ Source: ___________________

Total Monthly Expenses: $ ______________

Rent/Mortgage: $ ______________

Car payment: $ ______________

Utilities: $ ______________

Phone/Internet: $ ______________

Food: $ ______________

Clothing: $ ______________

Gas: $ ______________

Other: ___________ $ ___________

Other: ___________ $ ___________

Other: ___________ $ ___________

Other required payments (fines, child support, etc.)

Payment to: ____________________________________________________________________________ Amount: $ ___________

Payment to: ____________________________________________________________________________ Amount: $ ___________

Estimated wages needed to meet current obligations: $__________/hour or $______________ /month
EMERGENCY CONTACT

Name and number of someone that can always reach them
Name: ____________________________________ Relationship: __________________________
Phone: __________________

MILITARY SERVICE

Yes    No    If yes, what branch? ______________________________________________________
Dates of service ___________________________ Discharge type ___________________________ 

TRANSPORTATION

Reliable?   Yes   No   
Type:     Car (Own or Family) Borrowed Vehicle Bike Rides Public Transportation

Valid Driver’s License:     Yes   No   If yes, State/Number: ___________________________

If no license, why? ______ Never had one ______ Revoked ______ Suspended ______ Restricted
Explain: ________________________________________________________________

Insurance?   Yes   No   If own car, is it registered?   Yes   No

Completed By: ___________________________ Date: ___________________________
Tribal Vocational Rehabilitation Program

Address: ___________________________________________       Phone: ____________
Fax: ______________________

Consent to Release Confidential Information

Participant Name | Date of Birth | Phone
---|---|---
Address

I authorize NIVRP to disclose and/or exchange information in writing, by telephone, computer data transmission or fax to and/or from:

Name and address of provider or entity to release this information:

The information disclosed or received by the North Intertribal Vocational Rehabilitation Program will be used in the following manner:

- To document eligibility to receive services
- To coordinate services with the disclosing party
- Other: ______________________________

Information To Be Disclosed To And/Or Received From NIVRP:

- Identity
- Diagnosis
- Discharge Summary
- Dates of Service
- Medical Records and Laboratory Reports
- Academic Progress
- Disclose Name for Check Release
- Other ____________________________
- Eligibility Documentation
- Prognosis And Recommendations
- Evaluation
- Aftercare Plan
- Financial Aid Information
- Program of Study
- Tribal ID
- Progress Notes and Reports
- Mental Health/Psychological
- Program Plan
- Legal Information
- Grades and Transcripts
- Employment Information
- Start Date, End Date, Salary, Job Title
- ______ Mental Health Services
- ______ Drug and/or alcohol abuse diagnosis, treatment, or referral
- ______ Communicable diseases, including sexually transmitted diseases (e.g., HIV/AIDS/AIDS-related illness)

Specific Authorizations

This authorization may include disclosure of information relating to Alcohol and Drug Abuse, Mental Health Treatment or Communicable Diseases only if I place my initials on the appropriate line below:
Release of Confidential Information (continued)

1. I understand that my alcohol and/or drug treatment records are protected under the federal regulations governing Confidentiality of Alcohol and Drug Abuse Patients Records, 42 CFR Part 2 and the Health Insurance Portability and Accountability Act of 1996 (HIPPA), 45 CFR Parts 160 & 164 and cannot be disclosed without written consent unless otherwise provided for in the regulations. This Disclosure Authorization is specifically intended to include any references to diagnosis. Testing, and/or treatment for communicable diseases, including sexually transmitted diseases (e.g. Tuberculosis, HIV/AIDS-AID-related illness), mental health services, drug and/or alcohol services.

2. If the recipient of the information is not a health plan or provider covered by federal or state privacy laws, then the information used, disclosed, and received under this authorization may no longer be protected by those laws. Federal or state law, however, may restrict re-disclosure of HIV/AIDS/STDs, mental health, genetic testing, and drug/alcohol abuse diagnosis, treatment, or referral information to someone else.

3. I may refuse to sign this authorization. My refusal may adversely affect my ability to become eligible for services from the TVR program.

4. I may revoke this authorization in writing at any time except to the extent that action has been taken on it.

5. Unless revoked, this authorization automatically expires 1 (one) year from date of signature or on the date of __________________. Please initial:

6. Using the secure email address below, I authorize TVR to use secure email or social media to make contact and/or send me information. __________________

I have read this Consent to Release of Confidential Information and understand it.

Signature of Client: ___________________________ Signature Date: ____________

Signature of Parent or Legal Guardian: ___________________________ Signature Date: ____________
Module Description

This module provides an overview of the process of gathering essential information to determine eligibility for Tribal Vocational Rehabilitation (TVR) services, including criteria used in determining eligibility; types of assessments used; impairments, functional limitations, and impediments to employment; and common impairments.

Learning Objectives

At the end of this module, the reader should be able to

- Identify sources and methods for gathering information essential for determining eligibility;
- Describe the criteria for determining eligibility for TVR agencies;
- Describe disability impairments and the licensed medical, psychological, and treatment providers needed to assess the reported impairments;
Tribal Vocational Rehabilitation Eligibility

Applicants are determined eligible for TVR services through six criteria. All six must be fulfilled in order for an applicant to be eligible for TVR. Proof of the response for each question is to be documented in the participant’s file, preferably through the use of a Statement of Eligibility or similar form, along with Tribal membership and service area residence verification and disability documentation.

The six criteria that need to be met in order for a person to be eligible for Tribal VR services are

1. **Membership in an American Indian or Alaska Native Tribe.**
   TVR counselors need to know if an individual meets the grant’s definition of being a member of a federally recognized Tribe or, in some cases, a state-recognized Tribe. This requirement
is defined in each TVR program’s grant, and it is important to be aware of how “tribal member” is defined and whom it includes. Each Tribe has determined their own criteria for Tribal membership, and it varies widely across Tribes. Some Tribes distinguish between membership or enrollment, and “registered,” which notes descendants of Tribal members, as some Tribes allow registered members to access certain services.

Some TVR programs only serve their own Tribal members, while others serve any federally or state-recognized Tribal members. There needs to be proof in the case file of Tribal membership, such as a current enrollment card, tribal census documentation, or Certificate of Degree of Indian Blood (CDIB). Sometimes TVR programs have a Tribal membership verification form that the program can send to the Tribe (with the participant’s consent) to obtain proper documentation of membership, but usually it is the applicant’s responsibility to request and provide this information.

2. **Residence on or near the reservation.** This requirement is described in each TVR grant, per the Tribe’s or Tribal organization’s defined service area. An individual who applies to a TVR program must live within the area that is defined in the grant. For some TVR programs, the service area is defined by a state county or counties in which a high number of Tribal members live, for example. Verification must include the applicant’s name and address listed on an official document (such as a utility bill) and may include a map to show the address in the service area.

3. **Physical or mental impairment.** The TVR counselor needs to have documentation of the physical or mental impairment that has been diagnosed by a qualified professional provider.

4. **Substantial impediment to employment.** An “impediment” is a barrier that is caused by the disability or documented impairment. It is important to know how, exactly, an applicant’s impairment keeps them from getting, maintaining, or keeping a job. It is also important to keep in mind that if the impediment involves not being
able to be successfully employed, that, in and of itself, is considered to be “substantial.”

5. **Benefit from TVR services.** It is assumed that most applicants who receive TVR services will achieve employment outcomes. The only time a counselor may question a participant’s ability to benefit is if substantial documentation shows that the person’s disability might be too significant to benefit from the services a TVR program can offer. In this situation, the counselor would provide the applicant with opportunities to assess if they may be able to perform duties of a specific job as part of an assessment to determine eligibility. If, after assessment, it is determined that the applicant cannot benefit from TVR services, the counselor would summarize the findings in the case notes.

6. **Requires TVR services to achieve an employment outcome.**
   If an applicant has a disability and they can accommodate the impediments from that disability without the help of TVR, then they may not qualify for TVR services. Not everyone with a disability requires TVR services in order to get or maintain employment. In this section of the eligibility determination, the counselor would state why the applicant requires TVR services to obtain an employment outcome.

When determining applicant eligibility, discrimination or denial of services based on disability, race, class, gender, or any other protected group is prohibited, although, in order to be eligible for TVR, applicants must meet all criteria. In addition, the program is not allowed to determine eligibility based on anticipated costs, referral source, duration of residence, or anticipated employment outcome. Instead, eligibility must be determined based on the disability review and assessment of existing documentation and data, including counselor observations, medical and education records, information provided by the individual or the individual’s family, and determinations made by qualified providers.

As a part of this eligibility process, the TVR program must be clear with the applicant that TVR services are intended to achieve employment outcomes. This is generally included in the informed choice process. By applying for and participating in the application process, it is assumed
that the applicant intends to achieve employment, but it is always good
to remind applicants that the purpose of TVR is for the participants to
obtain employment outcomes.

**Timeline for Eligibility**

Eligibility should be determined within 60 days of application to the TVR
program. If an extension is needed, a justification for the extension and a
specific future deadline for eligibility determination must be agreed upon
by the counselor and applicant. A sample Extended Eligibility Agreement
can be found at the end of this module.

**Ineligibility**

If a participant does not meet all six criteria for eligibility listed above,
then the participant is not eligible for services through a TVR program.
The determination of ineligibility is individualized, and the program
cannot make any assumptions based on a particular type of disability or
perceived employability. If possible, assessment should include consulta-
tion with the applicant about the determination of ineligibility before for-
malizing any paperwork. File documentation must include the reasons for
the determination of ineligibility, as should the formal letter sent to the
applicant. The applicant letter must also include information about the
Client Assistance Program (CAP) and how the applicant can appeal the
ineligibility determination.

If an applicant is found to be ineligible because of the decision that
their condition is too severe for them to benefit from TVR services, that
determination must include clear and convincing evidence. Such evidence
includes the results from a trial work experience and definitive document-
tation from providers. Findings of ineligibility should be reviewed within
12 months and thereafter as requested by the applicant.

**Social Security and TVR Eligibility**

Any applicant who has been determined by the Social Security Adminis-
tration (SSA) to be eligible for social security benefits is assumed to be
eligible for TVR services based on this determination. These individuals
are also presumed to be able to benefit from TVR services. The applicant must provide proof of a social security determination. If this is not possible, the TVR counselor and the participant must work to obtain verification of SSA benefits in a timely manner in order to be able to determine eligibility within 60 days. The time for eligibility determination may be extended if SSA verification is not received within 60 days.

**DISCUSSION QUESTIONS**

- How do you determine whether or not an applicant is eligible for services? Do you use a form, worksheet, letter, or other method?
- How do you discuss eligibility with an applicant? What are key things you take time to talk about? How do you frame the concept of eligibility or use terminology related to a participant’s disability(ies)?
- How would you document that a person has a disability that is too significant to benefit from TVR services?
- Describe a time when you suspected that an applicant’s disability might have been too significant to benefit from TVR services.
- What are examples of when a participant does not require TVR services?
- Do you think a person can be “too old” to benefit from TVR services? Why or why not?
- Do you think a person can be “too significantly disabled” to benefit from TVR services? Why or why not?
- How do you involve an applicant’s family when it comes to eligibility? How could this be beneficial to the process?
Assessment for Eligibility

The TVR program must conduct an assessment for determining participant eligibility for services and priority for services. The first step of the assessment is to review existing documentation to identify whether there is enough information to support an eligibility determination. Professional providers can include school personnel, behavioral health counselors, substance use counselors, doctors, and therapists (e.g., physical and speech therapists). While there are many of these providers at the Tribe, some participants do not want to work with Tribal programs. It is important to give participants all of the options available to help them select the right providers for their needs. It is also the counselor’s responsibility to make sure that there are funds available to pay for services to on- and off-reservation providers, as assessment can be costly.

In the event that records documenting the current functioning of the individual are unavailable, insufficient, or inappropriate to support eligibility, additional assessments will need to be conducted. These could include diagnostic examinations by medical or behavioral health providers, or substance use evaluations. It could also include assessments to determine vocational impediments, such as trial work experiences or physical capacity evaluations, which must be conducted in the most integrated settings possible, consistent with the applicant’s needs and informed choice. The counselor will need to keep cultural-relevancy in mind when reading assessment reports, as non-Tribal assessment providers may or may not be familiar with Tribal lifestyles, and may identify or comment on behaviors that are accepted in Tribal communities. To facilitate engagement in the process, TVR services such as interpreter services, transportation, child care, assistive technology, and other accommodations are provisional, meaning that they may be provided if required for the participant to fully take part in the assessment activities.

Assessments should be tailored with specific purposes in mind, such as determining barriers to employment and vocational needs. Assessments must also be multifaceted, in that they must look for both limitations and functionality. The Rehabilitation Act describes the need to provide “comprehensive assessment to determine unique strengths,
resources, priorities, concerns, abilities, capabilities, interests, and informed choice of an individual,” in order to determine eligibility and TVR needs. Reviewing guidelines for vocational assessments within a program’s policies and procedures can be helpful for ensuring comprehensive assessment.

Information gathered for an assessment can come from a variety of sources besides providers and formal assessments. One of the primary sources of information is often the applicant and their support systems. These individuals can include family, friends, and other support figures who have knowledge of the applicant’s experiences, needs, and capabilities. All information gathered will need to be documented in the applicant’s case file in support of eligibility. Informed choice underscores the importance of participant choice and self-determination, and is an important aspect of the assessment process. Informed choice provides the participant with appropriate options and promotes empowerment through selection of assessment methods and providers.

Comprehensive assessment can include evaluation of the applicant characteristics listed below:

- **Strengths**—skills, qualities, and personal characteristics. It is important to know what the applicant enjoys doing, things they do well, and achievements or experiences that make them proud and that they feel passionate about.

- **Resources**—personal, social, and financial.

- **Experiences**—how the disability condition(s) affect(s) the applicant’s day-to-day activities and ability to work.

- **Priorities**—the most important things in the applicant’s life. What are they? What are their values?

- **Concerns**—what is the applicant worried or anxious about?

- **Abilities**—talents, skills, or proficiencies.

- **Capabilities**—known and unknown potential.

- **Interests**—what the applicant likes to do.
Many mistakes made in job placement can be avoided if appropriate and accurate evaluation is performed. Knowledge of what the participant can do and wants to do makes it easier to look for appropriate job possibilities. Assessments should not be used to keep participants “busy,” nor should assessments be routinely provided to all. Instead, they should be tailored for the particular participant with a specific purpose in mind.

Common Assessments for Eligibility

Counselor/Applicant Intake Interview

The intake interview is often the most informative assessment for understanding whether an applicant is eligible for services with the TVR program. The intake interview covers demographic information, information about an applicant’s disability, work/educational/personal history and goals, observations about physical and psychological presentation including self-esteem, attendance and timeliness of the applicant, and motivation of the applicant. This time of information sharing can also be when the TVR counselor and the applicant explore the applicant’s thoughts and feelings regarding their disability and employment barriers.

As TVR counselors are not medical, psychological, or behavioral health experts, they need to be careful and deliberate when reviewing documentation, assessments, and information shared by applicants. It is important to ask questions of providers and evaluators to make sure that they understand what the documents are stating. This will ensure that eligibility determinations are accurate and well supported. If an eligibility determination cannot be supported with existing records, additional documentation must be gathered, if possible, until a determination may be made.

Medical Evaluation

If an applicant has physical conditions, a medical provider can arrange for exams or tests to understand the cause of the symptoms, which can then lead to a diagnosis of impairment(s) and, sometimes, identification of impediments as well. Medical providers can also help create a care or treatment plan to address disability conditions.
Psychological and Psychiatric Evaluation

Professionals (usually psychologists) who are trained in administering psychological evaluations use tests and other tools to arrive at a behavioral health diagnosis, inform the TVR counselor about the applicant’s functional capacities and limitations, predict behavior and functioning of the applicant in future job or educational settings, and make recommendations for possible accommodations. Psychological evaluations are unique because of their use of standardized tests in addition to interviews. Psychiatric evaluations are usually made by physicians with psychiatric training. Sometimes there may be other professionals qualified to make behavioral health diagnoses in a medical or behavioral health setting as well.

Functional Capacity Evaluation

These assessments screen for serious limitations in major functional areas. Professionals are screening for a reduction in capacity of the individual to the degree that the person requires services or accommodations not typically provided for other individuals in order to prepare for, get, or keep a job.

Trial Work Experience (TWE)

A TWE is used to assess the applicant’s ability to work in a variety of occupations. A counselor sets up a TWE in order to verify the assumption that the person can benefit from TVR services, in terms of an employment outcome. The TWE also explores an applicant’s abilities, capabilities, and capacity to perform in realistic work situations. The counselor asks the employer or supervisor to evaluate if the applicant could function in that job considering the significance (severity) of the applicant’s disability. In the planning process, the counselor, supervisor, and applicant discuss the expected work tasks, which are placed on a performance grid, and expected timelines for demonstrating the functions are estimated. During the TWE, regular meetings are held to assess performance, predict participant potential, and problem-solve.
A list of considerations for use with a TWE includes the following:

- **Informed Choice**—It is essential that the applicant participate in the development and selection of the TWE. The TWE should take place in the most integrated setting possible.

- **Extended Evaluation**—If there are not a lot of options available for the TWE, extended evaluation may be used. This may be if there is a lack of employer options able to do the TWEs or if more time is required. For example, when a person has a history of quitting jobs at the 6-month mark, it may be useful to set the TWE to last longer than six months.

- **Written Plan**—Both the TWE and extended evaluation require written plans, agreed to and signed by all parties, to be in place.

- **Variety of Work Activities**—TWEs must be varied. It is standard they have three different settings and last a sufficient period of time (usually up to 6 months) in order to provide the most useful assessment information.

- **Support Services**—TWEs can include support services such as assistive technology, personal assistance, transportation, maintenance, and clothing if required by the applicant to participate in the work activities.

A sample TWE Agreement is at the end of this module.
CASE SCENARIO

Brian, who is 20 years old, comes to your TVR program after having initially applied for services three years ago, when he was still in high school. He was never determined eligible, however, because he was not able to follow through with his appointments. Transportation has been a primary obstacle for him because he requires family and friends to drive him places and he lives in a remote part of the reservation. Brian is interested in seeing if the Tribal bus will come out to his house to pick him up and drop him off regularly, or if he can work from home somehow.

Brian lives at home, finished high school last year, and has no prior work experience. He has been diagnosed with cerebral palsy and he was in special education while in school. When meeting with Brian, you noticed that his muscles are stiff and tight, which causes him to have jerky movements in his arms and legs, and he has an awkward gait. He uses a walker, and getting from one place to another takes Brian quite a bit of time. Brian uses sign language as his primary way to communicate. Brian really loves animals and has a dog that has been his companion for the last 10 years. The dog goes everywhere with him and he has brought the dog to the two appointments he has had so far. He has a great sense of humor, a positive attitude, and he is very meticulous about his appearance, wearing fashionable clothes and a clean haircut.

After considering the scenario above, what is a Trial Work Experience or Extended Evaluation that could be created for Brian to determine the types of work tasks he is able to do?
DISCUSSION QUESTIONS

- What do you think are the benefits of using psychological evaluations for applicants or participants in your program? How familiar are you with them?

- Why might the individuals you work with be hesitant to follow through with psychological evaluations? How can you assure and prepare them for the evaluations?

- Have you ever used medical evaluations for applicants or participants in your TVR program? Why or why not?

- How do you decide which evaluations to use when assessing an applicant for eligibility determination?

- How might you customize assessments based on an applicant’s needs and abilities?

- Why do you think counselor observations are important?

- How long does an intake interview usually last at your program?

- How do you think consultation with a medical professional can be helpful for a participant’s rehabilitation?

- What is an example of an assessment you’ve seen used for identifying serious limitations in a major functional area?

- Why might you set up a TWE? When would it be beneficial, or not?

- Do you think that the specialists/providers who provide assessment and treatment in the community are sensitive to Tribal members’ cultural needs?

- Why might an assessment be useful for some applicants but not all of them?

- What do you do when a participant requires an assessment that is not available in your area?
Impairments, Functional Limitations, and Impediments to Employment

In TVR, a disability is any physical or mental impairment that causes a substantial impediment to success in the workplace environment. The impairment is the condition, injury, or illness, while the impediment is the actual barrier or obstruction to completing work or daily life activities. Impediments are comprised of impairments with corresponding functional limitations, which are an individual’s reduction of capacity due to the impairment(s).

Impairments

An impairment prevents someone from doing something, such as a reduction of strength or quality, or any loss or abnormality of physiological, psychological, or anatomical structure or function. Impairments can be categorized as physical or mental.

- Physical Impairment: any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems:
  - Neurological
  - Musculoskeletal
  - Special sense organs (vision, hearing, smell, taste)
  - Respiratory (including speech organs)
  - Cardiovascular (relating to heart and blood vessels)
  - Reproductive
  - Digestive
- Genitourinary (relating to the genital and urinary organ)
- Hemic and lymphatic (relating to circulatory, blood, and immunity)
- Skin
- Endocrine (relating to hormones and glands)

- Mental Impairment: any mental or psychological disorder, such as
  - Intellectual or developmental disability
  - Organic brain syndrome
  - Emotional or mental illness
  - Specific learning disability
  - Substance use disorder

**Functional Limitations**

Functional limitations are areas of ability impacted by an applicant’s impairment(s) and are used to determine impediments to employment. A functional limitation describes the reduction in the capacity of an individual, due to a mental or physical impairment, to such a degree that the person requires services or accommodations not typically provided to other individuals in order to prepare for, get, or keep a job. While limitations may result from or be compounded by external factors such as geographic location, poor public transportation, language, culture, or lack of training, these factors should not be the basis of the limitation for the purpose of defining functional limitation. Defining areas of functional limitation is based on the rehabilitation counselor’s interpretation of the effect of the disability on the individual, as well as on the information shared by the applicant and in the disability documentation.

**Identifying Functional Limitations**

A specific disability diagnosis does not automatically imply the presence of one or more functional limitations. Although certain functional limitations are commonly associated with specific disability diagnoses, the presence and extent of these functional limitations are unique for each
person. Therefore, a TVR counselor must complete a thorough evaluation of functional limitations. To identify a functional limitation, a TVR counselor reviews and assesses data provided by the applicant or the applicant’s family, or reported by a qualified professional, combined with the counselor’s own observations, to determine whether

1. A functional limitation that results from an impairment is present;
2. The functional limitation represents an impediment to employment; and
3. The functional limitation meets the definition of a “serious functional limitation.”

Serious functional limitations are components used for determining the significance of a participant’s disability. The more serious functional limitations a participant has, the more significant the disability. This becomes important when a program is in Order of Selection and has to serve those with the most significant disabilities first. A sample Functional Limitations Checklist can be found at the end of this module.

**Functional Limitation Categories**

There are seven areas to consider when evaluating functional limitations: (a) mobility, (b) work tolerance, (c) communication, (d) self-care, (e) interpersonal skills, (f) self-direction, and (g) work skills. The categories state how a functional limitation is determined in each area, as well as the conditions for *serious* functional limitation. If a participant has serious functional limitations, they would be considered to have more significant disabilities. This is important because when a TVR program is in Order of Selection, it may be in the plan to serve those with the most significant disabilities first. It is, therefore, important to determine the level of functional limitation for all participants.
The seven categories of functional limitation are further discussed below.

**Mobility**

A functional limitation in mobility relates to the physical and psychological ability to move about from place to place, inside and outside the home, compared to people with unaffected mobility. This includes travel to and from usual destinations in the community for activities of daily living, training, or work. This also includes limitations due to risks as a vulnerable person or the effects of psychological or cognitive factors.

A *serious functional limitation in mobility* is determined when one or more of the following are present: (a) most common life and work activities are impaired or prevented, (b) the person requires assistance from others to get around in the community more than half the time, (c) the individual's range of travel is severely limited, (d) the individual requires modifications or adaptive technology, and (e) the individual requires accommodations not typically made for other workers to get around in the community.

**Work Tolerance**

A functional limitation in work tolerance relates to the ability to engage in activities that require physical performance or endurance. A *serious functional limitation in work tolerance* is present if an individual requires modification, adaptive technology, or accommodations not typically made for other workers in terms of physical capacity or endurance.

**Communication**

A functional limitation in communication relates to the ability to effectively exchange (give or receive) information through spoken words or concepts (writing, speaking, listening, sign language, or other adaptive methods). The emphasis is on limitations resulting from a disability-related communication difficulty, not on a communication problem resulting from a language or cultural difference.

A *serious functional limitation in communication* is determined when one or more of the following are present: (a) an individual is unable to communicate effectively or is dependent upon a person, service, device, or
alternative mode of communication; (b) augmentation is required to communicate, and an individual may not be readily understood by others or may not understand others on first contact; and (c) an individual requires modifications, adaptive technology, or accommodations not typically made for other workers to communicate with others.

**Self-Care**

A functional limitation in self-care is related to the ability to manage one’s self or living environment (i.e., eating, toileting, grooming, dressing). Limitations may occur because of physical, cognitive, or emotional impairments, and could extend to all tasks or specific tasks. A *serious functional limitation in self-care* is present if an individual is dependent upon other individuals, services, or devices to complete activities of daily living.

**Interpersonal Skills**

A functional limitation in interpersonal skills relates to an individual’s ability to establish and maintain personal, family, and community relationships as it affects, or is likely to affect, job performance, and security. A *serious functional limitation in interpersonal skills* is determined if one or both of the following are present: (a) an individual has difficulty establishing and maintaining relationships (personal, family, and community) and (b) an individual exhibits behavior that detracts from his or her own performance or the performance of others, and that requires more than normal intervention on the part of a supervisor.

**Self-Direction**

A functional limitation in self-direction relates to the ability to independently plan, initiate, problem solve, organize, or carry out goal-directed activities related to health, safety, socialization, recreation, and work. A *serious functional limitation in self-direction* is present if an individual requires supervision on an ongoing basis or has episodes during which they require supervision in order to begin and carry through on tasks, monitor their own behavior, and make decisions.
**Work Skills**

A functional limitation in work skills relates to the ability to do specific tasks required to carry out job functions, as well as the capacity to benefit from training. This functional limitation area only includes learning or behavioral limitations. A *serious functional limitation in work skills* is present if the individual requires more training and supervision or accommodations not typically given to other trainees to obtain and maintain work skills.

**Self-Reported or Observed Functional Limitations**

A TVR counselor may identify a functional limitation based on an individual’s self-report, reports from the family, school representatives, or others, or based on self-observations. If an individual reports a functional limitation that is not consistent with or not supported by disability-related documentation, the TVR counselor and the applicant will need to discuss the situation and reach an agreement on how to get the information necessary to verify the functional limitation.

To ensure that the case service record explains and supports a self-reported or observed functional limitation, the TVR counselor must document in the case narrative that a functional limitation was observed, a summary of the observations, and how the functional limitation affects the applicant.

The following is an example of an observed functional limitation:

While interviewing an applicant who is hard-of-hearing, a TVR counselor observes that the individual is not able to effectively communicate verbally. Medical records clearly establish a hearing impairment, but do not address verbal limitations. Because a functional loss in verbal communication is consistent with and commonly associated with hearing loss, the TVR counselor may determine, based on his or her observations, that a serious functional loss is present. The TVR counselor enters into the case narrative that a loss was observed in the area of communication, a summary of the observations, and how the functional loss affects the applicant.
Functional Limitations and Related Impediments to Employment

Impediments are defined as the vocational deficits that result from the functional limitations created by the impairment(s). Impediments to employment are also sometimes called barriers to employment. The counselor must be able to describe the connection between impairment and impediment, and the individual’s current employment status. An assessment tool (available for purchase) which may help the process of determining participant barriers to employment is the Barriers to Employment Success Inventory, or BESI. More information can be found at https://www.jist.com/content/barriers-employment-success-inventory-fifth-edition.

DISCUSSION QUESTIONS

- What do you think might be the top three impairments in your caseload? What do you think may be root causes of these impairments? What specialists or providers do you find to be the most helpful in providing services?
- How might documentation of functional limitations be useful for determining eligibility and documenting severity of disability?
- How you would define the term “serious functional limitation?”

Writing the Eligibility Determination

Writing an eligibility determination is much like making an argument as to why an applicant is eligible for TVR services. Disability documentation and assessment reports are used as evidence to support the argument. It is important to make as many points as possible in each of the disability-related sections of the eligibility determination. This supports the direction of the case, the decisions made, and the services provided. Eligibility writing
may seem difficult at first, but with practice a counselor will be able to create strong eligibility determinations that form solid foundations to address barriers to employment and the support needed to achieve the participant’s employment goals.

Completing an Eligibility Determination

The TVR counselor must complete an eligibility determination in order for a participant to become eligible for TVR services. Eligibility forms vary across the programs, but all must provide a space for the counselor to verify and support that the applicant meets all six of the eligibility criteria. A sample Eligibility Determination form can be seen at the end of this module.

Gathering Documentation

Before starting the eligibility determination process, it is important that the counselor have all the backup documentation on hand. These documents include valid Tribal membership documents, verification of an applicant’s address and its location in the program service area, records from a qualified provider or reports from assessments that document impairments, and notes from the intake and subsequent meetings with the participant.

Steps for Eligibility Determination

TVR counselors can use the following steps when determining a participant’s eligibility, using the AIVRS eligibility criteria:

1. The applicant is a Tribal member

   Verify the applicant’s Tribal membership with a valid (not expired) enrollment card, Certificate of Degree of Indian Blood
(CDIB), or other membership or enrollment verification from the applicant’s Tribe. A copy of the verification must be kept in the case record.

2. The applicant **lives in the TVR program service area**

   Verify the applicant’s address and that it is in the program’s service area. A copy of the document verifying the address must be kept in the case record.

3. The applicant **has a physical or mental impairment or impairments**

   In this section, the TVR counselor states the conditions or impairments that the qualified providers have documented in the participant’s records. The provider name(s), duration of the conditions, and severity, if applicable, must be included. If there are multiple conditions, the TVR counselor can select the two or three conditions that have the most impact on the applicant’s ability to work and document the others in the case notes.

4. The applicant’s **impairments cause substantial impediments to employment**

   In this section, the TVR counselor lists all the ways in which the impairment(s) affect(s) the applicant’s ability to work. These provide the evidence for why the applicant is eligible for TVR program services. A good way to think about it is to gather all the reasons why the participant is eligible. In other words, make the argument that the applicant is eligible, and support it with impediments to employment. To do this, the counselor can draw on

   a) The applicant’s health records from the provider(s), which may have listed specific impediments to employment;

   b) The applicant’s stated experience of how the impairment(s) limit(s) their ability to work and to perform daily activities;
c) Information gathered from family members; and
d) The counselor’s own observations.

Examples of impediments to employment include

- Lifting and carrying limited to 5 pounds, which restricts the ability to return to previous work;
- Knee stiffness due to injury limits walking to one minute at a time, preventing a return to work in facilities maintenance;
- Pain and restricted movement in hands prevents return to work in computer assembly;
- Impaired visual judgement causes difficulties with depth perception, affecting ability to return to previous work as a fisherman;
- Brief work history due to limited ability to focus attention;
- Low tolerance for frustration due to head injury, and requires a calm and predictable work environment;
- Reading skills at 5th grade level results in a narrow scope of work options;
- Difficulty with processing auditory direction, requires concrete and hands-on training;
- Difficulty breathing when exposed to gas, dust, or fumes and cannot return to work in the factory;
- Anxiety and panic when in smaller spaces, requires open work environment;
- Requires constant supervision and will need supported employment placement;
- Requires ergonomic office setup due to reconstructive back surgery;
- Change in physical capacities such as standing, lifting, and carrying results in an inability to return to previous employment;
Working around loud machinery for many years resulting in an inability to hear mid-range spoken conversation; or

Requires personal assistant to perform physical work duties due to loss of function in arms and hands.

5. The applicant **can benefit in terms of an employment outcome** from TVR services provided by the TVR program

Generally, most applicants can be presumed to be able to benefit from TVR services to reach employment outcomes. This is right out of the Rehabilitation Act (Section 102 (a)(2)(A)). In this space, the TVR counselor would state that the applicant is presumed to be able to benefit from TVR services, and then provide several reasons. Samples include:

- The interactions that the counselor has had with the applicant to date indicate a potential successful employment outcome.
- The services to address barriers are likely to succeed and improve the applicant’s ability to work.
- The applicant is open to further education and work and skills training.
- The applicant has a strong support system.
- The applicant is motivated to work and to address barriers to employment.
- The TVR program has strong relationships with providers to coordinate services.
- There are various options for internships in the community in the summer.
- There is a strong diabetes education program at the Tribal clinic.

However, if the counselor is not sure whether the applicant can benefit due to their multiple impairments and impediments to employment, especially if they are significant, there is a possibility
that the applicant will not be eligible. If this is suspected, the TVR counselor must set up assessment opportunities, such as a Trial Work Experience (TWE), to evaluate the applicant’s ability to perform in a work situation, completing tasks similar to what would be expected in a work placement. If, after assessment in up to three work situations, the applicant is not able to perform the assessment activities, they would be considered ineligible for TVR services. This ineligibility determination is to be re-evaluated in 12 months, and thereafter as requested by the applicant, if they are still interested in services or if there is improvement in their impairment(s).

6. The applicant requires TVR services in order to achieve an employment outcome

In this section, the TVR counselor would state why the applicant requires TVR services in order to obtain, maintain, or retain employment. A good way to think of this is, “Why does the applicant need TVR services when another person in a similar situation does not?” The reasons are very specific to the applicant, based on their impairments, functional limitations, impediments to employment, work experience, education, and family factors. Possible examples are listed below:

- The applicant has worked despite the back pain for several years, but is no longer able to perform the job duties and is in need of finding a new line of work.
- The applicant’s impairments are complicated and they require assistance with coordinating services and treatments.
- The applicant’s condition has made it difficult for her to manage her activities of daily living, and she is missing a lot of work.
- The applicant has been a stay-at-home father for several years and wishes to return to work, but will need assistance with accessing treatment and training in the computer field, in which he is out-of-date.
The applicant’s habits from addiction, while he is no longer using, are still affecting his work effectiveness and he needs help with negotiating with the employer and accessing treatment.

The applicant lost her job due to the end of funding, and she needs help finding a new position with natural supports to perform her tasks.

**DISCUSSION QUESTIONS**

- How comfortable are you with creating a strong argument for why an applicant is eligible for TVR services?
- When writing the eligibility determination for an applicant, where do you find the impairments or conditions in the documentation or reports that you have received?
- How do you identify an applicant’s functional limitations due to their impairments?
- What documentation, information, or resources do you use to fully understand how an applicant’s functional limitations result in barriers to employment?
- If disability documentation or evaluation reports don’t give you information about an applicant’s functional limitations or impediments, where do you look for help?
- What kind of language and counseling skills do you use when reviewing the eligibility determination with the participant?

**Order of Selection and Significant Disability Categorization**

Order of Selection (OOS) is a process that must be followed if a TVR program is unable to provide services to all eligible individuals with disabilities who apply for services. The OOS process was included in the TVR program’s grant application, in the event that the program needs to put
OOS in place. TVR OOS processes are created at the discretion of the Tribe and do not have to follow the same process as state VR programs. OOS usually involves categorizing participants by disability significance so that those who have the most significant disabilities or functional limitations are served first. There could be several reasons that a program is unable to provide services to all eligible individuals with disabilities who apply for services. Usually the reason for entering an OOS is due to a lack of resources, such as staffing or budget.

According to the Rehabilitation Act, Section 101(a)(5), programs are required to notify RSA if they need to enter into an OOS. RSA should be provided with the reasons for OOS, as well as assurance that individuals with the most significant disabilities are prioritized and that the process in the grant application will be followed.

Participants must be prioritized by significance of disability if the program has entered an OOS. Each TVR program is responsible for developing its criteria for the priority categories, but each determination must consider the number of functional limitation areas affected, the severity of the functional limitations, and the need for multiple services over a period of time. In many instances, a program will have three priority categories to determine how and when applicants will receive services. While in an OOS, the program will have to review the impairment levels and functional limitations of each participant and determine a priority category for each. The program must ensure that the participants who have the most significant disabilities, however this is defined by the program, are selected first to receive TVR services. Sample category criteria are

- Priority Category 1: Most significant disability;
- Priority Category 2: Significant disability; and
- Priority Category 3: Eligible for services, but no significant disability.
Per Section 7(21)(A) of the Rehabilitation Act, an individual with a **significant disability** would be a person

- Who has a significant physical or mental impairment that seriously limits one or more functional limitation areas (mobility, work tolerance, communication, self-care, interpersonal skills, self-direction, and work skills) in terms of an employment outcome;

- Whose vocational rehabilitation can be expected to require multiple vocational rehabilitation services over an extended period of time; and

- Who has one or more physical or mental impairments listed in Section 7(21)(A)(iii) of the Act or another impairment or combination of impairments that have been determined, on the basis of an assessment of eligibility and vocational rehabilitation needs, to cause comparable substantial functional limitation.

If using the categories above, a TVR participant who has multiple impairments and impediments to employment or requires extensive TVR services would be considered an individual with a “most significant disability” and placed in Priority Category 1.

**Participant Flow When in Order of Selection**

- **Application**—Any individual who applies for services still needs to complete the intake and assessment phase to determine eligibility. Those determined eligible should then be placed into a “priority for service” category.

- **Eligibility**—Participants who are determined eligible for services but who are not in a priority category that is actively being served should be referred to other programs that may be able to provide them services. However, they can remain with the TVR program in case they still require services when their category is being actively served.
Assessment and Eligibility

- **IPE**—Participants who have a signed IPE at the time of OOS should continue to be served as usual, regardless of their priority category.

- **Post-employment services**—Participants who need post-employment services should be provided services as usual, as their IPEs were signed prior to the OOS or they were previously in a category that was actively being served during the OOS.

**Change in Priority Category**

After a participant’s priority level is established, it is not changed unless the disability status of the individual changes, or evidence arises that the determination was in error.

**Information and Referral**

An individual who must wait for services due to OOS should be offered referrals to other programs with services that may meet their needs, or they can choose to wait until their name comes up in the OOS process. If they choose to wait, they must be advised that the wait could be very long, depending on the severity of their disability, the rate of movement of other participants through the process, and program fund availability.

**DISCUSSION QUESTIONS**

- What, if any, has been your experience providing services under an Order of Selection?
- What is your TVR program’s plan for providing services under an Order of Selection that was described in the grant application?
- How has Order of Selection affected your program’s ability to share cases with your state VR program?
- How might a TVR program come up with definitions for categorizing the level and number of functional limitations for Order of Selection?
Common Impairments in TVR Communities

There are many health conditions that participants may have that cause impairments that result in functional limitations and impediments to employment, including (a) behavioral health conditions, (b) substance use and addiction, (c) conditions of cognition, and (d) physical conditions. Examples of common impairments in TVR within each of these categories are described below.

Selected Conditions Related to Behavioral Health

There are many behavioral health conditions that participants may have, but common ones in TVR that cause impairments and impediments to employment include anxiety disorders, depression, and posttraumatic stress disorder.

Anxiety Disorders

While most people feel worry or fear before making important decisions or going into new situations, with anxiety disorders the fear and anxiety do not go away and can worsen over time, affecting relationships, employment, schooling, and self-care. Symptoms can include difficulty concentrating, inability to sleep, restlessness, and irritability. Panic disorders and phobia-related disorders are related to anxiety disorders.

Depression

Depression is a fairly common mood disorder that varies in severity from mild to severe. Although some people may have temporary low moods due to situations or relationships, with Major Depressive Disorder, symptoms must last at least two weeks and can include loss of interest in life activities, persistent sadness or feelings of emptiness, thoughts of suicide, and decreased energy or constant fatigue. Depression can affect how a person feels, thinks, perceives events, and copes with daily situations and activities.
**Posttraumatic Stress Disorder**

Posttraumatic stress disorder (PTSD) can arise after a person has experienced a traumatic, dangerous, scary, or shocking event or series of events, often over a long period of time. Traumatic events can affect not just a person’s emotional and mental state, but their body functioning as well. While just about everyone has some type of reaction to a traumatic event, those with PTSD will continue to experience fear or “fight or flight” reactions long after the event has passed, even when there is no longer any danger. In order to be diagnosed with PTSD, a person must have symptoms of re-experiencing the event (e.g., recurring dreams), avoidance (e.g., staying away from places that bring back the event), reactivity (e.g., feeling “on edge”), cognition (e.g., loss of interest in life), and mood (e.g., feelings of guilt) that last at least one month.

**Acceptance and Understanding of Behavioral Health Conditions in Tribal Communities**

TVR counselors can help reduce the stigma and discrimination toward behavioral health diagnoses by talking about such conditions within the community and correcting any misinformation people may have heard. For example, people may believe that individuals who have been diagnosed with behavioral health conditions have a tendency to be inconsistent or unreliable workers. This perception can be changed by explaining that individuals who have behavioral health conditions may need more time to adjust to new positions, but with support they can be productive employees. If there are individuals from the community who have conditions related to behavioral health, they may make the biggest impact in educating the community.

Creating an understanding of historical and intergenerational trauma can also be healing for Tribal communities. Helping a community understand the sources of many disabling conditions, and how to counteract and heal the trauma that is still impacting lives today can be essential for healing. Discussion and support of cultural practices, traditional foods, traditional arts, or physical activity can create capacity for the redirection of unhealthy habits of individuals.

Helping a community also understand how childhood experiences, both positive and negative, have a tremendous impact on future violence,
victimization, and perpetration, as well as lifelong health and opportunity, is also important. Much of the foundational research in this area has been referred to as Adverse Childhood Experiences (ACEs), and an understanding of this framework can also help as a means to moving past historical and intergenerational trauma. For more information on ACEs and trauma, refer to Module 2.

*When There are Concerns of Participant Suicide*

As mandated reporters, TVR counselors have a responsibility to protect participants who are struggling with thoughts of suicide or self-harm. Best practice states that a TVR counselor will work to assess plan, means, and intent for a person who they are concerned might have thoughts of suicide. If the participant will not discuss these things with the counselor and the counselor suspects that the participant is in danger, it is often necessary to involve authorities who can ensure participant safety.

*Diagnosis and Treatment for Behavioral Health Conditions*

Stigmas around behavioral health conditions, followed by discrimination as a result of those stigmas, may be the biggest impediments that individuals with behavioral health conditions face. Many people believe that individuals with behavioral health diagnoses are violent and dangerous when, in fact, they are more at risk of being attacked or harming themselves as opposed to harming other people.

Because of the remoteness of many Tribes, primary care providers are often left in the position of diagnosing and treating behavioral health conditions. This may result in less-informed care, denial of needed care, and under-treatment. In addition, costs related to care can be a barrier to behavioral health services. This is especially an issue for those who are served by clinics with limited resources, those who do not have additional health insurance, or those who have high copayments. While most Tribal members living within the Tribe’s service area do have IHS coverage, it is a payer of last resort and there may be limited access to services or long wait times to see appropriate providers because of the remoteness of services or because programs have limited budgets.
Co-Occurring Impairments

A co-occurring impairment, or dual diagnosis, is when a person is diagnosed with a behavioral health condition and a substance use disorder at the same time. Impairments, such as substance or alcohol use, may often present as a barrier to behavioral health treatment. Co-occurring impairments may be an individual's way of self-medicating if not getting proper treatment. It also may be challenging for some individuals to stick with a medication routine, which could result in poor management of symptoms and possible side-effects.

Other Impairments

There are also many impediments to employment that are specific to the particular behavioral health condition or impairment. These impairments may involve functional limitations with concentration and memory, organization, time management, stress and emotions, sleep disturbances, fatigue, attendance, or strained social interactions.

Functional Limitations for Behavioral Health Conditions

Common functional limitations for participants with behavioral health conditions such as anxiety, depression, and posttraumatic stress disorder include:

- Depressed mood, difficulty moderating mood;
- Inability to enjoy usual activities;
- Psychomotor problems (slowness in speech, thought, and movement);
- Problems with decision-making;
- Limited stamina (fatigue and lethargy);
- Issues with interpersonal skills (cooperation, tact, and empathy);
- Difficulty with follow-through or following instructions;
- Issues with judgment;
- Issues with motivation or initiative;
- Bodily complaints (e.g., headaches, back pain, muscle cramps, nausea);
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- Issues with self-confidence and self-image;
- Drowsiness from interrupted sleep patterns or lack of sleep;
- Issues with concentration and loss of interest;
- Memory problems;
- Issues with stability and consistency of behavior;
- Issues with dependability;
- Difficulty dealing with frequent change; and
- Inability to tolerate certain stimuli.

The following is a case study that can be used to think about how to provide TVR services for a participant with a behavioral health condition.

CASE STUDY

Jason is a Tribal member who has applied for TVR services with a reported disability of Major Depressive Disorder. He is 47 years old, lives on the reservation, and was diagnosed when he was 30 years old. He has been a regular receiver of behavioral health counseling services from the Tribe for the past 10 years. During this 10-year period, he was prescribed two different types of antidepressants but has taken them semi-faithfully, as he does not believe antidepressants really work. Over the past 5 years, Jason has worked in fast-food restaurants and grocery stores, but he does not stick with a job longer than 3-4 months. He states that this is because he gets “bored with the jobs,” and his attendance at work becomes unreliable.

Before being diagnosed, Jason finished his B.A. degree in accounting, but no longer desires to practice his field of study. During the initial intake interview, Jason shared that he is more interested in computer work now, something in graphic design. Jason appeared lucid and focused during the interview, but the psychological report from the counseling clinic shows an inconsistent pattern of stability, and his most recent major depressive episode was 5 months ago, which is when he quit his last job.
**CASE STUDY QUESTIONS**

- How would you address the six eligibility questions for Jason?
- What are possible issues you may need to address for eligibility and service provision?
- Which assessments might be useful for Jason?
- What are Jason’s functional limitations and potential impediments to employment?
- What traditional or cultural services might Jason participate in that could help him in his rehabilitation?

**DISCUSSION QUESTIONS**

- How common are anxiety conditions within your caseload, diagnosed or undiagnosed?
- What do the symptoms of depression typically look like for your participants?
- What are common functional limitations among the people you work with who have been diagnosed with anxiety, depression, or PTSD?
- What assessments do you think might be useful for identifying behavioral health impairments, functional limitations, and impediments to employment?
- What policies and procedures does your program have that address serving participants with behavioral health conditions?
- How do you think your community perceives members with behavioral health conditions?
- What types of cultural resources or supports are available in your community to help with healing behavioral health conditions?
- What are some misconceptions about behavioral health conditions that you’ve heard about?
Conditions Related to Substance Use and Addiction

There are many reasons substance use is a common impairment for participants of TVR programs. There are shared experiences among Tribal peoples that are believed to be widespread factors influencing a tendency toward substance use, which mainly relate to generational and intergenerational trauma. It is important to remember that while there are many common experiences that may influence a tendency toward using substances, ultimately the reasons why people use are unique to each person. Some widespread issues that may be linked to negative coping mechanisms are listed below.

▶ Other Physical Health and Behavioral Issues—Many Tribal communities have high rates of physical health problems such as diabetes, heart disease, cancer, obesity, and a higher risk of being hurt in unintentional accidents. Tribal communities may also experience higher rates of behavioral illness and suicide.

▶ Lack of Cultural or Spiritual Connection—Over the last few hundred years, several US government plans have sought to separate AI/AN peoples from their lands, languages, and traditional practices. For many, these events continue to challenge their abilities to connect with the deep wisdom of their ancestors. There is a wide spectrum between those communities that are able to live traditionally and those that have lost much traditional knowledge. It is also important to note that not everyone is interested in what was practiced by their ancestors, and some seek spiritual connection in other ways.

▶ History of Abuse—Children who were forcibly removed from their communities and placed in boarding schools were often treated very badly. Most children were forbidden to speak their native languages, had no contact with their families, were severely disciplined, and in some cases physically, emotionally, and sexually abused. The effects of trauma from these children’s experiences, and the related experiences of their families, continue to affect many AI/AN families today.
Economic Disadvantage—Rates of unemployment are high on reservations, and often the opportunities for economic growth are limited. Access to and financial coverage for specialists or other healthcare providers may also be limited.

Racial Discrimination and Persisting Negative Cultural Stereotypes

**Substance Abuse and Addiction Myths**

The following section lists several myths surrounding substance use and the actual truth behind each (Indian Health Service, n.d.).

- **MYTH:** Willpower is all that one needs to beat addiction.

  **TRUTH:** Prolonged substance use alters the way the brain works. The brain sends signals of powerful and intense cravings, which are accompanied by a compulsion to use. These brain changes make it extremely difficult to quit and often a treatment program is required.

- **MYTH:** Those with substance use disorders have to hit “rock bottom” before they can get help.

  **TRUTH:** Recovery can begin at any point in the addiction process. Given the impacts on the brain and possible consequences of addiction, the earlier one can get treatment, the better. The longer drug abuse continues, the stronger the addiction becomes and the harder it is to treat. It is important for people to get help early rather than holding out for the perfect desperate moment.

- **MYTH:** Addiction is a disease; there is nothing to be done about it.

  **TRUTH:** Most experts agree that addiction is a brain-based disease, but that does not mean that one is a helpless victim. The brain changes related to addiction can be treated and healed through therapy, spiritual practices, medication, exercise, and other treatments. As with any behavioral change, a personal commitment to change comes from within and requires a commitment to focus on the treatment plan.
MYTH: Addiction is lifelong.

TRUTH: Addiction is different in every person. Some struggle for years and others respond quickly to treatment. The ultimate goal is that long-term recovery will allow people to lead normal and productive lives.

MYTH: People cannot force someone into treatment; if treatment is forced, it will fail.

TRUTH: Treatment does not have to be voluntary to be successful. People who are pressured into treatment by their families or employers, or as required by the legal system, are just as likely to benefit as those who enter treatment voluntarily. People are often able to think more clearly if they stop using substances. This can help with the change process.

Screening and Assessment Factors of Influence: Ethnicity and Culture

Participants need to be given thorough explanations of the screening and assessment process. The substance abuse treatment field depends on tools or questionnaires that, for the most part, have been found valid and reliable with two populations—Caucasians and African Americans. Whenever possible, instruments that have been normed, adapted, or tested with AI/AN cultural and linguistic groups should be used. Instruments that are not normed for the population being evaluated can contain cultural biases and produce misleading results, and perhaps inappropriate treatment plans and misunderstandings with participants.

TVR participants may find the assessment process threatening, intrusive, and foreign. Some individuals may have had negative experiences with human service agencies or other treatment programs, and felt that they were stereotyped or treated with disrespect. Screening and assessment must be approached with a perspective that affirms cultural appropriateness, relevance, and strengths. An understanding of the cultural basis of an individual’s health beliefs, illness behaviors, and attitude toward and acceptance of treatment provides a foundation for building a successful treatment program.
Treatment for Substance Use and Addiction Conditions

While there are mainstream treatment centers with a variety of treatment modalities, such as inpatient treatment, intensive outpatient programs, support groups, and addiction counselors, in many communities there are centers and programs designed specifically for Tribal peoples. These programs incorporate cultural practices and systems into the treatment modality, are culturally sensitive, and provide services with an awareness of the influence of culture on a person’s life and recovery. These programs often incorporate activities such as sweat lodges, talking circles, and traditional arts and crafts such as beadwork, along with traditional individual and group treatment sessions. Tribal members seeking addiction treatment may also want to meet with other Tribal community members such as Elders, mentors, spiritual leaders, and family members.

Often the greatest impediment to employment a person recovering from substance abuse faces is being labeled and shunned from the community. Many people harbor false beliefs that a person with a substance use disorder is not able to recover or positively impact the community in the future. If there are stigmas that community members bring to interactions with participants, they may lead to challenging confrontations, accusations, and discrimination.

Limited access to services or long wait times to receive services may also be significant barriers. These may be genuine limitations in services, or they may be due to a lack of knowledge, awareness, or education regarding what resources are available for AI/AN people struggling with addiction.

Co-occurring impairments, such as PTSD or chronic pain, often present as barriers to treatment as well. Substance use may be an individual’s way of self-medicating other conditions that have not been properly diagnosed or treated.
Functional Limitations in Substance Use and Addiction

Common functional limitations for participants with substance use and addiction conditions are listed below.

Psychological

- Posttraumatic Stress Disorder diagnoses;
- Generalized Anxiety Disorder diagnoses;
- Depression diagnoses;
- Feelings of guilt and grief;
- Difficulty with impulse control;
- Low frustration tolerance; and
- Lack of a perspective of time.

Social:

- Difficulty with relationships;
- Loss of activities of daily living (ADL) skills;
- Having mostly friends who drink or use drugs; and
- Lack of positive peer supports.

Spiritual:

- Feelings of hopelessness;
- Feelings of despair;
- Feeling directionless or disconnected from Spirit; and
- Difficulty coping without alcohol or drugs.
DISCUSSION QUESTIONS

- Why do you think people in your community use alcohol or other substances?
- Where do most referrals for participants with substance use conditions come from in your community?
- What are some misperceptions about substance use and addiction that exist in your community?
- What has your experience been in working with participants who have substance use/addiction concerns?
- What types of policies and procedures does your program have related to serving participants with substance use conditions?

Selected Conditions of Cognition

There are several cognitive disabilities that are common in reservation communities, and a few of them are reviewed below, including traumatic brain injury, Fetal Alcohol Spectrum Disorder, and learning disabilities.

**Traumatic Brain Injury**

Traumatic brain injury (TBI) usually results when an external force causes injury to the brain, although an object penetrating brain tissue can also result in TBI. Common causes for TBI include falls, accidents, and violent events. TBI can result in physical, social, emotional, cognitive, and behavioral changes in a person. Rehabilitation may include physical/speech/visual/recreational/occupational therapy, neuropsychology, community
integration, and customized/supported employment. Involvement in a support group or community can be especially helpful as a person with TBI copes with the impediments that affect everyday life.

**Fetal Alcohol Spectrum Disorder**

Fetal Alcohol Spectrum Disorder (FASD) is an umbrella term describing the range of effects that can occur in an individual who is exposed to alcohol during the prenatal period (before birth). These effects may include physical, mental, behavioral, or learning disabilities, with possible lifelong implications.

The term FASD is not intended for use as a clinical diagnosis; diagnoses for this set of disorders include

- Fetal Alcohol Syndrome (FAS),
- Partial Fetal Alcohol Syndrome (PFAS),
- Neurobehavioral Disorder Associated with Prenatal Alcohol Exposure (ND-PAE), and
- Alcohol-Related Neurodevelopmental Disorder (ARND).

The occurrence and severity of FASD symptoms can vary from person to person. Symptoms of FASD may include any mix of differences in physical appearance, intellectual or cognitive disabilities, and problems with functioning in or coping with daily life.

There are no consistent systems in place that assist those living with FASD, and many individuals with FASD need help in a variety of life aspects. It can be difficult for adults to receive services from developmental disability agencies unless they have met the eligibility criteria before 22 years of age. Often, individuals qualify for Medicaid, Supplemental Security Income, and housing subsidies because they are low income. Although none of these federal services provide the proper network for those with FASD, they should be taken advantage of when possible.
**Learning Disabilities**

Learning disabilities are neurologically-based processing difficulties. These challenges can interfere with learning basic skills such as reading, writing, or math. Generally speaking, people with learning disabilities are of average or above average intelligence, and there often appears to be a gap between the individual's intelligence and potential achievement. TVR participants who are suspected of having learning disabilities but who have not been diagnosed may benefit from psychological evaluations to determine areas of ability, skill, and strength, as well as to identify strategies for accommodating areas of weakness.

**Functional Limitations for Conditions of Cognition**

Potential functional limitations resulting from cognitive conditions such as traumatic brain injury, FASD conditions, or learning disabilities can result in impediments to employment in the following areas:

- Attentiveness and concentration
- Control of anger and emotions
- Decreased stamina and fatigue
- Executive functioning deficits
- Managing time
- Organizing, planning, and prioritizing
- Photosensitivity
- Stress intolerance
- Memory loss
- Low self-esteem
DISCUSSION QUESTIONS

- What kinds of cognitive conditions are common in your TVR program’s service area? Why do you think this might be?
- How have you worked successfully with a participant with a cognitive disorder?
- What kinds of accommodations do you think might be useful for individuals who experience TBI or FASD?
- What have your experiences been with serving participants with TBI?
- What providers are qualified to diagnose FASD in your area?

Selected Physical Conditions

There are many physical conditions that result in impairments and impediments to employment. Several of those that are common in Tribal communities are diabetes, chronic pain, lung and respiratory disorders, arthritis, and heart disease.

**Diabetes**

Diabetes is a chronic (i.e., long-lasting) disease that affects how the body turns food into energy. Most of the food that people eat is broken down into glucose (also called sugar) and released into the bloodstream. The pancreas makes a hormone called insulin, which acts like a key to let the blood sugar into the body’s cells for use as energy. If someone has diabetes, their body either does not make enough insulin (Type I) or cannot use the insulin it makes as well as it should (Type II or gestational). When there is not enough insulin or cells
stop responding to insulin, too much blood sugar (glucose) stays in the bloodstream.

When diabetes is undiagnosed or uncontrolled, a person will likely experience increased thirst, a frequent need to urinate, fatigue, blurred vision, and tingling or pain in the hands, feet, or legs. Over time, particularly when glucose levels are not controlled, diabetes can cause other serious health problems such as heart disease, vision loss, and kidney disease.

**Chronic Pain**

Chronic pain is pain arising from an acute illness or condition that is ongoing, past the time when it should have been resolved. Chronic pain usually lasts six months or more, and can be constant or recurring. The intensity can range between mild and severe pain.

The two most common symptoms reported with chronic pain are chronic back pain and headaches. There are other common sets of symptoms reported with chronic pain that occur with significant frequency, including (a) temporomandibular joint (TMJ) pain, which is pain in the jaw joint and in the muscles that control jaw movement, (b) abdominal pain, and (c) fibromyalgia, which is pain lasting longer than three months that occurs in two contralateral (opposite side) quadrants of the body.

Another factor in chronic pain conditions is the psychological aspect of pain, which relates to how the ongoing pain affects a participant’s mental and emotional state and ability to cope with family, work, and daily activities. A person’s thoughts and emotions can play a strong role in their experience of the severity and duration of chronic pain, as well as in their success in rehabilitation.

**Lung and Respiratory Disorders**

Lung and respiratory diseases impact breathing and include asthma and chronic obstructive pulmonary disease, which are described below.

**Asthma**

According to the World Health Organization, in 2017 around 235 million individuals worldwide were diagnosed with asthma. Asthma is seen in both children and adults and is characterized by chronic inflammation in lung
passageways. This inflammation blocks air flow to the lungs, causing the individual to struggle to breathe. The feeling of not being able to breathe is a significant symptom that often leads to high levels of anxiety and stress.

Asthma is often caused by environmental triggers, and exposure to substances that cause the airway to constrict is a significant risk factor. These substances may include cigarette smoke, pollution, chemical irritants, and indoor and outdoor allergens. Once asthma has been diagnosed, proper awareness and management become essential for managing the condition.

**Chronic Obstructive Pulmonary Disease**

Chronic obstructive pulmonary disease, or COPD, is a progressive, inflammatory disease of the lungs that involves a decrease of the flow of air from the lungs. Symptoms of COPD include difficulty breathing or breathlessness, wheezing, and a productive cough. COPD results from exposure to irritating gases, chemicals, or particulates. This umbrella term includes the conditions of emphysema and chronic bronchitis. Chronic bronchitis is when the lining of the bronchial tubes in the lungs become irritated and the person develops a chronic cough and mucus production. With emphysema, the alveoli in the lungs begin to break down and air becomes trapped in the lungs, as the person is unable to exhale fully. One of the biggest risk factors for COPD is exposure to cigarette smoke. Smoking cessation can be an effective intervention to slow the progression of the disease, and other treatments may help as well.

**Arthritis**

Arthritis is a physical condition that affects the body’s joints. Symptoms can include swelling, heat, tenderness, redness, stiffness, decreased range of motion, and pain in the joints. Arthritis can cause limited mobility and changes to physical dexterity, which usually worsen over time. Two common types of arthritis are osteoarthritis and rheumatoid arthritis. Osteoarthritis is considered to be due to “wear and tear” damage, when the protective cartilage covering the ends of the bones is worn away, and the bones begin to grind on each other. Rheumatoid arthritis is an autoimmune disorder in which the joint cartilage and bones are attacked by the
immune system and begin to break down, and the bones come into contact with each other. There are many medications and other treatments that are used to reduce symptoms and pain.

**Heart Disease**

Heart disease refers to conditions that affect the heart. This can include (a) problems with heart rhythm, such as arrhythmia; (b) heart defects due to illness or from congenital factors; or (c) blood vessel diseases, such as coronary artery disease, which is when plaque builds up in the arteries. Over time, the insides of the arteries can become narrowed, lessening or blocking the flow of blood to the heart. Plaque can also rupture and cause blood clots to form, blocking the flow of blood. Heart attack, stroke, or chest pain can result when the flow of blood is blocked.

Key risk factors for heart disease include high blood pressure, high cholesterol, and smoking, as well as diabetes, being overweight or obese, being physically inactive, and excessive alcohol consumption. Other types of heart disease include irregular heartbeat, physical deformities of the heart, and heart muscle weakness.

**Functional Limitations for Physical Conditions**

Common functional limitations resulting from physical conditions such as diabetes, chronic pain, lung and respiratory disorders, arthritis, and heart disease can result in impediments to employment in the following areas:

- Decreased stamina and fatigue
- Inability to lift or carry more than five pounds
- Inability to perform tasks involving grasping, handling, and fingering
- Low tolerance for pain and discomfort
- Inability to sit for longer than 30 minutes at a time
- Inability to tolerate cool warehouse temperatures
- Inability to work in environments with dust or chemicals
DISCUSSION QUESTIONS

• What successes have you had with participants who have physical conditions?

• How do you think a diabetes diagnosis affects a participant’s ability to be successful in employment?

• What supports and resources are available to participants with diabetes conditions in your community?

• What experience have you had with a participant with a chronic pain condition? What have you found useful in addressing this barrier?

• What resources, treatment, and support systems are available in your community for participants who have chronic pain conditions?

• What experiences do you have working with participants with breathing issues in your TVR program?

• What do you think are the unique needs of a participant who has lung or breathing issues?

• How do you plan TVR services with a participant who has a progressive disease such as COPD?

• What experience do you have creating and maintaining an asthma management plan as a part of TVR services?

Disability Information Resources

Outside of the local medical, behavioral health, and substance use and addiction treatment providers, there are many sources of information that can provide insight into common functional limitations for particular impairments, useful accommodations for related impediments to employment, and
educational materials to help participants better cope with and understand their impairments. Online and print resources are listed below.

**Selected Websites**

- **Job Accommodation Network (JAN),** [https://askjan.org](https://askjan.org). JAN is funded by a contract from the US Department of Labor, Office of Disability Employment Policy (ODEP), and the content has been developed through a collaboration between ODEP, West Virginia University, and private industry. It is considered the leading source of free, expert, and confidential guidance on workplace accommodations and disability employment issues.

- **Psych Central,** [https://psychcentral.com](https://psychcentral.com). This website contains behavioral health resources and information, is managed by behavioral health professionals, and is owned and operated by psychologist John Grohol.

**Selected Books**


DISCUSSION QUESTIONS

• When it comes to understanding various types of impairments and the related functional limitations and impediments to employment, which resources have you found to be the most useful?

• What resources do you use to assist with disability documentation in the case file and writing eligibility determinations?

Potential Assignments

1. Using information or skills learned, plan and complete a place-based project that will enhance, expand, or modify practices or services related to assessment or eligibility provided by a TVR program.

2. A scavenger hunt! Do some research within your program or online to see what kinds of forms other TVR agencies use. Provide a minimum of 5 examples and compare them to determine
   - What you liked about the forms you found
   - What was missing in the forms you found.

3. Reflection assignment. A lot of forms and assessments are used in TVR. Reflect on what it might feel like for the participant to navigate the TVR system. Where do the structures of TVR and Tribes or Tribal organizations conflict? Where do they work well together and complement each other?
Extended Eligibility Agreement

Participant Name: _______________________________________ ______________________________________ ______________________________________

TVR is unable to determine eligibility for program services due to the following:

☐ Information has not been received from ______________________________
☐ Additional information regarding disability is needed
☐ Additional information regarding ability to benefit from VR services is needed
☐ Appointment with ________________________________ was rescheduled due to
  ☐ Unavailability of appointments
  ☐ Missed appointment due to ________________________________
☐ Other: ____________________________________________________________
  __________________________________________________________
  __________________________________________________________

Therefore, we, the undersigned, agree to waive the 60-day eligibility criteria. The following will be completed prior to eligibility determination:

☐ Receive information from
☐ Assessment with ________________________________ on ________________________________ will evaluate:
  ☐ ability to participate in work routine/environment
  ☐ barriers to employment
  ☐ accommodations necessary (reasonableness)
  ☐ other: ____________________________________________________________

Expected Date of review/eligibility determination: ________________________________

Signature of Applicant/Representative: ____________________________ Date ____________

Signature of Counselor: ____________________________ Date ____________
Trial Work Experience Agreement

This Trial Work Experience (TWE) agreement is established between the TVR applicant/participant, the TVR Program, and the employer/provider, for the following purposes:

1) Provide the participant with an opportunity to explore a potential job or jobs.
2) Provide the participant with the opportunity to learn new work skills and gain work experience and create positive experiences in employment settings.
3) Increase participant awareness of the work skills and knowledge required for a variety of jobs.

TWE DETAILS
TWE Job Title: _________________________________________________________________________________________________________________________

* A copy of the job description for this TWE is attached to this agreement.

TWE Site: __________________________________________________________________________ Employer contact: _____________________________
Direct Supervisor: _________________________________________________________________________________________________________________________
Phone: ___________________________ Email: _____________________________
Training will begin on _____________ and end on ________________

Anticipated Work Schedule:

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TWE is ☐ Paid ☐ Unpaid
If paid, rate of pay is $_______ per hour, _______ hours per day, and ____ days per week, for ____ weeks.

Total paid amount will not exceed $_______.
Primary work tasks that will be learned during the TWE include:

[Job tasks listed here]

Job responsibilities and assignments will be made by the employer/supervisor in line with the duties listed above and the job description for the this TWE.

Are accommodation(s) needed to successfully complete this TWE?  □ Yes  □ No
If yes, list the appropriate accommodations needed to complete this TWE and the cost:
Accommodation: ___________________________ Purpose: ___________________________ Cost: $_________
Accommodation: ___________________________ Purpose: ___________________________ Cost: $_________
Accommodation: ___________________________ Purpose: ___________________________ Cost: $_________

PARTICIPANT INFORMATION AND AGREEMENT

Name: _______________________________________________________________________________________
Phone number: ___________________________ Email: ___________________________
If applicable, Parent/Guardian Name: _______________________________________________________________________________________
Parent/Guardian Phone Number: ___________________________ Email: ___________________________

I, ___________________________ , agree to take part in this Work Experience, and to:
□ Arrive at the workplace when scheduled and stay for the agreed duration.
□ Inform the TWE supervisor as soon as possible if I am unable to attend work or will be late.
□ Dress appropriately for the job and workplace.
□ Complete my timesheet weekly and submit it to my supervisor for approval.
□ Take full responsibility for getting myself to and from the workplace.
□ Follow directions, learn job components, and perform work tasks to the best of my ability.
□ Conduct myself courteously and responsibly at the workplace.
□ Comply with all workplace policies, rules and requirements regarding safety and procedures.
□ Ask questions when I am in need of information and inform my supervisor when I need help with problem-solving.
Trial Work Experience Agreement (continued)

Participant Signature: ___________________________ Date: ____________
Parent/Guardian Signature (if needed): ______________________ Date: ____________

TVR PROGRAM INFORMATION AND AGREEMENT

Counselor Name: ____________________________________________________________
Phone number: ___________________________ Email: _____________________________

I, ________________________________, agree to and will provide the following to support the TWE:

☐ Ensure that the participant and the employer/supervisor understand the intent, purpose, and conditions of the TWE, and whether the TWE is paid or unpaid.
☐ Identify any initial supportive services, educational needs, clothing or equipment required for the participant to fully engage in TWE activities and job duties.
☐ Contact the participant every two weeks to assess progress and discuss skills learned.
☐ Check in with the TWE employer/supervisor every two weeks to discuss participant performance and engagement in the workplace.
☐ Meet monthly with the participant, parent/guardian and employer/supervisor to review progress in the TWE plan and make modifications as needed.
☐ Be available to participant, parent/guardian and employer/supervisor to problem-solve when issues arise.
☐ Review participant timesheets for accuracy and consistency for all hours worked; submit paperwork for fiscal processing.

Counselor Signature: ______________________________________ Date: ____________
Trial Work Experience Agreement (continued)

WORK EXPERIENCE EMPLOYER/PROVIDER INFORMATION AND AGREEMENT

Company/Agency Name: __________________________________________
Address: _______________________________________________________
Employer Contact: _______________________________________________
Phone number: ___________________ Email: __________________________
Supervisor Name: ________________________________________________
Phone number: ___________________ Email: __________________________

I, ____________________________________________________________, agree to and will provide the following to support the participant and the TWE:

☐ Provide the participant with an orientation to the rules, policies, procedures, and regulations of the workplace.

☐ Provide training, demonstrations and skills development for the work activities and proper use of any tools and equipment to be utilized.

☐ Provide sufficient tasks and job duties, aligned with the job description, for the participant to complete during work hours.

☐ Monitor the participant’s work performance, provide constructive feedback, answer participant questions, and assist with problem-solving when necessary.

☐ Notify the TVR Counselor, and, if necessary, the parent/guardian, of any problems or circumstances that must be addressed. If problems cannot be resolved, the agreement may require termination before the planned end date.

☐ Verify the participant’s timesheet and submit to the TVR Counselor for payment.

☐ Confirm that the participant keeps the agreed-upon work schedule and contact the TVR Counselor if there are attendance issues.

☐ Complete a performance evaluation of the participant’s work and addressing each of the work duties every two weeks and at the end of the TWE.

☐ Report any work accidents or injuries related to the participant to the TVR Counselor.

Employer Signature: ____________________________________________ Date: ______________

Supervisor Signature: __________________________________________ Date: ______________
Functional Limitations Checklist

For use in determining barriers to employment and significant disability

- **Mobility**: most common life and work activities are impaired or prevented.
  - Unable to obtain a driver’s license due to disability (must be permanent)
  - Inability to leave one’s common environment without the assistance of a personal care attendant, mental health worker, job coach, or independent living specialist or other support provider
  - Problems with perceptual organization resulting in spatial disorientation (e.g., difficulty walking stairs, using available public transportation, maintaining balance)
  - Requires routine and permanent assistive device(s), (e.g., guide, dog, chair, crutches) to be mobile in home and community work
  - Other serious limitations in terms of an employment outcome (specify):

- **Work Tolerance**: limitations in or lack of endurance require job modifications, adaptive technology, and/or accommodations not typically made for other workers.
  - Requires modifications to perform work tasks (e.g., flexible work schedule, requires breaks every 2 hours)
  - Unable to work without support on the job (e.g., job coach, personal care attendant)
  - Chronic and/or persistent allergic reaction to work place environment
  - Requires more than 30 days per year away from work due to necessary treatments for medical and/or psychological conditions
  - Safety issues are of frequent and/or chronic concern in the work place (e.g., side effects of medication, lack of medication)
  - Other serious limitations in terms of an employment outcome (specify):

- **Self-care**: assistance, services or adaptive technology is required to accomplish activities of daily living and/or maintain personal safety.
  - Requires routine and daily assistance with one or more independent living activities that relate to employment (e.g., handling money, hygiene, shopping, feeding, dressing, representative payee)
  - Needs routine assistance to comply with medication administration
  - Constant problems with managing time (e.g., making, keeping, and/or arriving on time for appointments)
  - Other serious limitations in terms of an employment outcome (specify):
Functional Limitations Checklist (continued)

☐ **Work Skills or Work History**: requires training, supervision, job modifications and/or adaptive technology not typically made for other workers in order to perform work tasks.
  - Needs frequent or routine individualized accommodations in performing the job (e.g., job coach, work adjustment, visual aids, adaptive aids, natural supports)
  - Work history shows frequent negative aspects due to disability (e.g., numerous job changes per year, multiple long periods of unemployment, record of poor performance, negative terminations(s) or poor references)
  - Needs close supervision to complete tasks, such as a need for continuous prompting to maintain attention to work tasks
  - Has no work experience due to disability
  - Other serious limitations in terms of an employment outcome (specify):

☐ **Communication**: unable to communicate effectively or requires assistance, services, adaptive technology or other alternative modes of communication.
  - Routine need for more extensive accommodation (e.g., special methods, books on tape, note taker, alternative test administration, voice box, scanner, voice output, extra time for supervisor to develop written material)
  - Requires substantial adaptive aids/accommodations for communication (e.g., uses Braille, lip reading, gestures, sign language, communication board, environmental cues like bells, whistles, alarms, lights, voice synthesizer, artificial larynx, TTD)
  - Expressive and receptive primary modes of communication are not understood by non-family members or general public
  - Other serious limitations in terms of an employment outcome (specify):

☐ **Self-direction**: a higher level of supervision is required than is typically needed by other workers to accomplish tasks, monitor one’s own behavior, and/or make independent decisions.
  - Routinely needs assistance to identify work tasks, sequencing or completing task (e.g., job coach, natural supports, constant one-to-one supervision)
  - Requires routine intervention (over 20% by job trainer or teacher) needed to monitor and evaluate participant’s work performance or behavior
  - Routinely does not understand consequences of behavior (behavior has resulted in loss of work, incarceration)
  - Any interruption or change in duties causes disruption in workflow
  - Other serious limitations in terms of an employment outcome (specify):
Functional Limitations Checklist (continued)

- **Interpersonal Skills:** unable to establish and maintain effective relationships (family, friends, co-workers and others) or exhibits socially unacceptable behavior.
  - Requires *frequent* prompting in order to exhibit acceptable behavior as perceived by others (e.g., support of a teacher, job coach, mental health provider)
  - Exhibits extremely inappropriate or threatening behavior (e.g., aggressive, sarcastic or argumentative, stubborn, rigidity, overt sexual behavior, does not acknowledge supervisor's authority, threat to self or others)
  - Extreme fear of interaction with people (e.g., total isolation, housebound)
  - Behavior, mannerism, or appearance *difficult* for others to accept. (e.g., drooling, grimacing, disfigurement, incontinence, uncontrolled odor, weight 200% above average)
  - Other *serious* limitations in terms of an employment outcome (specify):


TVR Eligibility Determination

________________________________________ is eligible for vocational rehabilitation services from the TVR Program based on the required criteria below:

1. Is a Tribal Member
   
   Enrolled member of ____________________________________________________________.
   
   Verified by ________________________________________________________________.

2. Lives in the TVR service area

   Verified by ________________________________________________________________.

3. Has the following physical or mental impairment(s): _____________________________

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

4. The stated impairments have caused the following substantial impediments to employment: _____________________________

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

5. Can benefit from TVR services in terms of an employment outcome: __Yes __No

6. Requires the following TVR services to achieve an employment outcome:

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

Counselor Signature_________________________________________ Date __________
Module Description

This module provides an overview of the progression from eligibility determination to developing an Individualized Plan for Employment (IPE), including vocational assessment, employment outcome determination, benefits planning, identifying needed services, procurement methods, measuring progress, and post-employment services.

Learning Objectives

At the end of this module, the reader should be able to

- Identify the required elements of the IPE;
- Identify the definitions of appropriate TVR employment outcomes;
- Describe how to support the participant in exercising informed choice in the process of developing the IPE;
- Describe how to use the benefits planning process in the development of the IPE;
- Describe how to use assessment data for IPE development;
- Describe how to integrate culturally-specific services into the IPE;
Module 4

- Describe why terms and conditions are required elements of the IPE;
- Identify when comparable services and benefits need to be researched before planning the use of program funds;
- Describe how to review and measure a participant’s progress in the IPE; and
- Describe when to make IPE amendments.

Nature of Work

How many introductory conversations include the question, “What do you do for work?” Work is more than just a paycheck—it provides an opportunity for building skills and knowledge, social interaction, and professional and personal development, as well as a sense of accomplishment and stability. Work is a central aspect of modern human life and is one of the ways people define themselves in society. The experience of disability is often inextricably entwined with the experience of work, and having a disability can complicate a person’s relationship with work. Work concerns due to disability include lost productivity, struggles with accommodations, medical exacerbations, and strained relationships with co-workers, to name a few. The experience of disability at work can also be complicated by a variety of other factors, including whether the disability is recent and how it affects a person’s job security.

Traditionally, work in the Tribal community revolved around hunting, gathering, preparing, and preserving food; caring for livestock; providing healing services and preparing medicines; and maintaining dwellings, gear, and means of transport. In a present-day Tribal reservation community, people work both on and off the reservation. The traditional types of work are still done, but people may not be able to support themselves and their family on these activities alone. Often, people prefer to work for the Tribe, but there may not be employment opportunities for all who want them. Some will choose to work in the surrounding communities, while others may own their own businesses.
Job vs. Career

The distinction between a “job” and a “career” is entirely a personal one, influenced by many factors such as motivation and perception. A “job” is typically seen as a task or series of tasks performed in exchange for money. It is a position of employment that may be full-time, part-time, or temporary. The primary motivation for undertaking a job is to earn money, but one may also try out various jobs to see which occupations are the best fits. One may not be particularly passionate about one’s job and just view it as a way to support one’s family.

A “career” can be the entire sequence of jobs one has throughout one’s life, or it can be an extended time spent in a particular field or position. A career encompasses all of the training and experience that help a person advance toward a larger aim, such as greater knowledge, higher earnings, or increased responsibility. Building a career requires goal setting, and often involves obtaining specialized training or higher education. Typically, a career is viewed as more rewarding, and an individual may be more passionate about and interested in their work. Careers may also be more stable, as they can last longer, and the individual may have more investment and satisfaction in their work.

The Importance of Soft Skills

Soft skills relate to an individual’s interactions with other people and are not specific to any one job or career. These include things like communicating, listening, writing, critical thinking, problem-solving, positive attitudes, conflict resolution, and teamwork. It is critical to develop soft skills because they are needed in any work setting.

Psychological Aspects of Work

Work and an individual’s personality affect one another. For example, whether an individual is introverted or extroverted may impact their experience of work. If a talkative, social person has a job that requires working alone on a computer all day, that job may not be a good fit. Conversely, an individual’s personality traits can affect the work environment, such as if the person prefers to work independently but the job requires frequent
collaboration with others. Work can also ease, cause, or worsen psychological or physical problems. It can be easier to think of the ways a workplace could negatively impact a person’s problems, but work can have positive effects as well.

In addition to completing job tasks, people who work together also develop distinct cultures. This culture can include the shared beliefs, expectations, and values held by members of an office or organization, to which newcomers must adjust. At times, this culture of work can be difficult for a participant to adjust to or become a part of.

**DISCUSSION QUESTIONS**

- How would you describe the difference between a job and a career?
- What do you think work provides a person besides a paycheck?
- How might disability complicate a person’s relationship with work?
- How are different work roles viewed in your community?
- How would you describe the work culture in your TVR program? In your department? In your Tribe?
- How might a person’s personality affect the workplace? How do you think work can bring out parts of a person’s personality?
- How have you seen a work placement change the lives and families of the people you provide services to over time?
- Where are most of the jobs in your community?
- Which jobs have the most turnover in your community? Why do you think that is?
- Why might jobs within your Tribal community be a better match for some participants who you work with than employment outside of the community? Why might the reverse be true for some?
Progression from Eligibility to IPE Development

Once a participant is determined eligible for TVR services, the case moves into the Individualized Plan for Employment (IPE) development stage. Components of this stage include engaging the participant in the process, vocational assessment, employment outcome determination, and the identification of services that will help remove barriers to employment and prepare the participant for achieving the employment outcome.

The IPE is a required and important planning and monitoring tool that is like a contract between the participant and the TVR program, in that both parties have responsibility for the provision of the activities. The IPE is a written plan that identifies the participant’s employment outcome and describes the planned services for removing barriers and achieving employment. The IPE includes timelines for completing services, a description of how services will be provided and paid for, and a clear description of what progress will look like. Each Tribe who submitted a TVR grant application made a commitment to the Rehabilitation Services Administration (RSA), under the special application requirements, that they would ensure that all TVR services are provided according to an IPE and that an IPE has been developed jointly by the TVR program and the participant.

When starting IPE development, it may be necessary for the TVR counselor to help the participant become engaged in the process. This could be a good time to share with participants that the purpose of the IPE is to address their impediments (barriers) to employment and to achieve the employment outcome, and that their involvement is key. It is also a good time to remind them of their right to create the IPEs and to select the goals, services, and vendors or providers, including those for cultural services. It is also an appropriate time to remind them about their rights
and responsibilities, informed choice, and that the TVR counselor is there to provide guidance and help.

The participant is expected to be greatly involved in the development of the IPE and can include others in the process, such as family members or teachers. Before an IPE is developed, an employment outcome must be selected by the participant. There must be a clear understanding of a person’s impairments, functional limitations, and impediments to employment. All impediments to employment listed in the eligibility determination must be addressed in the services listed in the IPE. The IPE should clearly reflect the needs explained in the eligibility determination, as these are the key barriers that are keeping an individual from being successful in the workplace.

Both the counselor and the participant must agree on the employment outcome and the components of the IPE before it is signed and service provision begins. IPEs can be edited and amended as needed to accommodate previously unidentified needs or issues as they come up. While state VR programs are required to have an IPE in place within 90 days of eligibility determination, TVR programs are not required to do this. However, it is still a good target to keep in mind when sharing a case with state VR.

**Requirements and Procedures for IPE Development**

When assisting the participant to develop the IPE, there are certain requirements and procedures to keep in mind. It may be useful to offer an IPE orientation to participants who are in the IPE development process in order to give information about their expected roles and to teach them about the required components and procedures. These include (a) a written document, (b) informed choice, (c) information for participants receiving Social Security benefits, (d) components of the IPE, (e) signatures, (f) a copy of the IPE for the participant, and (g) reviewing and amending the IPE.

**Written Document**

An IPE is a written document that is usually created on a form provided by the TVR program. Some programs may use digital forms. A sample IPE can be found at the end of this module.
**Informed Choice**
An IPE must be developed by or with the participant and implemented in a manner that gives participants as much information and freedom of choice as possible. This includes selecting an employment outcome, determining the specific services to be provided in the IPE, choosing the vendors or partners that will provide the services, and the methods used to purchase the services (e.g., purchase orders, store accounts, checks from invoices).

**Information for Participants Receiving Social Security Benefits**
At the time of IPE development, participants who receive Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) must be provided general information on additional supports and assistance for individuals with disabilities desiring to enter the workforce, including assistance with benefits planning, as this may affect employment outcome selection and the type of work that the participant chooses to pursue.

**Components of the IPE**
The components of the IPE include (a) the employment outcome, (b) a description of required TVR services, (c) the vendors and programs to provide the TVR services, (d) comparable services and benefits, (e) the cost of services, (f) flexible procurement methods, (g) measuring IPE progress, (h) IPE terms and conditions, (i) planned extended services for supported employment, and (j) anticipated post-employment services. Descriptions of these components start on page 209.

**Signatures**
A completed IPE shall be agreed to and signed by the participant (or the participant’s representative) and the TVR counselor. Programs using digital forms require that the counselor and the participant (or the participant’s representative) sign with an electronic signature.

**Copy of IPE for the Participant**
A hard copy of the IPE must be provided to the participant (or to the
participant’s representative), and, if appropriate, in the participant’s native language or other appropriate mode of communication.

**Reviewing and Amending the IPE**

The IPE must be reviewed at least annually by the TVR counselor and participant (or the participant’s representative). The IPE must also be amended if there are substantive changes in the employment outcome, the planned services, or the service providers. Amendments should not take effect until agreed to and signed by the counselor and the participant.

**Participant Involvement in IPE Development**

Section 102(b) of the Rehabilitation Act describes several options for developing the IPE that must be described to the participant during the development process. When an individual has been determined eligible for services, and during the period in which the employment outcome and the required services are being determined, the program must provide the participant and their guardian or representative information on the individual’s options for developing an IPE, including the (a) availability of assistance to develop the IPE, (b) sections of the IPE, (c) financial considerations, (d) expectations of the IPE, (e) required forms, (f) rights and remedies, (g) the Client Assistance Program, and (h) plan modifications or amendments.

**Availability of Assistance to Develop the IPE**

Because the participant has a primary role in developing their IPE, they are in charge of determining how much assistance they need. The participant can involve any individuals they choose in the development of their IPE, and this can be discussed at the time of IPE development. In addition, the program must disclose that technical assistance (TA) is available to develop all or part of the IPE. The TA can include external specialists, educators, traditional healers, or others who can provide skills training, cultural knowledge, or consulting services. An example of this would be a small business consultant who might provide necessary steps for starting a participant’s small business.
Sections of the IPE

The IPE form template should have all of the required components of the IPE.

Financial Considerations

Participants need to know the program’s guidelines and criteria regarding financial commitments related to the services included in the IPE, which can be found in the program’s policies and procedures.

Expectations of the IPE

Participants must be provided with any information about the expectations of the IPE, the program practice of providing services, or any other additional information requested or determined to be necessary.

Required Forms

Participants need to know that they can ask for assistance to complete required forms relating to the development of their IPEs.

Rights and Remedies

Often referred to as “Rights and Responsibilities” or “Grievance and Appeals,” the participants need to know what their rights are as a participant and also how to get assistance to appeal or file a grievance if they feel that they have not been treated fairly.

Client Assistance Program

Participants must be provided with a description of Client Assistance Program (CAP) services and information about how to contact the agency.

Plan Modifications or Amendments

The participant needs to be informed that the IPE can be modified to remove or add services or to change the sequence of services, given that circumstances do change and plans do not always work out. If more components are needed, the plan can be added to or amended. If the
participant wishes to change their employment outcome, a new IPE will have to be completed. A sample plan amendment can be found at the end of this module.

**DISCUSSION QUESTIONS**

- What experience do you have helping a participant progress from eligibility to IPE development?
- What does the IPE process look like at your program? How are IPEs organized? Do all staff use the same format?
- How do you know when the participant is ready to start developing the IPE?
- How much freedom does your TVR program offer participants to draft their own IPEs? How can counselors empower them to complete this process?
- Why is IPE development an important time to talk with participants about rights and responsibilities, CAP, and grievance options? When and how do you bring this up?
- How do you help participants who are receiving Social Security benefits make truly informed decisions while developing their IPEs?

**Vocational Assessment for IPE Development**

Vocational assessment is a TVR service that involves a comprehensive review of an individual’s work and training background, general functional capacities, and social and behavioral characteristics, and is a vital link to successful rehabilitation. The process usually includes assessing areas such as interests, values, attitudes, and work skills and abilities. A significant amount of personal and work-related information from assessments needs to be gathered in order to decide on an employment outcome and set goals for the IPE.

Each participant is unique, and the TVR counselor will have to decide which participant assessments will provide the information needed to
produce a holistic picture. It is important to talk with the participant about the purpose of the assessments, as some participants are wary of testing or have anxiety regarding what may be perceived as tests. Usually a variety of assessment methods and processes are used to capture a suitable level of information. Sometimes the most useful type of assessment comes from information gathered during the intake interview and the appointments that follow. However, there is also value in conducting other types of assessments as the participant is deciding on an employment outcome, particularly if the individual is not familiar with a wide range of work or is unsure about what they can do given their functional limitations.

**Common Vocational Assessments in TVR**

Vocational assessments commonly used in TVR include (a) job interest surveys, (b) skills inventories, (c) values assessments, and (d) situational assessments.

**Job Interest Survey**

This type of assessment can be most useful for those participants who are new to the world of work, those who have limited work histories, or those who have had limited exposure to career options. Interest surveys can help identify interests and preferences, and narrow down options that would be good fits. Examples of job interest surveys are

- The World of Work Inventory (WOWI), which measures up to 35 different factors to create actionable career recommendations (https://www.wowi.com);
- MyNextMove, a website by the US Department of Labor, Employment and Training Administration (USDOL/ETA), through a grant to the North Carolina Department of Commerce (https://www.mynextmove.org); and

- The O*NET Interest Profiler, which can help participants examine and define interests and how those interests relate to the world of work (https://www.mynextmove.org/explore/ip).

**Skills Inventory**

A skills inventory can help to identify specific abilities that would be transferable into various jobs and careers. Although real-work settings can be the most revealing and thorough, a skills inventory can help narrow down the options and is useful when building a résumé. An example of a skill inventory is the Skills Matcher, which is located on the Career One-Stop website, sponsored by the US Department of Labor, at https://www.careeronestop.org/Toolkit/Skills/skills-matcher.aspx/default.aspx.

**Values Assessment**

Understanding values is important to ensuring that a participant’s actions, behaviors, and activities are in alignment with what they feel is most important in their life and where they want to put their energy. They are also important for ensuring a good job fit. The Career OneStop website provides some activities related to learning more about work values (https://www.careeronestop.org/ExploreCareers/Assessments/work-values.aspx), and other values inventory tools can be found through internet searches.

**Situational Assessment**

Prior to selecting employment outcomes and developing IPEs, some participants may need situational assessments. This is especially true for participants needing supported or customized employment. A situational assessment places a participant in one or more work situations and enables a job coach to observe, record, and interpret the individual’s performance on a variety of work tasks in a real-work setting. A real-work setting means a place of employment in which real work is being
conducted, and is usually not a formal testing situation. For this purpose, the counselor and participant are sampling a number of work situations to help select an employment outcome for the participant. Generally, a contract is negotiated between the TVR program and the owner, supervisor, or team leader to deliver specific services to the participant and to provide the participant with experiences in many aspects of the job to determine whether the participant could do the job and would like the job.

The role of the TVR counselor is to help the participant select the work setting. The counselor then negotiates a contract with the employer, which includes the cost for services and the support provided to the employer throughout the process. The counselor authorizes the service from the employer for appropriate time period and ensures the supervisor can perform the service. The TVR counselor is also there to support and advocate for the participant, and to ensure that they have what they need to fully participate, although a job coach may take part of this role.

The assessment should provide information on the (a) feasibility of the goal of supported employment, (b) type and intensity of support services needed, (c) job duty restrictions, (d) job modifications needed, and (e) potential post-employment needs. The assessment can also evaluate how the participant deals with elements of the work setting, such as noise level, dust or chemical exposure, social culture, multitasking, and personal interactions. Additionally, a situational assessment may be conducted during supported employment to determine whether there is a type of job more suitable than the original job goal.

Situational assessments might combine aspects of Work Evaluation (WE) or Work Adjustment Training (WAT). The main purpose of WE is to assess the participant’s behavior in the work environment. In WAT, the counselor and the work supervisor help participant modify their work behavior based on findings during the work evaluation.

Assessment in Transition

Assessments are one key to assisting students with disabilities learn about themselves so that they can explore careers that are good fits for them. Assessments are important for identifying abilities, skills, and interests of students, and discovering their values. In addition, assessments can
identify both positive and negative behaviors in a work environment. Real-work settings can be most revealing and can provide experiences that can be used for résumé development while assessing the youth’s soft skills, such as the ability to work with others, communication, teamwork, self-motivation, and problem-solving.

**Assessment during the IPE**

Most vocational assessment is completed before the IPE is finalized. Occasionally, however, when issues come up during the provision of the IPE, there may be a need for assessment as a service to be completed alongside other TVR services. For example, an evaluation for a learning disability might be recommended when a participant is in a training program and having trouble with written assignments, or a psychological evaluation might be provided for a participant with persistent symptoms of anxiety who is in an OJT placement.

**DISCUSSION QUESTIONS**

- How might you help participants determine their employment outcomes if they asked for your assistance?
- What types of real work experiences do you have a working knowledge of?
- What do you think could be opportunities for real-work experiences in your community?
- What types of real-work settings for assessments does your program use?
- What types of assessments do you use to assist participants to choose employment outcomes?
- What are some of your favorite vocational assessments to use with participants?
- How do you implement informed choice when it comes to assessments?
- What experiences have you had doing assessments during the provision of the IPE?
Writing the IPE

The IPE is the document that identifies the employment goal and the services required to address the barriers to employment and achieve employment. Each TVR program is responsible for creating an IPE format that meets the needs of the program and fulfills the requirements set out in 34 CFR §361.46, “Content of the individualized plan for employment.” The TVR counselor will want to become very familiar with their program’s IPE and understand how to complete each section of the form.

The following sections describe the components of the IPE and provide guidance about how to address each one: (a) The Employment Outcome, (b) TVR Services to Individuals, (c) TVR Services for Groups of Individuals, (d) Vendors and Programs Providing TVR Services, (e) Comparable Services and Benefits, (f) Cost of Services, (g) Measuring IPE Progress, (h) IPE Terms and Conditions, (i) Planned Extended Services for Supported Employment, and (j) Anticipated Post-Employment Services.

The Employment Outcome

Achieving an employment outcome, or goal, is the intent and purpose of the IPE. The specific employment outcome chosen for the IPE must be consistent with the individual’s unique strengths, resources, priorities, concerns, abilities, capabilities, and interests. The participant is expected to be significantly involved in the determination of the employment outcome and to make their decision using informed choice. To the maximum extent possible, the employment outcome should be in an integrated work setting, where there are employees with and without disabilities.
Deciding on an Employment Outcome

Sometimes a participant selects a job goal and the TVR counselor agrees that it is a good fit; but there may not always be agreement. There are many assessment tools available that can help narrow the options to ensure that the specific employment outcome that participant chooses is an appropriate one for them.

Career choice influences almost every aspect of life. It includes aspects such as the type of work, salary, mobility within a company, and a participant’s self-concept. To make a meaningful career choice, the participant must develop knowledge of their own abilities and preferences, as well as knowledge of the world of work. To this end, it is important that the TVR counselor have the ability to assist the participant to work through the process of choosing an employment outcome.

Employment Outcome Determination

There are many topics that may be helpful for a participant to consider before an employment outcome can be agreed upon. Possible questions to offer include the following:

- What is the participant’s work history? How does the participant feel about the jobs they have had?
- What are the participant’s interests, abilities, and capabilities? What types of work is the participant not interested in?
- What are the participant’s transferable skills from past employment?
- What types of post-secondary training has the participant received?
- What types of employment settings are compatible with the participant’s interests?
- What are their functional limitations and accommodation needs?
- What are the occupational requirements of jobs they are interested in?
- Does the participant’s background affect their ability to obtain the employment outcome?
Are jobs related to the preferred employment outcome available in the participant’s community?

It is helpful to have access to up-to-date occupational and labor market information for the Tribe’s area, if it is available. Such data may be found online, but can be limited for reservation communities. A couple of resources are O*NET Online (https://www.onetonline.org) and the Bureau of Labor Statistics (BLS) website (http://www.bls.gov).

**Different Types of Work**

There are many different types of jobs that may be appropriate for any participant at any one time, but it is useful to help the participant identify the things they are interested in. The participant may want to consider job characteristics such as (a) wanting to work outside or inside; (b) wanting to work with things (e.g., computers, numbers, cars, furniture), animals, or people; (c) wanting to do physical activities or sit at a desk; and (d) wanting to create and build things, or take things apart. Assisting a participant to determine their basic preferences and skills, and then helping the participant to become more specific over time, can be a very useful component in selecting the employment outcome.

**Work Status**

Most TVR participants will not be employed when they apply for services. Those who are unemployed typically do not have consistent work histories, which means that they will be seeking new jobs. However, there are participants working who need support retaining their jobs or attaining a new one. In TVR, IPEs can be developed to help a participant keep an existing job, seek a new job, advance in a job, or regain employment at a prior job.

Several types of work arrangements are recognized in the reporting requirements for the TVR program. These work arrangements include (a) competitive employment, (b) full-time employment, (c) part-time employment, (d) self-employment, (e) subsistence, (f) sheltered employment, (g) supported employment, (h) customized employment, and (i) other types of employment outcomes. In the case of a participant who is a secondary
student, the vocational goal is a description of the student’s projected post-school employment outcome, as TVR programs are not allowed to provide pre-employment transition services such as job exploration counseling, work-based learning experiences, and career counseling.

**Competitive Employment**

Competitive employment is defined as work performed by a person with a disability in an integrated work setting, in which the work is comparable to non-disabled workers performing the same tasks and payment for work is at least minimum wage.

**Full-Time Employment**

The full-time employment outcome designation is for a participant who is employed in an integrated work setting, is making at least minimum wage, and is working 32 hours or more per week.

**Part-Time Employment**

The part-time employment outcome designation is for a participant who is employed in an integrated work setting, is making at least minimum wage, and is working 31 hours or fewer per week.

**Self-Employment**

The self-employment outcome designation is for a participant who is working for themselves instead of working for an employer who pays a salary or wage. A self-employed participant earns their income through conducting profitable operations from a trade or business that they operate directly.

**Subsistence**

Subsistence includes gathering, hunting, harvesting, processing, consuming, and using wild resources such as birds, mammals, fish, and plants from the natural environment. In many Indigenous groups, subsistence is a crucial avenue for passing down cultural knowledge, sustaining economic livelihood, feeding the population, and maintaining the traditional ways of life.
In many Alaska Native Tribes or villages, for example, subsistence-based livelihood is not considered a dwindling practice nor is it a “relic” activity relegated to only a few members of the Elder generations—it is a continuing way of life.

Subsistence is considered to be a successful self-employment outcome for TVR program participants by the Rehabilitation Services Administration (RSA), and it can stand alone as an employment outcome or can be combined with other forms of employment to create the participant’s complete employment outcome.

There are a number of important factors to consider when drafting a subsistence goal for the IPE. Namely, the participant’s safety and experience, as well the sustainability of subsistence living. Title 34 CFR § 371.6 states that subsistence means “a form of self-employment in which individuals produce, using culturally relevant and traditional methods, goods or services that are predominantly consumed by their own household or used for non-commercial customary trade or barter and that constitute an important basis for the worker’s livelihood.”

**Sheltered Employment**

The sheltered employment outcome designation is for a participant who is working in an employment setting in which a majority of the other employees have disabilities, and who is compensated at less than minimum wage under the Fair Labor Standards Act.

**Supported Employment**

Supported employment is a competitive employment placement for a participant with a significant disability in an integrated work setting. The participant receives ongoing support services for the duration of the IPE, with extended services covered by the participant, family, or other agencies following the successful closure of the TVR case.

**Customized Employment**

Customized employment is when a participant with a significant disability is placed in competitive employment in a position developed specifically to match the needs of the employer with the abilities and interests of the
participant. Usually a job developer is involved in the development, placement, and ongoing support of customized employment.

**Other Types of Employment Outcomes**

This employment outcome designation is for a participant employed in homemaking activities, unpaid work on a family farm or business, or other placements as a primary source of work.

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**DISCUSSION QUESTIONS**

- What resources are available in your community that help people learn about employment information and opportunities?
- What do you do when it appears that a participant has chosen a goal that may not be appropriate for them?
- How do you discuss or address culturally-related goals, needs, and resources? Is your TVR program able to partner with other programs to help with this?
- What percent of your participants would you estimate are already employed and needing support in their current jobs? What are the unique challenges with these participants?
- How do you make sure that you provide enough information for participants to make informed choices about their vocational goals?
- How frequently is subsistence seen as a part of the employment outcome in your TVR program?
- How frequently do you work with transition students? What are considerations that a TVR counselor might keep in mind when working with transition students?
Benefits Planning

One of the essential pieces in working with a participant in TVR is an understanding of benefits planning. Knowing how employment will affect a participant’s current benefits can be an important factor in the process of determining the employment goal. If a participant chooses to maintain social security or medical benefits, they may select an employment goal that will allow the benefits to continue.

Often, participants are fearful of losing their benefits if they choose to return to work. This is a legitimate concern, and there are a variety of programs which allow participants to make attempts to work while still maintaining their benefits. It is important to determine what benefits are available to participants, Tribal members, and community members, as well as to those involved in other programs. A strong knowledge of these programs gives the TVR counselor an opportunity to provide information regarding benefits planning and to help the participant develop an IPE while being fully aware of how their employment will impact their benefits. It is the TVR counselor’s responsibility to ensure that they understand what program(s) the participant is involved in and to ensure person-centered, person-specific planning to each participant on their caseload. If the counselor does not know this information, it helps to have resources to refer participants to. The following are some of the more common programs offered.

Social Security

There are two Social Security programs available to individuals with significant disabilities. Social Security Disability Insurance (SSDI) provides benefits to individuals with disabilities who are “insured” by contributions to the Social Security trust fund. These contributions are the Federal Insurance Contributions Act (FICA) social security tax paid on their earnings or those of their spouses or parents.

The Supplemental Security Income Program (SSI) makes cash assistance payments to older people and individuals with disabilities (including children under age 18) who have limited income and resources. The federal government funds SSI from general tax revenues.
Within these two programs, there are work incentives for those individuals who want to obtain employment or return to the workforce.

**Work Incentives**

Special rules make it possible for people with disabilities receiving SSDI or SSI to work and still receive monthly payments and Medicare or Medicaid. Social Security calls these rules “work incentives” or “employment supports.” The work incentives (employment supports) are fully explained in the Red Book (https://www.ssa.gov/redbook), which serves as a general reference regarding the employment-related provisions of the SSDI and SSI programs. Information about the SSA Ticket to Work program can be found at https://www.ssa.gov/work.

The SSDI employment supports provide help over a long period to allow an individual to test their ability to work or continue working, and to gradually become self-supporting and independent. In general, a person has at least nine years to test their ability to work. This includes full cash payments during the first 12 months of work activity, a 36-month re-entitlement period during the extended period of eligibility, and a 5-year period in which they can start their cash benefits again without a new application. An individual may continue to have Medicare coverage during this time or even longer.

The SSI employment supports offer ways for an individual to continue receiving SSI checks and/or Medicaid coverage while they work. Some of these provisions can increase a person’s net income to help cover special expenses. Once an individual receives SSI, the Social Security Administration considers that an individual’s disability continues until they medically recover, even if they work. If an individual cannot receive SSI checks because their earnings are too high, their eligibility for Medicaid may continue while they are working. In most cases, if an individual loses their job or is unable to continue working, they can begin receiving checks again without filing a new application.
DISCUSSION QUESTIONS

• What has been your experience of benefits planning with a participant?
• Why is benefits planning an essential role in TVR?
• What preconceived ideas might a participant bring to the table regarding benefits planning? How might this be a barrier to services?
• Much of benefits planning is research and education with the participant. What is the best way that you have found to impart information to participants?
• What types of resources do you use for benefits planning?
• Have you had a participant whose benefits were unexpectedly affected by their returning to work? How did you work with them to understand the situation?

TVR Services to Individuals

Services described in an IPE need to be necessary to assist an individual with a disability in preparing for, securing, retaining, or regaining an employment outcome. The participant is expected to be significantly involved in the determination of the services needed to accomplish the employment outcome listed on the IPE. This means any service essential to an IPE, including, but not limited to, (a) assessment; (b) counseling and guidance; (c) referral; (d) job-related services; (e) vocational training services; (f) diagnosis and treatment of physical and mental impairments; (g) maintenance; (h) transportation; (i) personal assistance; (j) interpreter and reader services; (k) rehabilitation teaching and orientation and mobility services; (l) occupational licenses, tools, equipment, and initial stocks and supplies; (m) technical assistance and consultation services; (n) rehabilitation technology; (o) transition services; (p) supported employment and customized employment services; (q) advanced training; (r) services to the family; (s) post-employment services; and (t) culturally-specific services.
Assessment

During IPE development, assessment services may be provided to help the participant determine an employment outcome. During IPE services, assessment can be used to determine the participant’s progress in a particular service, to evaluate a condition or issue that has come up during a service, or even to determine if an employment placement is appropriate and consistent with a participant’s abilities and skills.

Counseling and Guidance

Counseling and guidance are primary functions of a TVR counselor and include providing information and support services to assist participants through the TVR process and allow them to exercise informed choice in determining their employment outcomes and the services required to achieve the employment outcomes.

Referral

Referral is a TVR service in which the counselor connects participants with appropriate Tribal, community, state, and federal programs, including other components of the statewide workforce development system. Sometimes there is a cooperative agreement with these agencies, such as the state VR agency. Appropriate referrals assure that participants are connected with providers best suited to address the specific rehabilitation, independent living, and employment needs of a participant. Participants must be provided with information concerning the availability of referral options, with the final referrals based upon their preferences and choices. A signed release of information must be in place before sharing any participant-identifiable information with another agency. The participant must be informed when the referral has been made and given a specific point of contact within the agency or program. Common referrals include the Tribal clinic, Tribal behavioral health or treatment center, or the Social Security Administration.

Referrals need to be documented in the participant case file. Two main ways to do this are through a case note or through the use of a specific form. The TVR counselor can document a referral by writing in the case
notes the information that they provided to a participant, such as behavioral health services or psychological evaluation services. Agencies that accept participant referrals may have forms that require completion prior to service provision. Conversely, TVR counselors may find it useful to have their own forms for certain providers to ensure that they are able to capture, share, and document appropriate information.

**Job-Related Services**

Job-related services cover many different activities including job search and placement assistance, short-term job coaching, job retention services, follow-up services, and follow-along services.

Job search and placement assistance can include looking for work online or in local papers, and can also use personal connections and relationships that the participant or the TVR program has with other employers or businesses. It may be a referral to a specific job that results in a job placement. Job search and placement assistance can also include guidance on writing résumés, drafting cover letters, filling out job applications, and preparing for interviews.

Short-term job coaching can help a participant who may need more time than the average employee to learn the job tasks and interpersonal skills necessary to be successful at a job. With the employment outcome in mind, the job coach works in coordination with the TVR counselor and participant to identify the needs of the individual and jointly determine how these needs will be addressed. The job coach can provide intensive on-site instruction for the worker based on situational assessment, continuously evaluating the placement by collecting and recording data and modifying the job site as appropriate, assisting the participant with self-advocacy with co-workers and the supervisor, and developing natural supports.

Job retention services involve working with a participant after they have started a job to ensure that they maintain satisfactory performance, deal effectively with issues that come up, and ensure that they are able to keep their job.

Follow-along services begin when a participant starts working at a new job and are routine check-ins to monitor how things are going. When this occurs, the TVR counselor checks in with the participant and employer
to see if any further services are needed to support the participant, and, if necessary, arranges for those services.

**Vocational Training Services**

TVR services provided under vocational training include training and education at Tribal colleges, community colleges, universities, and vocational training schools, as well as personal and vocational adjustment services, books, tools, and other training materials. Some Tribal colleges and training institutions offer a “Tribal” tuition rate (similar to state resident tuition) to Tribal members, and many Tribes offer scholarships to Tribal members. When a participant is looking into higher education, these are additional factors to consider.

Personal and vocational adjustment training includes teaching soft skills that a participant may need to develop when entering employment, especially if they are becoming employed for the first time. These skills address areas such as appropriate interaction with co-workers and supervisors, time management, handling workplace conflict, self-advocacy, cultivating natural supports and other community resources, practicing personal hygiene, and dressing appropriately.

Books, tools, and other training materials refer to items necessary for training and learning and can include things like textbooks and items specific to the classes taken, such as a calculator for math classes, scrubs for nursing instruction, or carpentry tools for construction classes.

Comparable services and benefits must be considered for this service. No training services provided at an institution of higher education shall be paid for with agency funds until all other funding resources have been researched and used, including need-based scholarships. It is important to document all sources researched and secured.

**Diagnosis and Treatment of Physical and Mental Impairments**

Also known as physical and mental restoration services, these services are used to diagnose and treat physical and mental impairments. These services should, within a reasonable amount of time, substantially improve the functional limitations related to a physical or mental impairment that is an impediment to employment.
Alternative and Complementary Treatment/Therapy

Alternative treatment or therapy refers to treatment for impairments that is used instead of what is most commonly used in mainstream medicine. Sometimes alternative treatment can be used at the same time as mainstream treatment, and this is known as complementary treatment.

Alternative medicine encompasses a variety of modalities used to treat symptoms, infections, pathological conditions, and underlying causes. It also incorporates knowledge and theories about the non-physical, non-material aspects of human physiology. The alternative approach generally promotes the idea that the human body has an innate ability to rebalance and heal any disease that develops, and therapeutic modalities are designed to enhance and support this process.

Music, Art, Dance, Recreational, and Horticultural Therapy

These types of alternative therapies are designed to promote personal expression and social interactions based on the concept that recovery from disease and maintenance of health are enhanced through channels providing emotional and nonverbal expression, or through interaction with nature. Such therapies have historically been provided as part of institutional rehabilitation programs, but are not commonly seen today.

Acupuncture/Acupressure

Acupuncture is a type of traditional Chinese medicine (TCM) and is based on the theory that there is a life force called Qi (Chi) that flows throughout the body in channels called meridians. In TCM, it is believed that illness or
disease occurs when the flow of Qi is obstructed, unbalanced, deficient, or excessive, and TCM seeks to normalize and regulate the Qi. Acupuncture and acupressure can be used for relief of pain and other symptoms, and then often continued to maintain balance and increase health. Acupuncture techniques use needles, while acupressure uses specific pressure to stimulate points of the body where meridians exist in order to promote the proper flow and balance of Qi throughout the body.

**Herbal Medicine**

In American Indian and Alaska Native cultures, as well as other indigenous cultures around the world, it is believed that plants and herbal remedies possess certain qualities and energies that provide support to the body while it balances and heals itself.

**Chiropractic Care**

Chiropractic care is based on the theory that humans are integrated beings and that body systems and emotions are interrelated. The practice revolves around the idea that health is affected by alignment of spinal structures, and that improperly aligned structures negatively impact various body systems. Properly aligned structures promote proper functioning of body systems, thereby supporting the body's ability to maintain health and immunity.

Chiropractic care attends to physiological and biochemical aspects of the body by evaluating structural, spinal, musculoskeletal, neurological, vascular, nutritional, emotional, and environmental relationships of body systems. Therapy is often sought for relief of pain related to back and neck injuries, and is usually continued to promote balance and health. Treatment methods include adjustment and manipulation of spine and adjacent structures, heat (diathermy), cold (ice), ultrasound, and percussion on trigger points.

**Massage and Healing Touch**

The term “massage therapy” encompasses many different techniques but, in general, therapists press, rub, and otherwise manipulate the muscles and other soft tissues of the body. People use massage for a variety of health-related purposes, including relieving pain and muscle tension,
rehabilitating sports injuries, reducing stress, promoting relaxation, soothing anxiety and depression, and aiding general wellness.

Sometimes integrated into massage therapy and sometimes practiced on its own, Healing Touch is an energy therapy in which practitioners consciously use their hands in a heart-centered and intentional way to support and facilitate physical, emotional, mental, and spiritual health. The goal of Healing Touch is to restore balance and harmonies in the energy system, helping the individual to a place where they can self-heal.

Visualization and Guided Imagery

Visualization and guided imagery are mind-body techniques used by a practitioner to help an individual relax and focus the mind on creating feelings (or an intention) of wellness. Visualization occurs when an individual spends time imagining something that they wish to create, or a situation or a relationship happening in a particular way. Visualization can include other senses besides just pictures, such as sounds or smells. Guided imagery involves listening to a practitioner as they lead an individual through a visualized experience designed to promote relaxation, reduce stress, and access inner wisdom.

Comparable services must be considered for this service. The participant should seek financial support from other sources, such as the Tribal health clinic, behavioral health services, and their health insurance. If funds are not available from other sources within a reasonable amount of time, only then can TVR pay for services. Efforts to obtain funding through other sources must be documented in the case file.

Maintenance

In TVR, maintenance means services to assist a participant to pay for expenses, such as food, shelter, and clothing, that are in excess of their normal living expenses and that are necessitated by the individual’s participation in assessment or while receiving services listed in the IPE. Maintenance services are not for the purpose of relieving poverty or providing participants with the standard of living that they may be used to or desire. Although it may be tempting to provide “social services” under the guise of maintenance, it is simply not an allowable cost. It is recommended that
TVR programs develop policies regarding maintenance and revise those policies as situations arise. Other sources of funding must be considered for this service and should be documented in the case file.

Examples of maintenance services are short-term lodging and meal costs while receiving specialized tests at an out-of-town medical center or participating in training located across the state, moving costs for a participant who accepted a job in another town, and uniform or clothing necessary for a job or job search.

**Transportation**

Transportation services are the travel expenses necessary for a participant to be able to participate in TVR services listed in the IPE. This also includes training in the use of public transportation systems if a participant needs it for services in the IPE. All forms of transportation should be considered as well as the use of the most cost-effective and efficient methods. Sometimes a participant wants their car fixed when their job and other services are within walking distance or on the shuttle or bus line. A program needs to develop policies regarding transportation and revise those policies as situations arise. Policies could include car repair and an order of consideration for transportation methods (i.e., walking before shuttle, shuttle before car, and car before taxi). Other sources of funding must be considered for this service and are to be documented in the case file.

**Personal Assistance Services**

Personal assistance services are TVR services provided in the IPE that are designed to assist a participant to perform daily living activities on or off the job. These daily living activities are ones that they would be able to do without assistance if they did not have a disability. Services must be necessary to participate in the TVR activities listed on the IPE for the achievement of the employment outcome, and are meant to increase an individual’s sense of control in life and their ability to perform everyday activities on or off the job. Evaluations documenting the need for personal assistance services can be performed by a physician, occupational therapist, physical therapist, or other appropriate professional who has the knowledge, skill, and expertise to make those determinations.
When a TVR counselor and participant decide that personal assistance services are required, they need to consider (a) what services are being provided, (b) who is currently providing personal assistance services for the participant, (c) when (e.g., morning, evening, all day) and for how many hours the services are being provided, (d) how the services are currently being funded (e.g., Medicaid, other medical insurance), and (e) technology or a simple modification that could be used instead of a personal assistant to complete some or all tasks. The counselor needs to document the answers to the considerations listed above and begin a discussion with the participant about possible solutions to personal assistance needs. There may be times when the TVR counselor and participant can discover ways to meet the participant’s personal assistance needs without having to pay someone.

Other sources of funding must be considered for this service and should be documented in the case file. When personal assistance services are being provided on an ongoing basis by another resource, such as Medicaid, prior to the participant’s involvement in an IPE, that resource could be considered as a possible comparable benefit. Finally, the provision of personal assistance services is not contingent upon the individual’s economic need status.

**Interpreter and Reader Services**

Interpreter and reader services can increase the effectiveness of communication for participants for whom communication is a barrier. Interpreter services include sign language or oral interpretation services for individuals who are deaf or hard-of-hearing, and tactile interpretation services for individuals who are deaf-blind. Interpreter services also include translation services provided to non-English speaking individuals during all phases of the rehabilitation process, including the grievance process.

Reader services can be provided for individuals who are blind or have visual impairments. Reader services can include reading print materials to the participant; taking, reading, or recording class or training notes; recording textbooks or other printed materials; writing or typing participant responses during tests or written examinations; reading work-related materials for a participant in an employment setting; and other similar services.
Other sources of funding must be considered for this service and should be documented in the case file. For example, many states have agencies that specifically provide VR services for individuals who are blind or have visual impairments, or whose services may be combined with the general state VR agencies. Services must be provided by qualified providers, and participants must be informed of their options for informed choice before services and providers are selected.

**Rehabilitation Teaching Services and Orientation and Mobility Services**

Rehabilitation teaching is a comprehensive service for individuals who are blind or have visual impairments that involves training to assist participants in achieving their maximum levels of functioning in areas such as communication, home management, personal management, use of low vision aids and other adaptive devices, and financial management. These services are customarily provided in the individual’s home, at a private agency serving individuals who are blind, in a school, at the TVR office, or in another community setting. Other sources of funding must be considered for this service and should be documented in the case file.

Orientation and mobility services are the teaching of concepts, skills, and techniques necessary for a person who is blind or has a visual impairment to travel safely, efficiently, and confidently through any environment and under all environmental conditions and situations. Orientation and mobility services may include basic orientation concepts of body awareness and geometric shapes; use of reference systems to increase safety, independence, and confidence; and a primary travel system using residual vision, sighted guide, long cane, guide dog, electronic vision enhancement systems, prescribed low-vision aids, or a combination of the above. Usually a referral for these services should be made to the state VR agency that serves participants who are blind or have visual impairments because these agencies have the specialized expertise and resources.

**Occupational Licenses, Tools, Equipment, and Initial Stocks and Supplies**

The TVR program can help participants purchase permits, licenses, or other certification required by the Tribe, city, county, state, or other
governmental unit that must be obtained in order to enter into an occupation, own a business, or work in a particular area or field. Occupational and professional licenses are provided as part of the rehabilitation plan to increase the individual’s prospects for employment or in self-employment. Prior to developing an IPE with a goal that would require special licensing, it is important to first determine whether conditions exist that would prohibit the individual from securing the necessary license (e.g., previous criminal convictions). Other sources of funding must be considered for this service and should be documented in the case file.

Initial stocks and supplies are defined as the initial inventory of merchandise or goods necessary for direct resale or for further preparation for direct resale. They may be tools and equipment that are required for employment or starting a small business. Equipment can include things such as fixtures, apparatus, machinery, or appliances, but does not include things such as automobiles, buildings, or land. It may be worth considering development or refinement of a program policy around the ownership of property purchased under this service, especially if a participant does not follow through with the IPE services or an employment outcome.

Technical Assistance and Consultation Services

Technical assistance is used for participants whose employment outcomes involve self-employment, telecommuting (working from home), or small business ownership. Technical assistance services include consulting services to conduct market analyses and business forecasting, developing business plans, and providing additional resources. Other sources of funding must be considered for this service and should be documented in the case file.

Rehabilitation Technology

Rehabilitation technology, including telecommunications, sensory, and other technological aids and devices, is a TVR service that uses technology to meet participant needs and address employment barriers in areas such as education, rehabilitation, employment, transportation, independent living, and recreation. The term includes rehabilitation engineering, assistive technology (AT) devices, and assistive technology services. The
purpose of rehabilitation technology is to eliminate barriers and enhance opportunities in many areas of participants' lives. Although no comparable services are required for rehabilitation technology, they can still be sought if available or needed.

For RSA reporting purposes, AT can be anything that helps to increase, maintain, improve, or recover a participant’s functional capacities in mobility, work tolerance, communication, self-care, interpersonal skills, self-direction, and work skills. It is important that identifying AT solutions be a collaborative effort between the participant, the TVR counselor, and other professionals who have an understanding of the participant’s disability and environment(s) and the most appropriate options. AT services include a broad range of low-tech (e.g., handheld magnifiers, large-print text, canes and walkers, color overlays for reading materials) to high-tech solutions (e.g., power wheelchairs, communication devices, voice-activated telephones, and talking boards).

ASSISTIVE TECHNOLOGY CASE STUDY

Sophie is a slow reader who believes that she will benefit from text-to-speech software that reads books out loud. How do you know if she would really benefit and, if she would, which software would work the best?

First, it is important to determine the reason(s) why Sophie is a slow reader. Does she have dyslexia, a small vocabulary, difficulty seeing words on a screen or in a book, or trouble sounding out words? Does she have other needs associated with this struggle, such as difficulty writing? Having the answers to these questions will help identify the right tools, for example, text-to-speech software or perhaps something simpler like changing the colors on her computer screen.

Second, Sophie’s personal preferences must be considered. Perhaps she does not want others in her workplace to know that she experiences a disability. This would mean coming up with a solution that is not obvious to others. Instead of text-to-speech software, perhaps she would be helped by listening to an audio version of a book while following along in the print version.

Working through the pros and cons of each option with Sophie will help to identify the most appropriate one for her, and getting guidance from experts in the field can also be very helpful.
Transition Services

All students with 504 plans or IEPs in public schools are required to have a free and appropriate public education (FAPE). A 504 plan is developed from requirements in Section 504 of the Rehabilitation Act, which states that a child who has a disability and is attending an elementary or secondary educational institution must have equal access to the learning environment and supports and accommodations that will foster academic success. An Individualized Education Program (IEP) is a plan that is developed for public school students who are eligible for special education and who need specialized services.

TVR programs work as part of a transition team with the school district to ensure that the transition from school to post-high school endeavors is as seamless as possible. Also, following the signing of the Workforce Innovation and Opportunity Act in 2014, TVR programs cannot provide pre-ETS services to students, which are generally services that are provided before eligibility determination, such as job exploration counseling, work-based learning experiences, and career and higher-education counseling.

If the TVR program did include transition in the program services to be provided, possible services could include education and training, finding employment, and facilitating independence. After a student is determined eligible for services, TVR’s role is primarily one of planning and preparing for when a student graduates or exits the school system. Communication and collaboration between schools and TVR will help in the provision of services and the participant’s movement into employment.

Successful transition planning involves a transition team—made up of the student, a parent or representative, the school district’s special education program representative, the TVR counselor, and other individuals from like-service programs that will support the student after high school—to encourage students and their families to think about goals for life after high school and develop plans to get there. Transition is a
collaborative process that is student-centered and student-driven. It is a balance between independent living skills training and vocational skills training that involves the family, educational partners, community resources, and other networks of support. Transition is an integral part of the education and rehabilitation process and is based on the individual needs, interests, and preferences of the student. Effective transition planning happens as early as possible and it can assist the student to develop the skills and attitudes necessary to work and live in the community. Transition planning and services can be a flexible, multi-year process that includes the student. Other sources of funding must be considered for this service and should be documented in the case file.

The Jemez Pueblo TVR Program, which has great success working with transition-aged youth, recommends several procedures for setting up transition services, including establishing contacts within local schools; providing potentially eligible students and their parents or representatives information about the purpose of TVR and the scope of services, application procedures, and eligibility requirements; arranging initial interviews with students (and their parents or representatives) interested in TVR services; making eligibility determinations in a timely manner; and coordinating as closely as with possible with the student’s IEP when developing the TVR IPE goals and services.

**Supported Employment and Customized Employment**

Supported employment is a TVR service that provides participants who experience the most significant disabilities with ongoing services via a job coach or other professional in order that participants will be able to succeed in competitive, integrated employment. This service is intended for individuals for whom competitive employment has not traditionally occurred, or for whom competitive employment has been interrupted or intermittent as a result of significant disabilities. Under an IPE, supported employment services can be provided for a period of time not to exceed 24 months, unless under special circumstances the participant and the counselor jointly agree to extend the time to achieve the employment outcome identified in the IPE. Supported employment services can also be provided as post-employment services when they are unavailable from an extended
services provider and are necessary to maintain or regain employment or advance in employment.

Supported employment services can include (a) necessary additional assessments at the work site; (b) job coaches at the work site; (c) job development and placement; (d) social skills training; (e) regular observation or supervision; (f) follow-up services with individuals, employers, parents, family members, advocates, and other authorized persons; (g) facilitating and securing natural supports at the work site; and (h) other support services at or away from the work site, such as transportation and personal assistance services.

Customized employment stems from a more recent initiative by the Department of Labor that involves the tailoring of a job that meets the unmet needs of an employer and the unique strengths of an individual with a significant disability, through personalizing the employment relationship between a job candidate or employee and an employer. Customized employment is competitive, integrated employment for an individual with a significant disability that is (a) based on an individualized determination of the participant’s unique strengths, needs, and interests; (b) designed to meet the specific abilities of the individual and the business needs of the employer; and (c) is carried out through flexible strategies, such as customizing a job description, a work schedule, a job location, and the specifics of supervision (including performance evaluation and review).

In both supported and customized employment, the IPE must include a description of the extended services needed to support the continued employment success of the participant following the closure of the case. A plan for extended services created by the counselor and the participant must be in place. When including either supported or customized employment in the IPE, all other sources of funding must be researched, with findings documented in the case file.

**Advanced Training**

Advanced training can be provided to participants allowing them to pursue higher education in the fields of science, technology, engineering, mathematics (including computer science), medicine, law, or business. This TVR service is a more recent addition that reflects the workforce-driven focus of
TVR services. Other sources of funding must be considered for this service and should be documented in the case file.

**Services to the Family**

These are TVR services that are provided to family members of a participant when it is found that their support is necessary to aid the applicant or participant to achieve an employment outcome. The purpose of providing services to family members is to alleviate issues within the family that have an impact upon the participant’s adjustment or rehabilitation. Considerations include investigating the extent to which the participant would be unable to begin or continue in their IPE services or employment, IPE services would be unnecessarily delayed, or the employment outcome would not be achieved without family support. Other sources of funding must be considered for this service and should be documented in the case file.

TVR programs should consider developing policy around this TVR service. The federal definition of a family member means an individual who either is a relative or guardian of an applicant or eligible individual or lives in the same household as an applicant or eligible individual, and who has a substantial interest in the well-being of that individual and whose receipt of vocational rehabilitation services is necessary to enable the applicant or eligible individual to achieve an employment outcome. It is important to consider that the federal definition of family may not match the uniqueness of a Tribal community. Policy may also include information about the duration of services to family members. Services to a family member could include any of the TVR services available to participants during the TVR process.

The following are examples of services to families:

- **Childcare:** A participant is unable to engage in vocational training (which must begin in July or be delayed indefinitely) because she has no one to care for her two young children while elementary school is out of session. This participant is unable to pay for day-care services and is not eligible for temporary assistance. After an unsuccessful search of community resources, the TVR counselor has arranged to
pay for summer day care, thus enabling the participant to participate in the needed training.

- **Self-Employment:** A participant whose goal is self-employment as a food vendor recently indicated that his spouse is needed to assist in the business. The counselor may provide the spouse with training in business practices, accounting, or related topics to enable the spouse to support the participant in the business.

- **Family Counseling:** A participant who has struggled with addiction but is now 12 months sober has applied for TVR services and is ready to develop and begin an IPE. The rehabilitation process is being delayed, however, because of the participant’s concern for her spouse, who is having difficulty adjusting to her move toward greater independence. Counseling services may be provided to the spouse or to the couple to assist in their adjustment to the participant’s efforts toward rehabilitation.

### Post-Employment Services

Post-employment services (PES) include any TVR services necessary to assist a participant to retain, regain, or advance in employment after an IPE has been completed. Information about post-employment services can be found in the state VR regulations at 34 CFR § 361.46 and 34 CFR § 361.6.

When developing the IPE, be sure to indicate whether any post-employment services are anticipated after the participant starts working. Post-employment services should be limited in scope and duration, and should not be complex or comprehensive. If it looks as if they will be complex or comprehensive, a new IPE should be considered. Post-employment services that were not specified in the original IPE require an IPE amendment, but redetermination of eligibility is not required.

### Examples of Post-Employment Services

- A participant contacts the counselor because they fear that their job is in jeopardy. They have been having conflicts with supervisors or co-workers and feel that they need some coaching to deal with the conflict and maintain employment.
A participant finds that he is being required to attend a lot of meetings and is expected to take notes during the meetings. Because of his dyslexia, he is having difficulty with this. The participant asks for help with talking with the employer to find a solution so that he can maintain employment.

A participant’s job has been eliminated because of reorganization. Job placement services are needed to help them find a new job related to the original IPE employment outcome.

**Culturally-Specific Services**

Culturally-specific services (also known as traditional services) are any services for a participant that reflect the cultural background or practices of the participant being served and that are necessary to support the removal of barriers and successful employment. Culturally-specific services reflect a key difference between TVR and state VR programs. TVR programs operate with cultural understanding and values that are a foundation for providing services for employment success, and that offer a greater understanding of the local, cultural, and familial needs of American Indian and Alaska Native participants. Every Tribal nation, community, clan and/or family will have their own unique practices for healing, so it is difficulty to give an exhaustive list, but some examples of traditional healing practices include, but are not limited to, ceremonies, medicines, events, and/or protocols.

Other sources of funding must be considered for these services and should be documented in the case file.

Services to participants that are culturally-specific are mentioned in a few different places in 34 CFR § 371.

34 CFR § 371.41(a)(2) states that expenditures for services can reflect the cultural background of the American Indians [and Alaska Natives] being served, including treatment provided by native healing practitioners who are recognized as such by the Tribal vocational rehabilitation program, when the services are necessary to assist an individual with disabilities to achieve his or her vocational rehabilitation objective.
34 CFR § 371.6(xvii) states that physical and mental restoration services include services reflecting the cultural background of the American Indian [and Alaska Native] being served, including treatment provided by native healing practitioners in accordance with 34 CFR § 371.41(a)(2).

**DISCUSSION QUESTIONS**

- What referrals do you make regularly in your TVR program?
- What potential referral sources are missing in your area? How do you handle that lack of resources when a participant has a need?
- Why might referral to state VR services be problematic for a TVR participant? Why might this occur even if it is not the best fit?
- Why might showcasing a “menu” of TVR services be problematic for a program?
- Why do you think encouraging advanced training is included in the required list of VR services found in the CFRs?
- How could you use your guidance and counseling skills to help someone (who does not like asking for help) advocate for themselves better?
- How often do you find yourself helping participants adjust to their limitations and find their strengths?
- What would you say is the most important component of counseling and guidance?
- What is your experience using or arranging for an interpreter or reader service?
- Which of your program’s materials are available in other languages or alternate formats?
- How regularly do you provide job-related services to your participants?
- What are your thoughts about using alternative treatments to address impairments?
- What kinds of alternative therapy modalities do you refer participants to? What have you found to be the most successful for participants?
• What kind of beliefs and attitudes exist around alternative therapies in your program and/or community? What other cultural beliefs or modalities do you see participants engaging in that might be considered alternative therapies?

• What is an example of a time your program provided maintenance services for a participant?

• What are some examples of when you would see occupational expenses in a participant's IPE?

• What is an example of when having policies and procedures around occupational expenses would be helpful?

• Does your TVR program have a property or ownership agreement? How do you enforce that agreement if the participant does not stay in compliance with the terms set out in the agreement?

• How does your program make arrangements for the state VR agency to provide pre-employment services (pre-ETS) to Tribal students in preparation for transition?

• What are your program's policies on car repair?

• If your program provides cell phones for participants who are doing job search activities, what are your program's policies regarding this?

• How might you determine that a person needs personal assistance services? What types of agencies or programs in your community provide these services?

• How does your program arrange for personal assistance services?

• Why might guidance and counseling be an important part of post-employment services?

• In what circumstances would the need for post-employment services mean that a new IPE is needed?

• What would you do if a participant came back and requested post-employment services that were going to be very costly and take a long time?

• Have you worked with a participant who could have benefitted from rehabilitation teaching? Describe what services you would have put in place for them.

• What kind of rehabilitation technology services have you used with your participants?

• What is an example of using assistive technology to help a participant find work?

• How can you learn more about creative assistive technology solutions?
• Have you used family services to assist a participant be successful in work? What is an example of a time when services to a participant’s family member(s) were useful and appropriate?

• What is your experience providing services to transition students?

• How challenging is transportation for Tribal members in your community?

• How do you handle payment or reimbursement for gas in your program?

• Why might a participant choose to go to a Tribal college rather than a mainstream college?

• What options do you have for education and training in your area? What do you do when the option a participant wishes to pursue is not in the local area?

• How do you help participants work through covering the costs for higher education and training? What tools and strategies do you use?

• Why do you think TVR services for a participant’s family are a typical IPE service? What purpose do you think they serve?

• How often do you think family members are involved in a participant’s small business enterprise?

• What culturally-specific services does your TVR program offer to participants? How do you share these options with participants?

• What do you do when there are participants who are from a different Tribe who desire culturally-specific services?

• Apart from culturally-specific services, in what way is your TVR program grounded in Tribal culture?
In addition to the individual TVR services listed in the section above, TVR services can also be provided for the benefit of groups of individuals with disabilities. In order to provide services to groups of individuals, the TVR program must develop policies covering the nature and scope of these services as well as maintain data related to the types of services provided, the costs of the services, and estimates of the numbers of individuals benefitting from the services. More information can be found at 34 CFR § 361.49. Services to groups of individuals with disabilities can include (a) small business assistance, (b) community rehabilitation programs, (c) telecommunications systems, (d) nonvisual access to information, (e) technical assistance to businesses, (f) transition consultation and technical assistance, (g) transition services, (h) assistive technology services, and (i) support for advanced training.

Small Business Assistance

TVR programs can provide assistance to small businesses operated by individuals with significant disabilities under the supervision of the TVR program. These services can include management services and supervision by the TVR program, the acquisition of vending facilities or equipment, and initial stocks and supplies.

Community Rehabilitation Programs

TVR programs can establish, develop, or improve a community rehabilitation program (CRP) that is used to provide TVR services that promote integration into the community and that prepare individuals with disabilities for competitive integrated employment, including supported employment and customized employment. These services can also include, under special circumstances, the construction of facilities.
Telecommunications Systems

The TVR program can provide telecommunications systems and programming, including telephone, television, video description services, satellite, tactile-vibratory devices, and similar systems that have the potential for substantially improving TVR service delivery methods.

Nonvisual Access to Information

The TVR program can provide nonvisual access for individuals who are blind, including (a) the use of telecommunications, braille, sound recordings, or other appropriate media; (b) captioned television, films, or videos for individuals who are deaf or hard-of-hearing; (c) tactile materials for individuals who are deaf-blind; and (d) other special services that provide information through tactile, vibratory, auditory, and visual media.

Technical Assistance to Businesses

TVR programs can provide technical assistance to businesses that are seeking to employ individuals with disabilities. This service involves the TVR program assisting businesses to understand their business needs and providing businesses with customized services. TVR programs can help the employees of a business become more knowledgeable of key disability issues through awareness and education, help fill open positions with qualified job seekers who experience disabilities through hiring and retention assistance, help evaluate workplace accessibility, assist with job descriptions and recruitment processes to remove barriers, provide training and accommodation assistance, and provide information about federal requirements and potential financial incentives for hiring individuals with disabilities.

Transition Consultation and Technical Assistance

TVR programs can provide consultation and technical assistance services to help Tribal, local, and state educational agencies plan for the transition of youth and students who have been eligible for TVR services from school to postsecondary life, including employment.
Transition Services

The TVR program can provide transition services to youth and students who have been determined eligible for TVR services. This means time dedicated for TVR counselors to coordinate and work with Tribal or local public schools, providers of job training programs, providers of services under the Medicaid program, entities designated to provide services for individuals with intellectual and developmental disabilities, centers for independent living, housing and transportation authorities, workforce development systems, businesses, and employers.

Assistive Technology

The TVR program can establish, develop, or improve assistive technology demonstration, loan, reutilization, or financing programs in coordination with activities authorized under the Assistive Technology Act of 1998 to promote access to assistive technology for individuals with disabilities and their employers.

Support for Advanced Training

TVR programs can provide support (including, as appropriate, tuition) for advanced training in a field of science, technology, engineering, or mathematics (including computer science), medicine, law, or business. Individuals must (a) demonstrate previous completion (or scheduled completion) of a bachelor’s degree program, and (b) be accepted at an institution of higher education in the United States that confers a master’s degree in a field of science, technology, engineering, or mathematics (including computer science); a juris doctor degree; a master of business administration degree; or a doctor of medicine degree.

DISCUSSION QUESTIONS

- Has your program ever offered services to groups? What did that look like?
- When reviewing the list of TVR services for groups, what services do you think could be offered through your TVR program?
Vendors and Programs
Providing TVR Services

The IPE must include a description of the entity or vendor chosen by the participant that will provide TVR services. The participant has the choice of available vendors and providers through informed choice. Service providers or vendors could include the Tribal substance abuse treatment program, the Tribal clinic, a local store for tools, or a local counselor. The IPE must also list the methods used to procure the services, such as how services will be paid for and which provider or agency will be responsible for the costs.

Comparable Services and Benefits

This section describes the expectations for TVR programs to find other resources of funding when providing TVR services. This practice improves partnerships between service providers and also helps more participants to receive services with TVR program funds.

Comparable Services Overview

Title 34 CFR § 371.21(h) states, “Any similar benefits available to American Indians with disabilities under any other program which might meet in whole or in part the cost of any vocational rehabilitation service will be fully considered in the provision of vocational rehabilitation services in accordance with 34 CFR § 361.”

Explanation for TVR: A counselor must consider comparable services and benefits for all planned services. The exception to this is the six “exempt” services noted below.
Comparable Services Defined

According to 34 CFR § 371.6, comparable services and benefits must meet the following criteria:

Services and benefits that are

a) Provided or paid for, in whole or in part, by other federal, state, or local public agencies, by health insurance, or by employee benefits;

b) Available to the individual at the time needed to ensure the progress of the individual toward achieving the employment outcome in the individual’s individualized plan for employment in accordance with 34 CFR § 361.53; and

c) Commensurate to the services that the individual would otherwise receive from the designated state vocational rehabilitation agency.

For the purposes of this definition, comparable benefits do not include awards and scholarships based on merit.

Explanation for TVR: Comparable services are any services in an IPE that are paid (all or in part) by another program, business, or entity. Examples include health insurance, financial aid, reduced fees, Tribal higher education funds, or free services from other businesses. This does not include money or scholarships received by a participant for special recognition of their talents and efforts.

Reasons to Not Use Comparable Services

Title 34 CFR § 361.53 states the following reasons for not using comparable services:

a) Determination of Availability. The state plan must assure that, prior to providing any vocational rehabilitation services (except those services listed in paragraph (b) of this section) to an
eligible individual or to members of the individual’s family, the state unit must determine whether comparable services and benefits, as defined in 34 CFR § 361.5(b)(10), exist under any other program and whether those services and benefits are available to the individual, unless such a determination would interrupt or delay

1. The progress of the individual toward achieving the employment outcome identified in the individualized plan for employment;

2. An immediate job placement; or

3. The provision of vocational rehabilitation services to any individual who is determined to be at extreme medical risk, based on medical evidence provided by an appropriate qualified medical professional.

Explanation for TVR: TVR programs are required to use comparable services unless seeking them out would interrupt or delay the progress of the IPE or an immediate job placement, or if there is extreme medical risk and waiting to secure comparable services could put a participant’s well-being and health in jeopardy.

**Exempt Services**

The following vocational rehabilitation services described in 34 CFR § 361.48(a) are exempt from a determination of the availability of comparable services and benefits under paragraph (a) of this section:

1. Assessment for determining eligibility and vocational rehabilitation needs.

2. Counseling and guidance, including information and support services to assist an individual in exercising informed choice.

3. Referral and other services to secure needed services from other agencies, including other components of the statewide workforce investment system, if those services are not available under this part.
4. Job-related services, including job search and placement assistance, job retention services, follow-up services, and follow-along services.

5. Rehabilitation technology, including telecommunications, sensory, and other technological aids and devices.

6. Post-employment services.

**Provision of Services**

Regarding the provision of services, 34 CFR § 361.53 states:

1. If comparable services or benefits exist under any other program and are available to the individual at the time needed to ensure the progress of the individual toward achieving the employment outcome in the individual’s IPE, the designated state unit must use those comparable services or benefits to meet, in whole or part, the costs of the vocational rehabilitation services.

2. If comparable services or benefits exist under any other program, but are not available to the individual at the time needed to ensure the progress of the individual toward achieving the employment outcome in the individual’s IPE, the designated state unit must provide vocational rehabilitation services until those comparable services and benefits become available.

   **Explanation for TVR:** Comparable services must be used if they are available. If they are not available when needed, TVR funds can be used until comparable services can be obtained.

**Interagency Coordination**

Title 34 CFR § 361.53(d) and (e) discuss interagency coordination and the development of agreements, including the necessary follow-through for providing services and accommodations to participants.

   **Explanation for TVR:** Tribal leaders, in partnership with TVR
programs, should ensure the formation of interagency coordination or agreements with other programs or agencies (such as Medicaid, institutions of higher education, the workforce development system, or Tribal clinics) to ensure that services and accommodations are available to participants. If, after an agreement has been formed, the other party cannot pay for the services right away, the TVR program can pay for the services and later claim reimbursement for the services from the other agency.

**DISCUSSION QUESTIONS**

- What are some examples of comparable services that you currently use or have researched?
- Why do you think there is a requirement to use and document comparable services in TVR?
- What is an example of a time that you decided not to seek out comparable services because your participant needed the service right away?
- What are some examples of “outside the box” comparable services that could be used?
- How do you document comparable services in the case notes?
- What comparable services are available to Tribal and community members in your community?
- How do you protect participant confidentiality when purchasing services?

**Cost of Services**

In this section of the IPE, the projected cost for each service is listed. It is important for the TVR counselor to be mindful of the costs of services in the IPE to make sure that they are reasonable and allowable, and that there are program funds and comparable services in place to cover the planned
costs. It may be necessary to meet with the TVR program director to discuss the projected costs before finalizing the IPE, and then have a follow-up meeting with the participant if changes need to be made.

**DISCUSSION QUESTIONS**

- How do you get program approval for the service costs that are listed in the IPE?
- How do you ensure that there are TVR program funds available to cover anticipated costs included in the IPE?
- On your caseload, how often do participants cover part of the cost of services?

**Flexible Procurement Methods**

The IPE requires that a procurement method be listed for each TVR service. A procurement method is the way that a service or item to support the provision of a service is purchased. Procurement methods are usually set by the Tribe’s accounting office, although it may be possible that additional methods can be set up in order to make purchases smoother and easier for participants.

Flexible procurement methods are about ensuring participant informed choice when it comes to the purchasing of VR services, within the options that are set in place by the accounting office. TVR programs should develop and implement flexible procurement policies and methods that facilitate the spending of TVR funds for participant services, including providing options for how different services can be purchased. This way, participants can make choices that work best for them. Methods of procurement can include Tribal purchase orders or vouchers, credit cards, checks written from bills or invoices, and store accounts. Additional flexibility may be needed for the purchase of cultural services, as the practitioner may not
wish to be paid for their time but prefer to have items purchased that can support the cultural service or the practitioner’s expenses.

It is important to note that if the procurement method includes the use of the participant’s name and contact information by the accounting office or the vendor, the participant must sign a release of information before such information is provided. There may also be exceptions or particular procedures in place at the Tribal level for compensation to traditional healers or supplies for ceremonies included in a participant’s IPE.

**DISCUSSION QUESTIONS**

- How might a TVR program ensure informed choice for participants for purchasing services?
- Why do you think the regulations require flexible procurement methods for TVR services?
- What options or choices do participants have in your program when it comes to purchasing services?

**Measuring IPE Progress**

Monitoring progress and taking stock of how activities are progressing with a TVR participant on a regular basis is an important part of ensuring that a participant is on track with the IPE goals and activities. The IPE must include a description of criteria to evaluate progress toward achievement of the employment outcome at specific intervals or after the completion of specific activities. This aspect of the IPE helps the participant and
the counselor to objectively know that progress is being made toward the employment outcome. It is also a way to celebrate successes along the participant’s journey.

The criteria for the “Measuring Progress” part of the IPE include a description of specific goals, milestones, or components that are attained and that lead to successful achievement of the employment outcome. The evaluation of progress is a required element of the IPE as outlined in the Rehabilitation Act and must be documented in the case notes.

**Considerations for Monitoring Progress**

It is important to make sure that participants understand the progress they have made and how it relates to becoming successfully employed. Consider breaking down milestones into percentages or smaller steps so that there is more of an opportunity to celebrate progress and also a chance to share feedback and problem-solve. Work to ensure that participants understand why progress has happened, or not happened, so that they can learn more about how their actions contribute to their progress or achievements. This also means discussing the key elements to their success, such as how focused, determined, and motivated they are; what they have learned; how badly they want change; and what new behaviors and habits they have put into place.

**SMART Goals**

SMART goals can be used in the IPE to guide the evaluation of progress. SMART goals are clear and inspirational ways to write goal statements so that they have the most impact and meaning possible. For the IPE, SMART goals would be the smaller steps to reach the employment outcome. SMART goals include an element from each of the following:

**S**—specific, significant, stretching

What does the participant want to accomplish?

What actions will be required to do this?

**M**—measurable, meaningful, motivational

How will the goal be measured?
A—agreed upon, attainable, achievable, acceptable, action-oriented

Is it possible to reach the goal?
What resources are necessary to reach the goal?

R—realistic, relevant, reasonable, rewarding, results-oriented

How does the interim goal contribute to the achievement of the overall goal?

T—time-based, time-bound, timely, tangible, trackable

What is the timeline or duration for reaching the goal?

The following are examples using SMART goals to measure IPE progress:

- Measuring attendance at training: Julie will attend 18 of her 20 classes for the duration of her Certified Nursing Assistant training.

- Measuring completion of training: Robert will earn his commercial driver’s license by June 12, 2020.

- Measuring participation in TVR: Dawn will be on time for her TVR counseling appointments 75 percent of the time.

- Measuring compliance with treatment: Jerry will turn in all of his monthly outpatient reports to his TVR counselor by the second week of each month from June to October.

- Measuring completion of paperwork for higher education: Leslie will turn in her FAFSA paperwork before the school’s recommended deadline of April 1, 2020.

- Measuring the research of comparable benefits: Louis will check in with his Tribe’s Contract Health Services by July 15, 2020, to see if they can pay for his new eyeglasses.
DISCUSSION QUESTIONS

• How do you measure IPE progress in your TVR program?

• Why do you think SMART goals might be useful to consider when developing measurements for IPE progress?

• What do you think could maximize the effectiveness of the “Measuring Progress” section of the IPE?

IPE Terms and Conditions

The “Terms and Conditions” section of the Individualized Plan for Employment (IPE) includes information about the responsibilities of key entities involved in the services needed to help a participant reach their employment outcome. Terms and Conditions are a required element of the IPE as outlined in the Rehabilitation Act.

Responsibilities of the Participant

The responsibilities of the participant in relation to the employment outcome are to be included in the “Terms and Conditions” section. Participant responsibilities can include elements such as satisfactory progress and follow-through to complete services, paying for one or more specific services in the IPE, checking in regularly with the counselor, and applying for and securing comparable benefits. It is best to be very specific and clear when describing progress, follow-through, and costs covered by the participant.
Responsibilities of the TVR Program

This section of the IPE needs to specify the responsibilities of the TVR program in relation to activities of the IPE. These can include elements such as availability for meetings or phone calls, timeliness for arranging services listed in the plan, and requesting payment for services. It is best to be as specific as possible when describing program responsibilities.

Responsibilities of Other Entities

This section of the IPE also needs to specify the arrangements made to use comparable services or benefits, such as Tribal higher education scholarships, the provision of interpreter services through the Tribal college, or the participant’s insurance coverage.

DISCUSSION QUESTIONS

- What do terms and conditions look like in your program’s IPE?
- Why do you think it is important to be specific in the IPE terms and conditions?
- How do you explain IPE terms and conditions to participants?

Planned Extended Services for Supported Employment

If the TVR counselor knows that a participant will need support in the employment setting following the provision of services and the achievement of the employment outcome, the IPE must include information identifying the sources for extended services needed by the participant, along
with the sources of funding. If a source for these services is not available at the time that the IPE is developed, the IPE should at least include a note explaining whether there is a reasonable expectation that such a source will become available. Natural supports such as family members, friends, co-workers, or supervisors can be considered extended services. By providing extended services, it is assumed that the participant will be able to be employed in an integrated setting for the maximum number of hours possible.

Extended services may (a) provide for periodic monitoring by a qualified individual to ensure that the participant is making satisfactory progress toward meeting the weekly work requirement established in the IPE by the time the extended services start; (b) provide the coordination of services that were provided under an IPE by other federal or state programs (e.g., the Developmental Disability Administration or Ticket to Work program); or (c) provide ongoing job skills training if needed, with an identified provider, preferably at the work site.

**Planned Need for Post-Employment Services**

The IPE must include a description of the anticipated need for post-employment services (PES), if necessary or known. However, there may not be indication of the need for PES at the time when the IPE is written. More information on Post-Employment Services can be found in the “TVR Services to Individuals” section, on page 233, and a sample PES Plan can be found at the end of Module 6.
DISCUSSION QUESTIONS

- What could make writing an IPE challenging?
- Why do you think that certain elements are required by law and others are not?
- How are VR services typically described in your participants’ IPEs?
- What are some examples of methods used to purchase TVR services?
- Why is a description of what progress looks like important to have in the IPE?
- What do you think about a participant coming up with their own terms and conditions for their IPE?
- How can a counselor ensure that the IPE addresses everything mentioned in the eligibility determination? Why is that important?
- What happens when the family or the community are not supportive of the participant’s desire to go to work? How do you help them address such a situation?
- How do you ensure that there are TVR program funds available to cover anticipated costs included in the IPE?

Potential Assignments

1. Write a brief reflection on the programs you refer your participants to. Are they sufficient? Do you need more options? What are the barriers to increasing referral choices for your participants? Post your reflection of what is available, and discuss with your group
   a) What is available to you and what is missing;
   b) What other group members have that you would like; and
   c) Barriers to referral sources.
2. IPE practice. With a partner, practice asking questions and filling out the IPE form together. Turn in a reflection that reviews
   a) What went well in this process;
   b) What was hard in this process;
   c) What you think this process feels like as a participant; and
   d) Other reflections on this process.
<table>
<thead>
<tr>
<th>Client Name</th>
<th>Birthdate</th>
<th>Tribe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location/City</td>
<td>TVR Staff</td>
<td>Date of Plan</td>
</tr>
<tr>
<td>IPE Number</td>
<td>Expected End Date of Plan</td>
<td></td>
</tr>
</tbody>
</table>

**Client’s Employment Goal**

Personal skills, qualities, abilities and strengths that support the employment goal

<table>
<thead>
<tr>
<th>Are Personal Assistance Services needed at this time?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are Extended Services needed at this time?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are Post-Employment Services needed at this time?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are Assistive Technology Services needed at this time?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are Supported Employment Services needed at this time?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Have you received a Client Assistance Program brochure?</td>
<td>Yes</td>
<td>No</td>
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</table>

**AANG TVR Service**

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Begin Date</th>
<th>End Date</th>
<th>Cost</th>
<th>Who pays for it?</th>
<th>Client Responsibilities</th>
<th>Provider Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling &amp; Guidance</td>
<td>TVR</td>
<td>$0.00</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Culturally Relevant Service</td>
<td>Varied and at participant’s discretion</td>
<td>$0.00</td>
<td>TBD</td>
<td></td>
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TVR Counselor Signature

Date

TVR Director Signature

Date

Other Signature

Date
TVR IPE (continued)

<table>
<thead>
<tr>
<th>Initial</th>
<th>Client Statements</th>
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<tbody>
<tr>
<td></td>
<td>I have developed my individualized plan for employment or fully participated in its development.</td>
</tr>
<tr>
<td></td>
<td>I have selected the specific employment goal and services, service providers, setting and methods for arranging services.</td>
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<tr>
<td></td>
<td>My employment goal reflects my strengths, resources, priorities, concerns, abilities, capabilities, interests &amp; informed choice to result in employment in an integrated setting.</td>
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<td>My case worker has reviewed my rights and responsibilities with me.</td>
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<td>I understand that my plan will be reviewed and evaluated periodically, at least annually, as defined in the plan.</td>
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<td>If changes need to be made to my plan, my case worker and I will discuss the changes and I will sign an amendment.</td>
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<td>I understand that failure to cooperate and/or make a reasonable effort to carry out my individualized plan for employment as agreed may result in closure of my case and loss of further VR services.</td>
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<td></td>
<td>I agree to work with my case worker to look for and utilize any comparable benefits available to me.</td>
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<tr>
<td></td>
<td>By signing this plan, I intend to go to work and will accept any reasonable job offer that aligns with my vocational goal.</td>
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<td></td>
<td>I have a right to appeal any action made by the TVR Program with which I disagree. I understand I must make any dissatisfaction known to the TVR Program within 30 days of the action in question. Standard course of action will follow the TVR appeals process.</td>
</tr>
<tr>
<td></td>
<td>Client/Parent/Guardian/Authorized Representative Signature</td>
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</table>
IPE Amendment

Participant Name: ___________________________________________ Initial Plan Date: ________________
Amendment #: ______________________________

Targeted Employment Outcome: ____________________________________________

Expected Date Of Outcome Completion: _______________________________________________________________________

Are personal assistance services needed at this time? Yes ☐ No ☐
Are assistive technology services needed at this time? Yes ☐ No ☐

List all services required to achieve the targeted employment outcome, including those listed in the initial IPE.

<table>
<thead>
<tr>
<th>VR Service</th>
<th>Start Date</th>
<th>Service Provider</th>
<th>Procurement Method</th>
<th>End Date</th>
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<tr>
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All terms and conditions, rights and responsibilities are the same as those identified on the initial IPE.

_____________________________________________ Date

TVR Counselor’s Signature

I have been provided options for assistance in designing this employment plan. I have been given contact information on how to seek assistance to resolve any disputes that I have regarding the plan. I have made the choices I wanted in selecting the employment goal, the VR services, the service providers, and the methods used to obtain the services. The VR counselor and I will review the plan on the dates listed above and make any amendments that are needed. I have my own copy of this plan.

_____________________________________________ Date

TVR Participant (or Representative's) Signature
CASE MANAGEMENT

Module Description

This module presents the requirements for case record documentation, case record retention, and effective ways to organize case records to support the process from referral to case closure. The reader will be introduced to the concept and importance of the team approach in TVR programs to ensure that participant needs are addressed, as well as safety, self-care, and compassion fatigue.

Learning Objectives

At the end of this module, the reader should be able to

- List the required contents of a case record;
- Describe why it is important to have a single case record format for a TVR program;
- Describe communication strategies with participants before, during, and after IPE;
- Describe strategies for ensuring that case records meet program and legal standards, including ensuring confidentiality;
- Describe methods for gathering and reporting case record data and required common measures to RSA;
Module 5

- Describe what to include in quality case notes;
- Describe why self-care is important when working as a TVR counselor;
- Describe internal processes for ensuring continuity of services; and
- Describe how a counselor would prioritize caseload duties, such as maintaining case notes and participant meetings, as well as managing interruptions.

Case Management

Case management is a collaborative process between the TVR counselor and participants to help identify and resolve issues and barriers that are keeping participants from obtaining and maintaining employment. In case management, the counselor plays a critical role in helping guide, support, and motivate participants through the TVR process. Complete case management and organization is important to ensure that all necessary documentation, case note entries, records, and program forms are in place.

Case management activities include things such as providing comprehensive assessment, preparing and facilitating services through an IPE, holding TVR participants accountable, vetting resources, evaluating progress, partnering with other programs and providers, and documenting activity in case records. The most effective case management activities are comprehensive, integrated into the Tribal community, and supported by quality tools (e.g., assessment instruments, counseling skills) and resources (e.g., labor market information, relationships with other providers). To be effective, TVR counselors must employ a wide range of skills and tools, all of which must be supported by administrative practices and policies.

Before TVR programs were established, American Indians and Alaska Natives with disabilities had to either go to state VR or find resources on their own within their communities. These individuals often had to face
daunting obstacles to find and secure employment. During this time, many different employers, social service and health programs stepped in to help coordinate services for individuals with disabilities who wanted to work. This included doctors’ offices, physical therapists, schools, and behavioral health counselors, as well as Tribal employers that put natural supports in place to help individuals with disabilities work productively. To this day, TVR coordinates with these other providers to help individuals with disabilities obtain and maintain employment, but the case management and coordination needed for these individuals to find and secure employment is now primarily the responsibility of TVR counselors.

Coordination of Services

Case management is found in a variety of social service and medical professions. Examples include housing case managers, case managers for Elders, and nursing case managers. Usually each case manager has a specific target result. Because there are so many case managers who coordinate holistic services, partnering with other programs saves the participant and other case managers time, money, and duplication of services. Tracking systems, such as confidential databases, allow careful, ongoing monitoring and documentation of services and outcomes. Consistency among case files and record keeping allows for continuity of services and ease of access to information.

TVR counselors often have a great deal of program-level pressure for performance, accountability, and compliance, as outlined in the grant objectives. This is often related to reaching a target number of successful employment outcomes. In addition, counselors may have personal (internal) expectations about helping those on their caseloads as well as making a difference in the community. The need to provide quality services amidst these internal and external pressures is commonplace for TVR counselors. This module is intended to provide information to TVR counselors who are balancing caseload sizes with providing services to participants with the most significant disabilities, all while working with Tribal, local, state, and federal agencies.
Group Case Management

Although case management that is carried out by a TVR counselor is primarily in relation to individuals, there are times when group case management is a valuable tool. Group case management can be effective when facilitating activities such as soft skills workshops, résumé writing, talking circles, and job search support groups.

DISCUSSION QUESTIONS

- How would you describe or define case management in TVR?
- What kind of tracking system or data management system does your program use, if any?
- What do you think makes case management activities effective?
- Do you have any policies, procedures, or guidelines regarding documentation or data entry?
- How do you make your case management activities culturally appropriate?

Staffing Cases

Staffing cases with a supervisor and other program counselors and staff can be an important component of case management, and provides valuable opportunities to learn from each other and problem solve issues. Case staffing can be formal or informal, meaning that it can be scheduled on particular days of a month or week or it can happen when staff discuss cases with each other and exchange ideas for particular participants. A supervisor may also ask a counselor to staff a particular case that may be complicated, challenging, open for an excessive duration, or that they hear being discussed in the community.

When programs have formal case staffing times, counselors bring selected or urgent cases to the group and describe what is happening
in each one. The rest of the staff listen, ask questions, and provide suggestions and resources. This is also a place where important or time-sensitive events such as eligibility determination, IPE development, and employment are discussed, and outstanding items or strategies are identified and planned.

Case staffing is an excellent opportunity for new counselors and staff to learn from more experienced staff about how cases are managed, how a counselor can establish rapport and provide counseling and guidance, and how to implement strategies for working with Tribal and community partners and accessing resources. Case staffing is also helpful for experienced counselors needing ideas for working through difficult cases when they feel that they have tried everything.

**DISCUSSION QUESTIONS**

- How do you do case staffing in your program?
- What do you find to be the most helpful parts of case staffing? What parts are the least helpful?
- How do you think that case staffing can help with team building?

**Relationships with Other Programs and Case Sharing**

An important aspect of the TVR counselor’s case management role is to establish and maintain contacts within the community and the surrounding area. A counselor needs to know available resources, whom to talk to and how to access them. This is so referrals can be made and alternate funding for services and other activities can be secured. The assessment and
rehabilitation processes require a wide variety of contacts and resources, such as physicians, chemical dependency counselors, and vocational evaluators. This service coordination often involves the sharing of information (after a signed ROI is in place), assessment, providing services, cultural services, transportation, employment preparation, and placement, while being mindful of the costs of services and balancing those costs with the ability to meet the rehabilitation needs of the participant.

Counselor tasks in this area can include

- Identifying rehabilitation facilities, agencies, or programs that provide services to individuals who have disabilities;
- Establishing working relationships with Tribal and community programs, which can lead to referrals for participants;
- Monitoring participants’ progress in training programs;
- Keeping in touch with other agencies or programs providing services to participants, and partnering to problem solve when issues arise;
- Referring participants for work evaluations;
- Negotiating financial responsibilities for services; and
- Evaluating the effectiveness of services for participants.

Sharing Cases with Other VR Programs

It is important to develop and maintain good relationships with other programs that provide VR services. These could be other TVR programs in the area; state programs, such as the state VR program or the program that serves people with blindness and other visual disabilities; or VR programs for veterans. It is always advisable to develop relationships with
these programs long before a possible shared case comes along, even if it is just offering possible resources or trainings. Sharing cases can benefit both programs, as it gives each program access to additional participant service resources. Additionally, both programs will offer expertise and access to different resources that can provide more comprehensive services to shared participants.

**Considerations for Communication with Other Programs**

Providing participants with information and referrals and then encouraging them to do follow-up work is a primary means of promoting participant independence. Encouraging participants to do as much of the footwork as possible in the TVR process, to the extent that they are able, also supports the participant’s capacity for self-reliance and self-determination. Although the counselor can create a road map for participants to follow, asking participants to actually follow the map and make the journey empowers them to be able to independently navigate complex and confusing systems.

The manner in which a counselor assists participants and works with partner agencies is essential to relationship building. Good customer-service skills can go a long way in helping counselors manage relationships with other programs. For example, these skills can help better communicate what the program can and cannot do for their participants. Careful listening and attentiveness can help with understanding other agencies’ services and issues.
DISCUSSION QUESTIONS

• Why do you think that it is important to have community contacts?

• What are some of the rehabilitation facilities, agencies, professionals, or programs that provide services to individuals who have disabilities in your service area? Do you have a relationship with all of them or a plan to connect? How would collaboration make your job easier?

• Are there any routine care coordination activities that a counselor might carry out with other agencies or service providers?

• What is an example of a time when you made a referral and the process went better than expected? What about when it didn’t go well?

• Are there any providers you work with who like to receive referrals in a certain way? What types of information do they require?

• What has been your experience with staffing cases with another program?

• How do you think case sharing and communication can be improved in your program?

• How might having a good relationship with one of your contacts be useful when it comes to participant progress?

• What is an example of a contact you have that gives your TVR program a better rate than other programs?

• How is information about various providers, vendors, or agencies obtained and shared with participants? Why is having this sort of information useful for participants?

• Why is it useful for participants to also reach out and make agency contacts, even if you have established relationships already?

• What is an example of something a counselor might ask a participant to do in order to reach out to a needed contact?

• What are examples of customer service skills? Why would a TVR counselor need customer service skills when making contacts?
TVR Case Records

TVR programs are required to keep formal participant case records. In most agencies, this includes a hard-copy case record for each participant, but some programs only keep files electronically. Quality case records are of the utmost importance, and recordkeeping at every stage of the TVR process is necessary and required. Detailed and complete recording ensures accuracy of information, clarity of goals, accountability, and continuity of services for participants in the TVR process. This section focuses on paper files, but similar guidelines are recommended for electronic files.

Case records must be legible. It is every TVR counselor’s professional responsibility to ensure that details about meetings, conversations, services, purchases, and progress are adequately and accurately recorded. Documenting these details helps to provide justification for the direction of the case and the decisions made by the counselor. It is also important that counselors have full knowledge of the history and status of their own cases.

Case File Organization

Many TVR agencies use a sectioned folder with clips at the top of each section for fastening documents. Often, sections are covered by cover sheets to help protect confidential information and for organizational purposes. These folders generally have six locations for documents, reflecting the TVR process and ease of review by substitute or new counselors, supervisors, evaluators, and auditors. Certain forms, such as the eligibility or IPE, may be copied on specific colors of paper for ease of location.

A sample case-file organization system, organized by section, is described below.

1. Application and Intake
   a) Signed application for services
   b) Intake form
c) Proof of Tribal enrollment

d) Proof of residency requirement

e) Other demographic information

2. Eligibility

a) The eligibility statement

b) Extended eligibility agreement, if applicable

c) Disability documentation

d) Disability assessment reports

3. IPE

a) Most recent signed IPE, or signed IPE amendment, always on top.

b) All documents that support the content of the IPE, ordered by date with the newest on top, such as vocational assessments and progress reports

4. Correspondence

a) Signed “Release of Information” forms

b) Letters to the participant, such as an eligibility letter, closure letter, or letter requesting contact

c) Letters to and from referral agencies or providers

d) Filed with the newest on top

5. Fiscal

a) A running ledger on top that includes date, short description of service, date certified for payment, and final total

b) All purchase requests, filed with the newest on top. Each request should include
i. Purchase request form and supporting documents (e.g., contract, agreement)

ii. Invoice or bill

iii. Service justification

iv. Copy of check or purchase order, if applicable

v. Receipt(s)

6. Case notes

   a) The running case record, filed with the most recent on top.

**Benefits of a Complete and Comprehensive Case File**

A case file that is complete and up to date can help a TVR counselor in several ways. For one, the case file provides a record of everything that has happened in the case, including summaries of meetings with the participant and other providers, and the information shared. When all of this is documented correctly and in a timely manner, it shows that proper procedure was followed, the actions that were taken in the case, and participant progress. A complete file is important at reporting time, and if the participant has a grievance or feels that services were not appropriately provided. If there is disagreement between the TVR counselor and the participant about what actually happened or was discussed during the provision of the case, it is difficult for counselors to support their views or actions if the file is incomplete. It is also a best practice of case management to keep files organized and case notes up to date, in the interest of documenting events accurately and keeping the volume of work at controllable levels in an effort to manage stress.
Discussion Questions

- How are the case records in your TVR program organized? Does your program keep electronic or paper copies?
- In what ways can your TVR program improve case record management?
- What do you find to be the hardest part of case record documentation? What do you do well? What do you think you can improve?
- When do you work on your case records? Is this time adequate for your needs?
- What are some tips, tricks, and resources that you have found helpful for keeping on top of record keeping?

Case Notes

Case notes serve several purposes in TVR. Case notes tell the story of what happened, are a means of tracking a participant’s progress through the TVR system, and present a picture of measurable and observable events in the participant’s journey. In addition to describing a participant’s progress, case notes should also illustrate where participants are in their plans, what barriers participants have experienced and the solutions that were used, justifications for purchases and services, and compliance with program and Tribal policies and procedures, and federal regulations. A good way to think about maintaining case notes is that if it is not in the case notes, it is not clear what happened. This can be compounded when the initial TVR counselor leaves the job and another counselor takes over a case with incomplete case notes to describe the events of the case and the participant’s progress.
Case note entries should synthesize information about important events and developments during the participant’s movement through the rehabilitation process, justify actions taken, describe the progress or lack of progress toward achievement of the rehabilitation goal, and facilitate required periodic reviews, placement-related efforts, and case management activities. When documenting cultural services, it is important to remember that participant confidentiality applies, and that although counselors may learn whether or not the services were helpful, they may not ever learn what actually happened.

Case notes must be in the record, the electronic or hard copy file, as soon as possible after the contact or specific action steps are taken in a case. It is recommended that, whenever possible, case notes should be entered within twenty-four hours of the contact to better ensure accuracy of the notes. The longer the lapse of time before the case note is created, the more likely it is that the counselor will forget important details. In order to stay up to date, it is recommended that the TVR counselor set a routine and formally schedule time for writing case notes every few days or weekly.

The case record is a legal document. It is important to be as objective and professional as possible when documenting case progress and decisions to ensure that case activities are clear and easily followed in the event that the case is transferred to another TVR counselor or the participant initiates a grievance. Case notes should have marginal notes stating the dates of the case note, the stages in which the participant are in their cases (e.g., eligibility, plan, employment), and the author’s name and job title. The stage of the case is an important indicator of the primary content of the case note, and inclusion of the name and job title is helpful when other TVR staff provide services for the case.

When thinking about the content of case notes, consider the point of the TVR process the participant is in. For example, if a case note is about intake, document things that will be needed for the determination of eligibility, such as documentation of impairments, needed assessments, possible or presenting functional limitations and impediments to employment, and the need for TVR or independent living services. Other things to include would be confirmation that the individual has been notified of informed choice, CAP, and confidentiality.
The following guidelines apply when writing case notes:

- Document counseling and guidance provided and focus upon the purpose and outcome of the counseling session and the actions to be taken by the counselor and participant prior to the next contact.
- Document when participants were provided informed choice and were notified about their rights and responsibilities, grievance procedures, and CAP.
- Document other conditions or barriers that are not incorporated into the eligibility statement, such as transportation issues and child care.
- Include the rationale and justification for making decisions, providing services, making purchases, and selecting vendors.
- Record observations of the individual in behavioral statements, rather than using medical or psychological labels or subjective comments.
- Refer to specific forms and reports, such as the eligibility statement or a psychological evaluation, that are in the case file in order to reduce duplicating information that appears elsewhere in the case.
- Record planning efforts and intended outcomes, not only what has happened.

**Continuity of Services**

An important aspect of case management includes overseeing the continuity of services for participants when it is necessary for participants to work with more than one person or agency or who transition from one TVR counselor, or TVR program, to another. When a TVR counselor employs good case-management techniques and communication skills, the transfer can take place smoothly, services can continue uninterrupted, and it is more likely that participants maintain progress. Continuity of
service relies on several aspects of good case management, which include

- Organized and uniform case files;
- Comprehensive and up-to-date case notes;
- Progress summaries;
- Legible writing;
- Completed, accurate paperwork; and
- Timely communication.

Causes for Disruption of Service

It is not uncommon in TVR for there to be more than one person on staff working with a participant or for a participant to be shared with or transferred to another program for VR services. The reason for this can include things like

- Staff turnover;
- Staff absence;
- Specialized positions, such as intake specialist or job placement specialist;
- Order of Selection;
- Transition from high school or college;
- Transfer of services to the state VR program at the request of the participant;
- Case sharing with another VR or TVR program; or
- Funding issues.

Considerations for Continuity of Services

When possible, it is suggested that TVR counselors and participants meet in person with any providers supplying primary services, to ensure a
smooth transition. It is also recommended that when a participant’s case is transferred from one TVR counselor to another, the two counselors meet together with the participant to make sure that everyone is up to date and aware of all aspects of the participant’s impairments and impediments to employment, the planned direction, and next steps.

**DISCUSSION QUESTIONS**

- Have you ever had to take over a participant’s case that was started by another counselor? If so, what was the situation and what was your experience with inheriting the case?
- How do you ensure that the participants and case files you work with can be easily tracked and understood by others? What are some things you could improve upon?
- Describe an instance when a case file might have been read by someone other than a primary TVR counselor.
- What have you noticed or learned when reviewing other counselors’ case files?
- How might participants be affected by staff turnover?
- Why might you meet with participants in person or at least let them know ahead of time when there will be a change in who will be their primary contacts in your TVR program?

**Communication with Participants**

Because TVR counselors work with participants at different points in the TVR process, the counseling and guidance, communication techniques, processes, and tools used may vary. While always person-centered, the initial counselor-participant relationship is focused on building rapport and then, gradually, becomes more action-oriented and supportive once the IPE is implemented. There is no one approach that works best at all stages of the IPE or with all participants, so flexibility in communication is needed.
Pre-IPE

Building a strong rapport with participants is critical at the pre-IPE stage of the TVR process. Use person-centered counseling techniques and let participants lead as much as possible when it comes to tasks such as planning and carrying out assessments and planning for needed IPE services. Supporting participants to make important decisions can be essential to ensuring that participants develop strong internal motivation. Setting up expectations for how to communicate is also important at this stage of the TVR process, such as meeting routinely, discussing how information will be shared, and the frequency of meetings.

During IPE Services

Once the IPE has been signed and services are underway, a more task-oriented, supportive approach to communication may work best. It is important at this stage of the TVR process to keep participants motivated and accountable and to point out successes and milestones as they are achieved. This strength-based approach can increase self-esteem and self-efficacy in the participant, which can lead to better employment outcomes. The ability to use positive language and re-framing can help the TVR counselor let participants down easy if they are asking for something they can do themselves or for something the counselor cannot do. Patience and a relaxed presence can help ground participants and help them to feel calm.

Additional barriers may become apparent while IPE services are being carried out, and addressing them in a straightforward manner is most effective as rapport has already been established. Participant motivation is often a component of additional barriers to employment and may need to be addressed in this stage.

If a case is closed prior to successful completion of an IPE, the TVR counselor needs to communicate with the participant prior to closure when possible.
Participant motivation

Gauging and managing the motivation of the participant during the TVR process is something that a counselor has to do in every case. It is normal for a participant’s motivation levels to change over time, and the levels of motivation within a counselor’s caseload can vary significantly and may change from day-to-day for some participants. Some participants are very motivated and self-directed and take the lead in making informed choices and researching services and employers. Many participants need regular encouragement, while others may be so engaged in their new training or job that the counselor does not hear from them except at scheduled meeting times.

It is important to learn enough about participants during intake and subsequent meetings to find out what motivates them. This will be different for everyone and will often become apparent, even if it is not discussed directly. It can be helpful to build on participants’ motivation for becoming employed and to remind them of that when they run into challenges. Participants’ motives can include getting jobs that they can do successfully with their disabilities, working for particular Tribal departments or employers, supporting their families, or being good role models for their children.

Sometimes, participants’ motives may not be clear, or they may be complicated. While participants may or may not want to be employed, they may also be motivated by other things, such as earning a good salary or getting particular services for themselves or their family members. Participants may have higher priorities for seasonal activities they are involved in, such as fishing, hunting, or subsistence, or seasonal cultural activities such as winter dances or pow wows. They may not want to work when their children are out of school, if they have relatives to care for, or if there are major events in their families. It is important to listen to what participants say, but also to observe their actions, which may clearly show their motivations.

When it becomes apparent that participants are not motivated by obtaining employment, or that they are not as engaged in the TVR process as they once were, it is important to talk with them about what is being observed and their current situations. It could be that their interest
in the vocational goal or the planned services has changed and it is time to discuss new directions. They may have circumstances in their lives that necessitate taking breaks from the IPEs for a period of time until things settle down. Their functional limitations may have changed and are taking bigger tolls on their energy levels. Or maybe they were never interested in gaining employment and that is becoming clear.

If it seems like having a conversation about the participant’s motivation may be difficult, confer with a supervisor or co-worker to determine a strategy before meeting. Once counselors have better ideas of what is going on with participants, they can determine the next steps. These could be scheduling new assessments, identifying new goals and services, rewriting IPEs, addressing any new barriers, or, if necessary, closing the cases.

After Employment

It may be tempting to assume that once participants start working that they are then free of the need for TVR support. However, additional challenges are likely to present themselves during the first months of employment, which is why frequent check-ins are pivotal for long-term employment success. In addition to checking in with participants themselves, it may be useful to check in with supervisors, co-workers, and family members as well (with a signed ROI in place). Discuss the availability of additional services that may be needed and the option for post-employment services.

**DISCUSSION QUESTIONS**

- How might communication with participants change depending on what stage of the TVR process they are in?
- What do you think causes participants to stop making progress toward their employment goals? Do you see common themes or reasons?
- How do you reengage a participant who loses motivation during the process?
- How might you address situations in which participants want to switch their employment goals frequently?
Reporting and Data Management

Most TVR grants are funded for five years. The grant year corresponds with the federal fiscal year of October 1st through September 30th. Throughout a TVR grant cycle, there are numerous reports due to RSA. They include

a) Six-month report for TVR grants in the first year of the grant cycle, due forty-five days after the end of the initial six-month period;

b) Annual reports due following the end of each year of the grant cycle;

c) Final grant reports due after the end of the five-year grant cycle.

In addition to these reports, many TVR agencies may have other reporting obligations, such as quarterly or annual reports to the Tribal Council or Tribal department. The reporting process motivates the setting up of a system for capturing the data that will need to be reported. TVR agencies use a variety of reporting methods, such as systems developed for TVR programs, proprietary Tribal software, and spreadsheets.

Methods of Data Management

It is important to stay on track with data management because it can be challenging to pull accurate data together at a later time. Much like the varied reporting systems used by TVR agencies, there are several strategies used to manage data. Some TVR programs have designated staff to input data from case files, some TVR programs have counseling staff input the data themselves, and some TVR programs have the director take on this responsibility. There is also great variation as to when the data is placed into the system. For some, it is a specific time each week, month, or quarter; others use case milestones, such as eligibility determination or IPE completion; and others may not have set plans.

Programs may also use tickler systems set in place to aid in capturing required information or meeting target dates. For example, some programs
use tracking sheets, placed in each case record and filled out periodically. This data may later be transferred to electronic reporting systems. Other data systems may have alerts that prompt counselors when things like the 60-day deadline for eligibility determination is approaching in a particular case or when a participant has been employed for 90 days.

While some TVR programs use spreadsheets or databases that have been developed in-house specifically for TVR or for Tribal programs that serve community members, others use products that were developed by private companies. Two examples of commercially-available databases are described below.


  TVR Software (formerly DataOps) is an information system custom developed to support the TVR programs. The system was created with input from TVR directors across the country and built using Microsoft Excel. The software allows programs to easily capture, accurately report, and readily share information with others.


  Aware Express AIVRS is a secure web-based system that features complete record management and reporting abilities, high accessibility (i.e., 508 compliance), as well as free technical support without any network or hardware requirements.

**Case-File Record Data Management**

The case file is the record of what happens in the case, and the data management system tracks participant data and organizes it in a way that supports reporting and the compilation of program statistics. Both are necessary for the provision of participant services and the reporting of the program’s accomplishments. The management of participant data and the
case-file record rely on each other in that the facts and information in the case file inform the data management system, and the data management system provides reminders and prompts for deadlines and collection points to guide important events and documentation in the participant case.

**DISCUSSION QUESTIONS**

- What type of reporting system do you use in your TVR program?
- Why do you think case notes are important? What tips do you have about keeping track with them?
- Do you have a role in data input or gathering? If so, what is your role?
- What do you think would be the pros and cons of having an electronic case-file system?
- Are you responsible for assisting with any type of reporting for your TVR program? What are the parts that you work on?
- How well does your data management system work for preparing reports?
- What do you think is the most challenging or time-consuming part about getting case-file information into a data management system?
- What are other ways that you use the data management system besides reporting?
- Are you responsible for assisting with any type of reporting for your TVR program? What are the parts that you work on?
- How well does your data management system work for preparing reports?
- What do you think is the most challenging or time-consuming part about getting case-file information into a data management system?
- What are other ways that you use the data management system besides reporting?

**Time Management and Prioritizing Duties**

Finding an effective workflow routine and method to prioritize duties and responsibilities is an essential part of being a successful TVR counselor. Each TVR counselor has his or her own method of prioritizing tasks, as each counselor will have strengths in different areas and will need more time for some tasks than others. When prioritizing, it can be helpful to look back later to compare what was prioritized versus what actually happened in order to get an idea about how time is really spent relative to
priorities. It can also be useful to meet with a supervisor or director to get feedback on the how tasks are prioritized and scheduling time for case-file work.

Time management includes planning, prioritizing, scheduling, organizing—and trial and error. When scheduling, consider where appointments fit best. Some find longer appointments in the mornings and shorter appointments in the afternoon to be useful. Others set aside a specific time each week for file work and case-note writing. Being organized and using a calendar system can help with this. When using a calendar, consider color coding priorities and including scheduled time for paperwork and documentation.

**Time Management**

Time management is a key factor in avoiding burnout and maximizing productivity. There are many ways to plan and organize the tasks, and everyone has a different process that works best for them. Some methods include

- Using sticky notes and notepads to jot down thoughts and reminders;
- Using physical calendars or planners;
- Using apps or other electronic tools for time management;
- Writing to-do lists, kept on the computer or in personal calendar books;
- Using electronic calendars to set deadlines and to provide reminders;
- Forwarding the desk phone to voice mail and closing the email program on the computer in order to create time to focus;
- Scheduling time each day to check emails and phone messages;
Blocking out time to schedule appointments with participants,
and having office hours when participants can drop in without
appointments; and

Scheduling regular times each week for doing paperwork and case
notes.

If counselors truly have more to do than they can manage, it is impor-
tant that they talk to their supervisors about delegating tasks to program
assistants or whether colleagues can help. Everyone has a limit, and it may
be impossible for one person to do everything if the caseload is large. Be
confident and assertive, ask for help when needed, and say no to new proj-
ects or participant cases if already feeling overwhelmed.

Finally, no matter how one chooses to plan and organize one’s time, it is
important to allocate the appropriate amount of time needed to do certain
tasks. To get a better idea of the time needed to do these tasks effectively,
write down daily tasks for a week, as well as the amount of time spent on
each task. At the end of the week, review where time was spent and use this
information to strategize future time management and overall planning.

Case Management Priorities

It seems logical to think that the things that should be addressed during
the day are those that are in front of a counselor or requesting the most
attention. This can be a common pitfall, as some participants seem to
demand a lot of time and attention. But putting a lot of focus into one
place or a few cases can result in the neglect of other parts of the caseload
and other TVR counselor duties such as case-file work and documenta-
tion. Counselors must be realistic about where they tend to spend the
most attention, and modify their priorities and the resulting behaviors in
order to make sure that everything gets done in a timely manner.

Counselors need to develop their own methods of completing all the
components of their work, and the process can be challenging, but educa-
tional, as it evolves. A TVR counselor has many responsibilities, but the
top priorities include meeting deadlines for eligibility (or setting up exten-
sions), meeting with participants to determine eligibility and develop the
IPEs, maintaining case notes, evaluating participant progress, conferring
with providers, requesting payments for purchases, and reviewing reports. Some programs have staff, such as technicians or assistants, who can do some of the necessary file or case work, and counselor may employ them in order to free up time for other responsibilities. Tasks to delegate include requesting disability documentation, checking in with participants, and entering information into the data management system.

**CASELOAD SCENARIO EXERCISE**

You are a TVR counselor with a caseload of 23 participants. The other TVR counselor in your program found another job and so you have agreed to take on an additional six participants while the new counselor is being trained. Today is the first day that the new counselor is in the office, and he is asking a lot of questions. Just this morning your supervisor also asked for your help compiling data for the year-end report, which is due in four weeks.

You had planned to take a couple of Fridays off for family outings over the next couple of weeks. Fridays are the days you usually catch up on paperwork, such as case notes and provider follow-up calls. Your phone is ringing, there are two messages in your voicemail, and you can see six new emails that are waiting to be read. Your daughter has asked to take you out to lunch at noon.

- How would you prioritize your tasks?
- What factors have you considered in making this decision?
- How is this scenario relevant to your work today?
DISCUSSION QUESTIONS

• How do you address participants who drop in without scheduled appointments, or those who are in crisis mode?
• What do you think about the idea of scheduling time to check emails or make and respond to phone calls?
• Describe a time when you felt overwhelmed by your participants and workload. What did you do to get back on track?
• What strategies have you tried for prioritizing tasks and managing your time? What has worked well? What would you recommend to others?

Safety, Self-Care, and Compassion Fatigue

TVR staff members are often individuals who have grown to be “other” focused (as opposed to “self” focused) from an early age. However, counselors who neglect their own self-care can eventually run out of the energy necessary to provide quality services. Loss of life balance, because of job stress, can create burnout. In the same way that participants are held accountable for the changes needed for positive employment outcomes, TVR counselors must hold themselves accountable for taking care of their life responsibilities and personal needs to support the life balance required to work in TVR over the long term.

Some Tribal communities believe that each time a person helps to heal another, a part of that person is taken away. With this in mind, TVR counselors must be diligent about making sure that they are steadily replenishing their energy and meeting their own needs. Self-care is a concept that counselors often try to convey to participants, but many find it challenging to put into practice in their own lives. As life gets busy, counselors may tend to assume that they can, or even should, try to manage problems and
stress on their own. But counselors who ignore their own needs may find that their outlook on life and ability to cope with the demands of life and work may suffer.

TVR counselors often provide a tremendous amount of empathy to participants, which can be very draining. And they often hear very tragic and emotionally difficult stories in their work, which can be extremely upsetting. Even when work environments are filled with stress, fatigue, anxiety, and resentment, the job can still feel “safe” simply because the counselor knows what to expect every day. When providing TVR counseling day in and day out, it is vital that counselors have personal interests and outlets to be able to continue to be effective and enjoy their work.

**Compassion Fatigue**

Compassion fatigue, or vicarious trauma, is when people experience a decrease in compassion over time because they have been exposed to repeated trauma, abuse, or injury through the people or animals they work with. This is a common condition among workers in the helping professions. Hearing stories or seeing the effects of abuse and trauma can be very stressful and can have a cumulative effect on a person.

Compassion fatigue can be addressed first by developing methods of becoming aware that it is being experienced. This can include such symptoms as

- Dissociation, apathy, and poor self-care;
- Dizziness, numbness, and feeling faint;
Inability to pay attention;
- Increased heartrate;
- Anxiety and feelings of powerlessness;
- Blaming and anger;
- Chronic physical ailments; and
- Exhaustion and fatigue.

Counselors must learn to be aware of their own responses, and also later process the feelings that come up during and after meetings with participants. They may need to give themselves time between participants to identify their feelings and to become centered again.

When working with participants who share their past experiences of trauma and abuse, and to try to avoid compassion fatigue, it is important that counselors consider the following self-care steps:

- Learn to be aware when they are having reactions to what they are being told.
- Practice patience and kindness with self and others.
- Take time to understand and process reactions and emotions.
- Express needs through journaling, talking the situation through, or being creative.
- Make an effort to place family pictures and favorite items in the work space as reminders of positive qualities and life outside of work.

**Counselor Burnout**

Due to the sometimes intense demands of providing TVR services, emotional fatigue and burnout are real risks. Counselors deal daily with their participants’ traumas, troubles, stresses, worries, and needs, which can eventually take a toll on the counselors’ emotional health. Burnout is the result of job stress and emotional overload that accumulates over time.
and is not addressed by the counselor, often due to a lack of routine, clear boundaries, and effective self-care. It can present itself in many different ways, such as depression, apathy, distancing oneself from participants and colleagues, emotional apathy or depletion, and a sense of helplessness. It is important to recognize the signs of burnout and their root causes in order to effectively manage these feelings before they negatively impact both the counselors and their participants. In extreme burnout, counselors may not be able to cope with the responsibilities of their job and they may have to take extended time away or leave the job altogether.

Typical signs of burnout include

- Feeling overwhelmed or a loss of control;
- Resentment toward certain participants;
- Feeling burdened by certain participants;
- Uncertainty about how to help participants;
- Letting appointments go on much longer than scheduled;
- Increased absences or always running late;
- Isolating or avoiding co-workers, supervisors, or certain participants;
- Forgetting important meetings or appointments;
- Excessive weight gain or loss;
- Low energy or little desire to go to work;
- Viewing the world as unsafe; or
- Losing a sense of humor.

Personal restoration and activities outside of work are essential to preventing burnout and can include activities such as traditional ceremonies, exercise, restful sleep, personal counseling, family time, and leisure activities. It can be helpful to spend time in nature, connect with friends, and rest. Here are some self-care ideas that have been collected to address compassion fatigue and burnout:
Be honest with a supervisor, manager, other trusted co-worker, or friend, and discuss how to problem solve the most troubling issues or feelings;

Confer with a supervisor or co-worker for those participants who are the most challenging;

Find a way to “neutralize” between counseling sessions (if relevant);

Identify what is most important (e.g., exercise, family, travel, meditation), and incorporate activities around these things to create a rich life outside of work;

Create a vision board of images and key words describing what is wanted in the future;

Incorporate a sense of play or light humor into the office or day;

Find additional emotional support through personal counseling, mentoring, or support groups for help with working though the feelings and issues that have come up in the job if self-care strategies do not seem to be enough.

Consider organizing TVR team activities for the work environment;

Incorporate mindfulness activities into the daily or weekly routine;

Keep a gratitude journal or reframe negative experiences by finding positive aspects that can come from the situation; and

Practice daily affirmations, which can supplement the loop of negative self-reflections that are common for everyone.

To reduce feelings of being overwhelmed, it is important to know what is truly necessary to get done in a day and what is not. Work with supervisors to prioritize tasks, if needed. It is important to schedule quieter periods for case-file work and correspondence, which can provide an offset to the higher energy needed for participant meetings. Some counselors schedule five to fifteen minutes between appointments in order to jot down notes and have full closure on the previous meeting before moving on to the next. Counselors should be sure to take breaks throughout the
day as well as schedule vacations or personal time off for deeper levels of personal restoration. Conferences and trainings are also a great way to disconnect from the regular routine and connect with colleagues performing similar work.

**DISCUSSION QUESTIONS**

- What are some things you do for self-care, and what are some you’d like to try?
- How do you think mindfulness might be useful for both counselors and participants? What type of mindfulness appeals most to you? Would you feel comfortable talking about mindfulness with certain participants?
- As someone in the profession of helping others, how well do you feel that you take care of yourself?
- What do you think becoming burned out looks like? How do you think it can be prevented?
- Talk about an experience you’ve had becoming burned out. What did you learn from that experience?
- Do you schedule time for self-care? Why or why not?

**Potential Assignments**

1. **Time Study Assignment:** The purpose of this assignment is to help students have a realistic understanding of the demands on their time and identify strategies for better time management. To do this, students will track their work time for two consecutive weeks (ten workdays) in fifteen-minute increments. The tracking of time-use activities should include **who interactions were with** and the **essence of what happened during that time**. Time studies should include all work-related activities, including trainings, conferences, travel, etc. If the student takes a day for personal or sick leave, that will not count as a workday, and so
the log should be continued upon return to work. Use any format you prefer, such as Microsoft Outlook or Excel.

After the time study is complete, students will write a one- to two-page reflection paper that answers the following questions:

- What surprised you most after tracking your work activities in detail over the last two weeks?
- What portion of your days includes spontaneous activities that could have been planned?
- What portion of your time is spent on activities that could be delegated to TVR participants or support staff?
- How often are you interrupted and where do the interruptions tend to come from (e.g., phone calls, drop-in visitors)?
- What changes would you like to see in your management of time?
- What guidance would you provide to a new TVR counselor about time management based on your own knowledge and what you found in your time study?

2. For this week, take at least 10 to 15 minutes each day for self-care. This can be anything from a quick walk, a snack, or petting your dog. As long as it is daily for the week. Track this, then turn in a reflection addressing the following questions:

   a) What did you do each day? Did you do the same thing or something different? Show your tracking.
   b) How did it fit into your daily routine? Did it feel normal or forced?
   c) How did you respond to this time to yourself? What did you learn from this exercise?
   d) How do you envision fitting self-care into your professional and personal life as a TVR counselor?

3. Imagine that you have five minutes to present an overview of what skills you need in the TVR environment. Write out your
presentation, then record yourself giving this presentation using the video recorder on your phone or a platform like Zoom. Answer the following questions:

a) How did you choose what to include?

b) How did you decide what not to include?

c) What are the more essential skills needed to do your job?
Module Description

This module provides an overview of the job search process, including applicable career counseling theories, employer relationships, job development and coaching, customized employment, supported employment, self-employment, and job placement. Finally, the module describes the considerations and processes for closing a TVR case.

Learning Objectives

At the end of this module, the reader should be able to

- Describe how rehabilitation, culture, and employment are linked in TVR;
- Describe career counseling theories;
- Describe the purposes of on-the-job training;
- Describe employer expectations;
- Describe when to discuss reasonable accommodations, assistive technology, and other employment barriers with an employer;
- Describe how to support a participant interested in self-employment;
- Understand the job search process;
Describe the importance of knowing Tribal and local employment service resources and other employment networks;

Understand customized and supported employment; and

Describe processes for the different types of case closure.

Overview of the Job Search

The job search is an important part of TVR because it is the point in the rehabilitation process when the participant is asked to think about placement in employment. The first aspect of a job search is to ensure that a participant’s barriers to employment are being addressed through the services listed on the IPE. Depending on the participant, the job search can be started while the barriers are being dealt with, or when the barriers are fully resolved. It is best to start when the participant is able to devote significant time and attention to the process, as job search and placement are integral aspects of TVR.

Job search involves focusing on a participant’s abilities and interests, and then researching jobs that fit their interests, skills, income needs, and expectations. Knowing the job search resources in the area, especially the Tribal programs and providers, can be a great asset to all of the stages of the process. Services can include career advice, placement services, and strong follow-along support to enhance participant success. Depending on the goal and needs of the participant, on-the-job training, customized employment, or supported employment placements are researched, and participants may also be provided specific training for particular fields or jobs. Job search activities also include completing applications, developing résumés, practicing interview skills, and completing job-related requirements, such as obtaining GEDs, permits, or licenses.
Organizational culture in an employment setting is not something that can be seen, but it is something that can be felt. It is created by people and can change depending on the people working in an organization. Organizational culture involves common values, underlying assumptions, and beliefs that are shared among a group of people who work together. Culture in an organization is generally learned through interactions and often the management has an important role in defining the organizational culture. If there are problems, the culture can be very difficult to change without changing management, because the values, assumptions, and beliefs of the management are embedded in all aspects of the organization—everything from how people greet one another throughout the day to formal matters such as policies and procedures.

It is important for TVR participants and counselors to consider organizational culture when selecting a work environment that is a good fit for a participant. This is one of the reasons that it is essential to have an understanding of a participant’s values and priorities, as it allows for the matching of a participant to a potential employer with similar values and priorities. Organizational culture can vary greatly from one organization to another, even within the same types of work, and there can even be sub-cultures within an organization that are formed by departments or offices.

Many TVR participants may have special considerations when it comes to finding and keeping employment. They may need extended time off to participate in cultural or seasonal activities, such as harvesting, hunting, community celebrations, family events, ceremonies, and religious obligations.

Employment opportunities within the Tribe can have many benefits. The Tribe’s organizational culture may closely reflect the values of participants, which can result in participants feeling more comfortable in this
environment. There is often greater flexibility when it comes to paid or unpaid leave as well, and in some Tribal communities, the entire Tribal government and organization closes for events and ceremonies.

Sometimes Tribes and Tribal organizations are the only resource for employment in the community. In these instances, the TVR counselor would advocate for the participant, educate the Tribal programs or employers about hiring Tribal members with disabilities, and encourage and support participants when they apply for jobs. Part of vocational rehabilitation and obtaining employment is helping participants to overcome impediments and establish positive attitudes, rather than using barriers as an excuse for not working or seeking employment.

**Job Placement and Organizational Culture**

When considering organizational culture and job placement for TVR, multiple perspectives can be taken. Sometimes, a TVR counselor can feel powerless when facing a large business with strict policies and structured ways of doing things. Alternatively, it can be exciting to think of organizations as entirely made up of the people within them, which means that there is room to build relationships and make changes. Working from the perspective of a large organizations being made up of people can be helpful in the job-placement role. There is almost always room for improvement and flexibility when it comes to the ways that organizations do things.
DISCUSSION QUESTIONS

• What are some ways you can “feel” what an organization’s culture is like?
• What does your organizational culture “feel” like?
• What do you think has made the culture in your organization the way it is?
• How do you know if participants are active in their traditional Tribal culture?
• What are ways that Tribal culture affects employment in your community?
• What do you think of the idea that organizations and business are just made up of the people inside the buildings?
• What are examples of things that are not perfect within an organization you are familiar with (i.e., a past place of employment or a business you have been a customer of)?

Career Counseling Theories

Understanding theories around career counseling and career development can be useful to TVR counselors when assisting participants to achieve their employment goals. The following section examines several theories that are prominent in career counseling, although it is not a complete list. A TVR counselor may benefit from staying informed of current theory and practices, which can contribute to successful participant job placement.

Super’s Lifespan Theory

Donald Super’s career development theory states that self-concept changes over time as a result of life experience; therefore, career development is a lifelong process. Super’s theory is a comprehensive, multifaceted view of career development and examines career from the perspective of five stages of life. The first stage, growth, is from birth to the mid-teens, and moves from play to work orientation. The second stage, exploration, is from the
mid-teens to the early twenties and focuses on developing a realistic work self-concept and vocational preference through trials and exploration activities. The third stage, establishment, is from the mid-twenties to the mid-forties, and relates to finding security and advancing in a career. The fourth stage, maintenance, is from the forties to early sixties, and focuses on preserving the occupational gains in the establishment stage and developing non-occupational roles. The fifth stage, decline, is in the late sixties until retirement, and relates to gradual disengagement from work. Several vocational assessments have been created based on this theory. This theory is useful when working with participants with congenital disabilities, whose career development may have been restricted, and those with acquired disabilities, whose career development may be regressing (Szymanski, Enright, Hershenson, & Enright, 2010).

Holland’s Theory

While Super’s theory focuses on the developmental aspects of people’s lives, John Holland’s Theory of Career Choice (RIASEC) focuses on how people and their chosen occupations interact. Holland believes that interests are relevant to work satisfaction. There are six categories of interests, including realistic (R—“doers”), investigative (I—“thinkers”), artistic (A—“creators”), social (S—“helpers”), enterprising (E—“persuaders”), and conventional (C—“organizers”). No one has interests that fall exclusively into one type; everyone has a combination of interests in all six types, arranged in a hierarchy from the highest to the lowest for each individual. According to Holland’s theory, pairing a person’s vocational interests and the corresponding work environments can lead to predictable successful employment outcomes and vocational satisfaction. Several interest inventories have been created based on this theory (Szymanski, Enright, Hershenson, & Enright, 2010).

Trait-Factor Theory

The trait-factor theory emphasizes that an individual’s traits, including interests, abilities, personalities, and aptitudes, should be matched with job requirements to find the best fit. This theory is also known as the person-environment fit and calls for assessment instruments to be used to
measure various traits. Overall, this theory states that individual traits can be measured, as can tasks for the work environment. Thus, finding a good fit for work is a simple process of matching traits. The closer the traits match, the higher the likelihood that a career placement will succeed (Szymanksi, Enright, Hershenson, & Enright, 2010).

**Social Cognitive Theory**

This theory is based on Albert Bandura’s work, which found that much of human behavior is socially learned and constructed. In examining work and career from this perspective, the social cognitive theory puts forward three linked variables: self-efficacy, outcome expectations, and goals in career decision making. Social cognitive theory states that people tend to choose careers that they feel they can be good at. Thus, individuals who believe that they are good in the sciences will feel confident (have self-efficacy) about choosing a career in science. According to social cognitive theory, development of self-efficacy is a social interaction. A child is exposed to and provided positive feedback around a subject matter and thus develops self-efficacy in regard to that subject matter. This process repeats itself and is refined as the individual grows and develops. In the end, people are more likely to choose careers in which they have high self-efficacy and high positive expectations for success. These two factors reinforce themselves and become an ongoing feedback loop which reinforces the choices made (Szymanski, Enright, Hershenson, & Enright, 2010).

**Planned Happenstance Theory**

Developed by John Krumboltz, the planned happenstance theory examines career and career choices through the idea that the labor market is continuously changing, and that people need to be able to be flexible to accommodate these changes. The core of this theory states that the lives of participants are unpredictable, and that the role of the counselor is to help participants approach change in a constructive manner. This role includes encouraging curiosity about learning opportunities, persistence, flexibility, and optimism. Krumboltz believes that encouraging these skills in participants develops personalities more likely to capitalize on
chance events that occur in relation to their careers. Thus, participants’ attributes and attitudes enable them to turn chance encounters and occurrences into career opportunities (Szymanski, Enright, Hershenson, & Enright, 2010).

**DISCUSSION QUESTIONS**

- Which theory or theories appeal to you? Why?
- Which theory or theories do not appeal to you? Why?
- What other career counseling theories are you familiar with or have you heard of?
- How would you use career theories in working with a TVR participant?

**Employer Relationships and Incentives**

One of the essential functions of working as a TVR counselor is building employer relationships. These relationships are crucial in job placement and job retention for TVR participants. To start, the TVR counselor needs to identify employers they have connections with, such as through personal or professional relationships, previous job placements, or business relationships. In addition, seeking out employers who have a stated commitment to diversity can be useful in building relationships.

When building relationships with potential employers, focus on trust and credibility. Identify the primary needs of employers and present yourself as a credible source of information and hiring assistance. Follow-through is important, as is offering useful information to employers to help them meet their own goals. Develop an awareness of how the performance of those placed in jobs can affect the relationship with employers.
Building working relationships with employers helps create paths for participant job placement. There are several points in TVR at which counselors can interact with employers, including (a) recruitment of potential employers, (b) job development for a specific participant, (c) after job placement, and (d) for ongoing activities.

**Recruitment of Potential Employers**

This phase refers to recruiting potential employers to increase their knowledge of the TVR program and potential participants who might be seeking employment at their businesses. When establishing initial relationships with employers, it is important to discuss what the TVR program and other partners can offer if employers are able to hire TVR participants. Such benefits could include counseling, guidance, and problem-solving with the participants, prescreening applicants, tax incentives, case management, workplace accommodations and assistive technology, and job coaching.

In this pre-employment phase, TVR counselors can accomplish several activities:

- Patronizing local businesses;
- Networking with former employees;
- Networking with colleagues (including other agencies);
- Researching companies and conducting informational interviews to learn about them;
- Identifying shared interests and developing personal connections;
- Meeting with CEOs or other key hiring personnel (e.g., hiring manager, HR staff);
- Learning and using business language;
- Providing information on the benefits to businesses’ bottom lines of hiring people with disabilities, including attracting a broader customer base, meeting the needs of growing diverse, global
markets, being recognized as socially responsible, and tax credits and other financial incentives; and

- Suggesting a variety of work options (e.g., part time, job sharing, OJT).

Other activities that a TVR counselor can engage in to build relationships with employers include

- Providing a generic description of the TVR counselor role, with an employer focus;
- Providing information and clarity about the scope of TVR program services and supports;
- Engaging in a 10-minute conversation with the “gatekeeper” to find out whom to talk with about a tour, an interview, or an employment proposal;
- Having a 20-minute tour or conversation to learn more about the employer;
- Asking to complete job analyses to understand the depth and scope of the positions; and
- Offering to place participants who are trained and well-suited for specific jobs at the agency.

Once an employer is interested in working with the TVR participant, counselor activities can include (a) addressing the employer’s disability-related concerns and need for disclosure; (b) assisting with accommodations; (c) emphasizing a potential employee’s support network; and (d) preparing the employer for the job coach’s role, if applicable.

**After Job Placement**

After a TVR participant is offered a job and accepts employment, the counselor continues to be a resource to the employer by (a) remaining accessible, available, and responsible; (b) providing ongoing support to identify workplace accommodations and supports; (c) facilitating natural
supports whenever possible; (d) following up and assisting with job coaching, if needed; (e) participating in problem-solving regarding employee performance concerns; and (f) assisting with job termination, if required.

**Ongoing Activities**

After relationships are established with employers, the TVR counselor is encouraged to maintain those relationships through ongoing activities even if not working with a participant who is currently interested in being placed with those particular employers. These activities can include (a) participating in business networks, such as the chamber of commerce; (b) hosting employer open houses for networking; (c) organizing employer recognition events; (d) sending holiday cards and thank you cards for meetings; (e) maintaining contact with employers after jobs have ended; (f) conducting ongoing informational interviews to learn about businesses and their hiring practices; and (g) maintaining a database to track employer contacts.

**Employer Hesitations**

It is not uncommon for employers to be wary of working with TVR programs and the participants within those programs. There are a variety of reasons for this resistance that stem from a lack of accurate information and social stereotypes. According to a 2011 study by Kaye, Jans, and Jones, there is a long list of reasons an employer might not hire a person with a disability, and the same sort of reasoning applies toward agencies hesitant to work with TVR. Examples include (a) being worried about the cost of providing accommodations, (b) not knowing how to manage the needs of a worker with a disability on the job, (c) being afraid of potential lawsuits when disciplining or firing an employee with a disability for poor performance, (d) not knowing how to assess whether the person can do the job, (e) being concerned about the extra time that supervisors or co-workers will need to spend to assist a worker with a disability, (f) being worried about other costs (e.g., increased health insurance, worker’s compensation premiums), (g) being concerned about lowered performance standards, (h) believing that people with disabilities cannot perform the essential functions of the job and do not have the necessary skills and experience, and (i)
being concerned about the attitudes of co-workers toward the employee with a disability.

**Strategies for Overcoming Employer and Agency Hesitations**

Fortunately, there are many practical strategies that can be used when working with employers and other agencies who are hesitant to work with TVR programs and their participants. These strategies include providing awareness and expertise about disabilities, information about subsidies and financial incentives for hiring individuals with disabilities, and protection from legal risks.

Some specific recommendations provided by Kaye, Jans, and Jones (2011) include (a) providing more or better training on disability issues; (b) being an organization-side source for accommodations; (c) assisting with written policies for non-discrimination that include disability; (d) assisting with written guidelines for working with employees with disabilities, including accommodation requests; and (e) providing external resources for guidance on disability and accommodation issues.

**DISCUSSION QUESTIONS**

- What types of relationships do you have with employers in the area?
- What types of local employers do you think it would be important to be able to place participants with?
- How would you introduce yourself to an employer and suggest a partnership with your program?
- What ideas do you have about building and maintaining relationships with employers you could partner with for placing participants in the future?
- What kinds of services or assistance do you think your program could offer employers?
Job Search Process

It is important to help participants understand that when they are at this point of the TVR process, the job search is their full-time job. When they put time into the job search, they are more likely to have successful outcomes. And, like a job, the TVR participant and counselor can make a plan for the particular tasks or duties that the participant will complete daily and weekly while doing a job search. One way to involve participants in the job-search process is to ask them to do informational interviews with employers for jobs they might be interested in. This can give them information about where they might be able to make a good fit, whether it is with a Tribal employer or an off-reservation employer.

Knowing Tribal employment resources is another good step in the job-search process. One of the most common ways that a participant obtains a position in a Tribal office or department is through relationships with family, friends, previous supervisors, and co-workers. These contacts can be helpful for a participant to learn about job openings. It is important that both the participant and the counselor establish good connections with the Tribal human resources departments and Tribal enterprises in the community where TVR is located and get on their job opening mailing lists. It also helps to find out which Tribal websites post job openings and when job fairs are held.

Beyond Tribal employment, usual first steps are to visit local job offices and see what types of resources, classes, and job listings they have. Currently, searching online is one of the best methods for finding open jobs. TVR counselors or job developers know which sites are most appropriate for their geographic areas and can direct participants to them. In larger, metropolitan areas, sites like Indeed.com or Monster.com may be helpful. However, in smaller, rural areas, there may be Craigslist sites or
other local resources that are more useful. In addition to these sites, each state has an online job bank. Beyond job-search engines, many companies have websites that include job openings and directions for applying. Social media can also be helpful in finding work. This may be through a marketplace or through employer social media accounts.

The following online sites can be useful tools for job hunting:

- LinkedIn (https://www.linkedin.com). A participant can use LinkedIn to create a professional online profile that encourages potential employers to get to know them. Participants can also post their current résumés for others to view.

- Twitter (https://twitter.com/home). Participants can follow companies that they are interested in and see posts advertising jobs. Participants can also search the site using popular hashtags such as #jobs and #jobhunt.

**Networking**

Networking is an important part of job searching. Networking gives a participants and job developers the chance to strengthen connections with potential employment opportunities. To bolster networking, TVR counselors can encourage their participants to reach out to

- Friends and family who might work in or have connections with employers or industries of interest;
- Past employers;
- Staff or HR at hiring companies;
- Job or career fairs;
- Former professors or teachers; and
- Acquaintances who have careers similar to the employment goals.

Participants can also attend local job or career fairs to network with employers who are hiring personnel.
Applications and Cover Letters

When it comes to completing job applications and writing cover letters, setting aside time and paying special attention to detail are key. Job applications and cover letters should be typed and contain no grammatical or spelling errors. It is important to read all job applications carefully and fill out all information. If there is a part of the application that does not apply, it should not be left blank. Instead, state that the section does not apply by writing or typing “N/A.” Applications and cover letters should be factual and positive, avoiding any negative or false information. Make sure that all information in the job application, résumé, and cover letter is consistent, and be sure it has been well proofread, preferably by one or two other people.

Cover Letters

Cover letters are participants’ introduction to employers and state why the participants are good fits for the positions and how they meet the requirements of the jobs. Care should be taken to write letters that will be effective and memorable. Cover letters not only tell of the participants’ accomplishments, but also demonstrate how effectively participants can communicate. Some tips for a successful cover letters appear below:

▶ Keep the cover letter to one page in length, unless the participant has a lot of relevant experience.

▶ Review the needs of the employer listed in the position description, and then try to match the employer’s needs with an experience or accomplishment. Tell a story.

▶ Tailor each cover letter to each job the participant is applying for.

▶ Demonstrate some knowledge of the organization—do some research by looking online or talking to others who work there.

▶ Arrange the main ideas in a logical sequence and organize each paragraph of the letter around a main idea. For example,

   ▶ Opening Paragraph: Participants state why they are applying for the positions and give short descriptions of themselves.
Paragraph(s) 2 (to 3): Participants highlight their accomplishments that relate to the employers’ needs. They can explain how their education and experience meet the needs of the positions and how they can contribute to the positions and the organizations.

Closing paragraph: Participants state the best ways to contact them and that they are looking forward to interviews. If there are any enclosed documents (e.g., application, résumé, portfolio), they can note that as well.

End by thanking the employers for their time and consideration.

Résumés

A résumé is a one- to two-page synopsis of a participant’s professional strengths and accomplishments related to employment. A résumé should be well-organized, well-written, and visually appealing, without any grammatical errors. The primary goal of a résumé is for a prospective employer to offer a participant an interview, so if a participant has not been offered interviews after eight to ten tries, it might be time to modify the résumé. As a part of building relationships with employers and businesses, it could be useful to have a relevant business contact review a participant’s résumé. Preparing a résumé takes time and should be completed before beginning the job search. There are three primary types of business résumés, chronological, functional, and combination. Regardless of the type, all résumés should include certain essential information such as personal data (e.g., name, address, phone number, e-mail address) and qualifications for employment. A sample of each type is at the end of this module.

The Chronological Résumé

The chronological résumé lists a participant’s work experience by time frame, beginning with the most recent employment and working back to earlier positions. This format is often the best way to start writing a résumé from scratch because it begins with the participant’s most current experience, which is easier to remember.

Each job entry should include the name of the organization, dates of employment, and a description of the position and responsibilities held.
to help both employers and TVR participants. Job development is about perceiving, conceptualizing, and articulating a vision for individuals on both sides of the employment relationship. In addition, it is about helping participants find their dignity and recognize their value within their communities. If the TVR program does not have a designated job developer, TVR counselors may take on this role for their participants.

If a TVR program is new to job development, it can be a good approach to start small. Consider building one relationship with one employer at a time. Having an outreach plan can be helpful. This can be created in a team environment with a discussion of who does what in terms of contact with the chosen employer. Reach out regularly, perhaps once per week or month or quarter. Outreach should be friendly and done in the spirit of connection. Building from common ground and spending time getting to know the employer can be helpful. Ask relevant questions and listen attentively to the replies.

In the beginning, be curious and exploratory—make no promises and try to keep expectations low. Be aware that rejection is part of the job-hunting process, both for the participants and the TVR counselor or other TVR staff. Being prepared for this can be a helpful tool in the work. Also, rather than approaching employers to ask for something, approach employers with something to offer.

One of the essential pieces of job development is creativity. Creative solutions to problems can help employers and participants imagine a better fit in a workplace environment. For example, if a participant cannot lift a forty-pound box that needs to be moved from one room to another, the job developer must ask how the box can be moved from point A to point B other than by carrying it. Can a tool, such as a dolly, be used to move it, or can the participant simply move to another table to work rather than move it? A second example might be if an employer states that only three or four hours a day per week are available for a person who needs full-time work, perhaps there are other nearby offices or employers that could share the employee’s time and talent.
followed by a list of primary skills and abilities, a shortened work history, and then education.

The advantages of using this type of résumé format are that it

- Combines skills that have been gained in a number of areas;
- Can include all types of experience (e.g., paid employment, volunteer work, student activities, work experience, classroom work, project work, and social organizations like club or team activities);
- Minimizes the work history and moves it to the bottom of the résumé;
- Emphasizes skills that have been perfected;
- Emphasizes transferrable skills that apply to all workforces;
- De-emphasizes the time span of the employment.

However, this résumé format is not always the best one to use because

- It is not always well received by employers;
- It is sometimes thought that this résumé style is designed to “hide something”; and
- Many online application systems require a timeline of employment.

**The Combination Résumé**

The combination résumé format begins with a functional summary of the participant's most relevant qualifications, key skills, key abilities, and most relevant work experience. A chronological employment history follows and is created in a way that supports the summary. This résumé type is an excellent compromise for using a functional format while emphasizing skills, education, and experience.

The advantages of this résumé format are that

- It is widely accepted by employers;
Job Search

- It is an excellent tool for giving chronological résumé information but highlighting particular skills, experience, and education for a specific position;
- It is a useful format for highlighting experience that might have been gained some time ago;
- It is easy to tailor for specific jobs that are being applied for;
- It is an excellent résumé choice when the employment history has gaps; and
- It is a great format for justifying a career change.

Interviewing

Once job application materials have been submitted and the participant is selected from the pool of applicants, the next step is an interview. A job coach can be essential for helping participants prepare for interviews. This preparation may include research into the hiring company, mock interviews, and guidance on hygiene and dress. In addition, it can be useful to advise participants to arrive to the interview early, to prepare questions to ask, and to send a thank you card or email upon completion of the interview. There are many online resources on interviewing that the TVR counselor and participant can view together so that the participant is prepared and confident going into the interview.

There are several interviewing considerations and tips that a TVR counselor can provide to participants, including the following:

- Research the company and position prior to the interview;
- Practice using a mock interview (with someone in the field, if possible);
- Come to the interview prepared with some questions about the company or position;
Have a backup plan for transportation in case the first plan falls through;

Dress appropriately, and if unsure, do some research or ask for guidance;

Be early to the interview (15 minutes is reasonable);

Be professional, but also be memorable by showing some positive personality traits; and

Always send thank you notes as soon as possible after an interview to the people on the interview team.

**DISCUSSION QUESTIONS**

- Why do you think it is important for participants to do as much of the work around their job searches as possible?
- How do you know when it is time to step in and help a participant with job-search activities?
- How might you help a participant prepare for an interview?

**On-the-Job Training (OJT)**

One strategy to encourage an employer to hire a TVR participant is to offer an on-the-job training, or OJT, experience. OJT is when a participant is given an opportunity to learn a job while being in the job environment or dedicated training location at the job site, with the tools, machines, and materials actually used to perform the work. Training is hands-on, and the participant learns the skills, knowledge, and competencies for the job while actually performing the duties. Training usually takes place with a trainer or co-worker, who helps the participant learn the job and to use tools, equipment, and materials safely and properly.
As an OJT placement is negotiated with an employer, the counselor or job developer starts to create the OJT agreement, which includes the position title, the job duties, the skills and knowledge that will be gained, timelines for gaining the skills and knowledge, contact people, the number of hours, materials needed, training costs, and how the participant will be followed by the program and how problems will be solved. A common length for an OJT placement is around three months, but this will depend on the needs, abilities, and experience of the participant; the amount of time that an employer can dedicate to training; and the complexity of the job.

Usually the TVR program will pay the employer for the participant’s training, and the employer will pay the participant as a regular employee. It is common that the employer will be paid for more training time in the beginning of the OJT, and that the percentage of time will decrease over the course of the training period. For example, in the first month, employers may be reimbursed for 100 percent of participants’ time, as it is assumed that they will be training for all hours of the first month. In the second month, this amount could decrease to 75 percent as participants become able to perform the work on their own 25 percent of the time, and in the third month, 50 percent. The employers agree to pay the portion of the wages not reimbursed by the TVR program.

After the participant is placed and starts work, the counselor or job developer maintains ongoing contact with the participant, the employer, the job coach (if needed), and natural supports that are in place, to assure that

- The placement is going well, from the points of view of the participant and the employer;
- Issues and problems are discussed and solutions are identified;
- The goals of the IPE and the OJT agreement are monitored and met;
- The quality of services is maintained; and
- The transition to extended services (if needed) does not occur until the individual has substantially met the work goal.
Reasonable Accommodation

One of the job placement functions that a TVR counselor performs is to assist the participant and the employer with reasonable accommodations. According to the Americans with Disabilities Act (ADA), a reasonable accommodation is any modification or adjustment to a job or the work environment that will enable a qualified applicant or employee with a disability to participate in the application process or to perform essential job functions. Reasonable accommodation also includes adjustments to ensure that a qualified individual with a disability has rights and privileges in employment equal to those of employees without disabilities. An employer who is not Tribal or is located off the reservation and has fifteen or more employees is required to comply with the ADA.

Assistive technology (AT) is one way to provide accommodations for a person with a disability to perform their job duties. AT can be purchased by the employer, TVR program, or other programs or agencies, or it can be a shared cost. Any accommodation can be considered reasonable unless it would impose an undue hardship on the operation of the employer's business. The ADA defines “undue hardship” as an “action requiring significant difficulty or expense” when considered in light of a number of factors. These factors include the nature and cost of the accommodation in relation to the size, resources, nature, and structure of the employer’s operation. Undue hardship is determined on a case-by-case basis.

There are common misunderstandings by employers about job accommodations, particularly AT. For example, some employers believe that all AT is expensive, that AT is complicated to find and use, that AT is a luxury and not a necessity, and that specialists in AT need to be involved. According to job accommodation experts, the amount of money employers often need to pay to accommodate a particular worker’s disability is surprisingly low, and up to 88 percent of accommodations can be completed for less than one thousand dollars.

Substance Use and Reasonable Accommodation

According to the ADA, substance use disorders are disability conditions that are covered by the ADA. However, workers currently engaging in
the use of substances are not protected by the ADA. The ADA protects individuals who have successfully completed substance-use rehabilitation and are not currently using; individuals who are participating in supervised substance-use rehabilitation programs and are not currently using; and individuals who have been erroneously regarded as engaging in drug/alcohol use, but who are not.

An employer may be required to provide an accommodation to someone with a substance use disorder. However, an employer can discipline, discharge, or deny employment to any person whose use of substances adversely affects job performance or conduct. An employer also may prohibit the use of alcohol or other substances in the workplace and can require that employees not be under the influence of substances, including alcohol, while at work.

**Reasonable Accommodations and the CFR**

Title 34 CFR § 104 of the Code of Federal Regulations, “Non-discrimination on the Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance,” addresses reasonable accommodations and the responsibilities of employers:

a) A recipient shall make reasonable accommodation to the known physical or mental limitations of an otherwise qualified handicapped applicant or employee unless the recipient can demonstrate that the accommodation would impose an undue hardship on the operation of its program or activity.

b) Reasonable accommodation may include

1. Making facilities used by employees readily accessible to and usable by handicapped persons, and
2. Job restructuring, part-time, or modified work schedules; acquisition or modification of equipment or devices; the provision of readers or interpreters; and other similar actions.

c) In determining pursuant to paragraph (a) of this section whether an accommodation would impose an undue hardship on the
operation of a recipient’s program or activity, factors to be considered include

1. The overall size of the recipient’s program or activity with respect to number of employees, number and type of facilities, and size of budget;

2. The type of the recipient’s operation, including the composition and structure of the recipient’s workforce; and

3. The nature and cost of the accommodation needed.

**Accommodation Resource**

An excellent resource for ideas about accommodations is the Job Accommodation Network (JAN, https://askjan.org). JAN is funded by a contract from the US Department of Labor, Office of Disability Employment Policy (ODEP). The content has been developed through a collaboration between ODEP, West Virginia University, and private industry. It is considered the leading source of free, expert, and confidential guidance on workplace accommodations and disability issues.
DISCUSSION QUESTIONS

• What is an example of a reasonable accommodation an employer might make for one of its employees who has a disability?

• What might be an example of an accommodation that would pose an undue hardship on an employer?

• What kinds of misperceptions do you think employers have about accommodations for participants with disabilities? How can TVR help modify those perceptions?

• Why do you think information about reasonable accommodations and AT would be useful to employers?

• Which employers in your area can you think of that would benefit from some education about reasonable accommodations and AT?

• What information about reasonable accommodations do you think would be most important for local employers to know? How might you approach an employer with this information (e.g., whom would you talk to, how would you present the information)?

• How might things change for your participants with substance use disorders who are not currently using when they learn they are protected by the ADA and have a right to reasonable accommodations?

Job Development

Job development is about building working relationships between programs, participants, and employers. These relationships are built through trust, honesty, sincerity, and integrity. Just as each individual has a unique approach to personal relationships, job development requires a personal approach with employers to meet the needs of employers and participants. Job development is about having enough understanding of the local job market and employers to be able to identify opportunities
to help both employers and TVR participants. Job development is about perceiving, conceptualizing, and articulating a vision for individuals on both sides of the employment relationship. In addition, it is about helping participants find their dignity and recognize their value within their communities. If the TVR program does not have a designated job developer, TVR counselors may take on this role for their participants.

If a TVR program is new to job development, it can be a good approach to start small. Consider building one relationship with one employer at a time. Having an outreach plan can be helpful. This can be created in a team environment with a discussion of who does what in terms of contact with the chosen employer. Reach out regularly, perhaps once per week or month or quarter. Outreach should be friendly and done in the spirit of connection. Building from common ground and spending time getting to know the employer can be helpful. Ask relevant questions and listen attentively to the replies.

In the beginning, be curious and exploratory—make no promises and try to keep expectations low. Be aware that rejection is part of the job-hunting process, both for the participants and the TVR counselor or other TVR staff. Being prepared for this can be a helpful tool in the work. Also, rather than approaching employers to ask for something, approach employers with something to offer.

One of the essential pieces of job development is creativity. Creative solutions to problems can help employers and participants imagine a better fit in a workplace environment. For example, if a participant cannot lift a forty-pound box that needs to be moved from one room to another, the job developer must ask how the box can be moved from point A to point B other than by carrying it. Can a tool, such as a dolly, be used to move it, or can the participant simply move to another table to work rather than move it? A second example might be if an employer states that only three or four hours a day per week are available for a person who needs full-time work, perhaps there are other nearby offices or employers that could share the employee’s time and talent.
Job Development Strategies

A job developer or TVR counselor could start the job development process by (a) taking a personal approach with employers, such as searching for personal commonalities; (b) providing testimonials; (c) promoting the TVR agency, its services, and the participant(s); (d) observing a workplace environment and looking for a positive office culture and diversity; (e) conducting cold calls timed appropriately to talk with employers and key hiring personnel; (f) continuing to contact businesses and look for staff turnover; (g) presenting a solution to an identified business need (e.g., high turnover); and (h) looking for new businesses and small businesses.

Challenges and Realities Faced by Job Developers

There are many challenges and realities that might affect the success of securing employment through job development. They include

- Fewer jobs than job seekers;
- Tremendous competition for available jobs;
- Technology replacing human work;
- TVR participants having more barriers than other job seekers; and
- Lack of training opportunities for job developers.

Job Descriptions

One strategy for job development involves finding opportunities for jobs by analyzing job descriptions. There is a three-step process that most employers follow to create job descriptions and qualifications. An example of this process is below.

1. An employer identifies a need or a problem to be solved.

One of the services that contributes most to building customer loyalty in a bookstore is the quick response to request for out-of-stock or hard-to-find books. Recently, however, the magnitude of these requests has become cumbersome and staff has not had the
time for follow-up calls and emails. The owner of the bookstore has decided that it is time to hire someone who will be solely responsible for this function. Thus, a need for a new job has been created and the bookstore now needs someone to fill this role.

2. The employer considers what skills are needed to do the job.

Once the bookstore owner identifies the problem, they need to determine the skills required to perform the job tasks. For this particular position, the skills could include abilities to listen and communicate effectively, and an aptitude for multitasking.

3. The employer creates qualifications for the new job.

To reduce the number of applicants and reduce the risk of hiring the wrong person, the bookstore owner creates the job description, including the minimum qualifications, for the new job. These might include at least three years’ quality customer service experience, an outgoing personality, and demonstrated phone and computer skills.

At times, participants of TVR agencies may not meet minimum qualifications; however, they might meet the employer’s basic needs. A job developer can help employers identify what skills are needed to improve the effectiveness, productivity, and success of their businesses. This type of service should be the subject of conversations with employers. In the above scenario, the job developer may not focus on the minimum qualifications the bookstore has created, but instead on how they can help the employer to meet identified business needs. The measures of a good job match are the results produced, not the list of duties and qualifications that describe it.

In summary, based on the analysis of a job description, a job developer can

- Identify the needs of an employer that a participant can fill based on their skills and abilities;
Identify businesses that have similar needs to create the participant’s potential job market; and

Propose employment to potential employers by first identifying or defining their needs, and then presenting the value and benefit of hiring a TVR participant who can meet them.

Hidden Job Market

The hidden job market describes all the job openings that are not advertised or posted online. To understand the hidden job market, a job developer needs to understand how employers fill their job openings. There are several ways, including

- Supervisors hire someone they know, which is very low risk;
- Supervisors hire someone co-workers know, which is also low-risk;
- Human Resources hires someone they have already interviewed, which requires less effort and resources;
- The business contacts private placement agencies or job developers; or
- The business advertises openings in the newspaper or on job boards, which is the most labor-intensive, although some companies’ policies do require posting of positions in this way.

Only 10 to 20 percent of jobs ever reach the open job market because 80 to 90 percent of employers hire using the first three options above. This means that one of the essential tasks of a job developer is being known to the local employers. Job developers need to reach out to employers whether or not there is a posted job. Later, when employers are looking to hire, they already know whom they can turn to for assistance in filling their positions.

In addition, participants can be coached to make similar contacts. If participants want to work in a bookstore, they should get to know every person they can who works in a bookstore. Or if they want to be bakers, they should meet every baker in town. Although not always feasible, it can
be helpful for participants to have already met with HR at the companies they are interested in. That way, when openings occur, the participants might have application materials on file or already be in the mind of HR.

**SAMPLE JOB DEVELOPMENT SCENARIO**

There are numerous ways to start a partnership with an employer. An example is below:

If a business is advertising in a newspaper, it may be struggling to fill positions. When this occurs, one technique a job developer can use is to wait until the position is filled and then make contact later. A conversation might start from something like,

“I noticed you were advertising for production workers a couple of weeks ago. I assume that you were able to fill those positions?”

[Wait for confirmation.]

“Do you mind my asking how many people applied for those positions? And how many did you interview? Your experience was not unusual. I speak to business people every day who are seeking alternatives to the labor-intensive process of advertising in the newspaper to fill their openings. I would like to meet with you for 20 minutes or so, at your convenience, to talk about an alternative offered through our program. Should you find that our program can meet your organization’s needs, the next time you have a job to fill, we will send you two or three prescreened applicants to choose from, rather than the crowd of 30 you just dealt with. And, let me add, we will not bill you for these services. We are funded through the [TVR program].”

**Job Development for Transition Students**

Even though schools are mainly responsible for providing transition services while a student is in school, TVR can help students and youth with disabilities obtain and keep competitive employment in integrated settings. TVR’s role is one of planning and preparation for when a student graduates or exits the school system.
Youth and students with disabilities may lack experience, be unaware of their limitations and barriers, or have undeveloped interests and passions. The longer a TVR counselor has to develop a relationship with students and youth, the more information they can gather to find fitting jobs for them.

The characteristics of transition services include

a) Being outcome-oriented, which promotes movement from school to post-school activities, while taking into account the student’s needs, preferences, and interests;

b) Delivering instruction, providing community experiences, developing employment opportunities, and meeting post-school objectives;

c) Promoting the achievement of the employment outcome in the IPE; and

d) Providing outreach to and engagement of the parents or other legal guardians.

Many Tribes have programs offering youth work experiences in the summer and even year-round. If possible, team up with these programs to help find transition students real-work experiences. If a student needs additional support or accommodation, be ready and responsive as a resource.

Sample activities to engage transition students include

a) Touring local companies and businesses;

b) Helping students become involved in activities with traditional foods, language, arts, or dance;

c) Interviewing or job shadowing an adult worker in fields of interest;

d) Practicing job applications and interview skills;

e) Volunteering in an area of career interest; and

f) Matching Elder and community leader mentors with interested Youth.
DISCUSSION QUESTIONS

- Who does job development in your TVR program?
- What are some qualities of a great job developer?
- What have your experiences been like with designated job developers?
- Which of your own qualities do you think would be strengths while providing job development services?
- Why do you think optimism and a positive attitude are important in job development?
- What do you think the hidden job market is in your community?
- What do you think the biggest challenges are in job development?
- Which employers might you start a relationship with first?
  - Employers with the best reputations?
  - The largest employers?
  - Ones your program already has worked with and been successful?
  - Employers you already have personal connections with?

Customized Employment

Customized employment is an approach for assisting individuals with disabilities to become competitively employed. It involves getting to know the participants and the unique skills and talents that they can offer to employers. Customized employment is not driven by the local labor market but by the needs of the TVR participant. It is a flexible process designed to personalize the employment relationship between a job candidate and an employer in a way that meets the needs of both, and it emphasizes an individualized approach to job development: “One person at a time, one employer at a time.”

Customized employment typically requires that a TVR counselor or job developer establish a relationship with a business so that the counselor
is aware of the employer’s unmet needs. The job should match the participant’s unique strengths, needs, and interests. Once a person’s skills, talents, and interests are identified, employers can be approached and a customized job negotiated that is of benefit to both the job seeker and the business. The outcome of the negotiation process with employers is that the employee with a disability has a unique, personalized job description that is new to the employment site, and the employer has a qualified worker with a disability.

Two Approaches to Customized Employment

There are two types of job development approaches that work well for creating customized employment opportunities for participants, employer-focused and participant-focused.

- Employer-Focused

In the employer-focused approach, the TVR counselor becomes familiar with a business without having a particular participant in mind. The purpose of the relationship is for the counselor to spot areas in the business that would benefit from increased efficiency and productivity. This means that the TVR counselor learns about the employer’s business needs over time through many informational interviews and observational visits.

- Participant-Focused

In the participant-focused approach, the TVR counselor and employer look for ways that a particular participant can best contribute to a business. This entails the employer’s learning about the participant through interviews or work experiences and then generating ideas after getting to know the participant.
Supported Employment

Supported employment offers TVR participants with the most significant disabilities opportunities for employment by providing supportive assistance as needed, primarily at participants’ worksites. A placement in a Tribal environment is often a supported employment placement for a TVR participant with a severe disability. Supported employment services are tailored to the individual’s strengths and challenges in order to facilitate learning and performing the tasks of a job.

Any participant who needs significant support finding, learning, and sustaining a job should receive supported employment services. Sometimes it is useful to partner with state VR for these services, if possible. Participants should always understand that they have the right to work, and that contacting supported employment agencies within their communities, if there are any, is the first step. The next step is for the program to assign participants employment specialists or job coaches, whose responsibility is to connect with the participants and their families to look for suitable employment for the individuals. If there are no supported employment agencies within or near the community, the TVR counselor may need to help with job coaching responsibilities or ask the program to hire an individual within the community to provide job coaching.

According to 34 CFR § 371.6, “supported employment services” means ongoing support services—including customized employment and other appropriate services needed to support and maintain an individual with a most significant disability, including a youth with a most significant disability, in supported employment—that are

i. Organized and made available, singly or in combination, in such a way as to assist an eligible individual to achieve competitive integrated employment;

ii. Based on a determination of the needs of an eligible individual, as specified in an individualized plan for employment;
iii. Provided by the Tribal Vocational Rehabilitation Unit for a period of time not to exceed twenty-four months, unless under special circumstances the eligible individual and the rehabilitation counselor or coordinator jointly agree to extend the time to achieve the employment outcome identified in the individualized plan for employment; and

iv. Following transition, as post-employment services that are unavailable from an extended services provider and that are necessary to maintain or regain the job placement or advance in employment.

Types of Supported Employment Services

There are many types of supported employment services, including

- Necessary additional assessments at the work site;
- Job coaches at the work site;
- Job development and placement;
- Social skill training;
- Regular observation or supervision;
- Follow-up services with participants, employers, parents, family members, advocates, and other authorized persons;
- Facilitation of natural supports at the work site; and
- Provision of other support services at or away from the work site, such as transportation and personal assistance services.
DISCUSSION QUESTIONS

• What experience have you had with customized or supported employment?
• What improvements would you like to see when it comes to providing supported employment options for your participants?
• What is an example of a workplace you know of that has unmet needs or where jobs could be restructured to create a position for a TVR participant?
• What resources are you aware of for providing ongoing supported employment to participants who need it long-term?
• Do you tend to have more of an employer-focused approach or a participant-focused approach when investigating customized

Job Coaching

Job coaching helps match a participant with the right job and helps a participant learn to perform job tasks and interpersonal skills necessary to be successful at a job. TVR programs may not have job coaches, so it may be helpful to collaborate with state VR for resources. It may also be possible to hire someone from the community to help train the participant in lieu of a job coach. The role of job coach may also be part of the counselor’s role, if necessary. Job coach duties include helping participants understand their job goals, identifying strengths and weaknesses in a particular job, finding solutions to barriers, assisting with goal setting, teaching job search techniques, advising on workplace accommodations, troubleshooting when issues and problems come up, and monitoring and documenting progress. Job coaching can also include setting up natural supports in the work setting, such as relatives, friends, or co-workers who agree to help participants if they run into difficulties or are unsure what to do in a situation.

By placing a participant directly in a job with the hands-on assistance of a job coach, areas of vocational and personal strength and weakness
become apparent early in the process and are based on actual, not projected or simulated, experience. In such a placement, the participant is able to receive immediate feedback, assistance, and follow-up from the support person, and an employer can observe the progress of the participant at the beginning of the process. Short-term job coaching can provide mentoring and support until the participant has mastered the job duties, offer accommodation ideas, and assist the TVR participant with additional training related to learning the job, including developing appropriate workplace social skills.

**Steps and Considerations**

Some steps and considerations for the job coach described by Denise Bissonnette, in her book Beyond Traditional Job Development: The Art of Creating Opportunity, include the following:

- Interviewing participants’ supervisors to learn their expectations and performance requirements, keeping in mind that the supervisors may not have been the individuals in the company who made the decisions to work with job coaches. During the interviews, encourage them to ask questions and express their concerns, while reassuring them that the purpose of job coaching is to facilitate the participants’ independence and success.

- Being aware that a potential concern of supervisors is that they will have less influence or authority with the employees because job coaches will be present at the worksite. One way to lessen this concern and increase the supervisors’ cooperation is by asking for the supervisors’ direction and approval of job coaching efforts.

- Continuously building natural supports into the work environment to decrease the participants’ reliance on the job coaches.

- Providing training to the co-workers in order to explain participants’ unique needs, demonstrate the use of disability-friendly language and attitudes, respond to co-workers’ questions and concerns, and encourage co-workers’ and supervisors’ comments and ideas.
- Requesting co-workers’ ideas and insights for shortcuts or alternative ways to approach the job. This can potentially strengthen their natural support of the participant.

- Reporting favorable attitudes and actions of supportive co-workers and supervisors to managers or, when appropriate, to the owners of the companies. This can be accomplished through information communication channels or through more formal methods, such as during staff meetings or with letters of appreciation.

- Offering insight regarding different ways of performing the job tasks that were discovered after conducting job analyses.

- Keeping copies of job analyses with related job accommodations and then sharing this information with employees who have similar positions in the companies.

- Looking for additional ways to make the most of the participants’ abilities, including alternative employment proposals when there is potential to increase the effectiveness or profitability of the participants.

- Offering assistance to other employees, whenever possible, as well as to the participants, in order to make the job coaches’ time spent at the worksite as profitable for the businesses as it is for the individuals.

- Assisting participants to perform at their best, highest levels.

**Job Coaching Video Examples**

*The Job Coach*, https://www.youtube.com/watch?v=yGMNkyr9idM.

*Job Coaching Intro* (for employer), https://www.youtube.com/watch?v=YNStuhDVIIoM.

DISCUSSION QUESTIONS

• Do you think it is feasible to use job coaches in your community? Why or why not?
• What types of job coaching have you done in your program?
• What are some examples of participants who could have benefitted from job coaching, and how could their outcomes have been different with such services?

Self-Employment

Self-employment is a vocational option that might be considered when it is determined that it is the most appropriate method for participants to reach their employment goals. Self-employment can be an ideal employment outcome for individuals who have the skills, interests, resources, supports, and discipline to develop and manage their own businesses. Self-employed individuals earn their income through conducting profitable operations from trades or businesses that they operate directly.

TVR Counselor Role in Self-Employment

The TVR counselor’s role in working with a participant whose employment outcome is self-employment may include:

- Assisting participants in locating information about self-employment prior to making decisions to pursue self-employment as their employment outcomes;
- Assessing participants’ potential for self-employment;
- Providing the participants with information on community resources that can provide support during the self-employment process, such as Tribal business or entrepreneurship resources, Small Business
Development Centers (SBDC), Senior Corps of Retired Executives (SCORE), and the Small Business Administration (SBA);

- Assisting the participants in obtaining the skills and tools necessary for the particular types of business;
- Guiding and supporting participants through the self-employment process; and
- Reviewing and evaluating participants’ business plans to determine feasibility.

**Role of the Participant in Self-Employment**

TVR participants who have self-employment goals may be responsible for the following activities:

- Identifying agencies or consultants to help with putting ideas into business visions;
- Participating in assessments to determine whether self-employment is an appropriate goal for them;
- Learning basic bookkeeping and business management skills;
- Doing informal feasibility studies to see if their business ideas could be viable;
- Preparing and submitting business plans that include any required elements of a business plan as defined by the TVR policies and procedures; and
- Identifying funding sources for the businesses.

**Traits of Those Successful in Self-Employment**

TVR participants interested in self-employment must possess a unique blend of skills, interests, resources, and supports to ensure that the business will be successful. These individuals generally must be highly motivated, disciplined, and hard working. People who have their own small businesses need
to be able to plan ahead, be flexible enough to deal with uncertainty, and be willing to put in long work hours to complete all needed tasks.

**Planning Considerations for Self-Employment**

Throughout the IPE development process, TVR counselors should be aware of the participants’ planning skills, their abilities to develop business plans, and their enthusiasm, initiative, and follow-through on deadlines. Counselors may find the answers to the following questions valuable in assessing the feasibility of self-employment plans, including those related to (a) disability; (b) background, goals, motivation, and interests; (c) needed TVR services and accommodations; (d) support systems; (e) business vision and expectations; and (f) financial considerations.

**Disability-Related**

- What are the participant’s physical and cognitive capabilities in relation to the actual work requirements of the proposed business?
- What are the participant’s abilities and strengths?
- What are the participant’s rehabilitation needs?

**Background, Goals, Motivation, and Interests**

- Does the participant have clear goals and visions for the proposed business?
- Does the participant have experience in self-employment or in the selected business?
- Does the participant have necessary transportation for the selected business?
- Is the participant willing to take classes to acquire the necessary knowledge?
- What is the participant’s background, education, and work experience? What talents, training, or education do they have for the kind of work they are interested in?
What work-related activities does the participant enjoy?

What are the participant’s current skills and abilities for performing the required business functions?

Why does the participant want to start their own business? Why is starting their own better than working as an employee in a business that is already established?

What personal or career goals and dreams does the participant hope to achieve? For example, are they looking for income, for community participation, for personal satisfaction in particular types of work, or control over their work and schedules?

Why does the participant think that they will succeed?

**Needed TVR Services and Accommodations**

- What accommodations, if any, are needed?
- What rehabilitation technology, if any, is needed to achieve the self-employment goal?
- What are the essential functions that the participant needs to complete for the business to operate?
- What are the gaps between business functions and the participant’s skills?
- What resources or supports, such as training, job shadowing, or self-employment coaching, are needed to address the gaps or enhance business operations?
- What are the participant’s expectations with respect to assistance from TVR?

**Support System**

- What support does the participant have from others? Does the participant have strong family support, or can strong support groups be developed for them?
After analyzing the business functions, the participant’s abilities, supports, and resources, are self-employment goals the right “business match?”

Are follow-along support services needed to assure success?

**Business Vision and Expectations**

- When the participant thinks about running their business, what day-to-day responsibilities do they see themselves having? What would their daily routines be like? Do the daily activities excite them and offer the quality of life they are looking for?

- What kind of work environment and climate (e.g., daily schedules, pace, social contact) does the participant want? What does this environment look like and whom will they come in contact with there? Does the imagined business provide these things for the participant?

- What does the participant not want to occur with this business? Describe their worst nightmare.

- What types of commitment does the participant feel is necessary to make their business successful?

- What specific products or services will the participant sell? What information do they have to indicate that people will want to buy their products or services?

- Who are the potential customers?

- Does anyone else in the community already sell the products or services in mind? If so, why would people buy from the participant instead?

- Where will the business be located? How will customers hear about and obtain the products or services?

- How does the participant plan to measure whether the business is succeeding?
Financial Considerations

- What is the bottom line? How many products or services need to be sold each month for the business to cover expenses?

- Have the costs of starting the business been looked at realistically? Have actual cost figures been determined?

- Does the participant have their own resources to invest in the business? Do they have access to private resources other than their own?

- Is the participant willing to take on debt to start the business?

- What equipment is needed to make or deliver the products or services? Will equipment need to be rented, leased, or purchased?

- How does the participant plan on completing bookkeeping tasks?

Self-Employment Resources

Below are some assessment resources that may help the TVR counselor and participant to know if self-employment is a good option:


Feasibility

Before the development of a business plan, a feasibility study should be completed. It is important to look closely at the financial picture and the practicality of the proposed business plan. The TVR participant must plan to make enough sales to produce adequate revenue to pay all expenses, (re) invest into the business, and provide the necessary income for the participant every month.

Some TVR agencies have the benefit of Tribal small business advisors and others with small business experience who can help with the feasibility phase and the analyzing of the financial projections. For those who do not, it is important to conduct a study of the following:

- **Competition:** It is important to understand the potential competition for the business. Specifically, what are other people already doing that is similar to what the participant wants to do? Is there a market for this business that the participant is starting?

- **Break-Even Analysis:** The fixed and variable costs in the business need to be analyzed so that the TVR counselor and participant know how many items need to be sold and at what price to fully cover expenses. Knowing the break-even point each month will help to know how many extra sales need to be generated to make the desired profit.

Business Plan

After it has been determined that a TVR participant has the skills, interests, and supports in place for a self-employment outcome, and the feasibility has been completed, a business plan should be developed. The business plan is a comprehensive document that describes the nature of the business as well as the goals, activities, strategies, and financial projections. There are many formats that the plan can use and there are many resources to help with writing them. Some TVR programs have a standard template for participants to follow. The plan should describe all components of the potential business and include the following:
• A cover sheet with the name, address, and phone number of the business and the name and contact information of the person who wrote the business plan.

• A one- to two-page executive summary that provides an overview of the proposed business;

• A detailed description of the business including, but not limited to, whom it will serve, what products or services will be offered, the number of employees, and the goals of the venture.

• A management and operation plan that describes an organizational chart, identification of staff, staff qualifications and respective roles, planned hiring practices, and how the business will be operated.

• A description of the plan for marketing the business including a description of the target market and the analysis report of the identified need, a summary of current and future competition, the strengths and weaknesses of the business, and a detailed marketing strategy.

• A detailed financial description, including planned operating costs, projected expenses and revenues, a cash flow analysis, a break-even analysis, a balance sheet, and an income statement. The projections identified in the financial plan will provide the basis for benchmarks for determining the stability and progress of the business. These benchmarks will be incorporated into the IPE and will be used in determining when case closure is appropriate.

• Any additional documents related to the business, such as leases, patents, licenses, permits, insurance, and other legal documents; résumés of essential personnel; letters of intent and memoranda of understanding; and regulatory documents, assurances that the business complies with all relevant laws and regulations in the Tribal or local area, and other documents related to the specific business.
Training

Training may be provided in order to raise the participant’s skills to a level at which self-employment can be considered a feasible employment outcome. If the program has several participants pursuing self-employment at one time, it may be worth partnering with other programs in the Tribe to create a workshop to assist participants. Examples of training that may be useful include coursework related to the establishment and management of a small business enterprise, the principles of bookkeeping and business management, and the development of a marketing plan.

Technical Assistance

Technical Assistance is used for TVR participants whose employment goals involve self-employment, telecommuting (working from home), or small businesses. Technical assistance services include consulting services to conduct market analyses, develop business plans, and provide additional resources.

Other Common TVR Services for Self-Employment

TVR services and assistance common in an IPE for a participant with a goal of self-employment may include, but are not limited to, the following:

- Referral to community resources or local colleges for basic business courses, assistance in developing a business plan, and assistance in business start-up.
- Purchase of specific goods and services in accordance with an approved IPE and an approved business plan.
- Purchase of other TVR services needed in order to successfully achieve self-employment.

Policy and Procedure for Self-Employment

Below are considerations for the development of TVR policies and procedures regarding self-employment vocational goals for participants.
Establishing a business can be a lengthy process, so it may be necessary for a TVR program to establish time frames for developing a business plan, and if approved, implementing the plan.

Some participants may request funding for an existing business. If the requested funds are because the participants lost previous funding due to poor management and planning, it may be wise to connect the participants with resources to help with remedying those issues so that they do not recur. A TVR program may also recommend that participants first try obtaining funds from other agencies or lending institutions.

Other considerations for the TVR’s role in policy development include the following:

- TVR cannot be the only funding source of a self-employment enterprise.
- TVR will not purchase or lease any type of vehicle that is needed for the business.
- TVR will not sign a lease or purchase any building or land.
- TVR will not make any improvements or permanent additions or modifications to any business property except to the extent necessary to make the property physically accessible to the participant operating the business.
- TVR will not fund business license renewals (they should be planned for in advance).
- TVR will not support a business that doesn’t comply with all relevant Tribal, county, state, and federal laws and regulations.
- TVR will not support businesses that are highly speculative in nature, those organized as non-profits, or those whose business plans demonstrate that the TVR successful employment criteria would not be met.
- TVR will not refinance or pay off existing debt.
Comparable Services and Other Resources

Sources for comparable services for small business development include services through:

- Local small business development centers
- Small Business Administration, https://www.sba.gov/
- “Resources for Native American Women Business Owners,” Self Made, http://becomingselfmade.com/2016/05/10/business-resources-grants-for-native-american-women; and
DISCUSSION QUESTIONS

• What are your thoughts on supporting self-employment for participants?
• What kinds of barriers can you see in providing self-employment services to participants? What are your thoughts on overcoming these?
• Is self-employment something that you have offered to participants in the past? What are your experiences with this?
• What resources does your agency have to assist participants interested in self-employment?
• How comfortable do you feel with assisting participants interested in self-employment? What aspects of the process would you want outside help with?
• How do you know if a participant is ready, willing, and able to start self-employment? What sorts of things do you think are important?
• What kinds of policies and procedures does your TVR program have regarding self-employment or small businesses for participants? Do you think that they cover the issues that come up?
• What kinds of comparable services and outside assistance might you consider when working with someone who is interested in self-employment?
• What types of licenses are needed to operate a business in the community or to do business with the Tribe?

Follow-Up and Follow-along are job-related services that TVR counselors provide to participants after they have started working. Similar to job retention, follow-up and follow-along occur during the 90-day period before participant's file is closed and the participant is considered to have been successful in vocational rehabilitation. Services ensure the stability of the
participant’s work placement and are provided by the TVR counselor or, in some cases, the job coach.

If additional services are needed after job placement, the IPE can be amended and services can be provided. If it appears that a participant may lose the job during this time, for example, services to address barriers or troubleshoot the work situation with the employer can be added to the IPE. Services might include soft skills training, anger management classes, assistive technology, training in how to dress or communicate, medical or counseling services, transportation services, or support services from a job coach. Such services could also be provided after closure, but they would be considered “post-employment services” and would require a post-employment service plan.

**Job Retention**

A solid job retention strategy starts before the participant’s first day of employment. It is important to talk with participants about any first-day-of-work anxiety they might be experiencing. To address this, the counselor might contact participants the day before they start work to talk with them about how they’re feeling about the job and reassure them that the employers believe that they were the best fits for the jobs and could do the jobs well. Family and friends play an important role in retention as well. Although many family members may be supportive of the participants and their new jobs, there may be some people close to the participants who, for whatever reason, may not want to see them succeed. Ensuring that the participant has a strong positive support system prior to the first day is helpful as well. It may be useful to assign someone who is a part of the support system to check in with the participant on a regular basis for the first few weeks or months of employment.

Before the start of employment, it is important to talk about contingency plans that address common setbacks. By having a plan A and a plan
B, and sometimes a plan C and a plan D, for specific situations, participants can feel more in control of issues that may arise. Common issues that develop may be difficulties with transportation, childcare, appropriate work clothing, or illness.

Once a participant starts employment, the TVR counselor should continue to check in with the participant regularly. A successful employment outcome is achieved when the participant has maintained employment for a minimum of 90 consecutive days. The first months of a placement are a critical time for the success of long-term employment, as the participant adjusts to the demands of the job and going to work every day. At the end of the 90-day period, the counselor should consult with the participant and the employer to consider whether the employment placement is satisfactory and if the participant is performing effectively on the job before closing the participant’s case as successfully employed.

It is important to look for indicators that the participant may decide to quit or that the employer is unhappy early in the process after a participant starts a new job, and to have discussions with both parties if there are concerns. This way, the counselor can help diffuse any issues that may arise or supplement skills or training that may still be needed by the participant. Common reasons a participant might want to quit include concerns such as those listed below:

▸ Difficulty adjusting to a new schedule. Help participants prepare for the new schedule by talking about time management, setting alarms, keeping calendars, and the importance of adequate rest and exercise ahead of time. Consider discussing the importance of punctuality prior to the first day of employment.

▸ Feeling like the pay is not worth the work. The counselor can address this ahead of time by helping participants with basic financial literacy. Participants need to be aware of taxes and any other deductions that may come out of their pay. It is also important to talk about why setting some money aside for savings is important.

▸ Disliking the boss, co-workers, and customers. Soft skills (e.g., getting along with people as opposed to liking people) can help participants mentally and emotionally prepare to handle the people
in their work environments, as can problem solving ways to deal with challenging situations that come up often.

- Feeling like the job is a dead end. It is beneficial to talk with participants about how the current jobs meet their long-term goals. Talk with them about job progression, creating job stability, and when it is time to leave a job and move to the next step.

Assessing Work Adjustment

At the start of employment, the TVR counselor should also assess the participant’s initial adjustment to the job. This should start the very first day of the participant’s employment, and involves the counselor’s getting a sense of how the participant feels about the work and any issues that may be on the horizon. Counselors might ask the following questions:

- Is this job what you thought it would be? Does it meet your expectations?
- What did you expect the job would be like? What is it really like?
- What are you proud of about the work you did today? What have you done today that would make your boss want to keep you if there were a layoff?
- Is there anything you need help with that would help you feel better about your work?

Within the first week, set up a meeting with the participant, supervisor, and any other relevant people, such as a job coach or supportive family member. Meeting with all the people involved in the participant’s employment helps ensure multiple perspectives about whether the essential performance standards of the job are being met and whether the participant has all the accommodations necessary to be successful. The counselor might even contact the employer by phone after the first day (with an ROI in place) to see how things went with the participant as compared with other new hires, or ask the employer if there is anything about the participant’s performance that needs to be addressed.
If any of the team members feel that the essential performance standards of the job are not being met or that the participant does not have all accommodations necessary to be successful, the job retention period can be extended with approval from the participant. During the job retention period (or later, if post-employment services are provided), the participant can receive training to manage new responsibilities or be provided with adaptive equipment. The employer can also be provided with technical assistance during follow-up.

New or changed services that are provided to the participant within this time period should be reflected on an amended IPE.

**Assisting Employers**

Sometimes it can be useful to assist employers, in addition to participants, when it comes to job retention. TVR counselors can help employers identify job duties in a clear, non-biased way; can recommend assistive technology or adaptive equipment; and can help with sensitivity and disability awareness training for staff.
DISCUSSION QUESTIONS

• Are there policies in place in your TVR program for follow-up and follow-along?

• What has worked for you or other TVR counselors in terms of how often to follow-up with participants who have entered employment?

• Why do you think that some participants are most likely to lose their job within the first 90 days of job placement?

• How do you follow up with participants during the first 90 days of their jobs?

• How do you think your job retention efforts could be improved?

• What other strategies do you have for helping participants keep their jobs?

• How might you assess your participants who are starting new jobs?

• What do you do to help if a participant is not meeting the essential performance standards for the job?

• What are your current relationships like with employers with whom a participant has been placed?

• What are some ideas about how you can support employers for participants who are in the job-retention phase?

• What steps do you take or strategies do you use with participants who are about to start jobs?

• Based on your experience, what do you think are the most common reasons that participants may not stick with jobs?

• How might a counselor be supportive of both the participant and the employer in the first weeks of a participant’s job placement?
Closure Overview and Follow-Up

Closure of a participant’s case file can occur at any point in the TVR process. A case can be closed successfully after a participant has been employed for at least 90 consecutive days, or the case may be closed unsuccessfully for a wide variety of reasons.

Counselor Responsibilities at Closure

When closing a participant’s case file, the TVR counselor has a responsibility to use sound judgement to ensure that a case is not closed prematurely or kept open longer than necessary. It is important to involve participants in the case-closure process so that they understand the reasons for closure. When possible, meet in person with participants and let them know that it is an appropriate time for case closure. If they do not agree with the reasons for closure, the issue can be discussed and an agreement can be made to keep the case open. If not, the case will be closed.

Closing an Unsuccessful Case

When the need for an unsuccessful closure happens, TVR counselors should treat the situation just as they would for a participant who is ineligible for services, per the Rehabilitation Act of 1973 as amended, Section 102(a)(5). The Rehabilitation Act reminds TVR counselors that they must not make assumptions (especially about particular impairments), but instead use the facts and data of each unique case. For cases in which TVR counselors have not simply lost contact with the individuals, the counselors must attempt to consult with the individuals about why their cases are being closed. Counselors must, in writing, explain the reasons for the closures, using clear and convincing facts and data. In addition, participants must be provided information about their options for grievances, appeals, and advocacy services, such as the Client Assistance
Program. For closures that take place after IPEs are signed, the closures must be reviewed for possible reopening within twelve months and anytime thereafter if requested.

If TVR is not an appropriate program for participants, it is important to make referrals to other agencies or programs that can assist participants with their needs. If participants were referred by other agencies and current releases are on file, it is important to follow up with the referral sources to make them aware of the case closures.

Common reasons for the unsuccessful closing of a participant’s case include

- An inability to locate or contact the participant;
- The participant has moved outside of the TVR program service area;
- The participant’s disability has been determined to be too severe after the provision of services;
- The participant has refused services;
- The participant has died;
- The participant has been institutionalized;
- The participant no longer wishes to work with TVR and has transferred to another agency;
- The participant has failed to follow through with or complete activities contained in the IPE;
- The participant has been determined to not have a disability condition affecting an ability to obtain, maintain, or retain employment, and services are not required.

A sample Unsuccessful Closure form can be found at the end of this module.
Closing a File during the IPE

When it is clear that a participant is not able to achieve an employment outcome despite TVR services, the case file is often labeled, “Incapable of benefitting.” This can occur for many reasons. Most commonly, the disability condition(s) that the individual experiences have become more severe, were not accurately assessed pre-eligibility, or additional conditions or barriers have become factors in achieving an employment outcome. Another common reason is because the participant is no longer following through, and the TVR counselor is unable to contact the participant despite multiple attempts.

Closing a Case Successfully

A TVR counselor is able to close a participant’s case file as successfully rehabilitated (also known as “Status 26”) when the following conditions have been met:

- The IPE services substantially contributed to the employment outcome (note that guidance and counseling are substantial services);
- The employment outcome is consistent with the participant’s abilities, capabilities, interests, and informed choice;
- The employment outcome has been maintained long enough to ensure stability, not less than 90 consecutive days;
- The individual no longer needs TVR services; and
- The participant and the TVR counselor consider the outcome to be satisfactory in that the individual is performing well in the employment placement.

A sample Successful Closure statement can be found at the end of this module.

Starting a new job often reveals unseen barriers, so it frequently takes longer than 90 consecutive days from the start of employment for the participant to meet all the criteria for a successful closure.
Because TVR agencies are required by federal funding entities to report on outcomes and measures beyond the 90 days of employment, participants should be informed when and how they can expect to be hearing from the TVR staff in the future to gather more employment information.

**Post-Employment Services (PES)**

After participants’ cases have been closed successfully, they may contact counselors if issues come up in their positions or if they have need of additional training or items to perform their jobs. There is no established guideline for the how long post-employment services, or PES, can be provided, but some programs may do it for up to a year after case closure. A short, one-page PES plan is used to provide one service or a small scope of services that are short in duration. If the estimated services are expected to be significant, if the disability condition has changed, or if there is a change in the employment goal, the participant is required to reapply for TVR services to open a new case. A sample PES Plan can be found at the end of this module.
DISCUSSION QUESTIONS

• After a participant’s file has been closed as successfully rehabilitated and the participant then comes back for additional services, how do you decide between providing PES versus asking the participant to reapply for services?

• What do you think describes a participant who is successfully employed and is ready for case closure?

• What do you do if participants are not following through, but they object if their cases are about to be closed?

• What is an example of a participant’s case being closed prematurely or kept open longer than is necessary?

• When a participant finds a job that is not related to their TVR employment goal in order to “get by” during the IPE, would you close the case file? Why or why not?

• What kinds of barriers might get in the way of a successful closure once a participant has been working for at least 90 days? How might you address those barriers?

• How do you proceed if you know that participants have been working successfully for 90 days but you have not been able to contact or consult them?

• How do you involve, or plan to involve, participants in the case-closure process?

Potential Assignments

1. Employer Interview: Identify an employer for an informational interview that you think would be a good match for one of your participants or whom you have considered approaching in the past. Use the following employer interview questions as a guide in interviews. Add or modify questions as you see fit.

   • What can you tell me about your business?
   • What kinds of products or services do you provide?
   • What is the history of the industry and your company?
How has your company grown or changed over the last couple of years?

What are your goals for the next one, five, ten years in terms of growth?

What future direction do you see your company taking?

Where is the greatest demand for your services or products?

How do you differ from your competitors?

Describe your star employee. What are the qualities of people who perform best in your company?

How do you think that most employees would describe this as a workplace?

Have you ever worked with a program like ours?

If yes, what has been your experience with TVR programs?

How has turnover been in your company? How do you fill vacant positions?

How do you decide between two equally qualified candidates?

How would you describe your company culture?

Is there anything else that you think would be useful for me to know about your company?

After the interview, create a summary of the company and its labor needs. Be sure to address what kinds of jobs are available with this employer, what labor needs the employer has that you may be able to help with, and any job tasks that could potentially turn into a new job for a participant.

2. Presentation: Create a presentation to the employer you met with for your employer interview to discuss your TVR program. Your presentation should start by addressing what you identified as the employer’s needs (from the employer interview) and then you should discuss how your job seeker (real or imaginary) would be a good fit to address those needs. To finish, explain how you and your TVR program would support both the employer and the consumer.

The format for your presentation could be using PowerPoint, a
written document, or another format of your choice. Your presentation should be at least five minutes but no more than ten minutes long.

3. Résumé Assignment: Write, revise, and update your résumé. Share it with your co-workers and request their feedback. Think about how it feels to receive this kind of feedback and how you can work with participants in this task so that they feel good about the feedback you give them.

4. Interviewing: Find someone to partner with and, using either online technology or in person, practice job interviewing skills. Take turns acting as the employer and employee. Provide a reflection that addresses the following questions:

   - How confident do you feel about your interviewing skills?
   - How did it feel to do the mock interview?
   - How can you use this experience to help participants in the future?

5. Case Study: Jeff is a 35-year-old man with incomplete tetraplegia due to a car accident. He has some use of both hands, but needs a significant amount of assistance for most personal care tasks. Jeff wants to work and is interested in writing, animals, and art.

   Conduct a job search in your local area and identify three jobs that you think could suit, or could be modified or accommodated to suit, Jeff. Describe exactly how you would complete any modifications and accommodations that Jeff might need. Creativity in your answers is encouraged!
Sample Chronological Résumé

Cheyenne Yazzie
1212 Creek Trail – 123-456-7890
cheyenney@gmail.com – linkedin.com/cheyenney

EXPERIENCE

June 2016 – Present

EARLY CHILDHOOD EDUCATION SUPERVISOR, TRIBAL EARLY LEARNING CENTER
Promoted from assistant to supervisor upon completion of my BA degree at Northwest Indian College. Currently working 40+ hours per week; in charge of scheduling all staff shifts, extracurricular activities and field trips, and maintaining our emergency contact database.

March 2013 – June 2016
ASSISTANT TEACHER, TRIBAL EARLY LEARNING CENTER
Worked part-time at Early Learning, primarily working with children aged 0-4 while I was finishing my degrees. I was often in charge of fun activities, snack-time, and handling minor emergencies.

EDUCATION

June 2016
BA, COMMUNITY ADVOCACY AND COMMUNITY EDUCATION IN HUMAN SERVICES, NORTHWEST INDIAN COLLEGE
Graduated with honors (3.8 GPA) and completed the 4-year program option in only 3 years.

June 2014
AAS, EARLY CHILDHOOD EDUCATION, NORTHWEST INDIAN COLLEGE
Maintained a 3.4 GPA and focused on child development and infant-toddler caregiving.

SKILLS

• Scheduling shifts and activities
• Understanding children's development
• Age-appropriate curriculum planning
• Establishing routines
• Infant-Toddler caregiving

ACTIVITIES

• Volunteer with Elder’s luncheons monthly
• Performed outreach for Early Learning Center at Pow Wows and other tribal events
• NWIC Foundation Scholarship recipient (2013–2016)
Sample Functional Résumé

Timothy Orange
5432 Old Road | 123-456-7890 | orangetim@gmail.com

EDUCATION

Award of Completion | March 2019 | Northwest Indian College
• Major: Tribal Vocational Rehabilitation Studies
• Related coursework: Addictions and TVR Services, Medical Aspects of Disability, Advanced Counseling Techniques, Financial Management for TVR

Associates of Arts And Sciences | June 2010 | Northwest Indian College
• Major: Public and Tribal Administration
• Related coursework: Contemporary Tribal Economics, Public Policy, Tribal Organizational Theory and Development, Leadership

SKILLS & ABILITIES

Customer Service
• Greeted all guests at Tribal Council office, answered questions, and provided directions
• Familiarity with tribal and other community members helped me make connections with guests

Administrative Support
• Operated switchboard for all calls to main Tribal Council office
• Filed and organized documents
• Proficient at typing and using computers

Leadership
• I have led the bi-monthly men’s rehabilitation and healing sweat lodge for over fifteen years
• I am passionate about leading and assisting struggling tribal members no matter their background

EXPERIENCE

Administrative Assistant | Tribal Council Main Office | September 2009 – June 2011
• I took all calls and most emails for the main Tribal Council office and connected guests with the right contacts. I also provided directions to specific tribal departments, filed and organized documents, and learned to use word processors.

Sweat Lodge Leader | Tribal Rehabilitation | May 2004 – Present
• I lead the bi-monthly men’s healing sweat lodge, schedule other events with the men’s rehabilitation group, and provide informal counseling and guidance to tribal members.
Alicia James
9876 Xwlemi Road  •  (360) 555-1234
A_james97@email.com  •  linkedin.com/in/alicia_james97

SKILLS
• Lab Management – knowing and implementing proper lab safety protocols
• Research – fieldwork, gathering and analyzing data, and compiling and presenting reports
• Communication – working well with others in a team setting, avoiding conflict
• Indigenous Knowledge – understanding the relationship between Native ways of knowing and
  Western scientific methods

EXPERIENCE
Salish Sea Research Center
Research Student  (2017 – Present)
• Assisted with research on harmful algae and bio-toxins in our traditional waters
• Led other research students in a project on local fish populations
• Presented our findings at multiple local and state biology conferences
• Coordinated with local fishermen with research on sustainable fishing practices
• Performed outreach to local schools

Soaring Eagle Coffee Stand
• Began working at the tribal coffee stand at age 15
• Learned important customer service skills and how to work under pressure
• Worked well with co-workers and helped hire other tribal youth

Annual Pow Wow Committee
Youth Worker (Volunteer)  (Summer 2013)
• Sold snacks and local handmade goods at the summer Pow Wow
• Worked with family and community members to ensure Pow Wow success

EDUCATION
• Bachelor’s Degree, Native Environmental Science  (2019), Northwest Indian College
• Focus on aquatic ecology and Native American fishing rights
Unsuccessful Closure Statement

The case of the above-named participant is being closed because of the following:

☐ No disability
☐ No barriers to employment
☐ Unable to document disability/barriers
☐ Applicant/participant refused further services
☐ Applicant/participant has not followed through with:
  ☐ Employment and rehabilitation plan criteria
  ☐ Treatment plan and/or Sobriety
  ☐ Appointments
  ☐ Other ________________________________
☐ Applicant/participant has not responded to correspondence
☐ Unable to contact/locate applicant/participant
☐ Applicant/participant moved out of service area
☐ Applicant/participant institutionalized
☐ Other: ________________________________

The consumer earned the following educational outcomes while the case was open:

☐ GED/HS diploma
☐ OJT/Apprenticeship
☐ Post-Secondary Certificate
☐ Any other job-related training
☐ Post-Secondary Degree

WAS THERE A PLAN IN PLACE AT TIME OF CLOSURE? ☐ YES/30 ☐ NO/28

☐ VERBAL ☐ WRITTEN notice of this closure has been provided to the applicant/participant.

VRC Signature: _______________________________________________________________ Date: ______________________________
Successful Closure Statement

Participant Name: _____________________________ Case Number: __________ Date: __________

This consumer has been working continuously for more than 90 (ninety) days for the following employer: __________________________________________________________________________

The job title is: __________________________________ __________________________________ __________________________________ _____________________________

The rate of pay is _____________________ per hour, _____________________ hours per week and is comparable to other workers doing the same job.

The employment meets the following criteria for suitable employment:

☐ Working conditions will not aggravate the disability of the participant or others.
☐ Employment will not jeopardize the health and safety of the participant or others.
☐ There is satisfaction by both the participant and the employer.
☐ The participant is maintaining adequate interpersonal relations and appropriate behavior as required by the job.
☐ The participant has or is learning the appropriate skills to do the job.

The participant earned the following educational outcomes while the case was open:

☐ GED/HS diploma ☐ Post-Secondary Certificate ☐ Post-Secondary Degree
☐ OJT/Apprenticeship ☐ Any other job-related training

TVR provided the following rehabilitation and employment services (check all that apply):

☐ Assessment for Eligibility ☐ VR Counseling & Guidance ☐ Job Related Services
☐ Books, Tools & Training Materials ☐ Diagnosis & Treatment ☐ Maintenance
☐ Rehab Teaching Services ☐ Occupational Licenses ☐ Rehab Technology
☐ Transition Services ☐ Supported Employment ☐ Services to the family
☐ PES Services ☐ Referral ☐ Cultural healing
☐ Transportation ☐ OJT ☐ Vocational Training
☐ _____________________ ☐ _____________________ ☐ _____________________

TOTAL PARTICIPANT EXPENDITURES: $ _____________________

Post-Employment Services ☐ are ☐ are not indicated at this time, but are available if necessary.
A closure letter is being sent to ☐ the consumer ☐ the referral source ☐ other ____________________

VRC Signature: __________________________________________ Date: __________
Post-Employment Services Plan (PES)

Participant Name: __________________________________________________

Targeted Employment Outcome: ______________________________________

PES Plan Date: ___________________________ PES Expected End Date: ______

Outline of PES Services:

<table>
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<th>TVR Service Description</th>
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<th>Procurement Method</th>
<th>End Date</th>
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Reason for Post-Employment Services: ________________________________

Criteria for Measuring Progress for PES: ____________________________

Responsibilities of TVR: _________________________________________

Responsibilities of: ____________________________________________

Signatures:

By signing below, I acknowledge that I have been provided options for assistance in designing this Post-Employment Services plan. I have been given information on how to seek assistance to resolve any disputes that I have regarding the plan. I have made the choices I wanted in selecting the employment goal, the TVR services, the service providers, and the methods used to obtain the services. I have my own copy of this plan.

_________________________________________ _________________________
TVR Participant Date

_________________________________________ _________________________
TVR Counselor Date
Module Description

Across programs as a whole, TVR program staff members have varying responsibilities for managing program resources. This module provides an overview of TVR program resource management from a counselor perspective, including administration and management basics, understanding and using budgets, case record management, grant reporting, and working as a team. It also covers building partnerships with departments, providers, agencies and employers at the Tribal and local levels to provide comprehensive services and to diversify participant service vendors and funding sources.
Learning Objectives

At the end of this chapter, the reader should be able to

- Identify components and resources in a TVR program that require management;
- Describe key elements in building and maintaining an effective team in a TVR program;
- Describe methods used to establish a positive understanding of TVR with agencies outside of Tribal communities;
- Understand how tracking and reporting grant expenditures, drawdowns, matching funds, and indirect costs affect the overall success of the TVR program;
- Describe the TVR program’s grant goals and objectives as well as requirements and conditions;
- Describe the gathering of TVR performance and satisfaction data required for RSA and other reporting; and
- Describe the legal requirements for retaining closed case records.

Overview of Resource Management

Resource management covers a range of topics that include a program’s funding and budget, the talents and skills of the TVR program team, the resources available to Tribal community members, and the services offered by other Tribal, local, and state programs. Although the TVR program manager or supervisor has the formal responsibility for the oversight of program funds and the achievement of program goals and objectives, all TVR program staff members are responsible for the management of the program’s resources, including ensuring that funds are used responsibly and efficiently, comparable benefits are researched and secured, and
partnerships are developed in order to provide participants the most comprehensive choices, and services, as possible.

Tribal Vocational Rehabilitation
Administration and Management Basics

After a TVR grant has been awarded to a Tribe or a Tribal organization, it needs to be managed and administered. This involves coordination by many different people and departments within the Tribe. TVR grants are usually administered by a program director or manager who is in charge of overseeing the activities that will result in the fulfillment of the grant’s goals and objectives. The manager or director also supervises program staff and oversees the provision of services.

Additional aspects of program administration include coordination of internal and external resources and partners, such as vendors for participant services and employers, as well as databases and information gathering for reporting purposes. It may also involve management of an advisory committee or other method of community feedback and support, as defined in the TVR grant. Policies and procedures are also mandatory for each TVR program, and this is an area that needs to be developed for a new TVR program or maintained and updated over time.

Another significant aspect of program operation that requires management is the budget. TVR directors are responsible for ensuring that all expenditures are allowable, allocable, and reasonable, and for monitoring the budget over time. Some use cuf accounts to independently track expenditures and then reconcile them with the Tribal accounting system. Sometimes a TVR counselor is responsible for tracking a portion of the TVR expenditures, usually related to participant service expenses.
The required 10 percent match also needs to be tracked and documented at least quarterly. Routine communication with the Tribal accounting department, compliance office, and Tribal administration is often necessary to manage the budgetary needs of the TVR program.

A case management system that tracks data required for reporting purposes is also necessary. There are a variety of systems and software tools used by TVR programs that help with this, and often a team effort is required to ensure prompt and accurate entering of participant case details into the data tracking system. More information about case management systems can be found in module 5.

Another system requiring management is the staff within the TVR program. The program director is usually involved in the hiring process and is responsible for ensuring that those hired to work in the program obtain the training they need, learn and use TVR and Tribal policies and procedures, are supported to provide services, and carry a caseload that is appropriate to their skills and abilities. A big part of supervision is getting to know staff and understanding what their specific strengths and talents are, and giving them opportunities to grow and excel. Supervision also involves making hard decisions when employees are not performing their jobs, are having repeated difficulties with other staff members or with participants, or are having difficulties in their personal lives. For supervisors who are new to program management, it can be helpful to develop management skills through training or self-study, and to find a mentor who can provide training and guidance.

**TVR Staffing**

Although TVR grant funds are considered a necessary program resource, it is easy to overlook the fact that the individuals who form the TVR program staff are valuable resources. It is crucial for the supervisor or manager to recognize that each staff member has an opportunity to bring his or her particular knowledge, expertise, and interests to the operation of the program. Similarly, it is helpful to make sure that people are not asked to do things they are not good at or do not like doing, or at least ask them to do those things on a rotating basis and share the responsibility with other staff.
At the minimum, TVR program staff members include a director or manager and counselors, although they might also include counselor aides or rehabilitation technicians, program assistants, job developers, and job coaches. Some programs may have other types of positions, depending on the size and needs of the program.

**Director or Manager**

A TVR program director or manager is responsible for, and in charge of, the overall management and operation of the TVR grant objectives and financial affairs. Responsibilities typically include budget monitoring, staff supervision and development, community and partner relationships, reporting, and, sometimes, direct participant service as well, especially during counselors’ absences.

**Counselors**

TVR counselors typically provide case management activities for a caseload of participants throughout the TVR process. This includes participant meetings, assessment of participant disabilities, counseling and guidance, referrals, job-related services, case notes, eligibility determinations, development and approval of IPEs, arrangement of TVR services, and regular communication with participants and medical and other service providers. Some counselors may have additional responsibilities as well, such as reporting, partnership and community development, orientation for applicants, services for groups, and supervising staff.

**Counselor Aide or Rehabilitation Technician**

A counselor aide or rehabilitation technician typically assists counselors with caseload duties, but does not have full responsibility for counseling, guidance, eligibility determination, or IPE development. Duties can include preparing and sending referrals, providing job-related services, arranging for participant services and sometimes carrying them out with participants, and communicating with participants and medical or other service providers. They may also have additional responsibilities such as checking case files for accuracy, reporting, partnership and community development, facilitating orientation for applicants, and services for groups.
Program Assistant

Program assistants typically help with greeting and communicating with participants, answering phones and general emails, and assisting the TVR director and counselors as needed. Depending on the strengths and preferences of the team, program assistants may enter participant data and run data reports; request applicant disability documentation; assist with scheduling appointments, meetings, and services; and facilitate orientation sessions.

Job Developer

Job developers typically are responsible for developing partnerships inside and outside the tribe to provide job training and employment opportunities for TVR participants. Job developers may help with job-related services (e.g., hosting a job club, assisting with résumés and applications), assessments (e.g., interests, functional strengths and limitations, trial work experiences), and may also help with reporting.

Job Coach

Job coaches work with TVR participants and employers in the job setting. They help participants learn components of the jobs, determine and set up job accommodations and assistive technology, help participants and employers to problem solve when issues arise, and work in partnership with TVR counselors to ensure that participants’ employment needs are met.

Additional Resources

Two resources created specifically for TVR programs are available for those who would like to learn more about financial management and program management.

- The TVR Institute Financial Management Toolkit, https://nwic.instructure.com/courses/2335; and

- The American Indian Vocational Rehabilitation Training and Technical Assistance Center (AIVR TTAC) toolkits for new directors:
- Toolkit-Tribal: http://aivrttac.org/toolkit-tribal/;
- Toolkit-Program: http://aivrttac.org/toolkit-program/;
- Toolkit-Resources: http://aivrttac.org/toolkit-resources/; and

**DISCUSSION QUESTIONS**

- What are the different positions in your TVR program?
- How does your TVR program fit in with other programs in your Tribe?
- What other positions in your Tribe are involved with administration and management of your TVR program?
- What are systems in your program that need management?
- What are some of your program’s goals and objectives, and what is your role in ensuring that they are achieved?
- What are your responsibilities when it comes to ensuring that the financial affairs of your program are managed properly?

**Team Building**

TVR is a complex system that requires all staff members to work in cooperation to achieve grant goals and provide quality services to participants. When all members of a team work together in harmony, more can be accomplished than could ever be accomplished by individuals working independently. This synergy can lead to innovations that can have a lasting impact on program participants and the Tribal community as well. An effective team encourages all members to be flexible, responsive, and fill in needed gaps,
which can be highly motivating for team members. Participants will notice the team spirit and feel more comfortable in an environment in which respect for employees and teamwork are evident.

Team building can start small. Even little improvements in how staff work with one another can be a step toward a more productive and harmonious workplace. While TVR staff members may think of directors as leaders, any person can be a leader when it comes to team building and implementing positive change.

A great place to start when it comes to fostering teamwork is to review TVR grant components and work together to create a vision for the future of the program. With this shared vision, the team can establish SMART goals and align people and tasks with those goals. More information about SMART goals can be found in module 4 on page 248. Setting aside staff member time to focus on planning and goal achievement a couple of times a year can make a big impact toward helping everyone to work together more effectively. It can also be beneficial to have the team help to identify future TVR goals and program activities for the following grant years or for the grant application. Staff members have different experiences with the community, participants, and partners, and can each provide a unique perspective.

A unified team also cares for and looks out for one another, and committing to time invested in building relationships and creating connections with team members influences multiple aspects of work. The more that is known about a person, the more options there are for establishing an effective connection with that person. Thus, establishing relationships with co-workers can lead to increased feelings of being a part of a team.
DISCUSSION QUESTIONS

- What kind of shared vision does your TVR program hold for the future?

- What are ways that you can show your co-workers that you care for them?

- When do you and your co-workers have time to focus on team building? Why might it be important to regularly plan for time to focus on building positive working relationships with your co-workers?

- What ideas do you have for weaving culture into team-building activities with your co-workers?

- How might your own needs and interests align with the needs of the TVR team and your program?

- Describe a time someone joined or left a team you were on, and how you became aware of how that person affected the team atmosphere. What did you notice about the new dynamic of the team?

- How might your team get training in conflict management?

- How often does your TVR team meet to discuss goals? What are examples of program and team goals?

- How can you and your co-workers hold each other accountable for contributing to the goals and objectives of the program?

- What kind of attitude or mindset do you think makes a good match for your TVR program?

- Do your TVR staff members get regular training on soft skills?

- How would you describe a good or strong team?

Financial Management
Basics for Counselors

Having a basic understanding of the financial system of a TVR program can help counselors understand how decisions are made regarding budgets and spending. The following section defines common terms used in TVR program finances and explores the rules about spending. Although most TVR counselors are not responsible for tracking general TVR expenditures,
having a basic understanding of the financial system behind a TVR program can be helpful for understanding why and how things are done the way they are. Also, some TVR programs do require counselors to track service expenditures for their participants and to stay within budgeted amounts, and it is useful for them to understand how the maintenance of their own budgets affects the program budget as a whole.

**Cuff Accounts**

Similar to tracking financials in a checkbook, a cuff account is a type of ledger that tracks expenditures and credits (drawdowns) using methods such as spreadsheets or by hand in a notebook. Cuff accounts are often used by TVR directors or program assistants, and sometimes by counselors, to monitor expenditures and reconcile them against Tribal accounting records. Usually cuff account details include dates, vendors, transaction descriptions, budget categories, and costs, although other data may be tracked as well.

**Federal Drawdown**

A federal drawdown is the process of moving funds from the federal government to the Tribe to cover the cost of grant activities (e.g., TVR staff, TVR services) that are funded by the federal government. Most Tribes have an accounting or grant compliance office that is responsible for drawing funds down. Per federal guidelines, funds must be expended within three days of when they are drawn down. It is important that Tribes draw funds down monthly, or at the very least quarterly, as Tribes may be contacted if they are not drawing grant funds down on a regular basis.

**Indirect Costs**

Indirect costs for a TVR program are all of the expenses that are shared with other departments and programs within the Tribe that are not charged directly to the grant. These “shared expenses” can include things like the cost of the finance, maintenance, and administrative staff and the
use of office space and utilities. These indirect costs are in contrast to “direct” costs, which are exclusively TVR program costs and are charged directly to the grant, such as staff salaries and participant services. Usually Tribes have an indirect cost rate that has been negotiated with the federal government. This rate is applied to the direct program costs at regular intervals throughout the year and charged against the grant.

**Allowable Costs**

Allowable costs are the programmatic and administrative expenses that a TVR program is authorized to expend grant funds on, including culturally specific services and staff development. The Code of Federal Regulations specific to TVR, 34 CFR § 371.41, outlines allowable costs.

a) In addition to those allowable costs established in 2 CFR §§ 200.400—200.475, the following items are allowable costs under this program:

1. Expenditures for the provision of vocational rehabilitation services and for the administration, including staff development, of a program of vocational rehabilitation services.

2. Expenditures for services reflecting the cultural background of the American Indians being served, including treatment provided by native healing practitioners who are recognized as such by the Tribal vocational rehabilitation program when the services are necessary to assist an individual with disabilities to achieve his or her vocational rehabilitation objective.

b) Expenditures may not be made under this program to cover the costs of providing vocational rehabilitation services to individuals with disabilities not residing on or near federal or state reservations.

When there is a question as to whether a service or cost is allowable, it is always advisable to check with the RSA project officer for guidance before expending funds.
Budget Categories

The financial categories used for budgeting within a TVR grant often differ between what the federal government uses and what a Tribal accounting system uses. Usually, the federal government has fewer financial categories than a Tribal accounting system does. The accounting system at the Tribe has categories in place that it uses to organize budgets, and the TVR director can work with the accounting or grant staff to fit the federal budget (ED 524) into the Tribal budget categories.

Cash or In-Kind Matches

Generally, all TVR programs are awarded 90 percent of the total cost of the program budget by the federal government, and the remaining 10 percent of the budget must be funded by non-federal sources. There are several sources for this 10 percent match. Some TVR programs are provided the 10 percent match from their host Tribes in the form of cash match. Some receive special rates from providers and count the difference as match. Other TVR programs use space and utilities provided by the Tribe or other agencies and count that as match. And some use volunteers or funding from other programs or departments as match. In most cases, funds from cash match can be used to pay for activities and items that the federal government might not pay for, such as food for gatherings or staff retreats. But it is prudent to check with the RSA project officer before making these types of decisions.

All cash or in-kind match must be documented for the grant file. This may include a copy of the check or transfer documents for the cash match, or verifications from the Tribe or Tribes that are providing in-kind match.

As detailed in 34 CFR § 371.40, the match requirement may be waived if a TVR program does not have sufficient resources to contribute the required amount. Such a request must be made annually to the RSA project officer.

Tracking Comparable Services and Benefits

Tracking comparable services is important for many reasons. One is that programs are now required to report on the provision of comparable
services in their annual performance reports. Tracking allows TVR programs to identify vendors that help absorb the costs for services, generate a list of programs and providers for future participants, and may help with the 10 percent match requirement for TVR grants. Tracking also ensures that there is documentation that required comparable services are being researched and secured, in case the program is audited. There are several ways to track comparable services. Listing them in each participant’s file, such as in the IPE and the case notes, is the easiest place to start, although collating the data then requires going through each file. Some program data systems have a place to enter comparable services, which are then easily tabulated by the system. TVR counselors and managers might also choose to keep a separate list or worksheet tracking costs paid by other programs or agencies.
DISCUSSION QUESTIONS

• What is your comfort level regarding budgets or financial terminology?
• What has been your experience with budgeting?
• Why might knowing about the basics of TVR financial affairs be useful for you?
• What are some aspects of your program’s finances that are confusing to you or that you would like to know more about?
• Have you ever been curious about the financial aspect of your TVR program?
• Have you ever been responsible for any part of the TVR budget?
• Why might using a cuff account be helpful to TVR program staff?
• Who is in charge of the federal drawdowns for your TVR program? Why might it be important for you to know who completes the drawdowns?
• Why do you think RSA is concerned about Tribes not drawing down TVR grant funds on a regular basis?
• What have you heard about indirect costs, their purpose, and how they are calculated?
• Indirect costs can take up a substantial part of some TVR budgets. Why do you think that is?
• What are the budgeting categories in your TVR program?
• What are your program’s sources for cash or in-kind match? How is match documented and verified?
• Which vendors do you use most in your program for comparable services?
• How does your program document comparable services? Why is this necessary and important?
• How has tracking comparable services been useful in your program?
Grant Proposal Overview

Every member of a TVR team can better help to meet the goals and objectives of their TVR grant if they are aware of what those goals and objectives are. It is considered best practice that staff members be familiar with the program’s TVR grant and the grant application process. This allows all employees to be working toward achieving program outcomes and adhering to the assurances made in the grant proposal.

In general, the RSA, through the federal government, announces the opportunity for Tribes and Tribal organizations to apply for funding to create, maintain, or grow TVR programs. Grant proposals are scored individually, with existing programs receiving extra points. This means established TVR grant programs have a point advantage, but new TVR programs are added regularly. Grants that are in the last year of their five-year grant cycles need to apply for new grants in order to continue program services. Information and resources for developing grant applications can be found at www.grants.gov.

Components of TVR Grant Applications

There are many parts to a TVR grant application, including the following sections:

- Budget, including the budget narrative and the source(s) of the 10 percent match;
- Descriptive project narrative, including grant objectives and data supporting the need for the Tribal VR program;
- Assurances related to the special application requirements; and
- Supporting documentation, such as the Tribal resolution(s), staff job descriptions and résumés, and support letters.
The CFR and the Grant Applications

The Code of Federal Regulation, at 34 CFR § 371, contains information related to TVR grant applications, including (a) a description of the American Indian Vocational Rehabilitation Services (AIVRS) program, (b) who is eligible to apply for TVR grants, (c) the types of projects authorized under the AIVRS program, (d) the length of the projects, and (e) the application regulations.

The AIVRS program is designed to provide TVR services, including culturally appropriate services, to American Indians and Alaska Natives with disabilities who reside on or near federal or state reservations, with a focus on high-quality employment that will increase opportunities for economic self-sufficiency. For TVR grants, applications may be submitted by Tribes and consortia of Tribes located on federal and state reservations in order to provide funding for the establishment and operation of TVR programs for a project period of up to 60 months.

The applicable federal regulations for the AIVRS program include those found in (a) 34 CFR § 371, (b) 2 CFR § 180 (“OMB Guidelines to Agencies on Debarment and Suspension”), (c) 2 CFR § 200 (“Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards”), (d) 34 CFR § 75 (“Direct Grant Programs”), (e) 34 CFR § 77 (“Definitions That Apply to Department Regulations”), (f) 34 CFR § 81 (“General Education Provisions Act—Enforcement”), (g) 34 CFR § 82 (“New Restrictions on Lobbying”), and (h) 34 CFR § 84 (“Governmentwide Requirements for Drug-Free Workplace”).

Submission of TVR Grant Applications

TVR grant applications are uploaded in PDF format and submitted online through the government website, grants.gov. Usually, the various sections of the TVR grant application are uploaded separately into the system.

Those reviewing grant applications may consider past performance of the TVR program in carrying out a previous award, such as the applicant’s use of funds, achievement of project objectives, and compliance with grant conditions. Reviewers may also consider whether the applicant failed to submit a timely performance report or submitted a report of unacceptable quality.
DISCUSSION QUESTIONS

• When you reviewed your TVR grant, what in particular stood out to you?

• Why might it be important to know what is in your TVR grant?

• What has been your role in the TVR grant application process?

• What do you know about the special application requirements (or assurances) that the Tribal government makes to the federal government?

• How long do you think that it takes to gather all the necessary information and submit a completed grant application?

• When it comes to developing grant objectives, what differences in perspective might there be between a director’s and counselor’s understanding of them?

• Even though TVR programs are required to “compete” with each other for grant awards, why do you think that it might be important for programs to work together and support one another in the grant application process?

• What resources have you heard about for TVR programs working on grant applications?

• Why do you think that TVR grant applications can be so different from one another? What are examples of ways that TVR grant applications might uniquely reflect the community(ies) to be served?

Grant Award Overview

When a TVR grant application has been reviewed, scored, and awarded funding, the Tribe will be notified via a grant award notification (GAN) of the award amount, grant ID number, related regulations and guidance, and terms and conditions. Not all grants receive the amount of money requested, so the grant budget may have to be modified shortly after notification of the grant award. Reduced funding can also impact stated goals and objectives, so those may need to be modified commensurate with the funded award.
DISCUSSION QUESTIONS

- Was your TVR program awarded the amount requested? If not, how was your program modified?
- How did your grant application describe plans to fulfill the special application requirements?
- What reflections or questions do you have about your program’s grant award?
- Why do you think some programs are refunded while others are not?
- What do you imagine it would be like when a program does not receive the amount of funding requested and modifications would have to be made to the grant application?
- What are one or two of the objectives in your TVR program’s grant, and how do you see their being implemented in your program?

Case Record Management

Record keeping and participant information requirements are vague and limited in the CFR related to TVR, although 34 CFR § 371.21(a) directs grantees to “provide a broad scope of vocational rehabilitation services in a manner and at a level of quality at least comparable to those services provided by the designated state unit.” This means that programs need to refer to the CFR for state VR for guidance about record retention. One particular note is section 34 CFR § 361.47, which provides guidance on the types of case documentation that should be kept in the case files.
A Strategy for Case Record Management

A strategy for determining which records need to be managed and how they can be properly maintained and stored is described below:

1. Conduct an inventory of the records kept in the office and identify which materials are
   - Case records;
   - Program referrals for individuals who did not follow through;
   - Non-case records (e.g., reference materials, personnel papers, junk mail, Tribal publications, duplicate copies);
   - Grant documents (e.g., GAN, renewal documents, reports, personnel records, budgets, data management records);
   - Vital records (i.e., records that would be needed immediately after an emergency to continue the program's operation, such as grant information); and
   - Archival records (i.e., historical records of enduring value that are preserved and stored in the organization's archives).

2. Establish (or revise) policies and procedures regarding record management.
   - Create a TVR program record policy that describes in detail how confidential and non-confidential records are to be maintained, protected, copied, archived, and disposed of. Establish procedures that follow the case record policy.
   - Ensure that all TVR staff members learn and follow the case record policy and procedures.
   - Provide upper management (including Tribal government, if appropriate) a copy of the TVR program's case record policy and request their approval, if necessary.

3. Create a schedule for managing and updating records. Set aside time to focus on record management and a record-retention schedule to ensure that the program keeps records for the appropriate amount of time.
Records Retention

Guidance on records retention is not found in the state or the AIVRS CFR, but is instead listed in 2 CFR § 200 (“Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards”).

Length of Retention

According to 2 CFR § 200.333, “Financial records, supporting documents, statistical records, and all other non-federal entity records pertinent to a federal award must be retained for a period of three years from the date of submission of the final expenditure report.” This means that all TVR records must be kept from day one of a five-year grant, plus an additional three years after the final five-year report has been submitted for the grant.

The only exceptions are (a) if litigation, a claim process, or an audit is started before the three-year period, in which case, the files must remain until the process or audit is finished, and (b) if old documents and files are still available (i.e., not shredded), the federal government retains rights of access until they are properly destroyed.

Considerations for Records Retention

Some Tribes have additional protocols in place for records retention and archiving, so it is important to check with the Tribe’s archive department. Also, some Tribes and recordkeeping staff may not be aware of the regulations regarding TVR, and the program may need to share the requirements of the grant’s records retention policies with them. It is also important to know how to access closed files once they are in storage, in case a participant reapplys for program services.
DISCUSSION QUESTIONS

• How long has your TVR program been in operation?

• What are strategies for records retention that have worked for your TVR program?

• Does your TVR program have policies in place regarding what to do with closed case records?

• How can your TVR records retention strategy be improved?

• For those TVR programs older than eight years, what has been done with old case records, if anything?

• If you don't have a strategy for records retention, what strategy would be feasible?

• How do you transfer closed case files to the Tribal archives or recordkeeping department? Is there a records retention schedule?

• What impact would better organization of case records and retention have on your TVR program?

Grant Reporting

There are several reports that TVR programs are required to submit to the Rehabilitation Services Administration (RSA) in order to remain in compliance and receive continued funding, such as the six-month report for new grants, annual performance reports, and final grant reports. Each report requires an analysis of the grant goals and objectives, as well as data related to the participant caseload and services provided.

Performance Measures

Performance measures are required components of the grant application and are measured across all grantees. Performance measures intended to ensure that a TVR program is on track include
The percentage of individuals who leave the program with an employment outcome after receiving services under an IPE;

- The percentage of projects that demonstrate an average annual cost per employment outcome of no more than $35,000; and

- The percentage of projects that demonstrate an average annual cost per participant of no more than $10,000.

The TVR grant application also includes other planned outcomes related to performance reporting, such as how the goals and objectives have been achieved, the number of participants on the caseload, the number of participants placed in IPEs each year, and the number of participants who achieve employment outcomes.

**Timeliness of Reporting**

Regularly tracking data required for TVR reporting is essential to ensure that there is not a rush to gather information at the end of the fiscal year. Such a circumstance may place great stress on TVR staff members and may compromise the quality of participant services during the report-writing process. Many programs use a database to regularly capture information that will be reported. Late or non-existent reporting can result in intervention by RSA.

**Other Considerations**

Although not a formal report, if there are changes in key personnel, staff turnover, changes to the scope of work or to the goals and objectives, these modifications should be reported to the RSA project officer through email or a formal letter.

In addition to the reports to RSA, the program is likely required to provide regular reports of program activities and outcomes to the Tribe or the Tribal organization.
DISCUSSION QUESTIONS

• How involved are you when it comes to documenting and reporting on services or outcomes for your TVR program?

• What tools do you or your team use for ensuring compliance when it comes to documenting and reporting?

• What aspects of documenting and reporting in your TVR program would you like to explore or learn more about?

• Why do you think that it is important to carefully track case file data? What may be the implications if data is not captured accurately or in a timely manner?

• How could collecting caseload data be useful for other reasons besides RSA reporting?

• How is caseload data information captured in your program? What do you think could be improved in the process?

• What are examples of other kinds of reporting required for your grant?

• What are some reasons that a grant would need to be modified?

• What is the process for modifying a part of a grant?

• Is there a place to talk about participant successes (with confidentiality in mind) in your program reports?

• Why would RSA ask for reports on relationships with other agencies?

• What is the role of the TVR counselor in recording information that will be included in the reporting requirements?

• What systems do you have in place for ensuring that participant data is collected and recorded accurately?

• How can your program’s current system for gathering report data be improved?

• Why do you think it is important to submit grant reports on time?
Tribal Vocational Rehabilitation Policies and Procedures

TVR program policies and procedures are important components of a program’s resource management. TVR programs are required by the Rehabilitation Act and the grant assurances to develop and maintain policies and procedures that guide program service provision and the expenditure of funds. More information on policies and procedures can be found in module 1, page 36.

Program-to-Program Relationships

Creating and maintaining strong and effective relationships with other programs, whether they are Tribal programs, or agencies and organizations based in the surrounding communities, is an important part of providing comprehensive services to participants and securing comparable services and benefits to supplement TVR program funds.

Community Perception of TVR

A positive understanding of TVR in both Tribal communities and the surrounding area is key to attracting participants and building relationships that enable efficient and effective services to those participants. It often begins with educating and building relationships with Tribal leaders. This can help to prevent common misunderstandings about how the program works and can help protect the confidentiality of participants and programmatic autonomy of TVR. Awareness grows in the Tribal community by educating and building positive relationships with other programs and businesses. Similar to Tribal resource management, community resource management is essential for providing services and potential job assessments and placements outside of the Tribal community.
Partnerships within the Tribe, outside the Tribe, and with state and local agencies provide many benefits, including ease of participant referral, access to resources such as training, or funding for expensive participant services. Learning how to build and maintain relationships with partner agencies is valuable for maximizing the relatively small TVR budget and ensuring that partner agency staff is prepared to work with AI/AN participants who use their programs and systems.

**Outreach within the Tribe or Tribal Organization**

There are many programs or departments in the Tribe or Tribal organization that can provide comparable services and benefits to TVR participants. Examples include adult education and higher education, GED/HS completion, job services (Temporary Assistance for Needy Families—TANF, General Assistance–GA, Native Employment Works–NEW, Tribal Employment Rights Organization—TERO), other Tribal work programs, health clinics, behavioral health, SUD treatment centers, human resources, child care, and Head Start. It is helpful for TVR staff to develop relationships with these programs by scheduling times to share information about TVR and its possible services, and how TVR can partner with other programs to support participants working toward their employment goals.

Partnerships between TVR and other programs can be mutually beneficial because when cases are shared, it helps both programs use funds efficiently, and both get to count the TVR participants on their caseloads and as successes if the participants become employed. The shared participants then have access to supports and resources from both programs. There are also Tribal departments that are willing to work with TVR to provide employment opportunities, and that can benefit from TVR supports and services to participants.

A positive reputation within the Tribal community is an important element of any successful TVR program. Often, reputation is connected to the staff who make up the program. Elements of reputation can include maintaining integrity, professionalism, making ethical decisions, and treating participants respectfully. Building on reputation, connections within the Tribal community are also an essential element of any
successful TVR program. Tribal community outreach includes staying in contact with potential participants and networking with individuals from other programs and organizations within the Tribe.

**Outreach outside the Tribe or Tribal Organization**

While outreach within the Tribe is helpful for TVR participant and counselor needs, for some TVR programs, relationships outside the Tribe are just as important. All TVR programs will likely need to collaborate for resources outside the Tribe at some point. Reasons that outreach outside the Tribal community might occur include access to resources for participant services such as benefit planning or assistive technology, assessment services such as psychological evaluations, and establishing employer relationships for job development.

Much like with Tribal community outreach, for outreach outside the Tribe, a positive reputation is important to establish and maintain. Being a person who is dependable and can be trusted goes a long way. Try to identify common goals with individuals from other organizations and programs, and identify how the TVR program can be of benefit to them. Keep up the relationships by checking in with contacts from time to time and be sure to offer help before requesting it of them.

**Key Partnerships outside the Tribal Community**

State VR and the VR programs for the Blind are key resources for TVR programs and participants when it comes to sharing TVR cases and staff development. Besides state VR agencies, it is important to know which organizations, employers, or programs outside the Tribe to focus outreach efforts on and to identify what TVR needs (participant, organizational, training) are not being met. This is the “doing your homework” part of an outreach strategy. Does the program have many participants in job-search mode who are not finding jobs? Are there participants in outpatient counseling who are not sticking with the program available at the Tribe? Is there a lack of resources available for participants on SSDI for disability benefit planning?

Start by making a list of the organizations or programs that are most used by participants or are most needed by participants. It could be useful
to make lists of the biggest employers outside of the Tribe, those employers who employ individuals with disabilities, or employers where there are personal connections. Next, learn about the agency and decide on the appropriate outreach message to share. Be sure to state what TVR can do for the other agency. If it is an employer, be clear about how they can benefit from partnering with TVR.

**Strategies for Outreach outside the Tribal Community**

There are many ways to provide outreach to organizations, employers, and programs. The connection usually starts with a one-on-one relationship between the TVR counselor and a representative from the other agency. Some strategies for outreach might include

- Representing TVR and meeting people while attending community events;
- Being a part of a panel discussion at a conference;
- Giving a presentation at a local college;
- Organizing or hosting an employment event like a job fair; or
- Conducting informational interviews with employers.

Be sure to coordinate with TVR team members to get input about an outreach plan that maximizes staff time and creates an action plan that the team supports.

For more information about allowable outreach activities, see 2 CFR § 200.421(b)(4) or 2 CFR § 200.421(d)(2).
DISCUSSION QUESTIONS

• How do you think different members of your Tribal community would describe your program if they were asked about it? Why do you think that is?

• What are common misunderstandings about TVR that you’ve heard?

• How does your TVR program currently build partnerships with other agencies and partners?

• What do you know about the relationships with your partner agencies
  ✷ Inside the Tribe(s)?
  ✷ Outside the Tribe(s)?
  ✷ At the state level?

• What changes would you like your program to make when it comes to building relationships with other agencies and partners?

• How could your program weave culture into your outreach and relationship building efforts?

• What do you think makes a strong relationship between partner agencies?
  What causes those relationships to change over time?

• Are you familiar with the cooperative agreement between your Tribe (TVR) and state VR? Do you have cooperative agreements with other agencies?

• What do you think it takes to build a positive reputation in the community?

• What organizations, programs, or employers do you work with outside the Tribe?

• What is the reputation of your program outside the Tribe? What do you think it takes to build a positive reputation outside the Tribe?

• What would make an organization, employer, or program feel that they can trust you?

• What are some common goals that you might have with an organization, employer, or program outside the Tribe?
Potential Assignments

1. Some programs require counselors to use budgets that are just for their caseloads. This requires counselors to prioritize services for participants and to work diligently to secure comparable services and benefits from other programs. Imagine that you have twenty-six participants on your caseload, all in different stages, and $12,000 for a funding year. How would you divide that budget between the various types of services? Knowing your Tribe and Tribal organization, and the services available to your participants, what can be covered by other programs? Put something together that could serve the needs of your participants and get your supervisor’s approval.

2. Research online, talk to your co-workers, or come up with your own activity or strategy for team building that can be used to increase the effectiveness of your TVR team. In a one-page paper (about five hundred words), explain what the activity is, how it is implemented, and how it increases team effectiveness. Also, explain why a strong team is so important in TVR and how taking the time to focus on team building is useful.

3. Community Outreach Presentation: Choose between creating a presentation to an agency inside your Tribal community, to an agency outside your Tribal community, to potential participants, or to folks attending a specific event. Once you have selected your audience, create a presentation aimed at building a positive relationship and image for yourself and your TVR program. Your presentation may have elements of education about what VR is, stories of successful participants, highlights of other partnerships, etc. Your presentation can be in any format; examples include a brochure, news article, PowerPoint, short video, or display board. Share with your co-workers.

4. Educational Presentation to Governing Body: Select a topic that you and your TVR team feel is important to talk about with your Tribal governing body. Create a short presentation (no more than
ten minutes) using PowerPoint slides (to guide you) that will educate your Tribal governing body about that topic. Share with your co-workers, and others if you are able.
REFERENCES


LinkedIn. (2020, April 21). www.linkedin.com


Research and Training Center on Disability in Rural Communities. (2020, April 22). *Tribal vocational rehabilitation self-employment toolkit.* http://tvrsselfemployment.org/


Twitter. (2020, April 21). www.twitter.com


