



COUNCIL OF STATE ADMINISTRATORS OF VOCATIONAL REHABILITATION

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The Model State Plan for VR Services for Individuals who are Deaf, Deaf-Blind, Hard of Hearing, and Late Deafened (MSP), fifth edition, is endorsed by the CSAVR, and recommended as a technical assistance resource when working with states relative to programs for these consumers.

The fifth edition was spearheaded by the CSAVR Committee on Services for Individuals who are Deaf, Deaf-Blind, Hard of Hearing and Late Deafened, and was authored by vocational rehabilitation professionals who have extensive experience in VR programs and services for these populations. Many of the authors have experience as VR state coordinators of services for the deaf, hard of hearing, and deaf-blind (SCD).

The MSP was designed to assist state agencies with program assessment, development and enhancement, and includes recommended guidelines for improving the delivery of federal/state vocational rehabilitation services leading to successful employment outcomes for persons who are deaf, deaf-blind, hard of hearing or late deafened.

Attached find a 14-page "Snapshot", or overview of the MSP, which includes a one-page summary of each chapter. It concludes with contact information for the MSP authors who have agreed to assist, as indicated, with content clarification and/or technical assistance.

The full document can be downloaded at no cost, or purchased in hard copy for \$8.75 per copy. Go to: www.lulu.com:80/content/2289052.

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A "Snapshot" of The Model State Plan for Vocational Rehabilitation of Persons who are Deaf, Deaf-Blind, Hard of Hearing, and Late-Deafened 2008

This document provides a chapter-by-chapter synopsis of the *Model State Plan for Vocational Rehabilitation of Persons who are Deaf, Deaf-Blind, Hard of Hearing or Late Deafened* (MSP). The full document provides comprehensive working information for program assessment along with guidelines and resources for model program development and delivery of vocational rehabilitation services leading to successful employment outcomes for persons who are deaf, deaf-blind, hard of hearing and late deafened.

The MSP was authored by vocational rehabilitation professionals who have extensive experience in programs and services for these targeted populations. Although useful to partners and other professionals, the MSP is targeted specifically for vocational rehabilitation use.

The MSP recognizes that there are communication, technology, and psychosocial differences among the sub-populations of persons with hearing loss, and therefore addresses the unique needs of each.

The CSAVR has endorsed the MSP. Many states have successfully implemented it in whole or in part. The Committee on Services for Individuals who are Deaf, Deaf-Blind, Hard of Hearing and Late Deafened encourages state directors and state coordinators of services for consumers with hearing loss to revisit the MSP. It can be accessed at Lulu.com.

Model State Plan for Vocational Rehabilitation of Persons who are Deaf, Deaf-Blind, Hard of Hearing or Late Deafened

It can be downloaded for free, or purchased in hard copy for \$8.75 per copy.

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CHAPTER ONE: PEOPLE WITH HEARING LOSS

Hearing loss is the most prevalent, chronic, physically disabling condition in the United States today. Applying estimates of the prevalence of the population to contemporary population data from the United States Census, it is estimated that more than one in every ten Americans, or 30.6 million among 300 million, have a hearing loss. Prevalence rates for hearing problems across all ages have increased steadily from 71.6 to 82.9 per 1,000 of the general population. The greatest increases occurred in the under 17 age group and 45 to 64 age groups. These trends have continued with the aging of the “baby boomer” population who are experiencing age-related hearing loss, and with people living longer.

A vast array of services has been directed toward the rehabilitation needs of these populations resulting in positive employment outcomes. For example, in analysis of the 2006 RSA-911 database regarding all persons with hearing loss, 79% (25,664 of 32,599 consumers served) obtained employment. Persons with hearing loss are highly successful in obtaining employment as compared to persons with other disabilities.

Even though this target population shares hearing loss as a disability, it is not a homogeneous population. Persons with hearing loss vary on degree and type of loss, age at onset of loss, preferred communication mode, and race or ethnic background. Examples of the diversity of this population are evident in the variety of terms used to describe its various subgroups such as: deaf, deaf-blind, hard of hearing, late deafened, minority deaf, and traditionally underserved or “low functioning” deaf. These differences impact upon the nature of vocational rehabilitation needs and the resulting service delivery models and programs designed to meet these needs.

In 2003, the coding scheme for disability or impairment type utilized by RSA changed to a new system that shifts focus to the more “functional” aspects of deafness or hearing loss, primarily related to the person’s functional communication and its impact at work. The current coding scheme includes:

- 03 Deafness, Primary Communication Visual
- 04 Deafness, Primary Communication Auditory
- 05 Hearing Loss, Primary Communication Visual
- 06 Hearing Loss, Primary Communication Auditory
- 07 Other Hearing Impairments (Tinnitus, Meniere’s Disease, Hyperacusis, etc)
- 08 Deaf-Blind
- 09 Communicative Impairments (expressive/receptive)

Historically, VR has provided services to this population that is beneficial in producing employment outcomes. Longitudinal evidence for the success of vocational rehabilitation in producing employment outcomes for persons with hearing loss is included in Attachment 1.

Attachment 1

Historical Comparison of Successful Rehabilitation Employment Outcomes for Individuals Who Are Deaf and Hard of Hearing with Successful Rehabilitation Employment Outcomes for All Individuals

Year	Total Cases	Successful Outcomes for All Individuals	Successful Deaf & HoH Outcomes / % of All	Successful Deaf Outcomes / % of All D & HoH	Successful HoH Outcomes / % of All D & HoH
2008		205,023	28,410 (13.9%)	6,581 (23.2%)*	21,829 (76.8%)
2007		205,447	25,404 (12.4%)	6,479 (25.5%)*	18,925 (74.5%)
2006		205,791	24,088 (11.7%)	6,667 (27.7%)*	17,421 (72.3%)
2005		206,695	22,371 (10.8%)	6,480 (29.0%)*	15,891 (71.0%)
2004		213,431	21,678 (10.2%)	6,554 (30.2%)*	15,124 (69.8%)
2003		217,557	21,241 (9.8%)	6,508 (30.6%)*	14,733 (69.4%)
2002		221,031	20,682 (9.4%)*	6,791 (32.8%)*	13,891 (67.2%)
2001		233,684	22,751 (9.7%)*	7,936 (34.9%)*	14,815 (65.1%)
2000		236,218	19,394 (8.2%)*	7,409 (38.2%)*	11,985 (61.8%)
1999		231,697	18,295 (7.9%)*	7,157 (39.1%)*	11,138 (60.9%)
1998		222,275	16,887 (7.6%)	6,750 (40.0%)	10,137 (60.0%)
1997		211,576	15,243 (7.2%)	6,134 (40.2%)	9,109 (59.8%)
1996		213,780	15,718 (7.4%)	6,238 (39.7%)	9,480 (60.3%)
1995		209,600	15,187 (7.2%)	5,990 (39.4%)	9,197 (60.6%)
1994		202,824	16,029 (7.9%)	6,022 (37.6%)	10,007 (62.4%)
1993		193,918	15,901 (8.2%)	5,830 (36.7%)	10,071 (63.3%)
1992		191,821	16,094 (8.4%)	5,881 (36.5%)	10,213 (63.5%)
1991		202,831	16,832 (8.3%)	5,958 (35.4%)	10,874 (64.6%)
1990		214,874	19,335 (9.0%)	6,820 (35.3%)	12,515 (64.7%)
1989		220,408	20,184 (9.2%)	7,075 (35.1%)	13,109 (64.9%)
1988		218,241	19,693 (9.0%)	7,130 (36.2%)	12,563 (63.8%)
1987		219,616	-----	-----	-----
1986		223,354	18,568 (8.3%)	7,021 (37.8%)	11,547 (62.2%)
1985		227,652	-----	-----	-----
1984		225,772	16,626 (7.4%)	6,296 (37.9%)	10,330 (62.1%)
1983		216,231	15,585 (7.2%)	6,127 (39.3%)	9,458 (60.7%)
1982		226,924	15,519 (6.8%)	6,423 (41.4%)	9,096 (58.6%)
1981		255,881	17,298 (6.8%)	7,212 (41.7%)	10,086 (58.3%)
1980		277,136	18,679 (6.7%)	7,630 (40.8%)	11,049 (59.2%)
1979		288,325	17,540 (6.1%)	7,308 (41.7%)	10,232 (58.3%)
1978		294,396	16,859 (5.7%)	6,877 (40.8%)	9,982 (59.2%)
1977		291,202	16,223 (5.6%)	6,135 (37.8%)	10,088 (62.2%)
1976		303,328	16,015 (5.3%)	5,936 (37.1%)	10,079 (62.9%)
1975		324,039	15,887 (4.9%)	6,066 (38.2%)	9,821 (61.8%)
1974		361,138	16,675 (4.6%)	6,689 (40.1%)	9,986 (59.9%)
1973		360,726	16,869 (4.7%)	6,728 (39.9%)	10,141 (60.1%)
1972		326,138	16,429 (5.0%)	6,412 (39.0%)	10,017 (61.0%)
1971		291,272	13,735 (4.7%)	5,566 (40.5%)	8,169 (59.5%)
1970		266,975	14,334 (5.4%)	5,915 (41.3%)	8,419 (58.7%)
1969		241,390	12,769 (5.3%)	5,598 (43.8%)	7,171 (56.2%)
1968		207,918	12,269 (6.9%)	5,523 (45.0%)	6,746 (55.0%)
1967		173,594	10,363 (6.0%)	4,923 (47.5%)	5,440 (52.5%)
1966		154,279	9,015 (5.8%)	2,731 (30.3%)	6,284 (69.7%)
1965		134,859	8,130 (6.0%)	2,560 (31.5%)	5,570 (68.5%)
1964		119,708	7,376 (6.2%)	2,243 (30.4%)	5,133 (69.6%)
1963		110,136	6,767 (6.1%)	2,077 (30.7%)	4,690 (69.3%)
1962		102,377	6,328 (6.2%)	1,866 (29.5%)	4,462 (70.5%)
1961		92,501	5,438 (5.9%)	1,595 (29.3%)	3,843 (70.7%)
1960		88,275	5,410 (6.1%)	1,617 (29.9%)	3,793 (70.1%)

Note: Detailed information is not available for 1985 and 1987. For the years 1999 through 2008, the numbers of successful outcomes for all deaf and hard of hearing individuals and the numbers of successful outcomes for all deaf individuals include deaf-blind individuals. * Indicates inclusion of Deaf-Blind rehabs as follows: 280 in 1999, 193 in 2000, 295 in 2001, 297 in 2002, 232 in 2003, 254 in 2004, 218 in 2005, 231 in 2006, 208 in 2007, and 207 in 2008.

CHAPTER 2: THE VOCATIONAL REHABILITATION (VR) PROCESS

Overview

Given that the vocational rehabilitation process involves the counselor and consumer in a series of decisions and activities that aim to assist the consumer attain a successful employment outcome, chapter 2 emphasizes that persons with hearing loss are not all alike. Counselors are encouraged to utilize holistic person-centered approaches that address the diversity among consumers with hearing loss with respect to factors such as those related to nature of hearing loss, communication preferences, racial, ethnic, or cultural background, schooling, psychosocial adjustment, the presence of additional disabilities, and related factors.

Chapter Highlights

Identification and Referral Development: Since the target population is large and diverse, creative, multi-faceted approaches to outreach may be helpful in generating appropriate referrals. The chapter identifies a variety of possible referral sources counselors may cultivate for potential referrals.

Eligibility and Order of Selection of Services: Recognizing that VR agencies are mandated to make eligibility decisions within 60 days of the referral date, the chapter identifies the types of diagnostic and case finding information counselors may wish to obtain to facilitate eligibility determinations. Also when considering eligibility determination, counselors are encouraged to avoid excluding individuals (e.g. those who are hard of hearing or late deafened) on the basis of a medical rather than a functional diagnosis.

Comprehensive Assessment Services: Once eligibility has been established, the chapter recommends that counselors gather additional information and data to help clarify the full range, scope, and options of services to help maximize employment opportunities for the consumer. A comprehensive array of assessment services, including specific diagnostic assessments useful with various persons with hearing loss, are outlined and summarized in the chapter.

The Individual Plan for Employment (IPE) and Scope of Services: At this stage of the VR process, the IPE planning process between the counselor and consumer must, by law, be conducted in the consumer's preferred language or mode of communication. Considering the goals and service options specified in the IPE, the chapter suggests a variety of unique service options to explore that may contribute toward enhancing employment opportunities for persons who are deaf, deaf-blind, hard of hearing or late deafened. Since many of the service options entail collaborative efforts with other programs and agencies, the chapter encourages the use of memorandums of understanding (MOUs) as useful strategies for facilitating interagency agreements (see also chapter 7, Interagency Agreements).

Job Development, Placement, and Closure: To facilitate attainment of the consumer's employment goals through the job development and placement process, the chapter suggests counselors consider several factors applicable to persons who are deaf, deaf-blind, hard of hearing or late deafened. These include marketing and providing technical assistance and follow-up to employers and ensuring that consumers have access to appropriate on-the-job accommodations. Once consumers have been placed on a job, the chapter provides a checklist of questions that counselors can use as part of their follow-up contacts to ensure satisfactory job placement, facilitate job retention, and to promote opportunities for career advancement.

CHAPTER THREE: PERSONNEL DEVELOPMENT

The focus of this chapter is personnel structure, maintenance, training, retention, and succession. This chapter includes:

- Counselor competencies
- Staff positions and structures
- The role and essential job functions of State Coordinators for the Deaf, Deaf-Blind, Hard of Hearing , and Late Deafened (SCD/DB/HH/LD)
- The role and essential job functions of Rehabilitation Counselors for the Deaf and Hard of Hearing (RCD/HH, Rehabilitation Counselor for the Deaf-Blind (RCDB) and communication specialist counselors for the hard of hearing and late-deafened.
- Supervisors, staff assistance, interpreters, certification, training
- On-going professional development, and succession planning

Staffing structure recommendations are provided, including the importance of having an administrative position for the assessing, planning, program development, implementation, staff training, and program evaluation of services for this population. Three options of lines of authority for this position are described depending upon state resources, needs, and size. Recommendations for special considerations when supervising casework with this population is emphasized.

In addition to the SCD/DB/HH/LD position, this chapter provides detailed descriptions of the RCDHH, RCDB, and communication specialist, including essential job functions and required knowledge, skills, and abilities that should be sought for the most highly qualified staff in these positions. It is recommended this criteria also be used in the development of performance standards to assure the highest quality standard of services are provided.

This chapter provides recommendations to assist states in meeting requirements for establishing and maintaining a Comprehensive System of Personnel Development (CSPD). It emphasizes the need for states to develop comprehensive long-range training plans to address the lack of curricula available in general undergraduate and graduate programs focused on the VR process and counseling specific to this population.

Recommendations are made to use a variety of internal and external resources, in addition to a variety of available media to deliver training materials. By developing such curricula, states not only address the requirements of the CSPD, but also provide ongoing professional development, ensuring an ability to maintain an adequate number of highly trained professionals to serve this population through staff promotions and attrition.

CHAPTER FOUR: TRANSITION SERVICES

Transition services are vital to the success of students who are deaf, deaf-blind, or hard of hearing, exiting from the schools for the deaf and mainstream programs. Public Law 94-142 mandates that each child be taught in the "least restrictive environment" possible, and this has been widely interpreted to mean the local public school. The mainstreaming, or "inclusionist," movement has led to a decline in the proportion of deaf, deaf-blind and hard of hearing students attending state-supported schools for the deaf. This contemporary debate shares some features with the oral/manual debate of 100 years ago.

Deafness is a very low-incidence condition, and very few public schools have more than a small number of deaf or deaf-blind students within their districts. It can also be very restrictive to be blocked from equal access of communicating with classmates and teachers, from participating in sports or from normal social interaction without the need for an interpreter. The major barriers to learning associated with deafness relate to language and communication which, in turn, profoundly affect most aspects of the educational process. The reading skills of deaf children reflect perhaps the most momentous and dismal affect of the disability and of the education system's struggle to effectively teach deaf children: many of the students "level off" in their reading comprehension achievement at about the third grade level.

Success in a mainstream setting is very dependent upon degree of hearing loss and degree of oral skill. Students with varying degrees of hearing loss have unique communication and related needs.

Compounding the manifest educational considerations, the communication nature of the disability is inherently isolating, with considerable effect on the interaction with peers and teachers that make up the educational process. This interaction, for the purpose of transmitting knowledge and developing the child's self-esteem and identity, is dependent upon direct communication. Yet, communication is the area most hampered between a deaf, deaf-blind or hard of hearing child and his or her hearing peers and teachers. Even the availability of interpreter services in the educational setting may not address these children's needs for direct and meaningful communication with peers and teachers.

Students with all levels of hearing loss will need a more comprehensive transition program to include, but not limited to: joint planning and coordination of the IEP/ITP/IPE; academic and vocational guidance; career exploration and vocational preparation; assessment of communication skills, social skills, and accommodation needs; self advocacy and self-determination; independent living skills; support systems and access to adult services; job seeking and placement; and follow-up and follow-along.

Together, these components appear to provide students with hearing loss a set of key services and experiences needed to successfully transition from secondary/postsecondary education to employment and adult life.

CHAPTER FIVE: COMMUNICATION ACCESS

The focus of this chapter is to acknowledge the responsibility that Vocational Rehabilitation Agencies have to determine the VR client's preferred language and communication mode and make necessary arrangements to provide services using these preferences. The Rehabilitation Act requires, to the maximum extent feasible, that providers of vocational rehabilitation services be trained to communicate in the native language or mode of communication of an applicant or eligible individual (Federal Regulations 34 CRF 361.38: 362.50, 361.51)

This chapter discusses in detail the varying modes of communication that consumers who are Deaf, Deaf-Blind, Hard of Hearing, and Late Deafened use. It overviews a national standard for quality communication access skill level documentation is the Sign Language Proficiency Interview (SLPI). The achievement of an "intermediate" or higher level on this assessment is recommended for VR counselors working with these populations. If counselors do not possess the needed sign language communication skills, it is recommended that a development plan be written so that they can gain the needed skills within a specific period of time.

The need for qualified Interpreters is also described in this chapter. Various certification types are explained and website resource information is given for updated Certification and Credentialing information.

Not all individuals with hearing loss communicate with the one of the various methods of sign language. There is a section in this chapter to explain the communication needs of non-signing consumers. Valuable information is given to assist in avoiding or alleviating problem situations which might cause problems with successful communication for individuals with hearing loss.

The chapter ends with behavior tips for quality communication. Effective communication is a right of individuals with hearing loss. It is the responsibility of the Vocational Rehabilitation agencies to work diligently in assisting to resolve any communication barriers that may exist within their programs. Consumer choice should always be the driving factor for providing quality communication.

Note- Individuals who do not have auditory access to English often times have difficulty with standardized tests. Below is a link to information published by PepNet as a result of their Test Equity Summit in Oct 2008. The link will take you to the participant's discussion of the issues. To the left on that page you will find more information about the fundamental issues related to Test Equity for Deaf, Hard of Hearing and Deaf-Blind, the participants of the summit and the Test Equity Summit print publications.

[HTTP://www.pepnet.org/test-equity/issue_vid.asp?peop=15](http://www.pepnet.org/test-equity/issue_vid.asp?peop=15)

CHAPTER SIX: TECHNOLOGY & ACCOMMODATIONS

This chapter begins with a discussion of the various technological advances which greatly impact the lives of individuals with hearing loss. The value of proper assessments is stressed in order to identify the technology that best meets the needs of the individual client.

Best practices principles are outlined to assist the VR Agencies in determining the steps needed in order to meet the technology needs of the client.

This chapter discusses in depth the various types of Assistive listening devices (ALDs) and various other amplification devices that may assist consumers with hearing loss. Computer, personal pagers and videophone technology as greatly enhanced communication for individuals with hearing loss. The technological advancements in this area have greatly improved the employability of deaf, hard of hearing, late deafened and Deaf-blind consumers. The Model State Plan Technology and Accommodation chapter provides valuable information to assist VR agency staff in providing essential assistance to these populations. VR counselors, serving consumers with hearing loss need to always be knowledgeable about new tools to be used to assist our consumers to be successful in their VR program and in employment.

The accommodation options used most often by consumers with hearing loss are outlined in this chapter. It is important to know that each consumer is different and their accommodation needs may vary based on several factors. Open and clear communication regarding the client's accommodation preferences and needs should be a priority for the VR program staff.

As with many of the other chapters throughout the Model State Plan, various web link resources are provided to give the newest information in the ever changing field of technology and accommodations.

CHAPTER SEVEN: PARTNERSHIPS & INTERAGENCY AGREEMENTS

This chapter highlights the utility of state VR agencies formalizing collaborations and documenting relationships. It also suggests positive benefits to state VR agencies of establishing Interagency Agreements & Memoranda Of Understanding, describing how each may serve to provide better services, increase shared understanding, eliminate duplication of services, and identify service gaps. This chapter suggests the following entities for state VR agencies' consideration in establishing collaborative opportunities:

- State commissions & VR agencies
- Institutions of Higher Education
- Community Rehabilitation Providers
- General / Blind agencies & HKNC
- Interpreter Training Programs
- Public Education
- Chambers of Commerce
- Business Leadership Networks
- The National VR Business Network

CHAPTER EIGHT: INDEPENDENT LIVING SKILLS

The rehabilitation process focuses on employment outcomes for individuals with hearing loss. In order to maximize the employment opportunities and successful outcomes this chapter addresses the need to view the individual with a hearing loss from a holistic approach, which includes biological, chemical, social (leisure, family and independent living), economic, mental, and linguistic aspects.

It also outlines the importance of incorporating independent living skills and life skills assessments and training in the rehabilitation process. Accessibility issues and concerns are also addressed to assist a state rehabilitation program in providing appropriate and successful services to this population. The chapter includes a sample independent living curriculum that may be adjusted to the needs of each state in serving individuals with hearing loss.

Ideas and suggestions on the development of partnerships with Independent Living Centers, Deaf/Hard of Hearing Service Centers, Deaf/Hard of Hearing Commissions, Community Rehabilitation Programs and State Independent Living Councils in order to efficiently and effectively provide these services is included in this chapter.

Chapter 8 Sections include:

- Introduction
- Background
- Independent Living Centers
 - Information and referral
 - Independent living skills training
 - Peer counseling
 - Advocacy
 - Other services
- Deaf/Hard of Hearing Service Centers
 - Video phones
 - Technology
 - Recreational services
- Deaf and Hard of Hearing Commissions
- Community Rehabilitation Programs
- Accessibility Issues
- State Independent Living Councils
- Independent Living Curriculums
 - Sample

CHAPTER NINE: FUTURE DIRECTIONS

This chapter addresses the importance of assessing current vocational rehabilitation programs serving individuals who are deaf, deaf-blind, hard of hearing, and late-deafened. It provides a detailed model for conducting a program assessment and for developing a strategic plan based on the assessment findings. Data and other strategies to collect and analyze pertinent information are suggested. Categories to consider in a strategic plan are included.

The first eight chapters of the Model State Plan provide detailed information that can be used to assist agencies to develop strategies to achieve targeted outcome goals.

The importance of maintaining the Strategic Plan as a living document, through ongoing monitoring, evaluation and modification, is stressed. The importance of maintaining a position of a State Coordinator for the Deaf and Hard of Hearing (SCD) is addressed.

The current challenges programs are facing is recognized, along with the importance of doing business differently- not more costly- in order to continue to provide quality services to existing, underserved, and unserved persons with hearing loss.

Chapter Nine sections include:

- The Challenge
- The History
- Importance of Assessing Current Program and Services
- The Model: Where are we? Where do we want to be? How do we get there?
- Assessment Strategy:
 - Assignment of Lead Person
 - Assessment Activities to Include
 - Conducting the Assessment: analysis of RSA-911 data; analysis of counselor assignments; analysis of counselor accessibility; analysis of office accessibility; targeted case reviews; analysis of policy and practice; conducting staff interviews; gaining consumer input; senior management involvement.
- Strategic Plan Development:
 - Staffing structure
 - Human resource development
 - Policy, practice; fees, forms
 - Accessibility
 - Pilot programs.
- Plan Implementation, Monitoring, and Evaluation.
- The State Coordinator for the Deaf and Hard of Hearing (SCD) as the Driving Force.

The charge for the future is to find creative ways to turn challenges into opportunities for continued quality and growth of vocational rehabilitation program excellence for consumers who are deaf, deaf-blind, hard of hearing, and late-deafened.

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