

Attachment 4.11(a): Statewide Assessment, Results of Comprehensive Statewide Assessment of the Rehabilitation Needs of Individuals with Disabilities and Need to Establish, Develop, or Improve Community Rehabilitation Programs:

The Division jointly conducts with the State Rehabilitation Council continuing statewide studies to determine the needs of individuals with disabilities within the State and the best methods to meet those needs. The Division periodically conducts surveys through its programs, projects and activities to ensure that the annual evaluation of effectiveness of the vocational rehabilitation program meets the goals and objectives set forth in the State Plan and does not impede the accomplishments of the purpose and policy of federal funding.

As part of the development of the State Plan, the continuing statewide studies include:

- 1) A triennial comprehensive assessment of the rehabilitation needs of individuals with significant disabilities who reside in the State,
- 2) A triennial review of the effectiveness of outreach procedures used to identify and serve individuals with disabilities who are minorities and individuals with disabilities who are unserved and under-served by the vocational rehabilitation system; and
- 3) A triennial review of the broad variety of methods to provide, expand, and improve vocational rehabilitation services to individuals with the most significant disabilities, including individuals receiving supported employment services.

The Division conducts an annual evaluation of the effectiveness of the State's Vocational Rehabilitation program in providing vocational rehabilitation and supported employment services, especially to individuals with the most significant disabilities. The annual evaluation analyzes the extent to which the Division has achieved the goals and priorities established in the State Plan and annual amendments to the plan; and that the Division is in compliance with the evaluation standards and performance indicators established by the Rehabilitation Services Administration.

The number of individuals in New Mexico with disabilities is difficult to estimate. In a study by Cornell University, the number of working age civilians (Ages 21 to 64) in New Mexico with Disabilities, in 2003, was estimated to be 150,580¹. This study also indicated that New Mexicans with disabilities employed across employment sectors by disability status are most likely to work in Private, For-Profit (51.2%), be Self Employed (14.5%), work for Local Government (13.6%), work for Private, Non-Profit (8.2%), State Government (6.7%), Federal Government (5.2%), and finally, Family Business with no pay (0.5%).²

¹ State Template for Effective Use of Disability Statistics, Cornell University, Rehabilitation Research and Training Center on Employment Policy for Persons with Disabilities, Rehabilitation Research and Training Center on Disability Demographics and Statistics, Table 1. September 2003 – December 2005, March 2006, Susanne M. Bruyere, PhD, CRC, Andrew J. Houtenville, PhD, Employment and Disability Institute

² IBID, Table 7.

Very interestingly, other studies in New Mexico indicate that New Mexicans with disabilities are not necessarily precluded from working in a variety of occupations. Respondents in a recent study appeared to be over-represented in the “professional” occupational grouping relative to the workforce, in general: 29% of respondents self-identified as professionals in 1995, as did 56% in 2000 and 43% in 2004.³

U.S. Census Bureau reported the following on disability status of civilian non-institutionalized population for the State of New Mexico:⁴

	American Community Survey 2005	Census 2000
Population	1,225,270 (16 - 64 years) ^{5*}	996,726 (21 – 64 years)*
With Disability	179,241 (16 – 64 years)*	209,280 (21 – 64 years)*
Percent Employed	37.7*	53.3*

Specific to identifying statewide needs of individuals with disabilities in New Mexico, a Participant and Stakeholder Satisfaction and Statewide Needs Assessment⁶ was conducted during the winter months of 2007. The assessment was independently contracted and with the consultation from the contractor, the State Rehabilitation Council and the Division set the parameters of the assessment and collaborated regarding the execution, completion, and review of the study results to determine what actions are needed to improve service to New Mexico citizens with disabilities. A statewide survey was developed in November 2006 to assess both participant satisfaction and statewide needs analysis.

Major findings in the study indicated the following needs by New Mexicans with most significant disabilities with the greatest frequency:

1. 40% of clients did not feel like they could get needed training in the community where they lived
2. Only half of the consumers surveyed reported having an adequate number of providers to choose from in their community
3. The One-Stop service delivery system is clearly not a meaningful provider of services to individuals with disabilities working with DVR. It is noted that over 33% of respondents to the survey did not answer the questions related to One-Stop Centers. Many marked “NA” or placed a “?” by the question indicating that they did not know what a One-Stop is. Many respondents specifically asked the question, what is a One-Stop?

³ The Employment Status and Needs of Working-Age New Mexicans with Disabilities: Comparisons Over Time 1995, 2000, & 2004, The UNM Institute of Public Policy, The University of New Mexico, Albuquerque, New Mexico, July 2004, Amy Sue Goodin, Daniel May.

⁴ Note the differences between the 2000 Census, the American Community Survey 2005, and the estimates by Cornell University regarding the population of individuals with disabilities in New Mexico.

⁵ Note: the population base is different for each census. The American Community Survey for 2005 includes individuals from age 16 through 20 increasing the population sets and decreasing the percent employed as most of this group will be in high school and/or in transition from school to work.

⁶ Participant and Stakeholder Satisfaction and Statewide Needs Assessment, sponsored by the New Mexico State Rehabilitation Council and the New Mexico Division of Vocational Rehabilitation, April 1, 2007, Contract Number 07-644-1000-0058, Michael D. O’Brien, Ed.D., CRC, CVE

4. Local One-Stop centers are not meeting the needs of individuals with disabilities or that individuals with disabilities are not aware of One-Stop services
5. Participants overwhelmingly did not feel that the support they got for medical needs from DVR was a primary contributor to their success.
6. Some participants indicated it was difficult to get medical needs met.
7. Most consumers were satisfied with their current transportation and living situation.

The Division also assesses the needs of New Mexicans with disabilities utilizing reports generated by other entities in the state. Very recently, a preliminary report by the Center of Development and Disability⁷, reported that a greater percentage of people with disabilities, particularly those requiring assistance, responded that they sometime or always had a problem getting access to healthcare compared to people with no disability. Another telling finding of this study was that providers' perceptions of barriers faced by people with disabilities were generally limited to physical access issue and the use of certified American Sign Language (ASL) interpreters at primary and public healthcare offices was mostly unheard of.

The New Mexico Division of Vocational Rehabilitation is addressing the vocational rehabilitation services needs of individuals with disabilities who are minorities in the state. Statistical information from the Division's computerized case management, RISTRAS, from the period of July 1, 2005 through June 30, 2007, indicates that 45% of DVR participants identified within the Hispanic ethnic group while 55% self-identified as Non-Hispanic. Breaking down the statistics further by race indicates the following:

RACE ⁸	COUNT	% of Total
American Indian or Native Alaskan	739	8%
Asian	64	1%
Black	324	4%
Native Hawaiian or Other Pacific Islander	45	0.5%
White	7739	87%

Based on the number of individuals reporting they had a work disability, the Division estimates the number of individuals between the ages of 21 and 64 who may be significantly disabled and/or in need of supported employment is approximately 97,734.

⁷ Preliminary Report: Barriers to Access to Healthcare for People with Disabilities in New Mexico: Towards Improved Public Health Practice, Center for Development and Disability, 2300 Menaul Blvd, NE, Albuquerque, New Mexico 87107, 505.272.2990, March 2007, Anthony Cahill, Ph.D.

⁸ Note: The above category "Race" includes individuals who are of multiple races. This results in the "Count" and "Percentage" not correlating with the actual number of total individuals rehabilitated. The data came from a query of client data base from July 1, 2005 to June 30, 2006. The client data base is referred to as RISTRAS. RISTRAS is an acronym for **R**ehabilitation **I**nformation **S**ystem for **T**racking, **R**eporting and **S**reamlining.

Individuals with disabilities who have been unserved or underserved would include individuals from minority and remote rural populations in the state. Census 2000 statistics of minority populations with disabilities in New Mexico age 21 to 64:

Race	Population	With Disability	With Disability and Unemployed
White	1,214,253	254,993	118,571
Hispanic	765,386	160,731	74,740
American Indian	173,483	36,431	16,940
Black	34,343	7,212	3,353
Asian	19,255	4,043	1,880
All Others	311,057	65,321	30,374

The Division's own client data base of RISTRAS indicates that for the State Fiscal Year 2006, 739 American Indian or Native Alaskan, or 8% of the total number of individuals rehabilitated, were served by the Division. This minority group is, as a whole, underserved by the Division. Other minority groups as indicated in the RISTRAS table above also indicate that they are underserved when compared to the total number of White clients (Hispanic or non-Hispanic).

The need to establish, develop, or improve community rehabilitation programs within the state to address rehabilitation needs of minorities, especially those in remote rural communities is obvious. Geographically, New Mexico is a large state in land mass with many areas of the state sparsely populated. Many rural areas have few, if any, community rehabilitation providers (CRPs). Along with Rio Grande corridor from Taos in the northern part of the state to Las Cruces in the south, is a concentration of community rehabilitation providers in the larger communities of the Greater Albuquerque Metropolitan area, Socorro, and Las Cruces. The northeast quadrant, southeast quadrant, and the southwest quadrant are the areas most affected by the lack of service providers.

Case in point, the town of Raton in the northeast quadrant has only one CRP available to provide supported employment services. DVR also has a two person office in Raton. However, it is noted that before supported employment services can be agreed upon with the CRP, the individual must be on the Developmental Disabilities Medicaid Waiver for the long-term funding. This service provider is capable of offering services to the communities of Cimarron (41 miles) and the community of Angel Fire (80 miles) one way. Other communities served by the DVR office, such as Clayton (83 miles), Eagle Nest (65 miles), Springer (38 miles), Maxwell (about 23 miles), and Ute Park (about 50 miles) do not have the benefit of CRP services. Note: all mileage is one-way distance and the listed communities are not all inclusive of northeast New Mexico served by the DVR Office.

The same holds true for southeastern New Mexico in Lea County. There are two community rehabilitation providers in the town of Hobbs where DVR has a four person office. However both community rehabilitation providers are available only to individuals who live in Lea County to such places as Tatum (50 miles north) and Eunice (50 miles

south). One provider specializes in mental health while the other provider specializes in developmental disabilities. All recipients of these services must have long-term funding in place before supported employment services are rendered.

In southwestern New Mexico, DVR has a two person office in Silver City where there are two community rehabilitation providers. Both providers make services available to residents in Silver City and Deming (50 miles) but not to the other communities served by the DVR office such as Mimbres (30 miles), Lordsburg (50 miles), Animas (80 miles), and Reserve (85 miles). Note: all mileage is one-way distance and the listed communities are not all inclusive of northeastern New Mexico served by the DVR Office.

Central western New Mexico is a very large territory inclusive of Indian Reservation land. American Indian populations have access to four community rehabilitation providers through their local tribal affiliations when resident on Indian land. However, for non-American Indian populations access to community rehabilitation programs is more limited to one provider and again funding is an issue relative to acquiring supported employment services. There are four staff in the Gallup DVR office serving a geographic community of almost 80 miles to the east, 25 miles to the Arizona state line, not less than 80 miles to the south, and not less than 50 miles to the north. Outside of Gallup and the services available to American Indian populations, there is not much available in terms of community rehabilitation programs in central western New Mexico.

There are other rural locations throughout the state where population is scarce and distances vast from community to community with few rehabilitation community providers. These rural locations are itinerantly served by DVR offices in larger communities with many community rehabilitation services providers stretching their resources as best they can to extend services.

Recent developments have occurred in Santa Fe. The community rehabilitation service provider is no longer providing services affecting the City of Santa Fe and many surrounding communities. A new service provider has just begun to address this service gap but they are small and currently experiencing staff turnover. It is much too early to give a fair assessment of their capacity to provide services.

Below are examples of how the Division addresses expansion of services to underserved and unserved populations with disabilities in the state.

American Indian Populations: The Division recently renewed a contract with New Vistas in Santa Fe to continue the Native American Liaison Program (NVNALP) and all of the Directors of the Section 121 American Indian Vocational Rehabilitation Programs in New Mexico serve on the State Rehabilitation Council. The Division works closely with New Vistas to assure fulfillment of the contract and the Division works collaboratively with the 121 Programs to align resources, streamline services delivery, and increase employment outcomes for American Indian populations. It is also noteworthy that the Pueblo of Jemez hired a part-time individual who concurrently works part-time for New Vistas as a state liaison. The arrangement is indicative of the strength and collaboration

between New Vistas and the 121 American Indian programs. The NVNALP program facilitates service delivery to American Indians living in their communities through educational outreach and culturally appropriate service delivery. Challenges include lack of transportation, inadequate community services, and high unemployment. These are similar challenges faced by NMDVR counselors serving rural populations. However, NVNALP rehabilitation technicians help the NMDVR counselors understand cultural factors that may affect relationships with American Indians. The association with New Vistas continues to help NMDVR meet its goals of culturally appropriate service delivery for American Indians with disabilities.⁹

NMDVR/Office of African American Affairs: NMDVR continues to collaborate with the State Office of African American Affairs across the state to educate the African American Community about NMDVR services. The Community Outreach Coordinator maintains efforts and rapport with various state and government agencies, businesses, and faith-based organizations to support and market NMDVR services. Working with schools, churches, social and civic groups, as well as other organizations and agencies, the Community Outreach Coordinator assumes a team role in efforts to overcome obstacles to employment for New Mexicans with disabilities.¹⁰

Mentoring Diverse Abilities: High School-age Hispanic and American Indian youth with disabilities benefit from mentorships to help them identify and work toward future professional goals. Mentoring Diverse Abilities encourages and assists students from Bernalillo High School, Gadsden School District and Tohajiilee Schools through mentoring, paid work experience, introduction to post-secondary educational opportunities, youth leadership training, parent education, job development and job coaching.¹¹

Ticket to Work: The Social Security Administration's Ticket to Work program is designed to provide a network of providers for Social Security beneficiaries to obtain employment outcome services. NMDVR is an Employment Network under the Ticket to Work program, and received 182 ticket assignments total at the end of fiscal year 2006.¹²

NMDVR and Behavioral Health Services: NMDVR is a member of New Mexico's Behavioral Health Purchasing Collaborative. During the 2006 fiscal year, work continued toward intra-agency collaboration specifically dealing with behavioral health services among all 17 agencies/divisions of the BHPC. Under the terms of an agreement reached with the State Behavioral Health Services Division, NMDVR continues to facilitate and monitor employment services for people within the BHSD system and to assist others in making connections with that system. Coordination of services among BHSD, NMDVR,

⁹ New Mexico Public Education Department, Division of Vocational Rehabilitation 2006 Annual Report, July 1, 2005 to June 20, 2006. www.dvrgetsjobs.com

¹⁰ IBID

¹¹ IBID

¹² IBID

regional employment providers, and mental health providers can increase successful employment outcomes for individuals with disabilities.¹³

Migrant Assistance Program: Migrant Assistance Program has been providing services to migrant and seasonal farm workers with disabilities since 2002. Services include educational opportunities, translation or interpretive services, help with job readiness and job search, client follow-up, and advocacy to an often-marginalized population. MAP targets a broad range of agriculture-related activities, including food processing, ranching, produce delivery, dairy, orchard, and field work. MAP is a federally funded project.¹⁴

Navigators in One-Stop Centers: Specially trained NMDVR teams advise and advocate for people with disabilities who are seeking employment at New Mexico Workforce Connection One-Stop Career Centers. These Centers are government funded job placement offices located statewide. The Navigator Program is funded by the U.S. Department of Labor and the Social Security Administration through the Governor's Office of Workforce Training and Development, and administered by NMDVR. Currently, 11 navigators work in 14 One-Stop Centers. Designed to increase employment for Social Security beneficiaries and others with disabilities, the Navigators facilitate seamless and comprehensive services to persons with disabilities, access to programs and services, and linkage to the employer community. Navigator services are broad in range to meet diverse needs. Examples of their duties include, but are not limited to, being system change agents, problem solvers, relationship builders, to help individuals, One-Stop staff, employers, and providers. Navigators offer guidance and implementation of the following: ADA workplace policies and procedures; physical and programmatic accessibility issues; reasonable accommodations; collaboration with One-Stop staff; bridging gaps between the business and human service communities; training One-Stop staff regarding disability issues; and interagency sharing of resources to improve outcomes for people with disabilities.¹⁵

There remains in the State of New Mexico the need to improve community rehabilitation programs within the state. The comprehensive statewide needs assessment reveals that continued training of rehabilitation counselors and rehabilitation technicians in the benefits of their clients utilizing services of One-Stop Centers. Also, it appears that the Division can improve efforts in encouraging DVR participants to avail themselves to the One-Stop Centers for employment services.

¹³ IBID

¹⁴ IBID

¹⁵ IBID.