

Proposal
to the
Department of Health and Social Services

Centers for Medicare and Medicaid Services
CFDA No. 93.768

STRATEGIC PLAN 2006-2008

Pathways to Independence

**Supporting the Competitive Employment of
People with Disabilities**

Submitted by
The Wisconsin Department of Health and Family Services
Madison, Wisconsin

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VISION FOR WISCONSIN 2012

In Wisconsin, all residents have the opportunity to participate in the labor force and have the right to fair treatment in exercising that opportunity. Wisconsin values the contributions of people with disabilities in the workplace from entry-level to the most advanced occupations.

In Wisconsin, people with disabilities have unimpeded access to places, information, and communications and are successfully integrated into the community and workplace. Wisconsin supports the development, use, maintenance, and access to effective technologies designed to diminish the limitations imposed by disability. Wisconsin supports the principles of universal design—a framework for the design of places, things and information that focuses on the user, on the most diverse range of people operating in the widest array of situations without special or separate design.

In Wisconsin, people with disabilities are prepared for the world of work. Beginning at the pre-kindergarten level, people with disabilities have access to the education and training necessary to contribute to the 21st century workforce. Individuals have the supports and information needed to successfully transition from school to work.

In Wisconsin, people with disabilities have access to a seamless system of supports and services needed to participate and prosper in the workforce. State, regional, and local agencies collaborate to provide a system that is efficient, user friendly, and responsive to the economic diversity of the state. Supports and services are based in local communities and are designed to match each individual's needs and preferences.

In Wisconsin, people with disabilities have affordable and appropriate health and long-term care, from entry into the workforce and through retirement. Employers, policymakers, insurers and people with disabilities are actively engaged in exploring new options for health insurance and long term supports. Individuals have easy access to information they need to make good decisions about their healthcare and other benefits.

In Wisconsin, employers increase productivity through the intentional and successful employment of people with disabilities. Employers have access to practical training, technical assistance and ongoing customized supports to enhance people with disabilities' contributions to the workplace

In Wisconsin, people celebrate the contributions of people with disabilities, their economic potential and positive impact on the labor force. The public values and preserves the diversity created when people with disabilities are successfully integrated into the community and workplace.

INTRODUCTION

The mission of the Pathways to Independence Strategic Plan is to develop a comprehensive system that maximizes employment for people with disabilities, increases the state’s labor force through the inclusion of people with disabilities, and protects and enhances workers’ healthcare, other benefits and needed supports.

The Pathways Plan was created in 2005 through a broad strategic planning process. The aim was to learn what strategies in Wisconsin’s system are effective and what should be improved in order to increase employment of people with disabilities.

Wisconsin Governor Jim Doyle’s “Grow Wisconsin” plan charts a course to enhance economic development and foster creation of a 21st century workforce to fill high-wage jobs in the state. The Pathways Plan and that of Grow Wisconsin share policy goals, strategies and desired outcomes. These plans support each other to assure positive outcomes for people with disabilities and business that employ them.

The Pathways to Independence strategic planning process was designed and implemented as part of the Medicaid Infrastructure Grant (MIG). The MIG is funded by the federal Centers for Medicare and Medicaid Services (CMS) and is administered by the Wisconsin Department of Health and Family Services (DHFS) in collaboration with other state agencies and community entities. The initiatives are commonly referred to as the Pathways to Independence Projects.

The Department of Health and Family Services contracts with the University of Wisconsin—Madison, Waisman Center and the University of Wisconsin—Stout, Stout Vocational Rehabilitation Institute (SVRI) for many project activities. The contracted staff members are co-located with DHFS staff and form the Pathways Team. This group conducted the daily operations of the strategic planning process. (See Appendix E: OIE Organizational Chart)

WISCONSIN 2005

The State of Wisconsin is a leader in human service systems, including the removal of barriers to employment for people with disabilities. Through inclusive policy-making and collaboration among people with disabilities, employers, state and provider agencies, and University of Wisconsin (UW) researchers, the state is developing a system of comprehensive, integrated and innovative policies and services.

Data from the Current Population Survey indicate that the proportion of people reporting a disability has decreased over the past four years. People who are older, non-white, not high school graduates, and unmarried are more likely to report that they have a disability. Having a disability is also correlated with lower employment levels and earnings. In 2004, 18% of Wisconsin's non-disabled population did not work, while 44.3% of residents with disabilities reported not having worked at all in the past year.¹

People with disabilities in Wisconsin reported median annual earnings of \$13,272. Non-disabled respondents reported median annual earnings of \$28,100.² Other income, including disability payments, tends to make up a higher proportion of the total income of people with disabilities. In Wisconsin, 136,621 residents receive Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI). The rate of employment of Wisconsin SSI recipients has averaged 18% over the past three years, while the national rate was approximately 9%.³

Economic Outlook

Wisconsin's employment growth rate is predicted to be 1.3% in 2006, slightly above that projected for the U.S. overall. Like the U.S. economy as a whole, it is uncertain in Wisconsin whether the jobless recovery will "transition to an economic recovery that can provide job growth over the next few years."⁴ Wisconsin's strengths include a high quality educational infrastructure and a well-educated workforce. The statewide unemployment rate is 4.8 percent.⁵

Wisconsin faces significant economic challenges. Wages have lagged behind other states, the national trend of manufacturing job loss has severely impacted the state (in which 20.8% of jobs are in manufacturing vs. 13% in the US as a whole), and investments in high growth companies have been slow to be realized. According to demographic projections prepared by the state Department of Administration, Wisconsin will be faced with a significant labor shortage in ten to fifteen years. The number of workers entering the labor force or migrating into Wisconsin is projected to be insufficient to replace workers who are retiring⁶.

¹ United States Department of Labor, Current Population Survey, October 2005.

² Wisconsin Department of Workforce Development, November 2004 Employment Statistics Report, December 2005.

³ <http://www.ssa.gov>, Social Security Beneficiary Statistics Report, January 2006.

⁴ Wisconsin Department of Revenue, Division of Research and Policy (September 5, 2005) *Wisconsin Economic Outlook*.

⁵ The unemployment figures used are for December 2005 and are seasonally adjusted. Wisconsin Labor Market Information, Civilian Labor Force 2005. Wisconsin Department of Workforce Development.

⁶ http://www.wisgov.state.wi.us/docs/Doyle_Economic_Package.pdf

Wisconsin expects growth in trade, transportation, utilities, leisure, hospitality, education, and health services. The fastest job growth is expected in professional and business services. In general, economic growth has been strongest and is expected to remain strongest near Green Bay, Madison, and the outer suburbs of Milwaukee. Slower growth is anticipated in older, traditionally industrial areas or those heavily dependent on extractive activities such as mining and forestry.

The expected increase in demand for job applicants, as well as the expected increase in the working age population⁷, bodes well for the activities described in this proposal.

Systems Strengths

Wisconsin system strengths include:

- A nationally recognized system of One-Stop Job Centers that now house Wisconsin's 11 Disability Navigators. These systems experts help people with disabilities seeking work to navigate the complex network of services that support employment.
- Wisconsin's Medicaid Purchase Plan (MAPP) offers people with disabilities who are working or interested in working the opportunity to buy health and long term care coverage through the Wisconsin Medicaid Program. MAPP has enrolled more than 14,300 people since its establishment in 2001. Current enrollment is 9,600. MAAP has an entry asset limit of \$15,000, an earnings limit of 250% of the federal poverty level, and independence accounts that allow for asset accumulation.
- Personal assistance services (PAS) available in the home and workplace through a combination of the state MA plan, home and community-based waivers and the Community Options Program. A 2003 survey of county case managers did not reveal a single person who lacked funding for needed workplace PAS.
- From 1999-2004, DHFS, DWD Division of Vocational Rehabilitation (DVR), and vocational service providers collaborated on a \$1 million per year SSA-funded State Partnership Initiative (SPI). SPI provided person-centered, team-based employment supports for 956 people who receive SSI and/or SSDI. Two years after program entry at approximately the same level of earnings, project participants (n=506) had mean earnings of \$831 per quarter, while comparison group members (n=610) had mean earnings of \$596. As part of this program, Wisconsin implemented Supplemental Security Income (SSI) waiver that permits a higher cash benefit offset as wages increase, independence accounts, and the suspension of certain continuing disability reviews.
- Successful implementation of Family Care, Wisconsin's innovative, values-based, managed long-term care program.⁸ As of July 2005, Family Care served over 2,100 people with

⁷ Egan-Robertson, David, Don Harrier, and Balkrishna Kale, *Wisconsin Population 2030: A Report on Projected State, County and Municipal Populations and Households for the Period 2000-2030*. Wisconsin Department of Administration, Division of Intergovernmental Relations, Demographic Services Center, March 2004.

physical and developmental disabilities in five counties, has eliminated waiting lists in those counties, replaced fee-for-service funding with capitated funding, curtailed incentives for community services to refer for institutional care, and instituted person-centered planning as the basis for services. The program has a commitment to full community and workforce inclusion.

In his January 2006 State of the State address Governor Jim Doyle identified four policy goals for the redesign of Wisconsin's long-term care system: (1) ensure that seniors and people with disabilities are not forced into nursing homes if that is not what they want or need, (2) eliminate waiting lists for community-based long-term care services within five years, (3) utilize creative public-private partnerships that provide cost effective services on a regional basis, and (4) expand access to Family Care quickly within the existing budget to the greatest degree possible.

- Aging and Disability Resource Centers (ADRCs), a central feature of the Family Care program and an integral part of the reform of Wisconsin's long-term care system. The 17 existing ADRCs, serving 23 counties, act as one-stop portals for information and access to services. In 2003, ADRCs received over 66,000 requests for information. Wisconsin is planning an expansion of 20 new ADRCs, which would serve an additional 50 counties in 2007-2009.
- Home and community-based waiver programs that serve over 19,000 people with physical and developmental disabilities and offer reimbursement for person-centered, team-based employment planning.
- An internationally renowned, evidence-based mental health system⁹ modeled on the Wisconsin Program of Assertive Community Treatment and several clubhouse programs, with a record of success in employment outcomes.
- The development of Comprehensive Community Services (CCS) increases access to supportive services for children, adolescents and adults with mental health or substance use disorders. CCS aims to provide for a maximum reduction of the effects of the individual's mental and substance abuse disorders, to restore consumers to the best possible level of functioning and to facilitate their recovery. Services are individualized to each person's need for rehabilitation as identified through a comprehensive assessment.
- A statewide network of eight Independent Living Centers (ILCs) that support independence for people with disabilities. Five ILCs directly offer the person-centered Vocational Futures Planning process and other employment services.

⁸ U.S. Department of Health and Human Services (2004) *Promising Practices in Long Term Care Systems Reform: Wisconsin Family Care*. Centers for Medicare and Medicaid Services, Disabled and Elderly Health Programs Division

⁹ U.S. Department of Health and Human Services (1999). *Mental Health: A Report of the Surgeon General- Executive Summary*. Rockville, MD: U.S. Department of Health and Human Services, p.286

- An online Comprehensive Healthcare and Earnings Query (CHEQ) calculator that allows people with disabilities to explore the effects of earnings on benefits and net income. CHEQ also provides data for research and policy analyses.
- One of the nation’s largest and most accessible cadre of professionally trained and supported benefits counselors, including more than 40 specializing in work incentives issues. The Wisconsin Disability Benefits Network (WDBN) offers a variety of levels of training and technical assistance to anyone who wishes to learn about employment-related benefits planning.
- A statewide Division of Vocational Rehabilitation (DVR) in the Department of Workforce Development (DWD). DVR’s annual \$66 million budget supports field operations with a staff of over 215 counselors, plus direct-purchased services for DVR consumers. In federal fiscal year 2005, more than 3,000 DVR consumers achieved employment at an average of nearly \$10 per hour. Integrated since 1996 with the One-Stop Job Centers, DVR is currently serving 12,576 people, including 3,461 Social Security Administration (SSA) benefit recipients and 2,346 Medicaid (MA) recipients.

New Initiatives

Wisconsin continues to pioneer new initiatives that include:

- The Governor’s “Grow Wisconsin” plan that lays out a vision and strategy to create well paying jobs and a “high road” economy, with state investment in education, training and infrastructure. The plan outlines a multi-faceted strategy to make more effective use of existing resources to create well paying jobs and to leverage additional private and federal investment in Wisconsin. In total, this plan represents a strategy to put over \$1 billion to work to grow Wisconsin’s economy.

With Grow Wisconsin, the Governor has set eight strategic goals to grow the state’s economy:

1. Retain and create high wage jobs
2. Prepare workers for tomorrow’s economy
3. Add value in Wisconsin’s economic base
4. Create and unleash knowledge to build emerging industries
5. Tap Wisconsin’s full urban potential
6. Implement strategies regionally
7. Lower regulatory burdens, keep standards high
8. Build a world-class infrastructure

In June 2005, Governor Jim Doyle announced the availability of competitive grants to promote regional approaches to linking economic and workforce development throughout Wisconsin. The *Growing Regional Opportunities in Wisconsin (GROW) Region by Region* grants are intended to advance the Governor’s *Grow Wisconsin* initiative. The *GROW Region by Region* program is implementing grants to foster regional efforts to increase workforce development and economic growth. The *Region by Region* grants are

funded through the state Council on Workforce Investment (CWI) and administered by the state Department of Workforce Development (DWD).

Six *Region by Region* partnership grants were awarded in 2005. Three grants are held by existing partnerships seeking to broaden their scope, implement specific program activities, or both. Three additional GROW grant applicants received starter funds intended to enable new partnerships to complete the initial process of regional partnership-building and begin their strategic planning efforts.

- On April 8, 2005, the Office of Independence and Employment received a \$1.5 M grant from the Social Security Administration to design and implement the two-year *Social Security Disability Insurance (SSDI) Benefit Offset Pilot*. Despite an array of work incentive provisions in the Social Security Administration (SSA) regulations, there is only marginal use of these opportunities. As a result, beneficiaries make limited progress toward financial and economic independence. Policy experts and disability stakeholders agree that a key to increasing beneficiary employment may be a gradual, rather than precipitous, reduction in cash benefits as earnings rise. The pilot is designed to eliminate the artificial “cash cliff” that currently exists in the SSDI program.

The Office of Independence and Employment has contracted with 22 community-based organizations to work directly with pilot participants and coordinate the necessary benefits counseling and employment services. Sites will also collect and submit research data on up to 800 participants statewide.

- On September 29, 2004, the Department of Health and Family Services received an award of \$5.5 M from the Centers for Medicare and Medicaid Services (CMS) through the Real Choice Systems Change Grants for its proposal for a "Comprehensive Systems Reform Effort." DHFS will use this three-year funding to build on the learning and outcomes from its five previous Systems Change Grants.

The systems change grant will (1) develop and implement a comprehensive strategic plan for statewide expansion of long-term care reform, (2) provide timely information to Wisconsin citizens about long-term care service options, prevention and financial planning, (3) manage where, when and how people access institutional and community-based care, (4) enhance the availability of cost-effective service options, especially consumer-directed supports, and (5) improve the quality and consistency of long-term care services in Wisconsin.

PROCESS OVERVIEW

Structure

(See Appendix A)

Planning Consultants

University of Wisconsin-Madison, Office of Quality Improvement

Pre-planning for the strategic planning initiative began in late 2004. Pathways began by studying large-scale institutional planning processes to find one that would fit its needs. Pathways also researched consultants in Wisconsin who could facilitate the process. The combination of the streamlined strategic planning process and excellent consulting services of the UW-Madison's Office of Quality Improvement (OQI) matched the needs of the Pathways planning process. Pathways' partnership between the Department of Health and Family Services and the Waisman Center allowed a contract with the OQI for strategic planning technical assistance. (See Appendix B: OQI Strategic Planning Model)

Council on Workforce Investment

The Council on Workforce Investment (CWI) is Wisconsin's Governor-appointed Workforce Investment Board and comprises leaders in education, business, and government. The vision of the CWI is:

“To ensure qualified workers for quality jobs, Wisconsin’s effective, agile workforce investment system supports career ladder opportunities and prepares a highly educated, skilled, motivated workforce for a vibrant, globally competitive economy and an exceptional quality of life for all citizens.”

In January 2005, the CWI Executive Committee established a subcommittee to serve as the advisory body for all MIG activities. The CWI-MIG Subcommittee is chaired by State Representative Josh Zepnick (D-Milwaukee) and includes members of the broader CWI as well as others selected for their knowledge and experience in the disability and employment arenas. The Subcommittee structure promotes collaboration between DHFS and the Department of Workforce Development (DWD), which staffs the broader CWI. In 2006, the CWI-MIG Subcommittee membership will be expanded to reflect the strategic priorities of the Pathways Plan. (See Appendix C: CWI-MIG Subcommittee Member List)

Strategic Planning Design Team

The Strategic Planning Design Team is a group of stakeholders who designed the strategic plan by incorporating stakeholder feedback and other data, in order to develop strategic priorities and action steps of the Pathways plan. The Design Team met monthly from May to December 2005 and completed regular “homework” outside of meeting time. Several of the Design Team members are members of the CWI-MIG Subcommittee. Others were selected for their expertise in the areas of disability, education, and employment.

The Design Team membership included the following:

- A private practice attorney specializing in Social Security Administration (SSA) issues
- A director of personal care services for a community service provider
- A case manager for a community service provider's supportive apartment program
- A member of Wisconsin Manufacturers and Commerce
- State and University staff members
- A State Representative
- A staff member of Wisconsin Association of School Boards
- Members of Workforce Development Boards

In 2006, the Design Team members will be invited to join the CWI-MIG Subcommittee in order to monitor and facilitate progress of the strategic plan. (See Appendix D: Design Team Member List)

Information Gathering

(See Appendix F: Strategic Planning Timeline)

Analysis of Existing State Plans

The strategic planning process began with an analysis of existing state plans. The result was a comparison of the objectives of Wisconsin's State Councils. (See Appendix G: Comparison of State Plans.) Wisconsin state statutes identify six councils representing people with specific disabilities. These statutory councils are:

- Council for the Deaf and Hard of Hearing
- Council on Blindness
- State Council on Alcohol and Other Drug Abuse
- Wisconsin Council on Developmental Disabilities
- Wisconsin Council on Mental Health
- Wisconsin Council on Physical Disabilities

In addition, the Governor's Committee for People with Disabilities, created by Executive Order of the Governor, includes representation from each of the six statutory councils. Title 1 of the Federal Rehabilitation Act and two Governor's executive orders provide for two additional councils, the Wisconsin State Independent Living Council and the Wisconsin Rehabilitation Council. Both include representation of people with disabilities. In the fall of 2005, the Assistive Technology Advisory Council was established to advise the development of programs related to assistive technology in Wisconsin.

Findings

Individually, Wisconsin's councils have identified common barriers for people with disabilities and have identified goals and objectives or established work plan priorities to improve employment opportunities for people with disabilities. Key barriers identified across planning efforts include

- Fear of loss of health and long-term support coverage
- Lack of a cohesive, support/care system that provides incentives to work and coordinates programs and activities in all 72 counties
- Lack of affordable and accessible transportation options, especially in rural areas
- Difficulty locating, obtaining, and maintaining employment
- Lack of access to assistive technology services and devices
- Lack of accessible and affordable housing
- Lack of knowledge about civil rights protections and responsibilities

Pathways Planning Questionnaire

The Pathways Planning Questionnaire was designed to gather broad baseline information from stakeholders. The qualitative survey asked five questions and gathered some basic demographic information. The survey questions were as follows:

- What do you think are three ways to improve the system for people with disabilities who want to obtain and maintain employment?
- What do you think are three ways to encourage employers in the state to hire people with disabilities?
- What existing practices or policies in the state are working well in supporting people with disabilities in obtaining and maintaining employment?
- Beyond existing practices or policies in the state, what innovations do you think could work well in supporting people with disabilities in obtaining and maintaining employment?
- For a plan to be successful in achieving the desired outcomes, in your opinion, what does it have to include or address?

The survey was received by an estimated 1000 Wisconsin stakeholders, including:

- Persons with disabilities
- Employers
- Members of Governor's Councils
- Service providers
- Educators
- Advocacy groups
- State, County and University staff
- Worker's Compensation carriers
- Veterans groups

The Pathways team developed the questionnaire distribution list by including all current partners, workgroup members, and State Council members. The online version of the Pathways Planning Questionnaire was designed and housed on the Wisconsin Health Alert Network website. The questionnaire received more than 600 hits. Recipients were also given the option to respond via e-mail, fax, or post. The total response was approximately 250 completed surveys. Pathways contracted with an external consulting firm (Virchow, Krause, and Company, LLP) to assure a complete, objective analysis of survey responses. (See Appendix H: Planning Questionnaire and Selected Results)

Findings

As shown in Figure 1, the largest category of survey respondents was state agency staff (41.6 percent), although a significant percentage of respondents described themselves as being rehabilitation specialists, persons with a disability, or social service providers. A relatively small percentage—7.8 percent—of survey respondents were employers. The survey demographic categories were not mutually exclusive, and many respondents identified themselves in multiple categories.

Figure 1		
Survey Respondent Demographic Information		
Category	Respondents	Pct.
State Agency Staff	102	41.6%
Rehabilitation Specialist	87	35.5%
Person with a Disability	71	29.0%
Social Service Provider	61	24.9%
Family Member	53	21.6%
Professional Advocate	52	21.2%
Health Care Professional	20	8.2%
Employer	19	7.8%
Benefits Counselor	19	7.8%
Caregiver	17	6.9%
State Council Member	17	6.9%
Peer Advocate	16	6.5%
Veteran	9	3.7%
University Staff	9	3.7%
Insurance Provider	1	0.4%
Note: Percentage does not equal 100.0% because survey respondents were able to select multiple categories		

When considered as a group, the respondents' most commonly-cited improvement or approach to enhance employment for people with disabilities is to focus greater efforts on employers. As shown in Figure 2, survey respondents also cited the need to reduce waiting lists for employment support services (24.1 percent), improve transportation (20.8 percent), revise Social Security Administration (SSA) income thresholds to allow greater earnings without loss of benefits (20.0 percent), and allow continued health insurance coverage after employment (19.6 percent). When considered together, revising SSA income thresholds and continuation of medical benefits were the single most commonly-cited step to enhancing employment of people with disabilities.¹⁰

¹⁰ The DHFS Office responsible for development of the Pathways Plan also administers elements of the state's Medicaid Purchase Plan (MAPP), particularly its evaluation and policies, as well as design, implementation and evaluation of an SSA funded project, the SSDI Cash Benefit Offset Pilot. The single state unit responsibility for the Plan, the Medicaid buy-in and the SSDI pilot is unique and advantageous.

Figure 2
Top Ten Suggested Improvements to Enhance Employability of People with Disabilities
All Survey Respondents, n=245

Description	Responses	
	Total	Pct.
Recruit/educate/provide incentives to employers	71	29.0%
Eliminate waiting lists/increase funding/more resources to DVR	59	24.1%
Improve transportation options	51	20.8%
Revise SSA rules/Benefit income thresholds/continue benefits after employment	49	20.0%
Continuation of medical benefits	48	19.6%
Improve communication to consumers/benefits counseling	45	18.4%
Improve training for consumers	43	17.6%
Focus on wrap-around service delivery/improved interagency coordination/Job Centers	35	14.3%
Improve consumer screening for employment/person-centered planning	30	12.2%
Reduce bureaucracy/red tape	30	12.2%

Note: Excludes five surveys with blank responses.

When the responses of people with disabilities were considered separately, while the top five priorities were the same, the relative rank of each priority was re-ordered, as shown in Figure 3. The new ranking (from highest to lowest) was continuation of medical benefits (28.6 percent), improve transportation (24.3 percent), and revise SSA income thresholds (22.9 percent). Recruiting employers and eliminating waiting lists, while frequently cited by survey respondents with disabilities, were mentioned less frequently than the concerns of lost benefit income and medical benefits, and improving the availability of transportation.

Figure 3
Top Ten Suggested Improvements to Enhance Employability of People with Disabilities
Persons with Disabilities, n=70

Description	Responses	
	Total	Pct.
Continuation of medical benefits	20	28.6%
Improve transportation options	17	24.3%
Revise SSA/Benefit income thresholds/continue benefits after employment	16	22.9%
Recruit/educate/provide incentives to employers	16	22.9%
Eliminate waiting lists/increase funding/more resources to DVR	13	18.6%
Reduce bureaucracy/red tape	12	17.1%
Improve training for consumers	11	15.7%
Improve communication to consumers/benefits counseling	10	14.3%
Focus on wrap-around service delivery/improved interagency coordination/Job Centers	10	14.3%
Improve staff training/staff quality	8	11.4%

As noted above, survey respondents placed consistent emphasis on the role of the employer. However, only 19 survey respondents identified themselves as employers. Although many survey respondents placed a high priority on providing increased financial incentives to prospective employers, most of the 19 employers who responded to the survey did not identify financial incentives as being a key element of a successful plan. Rather, employers tended to mention the need for

- a shared vision or consciousness among employers, agencies, and people with disabilities
- increased information, communication, and improved interagency relationships—between employers, state and county agencies, and between employers, agencies, and service providers—in order to better match candidates with suitable jobs

- more funding for support and employment programs run by both the state and local agencies, including training for people with disabilities wishing to improve their job skills
- better health insurance options for people with disabilities
- improved management information and outcome measures to identify effective strategies and allow more focused use of resources

Community Listening Sessions

Pathways conducted community listening sessions in six cities throughout the state of Wisconsin. Five of those cities—Rice Lake, Ashland, Prairie du Chien, Shawano, and Wisconsin Rapids—ranged in population size from approximately 6,000 to 15,000 people. The sixth city, Milwaukee, has a population of 590,000. The cities were selected based on demographics, location, and recommendations from DHFS and DWD regional staff and the Design Team. Milwaukee was chosen because it has needs that are different from the rest of the state. Otherwise, the focus was on smaller cities that may not typically be included in statewide planning processes. Mailing lists were compiled from regional staff members, Chambers of Commerce, United Way chapters and general internet searches. The invitations had a broad distribution, targeted to anyone who

- lives or works in target cities
- is a person with a disability, an employer, worker, community leader, service provider, elected official, veteran, caregiver, educator, student, health care provider
- works with a business, non-profit organization, school, insurance company, civic organization, government agency, church, Chamber of Commerce, health care organization

Four questions were asked at each listening session:

- What is currently working well for both employers and potential employees in terms of access and services?
- What are the greatest barriers facing people with disabilities regarding accessing employment opportunities and being able to fulfill expectations on the job?
- What incentives work or would work to most influence employers to hire more people with disabilities?
- If this grant could only accomplish one thing over the next four years, what should that be?

(See Appendix I: Community Listening Session Notes and County Profiles.)

Findings

Listening session participation ranged from 12 to 45 community members. The results of the listening sessions were consistent among all of the communities. The following common themes emerged:

- Improve transportation
- Increase local and regional collaboration
- Support and train employers on disability issues, legal issues, and ADA
- Explore options to improve the benefit system and remove disincentives to work
- Revitalize customized employment and job coaching
- Customize services—“one size does not fit all”
- Eliminate waiting lists
- Provide younger students with preparation for the world of work
- Develop community advisory groups
- Expand employment opportunities beyond entry level and minimum wage
- Pilot several communities and do it all
- Create a one-stop, seamless, holistic approach to services
- Design ways to keep people from “falling through the cracks” of the system

County Resource Mapping

In order to provide a more complete profile of each city, an external consulting firm (Virchow, Krause, and Company, LLP) was contracted to gather county-level data on demographics, service provision, and employment to supplement the information gathered in the listening sessions. The community resource mapping project focused on gathering baseline data for programs and activities that support employment opportunities in the six Wisconsin counties that contain the communities selected for listening sessions.

- Ashland County (Ashland)
- Barron County (Rice Lake)
- Crawford County (Prairie du Chien)
- Milwaukee County (Milwaukee)
- Shawano County (Shawano)
- Wood County (Wisconsin Rapids)

The aim of the County Resource Mapping project was to gather information on the following:

- Types of services available to support employment of people with disabilities in each county
- Providers of each type of service available to support employment of people with disabilities in each community
- The number of persons provided each service in support of employment in each community
- Expenditures for providing each service in support of employment for people with disabilities
- The number of persons on waiting lists

- The length of time consumers wait for services
- County demographic information specifically related to employment

Where possible, the information gathered was compiled by the following categories of disability:

- Developmental disabilities
- Physical disabilities
- Sensory disabilities (e.g., people who are blind or deaf)
- Chronic mental illness or severe emotional disturbances, excluding Alzheimer's, senility, and substance abuse
- Brain injuries, excluding strokes or vascular injuries after age 22

Findings

- **Inconsistent Data**

A primary finding of the resource mapping project is that data are not readily available at the state or county level to comprehensively summarize employment services for people with disabilities in each of the six counties. The county agencies included in this project advised that their access to the baseline information requested for the project is limited and that their agencies are focused on providing services directly rather than managing data related to those services. While the Wisconsin Department of Health and Family Services (DHFS) collects information from counties related to employment and other services for people with disabilities, DHFS reports that data are not reported in a consistent manner by counties, thus making comparisons between counties and other basic analysis unreliable or impossible.

- **Varying Level of Services**

The services to support employment that are available to people with disabilities vary by county. Transportation and supported employment are most commonly available in the six counties. Overall, services include:

- Communication
- Day Services
- Group Homes and Adult Family Homes
- Job Coaching
- Prevocational and Vocational Services
- Sheltered Work Programs and Workshops
- Supported Employment
- Supportive Home Care
- Supportive Living
- Transitional Work Training
- Transportation
- Work Sites

- **Higher Unemployment**
The unemployment rate for counties as a whole ranges from 5.7% to 8.4%, while the estimated unemployment rate for people with disabilities in each county is significantly greater, ranging from 36% to 94%.
- **Inaccessible Transportation**
A lack of access to transportation was identified by most counties as a major obstacle to employment for people with disabilities. Based on the data provided by counties, it appears that transportation is most needed in rural areas.
- **Concerns Regarding Wait Lists**
Wait list information was not available in a consistent format from each county in the resource mapping project; therefore, it is not possible to make direct comparisons between the wait lists of each county by service or disability type. Overall, wait lists range from 9 consumers to 172 consumers. Although estimates for the wait duration were not available from all counties, consumers are anticipated to wait 2-15 years for services, based on available information.

Environmental Scan

The environmental scan was designed to provide an inventory of state-run programs that are focused on employment for people with disabilities. These programs are housed in the Wisconsin State Departments of:

- Health and Family Services
- Commerce
- Revenue
- Workforce Development
- Public Instruction
- Veterans Affairs

Conducted by Virchow, Krause, and Company, LLC, the environmental scan includes a summary of targeted programs by funding source, program type, target population served, and lead agency. The summary includes visual representations of the data, resulting in a map of the system of state-run services focused on the employment of people with disabilities. The environmental scan also includes an analysis of overall service provision and resources. (See Appendix J for results of the environmental scan.)

Findings

Wisconsin state agencies fund a wide range of programs and services that support employment for people with disabilities. However, these programs are not, as a rule, coordinated in their approach to serving consumers. There is potential for collaboration among services provided both by multiple state agencies and also by multiple programs within individual agencies.

As an example, three significant state agency programs—DHFS’ Family Care, DWD’s Wagner Peyser (also known as Job Service), and the Division of Vocational Rehabilitation (DVR)—

provide funding for similar categories of services that either directly or indirectly support employment opportunities for people with disabilities. Specifically, all three programs fund

- Job coaching
- Physical rehabilitation
- Transportation
- Vocational training

In all, there are thirteen categories of employment support services are funded by more than one state agency or program. For example, five programs in Commerce, one each in DHFS, DVA, and in DWD fund housing services. In addition, eight programs in two agencies (DHFS and DWD) fund transportation services.

There may be opportunities among these service categories to improve outcomes for people with disabilities by increasing coordination and communication with their counterparts in other programs and agencies. For example, coordination efforts currently exist between staff in the DPI Transitions Program, which provides employment planning and services for students with disabilities in Wisconsin's public schools, and DWD DVR, which is the primary state agency for providing employment opportunities for adults with disabilities.

The following chart shows the thirteen service categories where opportunities for collaboration emerge:

	DHFS	DWD	DVA	DoC	DPI
Accessibility accommodations	Family Care	Vocational Rehabilitation (VR)			
Benefits and case management		Wagner Peyser, VR			
Benefits counseling		Wagner Peyser, VR			
Employment assessment and planning		Wagner Peyser, Job Center/WIA programs			Transitions
Housing	Family Care	Wagner Peyser	Veterans Assistance Program	Homeless Programs, Local Housing Organization Grants, Housing Cost Reduction Initiative, CDBG, HOME	
Job coaching	Family Care	Wagner-Peyser,			

		VR			
On the job training	DHFS Senior Employment	Wagner Peyser, VR			
Personal assistance services	Family Care	VR			
Physical rehabilitation services	Family Care	Wagner-Peyser, VR			
Small business loans or grants				Entrepreneurial Training Grants, Dairy 2020, Early Planning Grant	
Training and education		Wagner Peyser, VR			
Transportation	Community Aids-funded programs, Family Care	Wagner-Peyser, VR			
Vocational Training/Retraining	Family Care	Wagner-Peyser, VR			

Employer Training Needs Survey

The Employer Training Needs Survey was a joint effort of Pathways, the Department of Workforce Development and Stout Vocational Rehabilitation Institute. Distributed through the Society for Human Resource Managers, the survey asks employers to rate their level of interest in areas of training related to the employment of people with disabilities. The survey also gathers information on employers’ preferred format for trainings and information dissemination. (See Appendix K for preliminary survey results)

Findings

Initial analysis includes 62 completed surveys, in which most respondents identified themselves as human resource managers. In preliminary findings, respondents indicated that they were most likely to attend training focusing on “alternative hiring methods to expand your applicant base.”

Survey respondents also indicated that they would be likely to attend trainings on the following topics:

- Projected workforce demographics (age, gender, disability) and how this will impact business in the future
- Best practices-what is working in other locations
- Fair and inclusive hiring practices
- Accessible advertising and job application processes

- Diversifying your workplace-recruitment resources and tools
- Resources specific to recruitment, hiring, managing, and dismissing employees
- Addressing communication barriers (i.e. non-English speaking, hearing impaired, etc.)
- Wisconsin Fair Employment Law
- Implementation of the Family Medical Leave Act and demonstrated cases of compliance
- Implementation of the Americans with Disabilities Act (ADA) and demonstrated cases of ADA compliance
- Understanding the relationship between ADA, EEOC, and Wisconsin Fair Employment laws
- Creating and revising employee handbooks, company policies, and job descriptions to comply with ADA
- Worker's compensation, loss control, and return to work issues
- Low or no cost ergonomic applications
- Ergonomics and accommodations that reduce injuries and increase productivity for all workers
- Common accommodations for differing disabilities

STRATEGIC PLAN

The Strategic Plan Design Team developed strategic priorities, based on the information gathered and their own expertise. Each of these strategic priorities represents a key component of a comprehensive employment system for people with disabilities. The Design Team also developed action steps for each priority. Pathways then collaborated with partner agencies to develop specific workplans for implementing the action steps.

The Pathways Strategic Plan is designed for a six-year timeline, achieving the vision in 2012. Action steps are designed for a one-year timeline. Current action steps will be conducted in 2006. They will be examined and revised annually to assure that they effectively address the strategic priorities. It is expected that action steps will evolve to reflect the changing system.

KEY COMPONENTS OF THE STRATEGIC PRIORITIES AND ACTION STEPS

Incremental systems change

Throughout the strategic planning process, stakeholders were engaged in discussions about what they would like to see happen in the systems which impact employment for people with disabilities. Stakeholders' visions for high-level systems change are reflected in the plan's six strategic priorities. The resulting challenge was to design systems change through action steps and projects, metered into reasonable activities and expectations for each year. Some of these action steps embark on new focus areas for Wisconsin and will require careful planning in 2006 to assure that they are effectively implemented in subsequent years.

Collaboration and transparency

Wisconsin's strategic planning process confirmed that there are abundant opportunities for collaboration among local, regional, and state agencies. Collaboration is critical for the strategic plan to be successful in achieving lasting systems change. Linking programs will create economies of scale and allow a streamlining of services. New collaborations will also promote transparency among stakeholders and a strong marketplace of ideas. The strategic plan outlines the dozens of partners who have committed to working together to achieve success. (See Appendix L: Ongoing Strategic Partnerships and Collaborations)

Local solutions

Wisconsin's stakeholders stress that there is nothing more local than employment. Communities and regions must identify particular demographic, economic, and cultural needs and develop customized local solutions. Wisconsin is regionally diverse, with an urban southeast quadrant, rural and agricultural southwest and central quadrants and a rural northern quadrant that depends on tourism as the major source of income and jobs. The north is home to the majority of Wisconsin's Native American population and the southeast is home to most of its minority populations. Nearly all of state government is in Madison and Milwaukee.

Barriers to employment vary by region. Regional designs and implementation will reflect these differences, consistent with the Governor's Grow Wisconsin plan.

Leadership

Long-term leadership will be provided by the Governor through his Grow Wisconsin plan. This comprehensive economic development effort will incorporate the Pathways Plan as a distinct initiative. The Governor carries out major activities of his plan by directing priorities and actions of the many state executive agencies. Other elements of Grow Wisconsin are carried out through the Council for Workforce Investment (CWI).

The CWI-MIG Subcommittee provides guidance to the Wisconsin Medicaid Infrastructure Grant and in the implementation of the Pathways Strategic Plan. The CWI provides a stable organizational entity that is dedicated to the overarching goal of statewide workforce development. The CWI is composed of high-level departmental executives, university faculty, and business and community leaders. This combination of expertise, leadership, access to financial resources, program planning activities and outcome measurement capacity in combination with the Governor's public linkage to Grow Wisconsin provides the ideal organizational home for the Pathways Plan.

Sustainability

Sustainability of the Pathways Plan is assured through its inclusion in the Grow Wisconsin initiative and its involvement with the state's Long-Term Care Redesign plan and the Governor's Councils and Committees. Wisconsin has made a commitment to ensuring that community integration of people with disabilities commensurate to that enjoyed by people without disabilities. This level of integration requires full access to employment, ability to build and maintain wealth, and guaranteed access to healthcare.

The Pathways Plan focuses on developing collaborations among the local, state and federal agencies that affect the employment and long-term supports of people with disabilities. Collaborations are established through the tactical approaches of the action steps, which are designed to develop capacity and ensure sustainability after grant funding.

The action steps will:

- build capacity or develop effective and accepted "best practices" fundamental to plan acceptance and achievement
- heighten awareness of disability employment issues, establish means of communication between, or develop consensus among, stakeholders
- build on or leverage resources from the state's diverse array of ongoing disability employment projects and programs and foster collaboration in achieving the plan's goals
- through demonstration and evaluation, instill confidence in the policy and practice directions envisioned in the plan
- promote efficiency and cost-effectiveness

Upon successful implementation, the Pathways Plan will be ingrained into the policies, practices and procedures of the major elements of the long-term care, workforce development and public educational systems.

STRATEGIC PRIORITIES

At the completion of the Pathways to Independence strategic plan implementation, Wisconsin will be the standard by which other states are measured in regards to:

1. Support for the principles of universal design and the creation and use of assistive technologies to enhance independence and productivity for people with disabilities.
2. The number of exceptionally prepared and qualified employees available for the workforce of the 21st century through the development and implementation of a seamless system of education and training for students with disabilities at all levels, from pre-kindergarten to post-secondary education.
3. A system of unprecedented collaboration among all service providers, with a person-centered focus and a specific plan for a unified system which serves both employers and people with disabilities, resulting in a more productive work environment.
4. The extent to which employers, policymakers, insurers and people with disabilities are actively and effectively engaged in increasing access to long-term care and other benefits for employees.
5. The creation and provision of effective and practical technical assistance and accessible, on-going supports for employers who intentionally and successfully employ and accommodate people with disabilities.
6. The level to which employers and the public are informed and educated about the contributions of people with disabilities, their economic potential and positive impact on the labor force.

Strategic Priority 1: Support for the principles of universal design and the creation and use of assistive technologies to enhance independence and productivity for people with disabilities.

Issues:

Successful integration into the community or workplace depends upon having unimpeded access to places, information, and communications. Wisconsin's stakeholders agree that a key component to successful employment is the use of technologies that diminish the limitations imposed by disability. Wisconsin's current allocation of resources is not sufficient to provide these technologies to all who could use them. Users of assistive technology (AT) also face problems with maintenance and repair of their devices, which often leads to missed work or decreased productivity.

While assistive technologies improve access at the personal level, general barriers continue to exist for people with disabilities. People in Wisconsin often face impeded access to buildings, transportation, communications, and information, which may not be alleviated by assistive technologies alone. Public policy must include planning for full inclusion.

Actions:

- **Build state capacity to assure access to procurement, maintenance, and repair of appropriate assistive technology.** Wisconsin’s leaders in assistive technology will continue a collaborative effort begun in 2004, to identify more efficient and appropriate service delivery models in the areas of assessment, access, acquisition, operation, repair and maintenance.
- **Integrate with the new state Assistive Technology Plan, involving businesses and consumers early in the development of assistive technologies.** In accordance with the federal Assistive Technology Act, Wisconsin’s Assistive Technology Plan outlines strategies for increasing access and acquisition of assistive technology in the state. The Pathways Plan action steps will be implemented in conjunction with the state AT Plan to develop a comprehensive system.
- **Develop strategies for supporting the principles of universal design.** Wisconsin will create a task force on universal design—a framework for the design of places, things, information, communications, and policy that focuses on the user, on the widest range of people operating in the widest range of situations without special or separate design. The task force will determine ways to apply these principles to a myriad of activities throughout the state, including education and community planning.

Partners:

Council for Workforce Investment
Department of Health and Family Services, Bureau of Fee-for-Service Health Care
Benefits and Office of Independence and Employment
Durable medical equipment suppliers
People with disabilities
Physical and occupational therapists
University of Wisconsin- Madison Center for Rehabilitation Engineering and Assistive
Technology (CREATE)
University of Wisconsin- Stout Vocational Rehabilitation Institute
Wisconsin Assistive Technology Advisory Council
Wisconsin Independent Living Centers
WisTech program

Strategic Priority 2: The number of exceptionally prepared and qualified employees available for the workforce of the 21st century through the development and implementation of a seamless system of education and training for students with disabilities at all levels, from pre-kindergarten to post-secondary education.

Issues: Wisconsin stakeholders consistently emphasize the importance of education in preparing students with disabilities for the world of work. Students with disabilities are not consistently exposed to the same work and life experiences as their peers. School-based programs are primary means of providing those experiences. Participants in the Community Listening Sessions indicated that employment preparation programs are critical for middle and high school students. They also stressed that younger students benefit from an early focus on employment and older students often need post-secondary level employment training programs to prepare for work. Stakeholders believe that preparing all students at all levels for employment reinforces the principle that everyone is able to contribute to the workforce. Education and children's long-term care reform are central themes of Grow Wisconsin.

Actions:

- **Engage Wisconsin's PK-16 Leadership Council in a dialogue on the Council's activities concerning students with disabilities.** The Wisconsin PK-16 Leadership Council's mission is to foster collaboration among the four sectors of education and to partner with business, industry and government to enhance learning and learning opportunities throughout the state so that all students are prepared to live in and contribute to a vibrant 21st Century society. This voluntary initiative includes leaders of Wisconsin's state government, state agencies, education sectors, professional associations, as well as business and industry. Pathways will seek collaboration with the Council in order to enhance ongoing activities and develop new ways to support student with disabilities.
- **Inventory and assess community and collaborative partnerships focused on preparing students with disabilities for work.** Wisconsin has many local and regional educational entities that work within communities to enhance education for students with disabilities. An examination of these partnerships will identify promising practices and additional opportunities for cooperation.
- **Develop models of support for students in transition from school to work.** Wisconsin will research and design effective means of providing students with disabilities the information and supports needed to make decisions about their futures after high school and to prepare for the transition to employment or post-secondary education. Topic areas include employment and educational options, the Individual Education Program (IEP) process and rights, person-centered planning, self-determination, self-advocacy and benefits counseling.

Partners:

Cooperative Educational Service Agencies (CESA)
Community-based Benefits Counseling Service Providers
Department of Health and Family Services-MIG staff

Department of Workforce Development, Division of Vocational Rehabilitation
Family Assistance Center for Education, Training, and Support (FACETS)
Independent Living Centers, Center for Independent Living-Western Wisconsin and
Options for Independent Living
School Districts
Social Security Administration
Statewide Transition Workgroup
University of Wisconsin-Madison-Waisman Center
UW-Madison Departments of Rehabilitation Psychology and Special Education
Wisconsin Association of School Boards
Wisconsin Council on Developmental Disabilities
Wisconsin Department of Public Instruction
Wisconsin Disability Benefits Network

Strategic Priority 3: A system of unprecedented collaboration among all service providers, with a person-centered focus and a specific plan for a unified system which serves both employers and people with disabilities, resulting in a more productive work environment.

Issues: People with disabilities often rely on an array of services to maintain successful employment. These services include transportation, personal assistance, benefits counseling and job coaching. Stakeholders have indicated that the current system of service providers is frequently fragmented and difficult to navigate.

Community Listening Session participants overwhelmingly cited transportation as one of the greatest barriers facing people with disabilities who seek to work. Further research of the services in each county indicated that while transportation services are available for each targeted community, the programs often do not meet the needs of those who require transportation to work. For example, transportation may only be available within city or county limits and not to those who live in rural areas or who work outside of their local jurisdictions. Respondents to the Pathways Planning Questionnaire echoed this sentiment. The top ten suggested improvements to enhance the employment of people with disabilities included “improve transportation options” and “improve interagency coordination.”

The problems with transportation services reflect the general issues surrounding services to people with disabilities. Quite often, services are available, but are unable to meet all of the particular needs of the people in a specific area. People often are placed on wait lists for months or years. Research suggests that increased collaboration among local, county, state and federal programs providing services would streamline services and be cost effective.

Stakeholders also stress that services should be designed to meet an individual’s specific needs and should include whatever is necessary for that person to meet his or her goals. This ‘person-centered’ approach ranks as one of the top ten suggested improvements from respondents to the Pathways Planning Questionnaire.

Actions:

- **Through regional employment initiatives, develop partnerships among established local, county, state, and federal programs.** Wisconsin will develop multi-stakeholder coalitions in each of five regions of the state. Regional coalitions will build upon existing partnerships and develop region-specific models to maximize employment for people with disabilities. This approach will enhance collaboration among stakeholders and will develop solutions that are customized to the particular demographic, economic, and cultural needs of the region. The regional framework will also establish a new infrastructure for the replication of best practices and effective models of service delivery. Wisconsin will also continue to examine relevant state agency programs to determine opportunities for collaboration.

The Pathways Plan will partner with Grow Wisconsin and the Long-Term Care Redesign initiatives across the state to develop these progressive regional initiatives. This will align the workforce development and long-term care redesign initiatives to eliminate barriers to employment for people with disabilities and to promote personal choice, financial independence and economic development.

- **Enhance the Wisconsin Disability Benefit Network's (WDBN) ability to effectively promote and disseminate high quality information, training and technical assistance specific to work incentives, employment and public benefit programs.** The WDBN is a statewide system that provides direct assistance to benefits counseling practitioners and seeks ways to reach out to and better serve people with disabilities, their supporters, and professional service providers in Wisconsin.
- **Build organizational capacity for person-centered planning and consumer-directed supports through training, technical assistance and staff dedicated to systems change efforts.** Wisconsin will facilitate collaboration among the state's capitated long-term care services, Comprehensive Systems Change Grant, waiver programs, DVR and other vocational providers. Wisconsin will create funding arrangements and organizational practices that offer people with disabilities one seamless, person-centered process that builds natural community supports and includes 'whatever it takes' to reach the person's employment goals.
- **Innovate effective, replicable best practices and models of service delivery.** Wisconsin will develop, implement, and evaluate new models of transportation, disability-specific career planning, self-directed supports and person-centered planning. These models will emphasize the development of capacity at the local level. Wisconsin will also support selected communities in creating comprehensive development plans aimed at increasing the inclusion and employment of people with disabilities.

Partners:

Area Agencies on Aging

Grassroots Empowerment Project personnel and sites: PIE, Gathering Place, Cornucopia Independent Living Centers, Center for Independent Living—Western Wisconsin and

North Country Independent Living Center
Real Choices Grant Team
Wisconsin communities
Wisconsin Comprehensive Systems Change Grant team
Wisconsin Counties
Wisconsin Department of Transportation
Wisconsin Departments of: Public Instruction, Workforce Development, Health and
Family Services, Commerce, Administration, Corrections, Transportation and
Agriculture

Strategic Priority 4: The extent to which employers, policymakers, insurers and people with disabilities are actively and effectively engaged in increasing access to long-term care and other benefits for employees.

Issues: Successful employment depends on reliable healthcare. Respondents to the Pathways Planning Questionnaire indicated that the continuation of medical benefits is one of the most important factors in obtaining and maintaining employment. When the responses of people with disabilities were considered separately, the continuation of medical benefits was the most frequent response. Stakeholders are concerned with how their eligibility for health and long term care programs is affected by life changes, such as marriage, retirement, increased savings, moving to another county or state, an increase in unearned income or a change in the ability to work due to health or lay-off.

Under present benefit policies, many people with disabilities, particularly Social Security Disability Insurance (SSDI) beneficiaries, receive negative net income returns to earnings. In addition, people who earn over 250% of the federal poverty level are ineligible for MAPP. Former MAPP participants are ineligible for Medicaid if they wish to retain their savings.

Federal entitlement programs provide states with the opportunity to develop new policies to ensure that people with disabilities who wish to work are able to maintain eligibility for health and long-term care services. State policy makers will require low-cost or cost-neutral proposals to address these issues. It will require broad stakeholder collaboration, expert understanding of the rules and policies, and political support to fully develop and implement desired changes to support work and self-sufficiency.

Actions:

- **Research new options for maintaining health insurance and long term care services throughout the employment spectrum.** Wisconsin will develop, evaluate and advocate innovative options that allow people to maintain their needed benefits. These options will be effective and low-cost or cost-neutral.
- **Consider alternative policies for the Medicaid Purchase Plan (MAPP)** Stakeholders agree that Wisconsin's Medicaid Purchase Plan (MAPP) is a successful addition to the array

of health and long-term care options in the state. Wisconsin will continue to evaluate the effectiveness and impact of MAPP. Information gathered will be used to address emerging policy issues and to study the effects of any changes made to the program.

- **Engage employers and insurance companies in a dialogue on issues around providing health insurance and long-term care to employees with disabilities.** Wisconsin will encourage public/private collaborations that build on the state's Family Care experience and momentum.

Partners:

Centers for Medicare and Medicaid Services

Department of Health and Family Services: Office for the Deaf and Hard of Hearing, Bureau of Aging and Disability Resources, Bureau of Mental Health and Substance Abuse Services, Division of Health Care Financing, Office of Strategic Finance

Medicare Workgroup

National Consortium for Health Systems Development (NCHSD)

Social Security Administration

Wisconsin Disability Benefit Network

Wisconsin Coalition for Advocacy

Strategic Priority 5: The creation and provision of effective and practical technical assistance and accessible, on-going supports for employers who intentionally and successfully employ and accommodate people with disabilities.

Issues: When asked how to improve the system for people with disabilities who want to obtain and maintain employment, the most frequent responses to the Pathways Planning Questionnaire centered on recruiting, educating, and providing incentives to employers.

Respondents cited a variety of methods and techniques to increase employers' willingness and ability to hire and retain people with disabilities, including:

- Increased education and communication of benefits of hiring people with disabilities, such as the federal Work Opportunity Tax Credit
- Increased incentives for employers to hire people with disabilities
- Greater efforts to recruit employers, such as increased face-to-face contact with employers or other marketing strategies.

This emphasis was echoed at the community listening sessions and in discussion among the CWI-MIG Subcommittee and Design Team members.

Actions:

- **Develop a model of technical assistance and ongoing customized support for employers.** Wisconsin will create a comprehensive resource center for employers seeking information on hiring and accommodating employees with disabilities. The employer resource center will

provide statewide training and technical assistance, as well as targeted regional approaches to allow for local differences and needs.

- **Design effective outreach and education programs for employers.** Following the findings from the Pathways Planning Questionnaire and the Employer Training Needs Survey, Wisconsin will create programs to encourage employers to hire people with disabilities.
- **Create and implement targeted programs to encourage employers to hire people with specific disabilities.** Wisconsin will commence with employer outreach programs centered on hiring people with mental illness and people who are deaf or hard of hearing.
- **Develop an attitudinal survey to determine pre- and post- interaction attitudes of employers.** In order to evaluate the effectiveness of employer outreach, training, and technical assistance programs, Wisconsin will develop a survey to assess changes in attitudes of participating employers.

Partners:

Brain Injury Association of America

Department of Health and Family Services: Office of Independence and Employment,
Office for the Deaf and Hard of Hearing and Office for the Blind and
Visually Impaired

Department of Workforce Development: Division of Workforce Solutions and Division
of Vocational Rehabilitation

National Association of State Head Injury Administrators-Technical Assistance Center
Rehab for Wisconsin, Inc.

Society of Human Resource Managers

University of Wisconsin- Stout Vocational Rehabilitation Institute

Wisconsin Technical College System

Wisconsin Brain Injury Advisory Council

Wisconsin Department of Commerce

Wisconsin Department of Revenue

Wisconsin Manufacturers and Commerce

Wisconsin Workforce Development Areas

Strategic Priority 6: The level to which employers and the public are informed and educated about the contributions of people with disabilities, their economic potential and positive impact on the labor force.

Issues: Stakeholders often cite “societal attitudes” as a barrier to employment for people with disabilities. People with disabilities face the public misperception that they are unable or unwilling to work. In order to change this attitude, the public must be exposed to the idea that disability is a natural and expected form of the human condition that brings value, diversity and character to our communities and workplaces.

Actions:

- **Construct a comprehensive communication plan to raise public awareness of the Pathways to Independence strategic priorities, activities, and products.** The Pathways Strategic Plan includes diverse activities and products. To ensure awareness by all audiences, Wisconsin will continue its coordinated effort to release information and products. Consolidating resources and targeting messages to specific audiences will increase public awareness of the strategic priorities and increase the visibility of the Pathways Plan for a comprehensive system of employment for people with disabilities.
- **Build the foundation for a statewide social marketing campaign.** Wisconsin will establish a statewide group to develop marketing techniques to change social attitudes about people with disabilities. The public must learn that people with disabilities are integral parts of their community and have the abilities necessary to participate in many ways, specifically in the workforce. The foundation for this campaign, known as social marketing, requires that the infrastructure, programs and supports are in place to guarantee success for people with disabilities.
- **Establish local dissemination activities targeted to specific populations.** Wisconsin will begin by focusing on MAPP participants and members of the Great Lakes Inter-Tribal Council.
- **Re-engage 2005 listening session communities in a dialogue about the Pathways to Independence strategic plan.** Listening session communities will be asked to provide feedback on the plan and make suggestions for future action steps.

Partners:

Department of Health and Family Services, Tribal Relations Section
Department of Workforce Development: Division of Vocational Rehabilitation and
Division of Workforce Solutions, Disability Navigator program
EcoNorthwest
Great Lakes Inter-Tribal Council
Lac Courte Oreilles Band of Lake Superior Chippewa Vocational Rehabilitation
Oneida Nation Vocational Rehabilitation
Social Security Administration
University of Wisconsin –Extension
Wisconsin Disability Benefits Network
Wisconsin Counties
Wisconsin’s Independent Living Centers

MEASUREMENT

Wisconsin has a commitment to learning from the initiatives implemented and to collecting information that allows for refinement of policies and programs, identification of effective strategies, and contribution to the body of knowledge on employment for people with disabilities. All Pathways initiatives will incorporate a mechanism for information gathering that is scaled to the complexity and maturity of the project. For each initiative, learning efforts will be implemented at one of three levels:

- **Assessment** – Assessment is reserved for initiatives that are too small for formal evaluation, are being implemented for the collection of preliminary information to be used in a later, larger project, or are strictly of administrative interest within Wisconsin. Assessments will generally be limited to the collection of feedback on procedures and stakeholder perceptions. This information will typically be collected by operational staff, although researchers may be consulted during the development of information gathering tools.
- **Evaluation** – Evaluation is conducted for initiatives of greater complexity than assessments, which require a more formalized research design to obtain the information needed to achieve project goals. These goals may include the collection of data for use in making program revisions, measuring outcomes for consumers, and/or identifying best practices. Evaluations will typically involve some degree of collaboration between Pathways Research and Operational Team members. This collaboration will range from researchers serving as consultants in the development of the research design and measurement tools to researchers designing the evaluation and having technical direction over team members implementing evaluation activities. Evaluations should not be considered fully independent of operational activities, but will be conducted with a degree of methodological rigor so as to allow for reasonable confidence in the findings. In most cases, findings will be disseminated to external audiences.
- **Research** – Research is limited to initiatives of a magnitude or complexity that necessitate a sophisticated research design conducted by an independent party to gather meaningful information. Findings obtained through research initiatives will not only be informative for the immediate project, but also be more generally applicable to the field of disability and employment policy. Research will be designed with a high degree of methodological rigor and will be fully implemented by members of the Pathways Research Team. Pathways Operational Team members will not have responsibility for any research activities; however, other aspects of the initiative will be managed by the Operations Team.

Initiatives conducted at the evaluation and research levels of inquiry typically include an examination of outcomes and the processes used to achieve these outcomes. Measured outcomes are specific to the initiative in question and appropriate to the expected reach of the initiative. For example, individual level outcomes may include employment or earnings levels of participants. For initiatives that address an earlier step in the process toward employment, outcomes may focus on changes in behavior expected to be intermediate steps toward employment, such as the level of awareness of work incentives or perceptions of barriers to employment.

Collection of outcomes data will depend on the research design of each initiative. Data is likely to include information from administrative data systems, often coupled with additional data gathered through surveys, focus groups, or interviews. Data may also be used from statewide or national levels sources, such as the American Community Survey, that will provide insight into system-level impacts.

To accomplish the information gathering and learning priorities of the strategic plan initiatives, Wisconsin contracts with a team of researchers through the University of Wisconsin system. Members of this team include researchers with a combined 13 years of experience in evaluating Wisconsin disability and employment initiatives. Additional team members include a research specialist, database manager, and research assistant. Research team members bring knowledge from a variety of social science backgrounds, including political science and public policy, social and organizational psychology, and sociology. In some cases, collegial relationships may be established between the research team and external researchers to conduct collaborative evaluation or research activities. Some evaluation or research activities may also be contracted out to fully independent parties.

OUTCOMES TRACKING SYSTEM

Wisconsin's concept for an outcomes tracking system for the Pathways initiatives involves exploiting systems currently utilized for other purposes within the state. This strategy will allow for the analysis of indicators that are common to large segments of the Wisconsin population as a means of identifying changes that may be associated with Pathways efforts. The Pathways to Independence team views the integration of these indicators into a meaningful system as a task to be addressed in five steps, which will be elaborated below:

1. Defining the population to be measured
2. Identifying the data systems that routinely collect the needed indicators
3. Negotiating agreements to access the identified systems
4. Developing a mechanism for transfer of data draws and management of the integrated data
5. Developing appropriate measures of change

1. **Defining the population to be measured.** Strategic planning efforts in Wisconsin broadly define the target population as persons who do or could meet the Social Security Administration (SSA) level of disability. Within Wisconsin, people who meet that definition include Federal Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI) recipients, State SSI recipients, and people receiving Medicaid for reasons of disability, such as through the Medicaid Buy-In or spend down Medicaid. As the focus is on Medicaid recipients, and a considerable proportion of the people in the groups mentioned above receive Medicaid, the population will be limited initially to people receiving Medicaid for reasons of disability.¹¹

¹¹ In Wisconsin, all SSI recipients, both Federal and State, automatically receive full Medicaid benefits. In addition, a considerable number of SSDI beneficiaries receive Medicaid through the MBI or spend down programs.

Given the further focus on employment, a logical second requirement for inclusion in the outcome population is to be of working age. This range is generally considered to extend from age 18 to the age when an individual is qualified for full retirement benefits, a slightly variable endpoint based on year of birth. While this restriction will quite purposefully exclude labor market participants at the low and high ends of the age spectrum, it will reduce issues of data comparability by making the composition of the target population more homogeneous and matching the population characteristics of the core labor market.

No system-level definition of the population of study will be perfect. It is quite likely that a number of people with no direct or indirect experience with Pathways initiatives will be included in the defined population. Likewise, the defined population deliberately excludes some individuals who are known to be affected by the Pathways initiatives.¹² As a result, there may be reason to reconsider these assumptions as part of the ongoing planning activities or to consider approaches for supplementary outcomes tracking of excluded individuals. The ultimate design goal is to identify a population that will most nearly model the full range of working age persons with disabilities who could potentially benefit from Medicaid Buy-In programs and Pathways initiatives.

2. Identifying the data systems. Due to the added challenges associated with gaining access to Federal databases or aggregating information across often inconsistent local databases, state-level data systems will serve as the primary sources of indicators. While state level systems exist for their own purposes and may not be fully inclusive of the target population as defined, efforts will be made to identify and access the most complete sources of indicators. Additionally, once the nature of all data sources has been determined, decisions may need to be made for combining data with differing collection points and/or durations. Currently, the central elements of the data tracking system are expected to be:

- *Outcomes measures* of employment status and earnings levels from the state's unemployment insurance (UI) reporting system from the Department of Workforce Development (DWD). The UI system does have systematic exclusions, such as self-employment. One possible source of supplemental employment and earnings data is the state's program eligibility system. Pathways will conduct analysis to explore the completeness and reliability of these data.
- *Measures of access* to health care coverage will be obtained from the data warehouse within the Department of Health and Family Services (DHFS). In addition, discussions are being held as to possible sources of health status information. One possible source of this information is the functional screen used to determine initial and ongoing eligibility for a number of Wisconsin-based programs (DHFS). The extent of overlap between the target population and the population that has completed the functional screen has yet to be determined.
- *Program participation measures* of Medicaid participation for reason of disability (DHFS). This will include participation in Medicaid waivers and the MBI. Participation in SSI for reason of disability and/or SSDI will also be obtained or imputed (DHFS).

¹² Notable exclusions include participants in the youth in transition project, most of whom will be younger than age 18 at project enrollment. In addition, as a state with MBI authority under the BBA, approximately 10% of Wisconsin's MBI participants are over the age of 65.

- *Population characteristics* for use in examining subgroups such as age, sex, geographic distribution and other socio-demographic characteristics are available through the DHFS data warehouse. Type of primary disability is also considered to be a characteristic of interest, although a comprehensive source of this information has yet to be determined.

In addition to data collected for the population, *contextual or environmental status data* will be obtained for interpretive purposes. At a minimum, Wisconsin and US unemployment rates (US Department of Labor), Wisconsin rates of 1619 use and income range distributions (SSA), the Wisconsin employment rate for persons with disabilities (American Community Survey, US Census), civilian labor participation rates, and US and possibly Wisconsin economic growth rates are expected to be necessary to aid in interpretation. Finally, a cost of living adjustment will be necessary to standardize monetary values over time.

- 3. Negotiating data agreements.** The Pathways to Independence staff have previously negotiated data exchange agreements with the entities necessary to access the identified indicators. However, new agreements will need to be developed or former agreements will need to be amended to extend data access to the target population.
- 4. Developing a mechanism for data transfer and management.** At present, Wisconsin does not have a system in place to manage information across departments. Intra-department data warehouses do exist, but are not comprehensive enough to meet the needs of the outcomes tracking system. At present, it is anticipated that data will be received by Pathways to Independence staff, and the database to house and manage outcomes tracking data will be maintained by Pathways to Independence staff. Initial modes of data transfer will need to be determined as a part of the data exchange agreements and will be specific to the source of the data. Pathways to Independence staff will explore opportunities for integrating the outcomes tracking database into any larger data warehouses that may arise.
- 5. Developing appropriate measures of change.** Measuring either systemic change or progress toward specific goals requires appropriate measures of change. Changes in raw numbers or even in percentages without consideration of baseline values or poorly conceptualized time periods can lead to inaccurate conclusions. Pathways will explore the most appropriate ways to measure change, including to the extent practicable, adjustment to capture changes in labor market conditions, inflation, and/or environmental factors.

The steps and indicators identified above are primarily focused on the global indicators of economic and health status considered particularly relevant for the target population. While in a general sense these indicators may speak to the progress made toward accomplishment of the priorities identified through the strategic planning process, in a more direct sense, some strategic priorities may require examination of a set of indicators that is not built from data at an individual level. For example, strategic priorities 4 and 5 include change in employer behaviors. Direct measures of progress in these areas would more appropriately be determined by examining outcomes of individual initiatives undertaken to address these priorities or to identify system-level approaches for measuring these goals. Identifying the most effective strategies for providing this level of outcomes-based feedback is part of the dynamic strategic planning process.

WISCONSIN 2012 CASE STUDY 1

An individual (Stacy) with a diagnosis of cerebral palsy and spastic quadriplegia is a sophomore in high school. She wants to work as a computer programmer in the future and live on her own with some supports. Stacy is exploring various program options at the local university, but also wants to know who to talk to if accommodations need to be made, what financial aid is available, and how her attendant care will work if she lives on campus.

Stacy is referred to the regional center in her community and sets up an appointment to speak to someone about questions and concerns. When she arrives she is directed to the service manager who can best meet her specific needs. The service manager will be able to make the necessary connections to services and supports that will help her to realize her dreams and goals. If Stacy is already familiar with individuals in the system, she will be given her choice of service managers.

Her service manager coordinates a team of professionals that includes at a minimum: **the County Long-term Support Worker, a Division of Vocational Rehabilitation (DVR) Counselor, a Workforce Investment Act (WIA) Counselor, and a High School Counselor.** Stacy is given a list of items to follow-up on and another appointment for the next meeting. The high school counselor is involved in services to ensure the correct course or high school credits will be completed to meet college admission requirements and entrance tests are taken with appropriate supports and preparation.

The one-stop system blends **Medicaid Waivers, the Division of Vocational Rehabilitation, the Department of Public Instruction, Workforce Investment Act Programs, the Social Security Administration, Housing and Urban Development** and other applicable resources so that Stacy can make choices about how and in what manner she enters her post-secondary education.

Her service manager assists her in obtaining the assessment reports necessary for the provision of disability-related services at the postsecondary level and completes them by February of her senior year. This service manager assist the family with financial aid applications and assists in setting up an individualized meeting with the Financial Aid Officer at the college she has chosen. Close contact with **DVR and a Disability Program Navigator** is helpful in accessing funding and ensures that the use of one source of funding does not eliminate another. Services through the disability coordinator at the college are recommended and confirmed in the spring of Stacy's senior year.

All services are provided in a **person-centered approach** and are directed by Stacy. Person-centered refers to a system where the best available resources are accessed based on the personal needs and interests of the individual and that individual's choices regarding resources is respected and supported. This comprehensive system makes long-term supports available for Stacy, while not concentrating on her barriers to work but, rather, her interests and talents. Stacy can work with one individual and her family in setting up an array of services with a team of professionals that meet her individual goals. The supports for those goals are made available allowing Stacy to choose her training and employment based on her talents and interests.

The **Individual Educational Plan (IEP) coordinator** is included among the professionals working with Stacy and this coordinator and the counselor are included in planning and service recommendations in the **IEP**. During school and in any trial work or work experiences, every attempt is made to create **natural supports** and encourage Stacy to develop such. Thus she was independent to the extent possible, when she entered her first professional job.

While in school and employment, Stacy is able to take advantage of **Self-Directed Services** in long-term care for personal care and employment supports. Stacy uses a fiscal intermediary or broker that allows her the opportunity to hire, fire, and train her own employees with assistance, if needed. **Benefit counseling** provides Stacy with the information necessary to continue personal care supports in employment. The **PASS account** established while she was still in high school provides funds for the acquisition of a vehicle and/or driver now that she is working in the community. These services are provided through the same one-stop contact person or position that she started with at age 16. Stacy was placed on a wait list for Section 8 housing so she benefited from reduced rent in school and when she started her first job.

WISCONSIN 2012 CASE STUDY 2

Bill is 51 years old, acquired a high level spinal cord injury in a motor vehicle accident in March 2005 and would like to return to work. Although he is motivated, Bill has concerns about his ongoing health needs, concerns about losing access to his Social Security Disability Insurance (SSDI) and healthcare coverage and is unsure of how and where to start the process.

After connecting with the *Aging and Disability Resource Center (ADRC)* in his community, Bill receives a comprehensive assessment and finds that he is eligible for several supports and programs. This includes long-term care coordination via the Care Management Organization (CMO) of his choice. Wisconsin promotes a *person-centered approach* to planning and *Self-Directed Supports (SDS)* as an advocacy and financial management, or “brokering”, option. Bill decides to hire a Broker to help him manage his *individualized budget* as well as access the resources necessary to live and work in the community. Using his individualized budget, Bill and his new wife decide to move into an accessible apartment immediately.

Together, they identify individuals that will be helpful in making his goal of employment a reality. In addition to his Care Manager’s assistance with long-term health & service coordination, he and his broker identify a trained *benefits specialist from the Benefits Planning Assistance and Outreach (BPAO)* program to help answer questions related to his Social Security benefits and work incentives, a counselor from the *Division of Vocational Rehabilitation (DVR)* and a *Disability Program Navigator* from the local One-Stop Job Center. Bill and his broker transfer data to the individuals prior to the meeting so they come prepared and Bill’s eligibility to participate in their programs has already been determined.

Bill describes his employment goals and concerns with the group and together they develop a *person-centered plan* which includes employment and estimates the resources needed to reach this goal. Each individual provides information about the resources (financial and otherwise) they have available to contribute to this process. The *complementary funding approach* allows Bill to make choices about what he wants and plan how he can move forward toward his goals given a realistic budget and timeline, without duplicating services or costs. His DVR counselor helps him connect with a qualified Rehabilitation Engineer who outfits him with the appropriate *Assistive Technology* to independently run a computer, phone and other equipment at home and work and the Navigator helps him access funding through a Workforce Investment Act (WIA) *Individual Training Account (ITA)* for a computer class at the local Technical College where he can learn to use current computer programs with his assistive technology.

Once Bill feels comfortable with his assistive technology, his DVR counselor assists him in obtaining a part-time job as a Customer Service Representative at a telecommunications company. Bill decides to purchase a van for *transportation*. His DVR counselor assists with the down payment and his benefits counselor helps him write a *Plan for Achieving Self-Support (PASS)* to pay for the van. Additionally, the account set-up to pay for the van is an *Individualized Development Account (IDA)* which provides a financial match for every dollar Bill saves and allows him to pay off his van in half the time. His DVR counselor helps him hire the temporary services of a job coach at an hourly rate. Bill has the option to purchase these services long-term out of his individualized budget if necessary. However, within 2 weeks, Bill

meets a few of his co-workers and one of them offers to help him set up his station each morning which eliminates the need for the job coach. The *natural support* from his co-worker allows Bill to apply part of his budget to pay for other support needs.

After 6 months, Bill is offered a fulltime position. He consults with his benefits specialist to find out how this might affect his Social Security benefits as well as his healthcare coverage and premium payment through Wisconsin's *Medicaid Buy-In* program. Additionally, moving from part-time to fulltime work requires personal care assistance mid-day. Bill decides to accept the fulltime position and his Care Manager helps him arrange *Personal Assistance Services (PAS)* to assist with his health-care needs at work. As a fulltime employee, Bill is eligible for his employer's benefits including *a retirement* package and healthcare coverage. Bill invests in his employer's *401k plan* and also opts to keep his MA coverage through the Buy-In program as wrap-around coverage.

Bill's boss offers him a promotion, but this will require him to move to the company's headquarters which are located in another county. Bill is excited about the opportunity, but is concerned that he will lose access to the community-based waiver services he relies on to help him live independently. His broker assures him that his *healthcare and waiver services are portable*. Bill decides to accept the promotion.

Between the dramatic increase in his earnings and the savings tools he is able to utilize (*an Independence Account* connected with the Medicaid Buy-In as well as a matching *Individual Development Account (IDA)*), Bill has enough money saved for a down payment on *his own home*. He now lives in the community of his choice, is married, works fulltime, continues to have access to the health and care services necessary to live independently and participate fully as a member of his community and is saving for future retirement.

WISCONSIN 2012 CASE STUDY 3

Kim is a 20 year old woman with a mild cognitive disability and was recently diagnosed with a bi-polar disorder. Kim's mother helps her apply for Social Security benefits and Kim is found eligible for federal Supplemental Security Income (SSI) due to her lack of income, assets or work history. Because she receives at least \$1 in federal SSI, she also qualifies for the Wisconsin State SSI Supplement and Medicaid.

Kim wants to work, but isn't confident she can do it on her own. Based on a recommendation from her psychiatrist, her mother brings her to their local One-Stop Job Center to start looking for work. Kim sees a poster describing the role of the *Disability Program Navigator* and decides she would like to meet this person. She meets with the Navigator who suggests that she also connect with a benefits specialist and her local *Aging and Disability Resource Center (ADRC)* to discuss long-term support options.

A comprehensive assessment is done and Kim learns she is eligible for an *individualized budget* and *support broker* through the long-term support system. Kim interviews several individuals and chooses to hire a broker that she likes and feels comfortable with.

Together as a team, Kim, the Navigator, her broker, her *Benefits Planning Assistance and Outreach (BPAO) benefits specialist* and her mother (at Kim's invitation) develop a *person-centered plan* to assist Kim in managing her mental health issues, maintain a healthy lifestyle and put a priority on employment. Kim is a key player in developing the plan and officially "owns" the plan. Her broker presents her with information on a variety of support services she can utilize to help meet her goals as needed.

Her Navigator connects Kim with *employers* conducting interviews at the Job Center and an employer offers Kim a *paid work experience* at his clothing store. Kim consults with her benefits specialist to understand how earnings might affect her SSI payment and Medicaid and is happy to learn that she can test her ability to work and not lose access to either benefit. Kim does well during her paid work experience and the employer offers her a permanent, part-time position.

Kim takes on additional job duties when she accepts the part-time position and wants help in getting established on the job. She and her broker talk to her boss and offer to increase one of her co-workers wages by \$1/hour to help as needed. Her boss and co-worker agree to this arrangement and Kim is able to work more productively and confidently with *natural supports* on the job.

Kim decides it is time to move out of her parent's house and into an apartment of her own. Due to time management issues, Kim is nervous because she frequently needs reminders to take her medications, attend therapy appointments, get to work on time, etc and she is afraid that she might have trouble following-through with these responsibilities on her own. Kim's older cousin is also looking for an apartment and agrees to be Kim's roommate. Kim decides to use some of her *individualized budget* to pay her cousin for the hours she spends helping her with

medications and appointments and Kim, her broker and cousin work out a schedule and payment system together.

Due to the *person-centered* and *self-directed* nature of the support system in Wisconsin, Kim is able to live, work and participate in her community based on choices she makes.