####

**San Diego State University**

**Interwork Institute**

**The South Carolina**

**Commission for the Blind**

**and**

**The State Board of Commissioners**

**Comprehensive Statewide Needs Assessment**

**Submitted to:**

**The South Carolina Commission for the Blind**

**The South Carolina Board of Commissioners**

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**Acknowledgements**

The comprehensive statewide needs assessment (CSNA) conducted on behalf of the South Carolina Commission for the Blind (SCCB) and the State Board of Commissioners could not have been accomplished without the assistance of a number of individuals who contributed greatly to various phases of the project. The needs assessment team would like to thank these individuals for their contributions to the needs assessment effort.

The following individuals were instrumental in helping to ensure that the research activities associated with this needs assessment were completed successfully:

Elaine Robertson and Kyle Walker coordinated the CSNA process at SCCB, identifying the key staff persons and their roles and responsibilities. Elaine worked closely with the SCCB Board and staff to identify and recruit a broad spectrum of partners and individuals to provide feedback for the assessment.

Shana Robinson compiled data on services to SCCB consumers that were essential in analyzing the agency’s performance as it relates to several standards. Ms. Robinson transmitted this information to the project team in a very responsive and timely manner which assisted in the ability to triangulate data from an agency-specific source and allowed the report to include the most recent agency-specific data available.

Elaine Robertson, Elizabeth Alexander (Greenville Office) and Marquita Miller (Charleston Office) coordinated the individual and staff interviews at SCCB and scheduled the focus group sessions. They provided assistance with a myriad of organizational processes and activities.

Ed Bible identified community partners, businesses and individuals with disabilities to participate in the focus groups and complete the electronic surveys.

Finally, the project team would like to express their appreciation to each individual who took the time to share their thoughts and concerns by completing a survey, taking part in an interview, or participating in the focus group research.

**EXECUTIVE SUMMARY**

The South Carolina Commission for the Blind, the State Board of Commissioners and the Interwork Institute at San Diego State University jointly conducted an assessment of the vocational rehabilitation (VR) needs of persons with blindness and vision impairments residing in the state of South Carolina. The purpose of the assessment was to provide planners with VR information pertinent to the allocation of resources, to provide a rationale for the development of SCCB’s State Plan, and to comply with the needs assessment mandate in the Rehabilitation Act.

The process that was developed for conducting the needs assessment involved four primary data-gathering approaches:

* Electronic surveys conducted with four stakeholder groups and hard copy surveys of a random sample of former and current SCCB consumers, other individuals with blindness and vision impairments, and businesses in South Carolina;
* Focus groups conducted with three stakeholder groups (individuals with blindness and vision impairments, representatives of organizations that provide services to persons with blindness and vision impairments, and businesses);
* Key informant interviews conducted with SCCB staff; individuals identified as knowledgeable about the needs of individuals with blindness and vision impairments in South Carolina, businesses; and
* Analysis of a variety of existing demographic and case service data relevant to individuals with disabilities.

Through the data collection efforts, researchers solicited information from four primary stakeholder groups: (a) former, current or potential consumers of SCCB located throughout South Carolina; (b) community partners (e.g., the Commission, educational institutions, municipalities) and representatives of organizations that provide services to individuals who are potential or actual consumers of SCCB; (c) SCCB staff; and (d) representatives of businesses operating in South Carolina or surrounding areas.

The approach was designed to capture input from a variety of perspectives in order to acquire a sense of the multi-faceted needs of persons with blindness and vision impairments in South Carolina. Efforts were made to gather information pertinent to the following eight main categories:

1. General agency performance;
2. Needs of individuals with the most significant disabilities, including their need for supported employment;
3. Needs of individuals with blindness and vision impairments from different ethnic groups, including needs of individuals who have been unserved or underserved by the VR program;
4. Needs of individuals with blindness and vision impairments served through other components of the statewide workforce investment system;
5. Needs of individuals with blindness and vision impairments in transition;
6. Need for community rehabilitation programs (CRPs) that serve individuals with blindness and vision impairments in South Carolina;
7. Business relations and services, including SCCB’s ability to meet the needs of businesses in South Carolina regarding recruiting, hiring, accommodating and retaining employees with blindness or vision impairments; and
8. Alignment of other SCCB programs and services, including the Ellen Beach Mack Rehabilitation Center and the Training and Employment Division (EBMRC), with the VR program in meeting the needs of individuals with blindness and vision impairments in South Carolina.

As part of this CSNA, at the agency’s request, an interim report was issued in January to address specific issues related to SCCB’s work under the Workforce Investment Opportunity Act (WIOA). Some of the same findings are included in this final report. SCCB has already proposed actions to address gaps identified in both reports. The full Interim Report is included in Appendix A.

Over 300 key informants provided input for the CSNA research through surveys, interviews and focus groups. Table 1 summarizes their participation by method and group.

Table 1

*Summary of Research Results by Method and Group*

|  |  |
| --- | --- |
| **Research Method** | **Research Group and Count** |
| **Consumer** | **Partner** | **Staff** | **Business** | **Total** |
| Individual Interview | 5 | 0 | 29 | 0 | **34** |
| Electronic Survey | 104 | 4 | 48 | 2 | **158** |
| Hard Copy Survey | 52 | 0 | 0 | 0 | **52** |
| Focus Group | 22 | 19 | 13 | 10 | **64** |
| **Totals** | **183** | **23** | **90** | **12** | **308** |

It is important to put the following in perspective when reading these reports and the supporting data:

1. In the context of this report “SCCB” refers exclusively to the VR program of the Commission and not to any of the other state or federal programs administered by the agency.
2. This CSNA covers a period of time when SCCB operated under the Workforce Investment Act (WIA), the authorizing legislation for VR programs across the country. WIOA, the new authorizing legislation, was passed into law in July of 2014. It places new requirements upon SCCB with varying dates of implementation. SCCB is working diligently to build the capacity of the agency to comply with the new requirements of WIOA.
3. SCCB has experienced significant staff turnover during the time period of this CSNA. This turnover undoubtedly affected the performance of SCCB. The turnover situation has stabilized and SCCB has filled many positions that provide critical direct services to individuals who are blind or visually impaired in South Carolina.
4. Though findings are reported from all groups, the limited participation rates from community partners and businesses decrease the generalizability of findings pertaining to them and suggest a need for increased partnerships in those sectors.

The following summary highlights the results of the most commonly cited needs and themes derived from the surveys, focus groups, and key informant interviews in the eight main areas of investigation.

**Section One:** *General Agency Performance.*

The most common themes that emerged in this area were:

* Although SCCB has consistently met most Rehabilitation Services Administration (RSA) standards and indicators over the past five years there has been a significant drop off in the past three years in the number of cases closed with an employment outcome. Possible explanations for the decline in performance include reductions in force, office closures, staff turnover, and ending the practice of taking “Homemaker” and “Unpaid Family Worker” closures.
* There was a high frequency of comments by key informants (individuals and agency partners) about the speed of services, lack of consistent communication and unclear rationales for many agency decisions including eligibility, discontinuation of services at EBMRC and case closure.
* There was a high frequency of comments from staff concerning low morale across the agency. Staff concerns were centered around high turnover, low pay, high workloads and lack of recognition. Staff did recognize that SCCB’s VR program is turning in a positive direction and are generally hopeful their concerns will be appropriately addressed.
* There has been a marked decrease over a three year period in the numbers of SSI/SSDI recipients served and the number achieving an employment outcome.
* SCCB serves a very low rate and has a low rehabilitation rate for individuals with multiple disabling conditions. This includes a low rehabilitation rate for those attending EBMRC. The number of individuals served who are coded as having most significant disabilities is very small.
* SCCB has minimal disputes with applicants or eligible individuals that result in mediations, impartial hearings or civil legal action. However, it should be noted that interviews with individuals a majority expressed lack of awareness of the Client Assistance Program
* SCCB ranks high nationally among agencies serving the blind in average case expenditures and time in service. Historically, the most prevalent services provided have been Assessment and Diagnostic/Treatment.
* SCCB ranks high nationally among agencies serving the blind in the number of hours worked at closure.
* SCCB ranks low nationally among agencies serving the blind for indicators of the quality of employment outcomes (wages and medical benefits).
* Average time in service for individuals is almost one year longer for individuals whose cases are closed without an employment outcome. This, coupled with expenditure data, indicate that significant agency resources are utilized in cases that do not lead to an employment outcome. On average $250,000 per year is expended on cases closed unsuccessfully after acceptance.
* Nearly 20 percent of the cases closed without an employment outcome are the result of individuals ‘no longer interested in services’ or ‘refused services’ or ‘unable to locate’.
* Of those individuals attending EBMRC over the past five years, 43 percent were closed unsuccessfully or as homemakers.
* SCCB does not have a supported employment program indicating that individuals with the most significant disability are underserved.
* According to the agency’s data, the rehabilitation rate for individuals who are transition age is 0%. This is significant considering the federal requirements under WIOA around employment for youth with disabilities.
* The rehabilitation rate for individuals between the ages of 55- 64 served by SCCB over the past three fiscal years is 58 percent (below national averages). This is significant considering the trend of older workers, including those with disabilities wanting or needing to remain in the workforce.
* RSA data and comments from key informants (staff and individuals) indicate that few individuals served by SCCB are also served by other partners in the workforce development system. SCCB consumer awareness of workforce system services that may benefit them is minimal.
* The data reviewed indicates the following segments of the population of South Carolina who may be underserved are:
	+ Youth between the ages of 13-24
	+ Adults between the ages of 55-64
	+ Adults over the age of 65 who wish or need to continue working
	+ Individuals who are Hispanic, Native American or Asian
	+ Individuals with the most significant disabilities
	+ Individuals with multiple disabilities including cognitive, mental health, deaf/blindness, and physical disabilities
	+ Individuals with disabilities who live in rural areas of South Carolina and cannot or choose not to access services at EBMRC
	+ Individuals with disabilities who live at or below the poverty level

**Section Two:** *Needs of individuals with the most significant disabilities, including supported employment*

The most common themes that emerged in this area were:

* SCCB does not offer supported employment or customized employment services to its consumers with significant and most significant disabilities. This is reflected in the low numbers of employment outcomes for these individuals.
* Individuals with disabilities identified the following as barriers to achieving employment outcomes:
	+ Attitudes of the public and employers toward individuals who are blind or visually impaired.
	+ Lack of reliable and accessible transportation.
* A significant number of SCCB consumers receive SSA benefits and fear the loss of benefits if they seek employment. Access to benefits counseling provided by either SCCB or outside agencies appears to be minimal.
* Independent living skills are a major need of SCCB consumers. The Rehabilitation Center (EBMRC or the Center) meets this need for a small percentage of SCCB consumers, but many individuals, staff and partners expressed a need for more comprehensive services to be available throughout South Carolina especially in rural areas.

**Section Three:** *Needs of individuals with blindness and vision impairments from different ethnic groups, including needs of individuals who have been unserved or underserved by the VR program.*

The most common themes that emerged in this area were:

* Individuals with blindness and vision impairments who are Hispanic may be underserved by SCCB. South Carolina has experienced one of the largest increases of Hispanics in the country.
* The needs of individuals with blindness and vision impairments from minority ethnic groups are similar to the needs of other ethnic group with the possible addition of language barriers.

**Section Four:** *Needs of individuals with blindness and vision impairments served through other components of the statewide workforce investment system.*

The most common themes that emerged in this area were:

* America’s Job Centers (AJCs) in South Carolina (SC Works) have not effectively served individuals with blindness and vision impairments. There have been no documented instances of SCCB cases that are jointly served by other workforce entities.
* Historically, the relationship between SCCB and the AJCs, although cordial, is primarily one of referral with no evidence of substantial services after referral;
* Although the AJCs are accessible, the technology is frequently out of date and the AJC staff lack the skills to effectively operate/demonstrate the technology;
* Under WIOA there are legal requirements around the development of partnerships between SCCB and entities in the greater workforce development system.

**Section Five:** *Needs of individuals with blindness and vision impairments in transition*

The most common themes that emerged in this area were:

* A high percentage of youth with disabilities have multiple disabilities requiring multiple services. Historically, SCCB’s VR program has not effectively served individuals with multiple disabilities including youth with the most significant disabilities;
* Transition-age youth appear to have limited exposure to work prior to exiting the school system. School staff indicated that their focus is upon academics and they do not have the resources to provide employment related services;
* Soft skill development, typically delivered in job readiness/preparation programs, is a major need for this group. This is available to a limited degree through Goodwill;
* Individuals and education partners expressed a lack of involvement of SCCB staff in the planning and delivery of transition services to youth in school. There appears to be minimal involvement of SCCB in activities beyond Individualized Education Program (IEP) meetings and minimal provision of Pre-Employment Training Services (Pre-ETS);
* Transition-age youth have a great need for mentors who would foster high expectations and build self-advocacy skill;
* Parents and family members of youth with disabilities need more information on the services available through SCCB and how to access them;
* Parents and youth with disabilities need training on self-advocacy. Education partners stated that greater involvement of families leads to accessing more services potentially leading to better outcomes. Families who are poor and live in rural areas are less likely to advocate for services and are most in need of training and support;
* Teachers working with youth who are blind or visually impaired need training and support in working with students using assistive technology. Assistive technology is a strength of SCCB, and the capacity to provided quality assistive technology support could be increased using school resources;
* Education partners and consumers suggested that SCCB take a lead role in bringing stakeholder groups together to foster greater integration of services and increase consumer awareness of services available to them.

**Section Six:** *Need for Community Rehabilitation Providers (CRPs) in South Carolina*

The majority of intensive VR services are delivered at the EBMRC located in Columbia. Services in outlying areas, especially rural areas, are not considered adequate to meet the needs of consumers living in these areas who cannot or choose not to attend EBMRC. VR ‘outreach’ services to this population are limited in scope and duration. CRPs are considered one way of addressing the need for geographic access to services.

 The most common themes that emerged in this area were:

* Historically, SCCB has not relied on CRPs to provide rehabilitation services to applicants and eligible individuals in South Carolina. SCCB has focused its service delivery system on the EBMRC and ‘Outreach’ services to individuals who cannot or choose not to attend EBMRC. Outreach services are limited in scope and duration.
* SCCB has a limited contractual agreement with Goodwill Industries and the National Federation for the Blind to provide limited independent living skills training and job preparation services.
* Individuals expressed a need for community programs that provide more comprehensive services in the northern and southern parts of South Carolina
* The Association for the Blind and Visually Impaired (ABVI) center near Charleston (a private non-profit CRP) appears to be under-utilized and reports it has the capacity to partner with SCCB to deliver more comprehensive services to that part of the state.

**Section Seven:** *Business Relations and Services*

The information gathered from businesses in South Carolina was very limited as a result of a low return rate on the survey and the small size of the three small focus groups. Common themes included:

* Low survey response rates and low representation for the focus groups could be an indication that VR’s partnerships with the business community are limited in quantity and/or quality. Two of the businesses represented in the focus groups had hired individuals who had approached them directly for employment. SCCB was then brought in to provide necessary supports which secured the employment. The project team did not interview any employer in which SCCB initiated the placement.
* Businesses expressed a need for assistance with training on understanding disability and disability sensitivity in recruiting and hiring qualified employees with disabilities. Respondents encouraged SCCB to take a leadership role with businesses in South Carolina as a disability expert and to develop long-term and trusting relationships with businesses.
* ABVI in Charleston indicated that Boeing is building a large plant near Charleston. This presents an opportunity for SCCB to develop a partnership that could lead to significant employment opportunities especially in high-wage, high-demand jobs. ABVI also indicated that the Lighthouse of Seattle was opening a community rehabilitation program and working directly with Boeing.
* Over the past few years and under WIA, SCCB (and most VR agencies nationally) has not maintained an effective working relationship with other workforce entities. Therefore, SCCB has not been in a position to use these relationships to leverage opportunities to develop relationships with businesses. Also, other workforce agencies have not had full access to the expertise that SCCB would bring to the table around blindness, low vision and assistive technology that would provide a useful job retention resource to the workforce system.

**Concluding Remarks**

This CSNA identified gaps in performance, needs of individuals who are blind and visually impaired and the needs of community partners and educators in South Carolina. It also identifies population segments that appear to be underserved and provides recommendations for SCCB to consider in addressing their needs. This CSNA is intended to serve as a starting point and resource for SCCB and the Board to develop goals, objectives and strategic plans to address these needs. It is important to look at needs as a gap between desired and achieved results. SCCB is to be highly commended for already taking steps to address these needs as part of the requirements under WIOA.

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**The South Carolina Commission for the Blind**

**Comprehensive Statewide Needs Assessment**

**Impetus for Needs Assessment**

Title IV of the Workforce Innovation and Opportunity Act (WIOA) contains the Rehabilitation Act of 1973 as amended and requires all state vocational rehabilitation (VR) agencies to assess the rehabilitation needs of individuals within the respective state and relate the planning of programs and services and the establishment of goals and priorities to those needs. According to Section 101 of the Rehabilitation Act, each participating state shall submit a Unified State Plan every year for vocational rehabilitation services that includes the *results of a comprehensive, statewide assessment, jointly conducted by the designated State unit and the State Rehabilitation Council every three years describing the rehabilitation needs of individuals with disabilities residing within the State, particularly the vocational rehabilitation service needs of (I) individuals with the most significant disabilities, including their need for supported employment; (II) individuals with disabilities who are minorities and individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program; (III) individuals with disabilities served through other components of the statewide workforce development system; and (IV) youth with disabilities and students with disabilities including their need for pre- employment transition services or other transition services.*

In addition, Section 101 of the Rehabilitation Act indicates that the comprehensive statewide needs assessment must include an assessment of the need to establish, develop or improve community rehabilitation programs within the State. In response to this mandate and to ensure that adequate efforts are being made to serve the diverse needs of persons with disabilities in South Carolina, the South Carolina Commission for the Blind (SCCB), in partnership with the State Board of Commissioners, entered into a contract with the Interwork Institute at San Diego State University for the purpose of jointly developing and implementing a comprehensive statewide assessment of the vocational rehabilitation needs of individuals with blindness and vision impairments residing in South Carolina.

**Purpose of Needs Assessment and Utilization of Results**

The purpose of the comprehensive statewide needs assessment (CSNA) is to identify and describe the vocational rehabilitation needs of individuals with blindness and vision impairments residing within South Carolina. In particular, the CSNA seeks to provide information on:

* The overall performance of SCCB as it relates to meeting the rehabilitation needs of individuals with blindness and vision impairments in South Carolina;
* The rehabilitation needs of individuals with the most significant disabilities, including their need for supported employment services;
* The rehabilitation needs of individuals with blindness and vision impairments who are minorities, or who have been unserved or underserved by the vocational rehabilitation program;
* The rehabilitation needs of individuals with blindness and vision impairments in transition;
* The rehabilitation needs of individuals with blindness and vision impairments served through other components of the statewide workforce development system;
* The need for community rehabilitation programs serving individuals with blindness and vision impairments within South Carolina;
* The effectiveness of SCCB’s business relations and services and the needs of businesses as it relates to recruiting, hiring, accommodating and retaining individuals with blindness and vision impairments; and
* The alignment of other SCCB programs and services (including the Ellen Beach Mack Rehabilitation Center and the Training and Employment Division) with the VR program in meeting the needs of individuals with blindness and vision impairments in South Carolina.

 Data collection efforts solicited input from a broad spectrum of VR stakeholders, including persons with blindness and vision impairments, service providers, SCCB staff and businesses. It is expected that data from the needs assessment effort will provide SCCB and the Board of Directors with direction when creating the VR portion of the Unified State Plan and when planning for future program development, outreach and resource allocation.

**Description of Needs Assessment Process**

The needs assessment approach was designed to elicit quantitative and qualitative data about the needs of persons with blindness and vision impairments. Focus group and key informant interview activities yielded qualitative data that may be used to complement and lend depth to the findings of the survey efforts and the analysis of extant data. The use of multiple data collection strategies, both quantitative and qualitative, facilitates data collection that captures both the breadth and the depth of concerns relevant to individuals with blindness and vision impairments in South Carolina.

The process that was developed for conducting the needs assessment involved four primary data-gathering approaches:

* Electronic surveys conducted with four stakeholder groups (individuals with blindness and vision impairments, representatives of organizations that provide services to persons with blindness and vision impairments, SCCB staff, and businesses in South Carolina). Hard copy surveys were sent to a random sample of 400 individuals with blindness and vision impairments who are either former, current or potential consumers of SCCB, in addition to the electronic survey for this group;
* Focus groups conducted with staff and three stakeholder groups (individuals with blindness and vision impairments, community partners – representatives of organizations that provide services to persons with blindness and vision impairments, and businesses);
* Key informant interviews conducted with individuals with blindness and vision impairments, SCCB staff, organizations that provide services to individuals with blindness and vision impairments in South Carolina, businesses; and
* Analysis of a variety of existing demographic and case service data and reports relevant to individuals with blindness and vision impairments.

Through the data collection efforts, researchers solicited information from four primary stakeholder groups: (a) former, current or potential consumers of SCCB located throughout South Carolina; (b) representatives of organizations that provide services to, advocate for, or represent the interests of individuals who are potential or actual consumers of SCCB; (c) SCCB staff; and (d) representatives of businesses operating in South Carolina. In addition, the approach was designed to capture input from a variety of perspectives in order to acquire a sense of the multi-faceted needs of persons with blindness and vision impairments in South Carolina. Responses to the individual survey reflect the opinions of current, former and potential clients of SCCB. Efforts were made to gather information pertinent to the investigated categories through inquiries with individuals who serve a broad range of persons with blindness and vision impairments in South Carolina (whether they are affiliated with SCCB or not).

Inherent in any type of research effort are limitations that may constrain the utility of the data that is generated. Therefore, it is important to highlight some of the most significant issues that may limit the ability to generalize the needs assessment findings to larger populations. One potential source of bias is the participant sample. The findings that are reported reflect only the responses of those who could be reached and who were willing to participate. Individuals who were disenfranchised, dissatisfied, or who did not wish to be involved with SCCB may have declined to participate. A second significant concern is that the information gathered from respondents may not accurately represent the broader concerns of all potential constituents and stakeholders. Data gathered from service providers, for example, may reflect only the needs of individuals who are already recipients of services, to the exclusion of those who are not presently served. Although efforts were made to gather information from a variety of stakeholders in the vocational rehabilitation process, it would be presumptuous to conclude with certainty that those who contributed to the focus groups, the key informant interviews, and the survey research efforts constitute a fully representative sample of all of the potential stakeholders in the vocational rehabilitation process in South Carolina.

The time period covered by this comprehensive statewide needs assessment includes the three fiscal years from October 1, 2011 to September 30, 2014 as well as any available information for FY 2015 that was supplied by SCCB. The time frame was determined by the Federal Rehabilitation Services Administration (RSA) requirement that VR programs perform a CSNA every three years at a minimum.

The specific methods for gathering the quantitative and qualitative data used in this assessment are detailed below.

**Analysis of Existing Data Sources**

The project team at San Diego State University (SDSU) reviewed a variety of existing data sources for the purposes of identifying and describing demographic data within South Carolina including the total possible target population and subpopulations potentially served by SCCB. Data relevant to the population of South Carolina, the population of persons with disabilities (and where possible data specific to blindness) in South Carolina, as well as the number of Veterans, income level, educational levels and other relevant population characteristics were utilized in this analysis. Sources analyzed include the following:

* Federal Rehabilitation Services Administration’s RSA 911, RSA 2, RSA 113, RSA 107 monitoring data for SCCB, and Agency Report Cards (a national ranking of agencies across several performance measures).
* 2013 American Community Survey
* 2013 US Census Bureau Statistics
* 2014 Social Security Administration SSI/DI Data
* Cornell University’s Disabilitystatistics.org (2013 Data)
* UNH Disability Compendium 2015 <http://www.disabilitycompendium.org/> (2014 Data)
* South Carolina’s Census Bureau
* SCCB case service data compiled at the request of the project team
* 2010 RSA 107 Monitoring Report

**Key Informant Interviews**

*Instrument.* The instrument used for the key informant interviews (Appendix B) was developed by the researchers at SDSU and reviewed and revised by SCCB.

*Key informant population.* The key informant population consisted of SCCB staff, community partners, individuals with blindness and vision impairments and business partners. A total of 210 individuals responded to surveys. This included 48 SCCB staff members, 4 partner agencies, 156 consumers and two business persons.

*Qualitative data collection.* Key informant interviews and focus groups were conducted from September 21, 2015 to October 23, 2015. Forty-seven face-to-face sessions were held. The general format was consistent among consumers, with introductory questions followed by open-ended questions about their experiences and their needs and services, as well as their perceptions of the needs of others, the services they receive and suggested changes in SCCB service delivery. Similarly, the format was consistent among SCCB staff and representatives of agencies/ organizations that provide services to, advocate for, or represent the interests of individuals with blindness and vision impairments. First, participants were asked questions to ascertain their personal and professional expertise and their experience with SCCB. Participants were then asked open-ended questions about their perceptions of the needs of individuals with blindness and vision impairments in South Carolina. Finally, participants were asked to share their perceptions of how SCCB could improve their ability to help meet those needs, especially as it relates to helping consumers obtain and retain employment.

*Efforts to ensure respondent confidentiality.* Names and other identifying characteristics were not recorded by the interviewers. Participants were informed that their responses would be treated as confidential information, would not be reported with information that could be used to identify them, and would be consolidated with information from other respondents before results were reported.

*Data analysis.* The interviewers took notes on the discussions as they occurred. The notes were transcribed and analyzed by the researchers at SDSU. Themes or concerns that surfaced with consistency across interviews were identified and are reported as common themes in the report narrative.

**Surveys**

***Survey of Individuals with Disabilities***

*Instrument.* The instrument used for the electronic survey of individuals with blindness and *vision* impairments (Appendix C) was developed by the project team and reviewed and revised by SCCB.

*Survey population.* Participants in this portion of the survey effort can be described as individuals with blindness and vision impairments who are potential, former or current clientsof SCCB. The agency broadly dispersed the electronic survey via USPS and e-mail invitations. Hard copy surveys were mailed to SCCB consumers using a random sample of 400 former or current consumers.

*Data collection.* Data was gathered from this population through the use of an accessible, Internet-based survey that was also made available in printed form. Once the survey was active, SCCB distributed it to 1,628 individuals via electronic links (mailed and emailed) and print copies (with self-addressed, postage-paid return envelopes). Approximately 100 were returned marked undeliverable, for a total distribution to 1,528 individuals. SCCB also posted the link on its website and Newslink. One week after the initial distribution, another electronic notice was sent as both a “thank you” to those who had completed the survey and a reminder to those who had not. A third and final reminder was sent 5 weeks after the second invitation. Surveys were then placed into “inactive” status and the data analyzed. Printed surveys returned by mail were collected and entered into the system by the project team at SDSU for further analysis.

*Efforts to ensure respondent confidentiality.* Respondents to the individual survey were not asked to identify themselves when completing the survey. In addition, responses to the electronic and *printed* surveys were aggregated by the project team at SDSU prior to reporting results, which served to further obscure the identities of individual survey respondents.

*Accessibility.* The electronic survey was designed using an accessible, internet-based survey application. On the printed and electronic versions of the individual survey, respondents were provided with the name and contact information of the Research Director at SDSU in order to place requests for other alternative survey formats.

*Data analysis.* Data analysis consisted of computing frequencies and descriptive statistics for the survey items with fixed response options. Open-ended survey questions, which yielded narrative responses from individuals, were analyzed by the researchers for themes or concepts that were expressed consistently by respondents.

*Number of completed surveys.* A total of 132 electronic surveys were received from individuals with blindness and vision impairments. Only 104 of the surveys were completely filled out. While this suggests a return rate of approximately 9% of the 1,146 who received the electronic link, it is difficult to gauge the true return rate as some responses may have come as a result of forwarded invitations or from postings on SCCB’s website and Newslink.

Of the four hundred surveys sent in hard copy by mail to a random sample of former or current consumers of SCCB, 18 were returned marked as undeliverable due to having the wrong address on file. Fifty-two completed surveys were received. When the undeliverable surveys are removed from the equation, the return rate for the hard copy surveys is 14%.

***Survey of Partners***

*Instrument.* The instrument used for the electronic survey of community partners (Appendix D) was developed by the project team and reviewed and revised by SCCB.

*Survey population.* Individuals identified for participation in this survey effort can be described as representatives of organizations that provide services, coordinate services, or serve an advocacy role for persons with blindness and vision impairments in South Carolina. Invitations were issued to 33 partners.

*Data collection.* Data was gathered from this population through the use of an Internet-based survey. SCCB identified 33 partners for participation in the survey effort. Once the survey was active, SCCB sent an invitation and link to the survey by e-mail. Approximately one week after the distribution of the initial invitation, another electronic notice was sent as both a “thank you” to those who had completed the survey and a reminder to those who had not. A third and final invitation was sent 5 weeks after the second invitation. Surveys were then placed into “inactive” status and the data analyzed.

*Efforts to ensure respondent confidentiality.* Respondents to the partner survey were not asked to identify themselves or their organizations when completing the survey. In addition, responses to the electronic surveys were aggregated by the project team at SDSU prior to reporting results, which served to further obscure the identities of individual survey respondents.

*Accessibility.* The survey was designed using an accessible, internet-based survey application. Respondents were also provided with the name and contact information for the Research Director at SDSU in order to place requests for other alternative survey formats.

*Data analysis.* Data analysis consisted of computing frequencies and descriptive statistics for the survey items with fixed response options. Open-ended survey questions, which yielded narrative responses from individuals, were analyzed by the researchers for themes or concepts that were expressed consistently by respondents.

*Number of completed surveys.* A total of 8 electronic surveys were started with only 4 entirely completed by representatives of partner organizations, which yields a 1% return on the 33 invitations. It may be that the low response rate corresponds to SCCB’s limited track record of collaboration, partnering with business or contracting for services.

***Survey of SCCB Staff***

*Instrument.* The instrument used for the electronic survey of SCCB staff (Appendix E) was developed by the project team at SDSU and reviewed and revised by SCCB.

*Survey population.* Individuals identified for participation in this survey effort can be described as all staff working for SCCB between September and December 2015.

*Data collection.* Data was gathered from SCCB staff through the use of an Internet-based survey. All 125 staff were sent an electronic invitation and link to the survey. Approximately one week after the initial distribution, a subsequent notice was sent as both a “thank you” to those who had completed the survey and a reminder to those who had not. A third and final invitation was sent out 5 weeks after the second invitation. Surveys were then placed into “inactive” status and the data analyzed.

*Efforts to ensure respondent confidentiality.* Respondents to the staff survey were not asked to identify themselves by name when completing the survey. Responses to the electronic surveys were aggregated by the project team at SDSU prior to reporting results. This served to further protect the identities of individual survey respondents.

*Accessibility.* The survey was designed using an accessible, internet-based survey application. Respondents were also provided with the name and contact information for the Research Director at SDSU in order to place requests for other alternative survey formats.

*Data analysis.* Data analysis consisted of computing frequencies and descriptive statistics for the survey items with fixed response options. Open-ended survey questions, which yielded narrative responses from individuals, were analyzed by the researchers for themes or concepts that were expressed consistently by respondents.

*Number of completed surveys.* Out of a total of 125 SCCB staff invited to participate, 77 electronic surveys were started, with only 48 being entirely completed, for a 38% response rate.

***Survey of Businesses***

*Instrument.* The instrument used for the electronic survey of businesses in South Carolina (Appendix F) was developed by the project team at SDSU and reviewed and revised by SCCB.

*Survey population.* Individuals identified for participation in this survey effort can be described as representatives of South Carolina businesses in operation between September and December 2015.

*Data collection.* Data was gathered from businesses through the use of an Internet-based survey. Twenty business representatives were sent an electronic invitation and link to the survey. Approximately one week after the initial distribution, a subsequent notice was sent as both a “thank you” to those who had completed the survey and a reminder to those who had not. A third and final invitation was sent out 5 weeks after the second invitation. Surveys were then placed into “inactive” status and the data analyzed.

*Efforts to ensure respondent confidentiality.* Respondents to the business survey were not asked to identify themselves by name when completing the survey. Responses were aggregated by the project team at SDSU prior to reporting results. This served to further protect the identities of individual survey respondents.

*Accessibility.* The survey was designed using an accessible, internet-based survey application. Respondents were also provided with the name and contact information for the Research Director at SDSU in order to place requests for other alternative survey formats.

*Data analysis.* Data analysis consisted of computing frequencies and descriptive statistics for the survey items with fixed response options. Open-ended survey questions, which yielded narrative responses from individuals, were analyzed by the researchers for themes or concepts that were expressed consistently by respondents.

*Number of completed surveys.* Of the 20 businesses invited to participate, only 2 surveys were returned for a response rate of 10%. Although the numbers are so small they cannot be generalized to all South Carolina businesses, they are presented here for illustrative purposes. The low response rate suggests that the agency should strengthen its relationships with employers. The project team has included recommendations to more effectively engage businesses in the Business Relations section of the report.

**Focus Groups**

*Instrument.* The focus groups were conducted based on a protocol developed by the researchers at SDSU (Appendix B). The protocol was reviewed and revised by SCCB. The central question raised in each of the focus group meetings was, “What are the most important employment-related needs encountered by people with blindness and vision impairments?” When appropriate the moderator introduced additional questions prompting respondents to discuss needs associated with preparing for, obtaining and retaining employment, and increasing the employment of persons with blindness and vision impairments. Participants in the staff and partner agency groups were also asked to discuss the needs of individuals with most significant disabilities; those from cultural, racial, or ethnic minority groups; and students with blindness and vision impairments transitioning from high school. They were also asked about the need to establish, develop or improve CRPs.

*Population.* Thirteen focus groups were conducted for the assessment, with a total of 64 participants. They consisted of three consumer groups, five partner groups (including the Board of Commissioners), three business groups and two staff groups. Table 2 identifies the focus groups by type and number of attendees.

Table 2

*Focus Groups by Type and Number Attended*

|  |  |  |
| --- | --- | --- |
| **Focus Group Type** | Number of | Number of |
| groups | attendees |
| Consumer | 3 | 22 |
| Partner (incl. Educators and Board) | 5 | 19 |
| Business | 3 | 10 |
| Agency (staff, leadership team) | 2 | 13 |
| **Total** | 13 | 64 |

*Data collection.* The 13 focus groups were held in Greenville, Columbia and Charleston from September 21 through October 23, 2015, involving 64 individuals, 22 of whom were consumers, with the remainder representing the agency, partner agencies and businesses. The format of the focus groups was consistent for all groups. A few minutes were devoted to introductions, personal background, and rapport building in order to establish a productive focus group environment. The focus group moderator explained the purpose of the focus group and provided a brief description of the larger needs assessment effort. The moderator explained the role of San Diego State University in the needs assessment effort and assured participants of the confidentiality of their statements. A note-taker recorded the discussion as it occurred.

*Efforts to ensure respondent confidentiality.* Names and other identifying characteristics were not recorded by the note-taker. Focus group participants were informed that their responses would be treated as confidential information, would not be reported with information that could be used to identify them, and that information from multiple focus groups would be consolidated before results were reported. In addition, SCCB staff did not attend the focus groups consisting of individuals with disabilities and partner agencies in order to ensure an open dialogue amongst participants.

*Accessibility.* SCCB included a request for reasonable accommodation in their electronic invitations to all of the research groups. One individual requested an interpreter.

*Data analysis.* Notes were transcribed and analyzed by the researchers at SDSU. Results were organized according to the eight categories under investigation in the assessment. Themes or concerns that surfaced with consistency across groups were identified and reported as consensus themes in the report narrative.

**Analysis and Triangulation of Data**

The data gathered from the national and agency-specific data sets, key informant interviews, surveys and focus groups were analyzed by the researchers on the project team. The common themes that emerged regarding needs of persons with disabilities from each data source were identified and compared to each other to validate the existence of needs, especially as they pertained to the target populations of this assessment. These common themes are identified and discussed in the Findings section.

**Dissemination Plans**

The CSNA report is delivered to SCCB and the Board of Commissioners. The project team received several requests by consumers and partner agencies to share the results of the CSNA. We recommend that SCCB publish the report on their website for public access and that they notify the public of the availability of the report by e-mail.

**SOUTH CAROLINA’S DEMOGRAPHIC PROFILE**

**& SERVICE DELIVERY CONTEXT**

In 2014, there were 4,832,482 people with disabilities living in South Carolina, with approximately 77,406 of them (1.6%) being individuals with a visual disability, of working age, living in the community. 75.4% of working age civilians *without disabilities* living in the community were employed, as opposed to 34.4% of those *with disabilities* and 32% of those with visual disabilities. Economically, the pattern of lower employment continues with lower earnings and higher poverty rates. To wit, the median earnings for South Carolinians *without disabilities* 16 years or older in inflation adjusted dollars for 2014 was $27,296 whereas for those *with disabilities* it was $20,157. With respect to poverty, the rate for working age civilians *without disabilities* living in the community is half that (15%) for those *with disabilities* (30%).

SCCB VR programs consist of approximately 30 counselors located in 9 District offices throughout South Carolina. The administrative and service delivery hubs for SCCB are located in Columbia. The most intense independent living and job training services are provided at the residential EBMRC in Columbia. To access the services at EBMRC, individuals are transported from their residence to EBMRC on Monday and return on Friday. Individuals living locally in the Columbia area may also access EBMRC programs and services. SCCB also provides ‘Outreach’ services, delivered by staff in the 9 district offices. The Outreach services do not provide the same intensity and duration as those provided by EBMRC. EBMRC also houses training programs in assistive technology (JAWS, Zoomtext etc.) as well as summer Transition programs for high school students.

SCCB provides job development and placement services via a cadre of Employment counselors who serve the state. Transition services are provided by a cadre of Transition counselors who also serve the entire state.

SCCB does limited outsourcing of services through community rehabilitation programs.

**CSNA FINDINGS**

 The CSNA findings are reported below in sections that correspond with the requested areas of inquiry. They are presented in both narrative and tabular form. Each section starts with a summary across all data collection methods, followed by a breakdown according to data collection method. Data tables that were too large to be included in the body of the report are presented in the Appendices.

**SECTION 1**

**OVERALL AGENCY PERFORMANCE**

The data on agency performance included below comes from the case management system used by SCCB and is compared to the available data submitted by SCCB to the Federal Rehabilitation Services Administration.

***Recurring Themes Across all Data Collection Methods***

The following recurring themes emerged in the area of Overall Agency Performance:

*Indicators*

* As summarized above, demographic data for South Carolina indicates that 1.6% of people with disabilities of working age who are living in the community are individuals with a visual disability.
* Surveyed consumers, staff and partners agreed that the top barriers to achieving employment goals relate to geographic access to services and jobs, followed by lack of individuals’ education and job skills, and employer perceptions about their ability to work.

*Agency performance*

* SCCB estimates that the VR program will serve 1,173 eligible individuals during FY 2016, 1,257 during FY 2017, 1,350 during FY 2018, and 1,400 during FY 2019.
* SCCB serves males and females equally, and ethnic/racial minorities in equal or greater proportion to their representation in the general population. Recent data regarding SCCB’s active cases indicates that 56% are Black or African American and 41% are White.
* SCCB serves youth and individuals with most significant disabilities at very low rates.
* There was a consistent decrease in both the number and percentage of cases closed with an employment outcome over the 2009-2014 period.
* SCCB ranks high for per case expenditures and low for quality of employment outcomes nationally among agencies for the blind.
* SCCB staff have a strong knowledge of assistive technology relating to blindness and visual impairment. The agency makes this technology readily available to students and adults.
* SCCB provides strong transition programs at the EBMRC, but these programs are limited to a small number of youth who are blind or visually impaired.
* Historically, SCCB VR has not viewed itself or been viewed by other agencies as an integral partner at the statewide workforce level due to (1) SCCB’s paradigm under WIA of being a sole one-stop shop, attempting to meet all the needs of its consumers independently, and (2) external silos and territorialism that has existed among state agencies. However, the agency has expressed the intention of working more closely with partners going forward.
* Historically, the most prevalent services provided by SCCB are Assessment and Diagnosis and Treatment of Impairments.
* The VR program’s service delivery system is centered in Columbia, resting primarily with the EBMRC. The majority of consumers participating in the adjustment to blindness program were closed as “N/A” (41.3%), “homemaker” (22.3%), or “unsuccessful” (20.1%). The breakdown of “closure reason” indicates that 36.9% were “successful closures.”
* SCCB’s service delivery was rated by surveyed consumers to be strongest in relation to vision restoration, low vision aids and assistive technology. The biggest barriers to SCCB services identified by all survey respondents were slow service delivery, inadequate information about SCCB services and lack of geographic access.
* Key informants in all categories had the perception that SCCB returns unmatched federal dollars every year, at the expense of delivering needed services. The research team determined that SCCB has not in fact returned federal dollars in the past several years.

*Gaps*

* Currently, SCCB’s memoranda of agreement with other state agencies, including the general VR agency, the Mental Health agency, and the Developmental Disability agency, must be updated to meet the requirements of WIOA.
* The vast majority of substantive independent living (IL) training received by SCCB consumers is conducted at the Center in Columbia. This is a residential center, therefore to access the training, an individual must either be a resident at the center or live in close proximity where commuting to and from the center on a daily basis is feasible. Key informants suggest that this, coupled with significant transportation barriers statewide, presents a major challenge in accessing SCCB services.
* In 2014, only 3% of Center participants came from the 10 lowest median income counties in South Carolina indicating that individuals who live below the poverty line and in rural areas may be underserved.
* SCCB has limited contracts or other arrangements with external service providers especially community rehabilitation programs.
* There are limited VR ‘outreach’ services throughout the state. Outreach services consist of independent living services (orientation/mobility and home/personal management) and are not as comprehensive as services offered at the EBMRC.
* Lack of affordable, accessible transportation is an historic, significant and pervasive barrier to independent living, employment and services for individuals with disabilities everywhere, and despite its wide acceptance as a critical need, little progress is made in addressing it systematically. South Carolina is no exception, with key informants and survey participants representing all stakeholder groups identifying this as an issue.
* All individuals surveyed for this study were in agreement that the highest priorities should be to improve geographic access (outreach, transportation, community-based services) and to address staffing issues (vacancies, skill levels, morale). These were followed by somewhat divergent suggestions depending on the respondent group: Staff and partners focused on internal improvements (collaboration, assessment, individualized services), whereas consumers focused on stronger job training, placement and support.

***Results by Data Collection Method***

Services Provided to Individuals by SCCB:

**Quantitative Data**

SCCB estimates that the VR program will serve 1,173 eligible individuals during FFY 2016, 1,257 during FFY 2017, 1,350 during FFY 2018, and 1,400 during FFY 2019. The following tables and discussions present statistical data on SCCB VR’s performance in providing services to individuals with blindness and vision impairments from 2012 through 2014.

Table 3

*Services Provided to Individuals by SCCB*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Data Item** | **2012** | **2013** | **2014** |  |
| Number of Applications | 583 | 547 | 411 |  |
| % of Applications found Eligible | 67% | 70% | 56% |  |
| Average Time for Eligibility Determination (in days) - All Ages | 30 | 28 | 35 |  |
| Significance of Disability |   |   |   |  |
| Category I- MSD | 19 | 11 | 9 |  |
| % of total | 5% | 3% | 3% |  |
| Category II- SD | 338 | 417 | 310 |  |
| % of total | 95% | 97% | 97% |  |
| Category III- NSD | 0 | 0 | 0 |  |
| % of total | 0% | 0% | 0% |  |
| Plans Developed | 384 | 406 | 217 |  |
| % of total | 66% | 74% | 53% |  |
| Closed with an Employment Outcome | 257 | 247 | 156 |  |
| Success Ratio (Rehab Rate - RSA calculation) | 72% | 58% | 49% |  |
| Average Cost per case closed successfully (26) | $438 | $3241 | $3913 |  |
| Average Cost per case closed unsuccessfully (28) | $7 | $613 | $1088 |  |
| Male [applicants] | 285 | 270 | 195 |  |
| % of total | 49% | 49% | 47% |  |
| Female [applicants] | 298 | 277 | 216 |  |
| % of total | 51% | 51% | 53% |  |
| **Age** |   |   |   |  |
| <18 | 20 | 20 | 9 |  |
| % of total | 3% | 4% | 2% |  |
| 18-64 | 550 | 508 | 392 |  |
| % of total | 94% | 93% | 95% |  |
| 65 and over | 13 | 19 | 10 |  |
| % of total | 2% | 3% | 2% |  |

*2014 SCCB Data on EBMRC Services*

* 50% of EBMRC attendees were from Richland or the immediately adjacent counties.
* 3% of EBMRC attendees were from the state’s ten poorest counties as measured by median income.
* 82% EBMRC closed cases did not have an employment outcome: 41% “N/A,” 20% “homemaker,” 20% “unsuccessful” and 0.6% “failure to cooperate.”

**Observations Based on the SCCB Data**

* Performance in key areas has declined from 2012 through 2014. Applications, eligibility decisions, individualized plan for employment (IPE) development and employment outcomes decreased significantly.
* The cost of serving individuals whose cases are closed successfully or unsuccessfully has risen dramatically. This data may suggest case management issues resulting in higher case service expenditures and lower employment outcomes.
* The percentage of cases coded Most Significantly Disabled (MSD) is low and may reflect an unclear interpretation of agency policies and/or coding errors. It may also reflect eligibility decisions that screen out individuals with most significant disabilities.
* Services to youth under 18 appear to be very low and will need to be addressed in light of WIOA requirements.

**RSA Data Highlights** The following data highlights are drawn from various RSA reports, including Standards and Indicators, RSA-911, RSA-722, RSA State Report Card [See Appendix H for RSA reports relating to SCCB]

* Indicator 1.1, “Number of closures with employment outcome,” has consistently decreased from 2006 (546) to 2015 (137). Source: Standards and Indicators.
* There has been a downward trend in Indicator 1.2, “Percentage of closed cases with an employment outcome,” from 2006-2015. Source: Standards and Indicators.
* SCCB consistently exceeds the other federal performance standards relating to closed cases.
* Both males and females are equally served by SCCB.
* SCCB consistently significantly exceeds standard 2.1, “Ratio of minority services to non-minority services.”
* SCCB outcomes for Hispanics are somewhat low in comparison with the representation of Hispanics in the general population. The state’s Hispanic population is rapidly increasing and South Carolina is among the states with the highest percentage increases in the country.
* Other minorities such as Native Americans and Asians represent very small percentages of the population served, corresponding to very small percentages in South Carolina’s general population.
* SCCB has minimal (a total of 2 in FY 2014) disputes with applicants or eligible individuals resulting in mediation, impartial hearings or civil actions. Source: RSA-722.
* Average time to closure is 12 months longer for individuals closed with no employment compared with individuals closed with employment. Source: RSA-911.
* Historically for SCCB, the percentage of competitive employment outcomes is highest for the age range 25-35. Source: RSA-911.
* Historically for SCCB, the percentage of employment outcomes is lowest for age range 14-24. Source: RSA-911.
* SCCB ranks high (nationally among agencies for the blind) for expenditures, months of service and hours worked per week at closure. Source: RSA State Report Card.
* SCCB ranks low (nationally among agencies for the blind) in quality of employment outcomes including wages and medical benefits. Source: RSA State Report Card.
* SCCB appears to underserve individuals with multiple disabilities especially individuals with cognitive and mental disabilities. Source: RSA-911.
* Historically, the most prevalent services provided by SCCB are Assessment and Diagnosis and Treatment of Impairments.
* Almost 19% of unsuccessful closures for SCCB were for the following reasons: No longer interested in services; refused services; unable to locate. Source: Agency Data.
* Of those attending EBMRC, 43% of cases were closed either unsuccessfully or as homemakers. 38% were closed successfully.

**2010 RSA Monitoring Report Findings and Recommendations.** RSA conducted a 107 monitoring review in 2010 and issued findings and recommendations for SCCB to address. Those findings and recommendations that coincide with this report’s findings on overall agency performance include:

* SCCB serves individuals not requiring extensive funding.
* Stakeholders reported that SCCB focuses on serving those who are already employed at application.
* SCCB does not integrate internal functions (including fiscal, programmatic and program evaluation).
* It does not appear that the agency was successful in fulfilling the 2010 report’s recommendations relating to:
	+ shifting resources from low- to high-impact services to address service gaps
	+ decentralizing service delivery
	+ adding staff with capacity and skill sets needed to offer programs, reduce waiting lists, etc.
	+ partnering with other agencies
	+ implementing a dual service system with South Carolina Vocational Rehabilitation Department (SCVRD) including marketing and training

#### **Observations Based on RSA Data**

* In general, performance in key service delivery fell over a 3-year period, possibly due to staff turnover.
* Key issues documented in the RSA Monitoring report have not been resolved and may continue to impact agency performance.
* Individuals with multiple disabilities that included blindness are significantly underserved. Lack of partnerships with other agencies including SCVRD appear to be contributing factors.
* Case management issues appear to contribute to higher cost, lower successful outcomes and less efficient service delivery. The root causes of the case management issues require further investigation.

Services Provided to Individuals by SCCB:

**Qualitative Data on Barriers and Improvements**

**Focus Groups and Key Informant Interviews**

* Some consumers reported positive experiences with SCCB. *“Staff and fellow consumers who are visually impaired definitely inspired me.”* One individual new to South Carolina said the agency *“opened doors to blindness resources”* and *“I look forward in the future to give back to SCCB to help other consumers not as fortunate as myself.”*
* Consumers’ employment barriers (lack of education or job skills, employer perceptions, etc.) are compounded by challenges they encounter in accessing the services needed to overcome those barriers. Key informants frequently observed that many individuals seeking employment-related services are unaware of SCCB’s existence, or the services are either lacking (in quality and quantity) or geographically inaccessible.
	+ Several consumers said they would not have known about SCCB if they didn’t already have a connection (e.g., a relative who is on staff or is already receiving services). Others indicated that even as SCCB consumers they were not fully informed of what services are available. A Board member acknowledged that *“Consumers need to be more aware of our services and we need to find them.”*
	+ Slow service delivery was frequently cited. One individual observed, *“Things move at a snail’s pace.”* Others reported that services outside EBMRC are inconsistent and often delayed; processes are slow and communication between the agency and individuals is a problem. *“There is too much bureaucracy for such a small agency.”*
	+ There is an appearance of narrow or inconsistently applied criteria for service acceptance. Key informants perceived eligibility criteria as a means for SCCB to screen people out of rather than into programs. “*Eligibility is a roadblock rather than to help a person.”*
	+ Key informants reported that the VR program does not have adequate vocational evaluation resources for all those seeking employment, especially if they cannot go to EBMRC.
	+ It was observed that the VR program does not provide needed services such as GED, computer training, Trial Work Experience, job coaching or competitive job placement.
	+ None of those interviewed indicated they had received assistance from SCCB in finding employment. One individual stated, *“I understand that now it is required for individuals to look for their own work. I tried that, it did not work well for me, trying to do a resume was difficult. I realize it is a large undertaking and there is not enough manpower but some people need extra help especially if they are older and haven't been in the workforce for a long time.”*
* Service access or availability is especially challenging for individuals with multiple disabilities, those transitioning from school to employment, individuals living in poverty, those living in rural areas and older workers. A partner noted that *“the agency caters to the 40% whose only disability is blindness vs. the 60% with multiple diagnoses”* and that *“there is no plan for those with intellectual disabilities.”* One individual observed, *“Many older people want to work longer.”*
* The geographic access issue cuts across all areas of inquiry. Key informants’ suggested solutions included improved transportation and outreach services, more out-stationing of services, and increased partnering or contracting for services.
* While not a direct area of inquiry, the issue of low staff morale was raised unsolicited by staff and other key informants as a contributing factor in the agency’s performance and service delivery challenges. In general, comments focused on low pay, lack of recognition and increased workloads due to loss of staff and office closures.
* Key informants in all categories had the perception that SCCB returns unmatched federal dollars every year, at the expense of delivering needed services. The research team determined that SCCB has not in fact returned federal dollars in the past several years. This misperception could be damaging to the agency’s reputation among stakeholders.

**Survey Results by Type**

***Individual Survey***

 **Individual Survey: Respondent Characteristics** Table 4 identifies the general characteristics of the individual survey respondents.

Table 4

*Individual Respondent Characteristics*

|  |  |  |
| --- | --- | --- |
| **Association with SCCB** | **N** | **%** |
| I have never used the services of SCCB | 10 | 8.1 |
| I am a current client of SCCB | 71 | 57.3 |
| I am a previous client of SCCB, my case has been closed | 36 | 29.0 |
| Other | 5 | 4.0 |
| I am not familiar with SCCB | 2 | 1.6 |
| Total | 124 | 100% |
| **Indicate Whether You Receive Social Security Benefits** | **N** | **%** |
| I receive SSI | 18 | 18.2 |
| I receive SSDI | 32 | 32.3 |
| I do not receive Social Security disability benefits | 47 | 47.5 |
| I don't know if I receive Social Security disability benefits | 1 | 1.0 |
| Total | 105 | 100% |
| **Where do You Usually Meet with Your Counselor?**  | **N** | **%** |
| In my home or community | 33 | 33.3 |
| SCCB office | 35 | 35.4 |
| Other (Library, Phone, Work site) | 16 | 16.2 |
| I don't have a SCCB counselor | 15 | 15.2 |
| Total | 99 | 100% |
| **Primary Disability** | **N** | **%** |
| Blindness or vision impairment | 91 | 90.1 |
| Cognitive impairment | 3 | 3.0 |
| Deaf-blindness | 3 | 3.0 |
| Mobility impairment | 0 | 0.0 |
| Mental health impairment | 1 | 1.0 |
| Physical impairment | 2 | 2.0 |
| Other | 3 | 3.0 |
| No impairment | 1 | 1.0 |
| Total | 101 | 100% |

There were a total of 132 responses (104 of which were complete) to the individual survey for this study. 87% of the individuals who responded were either current or former clients of SCCB. Approximately 58% of the respondents were SSA beneficiaries and almost 33% of the total number of respondents met with their SCCB counselor in their community. The primary disability of the respondents was, as expected, blindness or vision impairment.

**Individual Survey: Barriers to Employment.** Respondents to the individual survey were prompted with a number of questions that asked about specific barriers to achieving their employment goals. Table 5 illustrates their responses to the questions about employment-related needs. Percentages are based on the number of individuals who responded to the specific item.

Table 5

*Barriers to Employment – Individual Survey*

|  |  |  |
| --- | --- | --- |
| **Individual: Barriers to Employment** | **Identified as a Barrier (N)** | **Identified as a Barrier (%)** |
| Other transportation issues | 43 | 50.0 |
| Lack of disability-related transportation | 41 | 47.7 |
| Lack of assistive technology | 41 | 46.6 |
| Not having education or training | 36 | 42.9 |
| Employers’ perceptions about employing persons with disabilities | 35 | 40.2 |
| Not having job search skills | 33 | 37.9 |
| Not enough jobs available | 28 | 32.6 |
| Other health issues | 22 | 25.3 |
| Not having job skills | 20 | 23.3 |
| Concerns regarding impact of income on benefits | 20 | 23.0 |
| Affordable housing | 17 | 20.0 |
| Lack of independent living skills | 16 | 19.1 |
| Lack of disability-related personal care | 14 | 16.9 |
| Language skills | 10 | 11.1 |
| Accessible housing | 7 | 8.3 |
| Mental health issues | 5 | 5.8 |
| Childcare issues | 5 | 5.8 |
| Prior convictions for criminal offenses | 2 | 2.3 |
| Substance abuse issues | 1 | 1.2 |

Barriers identified by the greatest proportions of individual survey respondents included lack of disability-related and other transportation, lack of assistive technology, not having enough education or training, employers’ perceptions about hiring people with disabilities and not having enough job search skills. Each of these concerns was identified as a barrier by over a third of the individual survey respondents. Several other concerns (e.g., not enough available jobs, health issues and not having job skills) were also identified as barriers with considerable frequency.

At the conclusion of the survey section prompting respondents to identify employment-related barriers, participants were asked an open-ended question to describe the most significant barrier to achieving their employment goals. Seventy-six respondents provided narrative statements describing their perceptions of the most significant barriers they faced. The most common barriers expressed by respondents were:

● Geographic isolation / transportation

● Insufficient job skills and job readiness

● Lack of SCCB responsiveness

Other barriers to achieving employment goals mentioned frequently by respondents included unreceptive employer community, health complications and lack of IL skills.

Individuals were asked an open-ended question that requested they identify the top three most helpful services they received from SCCB. Seventy-six individuals responded to this question. The services that were identified with the most frequency included:

● Vision restoration (eye exams, glasses, surgery, appointments, etc.);

● Low vision aids;

● Assistive technology;

● IL – Orientation and Mobility (O&M) especially – and adjustment to blindness training;

● Tuition and college training costs; and

● Employment counseling.

**Individual Survey: Barriers to Accessing SCCB Services.** Individual survey respondents were presented with several questions about specific challenges or barriers to accessing SCCB services. Table 6 illustrates the percentage of respondents who identified each of the response options as a barrier to accessing SCCB services.

Table 6

*Barriers to Accessing SCCB Services – Individual Survey*

[Number following each item = total respondents for that item]

|  |  |  |
| --- | --- | --- |
| **Individual: Barriers to Accessing SCCB Services** | **N** | **Percent** |
| Difficulties scheduling meetings with your counselor 98 | 29 | 29.6 |
| Other difficulties working with SCCB staff 99 | 28 | 28.3 |
| Limited accessibility to SCCB via public transportation 99 | 28 | 28.3 |
| Lack of information about the services available from SCCB 100 | 28 | 28.0 |
| Other challenges related to the physical location of the SCCB office 97 | 20 | 20.6 |
| Difficulties completing the Individualized Plan for Employment 97 | 17 | 17.6 |
| Lack of disability-related accommodations 99 | 17 | 17.2 |
| Difficulties completing the SCCB application 99 | 10 | 10.1 |
| SCCB's hours of operation 99 | 8 | 8.1 |
| Language barriers 100 | 2 | 2.0 |

The barriers to accessing SCCB services mentioned most frequently by respondents to the individual survey pertained to difficulties scheduling meetings with counselors (30%), other difficulties working with SCCB staff (28%), limited accessibility to SCCB via public transportation and lack of information about the services available from SCCB.

At the conclusion of the survey, respondents were presented with an open-ended question asking if there were any other challenges or barriers that made it difficult for them to access SCCB services. Twenty-two respondents detailed other barriers they encountered in response to this question. Most frequently mentioned were challenges relating to lack of (or slow or bureaucratic) response from SCCB, lack of awareness of SCCB services, and need to spend 2-3 months in Columbia.

Individuals who indicated that other difficulties working with the SCCB were a barrier to accessing SCCB services were asked to describe these difficulties. Twenty-eight respondents supplied answers to this question. The most commonly reported difficulties included:

● Slow service delivery

● Counselor unresponsiveness

● Change in counselors

● Lack of information about available services

● Lack of confidentiality

**Individual Survey: Improvements to SCCB Services.** Respondents were presented with an open-ended question that asked what changes to SCCB services might improve their experience with SCCB and help them to achieve their employment goals. Sixty-nine respondents provided narrative statements describing suggested changes. It should be noted that 18 (26%) indicated “none” or that they were satisfied. Others identified the following suggestions:

* Address staffing issues (lack of interest/motivation and training, poor communication, high turnover)
* Provide information about available resources and services
* More assistance with transportation
* Job training, job placement and on the job support

***Partner Survey***

Thirty-three partner agencies were invited to participate in the survey. Eight individuals participated, with four providing complete responses. The low response rate may be related to the fact that VR does not typically contract for services and provides most services in-house and therefore does not have relationships with outside partner agencies. Table 7 identifies the populations that the respondents work with on a regular basis.

Table 7

*Consumer Groups that Partners Work with on a Regular Basis – Partner Survey*

|  |  |
| --- | --- |
| **Client populations partners work with on a regular basis** | **N** |
| Individuals with the most significant disabilities | 5 |
| Individuals that are racial or ethnic minorities | 6 |
| Transition-aged youth (14 - 24) | 7 |
| Individuals with vision impairments other than blindness | 8 |
| Individuals that need supported employment services | 6 |
| Individuals from unserved or underserved populations | 6 |
| Individuals who are blind | 6 |
| Individuals served by America's Job Centers | 4 |

**Partner Survey: Capacity of Provider Network.** When asked if the state’s network of rehabilitation providers is able to meet SCCB consumers’ vocational rehabilitation needs, 4 partners responded “yes” and 3 responded “no.” One respondent elaborated that the system (including SCCB) is challenged in meeting the needs of dually diagnosed individuals; another said the system is challenged in meeting the needs of students in transition. The reasons cited included insufficient quantity and quality of provider services, client barriers and staff cutbacks.

**Partner Survey: Barriers to Employment.** Partners were asked to identify the reasons why individuals with blindness and vision impairments find it difficult to achieve their employment goals. Only 5 partners responded, so results cannot be generalized to all provider organizations, but are worth taking into account. Table 8 lists these results.

Table 8

*Reasons Consumers Find it Difficult to Achieve their Employment Goals – Partner Survey*

|  |  |
| --- | --- |
| **Partners: Reasons consumers find it difficult to achieve employment goals** | **Number not adequately addressed by SCCB** |
| Not enough jobs available | 3 |
| Not having job search skills | 3 |
| Not having job skills | 3 |
| Mental health issues | 3 |
| Substance abuse issues | 3 |
| Other health issues | 3 |
| Disability-related transportation issues | 2 |
| Poor social skills | 2 |
| Other transportation issues | 2 |
| Perceptions regarding impact of income on benefits | 2 |
| Childcare issues | 2 |
| Housing issues | 2 |
| Not having education or training | 2 |
| Employers' perceptions about employing people with disabilities | 1 |
| Lack of help with disability-related personal care | 1 |
| Language barriers | 1 |
| Convictions for criminal offenses | 1 |
| Other (SCCB should attend IEP mtgs and work closely with school staff) | 1 |
| Not having disability-related accommodations | 0 |

Three out of five partners responding to this survey identified the following reasons consumers find it difficult to achieve their employment goals: not enough jobs available, transportation issues, lack of job skills and job search skills, and mental health, substance abuse and other health issues. When asked to identify the top three reasons why SCCB consumers find it difficult to achieve their employment goals, partners most frequently identified transportation, employer’s perceptions about job skills and not having education and training. The full list is contained in Table 9 below.

Table 9

*Top Three Reasons Consumers Have Difficulty Achieving their Employment Goals – Partner Survey*

|  |  |
| --- | --- |
| **Partners: Top three reasons consumers find it difficult to achieve employment goals** | **No.** |
| Employers' perceptions about employing people with disabilities | 3 |
| Not having education or training | 3 |
| Disability-related transportation issues | 3 |
| Other transportation issues | 2 |
| Not having job skills | 1 |
| Not having job search skills | 1 |
| Not having disability-related accommodations | 1 |

**Partner survey: Barriers to accessing SCCB services.** Partner survey respondents were given a list of barriers and asked to identify the top three reasons that individuals with blindness and vision impairments found it difficult to access SCCB services. Most frequently mentioned among respondents’ top three barriers were slow service delivery and limited physical accessibility. Also mentioned by one respondent each were inadequate disability-related accommodations and assessment services as well as SCCB staff not meeting clients in the communities where they live. These same barriers were identified as being greater than for the general population for individuals with the most significant disabilities, youth in transition and racial or ethnic minorities.

Partner survey respondents were presented with an open-ended question asking if there were any other difficulties for consumers to access SCCB services. One partner pointed to SCCB’s staff retention issues as a significant barrier for transition students, saying that SCCB should have more of a presence, attend meetings for students transitioning to supported employment, provide resources for college-bound students, provide more timely information about summer camp and other statewide activities.

**Partner survey: Improvements to SCCB Services.** Partner survey respondents were also presented with an open-ended question that asked them what important changes SCCB could make to improve services, increase access to services and support their consumers’ efforts to achieve their employment goals. Three respondents provided narrative statements describing the following suggested changes:

* Transition counselor consistently available to go to the schools, establishing relationships with teachers and transition specialists.
* Increased staff.
* Fee for service option with job training providers.

Two partner survey respondents also indicated that, system-wide, the network of vocational rehabilitation providers could bring about service improvements by better coordinating with the general VR agency rather than duplicating services. One respondent suggested focusing on improving the community perception of employing individuals with disabilities.

***Staff Survey***

There were 77 SCCB staff survey responses (48 of which were complete) representing various job classifications. Years on the job for these respondents ranged from 5 months to 21 years. When asked which populations they worked with, respondents identified the groups displayed in Table 10 below.

Table 10

*Client Populations Staff Work with Regularly*

|  |  |
| --- | --- |
| **Client populations SCCB staff work with on a regular basis** | **N** |
| Individuals who are blind | 54 |
| Individuals with vision impairments other than blindness |  41 |
| Individuals who are racial or ethnic minorities | 36 |
| Individuals from unserved or underserved populations | 27 |
| Transition-aged youth (14 - 24) | 24 |
| Individuals who need supported employment services | 24 |
| Individuals with the most significant disabilities | 23 |
| Individuals served by America's Job Centers | 13 |

**Staff Survey: Barriers to Employment.** SCCB staff survey respondents were given a list of barriers identical to those presented to partner survey respondents and asked to identify the reasons why SCCB consumers have difficulty achieving their employment goals. Table 11 identifies staff members’ responses, ranked according to the degree to which SCCB addresses those challenges.

Table 11

*Reasons Consumers Find it Difficult to Achieve their Employment Goals – Staff Survey*

|  |  |
| --- | --- |
| **Staff: Reasons consumers find it difficult to achieve employment goals - all clients** | **Percent identified as ‘need not adequately addressed’ by SCCB** |
| Not having education or training | 44.4 |
| Not having job skills | 40.9 |
| Lack of help with disability-related personal care | 40.5 |
| Language barriers | 40.5 |
| Housing issues | 38.6 |
| Poor social skills | 36.4 |
| Convictions for criminal offenses | 34.9 |
| Employers' perceptions about employing people with disabilities | 31.8 |
| Mental health issues | 31.8 |
| Not having job search skills | 31.8 |
| Perceptions regarding impact of income on benefits | 30.2 |
| Disability-related transportation issues | 27.3 |
| Substance abuse issues | 25.0 |
| Not enough jobs available | 22.7 |
| Other transportation issues | 20.5 |
| Childcare issues | 18.6 |
| Not having disability-related accommodations | 15.9 |
| Other health issues | 15.9 |

Surveyed staff identified lack of education and training, job skills, disability-related personal care and language skills as barriers that are not adequately addressed by SCCB. These were followed by housing issues, poor social skills, and convictions for criminal offenses as challenges not adequately addressed by the agency.

**Staff Survey: Barriers to Accessing SCCB Services.** Staff were then asked to identify the top three reasons that people with disabilities find it difficult to access SCCB services. Table 12 lists the barriers along with the percentage of staff survey respondents who identified the item among their top three barriers to accessing SCCB services.

Table 12

*Top Three Barriers to Accessing SCCB Services – Staff Survey*

|  |  |
| --- | --- |
| **Staff: Top three barriers to accessing SCCB services** | **Percent** |
| Limited accessibility to SCCB via public transportation | 51 |
| Slow service delivery | 38 |
| Difficulties accessing training or education programs | 33 |
| Other challenges related to the physical location of the SCCB office | 31 |
| Inadequate assessment services | 27 |
| Difficulties completing the Individualized Plan for Employment | 13 |
| Inadequate disability-related accommodations | 13 |
| SCCB staff do not meet clients in the communities where they live | 7 |
| Language barriers | 7 |
| Difficulties completing the SCCB application | 4 |
| Other (4 mentioned lack of awareness of SCCB’s existence, 2 said they give up, 1 each mentioned SCCB’s strict eligibility criteria, no community services, no Supported Employment, too much centralization, lack of outreach) | 24 |

Over 50% of staff respondents place limited accessibility via public transportation in their top three consumer barriers to accessing SCCB services. Next most frequently ranked in the top three was slow service delivery. Other barriers mentioned most frequently pertained to difficulties accessing training or education programs, other challenges related to the physical location of the SCCB office and inadequate assessment.

SCCB staff were presented with an open-ended question asking if there was anything else that should be known about why individuals with disabilities might find it difficult to access SCCB services. Nineteen responses were received. The overwhelming themes included slow service delivery (linked to high staff turnover) and lack of awareness of SCCB and community-based services.

**Staff Survey: Improvements to SCCB Services.** SCCB staff were also presented with an open-ended question asking them to identify the most important changes that SCCB could make to support consumer efforts to achieve their employment goals. Twenty-nine staff members responded to the question. The most frequently cited changes included:

* Easier geographic access to services
* Employment plans and services oriented to individual goals, competitive jobs, advancement and careers
* Business engagement and education
* Holistic assessment and services to individuals with most significant / multiple disabilities

**Staff survey: Staff-focused changes.** SCCB staff were presented with a survey question prompting them to identify the top three staff-focused changes that would enable them to better assist their clients. Table 13 indicates the percentage of the 41 respondents who selected each response option.

Table 13

*Staff-Focused Changes That Would Enable Staff to Better Assist Consumers – Staff Survey*

|  |  |
| --- | --- |
|  **Staff: Top three changes that would enable them to better assist their SCCB consumers** | **%** |
| Increased outreach to clients in their communities | 49 |
| Improved business partnerships | 44 |
| Better assessment tools | 34 |
| Smaller caseload | 32 |
| More effective community-based service providers | 29 |
| More streamlined processes | 27 |
| Additional training | 22 |
| More administrative support | 20 |
| Better data management tools | 20 |
| More supervisor support | 7 |
| Decreased procurement time | 2 |
| Other | 7 |

Increased outreach to clients in their own communities and improved business partnerships were the most frequently mentioned among the top three changes that would enable staff to better assist their consumers. These were followed in frequency by improved assessment tools, smaller caseloads and more effective community-based service providers. Other changes mentioned commonly were additional training, more administrative support and better data management tools.

**Summary of survey results (individuals, staff and partners)**

* *Employment barriers* **-** Surveyed consumers, staff and partners agreed that the top barriers to achieving employment goals relate to geographic access to services and jobs, followed by lack of education and job skills and employer perceptions.
* *SCCB services* - SCCB’s service delivery was rated by consumers to be strongest in relation to vision restoration, low vision aids and assistive technology. The biggest barriers to SCCB services identified by all survey respondents were slow service delivery, lack of information about SCCB services and geographic access.
* *Suggested improvements* - All surveyed individuals suggested improvements relating to geographic access (outreach, transportation, community-based services) and staffing. These were followed by somewhat divergent suggestions depending on the respondent group: Staff and partners focused on internal improvements (collaboration, assessment, individualized services), whereas consumers focused on stronger job training, placement and support.

**Recommendations**

The following recommendations are offered to SCCB based on the results of the research in the area of **Overall Agency Performance**:

* If it is determined that the recent decline in the agency’s performance is attributable to staff turnover, reductions in force and office closures, SCCB should consider evaluating its workforce needs and realigning staffing levels and qualifications as well as quantity and location of field offices to meet identified consumer demand.
* Given the frequency with which staff morale was identified as an issue by key informants SCCB should consider the following:
	+ Assign a team to assess the impact of the current organizational culture and develop strategies to recommendations for addressing the findings of the assessment.
	+ Create a consensus vision of the culture and working environment of SCCB and develop a strategic plan to achieve the vision; or include strategies to address organizational culture as a priority in any existing strategic plan.
* Given the perception among some consumers and staff that SCCB is turning back federal funds, SCCB should consider communicating to all stakeholders its plans and efforts to secure all available resources needed to provide effective services.
* The observation of the 2010 RSA monitoring report that SCCB does not integrate its internal functions is consistent with information shared by agency staff. The agency is encouraged to continue recent efforts to coordinate and communicate across internal divisions and departments.
* SCCB should strongly consider building the capacity of its program evaluation section that analyzes data on needs and services (as was done in this CSNA) to provide timely analysis to agency leadership and program administrators.
* SCCB should consider strengthening its approach to assessing consumer satisfaction especially assessing satisfaction immediately after case closure. This would provide more timely information on consumer perceptions of quality of services and outcomes.
* Needs surfacing in this report or arising from new requirements of WIOA will require a focused strategic approach that maximizes fiscal resources. SCCB should investigate options for consultation around aligning fiscal resources with programmatic needs.
* SCCB should conduct an analysis of the staff competencies needed to provide effective services to individuals with multiple, significant and most significant disabilities. The agency should then develop strategies to address gaps in competencies.
* SCCB should consider looking at methods to more comprehensively evaluate the quality of services delivered for both active and closed cases. Resources available through the Summit Group or the Program Evaluation and Quality Assurance Technical Assistance Center should be explored.
* SCCB should consider developing a comprehensive and strategic approach to outreach, using resources available through the workforce system to target underserved populations that are interested in exploring employment options. SCCB could use the physical locations of workforce partners for outreach and out-stationing of staff on an as needed basis. SCCB could also leverage the resources available through contracting with community rehabilitation programs to reach underserved populations.
* Lack of affordable, accessible transportation is a workforce system issue that affects all disability populations and anyone experiencing geographic access challenges. As in all states, this is a system-wide workforce issue in South Carolina. SCCB should join with workforce partners to take action, bringing in all stakeholders, including consumer groups and representatives of state and local transportation systems. The aims would be to better understand the scope and impact of transportation deficits and to collaborate on strategic solutions to address them.

**SECTION 2**

**NEEDS OF INDIVIDUALS WITH THE MOST SIGNIFICANT DISABILITIES, INCLUDING THEIR NEED FOR SUPPORTED EMPLOYMENT**

Section 2 provides an assessment of the needs of individuals with the most significant disabilities, including their need for supported employment, as conveyed by statistical data and as expressed by the different groups interviewed and surveyed.

***Recurring Themes Across all Data Collection Methods***

The following themes emerged in the area of the needs of individuals with the most significant disabilities including their need for supported employment:

*Indicators*

* Employers’ perceptions, lack of education and training and job skills, and geographic access to services and jobs were all identified by key informants as major barriers to employment for individuals with most significant disabilities.
* A large majority of SCCB consumers receive SSA benefits, and fear of benefit loss affects their return-to-work behavior.
* Staff and partners agree that employment barriers are different for individuals with most significant disabilities than for the general population.
* SCCB has a long-standing history of not providing Supported Employment services.
* SC residents do not have access to long term supports, or job coaches, either through SCCB in-house or through CRPs.
* There is no evidence of collaboration between SCCB and SCVRD on behalf of customers with multiple diagnoses.

*Agency performance*

* Surveyed partners and staff were in agreement that geographic access and slow service delivery are the biggest barriers to SCCB services for individuals with the most significant disabilities.
* SCCB served a very small number of individuals with most significant disabilities over a 3-year period, declining from a total of 18 in 2012 to 8 in 2014.
* SCCB appears to provide limited services to individuals with cognitive or mental health disabilities. SCCB does not appear to partner with agencies that might provide services to these populations.
* Despite SCCB’s agreement with RSA recommendations to establish a Supported Employment program and to partner with SCVRD on dual enrollment of consumers with most significant disabilities, the agency has not successfully implemented such actions.

*Gaps*

* Since SCCB has no Supported Employment program (in-house or by contract with CRPs) it is difficult to determine to what extent individuals coded MSD are served without looking at individual cases. In interviews with staff, it was indicated that these individuals “tend to sit around,” receiving no services.
* There is a significant gap between the needs of and services available to individuals with the most significant disabilities. Agency services appear to be targeted to individuals who are blind or visually impaired and have no additional disabilities.
* Individuals with cognitive and mental disabilities in addition to blindness appear to be significantly underserved, and in many cases may receive no substantial services. There is also a significant gap in the employment outcomes for these populations.

***Results by Data Collection Method***

Needs of Individuals with the Most Significant Disabilities:

**Quantitative Data on Barriers and Improvements**

**National and/or Agency Specific Data Related to the Needs of Individuals with the Most Significant Disabilities, including their need for Supported Employment.** SCCB uses a definition for MSD consistent with federal requirements. The baseline of disability types served by SCCB in the past three years is presented in Table 14.

Table 14

*SCCB Applicants by Primary Disability Type*

|  |  |  |  |
| --- | --- | --- | --- |
| **Disability Type** | 2012 | 2013 | 2014 |
| Blind | 147 | 144 | 108 |
| % of total | 25.2% | 26.3% | 26.3% |
| Vision Impaired | 357 | 317 | 219 |
| % of total | 61.1% | 58.0% | 53.3% |
| Deaf-Blind | 6 | 9 | 1 |
| % of total | 1.0% | 1.7% | 0.2% |
| Other | 74 | 77 | 83 |
| % of total | 12.7% | 14.1% | 20.2% |

Table 15 identifies the significance of disability by category for SCCB applicants from 2012 to 2014.

Table 15

*Significance of Disability for SCCB Consumers*

|  |  |  |  |
| --- | --- | --- | --- |
| **Significance of Disability** | 2012 | 2013 | 2014 |
| Category I- MSD | 18 | 10 | 8 |
| % of total | 5.1% | 2.3% | 2.5% |
| Category II- SD | 338 | 417 | 310 |
| % of total | 94.9% | 97.7% | 97.5% |
| Category III- NSD | 0 | 0 | 0 |
| % of total | 0% | 0% | 0% |

*SSA Beneficiaries*

* SSA Beneficiaries Applying for SCCB Services(SCCB data) - Total number and percentage of applicants who were SSA recipients:
	+ 2012: 169 (29%)
	+ 2013: 134 (25%)
	+ 2014: 88 (21%)
* SSI/SSDI Recipients (RSA Annual Review Report) – Total number of applicants who were SSA recipients, broken down by SSI and SSDI:
	+ FY2012 - 57 SSI recipients, 94 SSDI beneficiaries
	+ FY2013 - 60 SSI recipients, 126 SSDI beneficiaries
* SCCB Programming: Asset Development Services - SCCB does not provide benefits counseling to consumers.
* Outcomes for SSA Beneficiaries (RSA 911 FY2014 Data)
	+ SSI and SSDI beneficiaries earn on average $5.00 per hour less than non-beneficiaries.
	+ SSI/SSDI beneficiaries worked on average 10 hours less per week than non-beneficiaries.

**Observations Based on the Data**

The percentage of SCCB applicants who are individuals with blindness was fairly constant over time at approximately 25% from 2012 to 2014. Very few deaf-blind consumers applied for services over the 3-year period. Vision impaired is the disability-type most highly represented among SCCB applicants, although the percentage declined from 61% to 53% over the three years while those classified as “Other” climbed from 13% to 20%.

In each of the three years 2012 to 2014, individuals with the most significant disabilities were virtually unserved by VR, declining in number from 18 to 8, and from 5% to 2.5% of all applicants, over the 3-year period.

According to SCCB, 21% of its 2014 consumers were SSA beneficiaries. While it is unclear whether these individuals have more significant disabilities than other consumers, it is evident that SSI and SSDI beneficiaries earn less per hour and work fewer hours per week than non-beneficiaries, suggesting that they have more employment-related challenges. Many of these individuals and their families are concerned about losing the safety net that is provided by either SSI or SSDI if they go to work. These fears may adversely affect return-to-work behavior and result in settling for part-time work that keeps them under the Substantial Gainful Activity (SGA) amount, or prevents them from going over the “cash-cliff.” Benefits counseling, along with financial literacy training, could improve consumer perceptions of employment options available to them resulting in increased wages and lifting many of them above the poverty level.

**2010 RSA Monitoring Report Findings and Recommendations** As a result of a federal monitoring visit conducted in 2010, RSA issued findings and recommendations for SCCB to address. Those that coincide with this report’s findings on services to individuals with the most significant disabilities include:

* SCCB has a long-standing history of not providing Supported Employment, and SC residents do not have access to long term supports, or job coaches, either in-house or through CRPs.
* While consumers with multiple disabilities could benefit from joint service provision between SCCB and SCVRD, and despite an interagency agreement with SCVRD, there has been no evidence of collaboration even though consumers could benefit from dual enrollment.

Needs of Individuals with the Most Significant Disabilities:

**Qualitative Data on Barriers and Improvements**

**Focus Groups and Key Informant Interviews** The following themes emerged on a recurring basis from the individual interviews conducted for this assessment regarding the needs of individuals with the most significant disabilities, including their need for supported employment:

* Partners indicated that 60% of individuals with blindness and vision impairments have multiple diagnoses, but that SCCB caters to the 40% whose only diagnosis is blindness and does not have the capacity to meet the needs of the 60% with multiple disabilities.
* One parent reported, *“My son’s principle disability is autism but blindness trumps it. I have a hard time getting a call back from the Commission. The information flow is very lean.”* He further observed, *“A prerequisite for going to Columbia [EBMRC] is that he be able to care for himself, yet with his autism that’s not an option.”*
* Staff observed that the severely disabled population is the most difficult to assist in securing gainful employment.
* When asked about services for individuals with the most significant disabilities, many staff indicated that these services do not exist, and that Supported Employment services are needed. One staff indicated that these cases just ‘sit on caseloads.’
* Staff indicated that EBMRC programs do not meet the needs of individuals with multiple disabilities.
* Outreach services provided by SCCB are even more limited in scope than EBMRC services, which indicates those individuals who cannot or choose not to access EBMRC are severely underserved.
* Staff do not appear to have the experience or training to provide services this population. An education partner observed that staff are not comfortable serving this population.
* Staff indicated that lack of effective partnerships with community resources inhibit their ability to effectively serve individuals with most significant disabilities.
* Staff recommended that SCCB provide centralized benefits counseling.

**Survey Results by Type**

 **Partner survey: Barriers to Employment.** Partner survey respondents were asked if the barriers to achieving employment goals for SCCB consumers with the most significant disabilities are different from the overall population. All five individuals who responded to this question indicated that the barriers are different. They were asked to identify the top three barriers to employment for consumers with the most significant disabilities. Three of them ranked employers’ perceptions and disability-related transportation issues among the top three barriers, and two placed lack of education and training, disability-related accommodations and social skills in the top three. Barriers cited by one respondent each included other transportation issues, health issues other than mental health and substance abuse, lack of available jobs, job skills and job search skills, and language barriers.

**Staff survey: Barriers to Employment.** Staff survey respondents were asked if the barriers to accessing SCCB services experienced by individuals with the most significant disabilities are different from the overall population. Forty-five individuals responded to this question and 32 (71%) indicated that the barriers are different while 13 (29%) indicated that the barriers are not different. Thirty-one of the 32 staff who indicated that the barriers are different identified the top three barriers as displayed in Table 16.

Table 16

*Top Three Barriers to Achieving Employment Goals for Individuals with Most Significant Disabilities – Staff Survey*

|  |  |  |
| --- | --- | --- |
| **Staff: Top three reasons consumers with most significant disabilities find it difficult to achieve employment goals** | **N** | % |
| Employers' perceptions about employing people with disabilities | 16 | 52 |
| Not having job skills | 15 | 48 |
| Disability-related transportation issues | 12 | 39 |
| Not having education or training | 12 | 39 |
| Not enough jobs available | 6 | 19 |
| Poor social skills | 3 | 10 |
| Other transportation issues | 3 | 10 |
| Not having job search skills | 4 | 13 |
| Lack of help with disability-related personal care | 5 | 16 |
| Not having disability-related accommodations | 5 | 16 |
| Mental health issues | 2 | 6 |
| Perceptions regarding impact of income on benefits | 4 | 13 |
| Other health issues | 5 | 16 |
| Language barriers | 0 | 0 |
| Convictions for criminal offenses | 1 | 3 |
| Housing issues | 0 | 0 |
| Childcare issues | 0 | 0 |
| Substance abuse issues | 0 | 0 |

The barriers most commonly identified by staff for SCCB consumers with most significant disabilities to achieve employment goals are employers' perceptions about employing people with disabilities, not having job skills, lack of transportation and not having enough education or training.

**Partner Survey: Barriers to Accessing SCCB Services.** Partner survey respondents were asked if the barriers to accessing SCCB services experienced by individuals with the most significant disabilities are different from the overall population. Three of the five respondents to this question indicated that the barriers are different while the other two indicated that the barriers are not different. The three who indicated that barriers are different for SCCB consumers with the most significant disabilities were asked to identify the top three barriers to accessing SCCB services for consumers with the most significant disabilities. They were unanimous in placing slow service delivery among their top three. Two cited limited accessibility of SCCB via public transportation and SCCB staff not being responsive. One individual each identified the following barriers: SCCB staff do not meet clients in their communities, difficulty accessing training or education programs, inadequate assessment services, language barriers, inadequate disability-related accommodations and other challenges related to SCCB physical location.

**Staff Survey: Barriers to Accessing SCCB Services.** Staff survey respondents were asked if the barriers to accessing SCCB services by individuals with the most significant disabilities are different from the overall population. Forty-six individuals responded to this question and 22 (48%) indicated that the barriers are different while 24 (52%) indicated that the barriers are not different. Twenty of the 22 individuals who indicated that the barriers are different for SCCB consumers with the most significant disabilities identified the top three barriers to accessing SCCB services for consumers with the most significant disabilities. Table 17 details their responses to this question.

Table 17

*Barriers to Accessing SCCB Services for Individuals with Most Significant Disabilities – Staff Survey*

|  |  |
| --- | --- |
| **Staff: Top three barriers to accessing SCCB services - MSD** | **N** |
| Limited accessibility to SCCB via public transportation | 10 |
| Slow service delivery | 8 |
| Difficulties accessing training or education programs | 8 |
| Inadequate disability-related accommodations | 8 |
| Inadequate assessment services | 8 |
| Other challenges related to the physical location of the SCCB office | 5 |
| Difficulties completing the Individualized Plan for Employment | 2 |
| SCCB staff do not meet clients in the communities where they live | 2 |
| Difficulties completing the SCCB application | 1 |
| Language barriers | 0 |
| Other | 3 |

The most commonly identified barriers to accessing SCCB services identified by respondents to the staff survey were limited accessibility of SCCB by public transportation, slow service delivery, difficulties accessing training or education programs, inadequate assessment services and inadequate disability-related accommodations.

**Summary of Survey Results (staff and partners)**

* *Barriers to employment* - Staff and partners were in agreement that employment barriers are different for individuals with most significant disabilities than for the general population. The barriers they identified as presenting the greatest challenges included employers’ perceptions, lack of education and training and job skills, and geographic access to services and jobs.
* *Barriers to SCCB services* - Partners and staff were in agreement that geographic access and slow service delivery are the biggest barriers to SCCB services for individuals with the most significant disability. Following these barriers, partner respondents also identified unresponsive staff as a challenge, whereas staff identified difficulty accessing education and training programs.

**Recommendations**

The following recommendations are offered to SCCB based on the results of the research on the area of **Needs of Individuals with the Most Significant Disabilities, including their need for Supported Employment**:

* SCCB should conduct an individual review of cases coded ‘most significant disability’ and determine what services and competencies are needed to improve outcomes.
* SCCB should consider developing partnerships with other state agencies, including SCVRD, to determine if individuals with most significant disabilities who are also blind and visually impaired can be served in existing programs.
* SCCB should consider modification of its programs at EBMRC to address the needs of individuals with most significant disabilities. Specifically, SCCB should investigate how Supported Employment and Customized Employment can be integrated into EBMRC’s programs.
* SCCB should consider assigning a program administrator the responsibilities of reaching out to individuals with the most significant disabilities and overseeing services that meet their needs. Once SCCB either creates or gains access to Supported Employment programs, these programs should have administrative oversight as well.
* In compliance with WIOA, SCCB should investigate the options for creating Customized Employment programs that would serve individuals with the most significant disabilities. While there are several organizations around the country that provide training in Customized Employment, it should be noted that training alone will not increase SCCB’s capacity to serve individuals with most significant disabilities. Extensive planning, partnership development, policy and fee structure development are also needed. SCCB should develop an extensive strategic plan around building capacity for serving this population.

**SECTION 3**

**NEEDS OF INDIVIDUALS WITH BLINDNESS AND VISION IMPAIRMENTS FROM DIFFERENT ETHNIC GROUPS, INCLUDING NEEDS OF INDIVIDUALS WHO HAVE BEEN UNSERVED OR UNDERSERVED BY THE VR PROGRAM**

 Section 3 identifies the needs of individuals with blindness and vision impairments from different ethnic groups, including needs of individuals who have been unserved or underserved by SCCB.

***Recurring Themes Across all Data Collection Methods***

The following themes emerged across all data collection methods in the area of the needs of individuals with blindness and vision impairments from different ethnic groups, including individuals who have been unserved or underserved by the VR program:

*Indicators*

* Hispanic or Latino residents make up 5% of the state’s general population. South Carolina is one of only four states in the country to see an over 150% increase (specifically 167%, the 2nd highest in the nation) in the Hispanic population from 2000-2013.
* 68% of SC residents are White.
* African-Americans make up 28% of the general population.
* According to 2014 data from the Kaiser Family Foundation, poverty rates for minority populations in South Carolina were higher than for Whites: the poverty rate for Whites was 12% in contrast to 27% for African-Americans, and 17.5% for Hispanics. 2015 data from Talk Poverty indicates even higher rates for minority populations: 28.8% for African-Americans, 32.5% for Latinos, and 30.8% for Native Americans.

*Agency performance*

* The 2% Hispanic or Latino consumers served by SCCB in 2012-2014 somewhat underrepresents the 5% in the state’s general population and it is not clear whether SCCB has a plan to address the 167% upward trend in this population.
* The 44% White consumers served by SCCB are significantly underrepresentative of the 68% in the general population.
* African-Americans are the one group that occurs at a significantly higher rate among SCCB consumers (54%) than the general population (28%).

*Gaps*

* Individuals with blindness and vision impairments who are Hispanic may be underserved by SCCB.
* Individuals who have deaf-blindness may be underserved by SCCB.
* The needs of individuals with blindness and vision impairments from different ethnic groups are similar to the needs of other SCCB consumers.
* Lack of geographic access to employment and SCCB programs is especially problematic for individuals living in rural areas who are among those likely to be underserved.
* A strong relationship between ethnicity and poverty in South Carolina may contribute to the degree that ethnic populations are underserved.

***Results by Data Collection Method***

Needs of Individuals from Different Ethnic Groups, including Unserved or Underserved:

**Quantitative Data on Barriers and Improvements**

**National and/or Agency Specific Data Related to the Needs of Individuals with Blindness and Vision Impairments from Different Ethnic Groups, Including Needs of Individuals who have been Unserved or Underserved by SCCB**

The majority of respondents to the staff and partner surveys conducted by the CSNA team were of the opinion that the barriers to employment and the barriers to services are no different for South Carolina’s various ethnic groups than for the general population.

Table 18 identifies the ethnicity of consumers served by SCCB for the three year period of this report. The number of consumers by ethnicity is identified along with the rate of that ethnicity in the total population of SCCB consumers. For 2014, that rate is then compared to the rate of that ethnicity occurring in South Carolina in general to determine if SCCB is serving different ethnicities at the rate that they occur generally in South Carolina.

Table 18

*Consumers by Ethnicity*

|  |  |  |  |
| --- | --- | --- | --- |
| **Ethnicity** | **2012** | **2013** | **2014** |
| Asian | 1 | 1 | 4 |
| % of all consumers | 0% | 0% | 1% |
| % in South Carolina |  |  | 2% |
| Difference |  |  | -1% |
| American Indian or Alaskan Native | 4 | 1 | 1 |
| % of all consumers | 1% | 0% | 0% |
| % in South Carolina |  |  | 0% |
| Difference |  |  | 0% |
| Black or African American | 323 | 300 | 222 |
| % of all consumers | 55% | 55% | 54% |
| % in South Carolina |  |  | 28% |
| Difference |  |  | 26% |
| Hispanic or Latino | 11 | 12 | 8 |
| % of all consumers | 2% | 2% | 2% |
| % in South Carolina |  |  | 5% |
| Difference |  |  | -3% |
| Native Hawaiian or Pacific Islander | 1 | 1 | 0 |
| % of all consumers | 0% | 0% | 0% |
| % in South Carolina |  |  | 0% |
| Difference |  |  | 0% |
| White | 239 | 232 | 179 |
| % of all consumers | 41% | 42.0% | 44% |
| % in South Carolina |  |  | 68% |
| Difference |  |  | -24% |

Table 18 indicates that individuals who are Asian, American Indian, and Native Hawaiian or Pacific occur in very small percentages in the general population of South Carolina, and are likewise reflected in very small percentages among SCCB consumers. The 2% Hispanic or Latino consumers served somewhat underrepresents the 5% in the state’s general population, and this population is increasing at one of the fastest rates in the country. The 44% White consumers served are significantly underrepresentative of the 68% in the general population. African-Americans are the one group that occurs at a significantly higher rate among SCCB consumers (54%) than the general population (28%). It is important to understand that there are many reasons why a particular ethnic group does or does not require or seek out services from SCCB at the same rate as they occur in the general population. It is not possible to identify what those reasons might be in this report.

There are no tribal VR programs in South Carolina at this time, although there is one in neighboring North Carolina. The Catawba tribe is located in Rock Hill South Carolina (2010 Census data indicates a population of 841).

Poor and rural populations tend to be underserved by the EBMRC where most SCCB programming occurs. 50% of all EBMRC attendees are from Richland and adjacent counties. In 2013, thirty-five of South Carolina’s 46 counties had poverty rates above the state’s already higher-than-national poverty rate of 18.5 percent. Only 3% of Center attendees come from the state’s ten lowest median income counties.

Needs of Individuals from Different Ethnic Groups, including Unserved or Underserved:

**Qualitative Data on Barriers and Improvements**

**Focus Groups and Key Informant Interviews** The following themes emerged on a recurring basis from the focus groups and individual interviews conducted for this assessment in the area of the needs of individuals with disabilities from different ethnic groups, including needs of individuals who have been unserved or underserved by the VR program:

* Many of the individuals interviewed for this assessment could not think of any population that was underserved by SCCB. The organization was characterized by some as serving any individual with blindness or a vision impairment who is interested in applying.
* In contrast, other key informants identified Hispanics, Native Americans and Asians among those populations that are underserved.
* Individuals who have deafness and blindness were identified as potentially underserved. Although the numbers of deaf-blind individuals were characterized as small, there are very few SCCB staff identified as trained to work with this population. In addition, if an individual is deaf-blind, and they need hearing aids, the purchase must be made through the general VR agency, which was repeatedly characterized as being a slow and cumbersome process.
* Some of the more rural areas of South Carolina do not access services from SCCB. Many reasons were expressed for this including a lack of trust in the government, a reliance on family, and a general tendency towards isolationism. Geographic access is a major barrier in these areas, resulting in the need for SCCB counselors to go to the homes of these individuals to provide services. In addition, there are few local resources and even Internet connectivity can be a challenge in some remote areas. In some cases, staff indicated they had to travel great distances in order to see one client. Staff also expressed concern for their personal safety in some situations.

**Survey Results by Type**

 **Partner survey: Employment Barriers.** Partner survey respondents were asked if the barriers to achieving employment goals for SCCB consumers who are racial or ethnic minorities are different from the overall population. Two of the five individuals who responded to this question indicated that the barriers are different while the remaining three indicated that the barriers are not different. The two individuals who indicated that the barriers are different for SCCB consumers who are racial or ethnic minorities were asked to identify the top three barriers to employment for these individuals. One each of the following barriers was ranked in the top three by these individuals: Lack of education and training, job skills and available jobs, as well as employer perceptions, language barriers and disability-related transportation issues.

**Staff Survey: Employment Barriers.** Staff survey respondents were asked if the barriers to achieving employment goals for SCCB consumers who are racial or ethnic minorities are different from the overall population. Forty-one individuals responded to this question and 13 (32%) indicated that the barriers are different while 28 (68%) indicated that the barriers are not different. Seventeen individuals identified top barriers to employment for consumers who are racial or ethnic minorities. Table 19 details their responses to this question.

Table 19

*Barriers to Achieving Employment Goals for Individuals Who are Racial or Ethnic Minorities – Staff Survey*

|  |  |  |
| --- | --- | --- |
| **Staff: Top three reasons consumers find it difficult to achieve employment goals - Ethnic Minorities** | **N** | **%** |
| Not having education or training | 11 | 65 |
| Not having job skills | 9 | 53 |
| Employers' perceptions about employing people with disabilities | 8 | 47 |
| Not having job search skills | 4 | 24 |
| Disability-related transportation issues | 3 | 18 |
| Not enough jobs available | 3 | 18 |
| Other transportation issues | 3 | 18 |
| Poor social skills | 2 | 12 |
| Perceptions regarding impact of income on benefits | 2 | 12 |
| Lack of help with disability-related personal care | 2 | 12 |
| Not having disability-related accommodations | 1 | 6 |
| Language barriers | 1 | 6 |
| Convictions for criminal offenses | 1 | 6 |
| Other health issues | 0 | 0 |
| Childcare issues | 0 | 0 |
| Housing issues | 0 | 0 |
| Mental health issues | 0 | 0 |
| Substance abuse issues | 0 | 0 |

SCCB staff most frequently identified lack of education, training and job skills, as well as employers’ perceptions about employing people with disabilities as the top three barriers to achieving employment goals. Not having job search skills was cited with the next highest frequency.

**Partner Survey: Barriers to Accessing SCCB Services.** Partner survey respondents were asked if the barriers to accessing SCCB services by individuals who are racial or ethnic minorities are different from the overall population. Two of the five individuals responding to this question indicated that the barriers are different while the other three indicated that the barriers are not different. One respondent each cited three barriers: inadequate access to assessment services, slow service delivery and staff not meeting clients in the communities where they live.

**Staff Survey: Barriers to Accessing SCCB Services.** Staff survey respondents were asked if the barriers to accessing SCCB services by individuals who are racial or ethnic minorities are different from the overall population. Thirty-eight individuals responded to this question and 7 (18%) indicated the barriers are different than for the general population. Twelve respondents identified the top three barriers to accessing SCCB services for consumers who are racial or ethnic minorities. Table 20 details their responses to this question.

Table 20

*Barriers to Accessing SCCB Services for Individuals Who Are Racial or Ethnic Minorities – Staff Survey*

|  |  |
| --- | --- |
| **Staff: Top three barriers to accessing SCCB services - Ethnic Minorities** | **N** |
| Limited accessibility to SCCB via public transportation | 8 |
| Difficulties accessing training or education programs | 6 |
| Inadequate disability-related accommodations | 6 |
| Other challenges related to the physical location of the SCCB office | 3 |
| Slow service delivery | 3 |
| Inadequate assessment services | 2 |
| Difficulties completing the SCCB application | 1 |
| Difficulties completing the Individualized Plan for Employment | 1 |
| SCCB staff do not meet clients in the communities where they live | 0 |
| Language barriers | 0 |
| Other | 3 |

The most commonly identified barriers to accessing SCCB services identified by respondents to the staff survey included limited accessibility to SCCB via public transportation, difficulty accessing training and education programs and inadequate disability-related accommodations.

**Summary of Survey Results** (staff and partners) - Both groups tended to think barriers for this population are no different than for the general population. They were in agreement on barriers to employment and SCCB services. Their responses included:

* *Barriers* to *employment* - lack of education and training, job skills, employer perceptions and lack of transportation
* *Barriers to SCCB* services - lack of transportation, limited access to education and training, and limited disabilities accommodations

**Recommendations**

The following recommendations are offered to SCCB based on the results of the research in the area of **Needs of Individuals with Disabilities from Different Ethnic Groups, including needs of Individuals who have been Unserved or Underserved by the VR Program**:

* Given recent population trends, SCCB should consider performing targeted outreach to the growing Hispanic population in South Carolina by contacting community programs serving Hispanics and meeting potential consumers in their communities.
* Since there are no tribal VR programs in South Carolina and there is a small Catawba tribe, SCCB should consider outreach to them in order to address any identified needs.
* SCCB should consider utilizing the services of workforce partners, as well as the Targeted Populations Technical Assistance Center, for assistance in developing effective outreach as well as modifications of services, especially at EBMRC, to accommodate underserved populations.
* SCCB should incorporate into its service delivery system strategies to more effectively reach and serve individuals living in the extensive rural corridors of the state. Expanded use of community rehabilitation providers or increased scope of services of itinerant staff are two possibilities.
* Given the role transportation plays in improving geographic access for all underserved populations, SCCB should advocate with workforce partners and transportation providers to understand the scope of the issues and find strategic solutions.

**SECTION 4**

**NEEDS OF INDIVIDUALS WITH BLINDNESS AND VISION IMPAIRMENTS SERVED THROUGH OTHER COMPONENTS OF THE STATEWIDE WORKFORCE INVESTMENT SYSTEM**

Information for this section was gathered by this assessment in the area of the needs of individuals with blindness and vision impairments served through other components of the statewide workforce development system.

***Recurring Themes Across all Data Collection Methods***

The following themes emerged in the area of the needs of individuals with blindness and vision impairments served through other components of the statewide workforce development system:

*Indicators*

* There are 21 America’s Job Centers (AJCs) in South Carolina.
* Key informants report that consumers have mixed awareness and utilization of AJCs, and mixed levels of success.
* AJCs in South Carolina do not do a good job of serving individuals with blindness and vision impairments.
* Although the AJCs are accessible, the technology is frequently out of date and the AJC staff do not know how to operate the technology;

*Agency performance*

* The relationship between SCCB and the AJCs, although friendly, is primarily one of referral.
* Field office relationships with AJCs are mixed.
* SCCB is working with WIOA core partners to ensure that blind and visually impaired individuals seeking employment can access services through the one-stop centers.

*Gaps*

* There is considerable room to develop the partnership between SCCB and the greater workforce development system.

***Results by Data Collection Method***

Needs of Individuals Served by Other Components of the Workforce System:

**Quantitative Data on Barriers and Improvements**

* There are AJCs (SC Works Centers) in 21 locations in South Carolina, generally with two centers in each workforce area.
* Numerous studies document the challenges of AJCs nationwide in meeting the employment needs of individuals with disabilities. These can range from geographic inaccessibility to lack of specialized programming or staff expertise, to outdated or inaccessible assistive technology.
* Thirty of 99 individual survey respondents had tried to access AJC services. While more specific data on AJC utilization rates for South Carolina residents with blindness and vision impairments was not available, key informant data would suggest that utilization rates are not high.
* SCCB’s section of the draft Unified Plan states that the agency “is working with WIOA core partners to ensure that blind and visually impaired individuals seeking employment can access services through the one-stop centers as part of the Statewide Workforce Development System.”

Needs of Individuals Served by Other Components of the Workforce System:

**Qualitative Data on Barriers and Improvements**

**Focus Groups and Key Informant Interviews** The following information was gathered from the individuals interviewed for this assessment in the area of the needs of individuals with blindness and vision impairments served through other components of the Statewide Workforce Development System:

* The relationship between SCCB and America’s Job Centers (AJCs), known in South Carolina as SC Works, across the state was described by key informants as positive, but AJCs were not characterized as serving people with disabilities well, and this was particularly true of individuals with blindness and vision impairments. The relationship between the AJCs and SCCB was characterized by most as primarily a relationship of referral. One field staff member who met clients at the local AJC reported that the AJC manager “asked what I was doing there.” Another reported SCCB expects staff to write up their own MOUs with the local AJC.
* When an individual with blindness or a vision impairment goes to an AJC, they are likely to encounter assistive technology that does not work properly or is not up to date, and AJC staff who do not know how to operate the technology.

**Individual Survey**

Respondents to the individual survey were presented with several questions pertaining to their experiences with AJCs. The first question asked respondents if they ever tried to use the services of America’s Job Centers. Of those who replied to the question 30 (31%) indicated that they had tried to use the services of AJCs and 68 (69%) indicated that they had not to tried to use the services.

Respondents were asked if they experienced any difficulties with the physical accessibility of the building. Of those who responded, one (3%) indicated that they experienced difficulties, while 29 (97%) indicated that they did not have any difficulties with the physical accessibility of the building. Respondents were asked if they had any difficulty accessing the programs at the center. Of those who responded to the question, 11 (37%) indicated that they had difficulty and 19 (63%) indicated that they had no difficulty accessing the programs at the center. Respondents were asked if they went to the center to get training. Of those who responded, five (17%) indicated that they went to the center to get training and 25 (83%) indicated that they did not go to the center to get training.

Of the five respondents who said they sought training at AJCs two indicated they received the training they were seeking. Six individuals completing the survey indicated that the training they received from AJCs did not result in employment.

Respondents were asked if they went to AJCs to find a job. Twenty-eight individuals responded to this question, with 18 (64%) indicating that they went to the center to find a job and 10 (36%) indicating that they did not go to the center to find a job. Respondents were then asked if AJCs helped them to find employment. Twenty individuals responded to this question, with four (20%) indicating that they did get help finding employment and 16 (80%) indicating that they did not get help finding employment.

Thirty-one respondents answered a question asking them to describe their opinion of the helpfulness of the staff at AJCs. Eight (26%) described the staff as “Very helpful”, 15 (48%) described the staff as “Somewhat helpful”, and eight (26%) described the staff as “Not helpful.”

Thirty-one respondents answered a question asking them to describe their opinion of the value of the services at the center. Eight (26%) described the services as “Very valuable”; 16 (52%) described the services as “Somewhat valuable”; and seven (23%) described the services as “Not valuable.”

**Recommendations**

The following recommendations are offered to SCCB based on the results of the research in the area of **Needs of Individuals with Disabilities served through other Components of the Statewide Workforce Development System**:

* Under the South Carolina Unified State Plan, there are several programs that SCCB could access that would address many of the issues highlighted in this report. They include programs that provide internships for youth, efforts designed at employer outreach, Project Search serving youth with developmental or mental disabilities, and program serving targeted populations including ex-offenders, veterans and other disadvantaged populations.
* SCCB should work closely with SC Works to identify a small number of pilot cases that will include shared funding of training by SCCB and these centers. These cases can demonstrate how collaborative planning can maximize resources, improve outcomes for both organizations, and provide the consumers with increased support. For instance, if an individual with blindness or a vision impairment wanted to go to a training program to become an IT Specialist, then the AJC could fund a part of the training with an ITA, and SCCB could fund part of the training with case service dollars, or provide AT, transportation, or other needed support services. The case becomes a shared case with both entities and the consumer benefits from the employment experience of the AJC and the disability experience of SCCB.
* SCCB should offer its technical expertise to the SC Works centers to insure they are fully accessible and include the latest and most relevant assistive technology. In addition, SCCB should work with SC Works staff to provide inservice training and support in the the use of assistive technology. SCCB and the SC works centers should regularly provide cross-training to each other on the services they provide and the required processes that each organization must go through. This occurs infrequently at the current time and staff turnover and the passage of time requires more frequent training.
* SCCB should partner with the Social Security Administration and provide training to w the SC Works Partnership Plus model that allows SCCB to “hand-off” an SSA beneficiary in the Ticket to Work program to the SC Works center as the Employment Network (EN). This is a rarely used model that can bring resources to the SC Works Center and provide support to individuals with blindness and vision impairments for several years.

**SECTION 5**

**NEEDS OF INDIVIDUALS IN TRANSITION**

The reauthorization of the Rehabilitation Act under WIOA places a greater emphasis on the provision of transition services to youth and students with disabilities, especially their need for pre-employment transition services (Pre-ETS). The Notice of Proposed Rulemaking for 34 CFR 361 and 363 released recently by RSA indicates that the comprehensive statewide needs assessment must include an assessment of the needs of youth and students with disabilities in the State, including their need for Pre-ETS. The project team investigated the needs of youth and students with blindness and vision impairments in this assessment and includes the results in this section.

***Recurring Themes Across all Data Collection Methods***

The following themes emerged in the area of the needs of individuals in transition:

*Indicators*

* In 2014, 2% of South Carolina residents under the age of 18 had blindness or vision impairment. In 2013, there were 12,700 individuals with blindness or vision impairment aged 20 and under.
* 57% of South Carolina residents with disabilities under the age of 18 live in poverty.
* 35% of South Carolina residents with disabilities attained a level of education equivalent to a high school diploma, and 12% attained a level of education equivalent to a college degree.

*Agency performance*

* From 2012 to 2014, the rate of transition-age youth served by SCCB was 50% or more lower than the national average for Blind agencies.
* SCCB reported zero successful outcomes for transition age youth over the 2012-2014 reporting period.
* In its 2010 monitoring report, RSA recommended that SCCB expand its array of programming, including services for transition-age youth. The agency responded that transition programming would be expanded, but this had not been accomplished as of the end of 2015.

*Gaps*

* There is need for clarity and understanding among the education community in South Carolina as to what services SCCB can and will provide. This goes along with the need for targeted outreach by SCCB.
* There is a need for increased SCCB presence and involvement in mainstream schools as well as the state school for deaf/blind.
* There is an increasingly high percentage of youth with blindness and vision impairments with multiple disabilities. The needs of these individuals can be complex and require creative solutions delivered through a network of partners and stakeholders.
* Youth who live in rural settings are disadvantaged in accessing services both in and out of school.
* Youth in transition coming from a poor and disadvantaged background, and their families, need both access to advocacy services and training on self-advocacy to increase their knowledge about and utilization of necessary services.
* There is a need for IL services for youth with blindness and vision impairment, especially orientation and mobility. School systems in South Carolina may lack adequate resources to provide this.
* Teachers in the schools need support in utilizing assistive technology to better assist students.

***Results by Data Collection Method***

Needs of Individuals in Transition:

**Quantitative Data on Barriers and Improvements**

**National and/or Agency Specific Data Related to the Needs of Individuals in Transition**

The 2010 RSA Monitoring Report recommended that SCCB expand its array of programming, especially around transition. Table 21 identifies the number of transition-age individuals served by SCCB over the 2012-2014 period.

Table 21

*Transition Consumers Served by SCCB*

|  |  |  |  |
| --- | --- | --- | --- |
| **Applications** | 2012 | 2013 | 2014 |
| Transition Age Youth | 20 | 25 | 10 |
| % of total | 3% | 5% | 2% |
| **Transition Consumers** |   |   |   |
| Number | 16 | 23 | 21 |
| + or - from previous year |  | 7 | -2 |
| % of agency total | 5% | 5% | 7% |
| Ave. Time from Eligibility to Plan (days)  | 103 | 5 | 4 |
| Ave. Time from Eligibility to Plan (days) Adults age 18-64 | 33 | 33 | 29 |
| National Ave. for Blind Agencies | 13.1% | 14.0% | 13.6% |
| Rehabilitation Rate | 0% | 0% | 0% |
| Overall SCCB Rehab Rate | 72% | 58% | 49% |
| Difference | -72% | -58% | -49 |
| Average Cost per case | $422 | $4,890 | $34 |
| Overall SCCB Cost per case | $7 | $613 | $1,088 |
| Difference | $415 | $4,277 | -$1,054 |

**Observations Based on the Data**

Table 21 indicates that very few transition age individuals with blindness and vision impairments applied for SCCB services from 2012-2014, representing more than 5% of total SCCB applicants, and diminishing to 2% (10 individuals) in 2014. Most of those applicants became actual consumers of SCCB and interestingly, the reported number served in 2014 was more than double the number of applicants for that year (perhaps suggesting carryover from 2013). The rate of transition-age youth served by SCCB was approximately 50% or more lower than the national average for Blind agencies. The average time for the development of an IPE for transition-age youth varied significantly from the overall population of SCCB consumers, but dropped precipitously from 103 days in 2012 to 5 and 4 days in 2013 and 2014, respectively.

The rehabilitation rate of transition-age youth served by SCCB was zero per cent in all three years. This is an area of some concern given the importance of transition services in general and the recent WIOA requirements for increased transition services. Per case cost figures varied significantly from one year to the next and from overall per case costs, which could be a function of the exceedingly low number of transition cases served.

Needs of Individuals in Transition:

**Qualitative Data on Barriers and Improvements**

**Key Informant Interviews** The following recurring themes emerged among the individuals interviewed for this assessment in the area of the needs of individuals in transition:

* There is limited outreach informing youth and families about SCCB services. One consumer said, *“SCCB failed me. I didn't know college was an option. I struggled on my own in tech school, dropped out; randomly learned about SCCB resources. I wish I’d known earlier when my vision was better; could have started sooner.”*
* Many youth lack the education required for a job or career. A partner agency observed, *“Not every kid can get a high school diploma. There’s still a need for GED; I’m not sure why SCCB discontinued their program.”*
* There is a gap in the amount and quality of work experience opportunities available for youth. This includes summer jobs, internships, mentoring opportunities, job shadowing, etc.
* Youth with disabilities have limited access to career counseling or exposure to other experiences from school or SCCB transition counselors. One education partner observed, *“I’ve had lots of families not go to summer camps or technology days because they’re only held in Columbia.”*
* Transition services to youth with most significant disabilities are extremely limited. One educator observed, *“There are blind youth with behavioral concerns, cognitive issues. Without support (e.g., job coaches) they’re not going to sustain the gains they've made.”*

**Focus Group Results**

* There is a strong need for parent advocacy training. Partners noted that parent/family involvement increases the likelihood of success for the student. Parents from families living in poverty are less likely to become involved and advocate for their child. The combination of rural location and poverty further decreases the likelihood of parental involvement.
* There is a compelling need for SCCB counselors to develop effective working relationships with the Teachers of Visually Impaired who have a strong connection to the students, understanding their needs both inside and outside of school. Strengthening this connection would allow SCCB Transition Counselors to understand and respond to the needs of students with visual disabilities.
* Partners at the state School for the Deaf and Blind expressed a need for increased presence of SCCB staff on campus to assist school staff in providing career counseling and other services to students.
* There is a need to update Memoranda of Understanding (MOU) to reflect a strategic partnership between education and SCCB. These MOUs should be outcome oriented and reflect the Pre-ETS requirements under WIOA.

**Survey Results by Type**

**Partner survey: Barriers to achieving goals for youth in transition.** Partner survey respondents were asked if the barriers to achieving employment goals for SCCB consumers who are transition-age youth are different from the overall population. Five individuals responded to this question, with three indicating that the barriers are different. Asked to identify the top three barriers to employment for consumers who are transition-age youth, they were unanimous in identifying slow service delivery as one of the top three barriers. Two cited limited accessibility via public transportation among the top three. One each of other barriers rated among the top three included SCCB staff not meeting clients in the communities where they live, agency understaffing, inadequate disability-related accommodations and difficulties accessing training or education programs.

**Staff survey: Barriers to achieving goals for youth in transition.** Staff survey respondents were asked if the barriers to achieving employment goals for SCCB consumers who are transition-age youth are different from the overall population. Forty-one individuals responded to this question and 23 (56%) indicated that the barriers are different while 18 (44%) indicated that the barriers are not different. Twenty-six individuals who indicated that the barriers are different identified the top three barriers to employment for consumers who are transition-age youth. Table 22 details their responses to this question.

Table 22

*Reasons Transition-Age Consumers Find it Difficult to Achieve Employment Goals – Staff Survey*

|  |  |  |
| --- | --- | --- |
| **Staff: Top three reasons consumers find it difficult to achieve employment goals - Transition-Age Youth** | **N** | **%** |
| Not having job skills | 16 | 62 |
| Not having education or training | 13 | 50 |
| Poor social skills | 9 | 35 |
| Not having job search skills | 8 | 31 |
| Employers' perceptions about employing people with disabilities | 6 | 23 |
| Not enough jobs available | 5 | 19 |
| Other transportation issues | 4 | 15 |
| Disability-related transportation issues | 2 | 8 |
| Perceptions regarding impact of income on benefits | 2 | 8 |
| Not having disability-related accommodations | 1 | 4 |
| Lack of help with disability-related personal care | 1 | 4 |
| Health issues other than mental health or substance abuse | 1 | 4 |
| Other | 4 | 15 |

Not having job skills, education and training were most frequently identified among the top three barriers by SCCB staff respondents. Other barriers commonly identified for youth in transition included poor social skills and lack of job search skills.

**Partner survey: Barriers to accessing SCCB services for youth in transition.** Partner survey respondents were asked if the barriers to accessing SCCB services experienced by transition-age youth are different from the overall population. Five individuals responded to this question, with three indicating the barriers are different. These three respondents cited lack of job skills and disability-related transportation among the top three barriers to accessing SCCB services for consumers who are transition-age youth. Two respondents rated lack of education or training, job search skills and social skills to be among the top three barriers. One respondent each rated employer perceptions, not enough jobs, and lack of help with disability-related health care to be among the top three barriers.

**Staff survey: Barriers to accessing SCCB services for youth in transition.** Staff survey respondents were asked if the barriers to accessing SCCB services by transition-age youth are different from the overall population. Forty-one individuals responded to this question and 17 (42%) indicated that the barriers are different while 24 (59%) indicated that the barriers are not different. Fifteen individuals identified the top three barriers to accessing SCCB services for consumers who are transition-age youth. Table 23 details their responses to this question.

Table 23

*Top Three Reasons Transition-Age Consumers Find it Difficult to Access SCCB Services – Staff Survey*

|  |  |
| --- | --- |
| **Staff: Top three barriers to accessing SCCB services - Transition-Aged Youth** | **N** |
| Slow service delivery | 5 |
| Inadequate assessment services | 5 |
| Inadequate disability-related accommodations | 5 |
| Other challenges related to the physical location of the SCCB office | 5 |
| Limited accessibility to SCCB via public transportation | 4 |
| SCCB staff do not meet clients in the communities where they live | 2 |
| Difficulties accessing training or education programs | 2 |
| Difficulties completing the Individualized Plan for Employment | 2 |
| Difficulties completing the SCCB application | 1 |
| Language barriers | 0 |

The challenges cited most frequently among the top three barriers related to the physical location of the SCCB office, including limited accessibility via public transportation. These were followed by slow service delivery, inadequate assessment services and inadequate disability-related accommodations.

**Summary of Survey Results**

* *Barriers to employment* - Partners identified slow service delivery; staff identified lack of job skills, education and training.
* *Barriers to SCCB services* - Partners identified lack of job skills, transportation and education and training; staff identified geographic access, slow service delivery, lack of quality assessments and lack of accommodations.

**Recommendations**

The following recommendations are offered to SCCB based on the results of the research in the area of **Needs of Individuals in Transition**:

* SCCB should consider developing a network of consumers who have been closed successfully rehabilitated as mentors to young people with blindness and vision impairments. These mentors can provide inspiration and advice to young people on how to be successful in postsecondary education and work and can provide them with high expectations. SCCB can help pair current consumers with these mentors and recruit future mentors from the ranks of individuals who have become successfully employed.
* The importance of self-advocacy training has been cited above for individuals with blindness and vision impairments. This training is especially important for youth. Similar services should also be made available for family members.
* SCCB should consider expanding the Summer Internship Program at EMBRC. This program has demonstrated positive outcomes but on a limited basis. SCCB should consider duplicating this program in other parts of the state to increase access. Collaborating with other workforce partners would also provide a means of integrating this program in the general population. SCCB should also consider bringing in business partners not only to increase the exposure and buy-in of the business community but also to build relationships that lead to internship and other work related outcomes for youth in transition.
* SCCB should develop programs that provide outreach, information and resources to youth with disabilities, their families and other stakeholders. SCCB should be considered a statewide leader in coalescing partnership networks dedicated to providing the necessary resources that lead to positive employment opportunities and outcomes.
* SCCB should work in partnership with the higher education system and the secondary school system in South Carolina to create or replicate programs for youth with blindness and vision impairments who are college-bound to live for a few weeks in the summer on a college campus and to be exposed to college life. Programs like this would build their IL and social skills and reduce anxiety about attending college. It also provides an opportunity for SCCB and the student to identify the needed supports for the individual to attend college, which works to reduce the dropout rate.

**SECTION 6**

**NEED TO ESTABLISH, DEVELOP OR IMPROVE COMMUNITY REHABILITATION PROGRAMS IN SOUTH CAROLINA**

Section 6 identifies the need to establish, develop or improve community rehabilitation programs in South Carolina that serve individuals with blindness and vision impairments. The data in this section comes primarily from individual interviews and surveys.

***Recurring Themes Across all Data Collection Methods***

The following themes emerged in the area of the need to establish, develop or improve community rehabilitation programs serving individuals with blindness and vision impairments in South Carolina:

*Indicators*

* Existing providers serving individuals with blindness and vision impairments include ABVI (Goodwill), Federation for the Blind, ABLE, Lighthouse for the Blind and Association for the Blind. While these and other providers may offer employment-related services, it does not appear that any of them offer Supported Employment services.
* The majority of surveyed staff and partners were of the opinion that the current provider network is capable of meeting the VR needs of individuals with blindness and vision impairments in South Carolina.
* Employment-related resources identified by key informants as the most readily available from providers included assistive technology, job training, job search and other education services.

*Agency Performance*

* SCCB provides outreach and in-house services for consumers. These services are limited in scope and duration. Individuals who cannot access EBMRC receive less substantial services.
* SCCB has a history of not contracting or partnering with external providers for VR services. The RSA 2010 Monitoring Report recommended that SCCB expand vendor relationships in order to provide Supported Employment services.

*Gaps*

* In recent years SCCB has experienced a reduction in staff and office closures. The result is higher caseloads and counselors must travel greater distances to serve individuals who are unable to travel to services.
* There is a need for consumer access to more providers who can deliver a wide variety of independent living and employment services in the rural areas of South Carolina.
* Independent living skills are a major need of SCCB consumers. EBMRC meets this need for a small percentage of SCCB consumers, but many people would like to see the EMBRC expand its reach and provide low vision services.

***Results by Data Collection Method***

**Focus Groups and Key Informant Interviews**

The following recurring themes were identified in interviews and focus groups for this assessment in the area of the need to establish, develop or improve community rehabilitation programs serving individuals with blindness and vision impairments in South Carolina:

* Individuals who are being served by the agency expressed dissatisfaction with the speed of services as well as the frequency of contact from SCCB counselors. Individuals expressed frustration at the inability to get services in a timely manner. This may be the result of counselors’ heavy caseloads and large areas of coverage, which could be addressed by contracting for services with CRPs that have a range of relevant expertise and capacity to deliver services throughout the state.
* Individuals expressed a need to receive timely independent living skills and employment services where they live (instead of traveling to Columbia), which could be addressed by SCCB contracting for services with CRPs that have relevant IL expertise and capacity to deliver services throughout the state.
* A CRP in Charleston expressed the desire and the capacity to serve more SCCB consumers.
* Partners expressed the need for CRPs *“to reach those who can’t travel to Columbia.”*
* Staff expressed the need for *“other ways to access services we can’t offer in-house.”*

**Survey Results by Type**

**Partner Survey: Readily Available Services.** Partner survey respondents were provided with a checklist of services and asked to indicate which of the services are readily available in the area to individuals with a range of disabilities. While it is not possible to generalize from only five partner responses, the results are presented in Table 24 for illustrative purposes.

Table 24

*Readily Available Services – Partner Survey*

|  |  |
| --- | --- |
| **Partners: Which of the following services are readily available** | **Number Indicating Available** |
| Assistive technology | 5 |
| Job training services | 4 |
| Job search services | 4 |
| Other education services | 5 |
| Vehicle modification assistance | 1 |
| Other transportation assistance | 1 |
| Mental health treatment | 1 |
| Medical treatment | 1 |
| Substance abuse treatment | 1 |
| Income assistance | 1 |
| Personal care attendants | 0 |
| Benefits planning assistance | 0 |
| Housing | 0 |
| Health insurance | 0 |
| Other (my students get very little services from this agency) | 1 |

Assistive technology as well as job training, job search and other education services were most frequently listed as being readily available services to individuals with blindness and vision impairments in South Carolina. Vehicle modification and other transportation assistance were identified by one respondent each as being readily available, as were treatment services (medical, mental health and substance abuse), and financial assistance.

Partners were asked if they thought the current network of service providers is able to meet the rehabilitation needs of individuals with blindness and vision impairments in South Carolina. Of seven who responded, four indicated that the current network of providers is sufficient to meet the VR needs of individuals with blindness and vision impairments, while three indicated that the network of providers is not able to meet the needs. The survey asked why they are not able to meet the needs. Table 25 below contains the results of this question.

Table 25

*Why Current Providers Cannot Meet Needs – Partner Survey*

|  |  |
| --- | --- |
| ***Why Providers Cannot Meet Needs*** | ***N*** |
| Not enough providers available in area | 1 |
| Client barriers prevent successful interactions with providers | 1 |
| Low quality of provider services | 1 |
| Staff cutbacks | 1 |
| Unequal treatment – SCCB vs. VR-G | 1 |

**Partner Survey: Improvements to the Provider Network.** Partner survey respondents were also presented with an open-ended question that asked them what changes providers could make to help individuals with blindness and vision impairments achieve their employment goals. Three partners responded that the most important changes are:

● Meet the individuals where they are.

● Coordinate with the general VR agency, including in working with transition students.

● Improve community perception of employing individuals with disabilities.

**Staff Survey: Readily Available Services**. SCCB staff were provided with a checklist of services identical to the list given to providers and asked to indicate which of the services are readily available in the area to individuals with blindness and vision impairments. Table 26 illustrates the percentage of the 54 staff survey respondents who indicated that each service is readily available.

Table 26

*Readily Available Services – Staff Survey*

|  |  |
| --- | --- |
| **Staff: Which of the following services are readily available** | **Percent Indicating Available** |
| Assistive technology | 77.8 |
| Job search services | 70.4 |
| Job training services | 61.1 |
| Other education services | 53.7 |
| Other transportation assistance | 43.0 |
| Mental health treatment | 28.0 |
| Medical treatment | 28.0 |
| Substance abuse treatment | 14.8 |
| Income assistance | 9.0 |
| Benefits planning assistance | 7.4 |
| Vehicle modification assistance | 6.0 |
| Housing | 5.6 |
| Personal care attendants | 3.7 |
| Health insurance | 3.7 |

Sixty to seventy-eight per cent of staff indicated that assistive technology, job search and job training are readily available services. Also identified frequently as readily available services were other training services and transportation assistance.

Staff were asked if they feel that the current network of vendors is able to meet the VR needs of SCCB’s clients. Sixty-seven percent of staff indicated that the current network is able to meet the needs of consumers. Those who indicated the current network is not sufficient were asked the primary reasons that providers are not able to meet the need. Table 27 contains the responses to this question.

Table 27

*Primary Reasons that Vendors are not able to meet Consumers’ Needs*

|  |  |  |
| --- | --- | --- |
| **Staff: What are the primary reasons that vendors are generally unable to meet consumer's service needs?** | **N** | **Percent** |
| Not enough vendors available in the area | 8 | 57.1 |
| Client barriers prevent successful interactions with vendors | 6 | 42.9 |
| Low rates paid for services | 4 | 29.6 |
| Low quality of vendor services | 3 | 21.4 |
| Low levels of accountability for poor performance by vendors | 3 | 21.4 |
| Other (vendors needing more info/training and understanding of government operations, lack of engagement and resources) | 5 | 36.0 |

According to the staff respondents, the top two reasons that vendors are not able to meet the VR needs of SCCB consumers are that there are not enough vendors in the area and client barriers prevent successful interaction.

**Summary of survey results** (staff and partners) - a majority of respondents indicated that the current provider network is sufficient to meet consumer needs.

* *Readily available services* - Assistive technology, job training, job search, other education.
* *Improvements* - According to partner respondents, the current network of providers needs to meet individuals where they are, coordinate with the general VR agency, and improve the community’s perception of employability of people with disabilities. Staff survey respondents who did not think the current network of providers is sufficient indicated this is because there are not enough vendors, client barriers impede interaction with the vendor, and service rates are too low.

**SUB-SECTION:**

**ELLEN BEACH MACK REHABILITATION CENTER**

The Ellen Beach Mack Rehabilitation Center (EBMRC or the Center) is located in Columbia. It is designed to comprehensively meet the need for independent living skills, adjustment to blindness and employment of individuals from around the state. It is the de facto center of comprehensive training, available to all of those who can and choose to access it. The EBMRC program provides independent living services, including orientation and mobility training, personal and home management, Braille, keyboarding and assistive technology, low vision services, and other basic living and IL skills. EBMRC is a six to nine month residential program, though a few participants may go home in the evenings if they live in the Columbia area and travel home in the evening is possible. In 2014, 50% of program participants were from Richland and surrounding counties.

Qualitative and quantitative data gathered by the research team indicate that the Center’s program is lacking in the flexibility, accessibility and quality to meet varying needs.

* 50% of 2014 EBMRC attendees were from Richland or the immediately adjacent counties.
* Only 3% of 2014 EBMRC attendees were from the state’s ten poorest counties as measured by median income.
* 82% of 2014 EBMRC closed cases did not have an employment outcome: 41% “N/A,” 20% “homemaker,” 20% “unsuccessful” and 0.6% “failure to cooperate.”
* EBMRC’s curriculum is not individualized. Consumer comments included *“Not everyone needs to learn how to cook”* and *“Most people don't want to spend 16 weeks at SCCB, and only need parts of the training.”*
* 58% of SCCB staff who had referred clients to EBMRC were either neutral, dissatisfied or very dissatisfied with the services received.
* The program has not historically served individuals with multiple and complex disabilities. According to one parent, *“A prerequisite for our son going to Columbia is that he has to be able to care for himself; with his autism that’s not an option.” Another individual said, “I was sent home because I was too slow; they said I wasn’t picking up on skills fast enough”*
* No supported employment services are offered through the Center.
* There are few if any community activities included in the Center’s programs.
* Data supplied by SCCB suggest that employment outcomes (and the rehabilitation rate) are low. According to SCCB’s most recently reported data FY 2011-2015 37% of EBMRC cases were closed successfully.

**Survey Results**

25 respondents to the individual survey were offered services at the EBMRC. Fourteen of them (56%) were satisfied or very satisfied with EBMRC services. Eleven (44%) were either neutral, dissatisfied or very dissatisfied. Twenty-three other respondents had declined EBMRC services for a variety of reasons, ranging from preferring to receive services in their own community or the required length of stay being too long, to not wishing to be in a residential setting or the difficulty of entering the program.

Twenty-three respondents to the staff survey had referred consumers to the Center. Eleven (42%) were satisfied or very satisfied with the EBMRC services their clients received. Fifteen (58%) were either neutral, dissatisfied or very dissatisfied. Of the 37 respondents who did not refer consumers to the Center, six indicated that their clients prefer services either in their own community or a non-residential setting. Twenty-one of survey respondents were not in a position to refer individuals to EBMRC.

Surveyed staff were provided an open-ended format to make recommendations to improve EBMRC services. Most frequently mentioned improvements are listed below.

* Strengthen assessment in order to better individualize services and measure quality.
* Update/Upgrade offerings: More comprehensive, more holistic, computer training, technology
* Expand target population: consumers with traumatic brain injury, low cognitive skills, most significant disabilities, older blind, outreach program participants
* Provide more day services, flexible hours (e.g., after 5pm)
* Management needs to be more supportive of the program; more qualified staff need to be hired and better staff development needs to be offered.

**Key Informants**

 The following additional themes emerged from interviews and focus groups regarding the EBMRC:

* Focus more on employment related training.
* There is a significant amount of unused physical space. Explore options for maximizing the space (e.g. for training programs).
* SCCB should be less risk averse and afford more independent and community experiences for individuals attending the Center.
* Lack of accommodation of individuals with vision impairments (lighting, duration, resources).
* Everyone who comes to the Center gets the same program irrespective of their individual needs, interests, capacities.

**Recommendations**

The following recommendations are offered to SCCB based on the results of the research in the area of **Need to Establish, Develop or Improve Community Rehabilitation Programs in South Carolina**:

* SCCB should conduct a comprehensive evaluation of the quality of its services in areas outside of Columbia, especially in rural areas. Results of this evaluation as well as the findings for this needs assessment should be used to determine a course of action to meet the needs of all individuals in a manner that is effective, timely and accessible for them. In pursuing this course of action, SCCB should weigh options between funding CRPs and/or expanding in-house services. SCCB should take a statewide inventory of existing CRPs and determine their capacity to deliver comprehensive independent living and employment services to the underserved areas of the state.
* EBMRC
	+ SCCB should evaluate the outcomes of individuals attending EBMRC, especially those closed without a competitive employment outcome. Since EBMRC is the focus of SCCB’s VR service delivery system, maximizing employment outcomes is critical to justify the operations of EBMRC using VR funds. SCCB should use evaluation data to inform a strategic plan to maximize the employment outcome potential of EBMRC.
	+ SCCB should also explore the options around expanding the curriculum and services at EBMRC to increase the number of individuals with multiple and most significant disabilities attending, completing and obtaining employment outcomes as a result of attending the Center.

**SECTION 7**

**BUSINESS SERVICES AND RELATIONS**

Three small focus groups were conducted with a total of ten business representatives for this assessment. There were only two responses to the business survey. Consequently, it is difficult to generalize any of the findings to the business community at large in South Carolina. A brief summary of the findings is offered here with recommendations that SCCB might find helpful as they form strategies for improving relationships with businesses in the future.

***Recurring Themes Across all Data Collection Methods***

*Agency Performance*

* One employer reported having hired 3 SCCB-referred individuals and wished to hire more.
* Agency and RSA data indicate that SCCB has not accessed high wage, high demand jobs in South Carolina. Wage data reported by RSA indicates that those individuals served by SCCB earn less than the average wage in South Carolina.
* It is difficult to determine from the data if individuals whose cases were closed as competitively employed were placed in jobs by SCCB staff or obtained their own job (or remained pre-existing jobs as a result of sight restoration).
* It did not appear that SCCB had leveraged relationships with employers that led to multiple job placements in areas other than call centers.

***Results by Data Collection Method***

**Key Informants**

The following observations were made by individuals about employers and SCCB’s business relationships:

* Employer awareness about the capabilities of individuals with disabilities (blindness and vision impairments, in particular) is a consistent theme across all key informant groups. One consumer observed, *“Unless you have SCCB on your side, employers misjudge you.”* Another said, *“I would have great interviews but they always said ‘We have someone else.’”*
* Several key informants observed that SCCB could be more proactive in engaging with businesses. One individual indicated that SCCB has done some partnering with businesses but only on behalf of the 40% of consumers whose only disability is blindness. Others suggested providing sensitivity training and connecting employers with each other to share experiences.

**Employer Focus Groups**

* One employer represented in a focus group had hired three SCCB referrals and was interested in hiring more.
* SCCB support was key in securing hirings in two instances once the needs of the individual and employer were identified.
* Two of the employers in one focus group hired individuals who had approached them independently of SCCB. SCCB was contacted to facilitate the hiring by buying equipment.
* A third employer represented a large hospital that had not hired clients of SCCB, but expressed a strong desire to and was interested in Customized Employment.
* Most employers in the focus groups were not aware of the services provided by SCCB and the benefit of those services to them prior to hiring an individual with visual disabilities.

**Survey Results**

The following results come from the two surveys returned by businesses for this study. One of the businesses has utilized SCCB services and rated themselves “satisfied” with those services. While it is not possible to generalize these findings to the larger population of businesses in South Carolina, they are offered to provide SCCB with a starting point for conversations about how to effectively engage employers and meet their recruiting and hiring needs.

Table 28

*Employer Needs – Business Survey*

|  |  |
| --- | --- |
| **Does your business need help…** | **Yes (N)** |
| Obtaining information on training programs available for workers with blindness or other vision impairments? | 1 |
| Obtaining incentives for employing workers with blindness or other vision impairments? | 2 |
| Identifying job accommodations for workers with blindness or other vision impairments? | 2 |
| Helping workers with blindness or other vision impairments to retain employment? | 2 |
| Obtaining training on the different types of vision impairments? | 0 |
| Obtaining training on sensitivity to workers with blindness or other vision impairments? | 1 |
| Understanding disability-related legislation such as ADA and the Rehabilitation Act? | 1 |
| Recruiting job applicants who are people with blindness or other vision impairments? | 1 |

Both employers responded that they need help with incentives, job accommodations and job retention for employing workers with blindness or vision impairments. Other needs identified by one employer each include assistance with recruitment, obtaining information on training programs, sensitivity training, disability-related legislation.

Table 29

*Top Three Challenges to Job Retention – Business Survey*

|  |  |
| --- | --- |
| **Top three challenges to job retention** | **N** |
| Poor attendance | 1 |
| Poor social skills | 1 |
| Identifying effective accommodations | 1 |

When asked to identify the top three challenges to job retention for individuals with blindness and vision impairments they encountered, one employer each responded that poor attendance, poor social skills and identifying effective accommodations are factors affecting job retention. One employer responded that they have never experienced a job retention problem with an employee with blindness or other vision impairment.

When asked what services SCCB provides to employers, the one business that had been served by SCCB indicated services received included help recruiting, accommodating and retaining individuals with blindness and vision impairments.

**Recommendations**

 The following recommendations are offered based on the limited information gathered in the area of **Business Services and Relations**:

* SCCB should build the capacity of its Training and Employment section to establish effective relationships with business and industry in South Carolina. This can be done in a variety of ways. SCCB should prioritize increasing the number of and skills of Employment Counselors. By doing this, SCCB would see immediate benefits of increased employment outcomes. SCCB should also take advantage of the requirement of WIOA around partnerships with workforce entities. Building the network of partnerships with other workforce agencies would give SCCB access to existing relationships with employers.
* SCCB should leverage its capacity around assistive technology by building a public awareness campaign around job retention for employees who are losing or in danger of losing vision. Business awareness of SCCB, in general, is probably low. Employers would benefit from having an available resource for job retention. SCCB would benefit from increased employment outcomes, and would be able to leverage these relationships for a number of positive outcomes including internships and work experience for students and youth with visual disabilities.
* SCCB should conduct a comprehensive evaluation of its efforts around employer engagement/relations, job placement and job development. Many VR agencies take a strategic approach to business relationships. SCCB should consider inclusion of this area in its strategic plan.
* Under WIOA, SCCB will have exponentially greater access to the business community. Partnerships with other workforce entities to create partnerships can lead to business partnerships. SCCB should position itself to take full advantage of the partnership aspects of WIOA to create opportunities for the individuals it serves.
* SCCB should adopt strategies that incorporate labor market information into its business relationship strategies. In addition, SCCB should develop strategies that allow it to access the ‘hidden job market’ that includes those jobs arising from relationships with employers and meeting their needs, without the employer advertising jobs on the open job market.
* SCCB devotes considerable fiscal resources to post-secondary education. The agency should conduct an evaluation of outcomes for individuals receiving post-secondary education services.
* “Meeting the Needs of Employers” will be a performance indicator under WIOA. SCCB should develop an understanding of how this will be measured and develop a strategic plan to increase performance in this area.

**CONCLUSION**

This Comprehensive Statewide Needs Assessment solicited information concerning the needs of individuals with blindness and vision impairments from persons with disabilities, service providers, SCCB staff and businesses for the purpose of providing SCCB and the Board with direction for future planning. The results of these efforts provide information and data needed for goal setting and strategic planning as required by RSA. They also offer stakeholders a means of communicating needs and educating service providers. Data from the needs assessment suggest agreement among individuals with disabilities, partners, and SCCB staff with respect to several perceptions of need. It is anticipated that SCCB and the Board will use this information in a strategic manner that results in provision of vocational rehabilitation services designed to address current and future needs of individuals with blindness and vision impairments in South Carolina who seek employment.

APPENDICES

**Key to Acronyms**

Appendix A: **Interim Report**

Appendix B: **Key Informant and Focus Group Interview Protocols**

Appendix C: **Individual Survey**

Appendix D: **Partner Survey**

Appendix E: **Staff Survey**

Appendix F: **Business Survey**

Appendix G: **Performance Data**