

# Rehabilitation Services Commission

## Comprehensive Statewide Needs Assessment

### Stakeholders' Meeting April 2012



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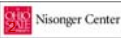



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## Purpose of Presentation

- Review highlights of needs assessment activity results and available data
- Scan briefing book
- Present general recommendations based on highlights



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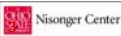
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# BACKGROUND



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## Vetting Results

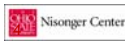
- Executive Team
- Advisory Team
- Stakeholders
- Finalize materials
- Program Planning Committee
- VR State Plan Public Hearings
- Full Commission



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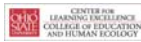
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## Needs Assessment Questions

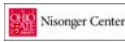
1. How many people will experience each type of disability in Ohio?
2. How many people with disabilities are unemployed?
3. How are different racial groups impacted by disabilities?
4. How many individuals with disabilities receive appropriate services?
5. How is the quality of services provided by CRPs perceived?
6. What are gaps in services provided to individuals with disabilities and how should gaps be prioritized?
7. What are the policy implications of gaps in services?
8. How many of the individuals served by selected state agencies other than RSC would benefit from RSC services?



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## Needs Assessment Process

- Described in RSA manual (A)
- Directed by Advisory Team
- Key principles:
  - Imprecise science
  - Data informed decisions
  - Aid to decision making
  - Stimulate on-going data collection and analysis



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### Major Sections: Data Collection Strategies

1. Secondary data
2. Penetration rates and other state data
3. Relative proportionality data
4. Race and disabilities data
5. Key informant
6. Closures without employment
7. Consumers' views of quality of services
8. Employer perspectives
9. Recommendations and opportunities

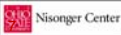


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### Overview

- Potential for provision of services
- Untapped need
- Potential to address issues related to minority populations
- Consumers indicated that services were of high quality
  - Did a good job
  - Did everything possible
  - Cared and understood my situation

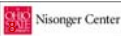


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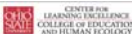
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### Data Considerations

- These estimates are based on available data
- Some needs data presented in terms of relative proportionality
- Consider implications of shifting resources

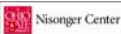


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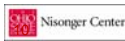
### Data Considerations

- A zero reflects proportionality
- If the policy goal is to serve proportionate to need, there are a lot of opportunities for growth
- If RSC services come into balance, penetration rates will be impacted



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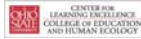
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### Consider Data in a Progression

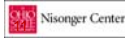
At the state and county levels:

1. Is the penetration rate acceptable?
2. How does the overall caseload compare to the proportion of projected need?
3. If penetration rate is not acceptable, what penetration rate is required to achieve proportionality?
4. Where are there opportunities to expand existing resources (i.e. state partnerships, etc.)?



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## PENETRATION RATES



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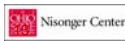
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## Statewide Penetration Rates

Disability Category	State Penetration Rate
Visual Impairment	5.3
Hearing Impairment	6.4
Communicative Impairment	1.3
Physical Disability	6.3
Psychosocial Disability	9.7
Cognitive Disability	6.2



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## Visual Impairments: Map of Penetration Rates

- Categories of disability (B)
- Prevalence rate (C/D)
- Penetration rate (E/F)



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## Penetration Rates Visual Impairment (G)

Statewide penetration rate = 5.3  
Highest county rate of penetration = 12.3

### Counties with lowest penetration rates

- Fayette (.0)
- Hardin (.0)
- Vinton (.0)
- Seneca (.9)
- Ashtabula (1.0)

### Counties with highest penetration rates

- Marion (10.2)
- Athens (10.5)
- Darke (10.5)
- Washington (10.7)
- Allen (12.2)



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**Penetration Rates**

**Hearing Impairment (H1)**

Statewide penetration rate = 6.4

Highest county rate of penetration = 28.3


<p>Counties with lowest penetration rates</p> <ul style="list-style-type: none"> <li>• Clinton (.0)</li> <li>• Gallia (.0)</li> <li>• Holmes (.0)</li> <li>• Morrow (.0)</li> <li>• Ottawa (.0)</li> </ul>	<p>Counties with highest penetration rates</p> <ul style="list-style-type: none"> <li>• Columbiana (14.2)</li> <li>• Portage (14.3)</li> <li>• Sandusky (16.4)</li> <li>• Mahoning (17.8)</li> <li>• Monroe (28.3)</li> </ul>
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**Penetration Rates**

**Physical Impairment (H2)**

Statewide penetration rate = 6.3

Highest county rate of penetration = 15.7


<p>Counties with lowest penetration rates</p> <ul style="list-style-type: none"> <li>• Highland (.9)</li> <li>• Preble (.9)</li> <li>• Morgan (1.3)</li> <li>• Coshocton (1.6)</li> <li>• Geauga (1.6)</li> </ul>	<p>Counties with highest penetration rates</p> <ul style="list-style-type: none"> <li>• Logan (14.9)</li> <li>• Williams (15.0)</li> <li>• Sandusky (15.4)</li> <li>• Putnam (15.6)</li> <li>• Huron (15.6)</li> </ul>
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**Penetration Rates**

**Psychosocial Impairment (H3)**

Statewide penetration rate = 9.7

Highest county rate of penetration = 28.3

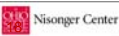
<p>Counties with lowest penetration rates</p> <ul style="list-style-type: none"> <li>• Morgan (1.4)</li> <li>• Pike (1.4)</li> <li>• Highland (1.5)</li> <li>• Holmes (1.6)</li> <li>• Butler (2.3)</li> </ul>	<p>Counties with highest penetration rates</p> <ul style="list-style-type: none"> <li>• Huron (16.7)</li> <li>• Lucas (17.9)</li> <li>• Williams (17.1)</li> <li>• Allen (17.6)</li> <li>• Logan (28.3)</li> </ul>
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**Penetration Rates**  
**Communicative Impairment (H4)**

Statewide penetration rate = 1.3  
 Highest county rate of penetration = 32.5

Counties with lowest penetration rates <ul style="list-style-type: none"> <li>• Ashland (.0)</li> <li>• Ashtabula (.0)</li> <li>• Auglaize (.0)</li> <li>• Butler (.0)</li> <li>• Carroll (.0)</li> </ul>	Counties with highest penetration rates <ul style="list-style-type: none"> <li>• Coshocton (5.1)</li> <li>• Morrow (5.4)</li> <li>• Richland (13.4)</li> <li>• Brown (23.8)</li> <li>• Adams (32.5)</li> </ul>
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**Penetration Rates**  
**Cognitive Impairment (H5)**

Statewide penetration rate = 6.2  
 Highest county rate of penetration = 17.6

Counties with lowest penetration rates <ul style="list-style-type: none"> <li>• Preble (.5)</li> <li>• Highland (.9)</li> <li>• Pike (1.3)</li> <li>• Lake (1.5)</li> <li>• Geauga (1.9)</li> </ul>	Counties with highest penetration rates <ul style="list-style-type: none"> <li>• Richland (14.1)</li> <li>• Huron (14.4)</li> <li>• Coshocton (16.1)</li> <li>• Allen (16.6)</li> <li>• Sandusky (17.5)</li> </ul>
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**PREVALENCE RATE  
 PROJECTIONS FOR  
 SPECIAL POPULATIONS (I)**







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# RELATIVE PROPORTIONALITY



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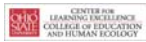
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## Relative Proportionality (J/K)

Disability Category	State Penetration Rate	Proportionality between Served and Need
Visual Impairment	5.3	-2
Hearing Impairment	6.4	0
Communicative Impairment	1.3	-4
Physical Disability	6.3	-2
Psychosocial Disability	9.7	11
Cognitive Disability	6.2	-2



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## Counties with Highest and Lowest Proportionality between Number Served and Number in Need Visual Impairment (L)

Statewide penetration rate = 5.3  
Highest county rate of penetration = 12.3

Counties with largest  
difference < 0

- Hardin (.0)
- Vinton (.0)
- Fayette (.0)
- Huron (1.7)
- Ashtabula (1.0)

Counties with largest  
difference > 0

- Pike (10.1)
- Holmes (6.4)
- Preble (3.4)
- Morgan (6.4)
- Marion (10.2)



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**Counties with Highest and Lowest Proportionality  
between Number Served and Number in Need  
Hearing Impairment (M1)**

**Statewide penetration rate = 6.4**  
**Highest county rate of penetration = 28.3**

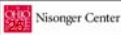
Counties with largest difference < 0	Counties with largest difference > 0
<ul style="list-style-type: none"> <li>Gallia (.0)</li> <li>Morrow (.0)</li> <li>Ottawa (.0)</li> <li>Clinton (.0)</li> <li>Van Wert (.0)</li> </ul>	<ul style="list-style-type: none"> <li>Monroe (28.3)</li> <li>Preble (6.5)</li> <li>Highland (3.2)</li> <li>Warren (6.6)</li> <li>Ashland (12.5)</li> </ul>



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**Counties with Highest and Lowest Proportionality  
between Number Served and Number in Need  
Physical Impairment (M2)**

**Statewide penetration rate = 6.3**  
**Highest county rate of penetration = 15.7**

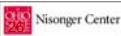
Counties with largest difference < 0	Counties with largest difference > 0
<ul style="list-style-type: none"> <li>Coshocton (1.6)</li> <li>Morgan (1.3)</li> <li>Preble (.9)</li> <li>Noble (3.7)</li> <li>Hancock (5.2)</li> </ul>	<ul style="list-style-type: none"> <li>Perry (13.2)</li> <li>Jackson (7.7)</li> <li>Fayette (8.3)</li> <li>Ross (13.1)</li> <li>Henry (11.0)</li> </ul>



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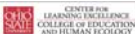
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**Counties with Highest and Lowest Proportionality  
between Number Served and Number in Need  
Psychosocial Disability (M3)**

**Statewide penetration rate = 9.7**  
**Highest county rate of penetration = 28.3**

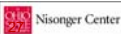
Counties with largest difference < 0	Counties with largest difference > 0
<ul style="list-style-type: none"> <li>Morgan (1.4)</li> <li>Pike (1.4)</li> <li>Harrison (5.2)</li> <li>Perry (5.3)</li> <li>Coshocton (4.6)</li> </ul>	<ul style="list-style-type: none"> <li>Wood (13.8)</li> <li>Logan (28.3)</li> <li>Gallia (9.9)</li> <li>Portage (13.5)</li> <li>Lucas (16.9)</li> </ul>



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**Counties with Highest and Lowest Proportionality  
between Number Served and Number in Need  
Communicative Disorder (M4)**  
  
Statewide penetration rate = 1.3  
Highest county rate of penetration = 32.5  
  
Counties with largest  
difference < 0  


- Hardin (.0)
- Vinton (.0)
- Noble (.0)
- Henry (.0)
- Monroe (.0)

Counties with largest  
difference > 0

- Brown (23.8)
- Adams (32.5)



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**Counties with Highest and Lowest Proportionality  
between Number Served and Number in Need  
Cognitive Impairment (M5)**  
  
Statewide penetration rate = 6.2  
Highest county rate of penetration = 17.6  
  
Counties with largest  
difference < 0  


- Preble (.5)
- Pike (1.4)
- Monroe (2.7)
- Ross (4.5)
- Wayne (3.2)

Counties with largest  
difference > 0

- Coshocton (16.1)
- Morgan (7.7)
- Vinton (10.0)
- Hancock (12.4)
- Seneca (8.9)



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**ADDITIONAL  
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### Other State Agency Data (N)

- Aging
- Alcohol and Drug Addiction Services
- Development
- Developmental Disabilities
- Education
- Job and Family Services
- Mental Health
- Rehabilitation and Corrections
- Veterans Services
- Worker's Compensation
- Youth Services

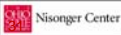


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### HIGHLIGHTS FROM DATA REGARDING SPECIAL POPULATIONS

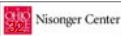


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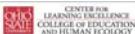
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### Transition-Age Youth with Disabilities

- Students with disabilities between ages 12 and 17 constitute 46% of children served under IDEA in Ohio (Office of Special Education, 2009)
- Speech and communication disorders are among the most common disorders in the US
- Nationally 24.1% of children served under IDEA received speech/language services
- Prevalence for any developmental disability in children ages 3-17 is 13.87%. Prevalence of developmental disabilities has increased 17.1% from 1997 to 2008 (CDC)

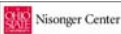


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## Transition-Age Youth with Disabilities

- New prevalence estimates indicate that 1 in 88 children are diagnosed with Autism; 1 in 54 boys (CDC, 2012)
- NLS2 data indicate that the percent of young adults with Autism who had a job was nearly half that of all young adults with disabilities (33% vs. 59%)
- The estimate for youth with severe emotional disturbance ranges between 5% to 9% nationally; Variability in the range is influenced by poverty rates, as SED is highly correlated with poverty



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## Veterans and Aging

- 25.8% of the Veterans population in Ohio ages 18 and over are considered disabled (ACS, 2010)
- By 2020, Ohio's age 60+ population is projected to reach 2,822,000 and represent 23.2% of the state's population (Scripps Gerontology Center)
- By 2020, Ohio will have about 348,000 individuals with severe disability who will need formal long-term services and supports (Scripps Gerontology Center)



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## Hearing Impairments

- 3 in 10 people over age 60 have hearing loss
  - 1 in 6 baby boomers (ages 41-59), or 14.6%, have a hearing problem
  - 1 in 14 Generation Xers (ages 29-40), or 7.4%, already have hearing loss
  - At least 1.4 million children (18 or younger) have hearing problems
  - It is estimated that 3 in 1,000 infants are born with serious to profound hearing loss
- (Better Hearing Institute, Washington, DC, 2004)



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## Visual Impairments

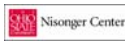
- The number of Americans (age 40 years and older) with Diabetic Retinopathy and Vision Threatening Diabetic Retinopathy is expected to triple by the year 2050 (CDC, 2009)



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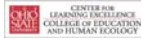
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## Race and Disabilities: African Americans (O)

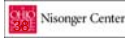
- Counties with highest proportion of African Americans
  - Cuyahoga
  - Franklin
  - Hamilton
  - Lucas
  - Montgomery
- Counties with highest number of African Americans
  - Cuyahoga
  - Franklin
  - Hamilton
  - Lucas
  - Montgomery
  - Summit



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## Race and Disabilities: African Americans

- 17.2% of African Americans experience disabilities
- 15.8% of African Americans who experience disabilities are seeking employment



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### Race and Disabilities: Hispanic Ethnicity (P)

- Counties with highest proportion of Hispanics
  - Defiance
  - Fulton
  - Henry
  - Huron
  - Lorain
  - Lucas
  - Putnam
  - Sandusky

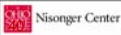


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### Race and Disabilities: Hispanic Ethnicity (Q)

- Counties with highest number of Hispanics
  - Butler
  - Cuyahoga
  - Franklin
  - Mahoning
  - Hamilton
  - Lorain
  - Lucas
  - Montgomery



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### Race and Disabilities: Hispanic Ethnicity

- 11.4% of Hispanics experience disabilities
- 15.8% of Hispanics experience disabilities seeking employment



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### Survey of Key Informants


**n = 24; response rate = 57%**

- RSC is developing additional partners to accomplish their mission – and they should continue to do so
- Consider widening the pool of eligibility so all MSD and more SD are served
- Re-evaluate staff composition to ensure that it reflects diversity (disability & race)
- Enhance school to work services for transition-age youth





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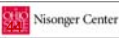
### Survey of Key Informants

- Increase two-way communication with CRPs & partners
- Establish and monitor benchmarks for success among CRPs
- Re-evaluate paperwork and time it takes to determine eligibility
- Use technology as support for consumers and staff
- RSC is doing better in communicating with employers





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### Perspective of Consumers Who Experienced Closures without Employment (R/S/T/U)

**n=29\***

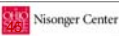
- Reasons respondents did not keep jobs
  - Didn't get right services
  - Needed more training
  - Services not available where I live
  - RSC office too far away
  - People at job didn't like me
  - Didn't have transportation

\*150 randomly selected names were provided to interviewers. The goal was to interview 25 – 30 individuals.





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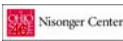
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### Closures without Employment (S)

- Reasons respondents were not placed in jobs
  - No jobs available in my community
  - No jobs in my community I wanted
  - No jobs for which I had skills
  - I didn't want to go to work
  - Didn't get the right services to prepare me
  - Didn't have the right skills for jobs that were available
  - RSC counselor didn't like me
  - Needed services not available where I live
  - RSC office too far away
  - Didn't have transportation



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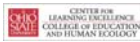
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### Closures without Employment (T)

- Reasons cases were closed
  - Family issues
  - Approved for SSDI
  - Personal decision\*
  - Health reasons
  - Job ended
  - RSC issue

\* More than one-third of respondents



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### Consumers' Views of Quality of Services

- 600 Surveys sent to a random sample of RSC Consumers
- 125 received as of March 22, 2012



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### Consumers' Views of Quality of Services (V/W)


- Services used most
  - Assessment
  - Guidance and Counseling
  - Training
  - Job Search, Job Placement or On-the-Job Support Services
- Services deemed most helpful by users
  - Training
  - Job Search, Job Placement or On-the-Job Support Services
  - Transportation Services



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### Employer Perspectives (X)

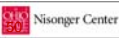
- Respondents
  - 12 of 22 members of the Business Leadership Network
  - 1 Community Action Team member
- Additional employer perspective data to be collected



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### Employer Perspectives

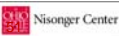
- 76.9% did not have issues within their companies that impeded hiring people with disabilities
- Fear of increased costs was mentioned by 3 respondents
- Inexperience with hiring people with disabilities and limited work with local agencies were noted as external barriers to employing people with disabilities



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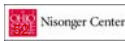
### Employer Perspectives

- Relevant work experience; basic reading and math skills; communication skills and problem solving capacity were identified as qualities necessary to compete for jobs
- Respondents indicated that creating partnerships with local agencies and outreach were the best way to promote hiring
- Half indicated that RSC had been helpful or somewhat helpful in providing assistance while one-third had not requested assistance



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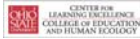
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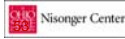
### Recommendations

- Determine acceptable penetration rate for each disability category
- Increase penetration rates using the relative proportionality approach previously described



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### Opportunities: Themes (Y)

- Service Gaps
- Outreach and Training
- Partnerships
- RSC Process



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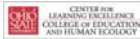
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## Summary

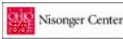
- Wealth of data that can be further analyzed
- Briefing book
- Formal report



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