I. BACKGROUND:

The Massachusetts Rehabilitation Commission (MRC) is organized pursuant to M.G.L. ch. 6 paragraph 74-84 and operates programs authorized by State Law, The Federal Rehabilitation Act of 1973, as amended, and by the Social Security Act. The MRC provides comprehensive services to individuals with significant disabilities, intended to promote equality, empowerment and independence.

The MRC serves individuals with all types of disabilities as its constituency. While each MRC program has its own focus and eligibility criteria, the Commission’s overall mandate and purpose are to assist all eligible individuals with disabilities, regardless of age, nature of disability or functional ability to maximize quality of life and self-sufficiency in the community. Consistent among all services and across all programs, is a consumer-focused and consumer-directed planning and service delivery process that respects and is driven by informed decisions of empowered consumers.

Generally speaking, consumers of MRC services are individuals with disabilities who choose to control their involvement with MRC personally. In many cases, the provision of service to the individual is, by nature, a support to the family. For example, assisting a disabled youth who is transitioning to adulthood to find an accessible, affordable home and to receive the supports necessary to remain in that home supports the family who, until that time, had provided all of the help necessary to keep that individual in the family home. This independence can by achieved with the assistance of such MRC programs as Home Modifications, Assistive Technology, MassAccess Housing Registry, homemaker services, supportive living services, specialized case management and Independent Living Center services. In short, MRC believes in strengthening the individual with the disability, and by doing so, the family is supported.

In other examples, the economic self-sufficiency achieved through Vocational Rehabilitation Services to assist an individual to find and keep a job, or to obtain Social Security benefits through the Disability Determination Services, are, in effect, supports to the whole family who might be dependent upon that individual’s income.

While MRC is primarily an adult service system, there are a number of services and programs that are available to children and youth with disabilities. Specifically, the Turning 22 Supported Living Program, Transition to Adulthood Program, the Family Assistance Services of the Statewide Head Injury Program, the Home Modification Loan Program, the Housing Registry and the Assistive Technology Loan program are utilized by adults and children.

MRC Vocational Rehabilitation Services and Community Living programs continue to focus efforts on collaboration and coordination of services for Transition Age Youth.
II. SUBSTANTIAL CONSULTATION:

Consumer Involvement continues to be an integral component of all aspects of MRC services and programs. This begins with involvement of the consumer and, when appropriate, his or her legal guardian in all aspects of development and implementation of an individual service plan, individual transition plan or individual plan for employment.

Through exploration of existing program and service options, by participation in the State Rehabilitation Council, and by connecting with Independent Living Centers, consumers direct the types of services they receive, provide advice and consultation to the administration in terms of how services might best be provided, and join their voices to advocate for new and/or different services to best meet their needs.

In FY’10 avenues for obtaining Substantial Consultation have included:

- A series of Town Meetings with the Commissioner, held in various regions of the state, in which the Administration of MRC heard from consumers, family members and other stakeholders about the impact of budget cuts, ideas for innovation and improved service delivery, as well as about programs and services that work well and need continued support. These meetings were specifically held in parts of the state that have been traditionally under-represented.
- Regional Transition Teams, comprised of consumers, families, family organizations, educators and MRC staff, to continue to improve upon the rehabilitation process for youth transitioning from the Educational to the Adult Service system,
- Family/Consumer organizations: Federation for Children with Special Needs, Urban Pride and ICI continue to be a part of MRC’s $2.7M transition grant from RSA (Transition Works) and are included on the Massachusetts Transition Task Force (MTT),
- Also through the Transition Works Grant, the establishment of a Family Involvement Subcommittee, led by partner agency, The Federation for Children with Special Needs,
- A Needs Assessment revised by the Vocational Rehabilitation Division in conjunction with the Statewide Rehabilitation Council (SRC). The SRC was involved in the revision, implementation, analysis and development of recommendations for this assessment,
- Similarly, the SRC and Vocational Rehabilitation Division revise, implement and review the Consumer Satisfaction Survey conducted each year, which is utilized to review adequacy of policies and procedures,
- Individual Consumer Consultants involved in agency projects and activities such as development of publications including the Consumer Voice, the MRC Annual Report and the HCAP Resource Newsletter, and activities around Assistive Technology outreach and awareness,
- Regular meetings of Advisory Boards, including the Statewide Head Injury Advisory Board, the Home Care Assistance Program Advisory Committee, the State Rehabilitation Council and its regional and topic-based subcommittees
- On-going Consumer Satisfaction Survey completion and reviews by departments and programs
- Participation at all meetings of the Statewide Independent Living Council and consultation on many of its committees,
- With Partners For Youth With Disabilities, assists in forming Mentor Partnerships between adult mentors and youth with disabilities, in which mentors provide guidance and support to youth to ensure that they get the most from their relationship with MRC
- An Annual Consumer Conference that is fully driven by a subcommittee of the SRC and is designed to address the needs of consumers for information about services and supports.

Moreover, many of the agencies with which MRC contracts are required to have advisory councils and other means of consumer input to ensure high quality services that meet the needs of their consumers.

III. ACCOMPLISHMENTS IN FY’10:

The MRC continues its focus on streamlining agency transition activities and increasing outreach to youth and families. This goal was formulated in response to input received from youth and families in many of the various forums listed above. Families consistently report the need for timely information about the adult service system, particularly as it differs from the special education system. The need for earlier referrals to adult service programs is another common theme that informed the work of the MRC and highlighted the importance of such an agency-wide Transition Initiative. This is a particularly crucial issue in a time of scarcer resources and longer Wait Lists for necessary services within the adult systems.

1. Family Empowerment and Substantial Consultation:
   a) In FY ’10, MRC joined other EHS Disability Agencies to conduct a CH. 171 Workshop at the Annual Conference of the Federation for Children with Special Needs. This provided a venue for agency representatives to share information about the services that are available to individuals with disabilities and their families, as well as to allow the families a chance to speak about what works and doesn’t, from their perspective, in enabling their family member with a disability to live and participate successfully within their family and their community.
   b) The Regional Transition Teams met regularly throughout the year. The goal of these teams is to provide support and technical assistance to young adults, families, and professionals involved in the transition process, to facilitate linkages and collaboration among all those involved in transition at state, regional and local levels, and to build capacity to provide and access transition services.
   c) The Massachusetts Transition Taskforce, a group including consumer and family representatives as well as representatives from other Government Agencies (Massachusetts Commission for the Blind, Department of Developmental Services, Department of Mental Health, Department of Elementary and Secondary Education, Department of Labor and Workforce Development and the Social Security Administration ) met throughout the year to advise on grant implementation.
   d) Because of the work of the Transition Taskforce and regional teams, a Family Involvement Subcommittee was formed and has begun to develop specific goals for the next year.
2. **Family Leadership:**

   e) The Statewide Head Injury Program (SHIP) continues to fund the Brain Injury Association of Massachusetts’ I&R services, support group network and prevention programs. It also offers trainings to families and individuals on such topics of interest to families as substance abuse treatment, pharmacology and housing. Out of these programs, consumers and family members become empowered with knowledge and are more able support others and speak to the service gaps and delivery issues in ways that can better inform change.

   f) The Massachusetts Acquired Brain Injury Advisory Board (MABIAB), which recommends policy, practices and funding for SHIP, is comprised of 64% families of, and consumers with acquired brain injury. MABIAB has increased outreach to new members with acquired brain injuries, including youth and minority populations.

   g) The Statewide Mentorship program through a contract with Partners for Disabled Youth, made 19 new matches and maintained a total of 34 mentor/mentee matches. This partnership matches disabled youth, between the ages of 14 and 18 years old, with disabled adults for the purpose of mentoring and empowering youth to make choices about the types of services to access to assist them in fulfilling their employment and independent living goals.

   h) The Federation For Children with Special Needs, a family and parent-centered organization, is the partner in the TransitionWorks grant to identify and provide training to MRC staff, and the community on issues related to Transition, as well as to organize the activities of the Family Involvement subcommittee.

   i) MRC contracts with Independent Living Centers for Transition to Adulthood Projects that conduct activities and training, specifically aimed at assisting youth with disabilities to plan successful futures, to advocate for their needs and secondarily to foster new leadership in the disability rights, services and peer support network.

3. **Family Resources and Funding:**

   Besides the outreach work done by the MRC Regional Transition Teams and MTT, much work is being done internally to streamline the referral and service delivery process, and to better prepare MRC Staff to meet the unique needs of the younger disabled population that now seeks to access vocational rehabilitation services and community service supports.

   MRC now has a Transition Liaison in all area offices and in each Community Living Program. These liaisons attend trainings and share information regarding service eligibility and application procedures. This has enabled staff within each department to make referrals to other services in a more streamlined manner. The State Rehabilitation Council has developed a guide to MRC services that includes information about access to both Vocational and Community Living Divisions of the MRC.

   MRC is working with EHS and MassHealth and UMass to implement a 1915 Medicaid Waiver, intended to provide Community Supports to individuals with Acquired Brain Injuries who are currently residing in Nursing Homes. This work is being done with direct involvement of families of those in the nursing homes at each step. Applications for Waiver
Services have been reviewed, eligibility and needs assessments are in process with individualized plans for services being developed. All plans are developed with input from those individuals identified by the consumer as team members.

4. **Accessing Services and Support**
   - MRC now has a Vocational Rehabilitation Counselor identified to cover every high school in the state. Applications for services are taken approximately two years before graduation and services are coordinated with educational services provided the LEA and similar benefit providers that includes state agencies and community organizations. The relationships vary from High School to High School, but in many cases, VR Counselors are not only receiving referrals, but meeting with staff and students at the schools on a regular basis and offering trainings on Transition, the VR Process and Independent Living.

   - Moreover, as part of the TransitionWorks Grant, 3 offices have Transition Counselors whose singular specialty is working with Transition-age youth. This is being conducted as a pilot and may be replicated in the future.

   - The Independent Living Centers successfully assisted 144 people in transitioning from Nursing Home to community Living—44 above the goal for the year.

   - Again, the ABI Waiver will allow 100 people to leave nursing homes in the coming year, through access to a coordinated array of services individuals to meet their specific needs.

   - MRC continues to administer the Northeast Veteran’s with Traumatic Brain Injury Grant with the goal of providing services and supports to Veterans returning from Iraq and Afghanistan and their families through extensive outreach and training opportunities.

   - The DDS Division continues to administer its Homeless Initiative that provides comprehensive application and evaluation services to the Homeless population on a statewide basis. This program has resulted in substantially increased compliance and benefits that lead to self sufficiency.

5. **Culturally Competent Outreach and Support**

MRC offices have bilingual counselors in many languages as well counselors for the Deaf who conduct outreach to community groups and organizations that work with language minority individuals and their families.

The Town Meetings held by the Commissioner were scheduled in areas of the state that have been typically under-represented. All forums were ASL interpreted as well.
The Brain Injury and Statewide Specialized Community Services Department has an outreach program working in partnership with community providers to develop and disseminate culturally competent and linguistically appropriate information to raise awareness about Traumatic Brain Injury and increase the number of TBI survivors served from diverse backgrounds.

6. Interagency Collaboration

The MRC continues to recognize the importance of interagency collaboration in ensuring the best possible array of services is made available to children with disabilities, transitioning youth and their families, as well as adults with disabilities. The collaborative work of the Transition teams and the Intra Agency transition will continue to identify future goals for collaboration and inter-agency work.

Other Inter-agency collaboration includes: agency representation on Mental Health Transformation Committee, the Department of Public Health’s Office of Health and Disability Advisory Committee, and the Multiple Sclerosis Society’s Home Links Advisory Committee; Statewide Hoarding Task Force, Department of Public Health’s Bureau of Substance Abuse Services work on accessibility of services, the Mass. Council on Developmental Disabilities, and the Building Partnerships Initiative, to name a few.
IV. GOALS FOR FY 2011:

- The Federation for Children with Special Needs and the MRC will continue to work with the Family Involvement Subcommittee for direction in implementation of transition activities.

- The Family Involvement Subcommittee will address the need to facilitate information about and access to adult services by cataloguing information already available, and developing a guide for families that fills in the information gaps.

- In collaboration with MRC and Mass. Commission for the Blind, the Statewide Independent Living Council will work to further align ILC Center youth focused activities (such as the Youth Leadership Forum and the Transition to Adulthood Projects) with the activities and work MRC’s Vocational Rehabilitation activities. Specifically, the goal, as outlined in the State Plan for Independent Living (SPIL) is: “By 12/31/2010 develop a task force to identify the needs of youth transitioning to adulthood. Identify practices whereby ILCs can help youth attain basic life goals including employment to succeed in their adult lives.”

- MRC will continue its active participation in the implementation of the 1915 Waiver through participation in the many activities necessary to ensure that up to 100 people in the first year, and a total of 300 individuals with Acquired Brain Injury currently in Nursing Homes will be able to access person-centered community supports.

- MRC will continue to work with its network of IL Centers and other providers to continue its goal of assisting individuals with disabilities to leave facilities and to move to communities of their choice. Through its work on the Rolland decision and the use of its Supported Living Program and Turning 22 Program, MRC expects to assist an additional 100 individuals to transition from facilities to their families and their community.