I. BACKGROUND:

The Massachusetts Rehabilitation Commission (MRC) is organized pursuant to M.G.L. c6 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 competent, independent adults who choose to control their involvement with MRC personally. In many cases, the provision of service to that adult 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 be 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 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 Service programs have been focusing efforts over the past 2 years 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, to participation in the State Rehabilitation Council, to connecting with Independent Living Centers, consumers direct the types of services they receive, provide advise 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’08, avenues for obtaining Substantial Consultation have included:

- A Needs Assessment revised by the Vocational Rehabilitation Division in conjunction with the Statewide Rehabilitation Council identified improved job placement services and transportation as priority services.
- 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.
- 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.
- Inclusion of the Federation, Urban Pride and ICI as part of MRC’s $2.7M transition grant from RSA (Transition Works).
- 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 review,
- Participation at all meetings of the Statewide Independent Living Council and consultation on many of its committees.

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, satisfactory services.

III. ACCOMPLISHMENTS IN FY’08:

For Fiscal Year 2008, the MRC has continued 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 reported 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 was another common theme that informed the work of the MRC and highlighted the importance of such an agency-wide Transition Initiative.

1. Family Empowerment and Substantial Consultation:
a) In FY ’08, MRC’s Transition Staff continued to provide outreach to youth and their families regarding MRC Services and the Transition process. Presentations by Transition Staff have been made to various organizations in the communities throughout the state.

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.

2. Family Leadership:

c) 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. 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.

d) The Transition to Adulthood Program funds Independent Living Centers to run peer support and independent living planning and support services to disabled teens as they begin to prepare for adulthood. In addition a new Independent Living Center was added to the TAP Network which now includes 6 ILCs.

e) Also in FY’08, MRC maintained its Statewide Mentorship program through a contract with Partners for Disabled Youth. 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.

f) Finally, as mentioned above, the MRC Transition Program was actively involved in providing essential information to youth and families at various conferences and workshops, some of which are listed above.

3. Family Resources and Funding:

Besides the outreach work done by the MRC Transition Team, much work has been 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.

In FY’08, the Transition expanded upon its Interagency Conference by conducting trainings at the Regional level for staff and local school systems. Additionally, a formal system of assigning specific counselors for each high school was achieved.

The work of the MRC Transition Team in educating families about available services and facilitating the referral process to the adult service system has had measurable results. The number of referrals to MRC of Transition Age Youth is currently approximately 2000 per year.

4. Accessing Services and Support
In FY 08, MRC made a concerted effort to have a 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.

MRC will continue 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.

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.

The MRC has specialty counselors for the Deaf as well as Bilingual Counselors in a variety of languages to enhance access and communications with the diverse population statewide.

5. Culturally Competent Outreach and Support

As stated, 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.

MRC staff attend job fairs and health fairs with emphasis on those conducted in minority communities in urban areas such as Roxbury, Springfield, Worcester, Lawrence and Lowell.

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. The collaborative work of the Transition teams and the Intra Agency transition will continue to identify future goals for collaboration and inter-agency work.
IV. GOALS FOR FY 2009

As a result of the Needs Assessment and Consumer Satisfaction Survey findings, MRC will increase its cadre of Job Placement Specialists by four (4) assuring statewide access and will implement new policy governing van modifications.

MRC will assign a transition specialist (from existing staff) for each Area Office. The role of this individual will be to serve as a consultant to all counselors on specific program requirements including Chapter 688.

Furthermore, the Training Department will be working with the Transition Team to develop a series of staff training to enable counselors to successfully address issues that are unique to serving a younger population. The Training Department will collaborate with the Transition Works Grant staff in identifying successful strategies.

MRC will utilize the EHS Internet Portal to conduct a needs assessment in FY 09 utilizing a web based software tool that will provide better access at less cost.

MRC will continue to administer the Northeast Veteran’s with Traumatic Brain Injury Grant with the goal of providing services and supports to Veteran’s returning from Iraq and Afghanistan and their families.

MRC will continue its active participation of the development and implementation of the 1115 Waiver through participation in the many activities necessary to ensure startup on April 1, 2009. Through implementation of the wavier for eligible individuals with disabilities, families and individuals will have the supports they need to live more independently in the community.

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 Roland Decision and the use of its Supported Living Program and Turning 22 Program, MRC expects to assist over 100 new individuals to transition from facilities to the community.