

Provider Transformation Efforts

Report Outlining ODEP's Provider Transformation Efforts

Office of Disability Employment Policy

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I. Introduction

Among other changes, the Workforce Innovation and Opportunity Act (WIOA) increased individuals' with disabilities access to high-quality workforce services and emphasized the achievement of competitive integrated employment (CIE). In particular, WIOA called for –

- American Job Centers to provide physical and programmatic accessibility to employment and training services for individuals with disabilities;
- Students with disabilities to receive pre-employment transition services so they obtain CIE; and
- State Vocational Rehabilitation agencies to set aside at least 15 percent of their Federal award to provide pre-employment transition services to students with disabilities while engaging employers to improve participants' employment outcomes.¹

WIOA defines CIE as work that: is performed on a full-time or part-time basis (including self-employment), for which an individual is compensated at a rate that is not less than the customary rate paid by the employer for the same or similar work performed by other employees who are not individuals with disabilities, and who are similarly situated in similar occupations by the same employer and who have similar training, experience, and skills; is performed in a location where the employee interacts with co-workers without disabilities; and provides workers with disabilities the same opportunities for career advancement as their non-disabled co-workers. 29 U.S.C. Sections 705(5) and 709(a)(1)(C).

The Office of Disability Employment Policy (ODEP) was created in 2001 to improve employment outcomes for people with disabilities. Since 2012, ODEP has conducted the Employment First State Leadership Mentoring Program (EFSLMP) and Provider Transformation work to facilitate improvements in CIE outcomes. Since 2014, ODEP's work has included a significant focus on the implementation of provisions of WIOA, especially in systems change that results in CIE. This priority reflects the nationwide movement of Employment First (E1st), a framework for systems change based on the premise that all individuals, including people with significant disabilities, are capable of full participation in CIE, and that employment should be the first service offered to working-aged individuals with significant disabilities.

The purpose of this report is to:

- Provide an overview of the WIOA provisions related to CIE.
- Outline the key points from the Advisory Committee on Increasing Competitive Integrated Employment for Individuals with Disabilities' (ACICIEID) Final Report.
- Provide an overview of the successes and the challenges of ODEP's Provider Transformation initiatives.

¹ See <https://www.doleta.gov/wioa/about/overview>.

- Provide a roadmap to ODEP’s CIE technical assistance resources as well as the Data and Resources to Inspire a Vision of Employment (DRIVE) Website. DRIVE is a comprehensive resource for policy-makers, researchers, and stakeholders on national trends and state EFSLMP systems change work.

II. Background

Employment Participation Rate

Unemployment and under-employment of people with disabilities has been a major concern in the United States for decades. The National Trends in Disability Employment (nTIDE) August 2019 Jobs Report noted a labor participation rate of 34.7 percent for people with disabilities (compared to 77.4 percent of people without disabilities) in the United States. This report also stated that “[t]he employment-to-population ratio for working-age people with disabilities increased from 30.2 percent in August 2018 to 32 percent in August 2019 (up 6 percent or 1.8 percentage points). For working-age people without disabilities, the employment-to-population ratio also increased from 73.8 percent in August 2018 to 74.6 percent in August 2019 (up 1.1 percent or 0.8 percentage points).” While there has been slow, incremental improvement in the employment of people with disabilities in recent years, the unemployment of people with disabilities has been, and is, a significant and stubbornly persistent concern.

Workforce Innovation and Opportunity Act of 2014 (WIOA)

The purpose of WIOA is to streamline, consolidate, and improve workforce development and training services for various groups, including youth and workers with disabilities. Significantly, WIOA amended the Vocational Rehabilitation Act by adding a new section which placed new limitations on the payment of a subminimum wage under section 14(c) of the Fair Labor Standards Act (FLSA). Section 511 requires that workers with disabilities who are age 24 or younger (youth) complete various requirements designed to improve their access to CIE, including transition services, vocational rehabilitation, and career counseling services before they are employed at subminimum wages. Section 511 also provides that all workers with disabilities who are paid subminimum wages, regardless of age, receive regular career counseling, information and referrals, and information about self-advocacy, self-determination, and peer mentoring training opportunities in their local area every six months during the first year of employment and annually thereafter.

In addition to the requirements under Section 511, additional substantive provisions of WIOA include:

- Prohibiting schools from contracting with subminimum wage providers.

- Requiring state agencies—including Medicaid, Intellectual and Developmental Disabilities (I/DD), Vocational Rehabilitation, and Education—to enter into cooperative agreements to prioritize CIE.
- Requiring at least 15 percent of vocational rehabilitation funding be used for pre-employment transition services.
- Extending supported employment services from 18 to 24 months.
- Requiring at least half of states’ supported employment grant funds be used for youth (up to age 24) with the most significant disabilities.
- Creating the ACICIEID.

Advisory Committee on Increasing Competitive Integrated Employment for Individuals with Disabilities

Congress established the ACICIEID (“Committee”) under Section 609 of the Rehabilitation Act of 1973, as amended by Section 461 of WIOA, to advise the Secretary of Labor and Congress on:

- Ways to increase employment participation of individuals with I/DD and other individuals with significant disabilities through opportunities for CIE; and
- The use of the certificate program carried out under Section 14(c) of the FLSA for employing individuals with I/DD, and other individuals with significant disabilities, including ways to improve oversight of such certificates.

The Committee comprised eighteen non-governmental members and seven federal official members. The Committee started work in January 2015 and delivered a Final Report² to the Secretary of Labor and Congress in September 2016. The Committee’s recommendations were organized around the overall theme of Capacity Building.

The Committee’s principal recommendations focused on the need for resources and capacity building to provide CIE in communities nationwide. The Committee also called for Congress to amend the FLSA to allow for a multi-year, well-planned phase out of Section 14(c). The Committee recommended that a federal interagency task force focused on policies to expand capacity of CIE and advance economic self-sufficiency support the phase-out effort. The Committee also noted the importance of transitioning youth to adult employment through early work experiences, family involvement and support, and professional development and training.

The Committee highlighted the importance of increased business and employer engagement through more effective communication and outreach to businesses, revisions to federal tax incentives and credits available to employers that hire people with disabilities, and incentives for businesses to create and expand hiring initiatives in high-growth industries, such as healthcare.

²The Final Report and its recommendations were not cleared or approved by the Secretary of Labor, the U.S. Department of Labor, or the Administration, and, as such, the views expressed in this report should not be regarded as those of the Secretary, the Department, or the Administration. The report represented the collaborative work and final recommendations of the Committee as a whole.

The Committee also stressed the importance of reforming the AbilityOne® program to create more CIE opportunities by better aligning the program with modern federal disability law and policy goals. The Committee’s full report and recommendations can be found online at <https://www.dol.gov/odep/topics/wioa.htm>.

III. Employment First State Leadership Mentoring Program (EFSLMP)

ODEP began the EFSLMP in 2012 in response to states’ request for assistance on how to support individuals with significant disabilities in CIE. Over the past eight years, ODEP has focused on four strategies to support E1st principles and to build CIE.

- **National Employment First Strategic Policy Framework** contains ideas and tools for states and federal agencies who want to implement E1st principles;
- **Criteria for Performance Excellence in Employment First State Systems Change and Provider Transformation** provides a specific approach for facilitating E1st systems change efforts within State government and among service provider networks providing services to youth and adults with significant disabilities;
- **Vision Quest (VQ) Policy Working Group Model** brings states together with subject matter experts (SMEs) to focus on one area of policy. Vision Quest utilizes a three-phased approach—analysis, development, and implementation—in a time-limited, virtual, and facilitated working group structure to achieve policy outcomes; and
- **Provider Transformation Assessment & Action Planning Technical Resources** includes specific technical resources, designed through provider feedback, to help providers of employment services assess their strengths and gaps, identify where additional technical assistance is required, and formulate an action plan for addressing a specific number of strategic objectives related to CIE transformation.

States apply for technical assistance through an application process. In 2019, ODEP recruited seven Core states and nine Vision Quest Policy Working Group states to receive intensive technical assistance and ongoing mentoring through onsite, telecommunications, and virtual mediums. Core states commit to a cross-system, cross-disability approach to promoting Employment First systems change efforts and receive a combination of onsite and virtual technical assistance. Vision Quest states work with ODEP in small working groups focused on analyzing, developing and implementing policy recommendations related to a specific aspect of a state’s systems-change efforts. To date, 24 states have participated in systems change efforts related to E1st. Of the technical assistance areas offered through EFSLMP, Provider Transformation is the most popular. In FY 2019, four out of seven Core states chose Provider Transformation and in FY 2018, five out of ten Core states selected Provider Transformation. (In FY 2017, eight states out of nine picked Provider Transformation. In FY 2016, eleven states out of nineteen chose Provider Transformation.)

In 2018-2019, States applied for either Core state training and technical assistance and/or Vision Quest. In order to apply for Core state status, states had to demonstrate that six state agencies

agreed to participate: Vocational Rehabilitation, Intellectual and Developmental Disabilities, Mental Health, Workforce Investment, Education, and Medicaid. (States without commitments from all six agencies were not eligible to apply to be a Core state.) In contrast, states that chose Vision Quest technical assistance were required to have commitments from at least three agencies.

Provider Transformation Initiative

ODEP's Provider Transformation Initiative represents an important focus for the implementation of CIE. ODEP began this work at the request of community service providers. The purpose is to assist service providers to understand how they can maintain a successful business model and assist individuals with significant disabilities to enter CIE.

The EFSLMP Provider Transformation model usually follows a three-step process of: self-assessment, development of transformation plan, and implementation of transformation plan. The model is based on the use of Subject Matter Experts (SMEs). Peer SMEs guide providers through every step of the process and have first-hand experience on successful transformation strategies and advice about strategies that were not successful. Further, the process is flexible: SMEs work with providers at their pace.

More than 32 SMEs have worked directly with provider agencies to assess their strengths and challenges and to guide them as they take the steps toward transformation from operating under 14(c) certificates and legacy vocational services into organizations providing CIE services and outcomes.

The Provider Transformation Initiative offers additional opportunities for technical support beyond the direct support furnished to state agencies and providers. An important feature of the initiative is that providers learn from peers that have undergone some level of business transformation in providing employment services that result in CIE. The initiative also invites providers to join a monthly national Community of Practice (CoP) event, featuring no-cost webinars by the SMEs knowledgeable in all aspects of E1st and provider transformation.

Challenges and Successes of Provider Transformation

ODEP recognizes that Provider Transformation is a complex process involving many factors. ODEP defines Provider Transformation as the process where community-based disability service providers (typically contractors of Developmental Disabilities, Medicaid and/or state Vocational Rehabilitation agencies) are supported to transform their service delivery model to one driven by CIE. The complexity of this transition is reflected in the different areas of focus that states have selected for targeted technical assistance. States most frequently select the following six topics as areas for improvement in the interest of CIE outcomes: State Policy; Interagency Agreements or Memorandums of Understanding; State Team Development; Funding Rates and Structures; Mental Health and Dual Diagnosis; and Provider Transformation. States have also identified the following other topics as areas of focus: State as a Model Employer; Data Systems; Medicaid

Waivers for Employment; Assistive Technology; Implementation of WIOA; Transportation; Veterans Employment; Addressing Subminimum Wages; and Employer Engagement.

Providers, however, confront additional barriers to transformation, particularly around strategic planning, financial planning, and forecasting around new models. According to one EFSLMP state lead, one provider has sufficient capacity, but is not “getting people in the door. How do you sustain when you don’t have 100 people in the building? How do you adjust those costs?” Providers are also implementing activities that “aren’t accounted for in our services” and “maybe aren’t getting paid for,” which “may not be sustainable.” (Shaheen et al., 2018). Moreover, transformation requires significant changes in communication, human resources, and development. Addressing each of these facets can be overwhelming for providers with limited resources. One rural provider summed up the many challenges it faced prior to transition as “embracing change throughout the agency, aligning funding to support integrated employment, “rural-ness” geographic spread, transportation, staff shortages, and changing expectations of people served, parents, employers, and staff.” (Witte and Tewes, 2018).

Pennsylvania

In 2017, Pennsylvania offered a provider transformation boot camp, which included technical assistance provided by an SME to aid state leaders in transitioning their services to CIE. The focus of the boot camp was on providing networking opportunities, bringing in executives from the provider agencies, and supplying strategies for communicating with the community about changes as well as offering information on funding (Shaheen et al., 2018). According to one respondent, boot camps clarified the transformation process for providers, with an SME “[breaking] it down, from how to steer [an] agency toward transformation, and how to work with [their] employees.” (DiBiase, et al., 2017). Providers in Pennsylvania found boot camps to be extremely helpful, and other states have emulated the model. When ODEP was concerned that it would not be able to provide more boot camps due to limits in federal funding, the Pennsylvania Office of Vocational Rehabilitation provided funding for three more boot camps. (Shaheen et al., 2018).

Pennsylvania also developed a Community of Practice (CoP) for providers during 2017 that continued in 2018. The CoP centered around a webinar series on provider transformation that reached out to providers and gave them information about successful practices in implementing transformation. Further, the CoP platform served as a foundation for engaging providers and other employers on ways to cultivate provider/employer partnerships. (Shaheen et al., 2018).

In sum, the Pennsylvania EFSLMP focused on direct work with six returning providers to improve their capacity for provider transformation. Since the six providers had been engaged within different time periods, the EFSLMP and their SME staggered the focus of their activities according to how long the providers had been engaged. They began by identifying needs and then providing different technical assistance for these providers who were in the third year of engagement that commenced with the boot camps versus providers in the second year of engagement. As systems change gains traction in Pennsylvania, other state agencies are contributing to the transition effort. For example, the EFSLMP state lead from Pennsylvania said, “some of those in the boot camp are receiving one-to-one help from the SMEs. We’re

funding this separately from the EFSLMP ones. It's a collaboration between the state Developmental Disability office and Vocational Rehabilitation.” (Shaheen et al., 2018).

Ohio

Ohio's experience as a Core state illustrates the challenges and variety of outcomes under the Provider Transformation program. Ohio's Core state grant addressed provider transformation at three specific agencies—Goodwill Columbus, United Cerebral Palsy of Cleveland (UCP), and a small third provider.³ Goodwill's strategic plan aims for the entire organization to be completely community-based by 2025. With SME support, Goodwill is “moving right along” with implementation of their transformation plan. (Shaheen et al., 2018). Goodwill noted that its great challenge is how to support individuals with severe, persistent mental illness as well as intellectual or developmental disabilities. Goodwill has a dual diagnosis program and its volume of referrals prevents closing “the front door,” necessitating a different model (Shaheen et al., 2018).

In contrast, UCP does not plan to be fully community-based, but is “working to increase their community engagement and employment division” (Shaheen et al., 2018). UCP is struggling with how to prioritize person-centered employment and community engagement services for individuals with complex support needs within their adult day setting. Though leadership is “completely on board,” UCP's transformation is also hampered by foundational beliefs among some mid-level managers and direct support professionals who remain convinced the individuals with disabilities “can't get services in the community or work in the community.” Since UCP was not progressing at an ideal pace after four years of support, the state “pushed them a little bit harder” and assigned a Community Life Engagement Project Manager to monitor their advancement. According to the state lead, UCP is exhibiting progress in reducing facility-based services (Shaheen et al., 2018).

The third provider ultimately opted to step away from EFSLMP support due to a “complete disagreement” between its owners about the composition of services. The owners worked with an SME on community-based employment, social, and recreational services. However, though two managers supported transformation and “are working really hard to do it,” EFSLMP assistance did not work because the owners “have to work it out on their own...behind closed doors” (Shaheen et al., 2018). Due to this provider's withdrawal from EFSLMP, Ohio redirected the SME time to provider training. This training has centered on encouraging best practices in person-centered and outcome-based services, including career planning.

Tennessee

During the 2016–2017 year, the Tennessee EFSLMP worked on refining and completing the objectives contained in the Governor's 2013 Executive Order creating the Employment First Task Force. With SME assistance, state agencies worked on increasing the awareness and adoption of customized employment and clarifying its correlation to the Individual Placement

³ The report does not identify the third provider in Ohio in order to protect against the release of personally identifiable information.

and Support model (IPS). Although the EFSLMP leadership team acknowledged challenges that many states face (e.g., fear of change, inertia among some partners, fiscal concerns, and staff turnover or time constraints), Tennessee made progress by establishing its own group of state-based SMEs (DiBiase, et al., 2017).

In particular, Tennessee plans to maintain its ability to work with agencies and continue provider transformation by employing a cadre of “homegrown” SMEs who are trained in best practices. Tennessee developed a three-part implementation strategy that began with developing a mentorship guide for the Tennessee Employment First Leadership Initiative (TEFLI). The Guide provided a template for training and supporting trainers throughout the implementation. Next, EFSLMP SMEs provided training on mentorship to two or three candidates selected to be SMEs within TEFLI. Finally, Tennessee followed up its work with sustainability planning to establish and grow the process in future years (Shaheen et al., 2018).

Based on their participation in the program, the Tennessee EFSLMP state leadership team has continued to bring new providers on board with the process. Current providers also continue to make progress; one has closed its sheltered workshop that paid subminimum wages and the other is on its last 14(c) contract (DiBiase, et al., 2017). The action plans that were established in this EFSLMP year are in progress. A third provider has had some significant challenges, including executive leadership turnover, but EFSLMP is helping them address these issues.

As challenging as Provider Transformation has proved to be, several providers in Tennessee that have participated have successfully transformed their business model. For example, Dwayne Webb, the Director for Employment and Day Services at St. John’s Community Services (St. John’s), described St. John’s provider transformation process as a six-step process. The steps were: Gather Information; Set the Vision; Create a Plan; Bring Stakeholders Along; Implement the Plan; and Collect the Data-Share the Stories (Webb, 2017).

Finally, the Tennessee EFSLMP consortium facilitated the development and dissemination of a *Guide for Provider Transformation*. Partners involved in the effort included TennesseeWorks, the Vanderbilt Kennedy Center for Excellence in Developmental Disabilities, SRVS of Memphis, Impact Centers, Arc Tennessee, and the Tennessee Department of Intellectual and Developmental Disabilities (DIDD). The Administration on Intellectual and Developmental Disabilities (AIDD) at the Department of Health and Human Services and ODEP also provided support. The guide for transformation lays out a roadmap of the benefits, challenges, and best and emerging practices leading to reduction of segregated, sheltered work in favor of CIE (DiBiase, et al., 2017).

IV. ODEP Resources to Support Implementation of CIE

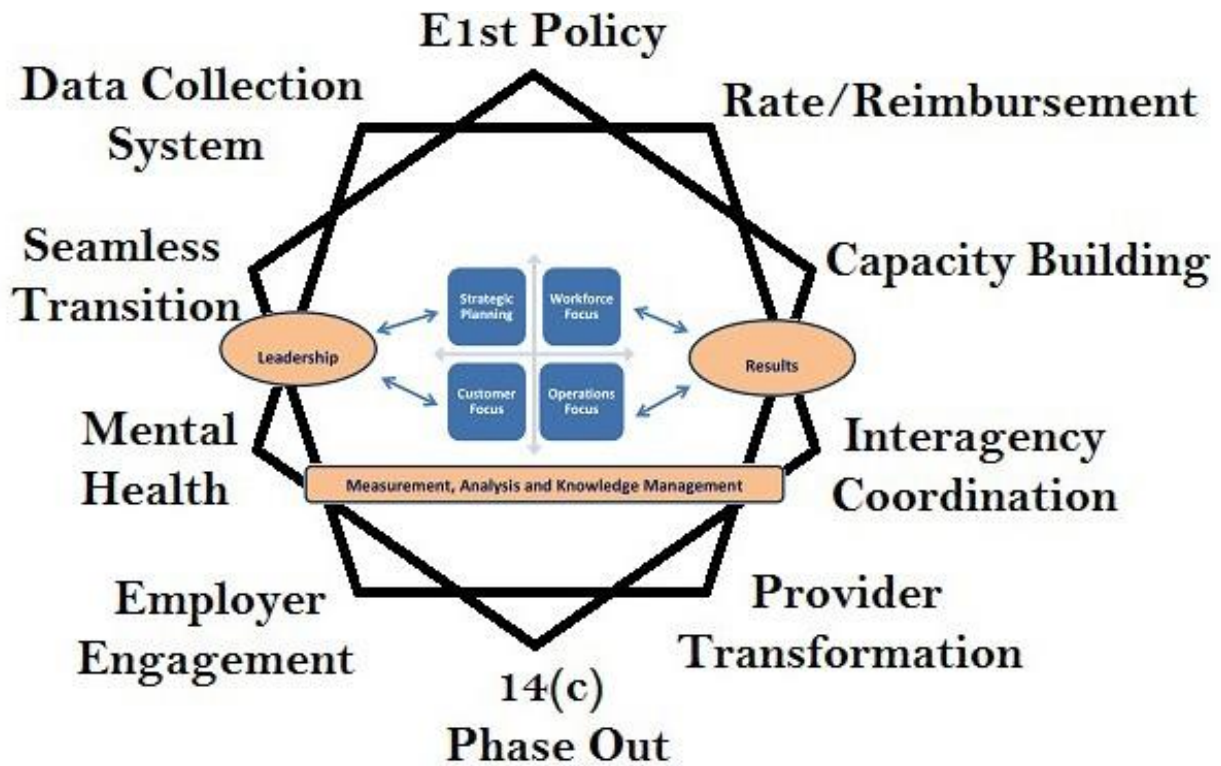
ODEP worked with national SMEs to develop written resources to implement CIE. These include an important array of documents covering a wide range of topics. The documents distill assistance and guidance from SMEs who are knowledgeable on a wide range of practices and policies related to the implementation of CIE. In addition, these documents have been developed with practitioners at the local and state levels.

State Guides

Areas of intense focus for states are represented in ODEP’s “S.T.A.R. Chart” in Figure 1. ODEP identified ten critical areas to increase CIE that focus on areas identified in the recommendations in the ACICIEID Final Report. Significantly, the ten areas fall within the scope of the technical assistance provided through the EFSLMP initiative. The specific areas of focus within the chart coupled with the ten policy areas are meant to create a holistic approach to statewide systems change across all ten areas over time (LEAD Center, 2017a). These areas are:

1. Employment First Policy
2. Rate/Reimbursement
3. Capacity Building
4. Interagency Coordination
5. Provider Transformation
6. 14(c) Phase Out
7. Employer Engagement
8. Mental Health
9. Seamless Transition
10. Data Collection System

Figure 1: State Transformation Activity Record (S.T.A.R.) Chart



Provider Transformation Manual

ODEP’s EFSLMP efforts developed the Provider Transformation Manual Pilot Version offering providers strategies and best practices for transformation. The Pilot Version was launched through a series of six Provider Transformation Webinars to highlight key strategies, offer stories to illustrate these strategies, and elicit feedback from providers to determine what additional knowledge and expertise they needed in their transformation work. Due to high demand for additional provider transformation resources, ODEP published *Provider Transformation Manual 2.0* in 2018 (LEAD Center, 2017b, 2018).

Many providers on the road to transformation seek more advanced knowledge. These include agencies well down the path to conversion, those recently engaged in the effort, and those that launched an earlier effort that stalled for a variety of reasons. *Provider Transformation Manual 2.0* supports these providers in the midst of transformation with modules that offer a more in-depth look at specific areas of organizational change. The strategies and best practices described here have been developed through the efforts of numerous providers who have been transforming their agencies as part of the nationwide E1st movement. The *Provider Transformation Manual 2.0* includes six modules that describe:

1. Redesigning Your Organization
2. Staff Development, Recruitment, Restructuring
3. Staff Training
4. Effective Stakeholder Engagements
5. The Importance of Effective Advocacy for Better Policy: Collaboration, Coalitions, Communities of Practice, and Capacity Building at the Local Level
6. Financial Planning for Transformational Change

State Strategic Planning Manual

In 2019, ODEP developed the *State Strategic Planning Manual* (LEAD Center, 2019). This manual provides states with strategies and tools to create their own strategic plan to implement E1st and to increase CIE outcomes for people with disabilities. This manual has two sections. Each section includes an introduction, suggested strategies and tools that can be used in the process, and milestones to be achieved. The first section describes the eight phases of strategic planning. These eight phases are:

1. Pre-Planning Steps
2. Formulating The Vision
3. Engaging Stakeholders
4. Getting Everyone on The Same Page
5. Conducting Exploration
6. Defining Outcomes
7. Formulating the Plan
8. Implementing the Plan

The second portion of the manual describes five strategic priorities and potential focus areas, which are aligned with the ODEP Vision Quest process. These five priority areas are: Cross System Collaboration; Capacity Building; Provider Transformation; School to Work Transition; and Employer Engagement.

Value-Based Payment Methodologies to Advance Employment First

This guide has been created to assist state agencies and other funding sources (e.g., managed care organizations, county governments, school districts, etc.) that serve people with disabilities and purchase or plan to purchase services that support CIE participation. The guide is intended to be a single resource that captures a substantial variety of the approaches to “Rate Restructuring” that have been developed and implemented across the country. Rate Restructuring can be an important part of the provider transformation process. When rates are revised to incentivize CIE,

providers, with proper training and mentoring, can be better positioned to provide CIE. This guide is currently under review and is scheduled for publication in 2020.

Vision Quest Replication Guide

ODEP has also developed a guide for state interagency collaboration and policy aligned in the *Vision Quest (VQ) Replication Guide: Using Collaboration and Aligning Resources to Achieve Systems Change within State government*. Effective change to CIE requires attention to state policies and procedures across state agencies that are not aligned, in focus on CIE outcomes (Cooper & Crandell, 2017).

The Vision Quest guide provides a process to assist states in building consensus regarding needed system improvements. ODEP designed a process as a three-phase approach rooted in the values of shared decision-making, continuous quality improvement, and measurable systems change. While the VQ process is a tool that can be applied to any issue requiring policy analysis across state agencies, VQ has been particularly helpful for states desiring to alter their rate structures. This three-phase process includes Policy Analysis, Policy Development, and Policy Implementation, as noted in Figure 2.

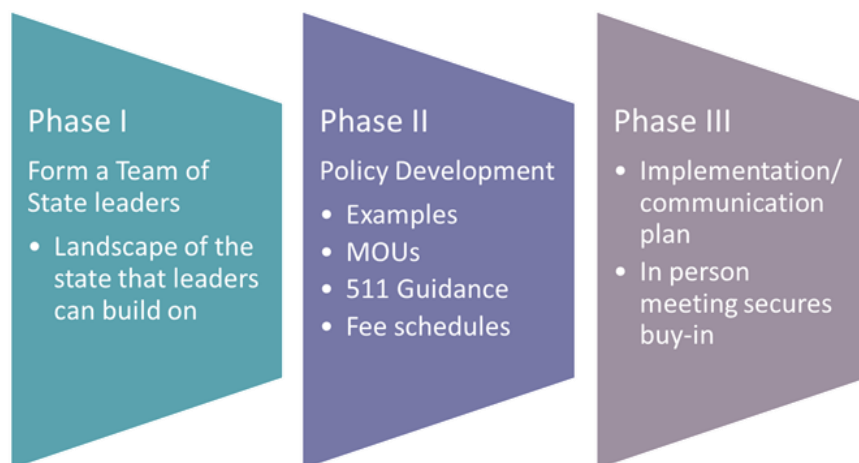


Figure 2. Vision Quest (VQ) Three-Phase Approach

Criteria for Performance Excellence

ODEP has developed a set of criteria to assist states to successfully implement systems change within a comprehensive E1st strategic framework (LEAD Center, n.d.). The Criteria for Performance Excellence were developed in collaboration with a pool of 18 national SMEs. The criteria were tested and validated in conjunction with the provision of intense technical assistance to Core State government teams, as in information sharing, training, and technical support to an additional 43 states participating in ODEP's CoP when the criteria were developed. The purposes of the Criteria for Performance Excellence are: (a) to serve as a baseline tool for

State governments in developing a roadmap for comprehensive E1st systems change efforts; and (b) to clarify key definitions, effective practices, and service delivery strategies that lead to CIE.

The Criteria for Performance Excellence are designed around seven key elements: Leadership; Strategic Planning; Customer Focus; Workforce Focus; Operations Focus; Results; and Ongoing Measurement, Analysis, & Knowledge.

Community of Practice (CoP)

ODEP created an Employment First (E1st) CoP, open to anyone interested in E1st. Participants from all 50 states and more than 2,800 individual participants are currently subscribed to the EFSLMP CoP. The EFSLMP CoP provides services to support state E1st teams, including monthly webinars: monthly presentations on a wide range of related E1st topics, facilitated by local, state, and national leaders. Through this CoP, which began in 2012, ODEP maintains and provides free access to archived webinars and other technical assistance resources and policy tools developed through ODEP's EFSLMP. The range of topics for these materials includes: Provider Transformation; Funding Diversification; Advocacy for Policy; Staff Training; Meaningful Day; Staff Development; Organizational Redesign; Service Transformation in a Large Agency; Staff Reorganization; Individualized Planning; Strategic Planning; Leadership Development; Rural Perspectives; Prioritizing and Implementing Effective Practices; Organizational Leadership; Professional Development and Capacity Building; and Values Framework and Policy. To access archived CoP webinars and other Employment First resources, visit: <https://www.dol.gov/odep/topics/EmploymentFirst.htm>.

DRIVE (Data and Resources to Inspire a Vision of Employment) Website

Funded by ODEP, DRIVE (<http://drivedisabilityemployment.org/home>) provides a comprehensive resource for policy-makers, researchers, and all interested stakeholders to learn about national trends and state EFSLMP systems change work focused on CIE. This website includes:

- Downloaded outcome data across respective federally funded systems (e.g., education, I/DD adult services, Medicaid, mental health, vocational rehabilitation, wage & hour, workforce investment, AbilityOne®, and others). State data are also available, and the system allows users to compare data from up to three states at a time;
- Comprehensive profiles for each individual state regarding its legislation, policies, gubernatorial actions, funding initiatives, pilots, and strategic partnerships related to increasing CIE options for individuals with disabilities; and
- Customized search capability to ascertain all policies/actions around specific topics.

In FY 2018, the DRIVE Website added a new feature: Provider Transformation. This tab (<http://drivedisabilityemployment.org/provider-transformation-resources>) is a one-stop shop for all the materials developed by ODEP that relate to Provider Transformation.

V. Conclusion

The report describes efforts initiated by ODEP to increase Competitive Integrated Employment (CIE) outcomes for people with significant disabilities since starting EFSLMP in 2012. More recently, since WIOA enactment in 2014 and the 2016 report of the ACICIEID, ODEP has stressed CIE and the change needed in states and by providers of services to improve CIE outcomes. This report captures some of the breadth, depth, and context of ODEP's Employment First and Provider Transformation efforts, summarizes related resources, and refers readers to source documents for more complete information.

ODEP has engaged dozens of SMEs who address the wide range of topics related to CIE and Provider Transformation. SMEs have demonstrated knowledge and practical application of implementation strategies. As a result of the SMEs' efforts, states have initiated and implemented state level initiatives, policies, and/or new implementation strategies in the interest of improving CIE outcomes. The number of states requesting and competing each year for assistance attests to the value they assign to ODEP's and SMEs' support. In short, states will continue to need training, technical assistance, additional resources on emerging issues, and updates to current resources as they continue to work with providers on the challenges of transformation.

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