Getting People with Disabilities to Work: NYS ACCES-VR

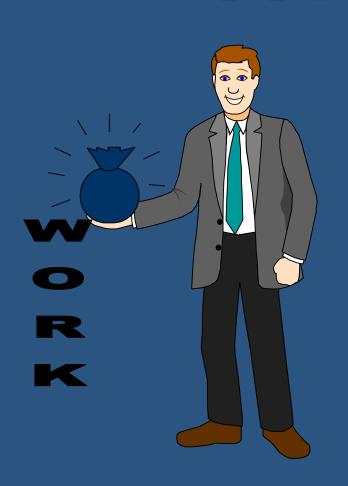


ACCES-VR stands for:

- <u>A</u>dult
- Career and
- <u>C</u>ontinuing
- Education
- Services
- Vocational
- Rehabilitation



ACCES' MISSION



 ASSIST PEOPLE WITH DISABILITIES IN GOING TO WORK



ACCES-VR SERVICES

- Job Counseling
- Job Assessment
- Job Training
- Transition Services
- Driver Training
- RehabilitationTechnology
- Books and Tools

- Home Modification
- Occupational License
- Vehicle Modifications
- Self-employment
- Prosthetic Devices
- Hearing Aids
- Other services leading to homemaker goal

HOW ARE SERVICES DETERMINED?

Factors to consider:

- Consumer interests/aptitude
- Limitations and strengths
- Cost effectiveness of services
- Agency policy
- Job market

NOT BASED ON INCOME

- Diagnostic and evaluation services
- Reader and notetaker services
- Vocational guidance and counseling
- Interpreter services
- Job coaching and supported employment services
- Job placement
- Cost effective training at BOCES, Business or community college up to \$4815

BASED ON INCOME

- Training at colleges and universities
- College books and supplies
- Physical and mental restoration
- Modifications to homes, vehicles and worksites
- Telecommunication devices, sensory or technological aids
- Driver training
- Self employment stocks and supplies
- Occupational and business licenses
- Maintenance (\$ toward college living expenses)
- Transportation



JOB PLACEMENT SERVICES

- SupportedEmployment
- Job Seeking Skills
- Tax Credits
- Independent Job Developers

- Work Tryout
- On-The-Job Training
- Resume
- Interviewing Skills



Southern Tier ACCES-VR

 PLACED 693 INDIVIDUALS WITH DISABILITIES IN JOBS LAST YEAR (10/1/08 – 9/30/09)



WORKING WITH ACCES-VR

- Referral from School or Agency
- 2. Initial Meeting
- 3. Obtain Info for Eligibility
- 4. Transfer to Counselor
- 5. Eligibility Determination Made
- 6. If Eligible, Counselor Schedules Meeting
- 7. Individual Plan for Employment Developed
- 8. Services Take Place
- 9. Ready for Employment
- 10. Placement
- 11. Follow-Up
- 12. Case Closure

Sign me up...

- Fill out the highlighted sections on the referral form with your parent's signatures.
- Return the completed form to your Guidance counselor ASAP.

	609 East Church Elmira, NY 14 (607)734-5294 or (80)	901	
	Transition Referral Transmittal	Form for In-School Youth	
STUDENT DE	MOGRAPHIC INFORMATION: D	ate:	
Student Name:	Mr. Ms		
DOB:	Social Security Number	er:	
Student Addres	Street City/S	The state of the s	Code
	Street Chy/5	_	Code
	uardian Name/Address: #1		
	uardian Name/Address: #2		
Home Phone #	Other Phone Nu	mber:	
Grade Most Re	ecently Completed:Expected	Year of Graduation:	
	ACMOSTIC INFO: include copies of: Current IEP and psychological report (including or Current 504 Plan and supporting documents or Current Physician Report with diagnosis		
AND	Signed release of Information		
	tion, 504 or Medical Diagnosis:		
	modations for Initial Interview:		
•	OURCE INFORMATION:		
	n Making Referral:	Title	
	ncy Referring:		
	CODE: 0 0 0 0		
	t Student Resides In:		
	of Contact to help arrange interview:		
	udent during school days: Mornings		
Location of St	· · · · · · · · · · · · · · · · · · ·		
		until	
	ARTICIPATION: y for vocational rehabilitation services		