FINANCIAL STABILITY AND JOB RETENTION

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Good afternoon and welcome to the Southeast TACE webinar, financial stability and job retention: Public rehabilitation and asset development.

We'll begin the webinar in about 30 minutes, at 1:00 eastern, that's 12:00 central.

In the meantime we'll be doing a series of audio checks just to make sure everyone has audio. Thank you for tuning in early.

Good afternoon and welcome to the Southeast TACE webinar, financial stability and job retention: Public rehabilitation in asset development. We are presenting today Michael O'Brien and we'll begin the webinar in about 20 minutes at 1:00 eastern. In the meantime we'll do a series of audio checks. If you do have audio, please give me a green checkmark. The green checkmark is located underneath the participants' names in the participant window. Thank you.

Good afternoon, Abby, or I guess it's still morning for you. Do you want to do a quick audio check?

Good watch and welcome to the Southeast TACE webinar, financial stability and job retention: Public rehabilitation and asset development. We'll begin the webinar in about 15 minutes at 1:00 eastern, and that's 12:00 central.

We have Abby Cooper moderating today. Abby, would you like to say hello?
ABBY COOPER: Hello, everyone. Can you hear me okay?

CELESTIA OHRADZA: Sounds great. Just wanted to make sure I had the right line unmuted. And I did. Thank you, Abby.

ABBY COOPER: You can mute me now.

CELESTIA OHRADZA: Good afternoon and welcome to the Southeast TACE webinar, financial stability and job retention. We'll begin the webinar in about ten minutes.

Michael, can we do a quick sound check with you, please.

MICHAEL O'BRIEN: I'm online, so let me know what you hear. Were you able to hear me effectively? Also, I'm not currently able to move the PowerPoint, I assume that work once we start the presentation?

CELESTIA OHRADZA: Good afternoon and welcome to the Southeast TACE webinar financial stability and job retention: Public rehabilitation and asset development. We'll begin the webinar in about five minutes at 1:00 eastern, and that's 12:00 for all of you in central time. In the mean tile we'll do a series of audio checks just to make sure all of our participants have audio. If you have audio at this time, please give me a green checkmark. If you have any questions, either for the presenter or technical in nature, you can type them in the chat room. All participants' microphones and phone lines are muted.

Thank you.

Good afternoon and welcome to the Southeast TACE webinar part five of the asset development series, financial stability and job retention: Public rehabilitation and asset development.

We have Abby Cooper moderating and Michael O'Brien presenting. And this is our final audio check. If you do have audio, please give me a green checkmark.

ABBY COOPER: Hello. My name is Abby Cooper, and I'd like to welcome you all to the 2011 Southeast TACE webinar series. I will be facilitating today's TACE webinar.

And as most of you know, the southeast region TACE center's mission is to improve the quality and effectiveness of vocational rehabilitation services and enhance employment outcomes for individuals with disabilities in the eight southeastern states, Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, Tennessee, and South Carolina.
TACE is a collaboration with the DBTAC and the southeast ADA center, and both the TACE and the southeast ADA center are managed by the Burton Blatt Institute of Syracuse University.

As many of you know we're hosting a lot of webinars this year, so if you've already signed up, that's great. If you haven't, please visit our new improved website and see what we are offering.

All instructions and materials for each of the webinars are posted on our website.

I just want to do a quick reminder about the webinar system. We use a system that's fully accessible to anyone regardless of their disability or assistive technology that might be used with a computer.

The system makes it possible for us to conduct workshops over the internet from just about any computer with an internet connection web browser. Unfortunately, there may be computer issues inherent in your system that are just beyond our control.

That is why it is important for you to check your system prior to the session. Staff are available upon request to work with you in advance of the session, and I want to stress the word in advance. We are unable to troubleshoot technical issues at this point right before the webinar is scheduled to begin.

During today's session type your questions into the chat area. Mike O'Brien will answer your questions as they appear in the chat area.

Also, at this time we're advising you to close all other applications you may have running on your computer because it could interfere with a successful experience today.

You might also turn off the automatic systems check your computer does automatically to eliminate any further interference with the session. And sometimes if your computer's networked it will shut down if it stays idle for too long. So if that's the case, do not forget to periodically tap the space bar just to let the webinar system know you're still there.

Okay, we're ready to begin. And first I have a quick question for all of you is how many of you have been on other asset development webinars that we've been running? If you could just give a checkmark next to your name if you have, that would be wonderful.

Okay, great. Thank you.
Now it is my great pleasure to introduce Mike O'Brien. Mike O'Brien, before I get into the spiel of his bio, I just personally want to say that Mike O'Brien is one of the most innovative vocational directors in the country. He is somebody for the last ten years who has been very committed to the issue of asset development and I am so excited that he's agreed to provide this presentation for us.

He is the director of Oklahoma rehabilitation. He directs more than 900 state employees. He also directs six divisions of voc rehabilitation, the division of visual services, Oklahoma School for the Blind, Oklahoma school for the Deaf, disability determination division and support service.

He previously to being director of voc rehab of Oklahoma, he was director of rehabilitation in special education, master's degree program at in Las Vegas, New Mexico. He has    he also runs his own consulting business. He has a doctorate of education in occupational and adult education from Oklahoma State University in stillwater, a master's of art in career vocational guidance and a bachelor's in psychology.

He previously was director of Washington vocational rehabilitation and he is affiliate of the University of Washington School of Medicine, western Washington University, western Oregon University, University of Idaho, and I'm kind of wondering how he has time to breathe. But it is is it is my great pleasure to introduce Mike O'Brien. Mike, take it away.

MICHAEL O'BRIEN: Thanks, Abby. Let's start with I've long been concerned about the issue of poverty among people with disabilities. And Abby and I have actually worked together a number of years to look at how we might actually deal with that issue. If you remain on Social Security disability or you remain on SSI, it's not just an issue of poverty now, the information tells us that your grandchildren will be in poverty as well.

So we're talking about something that goes across generations, and unless we as rehabilitation professionals begin to look at whatever means we can find to help people with disabilities establish their own futures, both by being able to buy homes, buy cars, buy having choice in what happens to them and where they go, then all we're doing with our work is creating a baseline of poverty for multiple generations of people.

And so for a number of years several of us across the country have begun looking at both not just the issue of employment, and not just the issue of independent living, but the issue of asset development and how is it we position people with disabilities to have a future that is greater than whatever the minimum SSI payment is and whatever the minimum SSDI payment is and whatever the minimum their jobs will produce for them.
And so as we begin to talk about the things that we're going look at today, keep it in the back of your mind is that what we want to do is prevent generations of poverty and create instead positions where people own their own futures. And that comes from rehabilitation professionals beginning to think differently about where we're going and what are all the things that we're doing.

And as we have this conversation today, I'm going to talk to you about things that I've developed both in partnership in Washington as Abby and I work together and things that we have begun to develop in Oklahoma.

You should understand that none of these models are finalized yet, they are good introductory steps that we begin to see real differences with, and that we're hopeful ultimately that other people will begin to consider.

But you have to start with the foundation of it's not just enough to get somebody a job. We have to think about how do we get somebody control over their entire future, which includes owning a home, owning a car, making choices about where they're going. And until we resolve all of that, we're not ever going to be in a position that people will mostly choose work over disability revenues.

And that's where we ultimately need to head. If we're going to have long term support from Congress, from state legislators, from the people who fund our programs ultimately, we've got to be in a position that our driving efforts, the things that will make a difference, include positioning people with disabilities to have full control over their future that positions them to make choices about where they live, what they do, what they own, and so the conversations we're going to have today are hopefully things that will lead us in that direction.

In Oklahoma, as Abby said, I actually operate an agency, we're the ninth biggest agency in Oklahoma government and we're unusual in that we don't report to the governor, we're not part of the chain of command of politics, and so we're independent of that appointment process, and we're actually able to affect a number of areas. Our agency has both vocational rehabilitation, visual services, both the school for the blind and school for the Deaf, disability determinations, the library for the blind, et cetera, and our goal is to position people to find their choice in employment. And what we actually talk about is cool jobs with benefits and independence for people with disabilities.

What we mean by a cool job with benefits is most of us want a job that we would choose to work in, not a job that we settle for, a job that we want to do, a job that we like to do, and a job that ultimately provides us some kind of choice about where we're
going to be. We're not looking for minimum wage jobs, we're not looking for first job any job, we're talking about careers.

And when we talk about cool jobs, it's always about jobs that people themselves want to do. Now, when we talk about our two schools that we operate, the School for the Blind and school for the Deaf, we're trying to position our students to begin thinking about employment while they're in school, and to begin thinking about what their choices are going to be.

Yesterday I had lunch with the seniors at the Oklahoma School for the Blind, there are nine seniors there, and I think the conversations that we're beginning to have that we've been having the last four years are beginning to have a real impact, because what I discovered from those group of seniors is that five are enrolled for college next year and four already have jobs that they that they're in and that they will continue when they leave school.

This means that we're positioning people to think about careers and to own what their future is when they leave the school. Which is the same plan that we're talking about when somebody's involved in vocational rehabilitation or in visual services.

Now, last year was probably our best year in ten years. We had 2290 employment outcomes. We actually closed almost 2800 cases successfully for different issues. Our average yearly earnings are over $19,000. Now, you have to understand that in Oklahoma our cost of living is substantially less than it is in other places. As be example, just as a comparison, I live on 4 acres with a home with more than 2,000 square feet and I even have a shop with electricity and water, et cetera, that's over 1500 square feet, et cetera. And the value of my property is about $150,000. So when we talk about a $19,000 income wage, we're talking about that that's substantially different than if we were on the East coast or the West coast. It's comparable to what's happening in our states.

The average cost of closures, last year were $9,600. And the biggest issue for us, interestingly, is medical costs have now become our number one cost in the vocational rehabilitation process. Historically it had been fourth or fifth among the things that we pay for. What we discovered in Oklahoma because we're not a state that has chosen to participate in many of the federal healthcare programs and that we've actually returned healthcare money, is that as a result the vocational rehabilitation program becomes a supporter of healthcare services, at least in the short term.

Now, we're a rural state. We're amongst the fourth highest cattle producing state in the country. We really only have what we would call three primary urban areas.
Oklahoma City, Tulsa, and Lawton. That happens to be a large Army base and as a result is a relatively large urban community.

Our state is a little over three and a half million with the largest population being represented in Oklahoma City. Now, our biggest challenge is that one out of every six people in our state is in poverty.

We've got almost 25% of children at the poverty rate, over 7% of our population is in extreme poverty. And you have to understand that in rural areas in Oklahoma people still live in extreme poverty but manage to essentially live off the land in some ways. And so in remote areas like the southeastern part of the state you will see people who are managing to somehow get by, but that's a big concern.

And poverty from a disability perspective, we think there are roughly 580,000 people in our state that have a disability. And we believe that poverty is one of the most driving factors that affect our state as a whole, but in particular persons with a disability.

When you look at our overall wages, as you've talked with people around the country, in our average state wage for all jobs is just a little over $35,000. As you compare that to other states, obviously that wage is well below what you might see.

We've been convinced that if we can create economic stability for our clients, that we can make a difference. And that's not been a traditional part of vocational rehabilitation. Rehabilitation counselors have typically looked exclusively at how do we get somebody into a job that will make a difference. Hopefully a job that will be enough for them to consider leaving disability or SSI if they're receiving it, and to meet their needs.

But, as you can see with our state's average week at 35,000 and our average wage of closure at just a little over 19,000, we continue to be concerned about what is the impact that poverty is going to have on our clients. And in particular people with disabilities.

And we're convinced that if we can both do benefit planning at a reasonable level with our customers so that they can make informed choices and that we can do effective asset development so that they can own a part of their future, that those two things have to go in line with whatever kind of employment development we're considering.

Based on our PowerPoint, strictly speaking assets stock of capital, including savings, financial securities, owning a business or property, or less tangible things like achievement, job skills, training, access to credit. It's been an interesting thing, I've been in this business now December will be 35 years, and what I've discovered is that people with disabilities are left out of all phases. They don't have reasonable credit,
typically. They don't have access to any kind of savings or economic development on their own part. And what most people do is find a way to survive rather than thrive.

And so my concern is is that that affects people across generations. And that unless we can find a what to intervene effectively, we're preparing two generations from now to remain in poverty. And so we've got to find a we to position people with disabilities to both own businesses, own property, develop their job skills, have full access to credit that is manageable, not to position themselves to be fully in debt, but manageable, reasonable credit. All of those things that the citizenry of this country looks forward to. Welfare policy across the country for poor and people with disabilities has typically focused on just getting them income and historically just focused on getting them minimum levels of income.

Think about the SSI income that people get. You know, we're trying to tell people that between SSI and Medicaid and food stamps, that they can live on around six or $700 a month, which is just an unreasonable approach. If you're thinking about yourself and you want to have choice in your future, you know that at six or $700 a month you really have no choice, you can't choose really where you live, you can't choose to go out and eat, you can't choose to own a car. What you do is find a way to get by and survive at whatever the minimum levels are.

Public policy is typically people developing assets. It prevents people have having assets of more than $2,000 in their resources. Many people with disabilities don't even have a checking account or a savings account.

And those are concerns because to work in the American economy and to thrive in the American economy you've got to be able to develop things like a checking account, a savings account, and a reasonable credit rating.

You know, there's a program in New York City, fountain house, that works with their clients, what we've discovered there is that many of the people with mental illness can't get a bank account. So the clubhouse itself has had to establish its own banking services because people can't even get a savings account. If we're going to ever think about people with disability having the opportunity for full inclusion in American society, then we've got to position them to have full inclusion economically.

Tax codes created the middle class asset development programs, trying to help people leave poverty, who don't actually earn enough money to take advantage of tax codes. And what we've got to become as rehabilitation people is we've got to be in a position to have individuals on our staff who are experts in those particular kinds of information so that they can have conversations with our clients to be able to start making those kinds of choices.
As we viewed poverty, there are a number of factors that have been critical to us to think about. First of all, when we look about the behaviors of the individuals themselves. Research on choice, characteristic and habits of individuals, welfare, single parenthood, intergenerational, addiction, mental health, typically we've tried to create behaviors that force people to remain in those statuses. We don't really position people to think about leaving those kinds of statuses. As we begin the conversation about human and social capital in the community, research on these resources about individuals, communities, business, social capital, intellectual capital, well paying jobs, et cetera, people with disabilities are not generally being included in that. And unless those conversations begin, we're not going to be in a position to help them get there.

You know, we've been in an economic crisis for at least ten years in this country, and it has affected people with resources, people in the middle class and have been affected by it, but if you begin then to think about people with disabilities in particular and people in poverty, their ability to change their status has been dramatically limited by the changes that we face.

There's research on economic, political and social policies, et cetera. Resource limits. Taxation patterns, et cetera. The biggest issues is that we need as rehabilitation professionals to begin to have the conversation about how we can affect this for people with disabilities. And I think we've got multiple responsibilities. Number one is the responsible well our individual clients to help them find a way in the current environment to position themselves to be successful in asset development, employment, and in independent living.

But we also ultimately are going to have to have the responsibility to talk about public policy, to effect both the policy at the state government level and the policy at the federal government level in order to be a part of this.

For us to make an ultimate difference, we've got to consider all of the things that are involved, from both sides of the picture.

In Oklahoma as I began this conversation actually, I've been having this conversation for about nine or ten years now, both as a state director in Washington as a professor in New Mexico, and now as a state director in Oklahoma, I've continued to have this ongoing conversation about how do we affect poverty? How do we make a difference across time? People with disabilities historically are classified in poverty categories, historically they've got poor credit scores, historically they've not been given good information about how to manage their own money. It's not something that they've typically gotten in high school. Nor is it something that any of the agencies have
typically provided them about how to effectively consider their money, look at how they manage it and make decisions about money.

Their attitudes are how do I get just enough to get by as opposed to how can I take that money, do what I need to survive, but also then consider how to take that money and thrive. And I think ultimately in public rehabilitation our responsibility is not to find ways for people to get by, but to find ways for people to thrive.

And until we develop an attitude of thriving as opposed to just getting a job, it ultimately has a long term impact on all of the clients leaving our program.

The other thing is is that historically most of our clients, and frankly, many of our staff, are not truly informed about what can happen with public benefits.

There are lots of myths surrounding public benefits, there are lots of fears surrounding their public benefits. There is lots of confusion about what happens related to public benefits. And unless we ultimately position our counselors, our rehab technicians, even our supervisors at the local level to understand what truly can happen, then our clients are going to continue, our consumers are going to continue to not trust the process that they might ultimately have choice. Instead they're going to choose to protect sort of the bottom line for survival as opposed to considering any kind of level of thriving. So I think those are things that we've got to think about.

Which ultimately means that we've got to have people thinking differently about the role of the counselor and the role of anyone that has contact with our consumers or our clients.

And that means that we've got to start rethinking the whole process and financial planning, financial issues have to be integrated into whatever vocational counseling process we might have or whatever independent living process we might have.

We've got to move away if this sort of minimum standard kind of thinking.

As I began to look at how to change things in Oklahoma, there were a number of things that I began to look at. The first way was that I've always known that unless you focus on the issue, nothing will happen about it. Unless you specifically set aside people who have responsibility to deal with the issue, it will never get dealt with. As long as you keep it a general issue that you tell everyone is important, it won't actually happen. There has to be people who are accountable for it, who focus specifically on the tasks, who develop the skill sets and who become key in the process of responding to whatever the issues are going to be.
And so in Oklahoma what I decided right after I arrived here in 2008 was that we had to create a unit that focused on both benefit planning and asset development, and in sort of recovery of clients, making sure we don't lose clients along the way.

We needed people who could not only provide consultation to the rehab counselors or the clients, but they also needed to be able to provide consultation to our partners at the one stops, at the veterans administration, at the department of human services, and as a result we created these benefit planners in a specific unit under the supervision of someone who specializes in these tasks, so that they could be advisors both to the client or the consumer and to the counselor as well as to any partners who might serve people with disabilities.

There has to be the capacity to reach beyond just the individuals that we see in our agency. You know, we talk about there's 600,000 or so folks in the state of Oklahoma with disabilities, 580,000 I mean, that have disabilities. On any given day my agency can only afford to serve about 17 or 18,000 people.

So we've got to find a way to reach across the lines to our partners so that they're also finding meaningful information. And I think our benefit planners have been in a position to do that.

Now, in 2008 we formed a unit that as part of the unit there were six people who were specifically trained in benefit planning and asset development. We've now expanded that to eight people. Additionally, the supervisor and some consulting people, other VRCs and other supervisors across the state have also now received the training, that's not their specialty, but that's something that they could back up if they needed to.

And what we've decided is unless you focus on it, you can't make a difference about it.

Now, what we were able to do in the beginning stages of this is we were able to negotiate with Social Security that they would pay for our staff to receive the training from Virginia commonwealth, all of them have become certified WIPAs. In addition to that, they've received four weeks of ongoing training in public benefits, asset developments, and all of the benefit programs that exist in our state, beyond whatever the training is that they get as part of WIPAs, we've been able to look at veteran services, state specific services, et cetera, so that these benefit planners are truly experts in the state of Oklahoma on any service that might be available to someone and as part of those services they are then able to have a relationship with the consumer who comes in front of them to discuss both the impact if they choose employment, as well as potential financial coaching that they might receive along the way.
And this allows them to then begin the thinking about not just going to work, but beginning the process of how they can own their own future in independence. How might they choose at some point to the own a home; how might they choose at some point to own a car or buy a boat or whatever it is they want in order to have a full participation in their life as a citizen in Oklahoma.

Our benefit planners are knowledgeable in asset building resources, financial literacy curriculum, financial coaching, individual development accounts. They have been trained in how to blend resources, and they've been trained in how to talk about money.

We regularly bring in people to provide this training specifically to our benefit planning unit.

And by the way, our benefit planning unit then not only works with the state rehabilitation agency and our partners, they also work with the nine tribal rehabilitation agencies that we have in this state to be able to have those conversations with the Native American rehabilitation programs that exist as well to be able to consider those benefits across the board.

The bottom line, as we begin to think about our folks that are on Social Security benefits, they typically are isolated, excluded from the rest of culture, they're detached from what's going on around them, and much of that detachment, frankly, is due to financial concerns. If you don't have money, you can't go anywhere. If you don't have money, you don't go to the movies, if you don't have money you can't go out to eat, if you don't have money you aren't necessarily running around the community unless you can find a way to develop resources. At the same time, federal public policy and even state public policy at some extent has positioned these people to believe that they can't get out of that out of that position. That in order to retain their health insurance and whatever benefits they need, they have to choose to have no resources.

And what we're arguing is that financial issues don't have to get in the way of getting or keeping a job. That people can choose a job once they understand how to plan around that and how to begin planning their resources.

The other thing that we've discovered is most of our clients, if you talk to them about do they have a savings account or can they be a partner in, you know, can they find a way to get credit? Can they find a what to build any kind of resources, they're under the assumption that that's simply not possible.
They're not part of the mainstream of society when it comes to anything related to finances.

We also knew that benefit counseling all by itself is simply not enough to put them on the pathway to economic stability. That we have to consider other factors and we've got to look at other things.

And frankly, the biggest way to do this is to begin to think about financial coaching or asset development. It's a process of allowing consumers to achieve financial stability or at least choose a pathway that might help them ultimately get to financial stall built.

Under financial coaching the things that we begin to talk about are getting our clients to think about their money in different ways. Instead of thinking about what is it they can do to get by, we want to talk to them about how can they plan to use whatever resources they've got coming in and strategically plan how that might use. So they have to think about money in a whole new way.

We have to get them to think about their benefits strategically, and we have to position them to move towards independence.

As long as the client's perception is that they have to rely on the system to support them, then they're never going to take any of the risks or make any of the decisions that might allow them to own their own future.

They're going to continue to choose those things that sort of hold them in their own place. And ultimately we've got to get people to make better financial decisions. You know, I think the experience is most of them have never been taught about how to make good choices financially. I certainly know that when I went to high school there was not any financial planning in my high school to help me figure out budgets or help me figure out how to use my resources or how to develop my credit or any of those things.

And I don't know that many people with disabilities have been able to have conversations with anyone in a meaningful way about how to make good financial decisions and how to plan their future.

So if we ultimately you know, I think the ultimate goal of vocational rehabilitation if you look at the Rehab Act and all of its amendments, the ultimate goal of this process is to position people to be full participants in American society. Full participants in every level of society. That means that they can work, that they can have choices that they can do, that they can do any of the things that they need to do at any level in American society and not be excluded or isolated.
And if that's true, if that's the goal of the Rehabilitation Act, then our responsibility in vocational rehabilitation is to position people to begin to think differently, to develop a different set of skills, and to begin to make that movement in a different way.

Part what we've decided in Oklahoma is that this is a process throughout the rehabilitation program. It's not something that we do as a last minute when somebody's leaving the program, it's not something we just do at the beginning, it has to be across the entire case for an application to closure that we have ongoing financial planning.

Do we always succeed in this? I don't think we do yet, but I think it's happening more and more. And frankly, with only eight benefit planners across the state, it may not be enough. But I think it's a step in the right direction. As we begin to see more of this happen, that we'll see more players becoming involved in it and considering it.

Consumers have to get counseling and guidance, they've either got choose it or because their counselor offers them information about it, they've got to be in a position to consider it. We've got to specifically design behavior change. It's not a matter of just talking about it, we've got to position people so that they can look at specific behaviors and then begin to develop their own strategies.

If we don't talk about money, people aren't going to think about money. They're going to just spend it as it comes in. You've got to begin to think about what it's like planning my state budget. Each year I have a number of resources, I have to think about what I'm going to do with my state budgets three years in advance. I've got to think about how I'm going to spend what comes in, I've got to think about where are my resources actually going to come from. I've got to be able to estimate what those resources are going to be. And then I've got to be able to put those all together. And I think we've got to be in a position with our consumers to do the same thing. If they don't think about the money, then they're not going to plan about the money.

And let's face it, over time nickels and dimes and dollars and 5 dollar bills can add up if people are strategic about what they do with them.

We've got to position the person with the disability to have responsibility and choice. Unfortunately, our industry has spent way too much time being care takers and trying to control many things and what we really got to do is affect '98 amendments to the Rehab Act have really asked us to do which is to position the people to have full independence and own their futures fully independent of whatever our program does.

And this includes, I believe, financial coaching, which I don't think that we've done. You know, the bottom line is is that people are just getting jobs to get by, they're going
to come back to us, and unless we're really truly teaching them to manage all aspects of life, then they're going to come back to us over and over. And every time someone returns to us, then we're losing a resource for someone who hasn't been to us yet.

And so it becomes important to make those considerations.

Oklahoma has begun to partner with other community agencies. We've begun to do financial education, we've begun to have conversations about credit repair, we've begun to consider asset building tools such as match savings accounts. Now, none of these are necessarily easy. Somebody has to have the responsibility to have the conversations with the partners. Somebody has to have the conversations with the different people in the community to begin these things.

We don't necessarily succeed in our first conversation with every partner. This has to really become sort of an ongoing process, and there have to be people interested in having who see that as part of their duties who are interested in doing that in an ongoing basis.

Right now we've placed those responsibilities among our benefit planners. And if we have to good to the highest levels, then they call me in as the director if there's a president that has to be met with, if there's a board of directors that a conversation has to occur with, but what we've tried to do as much as possible is encourage that to happen at the local level, sort of at the handshake level, if you will, where people can go in and have those conversations. And we're beginning to see some success.

Now, you have to remember, this is a new venture in Oklahoma, we began the training in 2008, 2009, first with benefit planning and then with asset development, but our long term strategy is that we believe this will ultimately make a difference. And if we can get enough partners across all levels, we think that we can change what happens in terms of poverty and financial planning for people with disabilities.

Our benefit planners have several roles. First they help the consumers assess what they want concerning about their finances, concerning about their employment, and concerning about their independent living.

They work with the individual consumer to set specific goals, what is it they want to achieve.

Now, you have to remember in this process they ultimately are sending the client, the consumer, back to the original vocational rehabilitation counselor. But what they're doing is sending the consumer back with a set of skills and knowledge, and at the same time the benefit planner tries to keep the counselor informed in that process.
They want to know what is the person actually willing to achieve, where is it that actually think they're going? What is it they want to happen in their life? What are the time frames they're looking at? And how do they prepare for those time frames?

They ought matily none of this matters if they don't tie it back to the consumer's employment goal. This means not just getting the consumer just any job, it means looking at a legitimate career that ultimately can help them meet their financial goals that will earn them the kind of income, provide them the kind of resources that allowed them to live in the communities they want to live, around the neighbors that they want to live; and to make those choices, as opposed to just getting them in and getting them out.

We talk about career entry to career of choice. If we're not managing entry to career of choice, then ultimately we're not going to get people to choose employment over disability resources. They're going to they're not going to trust the process if the job ultimately isn't going to make a difference in how they manage to live.

And so you've got to really tie those two things together and to think about how those two things will match each other and so it involves not just the financial planning, but it involves truly effective career planning, career guidance to think about what the person's choices might be.

Our unit has been very powerful to us in a number of ways. As we talk about vocational planning and different issues, they've begun to get consumers to think about how they might get off benefits. Our benefit planners differ from WIPA benefit planners in that they are focused on what happens if you get a job, and the value of seeking employment rather than the value of protecting your benefits.

We're not trying to cause anyone to lose benefits, but what we are trying to say to people is that your life is better if you choose viable employment opportunities that give you a real future.

And so we try to help them define what economic independence will look like. We try to help them define what are the real dollars they need to be stable, to create economic stability for them. We want them to think about how much money is the money that they need. How much money will cover the thing that they're concerned about. How much money will allow them to be in the places they want to be. And then from that we want them to be able to choose employment that ultimately matches that as opposed to a capped set of resources that occur when you're getting SSDI or SSI.

The next thing that we like to do is to position them to think about how they use their resources strategically, both in terms of while they're pursuing training or while they're
pursuing the employment and then ultimately how do they manage those resources until they go away, while they replace them and with employment resources or consider that.

We also talk to them about it's okay to go off benefits. You know, one of the things that happens in this whole process is people become afraid of what happens to them if they leave benefits. If we're not having conversations with people that help them to think about the advantages of work, the advantages of the benefits that can happen with the right employers, then they're always going to be worried about what if they lose their benefits.

And unless we can position people to find work and benefits that exceed the money and benefits from Medicare, Medicaid, Social Security disability or SSI, then we're not providing a meaningful service. And frankly, if all we're doing is positioning people to park right below sort of their maximum levels, then we're not really giving people ownership of their future, we're guaranteeing them poverty for life. We're guaranteeing them a minimum standard of life as opposed to ownership of their future.

And so we do talk to people about it's okay to go off benefits if your employment and resources are good enough.

We've also begun to find that customers become much more invested in their own plans if they feel like they've got control over what's going to happen to them. Control over their money, control over their benefits, control over making sure resources overlap until one goes away and the new one takes its place.

For example, if we can get somebody to work for an employer that has good healthcare insurance, making sure that there's an overlap of Medicaid or Medicare until that health insurance kicks in place. So that there's not a time where they're without coverage. For most people with disability that's a grave concern.

So what we try to do is position them to have control over what's happening to them. And the only thing that people can have control over what's happening to them is if they have full information about each choice they make. And I think a real critical role of benefit planners and ultimately of vocational rehabilitation counselors is to position people to truly have say over what's happening in their future.

And maintaining employment becomes critical. Employment ultimately will give you more money than SSI or SSDI. It will give you more money than SSI, SSDI, and food stamps combined. And position people to feel security in that employment, to hold on to that employment, to make sure that they to make sure that they keep it becomes critical in the long run.
Now, for us, our Social Security reimbursement dollars have had a dramatic impact on us. If you'll look at this chart, we've begun really forcing the issue of finding our Social Security clients and encouraging people for employment. In 2008 you'll see we got $1.6 million. 2009 is sort of an anomaly for us because the previous year the agency was an order of selection where none of the orders were open for almost ten months. So the fact that we got almost a million dollars during that year is still pretty important in terms of providing resources.

What we found by having a unit dedicated to both benefit planning, a unit that's also dedicated to creating employment networks and, by the way, we've created a cold case unit that finds people that we haven't had touch with in more than six months, by and we have a person whose only job is to follow the Social Security information and recover money for us, is that we've been able to generate new revenue. Over $2 million in 2010, $1.6 million last year. This year we think that we could achieve as much as between 2.2 and $2.5 million by focusing on these very issues. And frankly, the Social Security money more than supports the eight dedicated positions we've got to this. At exactly six months we're over $1.1 million. We just had a $500,000 a month in reimbursements, and we're convinced, we're convinced that when we have benefit planners who can realistically talk to people about jobs and the impact on their benefits and that we can really talk to people about owning their own futures through financial planning and asset development, that more people will choose work. And what we know is if people choose work, our opportunity to get resources back in terms of Social Security reimbursement dollars, dramatically increases.

And certainly if you look at our history, since 2008, since we begun this venture, you can see that's absolutely true in terms of developing financial resources for the agency.

Let's talk about an individual consumer. There was a high school senior who had a newborn child. The step parent was actually taking the young woman's SSI payments and her entire living situation was not healthy for her. She didn't have control of her child, she didn't have control of her day to day decisions, et cetera.

When she turned 18 and by having effective benefit planning, she was able to independently live with her baby and to take care of her baby by having a benefit planner, the VRC, the rehab counselor had conversations with her and to begin work with the community agencies. She was able to make some choices herself. And those choices included choosing a job, considering what happens to her SSI, and owning her own employment which then gave her the ability to consider her own benefit packages and other considerations.

If she hadn't had a benefit planner what frankly would have happened is she would have remained in the same environment under the supervision of the step parent,
under control of the things that were going on and she wouldn't have been able to make a realistic choice for her future which then gave they are independence.

And frankly, if we're not positioning people to be independent and to own the things that go on around them, then we're restricting their opportunities. We're restricting their choices and we're not making the ultimate difference that we could make in people's lives.

Ultimately what we want are people to become independent financially. We're wanting them to become independent in their living and we're wanting them to have full choice over their futures.

We want them to be able to break the cycle of government dependence. We want people to day take control of their life. We don't want them to every time something happens come back to the rehab program or come back to the community agencies for support, we want them ultimately to be able to control what happens around them without relying on other agencies or without relying on things that happen around them.

So in this lady's particular position if she at 18 can begin to own her own future, if she at 18 can make decisions about employment, make decisions about how to manage her resources, make decisions about how to manage her benefits, we've just changed the next 40 or 45 years of her existence.

Think about the impact of that. Think about the impact of changing ten, 20, 30, 40 years of someone's future and giving them control over that rather than letting them be under the control of a system, under the control of whatever rehab might tell them, under the control of whatever human services might tell them, under the control of whatever Medicaid might tell them, and instead positioning them to fully own whatever is going to happen around them.

They can only do this if they can know the impacts of what their benefits are going to be, how to use their work incentives, how to begin savings accounts, how to begin credit development. People are not going to make those choices if we can't provide them with the kind of information that allows them to go there.

As we look at this, we've got to figure out

ABBY COOPER: Do you want to

MICHAEL O'BRIEN: Go ahead.
ABBY COOPER: I was just going to ask you if you want to take a breather and ask if they were any questions.

MICHAEL O'BRIEN: Sure. I'm just going along. I haven't seen any quiz come up. Are there any questions so far.

ABBY COOPER: I was just wondering

MICHAEL O'BRIEN: You have to pardon my Chiwowa in the background.

ABBY COOPER: Okay, I guess that's the end of your breather. [laughter]

MICHAEL O'BRIEN: Ultimately we have to look at how to make this expand across not only Oklahoma but across the country because unless we ultimately make a difference at all levels, it's not going to matter if it just happens in pockets of excellence. It has to or even pockets of practice, it has to become a strategy that we all begin to think about.

First of all we've got to think about how to create understanding of financial development or financial planning for people with disabilities both inside our agencies and among our partners. And that can be done at any number of levels. There are trainers can be brought in; there are people that can help you consider this information.

We've got to begin to think about our relationships with the CRPs. And how can we partner with them. Potentially they have a role in helping us think about this financial planning and asset development as something that can be done at their level.

It can be done when you develop your own benefit planners. And ultimately we may even have to think about what is the workforce's role as we begin this process. You know, there's four different versions of the Rehab Act out there right now, three in the House and one in the Senate, and there's nothing in any of those versions that truly creates a model of independence for the person with disabilities.

And there's certainly nothing in Social Security legislation that is pushing that. We do have existing laws that allow us to go there if we become experts, if we find ways to develop that. We've also got to begin the conversation with our schools, perhaps their transition programs and to look at what can happen at the high school level in terms of transition and how do we develop our partnerships with the school so that this information is happening in transition classes so that people don't become entrenched in the system. So that people if they have to use the system, Social Security disability or SSI, that they can consider from the beginning that it's only a stepping stone to the next thing as opposed to a permanent way of life.
We have to CB what information do we need at each level in terms of for our websites about financial stability, asset building, benefits planning. These are things that we're having conversations about in Oklahoma right now.

I'm not arguing that we've got it all figured out, I'm arguing that we're that we've taken a step in the right direction and that the push for this really needs to become kind of a national movement, a push that says this independence and employment includes financial stability. It isn't just a job.

And so and I think without asset development, we're not going to get people to begin to have those considerations.

ABBY COOPER: Mike, you got a question. And that is has Oklahoma done anything to who will lose their housing if they go to work?

MICHAEL O'BRIEN: Well, part of what we've done is in our planning with people we've been able to have the conversation and our benefit planners have enough information to determine if that's going to happen or not. And so they can have the conversation with the person up front about what are the expected results depending on the amount of income that they get.

And then the person can make that choice. You know, it's important that we don't tell people they have to do this, but at the same time that we give them a choice about what happens. So far we haven't had anyone who lost their home or their housing as a result of going to work, we've been able to make those effective transitions.

And the role of the benefit planner is particularly important in that.

ABBY COOPER: And if I can just interject one thing, Mike, is your benefits planners have very close relationships with your Section 8 housing folks.

MICHAEL O'BRIEN: Yes, well, our benefit planners have yeah, they have effective relationships with anyplace where there's benefits, with the VA people, with the human service people, because what we've done is trained them in all those categories, but we then have encouraged them to maintain personal relationships so there's just a matter of picking up the phone and making a call.

ABBY COOPER: And if it's

MICHAEL O'BRIEN: Go ahead.
ABBY COOPER: I was just going to if we're going to move to the next question after you answer it, I have some additional information to add with the question does Florida have this.

MICHAEL O'BRIEN: And I don't know the answer to what Florida has, so I'll let you jump right in there.

ABBY COOPER: Well, thank you. And Southeast TACE currently is working with two states, we're starting to have conversations with with North Carolina and Kentucky around this whole issue of asset development and economic stability and what needs to occur.

Thus far we have not had conversations with Florida. Florida does have some individual development accounts, but that's basically all they have right now.

MICHAEL O'BRIEN: The next question or comment about using benefit specialists, you should understand that the benefit in Oklahoma we have the WIPA program and those benefits programs do not work for us. What I've done is I took eight voc rehab counseling positions and converted them to benefit planners. They work for me at my direction. They are not part of the WIPA program.

We did get them WIPA certified, but we then went beyond that and got them trained in all of the benefits that exist in our state. And that they're part of us, they're not part of some other system. And our challenge that we experienced was often benefit planners as part of the WIPA program sort of encourage people to protect their benefits instead of realistically talking to them about what happens if they go to work and how work might be a greater benefit.

Our benefit planner focus on the benefits of work, but people still get to make that choice. So there's a real distinction between using just regular benefit planners, benefit specialists that are in the system versus the benefit planners that we've created that are our own.

And frankly, see, if the WIPA dollars go away, I will still have my eight benefit planners because they work for me and I don't rely on a Social Security grant to support them. So that's important.

And, yes, I agree, Ryan Burke on the Social Security dollars. Frankly for us, they make all the difference in the world. $2 million is a lot of extra clients that we can serve.

You know, $2 million for us is just a bundle of extra clients. You know, the challenge has been across the country is that the WIPA planners in various parts of the country have not necessarily well, I can't say every state, but I can say the four or five states...
that I've done consulting with or done work with that historically they've not really focused on positioning people to leave benefits, they've focused positioning people to protect benefits. And there's a big difference if we think about protecting benefits versus a very real choice to leave benefits because something good can happen for you.

So we've tried to focus on that by having them work for us and not being part of the WIPA system other than to be certified by WIPA.

Other questions?

I'll go ahead and go back to the PowerPoints then. RSA has given us the permission to use telework funds for employment related costs, not just for the home based business. We've begun looking at telework dollars and trying to figure out how to use that.

Strategic plan we focus on we indicate we're going to use assistive technology and self determination to attain transition goals. So we're focusing on that.

We're exploring creating IDAs, match savings account. We haven't figured out how to do that yet but we believe that's a critical component. You know, I think think about yourselves, how many of you have savings accounts, how many of you don't, and what's the difference between having a savings account that gives you some kind of protection in case something happens and the idea that having the savings account allows you to plan for future things. To think about something you're going to do a year from now, two years from now. It ultimately gives you hope in some sense, so we think that's going to be a particularly key component as we develop that. We think it's important that we establish a pathway to financial stability. You know, the greatest fear among people that are on Social Security or on SSI is what happens to me if I lose this.

And they can't make a choice for a better future if they don't consider in that better future that there's some level of financial stability.

We want to create in them the ability to create savings accounts, to have credit scores, to have relationships with financial institutions.

You know, I'll use as an example, I have a daughter, she doesn't have a disability, but she just in the last month got both a checking account and a savings account. Now, she's in her 20s, and her company has paid her by their company started several years ago using cash Visa cards where they fill up her Visa card every two weeks. So she says she was off the grid.
Now, it's an interesting thing, once she was able to establish a savings account, establish a checking account and has begun the process of establishing her credit score, she has a different look towards what her future might be. She has a different perception of herself as being more of a full participant in the society around her. Whereas her perspective before was, quote unquote, off the grid.

Now, if that's true for her, think about people with disabilities who have been frozen in the system that restricted incomes, at restricted benefit levels and with no thoughts of the ability to develop a savings account or a checking account and the difference that that might make for them.

My daughter has been able to she now talks about her bank, which what she used to talk about what was it cost her at Wal Mart to cash her check if she got a check from someone or what was the cost on managing her cash card from the company.

Those are entirely different thoughts about how you have a future and what happens to you than when you begin to talk about my bank and I have an account and what I can do here, and I think that what what we really want is to position people with disabilities to have that same level of independence, to have that same level of thinking about what their futures can be.

Self esteem is more than just getting a job. Self esteem comes from having control over your future and self esteem comes from feeling like you're fully a part of what's happening around you. And so when we begin to talk about this, we think that these are critical parts that will make people even more adamant about going to work, about owning whatever their future is going to be.

You know, poverty is not just a disability issue. Unfortunately, over the last ten years the top 1% have gotten more money and the number of people in poverty has increased.

And as the number of people in poverty increases, think about the impact on the disability community with only 70% of the with 70% of the disability community still not working, that means they're living on restricted incomes, what is their impact and hope and choice to get out of poverty?

We can only affect that if we can position people to think differently about how they manage their money.

We begin to have conversations about how do we build coalitions across our state, both with local and state agencies, as well as local and state businesses.
This isn't something that is a matter of you just doing it in one place with one bank. I can't just do it in Oklahoma City, I've got to find a way to affect Oklahoma City and Tulsa, but also Gotebo and Wewoka and [inaudible], and for those of you that don't know, those are a long way from Oklahoma City. We've got to be able to find a way so that a person with disability in whatever community they're in can be a full participant.

We think that this has got to become a global issue. That we've got to have a conversation at the national level, and I think this is really a great beginning step to have that conversation at a national level.

Ultimately there's going to have to be asset building summit. I think we're going to have to present this kind of information as part of what happens at the counsel and state administrators of voc rehab and I may be able to influence that since I just got elected president elect. We've got to bring people together in the community across communities to have this conversation.

We've also got to begin the conversation with employers. That it's not just about getting people jobs, it's about when they hire people positioning that person to have a future.

So we've got to have conversations with employers and with bankers. We need to talk to our people you know, my daughter just yesterday arranged a direct deposit account for her payroll. I'm wondering how many other people are out there like that that don't have direct deposit. The ability to, you know, to have their name on the account and money immediately be brought to them.

We've got to find meaningful incentives that bring employers to the table and incentives that employers can built for people who choose to work with them and choose to contribute. I think and by the way, I don't think any of this is unrealistic, I think everything that I'm talking to you about today is absolutely doable, it's a matter of having people choose to focus on it. We've always said what gets measured gets done. I think this is an example of what gets measured gets done. We have to begin that conversation.

Asset development, benefit planning, financial stability has not been something that voc rehab has been a part of. I teach foundations of rehab at Langston University, I've taught it at a couple of over universities, and I will tell you that I am not familiar with any of the universities teaching asset development, benefit planning or financial stability for persons with disabilities in any of their classes.

This has got to become a forefront conversation. One of the things we do talk about in my foundations of rehab class is that the disability may not necessarily be the issue, the
issue may be that policies and practice in society create as much interference as anything else. And one of the policies and practices in society has been that people with disability don't get to have resources and don't get to have savings accounts and they don't and unless we affect that we're not going to be able to change the future.

So it ultimately what to become part of the training that we do.

Most of us are not comfortable talking about money. We are not you know, I do it every day, I talk about millions of dollars, I've been in appropriations meetings five of the last seven days at the Senate and the House in Oklahoma. Obviously we're talking about money there, but we're talking about my agency's money, not my money.

Most of us are not comfortable helping people plan financially because we don't necessarily feel comfortable about how we plan financially.

I think ultimately that's got to become part of our training and I think ultimately it's got to become part of the conversation.

As we've talked about several times tut, the poverty rate among people with disabilities is just appalling. It's awful. And we're creating generations of entrenched people and the only way that I can meaningfully find a way to affect this is that if we think about more than employment, if we think about financial planning asset asset development and employment so that people can move out of poverty, it is not reasonable to essentially say that 20% of our population that because of a condition that they were born with or a condition that they acquire that they now deserve for the rest of their life to be in poverty. And frankly, in most states and in most places, the only voice to affect differences there is the public rehab agency and sometimes the developmental disabilities agency. And if we don't find a way to begin to affect that, ten, 20, 30, 40 years from now we'll still be talking about generations of people with disabilities locked into poverty.

And that seems to me to be completely unreasonable. It also seems unreasonable to me the number of people who are socially isolated, excluded and not a part of what's going on. Because of both the financial restrictions and because of their disability.

We've got to find a way to create stability and got to find a way to make differences. I believe that this is one of those steps. That when you have a comprehensive system, when you begin to talk about more than just getting somebody a job, you talk about a cool job with benefits, you talk about independence, you talk about asset development, financial planning, then we're talking about a wholly owned future for the person where they are own their choices. That's what will ultimately make a difference because instead if they remain in the system that they're fearful to advance, that they're fearful
to take the job, they're fearful of not having something, we ultimately can't affect that stability becomes critical to what we're developing.

Many consumers really do want to main employment, work above SSGA, but they're only going to do that if we can show them that when they get there they're better off. If what we're doing is showing them a zero sum game, meaning they get the same thing when they get there, or they're worse off, they're never going to make these choices. And why should they make the choice? Why should they make that choice?

It's only if we can create a meaningful opportunity. So they've got to be able to see that there's a good choice beyond then. Like I said, public rehab is the largest entity that provides vocational rehabilitation services across the country. Even with our federal regulations, we're perhaps more flexible than many. Many of the choices can occur at the counselor level, at the field level.

We have the ability with innovations funding inside our states. Every state is allowed a percentage of their funds that they can do on innovation programs. So this becomes a possibility for us as well.

We're probably the only voice that will make this that will begin this conversation. And so obviously the challenge I'm hoping for today is to get people to think about making this challenge and beginning to have this conversation.

We used to think if we got somebody a job, that was enough. If we look at the future, that he really only part of our job. And it's not about getting a job anymore, it's about getting a career. The only comment of give somebody a fish, feed them today. Teach had been to fish, feed them for a lifetime, I really think that the ultimately responsibility of the program is teaching people to fish, positioning them so they own enough of their future that they don't have to come ba back, don't have to repeat their business, because they know how to make their career work, they know how to manage their money, they know how to own their home and choose where they're going to be at, and I think that's ultimately what we're looking at.

What we have to have come from today is that the number of people the 40 or so people that have joined us today need to be in a place to begin this conversation, to decide what our role is, to figure out how we can augment what we're already doing and how to expand our resources and capacity to include this as part of what we do.

It will only start I mean, it won't go beyond what I'm doing in Oklahoma unless other people begin to consider it. Unless other people begin to consider it valuable.

So as we kind of recap and then we'll ask for more questions okay, let's see, we've got a question, in making the change from Workers' Comp after 15 years to floor BBR.
in July could you briefly explain how SSA reimbursement occurs? Absolutely. There are two ways in which you can receive money from Social Security as a state agency. One is a milestone payment plan for clients that go to work which basically and the other is strictly a reimbursement plan. The state agency itself has to make a decision when they receive the application from the client as to which one of those they're going to do.

In Oklahoma we've made a decision to only use the reimbursement plan. What the reimbursement plan allows is if we put somebody to work at a wage that is high enough for them to leave Social Security and to no longer receive a check from Social Security, then once they've maintained that job for nine months and gone for nine months where they did not have to receive a check, Social Security reimburses us every dollar that we spent on that client plus an administrative fee that we've agreed upon.

Additionally, what we've done is we now partner with employment networks in the community who can become involved in the ticket to work plus program where they can keep that person working and be reimbursed through Social Security out to five years while that person continues to work.

The milestone payment program is set up differently where you receive different payments along the way as a person goes to work. What we discovered was as an agency we're simply better off waiting on the reimbursement. And it actually doesn't take a lot of clients to make a lot of money. I think if you'll go back to that slide, the year we got $2 million it was under 100 clients, and we still received almost $2 million in reimbursement. So it's a very worthwhile consideration in the process.

Did that answer your question? Okay.

So let's kind of recap what we've talked about. Benefit planners have let's go back to the original idea. We have a specific unit of benefit planners actually, we have a Social Security unit that includes eight benefit planners, a cold case unit to find people, a ticket to work unit that helps businesses develop employment networks, and someone who just focuses on Social Security dollars. In having these benefit planners, they've been able to explained our knowledge of resources across the board for all of our staff.

They've also been able to help us with our partners, they're in one stop centers across the state and they'll see anybody who comes in, whether it's our client or referred by the one stop. So we're building a base of knowledge across the state.

When the benefits planners are effective in providing knowledge to our customers, then they're willing to choose to work more. When people have real information about what will happen to them, real information about the impact of their job, real information
about the impact on their benefits, real information about how they might manage financially, then they can make good choices as opposed to the restricted choices this he make based on fear of loss.

We've increased the number of people that are going to work above SGA. Our actual goal is $2 million this year, but we think in five years we will be receiving three to five excuse me three to $4 million in Social Security reimbursements by focusing on this very issue. You obviously if you saw the chart are prior to 2007 we had not ever gotten over $1 million. And now we're consistently over 1.5. And we think we'll consistently good over 2 million, perhaps as much as $3 million on a regular basis. That makes a real difference in the number of clients you can serve. And it also makes a difference if you're not getting repeat business, the people that come back two or three or four times to sort of stay parked below but get the next job.

When we combine our benefit planning with with asset development, we think that actually takes it to a higher level.

SGA is substantial gainful excuse me, the question is what's SGA? SGA is substantial beganful activity and Social Security defines that. Abby, I don't remember the exact figure, what is it, it's either 800 or $900 now? Do you remember?

ABBY COOPER: I think it's 1,000 now. I think it's 1,000 now.

MICHAEL O'BRIEN: Is it a thousand now?

ABBY COOPER: Higher for yeah, for individuals. And you have another question too.

MICHAEL O'BRIEN: Let's see, the other question is do you have banks that partner with you to develop savings accounts for high risk clients who would typically be turned down? We're in the process of that. We right now have a number of banks that are working with us on assistive technology that will loan our clients money on high risk clients for their technology. And we're working with them to partner on other kinds of loans at this point.

We believe because they've established the technology loans that they will they will partner with us on these other high risk loans. Do I have them today? Only on the technology grant only on technology loans so far, but we're in the development part of that process.

And another one I was in Washington, we had conversations with banks there that were willing to consider that.

ABBY COOPER: That's true, we did.
MICHAEL O'BRIEN: And thanks, Becky, banks, for putting the exact figures. Obviously as a director I'm not in the field looking every day at those things, so I hadn't looked at the SGA in a little while.

To what degree are your VRCs expected to be knowledgeable in asset development and counseling with consumers? Frankly, it's our benefit planners that have that knowledge but our VR counselors once the consumers have had the conversation with the benefit planner our VR counselors become a partner in helping the client to develop that.

ABBY COOPER: And Mike, can I add to that?

MICHAEL O'BRIEN: Sure, go for it.

ABBY COOPER: In that the benefits planners also send a report back to the VRC.

MICHAEL O'BRIEN: Right.

ABBY COOPER: That incorporates some of the asset development points that they can integrate into their counseling and guidance.

So after a VRC gets numerous ones of those reports they are able to start internalizing that information.

MICHAEL O'BRIEN: Well, but we also

ABBY COOPER: Original client [inaudible]

MICHAEL O'BRIEN: Absolutely. The other thing we're doing is we include in whatever we have a state wide workshop or whenever we have activities, we include workshops on asset development, benefit planning. Now that we expect our VRCs to be able to do it absolutely, but we expect them to have enough recognition of it to respond when it comes across their plate.

Does that answer your question? Okay. You know, the final part of this is that when we put benefit planning and asset development together we're going back to what the Rehab Act has truly asked us to do which is informed choice and letting people own their own futures.

So when we do this the consumer can take more control, they can choose a path of financial stability by planning and preparing for it. It positions us to begin to think about expanding community resources. And that does require, frankly, the local supervisor, local counselors or benefit planners to have conversations with people in the community. And they can expand their capacity for new partnerships. What we've
discovered I think all along is that every time we bring somebody to our table they stay and invite others. By that I mean any time we find an employer who's become a good partner, they tell other employers. Any time we found a contractor who works with us, they'll tell other contractors. And any time we find a school or another resource, they'll tell somebody else.

And we think this is the same. We think the more we bring people to the table, the more people will begin to choose this process and to be a part of not just our the financial development process, but the whole community of vocational rehabilitation process.

So that wraps up what I've got. What questions do we have?

ABBY COOPER: Okay. Are are your business relation staff involved with the asset building process?

MICHAEL O'BRIEN: No, they're not at this point. Our business relations people, what we've got is one person who sort of works at the corporate level across the state with the businesses and then we have a number of people who work in local communities in job development. And they have not gotten involved in this process yet.

I'm sort of hopeful that will happen, but not to date.

ABBY COOPER: And part of the part of the reason for that question that maybe you could address, Mike, is North Carolina is considering how to integrate asset development into their state. And they're looking at training their benefits planners and they're wondering if they should involve their business relation folks and the BLN in terms of how employers can help around asset development.

MICHAEL O'BRIEN: See, I think those are probably good ideas. I think those are probably good ideas, I just hadn't gone there yet. Part of this is we've been just wandering out there trying to figure a way on this as we that you can about it and we've been pushing whatever doors we could get, but I can see where that might have some value.

ABBY COOPER: Okay. And if it's okay with you, I'm going to answer Sherry's question.

MICHAEL O'BRIEN: Go for it.

ABBY COOPER: [inaudible] in terms of how do you convince your state to do this, Sherry, you know, Southeast TACE can be a resource for you. And either Chip or I can contact you in terms of what's happening within the southeast regions and things that you might want to attach to. The other suggestion that I would suggest is Southeast
TACE website has a page devoted to asset development, and all of the series of these presentations, the last six presentations that have happened, those webinars are posted, so are numerous links and information on the website. So I would suggest you also look there.

MICHAEL O'BRIEN: Well, that

ABBY COOPER: That's on [inaudible] becky, the link is [inaudible].

MICHAEL O'BRIEN: The other thing that I think is part of this is that this has to become a conversation in a lot of settings. Abby and I have talked about the need for asset development to be discussed at CSAVR and perhaps at NCSAB amongst leadership. I think that those things can be part of the conversation. And I think that those things can happen.

You know, a year ago I would have said, well, I'll just call Bill, because Bill [inaudible] had been friends for years and years, and I could have had that conversation, but I don't know your new director, so... Are there other questions?

Okay

ABBY COOPER: From Gloria.

MICHAEL O'BRIEN: At what point in the process should the counselor present this information, an application that plan development. We do it at application if somebody comes in and they're already on SSI or SSDI, we immediately report them to the benefit planner. We don't want them going through our process where we expect them to go to work if they're not going to go to work or if they don't want to make these choices. So we immediately refer. The other thing that happens is we're in an order of selection, so there are people we can't serve but we can connect them to the benefit planner so that they can go to the benefit planner and then decide whether or not to go to the one stop or one of the other resources in the community and still have benefit from talking with our benefit planner about whether or not work would make a difference in their life.

So we think the moment they apply if they're on SSI or SSDI or receiving any kind of community resources that benefit planners should step in well before you get to plan, because otherwise they get the plan they're going to start balking at what you're offering.

ABBY COOPER: Other questions?

MICHAEL O'BRIEN: Doesn't sound like any, Abby oh, here we go.
ABBY COOPER: Just tell us who the new director of Florida DR is.

MICHAEL O’BRIEN: I'll make a point to try to meet her. I'm going to start in June or July on the president elect of CBR, so I'll make a point to try to meet her as well.

Sounds like we're done, Abby.

ABBY COOPER: Okay. Yeah, that's what I'm thinking, Mike. Thank you so much for your time. It was a wonderful presentation and I really, really appreciate you taking the time from your busy schedule.

MICHAEL O’BRIEN: You bet. Thanks, everybody. You have a grand one.

ABBY COOPER: Thank you so much.

MICHAEL O’BRIEN: Bye bye.

ABBY COOPER: Bye bye, Mike. The evaluation will appear momentarily for you and there are also be a quiz that will appear for you to take if you're looking for CRC credits. So thank you so much, everyone.