

October 2019

Individualized Written Rehabilitation Program (IWRP)

James Hanson
none

George Saiki

Follow this and additional works at: <https://repository.wcsu.edu/jadara>

Recommended Citation

Hanson, J., & Saiki, G. (2019). Individualized Written Rehabilitation Program (IWRP). *JADARA*, 9(4). Retrieved from <https://repository.wcsu.edu/jadara/vol9/iss4/7>

II INDIVIDUALIZED WRITTEN REHABILITATION PROGRAM (IWRP)

Leader: James Hanson

Recorder: George Saiki

Charge: Identification of problem; proposals for solutions; goals of IWRP; and other matters of concern relevant to IWRP.

HISTORY AND RATIONALE FOR IWRP

Over the years, there has been concern over the matter of client awareness of the rehabilitation process, a tendency to rely on counselor decisions in the development of a plan and the consequent relatively minor active involvement of clients in the overall process. Generally, the feeling developed that if the client and counselor were required to work in a relationship which depended upon more active participation by the client, the client would come to understand his responsibilities better, be able to actively assist in developing vocational goals, be able to understand the objectives of Vocational Rehabilitation, and to know what he might expect of Vocational Rehabilitation on, perhaps, more realistic levels. Through such a process as the IWRP approach, it was felt that better planning could be accomplished; that this would result in more specific identification of necessary and appropriate services; and that the client would become more cognizant of responsibilities he has as a partner in the rehabilitation process. As a further consideration, it was felt that the IWRP approach would also ensure protection of the clients and promote their complete understanding since they must consent to and agree with the plan developed by themselves and their counselors.

IMPLICATIONS OF IWRP

The groups identified a number of implications which they felt were positive and some which were viewed as negative. They are as follows:

Positive

Promotes active involvement of client in planning and, if applicable, his parent or guardian.

Promotes mutual understanding between client and counselor.

Promotes active discussion and informed agreement.

Individualized Written Rehabilitation Program (IWRP)

Virtually requires competent Rehabilitation Counselors for the Deaf (RCD's) who are not only able to use various communication modalities with deaf clients, but who are knowledgeable about the effects of deafness in various developmental respects.

Promotes parent or guardian participation and involvement when appropriate.

Ineligibility must be specifically defined with the client's rights and procedures for appeal made clear to him.

Encourages doing *with* the client rather than doing *for* the client.

Will require the use of interpreters to ensure optimal interpersonal communication when the counselor does not have the requisite skills to communicate with a client.

Requires periodic review of progress.

De-emphasizes process and emphasizes procedures.

Assists in motivating some clients when they learn the services are not free; that VR pays for services received.

Negative

Some clients might "shop around" for comparison to seek the "best deal."

Could result in some delays in service since IWRP is not "crisis oriented" but systematic and planned toward end goal achievement.

Could cause a reduction in 26's (Closed, Rehabilitation) because of elimination of "retroactive plan."

Could cause increased burdens on RCD because of "paper work", although several coordinators (SCD's) felt that they were using an IWRP before the Act (Rehabilitation Act of 1973) was enacted so there would be minimal changes. Some also thought that increased time investment in the beginning would yield time saving dividends later on because of better understanding and planning.

Could cause delays because of the need for an appropriate and responsible third-party to sign the IWRP for a minor at a residential school and if amendment is made when the client is in training at a site removed from counselor accessibility.

Could cause a drop in the production of 26's because of a lack of flexibility and the increased time which might be necessary to complete certain specifics required in the IWRP, (e.g., early goal selection, post employment services, etc.).

A client might get a job before an IWRP can be developed and signed. In such an event, no credit may be given for the efforts of the counselor, especially when the immediate and appropriate need is a job. There is also a fallacy involved in that the Employment Service is often charged with placements, but often calls VR for this service or calls for other VR assistance in placement and no credit is allowed VR.

May create a dilemma in that RCD's or SCD's may be involved in appeals of their own clients, thus reducing objectivity because they are probably the only ones able to communicate adequately with the deaf clients.

Individualized Written Rehabilitation Program (IWRP)

If an appeal is reviewed by a Deaf Advisory group, confidentiality may be violated because the deaf community is small and, even if the name is deleted, circumstances may be so unique as to identify the client precisely.

May be used to avoid provision of services to some clients because of lack of client "cooperation." Perhaps "middle class" deaf people will benefit, but lower class and low verbal deaf people may be denied because they did not fully understand the IWRP.

SUGGESTIONS FOR IMPLEMENTATION OF IWRP

1. Develop an IWRP form using special terminology familiar to most deaf clients. Very low-verbal deaf persons may need a form with illustrations and signed English further defining terminology.

2. Require services from an RCD or, at least skilled interpreter services for deaf clients unable to communicate with general counselors.

3. Use appropriate audiovisual media to assist in explaining VR procedures, IWRP, rights, etc., for deaf clients.

4. Devise materials which may assist in communicating with low verbal deaf clients. (terminology, concepts, etc.)

5. Expose deaf school age students to VR in prevocational programs in residential or day schools. Teach students about the client's role. Teach students how to use VR services.

6. Design of the IWRP should mechanically be easily amendable because life proceeds according to circumstances and not necessarily according to plan.

7. Organize a task force to develop all of the above, at least on a model basis (Workshop).

According to polls taken during each small group discussion session, only about three-fourths of the states have implemented the IWRP now. Apparently, all will be using it by July 1, 1975. As yet, there has not been enough experience to determine what actual problems will be encountered with deaf clients under the IWRP approach.

ADDITIONAL COMMENTARY

No SCD's had any input in the design of IWRP.

Who should be consulted in place of parents when a client is at a residential school? Is there an alternative? No answers seemed apparent.

We should involve parents very early, including before a student becomes a client.

One state uses an experimental plan that allows students client status in order to provide exposure to many vocational fields while still in school and the client remains in Status 10 (Plan Development).

Individualized Written Rehabilitation Program (IWRP)

RSA is interested in movement through statuses, but has not established optimum, maximum or minimum times in status. If set, they are established by states independently.

A client's ego may be enhanced because now he has a hand in his destiny.

The use of mail, TTY, etc., may be helpful for review of IWRP's with clients and to evaluate attainment of intermediate goals.

This approach requires a counselor to truly follow up a client from the initiation of the IWRP process all the way through.

SCD's/RCD's should seek ways to educate the educator to prepare students for VR services in such areas as decision making, the nature of vocational rehabilitation, developing an image of VR as more than a source of dollars. In addition, education does have a role to play in rehabilitation (e.g., precounseling preparation).

There is a need to educate counselors in writing objectives appropriately. RCD's need to learn to evaluate their communication capabilities as they relate to working with deaf clients at all verbal competency levels.

SPECIFIC RECOMMENDATIONS

A package dealing with psychological testing for RCD's should be developed and disseminated. All of the SCD's agreed to the potential value of such a package. It should contain specific test recommendations for use with deaf clients, recommended testing procedures, limitations, explanations of how test results may be interpreted and applied in working with deaf clients, and other essential information. Further, a special project grant from RSA should be forthcoming and acted upon favorably in order to facilitate the development of the package.