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REHABILITATION PLAN DEVELOPMENT OVERVIEW

1.01 Introduction

The foundation of a successful rehabilitation program is a well-developed plan of action. The development of a rehabilitation plan is required for any individual who is entitled to and receiving chapter 31 services per Title 38 of the Code of Federal Regulations (CFR) section 21.80. The rehabilitation plan must be based on the results of a comprehensive evaluation, including the required determinations and assessment of factors identified in 38 CFR 21.50. The Department of Veterans Affairs (VA) Vocational Rehabilitation and Employment (VR&E) program utilizes a variety of rehabilitation plans to provide services that can optimize an individual’s potential to overcome potential barriers to success. This chapter will provide an overview of those rehabilitation plans. In addition, it will provide the statutory and regulatory guidance that governs the process, purpose and scope of plan development, as well as defining the roles and responsibilities of each stakeholder in the process of developing the rehabilitation plan.

1.02 References and Resources

Laws:
- 38 United States Code (U.S.C.) 3107
- 38 U.S.C. 3117
- Public Law 110-389, the Veterans Benefits Improvement Act of 2008

Regulations:
- 38 CFR 21.50
- 38 CFR 21.70
- 38 CFR 21.74
- 38 CFR 21.76
- 38 CFR 21.78
- 38 CFR 21.80
- 38 CFR 21.84
- 38 CFR 21.86
- 38 CFR 21.88
- 38 CFR 21.90
- 38 CFR 21.92
- 38 CFR 21.94
- 38 CFR 21.96
- 38 CFR 21.98
- 38 CFR 21.256
- 38 CFR 21.258
- 38 CFR 21.430
1.03 Purpose and Scope

a. Purpose of Plan Development

The purpose of rehabilitation plan development is to structure individualized services that will enable the individual to obtain and maintain suitable employment, and/or to maximize independence in daily living. The structure of the plan allows the counselor and the individual to translate the findings of the initial evaluation into specific rehabilitation goals and objectives.

b. Scope of Plan Development

The scope of plan development includes the services needed to accomplish the goal of the rehabilitation plan. Counseling services must be included in every rehabilitation plan per 38 U.S.C. 3107. Additional services may include medical, social, psychological, independent living, economic, educational, vocational, and employment services per 38 CFR 21.70. The services must be outlined on the rehabilitation plan in observable, measurable objectives designed to meet the overall goal of the rehabilitation plan.

1.04 Roles and Responsibilities

There are several stakeholders involved in the development, administration and implementation of a rehabilitation plan. Each stakeholder has clearly defined roles and responsibilities to ensure that the plan is successful.

a. Individual

VR&E provides rehabilitation services to a number of individuals, to include Veterans, Servicemembers, dependents and individuals with certain types of birth defects. The term individual will be used throughout this section to include each of these populations. The individual is the most important stakeholder in the development of the rehabilitation plan. For the plan to be a success, the individual must be an active participant in the development of the rehabilitation plan. The individual must agree to the plan before services are provided per 38 CFR 21.92.

b. Vocational Rehabilitation Counselor

The Vocational Rehabilitation Counselor (VRC) guides the individual in the selection of an appropriate rehabilitation goal. The VRC’s primary role is to assist the individual in making an informed decision on an appropriate
rehabilitation goal based upon the individual’s functional abilities, interests and aptitudes, and outlining the steps needed to achieve that goal in the rehabilitation plan. If employment is the goal of the rehabilitation plan, the VRC will also help the individual understand the labor market to ensure that the chosen vocational goal is suitable and viable.

The VRC can approve rehabilitation plans with an annual cost of up to $25,000, with the exception of self-employment plans and construction costs associated with independent living plans. See below for additional information on the cost approval limits for those exceptions.

After the VRC assists the individual in the development of the rehabilitation plan, it is not uncommon for the management of that individual’s case to be transferred to another VRC within the Regional Office (RO). When this occurs, the receiving VRC must contact the individual immediately, but no later than 30 days from receipt of the case assignment. The intent of this contact is to provide contact information and to establish a rapport with the individual. The VRC should provide the following information during this contact, at a minimum:

- Name
- Telephone number
- Email address
- Mailing address
- Physical location (if not the same as the mailing address)
- Office hours, if applicable

This contact may be made via telephone, email, or mail. It is recommended that the contact be made via telephone, if possible. If made by telephone, the VRC must document the conversation via the use of VAF 119, Report of Contact or in Corporate WINRS (CWINRS) notes. If the contact is made via email or mail, the VRC must place a copy of the correspondence in the individual’s Counseling/Evaluation/Rehabilitation (CER) folder. A local letter template may be developed in CWINRS for this purpose.

c. Employment Coordinator

The Employment Coordinator (EC) works closely with the VRC and the individual to ensure that the chosen vocational goal is viable in the labor market in which the individual will be seeking employment.
d. VR&E Officer

The VR&E Officer (VREO) conducts administrative reviews in an effort to resolve disagreements related to plan development or implementation. The VREO must provide approval for the following activities related to plan development:

- Self-employment plans with a total cost up to $25,000 per 38 CFR 21.258
- Rehabilitation plans with annual cost of $25,000 to $75,000
- Independent living (IL) plans that do not contain construction with annual cost up to $75,000
- IL plans that contain construction costs up to $2,000
- Retroactive inductions
- Extended evaluations beyond 12 months per 38 CFR 21.74
- Special Employer Incentive (SEI) programs in excess of 6 months per 38 CFR 21.256
- IL plans beyond 24, but not to exceed 36, months in duration per Public Law 110-389
- Extension of entitlement beyond 48 months, except when the extension is for a period of employment assistance only per 38 CFR 21.78
- Reopening a case that was closed as a Maximum Rehabilitation Gain (MRG) when re-application occurs within one year of the date of closure

Note: Per 38 CFR 21.430, the VREO may not delegate the responsibility to review program costs associated with extended evaluations, independent living, and self-employment plans.

e. Director, Regional Office

The Director of the regional office must approve the following:

- Rehabilitation plans with an annual cost of $75,000-$100,000
- IL plans that do not contain construction with an annual cost of $75,000-$100,000.
• IL plans that contain construction costs between $2,000 and $25,000

f. Director, VR&E Service

The Director of VR&E Service conducts administrative reviews when the request involves a disagreement related to a rehabilitation plan developed by a VREO, and/or when a disagreement related to rehabilitation plan development cannot be resolved by the VREO. The Director of VR&E Service must approve the following:

• Rehabilitation plans when the annual cost of services exceeds $100,000

• Self-employment Category 1 assignments

• Self-employment plans when the total cost of the program exceeds $25,000

• IL plans when construction costs exceed $25,000

• IL plans exceeding 36 months in duration

1.05 Rehabilitation Plan Types and Requirements

Rehabilitation Plans are developed in CWINRS and documented on VAF 28-8872, Rehabilitation Plan, and VAF 28-8872a, Rehabilitation Plan-Continuation Sheet. See Appendix O, VA Forms, for information on how to access this form. The type of plan is dependent upon the needs of the individual, as well as the overall goal of the program of service. However, each plan has required elements that must be addressed.

a. Types of Rehabilitation Plans

1. Individualized Extended Evaluation Plan (IEEP)

IEEPs are used when feasibility to achieve a vocational goal cannot reasonably be determined during the initial evaluation process per 38 CFR 21.86. See M28R.IV.C.3 for additional information and guidelines on the administration of extended evaluation programs.

2. Individualized Written Rehabilitation Plan (IWRP)

IWRPs are used when the individual is pursuing a rehabilitation plan with an ultimate goal of employment and requires services to develop the skills necessary to achieve that goal. See 38 CFR 21.84 for statutory guidance on IWRPs.
3. Individualized Employment Assistance Plan (IEAP)

IEAPs are used when the individual has the skills necessary to obtain and maintain employment. It outlines the employment services that will be provided to the individual to assist with achieving the employment goal. See 38 CFR 21.88 for additional information on the governance of IEAPs.

Generally speaking, all IEAPs must be preceded by an IWRP or combined IWRP/IEAP. The only time the VRC can develop an IEAP without first providing services in an IWRP is when the individual is a prior vocational rehabilitation program participant who qualifies for a program of solely employment assistance, as outlined in 38 U.S.C. 3117.

4. Individualized Independent Living Plan (IILP)

IILPs are used to help an individual achieve maximum independence in daily living when the achievement of a vocational goal is not currently reasonably feasible. IILPs are governed by 38 CFR 21.90. See M28R.IV.C.9 for additional information on the administration of IILPs.

b. Required Elements of Rehabilitation Plans

- Program goal
- Objectives designed to meet the goal
- Anticipated completion dates
- Services to be provided
- Duration of services
- Service providers
- Evaluation criteria
- Evaluation schedule of at least once every 12 months per 38 CFR 21.96
- Counseling, which is required in all cases per 38 U.S.C. 3107

1.06 Amending the Rehabilitation Plan

The individual and/or the VR&E case manager can request a change to the rehabilitation plan at any time. 38 CFR 21.94 outlines the process of amending the rehabilitation plan:
a. Changes to the Rehabilitation Plan

A change to the rehabilitation may require a reevaluation of the individual’s rehabilitation program. This is necessary if the change is major and requires the redevelopment of the vocational objective. However, if the change is necessary to meet the overall goal, then a reevaluation of the program is not necessary. The VRC must work closely with the individual to incorporate the change, and the individual must concur with the change to his/her plan.

b. Disagreement Regarding Changes to the Rehabilitation Plan

If the VRC determines that a change is necessary, and the individual does not concur with the change, then the individual can appeal the proposed change to the plan. 38 CFR 21.98 outlines the appeal process:

1. The individual requests a review of the proposed, original, or amended plan by providing a detailed account of his/her specific concerns.

2. The VREO will review the plan, the individual’s concerns, the VR&E case manager’s comments regarding the change, as well as any other relevant information in an effort to resolve the disagreement. The VREO has 90 days to inform the individual of the outcome of the review. If the VREO is the case manager, the case must be submitted to the Director, VR&E Service for review.

3. If the individual does not concur with the VREO’s decision, or if the VREO is the case manager, then he/she can request a review from the Director of VR&E Service.

4. The individual may appeal an adverse decision of the VREO or the Director of VR&E Service to the Board of Veterans Appeals.

See M28R.III.C.3 for a complete description of the appeals process.