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Chapter 2
PROGRAM ASSISTANCE

2.01 Introduction

The Vocational Rehabilitation Counselor (VRC) is responsible for ensuring the Veteran remains on track and focused to successfully complete his/her rehabilitation plan. This chapter covers case management contact methods, level and frequency of contact, Tele-counseling, course and program length, rate of pursuit, review of training records, adjusting the rehabilitation plan, and unsatisfactory conduct and cooperation. The chapter also contains statutory and regulatory references governing the provision of case management services.

2.02 References and Resources
(Change Date February 19, 2019)

Laws: 38 United States Code (U.S.C.) 3107

38 CFR 21.96
38 CFR 21.126
38 CFR 21.132
38 CFR 21.146
38 CFR 21.294
38 CFR 21.310
38 CFR 21.312
38 CFR 21.314
38 CFR 21.324
38 CFR 21.362
38 CFR 21.4270 through 21.4275
38 CFR 21.4280

VA Forms (VAF): VAF 28-1902n, Counseling Record - Narrative Report (Supplemental Sheet)
VAF 28-1905, Authorization and Certification of Entrance or Reentrance into Rehabilitation and Certification of Status
VAF 28-1905c, Monthly Report of Training and Wages
VAF 28-1905d, Special Report of Training
VAF 28-1917, Monthly Statement of Wages Paid to Trainee
VAF 28-8861, Request for Medical Services-Chapter 31
VAF 28-8872, Rehabilitation Plan
2.03 Case Management Appointments

The VRC is ultimately responsible for managing the Veteran’s case and assisting him/her throughout the rehabilitation program. Through face-to-face contacts, email messages, telephone calls, traditional mail, and in some situations, Tele-counseling, the VRC monitors the Veteran’s progress toward the established rehabilitation goals. Case management appointments must be accomplished in a timely and systematic manner through personal contact with the Veteran and through securing necessary information from persons, agencies and other organizations involved in the rehabilitation process.

a. Requirements

1. Case Management Appointments

Case management appointments are defined as face-to-face meetings with the Chapter 31 participant that cover vocational, medical, financial, academic and any other issues impacting progress.

It is preferred that case management appointments be conducted at the training facility. However, appointments may be scheduled at Department of Veterans Affairs (VA) offices or facilities, or an alternate location under certain circumstances, such as when requested by the Veteran or when meeting space is not available at the facility. “No shows” will be rescheduled at the VA’s convenience. At the minimum, the VRC should conduct at least one site visit per year at the school facility to meet with the certifying official, bookstore officials, finance office, disability office and any other relevant staff.

When approved, case management conducted using VA approved tele-video equipment that meets security requirements will be considered face-to-face visits. In all cases, the Veteran must be in agreement to use this technology instead of traditional face-to-face visits, and such agreement will be documented in writing, with the Veteran’s signature.

2. Contacts

A contact is defined as a communication between the case manager and the Veteran to assist the Veteran in completing his/her rehabilitation goal. Contacts are made to follow-up on issues identified through the scheduled case management appointments or other case management activities. These contacts may be conducted by using one of the following methods:
• Face-to-face meeting
• Telephone
• FAX
• Email
• Letter
• Tele-counseling

It is the case manager’s responsibility to ensure that contacts with Veterans remain confidential and protected. VR&E staff should not use their personal social media sites to communicate with Veterans, Servicemembers, and/or families regarding any VA-related discussions involving confidential or restricted information. See M28R.III.B.1 for complete procedural guidance on the use of social media.

b. Use of Tele-counseling
(Change Date November 20, 2018)

Tele-counseling may be used in lieu of the required face-to-face meeting with Veterans who are actively participating in a plan of services. Tele-counseling uses video-teleconferencing (VTC) technology called VA Video Connect. Use of Tele-counseling is voluntary; however, Veterans wishing to participate in Tele-counseling must meet the requirements outlined in M28R.IV.C.1.

1. Scheduling Appointments
(Change Date November 20, 2018)

Case managers must use the VR&E Scheduler Tool to arrange the Tele-counseling appointment with the Veteran. Once the Veteran is scheduled for an appointment, the scheduler will automatically send an email to the Veteran with a link and instructions on how to access the Tele-counseling session.

The appointment must be scheduled at least five days prior to the date of the appointment to ensure that the Veteran is available to participate. Scheduling with less than five days’ notice must be done only at the Veteran’s request. Audio or video recording of Tele-counseling sessions is not allowed and should be clearly discussed by the case manager with the Veteran.
Both the case manager and the Veteran will receive an email confirmation of the scheduled meeting. The case manager must enter the Veteran’s scheduled appointment in the Veteran’s record in CWINRS on the “Personal” tab under “Supervision”. In addition, the case manager has the option of saving the email confirmation in his/her Outlook calendar.

2. Technical Support

(a) Support for VR&E Staff Users

VR&E staff users may obtain technical support through the VHA National Technology Help Desk (NTTHD). VR&E staff users may contact NTTHD at 1-866-651-3180 or VHA_NTTHD@va.gov.

(b) Support for Veterans

(Change Date November 20, 2018)

The case manager will provide the training on how to use Tele-counseling to Veterans assigned within his/her caseload.

The Veteran should not call NTTHD as the technician cannot provide him/her support directly. However, the Veteran may listen in while the case manager obtains technical support from the help desk.

3. Privacy in Tele-counseling

(a) Case Manager’s Responsibilities

Before the session begins, the case manager must ensure privacy and confidentiality are maintained during the session. The case manager must conduct the session in a room/office to ensure privacy and ensure that other personally identifiable information (PII) is not visible during the session. Refer to M28R.II.A.5, “Personally Identifiable Information (PII)” for additional guidelines.

(b) Veteran’s Responsibilities

The Veteran must initiate the call to the case manager at the designated date and time of the appointment. It is important that the Veteran initiates the Tele-counseling session because Veterans are often utilizing the application from their home.

The case manager must advise the Veteran that participation in the session is the same as a face-to-face meeting, and therefore it is
necessary that he/she dresses accordingly. The case manager must also inform the Veteran that the Tele-counseling must be held in areas where privacy and confidentiality of information is maintained. The Veteran may have a family member present during the session.

4. Required Documentation

As in any case management appointments, the case manager must document the Tele-counseling session on VAF 28-1905d, Special Report of Training, VAF 28-1902n, Counseling Record – Narrative Report (Supplemental Sheet), or CWINRS Note. The written narrative must be printed and filed in the Veteran’s VR&E record, unless it is electronically entered in CWINRS.

C. Case Management Level

Each Veteran must be assigned a case management level in Corporate WINRS (CWINRS) under the Rehabilitation tab. The level must also be documented on VAF 28-1902n or in a CWINRS case note. The level is also noted on the rehabilitation plan. See Appendix O, VA Forms for information on how to access all VAFs referenced in this chapter.

The levels of case management and a description of each are provided in the chart below:

<table>
<thead>
<tr>
<th>LEVEL OF CASE MANAGEMENT</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>One annual face-to-face case management visit is required. Additionally, one case management follow-up by telephone or in-person is required during each of the other terms or three times per year if non-standard terms or training is non-academic.</td>
</tr>
</tbody>
</table>

The Veteran exhibits independent, goal-oriented behavior and needs minimal contact from the case manager to stay on track. The Veteran may demonstrate the following characteristics:

- Stable medical conditions
- Minimum requirement for support services
- History of self-motivated achievement
- Exceeds criteria for satisfactory progress
- Independence in problem solving
- Absence of Level 2 and Level 3 criteria
<table>
<thead>
<tr>
<th>LEVEL OF CASE MANAGEMENT</th>
<th>DESCRIPTION</th>
</tr>
</thead>
</table>
| Level 2                  | Face-to-face case management meetings are required once per term attended or at least three times per year for non-standard terms. For non-academic programs, required face-to-face meetings are conducted once per month for the first three months, then quarterly.  

The Veteran needs guidance and structure, but is able to follow through and stay on track. The Veteran may be recovering from recent setbacks and/or demonstrate the following characteristics:  
- Requires remedial instruction to prepare for post-secondary educational placement tests  
- Circumstances that interfere with the Veteran’s progress in completing the rehabilitation plan, such as personal, family, emotional, financial or medical concerns |
| Level 3                  | Face-to-face case management visits are required once per month, with the exception of those Veterans participating in an Individualized Employment Assistance Plan (IEAP) or Individual Independent Living Plan (IILP). See note below on those types of plans.  

The Veteran requires an intensive level of services. Veteran needs frequent contact and/or has multiple rehabilitation needs. Examples of circumstances that may require this level of service are:  
- Independent Living (IL), Rehabilitation Workshops, Special Rehabilitation Facilities or Chapter 35 Special Restorative Training  
- Chronic, inappropriate conduct and cooperation  
- Behavior in violation of training establishment policies  
- Severe impairments due to a medical or neuropsychological condition(s)  
- Substance abuse issues  
- Homelessness  
- Incarceration or threatened incarceration |
d. Frequency of Case Management Appointments

The frequency of appointments is determined by the type of program as indicated in the chart below. It is important to note that all programs, with the exception of those receiving training in an institution of higher learning or a non-college degree program, require an initial case management appointment within 30 days of plan development. For those Veterans receiving training in an institution of higher learning or a non-college degree program, the initial case management appointment is required within 60 days.

<table>
<thead>
<tr>
<th>PROGRAM TYPE</th>
<th>LEVEL AND FREQUENCY OF CASE MANAGEMENT APPOINTMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institution of Higher Learning or Non-College Degree Program</td>
<td>Level 1, 2 or 3 as required by the Veteran’s needs and individual circumstances.</td>
</tr>
<tr>
<td></td>
<td>Assigned level may be adjusted during the rehabilitation program and should be reviewed at least annually. Only highly achieving Veterans or those in advanced degree programs should be Level 1. Veterans receiving non-punitive or punitive grades or experiencing any barriers to success should be provided active case management that is in accordance with his/her needs.</td>
</tr>
<tr>
<td>On-the-Job Training (OJT), Apprenticeship, Federal Paid and Unpaid OJT, Non-Paid Work Experience</td>
<td>Level 2 or 3 as required by the Veteran’s need and individual circumstances.</td>
</tr>
<tr>
<td></td>
<td>Due to the nature of OJT placements, on-site follow-up with the employer is required at the time the OJT is established and at least one time during the course of the training program.</td>
</tr>
<tr>
<td>Farm Cooperative</td>
<td>Level 2</td>
</tr>
<tr>
<td></td>
<td>One of every three case management appointments with the Veteran must be made at the school, with at least one of the other two being made at the farm training site.</td>
</tr>
<tr>
<td>PROGRAM TYPE</td>
<td>LEVEL AND FREQUENCY OF CASE MANAGEMENT APPOINTMENTS</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| Homebound/Independent Instructor               | Level 2 or 3 as required by the Veteran’s need and individual circumstances.  
The independent instructor must be present at one of every three case management meetings.                                                                                                                                                                  |
| Employment                                      | Level 3 with allowance for monthly contacts in place of face-to-face visits if no special needs or barriers are identified. Contacts may be made by Disabled Veterans Outreach Program (DVOP) Specialists or by Local Veteran Employment Representatives (LVERs).  
Services must be tailored to the Veteran’s needs and must be actively provided to assist the Veteran in obtaining and maintaining employment.  
After obtaining employment:  
Contacts may be made by DVOP/LVER  
Face-to-face is not needed if no special needs or barriers are identified  
Telephone and email contacts that demonstrate active assistance in accordance with the Veteran’s needs are allowed |
| Self-Employment                                 | Level 2 or 3 as required by the Veteran’s needs and individual circumstances.                                                                                                                                                                                                                                               |
| Special rehabilitation programs, including:    | Level 3 with allowance for monthly contacts in place of face-to-face visits for periods of up to three months while waiting for cost approvals, coordination of construction or other administrative delays in active service provision.  
Case management meetings should be conducted at Veteran’s home or a location most convenient in accordance with type of program.  
Supplemental contacts between required visits may be by telephone if most convenient for the Veteran.                                                                                                                                                     |
| • Special Rehabilitation Facilities             |                                                                                                                                                                                                                                                                                                                                 |
| • IL                                            |                                                                                                                                                                                                                                                                                                                                 |
| • Rehabilitation Workshops                      |                                                                                                                                                                                                                                                                                                                                 |
| • Chapter 35                                    |                                                                                                                                                                                                                                                                                                                                 |
2.04 Course and Program Length

Full and part-time training for Veterans in the Chapter 31 program is measured under 38 CFR 21.310 (also see 38 CFR 21.4270 through 21.4275); unless a physician determines that the Veteran’s disabilities reduce his/her ability to pursue a program (see 38 CFR 21.312).

a. Less than Full-Time Participation

1. General

Veterans may pursue a course of vocational rehabilitation training in an educational or training facility on a three-quarter or half-time basis only after a careful consideration of all the facts and it is determined that rehabilitation will be better assured by less than full-time pursuit for all or part of the program. Family responsibilities, health, transportation difficulties, economic reasons, or other factors may contribute to the decision that part-time attendance is a reasonable method of accomplishing the vocational goal.

2. Pursuit at Less than Half-Time

A Veteran may pursue a rehabilitation program at an educational institution on a less than half-time basis under 38 CFR 21.314 if the pursuit is a part of the Veteran’s plan. For example, a Veteran’s plan may include pursuit of one course for the Veteran’s first term of training because he/she is uncertain about leaving an unsuitable job to pursue training under Chapter 31. During this period, the Veteran will have an opportunity to explore his/her ability to successfully pursue training. At the end of the term, the Veteran must make a choice regarding continuation in the program at a half-time or greater rate.

In another instance, the Veteran’s VRC may find that the Veteran is making a poor adjustment in training and reduction to a less than a half-time rate is in the Veteran’s best interest for the remainder of the term.

<table>
<thead>
<tr>
<th>PROGRAM TYPE</th>
<th>LEVEL AND FREQUENCY OF CASE MANAGEMENT APPOINTMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other, including: Extended Evaluation, Chapter 18, Independent Study</td>
<td>Level 2 or 3 as required by the Veteran’s need and individual circumstances.</td>
</tr>
</tbody>
</table>
If the Veteran’s rate of pursuit is reduced below half-time, payment of subsistence for the term will be terminated under 38 CFR 21.324. No subsistence allowance award can be made for less-than-half-time training. However, since entitlement usage is based on rate of pursuit, an eligibility/entitlement update GED is required to charge entitlement to the Veteran’s Master Record. Refer to M28R.V.B.8 for procedures related to manually charging entitlement.

b. Non-Traditional Rehabilitation Programs

The rate of pursuit for the following education or training programs not furnished by a traditional educational institution (38 CFR 21.35(k)(3)) is as follows:

1. On-Job Training/Non-Paid Work Experience (NPWE)

   Full-time training in an on-job program or NPWE is the lesser of the number of hours in the prevailing workweek for:

   - Journeyman employees in the same job categories at the establishment where training is being provided.

   - Other persons in on-job training for the same or similar occupations at the facility where the Veteran is training or at other facilities in the locality.

   See M28R.VI.A.12 for procedural guidance on the delivery of On-Job and NPWE services.

2. Farm Cooperative Training

   If training in a farm cooperative program is provided by an individual instructor, the full-time rate of pursuit must meet the requirements of 38 CFR 21.126.

3. Independent Instructor Training

   The full-time rate of pursuit for a Veteran in an independent instructor program must meet the requirements of 38 CFR 21.146.

4. Training in the Home

   The full-time rate for a training program provided in the Veteran’s home must meet the requirements of 38 CFR 21.146.
5. Vocational Course in a Rehabilitation Facility

A vocational course of training offered by a rehabilitation facility (38 CFR 21.35(k)(5)(6)), formally referred to as a sheltered workshop, will be measured under provisions of 38 CFR 21.4270(b) for trade or technical non-accredited courses, unless it is the established policy of the facility to measure the rate of pursuit for full-time or a particular level of part-time training based upon fewer clock hours of attendance than provided in that regulation.

6. Special School

If training is pursued in a special school, such as those for persons with visual or hearing disabilities, the rate of pursuit will be measured under 38 CFR 21.4270 through 21.4275, unless it is the established policy of the school to measure the rate of pursuit for full-time or particular level or part-time training based upon fewer semester, credit, or clock hours of attendance than prescribed in these regulations.

7. Independent Study

(a) Seriously Disabled Veterans

For certain seriously disabled Veterans, VA may measure the Veteran’s enrollment:

- In an independent study course as half-time or greater training, or
- Both in independent study subjects and subjects requiring class attendance on the basis of the combined training load when the number of credit hours of independent study equals or exceeds the number of other credit hours.

(b) Qualifying Criteria

To qualify for this rate of pursuit:

- The seriously disabled Veteran must have a disability or circumstances which preclude regular attendance at an institution of higher learning, and
- Independent study must be a sound method for providing the training necessary for restoring the Veteran’s employability.

In all other cases, VA will measure independent study according to the provisions of 38 CFR 21.4280.
8. Rehabilitative Services

Measurement of the rate of pursuit for Veterans in programs consisting primarily of services designed to evaluate and improve physical and psychological functioning will be assessed under this paragraph.

(a) The services assessed under this paragraph include:

- Evaluation and improvement of the rehabilitation potential of a Veteran for whom attainment of a vocational goal is reasonably feasible;
- Extended evaluation to determine whether attainment of a vocational goal is reasonably feasible; or
- A program of IL services to enable a Veteran to function more independently in his/her family and community when attainment of a vocational goal is not reasonably feasible.

(b) Measurement of the rate of pursuit for services and programs named in paragraph (a) of this section will be:

- As provided in paragraph (a) of this section for services furnished by educational institutions; or
- According to the non-educational facility’s customary criteria for full-time and part-time pursuit.

(c) If the facility does not have established criteria for full-time and part-time pursuit, or services are being provided by more than one facility, the rate of pursuit will be assessed in the following manner:

<table>
<thead>
<tr>
<th>Rate of Pursuit</th>
<th>Clock Hours per Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>120 or more</td>
</tr>
<tr>
<td>Three quarter-time (1)</td>
<td>90-119</td>
</tr>
<tr>
<td>Half-time (1)</td>
<td>60-89</td>
</tr>
<tr>
<td>Quarter-time (1)</td>
<td>30-59</td>
</tr>
</tbody>
</table>

Note: (1) Pertains to Extended Evaluation and Independent Living

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c. Reduced Work Tolerance (RWT)

1. General

VA will consider that a Veteran with reduced work tolerance is pursuing a rehabilitation program full-time when the amount of time the Veteran is
devoting to his/her program is as great as the effects of his/her disability (service and non-service-connected) will permit. This information must be considered when evaluating a Veteran’s work tolerance and must be communicated to the Veteran to help him/her set up an appropriate schedule of activity.

2. Determination of Reduced Work Tolerance

The VRC will refer each Veteran considered for reduced work tolerance to a VA Medical Center physician who will make the initial determination, as well as any later redeterminations of work tolerance (38 CFR 21.312). A non-VA physician may not make a reduced work tolerance determination. VAF 28-8861, Request for Medical Services-Chapter 31, is used to request the determination of reduced work tolerance. See Appendix BP, RWT Evaluation Job Aid for an example of how to request and document RWT using VAF 28-8861. Reduced work tolerance approval is annotated on VAF 28-1905. Item 9, Specific Guidelines located on VAF 28-1905 may be used for this.

Upon the determination of reduced work tolerance, the VRC must discuss the determination and its impact on the rehabilitation plan with the Veteran. This communication should be done in person or via telephone, with a follow-up letter to the Veteran to ensure a complete understanding if the VRC determines this additional step would be helpful. The VRC must convey the following information to the Veteran:

- The amount of time the Veteran will be expected to train, travel, prepare and practice for training to be considered full time, and

- An explanation that the subsistence allowance is payable at the full-time rate as long as the Veteran participates at the rate identified by the VA physician. Participation at a lower rate requires a redetermination of reduced work tolerance by a VA physician. For example, the VA physician determines the Veteran can participate in six credit hours per semester, which includes the amount of time to travel, prepare and practice for training. If the Veteran registers for six credit hours, then subsistence allowance is payable at the full-time rate. However, if the Veteran pursues any rate less than six credit hours, subsistence allowance is not payable, and a redetermination of reduced work tolerance must be completed, and

- An explanation that other activities, such as employment, are prohibited as a result of the determination of reduced work tolerance because it would further reduce the Veteran’s ability to participate in training.
The VRC must document this communication in either a CWINRS case note or by filing a copy of the letter sent to the Veteran, which explains the determination of reduced work tolerance and cites 38 CFR 21.312, in the Veteran’s VR&E record.

3. Redetermination of Reduced Work Tolerance

The Veteran’s work tolerance will be reevaluated by a VA physician whenever there is evidence of a change in work tolerance sufficient to warrant a modification in the rate of pursuit. Regardless of evidence of a change in work tolerance, each Veteran with a reduced work tolerance must be reevaluated at least yearly. The rate of pursuit required to meet the standards of full-time pursuit will be modified if a VA physician determines that the Veteran’s work tolerance has increased or decreased. The VRC must inform the Veteran of the physician’s determination. Refer to M28R.IV.C.2 for additional information regarding annual recertification of RWT.

4. Other Activities Barred

A Veteran with reduced work tolerance may not engage in other activities, such as employment (to include work study), that would further reduce his/her ability to train.

5. Subsistence Allowance

A Veteran with a reduced work tolerance will be paid a subsistence allowance at the full-time rate for the type of program being pursued.

6. Disagreement with Determination
(Change Date February 19, 2019)

If the Veteran disagrees with a determination or redetermination of reduced work tolerance, he/she may request a review or an appeal of the decision (see 38 CFR 21.98 and M28R.III.C.3).

d. Employment and Rate of Pursuit

1. Satisfactory Program Progress is Essential

The major consideration in dealing with employment should be the Veteran’s individual needs and circumstances and his/her continued satisfactory progress toward the rehabilitation goal as defined in the plan. To achieve the goal, it is possible that the rehabilitation plan may be developed or amended to have the Veteran pursue training at a part-time
rate if the Veteran must work full-time.

2. Realistic Expectations

Ideally, the Veteran will not be employed while pursuing full-time training. Realistically, this is not always possible or practical. The Veteran may be employed full or part-time in a job at the time the plan is developed. The Veteran’s financial circumstances may dictate that employment is necessary while participating in the rehabilitation plan. The Veteran’s employment status and financial needs must be considered when determining rate of pursuit and anticipated program completion dates. When the Veteran enters the rehabilitation program, the VRC will emphasize that the Veteran must advise the VA promptly of any changes in employment status; i.e., an increase or decrease in employment hours or new employment.

2.05 Review of Training Records

Substantive case documentation of specific, observable behaviors is required to identify problems that impact the rehabilitation process. The observations and outcomes of these contacts will be fully documented on VAF 28-1905d or in a CWINRS case note. Any consequent change to the planned program will be entered in the Progress Notes sections of the VAF 28-8872, Rehabilitation Plan. These documents should express not only the professional observations of the VRC, but also the Veteran’s perceptions of his/her progress toward the rehabilitation goal.

a. VAF 28-1905d, Special Report of Training

The results of case management appointments will be documented on VAF 28-1905d or in a CWINRS case note. Thus, the VAF 28-1905d details the chronological progress of services provided to the Veteran and should include the following:

- Progress in the specific elements of the plan.
- Evaluation of needed special services, such as reader service or tutoring, to assist the Veteran to overcome a problem in his/her program and the results of the steps taken to resolve the problem.
- All arrangements to initiate planned services or follow-up of Veterans in Interrupted or Discontinued case status, except for Veterans placed directly in Discontinued case status from Applicant case status.
- The outcomes of employment assistance and follow-up action.
• Findings after reviewing the plan, such as the need for an amendment or redevelopment, setting of a new annual review date, or a recommendation that no substantive changes are needed.

• Date of the next case management appointment and future planned actions.

b. Attendance and Progress Records

1. Regular Institutional Training Programs

Each facility approved to provide training or other rehabilitation services must, as part of its approval, agree to cooperate with the VA and to provide in a manner prescribed by the VA accurate and timely information concerning the Veteran’s attendance, performance and progress (38 CFR 21.294(a)(4)). The VRC will arrange with the training facility for timely submission of information on the Veteran’s attendance and progress in training that is needed to determine that training is proceeding in accordance with the plan. Securing this information is part of the collaborative relationship between VA and the training facility.

2. Training in Other Programs

Unless information equivalent to that provided for Veterans in regular institutional programs is available, VAF 28-1905c, Monthly Report of Training and Wages, will be used to record attendance and progress for on-job programs and NPWE, homebound, independent instructor, special rehabilitation programs and schools where courses are conducted almost wholly on a job operations basis. Information on VAF 28-1905c will be used to determine whether overall progress in completing the program is within the established program scope and duration.

c. VAF 28-1905c, Monthly Report of Training and Wages

At the end of each training month, the trainee and the trainer will enter on VAF 28-1905c the total hours the trainee devoted to major instructional and work activities. The trainer will certify the Veteran’s progress and the rate of pay in on-job training cases and then forward the completed form to the VRC.

1. VAF 28-1905c Not Used Under Certain Circumstances

When equivalent information is available from the training facility, VAF 28-1905c will not be used. For information to be equivalent, it must enable the VA to adequately document the trainee’s progress. For on-job training, equivalent information is generally available in well-established
apprenticeship programs and structured training programs conducted by large companies. The content of these programs is well known and can be relied upon for consistent presentation of knowledge and skills needed in a trade or craft. For these programs, VAF 28-1917, Monthly Statement of Wages Paid to Trainee, is used in lieu of VAF 28-1905c.

2. Processing Training and Wage Reports

The VRC will review VAF 28-1905c and VAF 28-1917 for completeness and adherence to the training agreement. If the form is in order, file it in the Veteran’s VR&E record. If it is not in order, the trainer and the trainee will be contacted and necessary adjustments made.

(a) Control for Monthly Review of Wages

A monthly control for review of the wage statement will be prepared by the Vocational Rehabilitation and Employment (VR&E) Division. When a change in the established wage schedule warrants a change in the amount of subsistence allowance payable, the VRC will prepare a VAF 28-1905 to justify the amendment of the subsistence allowance award. The original will be sent to the Authorization activity and a copy will be filed in the Veteran’s VR&E record.

(b) Delinquent Wage Statement

If either VAF 28-1905c or VAF 28-1917 for a given month is not received by the 10th day of the following month, the VRC will contact the trainer and the trainee to obtain the form in sufficient time to avoid suspension of subsistence allowance. If the VRC does not obtain the form, he/she will notify the trainee in writing that he/she is delinquent with the wage statement. If the delinquent wage statement has not been received within 10 days of the notification to the Veteran and the trainer, the VRC will prepare a VAF 28-1905, requesting suspension of subsistence allowance and forward it to the Authorization activity. The effective date of suspension will be the date last paid.

The VRC will send the Veteran a letter notifying him/her of non-receipt of the training and wage report and suspension of his/her subsistence allowance. The original will be sent to the Veteran; a copy will be sent to the trainer; and a copy will be filed in the Veteran’s VR&E record.

When a completed VAF 28-1917 or VAF 28-1905c is received, the VRC will use VAF 28-1905 to authorize the Authorization activity to resume, adjust, or terminate payments as appropriate. The Veteran will not
receive notice of the action taken by the Authorization activity if the award is resumed without further adjustment.

If a training and wage report is not received within one month of the date of the letter, the Veteran’s case will be placed in Interrupted status.

d. Additional Records of Progress

Any progress reports provided by the facility, such as grade reports or special progress reports for workshop trainees should be filed in the Veteran’s VR&E record.

2.06 Adjusting the Rehabilitation Plan

a. Obtaining the Veteran’s Cooperation

Successful development and implementation of the rehabilitation plan require the full and effective participation by the Veteran and the rehabilitation professionals assigned to assist the Veteran (38 CFR 21.362). This mandates that the Veteran be informed of all available services and the necessity of full participation. Using rehabilitation counseling skills, the VRC will help the Veteran develop an awareness of his/her progress toward the rehabilitation goal. The VRC will assist the Veteran to develop coping skills and needed adjustments to accomplish rehabilitation.

b. Interaction with the Veteran

The establishment of rapport between the Veteran and the VRC is a critical element in the success of any rehabilitation program. It is through this relationship that the rehabilitation process, including adjustments in the rehabilitation program, is facilitated. In the event that the rehabilitation plan needs adjustment, the VRC provides the following services:

1. Problem-Solving Counseling

   The VRC will provide problem-solving counseling as needed.

2. Medical and Dental Treatment

   The VRC will refer the Veteran to a VA Medical Center (VAMC) for medical or dental treatment or other services provided by the Veterans Health Administration (VHA) using VAF 28-8861 (see M28R.V.A.5).
3. Adjustment Counseling

The VRC will personally discuss the Veteran’s adjustment or performance in the course with the trainer and the Veteran.

4. Change in Place of Training

The VRC may arrange for a change in the place of training if either the trainer or the Veteran is dissatisfied and the VRC cannot obtain a satisfactory agreement to continue the planned training.

5. Repetition of a Course

When a Veteran in a rehabilitation program needs to repeat a course because of failure or for another reason, repetition may be authorized if the Veteran meets the criteria in 38 CFR 21.132. A Veteran may repeat a course for credit if the course is necessary for the Veteran to reach his/her educational goal. Review courses may be authorized. On the other hand, a Veteran in a Chapter 31 program may not under any circumstances audit a course for no credit.

6. Minor Plan Modifications

The VRC may modify the rate of pursuit, the frequency of case management appointments, and the schedule of plan review.

7. Use of the Vocational Rehabilitation Panel (VRP)

The VRC should use the resources of the VRP whenever a multidisciplinary approach would assist in reaching a decision concerning the Veteran’s rehabilitation program. The VRC will request this assistance through a memorandum to the chairperson of the VRP. This memorandum will briefly state the situation and the issues that the VRP should consider. See M28R.II.A.4 and M28R.IV.C.2 for additional information on the VRP.

c. Major Plan Modifications

The Veteran or the VRC may request a change in the plan at any time (38 U.S.C. 3107(b)). A change in the Veteran’s long-range goal may only be made following a reevaluation of the Veteran's rehabilitation program by the VRC. A change may be made when:

- Achievement of the current goal(s) is no longer reasonably feasible, or
- The Veteran’s circumstances have changed or new information has been developed which makes rehabilitation more likely if a different long-range
goal is established, and

- The Veteran fully participates and concurs in the change.

A change in intermediate objectives or services provided under the plan may be made by the VRC when such change is necessary to carry out the statement of long-range goals. The case status will remain in Rehabilitated to the Point of Employment (RTE) status during the redevelopment evaluation of the plan. Do not move the case to Evaluation and Planning (EP) status during redevelopment.

d. Review of the Individual Written Rehabilitation Plan (IWRP)

The VRC and the Veteran will periodically review and evaluate the IWRP. A comprehensive review will be conducted at least once every 12 months (38 CFR 21.96) and will be annotated on the IWRP. Review may result in no change to the plan, an amendment, or redevelopment of the plan.

2.07 Unsatisfactory Conduct and Cooperation

When the VRC determines that the Veteran’s conduct or cooperation does not conform to the standards in 38 CFR 21.362, the VRC will discuss the problems with the Veteran. The VRC will assist the Veteran to make the necessary adjustments to the rehabilitation program as necessary. For more information on Veteran’s conduct and cooperation, see M28R.III.C.6.