



NewsNotes

A Quarterly Publication of the Virginia Rehabilitation Association
2006 First Quarter, January—March No. 21

New Presidential Pondering by Margaret Gillispie

Here's wishing everyone a healthy and Happy New Year in 2006. As the incoming VRA President, I'd like to congratulate our election winners, Allison Mundy as President Elect, Ellen Braswell as Secretary, Sherman Gifford as Treasurer and new Board Members, Mark Hawkins, Dale Batten and Donna Grumiaux. With our current Board Members and Committee Chairs I believe we have a very strong team.

As for plans for 2006 we are off to somewhat of a delayed start because our December Board meeting was rescheduled for January 20th due to inclement weather. Below are some things that I'd like to concentrate our efforts on in 2006.

Our Legislative Committee last year was active and positively impacted rehabilitation efforts in Virginia and nationally. This year these efforts will continue with the Virginia General Assembly legislative day that scheduled for January 23rd. David Williams our Legislative Liaison continues to represent us well in all our legislative efforts.

Lifelong learning is critical to keeping on the cutting edge of rehabilitation issues and best practices. I am committed to VRA providing educational opportunities for its members and others in the rehabilitation community. VRA will participate in Collaborations 2006 and will also provide several local trainings throughout the state during 2006.

Membership will continue to be a challenge for VRA, particularly with the withdrawal of NRCA from NRA and the development of a new division of rehabilitation counselors (NRANRCA) in NRA

New Presidential Pondering (continued on page 2)

VRA Legislative Update

Two legislative priorities of VRA in recent years has been the creation of a Medicaid Buy-in and the establishment of a Medicaid Wavier for people with brain injuries. Going into the upcoming 2006 session of the General Assembly, we will continue to work to make both initiatives a reality in the Commonwealth.

To give you some background and to update you as to where we are relative to these initiatives, Mr. Harry Weinstock of the Brain Injury Association of Virginia and Ms. Kirsten Rowe of the Virginia Department of Rehabilitative Services provided the following articles. A special thanks goes out to each of them for their submissions and all their efforts on behalf of people with disabilities.

Why Is A Brain Injury Medicaid Wavier Needed In Virginia?

*By Harry Weinstock, Executive Director,
Brain Injury Association of Virginia*

In the early 1970s while serving in the Air Force, I was stationed at a base in Europe. While security around the airfield was always tight, it reached a much higher level when a state-of-the-art "spy plane", whose existence was only rumored, landed there. The moment its wheels touched down it was covered by a huge tarp and surrounded by heavily armed military police. While officially it wasn't there, everyone on base – and likely everyone in the surrounding community – knew about it, but no one would openly acknowledge its presence. In a great many ways, a similar issue exists today related to brain injury

Legislative Update (Continued on page 2)

VRA Meeting will be January 20, 2006



New Presidential Pondering (Continued from page 1)

and VRA. I am committed to working to maintain our current membership and building a strong new division for rehabilitation counselors. I also wish to continue to support our other active division, the Virginia Association of Rehabilitation Leadership (VARL). In the past several years VARL has grown into a vital, active organization. It encourages leadership at all levels and is providing excellent opportunities for networking and development of leadership skills for its members and other interested parties.

Our Mid Atlantic Ad Hoc Committee made great progress in 2005 and this committee will continue to explore the revitalization of the NRA Mid Atlantic Region. This will hopefully enhance opportunities for training, leadership development and networking for all of our members.

I charge all VRA members to get involved in 2006. Our next board meeting is scheduled for January 20th and all are welcome to attend. The last half of our meeting will include a 2006 planning session where we will target our efforts for the upcoming year. We are looking for active committee members so let me know if you'd like to get involved. I've always believed that you get out of things what you put into them, so get involved with VRA and make change happen by taking action.

To end this note I want to say that I am honored to serve as your President for 2006 and a bit overwhelmed by the challenge but I know with all the support of the Officers, Board, Committee Chairs and membership we will have a banner year.

**Submitted by Margaret Gillispie,
VRA President**

**Email:
Margaret.Gillispie@drs.virginia.gov**

Legislative Update (Continued from page 1)

While brain injury is the leading killer and cause of disabilities in the U.S. (with an annual incident rate 5 times higher than the annual incident rates of Multiple Sclerosis, Spinal Cord Injury, HIV/AIDS and Breast Cancer combined) it goes virtually unrecognized and certainly underserved. Last year, the federal government spent approximately \$4,635 per person for the 4,557,000 individuals living with mental retardation and/or developmental disabilities, and \$2.55 per person for the 5,300,000 individuals living with traumatic brain injury.

While the Commonwealth of Virginia has done much better (It spends \$15.95 per person with brain injury versus \$992.05 per person with mental retardation) there is obviously a tremendous gap, primarily because the issue has been officially ignored.

The questions most people ask when hearing these figures is "where are all those people?" and "who is serving them now?"

Since until recently there were no specialized services in Virginia for people with brain injury, families did the only thing they could – take the "survivor" home to be cared for by their family (most commonly their parents since the primary victims are young people). For the most part this decision was made out of necessity rather than choice (since there was none)!

Because of the young age of a majority of those injured, frequently there was no insurance and few financial assets. Since most survivors are unable to work - either due to the lack of appropriate assistance or the level of disability - and because the primary caregiver needed to leave their job (the unemployment for male survivors is 75%; for female survivors 85%; for the primary caregivers 50%), what few community services might be available were not affordable.

VRA Legislative Update (Continued on page 7)





Membership Report

As of November 30, 2005, the VRA has a total of **173 members**. Special welcome to Hanover Community Services, who is our newest *Organizational member*, joining Didlake in that category.

It is interesting to note that we now have **8 student members**. We welcome them and hope they will also become active. **We have 47 NARL members, the second largest chapter in the Nation, behind Georgia.** We are also have the 7th largest NRCA chapter with 59 members.

Please consider volunteering for a committee or with the Annual Collaborations Conference. Contact our 2006, President Margaret Gillespie or the Collaborations Conference chairperson, Shirley Lyons to find out how you can help.

Submitted by Shirley Lyons

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Also - Here are new members in the last few months: Tomoko Toguchi, Arlington, VA; Hanover Community Services - Amy Thomas, Greg Ellison, Robin Zimmerman, Torrie Goodman; Cynthia Houff - Staunton, VA recently renewed; Joan Harmon, Hillsville, VA; Richard Luck, Fishersville, VA; Leah Zimmerman, Fairfax, VA; Karen Brown, Alexandria, VA recently renewed; Susan Cianfaglione, Portsmouth, VA; Weizi Dai, Annandale, VA; Angelo Hardy, Richmond, VA; Sarah Knorr, Richmond, VA

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As we say goodbye to 2005, we need to make significant note of our last training in November, presented by outstanding speaker John Toscano. His training was entitled *Autism Spectrum Disorders: Preparing for the "Real World"*. Mr. Toscano is the Executive Director of Commonwealth Autism Service. He presented on theories of causation, definitions of autism and the spectrum disorders and largely focused on giving the service provider a view of the world as experienced by a person with autism. Mr. Toscano was very enthusiastic about his subject and he certainly captured the attention of the audience.

As always, the Education is welcoming the participation of members to join our committee. The goal of our committee will be to provide at least one training in all areas of the State. This is to include the Southwest, Tidewater, Central and NOVA areas. This can only be achieved if we have members on the committee to represent each area and unfortunately this did not happen last year. As committee chair, I will be most happy to mentor a new committee member as to the process of coordinating a training in a particular area and walk you thru the process. Please take time to consider joining the Education Committee this year. I feel it is the VRA Education Committee that can assist members in pursuing their professional growth while also obtaining CRC's at a reasonably low cost.

I am excited about the new year ahead and look forward to providing our members with valuable and informative training opportunities. Please let me know if you are interested in joining our committee or if you have ideas for training topics at marie.worley@drs.virginia.gov or 804-662-7160.

I hope to hear from you!

Submitted by Marie D. Worley, Education Chair

Call for Involvement

VRA is in the process of developing their committees for 2006 and needs your help and involvement. Please contact Margaret Gillispie at Margaret.gillispie@drs.virginia.org or at 434- 947-6721 if you are interested in serving on a committee. They are listed below:

Collaborations Planning Committee – Robin Metcalf and Allison Mundy, Co-Chairs

Legislative Committee -

Awards – Eleanor Williams, Chairperson

Membership – Shirley Lyons Chairperson

Education – Marie Worley, Chairperson

Communications Newsnotes – Steve Sommer, Chairperson VRA.org website - Mary Kaye Johnston, Chairperson



Faced with Making a Major Decision

Happy New Year!! I am writing to you as a VRA member and a member of VARL, the leadership division of VRA. At our last Board meeting, VARL members discussed our concerns with the changes that have occurred wherein the NRCA has dropped its affiliation with the NRA. We recognize that as a VRCA member, this means you may be faced with making a decision whether to stay with VRA, go with VRCA to its new association, or perhaps, to stay with both organizations.

VARL members decided to reach out to all of the current VRA/VRCA members and share reasons we would encourage you to stay with VRA so that is why I am writing to you today. I hope you will thoughtfully consider the following facts:

NRA is the oldest and most widely recognized professional organization in rehabilitation. Due to this, NRA has the size and credibility needed to provide effective legislative advocacy. We have a voice on the Hill that lets our representatives know what the critical issues are and how legislative proposals will impact rehabilitation consumers.

NRA/VRA comprises a large and diverse network in the rehabilitation community with membership not only from rehabilitation counselors but also vocational evaluators, CIL representatives, job development professionals, business people, ESO's ... altogether a large and excellent network of people with whom to stay connected for better services to consumers as well as for professional development.

As you know, NRA is currently forming a counseling division which will be named NRANRCA. You can feel confident that your membership will continue uninterrupted at both the state and national levels. Regardless, please know that whatever you decide to do in terms of your affiliation with an association for professional rehabilitation counselors, your leadership abilities are always welcome with NARL/VARL. VARL has grown immensely and become one of the two largest state chapters in the country. We are very active and want you to be a part of our training, leadership chats, and other leadership development activities. We support VRA and its efforts and we want you to continue with us!!

Let me hear from you. I will do my best to answer your questions about the changes in the NRCA affiliation and about VARL.

Submitted by Susan Green, President of VARL

A Special Effort by Starbucks

***Starbucks is reaching out to people with disabilities --
both as employees and as customers.***

(By MICHAEL CORKERY, Staff Reporter of THE WALL STREET JOURNAL, November 14, 2005; Page R8)

If Starbucks has its way, its future work force will look more like Michelle Penman. Thirty-six-year-old Ms. Penman, who has cerebral palsy, spends three hours getting ready for work every morning. Because she has trouble speaking and has limited mobility, customers must write down their orders and place them on her wheelchair. She returns with their coffee and food on a tray or in a backpack affixed to her motorized wheelchair.

Starbucks (Continued on page 10)



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Legislative Update

(Continued from page 2)

While living at home with Mom and Dad is not the best situation any way, even this option is disappearing as these parents age. Today there are literally hundreds, if not thousands, of Virginia families struggling to find some alternative setting when the caregivers are no longer able to care for their loved one.

Other survivors who didn't have the family support options have ended up in nursing homes, state mental health facilities, jail or "on the street".

A number of service agencies have tried to serve survivors in their community, but brain injury is not within their stated mission and certainly not in their area of expertise. Sadly, many agencies have simply refused to even try, knowing how difficult it would be to serve these people without the proper staff training or reimbursement.

Currently there are a number of people with brain injury being served through existing waivers. While that has been a lifeline for those fortunate few, the services provided through those waivers are not specifically designed to meet the needs of people with brain injury, meaning the individual might not be getting the critical services they need. They are also taking up slots that rightly would go to people whom those waivers were developed to assist.

Over the past few years, the Virginia General Assembly has taken some very positive steps to start to serve people with brain injury through the appropriation of funds for specialized programs in a handful of communities. As a result, existing providers have expanded their programs, new providers have emerged and some currently serving other populations have begun to serve people with brain injury.

The approval of a Brain Injury Medicaid Waiver would allow 200 of the most needy citizens of Virginia with brain injury to begin to receive the services they need to live a more independent, more fulfilling, more appropriate life than they now have. The development of that funding stream would also be an incentive for providers to develop the expertise they need to serve people with brain injury, meaning survivors who are not on the waiver would also have a community services option available to them.

In addition, several national programs that provide very specialized services for people with brain injury have expressed a willingness to expand into Virginia, but will only do so if a brain injury waiver is in place.

In 2005 the General Assembly authorized and funded the creation of licensing authority for brain injury, a necessary preliminary step towards the approval of the waiver. The Disability Commission and Virginia's Olmstead Plan both recommend the establishment of the Waiver, which has also received endorsements from the Commissioners of DRS and DMAS. A workgroup of consumers and providers has already addressed many of the questions that need to be addressed. Key legislators have pledged their support.

While it wasn't officially announced, when the spy plane that "did not exist" prepared to leave its temporary European base, hundreds of people gathered in the middle of the night to watch it take off. At some point during the 2006 General Assembly, a different group of people will hopefully gather to see an even more important program launched...a Brain Injury Medicaid Waiver.

Virginia's Medicaid Buy-In: Progress and Current Plans

By Kirsten Rowe

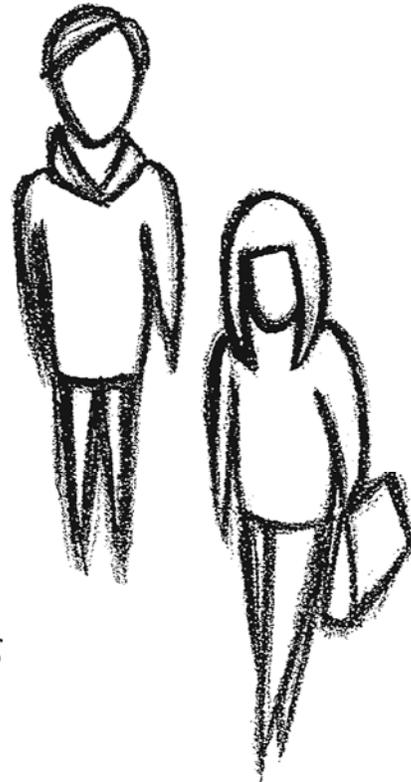
A major disincentive for many Virginians with disabilities who are willing and able to work is the potential loss of eligibility for Medicaid if they earn too much income. Consequently, many individuals

VRA Legislative Update (Continued on page 10)



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Legislative Update

(Continued from page 7)

either do not seek employment or limit their hours or actual wage level. A Medicaid Buy-In can permit higher income and resource levels while ensuring continuation of needed health care coverage, thus providing an opportunity and incentive to seek gainful employment. A Medicaid Buy-In program allows working people with disabilities to pay a premium to participate in their State's Medicaid program, as though they were purchasing private health care coverage.

Early in 2001, state agencies in Virginia initiated a collaborative effort with consumers, providers and advocates to develop a Medicaid Buy-In opportunity. The Virginia Department of Medical Assistance Services (DMAS) was awarded a four-year federal Medicaid Infrastructure Grant, effective January 1, 2002, to support State development of infrastructures to enhance the gainful employment of people with disabilities by targeting improvements to the state's Medicaid Program.

In 1993, the Virginia General Assembly directed DMAS to develop a Section 1115 Research and Demonstration waiver application to the Centers for Medicare and Medicaid Services (CMS) for a Medicaid Buy-In program that would serve up to 200 Virginians. The initial waiver application, which was developed in consultation with the Medicaid Infrastructure Grant Advisory Committee and submitted in November 2003, has not been approved by CMS. However, a modified proposal is being developed that incorporates new consumer-directed healthcare coverage concepts such as the use of Health Reimbursement Accounts, Health Coaches, and on-line Health Toolkits. It is anticipated that this modified proposal may be met with greater interest, and increased likelihood of approval, by CMS.

DMAS has been notified that it will be awarded a new two-year Medicaid Infrastructure Grant to continue the state's efforts to support employment of Virginians with disabilities. DMAS has also included in their proposed budget for the next biennium a plan that, should the Medicaid Buy-In waiver application be denied, the

Legislative Update (continued in next column)

state will pursue a Medicaid State Plan amendment to establish a Medicaid Buy-In. Whether a Virginia Buy-In program is established through a waiver or through a State Plan amendment, disabled individuals will need to meet income and resource eligibility requirements. The Medicaid Infrastructure Grant Advisory Committee will continue to be involved in the further development and implementation of Virginia's Medicaid Buy-In.

For further information on Virginia's Medicaid Infrastructure Grant and the Medicaid Buy-In, please contact Jack Quigley, DMAS Project Manager for the Medicaid Infrastructure Grant, at 804-786-1300 or Jack.Quigley@dmas.virginia.gov.

Submitted by David Williams,

VRA Legislative Liaison

Starbucks (Continued from page 5)

The Seattle-based coffee giant has already turned Ms. Penman into something of a company icon. The Starbucks CEO mentions her in his speeches as an example of the devotion of the company's work force, and says he keeps her picture in his office.

Now Starbucks Corp. wants to make Ms. Penman a literal model employee. As the company expands its outlets, it is trying to tap into the growing pool of job seekers with disabilities. The goal: to make its stores more inviting to customers with disabilities, as well as their caretakers, family members and friends.

"This is a group that most businesses have not addressed," says May Snowden, Starbucks' vice president, global diversity. "As I look at changes in demographics, it is one of the groups that are very important."

Indeed, people with disabilities have discretionary spending power of \$220 billion annually, according to the American Association of People With

Starbucks (Continued on page 11)

Starbucks (Continued from page 10)

Disabilities. Of the 70 million families in the U.S., more than 20 million have at least one member with a disability, according to the association.

For Starbucks, the equation is simple. "Customers tend to patronize a business that is like them," says Jim Donald, president and chief executive officer.

A Wake-Up Call

The Starbucks effort, which is still in its early stages, is proceeding on a couple of fronts. The company recently hired Marthalee Galeota, who worked with Seattle-area nonprofits on disability matters, as senior diversity specialist in charge of disability issues. The job goes beyond making sure Starbucks complies with the Americans With Disabilities Act, the law that mandates equal access to jobs and services for the disabled. Ms. Galeota focuses on establishing a companywide etiquette for a range of issues.

For instance, she has changed the labels on tables designated for wheelchair users to read, "For a customer with a disability," instead of "Disabled customers." The company also has designed its counters at a height that is easily reached by customers in wheelchairs, and the majority of its roughly 10,000 stores around the world have at least one handicapped-accessible entrance.

In addition, Ms. Galeota is working to incorporate disability etiquette into employee training. For example, employees should ask a customer with a disability if he or she would like help, rather than automatically lending a hand; they should also refrain from petting a working service dog for the blind. Then there are day-to-day matters. Ms. Galeota fields calls from employees with disabilities as well as store managers to give advice about potentially tricky situations -- for instance, what a manager should do if an employee goes deaf.

In terms of recruiting, the company has joined the National Business Disability Council, which provides a national database of résumés of people with disabilities. "We have to make sure we are sourcing at every source that is available," Ms. Snowden says. On average, the company hires 200 to 300 people overall every day.

Exactly how much progress Starbucks is making in hiring people with disabilities is difficult to measure. The company doesn't keep statistics on how many employees with disabilities it hires because employees are not required to record that information on an application.

Beyond the Coffee Line

The Starbucks effort comes as a number of other large employers are reaching out to disabled workers. International Business Machines Corp. offers internships for students with disabilities and runs sessions for managers to meet potential hires with disabilities. It also has put together a video for hiring managers that addresses questions they might be afraid to ask, such as how much it will cost to accommodate these employees and how they can ensure that these employees will be able to do their jobs properly.

"It's sending a message that we are a company that wants the best talent and we are inclusive of everyone," says Millie DesBiens, an IBM program manager who focuses on disability issues.

Starbucks (Continued on page 12)



Independence House Opens

Virginia Supportive House is pleased to announce that Independence House, the first residence in Virginia to provide affordable, wheelchair-accessible housing with limited supported services, is now open and fully operational! Independence House involved the “adaptive reuse” of an existing house at 1725 National Street in Richmond’s Fulton Hill Neighborhood; the original home was expanded through new construction and extensive remodeling. Currently there are three residents with traumatic brain injury and one person with a spinal cord injury living at Independence House, which has spacious, individual bedrooms for up to six people. There is a full-time Case Manager and a Night Manager on staff.

Independence House received funding for “in-house support services for residents” through a Commonwealth Neurotrauma Initiative (CNI) Trust Fund grant in 2002 (CNI program is administered by DRS Brain Injury and Spinal Cord Injury Services in Central Office). DRS BI/SCIS staff have been involved in the project from the beginning, providing technical assistance throughout the process, as well as hiring housing consultants experienced in working with people with brain injury and spinal cord injury to work with Virginia Supportive Housing and Independence House, Inc.’s Board of Directors.

Now that residents have moved in, the DRS Brain Injury Direct Services (BIDS) Fund is working collaboratively with Independence House staff and residents to provide short-term one-on-one life skills training for residents who are interested and in need of this service. The BIDS Fund has hired Chris Lavach of The Choice Group to provide this assistance. Chris is an experienced life skills trainer who has worked with people with brain injury for many years. Chris will also work with Case Manager Stephanie Arnold to develop a structure for operating Independence House on a daily basis and managing conflict among residents (for example, helping residents decide if they want to develop “house rules” and schedules for meals, chores, laundry, grocery shopping, etc.).

BI/SCIS has also invited a team of computer and technology “wizards” to determine how technology (e.g., laptops, personal digital assistants, sophisticated wristwatches, etc.) can be used to manage the day to day operations of the house – and also to assist individuals in managing their day to day activities. The “technology team” includes Tony Gentry, an occupational therapist who works at The Partnership on a CNI grant testing the effectiveness of PDAs with people with cognitive impairments. Other DRS members of the team include Tom Rybak, rehabilitation engineer; John Allen and Pat Sitter, occupational therapists; and Larry Prasse, computer adaptation expert.

If you know of someone who may be interested in living at Independence House, you can go to the Virginia Supportive Housing website at <http://www.virginiасupportivehousing.org/> and download an application or call Stephanie Arnold, Case Manager, at (804) 512-4572.

Submitted by Patti Goodall

Starbucks (Continued from page 11)

Verizon Corp., meanwhile, sends employees to conferences and conventions hosted by nonprofit groups working with the disability community. It also informs disability advocates about certain job openings, says Jeff Kramer, Verizon’s director of public policy and strategic alliances.

But Starbucks faces a higher hurdle than most companies when it comes to recruiting people with disabilities. Its workers are constantly interacting with the public in its fast-paced, high-volume



VARL Leaders Emerge !

The VARL mission is to develop, improve, and strengthen leadership skills and practices in both public and private rehabilitation organizations.

Happy New Year from VARL!!! At our last meeting on November 2, Board members and Officers went through a strategic planning process with the skillful facilitation of Kirsten Rowe of the Dept. of Rehabilitative Services. For 2006 we likely have more ideas than time! Our January meeting will be used to look at the many goals we identified and prioritize what we can accomplish in the year to come and beyond. We clearly want to continue to bring training to our members and others to promote leadership at all levels of employment in the field of rehabilitation. Another very important VARL goal is to determine effective ways to reach out and involve more non counselor, non manager staff in leadership development. Our support and para-professional colleagues are critical to what we do, and we need their *ideas* and *creativity* and their *leadership!*

VARL hosted a regional meeting at WWRC on Friday, November 4, 2005 and 15 members and other interested parties were in attendance. The meeting began with a leadership chat on the topic "The Crisis of Loyalty" which was adapted from the book, The Servant Leader by James Autry. Discussion was lively and everyone participated. The last half of the meeting included a discussion about ideas for making VARL membership meaningful and satisfying in terms of personal leadership development needs. The group talked about the importance of preparing new people for leadership opportunities, the importance of mentoring and networking and how we can foster leadership at all levels. It was decided that VARL would sponsor a leadership chat at WWRC during the first quarter of 2006 and that we would also sponsor training in the Valley area during the spring of 2006. Thanks to all who came and participated in the discussion.

There was also a regional meeting in Richmond on
VARL Leaders Emerge! (continued in next column)

November 29 but unfortunately there were many last minute work priorities which made too many of our scheduled participants unable to participate. But clearly, as in the Valley, our members want training and leadership development opportunities which we will pursue.

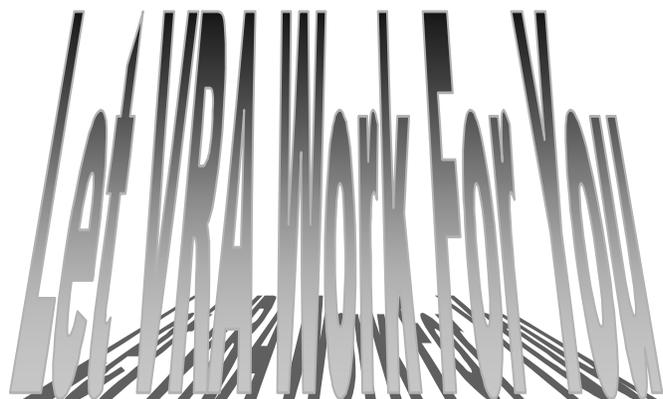
The Northern region VARL members have plans for a meeting following the Holidays so stay tuned for an announcement soon!

Our membership numbers at about 46 at present. *We invite each and every member to join us at our Board meetings. The next one is planned for Thursday, January 19, 2006 at 10:00 a.m.* We meet at the beautiful and easily accessible Dept. of Forestry office headquarters in Charlottesville. At that meeting we will schedule the rest of our meetings for the year and let you know when they are in our next newsletter.

Come join us, check us out, get involved, and let the Leader in you EMERGE!

**Submitted by Susan Green,
 President of VARL**
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 susan.green@drs.virginia.gov

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