2018-20 Executive Progress Report

Commonwealth of Virginia Secretary of Health and Human Resources

Department for Aging and Rehabilitative Services

At A Glance

DARS Mission: To improve the employment, quality of life, security, and independence of older Virginians, Virginians with disabilities, and their families.

Staffing 851 Salaried Employees, 5 Contracted Employees, 964.02 Authorized, and 55 Wage Employees.

Financials Budget FY 2019, \$235.81 million, 25.81% from the General Fund.

Trends
Legend ↑ Increase. ↑ Decrease. ↑ Steady

Key Perf Areas → DDS Accuracy Rate

◆ Congregate Meals Served

◆ Transportation Trips Provided

♣ Home Bound Meals Delivered

No Wrong Door

Productivity Legend

↑ Improving, ↓ Worsening, ↑ Maintaining

For more information on administrative key, and productivity measures, go to www.vaperforms.virginia.gov

Background and History

Agency Background Statement

The Department for Aging and Rehabilitative Services (DARS) was created by legislation in 2012 to take the programmatic units of the Department of Rehabilitative Services and the Department for the Aging and create a new entity with a wider menu of service options. In 2013, the Adult Services and Adult Protective Services units from the Department of Social Services became a part of DARS.

DARS' programs support Virginians with disabilities and older Virginians to maximize their employment, independence and full inclusion into society. Virginia is also committed to having livable communities for aging Virginians and Virginians disabilities who are transitioning from institutions to community settings and individuals who wish to live and work with the assistance of long-term supports and services. DARS is there to support them in their new choices. DARS services also seek to enhance the safety and security of vulnerable adults and promote and protect the rights of older adults and people with disabilities.

Vocational rehabilitation (VR) services are provided through the Division of Rehabilitative Services, with local offices throughout the Commonwealth. The VR program assists individuals with disabilities with employment and is a partner in the Commonwealth's workforce system. Disability Determination Services conducts disability determinations for the Social Security Administration and Medicaid, helping to provide access to services that provide additional financial security for individuals with disabilities.

The Division of Community Living includes the Office for Aging Services, the Office for Disability Programs, and No Wrong Door. The Office for Aging Services is designated by the federal government to oversee all state programs using funds from the federal Older Americans Act and the Virginia General Assembly. The Office contracts with the 25 Area Agencies on Aging (AAA) and other community partners to provide services for older Virginians and their families in communities throughout Virginia. The Office for Disability Programs administers multiple community based services programs that support individuals with disabilities in their communities and works with partners in the community such as Centers for Independent Living, Brain Injury Programs, Long Term Rehabilitation Case Management, and the Personal Assistance Services Program. No Wrong Door Virginia is a virtual system and statewide network of shared resources, designed to streamline access to long-term services and supports. It supports older adults, family caregivers and individuals of all ages with disabilities.

The DARS Adult Protective Services Division administers the state Adult Protective Services, Adult Services and Auxiliary Grant programs

formerly under the Department of Social Services. Direct services are provided by 120 local departments of social services (LDSS).

Specialized advocacy services for individuals receiving long-term care in Virginia are available through the Office of the State Long-Term Care (LTC) Ombudsman. Ombudsman Program representatives across the state work to address problems encountered by long-term care facility residents and community long-term services and supports (LTSS) recipients, and their family members. The Ombudsman program is client focused and seeks to resolve issues to the satisfaction of the client. The program also partners with the Department of Medical Assistance Services (DMAS) to serve as an advocate for Medicaid managed care LTSS recipients.

Major Products and Services

Vocational Rehabilitation: Provides services to eligible persons with disabilities to help them remove barriers to employment and reach an employment goal. Long-term services needed by consumers for successful job placement include supported employment and extended services.

Disability Determination: Provides accurate, timely, efficient and cost effective evaluations of medical evidence related to claims filed by citizens for benefits under the Social Security Act; and to process claims filed for Medicaid based on disability.

Disability Programs: Improves the employability and independence of the most severely disabled citizens through independent living, personal assistance services, long-term case management, brain injury programs, and local assessment and systems change.

Aging Services: Helps citizens find information and services needed to lead healthy and independent lives as they grow older. The Area Agencies on Aging (AAA) administer aging services at the community level. Common AAA services include adult day care, homemaker, personal care, communication referral and information, transportation, congregate (group) and home delivered meals, disease prevention/health promotion education, legal assistance, elder abuse prevention, Ombudsman and Virginia's Insurance Counseling and Assistance Program to Medicare beneficiaries. The Virginia Public Guardian and Conservator Program serves adults age 18 and older, who are legally incapacitated, cannot pay for guardian services, and have no one else to provide this service. The Office for Aging Services has 15 local public guardianship programs.

Adult Protective Services: Develops, maintains, monitors and supervises the implementation of legislation, regulations and policy for the Adult Protective Services, Adult Services and Auxiliary Grant programs and provides technical assistance and training to Local Departments of Social Services that provide the services. Local services provided to eligible individuals include the receipt, investigation of reports of abuse, neglect and exploitation of vulnerable adults and provision of protective services; homebased companion, chore and homemaker services; assessments and screenings for long-term care placements; and eligibility determination for Auxiliary Grants to low income residents of assisted living facilities or adult foster care homes.

State Long Term Care Ombudsman: Identifies, investigates, and resolves problems and concerns on behalf of long-term care recipients in nursing homes, assisted living facilities, and in the community receiving home care supports. Working statewide on behalf of recipients to help them understand and exercise their rights, access benefits, and make informed choices, Ombudsman Program representatives at the state and local levels ensure critical protections for the health, safety, welfare, and rights of vulnerable Virginians. The Program monitors and makes recommendations regarding laws, policies, and regulations affecting long-term care recipients and works collaboratively with partner agencies to improve quality of care and quality of life for older Virginians and those with disabilities.

Customers

Customer Summary

The vocational rehabilitation program remains in Order of Selection, which is required by federal law when the program has insufficient funds to serve all eligible consumers. Order of Selection creates categories of consumers to be served based on the significance of disability. Wait lists are created for consumers whose category is not open for services. DARS has been in Order of Selection since July 1, 2004. As of October 2018, 44.1% of VR consumers are youth with disabilities (14-24 years old). Over the next several years this number is expected to grow exponentially with the targeted focus of the Workforce Innovation and Opportunity Act (WIOA) on youth and students with disabilities. The increased attention and resources on younger students with disabilities is an investment in the future and should in the long-run result in improved VR outcomes for this population. (Fifteen percent of VR dollars must now be spent on pre-employment transition services provided only to students with disabilities.) However, shifting funds and service requirements have impacted how services are delivered to adults in need of VR services. This in turn at the moment is impacting DARS performance outcome measures. With fewer VR resources to support adults with disabilities and the typically lower wages and longer stay associated with youth with disabilities in the VR program, we are seeing an initial impact to our performance outcome measures as the program aligns with the expectations of WIOA. However, we anticipate that the new targeted investment in youth and students with disabilities will ultimately have a positive impact on the VR program.

The Social Security Administration (SSA) projects that between 2015 and 2020, more than 10 million Baby Boomers will enter their most prone disability years and, along with the increase in the retirement age, disability workloads will remain high nationally and in Virginia. However, the biggest workload challenge facing the Virginia Disability Determination Services beginning in 2015 was the expected increase in the Continuing Disability Review (CDR) claims, which are periodic reevaluations to determine whether beneficiaries are still disabled. In 2018, the SSA reported it has reached CDR currency, which means there is no national CDR backlog and these cases are reviewed timely when the diary date expires. SSA estimates about \$9 to \$10 million dollars in lifetime program savings per dollar spent on CDR reviews, including Medicare and Medicaid program savings.

The projected Virginia CDR workload for 2019 is 18,954 cases, which is a slight decrease from 2018 at 20,690. The primary reason for the

decrease in 2019 versus 2018 is due to the CDR currency. Federal Fiscal Year (FFY) 2017 the VA DDS CDR goal was 18,258 compared to the 2016 workload of 19,076. The slight decrease in 2017 is due to budget constraints.

The Virginia budgeted workload for 2019 is approximately 86,954 compared to the 2018 goals of 87,244. The workload target in 2017 was 99,447 and 2016 it was 102,235. The decrease in workload goals is due to budget constraints and CDR currency but expected to increase in 2020.

The customer base for the Personal Assistance Services and Long Term Case Management programs should remain stable unless there are budget changes in these programs.

The staff size of DARs, specifically within the central office, WWRC and in DRS field offices, was reduced approximately 4% in 2018 to address the need to realign VR program functions with current fiscal parameters.

The number of Virginians age 60 or older is expected to increase. Every 25 years, the number of individuals age 65 and older doubles, while the rest of the population grows by only a third.

Over the past 5 years, Adult Protective Services (APS) reports increased by 31% and substantiated financial exploitation cases increased 38%. This trend is expected to continue into the next biennium. For Adult Services, potential delays in completing screenings for Medicaid funded long-term care services and supports within 30 days may increase as the demand for this service grows. Growth of the service population due to the Age Wave; the transition from institutional to community long-term care services and supports; and reentry of aging and prisoners with disabilities will continue.

Customer Table

Predefined Group	User Defined Group	Number Served Annually	Potential Number of Annual Customers	Projected Customer Trend
Consumer	Vocational Rehabilitation Consumer	27,149	28,000	Stable
Consumer	Disability Determination Services	107,602	112,684	Increase
Consumer	Individuals served through Area Agencies on Aging	58,643	60,000	Stable
Consumer	Individuals Receiving Assistance through No Wrong Door	48,216	56,000	Increase
Consumer	Personal Assistance Services and Community Rehabilitation Case Management	473	473	Stable
Employee	Employees of DARS (classified, including WWRC)	1,022	1,269	Stable
Consumer	Persons Served Through State LTC Ombudsman Complaint Investigation, Consultation, and Complaint Counseling	15,965	16,000	Increase

Finance and Performance Management

Finance

Financial Summary

The appropriation for DARS is comprised of approximately 71% Federal and Special funding and 29% State funding. The budget for fiscal years 2019 and 2020 saw increases for the Long-Term Care Ombudsman Program (including Beneficiary Support Services for Commonwealth Coordinated Care Plus), Long Term Employment Support Services, and Brain Injury programs. Additional increases were for state wide salaries, benefits and VITA costs.

Fund Sources

Fund Code	Fund Name	FY 2019	FY 2020
01000	General Fund	\$60,850,766	\$60,950,766
02262	Dars Special Revenue Fund	\$2,446,485	\$2,446,485
02800	Appropriated Idc Recoveries	\$10,403,071	\$10,403,071
09113	Trans Srvcs For Elderly/Dsabld	\$200,000	\$200,000
09150	Cmnwlth Neurotrauma Initiative	\$999,937	\$999,937
10000	Federal Trust	\$160,908,004	\$158,301,739

Revenue Summary

The vast majority of the nongeneral fund revenues (92.5%) are federal and the second largest nongeneral revenue stream (5.5%) is indirect cost which is derived from federal sources. These indirect cost revenues are reported twice in the chart below because the funds are received as federal funds (from which they are derived) and then transferred to indirect cost revenue and a portion to general fund revenue thereby being reported twice. The other nongeneral revenues are derived from fees for services to other agencies and revenue

from the Department of Taxation for the Commonwealth Neurotrauma Initiative (CNI) Trust fund, Transportation services for the Elderly/Disabled and special fund revenues from operating agreement with Disability Service Agencies to support back office operations.

Performance

Performance Highlights

DARS was close to meeting its goal of 3400 successfully employed VR consumers in federal fiscal year (FFY) 2018 with 3303 individuals becoming successfully employed. All clients whose cases are successfully closed as employed must be working in competitive integrated employment (in an integrated setting in the community with wages at or above minimum wage). DARS productivity measure captures the employment rate of our VR consumers. This rate compares the number of consumers who exit the VR program after receiving services successfully employed versus those who are not employed. For FFY 2017, the employment rate was 55%. In addition, DARS is now measuring the percent of program participants who are employed during the fourth quarter after they successfully exited from the VR program. This is a new measure that uses data from outside entities and agencies and is not yet complete. Refinement of the data collection process will continue, as we seek to improve this important quality measure.

WWRC's key performance metric is to deliver comprehensive vocational and medical rehabilitation services that lead to employment and/or re-entry to the workforce. This is measured as the percentage of WWRC Vocational Training graduates who are employed. This measure supports the Commonwealth's objective to enhance Virginia's economy by increasing employment among Virginians with disabilities. A stable trend is expected. Targeted strategies ensure a workforce driven curriculum that is responsive to industry demands, as well as shifting economic markets. WWRC has instituted actions to improve the timeliness of its discharge reports to assist consumers in their return to their community and work. The timeliness of discharge reports is expected to improve over time.

Ensuring a high accuracy rate of disability decisions is paramount, in order to provide an effective level of customer services to Virginians applying for disability benefits under Title II (Disability Insurance), Title XVI (Supplemental Security Income), and Title XIX (Medicaid disability) of the Social Security Act. The accuracy rate for Disability Determination Services for Federal Fiscal Year (FFY) 2018 was 98.2%.

DARS has a performance management process in place to monitor the services provided by our community partners who have contractual relationships with the agency and/or receive state or federal appropriations. By monitoring and providing technical assistance, training, and guidance to these entities (Employment Service Organizations, AAAs, brain injury organizations, CILS, etc.), DARS helps ensure that their fiscal and administrative processes are in compliance with federal and state requirements and that they provide high quality services to customers.

Through our collaborative relationship with the AAAs, DARS ensures that older Virginians receive nutritional meals and transportation services to enhance their health and well-being. Another key measure for DARS is the number of individuals receiving communication, information, referral and assistance (CRIA) through the No Wrong Door (NWD) system. NWD is a statewide initiative, designed to help people navigate the complex system of public and private long-term services and supports, avoid unnecessary trips to the hospital and/or nursing home, and support individual choice. In State Fiscal Year 2018, 54,614 individuals received NWD CRIA services.

Selected Measures

Measure ID	Measure	Alternative Name	Estimated Trend
26246102.001.001	Accuracy of Disability Decisions	DDS Accuracy Rate	Maintaining
M262SA13005	Number of Meals Served to Older Virginians in Group (Congregate) Settings	Congregate Meals Served	Worsening
M262SA13002	Number of One-Way Transportation Trips Provided to Older Virginians	Transportation Trips Provided	Worsening
M262SA13007	Number of Meals Delivered to Home-Bound Older Virginians	Home Bound Meals Delivered	Worsening
262.0002	Individuals Receiving Communication, Referral, Information and Assistance (CRIA) Through the No Wrong Door System	No Wrong Door	Maintaining

Key Risk Factors

The VR program receives about 79% of its Title I funding from the Federal government, with a required state match of about 21%. For each dollar DARS spends for VR services, it receives \$3.69 in federal funding. Between 2014 and 2016, DARS state general funds available for VR match increased by \$1,000,000 (from \$7,984,358 to \$8,984,358). However, there is still insufficient funding to serve all individuals needing VR services, which has led to an increase in the Order of Selection waiting list and increased periods of time with categories closed. This has been exacerbated by changes in the reallottment of federal dollars and WIOA programmatic changes.

WWRC and DRS are affected by DARS Order of Selection which impacts the number of consumers receiving services and the complexity of their disabilities. This, combined with a rapidly changing workplace along with economic factors causing shifts in types of available jobs, increases risks to successful employment outcomes for persons served. The increase in WWRC consumers with Autism Spectrum Disorders requires specialized

programming to address unique barriers to employment and independence. Efficient rehabilitation team operations, flexible use of resources, and innovative programming, in collaboration with DARS, will be required for WWRC to address complex disability related challenges faced by these WWRC consumers to successfully prepare them for employment and offer a competitive edge.

In addition, the Workforce Innovation and Opportunity Act (WIOA) requires that 15% of VR funds be used to provide pre-employment transition services (Pre-ETS) for students with disabilities. This is a positive investment in youth who are potential clients and those who are DARS clients now. Pre-ETS are distinct services that must meet prescribed criteria and are designed to help prepare students for work. However, this shift in the allocation of funds results in a reduction of available resources for traditional VR clients.

Even if consumer trends increase, programs and services will continue to operate without expansion of staffing levels. In fact, staffing levels were reduced in 2018 to address the need to realign operational activities with available funds.

The demand for community rehabilitation programs and living options will grow as people with significant disabilities move from institutions into the community. The Commonwealth continues its commitment to, and compliance with, the Olmstead decision through the Community Integration Advisory Commission.

The Office for Aging Services distributes federal Older Americans Act and state general funds to the AAAs through an Intrastate Funding Formula. The Older Americans Act is not an entitlement program, so services may be curtailed due to lack of funding. Therefore, priority is given to serve older Virginians in the greatest economic and social need.

The Public Guardian and Conservator Program had the capacity to serve 856 individuals in FY '17. In FY'18, the number expanded to 1,049 individuals.

For Adult Services, concerns are: (1) the continued rapid growth in the number and complexity of APS cases, especially financial exploitation; (2) significant and growing backlogs in preadmission screenings for Medicaid nursing facility and waiver services; (3) lack of monitoring of Auxiliary Grant assisted living providers; (4) growth of the service population due to the Age Wave; the transition from institutional to community long-term care services and supports; and reentry of aging and disabled prisoners; (5) absence of direct federal funding, technical assistance and standards for state APS programs and a 40 % reduction in state funding for homebased adult services; and (6) declining number of AG assisted living beds due to inadequate provider reimbursement.

With a continued emphasis on electronic claims, DDS has instituted many changes to meet the increasing technology and claimant demands. This requires ongoing training of staff. The continual training needs combined with a fluid workforce creates staffing challenges that DDS continues to try and address through innovative approaches.

Uncertainty in changes to long standing federal fund sources affects many of DARS programs.

Agency Statistics

Statistics Summary

The following statistics provide a comprehensive snapshot of the Department for Aging and Rehabilitative Services during 2018.

Statistics Table

Description	Value
# VR Consumers Served	27,149
Projected VR Wait List	4,405
# Consumers receiving long term employment supports	3,775
# Consumers Served by Disability Determinations	108,978
# Individuals receiving brain injury services	4,871
Current PAS and LTRCM wait list	80
# Home Delivered Meals for Older Virginians	
# Congregate (Group) Meals for Older Virginians	651,311
# Transportation Services for Older Virginians (one way trips)	381,269
#Complaints Closed by State Long-Term Care Ombudsman	3,222

Management Discussion

General Information About Ongoing Status of Agency

DARS' focus is on improving the lives of older Virginians and Virginians with disabilities. The agency will work with its community partners to be more effective in strategic planning, budgeting, program monitoring and evaluation and training and technical support. The agency will be at the center of the Commonwealth's response to two critical emerging issues.

First, many Virginians who are often referred to as "boomers" or "seniors" are in, or are approaching, their retirement years. They rightly expect to be secure in their efforts to age in place and to have safe options for their long-term care needs. DARS will need to be there for them. Secondly, Virginia is also committed to having livable communities for those Virginians with disabilities who are transitioning from institutions to community settings or those who wish to live and work with long-term supports and services. DARS will also be there in support of their new choices.

An efficient and effective human resource and management program is critical in supporting the agency's efforts to provide quality services leading to a higher quality of life for our consumers.

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Information Technology

The Information Services Division (ISD) provides management, administrative support and technical assistance to functional programs of the Department for Aging and Rehabilitative Services (DARS). In addition, ISD provides administrative support and technical assistance to the Disability Services Agencies (DSA), which includes the Wilson Workforce and Rehabilitation Center (WWRC), Department for the Blind and Vision Impaired (DBVI), the Virginia Rehabilitation Center for the Blind and Vision Impaired (VRCBVI), the Department for the Deaf and Hard of Hearing (VDDHH), and the Virginia Board for People with Disabilities (VBPD).

Data Exchanges between the agency's case management applications and agency financial systems were complete in 2014. Data exchanges between agency financial systems migrated from CARS to CARDINAL in 2016. Changes to leave accounting, time keeping and payroll systems were complete in 2017 and 2018, requiring significant changes in agency business processes. Changes to the agency Chart of Accounts changed the look and coding on financial reports and user training was provided. In 2018 and 2019, migration from CIPPS and PMIS to equivalent Cardinal software will again change business processes and reporting.

A significant accomplishment was the migration of the DSS ASAPS system to DARS PeerPlace. It began in summer 2015 with a grant to customize PeerPlace software. Operations funding for SFY 2019 has allowed implementation to begin in summer 2018 and is planned for completion in early 2019. Other significant accomplishments included the HCBS data warehouse for improved management reporting and an application to track Auxiliary Grant recipients.

The continued expansion of cybersecurity standards and oversight may have an impact of staff users, computer infrastructure and technology procurement. The additional cyber-security associated with cloud-based systems is resource intensive both in staff time and cost.

Migration from Microsoft Outlook to Google e-mail occupied several months in mid-2018. The fallout from this change still affects browser compatibility and changes in application software that produce automated e-mail messages. In particular, the adoption of Vault as message encryption software has created problems with mobile devices and mail archiving services.

Microsoft tools are used to create and maintain easy to operate dashboards that describe WWRC and DARS performance metrics. By exposing these dashboards to public stakeholders, WWRC and DARS can better promote comprehensive services provided to their consumers.

Continued expansion of the existing agency content management application will reduce paper storage and improve efficiency of retrieval. Expansion into HR records and DARS case services occurred in 2017 and 2018. E-forms has increased the agility of development and in turn, strengthened a self-service approach for consumers and their stakeholders. Use in aging services to collect data for federal reports and self-service referrals for our older consumers was accomplishments in 2018. An initiative for E-forms for personnel transactions will improve operational efficiency via standardized approval workflows and automated financial coding.

A grant funded project to improve training for our APS Division will increase the integration of DHRM's learning management system and DARS developed training, resulting in training to LDSS staff providing Adult Protective services, which is scheduled for completion in 2020.

The signature technology initiative for the next biennium is the migration to cloud platforms for VR case management. The migration will both improve security and substantially reduce costs. It is scheduled for completion in 2019 and will decrease total cost of ownership beginning in 2020.

A recent reduction in workforce has had an impact of the organizational structure of the Information Services Division (ISD). WWRC Medical Records was eliminated and remaining staff were realigned to quality assurance activites for DARS' document management system and technical support for the VR case management system, AWARE. Use of data base management and systems engineering staff, formerly limited to out of scope networks was expanded to include in scope. In addition, the use of cloud technology and retirements allowed for the elimination of additional positions.

New demands related to HCBS include the continued implementation of PeerPlace for the APS Division, migration of LTRCM and Ombudsman case management software to PeerPlace and the integration of IL First and BI First, case management software for Independent Living and Brain Injury services provided by DARS. The DSA relies heavily on VITA and maintains an effective working relationship through problem solving and status meetings twice each month with our VITA CAM and NG AOM. We meet on a regular basis with our PMO. We interact regularly with VITA staff responsible for web accessibility policy and perform accessibility assessment for VITA on web presence of COV Executive Branch agencies. We interact regularly with VITA staff responsible for IT security, supply chain and procurement.

VITA provides us with status reporting for bandwidth and data backups, logs for our DBMS, UAT for our work requests and blueprints of service offerings on a regular basis. We also run server and processor status reports for our devices and receive alerts and Vitacomms. We find these reports and dashboards valuable for assessing the health of the DARS infrastructure.

DSA technology staff are active participants in extra-agency technology planning activity. We were represented on the RFP teams to provide replacement services for NG in 2017 and beyond and the WebMaster group. We are represented at COVITS and the biannual Project Management summits.

DSA technology staff enjoy a high level of availability of web-based training. Ten Pluralsite.com licenses are shared by interested IT and non-IT staff. Lynda.com keeps webmasters current. High availability of these products keeps staff professionally relevant and skilled.

Another staffing impact related to a reduction in force was the elimination of the Internal Audit Director and the Information Security Officer. Duties have been temporarily reassigned.

Workforce Development

Nearly 12% of DARS workforce is eligible to retire with unreduced benefits. Within the next 5 years that number will increase to 22%. A majority of those eligible for retirement are in management and/or leadership positions possessing an abundance of both technical and institutional knowledge. In addition, there are ongoing recruitment and retention challenges with vocational rehabilitation counselors within our Division of Rehabilitative Services (DRS) and Analysts working in the Disability Determination Services (DDS) division.

To address the inevitable upcoming retirements of employees in these critical positions, DARS is very active with succession planning strategies and management/supervisor training. Programs, including the DDS Leadership Program, the DRS Skills for Leadership, and training sessions on managing strategically, have been implemented to develop current staff to step into future leadership positions.

To implement more effective recruitment and retention plans, DARS places a strong emphasis on teleworking, alternate and flexible work schedules, retention increases, and employee development. In addition, DARS has expanded its student internship program and streamlined the screening process for all recruitments.

DARS will continue to develop and implement strategic initiatives to combat these and other important issues facing its workforce.

Physical Plant

Strategically located, affordable, accessible and well maintained facilities are critical to DARS ability to provide effective services. DARS administrative headquarter is located in an office park in Henrico County which is convenient to our consumers and fully accessible for individuals with disabilities.

All DARS offices are in leased space. DDS and the VR program have offices located throughout Virginia; the VR program has 30 offices where direct services are provided to VR consumers. Two of these offices are in One Stop Centers with other State agency partners. Two of the DDS offices, in Norfolk and Roanoke, are colocated with Social Security Administration Offices.

DARS has reduced its DRS field office presence to reduce leasing costs. These locations have been replaced with a more mobile workforce that relies on meeting space available locally in other state agencies.

DARS has improved its transportation program, centralizing transportation services and vehicle management and established processes with DMV to insure that staff are properly licensed to operate state vehicles.

DARS has improved its facility security, beginning with enclosed reception areas. It will continue to improve security with physical badge access, panic button availability to staff, secure printing and placement of cameras in strategic locations. These activities will proceed as funds permit.