CONVENINGS REPORT

COVID-19 Policy Collaborative for an Inclusive Recovery

COVID-19 POLICY COLLABORATIVE FOR AN INCLUSIVE RECOVERY

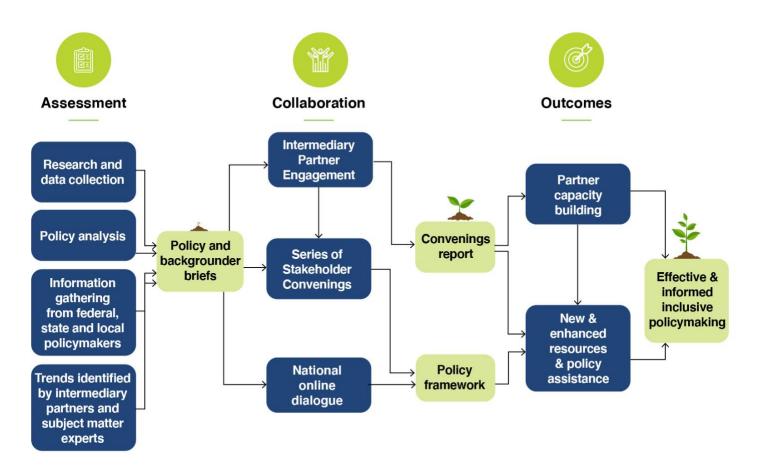
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Overview

In November 2020, the State Exchange on Employment & Disability (SEED) launched the COVID-19 Policy Collaborative for an Inclusive Recovery, also known as the Collaborative, to support SEED intermediary partners and other stakeholders in their respective pandemic responses and to ensure newly implemented policies align with disability and civil rights laws and policies. Information and data gleaned from Collaborative activities are intended to inform the development of a COVID-19 Inclusive Recovery Policy Framework and the provision of SEED policy assistance at the state and local levels.



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Collaborative Structure

Between February and May 2021, the Collaborative hosted a series of virtual convenings focused on returning to the workplace, workforce retention and preparing for work. Along with representatives from SEED's eight formal intermediary partners (the Board of Hispanic Caucus Chairs, Council of State Governments, Council of State Governments West, National Conference of State Legislatures, National Governors Association, U.S. Conference of Mayors, Western Governors' Association and Women In Government), key stakeholders and subject matter experts representing diverse perspectives were in attendance. Participants included researchers; members of academia; federal, state and local government representatives; disability employment policy specialists; and other thought leaders.

Convening topics were determined in collaboration with SEED's intermediary partners and through comprehensive background research, including a review of relevant federal, state and local policies and an analysis of trends and priority areas among state and local policymakers served by SEED's partners. Each convening included presentations and panel discussions as well as smaller breakout groups. These sessions focused on the impact of COVID-19 on the employment of people with disabilities, including federal, state and local pandemic responses. For each of the breakout group portions of the meetings, participants were assigned to smaller groups to identify additional topic areas and provide suggestions for ensuring COVID-19 recovery policies are inclusive of people with disabilities. Care was taken to ensure that each of the breakouts had representatives from various stakeholder groups. Prior to each convening, participants received background information on inclusive policies and resources to review in order to facilitate robust discussions. These materials included an overview of the SEED Policy Collaborative, a policy brief for each topic area and a summary of federal guidance on COVID-19 and disability.

The following report features meeting highlights, key themes and priority issues, and a summary of each convening's breakout discussions and recommendations, all of which will be used to inform the policy framework. The appendix includes the meeting agendas, a list of participants and a list of resources shared by participants throughout the convenings.

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Highlights



Return to the Workplace: Inclusive Safety and Health Policies Convening

The first virtual convening took place on February 22, 2021. Following welcome remarks by Jennifer Sheehy, Deputy Assistant Secretary of the U.S. Department of Labor's (USDOL) Office of Disability Employment Policy (ODEP), attendees enjoyed an opening presentation by the University of New Hampshire Institute on Disability's Dr. Andrew Houtenville. Dr. Houtenville presented a detailed overview of COVID-19's impact on the employment of people with disabilities and shared national and state employment statistics and trends. Overall, trends have shown that while both people with and without disabilities experienced a large drop in employment rates at the beginning of the pandemic, the recovery has been quicker than that of the Great Recession. Furthermore, the labor force participation rate of people with disabilities – meaning those on furlough or actively looking for work – has remained relatively stable, and has even increased in recent months, suggesting that people with disabilities are staying engaged in the workforce.

Following the presentation, ODEP Senior Advisor John Tambornino moderated a panel exploring the Federal Government's response to COVID-19 and disability-inclusive guidance issued by the Occupational Safety and Health Administration (OSHA) and Equal Employment Opportunity Commission (EEOC). (Please see <u>appendix</u>

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for list of speakers.) Both panelists noted that the Americans with Disabilities Act (ADA) provided a strong foundation for addressing the myriad of challenges arising from COVID-19 for people with disabilities and that the legislation offered a framework for employers as they adopted health and safety standards and considered reasonable accommodations. The panel also provided recommendations for state and local policymakers to consider as they develop their own disability-inclusive policies and guidance. The panel noted that time is of the essence when developing policies and guidance and that it is important for agencies in a state or jurisdiction to share and coordinate resources and guidance to make sure the needs of people with disabilities are being addressed. They also emphasized that states need not reinvent the wheel when it comes to adopting inclusive policies; states should look at their existing disability rights laws and provisions for guidance.

A second moderated discussion, led by SEED Legislative and Policy Counsel Bobby Silverstein, followed the federal panel. The discussion focused on state and local responses to COVID-19 and offered examples of disability-inclusive policies and executive actions, as well as best practices for policymakers looking to ensure an inclusive economic recovery in their communities. Each of the panelists outlined their state's or city's strategy for inclusive safety and health, which could be categorized as one of the following three approaches:

1) applying generic health and safety guidance to people with disabilities; 2) writing disability-specific COVID-19 guidance and providing examples of how it applies under ADA; or 3) in the case of Houston, TX, applying disability rights principles to the city as a whole. The panelists noted that workers are often not aware of their rights, so conducting outreach and providing training to workers is critical. Such efforts help workers understand the guidance and become more aware of the resources available. One panelist noted that translating guidance into different languages and using different formats for outreach, such as social media or radio, can help ensure governments reach the most vulnerable populations. Another key takeaway was the need for collaboration across agencies, levels of governments and stakeholders. States should look to the Federal Government for existing guidance and resources and ensure that the needs of all stakeholders are met by bringing employer groups, unions and advocacy organizations to the table.

ODEP Senior Policy Advisor Nadia Mossburg introduced the next part of the convening, which featured an interactive breakout session. Each of four breakout groups participated in the same exercise: identifying additional topics to consider in the Collaborative, sharing disability-inclusive examples and best practices, and

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offering recommendations for ensuring state and local COVID-19 policy responses are inclusive of people with disabilities.

The meeting concluded with participants reconvening as a larger group, with a representative from each breakout group summarizing points and takeaways.

Key Themes and Priority Issues

Participants in the first convening identified the following key themes as priorities for consideration in state and local COVID-19 responses:

- → Accessible telework;
- → Education and training;
- → Racial equity;
- → Mental health; and
- → Effective communication and outreach.

Accessible Telework

One of the most frequently mentioned topics at the first convening was telework and ensuring people with disabilities have equitable access to telework opportunities. While the increase of telework during the pandemic has created new opportunities, a divide still exists for many individuals with disabilities due to lack of broadband access, accessible technology and accommodations. The COVID-19 recovery should address these disparities and ensure people with disabilities have access to essential accommodations and technology, as well as address the growing mental health concerns of teleworkers during the pandemic.

Education and Training

The COVID-19 pandemic has accelerated many "future of work" trends and led to the rapid digitization and automation of many industries. As the economy recovers, policymakers should ensure those impacted by this transition to automation have the skills needed to obtain employment in high demand industries. This may

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include adopting remote learning strategies to reskill and upskill workers while social distancing and stay at home measures are still in place.

Racial Equity

The pandemic has exacerbated racial disparities due, in part, to lack of adequate health care and safe employment options. COVID-19 recovery efforts must address the unique needs of racial minorities, including those with disabilities, to ensure they have equal access to vaccinations, accommodations and work opportunities. Outreach and communications efforts also should be tailored to minority populations by collaborating with organizations and other community partners that serve underserved groups.

Mental Health

Social isolation, stress due to diminishing work-life balance, loss of work or reduced hours and caregiving responsibilities have all contributed to a rise in reported mental health conditions since the pandemic's start. As states and localities respond to COVID-19, policies and guidance should consider the mental health needs of those teleworking or in essential jobs, as well as those who may have been laid off or left the workforce.

Effective Communication and Outreach

In addition to the critical topic areas posed above, participants recommended ways to effectively communicate COVID-19 responses to underserved communities and provide outreach to ensure all Americans are taken into account in the recovery efforts. Suggestions included partnering with community organizations and advocacy groups to develop grassroots efforts, using a variety of channels and mediums to reach different age groups and incorporating plain language and universal design principles to ensure people of all backgrounds understand the resources available to them.

Breakout Group Discussions

During the facilitated breakout group exercises, participants responded to prompts aimed at further identifying barriers to employment and employment-related supports for people with disabilities as well as solutions for creating safe and healthy work environments. The participants discussed:

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- Additional topics for consideration that were not covered in the background briefs; recommendations that state and local policymakers should consider to ensure legislation and executive actions are inclusive of people with disabilities;
- Recommendations for ensuring policy actions and guidance are effectively communicated to the public and for ensuring policymakers are aware of the resources and guidance available to them to make policies more inclusive to all; and
- 3. Examples of inclusive policies and programs.

The feedback gathered during the breakout sessions is summarized below.

Additional Topics for Consideration

- → The digital divide. The ability to telework and take advantage of new opportunities or new technologies requires knowing how to use the internet. For example, those living in group settings may have limited access to a computer or the internet based on their living situation. For people with disabilities, the digital divide includes lack of access to not only the internet, but also the assistive technologies needed to perform a job at home. In addition to assistive technology, individuals with disabilities may also lack access to the tech support available in the workplace.
- → Inclusive telework. This includes offering assistive and accessible technologies to support telework, providing accommodations and ensuring work-life balance. Policymakers should distinguish between telework policies and telework as a reasonable accommodation, as well as consider the interaction of cyber security policies and telework. However, it was noted that a large share of the jobs held by people with disabilities cannot be done remotely, so policymakers should address the lack of telework opportunities when considering safety and health policies.
- → Accessible hiring. Educate employers, including personnel in human resources departments, to ensure they use accessible technology and possess knowledge of virtual hiring and interviewing processes, especially for people with disabilities. States should also consider accessible AI and job application procedures, including the need for accessible hiring and onboarding.

- → Resources for upskilling or reskilling. There has been a large shift from a service/industrial to a technology-based economy. Appropriate training is necessary for people with disabilities who may have received training for a traditional service job.
- → **Small business supports**. There is a need to ensure small businesses get the resources they need to bring people to work and/or return to work.
- → Mental health of teleworkers. During the pandemic, there has been an increase in overdose deaths and suicides. Past interventions may not work as well when people are social distancing and working from home, so we need to integrate safety and health policies into the telework environment.
- → Labor rights. The employment rights of all employees should be taken to account, especially given the changing state of our work environments. Special attention should be given to those who are teleworking, which often leads to longer hours and stress.
- → Newly acquired disabilities. Many individuals have acquired new disabilities as a result of COVID-19 that may impact their ability to perform their current job. This may include developing timelines, written procedures and protocols for COVID-19-related disability determinations and mental health conditions. Accommodations for those with disabilities should be personalized and based on circumstance, such as the presence of COVID-19.
- → Family supports. Offer modifications for family members not covered by the Family and Medical Leave Act. Additional family supports may include food and housing.
- → *Rural communities*. Consider challenges unique to those living in rural areas.
- → Youth and entry-level workers. Policies should address both the needs of and outreach to young people as well as those new to the workforce. For example, consider tailoring education and outreach based on level of work experience.
- → **Women and caregivers.** Address the needs of women and caregivers who have left their jobs due to childcare needs.

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Recommendations for Ensuring Policy Guidance Is Inclusive of Those with Disabilities

- → Include those with "lived experiences" in policy development. People with disabilities should be included in policy development, rather than simply as advisors. Ensure people with disabilities are at the table when policies are drafted and considered. Enlist more people with disabilities in positions of leadership to make policy and build stronger opportunities for leadership pathways for people with disabilities to hold positions of power. Survey the disability community for recommendations.
- → Work across agencies for coordination. Encourage collaboration for providing accurate and up-to-date resources and information. Identify partners in the discussion around the inclusion of people with disabilities in COVID-19 policies. Potential partners for collaboration may include chambers of commerce, state emergency departments and governors' offices.
- → Conduct a needs assessment of accessibility across government agencies. Involve governors' committees on disability, independent living centers, state developmental disabilities councils and city commissions on disability. Existing business resource groups can be used to ensure that polices effectively address the right issues. For example, Washington State presented their human resources policies to business resource groups for input. Use state councils and committees on disability as a resource to ensure safety and health policies are inclusive and effective.
- → Policy guidance should include disability-related examples throughout the document, as well as examples of how a policy is implemented to help people understand inclusivity in the workplace. Policies should address stigma around disability and ensure worker rights are integrated into career services.
- → Policies should address racial equity and other longstanding disparities that are reflected around COVID-19. These populations need to be effectively vaccinated and accommodated to return to work.
- → States and localities should work together to "normalize accommodations" and collaborate with the Job Accommodation Network and ADA coordinators to inform efforts.

Recommendations for Resources and Outreach to Policymakers and the Public

→ Use effective and consistent communication and outreach strategies. For example, use plain language in all materials, apply universal design principles, provide links to appropriate resources and inform

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communities through grassroots efforts. Reach out to people of different socio-economic backgrounds, race/ethnicities and disabilities and the organizations that serves those different groups. A variety of channels, such as PSAs, social media campaigns, community-based organizations, labor organizations, blogs and employers, should be used to reach different audiences. For example, NYC hosts weekly community calls on various topics such as vaccines.

- → Enlist champions to back a national outreach and education campaign to increase visibility, build support and raise awareness. Look for "hidden champions" with a personal connection to disability, as well as those with disabilities. For example, policymakers can include Workforce Board Members with disabilities at the table or require State Workforce Boards to include a representative with a disability.
- → Present policy recommendations in short, concise white papers with digestible information and include real world experiences and examples to catch the attention of policymakers.
- → Develop smaller policy briefs with examples from other states highlighting agencies that are responsible for safety and health. These should include examples of how policies and programs work practically and define individual roles and assignments.
- → Offer best practices and guidance for reasonable accommodations that are not necessarily covered by law.
- → Include specific sections in policies that refer to those with disabilities, as well as references to people with disabilities throughout the policy.
- → Conduct outreach to educate employers and offer resources to help them adopt inclusive practices of their own.
- → Consider how to communicate and conduct outreach during an emergency (such as a natural disaster).

Examples of Inclusive Policies and Programs

→ The Minnesota Governor's Workforce Development Board Disability Equity Committee has recommended a focus on training workforce staff to effectively work with customers with disabilities especially during the pandemic.

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- → States have trained vocational rehabilitation (VR) representatives on the availability of service integration (with other agencies and programs) and supports in order to provide a comprehensive assessment for services.
- → Alaska includes telework statements on their websites to encourage its use as a long-term practice.
- → Georgia Tech is offering accessible COVID-19 testing services and kits.
- → An initiative in North Carolina worked on creating recovery-friendly workplace policies.
- → A recent policy in Virginia created a risk portfolio based on the job type and the level of COVID-19 exposure. The state then built a safety and health policy that addressed the different level of risks.
- → Cares Act funding was used in Montana to purchase assistive technology for those who were teleworking because of the pandemic.

Workforce Retention: Inclusive Mental Health and Vaccination Policies Convening

The second convening, "Workforce Retention: Inclusive Mental Health and Vaccination Policies," was held on April 19, 2021. Similar to the first convening, the session began with opening remarks from Deputy Assistant Secretary Jennifer Sheehy and featured two panels.

The first panel, "Inclusive Vaccination Policies: Federal Policy Overview & State Panel," highlighted examples of inclusive vaccination policies, as well as actions states and localities can take to ensure vaccinations – from signing up for an appointment to the physical vaccination site – are accessible to people with disabilities. It was moderated by Bobby Silverstein. (Please see appendix for list of panelists.) The conversation touched on effective vaccine distribution strategies – such as NYC's use of accessibility coordinators on-site to help people with disabilities access accommodations – as well as guidance around employer vaccine requirements. The speakers emphasized that if an employer chooses to require vaccines for its employees, there are ADA and other state-wide laws and guidance that employers must follow, including the provision of reasonable accommodations, to ensure employers are not discriminating against employees with disabilities.

The second panel, "Inclusive Mental Health Policies: State Policy Overview and Panel Discussion," provided an overview of COVID-19's impact on mental health and the services available to those experiencing mental

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health conditions, and included guidance on ways in which policymakers can ensure a continuation of programs and services to effectively address mental health concerns during and following the pandemic. The panelists highlighted the rise of mental health conditions, particularly among first responders and people of color, a disproportionate number of whom work in essential jobs and have been hit the hardest by job layoffs compared to non-minorities. The panelists also discussed the importance of inclusive telehealth policies. Speakers provided examples of inclusive telehealth policies, such as ensuring telemental health services were being covered by insurance, eliminating copayments for telemental health or waiving the requirement of having a preexisting relationship with the provider before switching to telemental health from in-person services. They also highlighted several inclusive policies, including a toll-free help line in New Jersey for front-line and essential workers and allowing service animals for first responders and essential workers who are experiencing PTSD.

Key Themes and Priority Issues

Participants in the second convening identified the following key themes as priorities for consideration in state and local COVID-19 responses:

- → Reasonable accommodations;
- → Vaccine accessibility;
- → Interagency coordination and collaboration; and
- → Telehealth.

Reasonable Accommodations

One of the primary themes throughout the April 19 convening was around reasonable accommodations as it applies to vaccinations and mental health. As discussed during the panels and breakout sessions, employers need to understand how the ADA and related state laws and guidance applies to vaccine requirements, and that reasonable accommodations must be made to those who qualify if an employer requires vaccines. Employers should also identify ways to support the mental health needs of employees and provide accommodations for those experiencing mental health conditions, such as time off to attend telemental health appointments or granting flexible work schedules.

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Vaccine Accessibility

Digital and physical accessibility of the vaccine rollout was a common thread throughout the day's discussion. Panelists and participants highlighted the need for consistent messaging around vaccinations, as well as accessible scheduling websites and physical vaccination sites. Several best practices were noted, such as using plain language for all communications, providing ASL interpreters and accessibility coordinators at vaccine sites, and providing ADA training to staff.

Another concern mentioned throughout the convening was on ensuring people with disabilities living in rural areas have access to the vaccine. In these instances, participants suggested offering mobile vaccination sites or vans to reach those who are not able to leave home or have barriers to transportation.

Interagency Coordination and Collaboration

Many participants agreed that interagency coordination and collaboration is key to effectively distributing vaccines and addressing the needs of those with mental health conditions. State agencies can work together to ensure mental health programs and services are easy to access for residents and that no one is falling through the cracks.

Interagency coordination also applies to training staff on the ADA and other disability-related laws and guidance. For example, NYC employs disability services facilitators at each city agency to ensure compliance within their specific agency, coordinate services across agencies and serve as points of contact for the disability community. Additionally, many state health departments are working with transit agencies to ensure that people have accessible transportation to vaccination sites.

Telemental Health

Access to telemental health services was also discussed throughout the convening. Telehealth parity, including reimbursement parity, will be an important consideration for states since telehealth services have traditionally been reimbursed at a lower rate than in-person health. Additionally, though more people have been able to access services through telemental health, the technology is not always accessible, so providers should integrate accessibility features, such as relay services, into the platforms.

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The digital divide and access to broadband were also discussed as barriers to telemental health. In these instances, states may consider allocating additional resources to ensure individuals have access to the technology and information they need to access and use telemental health services.

Breakout Group Discussions

Participants responded to prompts during the facilitated breakout sessions to identify barriers and solutions to equitable vaccine access and mental health services. The participants discussed:

- 1. Additional topics for consideration that were not covered in the background brief on inclusive vaccination and mental health policies;
- 2. Recommendations that state and local policymakers should consider to ensure legislation and executive actions are inclusive of people with disabilities; and
- 3. Examples of inclusive policies and programs.

The feedback gathered during the breakout session is summarized below.

Additional Topics for Consideration

- → Vaccine distribution. States can utilize Independent Living Centers (ILC) to help with vaccine distribution and can access CARES Act funding for vaccine support. Not only can ILCs distribute vaccines, but they can also provide transportation, logistics and other supports to people trying to access vaccines. States should also consider the needs of those who may have limited access to transportation or are not able to leave home. In these cases, deploying mobile vaccination sites, such as vans, can help increase vaccine access for those with limited mobility. Additionally, states may want to consider opening 24-hour vaccination sites to reach those who have trouble accessing or traveling to sites during normal business hours.
- → Effective and accessible messaging and communications. States should ensure all communications, particularly mobile, are accessible and that press briefings and video communications use sign language interpreters. Additionally, messaging should use plain language so that those with intellectual and

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developmental disabilities (IDD) can understand the message. Finally, states and localities should coordinate with local advocacy organizations to ensure consistent messaging and multiple outreach methods, such as leveraging hyper-local connections and translating materials into multiple languages that are culturally responsive in order to reach everyone.

- → Privacy concerns. States should balance privacy issues around vaccinations while communicating about a safe and healthy work environment. As a part of this, state and local policymakers and other decision makers should attend training to understand disability concerns related to workplace privacy, safety and health.
- → Digital divide. Because not everyone has access to broadband or the ability to access web-based services, there should not be an overreliance on websites, which may be difficult to make inclusive. For example, rural areas often have no internet or cell service.
- → Telework as an accommodation. States should understand how telework arrangements can accommodate employees who may not be hesitant to return to the workplace or be vaccinated due to a disability.
- → Vaccine procurement. Procurement policies are critical to ensure vendors are providing vaccines correctly and meeting all federal and state requirements. For example, in Maryland, emergency procurement processes were crucial to the vaccine rollout, since the deployment happened at such a rapid pace.
- → Dual diagnosis. Coordination across different state agencies is critical to better serving those who have been dually diagnosed with a mental health condition and substance use disorder.
- → Mental health crisis services. States should implement the phone number 988 as an alternative to 911 for individuals to connect to crisis services. People of color, including those with disabilities, have more interface with law enforcement, and 988 helps minimize adverse law enforcement interactions and can better address the needs of those in crisis situations.
- → Training for support staff. States need to ensure that direct support staff are trained to utilize telehealth technology as well as understand inclusive mental health policies and services.

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- → Underserved communities. Policies need to take into account populations that are often underserved when it comes to mental health support, such as those experiencing homelessness, PTSD-impacted individuals and those who face mental health conditions for the first time. These individuals may not have the same resources or information on how to access mental health services and supports. There are also people who would benefit from mental health services but do not have the financial resources to access them; policies should target the underserved groups who need resources the most.
- → Youth mental health. Mental health services should be offered to school- and transition-age youth.
 Services should be offered during the school day to make it more available to students.
- → Interagency collaboration. Promote collaboration between mental health and employment agencies at the federal, state and local levels. There needs to be ongoing communication between the employer and mental health system.
- → **Return-to-work.** Utilize the unemployment process to help with mental health supports for those returning to work.

Recommendations for Ensuring Policy Guidance Is Inclusive of Those with Disabilities

- → Construction of actual policy should include disability-related examples throughout, as well as a highlighted disability-specific section with types of disabilities discussed.
- → Overall, policy should be inclusive of people with disabilities and be as accessible as possible, but sometimes supplementary information and supports are required on an as-needed basis for those who need it. For example, if guidance is geared toward the disability community, it can be singularly focused versus more comprehensive for a broader audience.
- → Ensure that vaccination policies are being made at the highest level and that people with disabilities are involved in the decision making.
- → Vaccine policy should not discriminate between those living in facilities and those living in the community.
- → Existing mental health programs need to have additional funding, staffing and resources to reach people quickly. Many services have long wait times: for example, it may take a month or longer to get an appointment.

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- → Policies should allow for mental health supports for employees, including accommodations for those who have been affected by COVID-19.
- → Policies should include mental health resources and supports for children and young adults. These supports should be available in school settings and include the option for telehealth. In addition, effective services must involve early detection and intervention, particularly for college students who are away from home for the first time.
- → Due to the mental health impact of COVID-19, trauma-informed practices and policies will be important moving forward.

Examples of Inclusive Policies and Programs

- → Some states and localities have offered free transportation to vaccine sites. For example, the local government in Austin, TX is partnering with the transit agency to distribute vaccines.
- → Georgia made ongoing adjustments around vaccination programs to make them more accessible to people with disabilities. Early on, the state co-opted digital platforms and sites to roll out vaccines, so they adopted some of those platforms' accessibility issues. To address these issues, the state brought in accessibility committees to remove barriers to getting a vaccine from the mobile app to the physical vaccination sites.
- → New York City has vaccination sites that offer on-site accommodations to individuals with disabilities, such as quiet rooms for those who have sensory disabilities.
- → New York State is teaching mental health and wellness in grades K-12.
- → Oregon has easy-to-understand vaccine language, including for those with IDD.
- → Oregon has introduced "mental health days" for students.

Preparing for Work: Inclusive Workforce Readiness Policies Convening

The third convening, "Preparing for Work: Inclusive Workforce Readiness Policies," occurred on May 17, 2021. The convening focused on disability-inclusive workforce readiness programs and initiatives during and following the pandemic and how states and cities can support programs for individuals with disabilities through

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initiatives focused on education, apprenticeships, job training and vocational rehabilitation that facilitate full community inclusion.

Drawing from the experience of hosting the two previous stakeholder convenings, this session included only one panel to allow for more time for the panelists to share their best practices and other insights, as well as provide additional time for the breakout sessions and groups discussions. Titled "Inclusive Workforce Readiness Policies: State and Local Government Panel Discussion," it was moderated by Bobby Silverstein. (Please see <u>appendix</u> for list of panelists.)

The panel mainly focused on how states shifted to virtual programming and services during the pandemic. For example, reemployment services, such as career coaches, workshops and career fairs, all became virtual, so states and providers needed to ensure virtual tools were accessible and staff had the appropriate training to assist people with reasonable accommodations and assistive technology. During the discussion, attendees learned that the Council of State Administrators of Vocational Rehabilitation (CSAVR) worked directly with employers to help them understand accessibility, use captioning, hire American Sign Language (ASL) interpreters and encourage the use of clear masks. The organization also trained businesses on disability inclusion and intersectionality, as well as how employers can support long-haulers as they return to the workplace. In lowa, the state government launched a podcast on workforce innovations taking place around the state, such as remote apprenticeships and a collaboration between the state vocational rehabilitation agency and Department of the Blind to help connect people with disabilities to apprenticeship opportunities. A key takeaway was that the shift to virtual will ultimately allow more people to attend meetings and access services, as long as universal design is adopted in the development and use of technology and virtual platforms.

The panel was followed by a facilitated breakout group discussion to identify ways in which state and local policymakers can ensure their workforce readiness policies and initiatives are inclusive of people with disabilities.

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Key Themes and Priority Issues

Participants in the third convening identified the following key themes as priorities for consideration in state and local COVID-19 responses:

- → Hybrid work and learning environments;
- → Continuity of benefits;
- → Accessibility; and
- → Additional supports.

Hybrid Work and Learning Environments

As workplaces begin to reopen, many participants stressed the need for hybrid work and training opportunities that marry remote and in-person environments. The key is to provide employees with the flexibility they need to feel safe, while providing the structure and support of in-person work and learning. As part of this, employees still need the tools – including accessible and assistive technologies – to succeed while working remotely. Employers and training providers should ensure their web-based tools and processes are accessible to all users and that systems are in place to help employers and students adapt to a hybrid environment.

Continuity of Benefits

One of the main topics discussed was the fear of a "benefits cliff" as employees with disabilities begin to return to work. Additionally, several participants suggested states expand or continue telehealth parity, meaning that telehealth services should be provided and reimbursed at the same rate of in-person health services. This is particularly important to meet the needs of those experiencing mental health conditions due to the pandemic. Other suggestions included offering a Medicaid Buy-In option for those returning to work and expanding health care coverage and other support services across state lines.

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Accessibility

As with the other convenings, accessibility was a key priority area among participants. It is not only imperative for those with disabilities to participate in remote and hybrid work environments, but also critical to engage the population in reskilling and upskilling opportunities. Additionally, as people begin to return to the workplace, accessible transportation will become a high priority issue once again. States and employers should adopt accessibility standards to ensure their programs, policies and services are accessible to all individuals.

Additional Supports

Aside from overcoming accessibility, transportation and benefits challenges, several barriers to employment received heightened attention due to the pandemic. The need for affordable childcare and accessible mental health services were among the top barriers identified during the convening. With many schools operating virtually, parents have had to remain home to care for their children at a higher rate than previously. Additionally, the added stress of the pandemic, coupled with increased responsibilities at home, have resulted in an increase in reported mental health conditions. States will need to address both of these concerns to ensure all Americans, particularly women and people of color, can return to the workplace.

Breakout Group Discussions

For the third convening, participants were asked a series of questions to identify challenges to and solutions for effective workforce readiness programs and policies. Learning from the first two convenings, the set of questions asked during the final convening were more open-ended and provided participants more time to share their expertise and work as a group to create workforce readiness strategies. In the breakout sessions, the participants discussed:

- 1. Challenges in adopting workforce readiness policies during COVID-19;
- 2. Effective and replicable strategies;
- 3. Examples of existing workforce strategies; and
- 4. Gaps in research, services, programs and policies.

The feedback gathered during the breakout session is summarized below.

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Challenges in Adopting Workforce Readiness Policies During COVID-19

- → Returning to the workplace. A challenge or barrier that states and localities face in adopting disability inclusive workforce readiness policies during COVID-19 is returning too soon to pre-COVID work requirements. With the recent CDC mask reduction announcement, there has been a rally to get back to work, which may leave the needs of people with disabilities overlooked. As such, it is important to have balanced return-to-work policies that accommodate individuals with disabilities. Flexibility during the transition is essential, and states should consider permanently allowing telework as an option.
- → Accessibility and accommodations. Accommodation policies are a big issue for states to support hybrid and remote work, and the hybrid future of work will only make accessible technology more necessary. The technology to support accessible remote work can also be costly, so there may be an opportunity for webbased solutions. Additionally, states need to ensure their job applications and onboarding processes are accessible to individuals with disabilities. Employer training and career development programs also need to incorporate accessibility standards to ensure all employees have access to their programs.
- → Transportation barriers. A participant from Kansas discussed how the distance between home and work for many front-line workers amplified transportation issues during COVID, particularly for those who use public transportation.
- → Benefits cliff. COVID-19 caused heightened anxiety around existing employment and benefits myths and misinformation. Many people are afraid of losing benefits or programs if they go back to work. As people begin to return to work, states need to ensure there is continuity of benefits.
- → Stigma reduction. Employment is often key to recovery. States need to work with employers to reduce stigma around mental health and ensure employment is part of the recovery process.
- → Mental health. It was noted that many individuals who were experiencing mental health issues (some for the first time) may have waited until they were in crisis to get help. That often led to interactions with the police, which resulted in an increase in arrests and difficulty in attaining employment.

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- → Childcare. Access to childcare was a leading challenge during COVID-19 for parents with disabilities and parents with children with disabilities. English-as-a-second-language working parents found it particularly difficult during COVID due to a lack of support services and a rise in virtual schooling. Accessible and affordable childcare will be key for an inclusive recovery.
- → Remote work. Workforce development and career growth strategies need to be altered to support remote workers. Relevant strategies may include facilitating workforce engagement and improved employee performance reviews.
- → Leadership and culture. Strong leadership at state agencies is critical to improving cultural attitudes and ensuring the appropriate staff are in place to adopt policies that will bring about needed changes.

Effective and Replicable Strategies

- → Online accessibility and usability are key to operating in a remote or hybrid environment, many participants noted. Individuals need to have access to high-speed internet and assistive and accessible technology devices. In Maryland, many customers of the state's Division of Vocational Rehabilitation (VR) did not have their own technology to access online services, so the state purchased the technology equipment needed for customers. Additionally, VR clients may need training on how to use technology and web-based applications. States need to be cautious about sending the message that the shift to virtual could work for everyone, as some people do not thrive in such an environment. A suggestion was made to hire short-term accessibility specialists that can help address issues arising from remote work.
- → Coordination across state agencies and community partners can also help states improve service delivery and reach residents. States should use a variety of communication channels to conduct outreach to different communities. Coordination of resources and programs among veterans' offices, mental health agencies and VR is also critical to ensuring all groups' needs are met.
- → By taking measures to become model employers of people with disabilities (i.e., States as Model Employers, or SAME), states could encourage more private sector employers to emulate the state's actions around disability hiring and workplace accessibility and inclusion. Adopting inclusive procurement policies and certifications to support credentialing accessibility professionals was one example of a SAME

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policy discussed during the breakout session. Some resources mentioned were Disability:IN's Procurement Toolkit, NASCIO's Policy Driven Adoption of Accessibility and IAAP certifications.

- → Diversity & inclusion should be integrated into workforce development systems. State workforce development agencies and partners should convert learning and continuing education to digital training that is accessible for all, including traditional in-person training and professional development.
- → Engaging people through telemental health opportunities should continue after the pandemic, along with hybrid models, though in-person options should still exist for those who need them. Continued flexibility around Medicaid billing will help provide people with options.

Examples of Existing Workforce Readiness Strategies

- → NASCA members have observed higher outcomes as a result of hybrid and remote work models. For example, Maine and Virginia now offer career exploration workshops, virtual job fairs and virtual job shadows, which are inexpensive and effective.
- → The Texas Workforce Commission offers a Summer Earn & Learn program that allows real life job training to create pathways to employment for people with disabilities.
- → Paralyzed Veterans of America's career program started zoom conversations called Veterans Connect Live – to discuss employment strategies and employer programs. This enabled group participants to exchange Q&As, share information and network virtually.
- → Georgia Tech used state funding to provide internships to students who had previously arranged internships canceled due to the pandemic.
- → States like Ohio have adopted practices to become model employers of apprentices, which is likely to continue to ramp up following the pandemic.
- → Tennessee is focused on utilizing pre-employment technology and platforms to reengage job seekers.
- → Due to the pandemic, RespectAbility's apprenticeship program went virtual and nation-wide, which opened up the applicant pool to a larger group and allowed people with disabilities from outside the DC area to participate.

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→ Dell Computer's internship program for individuals on the autism spectrum also became virtual and had over 250 applicants from across the county.

Gaps in Research, Services, Programs and Policies

- → States should consider adopting a Medicaid Buy-In program for those with disabilities who get a job so they do not lose their benefits.
- → States must ensure mental health considerations are part of policymaking conversations, and train employment providers on how best to work with people with mental health conditions.
- → States should consider working with community colleges to fill in the gaps for individuals with disabilities who had internships or other workforce readiness programs interrupted.
- → People may need additional support navigating the benefits available to them, such as Social Security and Ticket to Work programs.
- → For individuals with disabilities working in one state and living in another, there is a need for continuity and reciprocity when it comes to benefits and other services across state lines.

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Conclusion

The COVID-19 Policy Collaborative for an Inclusive Recovery yielded robust discussions and practical recommendations for ensuring state and local policies developed in response to the COVID-19 pandemic address the needs of people with disabilities. Convening participants and panelists offered a range of valuable suggestions and solutions, ranging from accommodating the mental health needs of workers during the pandemic, to facilitating accessible and inclusive telework opportunities.

Throughout the series of convenings, the importance of universal design and policies and practices remained an important theme. This idea should be given attention particularly when considering the acceleration of certain trends arising from the pandemic, such as remote learning and work opportunities, health care and transportation. Universal design can help states provide the flexibility to meet individual needs, which in turn will result in more effective services, supports and outcomes. State and local policymakers have an opportunity to champion disability inclusion and ensure that disability is part of all inclusion efforts.

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Appendix

Agenda: Return to the Workplace: Inclusive Safety and Health Policies

Monday, February 22, 2021 from 1:00 p.m. - 4:00 p.m. ET

- 1:00 p.m. 1:10 p.m. Welcoming Remarks
 - Jennifer Sheehy, Deputy Assistant Secretary, Office of Disability Employment Policy,
 - U.S. Department of Labor
- 1:10p.m. 1:25 p.m. COVID-19: Impact on the Employment of People with Disabilities

 Andrew Houtenville, Research Director, Institute on Disability, University of New
 - Hampshire
- 1:25 p.m. 1:50 p.m. COVID-19 Response: Federal Policy Overview and Panel Discussion
 - Moderator: John Tambornino, Senior Advisor, Office of Disability Employment Policy,
 - U.S. Department of Labor
 - Panelists: Chip Hughes, Deputy Assistant Secretary for Pandemic and Emergency
 - Response, Occupational Safety and Health Administration, U.S. Department of Labor;
 - and Sharon Rennert, Senior Attorney Advisor, ADA/GINA Division, Office of Legal
 - Counsel, U.S. Equal Employment Opportunity Commission
- 1:50 p.m. 2:35 p.m. COVID-19 Response: State Policy Overview and Panel Discussion
 - Moderator: Bobby Silverstein, Legislative and Policy Counsel, SEED
 - Panelists: Scott Beutel, Assistant Commissioner, External Relations Minnesota
 - Department of Human Rights; Nicole Blissenbach, Deputy Commissioner, Minnesota
 - Department of Labor and Industry; Franklin Plaistowe, Assistant Director, Washington
 - Office of Financial Management; Alejandro Sanchez, Special Assistant, Office of
 - Governor Jay Inslee; and McKenzie Wilson, Deputy Chief Counsel, Office of Governor
 - Phil Murphy; and Cory Worden, Safety Advisor, Houston Health Department, City of
 - Houston

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2:35 p.m. - 3:25 p.m. Interactive Breakout Group Exercise

Facilitated by SEED Partners (Board of Hispanic Caucus Chairs, Council of State Governments, Council of State Governments West, National Conference of State Legislatures, National Governors Association, U.S. Conference of Mayors, Western Governors' Association, Women In Government)

3:25 p.m. – 3:55 p.m. Report Outs and Group Discussion

3:55 p.m. - 4:00 p.m. Next Steps and Adjournment

Agenda: Workforce Retention: Inclusive Mental Health and Vaccination Policies

Monday, April 19, 2021 – 1:00 p.m. to 4:00 p.m. ET

1:00 p.m. – 1:10 p.m. Welcoming Remarks

Jennifer Sheehy, Deputy Assistant Secretary, Office of Disability Employment Policy,

U.S. Department of Labor

1:10 p.m. – 1:40 p.m. Inclusive Vaccination Policies: Federal Policy Overview and State and Local Government Panel Discussion

Moderator: Bobby Silverstein, Legislative and Policy Counsel, SEED;

Panelists: Sharon Rennert, Senior Attorney Advisor, ADA/GINA Division, Office of Legal Counsel, U.S. Equal Employment Opportunity Commission; Adam Romero, Deputy Director of Executive Programs, California Department of Fair Employment and Housing; David D'Arcangelo, Commissioner for the Massachusetts Commission for the Blind; and Jonathan Novick, Outreach Manager, New York City Mayor's Office on People with Disabilities

1:40 p.m. - 1:50 p.m. Q and A

1:50 p.m. – 2:20 p.m. Inclusive Mental Health Policies: State Policy Overview and Panel Discussion

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Moderator: Lou Orslene, Supervisory Policy Advisor, Employer and Workplace Policy, U.S. Department of Labor

Panelists: Meighan Haupt, Chief of Staff, National Association of State Mental Health Programs; Senator Anthony Bucco, District 25, New Jersey State Senate; and Jacob C. Warren, Associate Dean for Diversity, Equity and Inclusion, Mercer University School of Medicine

2:20 p.m. - 2:30 p.m. Q and A

2:30 p.m. - 3:15 p.m. Breakout Group Exercise

Facilitated by SEED Partners (Board of Hispanic Caucus Chairs, Council of State Governments, Council of State Governments West, National Conference of State Legislatures, National Governors Association, U.S. Conference of Mayors, Western Governors' Association, Women In Government)

3:15 p.m. – 3:55 p.m. Report Outs and Group Discussion

Moderator: Nadia Mossburg, Senior Policy Advisor, Office of Disability Employment

Policy, U.S. Department of Labor

3:55 p.m. – 4:00 p.m. Next Steps and Adjournment

Katia Albanese, Project Director, SEED

Agenda: Preparing for Work: Inclusive Workforce Readiness Policies

Monday, May 17, 2021 1:00 p.m. to 4:00 p.m. ET

1:05 p.m. – 1:15 p.m. Welcoming Remarks

Jennifer Sheehy, Deputy Assistant Secretary, Office of Disability Employment Policy,

U.S. Department of Labor

1:15 p.m. – 2:05 p.m. Inclusive Workforce Readiness Policies: State Policy Overview and Panel Discussion

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Moderator: Bobby Silverstein, Legislative and Policy Counsel, SEED Panelists: Julie Squire, Vice President of Policy and General Counsel, National Association of State Workforce Agencies (NASWA); Kathy West-Evans, Director of Business Relations, Council of State Administrators of Vocational Rehabilitation (CSAVR); and Ryan West, Deputy Director, Iowa Workforce Development

2:05 p.m. - 2:30 p.m. Q and A

2:30 p.m. – 3:15 p.m. Breakout Group Exercise

Facilitated by SEED Partners (Board of Hispanic Caucus Chairs, Council of State Governments, Council of State Governments West, National Conference of State Legislatures, National Governors Association, U.S. Conference of Mayors, Western Governors' Association, Women In Government)

3:15 p.m. - 3:35 p.m. Report Outs

3:35 p.m. – 3:55 p.m. Group Discussion

Moderator: Nadia Mossburg, Senior Policy Advisor, Office of Disability Employment Policy, U.S. Department of Labor

3:55 p.m. – 4:00 p.m. Next Steps & Adjournment

Katia Albanese, Project Director, SEED

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Participant List

ODEP Staff

- Akinyemi Banjo
- Amy Fong
- Jennifer Sheehy
- John Tambornino
- Kirk Lew
- Louis Orslene
- Margaret Jemmott
- Michael Reardon
- Nadia Mossburg
- Nakisha Pugh
- Rhonda Basha
- Steven Nissen

Speakers/Presenters

- Adam Romero, California Department of Fair Employment and Housing
- Alejandro Sanchez, Office of Washington Governor Jay Inslee
- Andrew Houtenville, University of New Hampshire Institute on Disability
- Sen. Anthony Bucco, New Jersey State Senate
- Chip Hughes, DOL/OSHA
- Cory Worden, Houston Health Department, City of Houston
- David D'Arcangelo, Massachusetts Commission for the Blind
- Franklin Plaistowe, Washington Office of Financial Management
- Jacob C. Warren, Mercer University School of Medicine
- Jonathan Novick, New York City Mayor's Office on People with Disabilities
- Julie Squire, National Association of State Workforce Agencies
- Kathy West-Evans, Council of State Administrators of Vocational Rehabilitation

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- McKenzie Wilson, Office of New Jersey Governor Phil Murphy
- Meighan Haupt, National Association of State Mental Health Programs
- Nicole Blissenbach, Minnesota Department of Labor and Industry
- Ryan West, Iowa Workforce Development
- Scott Beutel, Minnesota Department of Human Rights
- Sharon Rennert, EEOC

SEED Team and Partners

- Addy Jimenez, CSG West
- Adrian Alvarado, CSG
- Bobby Silverstein, PPSV
- Bill Swinford, CSG
- Caitlin Hochul, Concepts, Inc.
- Christina Gordley, CSG
- Dexter Horne, CSG
- Elise Gurney, CSG
- Heather Shaffer, CSG
- Hope Adler, Concepts, Inc.
- Jennifer Schanze, CSG
- Jim Reed, NCSL
- Jonathan Lennartz, CSG
- Josh Cunningham, NCSL
- Katia Albanese, Concepts, Inc.
- Katie Alexander, CSG
- Kehl Mackesey, PPSV
- Kevin Verge, USCM
- Lauren Cloward, WGA
- Loren Shimanek, NGA
- Lucy Gettman, WIG

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- Luke Martel, NCSL
- Madelyn Rahn, NGA
- Martha Castaneda, CSG West
- Maura LaGue, WIG
- Megan Donnelly, WIG
- Megan Judge, USCM
- Rachael Stephens, NGA
- Rachel McGreevy, Concepts, Inc.
- Saige Draeger, NCSL
- Sarah Needler, CSG
- Sarah Saenz, BHCC
- Sarah Scanlon, Concepts, Inc.
- Shilpa Patel, CSG
- Suzanne Hultin, NCSL
- Sydney Geiger, CSG
- Sydney Wilson, PPSV
- Tahra Johnson, NCSL
- Trent Patrick, CSG

Attendees

- Aaron Bangor, Texas Governor's Committee on People with Disabilities
- Abby Cooper, Kennedy Douglas Consulting
- Ahmad Ramadan, USDOL Office of Congressional and Intergovernmental Affairs
- Alex Milliken, Maryland Governor's Office
- Allison Nichol, Epilepsy Foundation of America
- Amber Burke, Connecticut Department of Developmental Services
- Brad Fain, Georgia Tech Research Institute Center for Advanced Communications Policy
- Brenda Boten, Iowa Division Administrator for Administrative Services
- Brian Gresko, Connecticut Department of Developmental Services

- Bryan Klipfel, North Dakota Workforce Safety and Insurance
- Caitlyn Jekel, Washington State Labor Council
- Carrie Brna, Tennessee Department of Intellectual and Developmental Disabilities
- Chanda Hermanson, Montana Department of Public Health and Human Services
- Charyl Yarbrough, New Jersey Department of Labor
- Christina McGleam, City of Chicago
- Cindy Orndorff, Sorenson Community Interpreting Service
- Dahlia Shaewitz, Institute for Educational Leadership
- David Leon, Virginia Department for Aging and Rehabilitative Services
- David Mitchell, Iowa Vocational Rehabilitation Services
- David Stapleton, Tree House Economics
- Deandra Howard, University of Kentucky
- Debbie Plotnick, Mental Health America
- Diana Elliott, Urban Institute
- Douglas Kruse, Rutgers
- Elizabeth Gordon, Washington Governor's Committee on Disability and Employment Issues
- Ellice Switzer, Cornell University
- Genna Schofield, National Association of State Mental Health Program Directors
- Gina Livermore, Mathematica Center for Studying Disability Policy
- Helen Carpenter, Colorado Workforce Development Programs
- Jackie Pogue, Westat
- Jackie Taylor, South Carolina Department of Employment and Workforce
- Jade Gingerich, Maryland Department of Disabilities
- Jaimee Bullock, Iowa Workforce Development
- Jake Altman, Illinois Department of Central Management Services, Bureau of Personnel
- Jamila Taylor, The Century Foundation
- Jason Snead, Arizona Department of Economic Security
- Jennifer Brooks, Syracuse University Maxwell School of Citizenship and Public Affairs
- Jennifer Mathis, Bazelon Center for Mental Health Law

- Jody Boone, Maryland Division of Rehabilitation Services
- Johnny Collett, University of Kentucky
- Jon Slifka, Connecticut Department of Aging and Disability Services
- Julie Christensen, Association of People Supporting Employment First
- Julio Rodriguez, Illinois Department of Commerce and Economic Opportunity
- Karen Carroll, New Jersey Department of Labor
- Kat Plaza, Colorado Urban Workforce Alliance
- Kathy Sheppard-Jones, University of Kentucky Human Development Institute
- Kay Kammen, Minnesota Department of Employment and Economic Development
- Kelly Buckland, National Council on Independent Living
- Kelly Kuhns, TennCare
- Kevin Parker, Minnesota Sen. Hoffman
- Kimberly Porsovigan, Rush University
- Kleo King, New York City Mayor's Office on Disability
- Kody Olson, Minnesota Council on Disability
- Kristin Patterson, Maryland Department of Labor, Licensing and Regulation
- Kristin Vandagriff, Alaska Governor's Council on Disabilities and Special Education
- Laura Bray, Pennsylvania State University
- Leslie Dawson, Alabama Department of Rehabilitation Services
- Leslie Scott, National Association of State Personnel Executives
- Linnea Forsythe, New Mexico Governor's Commission on Disability
- Lisa McNiven, New Mexico Governor's Commission on Disability
- Lori Norton, University of Kentucky
- Louise Larkin, Pennsylvania Rep. Dan Miller
- Lydia X. Z. Brown, Center for Democracy and Technology
- Lyssette Galvan, Texas House of Representatives
- Mark Mahoney, Illinois Department of Central Management Services
- Martha Gabehart, Kansas Commission on Disability Concerns
- Martha Jackson, New York City Mayor's Office for People with Disabilities

- Martin Zaugg, Connecticut Department of Developmental Services
- Matt Scherer, Center for Democracy and Technology
- Matthew Saleh, Cornell Yang-Tan Institute on Employment and Disability
- Melanie Walter, City of Houston
- Michelle Yin, Northwestern University
- Nancy Scott, Kansas Health Policy Authority
- Nelly Nieblas, RespecAbility
- Pam Goins, National Association of State Chief Administrators
- Phil Davis, North Dakota Workforce Services
- Philip Kahn-Pauli, Respectability
- Richard Cesar, Office of Congressional and Intergovernmental Affairs, U.S. Department of Labor
- Rie Kennedy-Lazotte, National Association of State Directors of Developmental Disabilities Services
- Rivka Liss-Levinson, Center for State and Local Government Excellence at ICMA-RC
- Robin Throlson, North Dakota Division of Vocational Rehabilitation
- Shadaya Bennett, New Jersey Asmbw. Speight
- Shannon Lewis, Montana State Workforce Innovation Board
- Stefan Malhotra, City of Houston
- Steve Wooderson, CSAVR
- Susan Prokop, Paralyzed Veterans of America
- Susanne Bruyere, Cornell Yang-Tan Institute on Employment and Disability
- Teresa Bradenburg, University of Kentucky
- Tracey Cunningham Martines, Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals
- Wendy Strobel Gower, Cornell Yang-Tan Institute on Employment and Disability
- Zaida Ricker, Ridge Policy Group
- Zoltan Boka, Respectability

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Resources Shared

- Apprenticeships: A Pipeline for an Inclusive Recovery (NCSL)
- COVID-19 Health Policy Snapshots (NCSL)
- COVID-19 Report Series (NCSL)
- COVID-19: State Health Actions Webpage (NCSL)
- CSG State Recovery Website
- Delivering Workforce System Employment and Training Services Remotely (NGA)
- Disability:IN Procurement Toolkit
- Georgia Tech Wireless RERC
- Governor's Role in Promoting Disability Employment in COVID-19 Recovery Strategies (NGA)
- How States Can Meet Mental Health Needs During the Pandemic and Beyond (Commonwealth Fund)
- IAAP certifications
- Iowa's Mission: Employable
- Minnesota CareerForce
- Minnesota' EO 20-54
- National Supported Employment Demonstration (Westat)
- New Legal Guidance and Resources on Access to COVID-19 Vaccines for People with Disabilities and Older Adults (HHS)
- Our American States Podcast (NCSL)
- Policy Driven Adoption of Accessibility (NASCIO)
- Roadmap for Workforce Recovery (NGA)
- State Action on Coronavirus (COVID-19) (NCSL)
- State of the Workforce Report (NASWA)
- States Offer Transportation to Increase Access to Vaccinations (CSG)
- Strategies to Improve Equitable Vaccine Access for Older Adults and People With Disabilities (ACL)
- Texas EARN and LEARN
- Web Accessibility in the States (CSG)

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White House Virtual Forum on Breaking Down Barriers for People Who Have Challenges Accessing
 COVID-19 Vaccination