

SUPPORTED EMPLOYMENT (SE) FIDELITY REPORT

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To: Joyce Behrens, General Manager
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AHCCCS Fidelity Reviewers

Method

On February 7, 8, 13, and 14, 2017, T.J. Eggsware and Karen Voyer-Caravona completed a review of the WEDCO Employment Center's Supported Employment (SE) program. This review is intended to provide specific feedback in the development of your agency's SE services, in an effort to improve the overall quality of behavioral health services in Maricopa County. Supported Employment refers specifically to the evidence-based practice (EBP) of helping SMI members find and keep competitive jobs in the community based on their individual preferences, not those set aside for people with disabilities. Services are reviewed starting with the time an SMI participating member indicates an interest in obtaining competitive employment, and the review process continues through the provision of follow along supports for people who obtain competitive employment. In order to effectively review Supported Employment services in Maricopa County, the review process includes evaluating the working collaboration between each Supported Employment provider and referring clinics with whom they work to provide services. For the purposes of this review at WEDCO Employment Center, the referring clinics included were the Southwest Network Bethany Village and Garden Lakes.

WEDCO Employment Center partners with the Regional Behavioral Health Authority (RBHA) for Maricopa County, the provider network organizations and the Arizona Department of Economic Security Rehabilitation Services Administration (RSA) to provide employment related services, including: Work Adjustment Training (WAT), Supported Employment, and classroom training (e.g., customer service representative, call center, clerical and computer technology). Per WEDCO staff report, Senior Employment Specialists (SES) work with individuals in the SE program, and Employment Specialists provide other services (e.g., WAT, computer skills training). SMI participating members are referred for services through clinic staff and RSA/Vocational Rehabilitation (VR). Data originally provided by the agency did not include SMI members referred for SE services through RSA/VR. After this was identified during the course of the review, the agency was afforded the opportunity to modify the data provided, and the reviewers selected additional records to gather information about SMI members referred for SE services through RSA/VR; 13 total records were reviewed.

The individuals served through the agency are referred to as *clients* or *consumers*, but for the purpose of this report, and for consistency across fidelity reviews, the term “member” will be used.

During the site visit, reviewers participated in the following activities:

- Group interview with WEDCO’s General Manager and the Director of Employer Outreach and Community Resources;
- Group interview with two members receiving WEDCO SE services;
- Group interview with three WEDCO Senior Employment Specialists;
- Observation of a SE vocational unit meeting on February 8, 2017;
- Review of 13 member records, including co-served WEDCO members of the Southwest Network Bethany Village and Garden Lakes clinics;
- Observation of a coordination of care meeting at the Southwest Network Garden Lakes clinic on February 14, 2017;
- Individual interviews with two Rehabilitation Specialists (RS) at Southwest Network Bethany Village clinic;
- Individual interview with a Southwest Network Garden Lakes clinic RS;
- Review of agency materials and documents, including: Vocational Profile, Vocational Profile Amendment Form, Vocational Profile – (Job Start), Vocational Profile – (Job End), Individual Employment Plan, WEDCO Employment Center Notice of Action letter, blank Employer Contact and Call Log form, WEDCO Employment Center Master Application, brochures, the agency website and WEDCO’s Policy & Procedure *Member Engagement, Outreach and Re-Engagement ENGAGEMENT*.

The review was conducted using the Substance Abuse and Mental Health Services Administration (SAMHSA) SE Fidelity Scale. This scale assesses how close in implementation a team is to the Supported Employment (SE) model using specific observational criteria. It is a 15-item scale that assesses the degree of fidelity to the SE model along 3 dimensions: Staffing, Organization and Services. The SE Fidelity Scale has 15 program-specific items. Each item is rated on a 5-point scale, ranging from 1 (meaning *not implemented*) to 5 (meaning *fully implemented*).

The SE Fidelity Scale was completed following the visit. A copy of the completed scale with comments is attached as part of this report.

Summary & Key Recommendations

The agency demonstrated strengths in the following program areas:

- The members interviewed reported satisfaction with the employment support services through WEDCO, and they report their assigned SES supports their individual employment search.
- Vocational profiles are used, and they are located in the member records. Some profiles were amended based on changes to member goals or status. Employment goals listed on vocational profiles reviewed aligned with the job search.
- SESs provide most services in the community. A review of selected agency member records found that most member services are delivered in the community, at an approximate ratio consistent with that reported by agency staff.
- SESs assist members in locating new jobs when jobs end, or when members express an interest in changing positions.
- The program engages members in benefit planning discussions; Disability Benefits 101 (DB101) is utilized with evidence in records that members are introduced to the resource.

The following are some areas that will benefit from focused quality improvement:

- The agency and system partners should work collaboratively to improve integration. The SESs should attend the full mental health treatment team meetings with all staff and have shared decision making regarding all members on the team. SESs should have the opportunity to suggest employment for those members that may have not been referred for employment services, to learn about how the team addresses challenges, and to learn about members who may consider employment in the future.
- System partners should collaborate to ensure members are engaged to consider employment, and that members are not streamed, diverted, or delayed in receiving support to seek employment.
- First face-to-face employer contacts should be individualized to meet the need and goals of each member, and can include: job interviews, job site tours to learn about a particular industry, interviews of industry employers to learn about skills and qualities desired in a candidate, and job fairs. Job development without the member present can occur, but also seek to support member face-to-face interactions with a diverse pool of potential employers.
- WEDCO should research training options that will help SES staff conduct job development in the community. Increase individual employer contacts as part of job development activities and community-based follow-along supports. If new SESs do not have prior job development experience, consider shadowing the SE program leader or other more experienced SESs. Also, the use of a more detailed employer contact log may aide in this effort to track the reason for contact, person responsible for hiring, information learned about the employer, hiring preferences, etc.
- Consider developing a brochure dedicated only to SE rather than the current *Supported Employment Services* brochure that also includes other services (e.g., WAT, computer skills training). Consider including member employment data on the agency website, including percent of members competitively employed, which would not include WAT or positions at employers with positions set aside for individuals with disabilities. Consider including testimonials from employed members in agency marketing materials, agency website, etc., to promote the benefits of competitive employment.
- Consider classifying the ESs with a distinct title, to clearly separate them from true services provided within the evidence based practice of supported employment. Identifying staff as SESs and ESs provides a minor distinction, yet in records reviewed at clinics, ESs were classified with other titles (e.g., Job Developer) by clinic staff, and possibly by SESs during interactions with clinic staff.

SE FIDELITY SCALE

Item #	Item	Rating	Rating Rationale	Recommendations
Staffing				
1	Caseload:	1 – 5 (5)	Based on caseload data provided, SESs have caseloads ranging from 14 to 26. The ratio of SE members to SES staff is about 19:1, which includes SMI members, and other individuals who are not SMI but have other health issues or physical disabilities.	<ul style="list-style-type: none"> Although caseloads are within fidelity limits, SE is designed specifically for SMI individuals. As the member roster grows, the agency should consider separating members with other disabilities from the program.
2	Vocational Services staff:	1 – 5 (5)	WEDCO SESs provide only vocational services, including: conducting intakes using the Vocational Profile, assisting with job searches, preparing for interviews, job coaching, and follow along support. They do not teach classes, run groups, or engage in any traditional case management activities.	
3	Vocational generalists:	1 – 5 (4)	<p>Per WEDCO staff report, Senior Employment Specialists (SES) work with individuals in the SE program, and Employment Specialists provide other services (e.g., WAT, computer skills training). SESs reportedly conduct intakes, engagement, assessment, benefits counseling, job placement, job coaching and following along supports.</p> <p>Based on records reviewed, ES staff appear to also provide coverage, or job development and placement services to SE members. For example, in one record reviewed SES staff referred to the ES staff as a cohort, and emails indicated a member was co-served by the SES and ES, with the ES focusing on job development and placement support. Most direct service notes over a period of three months reflected services by the ES, not the SES. The Director of Employer Outreach and Community Resources seems to primarily be responsible for marketing and building</p>	<ul style="list-style-type: none"> Staff in the SE program (i.e., SESs) should provide SE services to members, including providing coverage for other SESs. Avoid separating SE services (e.g., job development) among other agency staff such as those currently identified as ESs. Each SES should carry out all phases of vocational service. If some staff are stronger in one area than another, provide cross-training thru shadowing other staff or the SE supervisor. SESs should have time in their schedules for job development activities, including: preparation time prior to meeting with employers, meeting directly with employers throughout the community, and to keep in touch with employers rather than having separate agency staff carry out that function.

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			relationships with employers. SESs report they seek opportunities to build relationships with employers, but it does not appear that is a primary element of their role. SES job development activities could not be verified due to lack of job development or detailed employer contact logs.	
Organization				
1	Integration of rehabilitation with mental health treatment:	1 – 5 (2)	<p>One of nine SESs is co-located at one clinic, and works with three to four teams at that location. Per report, that SES attends weekly meetings with each team. However, WEDCO staff reported resistance to their participation in integrated meetings at some clinics where the agency is not co-located. The majority of members (about 89%) are served by SESs that are not co-located. Most WEDCO SESs are not assigned to clinical teams, do not attend weekly treatment team meetings, and usually meet with the full treatment teams about monthly. The SESs do not always attend full clinical team meetings when all members are discussed. During the coordination of care meeting observed, the SES discussed members served, but the focus of the meeting was on staffing those specific members, not functioning as a fully integrated team. Email, phone, and face-to-face coordination with clinic RSs occurs at varying intervals depending on the SES and clinic staff based on records reviewed, but not several times per week.</p> <p>Clinic staff provided mixed reports regarding coordination with WEDCO staff. One clinic staff interviewed reported that they received WEDCO monthly summaries or progress notes, that WEDCO staff recently participated in a clinic team meeting, and that WEDCO staff intended to meet more regularly (i.e., quarterly) with the full team.</p>	<ul style="list-style-type: none"> • SESs that are not co-located should increase direct contact with clinic staff, including attending integrated team meetings with assigned teams, and multiple contacts with clinic staff weekly. • System partners should collaborate to resolve barriers to full integration. SESs should attend weekly treatment team meetings with full teams and for the entire duration of the meetings. Fully integrated meetings should allow SESs opportunities to receive timely information that could affect member employment, increase knowledge about mental health and substance abuse, and to help clinical teams think about employment for members who have not yet been referred for services. • If an integrated file is not possible, system partners should work collaboratively to allow for easier sharing of information between agencies co-serving members. SE staff should have access to clinical records. In the meantime, SE program staff should ensure vocational profiles and employment plans, at a minimum, are shared with clinic staff.

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			<p>Other staff at the same clinic reported there was not communication from WEDCO staff, and they had not attended clinic team meetings. At one clinic, WEDCO information (e.g., monthly summaries, Vocational Profiles) was not located in three of four records reviewed, but the documents were located in clinic files at the second location. Clinic plans were not located in WEDCO files for SMI members directly referred by VR.</p>	
2	Vocational Unit:	1 – 5 (4)	<p>The SESs are all supervised by the agency’s General Manager, and they meet weekly with the supervisor, and the Director of Employer Outreach and Community Resources to discuss new opportunities, share information about employers and job leads, discuss obstacles, celebrate successes, and provide training (e.g., using DB101, MMIC support, VR). During the vocational unit meeting observed, SESs discussed recently employed members, and challenges with placing select members. The Director of Employer Outreach and Community Resources shared information about companies with open positions, and staff discussed an opportunity through RSA/VR for members who want to pursue a small business venture.</p> <p>Per report, the SESs provide cross-coverage during vacation or if an SES calls out ill. They usually know their appointments for the day and inform staff to arrange for coverage, but they do not use a shared calendar. Also, ES staff may provide coverage if a SES is not available. Based on records reviewed, the ESs provided ongoing services to some members for a month or more.</p>	<ul style="list-style-type: none"> • Ensure all SE services are conducted by dedicated SE staff for members in the SE program. • SESs should provide cross-coverage for each other to prevent potential gaps in services in the event an SES is unavailable. Additionally, it may be useful to have a “second set of eyes” on the member that could lead to identification of strengths or areas that need further development. SESs can assist one another with job coaching, job development, supporting members for interviews, etc. A shared calendar to track activities may aide in facilitation of coverage due to illness or vacation.
3	Zero-exclusion criteria:	1 – 5 (4)	WEDCO leadership and SESs report that wanting to work is the only criteria to be eligible to receive SE	<ul style="list-style-type: none"> • WEDCO and the RBHA should coordinate

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			<p>services.</p> <p>Clinic staff reported the only criteria for SE was if members express an interest in employment, and one reported all members are encouraged to do an activity such as work, attend groups, or participate in a day program. In general, when a member informs the clinic CM they are interested in employment, then the RS meets with the member, completes the Vocational Activity Profile (if not already completed), and discusses SE provider options. Based on records reviewed, some members who expressed an interest in employment were invited to attend groups facilitated by clinic staff, as an adjunct activity. In one case, a member was encouraged by clinic RS staff to participate in WAT as a step to ensure the member was prepared for competitive employment, even though competitive employment was the preference of the member. It did not appear the SES engaged the member to consider competitive employment rather than WAT.</p>	<p>efforts to educate clinical teams about the evidence based practice of SE. It may be helpful to engage members who are currently working and benefitting from SE to assist in these efforts, as examples of positive outcomes. Ensure members are actively engaged for employment.</p> <ul style="list-style-type: none"> Engage members in SE versus WAT, other training programs, or pre-vocational clinic based groups.
Services				
1	Ongoing, work – based vocational assessment:	1 – 5 (4)	Per report, WEDCO SESs complete the Vocational Profile at intake, and other assessments or pre-vocational activities are not required. WEDCO staff report some members were referred to WEDCO for WAT, and some referred for SE elected to participate in WAT. Based on staff and the two members interviewed, members are not steered toward WAT. However, there was evidence in records that at least one member was encouraged to participate in WAT prior to seeking competitive employment.	<ul style="list-style-type: none"> WEDCO should continue efforts to use the Vocational Profile as a guide to assist members in their job search. As new information is learned, add to the Vocational Profile. Facilitate member interactions with employers so that SESs can observe and provide feedback. System partners should coordinate efforts to support members’ interest in

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			<p>The SESs assist primarily with online applications, rather than focusing on interacting with members as they make contact with potential employers, so they can observe and provide feedback. Some Vocational Profiles lacked detail, and it was not clear if they were used as a living document, with updates as changes occurred or new information was learned. Although, job start forms were located when members gained employment. Vocational profiles were not located in WEDCO files for SMI members directly referred by VR rather than clinic staff.</p>	<p>competitive employment rather than encouraging a reliance of WAT.</p>
2	Rapid search for competitive jobs:	1 – 5 (3)	<p>Though WEDCO staff report there is a process for members to self-refer for SE services, most referrals initiate directly from clinic staff. Based on interviews and records reviewed, when members report a desire to work to clinic CM staff, they are then referred to the RS who makes the referral to WEDCO. One clinic staff reported this process can occur in about a week. However, the report was not supported in a corresponding records reviewed at the same clinic, where four months lapsed between a member informing the CM of their interest in employment (April 2016) and the member's intake at WEDCO (August 2016).</p> <p><i>Employer Contact and Call Logs</i> were found in member records, but they lacked adequate detail to determine whether or not the first employer contact was face-to-face. WEDCO staff interviewed reported first face-to-face contact with an employer typically occurs about 30 – 45 days after intake. Records reviewed reflected that SESs often defaulted back to online searches and applications after making the first face-to-face contact with an</p>	<ul style="list-style-type: none"> • Continue to work on streamlining the referral process to support the rapid search for competitive employment. Preferably, first face-to-face contact with a competitive employer occurs within 30 days of when a member first expresses an interest in employment. It may be possible to eliminate up to a week delay in referral by allowing/requiring the first staff (e.g., CM or RS) who members voice an employment goal to make the referral for SE, or not requiring the RS to meet with the member prior to SE referral. • Identify and explore solutions to limit redundant processes completed at the clinic and SE agency. For example, examine the benefit of clinic staff completing the Vocational Activity Profile and SE agency staff completing an entirely new Vocational Profile after SE agency intake. Determine if one Vocational Profile can be shared so the member is not compelled to complete the

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			<p>employer. The reviewers also identified instances of first face-to-face contacts with employers known to offer jobs carved out specifically for people with disabilities.</p> <p>Per data provided, about 7% of members listed a non-competitive employer as the first employer contact, and an additional approximately 42% of members referred in the last year had no first face-to-face contact with an employer noted at all. Most of the members referred over the months of October through December 2016 did not have any face-to-face contact with an employer noted.</p>	<p>process with two staff, at different agencies.</p> <ul style="list-style-type: none"> Decrease the reliance on online searches; focus efforts on meeting face-to-face to develop relationships with employers. Job development without the member present can occur; also seek to support member face-to-face interactions with a diverse pool of potential employers.
3	Individualized job search:	1 – 5 (5)	WEDCO staff reported, and the two members interviewed confirmed, that members determine what jobs are pursued. A review of selected member records indicates that WEDCO SESs assist members in conducting individualized job searches, but ESs also provide this service to some members. Though clinic staff reported Vocational Activity Profiles are completed, they were not located in all clinic files reviewed, and specific vocational goals were not always listed on clinic plans. WEDCO staff work with members to identify short and long term vocational interests at intake using the Vocational Profile.	
4	Diversity of jobs developed:	1 – 5 (4)	Employer contact logs with limited detail were present in member records, but case notes at WEDCO included more detail on specific job search activities. However, few examples of job development activities in the community were noted in member records reviewed. Though WEDCO staff reported they engage in job development activities, staff seems to rely on online applications as primary elements of the employment search. However, the agency recently	<ul style="list-style-type: none"> Develop employment opportunities with a diverse pool of employers. SESs should conduct job development activities in the community to develop relationships and identify job opportunities. Meeting with members repeatedly in the same restaurant for online job searches is not the same as meeting with employers directly. SESs should be making unique contacts

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			<p>collaborated with VR to support members and employer interactions during a reverse job fair, where employers approached individual members seeking employment, rather than a traditional job fair where candidates wait to speak with employers.</p> <p>Per WEDCO data provided, some employed members work with the same employer, including nine members at a non-competitive employer. This resulted in roughly 86% diversity in employers. There was less diversity in job type, with about 77% of members in diverse positions.</p>	<p>with new employers on a regular basis and build relationships over the course of multiple visits, treating the employer as a potential customer.</p> <ul style="list-style-type: none"> The SE program leader should track job starts in order to review job types for diversity, and to determine if any SESs are having difficulty connecting members with a diverse pool of employers.
5	Permanence of jobs developed:	1 – 5 (4)	<p>The majority of employed WEDCO members appear to be employed in competitive and permanent jobs. Per report, volunteer activities may be discussed, but as an adjunct activity to a competitive job search and seasonal or time-limited options are explored if it is the preference of the member.</p> <p>Data provided showed that approximately 85% of employed members are in permanent, competitive positions. Approximately 15% of the jobs are carve-out positions at an employer that is not considered competitive. WEDCO staff felt that the company was a competitive employer. However, the company’s website clearly notes that jobs are for persons with disabilities. Also, reviewers noted a form from this employer in a WEDCO file that requested information including a member’s prognosis (i.e. chronic short-term, long term) (required), and diagnosis of any disability and treatment plans. This employer, or similar employers, is not considered competitive.</p>	<ul style="list-style-type: none"> Engage members to seek competitive employment. Track SES first face-to-face employer contacts reported so the program leader can provide feedback and support to SESs who are not consistently facilitating member contacts with competitive employers. Educate SESs regarding employers who are considered competitive versus those who reserve positions for people with disabilities.

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			Other members participated in WAT or other pre-vocational activities prior to their SE intake if initially referred for those services.	
6	Jobs as transitions:	1 – 5 (5)	WEDCO ESs leadership and SESs report they assist members with ending jobs if there is a mismatch, and provide support to members to find a new job if one ends. One record reviewed showed that the SES incorporated lessons learned with revised employment needs and preferences following the end of a member’s seasonal employment. Both members interviewed are employed, and they confirmed they receive support to work toward longer term employment goals, or were confident the support was available.	
7	Follow-along supports:	1 – 5 (5)	WEDCO staff report that SESs offer time unlimited follow-along supports by phone, email, text message, in the community, on-the job or off-site at the member’s preferred location. SESs interviewed reported that a small number of employed members receive on-the-job supports, but that they maintain contact with employers. Per report, all employed members receive follow-along supports. However, one WEDCO record reviewed did not provide evidence of follow along supports after job starts.	<ul style="list-style-type: none"> It is important to follow-up with members immediately after starting a job, when stress or symptoms can be most intense, and to confirm the member started the job.
8	Community-based services:	1 – 5 (5)	SESs estimated that they spend about 80% of their time in the community which does not include activities in the clinic or the WEDCO office. Based on records reviewed, SESs meet with members in the community, usually at coffee, fast food, or libraries. Once established with each member, SESs usually meet with members at the same location, without diversifying the location of contacts. There were documented examples of SES accompanying members to interviews, but most	<ul style="list-style-type: none"> SESs should meet with members in a variety of locations, including: client homes, libraries (where other job search resources may be available), other job centers, work settings, or potential employers. If members are comfortable, meeting at diverse locations can provide opportunities for exposure and discussion about the range of jobs and settings available in the community.

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			contacts documented referenced online job search activities.	
9	Assertive engagement and outreach:	1 – 5 (4)	The <i>WEDCO Policy & Procedure Member Engagement, Outreach and Re-Engagement ENGAGEMENT</i> outlines the philosophy of outreach, but not specific timeframes or frequency. Per interview, SESs use text, phone calls, email, and communicate with clinics if members are not in contact, but staff do not complete home visits. SESs work with members to establish specific email addresses for their job search activities. Per interview, outreach is time-limited, with two to three outreach efforts a week for three months minimum.	<ul style="list-style-type: none"> • Optimally, outreach and engagement should be time unlimited, until the member is reengaged or it is clear the member is not interested in SE services. If members indicate they are not actively pursuing employment, the case may be closed but continue to discuss the member with the mental health treatment team so they can engage in services when ready. • Consider expanding outreach by SESs to include community-based activities and home visits. As a step toward improved integration, SESs can discuss with CMs and RSs where members spend time so SESs can perform community-based outreach, or to coordinate home visit contacts by both clinic and SES staff. • Engage informal support systems who may know where members are, why they are missing appointments, how to get in contact with the member, etc.
Total Score:		63		

SE FIDELITY SCALE SCORE SHEET		
Staffing	Rating Range	Score
1. Caseload	1 - 5	5
2. Vocational services staff	1 - 5	5
3. Vocational generalists	1 - 5	4
Organizational	Rating Range	Score
1. Integration of rehabilitation with mental health treatment	1 - 5	2
2. Vocational unit	1 - 5	4
3. Zero-exclusion criteria	1 - 5	4
Services	Rating Range	Score
1. Ongoing work-based assessment	1 - 5	4
2. Rapid search for competitive jobs	1 - 5	3
3. Individual job search	1 - 5	5
4. Diversity of jobs developed	1 - 5	4
5. Permanence of jobs developed	1 - 5	4
6. Jobs as transitions	1 - 5	5
7. Follow-along supports	1 - 5	5
8. Community-based services	1 - 5	5
9. Assertive engagement and outreach	1 - 5	4
Total Score		63
Total Possible Score		75