

SUPPORTED EMPLOYMENT (SE) FIDELITY REPORT

Date: March 17, 2017

To: Nichole Walla, Director of Operations

From: Georgia Harris, MAEd
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AHCCCS Fidelity Reviewers

Method

On February 7-8th and 13th, 2017, Georgia Harris and Jeni Serrano completed a review of the Beacon Group (Beacon) 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 Beacon Group, the referring clinics included Lifewell Oak clinic and Partners in Recovery (PIR) East Valley clinic.

Beacon Group provides services for people with mental illness and/or developmental disabilities in both Phoenix and Tucson, Arizona. The Phoenix office provides job development and placement (JD&P), computer skills training, employment readiness skills training, supported employment assistance, group supported employment (GSE), work adjustment training (WAT) and general educational development (GED) preparation. Beacon's supported employment (SE) program provides co-located services at the PIR West Valley clinic, Lifewell Oak clinic, and Assurance Health and Wellness clinic. Since last year's review, Beacon has expanded its services to include those who have criminal backgrounds and other legal issues.

The individuals served through the agency are referred to as "clients", 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:

- Observed a Beacon Group SE team meeting/supervisory meeting on February 8, 2017;
- Individual interview with the Director of Operations (SE leader);
- Group interview with five Employment Specialists (ES);

- Group interview with five members receiving services;
- Individual phone interviews with two family members;
- Group interviews with one Rehab Specialist (RS) at Lifewell Oak and four Case Managers/Rehabilitation Specialists at PIR East Valley;
- Chart review of ten randomly selected client records; and
- A review of Beacon program documents such as: Notice of Action, Outreach and Engagement Plan, the Beacon Group Individual Support Plan, Vocational Profile, Intake Packet, The Holland Code (RIASEC) Test, and the team's shared coverage calendar.

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 Beacon Employment Specialists are vocational generalists; they provide all aspects of service to their assigned members. This includes job development, placement, and follow-along supports.
- The Beacon team is actively involved in helping members to end jobs when appropriate, then assisting them to find jobs that match their new employment goals.
- The Beacon team is successfully engaged in rapid search for employment. A majority of members have contact with an employer within the first month of entering the SE program.

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

- In general, the Employment Specialists caseloads range between 18-28 members each. However, one ES maintains a separate caseload of 101 members from the Ticket to Work program. Though it was explained to reviewers that the ES is essentially a point of contact for Ticket to Work members, the program would align better with the model if SE staff were not assigned to work in any additional agency programs.
- Though the co-located staff have some direct access to clinical staff, the majority of ES staff are not co-located, and do not have the same access:
 - The ESS' limited access to clinical teams restricts their ability to provide input on service planning, for they are not truly integrated or seen as a member of the decision-making team. Work with partnering clinics to improve non-co-located staff's ability to be involved with clinical staff for all members and their treatment.
 - Additionally, the RBHA and clinical agencies should revisit any policies impeding coordination between SE agencies and clinics. Both the SE and clinical staff report that some clinical agencies do not allow SE providers who are not contractually co-located to meet with members anywhere onsite without an escort. Staff also reported that this policy especially hinders their ability to make initial contact with members.

- Though most staff and members view employment as a right for all members, some clinics are guiding members to alternative groups (i.e., Job Clubs) prior to submitting referrals to SE agencies. Though these types of additional opportunities may seem to assist members with choice, staff should be careful not to detract from or impede the members' request to work by compelling participation in adjunct programming prior to enrollment in SE programs.

SE FIDELITY SCALE

Item #	Item	Rating	Rating Rationale	Recommendations
Staffing				
1	Caseload:	1 – 5 4	The team currently has five Employment Specialists (ES). Four of the ESs have caseloads ranging between 19-28 members each. One of the ESs is primarily assigned to the Ticket to Work program- a voluntary Social Security program that helps beneficiaries successfully transition to competitive employment opportunities. Staff explained that the Ticket to Work beneficiaries do not work with the ES in any predictable fashion; however, approximately 101 beneficiaries are assigned to her. When asked about the services provided to Ticket to Work beneficiaries, staff reported that they were offered the full range of SE services, when needed. In relation to the SE program, this same ES has a caseload of five members. The presence of an additional caseload of Ticket to Work beneficiaries was reflected in the score.	<ul style="list-style-type: none"> • Since SE is a best practice for SMI individuals, it is recommended that SE staff focus on serving SMI members. • Though the agency has multiple programs, SE staff must remain distinct. Explore staffing options such as reassigning the five members served in the mixed caseload, or hiring an additional ES staff.
2	Vocational Services staff:	1 – 5 5	Employment Specialists provide only vocational services. The record review and access to ES calendars supported this, often showing evidence of appointments with members and associating assessment, job development, placement and job coaching activities. The Program Manager also denied any staff involvement in activities outside of those already mentioned.	
3	Vocational generalists:	1 – 5 5	Each Employment Specialist provides all phases of vocational services. Staff and members claimed that ESs are focused on assessment, job development, placement and job coaching. Staff also described their vocational services as writing	

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			resumes, completing applications, improving professional dress, and practicing interview techniques. Clinical staff also stated that their members are assigned to one Beacon staff for the duration of their services.	
Organization				
1	Integration of rehabilitation with mental health treatment:	1 – 5 2	<p>The two co-located ESs attend one to two clinical team meetings per week. Staff report that they attend the entire meeting. They also attend a weekly coordination meeting at their respective clinics. The Rehabilitation Specialists (RS), Vocational Rehabilitation Counselor (VRC), and the ESs attend the coordination meetings for the three, co-located teams. The non-co-located staff do not attend meetings with clinical teams or weekly coordination meetings with the vocational teams. All staff make phone calls, send monthly reports and emails to all vocational partners. The non co-located staff use phone calls and email as primary sources of contact with vocational partners. ES staff do not view themselves as a part of the mental health team, but an ancillary outlet for those who want employment services.</p> <p>Additionally, the clinical staff at one clinic, as well as ES staff, informed reviewers that the ESs were “not welcome” at the site, unless they were accompanied by an RS. Clinical staff further described their agency’s policy, stating that any staff that is not “contractually co-located” are not allowed to meet with members anywhere on the premises. Both the clinical and SE staff felt this impeded their ability to coordinate services for members.</p>	<ul style="list-style-type: none"> • In the SE model, Employment Specialists are a part of mental health treatment team and are shared decision makers. Continue to work on relationships with other vocational providers to develop inroads for shared input for service planning. • Though the co-located ES staff have some direct access to clinical staff, the majority of ES staff are not co-located, and do not have the same access. Staff that are not co-located should increase direct contact with clinic staff, including attending integrated team meetings with assigned teams. • The RBHA and clinical agency(s) should revisit any policies that restrict the coordination of services with RBHA contracted providers. This goes directly against the SE model’s philosophy of team integration.
2	Vocational Unit:	1 – 5	The Beacon ESs work as a vocational unit. The	

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		5	<p>Director of Operations conducts a weekly supervision meeting with all SE staff for 30 minutes, every Monday. The staff also confirmed their involvement in a monthly, 2 hour staff meeting (conducted by the Director of Operations), which is followed by additional team supervision. During the team meeting, reviewers observed the staff discussing job leads, barriers faced by members, and resources to help them. During interviews, staff said that they provide backup support to each other. The team uses a shared outlook calendar to keep track of scheduled appointments, should any ES need assistance from another staff. Staff provided copies of the calendar to reviewers. Moreover, members said there has always been staff coverage, even in instances when there was staff turnover.</p>	
3	Zero-exclusion criteria:	1 – 5 4	<p>Beacon receives the majority of its referrals directly from the RBHA clinics. The RSs and CMs interviewed had slightly different interpretations of readiness for work. The majority of staff interviewed felt that members were ready for work “when they say so”. However, in one clinic members are strongly encouraged to attend an onsite “Job Club” to explore all options (including volunteering) prior to SE program commitment. This Job Club is also used as an opportunity to introduce the RSA/VR component of the RBHA employment system.</p> <p>Staff and members reported that the Beacon program does not place any restrictions on who is eligible for work. In fact, staff interviewed consistently stated that the only requirement imposed upon members is maintaining their willingness to work.</p>	<ul style="list-style-type: none"> • Educate the clinical teams on the independent nature of member choice; though additional opportunities may seem to assist members with choice, staff should be careful not to detract from or impede the members’ request to work by requiring participation in adjunct programming.

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Services				
1	Ongoing, work – based vocational assessment:	1 – 5 5	The Beacon staff provide members with ongoing assessment, based on work experiences in competitive jobs. The clinical RSs report completing a Vocational Activity Profile prior to an SE referral. The Beacon staff also report completing a Vocational Profile as a part of their intake process. Vocational Profiles found in the members’ charts were examined by reviewers. Staff interviews and the record review also revealed that members were being taught vocational skills (i.e. interviewing skills) while seeking for and participating in competitive positions. Though Beacon does have a Work Adjustment Training program (WAT), SE members are not enrolled in any of those services. In fact, members and staff discussed a voluntary “Interests Test” (the RIASEC Test) as the only informal assessment used to help members identify their vocational areas of interest, aside from the Vocational Profile.	
2	Rapid search for competitive jobs:	1 – 5 5	The Beacon staff work to provide members with rapid access to employers. The data provided to reviewers reflects that nearly 80% of all members had a first contact with employers within one month of program entry. Staff told reviewers that they are focused on getting members out to see employers as soon as possible; some staff aim to connect members to employers on the first day. Members also gave examples of ESs connecting them to employers early in their relationship(s) with Beacon.	
3	Individualized job search:	1 – 5 5	Beacon staff state that job search is individualized; it is driven by the members’ preferences, as	

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			outlined in the Beacon Individual Support Plan, the Vocational Profile, and the members' verbal requests. Job search logs indicated that members were fully engaged in individualized job search, as members worked in various industries and companies. Staff said they focus on finding "niche" environments for members, especially for those who have particular skill sets (e.g., technologist).	
4	Diversity of jobs developed:	1 – 5 4	The data provided to reviewers showed 34 employed members. The 34 members are distributed between 21 job types. Of the 21 job types, members work in 15 unique positions, where there is no overlap between position type and employer. Though some members work in positions that have overlapping job types, few of the members work for the same employer. For instance, two members work in customer service positions, but neither one works for the same employer.	<ul style="list-style-type: none"> Continue to work toward developing relationships with employers through job development activities, with the intention of creating more diverse opportunities for members.
5	Permanence of jobs developed:	1 – 5 5	The Beacon Employment Specialists are focused on developing jobs that are competitive and not set aside for people with disabilities . The data provided suggests that most of the jobs developed by ESs were permanent positions, avoiding temporary opportunities. Staff and members interviewed called attention to the counter-productivity of temporary positions, stating that they slow the members' progress toward achieving meaningful employment goals.	
6	Jobs as transitions:	1 – 5 5	Staff and member interviews indicate that ESs help members end jobs appropriately. When members desire a change in employment, the ESs work with them to find jobs that are in line with their current employment goals. Members interviewed reported that they have ended a job and were	

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			reengaged with an ES and searching for new job with no time gap.	
7	Follow-along supports:	1 – 5 5	All of Beacon’s working members are encouraged to receive follow-along supports for a minimum of 90 days after obtaining employment. Staff report that over 40% of members retain follow-along supports after the 90 day period. Staff and members said that the follow along supports are available on an unlimited basis. Working members report that Beacon staff will call or meet with them in-person on a monthly basis. Beacon staff are also willing to meet members on the job at their request. Member records and the team meeting also showed evidence of this type of outreach from Beacon staff.	
8	Community-based services:	1 – 5 5	The team spends more than 70% of their time in the community with members. The team’s shared group calendar provided reviewers with a cross-section of completed and scheduled ES appointments, along with their location. Nearly all of these appointments were outside of the Beacon and clinical offices. Both the members and staff interviewed reported that the majority of appointments are scheduled at local libraries, restaurants, or potential jobsites for tours, application completion and/or interviews. The record review showed that approximately 75% of contacts were conducted in the field. The majority of office contacts were noted as intake appointments conducted at the clinic.	
9	Assertive engagement and outreach:	1 – 5 4	The ESs attempt multiple outreach engagements prior to closing a member from services. SE staff shared their outreach and engagement policies with reviewers. Beacon Group has a 45 day policy.	

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			<p>When a member misses a scheduled appointment, Beacon staff will contact them within 24 hours. Over the next 30 days, the Beacon staff performs multiple outreach attempts per week, as well as multiple coordinated contacts with the clinical team and any authorized natural supports. At the 30 day mark, the team sends out a Notice of Action to close if there is no response in the next 15 days. A copy of the written policy is acknowledged and signed by the members during intake. Staff report much success in making contact with members and state that most members have been located through this process. Additionally, all members who have been closed are eligible for re-enrollment at any time.</p>	
Total Score:		68		

SE FIDELITY SCALE SCORE SHEET		
Staffing	Rating Range	Score
1. Caseload	1 - 5	4
2. Vocational services staff	1 - 5	5
3. Vocational generalists	1 - 5	5
Organizational	Rating Range	Score
1. Integration of rehabilitation with mental health treatment	1 - 5	2
2. Vocational unit	1 - 5	5
3. Zero-exclusion criteria	1 - 5	4
Services	Rating Range	Score
1. Ongoing work-based assessment	1 - 5	5
2. Rapid search for competitive jobs	1 - 5	5
3. Individual job search	1 - 5	5
4. Diversity of jobs developed	1 - 5	4
5. Permanence of jobs developed	1 - 5	5
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		68

Total Possible Score

75