

SUPPORTED EMPLOYMENT (SE) FIDELITY REPORT

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To: Jennifer Baier, Senior Program Manager for Vocational Services

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AHCCCS Fidelity Reviewers

Method

On September 12-14, 2016, Jeni Serrano and Georgia Harris completed a review of the VALLEYLIFE 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 VALLEYLIFE, the referring clinics included Southwest Network-Osborn and Terros West McDowell.

VALLEYLIFE has a long-standing history in the Metro Phoenix area for providing a variety of services to Arizona's Developmental Disabilities (DD) population. In addition to serving children and adults with DD, the agency also provides services to adults with Alzheimer's disease, autism, traumatic brain injury, and serious mental illness (SMI). In the past year, The VALLEYLIFE team has worked to ensure their pre-employment training programs do not overlap with their SE program by creating distinct pathways for SMI referrals. Since the last review cycle, the team has experienced some attrition in the Employment Specialist (ES) role. Overall, the team has remained focused on streamlining their referral process and acclimating new staff to their roles as Employment Specialists.

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:

- Reviewers conducted an individual interview with the SE Supervisor.
- Observation of a SE program vocational unit meeting at VALLEYLIFE.
- Reviewers conducted a group interview with two ESs and an individual interview with the Job Coach (JC).
- At each partner clinic, a group interview was conducted with Case Manager(s) and Rehabilitation Specialist(s). Between both clinics, a total of four staff participated.
- Reviewers conducted a group interview with four SE program members.
- Reviewers conducted a telephone interview with a family member of one program member.
- Review of VALLEYLIFE SE brochure, 10-day outreach notice letter; Vocational Profile, SE Staff weekly schedules/calendars.
- A total of 10 member records were reviewed from the charts provided by the two partner clinics and the SE agency.

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:

- Members interviewed report they are supported by staff at VALLEYLIFE, and staff assist them to explore employment options consistent with their goals and preferences.
- The program uses the vocational profile and brief amendment forms, rather than standardized office-based tests, assessment tools, or required work samples as a requisite before the job search.
- The ESs work to develop jobs that lead to permanent, full-time employment.
- VALLEYLIFE offers follow-along job retention support for as long as members identify the need.

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

- Address barriers to all Employment Specialists attending a full clinical team meeting, at least weekly, with each assigned team. In order to achieve full integration, Employment Specialists should attend the full team meetings and have shared decision making regarding all members on the team.
- It appears that some members continue to experience some level of screening for work readiness from clinical teams. System partners should continue to receive training and education in the evidenced based SE model, to further ensure zero exclusion and expand integration efforts (as described above).
- Increase community-based services over office-based contacts. The SE Team Manager should monitor the ratio of community versus office-based services provided by Employment Specialists. Track and document Employment Specialist time spent conducting job

development activities that may occur without members present, which can be factored when considering community-based services. Explore whether tracking of Employment Specialist time in the community without members present can be standardized.

- VALLEYLIFE relies on paper documentation, maintained at each co-located facility. The agency should review options to move toward an electronic record system, for all forms and case notes, so that the SE Team Manager can more easily track services. Also, explore options for an integrated SE and clinic file system for easier sharing of information.

SE FIDELITY SCALE

Item #	Item	Rating	Rating Rationale	Recommendations
Staffing				
1	Caseload:	1 – 5 5	<p>At the time of review the SE program serves 71 SMI members. The VALLEYLIFE team consists of four SE staff: one SE Supervisor, two new Employment Specialists (ESs), and one new Job Coach (JC). The ESs manage caseloads of approximately 20 members each. The JC manages a mixed caseload of 21 DDD, VR and SMI members. Of the 21 members, nine members are SMI.</p> <p>In recent months, the team experienced some staffing turnover, requiring the SE Supervisor to assume responsibility of 21 cases. The SE Supervisor stated that she will maintain her current caseload until the two additional ES vacancies are filled.</p>	<ul style="list-style-type: none"> • Work towards filling all available ES positions on the team. Though the SE Supervisor is able to carry a small caseload, it is recommended that the ES staff be allotted the majority of the caseload. Limiting the SE Supervisor’s caseload helps to ensure that sufficient time is allotted to the supervisor for program oversight and staff supervision. • It is recommended that SE staff only provide services to SMI members as the SE model is designed specifically for individuals with serious mental illness.
2	Vocational Services staff:	1 – 5 5	ESs provides only vocational service to members. SE staff and members report that SE staff are focused on providing services related to job search and retention such as resume writing, applications, mock interviews, and job coaching.	
3	Vocational generalists:	1 – 5 4	ESs provide most phases of the vocational services. The team currently has two ESs and one Job Coach (JC). According to the SE staff, ESs provide the intake and job development services to members. Once members obtain a job, the JC provides them with job retention services. Members have the option to maintain contact with their ES; however, most working members	<ul style="list-style-type: none"> • To provide members with optimal stability and support, ESs should provide all phases of vocational services.

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			are transferred to the JC for follow-along support.	
Organization				
1	Integration of rehabilitation with mental health treatment:	1 – 5 3	<p>The SE team is working towards greater integration with the clinical teams. All SE staff (including the SE Supervisor) are assigned to work with a clinic or members from several referring clinics. The SE staff report that their level of integration varies with the clinic. ESs attend clinical treatment team meetings weekly, but their participation is often limited to discussing members who are currently served by VALLEYLIFE. It was reported by the clinical administration that morning meetings are not fully integrated with the SE provider at this time; therefore the Fidelity Reviewers did not observe a mental health treatment team meeting.</p> <p>SE staff reported much difficulty in attending the full length of clinical team meetings, often due to scheduling conflicts that arise when trying to attend multiple team meetings in a day. In-depth, weekly employment staffing's are conducted between Vocational Rehabilitation specialists, clinic Rehab Specialists, and ESs. Staff reported that all teams receive weekly phone calls and emails from ESs regarding their members. The SE team also sends written monthly updates to each member's team. Evidence of monthly updates were found in members' files.</p>	<ul style="list-style-type: none"> SE teams should continue to work with clinical teams on integration. Ideally, ESs are to attend the full clinical team meeting as a shared decision maker. This includes the opportunity to inform treatment planning with the rest of the team, and to suggest and/or advocate for the rehabilitation benefits of employment for every member, not just those currently enrolled in services.
2	Vocational Unit:	1 – 5 4	<p>The Employment Specialists have the same supervisor, and the vocational unit meets bi-weekly, allowing time for Employment Specialists to discuss individuals on their caseloads, successes, and networking leads. During interviews, ESs and members provided examples of cross coverage provided.</p>	<ul style="list-style-type: none"> Employment Specialist should increase group supervision unit meetings to at least weekly not alternating with individual supervisions.

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3	Zero-exclusion criteria:	1 – 5 3	<p>Staff reported they do not screen out members for any reason. Referrals are streamed through clinic staff with some members referred through Vocational Rehabilitation (VR) or self referred; however members still must be referred through their clinical team.</p> <p>VALLEYLIFE staff and clinic staff interviewed reported that the only eligibility criteria to receive SE services is to want to work and be enrolled in the RHBA. However during member interviews, it was reported that some members continue to experience screening by clinical team staff. One member interviewed reported that when she asked her Psychiatrist to be referred for Supported Employment because she wanted to work, she was told she was not ready to work. The member then stated that she requested to meet with the RS on the team, hoping for an opportunity to further explain that she must work in order to pay her living expenses. The RS did support her employment goal and referred to the VALLEYLIFE SE program.</p>	<ul style="list-style-type: none"> • To further ensure zero exclusion, work towards expanding integration efforts so that the ES plays a more equal role on the clinical team(s). • Consider having the SE staff present the key principles of SE at clinical team meetings, to promote the benefits of competitive employment for members.
Services				
1	Ongoing, work – based vocational assessment:	1 – 5 5	<p>ESs begin working with members immediately on their vocational profile in order to gather information about their work goals, interests, and preferences. The vocational profile is a tool used to gather further information on previously acquired skills, education and work history. The vocational profile is an ongoing tool used to gather data needed to support members’ work goals, and ESs report that other assessments are not required prior to starting the job search. Reviewers found vocational profiles that matched members’ goals</p>	

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			<p>in the agency records.</p> <p>ESs and the job coach provide on-going follow-along support services which allows for on-site job observation and assessment. Examples were provided during ES and member interviews.</p>	
2	Rapid search for competitive jobs:	1 – 5 4	<p>VALLEYLIFE SE supervisor reported that due to the agency's recent staff turnover, the first contact with an employer about a competitive job is ranging from three to six months after program entry. The SE Supervisor reported that she is aware of the fidelity recommendation of having the first face-to-face contact with an employer within a month, and that she is working with her new staff to meet this measure. The record review results also confirmed the claims of the SE Supervisor, with most members' first employer contacts falling between one and six months after program entry.</p>	<ul style="list-style-type: none"> As the team is rebuilding, the expectations for rapid job search should be reinforced among the staff. The team should work on connecting members to employers within one month of program entry.
3	Individualized job search:	1 – 5 4	<p>Member goals listed on the referring clinic service plans tended to be broad, lacking in specificity (e.g., to find a part-time job or explore employment options). Lack of specific member goals when they first express an interest in employment makes it difficult to determine if the job search is individualized. However, vocational profiles were located in VALLEYLIFE records and were reviewed. Compared to the clinic documentation, they included more specific short and long term goals, based on member preferences. Based on documentation for employed members, and interviews with members, job searches appear to be aligned with member preferences.</p>	<ul style="list-style-type: none"> Clinic staff should ensure member goals are as specific as possible, and written in the member's voice, prior to referral for SE services.
4	Diversity of jobs	1 – 5	ESs mostly provide an array of job options to	

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	developed:	5	members. The program currently has 21 employed members. Of those members, 94% of people work in unique job types and with diverse employers.	
5	Permanence of jobs developed:	1 – 5 5	The ES staff report they do not generally direct members to positions set aside for individuals with disabilities and most jobs explored are competitive.. Members interviewed stated that the ESs only help them find jobs that they want and do not recommend volunteer positions or temporary positions.	
6	Jobs as transitions:	1 – 5 5	The ESs consistently helps members to use the lessons of their previous jobs to cultivate new employment opportunities. Both the members and SE staff interviewed recounted instances when members were helped to find a new job after one ended. Data from the SE chart review also revealed discussions between staff and members regarding their previous employment, and their plan to find new opportunities.	
7	Follow-along supports:	1 – 5 4	The Team offers and provides individualized, follow-along supports to most of their members. Of the 27 members working, 16 are receiving follow-along supports. Members and SE staff described the supports as weekly phone calls and emails, and worksite and in-person visits. Some members meet with their ES or JC between 15 and 60 mins a week depending on the individual's needs. SE staff and members also stated that there is no time limit for follow-along supports.	
8	Community-based services:	1 – 5 2	The majority of members received SE services in office settings. SE staff estimated that they spent about half their time in an office environment with members. The SE supervisor estimated community-based services to be higher, based on her tracking of staff calendars and additional	<ul style="list-style-type: none"> • As often as possible, vocational services should be provided in the community. Staff must work towards providing above 70% of all vocational services in the community. • To resolve inconsistencies in reporting,

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			reports (e.g. billing reports). Conversely, the results of the record review indicate that members are being served in the community nearly 22% of the time.	staff must ensure that services provided are accurately and consistently documented in the official member record.
9	Assertive engagement and outreach:	1 – 5 5	The SE team attempts to contact members and practices multiple outreach strategies, prior to closing members from services. SE staff stated that when members have missed an appointment, the affiliated ES will attempt to contact them by phone. Some ESs reported that phone calls are attempted 2-3 times a week, for two weeks, prior to notifying the clinical team. If contact is not made in the first two weeks, ESs will request that the clinical team will participate in the outreach efforts. ESs will also send a 10-day contact notice to the member as a prompt to contact them as soon as possible. Reviewers were provided a copy of the 10-day contact notice letter. When asked about their closure policy, all SE staff stated that their outreach is not time-limited; members are not closed from services unless the members themselves explicitly request closure from services.	
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	3
2. Vocational unit	1 - 5	4
3. Zero-exclusion criteria	1 - 5	3
Services	Rating Range	Score
1. Ongoing work-based assessment	1 - 5	5
2. Rapid search for competitive jobs	1 - 5	4
3. Individual job search	1 - 5	4
4. Diversity of jobs developed	1 - 5	5
5. Permanence of jobs developed	1 - 5	5
6. Jobs as transitions	1 - 5	5
7. Follow-along supports	1 - 5	4
8. Community-based services	1 - 5	2
9. Assertive engagement and outreach	1 - 5	5
Total Score		63
Total Possible Score		75