

**SUPPORTED EMPLOYMENT (SE)  
FIDELITY REPORT**

Date: March 7, 2016

To: Joyce Behrens, General Manager

From: Georgia Harris, MAEd  
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ADHS Fidelity Reviewers

**Method**

On February 1, 8 and 9, 2016, Georgia Harris 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 of helping SMI members find and keep competitive jobs in the community based on their individual preferences, and 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, the referring clinics included Terros Enclave and Partners in Recovery East Valley.

WEDCO is a private, for-profit company that assists individuals (with or without disabilities) and members of state and private agencies in training for, locating, securing and sustaining employment in the community. WEDCO offers a variety of training and vocational services, including: work/internship exploration, supported education, work adjustment training (WAT), and supported employment services (SE). Referrals can come from clinics or the Rehabilitation Services Administration/Vocation Rehabilitation (RSA/VR). When WEDCO was previously reviewed in 2015, the lines between WAT, which is time-limited, unpaid training in real job settings, and the other supported employment services at WEDCO appeared blurred. At this review, WEDCO report that they have separated their services by creating distinct programs and separate workforces. Additionally, SE direct service positions have been reorganized to align with the evidence based practice such that Employment Specialists are responsible for all phases of SE. It was not clear to the reviewers how long those changes have been in place.

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. WEDCO refers to staff providing SE services as Senior Employment Specialists, but for the purpose of this report, and for consistency with the evidence-based practice, the term “Employment Specialist” will be used.

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

- Group interview with WEDCO’s General Manager and the Director of Operations,
- Group interview with an East Valley clinic Rehabilitation Specialist (RS) and a Case Manager (CM),
- Individual interview with an Enclave clinic Rehabilitation Specialist,
- Group interview with three WEDCO Employment Specialists,
- Individual interview with a member receiving WEDCO SE services,
- Review of ten member clinic electronic records and ten member WEDCO records, and
- Review of agency documentation such as: Vocational Profile; Vocational Profile Amendment Form; Individual Employment Plan form; Notice of Privacy Practices; Consent to Release Protected Health Information form; WEDCO Notice of Action letter; blank Employer Contact and Call Log form; WEDCO Receipt of Privacy Practices form; WEDCO Policy and Procedures: Member Engagement, Outreach and Re-Engagement; WEDCO Employment Center Master Application; and the agency website.

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:

- Individualized job searches: WEDCO ESs assist members in conducting individualized job searches. ESs appear to make good use of Vocational Profiles, Vocational Profile Amendments, and Individual Employment Plans (IEPs). Progress notes and monthly summaries suggest ESs engage members in discussions to assist them in identifying work goals, needs and preferences on a regular basis.
- Jobs as transitions: ESs will readily assist members in locating new jobs when they are ready to move on from or have lost a current job. Evidence was found in member records and discussed in interviews with clinic staff that ESs are tolerant of shifts

in members' stated needs and preferences; ESs continue to provide encouragement and work with members to find a job that is the right fit.

- Community-based services: A review of ten randomly selected agency member records found that most member services are delivered in the community.

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

- Integration of rehabilitation with mental health treatment: SE services remain poorly integrated with the mental health system. At the time of the review, the agency and clinical providers have not yet established a pattern of meeting on a regularly scheduled basis as a multi-disciplinary team. Additionally, the nature of the planned Coordination of Care meeting does not align fully with how the evidence-based practice of SE defines an integrated mental health treatment team. The record review and clinic and agency staff interviews reflect a need for better and more direct communication between WEDCO, the provider and Rehabilitative Services Administration/Vocational Rehabilitation (RSA/VR) about member mental health/safety needs.
- Rapid search for competitive jobs: WEDCO should ensure that ESs have an accurate understanding of the types of employer contacts (both by members and/or ESs) that count toward face-to-face contacts. All employer contacts should be documented to clearly describe the nature of the contact and any pending actions or next steps.
- Diversity and permanence of jobs developed: Data provided showed that many members have been hired by employers that carve out positions specifically for people with disabilities. Many others were hired by employers with whom WEDCO has relationships through WAT programs, making it difficult to assess the competitiveness of those jobs. In order to avoid an over-reliance on those employers with whom the agency already has a relationship, which may limit job diversity, ESs should devote time each week to developing new employer contacts within a range of industries offering competitive jobs in integrated settings.

## SE FIDELITY SCALE

Item #	Item	Rating	Rating Rationale	Recommendations
<b>Staffing</b>				
1	Caseload:	1 – 5  5	WEDCO divides a total roster of 141 Supported Employment (SE) Program members among nine Employment Specialists (ES). ESs have caseloads ranging from five to 23 members, however not all members are people diagnosed with an SMI and enrolled in the Regional Behavioral Health Authority system (RBHA). Ninety-three (93) individuals on the SE roster are members enrolled in the RBHA, and were referred by either that entity or the Rehabilitative Services Administration/Vocational Rehabilitation (RSA/VR). The remaining forty-eight (48) members are individuals with other health issues or physical disabilities referred by VR for assistance finding employment.	<ul style="list-style-type: none"> <li>The evidence-based practice of SE is designed specifically to assist people diagnosed with a serious mental illness find and keep competitive employment in the community. Small caseloads are recommended due to the nature and intensity of support services required by many members. While members' disabilities other than an SMI may also need some measure of assistance reintegrating into the workforce, they may prove to take away from the ESs' available time to meet the specific needs of members with behavioral health challenges. WEDCO should consider carving out vocational staff, so that ESs dedicate 100% of their time toward providing services to people diagnosed with an SMI and/or co-occurring disorder.</li> </ul>
2	Vocational Services staff:	1 – 5  5	WEDCO ESs provide only vocational services. ESs conduct intakes and assessments, 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	As stated in the summary, since the previous fidelity review in April 2015, WEDCO has realigned aspects of its SE program to conform more closely to the evidence-based practice. Since last year's review, the agency has consolidated Job Developer and Job Coach positions under a new classification, that of Senior Employment Specialist (referred to	<ul style="list-style-type: none"> <li>It is recommended that WEDCO provide specific training and supervision on job development with employers in the community (See Recommendation for Diversity of jobs developed, under Services Item 6). WEDCO should develop procedures for documenting unique</li> </ul>

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			<p>in this review as Employment Specialist or ES). ESs are responsible for conducting intakes, engagement, assessment, benefits counseling, job placement, job coaching and following along supports. While ESs interviewed discussed the importance of building relationships with area employers, WEDCO also employs two staff members responsible for marketing to employers; from the data provided it was unclear to reviewers to what degree ESs are currently involved in this area.</p>	<p>employer contacts and follow up contacts on behalf of specific members.</p> <ul style="list-style-type: none"> <li>WEDCO should update the agency website to distinguish the separation of SE from WAT services, clarifying the range of services provided under SE.</li> </ul>
<b>Organization</b>				
1	Integration of rehabilitation with mental health treatment:	1 – 5  1	<p>WEDCO SE services remain poorly integrated with the mental health system. WEDCO ESs are not assigned clinical teams and do not attend weekly treatment team meetings. Although CMs or RSs attend intakes with members and WEDCO ESs, a disconnect remains between clinic and WEDCO staff regarding the frequency and quality of communication thereafter, described as occurring largely by email and, to a lesser extent, phone calls. WEDCO and clinic staff reported that they recently began scheduling Coordination of Care meetings, usually attended by CMs and RSs, to review ES caseloads. Both WEDCO and the clinic staff agreed these meetings should occur monthly, but reported administrative level constraints that delayed their implementation. Email communications found in agency member records between the RBHA, WEDCO, and some clinical teams indicate efforts made to resolve barriers to regularly scheduled Coordination of Care meetings.</p> <p>Nonetheless, evidence was found that ESs make efforts to communicate concerns when behavioral</p>	<ul style="list-style-type: none"> <li>WEDCO, the clinical providers, and the RBHA should continue efforts to integrate WEDCO ESs into mental health treatment. Better and timely integration of agency, clinical, and VR records would help with this effort considerably.</li> <li>ESs should attend weekly treatment team meetings where they have 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. ESs should not only report on member progress but be invited to engage in overall discussion and offer solutions. Where perceived barriers exist, such as HIPPA, explore solutions to resolve.</li> <li>Regardless of referral source, ESs should have, with the written consent of the member, the ability to make direct contact with the member’s clinical team in the</li> </ul>

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			<p>health issues threaten to derail engagement or compromise employment. One record showed that direct communication between the ES and the clinical team has resulted in effective solutions that supported job retention and expanded trainings and duties. When referrals come from RSA/VR, WEDCO staff make reports to and communicate with the assigned VR Counselor (VRC). WEDCO and clinic staff reported that communication with VR is often slow, and may delay needed action on behalf of members. In one case, better communication between the VCR and the CM about ES concerns about the member's emotional and physical safety in her domestic relationship may have prevented the member's psychiatric hospitalization and ultimately the loss of her contract-to-hire position.</p> <p>Some but not all clinic staff interviewed reported receiving WEDCO monthly summaries or progress notes. WEDCO member documentation, such as Vocational Profiles, IEPs and monthly summaries, could not be found in most clinic member records examined by reviewers.</p>	<p>event concerns arise that suggest a need for case management or clinical intervention. WEDCO, clinical teams and VR should identify and resolve any policies that inhibit direct communication between the ES and the clinical team.</p>
2	Vocational Unit:	1 – 5  3	<p>The nine ESs are all supervised by the General Manager and the Director of Operations. The General Manager deals with policy and procedures, while the Director of Operations is focused on day-to-day operations. Both co-facilitate a team meeting for the ESs, which is held at least three times a month for one – three hours. Topics include review of cases, troubleshooting difficult issues, celebrating success stories, and sharing information about employers and job leads. Since the last review, a RBHA staff member has attended some team meetings to provide</p>	<ul style="list-style-type: none"> <li>• The SE Supervisor and ESs should try to meet weekly as a team for scheduled supervision focused on review of cases, troubleshooting difficult cases, sharing strategies and job leads, and celebrating successes. Consider documenting relevant points discussed and recommended actions/interventions in member record.</li> <li>• ESs should provide services to each other's cases when appropriate to the member's job search needs and when the ES needs</li> </ul>

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			<p>guidance on fidelity to the SE model.</p> <p>The Director of Operations meets with each ES on Monday mornings for individual supervision. Additionally, both he and the General Manager are available for supervision as needed throughout the week. ESs interviewed said they also provide feedback and talk to each other about cases. WEDCO staff said that both the Operations Manager and General Manager provide job shadowing/mentoring to ESs in the office and in the community, although no verifying documentation was provided.</p> <p>ESs provide coverage for each other in the event of illness or a scheduled vacation.</p>	<p>additional support. For example, in addition to providing coverage during vacation or illness, ESs can assist one another with job coaching, role play, or accompanying members to a job fair. Providing occasional services may be a useful opportunity for a “second set of eyes” on the member that could lead to identification of strengths or areas that need further development.</p>
3	Zero-exclusion criteria:	1 – 5  3	<p>WEDCO staff said they have received approximately 22 referrals in the last six months. Referrals come through the RBHA clinical teams and RSA/VR. “We reach out to teams to avoid duplication of services if people just walk in for services.” WEDCO staff said they do not use any screening but are aware of some screening at the clinic level.</p> <p>Clinic staff stated that they do not use exclusionary criteria but most voiced a belief that SE was for those who had previous work history, education and/or exhibited psychiatric stability. They described some members as needing WAT for skill training in order to “ease into work.” And some said that WEDCO would determine whether or not members would benefit from a WAT program. Clinic staff did not distinguish between SE and WAT as separate programs or the staff that provide them.</p>	<ul style="list-style-type: none"> <li>• WEDCO and the RBHA should coordinate 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.</li> <li>• As the primary referral source, the RBHA should continue to train and educate RSs in the EBP of SE.</li> <li>• To distinguish it from the other programs offered, WEDCO should further develop the SE program page on the agency website to clarify the range of services provided by ESs, the phases of SE, and SE’s role in recovery.</li> </ul>

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<b>Services</b>				
1	Ongoing, work – based vocational assessment:	1 – 5 4	<p>WEDCO staff reported that they now use the Vocational Profile as the intake form. Staff described it as a living document that is updated with the Vocational Profile Amendment Form, which records changes in work goals and preferences, job starts and job starts, and lessons learned. Clinic RSs also report they have transitioned to using the Vocational Profile, although none were found in clinic member records.</p> <p>WEDCO staff report that at some point since the previous review, SE services were separated out from WAT and other trial work assignment and that the services do not cross over. However, the reviewers found documentation of several WAT assignments as late as October 2015. It was duly noted that some members were referred to WEDCO for WAT by RSA/VR, and in at least one instance, a member participating in SE requested to participate in the WAT program.</p>	<ul style="list-style-type: none"> <li>WEDCO should continue efforts to use the Vocational Profile as guide to assist members in their job search. ESs should engage clinical teams, and if not already in place obtain release of information forms (ROI) to do so, in order to explore emotional and mental health issues affecting motivation and perseverance.</li> </ul>
2	Rapid search for competitive jobs:	1 – 5 4	<p>Data provided by WEDCO reflected that first face-to-face contacts with potential employers often occur within the first 30 days of starting the program. However, the data also showed numerous instances of first contacts occurring three to six months, and, in a few instances, nearly a year after program start. For all Employment Specialists, the average first face-to-face contact with competitive employers was within 1 – 6 months. Additionally, WEDCO did not provide the reviewers with evidence of a system for clearly tracking face-face employer contacts. An <i>Employer Contact and Call Log</i> was found in most member records, but they lacked adequate detail</p>	<ul style="list-style-type: none"> <li>As WEDCO strives to fully implement its stand-alone SE program and train staff to perform all phases SE, ESs should strive to maintain member focus on competitive jobs in integrated settings. WEDCO should develop a process for thoroughly documenting first face-to-face employer contacts that include a description of the type of contact. ESs should have a clear understanding of what counts as a face-to-face contact.</li> <li>First employer contacts need not be limited to job interviews by the member but can</li> </ul>



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			to determine whether or not the first employer contact was face-to-face. The reviewers found several instances of first face-to-face contacts with employers known to offer jobs carved out specifically for people with disabilities and some with whom the agency has existing WAT programs. In those cases, it was not clear whether or not those were truly competitive employment contacts.	include 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. First face-to-face employer contacts should be individualized to meet the need and goals of each member, and can be made by the member (with or without the ES) or by the ES on behalf of a specific member.
3	Individualized job search:	1 – 5 5	Data provided by the agency and a review of ten randomly selected member records member records indicates that WEDCO ESs assist members in conducting individualized job searches. ESs gather information on member’s job history and education; work goals and preferences; and strengths, skills and abilities. Jobs appeared to align with goals identified in Vocational Profiles and IEPs. Documentation was found recording members’ changing goals and preferences within progress notes, Individual Employment Plans, and Vocational Profile Amendment Forms, including lessons learned when members have lost or resigned jobs.	
4	Diversity of jobs developed:	1 – 5 3	WEDCO provided data showing that 36 members are currently employed. Three of those 36 are closed cases. Data showed 16 job types (i.e., food service, customer service, retail sales). Six job types (37.5%) were duplicated at least once. Approximately 31% (11) of jobs were customer service type positions at call centers. Also, nine (25% of the 36 currently employed) positions were at the same call center employer who carves out positions for people with disabilities. When asked about this, WEDCO staff said that they do not direct members to those positions but that	<ul style="list-style-type: none"> <li>ESs should expand their knowledge of businesses and industry beyond those with whom the agency has pre-existing relationships. Opportunities for increasing knowledge about the range of area employers may be found through professional meetings and networking events sponsored by economic development agencies within the various cities and towns in Maricopa County, the local Chambers of Commerce, and Greater</li> </ul>

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			members hear about them and seek them out due to the positions paying well and including insurance benefits. Several other job settings were also with employers known to hire many people with disabilities or that partner with WEDCO as WAT sites, possibly reflecting a tendency of the agency to rely on employers they already know about and with whom they have relationships rather than focusing on the diverse needs of the members.	Phoenix Economic Council. ESs should be making unique contacts with new employers on a regular basis and build relationships over the course of multiple visits, treating the employer as a potential customer.
5	Permanence of jobs developed:	1 – 5 4	WEDCO staff stated that they strive to engage members in searches for competitive, permanent jobs, and do not recommend that members try temporary or trial work employment options. Data provided showed that of 36 members currently employed, 27 (75%) were in permanent, competitive positions. Nine (25%) of the jobs were carve-out positions at one call center and could not be counted as competitive. A review of ten randomly selected member records and other data provided also found evidence of several members participating in WAT programs during the last year.	<ul style="list-style-type: none"> <li>See Recommendations for Services Items 2, 3, &amp; 4, which may have a positive effect in assisting members to locate permanent jobs in competitive settings.</li> </ul>
6	Jobs as transitions:	1 – 5 5	WEDCO ESs assist members with ending jobs and offer them assistance in finding new ones. Evidence was found in members records in the form of amendments to Vocational Profiles, new goals identified on IEPs, and within progress notes and emails. One record showed that the ES continued to offer support and assistance to a member who quit multiple jobs held for only brief periods of time.	
7	Follow-along supports:	1 – 5 5	ESs offer time unlimited follow-along supports in the community, by phone, email, and text message. Although most members prefer that ESs	<ul style="list-style-type: none"> <li>WEDCO should update the agency website to reflect their services to more closely align their services with the EBP of SE.</li> </ul>

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			<p>do not go to their places of employment, ESs provide this service if requested. ESs also provide support through outreach to clinics when they have a concern that mental health issues, physical safety, or basics needs may be jeopardizing the member's employment. Members can decline follow along support upon attaining employment but can request them at any time.</p> <p>A review of the agency website showed that SE is described as a "time-limited" service.</p>	
8	Community-based services:	1 – 5 5	<p>WEDCO staff estimated and the record review confirmed that ESs see members in the community on average 70% of the time. ESs meet members in locations that are convenient to their home or work, often in coffee shops, fast food restaurants, potential job sites, and the library. ESs often met members in the same locations over and over again.</p>	<ul style="list-style-type: none"> <li>ESs should, whenever possible, suggest various locations for meeting members in the community. If members are comfortable with meeting at different locations, this provides opportunities for exposure to and discussion about the range of jobs and job settings available in the community.</li> </ul>
9	Assertive engagement and outreach:	1 – 5 5	<p>WEDCO staff said that they only close cases with the member's request or after the clinical team recommends doing so. Staff said that they do not formally close cases until ten days after a Notice of Action letter is sent. Data provided by the agency indicates that WEDCO closed eight cases in the last six months. Cases closed due to no response from member (2), refusal of services (1), chose another SE provider (1), death (1), and member choice (1). Two members were closed sometime after becoming employed, but no information was provided about why their cases were closed.</p> <p>WEDCO staff reported that they have a written outreach strategy, and provided the reviewers with a document titled WEDCO Policy and</p>	

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			<p>Procedure: Member Engagement, Outreach and Re-Engagement. The document appears to be a policy statement about emphasizing member rights and expectations that staff will exercise due diligence in efforts to contact members who have disengaged from services, and to extend outreach to guardians, informal support and clinical teams who may be able to help with re-engagement. Per interview and record review, ESs use phone, email, letters, text messages and contacting clinical teams and VR when members are out of contact. The reviewers also found a release of information form to allow the ES to contact one member's parent when needed. Staff do not make home visits to attempt face-to-face contact but said that they will attempt contact at the clinic before a scheduled appointment with the CM or Psychiatrist.</p>	
<b>Total Score:</b>		<b>63</b>		

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

<b>Total Score</b>		<b>61</b>
<b>Total Possible Score</b>		<b>75</b>