



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR BEHAVIORAL HEALTH,
DEVELOPMENTAL AND INTELLECTUAL DISABILITIES
Division of Behavioral Health**

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Steven L. Beshear
Governor

Audrey Tayse Haynes
Secretary

MEMORANDUM

DATE: February 12, 2013

TO: Executive Directors
Regional MH/MR Boards

FROM: Jeff Jamar 
Acting Division Director
Division of Behavioral Health

SUBJECT: Supported Employment Services – Request for Applications

Enclosed please find a Request for Application (RFA) packet for Kentucky's Johnson & Johnson – Dartmouth Supported Employment Initiative. As you are aware, the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities, Division of Behavioral Health (DBH), was awarded a four-year grant from the Johnson & Johnson – Dartmouth Community Mental Health Program in 2010 to implement Evidence-Based supported employment services for adults with serious mental illnesses. This initiative is a partnership between DBH and the Office of Vocational Rehabilitation and recognizes the value of work in one's recovery from mental illness. The aim of the project is to offer high quality supported employment services to adults with serious mental illness or co-occurring mental health and substance abuse disorders throughout the Commonwealth.

Through this competitive RFA process, interested Regional MH/MR Boards that are not currently part of the Johnson & Johnson-Dartmouth Supported Employment Project are being asked to make application to become a pilot site under this initiative. Three new pilot sites will be selected to be added to the collaborative in SFY 14. Our goal is to eventually be able to work with existing and new programs throughout the 14 Regions so that consistent evidence based supported employment services will be available to any individual with serious mental illness who wants to work. Pilot sites will have access to:

- A full-time supported employment trainer who will provide both on-site and off-site training and technical assistance
- Participation in the national network of providers using the Individual Placement and Support (IPS) model
- Additional Mental Health Block Grant funding (\$50,000 for each site for SFY 2014) to help craft a sustainable program budget

All RFA documents can be found on the KDBHDID website under Supported Employment Initiative on the main page. Applications must be received NO LATER THAN Close of Business March 18, 2013. Please send them by mail or e-mail to:

Janine Dewey
Program Administrator
Kentucky Division of Behavioral Health
100 Fair Oaks Lane, 4E-D
Frankfort, KY 40621
janine.dewey@ky.gov
502-564-4456

We look forward to working with you on this very exciting project.

Enclosures

cc: Louis Kurtz
Janine Dewey
Thomas Beatty
Cathy Epperson, NAMI Kentucky
Lori Norton, University of Kentucky
Teresa Barney, OVR
Steve Shannon, KARP
Recovery Network of Northern Kentucky

Kentucky's Johnson & Johnson - Dartmouth Supported Employment Initiative

Request for Applications (RFA)

Background / Purpose of RFA:

The mission of the Johnson & Johnson - Dartmouth Community Mental Health Program is to increase access to evidence-based supported employment (SE), also known as Individual Placement and Support (IPS), for adults with serious mental illness who are interested in improving their work lives. This national program systematically works with states to implement supported employment following the evidence-based guidelines, initially in a small number of sites (typically 3-4 community mental health centers) and expanding statewide over time. The Program is administered in each participating state through collaboration between the state mental health authority and the state vocational rehabilitation administration. Through the support of Johnson & Johnson Corporate Contribution, the Dartmouth Psychiatric Research Center (PRC) oversees the Program and provides ongoing technical assistance and consultation on supported employment to the states. A significant benefit of this program is the opportunity for states to actively participate in an ongoing supported employment learning collaborative. All Program states have continued to take advantage of this learning community beyond the four years of the financial incentive grants.

In 2010, Kentucky received a four-year grant from the Johnson & Johnson - Dartmouth Community Mental Health Program to develop high quality evidence-based supported employment services for adults with serious mental illnesses throughout its public mental health system. This initiative is a partnership between the Office of Vocational Rehabilitation and the Division of Behavioral Health. The Division of Behavioral Health and the Office of Vocational Rehabilitation assisted four pilot sites to begin to develop supported employment services for the target population (adults with SMI and those with co-occurring mental health and substance abuse issues). Pilot sites received initial and ongoing technical assistance from a full-time supported employment trainer and have made progress toward achieving fidelity to the IPS model. At the same time, as part of the Johnson & Johnson - Dartmouth Community Mental Health Program, the Family Advocacy for IPS Supported Employment Project was established to engage family members and family advocacy groups (state and local NAMI affiliates) in developing partnerships between family groups and IPS supported employment pilot sites.

The Division of Behavioral Health is now seeking to offer assistance to three additional sites to join the state collaborative. This assistance will include at least 1-2 in-person visits for technical assistance each month as well as ongoing phone calls. Sites will receive \$50,000 in carry-over Mental Health Block Grant funds to be used as start-up funds during the first year of the program. Pilot sites that are selected will have funds added to their agency contract for SFY 2014.

Sites will be expected to implement a program that is in alignment with the Supported Employment Fidelity Scale. This scale includes 25 criteria:

- Caseload size: Employment specialists have individual employment caseloads. The maximum caseload for any full-time employment specialist is 20 or fewer clients.
- Employment services staff: Employment specialists provide only employment services.
- Vocational generalists: Each employment specialist carries out all phases of employment service, including intake, engagement, assessment, job placement, job coaching, and follow-along supports before step down to less intensive employment support from another mental health practitioner.
- Integration of rehabilitation with mental health treatment and team assignment: Employment specialists are part of up to two mental health treatment teams from which at least 90% of the employment specialist's caseload is comprised.
- Integration of rehabilitation with mental health treatment thru frequent team member contact: Employment specialists actively participate in weekly mental health treatment team meetings (not replaced by administrative meetings) that discuss individual clients and their employment goals with shared decision-making. Employment specialist's office is in close proximity to (or shared with) their mental health treatment team members. Documentation of mental health treatment and employment services are integrated in a single client chart. Employment specialists help the team think about employment for people who haven't yet been referred to supported employment services.
- Collaboration between employment specialists and Vocational Rehabilitation counselors: The employment specialists and VR counselors have frequent contact for the purpose of discussing shared clients and identifying potential referrals.
- Vocational Unit: At least two full-time employment specialists and a team leader comprise the employment unit. They have weekly client-based group supervision following the supported employment model in which strategies are identified and job leads are shared. They provide coverage for each other's caseload when needed.
- Role of employment supervisor: Supported employment unit is led by a supported employment team leader. Employment specialists' skills are developed and improved through outcome-based supervision. All five key roles of the employment supervisor are present.
- Zero exclusion criteria: All clients interested in working have access to supported employment services regardless of job readiness factors, substance abuse, symptoms, history of violent behavior, cognition impairments, treatment non-adherence, and personal presentation. These apply during supported employment services too. Employment specialists offer to help with another job when one has ended, regardless of the reason that the job ended or number of jobs held. If VR has screening criteria, the mental health agency does not use them to exclude anybody. Clients are not screened out formally or informally.

- Agency focus on competitive employment: Agency promotes competitive work through multiple strategies. Agency intake includes questions about interest in employment. Agency displays written postings (e.g. brochures, bulletin boards, posters) about employment and supported employment services. The focus should be with the agency programs that provide services to adults with severe mental illness. Agency supports ways for clients to share work stories with other clients and staff. Agency measures rate of competitive employment and shares this information with agency leadership and staff.
- Executive team support for supported employment: Agency executive team members (e.g. CEO/Executive Director, Chief Operating Officer, QA Director, Chief Financial Officer, Clinical Director, Medical Director, Human Resource Director) assist with supported employment implementation and sustainability. All five key components of executive team support are present.
- Work incentives planning: All clients are offered assistance in obtaining comprehensive, individualized work incentives planning before starting a new job and assistance accessing work incentives planning thereafter when making decisions about changes in work hours and pay. Work incentives planning includes SSA benefits, medical benefits, medication subsidies, housing subsidies, food stamps, spouse and dependent children benefits, past job retirement benefits and any other sources of income. Clients are provided information and assistance about reporting earnings to SSA, housing programs, VA programs, etc., depending on the person's benefits.
- Disclosure: Employment specialists provide clients with accurate information and assist with evaluating their choices to make an informed decision regarding what is revealed to the employer about having a disability.
- Ongoing, work-based vocational assessment: Initial vocational assessment occurs over 2-3 sessions and is updated with information from work experiences in competitive jobs. A vocational profile form that includes information about preferences, experiences, skills, current adjustment, strengths, personal contacts, etc. is updated with each new job experience. Aims at problem solving using environmental assessments and consideration of reasonable accommodations. Sources of information include the client, treatment team, clinical records, and with the client's permission, from family members and previous employers.
- Rapid job search for competitive job: Initial employment assessment and first face-to-face employer contact by the client or the employment specialist about a competitive job occurs within 30 days (one month) after program entry.
- Individualized job search: Employment specialists make employer contacts aimed at making a good job match based on clients' preferences (relating to what each person enjoys and their personal goals) and needs

(including experience, ability, symptomatology, health, etc.) rather than the job market (i.e. those jobs that are readily available).

- Job development – Frequent employer contact: Each employment specialist makes at least 6 face-to-face employer contacts per week on behalf of clients looking for work. An employer contact is counted even when an employment specialist meets the same employer more than one time in a week, and when the client is present or not present. Client-specific and generic contacts are included. Employment specialists use a weekly tracking form to document employer contacts.
- Job development – Quality of employer contact: Employment specialists build relationships with employers through multiple visits in person that are planned to learn the needs of the employer, convey what the SE program offers to the employer, describe client strengths that are a good match for the employer.
- Diversity of job types: Employment specialists assist clients in obtaining different types of jobs.
- Diversity of employers: Employment specialists assist clients in obtaining jobs with different employers.
- Competitive jobs: Employment specialists provide competitive job options that have permanent status rather than temporary or time-limited status, e.g. TE (transitional employment positions). Competitive jobs pay at least minimum wage, are jobs that anyone can apply for and are not set aside for people with disabilities. (Seasonal jobs and jobs from temporary agencies that other community members use are counted as competitive jobs).
- Individualized follow-along supports: Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc. Supports are provided by a variety of people, including treatment team members (e.g. medication changes, social skills training, encouragement), family, friends, co-workers (i.e. natural supports), and employment specialist. Employment specialist also provides employer support (e.g. educational information, job, accommodations) at client's request. Employment specialist offers help with career development, i.e., assistance with education, a more desirable job, or more preferred job duties.
- Time-unlimited follow-along supports: Employment specialists have face-to-face contact within 1 week before starting a job, within 3 days after starting a job, weekly for the first month, and at least monthly for a year or more, on average, after working steadily, and desired by clients. Clients are transitioned to step down job supports from a mental health worker following steady employment. Employment specialists contact clients within 3 days of learning about job loss.
- Community-based services: Employment services such as engagement, job finding and follow-along supports are provided in natural community settings by all employment specialists.

- Assertive engagement and outreach by integrated treatment team: Service termination is not based on missed appointments or fixed time limits. Systematic documentation of outreach attempts. Engagement and outreach attempts made by integrated team members. Multiple home/community visits. Coordinated visits by employment specialist with integrated team member. Connect with family, when applicable. Once it is clear that the client no longer wants to work or continue SE services, the team stops outreach.

Due Date: Applications are due electronically (or by mail) by COB March 18, 2013.

Questions about RFA: Questions about this RFA should be directed to Janine Dewey in writing by e-mail to janine.dewey@ky.gov.

Proposal Review: Your application will be reviewed and scored by a review team comprised of the state project liaisons from OVR and DBH, the state trainer from the University of Kentucky's Human Development Institute, a Mental Health Planning & Advisory Council member and a representative of the national program office at the Dartmouth Psychiatric Research Center. Site visits will be included as part of proposal review for the four top scoring applications. Announcements of selected pilot sites are anticipated to be made by April 15, 2013.

Proposal Format: Please respond to the following instructions. The narrative portion (not including the required budget documents and attachments) of the application should be no longer than 4 pages.

Contact Information

Region Name:

Contact Individual:

Address:

Phone:

Fax:

E-Mail:

Abstract Please provide a brief description of your project (100 words or less) that can be used in official publications about Kentucky's project.

Need (15 points)

Please describe the need for this service in your region. Include data on number of adults with SMI served in your Region (by county if possible) and potential numbers that might access this service. Please discuss characteristics of the population as well as the benefits of providing this service.

Capacity/Readiness (10 points)

Please describe efforts you've already taken to plan for implementing this service in your Region. Include training you may have attended, efforts to familiarize staff with the IPS

model, meetings held with partnering agencies, etc. Also describe your agency's experience with providing SE to adults with SMI and other populations, status as OVR supported employment provider and/or status as SSA designated Employment Network (EN). Identify barriers to implementing supported employment in your Region. Discuss your organizational change process for implementing evidence-based supported employment in your agency. Discuss your executive director's and/or executive team's involvement in this process.

Proposed Program (30 points)

Please describe your proposed supported employment program. Please address the following elements:

- Target population (in addition to adults with serious mental illness,
- Number to be served in the program
- Location of program
- Jurisdiction (counties to be covered)
- Supervisor and supervisory structure
- Positions to be hired
- Training plan
- Referral sources

Integration with mental health services (Please describe your capacity for integrating supported employment specialist with mental health staff at weekly team meetings; identify the specific mental health team(s) to which the supported employment specialist(s) will be assigned)

- Plan for benefits consultation
- Supported employment leadership team (Please identify members, frequency of meetings, role of team)

Partnerships (15 points)

Please describe your current relationship with your Office of Vocational Rehabilitation in your Region. Please identify the OVR Counselor(s) who will work with you in implementing this project. Describe your relationship with your local NAMI affiliate. Please identify other agency or individual relationships that will assist this project in a smooth implementation phase. Identify any other partnerships that will be necessary to implement and sustain the local program. Include letters of support and/or commitment.

Proposed Budget (30 points)

Funding for your project will need to come from a variety of sources. The DBH is providing start-up funds as well as consultation about funding sources that will help the program reach capacity as well as sustain itself over time. Department funds will be expense reimbursed for the first year of the project.

Please provide a *detailed line-item budget* for the first year of the program (SFY 2014 for 12 months) assuming full capacity (minimum one or two FTE Supported Employment Specialists; one 0.25 FTE Supported Employment Supervisor). Please use the Department's Form 101 (PBFR).

Please provide a *detailed budget justification* for each line item. For example, “two full-time SE Specialists earning \$25,000 per year”; “fringe benefits will be covered at 28% of salaries and include health insurance, retirement cost, etc”.

Please identify *sources of funding* for the project (e.g. DBHDID SFY2014 Mental Health Block Grant Allocation, State General Funds, Office of Vocational Rehabilitation – milestone payments, Health Foundation of Greater Cincinnati implementation grant, etc.)

Site Selection Criteria:

Kentucky is required to develop a competitive site selection process to select the two additional pilot sites. At a minimum, and in addition to the above proposal requirements, site selection criteria includes:

1. Site executive director commitment to participate in an organizational change process to implement evidence-based supported employment.
2. Site leadership commitments to have local mental health staff, vocational rehabilitation staff, consumers, family members, and employers participate in a SE leadership team.
3. Site leadership commitment to have Supported Employment Specialists participate as members of the mental health treatment team.
4. Acknowledgement that on-site visits to the agencies prior to selection will be made.
5. Acknowledgement that on-site visits to the agency will be made by project personnel including attendance in mental health treatment team meetings, and case record reviews
6. Commitment for collaboration between the local vocational rehabilitation administration and Regional MH/MR Board
7. Adequacy of budget to implement and sustain the supported employment program, and strength of agency’s financial commitment to dedicate funds to match program grant funds
8. Strength of agency’s work plan for building consensus and implementing high fidelity supported employment
9. Acknowledgement that quarterly outcomes data will be a requirement of participation as well as periodic site visits and fidelity reviews.

Timeline:

February 12, 2013	Issuance of Request for Applications to Regional MH/MR Boards
March 18, 2013	Applications due to Central Office by Close of Business
April 15, 2013	Announcement of pilot sites

Attachments:

- Supported Employment Principles
- Integrating Mental Health Treatment and Supported Employment
- Employment Specialist Job Description

- Supported Employment Supervisor Job Description
- Supported Employment Fidelity Scale
- J&J Supported Employment Sites – Quarterly Outcomes Report
- Commitment / acknowledgement letter (to be signed by executive director and submitted with the application)
- Project Budget and Financial Report Form (Form 101)

Checklist for Application Submission:

- Application Narrative _____
- Letter of Understanding _____
- SFY 2014 PBFR _____
- Detailed Budget Justification _____
- Support Letter(s); Letters of Commitment _____

March 18, 2013

Jeff Jamar
Acting Division Director
Kentucky Division of Behavioral Health
100 Fair Oaks Lane, 4E-D
Frankfort, KY 40621-0001

Dear Mr. Jamar:

(*Agency Name*) is applying to be one of the pilot sites under Kentucky's Dartmouth / Johnson & Johnson Supported Employment initiative for adults with serious mental illness. In making application I acknowledge that:

- Program implementation is based on adherence to the 25 item supported employment fidelity scale, the goal of which is to reach a high level of fidelity within an appropriate (12-24 months) amount time;
- Executive level involvement, leadership and commitment is an essential element of the Individual Placement and Support (IPS) model of supported employment-an organizational change process will be undertaken to assist staff and consumers in understanding the model;
- On-site and off-site technical assistance and support will be provided to each site; pilot sites will be expected to embrace this support in the spirit of process improvement;
- Pilot sites will be expected to provide quarterly outcome and other client level data as required by the Division of Behavioral Health and the national program office; and
- We will seek out available sources of funding to sustain program operation, recruit and hire appropriate staff as quickly as possible, and recruit and hire new staff (should turnover take place) as quickly as possible

Sincerely,

CEO / Executive Director
____ Regional MH/MR Board

____ CMHC

IPS Supported Employment Practice Principles

1. **Eligibility is based upon client choice.** No one is excluded because of prior work history, hospitalization history, substance use, symptoms, personal decisions about medications, personal appearance, missed appointments with mental health practitioners, or other factors. Every person is encouraged to think about employment and all interested people are referred to the IPS program.
2. **IPS supported employment services are closely integrated with mental health treatment services.** Employment specialists are assigned to one or two mental health teams from which they receive referrals. The employment specialists meet weekly with team members to think of strategies to help people with their employment and education goals. They have office space near or with the mental health treatment team and speak between meetings.
3. **Competitive jobs are the goal.** These are jobs that anyone can apply for regardless of disability status. IPS clients who are working earn the same wages as their co-workers (at least minimum wage) and are paid directly by their employers. The jobs do not have artificial time limits arranged by the vocational program. Jobs may be full or part time.
4. **Employer contact begins rapidly after clients enter the program.** There are no requirements for vocational testing, work samples, employment groups or other pre-vocational activities. Instead, the employment specialist and/or client have face-to-face contact with an employer within 30 days after the first IPS appointment.
5. **Employment specialists build relationships with employers based upon client job interests.** Employment specialists meet face-to-face with employers over time to learn about their business needs and the positions in their business. Each specialist makes at least six employer contacts each week with a person who has hiring responsibilities.
6. **Job supports are continuous.** Individualized job supports are provided until jobs are stable or until clients no longer want supports from the IPS team. Mental health practitioners (such as counselors or case managers) continue to help with job supports when clients are no longer receiving supports from the IPS team.
7. **Consumer preferences are honored.** Employment specialists and mental health practitioners provide help with work and school based upon client preferences for type of career, client strengths, preferences for supports, desires for specific work schedules, preferences about sharing disability information with employers, and so forth.
8. **Benefits planning (work incentives planning) is offered to all clients who receive entitlements.** Clients are offered personalized benefits planning before going back to work and when making decisions about changes in employment.

Integrating Mental Health Treatment and Supported Employment

Introduction

This document is intended as a tool to identify ways to integrate Supported Employment (SE) and Mental Health Treatment, as part of the evidence-based practice. It may be used as a discussion tool, or a planning tool for steps to further develop integrated services.

Definition

- ❑ Employment Specialists (ES) who provide evidence-based supported employment are full and equal participants on the mental health treatment team (MHTT). Supported employment shares the same status, importance and roles as other services such as case management, residential, psychiatry, and “clinical” services that compose the treatment team. Other services are aligned, supervised, monitored, evaluated and modified to collaboratively support each consumer’s employment goal.
- ❑ Employment specialists are each assigned to no more than one or two treatment teams. This ensures that employment specialists are able to coordinate services with mental health practitioners and still be free to spend most of their time providing services in the community.
- ❑ Employment specialists have office space that is shared with mental health practitioners or is in close proximity to their mental health team(s).
- ❑ Employment specialists attend weekly mental health treatment team meetings. If a specialist is assigned to two teams, the specialist attends each team meeting on a weekly basis. Employment specialists participate in the entire meeting to help the team think about employment for people who have not been referred to SE and to provide job leads or strategies for people who are pursuing work on their own.

Rationale

- ❑ Supporting consumers in obtaining and retaining competitive employment is most effectively accomplished when SE services are integrated.
- ❑ Consumers report that they feel frustrated when providers do not all support the employment goal in a cohesive manner.

Philosophy

- ❑ Assisting consumers in achieving their goals, especially regarding competitive employment, is a core function of the MHTT.
- ❑ When services exist that help consumers to achieve their goals, and these services have demonstrated effectiveness, consumers have a right to access these services.
- ❑ Employment is an important part of the recovery process for many consumers as they establish identities beyond the previous limitations of diagnosis and disability.

Indicators of Integrated Mental Health and Supported Employment Services

Consumer Level

- ❑ A mental health practitioner who knows the consumer well provides an introduction to the employment specialist. For example, the first meeting with the employment specialist could take place with a case manager in attendance.
- ❑ Consumers have the opportunity to request meetings with the employment specialist and MHTT.
- ❑ Case manager, medication prescribers and other MHTT members ask consumers about work-related goals, successes, concerns, and problems.
- ❑ Consumers are given the same hopeful employment-related messages from all team members.
- ❑ The consumer is aware that the employment specialist, case manager, and other clinicians work together as a team sharing information for the benefit of the consumer.
- ❑ The MHTT takes full responsibility for coordinating services, not the consumer.
- ❑ Treatment decisions are made by the consumer with equal input of all team members. For example, the team might generate several possible solutions to a problem, but the consumer is offered the opportunity to choose the strategy that feels like the best fit for him or her.

Team Level

- ❑ Employment specialists are regular and fully participating members of MHTTs as evidenced by employment specialists speaking up frequently in team meetings.
- ❑ Employment specialists are invited to bring up clients to discuss during the mental health treatment team meetings.
- ❑ Employment specialists are each assigned to no more than one or two treatment teams.

- ❑ Employment specialists attend the mental health treatment team meetings weekly. If a specialist is assigned to work with two teams, he or she attends each meeting on a weekly basis. The employment specialists stay for the entire meeting to help team members think about employment for people who have not yet been referred. The specialists can also help by sharing job ideas or job leads for people who are pursuing employment without supported employment assistance.
- ❑ Members of the MHTT provide information for employment specialists regarding the consumer's strengths, talents, abilities, community resources, hobbies, diagnoses, symptoms, psychiatric history, medications and side effects, and coping strategies that pertain to employment.
- ❑ Members of the mental health treatment team provide information for the vocational profile and employment plan. For example, a nurse might share information that a consumer tends to use substances in the evening so the employment specialist would know that the consumer would have a better chance of showing up to work sober if he got an afternoon job. A medication prescriber could share information about a person's disorganized thinking and suggest a quiet work environment to maximize the person's ability to concentrate.
- ❑ The employment specialist shares information about the job so that others on the team can support the job. For example, case manager meetings could be scheduled around the person's work schedule. A medication prescriber could make medication adjustments if the person was having problems with medication side effects on the job.
- ❑ MHTT members have knowledge of the consumer's employment goals and plan.
- ❑ Employment specialist, case manager, and other clinicians actively support the consumer's employment goals.
- ❑ Employment specialists provide observations regarding signs of medication effectiveness for symptom management during the employment process, and this information is included in medication prescribing practices.
- ❑ MHTT members work with the consumer and the employment specialist to identify early warning signs of a potential relapse or acute increase in symptoms that may appear in the employment process.
- ❑ Employment specialists and mental health treatment members collaborate in providing education and support regarding employment to the consumer's family members and/or other supporters as evidenced in the service plan and progress notes.
- ❑ Employment specialists and other MHTT members collaborate in helping consumers manage symptoms, develop coping skills and learn new skills related to employment.
- ❑ Offices of employment specialists are co-located near the offices of other MHTT members. Employment specialists and mental health practitioners communicate frequently.
- ❑ All MHTT members participate in developing ideas, referrals, sources and brainstorming regarding employment leads. For example, a therapist might share information about a job opening at his sister's business. The team could also try to brainstorm job ideas for someone who wants to work outdoors.

- ❑ Employment specialists provide feedback to MHTT members about consumer's work performance, including information about symptoms or medication side effects.
- ❑ Mental health practitioners share information about diagnoses, symptoms, medication and side effects, and coping strategies and how they might impact a job.
- ❑ Employment specialists keep the MHTT members informed of the consumer's employment status and any employment changes.
- ❑ MHTT members are informed and available to provide employment supports in necessary circumstances, especially when transitioning consumers who have developed stable employment to case managers to provide the job supports.
- ❑ Competitive employment is discussed at most MHTT meetings.

Supervisory Level

- ❑ MHTT supervisors are trained to assess, monitor, and improve integration.
- ❑ Mental health team leaders are trained in the use of employment data as a quality improvement and team evaluation.
- ❑ MHTTs are regularly evaluated on the level of integration by the team leader.
- ❑ MHTT leaders develop and implement corrective action plans to improve the integration of services on a continuous basis.
- ❑ MHTT supervisors ensure that team members are encouraging all consumers to consider employment as a goal and obtain SE services if desired by the consumer.
- ❑ MHTT supervisors ensure that all services provided by the team are coordinated with and supportive of the consumer's employment goals.

Leadership

- ❑ Executive Director explicitly defines competitive employment as part of the agency mission in supporting consumer goals and the recovery process and publicly states his/her position frequently.
- ❑ Agency identifies a leader within the agency to oversee the implementation and sustaining of SE.
- ❑ MHTT leaders ensure that employment and educational goals of consumers are discussed during team meetings.
- ❑ MHTT leaders and agency directors ensure that SE resources are not directed to other programs or services.
- ❑ MHTT leaders lead discussions about how to help consumers identify what role competitive employment may play in their recovery process.
- ❑ MHTT leaders and supervisors ensure that practitioners provide services in a hopeful, strength-based, recovery-oriented manner.
- ❑ MHTT leaders and supervisors ensure that all MHTT members have the skills and knowledge to support consumers' work efforts.
- ❑ MHTT leaders and supervisors help all team members to assess how other parts of consumers' lives and services, such as housing, medication, and benefits are impacted by employment and vice versa.

- ❑ MHTT leaders and supervisors ensure that all team members support an open self-referral process for consumers with competitive employment goals.
- ❑ MHTT leaders and supervisors highlight consumers' positive work experiences.
- ❑ MHTT leaders and supervisors review employment outcomes with the team and individual staff members on a regular basis.
- ❑ MHTT leaders and supervisors highlight staff members who demonstrate skills that reinforce the integration of employment and mental health treatment.

Organizational Level

- ❑ The agency's mission statement supports the competitive employment goals of consumers.
- ❑ The agency Executive Director communicates how SE services support the mission of the agency and articulates clear and specific goals for SE and/or competitive employment to all agency staff.
- ❑ Agency intake, assessment and treatment planning forms include questions about consumer employment goals.
- ❑ Agency services are available to employed consumers at times that allow employed consumers access to them.
- ❑ Data about competitive employment rates for people with serious mental illness is regularly collected for the agency as a whole.
- ❑ Competitive employment data is distributed to directors and managers of programs integrated with SE on a regular basis.
- ❑ Competitive employment data is used for quality improvement for job performance evaluation.
- ❑ The agency facilitates regular SE fidelity assessments that are integrated in the agency's quality improvement process. The agency responds to fidelity reports by developing a written fidelity action plan with specific timelines, action steps and persons responsible.
- ❑ The agency commits necessary resources for the provision of SE, including but not limited to community-based SE services.
- ❑ The agency carefully evaluates and makes modifications regarding all practices, policies and programs that provide disincentives for staff regarding supporting consumer competitive employment goals.
- ❑ The agency provides sufficient financial resources to support meeting times for the MHTT with supported employment staff.

SUPPORTED EMPLOYMENT FIDELITY SCALE*

1/7/08

Rater:

Site:

Date:

Total Score:

Directions: Circle one anchor number for each criterion.

Criterion

Data
Source**

Anchor

Staffing

1. Caseload size: Employment specialists have individual employment caseloads. The maximum caseload for any full-time employment specialist is 20 or fewer clients.

MIS,
DOC, INT

- 1= Ratio of 41 or more clients per employment specialist.
- 2= Ratio of 31-40 clients per employment specialist.
- 3= Ratio of 26-30 clients per employment specialist.
- 4= Ratio of 21-25 clients per employment specialist.
- 5= Ratio of 20 or fewer clients per employment specialist.

2. Employment services staff: Employment specialists provide only employment services.

MIS, DOC
INT

- 1= Employment specialists provide employment services less than 60% of the time.
- 2= Employment specialists provide employment services 60 - 74% of the time.
- 3= Employment specialists provide employment services 75 - 89% of the time.
- 4= Employment specialists provide employment services 90 - 95% of the time.
- 5= Employment specialists provide employment services 96% or more of the time.

*Formerly called IPS Model Fidelity Scale

**See end of document for key

3. Vocational generalists: Each employment specialist carries out all phases of employment service, including intake, engagement, assessment, job placement, job coaching, and follow-along supports before step down to less intensive employment support from another MH practitioner. (Note: It is not expected that each employment specialist will provide benefits counseling to their clients. Referrals to a highly trained benefits counselor are in keeping with high fidelity, see Item # 1 in “Services”.)

MIS, DOC,
INT, OBS

- 1= Employment specialist only provides vocational referral service to vendors and other programs.
- 2= Employment specialist maintains caseload but refers clients to other programs for vocational services.
- 3= Employment specialist provides one to four phases of the employment service (e.g. intake, engagement, assessment, job development, job placement, job coaching, and follow along supports).
- 4= Employment specialist provides five phases of employment service but not the entire service.
- 5= Employment specialist carries out all six phases of employment service (e.g. program intake, engagement, assessment, job development/job placement, job coaching, and follow-along supports).

ORGANIZATION

1. Integration of rehabilitation with mental health treatment thru team assignment: Employment specialists are part of up to 2 mental health treatment teams from which at least 90% of the employment specialist’s caseload is comprised.

MIS, DOC,
INT, OBS

- 1= Employment specialists are part of a vocational program that functions separately from the mental health treatment.
- 2= Employment specialists are attached to three or more mental health treatment teams. OR Clients are served by individual mental health practitioners who are not organized into teams. OR Employment specialists are attached to one or two teams from which less than 50% of the employment specialist’s caseload is comprised.
- 3= Employment specialists are attached to one or two mental health treatment teams, from which at least 50 - 74% of the employment specialist’s caseload is comprised.
- 4= Employment specialists are attached to one or two mental health treatment teams, from which at least 75 - 89% of the employment specialist’s caseload is comprised.
- 5= Employment specialists are attached to one or two mental health treatment teams, from which 90 - 100% of the employment specialist’s caseload is comprised.

2. Integration of rehabilitation with mental health treatment thru frequent team member contact:

MIS, DOC
INT, OBS

Employment specialists actively participate in weekly mental health treatment team meetings (not replaced by administrative meetings) that discuss individual clients and their employment goals with shared decision-making. Employment specialist's office is in close proximity to (or shared with) their mental health treatment team members. Documentation of mental health treatment and employment services are integrated in a single client chart. Employment specialists help the team think about employment for people who haven't yet been referred to supported employment services.

1= One or none is present.

2= Two are present

3= Three are present.

4= Four are present.

5= Five are present.

All five key components are present.

- Employment specialist attends weekly mental health treatment team meetings.
- Employment specialist participates actively in treatment team meetings with shared decision-making.
- Employment services documentation (i.e., vocational assessment/profile, employment plan, progress notes) is integrated into client's mental health treatment record.
- Employment specialist's office is in close proximity to (or shared with) their mental health treatment team members.
- Employment specialist helps the team think about employment for people who haven't yet been referred to supported employment services.

3. Collaboration between employment specialists and Vocational Rehabilitation counselors: The employment specialists and VR counselors have frequent contact for the purpose of discussing shared clients and identifying potential referrals.

DOC, INT
OBS, ISP

1= Employment specialists and VR counselors have client-related contacts (phone, e-mail, in person) less than quarterly to discuss shared clients and referrals. OR Employment specialists and VR counselors do not communicate.

2= Employment specialists and VR counselors have client-related contacts (phone, e-mail, in person) at least quarterly to discuss shared clients and referrals.

3= Employment specialists and VR counselors have client-related contacts (phone, e-mail, in-person) monthly to discuss shared clients and referrals.

4= Employment specialists and VR counselors have scheduled, face-to-face

4. Vocational unit: At least 2 full-time employment specialists and a team leader comprise the employment unit. They have weekly client-based group supervision following the supported employment model in which strategies are identified and job leads are shared. They provide coverage for each other's caseload when needed.

MIS, INT,
OBS

meetings at least quarterly, OR have client-related contacts (phone, e-mail, in person) weekly to discuss shared clients and referrals.

- 5= Employment specialists and VR counselors have scheduled, face-to-face meetings at least monthly and have client-related contacts (phone, e-mail, in person) weekly to discuss shared clients and referrals.
- 1= Employment specialists are not part of a vocational unit.
- 2= Employment specialists have the same supervisor but do not meet as a group. They do not provide back-up services for each other's caseload.
- 3= Employment specialists have the same supervisor and discuss clients between each other on a weekly basis. They provide back-up services for each other's caseloads as needed. OR, If a program is in a rural area where employment specialists are geographically separate with one employment specialist at each site, the employment specialists meet 2-3 times monthly with their supervisor by teleconference.
- 4= At least 2 employment specialists and a team leader form an employment unit with 2-3 regularly scheduled meetings per month for client-based group supervision in which strategies are identified and job leads are shared and discuss clients between each other. They provide coverage for each other's caseloads when needed. OR, If a program is in a rural area where employment specialists are geographically separate with one employment specialist at each site, the employment specialists meet 2-3 times per month with their supervisor in person or by teleconference and mental health practitioners are available to help the employment specialist with activities such as taking someone to work or picking up job applications.
- 5= At least 2 full-time employment specialists and a team leader form an employment unit with weekly client-based group supervision based on the supported employment model in which strategies are identified and job leads are shared. They provide coverage for each other's caseloads when needed.

5. Role of employment supervisor: Supported employment unit is led by a supported employment team leader. Employment specialists' skills are developed and improved through outcome-based supervision. All five key roles of the employment supervisor are present.

MIS, INT,
DOC, OBS

1= One or none is present.

2= Two are present.

3= Three are present.

4= Four are present.

5= Five are present.

Five key roles of the employment supervisor:

- One full-time equivalent (FTE) supervisor is responsible for no more than 10 employment specialists. The supervisor does not have other supervisory responsibilities. (Program leaders supervising fewer than ten employment specialists may spend a percentage of time on other supervisory activities on a prorated basis. For example, an employment supervisor responsible for 4 employment specialists may be devoted to SE supervision half time.)
- Supervisor conducts weekly supported employment supervision designed to review client situations and identify new strategies and ideas to help clients in their work lives.
- Supervisor communicates with mental health treatment team leaders to ensure that services are integrated, to problem solve programmatic issues (such as referral process, or transfer of follow-along to mental health workers) and to be a champion for the value of work. Attends a meeting for each mental health treatment team on a quarterly basis.
- Supervisor accompanies employment specialists, who are new or having difficulty with job development, in the field monthly to improve skills by observing, modeling, and giving feedback on skills, e.g., meeting employers for job development.
- Supervisor reviews current client outcomes with employment specialists and sets goals to improve program performance at least quarterly.

6. Zero exclusion criteria: All clients interested in working have access to supported employment services regardless of job readiness factors, substance abuse, symptoms, history of violent behavior, cognition impairments, treatment non-adherence, and personal presentation. These apply during supported employment services too. Employment specialists offer to help with another job when one has ended, regardless of the reason that the job ended or number of jobs held. If VR has screening criteria, the mental health agency does not use them to exclude anybody. Clients are not screened out formally or informally.

DOC, INT
OBS

- 1= There is a formal policy to exclude clients due to lack of job readiness (e.g., substance abuse, history of violence, low level of functioning, etc.) by employment staff, case managers, or other practitioners.
- 2= Most clients are unable to access supported employment services due to perceived lack of job readiness (e.g., substance abuse, history of violence, low level of functioning, etc.).
- 3= Some clients are unable to access supported employment services due to perceived lack of job readiness (e.g., substance abuse, history of violence, low level of functioning, etc.).
- 4= No evidence of exclusion, formal or informal. Referrals are not solicited by a wide variety of sources. Employment specialists offer to help with another job when one has ended, regardless of the reason that the job ended or number of jobs held.
- 5= All clients interested in working have access to supported employment services. Mental health practitioners encourage clients to consider employment, and referrals for supported employment are solicited by many sources. Employment specialists offer to help with another job when one has ended, regardless of the reason that the job ended or number of jobs held.

7. Agency focus on competitive employment: Agency promotes competitive work through multiple strategies. Agency intake includes questions about interest in employment. Agency displays written postings (e.g., brochures, bulletin boards, posters) about employment and supported employment services. The focus should be with the agency programs that provide services to adults with severe mental illness. Agency supports ways for clients to share work stories with other clients and staff. Agency measures rate of competitive employment and shares this information with agency leadership and staff.

DOC, INT,
OBS

- 1= One or none is present.
- 2= Two are present.
- 3= Three are present.
- 4= Four are present.
- 5= Five are present.

Agency promotes competitive work through multiple strategies:

- Agency intake includes questions about interest in employment.
- Agency includes questions about interest in employment on all annual (or semi-annual) assessment or treatment plan reviews.

- Agency displays written postings (e.g., brochures, bulletin boards, posters) about working and supported employment services, in lobby and other waiting areas.
- Agency supports ways for clients to share work stories with other clients and staff (e.g., agency-wide employment recognition events, in-service training, peer support groups, agency newsletter articles, invited speakers at client treatment groups, etc.) at least twice a year.
- Agency measures rate of competitive employment on at least a quarterly basis and shares outcomes with agency leadership and staff.

8. Executive team support for SE: Agency executive team members (e.g., CEO/Executive Director, Chief Operating Officer, QA Director, Chief Financial Officer, Clinical Director, Medical Director, Human Resource Director) assist with supported employment implementation and sustainability. All five key components of executive team support are present. DOC, INT, OBS

1= One is present.

2= Two are present.

3= Three are present.

4= Four are present.

5= Five are present.

- Executive Director and Clinical Director demonstrate knowledge regarding the principles of evidence-based supported employment.
- Agency QA process includes an explicit review of the SE program, or components of the program, at least every 6 months through the use of the Supported Employment Fidelity Scale or until achieving high fidelity, and at least yearly thereafter. Agency QA process uses the results of the fidelity assessment to improve SE implementation and sustainability.
- At least one member of the executive team actively participates at SE leadership team meetings (steering committee meetings) that occur at least every six months for high fidelity programs and at least quarterly for programs that have not yet achieved high fidelity. Steering committee is defined as a diverse group of stakeholders charged with reviewing fidelity, program implementation, and the service delivery system. Committee develops written action plans aimed at developing or sustaining high fidelity services.

- The agency CEO/Executive Director communicates how SE services support the mission of the agency and articulates clear and specific goals for SE and/or competitive employment to all agency staff during the first six months and at least annually (i.e., SE kickoff, all-agency meetings, agency newsletters, etc.). This item is not delegated to another administrator.
- SE program leader shares information about EBP barriers and facilitators with the executive team (including the CEO) at least twice each year. The executive team helps the program leader identify and implement solutions to barriers.

SERVICES

1. Work incentives planning: All clients are offered assistance in obtaining comprehensive, individualized work incentives planning before starting a new job and assistance accessing work incentives planning thereafter when making decisions about changes in work hours and pay. Work incentives planning includes SSA benefits, medical benefits, medication subsidies, housing subsidies, food stamps, spouse and dependent children benefits, past job retirement benefits and any other source of income. Clients are provided information and assistance about reporting earnings to SSA, housing programs, VA programs, etc., depending on the person's benefits.

- DOC, INT
OBS, ISP
- 1= Work incentives planning is not readily available or easily accessible to most clients served by the agency.
 - 2= Employment specialist gives client contact information about where to access information about work incentives planning.
 - 3= Employment specialist discusses with each client changes in benefits based on work status.
 - 4= Employment specialist or other MH practitioner offer clients assistance in obtaining comprehensive, individualized work incentives planning by a person trained in work incentives planning prior to client starting a job.
 - 5= Employment specialist or other MH practitioner offer clients assistance in obtaining comprehensive, individualized work incentives planning by a specially trained work incentives planner prior to starting a job. They also facilitate access to work incentives planning when clients need to make decisions about changes in work hours and pay. Clients are provided information and assistance about reporting earnings to SSA, housing programs, etc., depending on the person's benefits.

2. Disclosure: Employment specialists provide clients with accurate information and assist with evaluating their choices to make an informed decision regarding what is revealed to the employer about having a disability.

DOC, INT
OBS

1= None is present.

2= One is present.

3= Two are present.

4= Three are present.

5= Four are present.

- Employment specialists do not require all clients to disclose their psychiatric disability at the work site in order to receive services.
- Employment specialists offer to discuss with clients the possible costs and benefits (pros and cons) of disclosure at the work site in advance of clients disclosing at the work site. Employment specialists describe how disclosure relates to requesting accommodations and the employment specialist's role communicating with the employer.
- Employment specialists discuss specific information to be disclosed (e.g., disclose receiving mental health treatment, or presence of a psychiatric disability, or difficulty with anxiety, or unemployed for a period of time, etc.) and offers examples of what could be said to employers.
- Employment specialists discuss disclosure on more than one occasion (e.g., if clients have not found employment after two months or if clients report difficulties on the job.)

3. Ongoing, work-based vocational assessment: Initial vocational assessment occurs over 2-3 sessions and is updated with information from work experiences in competitive jobs. A vocational profile form that includes information about preferences, experiences, skills, current adjustment, strengths, personal contacts, etc, is updated with each new job experience. Aims at problem solving using environmental assessments and consideration of reasonable accommodations. Sources of information include the client, treatment team, clinical records, and with

DOC, INT,
OBS, ISP

1= Vocational evaluation is conducted prior to job placement with emphasis on office-based assessments, standardized tests, intelligence tests, work samples.

2= Vocational assessment may occur through a stepwise approach that includes: prevocational work experiences (e.g., work units in a day program), volunteer jobs, or set aside jobs (e.g., NISH jobs agency-run businesses, sheltered workshop jobs, affirmative businesses, enclaves).

3= Employment specialists assist clients in finding competitive jobs directly without systematically reviewing interests, experiences, strengths,

the client's permission, from family members and previous employers.

etc. and do not routinely analyze job loss (or job problems) for lessons learned.

- 4= Initial vocational assessment occurs over 2-3 sessions in which interests and strengths are explored. Employment specialists help clients learn from each job experience and also work with the treatment team to analyze job loss, job problems and job successes. They do not document these lessons learned in the vocational profile, OR The vocational profile is not updated on a regular basis.
- 5= Initial vocational assessment occurs over 2-3 sessions and information is documented on a vocational profile form that includes preferences, experiences, skills, current adjustment, strengths, personal contacts, etc. The vocational profile form is used to identify job types and work environments. It is updated with each new job experience. Aims at problem solving using environmental assessments and consideration of reasonable accommodations. Sources of information include the client, treatment team, clinical records, and with the client's permission, from family members and previous employers. Employment specialists help clients learn from each job experience and also work with the treatment team to analyze job loss, job problems and job successes.

4. Rapid job search for competitive job: Initial employment assessment and first face-to-face employer contact by the client or the employment specialist about a competitive job occurs within 30 days (one month) after program entry.

DOC, INT,
OBS, ISP

- 1= First face-to-face contact with an employer by the client or the employment specialist about a competitive job is on average 271 days or more (> 9 mos.) after program entry.
- 2= First face-to-face contact with an employer by the client or the employment specialist about a competitive job is on average between 151 and 270 days (5-9 mos.) after program entry.
- 3= First face-to-face contact with an employer by the client or the employment specialist about a competitive job is on average between 61 and 150 days (2-5 mos.) after program entry.
- 4= First face-to-face contact with an employer by the client or the employment specialist about a competitive job is on average between 31 and 60 days (1-2 mos.) after program entry.
- 5= The program tracks employer contacts and the first face-to-face contact with an employer by the client or the employment specialist about a competitive job is on average within 30 days (one month) after program entry.

*Formerly called IPS Model Fidelity Scale

**See end of document for key

5. Individualized job search: Employment specialists make employer contacts aimed at making a good job match based on clients' preferences (relating to what each person enjoys and their personal goals) and needs (including experience, ability, symptomatology, health, etc.) rather than the job market (i.e., those jobs that are readily available). An individualized job search plan is developed and updated with information from the vocational assessment/profile form and new job/educational experiences.

DOC, INT
OBS, ISP

- 1= Less than 25% of employer contacts by the employment specialist are based on job choices which reflect client's preferences, strengths, symptoms, etc. rather than the job market.
- 2= 25-49% of employer contacts by the employment specialist are based on job choices which reflect client's preferences, strengths, symptoms, etc., rather than the job market.
- 3= 50-74% of employer contacts by the employment specialist are based on job choices which reflect client's preferences, strengths, symptoms, etc., rather than the job market.
- 4= 75-89% of employer contacts by the employment specialist are based on job choices which reflect client's preferences, strengths, symptoms, etc., rather than the job market and are consistent with the current employment plan.
- 5= Employment specialist makes employer contacts based on job choices which reflect client's preferences, strengths, symptoms, lessons learned from previous jobs etc., 90-100% of the time rather than the job market and are consistent with the current employment/job search plan. When clients have limited work experience, employment specialists provide information about a range of job options in the community.

6. Job development - Frequent employer contact: Each employment specialist makes at least 6 face to-face employer contacts per week on behalf of clients looking for work. (Rate for each then calculate average and use the closest scale point.) An employer contact is counted even when an employment specialist meets the same employer more than one time in a week, and when the client is present or not present. Client-specific and generic contacts are included. Employment specialists use a weekly tracking form to document employer contacts.

DOC, INT

- 1= Employment specialist makes less than 2 face-to-face employer contacts that are client-specific per week.
- 2= Employment specialist makes 2 face-to-face employer contacts per week that are client-specific, OR Does not have a process for tracking.
- 3= Employment specialist makes 4 face-to-face employer contacts per week that are client-specific, and uses a tracking form that is reviewed by the SE supervisor on a monthly basis.
- 4= Employment specialist makes 5 face-to-face employer contacts per week that are client-specific, and uses a tracking form that is reviewed by the SE supervisor on a weekly basis.

5= Employment specialist makes 6 or more face-to-face employer contacts per week that are client specific, or 2 employer contacts times the number of people looking for work when there are less than 3 people looking for work on their caseload (e.g., new program). In addition, employment specialist uses a tracking form that is reviewed by the SE supervisor on a weekly basis.

7. Job development - Quality of employer contact:
Employment specialists build relationships with employers through multiple visits in person that are planned to learn the needs of the employer, convey what the SE program offers to the employer, describe client strengths that are a good match for the employer. (Rate for each employment specialist, then calculate average and use the closest scale point.)

DOC, INT,
OBS

- 1= Employment specialist meets employer when helping client to turn in job applications, OR Employment specialist rarely makes employer contacts.
- 2= Employment specialist contacts employers to ask about job openings and then shares these “leads” with clients.
- 3= Employment specialist follows up on advertised job openings by introducing self, describing program, and asking employer to interview client.
- 4= Employment specialist meets with employers in person whether or not there is a job opening, advocates for clients by describing strengths and asks employers to interview clients.
- 5= Employment specialist builds relationships with employers through multiple visits in person that are planned to learn the needs of the employer, convey what the SE program offers to the employer, describe client strengths that are a good match for the employer.

8. Diversity of job types: Employment specialists assist clients in obtaining different types of jobs.

DOC, INT,
OBS, ISP

- 1= Employment specialists assist clients obtain different types of jobs less than 50% of the time.
- 2= Employment specialists assist clients obtain different types of jobs 50-59% of the time.
- 3= Employment specialists assist clients obtain different types of jobs 60-69% of the time.
- 4= Employment specialists assist clients obtain different types of jobs 70-84% of the time.

9. Diversity of employers: Employment specialists assist clients in obtaining jobs with different employers.

DOC, INT,
OBS, ISP

5= Employment specialists assist clients obtain different types of jobs 85-100% of the time.

1= Employment specialists assist clients obtain jobs with the different employers less than 50% of the time.

2= Employment specialists assist clients obtain jobs with the same employers 50-59% of the time.

3= Employment specialists assist clients obtain jobs with different employers 60-69% of the time.

4= Employment specialists assist clients obtain jobs with different employers 70-84% of the time.

5= Employment specialists assist clients obtain jobs with different employers 85-100% of the time.

10. Competitive jobs: Employment specialists provide competitive job options that have permanent status rather than temporary or time-limited status, e.g., TE (transitional employment positions). Competitive jobs pay at least minimum wage, are jobs that anyone can apply for and are not set aside for people with disabilities. (Seasonal jobs and jobs from temporary agencies that other community members use are counted as competitive jobs.)

DOC, INT,
OBS, ISP

1= Employment specialists provide options for permanent, competitive jobs less than 64% of the time, OR There are fewer than 10 current jobs.

2= Employment specialists provide options for permanent, competitive jobs about 65- 74% of the time.

3= Employment specialists provide options for permanent competitive jobs about 75-84%% of the time.

4= Employment specialists provide options for permanent competitive jobs about 85-94% of the time.

5= 95% or more competitive jobs held by clients are permanent.

11. Individualized follow-along supports:

Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc. Supports are provided by a variety of people, including treatment team members (e.g., medication changes, social skills training, encouragement), family, friends, co-workers (i.e., natural supports), and employment specialist. Employment specialist also provides employer support (e.g., educational information, job, accommodations) at client's request. Employment specialist offers help with career development, i.e., assistance with education, a more desirable job, or more preferred job duties.

DOC, INT,
OBS, ISP

- 1= Most clients do not receive supports after starting a job.
- 2= About half of the working clients receive a narrow range of supports provided primarily by the employment specialist.
- 3= Most working clients receive a narrow range of supports that are provided primarily by the employment specialist.
- 4= Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc. Employment specialists provide employer supports at the client's request.
- 5= Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc. Employment specialist also provides employer support (e.g., educational information, job accommodations) at client's request. The employment specialist helps people move onto more preferable jobs and also helps people with school or certified training programs. The site provides examples of different types of support including enhanced supports by treatment team members.

12. Time-unlimited follow-along supports:

Employment specialists have face-to-face contact within 1 week before starting a job, within 3 days after starting a job, weekly for the first month, and at least monthly for a year or more, on average, after working steadily, and desired by clients. Clients are transitioned to step down job supports from a mental health worker following steady employment. Employment specialists contact clients within 3 days of learning about the job loss.

DOC, INT,
OBS, ISP

- 1= Employment specialist does not meet face-to-face with the client after the first month of starting a job.
- 2= Employment specialist has face-to-face contact with less than half of the working clients for at least 4 months after starting a job.
- 3= Employment specialist has face-to-face contact with at least half of the working clients for at least 4 months after starting a job.
- 4= Employment specialist has face-to-face contact with working clients weekly for the first month after starting a job, and at least monthly for a year or more, on average, after working steadily, and desired by clients.
- 5= Employment specialist has face-to-face contact within 1 week before starting a job, within 3 days after starting a job, weekly for the first month, and at least monthly for a year or more, on average, after working steadily and desired by clients. Clients are transitioned to step down job supports, from a mental health worker following steady employment clients. Clients are transitioned to step down job supports from a mental health worker following steady employment.

Employment specialist contacts clients within 3 days of hearing about the job loss.

13. Community-based services: Employment services such as engagement, job finding and follow-along supports are provided in natural community settings by all employment specialists. (Rate each employment specialist based upon their total weekly scheduled work hours then, calculate the average and use the closest scale point.)

DOC, INT
OBS

- 1= Employment specialist spends 30% time or less in the scheduled work hours in the community.
- 2= Employment specialist spends 30 - 39% time of total scheduled work hours in the community.
- 3= Employment specialist spends 40 -49% of total scheduled work hours in the then community.
- 4= Employment specialist spends 50 - 64% of total scheduled work hours in the community.
- 5= Employment specialist spends 65% or more of total scheduled work hours in the community.

14. Assertive engagement and outreach by integrated treatment team: Service termination is not based on missed appointments or fixed time limits. Systematic documentation of outreach attempts. Engagement and outreach attempts made by integrated team members. Multiple home/community visits. Coordinated visits by employment specialist with integrated team member. Connect with family, when applicable. Once it is clear that the client no longer wants to work or continue SE services, the team stops outreach.

MIS, DOC,
INT, OBS

- 1= Evidence that 2 or less strategies for engagement and outreach are used.
- 2= Evidence that 3 strategies for engagement and outreach are used.
- 3= Evidence that 4 strategies for engagement and outreach are used.
- 4= Evidence that 5 strategies for engagement and outreach are used.
- 5= Evidence that all 6 strategies for engagement and outreach are used: i) Service termination is not based on missed appointments or fixed time limits. ii) Systematic documentation of outreach attempts. iii) Engagement and outreach attempts made by integrated team members. iv) Multiple home/community visits. v) Coordinated visits by employment specialist with integrated team member. vi) Connect with family, when applicable.

*Data sources:

- MIS Management Information System
- DOC Document review: clinical records, agency policy and procedures
- INT Interviews with clients, employment specialists, mental health staff,
VR counselors, families, employers
- OBS Observation (e.g., team meeting, shadowing employment specialists)
- ISP Individualized Service Plan

2/14/96
6/20/01, Updated
1/7/08, Revised

Supported Employment Fidelity Scale Score Sheet

Staffing		
1.	Caseload size	Score:
2.	Employment services staff	Score:
3.	Vocational generalists	Score:
Organization		
1.	Integration of rehabilitation with mental health thru team assignment	Score:
2.	Integration of rehabilitation with mental health thru frequent team member contact	Score:
3.	Collaboration between employment specialists and Vocational Rehabilitation counselors	Score:
4.	Vocational unit	Score:
5.	Role of employment supervisor	Score:
6.	Zero exclusion criteria	Score:
7.	Agency focus on competitive employment	Score:
8.	Executive team support for SE	Score:
Services		
1.	Work incentives planning	Score:
2.	Disclosure	Score:
3.	Ongoing, work-based vocational assessment	Score:
4.	Rapid search for competitive job	Score:
5.	Individualized job search	Score:
6.	Job development—Frequent employer contact	Score:
7.	Job development—Quality of employer contact	Score:
8.	Diversity of job types	Score:
9.	Diversity of employers	Score:
10.	Competitive jobs	Score:
11.	Individualized follow-along supports	Score:
12.	Time-unlimited follow-along supports	Score:
13.	Community-based services	Score:
14.	Assertive engagement and outreach by integrated treatment team	Score:
	Total:	

115 – 125	= Exemplary Fidelity
100 - 114	= Good Fidelity
74 – 99	= Fair Fidelity
73 and below	= Not Supported Employment

*Formerly called IPS Model Fidelity Scale

**See end of document for key

Sample IPS Supported Employment Supervisor Job Description

Overall Function: Provides oversight to the IPS supported employment program. Ensures good program outcomes by providing training, supervision and field mentoring for staff, monitoring outcomes, and implementing quality improvement plans. Also acts as a liaison to other departments and agencies. Responsible for no more than 8 employment specialists. Also, provides IPS supported employment services for a small caseload (2-3 people).

Responsibilities:

Hires, trains, and evaluates employment specialists. Develops expectations for specialists regarding community time, employer contacts, and employment rate (percentage of people employed on each caseload).

Assigns each employment specialist to one or two mental health teams. Attends each mental health treatment team at least once per month to enhance integrated services.

Conducts weekly group supervision following the principles of IPS supported employment.

Provides individual supervision for employment specialists. Supervision includes some office-based sessions, as well as field mentoring. Provides field mentoring for each person on the team. Provides frequent (weekly or monthly) field mentoring for new specialists or specialists with outcomes that are less than desired.

Collects client and process outcomes on a monthly basis. Shares outcomes for the program, as well as for individual practitioners, with the IPS supported employment team quarterly. Helps team set goals for improvement. Reviews individual outcomes with each practitioner, develops written plans for improvement that include assistance from the supervisor, and helps practitioners set goals.

Acts as a liaison to other department coordinators and administrators at the agency. Communicates regularly with mental health supervisors to ensure that services are integrated, to problem-solve program issues and to act as a champion for employment. Informs administrators of program successes and challenges at least quarterly.

Works with local vocational rehabilitation (VR) office to coordinate programs and services. Provides outreach to VR to offer monthly meetings to discuss shared cases. Meets with VR supervisor at least annually to discuss shared outcomes.

Arranges for IPS supported employment fidelity reviews. Assists with fidelity action plans based upon recommendations from the fidelity report.

Leads the development of internal and external steering committees to help with IPS supported employment implementation and sustainability.

Provides IPS supported employment services to a small caseload. If the number of employment specialists is seven or eight, the caseload size will not exceed two people.

Qualifications: Master's degree in rehabilitation counseling or related field is preferred. Bachelor's degree is required. Previous experience as an employment specialist is desired. Previous supervisory experience is valued.

Employment Specialist Job Description

Overall Function: Helps clients find and keep competitive employment that is consistent with their vocational goals.

Responsibilities: Engages clients and establishes trusting, collaborative relationships directed toward the goal of competitive employment in community settings.

Assists clients in learning how their benefits will be affected by earned income. For example, refers clients for benefits planning to learn about work incentives offered by Social Security Administration. After employment is achieved, assists with an individualized plan for reporting earnings to Social Security Administration or other sources of benefits.

Helps clients think about long-term employment goals, work history, strengths, personal culture (as defined by each person), justice involvement, and other factors that relate to a current vocational goal. Completes career profile for each new client with information from the client, mental health practitioners, and with permission, family members or past employers. Updates the profile with each new job and education experience.

With the client's permission, provides education and support to family members about work and gathers input about skills, interests, strengths of the client and ideas for support.

Discusses client's preference for disclosure of psychiatric status to employers, including possible costs and benefits and specific information to be disclosed. Provides assistance with the job search regardless of client's preferences regarding disclosure (i.e., support without employer contact when client chooses not to disclose).

Develops an individual employment plan with the client and with input from the mental health worker, other treatment team providers (for example, the VR counselor) and family members (with permission). Incorporates information about the person's culture (as defined by each client) that related to work and school. Updates the employment plan quarterly or when there is a change in employment or education status.

Conducts job development and job search activities directed toward positions that are individualized to the interests and uniqueness of the people on his/her caseload, following the principles and procedures of IPS.

Conducts at least six employer contacts each week to learn about businesses and employer needs, to talk about specific clients who are looking for work and/or to talk about employer services offered by the IPS program.

Is responsible for a minimum of 12 job starts each year after the first year of employment.

Supports clients making employer contacts by applying for jobs, or learning more about jobs available in the community, within 30 days of program entry, on average.

Provides individualized follow-along supports to assist clients in maintaining employment. Provides frequent in-person supports during the first month of a new job and at least monthly after working steadily and desired by clients.

Provides education and support to employers as agreed upon by clients, which may include negotiating job accommodations and follow-along contact with the employer/educator.

Provides outreach services as necessary to clients when they miss appointments. Uses a variety of methods to discover what is interfering with the person's employment plan.

Participates in weekly meetings with mental health treatment team and communicates individually with team members between meetings in order to coordinate services and generate ideas to help people achieve their employment goals.

Attends monthly meetings with VR counselors to discuss possible referrals and shared clients. Communicates with VR counselors between monthly meetings.

Spends at least 65% or more of total scheduled work hours in the community. For example, meets with clients in community settings and develops relationships with managers at their businesses.

Helps clients with career development including finding jobs that are more desirable, helping people ask for raises and promotions, and helping with education and training programs that are available to the general public. Provides supported education, using principles similar to IPS, for clients who express interest in education to advance their employment goals.

Qualifications: Education and experience equivalent to undergraduate degree in mental health, social services, or business. Experience working with people with serious mental illnesses, experience providing employment services, and knowledge of the work world are preferred. Ability to work as an effective team member is essential.

IPS Supported Employment Supervisor Job Description

Overall Function: Ensures good employment outcomes for clients in the IPS supported employment program. For example, at least 45—50% employment on the IPS team and an average of 12 job starts per employment specialist each year.

Responsibilities: Hires and trains employment specialists. Evaluates job performance and helps each specialist set goals for improved performance.

Assigns each employment specialist to one to two mental health teams
Monitors referrals to the IPS program and ensures that each employment specialist is assigned to work with clients from their mental health treatment team(s).

Conducts weekly group supervision to the IPS team through vocational unit meetings that follow the principles and procedures of IPS. Meetings are designed so that specialists can think of strategies to help people in their working lives, discuss how to further employer relationships and share job leads, and celebrate successes.

Teaches essential job skills to employment specialists including building employer relationships, engaging clients, conducting the career profile, developing individualized employment goals, client interviewing skills, and providing job supports. Models and observes skills in the field, as well as providing office-based individual supervision. For example, goes into the field with employment specialists to meet with employers and shadows employment specialists while meeting with clients in order to help each specialist develop good client interviewing skills.

Monitors the employment specialist's role and participation on the mental health treatment teams to enhance integrated services at the delivery level. Attends a meeting for each mental health treatment team on a quarterly basis.

Acts as liaison to other department supervisors in the mental health agency. Communicates regularly with mental health supervisors to ensure that services are integrated, to problem-solve programmatic issues, and to serve as a champion for employment.

Works with the local Vocational Rehabilitation (VR) office to coordinate programming issues and client services. Provides outreach to VR to offer integrated services (i.e., meetings to discuss client status, shared office space, etc.).

Tracks employment outcomes on a monthly basis, and by employment specialist, including job dates, hours worked, wages earned, employers, and job titles. Also tracks process outcomes including number of employer contacts by each specialist, fidelity scores, and number of days to first employer contact by the employment specialist or client. Reviews employment outcomes with employment specialists on at least a quarterly basis. Helps employment specialists to set numeric goals for improved performance and develops written plans to help specialists reach their goals.

Participates in development of IPS supported employment steering committee that meets two to four times annually to oversee the implementation and sustainability of the IPS program.

Arranges for IPS fidelity reviews to ensure agency is implementing the critical components of evidence-based supported employment. Assists with the development of the IPS fidelity action plan, based on recommendations from the IPS supported employment fidelity review report.

Meets with the executive team at least twice each year to discuss facilitators and barriers to the IPS program.

Qualifications: Master's degree in rehabilitation counseling or related field. Previous experience as an employment specialist assisting clients with serious mental illness in obtaining and maintaining competitive employment is desired. Previous supervisory experience is desired.