

# Supported Employment Workgroup Meeting

July 31, 2008 1-3 pm

Meeting Notes

## Sustainability of Center for Excellence Overview (Crystal McMahon and Terry Mastin):

The Center for Excellence is a collaborative effort between Options for Southern Oregon (Crystal McMahon), Lifeworks NW (Sandy Reese), Portland State University (Regional Research Institute), AMHD and OVRS to work towards the transfer from day treatment model to an evidence-based supported employment model for persons with serious and persistent mental health. The evidence based supported employment model is based on Johnson and Johnson/Dartmouth's evidence-based practices (Individual Placement and Support Model – IPS) for serious and persistent mental health. The Center for Excellence includes an Advisory Board, and Peer Support Component. The advisory board meets quarterly.

Currently, the program is running in 14 counties across the state that has supported employment. Lifeworks and Options have the contract for 18 months. The employment specialist providing supported employment has to be a qualified mental health clinician, working in a mental health center, part of the mental health team. The supported employment component includes job coaching, job development, practice interviewing, and writing resumes. Agencies that are a part of the Evidence-based Supported Employment have to meet good fidelity levels before they can participate. Good fidelity means achieving 100 or more on the fidelity scale. If you reach “good fidelity” which is 100 to 125, then you can bill some of the time directly to the state/Medicaid for “fee for service”. The Center has already conducted baseline fidelity reviews with all the 14 counties. They created action plans so those that scored beneath the benchmark can access Medicaid later. These action plans will enable them to reach fidelity.

Center Outcomes (Regional Research Institute {RRI} compiles the data):

- 350 in IPS
- Under 200 that are working
- 646 (from the past 6 months) who are receiving IPS
- 254 working in competitive employment
- 197 new enrollees

## Center Funding:

Options, Lifeworks and RRI (Regional Research Institute) have co-written 5-6 grants and are looking at foundations, other grant opportunities and/or other sources of revenue.

Crystal noted that she would like to wait on deciding whether to keep sustainability of the Center for Excellence as one of the workgroup's goals. We will consult with some key folks first. As a workgroup, we can discuss it further via email. Also, there are several other entities working on funding so we don't want to duplicate their efforts.

## Traumatic Brain Injury Legislation/Funding (Sherry Stock):

We have 6 pieces of legislation this session. They are:

- 1) A bill asking for an optional \$5 on every moving traffic violation. This bill was passed in Washington State in 2007. The funds will go to DHS for brain injury support services.
- 2) A bill requiring all medical insurance in the State of Oregon to cover cognitive rehabilitation. This bill was passed in Texas in 2007.
- 3) A Traumatic Brain Injury (TBI)/Acquired Brain Injury (ABI) Community Based Waiver. Currently 28 states offer this waiver in some form. This waiver would allow persons with ABI between ages 21-65 who meet the nursing facility level of care to remain living at home and in the community (community based residential homes). Services offered under this waiver might include: personal care, case management, respite care, environmental modifications, specialized medical equipment and supplies, and community residential services.
- 4) A TBI Registry. A registry is a method of systematic and ongoing data collection that is population-based (includes all cases of TBI in a defined population, e.g., a State), includes personal identifying and contact information for each case, and may be used for follow-up of TBI cases over time and/or linking TBI cases to services.
- 5) One Stop Toll Free number and support services for TBI. The bill would cover Neuro-Resource facilitation that would promote TBI awareness and education, help link survivors and families with information and services, and promote coordination of services. The Neuro-Resource services would provide ongoing support for individuals with brain injury in coping with the issues of living with a brain injury and in assisting such individuals in transitioning back to employment and living in the community. The resource facilitator is intended to provide a linkage to existing state

services and increase the capacity of the state's providers of services to persons with brain injury by doing all of the following:

- Providing brain injury specific information, support, and resources.
  - Enhancing the usage of support commonly available to an individual with brain injury from the community, family, and personal contacts and linking such individuals to appropriate services and community resources.
  - Training service providers to provide appropriate brain injury services.
  - Accessing, securing, and maximizing the private and public funding available to support an individual with a brain injury.
- 6) A bill requiring all coaches at the elementary and high school level to have concussion identification training, all helmets used to have bar codes for tracking the number of repairs and type of repair, and helmets to be decommissioned after ten years of use.

How we can help:

- Getting the information out to your community partners, contacts
- As state employees, you can call your legislator as an individual but not as a state employee to garner support

### Job Developer Academy (Karen Bigler):

1. Decided to look at Job Development as one of the grant's/workgroup's topics:
  - Several issues around the general quality of job development
  - Overall lack of knowledge on disability-specific job development
  - Conducted a survey with folks from all over the state, e.g., DD, MH, TBI, SPD, Transition Youth, VRC, Job Developers, etc.
  - Highlights from the survey are:
    - Q: How do you feel about establishing a certification portion at the Academy for Job Developers? Would that be a viable option? Why or why not? 54% of the respondents said that establishing a certificate portion was a viable option.
    - Q: How do you feel about requiring attendance at the Academy as a prerequisite to receiving funding as a Job Developer thru VR or any other funding source? 34% said yes (this was the largest percentage of responses to this query. Most of the other responses represented only 1 to 2%.

- Q: What elements need to be included in the Academy curriculum for successful Job Development for the population you serve? How to work with Employers, etc. was the #1 answer (disability tracks tied with a couple others for #2 and was #1 on a question re Job Coaching working with specific populations).
2. Job Development Training and Curriculum
- Job developer academy (permanent structure/housed in an institution/would need to locate funding, etc.) or job development tracts (suggested/required courses/can utilize existing systems as a placeholder).
  - OVRs retained Allan Anderson and Liz Fabiano to implement the Enhanced Employment Outcomes Model. This model will provide OVRs staff tools to produce motivated, reliable and dependable job candidates. Also, this model will help them take more control of the job development and employer outreach process as well as provide tools to link hard to serve clients with appropriate interested employers.
  - Idea for Job Development:
    - Utilizing the EEOS courses as a way to create a “preferred provider” vendor list for Job Development in Oregon.

### NEXT MEETING:

It will be the first 2 hours of the September 11, 2008 Leadership Council meeting (1-3). The last hour from 3-4 will be the Leadership Council meeting.