

ALLEGHENY COUNTY OFFICE OF BEHAVIORAL HEALTH

**PLAN TO IMPROVE EMPLOYMENT OUTCOMES FOR
PEOPLE IN RECOVERY**

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Allegheny County Office of Behavioral Health Employment Plan Summary

Phase I Implementation – FY 2009-FY2011

Revised 3/10/2010

This Summary describes Allegheny County Office of Behavioral Health Employment Plan as determined by the Employment Transformation Committee with recommendations from the Office of Behavioral Health’s consultants and staff. While the goals identified in each section will guide the implementation of this plan for a number of years, the specific objectives and outcomes will change over time. Phase I of this plan aims to establish a strong foundation upon which subsequent years of the planning process will be built. Five broad areas have been identified in which changes need to occur to improve employment outcomes for people in recovery: better integration of services within the mental health system to support people in recovery to obtain employment; improving the quality of supported employment services by increasing providers’ fidelity to the Supported Employment Evidence Based Practices; improving linkages with basic literacy programs, vocational training programs, and institutions of higher education; developing partnerships with the business community; and supporting people in the community by addressing basic needs and enhancing their integration into the broader community.

Strategic Areas	Identified Consumer and Community Employment Needs
System Integration	<ul style="list-style-type: none"> • Consumers’ employment needs are generally not addressed in recovery planning meetings. • Consumers need to understand how working affects their individual benefits. • Consumers do not have access to integrated mental health services to address employment needs.
Supported Employment Evidence Based Practices	<ul style="list-style-type: none"> • Consumers need better access to employment and employment supports that are using the SAMHSA Supported Employment Evidence Based Practices. • Employment Specialists need to understand evidence based practices so that they perform their unique role on the recovery team. • Consumers need access to peer support as they seek and obtain employment.
Developing Partnerships with The Business Community	<ul style="list-style-type: none"> • Businesses want to hire reliable, competent people but do not see people with mental illnesses as meeting this need. • Businesses need accurate information about mental illness • Businesses need information about the tax benefits of hiring people with mental illness. • Businesses need accurate information about the ADA implications of hiring people with mental illness.
Community Sustainability and Integration	<ul style="list-style-type: none"> • Public transportation needs to be accessible, affordable, and reliable. • Some jobs require a car either to get to the job or to perform the job. People may need assistance initially or periodically with operational expenses (getting car repaired, insurance, etc.) • Housing needs to be safe, affordable, and near transportation. • People have a variety of unmet basic needs such as medical problems, inadequate clothing, or inadequate nutrition in addition to transportation and housing problems that can interfere with their ability to obtain or sustain employment. • Consumers need accessible and accurate information regarding the transportation resources available to them. • Individuals who work second or third shift often have difficulty securing reliable transportation. • People need to be more involved in natural community supports and structures.
Education and Training	<ul style="list-style-type: none"> • People need basic literacy skills in reading, arithmetic and computers. • People need assistance linking to providers and services for career counseling • People need vocational training to plan a career path beyond entry level, low-skilled, dead-end jobs • People need sustained support to begin or return to the higher education system. • People need technical assistance in order to work from home or to start their own business.

System Integration

GOALS	OBJECTIVES	OUTCOMES
<p>1. All services support consumers expressed desires for employment.</p> <p>2. <i>Evidence based supported employment programs are more accessible to people with psychiatric disabilities.</i></p> <p>3. <u>All consumers wishing to work have access to benefits counseling and information.</u></p>	<p>1.1 Employment will be part of intake/service planning and routine recovery planning for every person.</p> <p>1.2 Supported Employment Specialists will routinely participate in any team planning meeting.</p> <p>2.1 <i>People will be given the opportunity to self-refer to supported employment programs.</i></p> <p>2.2 <i>Consumers and family members will have easy access to information about Supported Employment Evidence Based Practices and Supported Employment Providers.</i></p> <p>3.1 <u>Benefits counselors will be hired.</u></p> <p>3.2 <u>General information will be available regarding the impact of working on various benefits.</u></p>	<p>1.1.1 50% of Individual Service/Treatment Plans will include goals directed at education, employment, training, volunteering – related, and community integrated activities.</p> <p>1.2.1 Employment Specialists will participate in one or more treatment/service planning meetings annually.</p> <p>1.2.2 Employment Specialists and the person in recovery will meet at least one other time annually with the professional designated by the person as her/his primary recovery planning contact.</p> <p>2.1.1 <i>All Supported Employment providers will develop policies and procedures permitting self-referrals by July 1, 2010.</i></p> <p>2.1.2 <i>For FY 2011-2012 Supported Employment Providers will record the referral source for all referrals, including self-referrals.</i></p> <p>2.2.1 <i>Information will be available electronically and in other formats.</i></p> <p>3.1.1 <i>At least 2 additional benefit counselors will be trained and available for county-wide consultation.</i></p> <p>3.2.1 <u>Written materials will be distributed to supported employment, psychiatric rehabilitation, and outpatient mental health programs by July 1, 2010.</u></p> <p>3.2.2 <u>Electronic materials will be posted on at least one website May 1, 2010.</u></p>

Supported Employment Evidence Based Practices

GOALS	OBJECTIVES	OUTCOMES
<p>4. Supported Employment Providers will implement the SAMHSA Supported Employment Evidence Based Practices Toolkit.</p> <p>5. <i>People who are referred or refer themselves to supported employment services will obtain employment.</i></p> <p>6. <u>Supported employment programs will have the funded capacity to serve all interested consumers.</u></p>	<p>4.1 Supported employment specialists will be knowledgeable about the Supported Employment Evidence Based Practices Toolkit and will utilize the knowledge and the skills in the practice of supported employment.</p> <p>4.2 Supported employment programs will incorporate the SAMHSA SE Toolkit Principles of Supported Employment into the standard operating procedures for the program</p> <p>4.3 Supported employment providers will have a high level of fidelity to the Supported Employment Evidence Based Practices.</p> <p>4.4 People who are or have utilized supported employment services will have access to peer support groups.</p> <p>5.1 <i>Supported employment providers will collect data about employment outcomes and referral sources.</i></p> <p>5.2 <i>People who utilize supported employment services will be satisfied with their employment services and with their employment status.</i></p> <p>6.1 <u>OBH will identify current and projected utilization and capacity of all employment programs.</u></p> <p>6.2 <u>The OBH Operations Department will define a policy regarding the funding of sheltered employment programs for FY 2011-2012.</u></p>	<p>4.1.1 All supported employment staff will complete a web-based training program about the Supported Employment Evidence Based Practices when it is available.</p> <p>4.2.1 Providers will have their policies completed by 7/1/2010.</p> <p>4.3.1 The Supported Employment Managers Workgroup will present a written set of recommendations to the OBH Deputy Director by 3/1/2010.</p> <p>4.3.2 All TA pilot project participants will score 60 points or higher on the Fidelity Scale in a review during FY2010-2011.</p> <p>4.3.3 All non- TA pilot employment contractors will score 50 or higher on the Fidelity Scale in a review during FY2010-2011.</p> <p>4.4.1 Each supported employment provider will sponsor at least one peer employment support group by a date to be specified.</p> <p>5.1.1 <i>100% of all supported employment providers will submit their employment data by the second Friday of each month.</i></p> <p>5.2.1 <i>100% of all individuals who are selected for CART interviews will have either signed a ROI giving CART permission to contact them or will have indicated they do not want contact.</i></p> <p>5.2.2 <i>85% of all people surveyed will be satisfied with their work status.</i></p> <p>5.2.3 <i>90% of all people surveyed will be satisfied with the support they have received from their supported employment provider.</i></p> <p>6.1.1 <u>OBH will have a capacity map as a basis for program and funding decisions.</u></p> <p>6.2.1 <u>The Operations Department will define a policy by July 1, 2010 regarding the Funding of sheltered employment programs for FY 2011-2012.</u></p> <p>6.2.2 <u>Budget adjustments will be made no later than the initial contracts for FY 11- 12.</u></p>

Developing Partnerships with The Business Community

GOALS	OBJECTIVES	OUTCOMES
<p>7. The business community will have appropriate information and investment for hiring people with psychiatric disabilities.</p> <p>8. <i>Information about labor market will be collected to create convincing argument about employment and to evaluate progress.</i></p>	<p>7.1 The Employment Transformation Committee will form strategic partnerships with two businesses and/or associations.</p> <p>8.1 <i>Partnerships will be developed to assist in the collection of information about employment outcomes, employee performance, and the needs of the labor market.</i></p>	<p>7.1.1 The business partners will distribute information about hiring people with mental illness within their networks.</p> <p>7.1.2 The business partners will develop policies supporting the hiring of people in recovery.</p> <p>8.1.1 <i>A database will be developed within 12 months after the initiation of the business partnerships.</i></p>

Community Sustainability and Integration

GOALS	OBJECTIVES	OUTCOMES
<p>9. Basic needs will be addressed for any person eligible for OBH services so that no one has to quit a job or refuse a job due to those needs not being met.</p> <p>10. <i>Any person eligible for OBH services who wants to work will have an affordable transportation option.</i></p>	<p>9.1 All supported employment programs will identify any unmet basic needs such as medical, clothing, housing, food, or transportation problems that could interfere with a person obtaining or maintaining a job and develop a plan of action to address the identified issues.</p> <p>9.2 Supported Employment programs are responsible for making referrals for needs related to job acquisition or retention. Ex: work clothing, uniform, shoes, haircuts, tools, etc.</p> <p>10.1 <i>People seeking employment and employment specialists working will know where to access information about transportation-related issues.</i></p> <p>10.2 <i>People will have access to resources to diminish the financial impact of transportation during the transition to work.</i></p> <p>10.3 <i>People who are employed will have access to interest free loans for the purchase of a car.</i></p> <p>10.4 <i>The Employment Transformation Committee will create partnerships with other groups or organizations who are working on transportation issues to identify transportation gaps and work to eliminate them.</i></p>	<p>9.1.1 Within 4 months of project onset, all existing employment specialists will receive training in the use of HumansServices.net.</p> <p>9.1.2 All new hires will be trained within one month of starting their job in the use of HumanServices.net.</p> <p>9.1.3 100% of all charts will have a written plan to address identified needs.</p> <p>9.2.1 90% of all individuals surveyed by CART in random samples at 6 month and 12 month intervals will respond that job-related needs were addressed to their satisfaction.</p> <p>10.1.1 <i>System Transformation Unit will make available a resource list of transportation options by October 1, 2009.</i></p> <p>10.2.1 <i>Thirty consumers will purchase automobiles under this extension of the Ways to Work program.</i></p>

Education and Training For People in Recovery

GOALS	OBJECTIVES	OUTCOMES
<p>11. Persons served will have access to affordable education and vocational training, including GED, higher education, and technical training in order to get the job or career of their choice.</p> <p>12. <i>Coaching for the exploration and development of a business plan will be available to those who identify work-from-home or self-employment as their goal.</i></p>	<p>11.1 GED, basic reading/writing/math instruction, and computer literacy training will be available to every person served.</p> <p>11.2 Consumers attending training programs will have the supports they need to successfully complete the program.</p> <p>11.3 Individuals served will have access to adequate career counseling services to choose a sustainable career path and career identity consistent with their identified recovery goals.</p> <p>12.1 <i>People who wish to be self-employed will have access to education and technical support to pursue this goal.</i></p>	<p>11.1.1 85% individuals who report a need for change in reading/writing/math instruction, and computer literacy status will have a educational goal incorporated into their service/treatment plan.</p> <p>11.1.2 Consumers who report a need for change in reading/writing/math instruction, and computer literacy receive referrals to community partners.</p> <p>11.1.3 Supported Employment Providers will report quarterly the number of referrals to community partners in literacy.</p> <p>11.2.1 70% of the consumers who enroll in job training programs will be connected to supports in those programs by Employment Specialists.</p> <p>11.3.1 85% of consumers interviewed by CART who indicated an interest in developing a career path will report satisfaction in progress of this goal</p> <p>12.1.1 <i>Consumers who desire training in exploring self-employment will be linked with appropriate small business development resources.</i></p>

Overview of Employment in Allegheny County

Working is one of the most normative activities in our society. People often derive a sense of self-esteem and well being from their job, as well as a sense of purpose and direction in their lives. Employment increases opportunities for socialization and integration into the broader community, which enhances people's quality of life. Clearly, working provides money for the acquisition of goods and services, and in some instances supplies insurance and other benefits. While a job is not the only path to mental health recovery, for many people it is an important component. Yet, for individuals with mental illnesses, securing employment, even on a part-time basis, remains elusive.

For the past five years, the Allegheny County Consumer Action Response Team (CART) has surveyed people receiving mental health services and their families about employment. On average, about eighty-two percent (82%) report they are unemployed. This figure is consistent with national surveys about employment among people with mental illnesses. When the national economy is stable, unemployment among the general population in Allegheny County runs between 4%-4.5%, and for people in other disability groups the rate is 65%. Clearly people with mental illnesses are highly disadvantaged when it comes to employment.

Despite a high level of unemployment, people with mental illnesses tell CART interviewers they want to work. Approximately 45 % of all people with serious mental illness who are unemployed indicate they would like to work full or part-time. There are a number of reasons to hire these individuals. In addition to the above-mentioned benefits for individuals, society profits also from the employment of people in recovery. Hiring persons with psychiatric disabilities would increase the tax base and decrease the number of people receiving various forms of public support such as SSI, SSDI, and Medical Assistance. Studies also suggest there is a decrease in the use of expensive mental health services by people who are employed. Employers also gain by hiring people in recovery.

In spite of the current economic downturn, a labor shortage is forecasted for Allegheny County due to the aging of the population, and people with serious mental illness can fill some of that gap. Research has shown there is no difference between the productivity of employees who have and do not have mental illnesses. Individuals with psychiatric disabilities are loyal workers whose job tenure, attendance, and willingness to work are equal to or exceed that of the general population. Employers who hire individuals with mental illnesses qualify for generous tax credits. Despite these many benefits and an interest on the part of people with psychiatric disabilities in working, the percentage of people who are unemployed remains relatively constant. People with serious mental illness face many barriers that interfere with them obtaining a job.

Stigma and discrimination, an inability to meet basic needs such as housing and transportation, inadequate medical care, discouragement from professionals and family members, inaccurate information about the impact of working on benefits, a lack of knowledge about available training and educational resources, misinformation on the part of employers, and poorly

integrated mental health services are just some of the obstacles impeding people from obtaining training, education and work.

Programs and services must be targeted to specific groups of consumers such as transition age young adults who want little to do with the traditional service world of older adults, people with co-occurring disorders such as mental health and substance use disorders, and people with mental illnesses who have criminal justice histories. To overcome the above barriers and the lack of appropriate services, a comprehensive effort is needed—one that involves many partners.

While there is much the mental health system can do to improve employment outcomes for people with mental illnesses, working in isolation from other segments of the broader community will result in a limited impact on increasing the number of people who are employed. To maximize the opportunities for people with mental illnesses to work, the mental health system must develop partnerships with the business community, institutions of higher education, training programs, foundations, workforce development organizations, and other social service organizations. Having a long-range blueprint to follow will be important in sustaining this effort.

This Employment Plan defines a strategy to significantly increase employment outcomes for people with mental illnesses by improving service delivery within the mental health system and working with community partners. The implementation of this plan will take place over a number of years and will require persistence, patience, and the creative use of resources, particularly in the current economic environment. It is critical that employment becomes everyone's business—the prices are too high and the benefits too great for it not to be.

Process Used to Create the Plan

Eighteen months ago, Pennsylvania Office of Mental Health and Substance Abuse Services (OMHSAS) awarded a technical assistance grant to improve the quality of supported employment services to the Allegheny County Office of Behavioral Health. This grant called for the creation of a stakeholder advisory committee called the Employment Transformation Committee to assist the Office of Behavioral Health with the implementation of the project. Many of the Committee's participants came from the Community Support Program Employment Committee, which had already been meeting for several years about employment issues and had the strong support of the Office of Behavioral Health Deputy Director, Pat Valentine.

As work proceeded on the technical assistance grant, it became apparent to the Employment Transformation Committee that a more comprehensive approach to employment was needed if significantly more persons with psychiatric disabilities were to obtain work. Improving only the quality of employment services, while important, would have only limited impact in significantly increasing employment opportunities. The idea of developing an employment plan emerged from this discussion.

The Employment Transformation Committee spent several meetings discussing what would be different for people once the problem of unemployment was solved. At the same time, Recovery

Specialists from the Office of Behavioral Health conducted ten focus groups with people who use mental health services to assess their needs related to securing work. These focus groups yielded a wealth of information that people encounter when thinking about or seeking work. This information was shared with the Employment Transformation Committee and the two processes helped the Committee identify five broad areas in which changes needed to occur: better integration of services within the mental health system to support people in recovery to obtain employment; improving the quality of supported employment services by increasing providers' fidelity to the Supported Employment Evidence Based Practices; improving linkages with basic literacy programs, vocational training programs, and institutions of higher education; developing partnerships with the business community; and supporting people in the community by addressing basic needs and enhancing their integration into the broader community. For each of these areas, the needs identified were distilled down into four or five broad categories of needs.

Once these five areas were identified, the Employment Transformation Committee realized it needed additional expertise if it was going to develop an employment plan that addressed the above issues. Recognizing that many people who possess this expertise did not have the time to participate on ongoing committees, the Office of Behavioral Health and the Employment Transformation Committee decided to host a one- day event called the Community Employment Advisory Think Tank (CEATT). Participants in the CEATT were invited from the business community, higher education, training programs, government funded employment programs, the mental health system, foundations, and other social service programs to share their expertise in the development of goals and strategies for the employment plan.

Many of the participants in the CEATT were not knowledgeable about mental illness or mental health recovery so one of Office of Behavioral Health's consultants prepared three webinars to provide background information about these subjects. In addition, the webinars provided information and research about successful practices in employing people in recovery.

At the CEATT, participants were divided into four groups focusing on the broad areas of change mentioned above (improving the quality of supported employment programs was not included due to other work that was already ongoing) and each group reviewed the broad categories of needs to understand what issues were most salient to people with psychiatric disabilities. Then, each group identified goals and objectives as well as specific activities and resources needed to accomplish the goals. The CEATT made a number of recommendations, which the Employment Transformation Committee then prioritized. In addition, the Employment Transformation Committee identified several gaps in the CEATT's recommendations and developed goals and strategies for them.

The Office of Behavioral Health and its consultants took the goals and objectives and identified specific outcome measures, strategies and resources to flesh out the plan. The draft was reviewed and edited by the Employment Transformation Committee and then presented to the Office of Behavioral Health Deputy Director for final review and approval.

The following Employment Plan is divided into two sections. The first section describes the Phase I implementation as determined by the Employment Transformation Committee with recommendations from the Office of Behavioral Health's consultants and staff. The overall goals identified in each section will guide the implementation of this plan for a number of years, but the specific objectives and outcomes that are pursued in relation to the goals will change over time. Phase I of this plan aims to establish a strong foundation upon which subsequent years of planning will be built. This foundation will consist of increasing information for consumers, family members, and professionals; ensuring skill development occurs for professionals; developing processes; and establishing partnerships. This section of the Plan is highly detailed to support clear and measurable action.

The second section contains many of the recommendations from the Community Employment Advisory Think Tank that could not be accommodated in Phase I, but will be pursued in subsequent stages of the Plan's implementation. As the foundation is established, planning efforts will begin to address the more specific needs of different groups of people within the mental health community (transition age youth, people with co-occurring D&A/MH disorders, etc.). It is expected that the Employment Plan will be a work in progress as strategies are employed and the results of those efforts are evaluated. While the Office of Behavioral Health and the Employment Transformation Committee have worked hard to anticipate many of the issues that need to be addressed, it is certain unexpected problems will arise that will have to be handled.

The Office of Behavioral Health wishes to express its gratitude for the time and effort put forth by the members of the Employment Transformation Committee, without which, this Plan would not have been possible. Committee members faithfully have attended monthly meetings and on a number of occasions have added additional meetings to conclude needed business in a timely manner. They have taken their advisory role seriously and have worked hard to ensure that this plan meets the needs of the people it is intended to serve.

The Office of Behavioral Health also thanks the members of the Community Employment Advisory Think Tank for their willingness to give up a day of their time to develop this plan. Many of them had little or no prior knowledge of or contact with the mental health system, but contributed their time because they understood the value and importance of this initiative.

OFFICE OF BEHAVIORAL HEALTH EMPLOYMENT PLAN – PHASE I IMPLEMENTATION

SYSTEM INTEGRATION

The challenge presented to the System Integration Group is multi-faceted and central to the success of the employment initiative in general. Because the ability to work successfully is dependent upon so many other aspects of life, the integration of both the values and practices central to supporting persons in recovery in achieving their work and education goals must be a part of every system activity and a value held by every practitioner, clinician and support person. Mental health services should foster less dependence on the system, not more dependence.

Currently, services within the mental health system to support and encourage people with serious mental illnesses who want to work are fragmented or nonexistent. If people even receive a referral to a supported employment program (which is rare), the employment specialist is seldom involved as part of the recovery planning. A variety of programs are funded to provide services to individuals with psychiatric disabilities but their role in supporting the employment process is unclear and uncoordinated. Some services don't view employment as within their purview and must come to realize that encouraging and supporting employment is every professional's business. People who use services also do not have access to accurate, factual information that would enable them to make informed decisions about their educational and vocational goals. To effectively serve people, the mental health system must assess what services and programs work and what don't work, continue funding for those programs that work, and then ensure better coordination of services between programs. Below are some of the specific needs identified by people in recovery and other stakeholders.

Systems Integration Categories of Need

1. Consumers' employment needs are generally not addressed in recovery planning meetings.
2. Consumers need to understand how working affects their individual benefits.
3. Consumers do not have access to integrated mental health services to address employment needs.

Goal 1:

All services will support consumers expressed desires for employment.

Objective 1.1: Employment will be part of intake/service planning and routine recovery planning for every person with a serious mental illness.

Outcomes

- 1.1.1: 50% of individual service/treatment plans will include goals directed at education, employment, training, volunteering – related, and community integrated activities.

Activities

- a. The Program Operations Manager will create guidelines requiring information about employment and education history be included as part of every intake process, and include goals around these issues as part of every recovery planning process. There should be an expectation that all new intake forms will include information about work and educational history.

Objective 1.2: Supported Employment Specialists will routinely participate in any team planning meeting.

Outcomes

- 1.2.1: Employment Specialists will participate in one or more treatment/service planning meetings annually.
- 1.2.2: Employment Specialists and the person in recovery will meet at least one other time annually (approximately 6 months after recovery planning meeting) with the professional designated by the person in recovery as her/his primary recovery planning contact.

Activities

- a. Mental health providers will establish policies and procedures delineating how internal and external employment providers will be included in recovery planning and who has responsibility for contacting employment providers about meetings.

Resources

- a. UIC - University of Illinois at Chicago
- b. MHA Village, in Long Beach California
- c. Mon Yough Community Services

Goal 2:

Evidence based supported employment programs will be more accessible to people with psychiatric disabilities.

Objective 2.1: People will be given the opportunity to self-refer to supported employment programs.

Outcomes

- 2.1.1: All Supported Employment providers will develop policies and procedures permitting self-referrals by July 1, 2010.
- 2.1.2: For FY 2011-2012 Supported Employment providers will record the referral source for all referrals, including self-referrals (All NFC referrals will be counted as self-referrals).

Activities

- a. All Community Treatment Team members will receive in-service training about the role of employment in recovery, the supported employment model, and how

all team members can support people receiving services in the employment aspirations.

- b. After receiving training about the administration of the NFC Scales, each CTT will develop a procedure for administering the Scales to all people receiving service from the team. Each person indicating s/he is very dissatisfied or dissatisfied with her/his employment status or situation will be referred to the teams employment specialist for planning about meeting employment goals.
- c. Mental health providers will designate at least one program (service coordination, outpatient therapy, psychiatric rehabilitation, etc.) that will implement the Need for Change Scale (NFC) and its companion scales to help consumers assess their desire to work.
- d. Mental health providers will post information about employment and supported employment program information in prominent areas of their organizations.
- e. Programs implementing the NFC Scale will facilitate referrals to supported employment programs. Any person indicating a strong or urgent need for change on the NFC Scale and who indicates a desire for a referral within the next 6 months must be referred to a supported employment program.
- f. Mental health agencies and supported employment providers will identify barriers to self-referral and develop strategies to address these obstacles.
- g. The Employment Transformation Committee will explore the possibility of developing electronic NFC Scale administration training that is web-based.

Resources and Costs

- a. Ed Casper Cost to develop electronic media for training. Estimate \$2000-\$5,000.

Objective 2.2: Consumers and family members will have easy access to information about Supported Employment Evidence Based Practices and Supported Employment Providers.

Outcomes

- 2.2.1: Information will be available electronically and in other formats (newsletters, posters, brochures and will publicized by July 2010.

Activities

- a. The System Transformation Unit will post links on the DHS website and on other organization websites (that are willing to have the information posted – AHCI, NAMI, etc.) to the Pennsylvania Employment Transformation Project website for information about supported employment.
- b. The System Transformation Unit will disseminate information about this information resource.

Resources

- a. The Pennsylvania Employment Transformation Project website.
- b. \$10,000 for the printing and distribution of materials

Goal 3**All consumers wishing to work will have access to benefits counseling and information.**Objective 3.1: Benefits counselors will be hired and trained.*Outcomes*

- 3.1.1: At least 2 additional benefit counselors will be trained and available for county-wide consultation.

Activities

- a. Explore locating funds to hire people who are either employed or placed with AHEDD.
- b. The Office of Behavioral Health will examine alternative financing strategies for hiring benefit counselors.
- c. Partner with advocacy groups to increase funding for benefits counseling.

Resources

- a. AHEDD

Costs

- a. Cost of hiring 2 counselors - \$160,000.

Objective 3.2: General information will be available regarding the impact of working on various benefits.*Outcomes*

- 3.2.1: Written materials will be distributed to supported employment, psychiatric rehabilitation, and outpatient mental health programs by July 1, 2010.
- 3.2.2: The System Transformation Unit will post electronic materials on at least one website by May 1, 2010.

Activities

- a. The System Transformation Unit will identify information outlining the work incentives included in the Social Security system and basic information about working at certain limits/benefits loss, etc. Including quotes from persons in recovery who are working would also have impact. This information will be posted on the DHS website and on other agency and organization websites. For support with the production of this document, AHCI and AHEDD may be useful resources.
- b. The Employment Transformation Committee will develop a plan for distributing the above information.
- c. Examine online resources in balancing work and benefits available in other states and assess how such a support can be made available and maintained in Allegheny County.

- d. Make use of the resources of a number of organizations within the county: AHEDD, NAMI, PSAN, 3-Rivers Connect, etc. in developing these resources.
- e. Encourage the formation of Family Support and Education groups or utilize existing NAMI groups. Groups should meet at times that encourage participation and should be bilingual as needed.
- f. The System Transformation Unit will publicize the dates, times, and locations for AHEDD presentations.

Resources

- a. AHCI's It Pays to Work
- b. AHEDD
- c. NAMI
- d. Humanservices.net

Costs

- a. \$10,000 for the printing and distribution of materials

SUPPORTED EMPLOYMENT EVIDENCE BASED PRACTICES

Extensive research on successful employment practices with persons who have serious mental illnesses have clearly demonstrated superior results in terms of competitive employment for programs that closely adhere to the federal government's Substance Abuse and Mental Health Services Administration's (SAMHSA) Supported Employment Evidence Based Practices Toolkit. Participants in these programs work more hours and have higher monthly incomes when compared to people in other types of employment programs. The greater the fidelity to these practices, the better the results. These programs are characterized by:

- eligibility is based on consumer choice (no one is excluded who wants to participate)
- supported employment is integrated with recovery planning
- competitive employment is the goal
- job search starts soon after a consumer expresses interest in working
- follow-along supports are continuous
- consumer preferences are important.

Due to the overwhelming evidence for the Supported Employment Evidence Based Practices, programs receiving funding from the Office of Behavioral Health for employment services will need to demonstrate their fidelity to these practices.

Supported Employment Categories of Need

1. Consumers need better access to employment and employment supports that are using the SAMHSA Supported Employment Evidence Based Practices.
2. Employment Supports Counselors need to understand evidence based practices so that they perform their unique role on the recovery team.
3. Consumers need access to peer support as they seek and obtain employment.

Goal 4

Supported Employment Providers will implement the SAMHSA Supported Employment Evidence Based Practices Toolkit.

Objective 4.1: Supported employment specialists will be knowledgeable about the Supported Employment Evidence Based Practices Toolkit and will utilize the knowledge and the skills in the practice of supported employment.

Outcomes

- 4.1.1: All supported employment staff will complete a web-based training program about the Supported Employment Evidence Based Practices when available.

Activities

- a. The Office of Behavioral Health contracted supported employment provider staffs will complete training on the Supported Employment Evidence Based Practices Toolkit and motivational interviewing.
- b. Work with existing training resources such as the Office of Education and Regional Programming to provide ongoing training on the Supported

Employment Evidence Based Practices as well as motivational interviewing and the Illness Management and Recovery Toolkit.

- c. The Office of Behavioral Health in conjunction with the Employment Transformation Committee and other stakeholders will develop a sustainable training plan for the above topics. In developing this plan, the stakeholders will examine web based training, Train-the-trainer, etc.
- d. The System Transformation Unit will work with Supported Employment Managers to develop supervisory training to assist supported employment supervisors to manage a program using the Supported Employment Evidence Based Practices.
- e. Supported employment managers will use the SAMHSA Workbook for Clinical & Practical Supervisors as part of a continuing education program with staff.

Resources

- a. OMHSAS technical assistance consultants
- b. OBH funds
- c. Employment specialists who have extensive experience with and knowledge of the Supported Employment Evidence Based Practices
- d. Community Care
- e. The Office of Education and Regional Programming
- f. SAMHSA website –
<http://mentalhealth.samhsa.gov/cmhs/CommunitySupport/toolkits/employment/>
- g. Employment Intervention Demonstration Project (EIDP)

Objective 4.2: Supported employment programs will incorporate the SAMHSA Supported Employment Toolkit Principles of Supported Employment into the standard operating procedures for the program.

Outcomes

- 4.2.1: Providers will have their policies completed by 7/1/2010.

Activities

- a. The Supported Employment Managers Workgroup will form a subcommittee to develop sample policies and procedures incorporating the SAMHSA Supported Employment Toolkit Principles of Supported Employment into the standard operating procedures for the program. Each program will then develop their own policies and procedures for implementing the Principles.

Resources

- a. SAMHSA Toolkit
- b. SAMHSA website (see above)
- c. OMHSAS technical assistance consultants

Objective 4.3: Supported employment providers will have a high level of fidelity to the Supported Employment Evidence Based Practices.

Outcomes

- 4.3.1: The Supported Employment Managers Workgroup will present a written set of recommendations to the OBH Deputy Director by 3/1/2010.
- 4.3.2: All TA Pilot Project participants will score 60 points or higher on the Fidelity Scale in a review during FY 2010-2011.
- 4.3.3: All non-pilot employment contractors will score 50 or higher on the Fidelity Scale in a review during FY2010-2011.

Activities

- a. The Supported Employment Managers Workgroup will form a subcommittee that will review the EBP's Fidelity Scale and will make recommendations to the OBH Deputy Director as to what level Supported Employment programs should be expected to perform at for each Fidelity measure given the current funding environment.
- b. Technical assistance consultants and/or the Program Specialist responsible for monitoring Supported Employment providers will meet with each agency to review Fidelity Scale assessments and develop a plan of action for increasing fidelity to the Evidence Based Practices.
- c. Conduct independent reviews of each employment program's fidelity to the Evidence Based Practices. Reviews would be conducted during each fiscal year.

Resources

- a. OMHSAS technical assistance consultants
- b. SAMHSA SE Toolkit
- c. OBH System Transformation Unit staff and OBH Program Specialists

Objective 4.4: People who are or have utilized supported employment services will have access to peer support groups.

Outcomes

- 4.4.1: Each supported employment provider will sponsor at least one peer employment support group by a date to be specified.

Activities

- a. Each supported employment program will start or collaborate with another organization to run at least one peer employment support group.
- b. The System Transformation Unit will keep a list of support groups and will post this information on a website.
- c. Supported employment programs will ensure that people using their services will be aware of support group meetings throughout the county.

Resources

- a. Family/consumer groups – NAMI, PSAN, Peer Power Network

- b. OBH System Transformation Unit staff
- c. OMHSAS technical assistance consultants
- d. Peer Specialists/peer staff time
- e. Providers meeting space

Goal 5

People who are referred or refer themselves to supported employment services will obtain competitive employment.

Objective 5.1: Supported employment providers will collect data about employment outcomes and referral sources.

Outcomes

- 5.1.1: 100% of all supported employment providers will submit their employment data by the second Friday of each month.

Activities

- a. Providers will collect information required by the Office of Behavioral Health on each person for whom an intake is completed.
- b. Data will be sent monthly to the Office of Behavioral Health using the Excel spreadsheet furnished by the Office of Behavioral Health.
- c. Supported Employment providers will report data on individuals for the first 90 days of employment. A person who is active is considered to be someone with whom monthly contact is occurring.

Resources

- a. Microsoft Excel
- b. OBH System Transformation Unit staff

Objective 5.2: People who utilize supported employment services will be satisfied with their employment services and with their employment status.

Outcomes

- 5.2.1: 100% of all individuals who are selected for CART interviews will have either signed a ROI giving CART permission to contact them or will have indicated they do not want contact.
- 5.2.2: 85% of all people surveyed will be satisfied with their job placement.
- 5.2.3: 90% of all people surveyed, who are currently employed, will be satisfied with the support they have received from their supported employment provider.

Activities

- a. The Consumer Action Response Team (CART) will collect information from people who use employment services regarding their employment status, their satisfaction with work placements, and their satisfaction with supported employment services.

- b. All people who meet with a supported employment provider will be asked to sign a release of information that permits CART to conduct follow-up interviews with them either by telephone.
- c. CART will construct an interview tool to use with people who participate in Supported Employment programs. A random sample of 50 people will be interviewed every six months. Interviews will start in April 2010.

Resources

- a. CART

Goal 6

Supported employment programs will have the funded capacity to serve all interested consumers.

Objective 6.1: OBH will identify current and projected utilization and capacity of all employment programs.

Outcomes

- 6.1.1: OBH will have a capacity map to serve as a basis for program and funding decisions.

Activities

- a. The System Transformation Unit will complete a report by September 1, 2009 identifying current expenditures and utilization in CEERS and Sheltered Employment line items for all funded providers.
- b. The System Transformation Unit and the Program Specialist responsible for monitoring Supported Employment Programs and the Employment Transformation Committee will develop projections for future capacity needs.
- c. OBH staff and the ETC will develop targets and steps to expand the capacity of supported employment programs by October 2010.

Objective 6.2: The Program Operations Department will define a policy by July 1, 2010 regarding the funding of sheltered employment programs for FY 2011-2012.

Outcomes

- 6.2.1: A recommended policy will be completed by December 1, 2009 subject to various approvals.
- 6.2.2: Allocation adjustments will be made no later than the initial contracts for FY 2010-2011.

Activities

- a. The Program Operations Unit supported by the System Transformation Unit will develop a policy that identifies the criteria for receiving funding for employment programs, a timetable for meeting the requirements, how individuals who are receiving vocational services currently will be assessed to determine what service

they will receive in the future, and a process and timetable for transitioning people from non-supported employment programs into supported employment programs.

- b. OBH will work with stakeholders in the development of this policy.

Resources

- a. OMHSAS billing code descriptions
- b. OMHSAS technical assistance consultants

DEVELOPING PARTNERSHIPS WITH THE BUSINESS COMMUNITY

Given that employers are generally less concerned with the social benefits of hiring a person living with mental illness than with their own needs for reliable employees, it will be important to help potential employers understand the benefits of considering the labor pool comprised of people living with mental illness who are looking for work. The emphasis in this effort should be on the competitive advantage in accessing this labor pool and combating myths associated with mental illness.

To accomplish this and to improve employment outcomes, the mental health system must develop strategic alliances with the business community. There are several stakeholder groups that need to be included in the formation of these alliances, including: large “corporate” employers, “small business” employers; workforce development groups, economic development groups and the community of agencies and organizations focusing on employment for people with disabilities. In the first year, the Employment Transformation Committee will form two significant alliances providing access to important employment growth areas in the Allegheny County. These alliances will provide the opportunity to develop and test a process for outreach to the larger employment community as the effort moves forward.

To support this effort, it will be important to develop a database of information about the labor pool of people living with mental illness who are working and who want to work. This information would be used to craft presentations that would accomplish the objective of convincing employers of the value of hiring people from that labor pool. Below are some of the more salient needs of the business community.

Business Categories of Need

1. Businesses want to hire reliable, competent people but do not see people with mental illnesses as meeting this need.
2. Businesses need accurate information about mental illness
3. Businesses need information about the tax benefits of hiring people with mental illness.
4. Businesses need accurate information about the ADA implications of hiring people with mental illness.

Goal 7:

The business community will have appropriate information and investment for hiring people with psychiatric disabilities.

Objective 7.1: The Employment Transformation Committee will form strategic partnerships with two businesses and/or associations.

Outcomes

- 7.1.1: The business partners will distribute information about hiring people with mental illnesses within their networks.
- 7.1.2: The business partners will develop policies supporting the hiring of people in recovery.

Activities

- a. The Employment Transformation Committee will form a Business Partnership Workgroup. This workgroup will develop a set of talking points for presentations to business associations.
- b. The Business Partnership Workgroup will contact the Workforce Investment Board, the Business Leadership Network, and other business associations to discuss partnering around this issue.
- c. The Business Partnership Workgroup will clarify with business leaders what their needs are and develop informational resources for them to use.
- d. Create a website with information that employers need such as tax incentives available to hiring, ADA information, myths about mental illness, etc.
- e. The Business Partnership Workgroup will conduct presentations to businesses or business associations utilizing In Our Own Voice and other people in recovery who are working successfully.
- f. ETC members will conduct presentations at business conferences
- g. The ETC will identify employers who already hire people with non-psychiatric disabilities and educate them about hiring people in recovery.

Resources

- a. Workforce Investment Board
- b. Business Leadership Network
- c. Chamber of Commerce
- d. AHEDD
- e. In Our Own Voice

Costs

- a. \$5000 for printed materials

Goal 8

Information about labor market will be collected to create convincing argument about employment and to evaluate progress.

Objective 8.1: Partnerships will be developed to assist in the collection of information about employment outcomes, employee performance, and the needs of the labor market.

Outcomes

- 8.1.1: A database will be developed within 12 months after the initiation of the business partnerships.

Activities

- a. Identify what currently exists.
- b. Develop a methodology for tracking the number of people who work over time.
- c. Work with a graduate program or student to develop this project.
- d. Develop partnerships with a center doing workforce analysis as well as partnerships with CareerLink and the Workforce Investment Board.

Resources

- a. Department of Human Services, Office of Information Management
- b. University of Illinois at Chicago (UIC) – Judith Cook – To see if there are agencies or organizations already engaged in this effort
- c. Graduate students to mine census data
- d. Pennsylvania workforce development websites
- e. Department of Labor
- f. National Council of Disabilities Website

COMMUNITY SUSTAINABILITY AND INTEGRATION

In addition to the obstacles their mental illnesses present to working, people living in the community also must cope with the limitations that poverty imposes. Meeting basic human needs consume time and energy and serve as barriers to obtaining or maintaining employment. It is critical that infrastructure and resources are developed to address these obstacles if people are to be gainfully employed over an extended period of time. Even when resources do exist that would meet their needs, people often are not aware of them and fail to take advantage of them. Improving access to information for consumers and the professionals providing services to them is essential. Finally, individuals with psychiatric disabilities tend to be cut off from natural community supports, leaving them isolated within their communities. This isolation contributes to a diminished quality of life that can exacerbate their psychiatric symptoms. Below are some of the more prominent needs people face in the community that can interfere with successful employment.

Community Sustainability and Integration Categories of Need

1. Public transportation needs to be accessible, affordable, and reliable.
2. Some jobs require a car either to get to the job or to perform the job. People may need assistance initially or periodically with operational expenses (getting care repaired, insurance, etc.)
3. Housing needs to be safe, affordable, and near transportation.
4. People have a variety of unmet basic needs such as medical problems, inadequate clothing, or inadequate nutrition in addition to transportation and housing problems that can interfere with their ability to obtain or sustain employment.
5. Consumers need accessible and accurate information regarding the transportation resources available to them.
6. Individuals who work second or third shift often have difficulty securing reliable transportation.
7. People need to be more involved in natural community supports and structures.

Goal 9

Basic needs will be addressed for any person eligible for OBH services so that no one has to quit a job or refuse a job due to those needs not being met.

Objective 9.1: All supported employment programs will identify any unmet basic needs such as medical, clothing, housing, food, or transportation problems that could interfere with a person obtaining or maintaining a job and develop a plan of action to address the identified issues.

Outcomes

- 9.1.1: Within four months of project onset, all existing employment specialists will receive training in the use of HumansServices.net.
- 9.1.2: All new hires will be trained within one month of starting their job in the use of HumanServices.net.
- 9.1.3: 100% of all charts will have a written plan to address identified needs.

Activities

- a. During the intake process, the Supported Employment provider will develop strategies to address any identified needs that could interfere with the person acquiring or maintaining a job.
- b. At each goal plan review, Supported Employment Providers will review with each person the status of every previously identified unmet need, will identify any new unmet needs that could interfere with employment, and develop a plan of action for any old and/or new unmet needs.
- c. The OBH Program Specialist will conduct periodic reviews of charts to determine if plans of action are developed to address the individual's identified needs.

Resources and Linkages

- a. Natural support systems the person is connected with, e.g., family, friends, etc.
- b. Recovery team members
- c. HumanServices.net to obtain resources to address problems.

Objective 9.2: Supported Employment programs are responsible for making referrals for needs related to job acquisition or retention. Ex: work clothing, uniform, shoes, haircuts, tools, etc.

Outcomes

- 9.2.1: 90% of all individuals surveyed by CART in random samples at 6 month and 12 month intervals will respond that job-related needs were addressed to their satisfaction.

Activities

- a. The DHS Resource Specialist from the DHS Office of Community Relations will provide training to Supported Employment staff in the use of HumanServices.net. Providers will utilize resources identified in HumanServices.net as well as other resource information sources.
- b. The Supported Employment Program Manager will schedule a presentation by the SCU Director or a Service Coordination Supervisor to ensure Supported Employment staff is aware of how agency contingency funds are managed. Supported Employment staff will work to utilize agency contingency funds when appropriate. Free standing employment programs will contact the SCUs of program participants to learn how referrals to that SCU should be handled.
- c. The Supported Employment Manager will ensure staff receives information/training regarding appropriate referrals to service coordination or to Office of Vocational Rehabilitation to assist with the above needs.
- d. The OBH Program Specialist record reviews will document that appropriate referrals are occurring when needs are identified.

Resources and Linkages

- a. The Department of Human Services or Office of Behavioral Health staff to conduct training in HumanServices.net

- b. HumanServices.net
- c. Natural support systems
- d. Office of Vocational Rehabilitation
- e. Service Coordination Unit serving the individual.
- f. Array of community service providers.

Goal 10

Any person eligible for OBH services who wants to work will have an affordable transportation option.

Objective 10.1: People seeking employment and the employment specialists working with them will know where to access information about transportation-related issues.

Outcomes

- 10.1.1: System Transformation Unit will make available a resource list of transportation options by October 1, 2009.

Activities

- a. The System Transformation Unit will identify and publicize available resources.
- b. The Employment Transformation Committee will work with other transportation partners to ensure the development of a centralized repository for transportation information for easy access.

Resources

- a. Allegheny County DHS website
- b. Humanservices.net
- c. The Access to Work Interagency Cooperative
- d. Southwestern Pennsylvania Commission
- a. Humanservices.net
- b. Google Transit
- c. Port Authority website
- d. Goodwill Industries Driver Training Program
- e. Port Authority Transit 101 information guide
- f. Commuteinfo.org

Objective 10.2: People will have access to resources to diminish the financial impact of transportation during the transition to work.

Activities

- a. The supported employment provider or service coordinator will assist the person to identify resources such as agency contingency funds, the Office of Behavioral Health Bus Pass Program, etc. that will help to defray the cost of transportation, when possible.

Resources

- a. Natural support systems the person is connected with, e.g., family, church, friends, etc.
- b. Agency contingency funds
- c. Family Services of Western PA Way to Work program
- d. Google Transit
- e. Work Link and Ship of Zion programs
- f. Airport Corridor Transportation Association
- g. Commuteinfo.org
- h. Office of Behavioral Health Bus Pass Program
- i. Travelers Aide New Employee Assistance Program
- j. Community Auto Program – North Hills Community Outreach

Objective 10.3: People who are employed will have access to interest free loans for the purchase of a car.

Outcomes

- 10.3.1: Thirty consumers will purchase automobiles under this extension of the Ways to Work program.

Activities

- a. Family Services of Western PA will extend the automobile purchase lending model used in its Ways to Work program to thirty consumers annually participating in the Allegheny County Supportive Employment Initiative. To accomplish this, Family Services will hire a service coordinator to oversee the program. Family Services will fund all administrative costs through existing resources and will raise private funds necessary to collateralize participating banks for their loan risks.
- b. Family Services will publicize the program with supported employment programs.

Resources

- a. Family Services of Western PA Way to Work Program
- b. Foundations

Costs

- a. \$35,000 for a service coordinator to oversee the program

Objective 10.4: The Employment Transformation Committee will create partnerships with other groups or organizations that are working on transportation issues to identify transportation gaps and work to eliminate them.

Activities

- a. The Employment Transformation Committee will have a representative(s) attend the Access to Work Interagency Cooperative Task Force Meeting.

Resources

- a. Access-to-Work Interagency Cooperative

EDUCATION AND TRAINING FOR PEOPLE IN RECOVERY

People with psychiatric disabilities span the continuum of educational and vocational training as well as work experience, but historically, they were shuffled into entry-level jobs that are referred to as filth (janitorial service), flowers (floral arranging), and food (food service) regardless of where they fell along this continuum. For those individuals with little or no work or educational training, entry level positions may be where they need to start, but too often, people with mental illnesses are not given the encouragement, opportunities, or support to improve their knowledge or job skills to acquire higher paying positions. Sometimes, before people can obtain better paying positions, they first must improve their basic literacy in reading, math, or computing. Programs to assist people in these areas exist in the community, but are not extensively utilized by the mental health system. Some people are uncertain what career direction to pursue and need career counseling to get them on the road to vocational success. Other people may have prior educational or vocational training, but may need to brush up on their skills and knowledge due to years of neglect. Whatever the person's needs are, it is important for the mental health system and employment providers to improve linkages with literacy programs, vocational training programs, and institutions of higher education. Below are some of the needs identified for this area.

Consumer Education and Training Categories of Needs

1. People need basic literacy skills in reading, arithmetic and computers.
2. People need assistance linking to providers and services for career counseling
3. People need vocational training to plan a career path beyond entry level, low-skilled, dead-end jobs
4. People need sustained support to begin or return to the higher education system.
5. People need technical assistance in order to work from home or to start their own business.

Goal 11

Persons served will have access to affordable education and vocational training, including GED, higher education, and technical training in order to get the job or career of their choice.

Objective 11.1: GED, basic reading/writing/math instruction, and computer literacy training will be available to every person served.

Outcomes:

- 11.1.1: 85% individuals who report a need for change in reading/writing/math instruction, and computer literacy status will have an educational goal incorporated into their service/treatment plan.
- 11.1.2: Consumers who report a need for change in reading/writing/math instruction, and computer literacy receive referrals to community partners.
- 11.1.3: Supported Employment Providers will report the number of referrals to community partners in literacy quarterly.

Activities

- a. The System Transformation Unit will develop a Literacy Need for Change Scale for employment providers to administer.
- b. The DHS Resource Specialist from the DHS Office of Community Relations will train Supported Employment providers to utilize Humanservices.net to locate literacy programs to refer people with whom they work..
- c. Supported Employment providers will assess each consumer for reading, math and computer literacy, addressing the needs and capacity according to the individual's preferences, strengths, and challenges.
- d. Supported Employment providers will act as liaison between consumers and community resources to successfully engage them with programs within their communities.

Resources:

- a. Greater Pittsburgh Literacy Council
- b. Bidwell Training Center
- c. Office of Behavioral Health will provide a resource guide for providers for community training partners.
- d. The Office of Behavioral Health will provide a Literacy Need for Change Scale

Objective 11.2: Consumers attending training programs will have the supports they need to successfully complete the program.

Outcomes:

- 11.2.1: 70% of the consumers who enroll in job training programs will be connected to supports in those programs by Employment Specialists.

Activities

- a. Supported Employment providers will collaborate with community technical training programs in order to engage people with supports in their institutions.
- b. Education and training are available to providers and consumers regarding financial implications of receiving student loans and grants and the resulting impact on benefits.
- c. CART will survey people participating in job training programs.
- d. The OBH Program Specialist will conduct periodic record checks to ensure referrals to program supports are occurring.

Resources:

- a. Office of Vocational Rehabilitation
- b. Supported Education Implementation Guide of the CSP Branch of SAMHSA http://mentalhealth.samhsa.gov/csp/employment_education/evidence.asp [funded and in process]
- c. Supported Education: Emerging Best Practices (EBP) Project, University of Kansas, School of Social Welfare, Supported Education Group (<http://www.socwel.ku.edu/projects/SEG/se101.html>)

- d. Supported Education: Emerging Best Practices Project Brochure:
<http://www.socwel.ku.edu/projects/SEG/PDFs/EBP%20Brochure.pdf>
- e. Disability Support Service programs at colleges and universities, Career Support Specialist mentoring
- f. Peer support specific to education and training stresses
- g. HumanServices.net, augmented to include all available adult education and training programs available in Allegheny County
- h. Goodwill Industries
- i. Bidwell Training Center
- j. Job and Career Education Center, Carnegie Library of Pittsburgh

Objective 11.3: Individuals served will have access to adequate career counseling services in order to choose a sustainable career path and career identity consistent with consumer identified recovery goals.

Outcomes

- 11.3.1: 85% of consumers interviewed by CART who indicated an interest in developing a career path will report satisfaction in progress of this goal.

Activities

- a. The DHS Resource Specialist from the DHS Office of Community Relations will train Supported Employment providers to utilize Humanservices.net to locate community resources in career counseling and aptitude testing.
- b. Supported Employment Specialists will connect individuals needing in depth career counseling or testing with appropriate community resources.

Resources

- a. HumanServices.net is augmented to address adult and youth career counseling resources.
- b. CareerLink
- c. Free online career interest inventories
- d. The Office of Vocational Rehabilitation
- e. Peer support and mentoring
- f. CART satisfaction surveys
- g. Job and Career Education Center, Carnegie Library of Pittsburgh (Assessments)
- h. School district Transition Coordinators

Goal 12

Coaching for the exploration and development of a business plan will be available to those who identify self-employment as their goal.

Objective 12.1: People who wish to be self-employed will have access to education and technical support to pursue this goal.

Outcomes

- 12.1.1: Consumers who desire training in exploring self-employment will be linked with appropriate small business development resources.

Strategies

- a. The System Transformation Unit and partners will provide information and training to Supported Employment providers about how to make appropriate referrals for people interested in self-employment.
- b. Working Order - Volunteers of America - Volunteers of America will sponsor general education seminars each year to raise awareness about people owning their own businesses.

Resources

- a. Working Order - Volunteers of America
<http://www.voapa.org/Services/EmploymentTraining/WorkingOrder/tabid/3082/Default.aspx> and workingorder@voapa.org
- b. Institute for Entrepreneurial Excellence, Katz Graduate School of Business, University of Pittsburgh, <http://www.pittentrepreneur.com/>
- c. Small Business Development Center, Palumbo-Donahue School of Business, Duquesne University, <http://www.sbdc.duq.edu/>
- d. Getting Started for Self-Employment Toolkit
http://www.usa.gov/Business/Self_Employed.shtml
- e. Wellness and Recovery Action Plan
- f. Illness Management and Recovery toolkits
- g. Small Business Planner and tools from U.S. Small Business Administration
<http://www.sba.gov/smallbusinessplanner/index.html>
- h. Pittsburgh District Office of Small Business Administration
- i. Community College of Allegheny County Entrepreneur Institute
- j. National Association for the Self-Employed <http://www.nase.org/>
- k. Carnegie Library Business Information Center
- l. Executive Service Corp., Bayer Center, Robert Morris University
http://www.robert-morris.edu/OnTheMove/findoutmore.open_page?iCalledBy=findoutmore&iPage=65687&iattr=quicklink&ivisitor=0

Summary of Expenditures Needed for Phase I Implementation

Funding Amount	Item Description
\$160,000	Cost of hiring 2 benefits counselors
\$10,000	Printing and distribution of materials about supported employment and the impact of working on benefits
\$5,000	Printed materials for employers
\$35,000	One service coordinator to oversee the automobile purchasing program
\$210,000	Total Amount

**One additional expense that is not listed is the cost of conducting Fidelity reviews. Because no method has been identified yet, no cost estimates were made.

PHASE II IMPLEMENTATION AND BEYOND

While some of the goals identified in Phase I of the Employment Plan will continue to be pursued for several years, new objectives, outcomes, and activities will be identified for those goals. In some instances, the objectives may remain the same but different outcomes will be defined to bring about goal attainment. In addition to the goals and objectives identified by the Community Employment Advisory Think Tank that are already included in Phase I of the Employment Plan, other goals and objectives were listed. The Employment Transformation Committee determined these objectives should be pursued in the future.

Below are some of the other ideas generated by the Community Employment Advisory Think Tank and an approximate timeline for when they will be undertaken.

SYSTEM INTEGRATION SUBGROUP

Goal: All services should support consumers expressed desires for employment.

- Objective: Address funding priorities; stop paying for what does not work and pay for what does - Year 2
- Objective: Eliminate regulatory and other system barriers – Years 2-4

****Goal: People with criminal hx will have resources to help them access employment and housing.**

- Objective: Train consumers on how to interview and educate them about regulation and employment practices – Year 2
- Objective: Link clients to legal resources -
- Objective: Education and training for employers – Years 2
- Objective: Educate parole officers – Year 2

** The Employment Transformation Committee has broadened this goal to state: The needs of specialized groups (people with criminal justice histories, transition age youth, people with drug/alcohol and mental health disorders) will be identified and addressed.

COMMUNITY SUSTAINABILITY AND INTEGRATION

Goal: Allegheny County will fully implement its housing plan.

- Objective: Expand bridge subsidy and project based leasing – Year 2 or 3

Goal: Residential programs in located in safe areas of the city and county.

- Objective: Residential providers will establish new residential programs only in safe neighborhoods and will relocate all existing residential programs from unsafe neighborhoods to safe neighborhoods – Year 3

Goal: People feel welcome at community organizations – Year 3

Activities:

1. Providers will work with community partners in involving people in their organizations.
2. Training completed to employers and community organizations on cultural competence and disability awareness (diversity and/or inclusion).
3. Review UCP model (cultural shifting) and see how applies to integrating people with serious mental illness into the broader community.
 - a. Fund demonstration project on implementation.
 - o Human Services Integration Fund
4. Provide education about self-advocacy and fulfilling political needs. Ex: voting

WORKFORCE TRAINING AND EDUCATION

Goal: Supported Employment providers are able to employ a sufficient number of well qualified employment specialists.

- Supported employment skills are part of the curriculum at schools of social work and rehabilitation – Year 2
 - o Knowledge of the Evidence based practice.
 - o Training as supported employment generalist.
 - o Internships available to students

Additional areas that have been identified for future work involve:

- Identifying funding to significantly increase the number of supported employment specialists in order to expand the capacity to serve many more people who will want to pursue employment.
- County administrators must develop an easy to use assessment tool which will allow persons in recovery (who have been trained in its use) to visit program sites and through a process of observation, interviews, and document review develop a “profile” of each site. The information in this profile will be matched against a set of parameters developed by the Employment Transformation Committee as to what qualifies as a “center of excellence” in the provision of recovery based services and supports. There is no expectation that programs will meet 100% of expectations – especially during this time of transformation – the effort is designed to identify those programs that are coming close, that are in the process and thus, could be useful as standard bearers in the service community.
- The Committee should, in Phase Two, begin an assertive county wide public education and anti – stigma campaign. The myths and misconceptions held regarding mental illness must be addressed in order for people in recovery not only to work, but to be admitted to educational programs, community literacy programs, training programs, etc.