

Research BRIEF

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Innovating Minnesota's VR system and improving SSDI client outcomes: Findings from the SGA Project demonstration

INTRODUCTION

The Institute for Community Inclusion at the University of Massachusetts-Boston and Mathematica Policy Research received a grant from the U.S. Department of Education's Rehabilitation Services Administration to develop and test service innovations designed to improve the employment outcomes of nonblind vocational rehabilitation (VR) clients receiving Social Security Disability Insurance (SSDI) benefits. The resulting demonstration, the Substantial Gainful Activity (SGA) Project, was implemented in Kentucky and Minnesota from 2015–2017. This brief is a report on the experiences of the Minnesota Department of Employment and Economic Development's Vocational Rehabilitation Services (VRS) in implementing the SGA Project.¹

VRS WAS MOTIVATED TO TEST SERVICE DELIVERY INNOVATIONS

VRS leaders were excited about testing new approaches to service delivery that were designed to make their agency more effective and to address the fact that many clients drop out of VR services before they find a job. Before participating in the SGA Project demonstration, VRS implemented several initiatives designed to improve client outcomes, including:

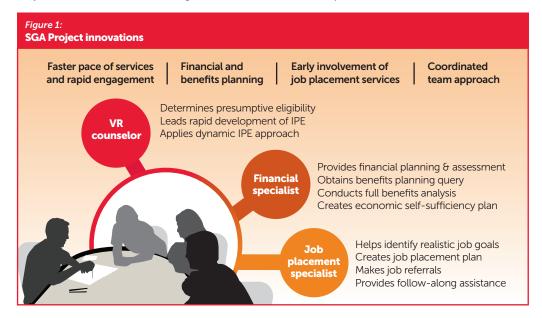
- Individual placement and support services, a fast-paced, evidence-based practice that promotes recovery
 from serious mental illness through employment and other support services, and involves a collaborative
 team composed of a mental health services provider, a job placement specialist, and a VR counselor
- The Next Generation Placement Methodology, an initiative to improve client outcomes by promoting teaming between VR counselors and contracted community rehabilitation providers (CRPs), who help place clients in jobs and give them employment support
- Voluntary motivational interviewing certification, a goal-oriented, client-centered counseling
 technique used by VR counselors to change behavior by helping clients explore and resolve their
 own ambivalence about employment
- A paradigm shift (inspired by the Workforce Innovation and Opportunity Act) in which the
 individualized plan for employment (IPE) moves from being viewed as a binding agreement—
 executed only after completing a comprehensive assessment,² developing clearly defined
 vocational goals, and understanding all the services a client may need—to a living document
 that is modified to evolve in response to changing circumstances and new information

VRS also wanted to expand counselors' and clients' access to information on financial and benefits planning. Before the project began, the process of receiving a full benefits analysis from the Minnesota Work Incentives Connection (WIC) often took weeks or months. VRS thought this delay interfered with some clients' ability to make informed choices about employment.

VRS IN THE SGA PROJECT TESTED FOUR INNOVATIONS

For the demonstration, Mathematica randomly assigned eight VRS field offices to deliver the SGA Project innovations to eligible SSDI clients (enhanced-service sites); and randomly assigned another eight offices to provide their usual services (usual-service sites). More information about the study's data and methods can be found in Box 1.

The SGA Project demonstration gave VRS the opportunity to rigorously test new strategies for improving VR services and client outcomes. As shown in Figure 1 and described below, the SGA Project innovations had four components that were delivered by a three-member team.



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¹ This brief is based on findings presented in the following reports:
Kehn, Matthew, et. al. "Minnesota's SGA Project Demonstration: An Interim Evaluation Report." Report submitted to the U.S. Department of Education, Rehabilitation Services Administration. Washington, DC: Mathematica Policy Research, December 2016.

Sevak, Purvi, et. al. "Minnesota Substantial Gainful Activity (SGA) Project Demonstration: Final Evaluation Report." Report submitted to the U.S. Department of Education, Rehabilitation Services Administration. Washington, DC: Mathematica Policy Research, September 2017.

² The IPE is a written plan outlining the client's vocational goal and the services to be provided by the VR agency and its contractors. **Faster pace of services and rapid engagement with clients.** VR counselors at the enhanced-service sites were expected to determine a candidate's eligibility for VR services within 2 days (compared with 10 days at the sites providing service as usual) and develop the candidate's IPE within 30 days (compared to 90 days at the other sites). Counselors also had to ensure that at least one of the three team members communicated weekly with each client.

Financial and benefits planning. Each enhanced-service site was staffed with a trained financial specialist who provided ongoing benefits counseling and financial education starting early in the process. Most of the financial specialists were certified community work incentives coordinators (CWIC); those who were not, received direct support from a remote CWIC. Financial specialists were expected to help clients understand the range of state and federal benefits they might be eligible for, the implications that work and earnings would have for continued receipt of these benefits, and the clients' options for returning to work. Staff and clients served by the usual-service sites continued to rely on the WIC for this information.

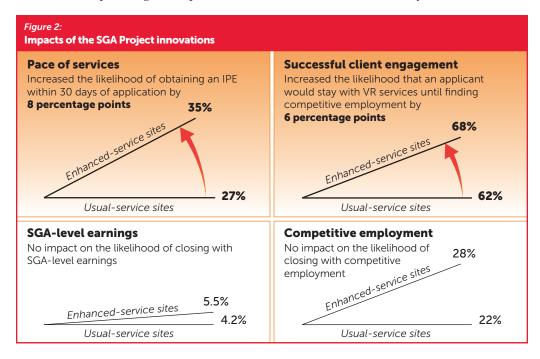
Job placement services. Each enhanced-service site was staffed with a dedicated in-house job placement specialist who worked closely with clients and the other team members to (1) help clients develop appropriate employment goals and a placement plan to be integrated into the IPE, (2) schedule interviews with prospective employers, and (3) provide follow-along assistance once clients obtained jobs. Many job placement specialists previously served as CRPs, who provide VR agency staff and clients

with similar services, but only after the development of the IPE. VR counselors at the usual-service sites continued to use their discretion to engage local CRPs for these services. Staff at the usual-service sites also did not engage job placement CRPs until after their IPEs were finished, whereas the job placement specialists at the enhanced-service sites started working with clients within a week of their application.

Coordinated team approach (CTA). The VR counselor, financial specialist, and job placement specialist were expected to collaborate and function as a team to give clients in-depth, personalized discussions, counseling, and services throughout the process, starting at its onset. The team members were to meet together with the client within seven days of application. Each team member subsequently worked with the client individually, however, team members were expected to maintain weekly communication with each other to share new information, discuss client progress, and develop and implement a comprehensive strategy to help the client achieve his or her vocational goal. Teaming between VR counselors and CRPs at the usual-service sites was encouraged, but not required, and rarely occurred before an IPE was developed.

EVALUATION FINDINGS REVEAL NOTABLE IMPACTS OF THE SGA PROJECT INNOVATIONS ON CLIENT OUTCOMES

As shown in Figure 2, the SGA Project innovations significantly increased an applicant's likelihood of having an IPE within 30 days of application, and also increased the likelihood that an applicant would stay with VR services until finding competitive employment. We did not find significant impacts on the applicants' likelihood of closing out services with competitive employment or of closing services with SGA-level earnings. At the time of the analysis, however, 41 percent of participants' cases remained open. It is possible that once all cases close, there will be measurable impacts on these outcomes. We also found no impacts (negative or positive) on these outcomes for non-SGA Project clients.



IMPLEMENTATION CHALLENGES AFFECTED DEMONSTRATION OUTCOMES

Data collected during the demonstration suggest that participants did not fully or consistently receive all components of the innovation. Just over one-third (35 percent) received an IPE within the project goal of 30 days, and 48 percent received a financial plan. Although most clients (53 percent) participated in an initial CTA meeting, just 27 percent of those who had an initial CTA meeting completed it within the project goal of 7 days after application.

Staff at the enhanced-service sites encountered challenges that affected their clients' access to the innovations. First, communication and logistical barriers hindered effective adoption of the CTA (particularly for sites covering large and mostly rural areas). Second, there was confusion about roles and responsibilities, along with a lack of coordination and limited leadership skills among some VR counselors. Adoption of the CTA improved over time, which staff attributed to factors such as team-building techniques, open and regular communication, and active involvement and support from local managers. Second, large caseloads and logistical barriers (particularly for sites covering large and rural areas) prevented some staff from meeting the pacing targets. Finally, the requirement to involve the job placement specialist early in the service delivery process was not universally embraced by VR counselors, particularly those who worked in remote areas and considered themselves well-informed about the local employment options.

VRS LEADERS AND STAFF LEARNED SEVERAL LESSONS FROM THEIR EXPERIENCE IMPLEMENTING THE SGA PROJECT

VR counselors learned about SSDI and other benefits, and they appreciated their access to knowledgeable staff who could tell them how earnings affect SSDI and other benefits. Before the SGA project, many VR counselors were uncomfortable discussing these topics with clients and avoided active use of DB101, a web-based resource to help people with disabilities learn how increased earnings can affect their benefits. The availability of a financial specialist meant that information got to clients faster and often eliminated the need for a full benefits analysis by the WIC. By the end of the demonstration, many VR counselors were more comfortable using the DB101 and more confident engaging all of their clients in high-level discussions about benefit issues.

Most VR counselors also came to embrace the concept of the IPE as a living document that could be drafted with available information and amended as needed, instead of a binding contract. The agency's involvement with the SGA Project advanced its established efforts to shift staff views of the IPE. It was critical for VR counselors to view the IPE as an evolving plan in order for them to successfully implement a faster pace of service. Most VR counselors eventually acknowledged that adopting this alternative view of the IPE freed them to move faster and take advantage of client momentum.

Finally, VRS staff recognized the value of stronger collaboration with job placement staff. For certain clients, VR counselors questioned the value of involving the job placement specialist early on, but most VR staff came to believe that incorporating early input from placement staff made for a stronger IPE. In addition, both VR counselors and placement specialists valued the opportunity to consult each other throughout the service-delivery process.

BOX 1: DATA AND METHODS

We randomly assigned VRS offices participating in the demonstration to provide either the enhanced SGA Project services or their usual services. VRS enrolled nonblind SSDI-only (that is, not receiving Supplemental Security Income) applicants for VR services in the demonstration from August 3, 2015, through August 3, 2016. The evaluation is based on VR administrative data on these individuals from application through April 24, 2017, data collected in spring 2016 and 2017 on two rounds of site visits featuring multiple interviews with VRS leaders and staff, and interviews with staff at the Institute of Community Inclusion, who provided training and technical assistance to VRS throughout the demonstration.

We estimated the impacts of the SGA Project innovations by comparing the outcomes of SSDI-only clients who applied for services at offices that implemented the SGA Project innovations to those who applied for services at offices that did not. We examined outcomes as of April 24, 2017, and measured the employment outcomes at the time clients' cases closed (that is, when they stopped receiving or attempting to receive services). Our methods account for differences in the characteristics of the clients at both types of offices, as well as pre-demonstration differences in client outcomes by office.