

Case Studies

The No Queue For You (NOQ4U) Project: A Multifaceted, Coordinated Effort to Eliminate the Waitlist Maine Division of Vocational Rehabilitation

Abstract

In February 2009, the Maine Division of Vocational Rehabilitation began to closely examine all agency practices. The purpose was to identify and address inefficiencies with the goal of eliminating the waitlist that had been in place since 2001 and moving out of an Order of Selection policy. To implement this effort, called the No Queue For You (NOQ4U) project, the agency formed a steering committee and assigned each member a focus area of the vocational rehabilitation (VR) process, including entering the program, developing and accomplishing an employment plan, and exiting the program. Additional focus areas included staff communication, staff training, and technology and data support to sub-committees. This practice represents a successful effort in eliminating the agency's waitlist while still maintaining a focus on serving customers with the most significant disabilities.

Background

The Maine Division of Vocational Rehabilitation (DVR) has operated under an Order of Selection (OOS) policy in the past, and went back under this policy in 2001, maintaining three priority categories: category 1 (most significantly disabled or MSD), category 2 (significantly disabled or SD), and category 3 (disabled or D). In the fall of 2008, when the wait time was at 25 weeks (just over 6 months) for individuals in category 1 and individuals in category 2 and 3 could not be served, the VR director set the goal of eliminating the waitlist. This project was referred to as No Queue For You (NOQ4U).

Purpose, Goals, and Implementation

The purpose of the project was to examine agency practices that were not efficient or central to DVR's mission, bring the focus back to best practices, train staff on these principles and support them in their work, and engage key state-level partners in an effort to coordinate services and funding. The primary and immediate goal was to reduce the waitlist and serve all eligible customers (from every category) without delay.

To implement this project, the agency formed a steering committee in early 2009. The committee was composed of counselors and central-office/administrative staff and also included representation from the State Rehabilitation Council (SRC), staff from the Division for the Deaf and Hard of Hearing, and staff from the Division for the Blind and Visually Impaired. The project had several components, including: (a) establish sub-committees to examine current VR agency practices and to recommend actions; (b) manage priorities and introduce changes to support project success; (c) use stimulus funds to hire temporary staff to assist with customers released from the waitlist; (d) offer career-exploration workshops to customers; (e) modify/ change the priority categorization; and (f) implement a new electronic case-management system.

a) Establish Sub-Committees to Examine Current VR Agency Practices and to Recommend Actions

In February 2009, the steering committee established six sub-committees. Each sub-committee was headed by a member of the steering committee and charged with the task of examining agency practices during particular stages of vocational rehabilitation. The following stages were the focus: 1) entering the VR program, 2) developing an employment plan, 3) accomplishing the employment plan, 4) exiting the VR program (case closure), and 5) providing technology and data support to other sub-committees. The sixth sub-committee focused on transition-age youth customers. These committees met regularly, reviewed documents, developed recommended actions (deliverables) and presented their findings and recommendations to the project staff and steering committee.



b) Managing Priorities and Introducing Changes to Support Project Success

A major task inherent in implementing the changes associated with the project was communication. Key informants noted that it was important to initiate and maintain communication with both internal staff and key external service partners (e.g., the SRC, the legislature, other state-level adult disability service agencies). Several strategies were used to facilitate information-sharing and to create the opportunity to give feedback both internally and externally. These strategies included: a project website viewable by all agency staff where the sub-committees posted their meeting minutes and project plans, a newsletter distributed to internal staff and external parties (e.g., the SRC, legislators, leadership of partner agencies), and a series of informal meetings to give information on the status of the project and receive feedback.

The sub-committees had a major impact on the way DVR functioned following their recommendations for changes and how they should be implemented. However, implementing and prioritizing these changes was a challenge. Aside from the deliverables of each sub-committee, the process that the groups went through to develop recommendations was useful to agency leadership in terms of implementation. Sub-committee staff presented their recommendations including communication to all staff and next steps. From these discussions, the steering committee planned how to implement the changes, including informing managers and supervisors and then informing and training local office staff. Agency management used a plan-do-check-act (PDCA) method to prioritize and implement changes. The agency also has a counselor advisory group that the steering committee used to get feedback on proposed changes.

c) Use Stimulus Funds to Hire Temporary Staff to Assist with Customers Released from the Waitlist

In spring 2009, DVR decided to use American Reinvestment and Recovery Act (ARRA) funds to hire 16 temporary rehabilitation assistants to assist with contacting customers from the waitlist or vacant caseloads (individuals who had been out of contact for a long time). This assistance was important in order to quickly get in touch with and engage waitlisted customers by scheduling appointments, and to discuss case closure options with those who did not feel ready to re-engage with VR services. The agency had an ambitious goal for the project to eliminate the waitlist by October 1, 2010, and the temporary staff were viewed as an essential element of meeting that goal.

The temporary staff were dispersed throughout the state, based on office needs (e.g., ratio of counseling staff to clerical staff, ratio of supervisors to counselors, etc.). Local managers were able to use them in a variety of capacities, as long as their first priority was to help with tasks directed at eliminating the waitlist. Roles of these temporary staff included: calling customers from the waitlist and vacant caseloads to see if they were still interested in and available for VR services, supporting counselors and running career-exploration workshops, and engaging with the customers coming into the office off the waitlist and from vacant caseloads.

d) Offer Career-Exploration Workshops to VR Customers

One of the six sub-committees focused on developing an employment plan. More specifically, the sub-committee looked at how to support customers in this process by providing career-exploration workshops. The initiative to provide a career-exploration service to customers came from the desire to provide more comprehensive vocational counseling and guidance during employment plan development. The work of the committee included the implementation of the workshops statewide, and consideration of how the roll-out of the workshops related to other changes in practice being asked of staff.

The workgroup consulted other states that had successfully dealt with the same issue. Staff with the Washington state DVR shared their tools including the career-exploration workshops that they used with customers coming off of the waitlist. A staff person in northern Maine had recently moved from a counselor position in the state of Washington, and the agency used this person to set up a model of a five-day workshop. DVR also contracted with an outside source to develop a curriculum. Additional tools used in the workshop included the Employment Readiness Scale and the World of Work Inventory, which the agency purchased and trained staff to use. Maine DVR is in the process of customizing the career-exploration workshop for transitionage youth, to be piloted and used within school systems. Alterations are being made to workshop duration (to fit within a 45-minute class period) as well as content (reading level, pictorial depictions for non-readers, etc.).

e) Modify/Change the Priority Categorization

Another change that impacted the waitlist and ensured priority access to individuals with MSD was the process that the agency used to place customers into priority categories as an effort to increase the accuracy of the definitions. The previous system for categorizing resulted in most customers (about 90%) being put in category 1 (MSD). A tool was developed to assist counselors in applying the priority category definitions, as a result of the work of the Entering the VR Program sub-committee and a recommendation made by the Rehabilitation Services Administration (RSA) monitoring team. The tool that is currently being used (implemented in January 2010) is modeled after the one used in Washington DVR, with some state-specific modifications.

Feedback from the field has been that the tool is clearer and more user-friendly than the previous materials, largely because it walks counselors through the definitions, describes serious limitations in detail, and gives examples in each functional area. Additional materials include questions to ask customers during interviews and examples that differentiate substantial limitations versus limitations that would not meet the definition. The new tool, which lays out more specific criteria for each category and increases the number of required functional limitations to four from the original two, has resulted in a decrease in customers categorized in category 1 to approximately 45%. According to estimates by our key informants, approximately 25–30% of customers are placed in category 2 (SD), and the remaining 25–30% in category 3. DVR staff feel that this breakdown of customers is more accurate.

f) Implement a New Electronic Case-Management System

DVR is in the process of purchasing the electronic case-management system AWARE, developed by Alliance Enterprises. The new system will allow counselors and staff to see data in real time, including their progress towards performance goals and tasks; to sort their caseload by referral source (e.g., school system for transition counselors); and to perform other functions that they are unable to do with the current system, which is a hybrid between an electronic and a paper-based system. A particularly important new feature given Maine's geography and population distribution is remote access, which was requested by many counselors. A major improvement associated with the new system is anticipated to be greater ease in ensuring data quality (i.e., monitoring accuracy of information entered) as well as creating and sharing data reports, which were both limitations of the old system.

Results

Due to the coordinated effort, DVR was able to eliminate its waitlist and serve customers in all categories starting in October 2010. Major milestones were accomplished in April 2010 (waitlist was eliminated for all customers in category 1) and June 2010 (waitlist was eliminated for customers in category 2). Additionally, several procedural directives and documents now exist for use by field staff in order to improve and standardize service delivery. These include: Referral/application/intake materials, trial work/extended evaluation materials, OOS certification (including functional limitations indicators and significance of disability guides), student brochures, communication tools, and checklists for both successful and unsuccessful closures. DVR is also working on aspects of their new case management system that will allow staff to monitor their own caseloads more effectively and to progress towards performance goals.

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