2012 Program Report Card: Mental Health Employment Program (Department of Mental Health & Addiction Services)

Quality of Life Result: All Connecticut working age residents have jobs that provide financial self-sufficiency.

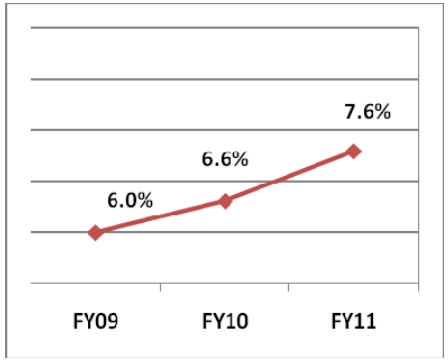
Contribution to the Result: The DMHAS Mental Health Employment Program increases the number of residents in competitive employment by providing job placement and retention services.

Program Expenditures	State Funding	Federal Funding	Other Funding	Total Funding
Actual FY 11	10,417,745			10,417,745
Estimated FY 12	10,417,746			10,417,746

Partners: The Connecticut Bureau of Rehabilitative Services and the Department of Labor collaborate with DMHAS to provide an integrated system of employment supports and opportunities. The Corporation for Supportive Housing provides employment supports in clients' communities. Additionally, DMHAS works closely with the National Alliance on Mental Illness (NAMI) to train peer, family, and community advocates in supported employment.

How Well Did We Do It?

DMHAS Clients Enrolled in Supported Employment Programs



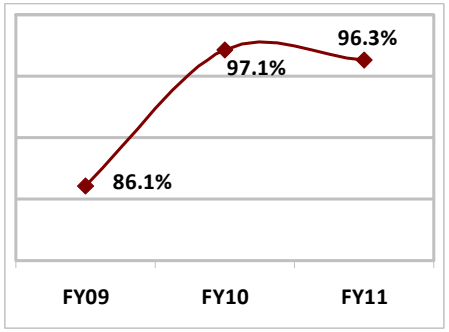
Client Group	FY09	FY10	FY11
Employment	3,053	3,638	4,165
All MH	50,858	54,993	54,858

Story behind the baseline:

Five new Supported Employment Programs were opened in FY 2010, increasing monthly capacity by over 600 people. All employment contracts were re-procured for FY 2011, instituting a policy of universal eligibility for employment services for all DMHAS clients, increasing the size of the potential client pool. **Trend: ▲**

How Well Did We Do It?

DMHAS Client Satisfaction with Supported Employment Programs*



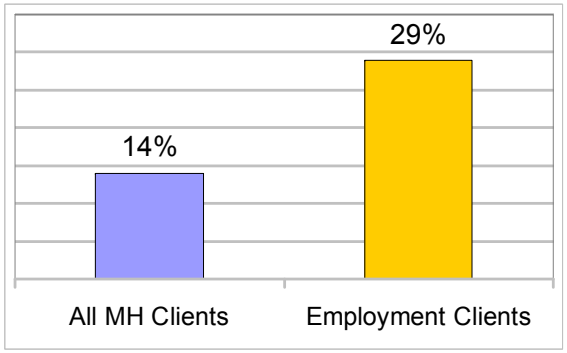
FY09		FY10		FY11	
N	Sat	N	Sat	N	Sat
954	821	872	845	1,106	1,065

Story behind the baseline:

Connecticut has used the Mental Health Statistics Improvement Program (MHSIP) consumer satisfaction instrument for 7 years. The question domains are General Satisfaction, Access, Quality and Appropriateness, Outcomes, Participation in Treatment, Recovery, and Respect. This chart illustrates General Satisfaction domain results for Supported Employment Programs over the last 3 fiscal years. **Trend: ▲**

Is Anyone Better Off?

Competitive Employment: Supported Employment Clients vs. Total DMHAS MH Population at End of FY11



Client Group	Total N	Employed	Emp. %
Employment	2474	709	28.7%
All MH	36509	5139	14.1%

Story behind the baseline:

As of FY 2011, all employment contracts require fidelity to the Supported Employment evidence based practice model. To ensure adherence to the EBP, DMHAS staff conduct intensive 2 day site visits twice a year. In FY 2011, all employment programs were in compliance with the Supported Employment model.
Trend: ◄► (need future data for comparison)

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Proposed Actions to Turn the Curve:

DMHAS has recently introduced a number of strategies to strengthen an already robust Supported Employment program. Contracts mandate the use of the "evidence-based supported employment practice" (EBP) that leverages employment supports from diverse members of their treatment team; not only from vocational counselors, but from clinical providers, case managers, peers, family members and housing site staff. A policy of "zero exclusion" means that every DMHAS client is automatically eligible for employment services. Clients are moved rapidly into the job search mode including benefits counseling. Job development focuses on meeting employers' unmet needs while facilitating good employment matches.

A new pilot program located at the state operated River Valley Services will be launched in late January / early February 2012. This program will be the first to collect more detailed employment information, such as number of hours working in the community, type of employer and key elements of the EBP.

DMHAS maintains a strong relationship with traditional employers, such as grocery stores and home improvement warehouses in high-turnover positions. The agency also works with an increasing number of smaller concerns. These "mom and pop" businesses make a significant investment in consumers, providing a high level of support to them as well as training and income.

Over the last fiscal year, DMHAS has developed quarterly provider quality reports which include the federally-mandated National Outcome Measures (NOMs). One particularly relevant NOM is "Employment Status". In years past, providers typically reported Employment Status at admission and discharge; as of FY2011, this indicator is included as part of the periodic assessment, to be completed every 90 days the client is active. This continuous quality improvement process has allowed for mid-course corrections and planning.

Data Development Agenda:

As mentioned in the previous section, DMHAS commenced collecting employment status information on a periodic basis, starting at the beginning of FY 2011. Data for previous years was collected at admission and discharge. Because people may remain in employment programs for long periods of time, the data pre-2011 does not allow for easy pre-post comparison.

Currently, DMHAS evaluation staff are developing a feedback process based on point in time analysis. Programs will be assessed on the number of people who are competitively employed at the end of each quarter.

DMHAS will also assess programs by the number of clients who maintain competitive employment for 90 days or longer within a reporting period. This information will come from the expanded data set which is to be piloted in early CY 2012.

New data entry screens for the expanded data set are complete in the data system used by the state operated facilities. The screens will be available by early CY 2012 for the private non-profit providers' use.

DMHAS has made past attempts to link client data with unemployment data from the Department of Labor; however, HIPAA concerns have limited the size and scope of these efforts. DMHAS staff remain hopeful that future data sharing will assist with obtaining this information.

[*] Satisfaction rates in this report differ from previous reports because the sample has been limited to programs that follow the Evidence-Based Practice model and are currently active in our system.