

SRC Presentation

March 21, 2019

Creating Opportunities for Independent Living and Work



Eligibility Unit

West District Pilot

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Overview

- Standardizes processes between Vocational Rehabilitation (VR) offices
- Reduces agency silos that impede good service delivery
- Allows Vocational Rehabilitation Counselors (VRCs) in offices to begin their work with consumers who are eligible and ready-to-go
- Why change:
 - Lack of standard eligibility process and uniform decisions
 - Unnecessary delays in service delivery
 - Enhance access to all MRC programs

Progress to Date

Began with two workgroups –

- 10 staff in different positions across VR and Community Living (CL)
- “Consultant” group composed of staff from across the agency who vetted ideas, challenged assumptions and made our work stronger

Today – more than 35 staff working together to help shape the Eligibility Pilot

- Working subgroups are considering and making recommendations regarding staffing, training, quality measures, impact on Pilot Area VR offices, orientation to MRC, documentation, working on a “mobile” basis, integrating CL eligibility and VR eligibility processes

Goals

- Maximize service delivery
- Minimize wait time
- Enhance access to all MRC programs
- Offer rapid engagement
- Increase efficiency between MRC programs to work more effectively as **oneMRC**

Staffing

- Per the Wisconsin (WI) Workforce Innovations and Opportunities Act (WIOA) Matrix 2015 eligibility pilot, DVR anticipated to “free up to 15% of the counselor’s time to refocus on direct consumer employment plan activities.” The pilot also anticipated that this pilot would help retain staff who experienced “case burnout” from process activities.
- We conducted an informal poll of 8 VR staff from different offices who provided average amounts of time they state they spend doing “the front end” – intake, eligibility, OOS. The results echoed the percentage Wisconsin quoted.
- We agreed that we would use this data. **This percentage supports moving 1 in 7 VRCs to eligibility functions.**

262.50	Total hours, 7 FTE
39.38	15% of 263 hours

Plan

TO DO LIST:

✓ Form 30 revisions completed and reviewed with Union

✓ Interview and hire Unit Supervisor

With supervisor, hire VRCs and clerks

New unit staff and existing workgroup work together to finish tasks

Train Eligibility Unit Pilot staff

Tentative start date: Spring 2019*

* Will work with new consumers; consumers already in process will complete where they began.

MRC/DMH Employment Initiative

Commissioner Toni Wolf

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The Employment Initiative represents an opportunity to:

- Ensure more rapid engagement with shared DMH job seekers
- Enhance the existing MRC/DMH partnership
- Leverage the strengths and resources of each agency more effectively
- Apply lessons learned/best practices to better serve job seekers
- Increase job retention rates

Vision and Mission:

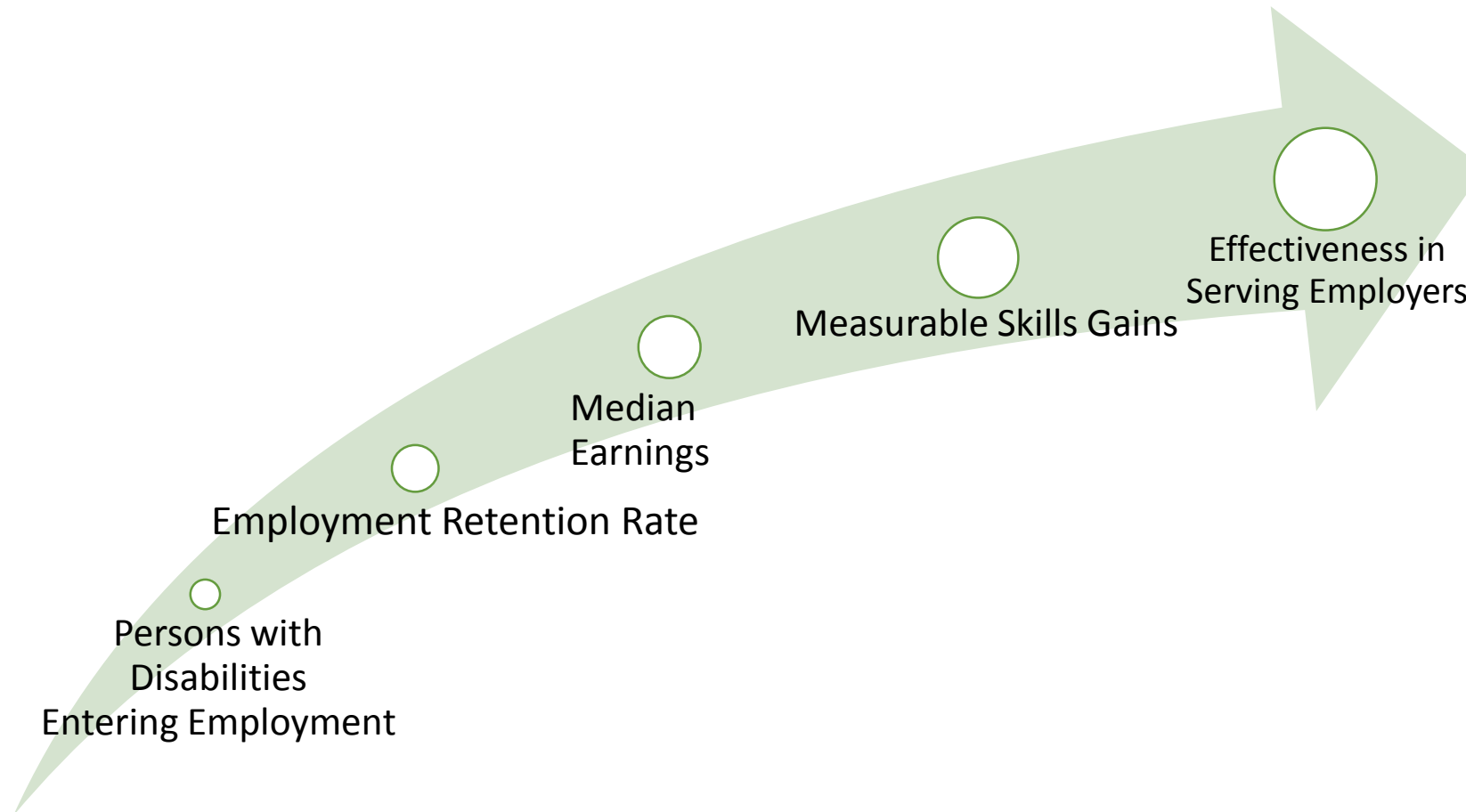
Shared Vision

A Commonwealth where people with psychiatric disabilities served by DMH and MRC live fully integrated lives, economically and socially.

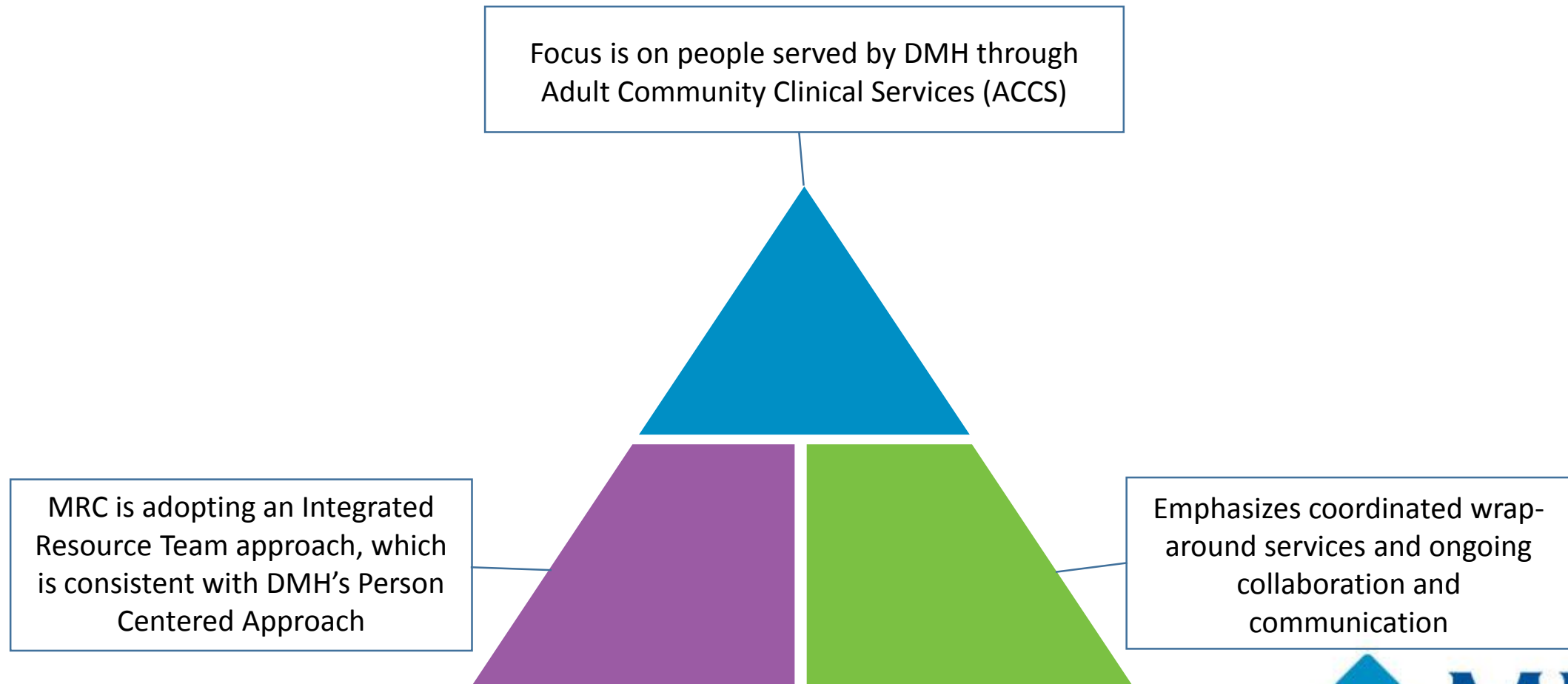
Shared Mission

To build an integrated employment framework that inspires and engages innovation to ensure full employment for people with psychiatric disabilities at the same rate of employment as the general population.

Workforce Innovation and Opportunity Act Common Measures



Overview



Partnership Operating Principles



Engagement does not always = “Job Ready”



Continuous collaboration among all stakeholders.



Peers and peer support are critical!

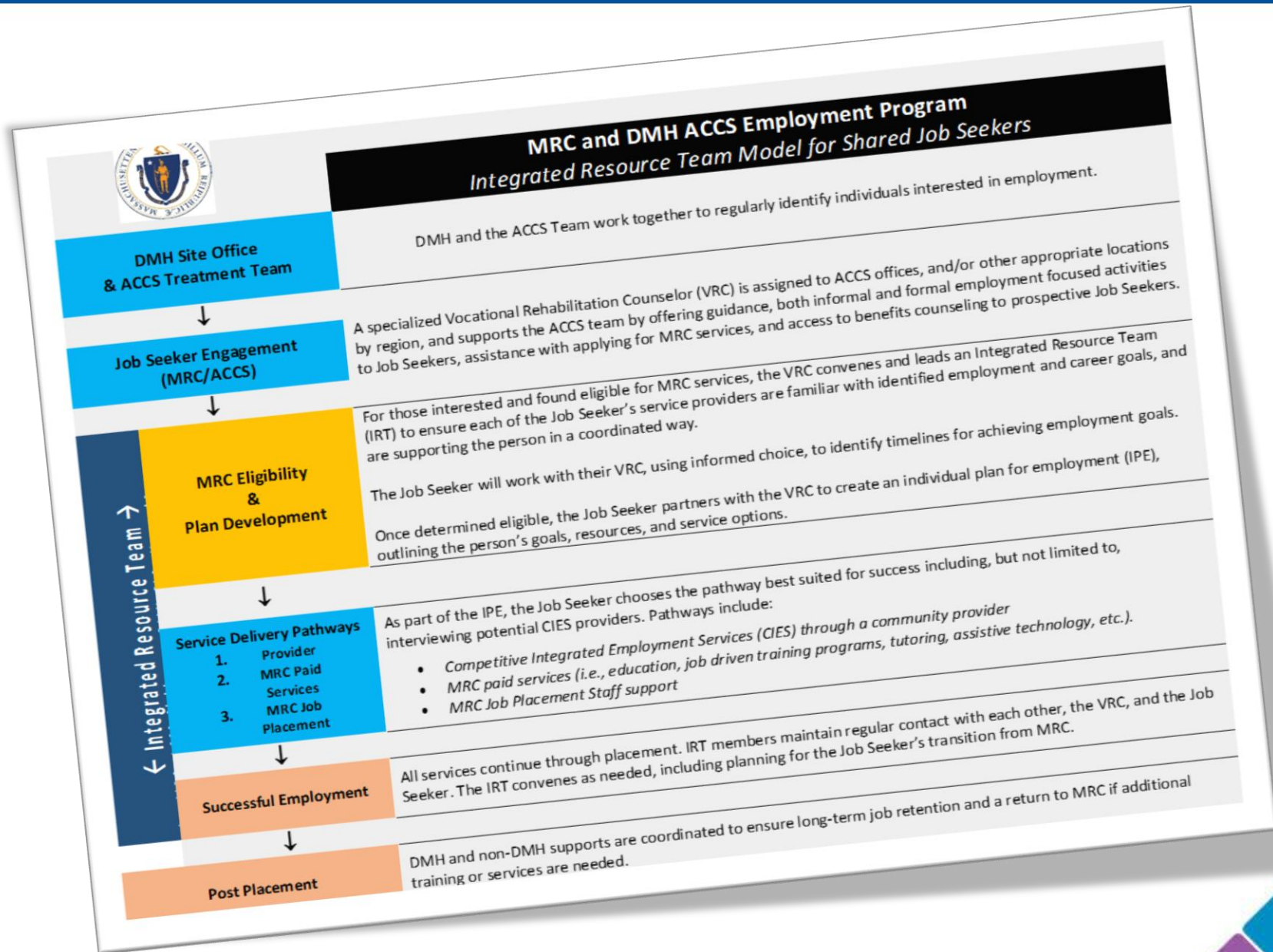


The person receiving the service informs the process and direction



Engagement is timely and flexible.





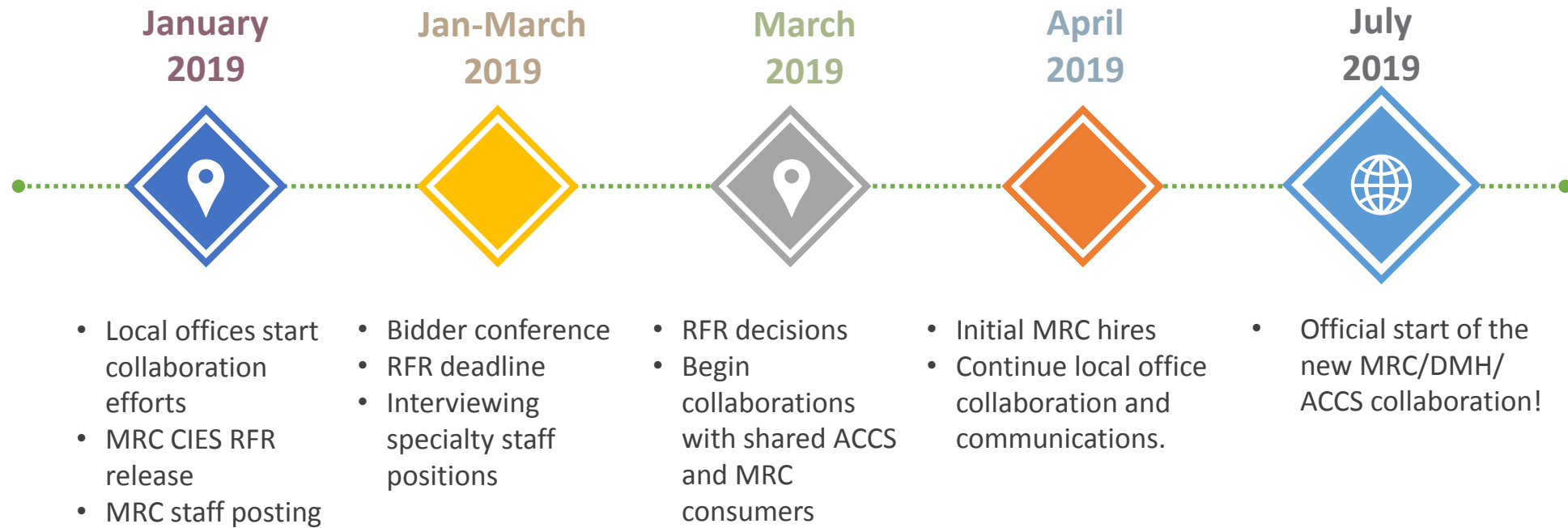
Employment Initiative Facts:

- DMH is currently in a “bridge year.” A new DMH service, Adult Community Clinical Services (ACCS), started on 7/1/2018.
- MRC will continue to provide employment services to ACCS job seekers. Will include standard paid services (training related), internal job placement services, & Competitive Integrated Employment Services.
- MRC will hire additional VR Counselors; they will have smaller, more specialized caseloads (i.e., 50 consumers), and be more mobile.
- Interagency Groups will form in partnership with each Area Office; Community-based Teams will provide increased engagement with ACCS job seekers.

Integrated Resource Team (IRT):

- Partners come together to craft and jointly own employment goals.
- The job seeker determines the members of the IRT, will include the VRC and the ACCS staff, and could include a CIES provider, MRC Job Placement Specialists, natural supports and other supports, etc.

Timeline



Business Process Redesign

Kate Biebel

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What is Business Process Redesign?

- Opportunity to examine MRC's structure and processes to better understand the strengths and areas of improvement of the agency and create a roadmap for the future
- MRC utilized a consultant (Deloitte) to synthesize information shared with the organization and assist MRC in creating a plan for the future

Business Redesign Team

- Steering committee
 - 10 MRC staff representing all divisions in various roles
- Deloitte
 - Specialist in assisting state agencies across the nation
- Key stakeholders
 - Senior Leadership
- MRC community - Everyone has a voice

Three Phases

Phase I: Assessment of MRC's Current State – (Oct-Nov 2018)

- 70 MRC employees across divisions and roles interviewed (approx. 10% of MRC staff)
- 18 providers from Vocational Rehabilitation (VR) and Community Living (CL) interviewed

Phase II: Developing Organizational Priorities – (Nov-Dec 2018)

- 7 opportunity categories identified
- 30 areas of opportunity for improvement identified

Phase III: Developed Roadmap – (Jan 2019)

- Developed recommendations on how to move forward with areas of improvement based on what we learned in Phase I & II

Opportunity Categories



Integration: increase the integration between the divisions to enhance service delivery

Consumer Experience: create a seamless and rewarding experience for consumers

Staff Experience: increase agency morale and involvement of staff in defining and championing MRC's overall mission and goals

Efficient Processes: implement processes and tools that support staff in completing their work and enhance organizational efficiency

Data Informed Decisions: improve data usage and reporting throughout the agency to enable informed decision-making

Communication: improve communication so that all stakeholders, both internal and external, have current and timely information

Partnerships: increase collaboration with external stakeholders and partners to gain insights and better serve consumers

Opportunities: Consumer Experience



#13: Intake & eligibility

Develop an approach to coordinate/consolidate intake and eligibility processes across CL, VR, and DDS

Prioritization Status:

Phase 1



Description

- Consolidate the intake and eligibility processes between the three divisions
- Implement approvals and process changes to exchange data across divisions, considering the Maryland model as a guide
- Evaluate if DDS data can be shared with CL and VR, and if so under what circumstances



Key Components

- Appropriate approvals and processes to enable data-sharing across divisions including DDS
- Knowledgeable and experienced intake and eligibility specialists to guide consumers through the process
- Integrated systems to allow consumers access into appropriate services once intake is complete
- Engagement of consumers and other stakeholders to provide feedback in the design of the new intake and eligibility process



Considerations

- Assess the model used by other states, such as Maryland, to share data from DDS
- Implement new systems and enhancements in support of a consolidated intake process



Potential Outcomes

- Improve identification of all the services that consumers are eligible for, making service delivery more consumer-centric and holistic
- Enhance consumer experience by providing them with services that address all of their needs
- Enable staff to focus on better serving consumers as a result of more efficient processes

Objectives Addressed

Integration	Consumer Experience	Staff Experience	Efficient Processes	Data Informed Decisions	Communication	Partnerships
✓	✓		✓			

Opportunities: Consumer Experience

#13: Consolidate intake & eligibility

Activities by Task													
Months	1	2	3	4	5	6	7	8	9	10	11	12	+
Consolidation of Intake Process													
• Continue to execute on recommendations of Eligibility workgroup	█	█	█	█	█	█							
• Establish cross-agency communication strategy around new process		█											
• Evaluate impacts on existing processes and systems (e.g., case management)			█	█									
• Document new processes, roles, and responsibilities					█	█							
• Train staff on new processes, roles, and responsibilities							█	█					
Data Security Protocols													
• Establish security roles					█	█							
• Secure access to sensitive data							█	█					
Integration with DDS													
• Identify data elements that are valuable to share between DDS and other programs							█						
• Assess SSA regulations around data sharing								█					
• Explore potential models for information sharing with DDS (e.g., Maryland)									█	█			
• Develop a model for data sharing with DDS and receive approval from MRC and SSA											█	█	█
• Continuously monitor process for compliance with federal requirements													█

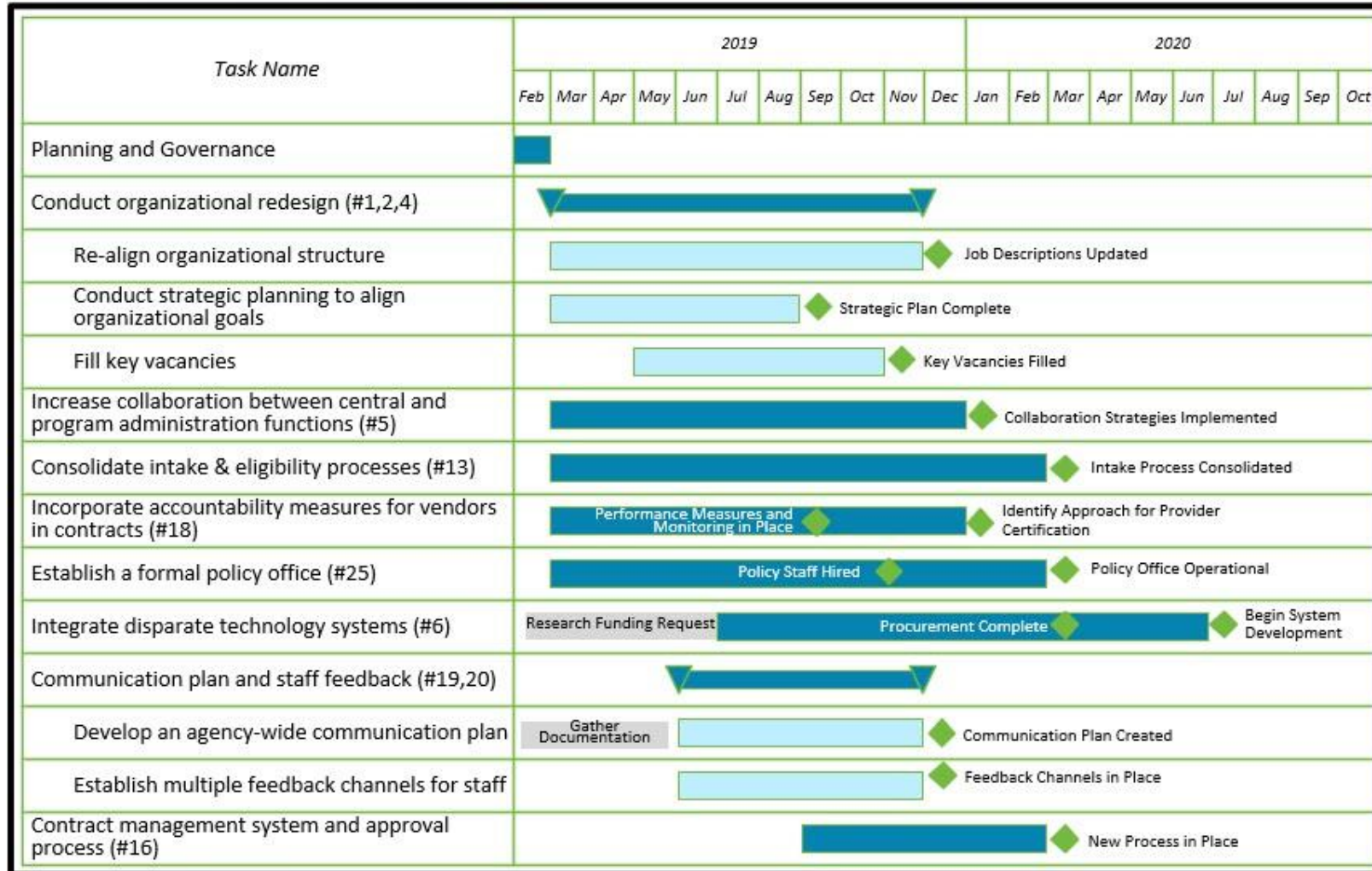
Duration: 12 months	Resource Requirements	Dependencies
Level of Effort: High	<ul style="list-style-type: none"> SSA approval to exchange data with DDS 	<ul style="list-style-type: none"> Eligibility workgroup in-flight initiatives
Project Staffing	Stakeholders	Progress Measures
Owners: Eligibility workgroup Support Team: MRC program staff	<ul style="list-style-type: none"> MRC leadership Training department SSA 	<ul style="list-style-type: none"> Consumer feedback on consistency of intake / eligibility experience Progress against project work plan



Phase 1 Priorities



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Business
Process
Redesign final
report



Next Steps

- Identify leadership “leads” for each of the eight phase 1 priorities – complete
- Create an Advisory Body to oversee implementation – in process
- Develop “charters” for each priority area to identify goals and measurable outcomes – end of March, 2019
- Ensure MRC voice in all priority areas – in process
- Provide monthly updates to Commissioner – in process