

BREAKING BARRIERS

Implementing Individual Placement and
Support in a Workforce Setting

EXECUTIVE SUMMARY

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Overview

Breaking Barriers was a San Diego-based program that provided employment services to low-income individuals with a range of disabilities and conditions, using the Individual Placement and Support (IPS) approach. IPS focuses on rapid job search and placement alongside support services, based on the theory that employment is an integral part of rehabilitation, progress, and recovery. IPS was originally designed specifically for people with serious mental illness.

Breaking Barriers operated in four program locations from January 2016 through June 2018. Key services included career counseling to establish goals and interests, job search assistance, developing connections with local employers, personalized benefits counseling, referrals to supportive services, and follow-along support once placed in a job.

The current report presents findings from an evaluation of Breaking Barriers, which includes an implementation study, an impact analysis, and a cost study. The implementation study describes the intervention and provides contextual data to help interpret the results of the impact analysis. The cost study measures the costs of operating Breaking Barriers and how these costs compare with those of other services available in the community. The impact analysis employs a random assignment design: Individuals eligible for and interested in receiving Breaking Barriers services were assigned at random to a program group, which was offered Breaking Barriers services, or to a control group, which was referred to other publicly available supports. A total of 1,061 individuals enrolled in the study. Using survey data, the research team measured differences between the program and control groups on employment, earnings, public benefits, and health outcomes over a 15-month follow-up period.

Key Findings

- Breaking Barriers implemented services as intended and with fidelity to the IPS model.
- The characteristics of the Breaking Barriers study sample are somewhat different from those of the populations who most commonly receive IPS.
- There are no statistically significant differences between the program and control groups on the primary outcomes measured — employment, length of employment, and total earnings — during the follow-up period.
- The average cost per person of participating in Breaking Barriers over a 12-month period was \$4,340 (in program year 2017 dollars), which is comparable to other IPS programs.

These results are a departure from the findings of other studies of IPS implementation. This may be in part due to the characteristics of the Breaking Barriers study sample. The program may have been better targeted to a group with higher needs that is less likely to find employment on their own. Future analyses of administrative records will help round out these findings.

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We are grateful to the SDWP leadership and staff members that participated in the evaluation and greatly appreciated their openness and dedication to the research process. They worked tirelessly to provide services to individuals in their communities, played a critical role in helping to recruit and enroll participants into the evaluation, made time in their busy schedules to participate in interviews, and provided us with essential data about study participants. In particular, we are grateful to Tanissha Harrell, Haley Stayton, Paul Dacanay, Lance Brandenburg, Vicki Brannock, and Nicole Murphy. We also thank the referral partners for their participation in interviews, including those from CalWORKs and the California Department of Rehabilitation.

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The Authors

Executive Summary

Low-income adults with disabilities often struggle to find competitive and stable employment. Similarly, state and local agencies look to provide effective employment services to this population in a timely and cost-effective manner. Breaking Barriers was a San Diego-based program that provided employment services to low-income individuals with a range of disabilities and conditions in an effort to improve their employment outcomes. The Breaking Barriers program provided services using a form of supported employment — a vocational rehabilitation approach for individuals with disabilities — called Individual Placement and Support (IPS). This report presents findings from an evaluation of Breaking Barriers conducted by MDRC under a contract with the San Diego Workforce Partnership.

Supported employment focuses on rapid job search and placement alongside support services, based on the theory that employment is an integral part of rehabilitation, progress, and recovery. IPS is a well-known and well-tested type of supported employment, designed specifically for people with serious mental illness. IPS was developed for, and has largely been studied in, community mental health centers. Since its inception in the 1990s, there have been over 30 randomized controlled trials of IPS within and outside of the United States. Meta-analyses of these randomized controlled trials have found that IPS is more likely to result in competitive employment, the primary outcome of IPS, than the control condition being tested.¹ Across most of these randomized controlled trials, members of the study sample exclusively had a serious mental illness and most were not employed at the time of study enrollment. Among the studies of IPS in the United States, study sample members were often receiving Supplemental Security Income (SSI), Social Security Disability Insurance (SSDI), or both at the time of study enrollment.

There is limited research and evidence on the effectiveness of IPS for populations that have disabilities or conditions other than serious mental illness. Among the more promising studies include one of IPS for veterans with spinal cord injuries, which had positive employment results, but the sample size was small. In 2011, MDRC led a randomized controlled trial of Minnesota's FAST program in Ramsey County, which offered IPS services to Temporary Assistance for Needy Families (TANF) recipients with physical disabilities, mental disabilities (though not specifically serious mental illness), or both. The study found impacts on employment in the first and fourth quarters of follow-up; however, IPS services were also packaged along with access to medical and mental health support services, and the sample size was fairly small.

¹Donald E. Frederick and Tyler J. VanderWeele, "Supported Employment: Meta-Analysis and Review of Randomized Controlled Trials of Individual Placement and Support," *PLoS ONE* 14, 2 (2019); Matthew Mordini, Leona Tan, Beate Brinchmann, Min-Jung Wang, Eoin Killackey, Nicholas Glozier, Arnstein Mykletun, and Samuel B. Harvey, "Supported Employment for People with Severe Mental Illness: Systematic Review and Meta-Analysis of the International Evidence," *The British Journal of Psychiatry* 209, 1 (2016): 14-22.

The evaluation of Breaking Barriers presents an opportunity to test the effectiveness of IPS within a broader population (individuals whose primary disability is not necessarily serious mental illness). The evaluation is also an opportunity to understand differences in delivering IPS services in a workforce setting, rather than the mental health center setting where IPS is more commonly implemented.

About Breaking Barriers and the IPS Model

The San Diego Workforce Partnership (SDWP), the Workforce Investment Board for San Diego County, was awarded funding in 2014 from the U.S. Department of Labor’s Workforce Innovation Fund to operate Breaking Barriers.² The program operated and delivered IPS services to its clients from January 2016 through June 2018, at four program locations in the large and diverse San Diego County. To be eligible for the Breaking Barriers program, applicants needed to be at least 18 years old, be a San Diego County resident, have a self-identified disability, be low-income, be not working or working fewer hours than they wanted, and be a client of a qualified referral partner. (These partners include CalWORKs — California’s TANF program — the California Department of Rehabilitation, or County Behavioral Health Services).

IPS is defined by eight key principles, listed below.³ Adherence to these principles is measured through a well-developed fidelity tool, the IPS Supported Employment Fidelity Scale, which has been tested and widely used in IPS programs.⁴

1. There is a zero-exclusion policy. Every person who wants to participate is eligible.
2. Employment services are integrated with other essential supports (in most IPS programs, specifically with mental health supports).
3. Competitive employment is the main goal.
4. Participants receive comprehensive benefits counseling on how work and earnings interact with public benefits.
5. The job search starts as soon as a person expresses interest in work. There is no, or at least limited, “pre-vocational” training.
6. Employment specialists systematically develop relationships with employers and actively engage in job development.

²San Diego Workforce Partnership, “News” (2014), Website: <https://workforce.org/news/press-release-6m-awarded-san-diego-workforce-partnership-through-workforce-innovation-fund>.

³IPS Employment Center, “IPS Practice and Principles” (2017), Website: <https://ipsworks.org/index.php/documents/ips-practice-and-principles>.

⁴Deborah R. Becker, Sarah J. Swanson, Sandra L. Reese, Gary R. Bond, and Bethany M. McLeman, *Supported Employment Fidelity Review Manual* (Lebanon, NH: IPS Employment Center, 2015). See Appendix E for more details on the scale.

7. Job supports are available as needed and are not time limited.
8. Client preferences regarding employment are important.

Breaking Barriers delivered various services and supports in adherence to the IPS model. Staff maintained small caseloads, which enabled them to provide clients with individualized support. They worked with clients to establish goals and interests, and provide help completing job applications and finding job opportunities. Staff developed connections with local employers to more effectively connect clients to potential jobs. The program also offered personalized benefits counseling to help participants understand how employment would affect their benefits and referrals to other programs for supportive services. Lastly, after a participant was placed in a job, staff members maintained contact with the participant to stay informed and address any of the participant's needs. These services are expected to lead to outcomes such as higher rates of employment, decreased reliance on TANF and other benefits, and a reduction of barriers to employment.

The Breaking Barriers Evaluation

MDRC, in partnership with MEF Associates, conducted the evaluation of the Breaking Barriers program. The evaluation consists of three main components: an implementation study, an impact analysis, and a cost study. The implementation study describes the intervention as it operates on the ground, identifies challenges, and provides contextual data to help interpret the results of the impact analysis.⁵ The cost study focuses on understanding the costs of operating Breaking Barriers and how these costs compare with the costs of other services available in the community.⁶

The impact analysis employs a random assignment research design. Accordingly, individuals eligible for and interested in receiving Breaking Barriers services were assigned at random to a program group, which was offered IPS services through Breaking Barriers, or to a control group, which was not offered Breaking Barriers services, though group members had access to other publicly available services. Because random assignment is designed to result in two groups with similar observed and unobserved characteristics, differences in outcomes between the two groups indicate the effects of Breaking Barriers.

A total of 1,061 individuals were randomly assigned (528 to the program group, 533 to the control group) between January 2016 and early November 2017.⁷ Data were collected through a participant follow-up survey, administered 15 months, on average, following random assignment, to measure any differences in outcomes that emerged across the two research groups.

⁵The implementation study drew on qualitative data collected through two rounds of site visits, program participation data from the Breaking Barriers management information system, data collected from a participant follow-up survey, and IPS fidelity reviews.

⁶Costs are based on financial summaries and invoices from the program.

⁷Veterans could not be included in the study — due to federal funding requirements — so all eligible veterans received Breaking Barriers services. They were not included in this analysis.

Key Findings

- **Breaking Barriers largely implemented services as intended and with fidelity to the IPS model. However, there was no integration with mental health services as in more traditional IPS programs.**

Information collected from interviews conducted during implementation site visits indicated that Breaking Barriers delivered a set of services that covered most key components of the IPS model. Data collected from the Breaking Barriers management information system confirmed that clients were engaged in the program: Nearly all program group members received at least initial employment services from Breaking Barriers.

IPS fidelity reviews, conducted by an IPS consultant at each job center four times during the study period, determined that the job centers delivered services with fidelity to the IPS model.⁸ While fidelity scores varied, each job center received scores from the consultant's reviews that fell within ranges defined as "fair fidelity" or "good fidelity," showing that the program was successfully implementing the IPS employment model. However, because Breaking Barriers services were delivered in a workforce setting rather than a clinical one and its design did not involve clinical partners, the job centers could not receive perfect scores on items in the fidelity scale that focused on the IPS key principle of integration between employment and mental health services.

- **The characteristics — especially barriers to employment — of the Breaking Barriers study sample are somewhat different from the populations who most commonly receive IPS. These characteristics could have made the study sample more employable.**

Overall, the Breaking Barriers study sample is diverse in terms of age, gender, race or ethnicity, and other characteristics. While participants in the study reported a range of physical and mental disabilities at the time of enrollment, 63 percent of the sample reported having some type of mental health disorder, including disorders that would not have been considered serious mental illness. Although having a self-identified disability was an eligibility requirement for the program, the vast majority of study participants (83 percent) described their overall health as excellent, very good, or good.⁹ Most study participants also had work experience: 42 percent had been employed in the past year, and 79 percent had been employed in the past five years. Only 22 percent of study participants were receiving SSI or SSDI benefits or both at baseline.

In contrast to Breaking Barriers, many prior studies of IPS had study samples that exclusively had serious mental illness. Relatedly, IPS is more traditionally implemented in a clinical setting, which is different from the workforce setting in which Breaking Barriers operated.

⁸These reviews used the approach developed by the Dartmouth Supported Employment Center for assessing the extent to which programs deliver services with fidelity to the IPS model. IPS fidelity reviews are scored on the 25-item Supported Employment Fidelity Scale.

⁹This measure is based on responses to the first question of the second version of the SF-12 questionnaire, a validated survey that measures physical and mental health through 12 questions directed toward the respondent.

Additionally, there is some indication that Breaking Barriers participants may have had a more substantial recent work history than sample members in other IPS studies. Study samples in other IPS studies also tended to have much higher rates of SSI and SSDI receipt than the Breaking Barriers sample had.

- **Program group members were somewhat more likely to have received a range of employment services than control group members during the follow-up period. However, a large proportion of the control group received at least some services.**

The program group was only somewhat more likely than the control group to have received any help finding or keeping a job (91 percent compared with 78 percent). The workforce setting of this intervention may have influenced the rate at which the control group found employment services. The service contrast was larger (differences ranged from 22 to 28 percentage points) for receipt of specific employment services such as help preparing a résumé and filling out job applications, preparing for job interviews, looking for jobs, and getting referrals to jobs — all key services offered through IPS. Program group members also participated in services related to finding or keeping a job for about one month longer, on average, than control group members did (five months versus four months). This could reflect the higher levels of follow-up and follow-along support services provided to program group members, which are key components of the IPS model.

Findings from the implementation research revealed that there are several other service providers that both program and control group members may have accessed for employment services and related resources, including those targeted to individuals with disabilities. However, there do not appear to have been any other supported employment programs in San Diego targeted at the same population as was Breaking Barriers.

- **There are no statistically significant differences between the program and control groups on the primary outcomes measured — employment, length of employment, and total earnings — during the follow-up period.**

As shown in Table ES.1, there are no statistically significant differences between the program and control groups' employment rates, length of employment, or total earnings over the 15-month follow-up period. Substantial portions of both research groups attained employment at some point during the follow-up period (74 percent of the program group and 71 percent of the control group). Breaking Barriers also did not have any significant impacts on public assistance receipt over the follow-up period, a secondary outcome. There are also no statistically significant differences in self-reported overall health, with about two-thirds of both research groups reporting they were in good health around the time of the follow-up survey. Measures of depression and mental and physical health status using validated scales (not shown) were also similar for both research groups.

Table ES.1**Impacts on Key Outcomes During the 15-Month Follow-Up Period**

Outcome	Program Group	Control Group	Difference	P-Value
Ever employed (%)	73.8	70.7	3.1	0.368
Total earnings (\$)	11,335.8	10,972.9	362.9	0.762
Months employed	6.7	6.2	0.4	0.352
Household received public assistance (%)				
SSI and/or SSDI	35.7	37.6	-1.9	0.517
Welfare or CalWorks (TANF)	28.9	29.7	-0.7	0.815
Unemployment insurance	6.7	6.0	0.7	0.740
Housing choice voucher	10.5	13.5	-3.0	0.247
Food stamps	52.7	52.5	0.2	0.949
Child support	12.1	12.4	-0.3	0.932
Self-reported overall health ^a (%)				
Excellent, very good, good	67.7	66.2	1.6	0.646
Fair	23.8	25.0	-1.2	0.715
Poor	8.5	8.9	-0.4	0.865
Sample size (total = 657)	333	324		

SOURCE: MDRC calculations based on data from the follow-up survey.

NOTES: SSI = Supplemental Security Income; SSDI = Social Security Disability Insurance; TANF = Temporary Assistance for Needy Families.

Results in this table are regression-adjusted, controlling for pre-random assignment characteristics. Statistical significance levels are indicated as follows: *** = 1 percent; ** = 5 percent; * = 10 percent.

^aAs measured by question 1 in the second version of the SF-12 questionnaire.

These results diverge from prior research on IPS. In other studies, the differences in the research groups' employment rates are greater, and the control group employment rates are much lower. These differences may be in part due to the characteristics of the study sample, including their recent employment history, relatively low levels of SSI and SSDI receipt, and overall good health, on average.

- **The average cost per person of participating in Breaking Barriers over a 12-month period was \$4,340 (in program year 2017 dollars). This cost is comparable to other IPS programs.**

During 2017, the second year in which Breaking Barriers operated, the program cost on average was \$4,340 per person. This number is based on the average number of months (8.3) in which study participants received services in the year following random assignment. The estimated costs of Breaking Barriers are within the range of estimated costs of other IPS programs.

As program group members also received services from providers other than Breaking Barriers over the study period, the estimated total cost of employment services that the program group received is somewhat higher than the cost per person of Breaking Barriers. When compared

with the estimated cost of services that the control group received, the net cost of program group services is \$3,750.

Conclusion

Breaking Barriers appears to have implemented the IPS program model well. While the workforce setting limited involvement with clinical partners, the IPS fidelity assessments and implementation research suggest that Breaking Barriers largely implemented services as intended and with fidelity to the IPS model. Program staff appropriately delivered many of IPS's core employment services. Further, most program members received a variety of employment services, and assignment to the program group had a positive impact on the receipt of many such services. However, substantial but smaller percentages of the control group also accessed other employment services through other programs operating in the area.

Unlike many previous IPS studies, there were no differences between the program and control groups on any employment outcomes over the 15-month follow-up period, and no pattern of differences on health and household outcomes. This may be in part due to the characteristics of the study sample, including their previous employment history, their receipt of public benefits, their health, and the workforce setting of the program implementation. In the absence of access to Breaking Barriers services, control group members did find other employment services and were able to find employment in the follow-up period at a very high rate (71 percent). This makes it harder to detect statistically significant differences between the research groups. It also raises the question about whether it is better to target the program to a higher-needs population that is less likely to find employment on its own.

While there is no evidence from the current evaluation that Breaking Barriers led to increased employment rates, future analyses using administrative records that include the full study sample will help round out the findings presented here. A survey response bias analysis suggests that results in this report are likely to be valid for individuals who were asked to respond to the survey, but that survey respondents' baseline characteristics differ from those of other sample members. Examining administrative records data in the future will provide information on whether the current results likely apply to the full study sample. In addition, the survey questions counted on the memory of the individuals interviewed regarding their employment history, participation in employment and other services, and benefit receipt. Administrative records — without these limitations — may provide a fuller picture of the effects of the Breaking Barriers program. These data will include employment and earnings captured through the National Directory of New Hires, receipt of public benefits within San Diego County, and additional information on service receipt.

