

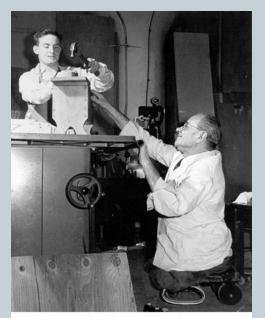
#### HELPING PEOPLE FACING OBSTACLES TO WORK OBTAIN GAINFUL EMPLOYMENT

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SECRETARIES' INNOVATION GROUP JULY 10,2019

# Addressing Economic Well Being

- In 1935 the Federation of the Handicapped (Fedcap) was launched with the goal of improving the economic well-being for those with disabilities and barriers to work
- In 1971 Fedcap helped to establish a national set aside program for those with disabilities
- In 2014 Fedcap dismantled a statewide supported employment program and put 60 individuals with developmental disabilities into competitive employment
- In 2018 Fedcap begins its sixth year running New York City's Wellness, Comprehensive, Assessment, Rehabilitation, and Employment (WeCARE) program for public assistance recipients that believe they can not work



Fedcap co-founder Michael Bertero, right.



#### DEAP The Power of Possible

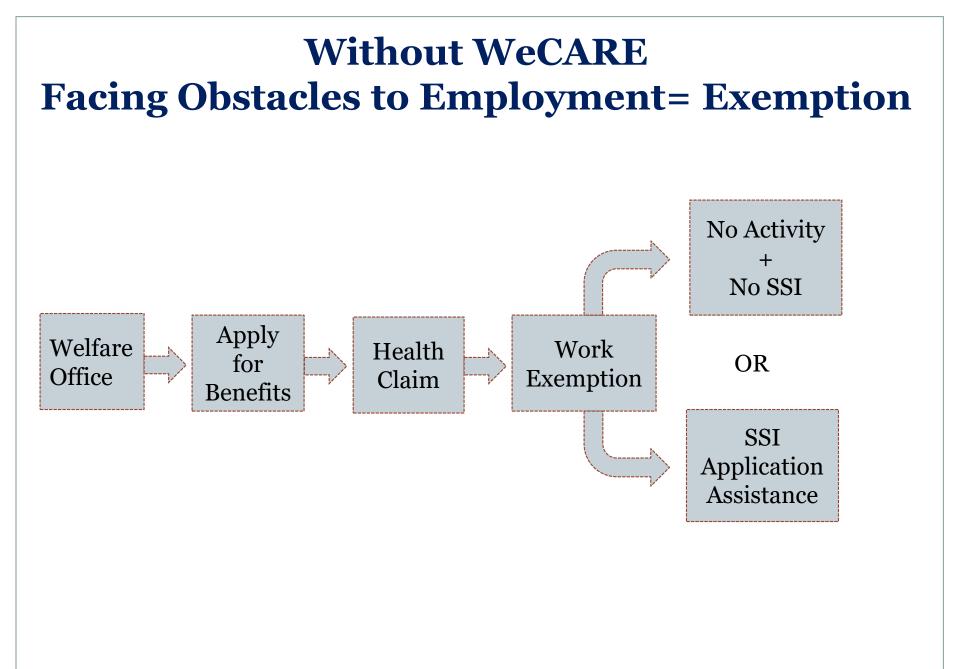
### Wellness, Comprehensive Assessment, Rehabilitation and Employment (WeCARE) in New York

- Provides benefit recipients with barriers with equal opportunity to work
- Participation is mandatory and consistent with TANF (*Temporary Assistance for Needy Families*) participation requirements
- 100 percent of program participants do not believe they can work and should be on federal disability

# Who Is Claiming Incapacity?

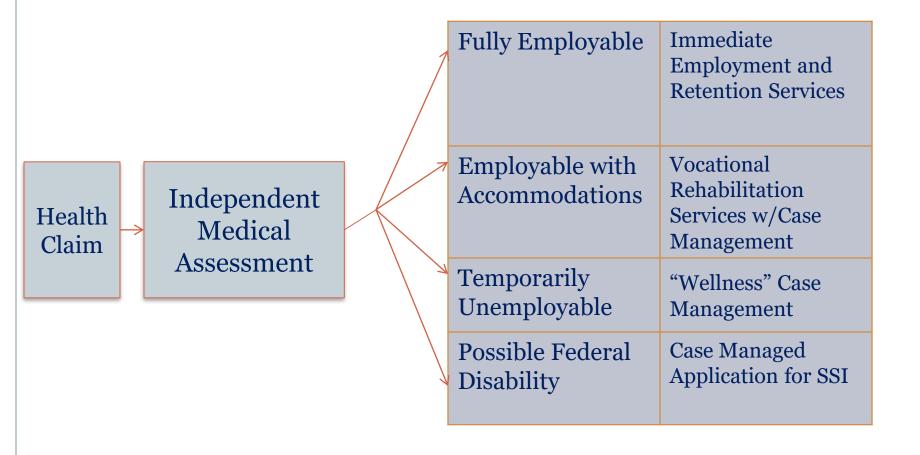
• What is the profile of the WeCARE customer group?

- Male: 43% Female: 57%
- Average Age: 43 years
- Single Parent: 41% Single Only: 59%
- Average Reading and Numeracy Grade Level: < 7<sup>th</sup> grade
- Disclosure of Incarceration: 24%+
- Mental Health Diagnosis: 53%
- History or Current Substance Use Disorder: 26%



**FEDCAP** The Power of Possible

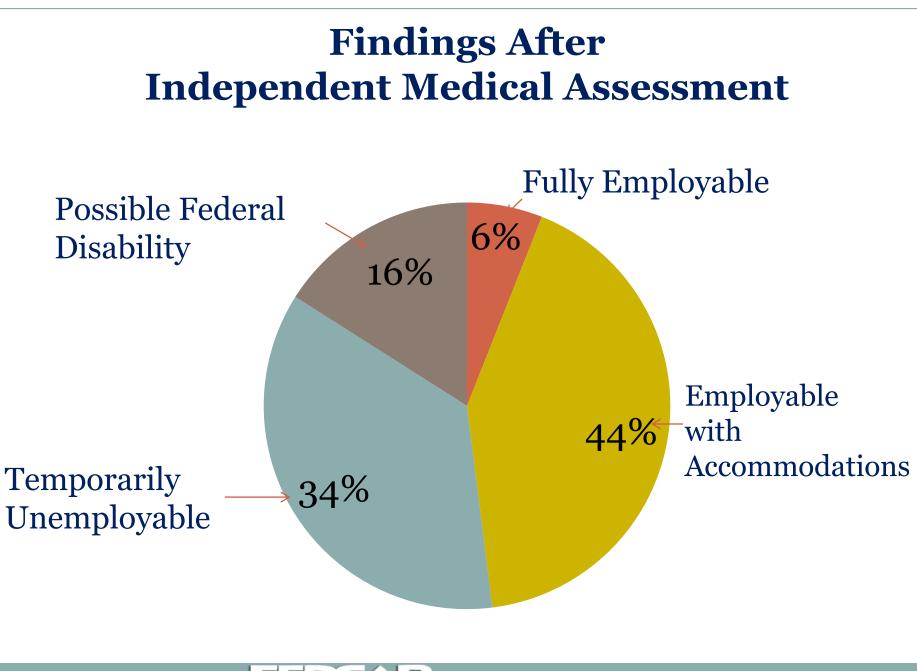
### The WeCARE Model: How Facing Obstacles to Employment= Work



# **Biopsychosocial Assessment (BPS)**

Comprehensive clinical exam to determine functional capacity outcome (FCO)

- 35-page psychosocial designed to elicit what individual *can* do
- Assessments include x-rays, labs, and referrals to specialist if necessary
- Previous medical information included and essential to the process



Description of Possible



#### Participant has conditions but no functional limitations and is able to successfully engage with agency employment providers







# Wellness /Condition Management

- Offered three options for primary care, leave that day with scheduled appointment
- Case management follow-up no less than every two weeks either in person or by phone
- Follow up appointments address the primary care treatment plan compliance
- Plans range from 30-90 days based on condition

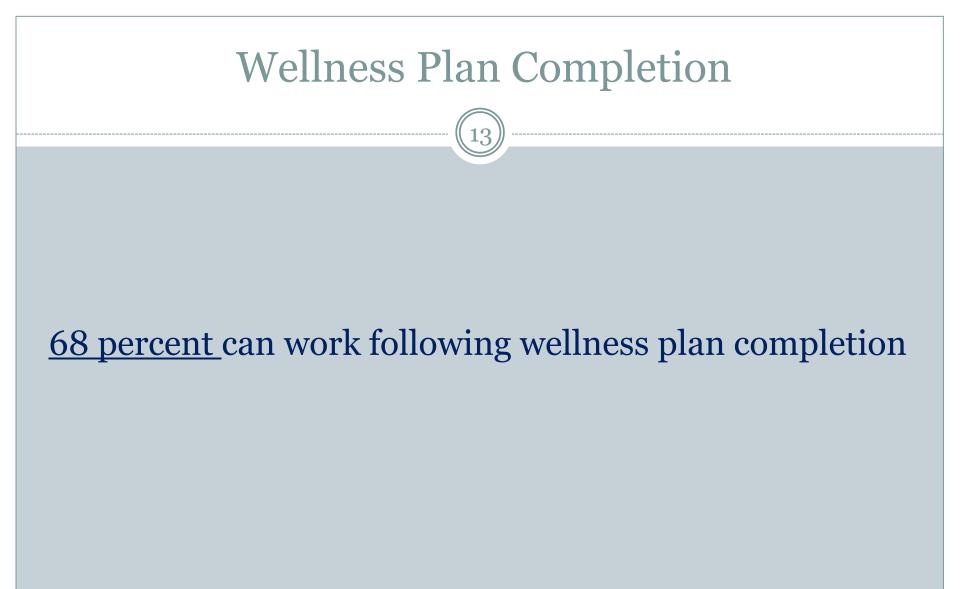


### **Prevalent Wellness Clinical Conditions**

• What are some of the clinical conditions?

- Musculoskeletal (back, joint and soft tissue)
- Metabolic (hypertension, diabetes, obesity)
- Mental Health (depression, anxiety, mood/personality disorders)
- Drug Dependency (CASAC screening and self-report)







# **Employable with Accommodations**

- Work-focused initial case management interview
- Vocational evaluation same day or next morning
- Employment plan and work activities assigned within days of initial appointment
- Access to work readiness, community service/work experience, job matching, job developers, hiring events, and retention upon achieving "employer ready competencies"

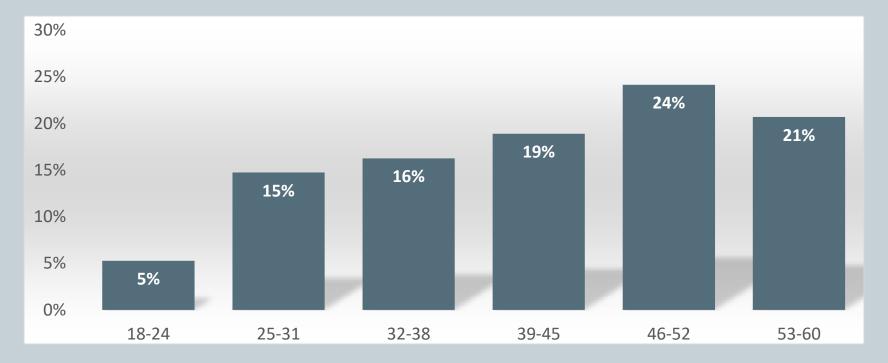
# **Employment with Accommodations**

- What are some of the key findings?
  - 54 percent of employed had Work Experience/Community Service in their path
  - 70 percent of employed had Work Readiness in their path
  - 54 percent of those working obtained employment by day 91
- How many got and kept their jobs?
  - 34 percent (or 15,074) of those referred to employment got jobs
  - 80 percent were still employed at 90 days and 72 percent at 180 days

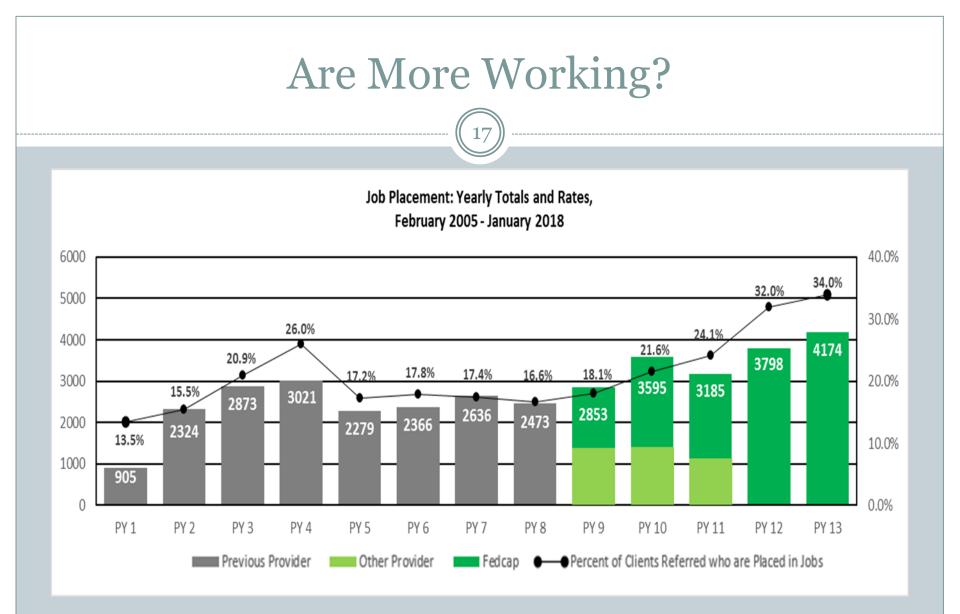
### Who Are Getting and Keeping Jobs?

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#### Age Profile of Job Entrants n=5,550



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The Power of Possible

### What Have We Learned?

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• Can people facing obstacles work?

- 24 percent of those with mental health conditions find employment
- **32** percent with treatment in their path found employment
- 68 percent of those with clinical conditions can work after wellness
- 64 percent entering work do so between the ages of 39-60
- What might we do to improve outcomes?
  - Establish pathways to eliminate idleness and worklessness
  - Focus on what people can do
  - Make sure work completes treatment and wellness
  - Treat work like it is an entitlement for everyone



#### Helping Those Facing Obstacles Obtain Employment

• Is the model replicable?

• Currently in place at 16 locations in Maine

- Per person cost between \$1,200 to \$1,500 annually
- All or some components can be put in place
- What other groups might be served?

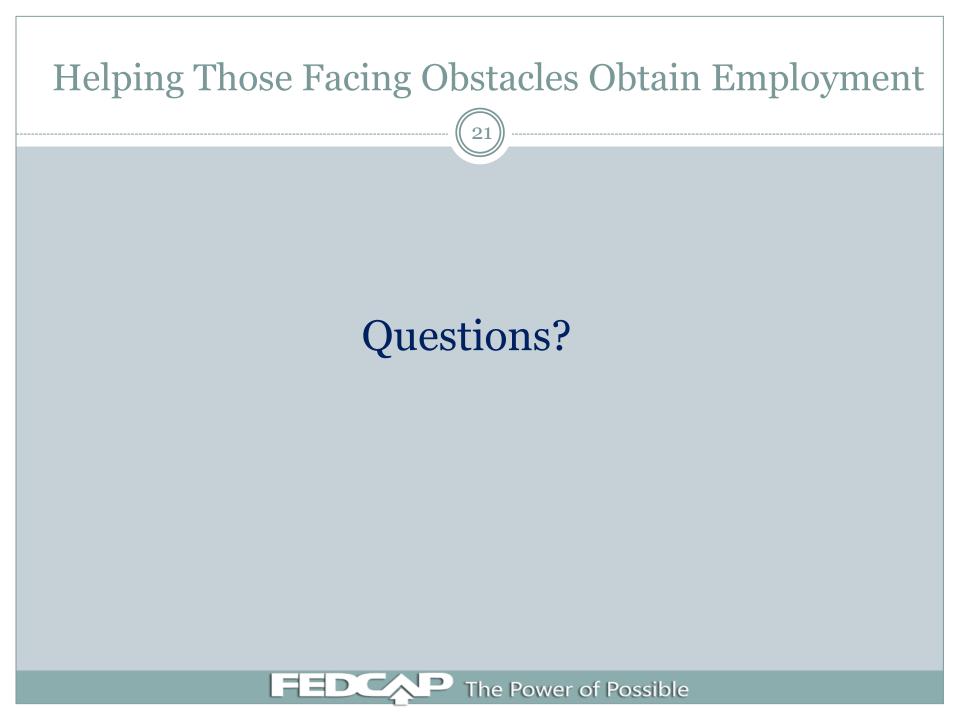
• Supplement Nutrition Assistance Program (SNAP) participants

- Medicaid Work Requirement (1115 waivers)
- Justice Involved, those repeatedly denied SSI
- Any disengaged group needing a pathway to work

#### Helping Those Facing Obstacles Obtain Employment

- Important Considerations for Effective Delivery
  - Holistic assessment to understand full range of issues
  - Informed engagement with pace
  - Measured activation for those recovering from illness
  - Help with activation, linkages, and ensuring progress
  - Incentivize delivery of outcomes





#### Helping Those Facing Obstacles Obtain Employment

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