

**Date of Interview:**

**Respondent's ID #:**

**Respondent's Site Name:**

**Site Acronym:**

**State:**

**Interviewer:**

## **INTRODUCTION**

If you don't have any questions, let's begin. I am interested in your IPS supported employment program. Some questions refer to how things are right now, while other questions ask you to reflect on the last one or two years.

The interview is organized into different sections and I will tell you when we move to a new section. I will read the questions exactly as they are written so that everyone is asked the same questions. There are three types of questions. Some are simple factual questions. Other times I will ask you to answer in your own words, and I'll write down your answers. The format for the third type of question is that I will read you a list of answers asked to choose the answer. For the last type of question, the list of answers will sometimes consist of a rating scale. Feel free to ask me questions at any time if you are not sure what is wanted. The interview will take about one hour to complete.

**BACKGROUND INFORMATION AND TERMINOLOGY**

*Regarding your role in your agency:*

1. What is your job title?
2. When did you start this position (mo/year)?

*A couple points on terminology:*

First, this interview asks questions about “sustaining” your IPS program. What we mean is that your program is surviving, that your agency continues to provide IPS services, your program continues to enroll new clients, and your program is funded. Once a program is closed down or discontinued, it is not sustained.

3. Second, what name do you use for your program? I’ll use that term throughout the interview:

1. IPS
2. Supported employment
3. Other \_\_\_\_\_

4. How many separate IPS supported employment programs do you have at your agency? \_\_\_\_\_

5. If more than one, do you oversee all the teams? **Yes/No**

**Interviewer explains that the interview refers to all the IPS programs reporting outcome data to the J&J Learning Collaborative.**

6. Has your agency offered IPS supported employment services continuously over the last two years? **Yes/No**

**If yes, skip to 8.**

7. **If no**, describe any discontinuations. Or, if you began offering IPS less than two years ago, what was your start date?

**Note:** If the IPS program has been in existence for less than two years, adjust interview questions accordingly.

**CRITICAL FACTORS**

8. What are three factors that you think have been critical in sustaining IPS supported employment at your agency? These could be factors at the state, county, agency, or program level. (Note: If respondent gives a one-word answer, prompt respondent by asking, “Can you say more?” If respondent stops after giving one or two factors, you can ask “Anything more?” If they say “no,” then move on to the next section. Or if they say, “I can’t think of anything else,” move on.)

A.

B.

C.

9. Now tell me three factors that have worked against sustaining IPS supported employment at your agency. (Note: If respondent gives a one-word answer, prompt respondent by asking, “Can you say more?” If respondent stops after giving one or two factors, you can ask “Anything more?” If they say “no,” then move on to the next section. Or if they say, “I can’t think of anything else,” move on.)

A.

B.

C.

**FUNDING**

**Indicate which of following sources fund IPS services at your agency. Then, indicate the top three funding sources (1 = highest, 2 = second highest, 3 = third highest)**

- |     |                         |        |                       |
|-----|-------------------------|--------|-----------------------|
| 10. | Medicaid                | Yes/No | If top 3, rank: _____ |
| 11. | State VR                | Yes/No | If top 3, rank: _____ |
| 12. | State budget            | Yes/No | If top 3, rank: _____ |
| 13. | County funds            | Yes/No | If top 3, rank: _____ |
| 14. | Ticket to Work          | Yes/No | If top 3, rank: _____ |
| 15. | Federal Block Grant     | Yes/No | If top 3, rank: _____ |
| 16. | Private Foundation      | Yes/No | If top 3, rank: _____ |
| 17. | Client payment          | Yes/No | If top 3, rank: _____ |
| 18. | Other (describe)        | Yes/No | If top 3, rank: _____ |
| 19. | <b>Explain funding:</b> |        |                       |

**Notes:**

**In some states, the funding comes from the General Fund. This term can be used instead of “State budget.”**

## IPS FIDELITY

20. When did your program have your last IPS supported employment fidelity assessment site visit? \_\_\_/\_\_\_ (MM/YY)
21. Did your program receive formal feedback on the fidelity assessment? **Yes/No**  
If yes, did it include:
- A. Written report **Yes/No**
- If yes,
    1. About how many weeks after the visit did you receive it? \_\_\_ weeks
    2. Who received it?
- B. Telephone call **Yes/No**
- If yes,
    1. About how many weeks after the visit was the call? \_\_\_ weeks
    2. Who was on the call?
- C. Face-face meeting **Yes/No**
- If yes,
    1. About how many weeks after the visit was the meeting? \_\_\_ weeks
    2. Who attended?
22. Do you typically develop an action plan from the fidelity review recommendations? **Yes/No**  
If yes, who oversees implementation of the action plan?
23. Are there any financial incentives associated with your fidelity score? **Yes/No**  
If yes, describe:

## OUTCOMES (Note: The questions in this section refer only to employment outcomes.)

24. Are you required to collect employment outcome data for your IPS program? **Yes/No**  
If yes, describe:
- If no, skip to 28.**
25. In what format are employment outcome data collected? (For example, do you use electronic medical records or collect paper reports or verbal reports or emails from staff?)
26. How frequently do you examine outcomes as a program/team (e.g., during IPS team meetings)?
27. Are there any financial incentives attached to outcome performance? **Yes/No**  
If yes, describe:

**STAFF PERFORMANCE MEASURES/PRODUCTIVITY STANDARDS**

28. We have just talked about outcomes, now we are going to talk about staff performance – what they do. Do you track staff performance related to IPS supported employment, such as number of employer contacts per week, direct contact hours, time out of office?

**Yes/No**

**If no, skip to 34.**

29. If yes, what performance measures are you collecting?

30. How are these data collected? (For example, do you use electronic medical record or collect paper reports or verbal reports or emails from staff?)

31. Do you compile the individual performance for each employment specialist? **Yes/No**

32. How frequently do you examine performance as a team?

33. Are there any financial incentives attached to these performance measures? **Yes/No**

**If yes, explain**

**PROGRAM CAPACITY AND EXPANSION/CONTRACTION**

34. How many clients with severe mental illness are served in your agency's community support program (CSP)? (Note – interviewer should identify the term used by the respondent's agency for the equivalent of CSP program. *If the respondent does not know, ask if the respondent can email the number after the call.*) \_\_\_\_\_

35. Explain your definitions for “open” and “closed” clients on the IPS caseload. How do you define when a client is officially “on” the IPS caseload? How do you decide when the client is “off” the caseload? Do you have a category for “hold” (or “inactive”) status? *Note: Some agencies refer to hold or inactive status to refer to clients who are open but who are not currently receiving services.*

36. Currently, about how many clients are open in your IPS supported employment program? (OK to estimate) \_\_\_\_\_

37. How does the total number of clients currently served in IPS compare to two years ago?

A. considerably fewer

B. somewhat fewer

C. about the same number

D. somewhat more

E. considerably more

F. not applicable/don't know

38. Have you expanded or reduced your IPS supported employment services by adding or eliminating staff positions or creating or discontinuing IPS teams in the last year?

**Yes/No**

39. Number of IPS program staff employed by agency:

Current number of staff: FT: \_\_\_\_\_ PT: \_\_\_\_\_

Added in last year: FT: \_\_\_\_\_ PT: \_\_\_\_\_

Eliminated in last year: FT: \_\_\_\_\_ PT: \_\_\_\_\_

40. Number of IPS teams:

New teams created in last year: \_\_\_\_\_

Existing teams discontinued in last year: \_\_\_\_\_

## **TRAINING**

**Now I am going ask you questions about training and consultation/technical assistance. First we will cover training, which includes seminars, classroom training and the like. Then we will cover consultation/technical assistance, which involves an IPS expert giving advice.**

41. In the last year, did any employees at your agency receive any of the following forms of formal training specifically in IPS supported employment?

**A. Online course Yes/No**

**B. Conference or workshop specifically on IPS Yes/No**

**C. Orientation on IPS supported employment for new employees Yes/No**

**D. Any other type of formal classroom training Yes/No**

42. Did any of the following provide formal IPS supported employment training in the last year?

**A. Agency personnel Yes/No**

**B. State training personnel Yes/No**

**C. Dartmouth trainers Yes/No**

**D. Other trainers Yes/No**

43. Who received any formal IPS training last year?

**A. "Veteran" employment specialists Yes/No**

**B. Mental health treatment practitioners Yes/No**

**C. Management Yes/No**

(Note: Veteran employment specialists are those who have completed orientation process.)

44. How many IPS employment specialists at your agency received supported employment training last year?

## **CONSULTATION/TECHNICAL ASSISTANCE**

45. During the last year, has your agency received consultation/technical assistance concerning IPS supported employment from outside consultants (that is, outside the agency)?

**Yes/No**

**If yes, go to 46. If no, go to 48.**

46. Who were the consultants?

- Dartmouth trainers **Yes/No**
- State trainers **Yes/No**
- Other (describe) **Yes/No**

47. Describe the extent of the consultation in the last year:

- On site (how many visits in the past year)
- Phone call (how many calls in the past year)
- Email (how many e-mails in the past year)

48. *If applicable*, which IPS or supported employment web sites have you found to be useful?



## **PRACTICE ADAPTATION**

Think about any changes your program may have made that are modifications to the evidence-based model described by the supported employment fidelity scale. (Do not include improvements in response to a fidelity review or other changes made to improve fidelity.) Examples of practice adaptations: adding a supported education component, adding a peer support counselor to the team, lowering the caseload ratio to serve a specific client group, increasing the caseload ratio because of budget problems.

49. Have you made any modifications to your IPS supported employment program in the last year? **Yes/No**

**If yes, go to 50. If no, skip to 60.**

50. Were changes in response to **state requirements**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

51. Were changes in response to **budget cutbacks**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

52. Were changes in response to **state VR agency**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

53. Were changes in response to **requirements from another funding source**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

54. Were changes in response to **socio-cultural characteristics of clients**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

55. Were changes in response to **community characteristics** (such as a rural location)? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

56. Were changes in response to **employers**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

57. Were changes in response to **the local economy** (e.g., unemployment rate)? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

58. Were changes in response to **client feedback**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

59. Were changes in response to **other factors**? **Yes/No**  
**If yes, describe change(s) made and reason for change.**

## Ratings on Specific Factors: Instruction Page

I am going to read you a list of factors that may affect the sustainability of an evidence-based practice. For each factor, I will ask you to make a rating on a 5-point scale.

**Over the past two years, how important has this factor been to sustaining IPS supported employment at your agency?**

**Rate this item “5” if you do think your program could NOT have been sustained without this factor.**

**Rate this item “1” if you think this factor had no bearing at all on sustaining your program (you would have done fine without it), or if this factor has not been present.**

**Use ratings of 2, 3, and 4 as intermediate ratings.**

### Rating Example

Let’s take the example of *Secretarial Support for IPS Services*.

If you thought this support was helpful, but you could have survived without it, you would rate it as “3.”

If this was not an important factor at all, or if you did not have any secretarial support, you would rate it as “1.”

Here’s a second example: Rate *Retention of Team Leader*.

If you had little or no turnover, and that was important for sustaining your program, rate this “5.”

If you had a lot of turnover, and this interfered with the sustainability of your program, rate this low – “1” or “2.”

Remember:

*If present and important rate high.*

*If important but not present (or not adequate) rate low.*

*If unimportant, rate low.*

**FACTOR RATINGS**

For each of the following, rate how important the factor has been to sustaining your IPS program over the last two years. (Note: If your program has been in existence for less than one year, answer for the period of time since its start.)

**60. Over the past two years, how important has IPS Funding been to sustaining IPS supported employment at your agency?**

**Remember:**

*If present and important rate low.*

*If important but not present (or not adequate) rate low.*

*If unimportant, rate low. (Repeat after each question if needed.)*

1.....2.....3.....4.....5

**61. Over the past two years, how important has support from your agency’s Executive Director been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

*Regarding definition of executive director: If agency has several levels of administration, ask respondent to answer for the administrator with overall administrative authority for the department in which the supported employment program is located.*

**62. Over the past two years, how important has support from your agency’s Clinical Director been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**63. Over the past two years, how important has IPS Training been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**64. Over the past two years, how important has IPS Supervision been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**65. Over the past two years, how important has IPS Consultation/Technical Assistance been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**66. Over the past two years, how important has Staff Retention (avoiding staff turnover) been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**67. Over the past two years, how important has Advocacy of Consumers and/or Families been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**68. Over the past two years, how important have IPS Practitioner Skills been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**69. Over the past two years, how important have IPS Practitioner Attitudes been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**70. Over the past two years, how important has Feedback on Fidelity and Outcomes been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**71. Over the past two years, how important has support from your State/Local Mental Health Authority been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

**72. Over the past two years, how important has support from State Vocational Rehabilitation Agency been to sustaining IPS supported employment at your agency?**

1.....2.....3.....4.....5

## **Summary**

**73.** Do you have any worries about IPS being discontinued in the next year? Explain.

**74.** What else would you like to add that would help me understand sustaining IPS supported employment at your agency?

**75.** One final request: Is it OK if I email you with follow-up questions if I realize that I need clarification on anything?

**THANKS SO MUCH FOR YOUR HELP!**