

## IMPLEMENTATION GUIDE FOR STATE LEADERS

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#### **Overview**

State leaders play a crucial role in the implementation and sustainment of evidence-based practices. IPS implementation requires the collaborative efforts of state leaders, agency administrators and providers, consumers, and families. Nevertheless, leadership by the state must be the lodestar. State behavioral health, Medicaid, Vocational Rehabilitation, and other relevant agencies take the lead to make needed changes over time. This issue brief outlines how state leaders can facilitate the implementation, quality, and longevity of IPS services.

Leaders should take the long view and start IPS with an eye toward good-fidelity sustainment. Given the level of effort needed to successfully launch new practices (and the all too common occurrence of discontinued practices after initial enthusiasm), careful, strategic planning is key. Attention to communication, financing, policy alignment, training, fidelity and outcome monitoring, and building community will prepare for sustainment (Bond, Johnson-Kwochka, Becker, Drake, & Greene, 2017; Finnerty et al., 2009). Depending on the local context, some factors will be more important than others. This issue brief highlights key strategies in two phases: preparation/ startup and late implementation/ sustainment.

# **Getting Started with IPS: Preparation and Startup Phases**

#### **Create a Vision of IPS**

State leaders should use the bully pulpit to declare that employment is a priority. The first step is to create and articulate a vision of IPS for all stakeholders. People with behavioral health issues have a basic human right to a functional, satisfying, meaningful life, including the opportunity to work competitively. Recovery regularly happens through employment, and IPS is the evidence-based strategy to facilitate employment. The vision for the future is that everyone with a disability who wants to work has the supports needed to achieve their goal. Leaders incorporate the vision into their strategic plans, state Medicaid plan, and legislation.

#### **Establish a State IPS Implementation Team and State IPS Steering Committee**

Leaders must appoint a state employee with IPS experience to develop and spearhead a state IPS implementation team and state IPS steering committee. The implementation team usually includes one state leader each from the mental health authority and Vocational Rehabilitation, an IPS trainer, a family advocate, and a consumer leader. This team works together to identify and address issues that may hinder

the implementation process. They increase their knowledge of IPS so they can clearly articulate and reinforce the practice to stakeholders. Effective implementation teams include at least one champion for IPS: a state-level leader who drives the initiative using effective leadership, advocacy, and communication skills (Aarons et al., 2016; Becker, Lynde, & Swanson, 2008).

The state IPS steering committee is typically a larger advisory group that includes the implementation team, relevant representatives from other state agencies, directors of behavioral health agencies with IPS programs, consumer and family advocates, employers, and schools. This coalition helps with building support, increasing visibility, advising on reducing implementation barriers, and sharing ideas on how to improve employment and education outcomes and access to IPS. The committee convenes early in the implementation process and more members join as IPS expands. Membership needs to include people with sufficient authority to implement committee recommendations. This group usually meets quarterly for the first few years and less frequently as the initiative matures into sustainment. Some states develop an independent IPS steering committee, while others fold the initiative into an already existing employment, recovery, or quality improvement committee.

## **Identify Funding for IPS Services**

State leaders should identify funding for IPS services from the beginning. Ideally, one stable, adequate funding stream would support IPS programs. But in reality, most states use a combination of funding sources to fully support the service, including state Vocational Rehabilitation, Medicaid, state general funds, local funds, and grants. More than half of the U.S. states have combined funding systems that enable community mental health agencies to approach the break-even point in funding IPS employment services (Herinckx, 2011; Johnson-Kwochka, Bond, Drake, Becker, & Greene, 2017), but only a few states have stable funding for supported education. State leaders should examine and plan for funding that covers the core aspects of IPS, including outreach and engagement, vocational assessment, job development, job retention, and supported education. A planning worksheet can be found at <a href="https://ipsworks.org/wp-content/uploads/2018/02/State-Plan-to-Support-IPS-Services.pdf">https://ipsworks.org/wp-content/uploads/2018/02/State-Plan-to-Support-IPS-Services.pdf</a>. If startup funding for IPS is short-term, such as a federal grant, the implementation team and state steering committee should work on securing long-term funding from the start. Securing funding usually involves aligning policies and standards (e.g., Vocational Rehabilitation creating a separate fee schedule for IPS) and training (e.g., teaching agencies how to bill Medicaid for IPS).

#### **Align Policies and Standards**

Throughout all phases, state leaders must align policies and standards to support IPS. Many states create incentives for achieving good fidelity, like enhanced rates and bonus payments. State leaders should examine administrative rules and regulations for any misalignment and seek feedback from agency leaders and the state IPS steering committee. Leaders should encourage efforts by family advocacy groups and other stakeholders, who can help in promoting changes in state policies (Swarbrick et al., 2017). The state can set standards for IPS programs on staffing, supervision, documentation, eligibility, service components, and other aspects that impact quality of programs. For example, in one state, leaders from vocational rehabilitation discontinued funding for situational assessments and enhanced rates for job placement and retention. Despite the popularity of situational assessments with counselors and agency staff, they adapted to the changes over time and increased competitive employment outcomes (Swanson et al., 2011).

## Secure a High-Quality Training, Consultation, and Fidelity Reviewing Resource

Before starting IPS programs, secure a high-quality training, consultation, and fidelity reviewing resource. All stakeholders will need basic training on IPS principles and practice, and IPS teams need intensive training and consultation support to fully implement the practice. Effective IPS trainers minimize didactic, classroom training and instead focus their efforts on working alongside IPS program staff at least monthly, providing skills training, on-site coaching, and supervisor consultation. Trainers lead fidelity reviews for each site every six months until programs reach good fidelity, and at least yearly thereafter. Ideally, states have at least one person as a full-time IPS trainer who can fulfill these tasks. States often add additional trainers as more IPS programs develop. Trainers are part of the implementation team and state leaders oversee the positions. In some states, a local university provides IPS training and technical assistance in close collaboration with state leaders.

## **Select Agencies to Start IPS Programs**

The next critical step is to select agencies to start IPS programs. It helps to start small with a handful of agencies, help those programs achieve good fidelity, and then use that success to expand throughout the state (Becker, Drake, & Bond, 2014). States have the most success when they choose agencies with leaders who believe consumers can work and who are committed to using evidence-based practices. Strong agency leadership for IPS is instrumental for long-term success (Torrey, Bond, McHugo, & Swain, 2011). Be sure to visit the agencies as part of the site selection process. The IPS Employment Center's Agency Readiness for IPS Supported Employment Implementation Checklist provides guidance when making site visits to prospective agencies ("Agency Readiness for IPS Supported Employment Checklist," 2017). The 12-item checklist helps assess for readiness and identify barriers and facilitators to implementation. States use the checklist as part of their procurement process to help the agency understand costs and benefits.

#### **Monitor Outcomes and Fidelity**

State leaders monitor outcomes and fidelity to sustain program effectiveness. They identify mechanisms to track client outcomes and fidelity scores for all IPS programs. Program data should be collected quarterly and shared across programs. States can use the data to guide implementation over time, for example, to identify training needs if programs are low-performing, to justify expansion, and to identify system challenges. In one state, for example, fidelity data showed that programs consistently scored low on benefits counseling, and the state team developed additional benefits counseling resources and coordination as a result. Client outcomes and fidelity scores reflect the success of implementation efforts.

## **Continuation: Late Implementation and Sustainment**

As IPS programs mature and achieve good fidelity, state leaders shift to a greater focus on sustainment. Paramount is ensuring sufficient funding for the service. State leaders are wise to anticipate turnover (retirements and resignations) and to discuss succession planning, which includes preparing others to take over when key leaders leave their positions. They should ensure access to training for new staff as IPS agencies have turnover in leaders, supervisors, and staff. They should continue to provide ongoing quality improvement and monitoring, especially fidelity reviews. State leaders develop new IPS programs as opportunities develop and resources allow. They can capitalize on the success of initial IPS programs to further growth and use those programs to train new programs.

An important mechanism for promoting sustainment of IPS services is the creation of a statewide "learning community," which is a quality improvement approach that actively promotes many activities shared in this brief (Becker et al., 2014; Bond, Drake, Becker, & Noel, 2016; Bond et al., 2017). To activate a learning community, state leaders initiate and support the development of a network of IPS programs and create opportunities for local leaders to interact. IPS agencies commit to data collection and monitoring, regular fidelity reviews, training and technical assistance, and innovation. Learning communities share information and ideas among IPS agencies, state leaders, and other stakeholders, often through meetings, conference calls, and annual conferences. Participants in the learning community have the chance to learn from each other how to overcome implementation obstacles and how to maintain good fidelity IPS (McGovern, McHugo, Drake, Bond, & Merrens, 2013). For example, groups of IPS supervisors meet quarterly to review employment and education outcomes from all of their programs and share ways to strengthen their services. The IPS trainer facilitates the opportunity for peer-to-peer learning and offers training on pertinent topics.

One tool to evaluate the breadth and quality of state leader efforts in promoting an evidence-based practice is the State Health Authority Checklist (SHAY) (Finnerty et al., 2009). The SHAY is a 15-item behaviorally-anchored checklist rating state-level activities and policies toward implementation and sustainment of an evidence-based practice. The IPS Employment Center's online library contains a copy of the SHAY at <a href="https://ipsworks.org/wp-content/uploads/2018/09/SHAY-1.pdf">https://ipsworks.org/wp-content/uploads/2018/09/SHAY-1.pdf</a>.

## **Conclusion**

Developing successful IPS programs requires a consistent effort from dedicated state leaders. They need to attend to structural and organizational issues, stakeholder communication, financing, policy alignment, and maintaining leadership and focus. Even though IPS implementation requires the teamwork of many people, ultimately, success depends on the commitment of individual leaders (Bond et al., 2017). In fact, this commitment to IPS strongly predicts implementation success, despite any challenges that may exist in the state (Swanson et al., 2011). Leaders can take heart that their committed, collaborative, and creative work to help people achieve competitive employment will be successful, even if it takes some time.

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