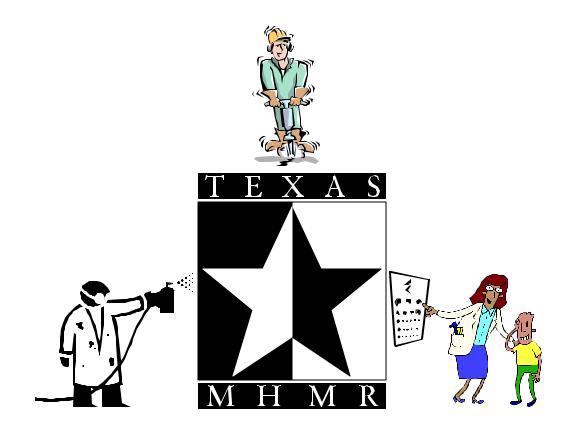
# 2001 SUPPORTED EMPLOYMENT SURVEY REPORT



# TEXAS DEPARTMENT OF MENTAL HEALTH & MENTAL RETARDATION

Office of Program Statistics & Planning

• March 2002 •

#### TXMHMR 2001 Supported Employment Survey Report

#### **▶** Introduction **♦**

In order to obtain information on Supported Employment (SE) programs in Texas, in SFY 1996 the Legislative Budget Board (LBB) required Texas Department of Mental Health and Mental Retardation (TXMHMR) to provide the following eight performance measures on a yearly basis:

- 1. Average monthly wages earned per consumer with MH in SE services;
- 2. Average monthly hours of paid productive work per consumer with MH in SE services;
- 3. Percentage of consumers with MH in SE services participating in a Federal Work Incentive Plan (FWIP);
- 4. Percentage of nondisabled workers at the consumer with MH's SE job site;
- 5. Average monthly wages earned per consumer with MR in SE services;
- 6. Average monthly hours of paid productive work per consumer with MR in SE services:
- 7. Percentage of consumers with MR in SE services participating in a FWIP;
- 8. Percentage of nondisabled workers at the consumer with MR's SE job site.

In order for TXMHMR to collect this data — and as a way of collecting baseline data for upcoming Legislative Appropriations Requests — a survey project was chosen as an inexpensive and acceptably accurate method of data acquisition. Accordingly, a survey instrument was developed and pilot tested in December 1996, subsequently being updated and used each year since then.

#### ▶ Methodology ◀

#### Sampling —

A simple random without replacement sample of 200 consumers with MH and 200 consumers with MR were taken from the populations of consumers listed on CARE as having received Supported Employment services for at least sixty days during the time period June 1, 2001 to August 31, 2001. In order to achieve a 95% degree of confidence interval accuracy, these sample sizes were determined from the original pilot study and succeeding years' response rates.

#### Survey forms —

A survey form for each sampled consumer was mailed to the program directors of both MH and MR supported employment programs. Upon completing the surveys for each consumer, the program directors mailed or faxed the survey forms back to TXMHMR. With directed follow-up efforts, response rates for both MH and MR were 100%. Copies of both the MH and MR survey forms are included in *Appendix 1*.

#### ▶ Results •

#### **Supported Employment Performance Measures** —

Using 2001 data, following are the point estimates for the <u>MH</u> performance measures (*please see Appendix 2 for a note regarding the MH sample*):

Mean monthly salary — \$656.89 Mean monthly hours — 93.59 Percentage participating in a Federal Work Incentive Plan (FWIP) — 4.07% Percentage of nondisabled at workplace — 89.79% Using 2001 data, following are the point estimates for the  $\underline{\text{MR}}$  performance measures:

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Mean monthly salary — $400.05

Mean monthly hours — 65.96

Percentage participating in a Federal Work Incentive Plan (FWIP) — 5.78%

Percentage of nondisabled at workplace — 95.99%
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Nationwide, work force participation among disabled Supplemental Security Income (SSI) recipients in 2000 was 6.5%. Of those recipients — approximately 350,000 disabled workers — only 4.2% had some of their income excluded under the work incentive provisions. Of the 14,643 working SSI recipients in Texas, approximately 4.4% had some of their income excluded under the work incentive provisions. <sup>1</sup>

Compared to previous years, the reported percentages for employees enrolled in the Federal Work Incentive Plan (FWIP) are significantly higher for both consumers with MH and consumers with MR. In December 1999, Congress passed the "Ticket To Work and Work Incentives Improvement Act" (H.R.1180). This law removed many of the employment barriers that persons receiving Social Security disability encountered. In addition, this law improved existing work incentives, while also adding new incentives. Moreover, this law's provision to expand information about existing work incentives and additional funding (mostly via grants) for counselors assisting recipients are the likely contributors to this increase in the reported rates of FWIP participation.

It is generally known that the measure 'Percent nondisabled at workplace' for both MH and MR is likely to be unreliable according to any standard definition of

<sup>&</sup>lt;sup>1</sup> SSI Disabled Recipients Who Work, June 2000. Report by the US Social Security Administration.

"nondisabled". It has proven to be very difficult to identify and implement a standard method that can correctly estimate this measure because of the presence of hidden disabilities, and the right to privacy of members of the general workforce. Unless members of the work force were placed by programs, or have obvious disabilities, the actual number of workers with or without disabilities can not be known by the program staff.

The above listed percentages for this measure are based on the vocational directors' knowledge of the work sites. A vocational director's awareness of this figure will be limited to only knowing approximately how many total employees work at a particular job site, and how many of those particular employees are MHMR consumers or workers who have a visible disability. Therefore, it is not possible to accurately measure the percentage of workers with disabilities that are not readily apparent in an integrated work environment.

The response rate for this year's survey was again a favorable 100%. Far from coming easily, this rate was obtained through directed and continual follow-up efforts. Before follow-up, original response rates for both MH and MR surveys were around 70%. While these rates are still within normal predictive ranges for survey research, complete response rates clearly provide better data and with it, better predictions.

#### **▶** Conclusion **∢**

Due to the large confidence intervals obtained for certain measures, specifically with regard to the variability of the hours and salary measures, these projections are likely to be less than completely accurate. The 95% confidence intervals for some of these estimates are above LBB target of  $\pm 5\%$  variance, although most are just above this target. Larger variations seem to be primarily due to statistical outliers and not characteristics of the sample itself.

On a positive note, however, the estimated FWIP values for both MH and MR are significantly higher than historically reported values. In fact, the FWIP figures for 2001 are the highest since the LBB originally required TXMHMR to conduct the survey in SFY 1996, and it is hypothesized that this figure, thanks to recently passed national legislation, will continue to increase.

TXMHMR 2001 Supported Employment Survey Report

## ► Appendix 1 ←

Copy of MH and MR Survey Instruments

## MH Supported Employment Survey<sup>2</sup>

Customer	Local Id. #	CARE Id. #	Local Autho	ority			
Did this SE Customer work in Individual Yes: Answer yes only if the placement No: Answer no if the person held a journal of the pers	nt lasted all month. b only part of the n	nonth, or they do no	t have a job.				
9. No vocational services receiv	ed.						
If yes,  1. How much money did this person Gross Pay (before taxes and othe		_ ·	•	per mo.			
2. How many hours did this person versions 1 and 2: If payment or hours of practices to covert. Ex., weekly pay times 4	worked is not readily	converted to monthly	pay, use commonly accepted	per mo.			
<ul> <li>3. Is this person using a Federal Work Incentive Plan (PASS/IRWE)? (Check one)</li> <li>1. Yes</li> <li>2. No, not eligible, (Ex. not on SSI or PASS/IRWE is not an option)</li> <li>3. No, eligibility currently being evaluated,</li> <li>4. No, PASS/IRWE is being or has been applied for.</li> <li>5. No, potentially eligible, but PASS/IRWE is not consistent with customer service plan.  Ex. PASS/IRWE funds available are insufficient to support a plan; use of PASS/IRWE would have long term negative consequences for the customer (loss of medical coverage that could not be replaced, customer is unlikely to achieve the goals of a PASS or IRWE plan); PASS/IRWE options don't help this person.</li> <li>6. No, potentially eligible, but customer refused or refused to consider PASS/IRWE.</li> <li>7. No, the possibility of obtaining a PASS/IRWE has not been explored.</li> </ul>							
4. How many people are employed a <i>a. in the larger work site?</i> Select the number of persons that bes working. For example, the whole stornot include different physical building <i>b. in the immediate area?</i> Report section.	t represents the lare or factory for togs or all shifts.	arger work site du he shift the custo	mer works. Typically	you should			
5. Of the number of persons at the job sit developmental disabilities (in additio a. in the larger work site?b. in the immediate area?	n to the consume	•	ge, how many are peop	ple with			
— Thank you! —							

 $<sup>^2</sup>$  This survey is part of legislatively required performance measures. The results are reported to the Legislature annually.

# MR Supported Employment Survey<sup>3</sup>

Customer	Local Id. #	CARE Id. #	Local Authority			
Did this SE Customer work in Individent Yes: Answer yes only if the placement No: Answer no if the person held the join If no; what services did this individual Land Vocational Supports, Individual No Vocational Supports, Communication of No Vocational Services received	lasted all month. bb only part of the midual receive in 1) cl Competitive Enity Site (R043)	onth, <b>or</b> they do not August 2001 (o	have a job. check all that apply)	001?		
If yes,  1. How much money did this person r Gross Pay (before taxes and other			•	r mo.		
2. How many hours did this person we For questions 1 and 2: If payment or hours wo covert. Ex., weekly pay times 4.3 weeks per m	ork at the SE single si	verted to monthly pay,		r mo.		
<ul> <li>3. Is this person using a Federal Work Incentive Plan (PASS/IRWE)? (Check one)</li> <li>1. Yes</li> <li>2. No, not eligible, (Ex. not on SSI or PASS/IRWE is not an option)</li> <li>3. No, eligibility currently being evaluated,</li> <li>4. No, PASS/IRWE is being or has been applied for.</li> <li>5. No, potentially eligible, but PASS/IRWE is not consistent with customer service plan.  Ex. PASS/IRWE funds available are insufficient to support a plan; use of PASS/IRWE would have long term negative consequences for the customer (loss of medical coverage that could not be replaced, customer is unlikely to achieve the goals of a PASS or IRWE plan); PASS/IRWE options don't help this person.</li> <li>6. No, potentially eligible, but customer refused or refused to consider PASS/IRWE.</li> <li>7. No, the possibility of obtaining a PASS/IRWE has not been explored.</li> </ul>						
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— Thank you! —						

<sup>&</sup>lt;sup>3</sup> This survey is part of legislatively required performance measures. The results are reported to the Legislature annually.

#### ▶ Appendix 2 ◀

#### Note regarding the 2001 MH Sample

There are two CARE database codes that signify enrollment in a Supported Employment program — HO30 for mental health and RO42 for mental retardation.

Typically, these two codes have been used to drawn samples for the Supported Employment survey. Over time however, the MH code (HO30) has come to include those clients who — while enrolled in the Supported Employment program — may not be actively working at a job site when the sample was drawn (this situation does not occur with the MR code).

Therefore a new code, HO39, was implemented in September 2001 to signify individuals enrolled in the MH Supported Employment program who are also actively working at a job site. The MH sample for the 2001 Supported Employment survey was drawn from the time period (June-August) just prior to the implementation of this new code, and as such the historical code (HO30) was used. This yielded a MH sample with some individuals who, while enrolled in the Supported Employment program, lacked utilization data. Analysis of this MH sample with these individuals — many of whom had zeros for the primary survey measures — greatly skewed the data, in some instances producing results that were half the value of historic data for these measures.

Using the recommendation of Pam Daggett from MHMR's Behavioral Health Services to compensate for this situation, the original MH sample was re-analyzed using only those MH clients who reported actual hours worked during the sampled time period. While this reduced the MH sample size, analysis of this revised sample produced numbers that were within 6% of historical data for the primary measures. This coding situation will not occur in future analyzes as the HO39 code will be used in computation of the MH sample in subsequent reports.