

# FY 2020 Strategic Plan

## Compensated Work Therapy (CWT) Program

- ◆ Transitional Work (TW) Program
- ◆ Community-Based Employment Services (CBES) Program
  - ◆ Individual Placement and Support (IPS) Program
  - ◆ Transitional Residence (TR) Program
  - ◆ Supported Education

## The CWT Mission

**The CWT Program is dedicated to using an individualized, person-centered approach to help participants improve the quality of their lives through vocational rehabilitation as it relates to the following major areas:**

- ◆ Development of positive work habits and attitudes;
- ◆ Gaining a sense of purpose through productive employment;
- ◆ Healthy living and stability in mental health status;
- ◆ Maintaining independent living and improving social skills, leading to community reintegration;
- ◆ Minimizing reliance on institutional care.

To be eligible for CWT services, participants must have a signed referral from a VA provider who holds medical privileges, and must be declared medically stable by his/her Primary Care Physician and/or Mental Health Treatment Clinician.

## CWT Vision

CWT's vision is to see all veterans meaningfully engaged within their communities – be it through work, school or volunteering – while maintaining a sense of independence, dignity and self-worth.

## Compensated Work Therapy (CWT) PROGRAM

The Compensated Work Therapy (CWT) Program is a vocational rehabilitation program operating under Psychology Service at the Veterans Affairs Palo Alto Health Care System (VAPAHCS). The VAPAHCS Strategic Plan identifies six priorities for emphasis and action. Our priorities reflect

those of the Department of Veterans Affairs (VA), the Veterans Health Administration (VHA), the Mental Health Programs at the VA Palo Alto Health Care System, and the Sierra Pacific Network (VISN 21).

The purpose of the CWT Program is to foster the development of a supportive, therapeutic environment where participants can develop sufficient skills to achieve optimal levels of independence and productivity.

The CWT Program is included in the VAPAHCS Psychology Service Levels of Care Chart. The CWT Program component falls under Level 1 (Highest Internal Control) for Outpatient (Lowest Intensity). The CWT/TR Program component falls in Level 2 (Moderate Internal Control) for Residential.

In its Strategic Plan, VAPAHCS outlines the following six (6) objectives:

**Our people:** The employees, volunteers, students, trainees, contractors, and others who serve our veterans are our most important resource.

**Access:** We are committed to providing our veterans and fellow employees the right service, in the right place, at the right time.

**Quality:** Our mission is to provide exceptional health to all veterans we serve.

**Safety:** The safety of our veterans and workforce is essential every day.

**Innovation:** We embrace continuous learning, improvement, and research as fundamental to our ongoing success and improved access for veterans.

**Stewardship:** Each of us carries the responsibility of ensuring the best use of our nation's resources in performing our duties.

The CWT Program's Strategic Plan is congruous with the vision of the VAPAHCS to provide a cost effective, patient-oriented continuum of care which is comprehensive, accessible, and interdisciplinary, with the primary focus of successfully integrating the patient into the community.

The CWT Program has also modeled its Strategic Plan to be in line with the Department of Veterans Affairs' 2014-2020 Strategic Plan, which outlines the following goals:

- Empower veterans to improve their well-being
- Enhance and develop trusted partnerships
- Manage and improve operations to deliver seamless and integrated support

CWT's vision embraces the VA's five core values: Integrity, Commitment, Advocacy, Respect and Excellence (ICARE). CWT shares in the national goals of improving efficiency of service delivery, and aims to have veterans contacted within five days of initial consult.

The CWT Program has incorporated the philosophies of the VA and VAPAHCS Strategic Plans and adapted our plan to serve as a road map to the future and as a management tool for addressing our priorities. It is based on a foundation of commitment to excellence, accessibility, service, and value.

## ORGANIZATIONAL CAPABILITIES

This Strategic Plan describes the way in which the CWT Program will leverage its positioning to achieve its future goals and expectations. It establishes the framework we will use to plan our agenda, set priorities, and allocate resources. The plan takes into account our performance over past years as well as future goals to map out an approach to our program mission, along with the mission of the VAPAHCS.

This plan reflects the priorities of the VAPAHCS and integrates them with our mission and program initiatives. The Strategic Plan will help us direct our resources, strengthen coordination, use technology to perform our work more efficiently and accurately, and communicate more effectively with those we serve and our VA and community partners. The Strategic Plan is not a static document; it will change in response to feedback from stakeholders and consumers, assessment of our performance, and emerging needs from management.

Similarly, this Strategic Plan does not reflect all actions we intend to utilize in the achievement of our objectives. Rather, these strategies illustrate the general directions which we will follow in FY 2020. Adaptation and flexibility remain key components.

The CWT Program continually reviews and analyzes information obtained from formal and informal outcome data to improve its programs. The CWT Program is a part of a research project with the Northeast Program Evaluation Center (NEPEC) located in West Haven, CT, which has been integral in providing statistical data based on reports submitted by all CWT programs throughout the United States.

Additionally, the CWT Program maintains a local database to gather outcome data to facilitate improvements to the program.

## **CWT Defined**

The Compensated Work Therapy Program consists of five (5) elements, the most recent of which was implemented in early FY 2020:

**Transitional Work (TW)**

**Transitional Residence Program (TR)**

**Community Based Employment Services (CBES)**

**Individual Placement and Support (IPS)**

**Supported Education \***

*\*The Supported Education Program is a new element for CWT programs nationwide for FY 2020.*

### **Transitional Work**

**(TW) Vision:** The Transitional Work (TW) Program provides a structured environment in which clients participate in Transitional Work approximately 20 hours (or more) per week. Clients for this program must have a mental health diagnosis and/or a medical disability. They must be medically

stable, actively engaged in treatment, and have a goal of competitive employment in the community.

**TW Description:** The TW Program provides veterans with the skills, training, and income that will aid them in returning to competitive employment. The intent of the TW Program is to serve veterans with multiple barriers to employment (i.e., long history of substance abuse, serious criminal records, long-term unemployment or limited education) who, in spite of the best of services, may not be able to obtain competitive employment at this stage of their recovery.

## Transitional Residence (TR) Program

**TR Vision:** The TR Program provides a structured therapeutic residence in the community where clients participate in psychosocial/vocational rehabilitation activities at least 30 hours per week.

Participants for this program must have a mental health and/or medical diagnosis (i.e. Traumatic Brain Injury, PTSD, Substance Use Disorder, etc.) and be medically stable, capable of complete self-care and self-preservation in case of an emergency, and able to prepare their own meals.

**TR Description:** The Transitional Residence Program (TR) is a work-based Mental Health Residential Rehabilitation Program (MHR RTP) offering a therapeutic community of peer and professional support for veterans involved in the Transitional Work Program (TW), the Community Based Employment Services (CBES) Program and/or the Individual Placement and Support (IPS) Program. The VAPAHCS operates two residences in Menlo Park: the Gilbert Avenue house and the Eighteenth Avenue house. The program places a strong emphasis on:

- Securing permanent employment
- Securing permanent housing
- Increasing personal responsibility
- Achievement of individualized rehabilitation goals
- Safety
- Security
- Ability for self-medication

The primary objectives for these veterans are greater independence, improved social status, reduced hospitalization, and employment in the community based on their needs, abilities, strengths and desires.

## Community Based Employment Services Program

(formerly Supported Employment [SE])

**CBES Vision:** The Community Based Employment Services (CBES) Program places participants directly into competitive employment in the community. They are provided with ongoing support services (typically for up to 90 days after being placed in a competitive work environment), referrals to supplementary services, and information on how work may impact benefits they are currently receiving. Veterans are eligible for CBES if:

- The veteran's immediate vocational goal is to work in a competitive, community-based job.

- The veteran is eligible for VA services.
- The veteran has a sporadic work history (unable to hold a competitive job longer than three months).
- The veteran, if homeless, is receiving VHA homeless services (e.g., HCHV, Grant Per Diem, HUD-VASH, Domiciliary, RRTP, HCRV, VJO).
- The veteran is unable to obtain employment independently.

**CBES Description:** The program provides competitive job placement for veterans referred to CBES who meet all of the following criteria:

- Veteran is eligible for VA services
- Veteran wants to obtain immediate competitive employment

## **Individual Placement and Support Program**

(formerly Supported Employment for Severe Mental Illness [SE-SMI])

**IPS Vision:** The Individual Placement and Support (IPS) Program places participants directly into competitive employment in the community. They are provided with ongoing support services, referrals to supplementary services, and information on how work may impact benefits they are currently receiving. Clients for this program must have a primary diagnosis of severe mental illness (SMI), which includes psychosis, bipolar disorder and other disorders on the psychotic spectrum.

**IPS Description:** The Individual Placement and Support (IPS) Program provides competitive job placement with on-site support services for participants with a diagnosis of severe mental illness (SMI). With little or no pre-vocational assessment, participants are placed in competitive jobs within the community. The job developer will continue working with veterans at the job site and with the employer for as long as clinically appropriate, providing support in maintaining employment. Veterans will also be given benefits information and referrals to appropriate agencies.

### **Our Client descriptions:**

**TW and TR Programs:** Veterans who participate in the TW and TR Programs must have a mental health and/or medical diagnosis (i.e. Traumatic Brain Injury, Substance Use Disorder, PTSD, etc.) which prevents them from returning to their previous type of employment. Participants must be engaged in treatment at the VAPAHCS.

**CBES Program:** Veterans who participate in this program must be homeless and/or diagnosed with a medical or mental health disorder (i.e. PTSD, Substance Use Disorder, Spinal Cord Injury, etc.). Homeless veterans must be engaged in a VA homeless program, i.e., HCHV, Grant Per Diem, HUD-VASH, Domiciliary, etc.

**IPS Program:** Veterans who participate in this program must have a diagnosis of severe mental illness. Participants must be engaged in a treatment program at the VAPAHCS for case management.

## Our Partners/Stakeholders:

### Stakeholders for the CWT Program include:

**Alumni:** The CWT alumni are successful graduates of the CWT Program. They meet annually and are supported by CWT staff. They are also featured in the CWT Newsletter on a case-by-case basis.

**External Stakeholders:** External stakeholders include employers in the community, who employ CWT participants.

**Internal Stakeholders:** Internal stakeholders include referral sources that are staff at VA programs that recommend veterans to our programs. Some of these referral sources are the Mental Health Clinic, Homeless Veterans Rehabilitation Program (HVRP), Addiction Treatment Service (ATS), and New Horizons.

**Management:** CWT Management includes: VAPAHCS Hospital Director, Chief of Staff, Deputy Associate Chief of Staff, Chief of Psychology Service, Quality Management and VA Central Office (VACO).

**Volunteers:** Volunteers include the two House Managers for the TR program. These two homes are located at Eighteenth Avenue and Gilbert Avenue in Menlo Park. The CWT Program also has occasional volunteers who assist veterans on a drop-in basis in CWT's Resource Room.

**Contractor:** One full-time, contract Technical Writer who performs program outcomes data extrapolation and analysis, documentation of program adherence to CARF Standards, and the publishing of all program-related and participant-related program materials (i.e., brochures, client handbooks, program newsletter, etc.).

## WHAT PARTICIPANTS CAN EXPECT FROM THE PROGRAM

- ◇ Development and improvement of pre-vocational skills.
- ◇ Assistance with competitive job placement.
- ◇ Ongoing support services, referrals to supplementary services, and information on how work may impact benefits they are currently receiving.
- ◇ Gaining a sense of purpose, improving work habits, and developing social relationships.
- ◇ Fair and reasonable compensation.

## WHAT OUR EXTERNAL STAKEHOLDERS EXPECT FROM THE PROGRAM

- ◇ Participants who understand and accept personal responsibility.
- ◇ Participants who are medically stable and have a goal of competitive employment.

## Imminent Social Changes Requiring Consideration:

Veterans returning from Afghanistan and Iraq constitute the new, growing population at the VA. These veterans, significantly younger than the present clients we serve (median age: 50), need to be informed about readjustment issues so that they can reintegrate back into community living. They may have sustained combat-related injuries. They may also have difficulties finding and maintaining competitive employment. When they do find jobs, their employers and co-workers must not assume that all returning veterans are having readjustment issues.

The reintegration of these veterans should include employment services where the employment is mainstream. Benefits counseling must be provided in a timely manner. Veterans and their prospective employers should be made aware of employment accommodations for combat-related injuries and psychiatric symptoms such as PTSD. To accomplish this, CWT will focus on integrating care and utilizing technology to streamline the process of reintegration. The implementation of Supported Education will provide another means of re-integration for this generation of veterans, many of whom will need to attend school or vocational training to brush up on the skills needed to become more competitive in the local job market.

## **STRENGTHS AND RECOGNITIONS**

### **POLICY AND PROCEDURE OVERSIGHT**

Although the CWT Program is a component of the Veterans Health Administration and is bound by its regulations and policies, the VA also utilizes the services of private sector organizations who have a particular expertise in mental health rehabilitation programs to supplement and support its mission. A description of one of these organizations follows.

#### **The CWT Program is CARF Accredited**

##### ***Who is CARF?***

Founded in 1966 as the Commission on Accreditation of Rehabilitation Facilities, CARF International is an independent, nonprofit accreditor of human service providers in the areas of aging services, behavioral health, child and youth services, Durable Medical Equipment, Prosthetics, Orthotics, Supplies (DMEPOS), employment and community services, medical rehabilitation, and opioid treatment programs.

The CARF family of organizations currently accredits more than 5,000 providers at more than 18,000 locations in the United States, Canada, Western Europe, South America, and the South Pacific. More than 7.2 million persons of all ages are served annually by CARF accredited providers. CARF surveyors are among the industry's most knowledgeable and respected experts in the field of rehabilitation and human services. CARF surveyors administer an accreditation process that distinguishes rehabilitation and human services providers for their quality and outcomes focus. It is CARF's ambition to develop and maintain current, field-driven standards that improve the value and responsiveness of the programs and services delivered to people in need of rehabilitation and other life enhancement services.

Accreditation is a good sign that an organization cares about delivering quality services to its customers. Being awarded accreditation is a "seal of quality" that the organization's services have delivered positive results. A CARF accredited organization shows a commitment to continually improving its services.

The TW, TR and (formerly, now IPS and CBES) SE Programs are CARF accredited. In 2019, the **CWT Program** received another three (3) year accreditation and received no recommendations

for program corrections. This is noteworthy, as only 3% of all CARF accredited programs nationally and internationally achieve a "no recommendation" comment.

Staff continue to participate in monthly CARF conference calls to keep updated on new standards and changes required by the VA. For more on CARF visit: <http://www.carf.org/default.aspx>

## **STRENGTH OF STAFF:**

CWT staff have been working together for many years. Collectively, the staff has increased the program from 40 clients per year to between 300 and 400 clients served per year. All staff members attend frequent training sessions and regularly meet with the Program Director for reviews and evaluations. Staff meet weekly for treatment team meetings, a Daily Management System meeting, and other VA interdisciplinary meetings, as necessary.

**Certifications:** In 2017, the program gained a new Licensed Clinical Psychologist/Clinical Coordinator who holds a Ph.D. CWT's Acting Program Director, who is also a Licensed Clinical Psychologist, was promoted in the same year to Program Director, making the program one of the few in the nation led by two Clinical Psychologists. In addition, many of the program's Vocational Rehabilitation Specialists hold advanced degrees and/or specialized certifications, including four staff who have received CPRP certification since joining the CWT team. This further demonstrates the CWT staff's commitment to obtaining the highest quality in training and certification in its field. Currently, all but one staff member (of those with direct patient care) hold specialized credentials.

**Efficiency:** Staff strive to meet or exceed national outcomes for all programs. Outcomes are collected on a regular basis for NEPEC and these outcomes are used in our Annual Outcomes Report and Narrative, (see Outcomes Report FY 2019).

## **SERVICE AREA NEEDS**

Despite being in existence for nearly 20 years, the CWT Program is not as well-known in the community as it should be. Staff members have been making a conscientious effort to present the programs at conferences and workshops, meet with community organizations, and make presentations to management. Still, CWT remains relatively obscure and misunderstood.

Other weaknesses, which have been addressed in the CWT Accessibility Plan, include:

- Staff outreach needs to expand to cover greater area and help the program gain exposure. Staff will continue to make presentations in the community, as well as to VA programs that have not been sending referrals.
- CWT Alumni have had trouble independently coordinating an alumni association. Currently, alumni are sent the CWT newsletter each quarter and are encouraged to regularly check the program's website for up-to-date information on CWT events, as well as other opportunities for staying connected to the program. CWT staff would like to facilitate the creation of alumni group while not being actively involved in it, as it should be an alumni-run association.
- A better understanding of the VAPAHCS Human Resources (and greater VA) recruitment and hiring process, as well as timely dissemination of information regarding these processes, is

needed to streamline and fulfill staffing needs. As of the beginning of FY 2020, three VRSs were still awaiting upgrades from GS-9 to GS-11 status.

Additionally, a new Employer Handbook was developed in FY 2009, updated in FY 2016 and updated again in FY 2019 to establish a better understanding of the policies and procedures pertaining to work and safety, and to provide a more comprehensive description of participant and employer relations. The handbook is updated to reflect any changes in policies and/or procedures.

The CWT Program moved from its longtime location in Building 321 to Building 349 in 2020. Staff have worked to inform clients and other stakeholders of the new location.

## PROGRAM EXPANSION

As part of then-President Obama's five (5) year initiative to end homelessness among veterans, the **CWT Program** added (in FY 2011) five (5) new Vocational Rehabilitation Specialists (VRS) to its staff to focus on community employment. This program (HVSEP) was time-limited, and terminated at the end of FY 2014. CWT was able to bridge this gap, however, by absorbing two of the program's VRSs into other programs within CWT. These VRSs became "floating" VRS positions, who work with clients in both the CBES and TW Programs.

In 2015 and 2016, CWT was able to hire on two more permanent, full-time "floating" VRSs to work within the TW and CBES programs. In addition, CWT hired a new Psychologist/Clinical Coordinator in FY 2017. In 2019, CWT was finally able to fill its long-vacant Program Support Assistant position.

## National Changes

Therapeutic Supported Employment Services (TSES), the organization that encompasses all national CWT programs, changed its name to VHA Vocational Rehabilitation Service Program Office in 2019. Prior to this, the national program unveiled a new re-organization plan in 2016 that would phase out all Incentive Therapy (IT) programs over the course of two years, with participants being referred to other quality-of-life oriented programs and services, such as volunteer work or further education. Also included in the plan was the implementation of a Supported Education Program within some CWT programs. This program is geared toward teaching life and job skills to veterans to further support their success as they reintegrate into the workforce. In addition, all CWT programs are expected to push the goal of competitive employment earlier on in veterans' participation in the programs.

## THE COMPETITIVE ENVIRONMENT

- There is limited low-cost housing available in the area for CWT participants, although the HUD-VASH Program has helped some veterans attain housing vouchers for low-cost housing.
- The public transportation systems in San Mateo and Santa Clara County cause difficulties for participants without cars to get to and from their work assignments due to lack of connections, scheduling, and elevated costs. Staff has conducted outreach campaigns with companies in the community that run private shuttles to possibly accommodate veterans along work routes. Potential collaborations continue to be discussed.

- The area in which CWT participants are seeking competitive employment is experiencing a 2.1% rate of unemployment (average rate between Santa Clara and San Mateo counties as of May 2018). While the program exceeded the national CWT average of participants employed at discharge, competitive employment opportunities continue to be a formidable challenge to our veterans who have significant barriers to employment.
- Criminal records may prevent participants from gaining employment in the community.

## **FINANCIAL OPPORTUNITIES**

The CWT Program is a component of the Department of Veterans' Affairs, whose annual budget is regulated by Congress. New financial opportunities for CWT are contingent upon new Mental Health funding initiatives from Central Office and Congressional approval.

## **FINANCIAL THREATS**

Starting off 2017, the VA was impacted by a new presidential administration, which immediately set in a motion a 90-day hiring freeze for all federal agencies. While certain positions (mainly those with direct clinical care) were eventually exempted, many positions remained impacted for months thereafter. As CWT had its Program Support Assistant leave without warning in the Fall of 2016, staff felt the impact of this shortage for three years before finally being able to hire a new PSA in 2019.

The CWT Program has also faced new financial challenges since a Congressional order issued in 2013 stated that rollover of funds between fiscal years will no longer be allowed. The order states that the program will not be able to carry more than \$1,000 of the remainder in its account over to the next fiscal year. Although funds taken from program account at the end of a fiscal year are to be returned to account at the beginning of the next fiscal year, the disruption in funding limits CWT's flexibility in serving clients, as well as in acquiring new contracts.

Having a dedicated staff member to perform payroll functions for veteran workers in the TW Program continues to be a top priority for CWT in FY 2020. While the CWT Program has a permanent employee performing payroll functions, there is, at present, no staff member currently trained to assume payroll should that become necessary. Timely and accurate payroll submission is crucial to the program's success, and staff feel that having a trained permanent payroll/fiscal officer is vital to the program's Risk Management. Additionally, CWT received a mandate in early 2018 that payroll audits be performed by each program each pay period (every two weeks) – a sharp increase from the previous once-a-quarter audit. The program is hoping to train new PSA on these duties in FY 2020 so he can act as secondary payroll/audit staff. The program was able to procure seven electronic time clocks to help make the payroll process more efficient, and has been installing them and training staff and supervisors on their use since FY 2017.

## **RELATIONSHIP WITH EXTERNAL STAKEHOLDERS**

CWT enjoys an excellent relationship with its external stakeholders, as evidenced by a nearly 100% "satisfied" response in each of three categories from the FY 2019 "Satisfaction Survey." Categories rated by external stakeholders are:

- Communications
- Referrals in a timely manner

- Referring the program to others

## **REGULATORY ENVIRONMENT**

The Compensated Work Therapy Program is one of many arms of the Veterans Administration. As such, CWT is subject to any and all policies set forth by the Veterans Administration, which in turn is a department within the Executive Branch of the United States government.

## **LEGISLATIVE ENVIRONMENT**

See "Regulatory Environment" above. CWT falls under the Title 38 Federal Regulation Code.

## **NON-DISCRIMINATION POLICY**

In accordance with VA Palo Alto Health Care System policy, the CWT Program endeavors to provide timely, coordinated and integrated case management service to veterans. The program does not discriminate based on age, culture, race, ethnicity, religion, spiritual beliefs, gender, sexual orientation, expression of identity, language, class, socioeconomic status or educational background, nor does it reject clients based on medical disabilities or mental health issues. In some cases, other VA programs may be better able to serve certain medical/mental health needs. In these cases, CWT will work with the client and providers to triage the client into more appropriate programs.