

The RTAC Learning Collaborative: Three State VR Agency Examples of Using Data to Promote Problem Solving and Decision-Making

5th Annual Summit on Vocational Rehabilitation Program
Evaluation and Quality Assurance
San Antonio, Texas, September 5-6, 2012



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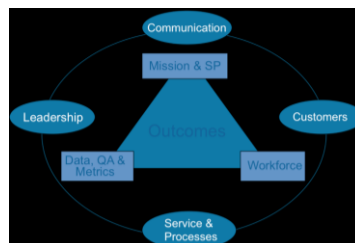


RTAC on VR Program Management

- Funded by NIDRR
- Charged with developing and testing a Management Model that includes:
 - Quality Assurance (QA)
 - Human Resources (HR)
 - Strategic Planning (SP)
- Host 2 Learning Collaboratives



The VR Performance Management Framework



The Learning Collaborative Model

- Peer-to-peer knowledge exchange for identifying and applying solutions to VR program management issues
- 8 state VR agencies received \$50,000 to implement a 12-month initiative
 - Alabama, Florida, Indiana, Maine, Michigan, New Jersey, Texas, & Virginia
- 4 of the 7 components of the VR Program Management Framework must be utilized



September 6, 2012

COMMONWEALTH OF VIRGINIA Department for Aging and Rehabilitative Services

Barbara J. Burkett, Ph.D., M.S.P.H.

GOAL: Develop a data informed and decision driven environment at DARS to maximize client success.

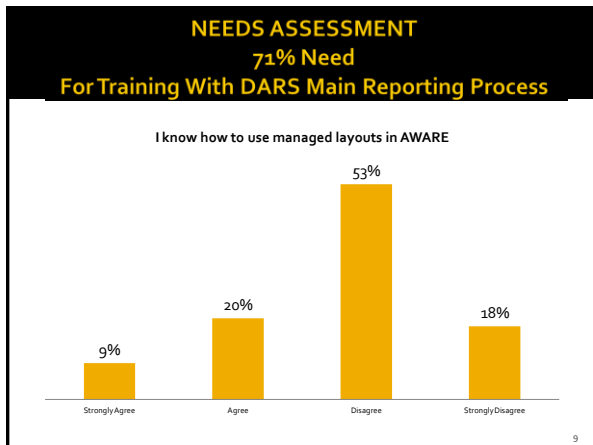
STEPS AND DELIVERABLES

- **Creation of an "analytic" advisory board** with membership including the following DARS staff: the Vocational Rehabilitation Field Services Director, Policy and Planning Lead Data Analyst, Senior Fiscal Analyst, Vocational Rehabilitation Services Southwest Regional Director, Field Rehabilitation Services Budget Analyst. The Region Three TACE Center has also appointed a staff member to this board. **COMPLETED**
- **Perform a needs assessment and evaluation** to identify barriers to VR staff' access to, understanding, and use of available data for decision making. **COMPLETED**
- **Review existing reports/products** and create new products to enhance consistent use of the data. **COMPLETED**
- **Develop a common language** and terminology for staff and partners. **IN PROCESS**
- **Create a "data hub"** on a secure webpage to provide a centralized location for easily accessible reports, program evaluations, surveys and data sources. In addition to the storing of reports, the hub would contain mathematical templates of outcome projection/predictive modeling algorithms allowing calculations to be performed at the regional, office and counselor level. This hub would include a discussion board for ideas to be introduced and discussed in detail. **IN PROCESS**
- Work with the advisory group, DRS Training Unit staff, and the TACE Center, to develop and implement **training**, as appropriate, to address identified staff needs and gaps. **RECRUITING TRAINER**

Identification with Reports All DARS Management Need to Use and Understand

- Commissioner' s Scorecard
- Expenditures
- IPE Goals V. Regional Labor Market Data
- Vendor Report Card
- Where are Your Clients?





Data Hub

- Reports with sample interpretation
- VR/data/statistical terminology dictionary
- Discussion board
- Interactive chat
- Search engine
- <http://cms.datahub4success.webnode.com/>

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Training: What, who, where and when.

What

- AWARE Layout Training
- Data Interpretation & Terminology
- Other Training Needs?

Who

- Consultant
- In House
- Other ideas?

Where

- Manager's Meetings
- Site visits
- Other ideas?

When

- Grant Ends in March but this will be on-going project for Virginia

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Virginia DARS Leadership Institute Ratings Encouraging Results !

- 96.9% thought course material/content was good or excellent.
- 96.9% thought the presenters were good or excellent.
- 100% thought the group interaction was good or excellent.
- 99.6% believed the material was relevant or highly relevant to their job.
- 99.6% believed that they gained skills and abilities from the training.
- 17 out of 32 comments stated that the data portion of the program was most beneficial.

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Vendor Report Card Part I: Clients Served and Outcome

ESO Scorecard FFY 2011	Number
Cases Receiving Services at ESO "X" (Any Status)	
Total Served in FFY	457
Case Outcome Information	
Rehabilitation Rate	80.8%
Average Hourly Earnings - Successfully Closed Clients	\$10.14
Average Hours Worked - Successfully Closed Client	29
Number of Clients Who have Private Insurance through Employer at Closure	39
Number of Clients who moved off of SSI by Closure	3
Number of clients moved off SSDI by Closure	3
Number of clients moved off of TANF by Closure	12

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Vendor Report Card Part II: Demographics and Job Type

Demographics	
Male	58.2%
Female	41.8%
Not Transition	56.2%
Transition (14-24)	43.8%
Brain Injury	7.3%
Autism	7.9%
Intellectual Disability	28.5%
Specific Learning Disabilities	28.5%
Job Type at Closure	
Janitors and Cleaners, Except Maids and Housekeeping Cleaners	40.7%
Stock Clerks, Sales Floor	5.1%
Customer Service Representatives	4.2%
Retail Salespersons	3.4%
Cashiers	3.4%

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Vendor Report Card Part III: Cost

Amount Spent Life of Case at Mystery ESO	
Average cost of Successful Closure	\$2,512.43
Average cost of Unsuccessful Closure	\$1,684.89
Average cost of all closures (Successful and Unsuccessful)	\$2,353.72
Time Between Assessment/Job Development and Placement	
A Month or Less	9.3%
1-3 Months	12.7%
4-6 Months	26.3%
7-12 Months	30.5%
Over a Year	21.2%
*Statistics for 26/28 are based on consumers closed in FFY 2011 and served in FFY 2011	

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Commissioner's Scorecard

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Expenditures By Service Categories Report at Region, Office and Counselor Level

Expenditures by Category and Region - SFY 2012 as of 02/11/12	Northern		Central		Eastern		Southwest		Total	
	Spent	% Spent	Spent	% Spent	Spent	% Spent	Spent	% Spent	Spent	% Spent
Attendee Care and PMS Payment for Payroll	\$224,672.00	4.4%	\$103,959.09	3.1%	\$28,584.10	1.0%	\$41,037.31	2.3%	\$398,192.50	3.0%
Diagnostics	\$46,595.68	0.9%	\$27,309.07	0.8%	\$9,145.29	0.3%	\$15,911.74	0.9%	\$98,921.78	0.8%
Durable Medical Equipment	\$101,372.63	2.0%	\$81,580.04	2.4%	\$25,850.22	0.9%	\$45,140.48	2.5%	\$253,943.37	1.9%
Fuel, Travel and Transportation	\$162,784.51	3.2%	\$138,898.58	4.1%	\$95,071.31	3.3%	\$170,978.50	9.4%	\$567,732.90	4.3%
Independent Living Services	\$11,839.84	0.2%	\$5,452.23	0.2%	\$5,787.50	0.3%	\$23,079.57	0.2%	\$46,169.14	0.3%
Interpreter Services	\$170,966.64	3.4%	\$31,057.36	0.9%	\$6,436.36	0.2%	\$5,746.02	0.3%	\$214,205.38	1.6%
Maintenance - Rooms and Board	\$241,336.14	4.8%	\$72,990.60	2.1%	\$89,710.55	3.1%	\$95,116.01	5.2%	\$499,153.30	3.8%
Medical and Therapeutic	\$216,350.55	4.3%	\$165,172.87	4.9%	\$43,474.28	1.5%	\$88,960.63	4.9%	\$513,958.33	3.9%
Modifications - Home/Vehicle and Rehab Engineering	\$132,828.42	2.6%	\$117,999.32	3.5%	\$55,235.21	1.9%	\$77,873.96	4.3%	\$383,936.91	2.9%

Expenditure Report (Cont.)

Cont.	Northern	Central	Eastern	Southwest	Total					
Non-Medical Supplies and Services	\$165,767.94	3.3%	\$97,470.83	2.9%	\$93,695.33	3.3%	\$108,327.49	6.0%	\$465,261.59	3.5%
Self Employment including Tools and Equipment	\$32,011.65	0.6%	\$16,103.85	0.5%	\$210.00	0.0%	\$156.08	0.0%	\$48,481.58	0.4%
Services to Family Members Training, including Tuition	\$24,224.01	0.5%	\$2,102.20	0.1%	\$1,208.00	0.0%	\$9,349.13	0.5%	\$36,883.34	0.3%
Transitional Employment Services	\$606,884.05	12.0%	\$388,788.77	11.4%	\$360,541.05	12.6%	\$425,688.69	23.5%	\$1,781,902.56	13.5%
Work Incentive Services	\$2,928,098.39	57.7%	\$2,150,938.94	63.3%	\$2,030,645.75	70.9%	\$716,881.12	39.5%	\$7,826,564.20	59.5%
Total	\$5,073,916.45	100.0%	\$3,400,321.52	100.0%	\$2,885,959.88	100.0%	\$1,813,054.86	100.0%	\$13,153,252.31	100.0%

*Data in this table is taken from AWARE ICM Meet Data Tables, data is current as of 02/11/12, includes all items currently paid that are budgeted for SFY 2012. Does not include services with outstanding authorizations.

IPE GOALS V. LABOR MARKET DATA

Vocational Goals - FFY 2012 Plans, Central Region	Rural Offices	(Sub)Urban Offices	Total
Service Worker	50	123	173
Secretarial/Office/Clerical	16	65	81
Laborer	33	33	66
Skilled Craft	17	27	44
Professional	20	21	41
Operative	10	19	29
Sales	9	13	22
Technical/Paraprofessional	11	7	18
Executive/Managerial	2	6	8
Computer and Mathematical	1	3	4
Clinical and Administrative Support	2	1	3
Healthcare Support	1	0	1
Total	172	318	490

*Rural Offices are: Danville, Martinsville, Lynchburg, South Boston and Farmville

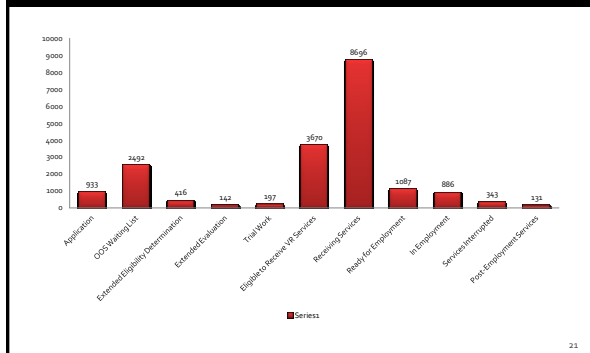
†(Sub)Urban Offices are: Richmond, Henrico, Chesterfield and Petersburg

Community Profile Lynchburg MSA

- Employment by Sector* (4rd Qtr. 2011)
- Natural Resources and Mining 413 0.4%
- Construction 5,119 5.2%
- Trade 17,142 17.5%
- Transportation and Utilities 2,078 2.1%
- Manufacturing 14,741 15.0%
- Information 994 1.0%
- Financial 4,336 4.4%
- Services 38,838 39.6%
- Government 14,327 14.6%
- Other 0
- Total 97,988 100.0%



Where Are Our Clients



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Assessing and Reporting Vendor Performance

RTAC Learning Collaborative
 Florida Division of Vocational Rehabilitation
 September 6, 2012
 San Antonio, Texas

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Florida Team

Steve Collins
 Carmen Dupont
 Russell Hellein
 Libby Moody
 Jacqueline Mason-Hedgmon
 Linda Larsen

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Florida Project Goals

- The mission of this project is to **design and implement a process that effectively and fairly assesses and reports vendor performance, and improves VR outcomes.**

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Florida Current Situation

- Current performance in this process is largely unknown because there is no systematic approach for assessing vendor performance
- 30% of valid customer complaints are in the area of slow or inadequate services being provided
- This issue is also reflected in customer satisfaction survey data, the Comprehensive Statewide Needs Assessment, and special analyses of process performance related of cycle time.


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Benchmarking Project Approach

- *Research vendor performance*
- *Document current vendor assessment approaches*
- *Collect and analyze relevant performance data*
- *Develop and implement benchmarking tools*
- *Conduct site visits with best performers*
- *Adopt and incorporate best practices*
- *Provide communication and training to staff and vendors*
- *Collect and analyze “before and after” data*

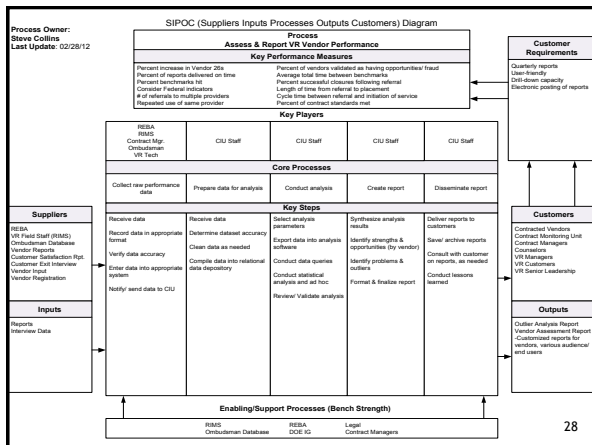
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What will be measured?

- *Standards of quality for vendor services.*
- *Cycle times for each phase of services*
- *Customer satisfaction and complaint data*
- *Vendor demographics (e.g., financial, location, type of services, number of employees, multiple vs. single contracts, etc.).*
- *Customer demographic factors (e.g., type of disability, severity of disability, location, complexity of case, age, primary language, etc.)*

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How will benchmarking partners be selected? Weighted criteria!

- External Recognition
- General Business results
- Values and Ethics
- Similar Stakeholders
- Social Services Organization
- Uses a Case management Service delivery Model
- Similar in Size
- Multiple Locations
- Performance Management Approach

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CRITERIA	DEFINITION	WEIGHT	SCORING SCALE			DELIVERABLES			
			1	3	5	Concrete Publishing	Henry Ford Health System	Edwards Medical Center	South-Central Foundation
External Recognition	Has been recognized by a National or State third party (e.g. "best case" or "best practice" or "Best Practice Award") or other national, state, or local award.	5	No external recognition	Awarded within industry or business sector as evidenced by third party assessment and management practices (e.g. trade magazine article, etc.)	Recognized by Bunting, Corning, Stearns or 3rd Party, non-independent research (e.g. etc.)	5	5	5	5
General Business Results	Having high quality and ethical performance results related to the assessment of vendor performance.	5	No business results or average to poor results	Generally positive performance results across vendor management operational processes.	Established positive results related to the management of vendors.	5	1	5	5
Values and Ethics	Having high legal and ethical standards for the good of the organization.	5	Conditions or ethical violations widespread and well-documented	Substantive ethics or compliance activities reported in some part of org, but not widespread or resulting in conditions or violations (if working from a corporate foundation or non-organizational model, e.g. "BIA beyond ethical acts")	No known breach of legal or ethical standards (PainCare) based on research, beyond top management or annual report information.	5	5	5	5
Similar Stakeholders	Government entity	1	No government stakeholders	State (2 or 3) government stakeholders	State, State and Federal Stakeholders (only a government entity)	1	1	1	3
Social Services Organization	Responsible for planning, implementing and operating social services programs (e.g. Public or Non-Profit agencies, VR, Child Protection, Economic Services, Public Health).	3	Not a public service or non-profit organization. (Organization is profit-oriented with emphasis on sales)	Public or non-profit organization, but does not deliver social program services (e.g. Revenue, Utility, etc.)	Public or non-profit organization that delivers social services to its customers. (The main product/service line deals with social services)	1	3	5	5
Uses a Case Management Service Delivery Model	Includes the following sub-processes: intake, assessment of needs, service planning, service plan implementation, service coordination, monitoring and follow-up, assessment, case conferencing, case closure.	3	Does not use a case management model	Organization uses a few (2-3) components of case management.	Organization uses most, if not all, components of case management and/or model is very similar to standard best practices of CME.	1	5	5	5
Similar in Size	Number of FTE similar to:	1	Less than 400	400-700 employees, or more	800-1200 employees	1	3	5	5
Multiple Locations	Organizations having offices in multiple locations	1	One location	2-30 locations, or more 100 locations	41-99 locations			1	3
Contact Information						Atlanta Chicago (314) 300-1028 america@vrca.org @vrca.org	Rose Glenn (212) 674-6017 harrington@vrca.org	Sturgis Purvis (607) 732-4341 purvis@vrca.org	Michelle Perry (607) 732-4341 perry@vrca.org



Reaching Out to Potential Partners

- Benchmarking Code of Conduct
- Vendor Management Fact Sheet
- VR Media Kit
- SIPOC
- Partner Questionnaire

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Next Steps

- Contact potential benchmarking partners
- Collect information from questionnaire responses and other materials
- Select top candidates and request opportunity to conduct benchmarking site visit
- Build best practices into Florida VR vendor assessment and reporting process
- Communicate / Train / Implement

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THANKS TO RTAC!!!

- Providing knowledge and information from previous efforts in vendor assessment.
- Making connections with potential benchmark partners; especially in VR.
- Reviewing project progress and outputs on a regular basis
- Assisting in removing barriers for conducting the study.

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Alabama Department of Rehabilitation Services



Michael Quinn, M.H.S
September 6, 2012

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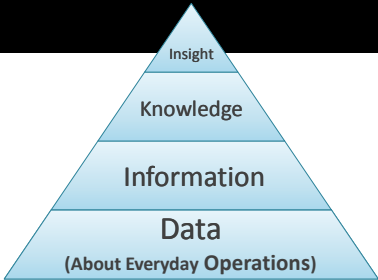
We *already have* these!



Insight
Knowledge
Information
Data
(About Everyday Operations)

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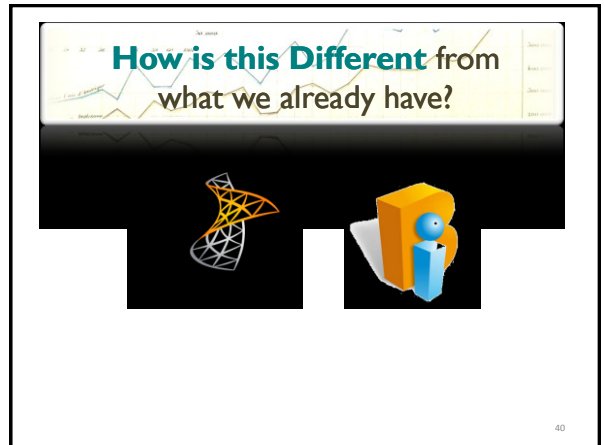
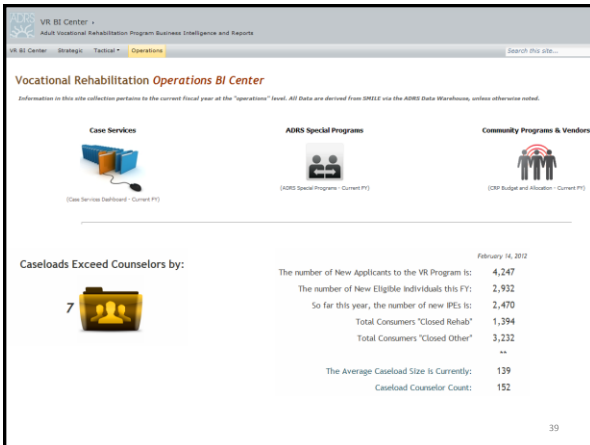
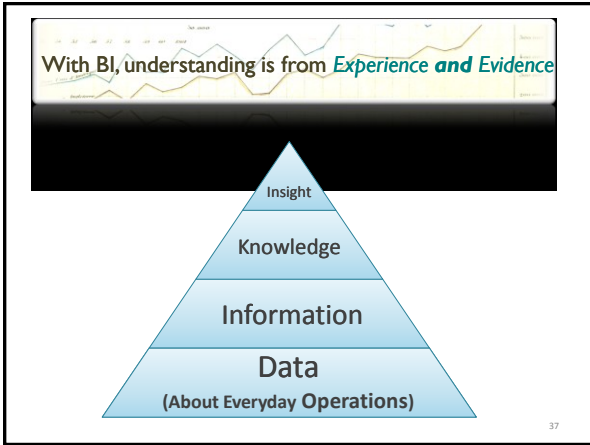
Current understanding is based mainly in *Experience*



Insight
Knowledge
Information
Data
(About Everyday Operations)

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Thank You!!!

Please feel free to contact any of us!

If you are interested in becoming part of next year's class of LC members, please contact Susan Foley.



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