

Introduction

Successful vocational rehabilitation innovations: Building a better toolbox

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Abstract.

BACKGROUND: Kentucky Office of Vocational Rehabilitation (OVR) and Minnesota Vocational Rehabilitation Services (VRS) successfully participated in a randomized control trial of an intervention designed in partnership with more than 100 VR personnel and twenty state VR agencies to identify effective practices for increasing earnings outcomes of Social Security Disability Insurance (SSDI) beneficiaries receiving VR services.

OBJECTIVE: This paper introduces articles in the Special Issue to tell the story of the SGA Model Demonstration from design, testing, and impact evaluation.

METHODS: The SGA Model Demonstration began reviewing administrative data, collecting expert opinion, and exploring current practice in eight state VR agencies. After an eighteen-month period of capacity building, two state VR agencies randomized local offices and implemented a rapid coordinated team approach.

RESULTS: State VR agencies are successfully participating in rigorous research activities including model demonstrations with experimental designs.

CONCLUSIONS: Model demonstrations that include experimental designs are effective strategies to improve knowledge and build a better practitioner toolbox to advance employment outcomes of VR clients.

Keywords: Vocational rehabilitation, disability, SSDI, SGA, employment

1. Why this Special Issue?

This Special Issue of the *Journal of Vocational Rehabilitation* tells the story of a Rehabilitation Services Administration Model Demonstration entitled the “SGA Project” testing an intervention to improve earnings outcomes of Social Security Disability Insurance (SSDI) beneficiaries who were clients of Kentucky and Minnesota state vocational

rehabilitation (VR) agencies. Hereafter, and throughout the papers, we will refer to SSDI beneficiaries receiving VR services as SSDI clients. The title SGA was purposefully chosen to keep the goal clear and to advance earnings outcomes above substantial gainful activity (SGA) which has implications for economic independence. For this project, SGA refers to the monthly earnings amounts as targets for earnings at VR closure rather than as a determination of eligibility for Social Security Administration Benefits. Monthly earnings amounts between 2015 and 2017 (the testing phase) were \$1,090 to \$1,170 for non-blind SSDI beneficiaries (SSA, 2020a).

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44 Early in the design phase it was clear that some
 45 VR agencies were reaching high levels of perform-
 46 ance on earnings outcomes even in states that had
 47 high unemployment rates. Efforts such as building
 48 business relations functions, direct provision of work
 49 incentive counseling services, and reducing bureau-
 50 cratic inefficiencies that slowed down the pace of
 51 services were observed in high performing VR agen-
 52 cies. Many of these innovations were written into the
 53 Workforce Innovation and Opportunity Act of 2014
 54 and are maturing in VR agencies all over the coun-
 55 try. This bodes well for SSDI clients seeking higher
 56 earnings.

57 June 2020 marked the 100th birthday of the public
 58 VR program, a program that evolved through mul-
 59 tiple eras of economic distress. The SGA Project
 60 operated shortly after the Great Recession. VR agen-
 61 cies are innovating again to consider more remote
 62 and virtual ways of connecting, expanding dual cus-
 63 tomer approaches to serve businesses and workers
 64 as clients (Moore, Haines, Bradshaw et al., 2018),
 65 and looking for more tools to put in a practitioner’s
 66 toolbox. What we hope to relay in these papers is
 67 that participation in rigorous research may expand
 68 options practitioners have to make a difference in the
 69 lives of SSDI clients. Participating in a randomized
 70 controlled study is a major undertaking. We owe a
 71 debt of gratitude to the Kentucky Office of Vocational
 72 Rehabilitation (OVR) and the Minnesota Vocational
 73 Rehabilitation Services (VRS), their personnel and
 74 partners for engaging with us. Our ultimate goals are
 75 the same: to improve employment outcomes of clients
 76 and to build a better toolbox.

77 2. The SGA model demonstration

78 RSA funded the SGA Project to identify VR
 79 agency practices that lead to improved earnings
 80 outcomes above substantial gainful activity at VR
 81 closure for SSDI clients. They narrowed the popula-
 82 tion to people by including only those receiving SSDI
 83 benefits as an adult, were not receiving Supplemental
 84 Security Income (SSI), and were not eligible for SSDI
 85 because of blindness. Those that receive SSDI due to
 86 blindness receive a different package of services from
 87 VR agencies and follow different guidance from SSA.
 88 RSA awarded a cooperative agreement to the Institute
 89 for Community Inclusion at the University of Mas-
 90 sachusetts Boston and Mathematica Policy Research.
 91 Phase I activities sought to identify high perform-
 92 ing agencies, key practices that might explain that

93 performance and include practitioner and expert
 94 opinion in assessment of those practices. The SGA
 95 Project worked with more than 100 practitioners
 96 representing more than 20 VR agencies to define
 97 the intervention. The SGA Project partners analyzed
 98 administrative data, hosted Delphi Panels, inter-
 99 viewed VR agency leadership and conducted eight
 100 VR agency case studies (Foley, Haines, and Mock,
 101 202Xa; Foley, Haines, and Mock, 202Xb) to define a
 102 rapid coordinated team approach. ICI Senior Policy
 103 Fellows and consultants provided intensive techni-
 104 cal assistance to support Kentucky and Minnesota to
 105 adopt and mold the intervention into their operations,
 106 policies, procedures, and practices (Marrone, The-
 107 lin, and Mock, 202X). Mathematica Policy Research
 108 assessed earnings outcomes as described in Martin
 109 and Sevak (202x) and Kehn and Honeycutt (202x).
 110 Taylor and Blackburn (202X) interviewed and fol-
 111 lowed SSDI clients who participated to understand
 112 why people seek work, what influences their choices
 113 about earnings levels, and how VR services played a
 114 role in their decisions.

115 The intervention was a rapid coordinated team
 116 approach that had very specific pacing measures
 117 and required a rehabilitation counselor, financial
 118 specialist, and job placement specialist to work
 119 together prior to individual plan for employment
 120 (IPE) development. All of the elements were derived
 121 from practices in operation in at least one VR agency.
 122 In many ways, the intervention was a simple and
 123 concrete set of steps to modify the rehabilitation
 124 process. In application, significant shifts in culture,
 125 norms, philosophy, contracting, partnership, opera-
 126 tions, eligibility determination, relationships with the
 127 Social Security Administration (SSA), data systems,
 128 and counselor tasks and skills were required. Once
 129 Kentucky OVR and Minnesota VRS agreed to partic-
 130 ipate, each required eighteen months of start-up and
 131 significant funds to proceed. Both participated in a
 132 randomized controlled trial, participated in intensive
 133 training and technical assistance activities and
 134 dedicated senior staff to champion implementation.

135 3. Why RCTs in VR agencies matter

136 Historically, once individuals enter the SSDI pro-
 137 gram, the likelihood is low that they will ever leave
 138 because of work and earnings (SSA 2020b). Though
 139 relatively few SSDI beneficiaries leave cash benefits
 140 for a job, many have employment goals and engage in
 141 employment or job search and preparation activities.

142 Surveys sponsored by SSA indicate that a large share
143 of SSDI-only beneficiaries are interested in returning
144 to work and that this share has grown over time; the
145 most recent data suggest that more than 40 percent of
146 SSDI-only have work goals and expectations (Liver-
147 more et al., 2019). At the time the SGA Project was
148 being implemented, the SSDI program was experi-
149 encing tremendous growth. Some of the growth was
150 attributed to the 2007–2009 economic recession, but
151 it was also due to other factors, including the aging
152 of the baby boom generation and increased labor
153 force participation by women (Ruffing, 2014). Find-
154 ing ways to better support the return-to-work efforts
155 of SSDI beneficiaries and increase their SGA-level
156 employment can help them become more independ-
157 ent and successful economically and can also help
158 curb future growth in the SSDI program. Effective
159 work supports, if provided soon after individuals
160 experience employment-related consequences of dis-
161 ability onset, might also prevent them from having
162 to leave the labor force and enter the disability
163 programs.

164 State VR agencies are the primary source of
165 employment-related services for individuals with sig-
166 nificant disabilities. VR agencies serve over a million
167 individuals with disabilities each year (U.S. Depart-
168 ment of Education, 2018), and a large share of
169 these individuals are receiving SSA disability ben-
170 efits. In June 2018, VR agencies were serving over
171 344,000 SSA beneficiaries (SSA, 2018). Although
172 providing services to many SSA disability bene-
173 ficiaries, the federal-state VR program has been
174 criticized for its failure to help SSA disability ben-
175 efiaries obtain jobs with substantial earnings. The
176 U.S. General Accountability Office (GAO) found that
177 although SSA beneficiaries who received VR ser-
178 vices increased their earnings, only a small share of
179 them had earnings that were high enough for them
180 to leave the SSA disability rolls (GAO, 2007a). GAO
181 recommended that the Secretary of Education iden-
182 tify and promote promising VR agency practices that
183 improve the employment of SSA disability beneficia-
184 ries (GAO, 2007b).

185 Identifying a “promising practice” is much eas-
186 ier than proving a practice is actually effective.
187 Descriptive evidence that a practice appears to be
188 effective is usually sufficient to label it as promis-
189 ing. More rigorous evidence is needed to consider
190 a practice as “evidence-based.” The National Tech-
191 nical Assistance Center on Transition (NTACT)
192 funded by the U.S. Department of Education iden-
193 tifies effective transition services for youth with

194 disabilities, including practices used by VR agen-
195 cies, and assesses the level of evidence that supports
196 each practice’s effectiveness. None of the effective
197 VR practices identified by NTACT, which include
198 practices used with both transition-age youth and
199 adults, have the strongest level of evidence needed
200 to be considered as evidence-based (NTACT, 2018).
201 The National Institute on Disability Independent
202 Living and Rehabilitation Research funded a Voca-
203 tional Rehabilitation Research and Training Center
204 at ICI to conduct a systematic review of VR research
205 literature. Boeltzig-Brown et al. (2017) reviewed
206 more than 550 studies finding very few experimen-
207 tal studies. Other researchers have confirmed the
208 finding that very few VR practices have been stud-
209 ied using rigorous methods (Fleming et al., 2013;
210 Leahy et al., 2014). Experimental evaluation meth-
211 ods, when implemented appropriately, are considered
212 the most rigorous methods for testing the impact of
213 a service innovation or practice. They involve ran-
214 domly assigning individuals (or groups of individuals
215 defined by service areas or other criteria) to receive
216 a new service or practice of interest (treatment) or
217 receive either the usual services or no services (con-
218 trol). Because individuals are randomly assigned
219 to the groups, they should be similar with respect
220 to their characteristics and other factors that might
221 affect their outcomes, aside from the treatment. Thus,
222 any differences in their outcomes can be attributed
223 to the treatment.

224 Ethical concerns about ensuring that all VR clients
225 have access to the same set of services or have
226 informed choice about those services and practi-
227 cal challenges associated with implementing random
228 assignment have likely limited VR agencies’ use
229 of experimental evaluation methods. Participating
230 in experimental designs comes with financial costs
231 including staff training, investment in data systems,
232 contracting modifications, union negotiations, and
233 salaries of dedicated personnel. It also comes with
234 political risks such as appearing to favor a select
235 population, a particular intervention, or a specific
236 geographic area. Despite this, VR leadership demon-
237 strate a strong interest and willingness to engage
238 in research. Connelly and Wooderson (202X) of
239 the Council of State Administrators of Vocational
240 Rehabilitation (CSAVR) report in this Special Issue
241 that VR agencies consider whether participating in
242 research builds the capabilities of VR personnel to
243 fully use the practices available to them. Recent
244 RSA model demonstrations have required VR agen-
245 cies to be the lead with evaluators as partners.

Five VR agencies operate the Work Based Learning Model Demonstrations and four lead the Career Pathways for Individuals with Disabilities Model Demonstrations. These efforts raise the possibility that VR practices will generate a more rigorous level of evidence.

The Kentucky OVR and Minnesota VRS implementing the SGA Project demonstrations described in this Special Issue successfully used an office-level random assignment design, which permitted a rigorous test of the intervention. The office-level random assignment addressed many practical issues associated with implementing an experimental study in the service delivery context. Other experimental or rigorous nonexperimental research designs are also feasible for VR agencies to implement with enough forethought and a strong desire to know if something works. Helping people with disabilities find and maintain employment can be challenging because so many factors influence the outcomes.

To that end, the Special Issue contains two companion articles to further understand who applies for SSDI benefits. Contreary and Honeycutt (2020) use three panels of the Survey of Income and Program Participation data matched to SSA data to help build evidence of which individuals are at risk of applying for SSDI benefits. Stapleton and Martin (2020) use longitudinal statistics to identify who enters SSDI and the timing of that entry relative to VR application. Innovation and experimentation can help VR agencies learn about what works for whom and under what circumstances, and ultimately, make VR services more effective.

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