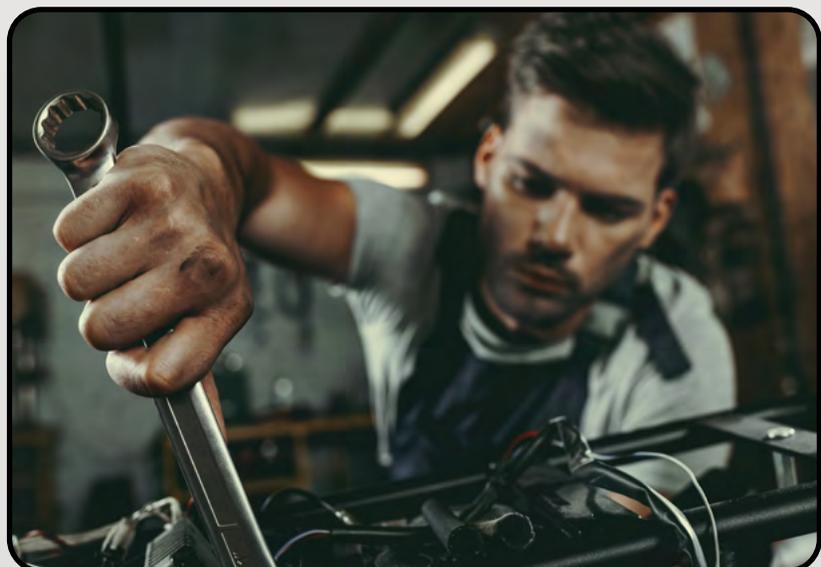


IPS-Y Fidelity Scale for Young Adults

Sarah J. Swanson, Deborah R. Becker, Gary R. Bond, & Marsha L. Ellison



Recommended citation: Bond, G. R., Becker, D. R., Swanson, S. J., & Ellison, M. L. (2020). IPS-Y (IPS Fidelity Scale for Young Adults). Worcester, MA: University of Massachusetts Medical School, Transitions to Adulthood Center for Research and Lebanon, NH: IPS Employment Center, Rockville Institute.

The contents of this fidelity scale were developed under a grant with funding from the National Institute on Disability, Independent Living, and Rehabilitation Research, and from the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration, United States Department of Health and Human Services (ACL Grant# 90RT5031, The Learning and Working Transitions RRTC). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this fidelity scale do not necessarily represent the policy of NIDILRR, ACL, HHS, or SAMHSA and you should not assume endorsement by the Federal Government.



IPS-Y (IPS Fidelity Scale for Young Adults) (Version of 1-10-20)

General Instructions:

The IPS-Y (IPS Fidelity Scale for Young Adults) is a new 35-item scale. It has two components: **IPS-EMP** (25 employment items) and **IPS-Ed** (10 items – 9 education items and one new family contact item). **IPS-EMP** is adapted from the IPS-25 fidelity scale (Becker, D. R., Swanson, S., Reese, S. L., Bond, G. R., & McLeman, B. M. (2019). *Supported employment fidelity review manual* (4th ed.). Lebanon, NH: IPS Employment Center.) This manual should be consulted for detailed instructions for rating items. (An amendment to this manual for the Young Adult fidelity scale is in preparation.) This scale is recommended for use with IPS programs serving the age group from roughly 15 to 26 years of age; the scale is suitable for programs that have eligibility criteria with broader or narrower age ranges. We use the term young adults to encompass this entire age range, including transition-age youth and other subgroups.

The IPS-EMP consists of the same items in same order as the IPS-25, and is scored the same as the IPS-25. Compared to the IPS-25, the IPS-EMP has minor modifications throughout to make labels more precise, make ratings less ambiguous by rating items on the number of criteria met, and accommodate young adult issues, but in most respects the items are scored similarly to the IPS-25. **Substantive changes in scoring criteria on IPS-25 items are annotated in yellow.** (The highlighting should help experienced IPS fidelity reviewers to use the new scale.) The IPS-Ed consists of 9 education items. Seven education items correspond to employment items. For these items, the employment item has an “A” suffix and the corresponding education item has a “B” or “C” suffix. For example, Item 16A: *Individualized job search* has the corresponding items, Item 16B: *Community-based career exploration* and 16C: *Individualized education searches*. The final item on the IPS-Ed is Item 26: *Contact with family*. Item 26 differs from the other items on the IPS-Ed component in that the rating is based on family contact without regard to an employment or education goal.

Fidelity Review Process:

When the young adult services are embedded within a larger IPS program serving all age ranges, the review may involve a single reviewer for the young adult services in the program. We recommend that this review be conducted in conjunction with a regularly scheduled fidelity review for the IPS program. Young adult fidelity reviewers will organize the agenda for the fidelity review as they usually do, except that they will choose to shadow the IPS specialist dedicated to young adults, interview young adults, and otherwise maximize interviews, chart reviews, and observations of meetings, and job development to focus on young adults on the IPS caseload., in addition to devoting extra time to supported education (approximately 4 more hours than an IPS-25 review). Reviewers should plan for two full days for a fidelity review, compared to an IPS-25 review, unless three reviewers are available, with one reviewer assigned to assess the education component only.

Scoring

Some IPS teams are restricted to young adults, in which case we recommend using this scale rather than the IPS-25. When the young adult group is a subgroup within a larger IPS team, the IPS-Y will require a separate report. The two components (IPS-EMP and IPS-Ed) are scored separately. The benchmarks for the IPS-EMP are nearly the same as for the IPS-25 (Good fidelity = 100 or higher.) Good fidelity on the IPS-Ed is a score of 40 or higher.

Recommended citation: Bond, G. R., Becker, D. R., Swanson, S. J., & Ellison, M. L. (2020). IPS-Y (IPS Fidelity Scale for Young Adults). Worcester, MA: University of Massachusetts Medical School, Transitions to Adulthood Center for Research and Lebanon, NH: IPS Employment Center, Rockville Institute.

The contents of this fidelity scale were developed under a grant with funding from the National Institute on Disability, Independent Living, and Rehabilitation Research, and from the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration, United States Department of Health and Human Services (ACL Grant# 90RT5031, The Learning and Working Transitions RRTC). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this fidelity scale do not necessarily represent the policy of NIDILRR, ACL, HHS, or SAMHSA and you should not assume endorsement by the Federal Government.

Rater: _____ **Site:** _____ **Date:** _____
Young adult caseload (number of young adults enrolled in this IPS program) _____

Number of young adults on caseload with employment goals _____ (either wanting to work or currently working)

Number of young adults on caseload with education goals _____ (either wanting to attend an educational program or currently attending)

Note: Clients often have both employment and education goals.

Directions: Circle one anchor number for each criterion.

| Staffing | |
|--|--|
| <p>1. <u>Caseload size</u>: IPS specialists have individual caseloads comprised of young adults with employment and/or education goals. The maximum caseload for a full-time IPS specialist is 15. If mixed caseload (both young and older adults) with 10 or fewer young adults, then maximum caseload = 18. (Maximum caseload size prorated for part-time IPS specialists.)</p> | <p>IPS specialist caseload:</p> <p>1 = 31 or more (mixed caseload: 34 or more) 2 = 26-30 (mixed caseload: 29-33) 3 = 21-25 (mixed caseload: 24-28) 4 = 16-20 (mixed caseload: 19-22) 5 = 15 or fewer (or 18 or fewer if mixed caseload)</p> |
| <p>2. <u>Exclusive focus on employment</u>: IPS specialists provide only employment services. (Help with education goals considered employment services.)</p> | <p>IPS specialists provide employment services:</p> <p>1 = less than 60% of the time 2 = 60-74% of the time 3 = 75-89% of the time 4 = 90-95% of the time 5 = 96% or more of the time</p> |
| <p>3A. <u>IPS generalists (for employment)</u>: Each IPS specialist carries out all components of employment services for all young adults on their caseload with employment goals, including (1) intake, (2) engagement, (3) assessment (career profile), (4) job search, (5) job support and workplace accommodation, and (6) follow-along supports.</p> | <p>IPS specialists...</p> <p>1 = Refer all young adults to other programs for vocational services 2 = Refer some young adults to other vocational programs or roles split up on team 3 = Complete 4 components 4 = Complete 5 components (e.g., one staff provides all intake or one staff does job development only) 5 = Complete all 6 components</p> |

Organization

4. Integration of IPS with mental health treatment thru team assignment: IPS specialists are part of up to 2 mental health treatment teams from which at least 90% of IPS specialist’s caseload is comprised.

Note: For Items 4 and 5, a *mental health treatment team* refers to a team of professionals that meets regularly to plan and ensure provision of services for a group of clients. It does not refer to a client-specific treatment team that might include several professionals and a family member and sometimes also the client.

- 1 = IPS specialists operate separately from mental health treatment.
- 2 = IPS specialists are attached to two mental health treatment teams, from which less than 50% of the IPS specialist’s caseload is comprised.
- 3 = IPS specialists are attached to one or two mental health treatment teams, from which 50% - 74% of the IPS specialist’s caseload is comprised.
- 4 = IPS specialists are attached to one or two mental health treatment teams, from which 75% - 89% of the IPS specialist’s caseload is comprised.
- 5 = IPS specialists are attached to one or two mental health treatment teams, from which 90% - 100% of the IPS specialist’s caseload is comprised.

5. Integration of IPS with mental health treatment thru frequent IPS team member contact: IPS specialists actively participate in mental health treatment meetings with direct service staff (not replaced by administrative meetings) that discuss individual young adults and their employment/education goals. The IPS specialist and mental health practitioners discuss situations together and brainstorm possible solutions. IPS’s office is in close proximity to (or shared with) mental health treatment providers. Documentation of mental health treatment and IPS services are integrated in a single chart.

Number of components present: 1 2 3 4 5

- Each full-time IPS specialist attends treatment team meetings weekly
- The IPS specialist and mental health practitioners discuss situations together and brainstorm possible solutions
- IPS services documentation (i.e. assessments, plans, progress notes) is integrated into young adult’s mental health treatment record
- IPS specialists’ offices are in close proximity to (or shared with) mental health treatment providers
- IPS specialists help mental health staff think about employment and career-related education for people who haven’t yet been referred to IPS services

| | |
|---|--|
| <p>6. <u>Collaboration between IPS specialists and vocational rehabilitation counselors</u>: The IPS specialists and VR counselors have frequent contact for the purpose of discussing shared young adults and identifying potential referrals.</p> | <p>IPS specialists and VR counselors discuss shared young adults and referrals: 1 = less than quarterly <u>OR</u> IPS and VR counselors do not communicate 2 = at least quarterly client-related contacts 3 = at least monthly client-related contacts (in person, by phone, or email) 4 = scheduled, face-to-face client-related meetings at least quarterly <u>OR</u> have contact weekly 5 = scheduled, face-to-face client-related meetings at least monthly and have contact weekly</p> |
| <p>7. <u>IPS unit</u>: The IPS unit has these features:</p> <ul style="list-style-type: none"> • At least 2 full-time IPS specialists • A supervisor with expertise in IPS • Weekly in-person unit meetings • Client-based group supervision • Team members share strategies for working with young adults, families, employers, clinicians, and others, and share job leads and information about educational programs • IPS specialists provide coverage for each other's caseload when needed. <p><i>Note: Videoconferencing is OK as an alternative to face-to-face when the distances involved make face-to-face impractical (e.g., in rural areas). Some IPS specialists in the IPS unit may serve youth, while others serve other populations of people.</i></p> | <p>1 = IPS specialists are not part of a unit 2 = IPS specialists have the same supervisor but do not meet as a group and two other features missing 3 = Unit has a supervisor with IPS expertise but two of other features missing 4 = Unit has a supervisor with IPS expertise but one of other features missing 5 = All components present</p> |

| | |
|--|---|
| <p>8. <u>Role of IPS supervisor:</u> IPS unit is led by an IPS team leader (supervisor). The supervisor uses outcomes-based supervision to help develop IPS skills in IPS specialists.</p> | <p style="text-align: center;">Criteria met:</p> <p>1=two or fewer 2=three roles 3=four roles 4=five roles 5=all six roles</p> <ul style="list-style-type: none"> • One full-time equivalent supervisor is responsible for no more than 7 IPS specialists. Full-time means that IPS supervisor does not have responsibilities outside the IPS team. On teams with fewer than 7 IPS specialists, the supervisor may spend a percentage of a time on other supervisory activities on a prorated basis. For example, a half-time (20 hours/week) supervisor is appropriate for a team with 4 full-time IPS specialists. If team serves both young and older adults, then standard for maximum supervised is 8 IPS specialists. • IPS supervisor has met and interacted with 80% or more of young adults on IPS caseload (e.g., by joining IPS specialists in intake interviews or other appointments with young people). • IPS supervisor conducts weekly supervision designed to review client situations and identify strategies and ideas to help young adults in work and education. • IPS supervisor communicates with mental health service supervisors quarterly to ensure that services are integrated, to problem solve programmatic issues (such as referral process or transfer of follow-along to mental health workers) and to be a champion for the value of work and career advancement through education/training. • IPS supervisor accompanies IPS specialists, who are new or having difficulty with IPS skills, in the field monthly to improve skills by observing, modeling, and giving feedback on skills, including meeting employers for job development. • IPS supervisor reviews current employment and education outcomes with IPS specialists and sets team and individual IPS specialist goals to improve performance at least quarterly. |
|--|---|

| | |
|---|---|
| <p>9. <u>Zero exclusion criteria</u>: No young adults interested in employment and/or education are excluded from services based on readiness factors, substance abuse, symptoms, history of violent behavior, homelessness, lack of work history, cognition impairments, treatment non-adherence, and personal presentation. Once young adults are enrolled in IPS, IPS specialists offer to help them with another job or educational program when one has ended, regardless of the reason for the ending. If VR or another external agency has screening criteria, the IPS team does not use them to exclude anybody. Young adults are not excluded from IPS because they lack medical insurance (e.g., Medicaid). Young adults are not screened out formally or informally and self-referrals encouraged. Possible evidence for a self-referral policy includes: Postings in public areas of the building, or other materials that young adults receive, include instructions about how to request IPS services without a professional referral.</p> | <p>1 = IPS staff, case managers, or other practitioners routinely exclude young adults due to lack of readiness (e.g., substance abuse, history of violence, symptomatic). 2 = Two or more instances of exclusion found in interviews and/or charts indicate an informal policy of excluding referrals based on readiness (or closing young adults if they lose a job), even though the IPS team has no formal policy. 3 = Although IPS team does not exclude any referrals because of lack of readiness, an external gatekeeper (such as treatment team or local VR office) screens out young adults for that reason and the IPS team accepts the decision to exclude. 4 = Young adults are not excluded from IPS services for a lack of readiness, but the IPS team falls short on one important feature, such as restricting referrals from just one or two sources or not helping young adults find another job or educational program when one has ended. 5 = Young adults are not excluded from IPS services for a lack of readiness. Mental health practitioners encourage young adults to consider employment and education, and the IPS team accepts referrals from multiple sources. Young adults can self-refer and enroll in IPS without any professional referral. IPS specialists offer to help young adults with another job or educational program when one has ended, regardless of the reason that the job ended or number of jobs held.</p> |
| <p>10A. <u>Agency focus on employment</u>: The agency promotes competitive work throughout the entire organization using multiple strategies. (The “agency” refers to parent agency administering the IPS program or to the primary referring agency. If the IPS team is affiliated with a mental health or psychiatric rehabilitation agency, then that agency is usually the primary referring agency. If the IPS team is collaborating with a coordinated specialty care</p> | <p>Number of components present: 1 = Two or fewer 2 = Three 3 = Four 4 = Five 5 = Six</p> <ul style="list-style-type: none"> • Agency intake includes questions about interest in employment. • Agency includes questions about interest in education on all annual (or semi-annual) assessments or treatment plan reviews. • Agency displays written postings (e.g., brochures, bulletin boards, posters) about work, education, career training, and IPS services, in lobby and other waiting areas. Publicizing IPS through web sites and social media (such as Facebook) are other options. To count, publicity must be present in two locations or in two modalities. |

| | |
|--|---|
| <p>program for first episode of psychosis, then that team is assumed to be primary referring agency.)</p> | <ul style="list-style-type: none"> • Agency supports ways for young adults to share work stories with young adults and staff (e.g., agency-wide events, in-service trainings, peer support groups, agency newsletter articles, invited speakers at treatment groups) at least twice a year. • Tracks employment outcomes for total IPS team and includes separate statistics for young adults enrolled in IPS. • Compiles statistics into a summary report at least annually and shares with stakeholders (e.g., mental health clinicians, agency leadership, young adults, steering committee). |
| <p>11. <u>Executive team support for IPS services:</u> Agency executive team members assist with IPS implementation and sustainability. <i>The agency leadership understands and supports the mission of IPS to address employment, including career advancement through education and vocational technical training.</i></p> <p>All five components of executive team support are present.</p> | <p style="text-align: center;">Number of components present: 1 2 3 4 5</p> <ul style="list-style-type: none"> • Chief Executive Director (CEO) and Clinical Director demonstrate a general understanding of the principles of IPS and support its mission. • Agency quality assurance process includes an explicit review of the IPS team(s), or components of the team(s), at least every 6 months through the use of the IPS fidelity scale or until achieving good fidelity, and at least yearly thereafter. • At least one senior agency leader actively participates at IPS leadership team meetings (steering committee meetings) that occur at least every six months for good fidelity teams and at least quarterly for teams that have not yet achieved good fidelity. The steering committee consists of a diverse group of stakeholders charged with reviewing fidelity, program implementation, and the service delivery system. The committee develops written action plans aimed at developing or sustaining good fidelity services. • The agency CEO/Executive Director communicates how IPS services support the mission of the agency and articulates clear and specific goals for IPS to all agency staff at least annually (e.g., IPS kickoff, all-agency meetings, agency newsletter). CEO does not delegate role to another administrator. • IPS supervisor shares information about barriers and facilitators with the executive team (including the CEO) at least twice each year. The executive team helps the supervisor identify and implement solutions to barriers. |

Services

| | |
|---|--|
| <p>12. Benefits counseling/work incentives planning: The IPS team ensures young adults and their families have timely access to comprehensive, individualized, benefits counseling at key transitions before starting a new job and assistance accessing and when making decisions about changes in work hours and pay. Benefits counseling includes SSA benefits, medical benefits, medication subsidies, housing subsidies, food stamps, spouse and dependent children benefits, and any other source of income. The IPS team ensures young adults and their families receive information about ABLE savings accounts, student earned income exclusion, and information and assistance about reporting earnings to SSA, housing programs, VA programs. IPS specialists do not directly help young adults apply for disability benefits (may redirect to case manager or other staff).</p> | <p>1 = Benefits counseling is not readily available or easily accessible to most young adults served by the agency. 2 = IPS specialist gives young adults contact information about where to access information about benefits counseling. 3 = The IPS team meets two of the criteria below. 4 = The IPS team meets three of the criteria below, but falls short on at least one. 5 = The IPS team meets all four criteria below.</p> <ul style="list-style-type: none"> • IPS team has procedures for ensuring timely access to individualized benefits counseling at transition points and documents access by including benefit planning session summaries in client records and/or documenting benefit planning attendance in progress notes. • The benefits counseling is comprehensive, encompassing all the relevant benefits and entitlement programs. • This benefits counseling is provided by a professional with expert knowledge and the skill to apply to it to specific cases. • The IPS specialists do not directly help young adults apply for disability benefits (may redirect to case manager or other staff). |
| <p>13A. Disclosure (Employment): IPS specialists help young adults make informed decisions regarding what is revealed to employers and coworkers about having a disability or other personal information. Score no higher than “3” if client charts do not include <u>completed</u> disclosure forms and no other systematic documentation of disclosure discussions in progress notes or other written documents.</p> | <p style="text-align: center;">Number of components present: 1 2 3 4 5</p> <p><u>IPS specialists:</u></p> <ul style="list-style-type: none"> • Do not require that young adults disclose their psychiatric disability at the workplace in order to receive IPS services. • Offer to discuss with clients the possible costs and benefits of disclosure at the work site in advance of any decision to disclose at the work site, asking about the young person's hopes and concerns about disclosing personal information to workplace managers in advance of any actual workplace disclosure, including a |

| | |
|---|--|
| | <p>discussion of how the decision to disclose influences access to accommodations and the IPS specialist’s potential role in communicating with employers.</p> <ul style="list-style-type: none"> • Offer examples of what could be said, when, and to whom (i.e., employers and coworkers). • Discuss disclosure on multiple occasions as needed (e.g., if a client has not found employment after repeated attempts, or reports difficulties on the job). • Document disclosure discussions in client charts (may use disclosure forms). |
| <p>14A. Experience-based vocational assessment: IPS specialist and young adult start developing a career profile immediately after IPS enrollment. Entries in profile guided by actual work experiences and/or visits to workplaces to learn about different jobs, not vocational tests. Volunteer positions and short-term job tryouts are rarely used. They update profile with information from career exploration activities and new competitive job experiences. The career profile form includes information about preferences, experiences, skills, current adjustment, strengths, and personal contacts.</p> | <p style="text-align: center;">Number of components present: 1 = None 2 = One 3 = Two 4 = Three 5 = Four</p> <ul style="list-style-type: none"> • Starts developing a career profile immediately after IPS enrollment, systematically reviewing interests, experiences, and strengths, and analyzing prior job loss (or job problems) and job successes, using multiple sources (e.g., young adult, family treatment team, clinical records, and previous employers). • Updates career profile with career exploration experiences and each new job experience, incorporating environmental assessments and consideration of reasonable accommodations. • Avoids use of office-based assessments, standardized tests, and intelligence tests. • Avoids prevocational work experiences (e.g., work units in a day program), volunteer jobs, non-competitive internships, or set aside jobs (e.g., agency-run businesses, sheltered workshop jobs, affirmative businesses, enclaves). Also avoids short-term work experiences even when VR counselors recommend those services. |
| <p>15. Rapid job search/exposure to the world of work: First face-to-face employer contact (which can be an informational interview) by the young adult or the IPS specialist about a competitive job occurs within 30 days after program entry OR declaration of employment goal if no employment goal at program entry. If young adult has little or no work experience and unsure of job preferences, initial contacts may be tours of potential job sites. Early contacts also could be informational interviews.</p> | <p>Based on the median value (the middle number in the rank-ordered sample), the first face-to-face contact with an employer by the young adult or the IPS specialist is: <i>Note:</i> Do not include clients without employment goals in this calculation.</p> <p>1 = Over 9 months after program entry/declaration of program goal. 2 = between 151 and 270 days after program entry/declaration of program goal. 3 = between 61 and 150 days after program entry/declaration of program goal. 4 = between 31 and 60 days after program entry/declaration of program goal. 5 = within 30 days after IPS program entry OR after declaration of employment goal if no employment goal at program entry.</p> |

| | |
|---|---|
| <p>16A. <u>Individualized job search</u>: For young adults with employment goals, IPS specialists make employer contacts aimed at making a good job match.</p> | <p>Number of components present: 1 2 3 4 5</p> <p>For young adults with employment goals, IPS specialists...</p> <ul style="list-style-type: none"> • Develop an individualized job search plan and update with information from the career profile and new job/educational experiences. • Make employer contacts aimed at making a good job match based on young adults' preferences and needs (including experience, ability, symptomatology, health) • Extend searches beyond jobs that are readily available. • Accept young adults' decisions to change direction (i.e., revise goals) and work with them on revised plans, even if this means switching from employment to education as next step. (Full credit for this if has not come up.) • When clients rapidly find and leave jobs independently, IPS specialists continue to job search (even when clients are employed) for positions related to preferences and lessons learned from job experiences. |
| <p>17. <u>Job development: Frequent contact with employers (hiring managers)</u>: Each IPS specialist makes at least 6 face-to-face contacts per week with employers (hiring managers) on behalf of young adults looking for work. Employer contacts documented on a tracking form reviewed weekly by the IPS supervisor.</p> | <p>1 = Contacts made via phone, the internet, or other non-face-to-face method</p> <p>2 = 1-3 face-to-face contacts OR averages more than three contacts but does not have a process for tracking although does do some job development.</p> <p>3 = 4 face-to-face contacts with hiring managers documented on a tracking form that IPS supervisor reviews with IPS specialist.</p> <p>4 = 5 face-to-face contacts with hiring managers documented on a tracking form that IPS supervisor reviews with IPS specialist.</p> <p>5 = 6 or more face-to-face contacts with hiring managers documented on a tracking form that IPS supervisor reviews with IPS specialist.</p> |

| | |
|---|---|
| <p>18. <u>Job development: Quality of employer contact:</u> IPS specialists build relationships with employers through multiple face-to-face contacts with hiring managers that are planned to learn the needs of the employer, convey what the IPS team offers to the employer, describe young adult's strengths that are a good match for the employer. (Rate for each IPS specialist, then calculate average and use the closest scale point.)</p> | <p>The primary method of job development is best described by which level:</p> <p>1 = meets employer when helping young adult to turn in job applications, OR IPS specialist rarely makes employer contacts. 2 = contacts employers to ask about job openings and then shares these leads with young adults. 3 = follows up with advertised job openings by introducing self, describing IPS services, and asking hiring manager to interview young adult. 4 = builds relationships with employers through multiple face-to-face contacts with hiring managers that are planned to learn the needs of the employer, describe client strengths that are a good match for the employer. 5 = builds relationships with employers through multiple face-to-face contacts with hiring managers that are planned to learn the needs of the employer, convey what the IPS team offers, describe client strengths that are a good match for the employer, and returns to maintain relationship even when employers are not hiring.</p> |
| <p>19A. <u>Diversity of job types:</u> IPS specialists assist young adults in obtaining different types of jobs.</p> <p><i>Note:</i> For scoring purposes, count first two instances of a specific job type as diverse, but rate sites down for duplicate job types for any job type with three or more that are repeated.</p> | <p>IPS specialists assist young adults obtain different types of jobs:</p> <p>1 = less than 50% of the time. 2 = 50%-59% of the time. 3 = 60%-69% of the time. 4 = 70%-84% of the time. 5 = 85%-100% of the time.</p> |
| <p>20. <u>Diversity of employers:</u> IPS specialists help young adults identify a range of possible employers and avoid steering all clients to the same employers.</p> <p><i>Note:</i> For scoring purposes, count first two instances of a business as diverse, but rate sites down each instance a business is repeated more than twice.</p> | <p>IPS specialists assist young adults obtain jobs with different employers:</p> <p>1 = less than 50% of the time. 2 = 50%-59% of the time. 3 = 60%-69% of the time. 4 = 70%-84% of the time. 5 = 85%-100% of the time.</p> |

| | |
|--|---|
| <p>21A. <u>Competitive jobs</u>: IPS specialists help young adults obtain competitive jobs. Competitive jobs pay at least minimum wage, are jobs that anyone can apply for, do not have time limits imposed by the IPS program, and are not set aside for people with disabilities. Seasonal jobs, work as independent contractors (“gigs”), and jobs from temporary agencies that other community members use are counted as options for competitive jobs. Internships that anyone can apply for (that is, not set aside for people with disabilities) and pay at least minimum wage are also classified as competitive jobs.</p> | <p>The jobs that IPS specialists help young adults obtain are competitive jobs:</p> <p>1 = less than 64% of the time 2 = 65-74% of the time 3 = 75-84% of the time 4 = 85-94% of the time 5 = 95% or more of the time</p> |
| <p>22A. <u>Individualized follow-along supports (employment)</u>: As documented in client progress notes and interviews, IPS specialists:</p> <ul style="list-style-type: none"> • Offer in-person supports to at least 90% of all clients who are working. • Provide outreach on at least a monthly basis to working people who decline supports. • Offer different types of supports that correspond to client preferences, work history, needs, etc. • Develop support plans (in collaboration with each client) that include natural supports (such as family members, co-workers, supervisor, friends). • Offer additional supports when working people experience problems on the job. • Provide employer support (e.g., educational information, job accommodations) at client’s request. | <p>Number of areas addressed: 1=two or fewer 2=three areas 3=four areas 4=five areas, including support plan 5=all six areas</p> |

| | |
|--|--|
| <p>23. Intensity and timing of follow-along supports (employment): IPS specialists provide amount of follow-along supports, including face-to-face contact, commensurate to the level of need and as desired by the young adult.</p> | <p style="text-align: center;">IPS specialists provide the following services: 1 = Less than four 2 = Four 3 = Five 4 = Six 5 = All seven</p> <ul style="list-style-type: none"> • Offer extra supports during the week before and the week after a young adult starts a new job. • Increase support when workers experience difficulties or in new situations. • Contact young adult immediately after learning of a job loss (e.g., texting and following-up in person within 3 days). • Provide most supports in person. • Provide supports at convenient times and locations for the worker. • Once a young adult has begun working steadily, make at least monthly contact for 12 months or more, depending on young adult needs and preferences. • If a young adult suggests that no more help is needed soon after starting a job, the IPS specialist suggests “checking in” in 3-4 months to see how things are going. |
| <p>24. Community-based services: IPS specialists provide employment and educational services such as engagement, job finding, school selection, meetings in educational settings, and follow-along supports outside IPS/agency offices in natural settings.</p> | <p>Average percentage of scheduled work hours for IPS specialists in the community is:</p> <ul style="list-style-type: none"> 1 = Less than 30% 2 = 30%-39% 3 = 40%-49% 4 = 50%-64% 5 = 65% or more |
| <p>25. Assertive engagement and outreach: Termination from IPS team is not based on missed appointments or fixed time limits. IPS specialists document outreach attempts, including home visits, phone, texting, and contacts to support network (e.g., family if young adult gives permission). Engagement issues discussed promptly in IPS team meetings. Engagement and outreach attempts made by integrated team members. Multiple home/community visits. Connect with family, when applicable. Outreach stopped once client makes clear he/she no longer wants IPS services.</p> | <p>The IPS team documents the use of the following strategies:</p> <ol style="list-style-type: none"> (1) Service termination is not based on missed appointments or fixed time limits. (2) At least monthly documentation of outreach attempts. (3) Discuss engagement issues during IPS team meetings. (4) Engagement and outreach attempts made by integrated team members. (5) Multiple home/community visits. (6) Coordinated visits by IPS specialist with integrated team member. (7) Connect with family, when applicable. <p>Number of strategies used:</p> <p>1 = Three or fewer 2 = Four 3 = Five 4 = Six 5 = all seven strategies</p> |

**IPS-Ed Fidelity Scale for Young Adults
Education Component of IPS Fidelity Scale**

Rater: _____ **Site:** _____ **Date:** _____
Directions: Circle one anchor number for each criterion.
Note: Do not rate if fewer than 3 young adults on IPS caseload have education goals (IPS rated as **not providing supported education.**)

| Staffing | |
|--|---|
| <p>3B. <u>IPS generalists (for education):</u> Each IPS specialist carries out all components of educational services for all young adults on their caseload with education goals, including (1) intake, (2) engagement, (3) assessment (career profile and career exploration), (4) school selection and application, (5) enrollment support, (6) liaison with academic staff, and (7) ongoing educational support. These interventions are explicitly documented in the progress notes for each young person receiving these services, or in a form designed to document these activities.</p> | <p>IPS specialists...</p> <p>1 = Refer all young adults to other programs for education services 2 = Refer some young adults to other education programs OR education components (intake, education, etc.) split up among different practitioners OR these activities are not explicitly documented in progress notes 3 = Complete 5 components 4 = Complete 6 components 5 = Completes all 7 components</p> <p>Note: If IPS team has a separate position for education specialist, then rate that specialist for number of components completed.</p> |
| Organization | |
| <p>10B. <u>Agency focus on education:</u> The primary referring agency for the IPS team promotes mainstream education throughout the entire organization using multiple strategies. If the IPS team is affiliated with a mental health or psychiatric rehabilitation agency, then that agency is usually the primary referring agency. If the IPS team is collaborating with a coordinated specialty care program for first episode of psychosis, then that team assumed to be primary referring agency.</p> | <p align="center">Number of components present: 1 = <i>None</i> 2 = <i>One</i> 3 = <i>Two</i> 4 = <i>Three</i> 5 = <i>Four</i></p> <ul style="list-style-type: none"> • Agency intake includes questions about interest in education. • Agency includes questions about interest in education on all annual (or semi-annual) assessments or treatment plan reviews. • Agency displays written postings (e.g., brochures, bulletin boards, posters) about work, education, career training in lobby and other waiting areas. • Agency supports ways for young adults to share education stories with young adults and staff (e.g., agency-wide events, in-service trainings, peer support groups, agency newsletter articles, invited speakers) at least twice a year. |

| Services | |
|--|--|
| <p>13B. <u>Disclosure (Education)</u>: IPS specialists help young adults make informed decisions regarding what they reveal about their mental health condition, disability, or any other personal information to faculty, students, and staff at educational programs, including staff at college disability services.</p> | <p style="text-align: center;">Number of components present: 1 2 3 4 5</p> <ul style="list-style-type: none"> • do not require that young adults disclose their psychiatric disability in the educational setting in order to receive IPS services • offer to discuss the pros and cons of disclosure in the educational setting in advance of any actual disclosure, including how the decision to disclose influences access to accommodations and the IPS specialist’s potential role in communicating with educational staff and faculty • discuss specific information to be disclosed (e.g., receiving mental health treatment, presence of a psychiatric disability, difficulty with anxiety, or out of school for a period of time) and offers examples of what could be said, and to whom. • discuss disclosure on multiple occasions as needed (e.g., if a young adult has difficulties with exams and needs accommodations or needs tutoring) • document disclosure discussions in client charts (may use disclosure forms) |
| <p>14B. <u>Experience-based educational assessment</u>: For young adults with education goals, IPS specialists assess (1) educational interests, (2) talents, skills, environmental supports, resources (3) preferences, (4) academic history, (5) future academic aspirations, (6) barriers to education, and (7) accommodations/support needs. The domains are documented in the career profile, which is updated periodically, incorporating new educational experiences.</p> | <p style="text-align: center;">Number of domains assessed and documented in career profile</p> <p style="text-align: center;">1 = Three or fewer 2 = Four 3 = Five 4 = Six 5 = Seven domains assessed, documented, and updated</p> |

| | |
|---|--|
| <p>16B. <u>Community-based career exploration</u>: IPS specialists help young adults <i>on an individualized basis</i> learn about different careers related to their interests. (<i>Group events, such as inviting a speaker to the agency, do not count here.</i>) Strategies include meeting at a workplace with a manager and/or employee to learn about career options (informational interviews), making contact with family member or someone else who has worked in a specific profession or career to learn about requirements and experiences, going to job fairs, meeting with academic advisors or counselors to learn about training/education programs, visiting college events and open houses. Informal short-term job shadowing (one day or less) is considered career exploration. <i>Formal</i> work trials – both paid and unpaid – do not count as career exploration. IPS specialists document activities in progress notes.</p> | <p>1 = No evidence of career exploration. 2 = IPS team relies on group events – such as inviting outside speakers to speak to entire caseload, mass informational interviews, taking a large group to visit a campus. 3 = IPS team can give at least three examples of career exploration they have facilitated in last 6 months (but less than 10% helped). 4 = 10%-24% of young adults have received help in career exploration in last 6 months. 5 = At least 25% of young adults have received help in career exploration in last 6 months, as documented in the charts.</p> |
| <p>16C. <u>Individualized education searches</u>: For young adults with education goals, IPS specialists help them select school/training programs related to their interests and academic aptitudes.</p> | <p style="text-align: center;">Number of components present: 1 2 3 4 5</p> <ul style="list-style-type: none"> • Help them select school/training programs related to their interests and academic aptitudes. • Develop an individualized education search plan and update with information from the career profile and new job/educational experiences. • Offer assistance in the selection process by researching with the young adult the legitimacy and credentials of the educational/training program, to determine if the educational program gives good value for the time and cost involved (avoiding high-cost for-profit programs that do not prepare students for careers). |

| | |
|--|--|
| | <ul style="list-style-type: none"> • Accept young adults’ decisions to change direction (i.e., revise goals) and work with them on revised plans, even if this means switching from education to employment as next step. (Full credit for this if has never come up.) • Document interventions in progress notes (at least majority of clients). |
| <p>21B. <u>Mainstream educational or training programs:</u> IPS specialists help young adults enroll and complete educational programs that are open to the entire community and are not limited to people with disabilities or people with severe mental illness. Internships and apprenticeships that carry academic credit or that are requirements for completion of an academic program qualify as mainstream (without regard to whether they are unpaid or pay less than minimum wage). Recognizing that a high school graduation is paramount for increasing career potential, IPS specialists also support attendance at alternative schools and other options that school authorities and families initiate and that aim at this goal. Mainstream education or training can include online courses and programs when they are fully accredited.</p> | <p>The educational and training programs into which IPS specialists help young adults enroll are mainstream educational programs:</p> <p>1 = less than 64% of the time 2 = 65%-74% of the time 3= 75%-84% of the time 4 = 85%-94% of the time 5 = 95% or more of the time</p> |
| <p>22B. <u>Help with financial aid (for post-secondary education and training programs).</u> In collaboration with financial offices in academic institutions IPS specialists offer to help young adults with finances during and after enrollment, providing help as needed.</p> <p>Note: Full credit on a component (e.g., managing loans) if no help needed and IPS specialists explain their role in helping with finances.</p> | <p style="text-align: center;">Number of areas addressed: 1 2 3 4 5</p> <p>The IPS specialist coordinates with the financial office for academic institutions when appropriate, ensuring the following steps are completed:</p> <ol style="list-style-type: none"> (1) completing before each year’s deadline for federal applications for financial aid (FAFSA) including gathering relevant financial information (e.g. bank records and income tax returns). (2) identifying sources of financial aid/assistance (e.g., scholarships, Pell grants, ABLE savings accounts, access to VR funding). (3) asking about and, if relevant, resolving past educational loan defaults. (4) managing current loans and understanding obligations. (5) helping students obtain tools and equipment (i.e., computers, steel-toe boots) for educational/training programs. |

| | |
|---|--|
| <p>22C. <u>Individualized educational supports after enrollment</u>: IPS specialists help link young adults to mainstream educational programs, or (when needed) offer direct assistance in the following areas, <i>documenting in progress notes, checklist or other record</i>. Examples of education supports may include: (1) tour of educational institution, (2) introduction to campus resources and personnel, including making contact with instructors early in the program, (3) locating tutoring services if needed, (4) academic accommodations and making contact with campus office of disabilities, (5) time management, (6) meeting with instructors, (7) dropping class or withdrawing from program, (8) locating any relevant self-help groups, (9) (for high school students) participation in Individualized Education Programs, 504 plans, and transition plans (including meetings with school personnel).</p> | <p>1 = Most clients do not receive supports after starting a training or education program.</p> <p>2 = About half of the students receive a narrow range of supports provided primarily by the IPS specialist.</p> <p>3 = Most students receive a narrow range of supports (no more than two different types) that are provided primarily by the IPS specialist.</p> <p>4 = Students receive different types of support that are based on the school/training program, client preferences, academic history, needs, etc. Reviewers observe/hear about examples of at least three different types of education supports provided in the past six months.</p> <p>5 = Students receive different types of support that are based on the education/training program, client preferences, academic history, needs, etc. Reviewers observe/hear about examples of at least five different types of education supports provided in the past six months.</p> |
| <p>26. <u>IPS team has contact with family</u>: With young adult's permission, IPS team has in-person contact with a family member (may be a parent or relative but could be anyone the young adult sees as family). Families might be involved in initial enrollment, benefits counseling, career and school planning, and financial planning. No minimum number of contacts required.</p> | <p>1 = No family involvement.</p> <p>2 = At least one family involved, but no contact for more than 75% of young adults.</p> <p>3 = 25%-49% of families have in-person contact with IPS team.</p> <p>4 = 50%-69% of families have in-person contact with IPS team.</p> <p>5 = 70% of families have in-person contact with IPS team.</p> |

Scoresheet for IPS-EMP Fidelity Scale

| Item # | Item Descriptor | Score |
|--------|---|-------|
| 1. | Caseload size | |
| 2. | Exclusive focus on employment | |
| 3A. | IPS generalists | |
| 4. | Integration (team assignment) | |
| 5. | Integration (frequent IPS contact) | |
| 6. | Collaboration with VR | |
| 7. | IPS unit | |
| 8. | Role of IPS supervisor | |
| 9. | Zero exclusion | |
| 10A. | Agency focus on employment | |
| 11. | Executive team support for IPS | |
| 12. | Benefits counseling | |
| 13A. | Disclosure (Employment) | |
| 14A. | Experience-based vocational assessment | |
| 15. | Rapid job search | |
| 16A. | Individualized job search | |
| 17. | Job development: Frequent contact | |
| 18. | Job development: Quality | |
| 19A. | Diversity of job types | |
| 20. | Diversity of employers | |
| 21A. | Competitive jobs | |
| 22A. | Individualized follow-along | |
| 23. | Intensity and timing of follow-along | |
| 24. | Community-based services | |
| 25. | Assertive engagement and outreach | |
| | Total Score | |
| | Mean Item Score (Total Score/25) | |

Benchmarks

Exemplary Fidelity: 115 -125
(mean item score \geq 4.6)

Good Fidelity: 100 - 114
(mean item score \geq 4.0)

Fair Fidelity: 75 - 99
(mean item score \geq 3.0)

Below Fidelity: < 75
(mean item score < 3.0)

Scoresheet for IPS-Ed Fidelity Scale

| Item # | Item Descriptor | Score |
|--------|--|-------|
| 3B. | IPS generalists (for education goals) | |
| 10B. | Agency focus on education | |
| 13B. | Disclosure (Education) | |
| 14B. | Experience-based educational assessment | |
| 16B. | Community-based career exploration | |
| 16C. | Individualized education searches | |
| 21B. | Mainstream educational or training programs | |
| 22B. | Help with financial aid | |
| 22C. | Individualized educational supports after enrollment | |
| 26. | Contact with family | |
| | Total | |
| | Mean Item Score (Total Score/10) | |

| |
|--|
| <p>Benchmarks</p> <p>Exemplary Fidelity: 46 - 50 (mean item score > 4.5)</p> <p>Good Fidelity: 40 - 45 (mean item score ≥ 4.0)</p> <p>Fair Fidelity: 30 - 39 (mean item score ≥ 3.0)</p> <p>Below Fidelity: < 30 (mean item score < 3.0)</p> |
|--|