

# Indiana Vocational Rehabilitation

*Quarterly Employment Provider Capacity Survey*

June 2022



**PUBLIC**  
CONSULTING GROUP

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## INTRODUCTION

BRS understands that Employment Service Providers have faced considerable barriers and challenges to maintaining qualified staff. To provide appropriate resources, BRS wishes to better understand gaps and needs of these providers. On behalf of the Indiana Bureau of Rehabilitation Services (BRS), Public Consulting Group facilitates Quarterly Employment Provider Capacity Survey. Each quarter, there will be a 2-week window for submissions. PCG will collect and analyze data over time to provide additional information and greater context to the needs of providers. This report represents the third installment.

The following results will be used to better understand the capacity needs of providers across the State. Ultimately, this information can be used to make decisions on how to support providers and how to optimize supports for program participants. The aggregated information will be available to providers on a regular basis to share information and trends and can be used by providers to inform strategic planning and capacity building.

## SURVEY METHOD

PCG collaborated with BRS to develop survey questions to better understand employment service providers' capacity over time. PCG used Qualtrics, an accessible survey platform, to distribute the survey online from May 24, 2022, through June 7, 2022. PCG provided a survey link via email to its listserv. Other partners, including BRS and INARF also distributed this survey. PCG asked the survey to be completed by a representative of each location of an Employment Services Program. The survey provided the opportunity for respondents to share the survey with their colleagues as well. This method, called snowball sampling, increases the likelihood of responses from individuals in the field. One limitation of this sampling method is that it is not possible to calculate a response rate. Fifty-five (55) organizations submitted seventy-three (73) total entries for different locations. The same number of organizations submitted responses in the last release of the survey, but organizations submitted ten additional responses. This may indicate that organizations with multiple locations added responses to reflect different locations. In the first release of this survey, forty-six (46) organizations submitted fifty-two (52) total entries.

The survey did not require answers to individual questions and the number of responses varies by question. Subsequently, each table lists the total number of responses to that question. These results are described and analyzed in the following text. Following analysis, PCG provides recommendations to for BRS consideration.

## RESULTS AND ANALYSIS

Results and analysis from the survey are organized in the following sections: service area, staffing, employment services, and open responses. Analysis is provided by question for each question asked in the survey. Based on this analysis, recommendations are provided for BRS' consideration.

### SERVICE AREA

Respondents identified where their organization provides employment services. Respondents identified locations by county and could select all that apply. Overall, results indicate that the respondents represent employment providers across the entire state with distribution across all of VR's 5 regions. It should be noted that several respondents indicated their organization serves numerous counties across different VR regions. While respondents represent providers delivering services across the state, the data is limited by those who responded.

### STAFFING

The next series of questions asked respondents about staffing needs. The results are summarized by question below.

### 1. How many positions are on your employment services team?

Seventy-six (62) individuals responded to this question. In this cycle, the greatest number of respondents (32) indicated they had 1-3 positions on their respective teams. Compared to the last two cycles, this is a greater percentage of respondents. Overall, trends remained consistent.

TABLE 1 EMPLOYMENT TEAM SIZE

Number of Positions	June		March	
	%	Count	%	Count
1-3	42.11%	32	37.10%	23
4-7	35.53%	27	38.71%	24
8-12	10.53%	8	12.90%	8
13-20	9.21%	7	6.45%	4
21+	2.63%	2	4.84%	3
<b>Total</b>	100%	76	100.00%	62

### 2. Please identify the greatest number of unfilled positions you have had at a given time over the last 3 months.

Seventy-six (76) individuals responded to the question. Almost half of respondents (47%) indicated that they had 1-2 unfilled positions on their teams. The second largest group (33%) indicated they had no unfilled positions. Table 2 demonstrates that over time, reporting trends continue to be consistent. This trend may indicate that the labor pool has not improved over the last six months.

TABLE 2 GREATEST NUMBER OF UNFILLED POSITIONS OVER TIME

Number of Unfilled Positions	June		March		December	
	%	Count	%	Count	%	Count
+5	5%	4	5%	3	8%	4
3-4	14%	11	16%	10	14%	7
1-2	47%	36	49%	31	46%	23
None	33%	25	27%	17	30%	15
Other (please tell us)	0.00%	0	3%	2	2%	1
<b>Total</b>	100%	76	100.00%	63	100%	50

## EMPLOYMENT SERVICES

The next questions ask about the length of time from referral to first billable employment service, not including intake.

### 3. On average, how long does it take from receipt of referral from VR for program participants to receive their first billable employment service? (does not include intake)

Seventy-five (75) individuals responded to the question. In this cycle, over half (52%) of respondents reported that the average time period from receipt of referral to first billable employment service was up to two weeks, with the second largest group (32%) reporting the average length of time taking two to four weeks. The three (3) respondents indicated 'Other' reported it taking up to one week. Therefore over half (56%) of all referrals receive services less than 14 days. Compared to the last survey cycle, responses

followed similar trends. Overall, a slight trend toward less time may reflect the additional responses or greater efficiency in scheduling or services.

**TABLE 3 LENGTH OF TIME TO SERVICES**

Length of Time to Services	June		March	
	%	Count	%	Count
Up to 2	52%	39	44%	28
2-4	32%	24	32%	20
5-9	9%	7	13%	8
10-12	1%	1	5%	3
13 or more	1%	1	2%	1
Other	4%	3	5%	3
<b>Total</b>	<b>100%</b>	<b>75</b>	<b>100.00%</b>	<b>63</b>

**4. In the last three months, what is the longest it has taken to go from the date of referral to first employment service for all program participants?**

Seventy-one (71) individuals responded to this question. The greatest number of respondents (38%) indicated that 2-4 weeks was the longest it has taken from date of referral to first employment service. This represents a 20% increase in this category, and corresponding reductions for increased time periods. Similar to the last survey cycle, one third of respondents (33.33%) indicated the longest it has taken to go from the date of referral to first employment service for all program participants was 'Up to 2 weeks'. Although the average time periods remain stable, it is notable that respondents reported that the greatest length of time has decreased. In March, 20% of respondents indicated that the longest time it took for service was more than 2.5 months to begin whereas in June that had lowered to 8% of respondents indicating it the longest time period was more than 2.5 months.

**TABLE 4 LONGEST TIME PERIOD TO SERVICE**

Longest Time Period to Service	June		March	
	%	Count	%	Count
Up to 2 weeks	34%	24	33%	20
2-4 weeks	38%	27	18%	11
5-9 weeks	14%	10	18%	11
10-12 weeks	7%	5	15%	9
13 or more weeks	1%	1	10%	6
Other (tell us more)	6%	4	5%	3
<b>Total</b>	<b>100%</b>	<b>71</b>	<b>100%</b>	<b>60</b>

**5. What delays services getting started? Please rank the below from the greatest impact in delays to the least.**

Seventy-one (71) individuals ranked their perceptions of the greatest impact in delays from greatest to least, with 1 being the greatest delay. Table 5 summarizes responses by ranking for each delay. Most respondents (54%) identified not being able to reach the participant as the greatest delay. The second largest group (30%) felt that not having enough staff had the greatest impact. Common responses to 'other' include VRC not sending needed paperwork, the length of time to getting an authorization, and rescheduling appointments.

**TABLE 5 DELAYS IN SERVICES**

Delay	Ranking					
	1	2	3	4	5	6
<b>We do not have enough staff</b>	30%	11%	13%	18%	21%	7%
<b>Cannot reach the participant</b>	54%	25%	17%	4%	0%	0%
<b>Barrier to transportation</b>	3%	35%	30%	24%	8%	0%
<b>Documentation/paperwork</b>	3%	10%	18%	34%	30%	6%
<b>High caseload</b>	7%	15%	18%	18%	38%	3%
<b>Other (tell us more)</b>	4%	3%	4%	1%	3%	85%



Compared to prior results, responses followed similar trends. In all three survey cycles, respondents reported 'cannot reach the participant' as the most frequent cause of delay in services. Similarly, not having enough staff was the second most frequently reported cause of delays. One difference is in the frequency of respondents reporting high caseloads as a greatest cause of delay. In December, 26% of respondents reported a high caseload as the second greatest cause of delay in services. In March survey results, over half of respondents ranked this challenge as the fourth or fifth greatest cause of delay. This trend continues in the last cycle.

**6. On average, what is the caseload size for one employment specialist or job coach (1 FTE)?**

Seventy-two (72) individuals responded to the question. One third of respondents (33%) indicated case load sizes of 16-20 at their organizations. The second largest number of respondents (28%) indicated case load sizes of 11-15 at their organizations. When compared to the March survey cycle, there was a slight shift from 16-20 to 11-15. However, with more responses in all categories, it is unclear if changes in numbers reflect a greater number of responses with a comparable trend. Again, it is notable that more than 30% of respondents reported caseloads of 21 and higher. While not the majority, the impact of average caseload size has a considerable impact for both the individuals receiving services as well as the employment specialists carrying the caseloads.

TABLE 6 AVERAGE CASELOAD SIZE

Average Caseload Size	June		March	
	%	Count	%	Count
0-10	8%	6	8%	5
11-15	28%	20	20%	12
16-20	33%	24	44%	26
21-25	17%	12	15%	9
Greater than 25	14%	10	12%	7
<b>Total</b>	100%	72	100%	59

**7. We are interested in learning more about successful recruitment and retention practices. Does your organization engage in any of following activities? Please select all that apply.**

Respondents were asked to select all activities they engage in regarding successful recruitment and retention practices. The practice that had the most responses (23%) was 'Flexible scheduling', which is the same as the last cycle. Similar to the last cycle, raising wages (21%), employee recognition (18%), and enhanced/revised training opportunities (119%) were close behind scheduling as best practices. It is notable that respondents indicated a mix of practices that include, but are not limited to, enhanced compensation.

TABLE 7 SUCCESSFUL RECRUITMENT AND RETENTION PRACTICES

Successful Recruitment and Retention Practices	June		March	
	%	Count	%	Count
We have raised wages	21%	52	19%	37
Bonuses	13%	32	13%	24
Increased benefits (PTO, healthcare, retirement, etc.)	4%	10	6%	12
Flexible scheduling	23%	57	25%	47
Employee recognition	19%	47	18%	35
Enhanced/revised training opportunities	19%	46	17%	32
Other (tell us more)	1%	3	12%	3
<b>Total</b>	100%	247	100.00%	190

**8. On April 1, 2022, VR rates for employment services increased. How has your organization planned on using these funds? Please select all that apply.**

As indicated in this question, VR raised rates on April 1<sup>st</sup>. Respondents indicated how their organizations would use the additional funds by selecting any that applied. Approximately one third (34%) of respondents indicated that they would provide an increase in ongoing compensation to employment staff. Twenty-seven percent of respondents (27%) indicated that funds will meet costs of the program not previously covered.

**TABLE 8 STRATEGIES FOR USING FUNDS**

Strategies	%	Count
Increase ongoing compensation of employment staff through wages, bonuses, stipends, or other financial mechanisms.	34%	47
One-time financial incentives	2%	3
Increased benefits of employment staff (PTO, healthcare, retirement, etc.)	2%	3
Hire additional employment staff	12%	17
Increase or enhance training	19%	26
Meet costs of the program that were previously not covered.	27%	37
Other (please specify)	3%	4
Total	100%	137

**TABLE 9 OTHER RESPONSES**

Other Responses
increased mileage reimbursement
We start at \$17 now, gave everyone \$2/hr raise across the board
Unfortunately, none of the above that I am aware of
We covered raises given last summer



## OPEN RESPONSES

The survey prompted respondents to answer an open-ended question to enhance the insight and information collected through this needs assessment. Responses to these questions have been reviewed and analyzed.

### ***9. Is there anything else you would like to share regarding the capacity of your organization?***

Nineteen individuals responded to this question. The following themes emerged:

1. Caseload sizes are challenging for two primary reasons:
    - 1) providers are expanding caseload size due to staff shortages, or 2) the lack of referrals the providers cannot cover staff time.
  2. Staff shortages prohibit providers to fully meet the needs of participants and referrals.
- “Our caseloads are reaching a threshold that will begin to overwhelm the Employment specialists.”***

### ***10. What other information would you like us to gather from providers that could help with planning and capacity building?***

Fourteen individuals responded to this question. Of these responses, five individuals said they did not have requests for other information. Two primary themes emerged from the responses:

- Recruitment and retention strategies
- Data on the structure, costs, and revenue (like referrals) of employment service providers across the State.

Implications for these requests can be found below in the recommendations section.

## RECOMMENDATIONS

PCG provides the following recommendations based on results and analysis of survey data.

1. **Explore refined data collection:** PCG gathered and analyzed data to identify trends, successful practices, and needs across the State. It is recommended that PCG and VR assess data collection processes to refine questions and results, and drive decision making.
2. **Use results to inform training and technical assistance:** Some survey respondents identified areas where support is needed, in addition to emerging successful practices across the State. Based on the identified needs of respondents, PCG recommends using these results to inform training and technical assistance. In particular, PCG recommends leveraging evidence-based practices from the direct services field, as well as recommendations and strategies identified through this project, to develop training and materials supporting recruitment and retention of employment services staff.
3. **Explore opportunities to bolster resources:** Across Indiana, as well as across the US, labor shortages in the direct services field continue. In addition to continuing to support the staffing and retention of employment service providers, PCG recommends that VR explore opportunities to bolster resources available to providers. Examples may include streamlining administrative processes, leveraging technology, or supplementing the process with additional resources from partners such as Workforce Development.

## APPENDIX 1

Is there anything else you would like to share regarding the capacity of your organization?
Our caseloads are reaching a threshold that will begin to overwhelm the Employment specialists.
We are increasing staff to meet the needs of various clients
We were able to maintain our clients with 2 full time ES and 1 Coordinator. Coordinator completed most of the monthly reports as well as other reports to give ES more time in the field due to being short 3 staff.
We are finding delayed claim approval on CPS to be counterproductive to the increased rates as it seems even the most basic of billing claims gets questioned and needs further information delaying approval. We have lost staff because our delayed payment from VR prevented us from meeting payroll. No rate increase for BINs but increasing BIN training costs are hindering or ability to prioritize that service as well
The biggest concern has been getting enough referrals to keep an employment position busy enough to cover the costs of their salary/benefits.
This is a new area for our agency. Referrals increased quickly so we added another staff and will monitor to see if another staff is needed
none
We are an early adopter of the Individual Placement & Support program with DMHA & VR
No
no
Historically, Noble's Employment Services Program has been very successful in assisted hundreds of individuals with obtaining and maintaining community employment. The current staffing issues has had a direct impact on our placement outcomes. When short staffed, agencies tend to increase caseloads which can lead to turnover.
Not at this time.
We try to be responsive to VRs needs because of the lack of providers
The health insurance needs to be improved. Also, Dental and Vision ins needs to be added.
caseloads have room for expansion
Transportation services across counties.
Needing referrals in all counties
Recruiting has been difficult. We get applicants but they don't return calls, texts or emails. We rarely can set up an interview.
We have lots of clients but we are frustrated because we need staff to fully serve these clients to the best of our ability.

## APPENDIX 2

What other information would you like us to gather from providers that could help with planning and capacity building?
We used to receive reports where we could compare our referral # and performance to other providers. That would be helpful to have again.
Recruitment & retention practices
How rate increase funding is being utilized and if they too are having difficulty getting claims approved in a timely manner
none
NA
no
Nothing I can think of.
What is their "admin" for VR services? Most are extraordinarily high with high level staff salaries, yet not comparable pay for the job of ECs.
What are their positions within the department
Wage information to stay competitive and ideas for staff promotions/advancements
The IRS mileage rate is 58.5 cents per mile. Why is this not the VR reimbursement rate.
unknown
Places for apprenticeship program or mentor programs on the job trial work experiences in hospitality, factories, health care, animal care, child care.
What other agencies are doing to recruit Employment Specialists.