

Reporting Time Period: November 4, 2015 to June 15, 2016



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NYS PROMISE Program Fidelity Report, Summer 2016. Cornell University Yang Tan Institute on Employment and Disability, ILR School, Ithaca, NY, 2016.

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### Acknowledgements

The NYS PROMISE program is made possible by generous funding from the U.S. Department of Education (USDOE), the U.S. Social Security Administration (SSA), the U.S. Department of Health and Human Services (USDHHS), and the U.S. Department of Labor (USDOL). The NYS PROMISE staff would like to thank these agencies for their continued support, as we work together to improve outcomes for youth SSI recipients.

## **Executive Summary**

The NYS PROMISE Program Fidelity Report aims to synthesize and document program implementation and outcomes on improving transition to adulthood for youth and families enrolled in PROMISE. Leveraging multiple sources of data collection, this report reflects on project-wide learnings to enable further technical assistance and strategic planning for high quality program implementation. The NYS PROMISE initiative examines implementation fidelity across the domains of adherence, exposure, engagement, quality of delivery and program differentiation.

The following summarizes findings from the analysis of data and research activities taking place in the time period from **November 4, 2015** to the end of this reporting period, **June 15, 2016**. This report is the second in a series of semi-annual reports generated to assist with improving implementation quality and overall program impact for youth and families in the intervention group.

#### Youth and Parent Demographics

- Enrolled youth are predominantly (69%) male; average age of enrolled youth is 15.4 years. Higher proportion of youth in IG are younger and likely to be in 8<sup>th</sup> grade than those in CG.
- Nearly half of enrolled youth are African American (47%), over a third are Hispanic (37%), and 9% are white. Regional variations were observed; in particular New York City (NYC) has a higher proportion of racial/ethnic minorities than the other regions.
- 19% of enrolled youth have significant disabilities, based on their functional limitations, living situation and possibility of needed extra services.
- The most common Social Security Administration (SSA) disability classifications among enrolled youth are: developmental disabilities (41%), autistic disorders (18%) and childhood and adolescent disorders not elsewhere classified (18%).
- Most enrolled youth live with their birth parents (90%).
- Overall, 83% of enrolled youth have parents with English as their primary language, though there is more linguistic diversity in NYC.
- Among parents of enrolled youth 35% have disability, 25% are married, and about 40% were employed at the time of program intake. The vast majority of parents acting as the

- main PROMISE program contact person are birth mothers. More than two thirds of parents reported annual income of less than or equal to \$34,999.
- The majority of households report receiving government assistance beyond the enrolled youth's SSI benefits. More than 70% receive Medicaid; 35% receive Social Security Insurance (SSI); 10% receive Social Security Disability Insurance (SSDI); 7% receive Medicare.

#### Adherence - Case Management and Intake

The New York Employment Services System (NYESS) is used to track information on youth and families, as well as to make referrals for program services.

- Completeness of NYESS youth data varies across NYESS forms. Specifically, during the reporting period, Youth Tracking Form A (YTF-A) had been completed for the vast majority of enrolled youth (95%), Youth Tracking Form –B (YTF-B) for a lesser proportion (74%) and Youth Tracking Form- C (YTF-C) for even fewer participants (32%).
- Overall, 76% of IG and 63% of CG have had their initial case management meetings, these numbers are substantially up from winter 2015 report, where only 45% had their initial case management meeting.
- Higher proportions youth recruited later in the project had initial case management meetings within 30 days of their recruitment.
- On average, the longer a youth has been enrolled, the more complete their data in NYESS, with the most recently enrolled youth having on average less complete data.
- Overall, 70% of parent tabs were updated for the intervention group and 58% were updated for the control group. There was an overall 300% improvement in completion of parent tabs compared to data reported in winter. There are, however, substantial regional variations percentage of parent case management forms updated across the regions the Capital region (CAP) has the highest completion rate (91%), while the Western New York (WNY) and NYC regions have completion rates of 50% 70%%.
- While almost half of personnel in winter 2015 reported that they were confident in entering data into NYESS, confidence rose to over 75% during this reporting period.
   Specifically, personnel were more confident while approving completed services, closing services in the system, and approving or denying billing activities in current reporting period than the winter 2015. Further, many found NYESS to be helpful in supporting case management, service referrals and service coordination for youth.

#### **Exposure**

- A majority (60%) of youth in the intervention group had been referred for services. About one third of these services have been approved for payment, and the rest were either waiting for services or were receiving ongoing services.
- The most commonly referred services were Community-Based Workplace Assessment (CBWA; 59%), Benefits – Work Incentives and Asset Development (BWI; 17%) and Career Preparation and Planning Individual (CPP Ind; 15%). In terms of service

- completion, Job Development and Paid Work Experiences had highest proportion of service completion (33%) among those currently receiving services.
- To date, parent referrals for services have been low. This is likely an outgrowth of the current stage of the project, in that the focus so far has been on enrolling and initiating services with youth. As the program matures and youth and parents are increasingly engaged, we may observe higher levels of parent referrals.

#### **Program Engagement**

- Eight youth have left the study 6 in the control group and 2 in intervention group.
- A majority of enrolled youth (95%) receive special education services. A smaller proportion have a 504 plan, and about 35% participate in general education. About 21% of youth have attendance problems in school1. Comparing these results to those from the Winter report, we find lower rates of attendance problems and higher rates of participation in general education settings.
- Among the intervention group, 57% of youth attended their IEP meeting and 85% of parents attended. The majority of youth had measurable postsecondary goals in their IEP (86%), and most of those goals were directed towards postsecondary work and education. Nearly half of youth were expected to receive Regents Diploma and 32% were expected to receive SACC diploma.
- Slightly higher proportion of IG youth received self-determination training, specifically in the areas of problem-solving skills, goal setting skills, self-regulation skills, and self-efficacy skills.
- Enrolled youth have a very low participation in SSA work incentives programs to date. This is expected, as most of these programs require participation in work and very few enrolled youth are currently engaged in work (which is not surprising given their age).
- Majority of parents of youth in IG expect that their youth will graduate from high school (70%) and two thirds expect their child to graduate secondary school with a regular diploma. Among those who expect their youth to graduate, nearly 45% expect that they will continue education after secondary school (irrespective of the group to which they belong).
- Nearly half of the parents in IG indicated that their youth "Definitely will" have a paid
  job compared to only 43% of parents in CG. However, only 16% 18% of these parents
  indicated their youth "definitely will" earn enough to support themselves without
  financial help from family or benefit programs.

<sup>&</sup>lt;sup>1</sup> For the purposes of this project, attendance is considered a problem when a student is absent more than 10% in a school calendar year. If you divide this by quarter, it is roughly five days per quarter that they are allowed to miss.

• While 50% of parents reported that they knew how to obtain services for their child in their community, 63% reported being comfortable advocating for services for their child.

#### Quality of Delivery

Service quality depends both on nature of the service and provider, as well as on the condition of the interface between providers and participants.

- Nearly all program partners (RDS, PC, and SP) have written policies for ensuring
  confidentiality and privacy of clients. A few service provider (SP) responses indicated
  they were unaware of policies for flexible scheduling of services and for using
  interpreter services when serving multi-lingual populations. These patterns were
  comparable to those reported in the Winter 2015 PF report.
- Qualitative interviews during site visits revealed emerging patterns of program
  implementation and highlighted challenges. Specifically, difficulty with scheduling
  families to attend case management led to some innovations such as prioritizing case
  management for IG and doing intake for CG over phone; restructuring team workload
  wherein one person at RDS/PC supports data entry and the rest focus on doing outreach
  to families in communities where they live.
- Many RDSs report improved collaboration with PCs and SPs. This is also evident through analysis of the formal collaborative network survey data. Further, the quality of information collected by RDS for supporting seamless case management services has also improved and student files were more complete than were reported in the winter 2015 report.
- Nearly 70% of parents expressed that they are provided clear information on services and their benefits, and most youth were provided necessary accommodations to participate in services.

# Recommendations for Technical Assistance and Quality Improvement in Implementation

Specific recommendations for training and TA in improving data quality and data entry are provided in the body of the report.

• There is a substantial improvement in data quality of NYESS, potentially related to intensive technical assistance efforts since the last PF report. However, data on some specific variables is still wanting. Several variable in YTF-B are derived from student IEP and in cases of community-based case management approaches, the field staff do not have seamless access to such information. It is likely that through focused TA on brokering better relationships with schools may help in gaining access to needed information. Periodic reporting that aggregates site's data quality on a quarterly basis will help in pointed reflections on not only site performance, but also on data quality. In addition to providing aggregate analysis of data in a given time period, individual-

- student and parent-level data outputs should also provide timely opportunities for coaching sites in workflow planning for case management and service coordination.
- There has been substantial improvement in confidence for using NYESS for tracking case management and service referrals for youth and parents. With the completion of recruitment phase, sites are continuing to reorganize their workflow as well as their team to focus intensively on case management and services. Specific technical assistance need to be provided to helping sites reorganize their approach.
- Additionally, it is evident that many sites have developed approaches in case
  management tailored to their contexts. While such individualization is expected of a
  multi-site demonstration programs, it is important to ensure standardization across the
  process of case management and service coordination that also helps in building
  capacities for working with vulnerable population. PROMISE TA team should be focusing
  on developing a guided approach to case management and service coordination with an
  emphasis on incorporating best practices, in alignment with NYS PROMISE model. This
  approach will require a deeper appreciation of family and youth context, and be
  responsive to emergent needs as youth work towards their postsecondary goals.
- While service provision has picked up in the Summer 2016 PF report compared to the Winter 2015, many sites continue to experience delays in services resulting from back logs at service providers. Region-wide strategies to clear back logs and reduce waiting lists should be implemented through innovations in referral process as well as planning for service delivery.
- Regional and RDS-level program operations need to be adjusted in response to the needs of implementing institutions and the diversity of case load of youth and parents.
   Specifically, attention to streamlining activities for achieving high program differentiations between IG and CG is necessary to observe program impacts.
- Tracking youth and parent outcomes in statewide administrative data bases will further help in understanding an in-depth picture of the counterfactual service environment.
- Transportation, scheduling and childcare were three top barriers reported by parents
  participating in referred services. While it is too early to assess the degree to which such
  supports will enable participation, TA efforts should explore ways to devise strategies
  for flexible scheduling for services and leveraging of existing supports to facilitate
  transportation supports and childcare for families.