

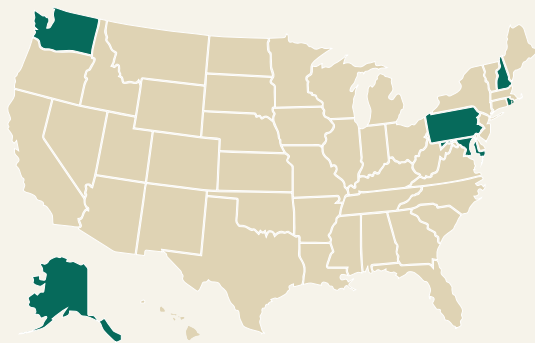
Strategy Spotlight

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Embedding employment services in an opioid treatment facility

Study background

This strategy spotlight is part of a study funded by the U.S. Department of Labor's Chief Evaluation Office, and conducted in collaboration with the Office of Policy Development and Research within the Employment and Training Administration (ETA). The study explores the implementation of the National Health Emergency (NHE) Dislocated Worker Demonstration Grants to Address the Opioid crisis, which six states received in 2018. These grants, funded by ETA's Office of Workforce Investment (OWI), encouraged states to test innovative approaches to address the economic and workforce-related impacts of the opioid epidemic.



More information about the evaluation of the NHE demonstration grants including a literature review and final report from the implementation study is available here: <https://www.dol.gov/agencies/oasp/evaluation/topic-areas/substance-use-disorder-work>

By developing partnerships with behavioral health providers, the workforce system can reduce barriers to accessing employment and training services for people in recovery by providing these services on-site at locations where potential participants already gather and are comfortable. This strategy spotlight highlights an innovative effort, funded through a National Health Emergency Dislocated Worker Demonstration Grant to Address the Opioid Crisis to the state of Pennsylvania, to provide employment services in opioid treatment clinics.

Implementation context

In Pennsylvania, subgrantee Philadelphia Works, Inc. partnered with [JEVS Human Services](#) to implement the National Health Emergency (NHE) demonstration grant. JEVS Human Services offers both employment and training services and behavioral health treatment and recovery services. JEVS operates one of the four Pennsylvania CareerLink® Philadelphia (American Job Center) sites located in Philadelphia, through which its staff provide services to job seekers (such as job search, placement, retention support, and other career services to individuals) as well as outreach to employers. At the same time, JEVS runs two outpatient, state-certified opioid treatment facilities in Philadelphia, known as Achievement through Counseling and Treatment (ACT) I and ACT II.¹

Key intervention components

Through the NHE demonstration grant, JEVS brought employment staff from CareerLink®, who had not previously worked with people with opioid

“Coming from CareerLink where I dressed in suits, people may think I’m coming to investigate them [if I dressed that way at the treatment clinic]. I had to dress more casually and start hanging out in the hallways with clients. We would go in the morning and start hanging out with security guards when the methadone clinic was busy to introduce ourselves to clients. Being down to earth and humble with participants has helped.”

—Interview respondent

use disorder, on site at the opioid treatment facilities to recruit participants and provide employment services. It also established a partnership with Jefferson University Hospital (one of the other subgrantees) to provide on-site employment services at Jefferson University’s outpatient methadone treatment program two days per week.

Through this program, a team of three JEVS employment staff (a program manager and two employment advisors) established on-site offices at the three treatment facilities to offer job search assistance, resume development, mock interviews, and other services specifically tailored to the recovery population. A program manager, who had previously worked at PA CareerLink®, noted that spending time on site at the treatment programs and developing trust with the staff and clients was very important. This respondent said they even changed the way they dressed to be less intimidating to the clients.

JEVS staff noted that providing employment services on site at a treatment clinic was very effective for this population, who would be intimidated to go to PA CareerLink® on their own. Meeting people where they already were for treatment made employment services more accessible to participants, as they did not have to take an extra step of going to an outside agency. One staff member

reported they adapted the services provided at PA CareerLink® for this population because they thought the assessments they usually used would be too cumbersome for this population and they would not remain engaged if there were too many steps in the enrollment process. To be more flexible with the enrollment process while still meeting the grant’s intake information requirements, staff had one-on-one meetings with potential participants to engage them in the program and discuss their skills and job interests, rather than having them fill out a formal assessment. Staff also talked to potential participants about the paperwork needed to register them under the grant, such as a Social Security card or birth certificate, and would refer them to the appropriate government agencies if they had to obtain these documents.

To advertise available employment services, JEVS employment services staff put up fliers around the treatment facilities and gave short presentations to introduce the program in group counseling sessions, which clients attend on a regular basis. The JEVS employment staff also explained the program to all the behavioral health counselors and other staff at the treatment facilities so they could refer clients they thought were ready for employment to the program. The three JEVS staff members said some people sought services after hearing about the program and counselors referred others; staff then met one on one with potential grant participants to judge whether they were ready for employment. Criteria staff used to judge potential participants’ readiness for employment included their stage of treatment and whether they had stable housing.

“To enroll individuals in the program, you can’t overwhelm them with too much paperwork. They won’t remain engaged. We talk to a client, get them engaged and get their resume done and may even send it out [to employers] at their first session.”

—Interview respondent

Potential elements for success

Interview respondents believed the following ways in which they tailored the employment services available to this population were important aspects of implementation:



Simplified assessment and enrollment, smaller caseloads, and longer follow-up. As noted above, employment staff simplified

the assessment and enrollment process. In addition, they also had small caseloads of 5 to 10 participants per week, which enabled them to check in with participants frequently (once a week or every two weeks) and spend more time with participants to support their needs. JEVS employment services staff also continued to provide support to participants for three months after they became employed, and even after three months participants could still reach out to JEVS staff if any issues arose in their jobs.



Use of incentives. The program also provided participants with a \$125 gift card incentive when they got a job and additional gift cards of \$50 after the first month of employment, \$75 after the second month, and \$100 after the third month.



Focus on preparing for the job search and conducting mock interviews with participants. Staff noted the particular importance of helping participants learn how to describe during a job interview any involvement in the criminal justice system. For example, as part of this preparation, participants learned that they could include on a resume the work assignments they performed in jail and use that experience to describe marketable skills.



Focus on participants' preferences. JEVS staff recognized and accommodated participants' preferences in regard to several factors: some participants preferred to ease into employment through a part-time job rather than seeking full time work; and many participants sought to access immediate employment, rather than participating in training programs. JEVS staff allowed participants this flexibility rather than prescribing a set of services they must participate in through the grant.



Outreach to employers. Staff reached out to employers about this program and worked with employers that indicated their willingness to hire people in recovery. Staff provided information to the employers about participants being on methadone and their need for work shifts that accommodated their treatment schedule (because many participants have to visit the methadone clinic daily in the morning to receive their medication.)²

Implementation challenges and strategies

Three JEVS staff reported providing employment services was a new concept for behavioral health counselors and other clinic staff. Initially, when the program started, these JEVS staff believed that the behavioral health treatment providers felt treatment for opioid use disorder should be clients' number one priority and were nervous that entering employment could take away from clients' focus on recovery. To build trust with the counselors and other behavioral health providers, JEVS employment and training staff had conversations to explain that they were not trying to interfere with people's recovery but believed employment could actually help people be more successful in their recovery by giving them hope for the future. Over time, by attending counselors' group sessions with clients and talking to them about the possibility of employment, the JEVS employment and training staff gained the counselors' trust. An additional challenge was that when the grant began, JEVS had anticipated that many participants would be interested in obtaining a GED and engaged a GED instructor to work with participants. Instead, JEVS staff reported that participants preferred to begin employment directly; JEVS therefore focused on placing clients in employment rather than promoting GED instruction and other training programs.

“Being there on a regular basis and building that connection with counselors was really important. We need to have counselors trust us with their clients ... now counselors have even come to me asking for help with their own resumes.”

—Interview respondent

Read more about JEVS' work on this project

<https://www.jevshumanservices.org/act/act-employment-services/>

<https://www.jevshumanservices.org/a-job-training-program-that-brings-hope-to-recovering-addicts/>

<https://www.jevshumanservices.org/a-is-for-achievement-new-services-at-act/>

<https://www.jevshumanservices.org/rewarding-work/>

Endnotes

¹ These outpatient treatment facilities provide methadone as well as group counseling, individual counseling, case management, and other services. For more information, please see <https://www.jevshumanservices.org/program/achievement-through-counseling-and-treatment/>

² We caution, however, that such an approach should be taken only for participants who give staff explicit permission to share their recovery and treatment status with prospective employers.

This Spotlight is part of a four-part series on innovative employment and training interventions to address the opioid crisis:

- Embedding employment services in an opioid treatment facility
- Adapting work readiness training for people in recovery
- Registered apprenticeships for community health workers and dually certified peer recovery specialist-community health workers
- Supporting employers using the Project Extension for Community Healthcare Outcomes (ECHO) model ▲



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