

**HUD EMPLOYMENT LECTURE SERIES
Lecture #3 Script**

**USING AN INTEGRATED SERVICES APPROACH TO ENGAGE CLIENTS IN
EMPLOYMENT, HOUSING, AND TREATMENT**

Instructive notes for the narrator:

This audio lecture has several sections. The title of each section is enclosed in a box. The appropriate title should be read first when recording each section.

Section 1	Introduction to HUD Employment Lecture Series, Lecture #3 “Using an Integrated Services Approach to Engage Clients in Employment, Housing, and Treatment”
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Colleagues:

This lecture is the third in a series of nine lectures that are being developed on employment-related topics. To download lectures from this series, please go to www.hudhre.info.

Today’s topic discusses Integrated Services Teams and how they can serve people who are homeless by addressing employment, housing, and treatment needs.

This lecture is intended for case managers working in community rehabilitation programs and homeless assistance programs. It will be particularly useful to staff who provide services to people who are chronically homeless and who have complex needs such as mental illnesses, substance abuse, limited education, and criminal history. The lecture, for example, might interest employment specialists in workforce, mental health, and homeless assistance systems; staff of transitional and permanent supportive housing; peer specialists; treatment staff at health and behavioral health organizations; and program managers.

There are seven sections in this lecture. The topics contained in the remaining six sections are as follows:

- Section 2: Establishing an Integrated Services Team
- Section 3: Implementing the Team Approach
- Section 4: Team Responsibilities
- Section 5: Assigning Primary Responsibilities to Team Members
- Section 6: Indicators of Service Integration
- Section 7: Conclusion: Putting It All Together

In addition to this audio lecture, there is a pamphlet that discusses at greater length, the integrated services approach, service models, and team principles and practices. It also provides program examples and citations for further reading.

Section 2 Establishing an Integrated Services Team

Let's start by describing what an integrated services team is. The team is made up of staff with responsibilities for employment, housing, and treatment, who work closely together to assist people who are homeless achieve success in all three areas.

- On the team, employment staff has primary responsibility for the development and execution of the integrated services plan. In the context of the integrated services approach, this plan focuses on a client's employment background and goals, but it also emphasizes his or her housing and treatment needs and preferences.
- As such, input from housing staff is critical. These team members might include housing specialists who help place people in housing, staff operating transitional housing, or even property management staff.
- Similarly, the team needs to include treatment staff who can assess the client's treatment needs. As discussed here, "treatment" is defined broadly to include mental health services, substance abuse treatment, health care, assistance with income supports or entitlements, basic life skills training, and education. These treatment services should be responsive to short- and long-term needs, adaptable when needs change, culturally sensitive, and, in some cases, available indefinitely.
- As your organization establishes integrated services teams, keep in mind that the team can be made up of employees of one agency or several, but cooperation is critical.

Establishing an integrated services team is done as part of an overall integrated services approach. This team can best be thought of as a "three-legged stool" whereby treatment, housing, and employment form a stable platform for employment success. All three areas are equally important, and when supports are absent from any of the three areas, the opportunity for success in the other areas is diminished. It's critical, therefore, that the team has the "whole person" at the center. As such, the team seeks to meet a variety of client needs, such as: a safe, affordable place to live, a network of friends, optimum health, and meaningful work or daytime activity.

To achieve these goals, each team member draws on his or her unique expertise, responsibilities, and resources to form an integrated services plan with the client. The team works together at each phase of services—in street outreach, transitional or permanent housing, and job services. For certain clients—such as those with serious mental illnesses, co-occurring substance abuse, and long-term unemployment—an integrated services team needs to maintain a long-term relationship throughout the individual's recovery. For other clients, less intensive or short-term services might be sufficient for them to achieve planned goals. Regardless of the length of time, practitioners who are in supportive relationships with their clients are at the heart of coordinating these services.

Section 3: Implementing the Team Approach

Now that we have discussed the purpose and composition of an integrated services team, let's identify some of the actions that the team should take to implement the integrated services approach. As with all endeavors, this requires upfront planning and investments of time and energy. But the outcome—that of a client improving the quality of his or her life—is invaluable.

The first actions are those of preparation and planning. Here are a few items to consider.

- First, identifying the mission is critical. Program managers and staff from the different service sectors need to develop together the philosophy that the integrated services teams will use to guide their efforts. The philosophy includes a belief that employment has a central role in improving a client's quality of life. It also includes a commitment to a long-term view of success and recognition that recovery is not linear, but a circuitous route that requires planning for setbacks.
- Second, developing team practices is another important planning step. For example, you need to consider what would be reasonable staffing ratios. While your organization will likely try to meet the high demands for services, you should consider a ratio that allows teams to be responsive to their clients. Along this same line, teams need to agree on how staff will make themselves available, such as by being accessible nights and/or weekends.
- Finally, as part of preparation and planning, program managers and staff should also anticipate and develop procedures for a range of activities. Team members should adhere to an agreed upon set of procedures for intake, assessment, and referrals, as well as what to do in an emergency situation. In addition, procedures for communication—what will be shared and how it will be shared—will go a long way to making sure that services are truly integrated and coordinated.

The pamphlet identifies additional aspects of the preparation and planning stage. Remember that these activities aren't done just once; they are continuous and need to be revisited and updated, even as the team works with clients.

To effectively work with clients, program managers and staff should address additional considerations about how the team will work together.

- Program managers and staff should be respectful of the significance each discipline plays in any service plan.
- Team members need to develop a working understanding of how their colleagues perform specific services.
- Each person needs to view all activities as team responsibilities that are performed by specific team members. This can also be thought of as the team acting as a single, coordinated unit with diverse strengths.
- In addition, there needs to be a team coordinator for each participant.

Studying existing team approaches can help you better understand how integrated services teams operate. The best known example is the Assertive Community Treatment, or ACT, team. The pamphlet provides information about specific ACT Teams, as well as other integrated service approaches.

Central to the integrated services approach is, of course, the integrated services plan. Developing the service plan must occur in partnership with your client, with the activities and tasks guided by his or her goals, priorities, and pace. The way in which this is done is discussed in the next section in the context of the team's roles.

Section 4: Team Responsibilities

We have arrived at the point where you are working with the client developing and implementing his or her integrated services plan. While each team member has service-specific

responsibilities and tasks, each person needs to share equal responsibility for some aspects of its services to the client. Here, we have identified four such aspects.

- One, protecting the client by adhering to confidentiality rules;
- Two, developing the service plan;
- Three, communicating with the other team members; and
- Four, being aware of the effect of employment on benefits.

Confidentiality is at the top of the list of team responsibilities.

All team members must maintain strict adherence to the rules of confidentiality that guide each discipline. In particular, everyone needs to abide by the rules of the Health Insurance Portability and Accountability Act (known as HIPAA), the Fair Housing Act, and the Fair Labor Standards Act. The rules in the different disciplines have different standards for sharing information, with HIPAA standards typically being the most restrictive.

This does not mean that every team member needs to be an expert in the rules governing all three disciplines. It does require each team member taking responsibility for knowing the rules in his or her service area and communicating them to others on the team. Likewise, each team member takes responsibility for being familiar with and adhering to the rules in the other disciplines.

Organizations using the integrated services approach typically rely on confidentiality and disclosure agreements signed by clients that are, preferably, reviewed and signed by the client annually. This lecture's pamphlet refers to a sample agreement available online.

As your team develops protocols regarding the sharing of information, keep in mind that sharing information with a team member may be determined by the person's position, or role. For instance, under most circumstances, treatment and employment specialists cannot share information about a client's treatment or services with property management. Even if a client has signed a confidentiality agreement, treatment or employment specialists should assess the need to share this information because it could influence the attitude of property management staff toward tenants.

On the other hand, sharing information with housing staff who have clearly defined support roles might not raise the same concerns. In supportive housing, housing specialists who help clients choose, obtain, and keep housing would also have access to clinical or other personal information. Likewise, in transitional housing, property management might have a dual role in supporting goals such as abstinence and would need access to clinical or other personal information.

Regardless of the housing staff's role, this team member needs enough information about the client's employment plan so the staff does not interfere with or undermine the plan. For example, imposing a curfew could hamper the client's ability to do his or her job. Remember, too, that this team member is crucial to successfully providing integrated services to the client and will be a source of important information about housing stability and its impact on treatment or employment.

Next, we'll discuss the development of the service plan.

The development of a truly integrated services plan is a shared responsibility of each team member. The integrated services approach focuses on employment as key to long-term housing stability and treatment recovery. Thus, employment services are at the heart of the plan. Housing and treatment services are equally important, however, because employment services

are only one leg of the “three-legged stool.” Each discipline is a “core” service essential to successfully assisting clients.

With this structure in mind, employment staff will take the lead overall. In terms of service planning, however, the staff member whose expertise is greatest in a particular discipline should assume a lead role for that area. By working collaboratively and communicating well, staff will better understand how each of their own disciplines affects the issues and outcomes of the work of their colleagues in other disciplines. Taking all of this together, the team will be more effective as they sit down with clients, discuss their needs and aspirations, and develop an integrated services plan.

Next, we’ll address the team’s collective responsibility to communicate.

Communication is important, both among team members and with the client. Within the team, communication needs to be clear, complete, and consistent; otherwise, the team undermines its ability to assist clients.

There are several ingredients of good team communication. Communication protocols should be well-defined and documented. First and foremost, there needs to be clear guidelines about what information is shared. Other protocols should address the creation and use of a “communication log,” where team members can share information and do so in a consistent way. And remember that there are other communication issues to address, such as situations when team members should make immediate phone calls to other team members.

Good communication also entails regular meetings; the most productive meetings will include the full team and a structured agenda, as well as feedback and discussion from all team members.

Finally, at the end of each day, team members should document their activities so that others are able to access updated information; this goes hand-in-hand with a timely and consistent recordkeeping system. The need to document daily activities is particularly useful for clients needing high-intensity services from a multi-disciplinary staff.

Last, but not least, is the team’s awareness of the effect of employment on benefits.

Persons who are homeless, or those who are formerly homeless, are nearly always eligible for and/or receiving services under other programs. Depending on the program, employment may affect a client’s eligibility or the level of assistance that he or she receives. For example, someone who is applying for benefits based on disability could be denied benefits because work is an indicator that the applicant is not disabled. There have, however, been significant changes in how benefits programs handle participant employment. Increasingly, benefits programs are including work incentives, such as those that allow participants to work and gradually reduce benefits as income rises.

Along with confidentiality, service planning, and communication, this issue regarding benefits is high on the list of team responsibilities. Each team member contributes his or her unique set of knowledge and experiences, but the team collectively shares the responsibility for successfully addressing these issues.

Section 5: Assigning Primary Responsibilities to Team Members

The integrated services team works as a unit and shares many responsibilities. But the team is made up of individuals who are experts in their fields. As such, each person will take the lead developing portions of the service plan and providing certain services for the client. In this section, we’ll look at the responsibility of staff members in each of the three primary areas—

employment, housing, and treatment. We'll also discuss the valuable role that formerly homeless people can play on the integrated services team.

First, let's look at the role of employment staff.

Within the team, employment staff takes a leadership role in the development of the overall employment services plan and facilitates coordination among the team members.

This person also takes the lead working with the client and providing employment-related services. If you are this person, you would engage your client in developing the employment services plan. To inform the plan, you would help your client to explore, identify, and prioritize individual interests, talents, skills, and experience. You would also help your client identify ways he or she can develop personal goals and seek relevant opportunities. Critical to your role, is your understanding of, what can be referred to as, the Workforce System. You should explore linkages to the Workforce System, including employment training agencies, One-Stop Career Centers, and the Department of Vocational Rehabilitation. With employment as the central focus of the integrated services plan, the issue of employment retention sometimes gets lost. You also should address issues related to retention and provide follow-up services to help clients retain their jobs.

One final aspect of the employment staff's role has to do with relationships with employers. This person will take the lead interacting with employers, whether it's to explore general opportunities for all clients, or to be a point of contact for potential employers during the job search, or to followup with employers after clients are placed in jobs.

The roles of the employment staff do not exclude other team members from providing services related to employment, but those team members need to keep the employment staff "in the loop" using the communication protocols that the team developed.

Let's now consider housing staff.

Housing staff might include housing specialists in scattered-site housing, property management personnel, and perhaps staff from the local city housing agency or Public Housing Agency.

Housing staff serves in a number of different roles. If you are this person, your support of the team's mission and employment service philosophy is critical to the team's success. You would be directly involved in the development of the integrated services plan. In particular, you would address the need for housing stability to enable employment or pre-vocational activities.

In addition to your role developing the plan, there are other ways you can support the pursuit, attainment, and retention of employment. For example, you are well-positioned to initiate discussion with your client about employment and to identify potential employment opportunities for your client.

Above all, the privacy of your client depends on you ensuring that confidentiality requirements for housing are adhered to by the team.

Let's also consider the crucial role that case management and clinical staff play in the overall effectiveness and success of the plan.

Rather than adopting a "come back when you're clean and sober" approach, integrated services teams offer flexible services to help clients access treatment services and, at the same time, maintain vocational functioning.

The team's treatment staff is well-positioned to aid a client's employment goals. If you are this person, you would discuss with your client his or her expressed employment goals, and you would gather other relevant information from your team's employment staff. Using this information, you would assess your client's treatment support needs and ensure that those

supports are established and maintained. Recognize that your client will face many challenges as he or she looks for employment and then performs that job. Your client will rely on you to plan for, coordinate, and implement interventions, should they be needed. It's critical that you lead the effort to encourage clients to stay in treatment.

Finally, because HIPPA has the most stringent requirements and rules of confidentiality, you will play the central role in ensuring that the rules are respected and followed among all team members.

Remember that formerly homeless people can also play a valued role as members in an integrated services team.

Research has demonstrated that clients who have accessed and benefited from services can be trained as peer specialists and effectively fulfill the functions of staff. Hiring peer specialists also sends important messages to employers. It tells them that we value people in recovery, we know what it takes, and we practice what we expect of others. The pamphlet contains references to projects that employ trained peers to augment integrated services.

Section 6: Indicators of Service Integration

So how does a team know when it is effectively integrated to address employment goals? In order to answer this question, let's look at some "Indicators of Success."

The team's primary concern is to assess whether or not they are successfully serving their clients. Clients should have an increasingly stable environment. In addition, they should be participating in more services and becoming more self-sufficient.

Yet, even if clients are receiving the services that they need, the team should also assess the process. If the way they work together is not functioning well, the potential for delivering inadequate services increases. Team members should be communicating clearly and efficiently, and the way that they interact should reflect mutual respect and trust. When the team is working well together, it will deliver services in a cohesive manner. Moreover, team members will refer to the work and perspectives of their colleagues.

In contrast, the team can also pinpoint ways in which it is not successfully integrating services. When these indicators are observed, the team needs to acknowledge the situation and take steps to get its efforts back on track. Many of these indicators have to do, again, with the way the team works together.

An integrated services team needs attention when team members are not communicating well. They might be disagreeing about the team's mission or how they should be delivering services. One or more team members might be engaging in poor or inappropriate communication with others. These members might be disregarding the communication protocols or not sharing information.

Similarly, individual team members may not be adhering to the integrated services plan. In this situation, the team member might be providing services without coordination with the rest of the team, or he or she might be providing alternate services altogether. All of this may also result in a client's decreased use of services.

As your team strives to achieve its mission, remember that everything will not function perfectly. You are likely to observe tension or a lack of communication. When you do, it is important to assess whether the situation is critical enough to warrant action. If there is concern that the team is not acting in an integrated manner, team members and program managers can take several steps. First and foremost, the team needs to engage in good communication again.

Team members should review the mission and the client plans. They should also identify his or her primary responsibilities to the team effort and to each other as partners working toward the same goal. In some situations, program managers should consider facilitated team-building exercises and activities. Additional suggestions are discussed in the pamphlet.

Effectively integrating services can take some time. Everyone needs to work hard and sustain their efforts. They need to support and encourage each other, and the team needs strong leadership. Most of all, perhaps, everyone needs to keep a positive attitude.

Section 7: Conclusion: Putting It All Together

In the pamphlet, there is a story about a man named Carlos. He has cyclical experiences with employment, alcohol abuse, financial setback, and homelessness. In assisting him, the team will work cohesively to develop an integrated services plan. The plan's central focus will be employment, but the housing and treatment disciplines will be equally important. As such, the plan will identify and address issues that affect his housing stability, his ability to keep a job, and his success in adhering to a treatment program. In his situation, and others like him, the issues include his personal experiences, behaviors, and attitudes, along with his assistance program and societal experiences. Each team member will work with Carlos in his or her respective discipline. As each team member does this, he or she will follow a well-defined plan of action that is part of the integrated services plan, and will communicate with other members of the team. The team will not, however, lose sight of its focus – the client. Throughout this whole process of planning, coordinating, implementing, delivering, and assessing services, the team will be listening to the client.

We hope the information contained in this lecture and pamphlet will assist you and your team members to strengthen the effectiveness of your team, and to achieve new heights with clients in the pursuit of employment goals. Good luck!