A Study Facilitated by CareerEdge Funders Collaborative

Career*Edge*

Summer 2018

How to Increase Support, Training and Connections to Employment

FOR PINELLAS COUNTY DIFFERENTLY-ABLED RESIDENTS

With Consultation and Authored by Meraki Strategic Group

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Study Objectives and Expectations

Given the expertise of CareerEdge Funders Collaborative (CE) as a nationally recognized workforce model, the organization received a grant in Spring of 2017 to gain proficiency to provide access and support to a unique population of differently-abled residents (i.e. *residents suffering from mental illness, or those recovering from substance abuse who can work and desire gainful employment*). Creating pathways for stable and sustainable employment is a focused aspect of the CE mission. The intention of this study's efforts is to better understand the population and workforce system and implement programmatic efforts that will increase the acquisition of sustainable employment for the target population- differently able Pinellas County residents.

a) Objective(s)

THROUGH NATIONAL RESEARCH, BEST PRACTICES, AND A STUDY OF THE LOCAL WORKFORCE SYSTEM, CONCLUSIVELY CREATE A PLAN OF ACTION THAT WILL:

➔ **Increase skills and access to supportive services** for differently-abled residents

➔ **Provide pathways to gainful, sustainable, and competitive employment** for differently able residents

➔ **Facilitate and improve alignment** of Pinellas County workforce system

b) Expectations

QUESTIONS ADDRESSED IN THE CONTEXT OF THE STUDY

➔ How can Pinellas County agencies better serve differently-abled residents?

➔ What can be learned from other program models, academic research on the population relating to workforce development, and a study of the population's tendencies?

➔ What are the gaps and challenges that need to be addressed to provide greater access to successful employment for this population?

➔ What support, programs, or partnerships exist that can be leveraged?

➔ What must be created to address misalignment?

➔ How is the current workforce ecosystem serving the community and our target population?

WHAT TO EXPECT FROM THE STUDY

➔ **Recommendations on how to elevate the workforce development landscape** in Pinellas County

➔ **Suggestions for how to advance efforts that will provide more efficient and effective workforce development services to the** community and target population

➔ **Discoveries of successful partnerships** in mental/ behavioral health and workforce development capacities

➔ **Identification of challenges** in the workforce community

➔ **Recommendations to bridge gaps that will better serve the** target population

➔ **Suggestions for new pathways** which, once instituted, will improve community-wide service

Illustrations and data included within the study provide authenticity of proven methods. Research, data, and the study of the local system were accomplished to support a plan of action that will provoke system changes and community-wide collaboration to improve service and support to both the community and the targeted population.

Section II

Why CareerEdge?

Why CareerEdge?

CE is a results-driven organization working to close skill gaps and spur economic development through active and engaged employer and community-based partnerships. CE is one of 30+ national sites of a national workforce model, *The National Fund for Workforce Solutions (NFWS)*. CE is also the only site within the State of Florida. Collectively, NFWS has raised over $30 million dollars. Funds distributed among their 30+ local sites have resulted in more than $300 million in matched or aligned funding from more than 700 local funders. Efforts of the NFWS are illustrated within its mission: "*Drive practices, policies, and investments that enable workers to succeed in good jobs, provide employers with a skilled workforce and build more prosperous communities.*" CE has adapted the NFWS employer-driven model and incorporated its mission in its work.

In 2013, CareerEdge was the recipient of the NFWS Exemplary Collaborative Award. Since then, CE has been a model for other national sites as a top-performing and results-oriented entity.

Summary of Impact   2010 THRU 2017

CAREEREDGE FUNDERS COLLABORATIVE	2017	2010 THRU 2017
Invested in Workforce Development by CareerEdge and partners	**$1.7 million**	**$9.8 million**
Workers Trained including interns funded by CareerEdge	**769**	**4,790**
Certifications Earned	**414**	**7,404**
Workers who Earned Raises within two years of trainings	**394**	**2,845**
Workers' Aggregate & Cumulative Annual Earnings Gain	**$3.7 million** Aggregate in 2017	**$24.4 million** Cumulative since 2010
Return-on-Investment (annual earnings gain for workers per dollar invested by CareerEdge)	**$11.37***	**$12.20****
Promotions Earned by Workers within two years of trainings	**195**	**820**
Employers Engaged	**93** New	**233** Total
New Jobs Created by Funded Employers	**130**	**1,369**

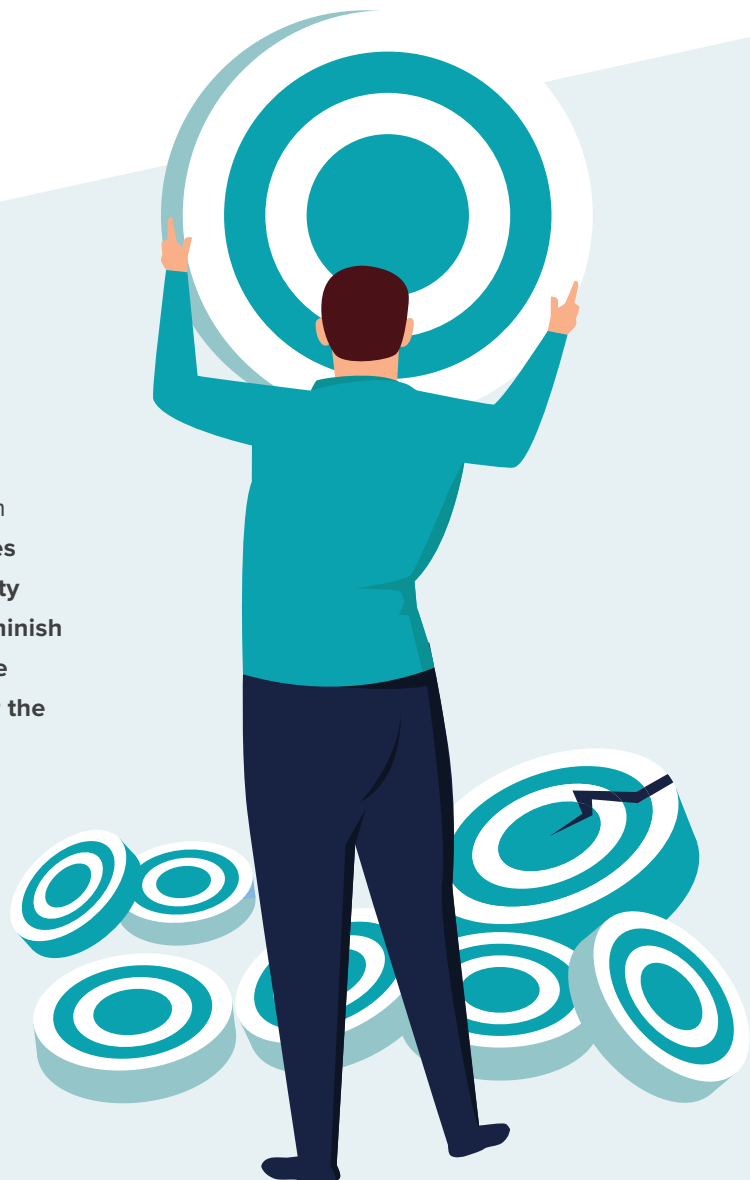*Aggregate earnings gains in 2017 for workers trained in 2016 and 2017.
**Aggregate cumulative earnings gains for all trainees since 2010 (counting one, two or three years of gains for each) with multiplier effect.

Each target within the CE "Targets for Impact" (see below) illustrates an alignment to the objective(s) this study sought to investigate. The versatile portfolio of experience and capabilities held within the CE/NFWS model positioned CE as an ideal partner to conduct this study and recommend strategies that would enhance the supportive services and workforce system leading to stable and sustainable employment of differently-abled Pinellas County residents.

TARGET(S) FOR IMPACT

- → Advocate for community prosperity for all
- → Advance frontline workers
- → Provide better outcomes to low-wage workers, job seekers, and young adults
- → Foster employer leaders
- → Increase scale of systems change
- → Support effective, sustainable regional collaboratives
- → Generate strong industry partnerships in new sectors

Through blended work among each target, CE supports a distinguished workforce system that promotes economic prosperity. **CE creates high-performing partnerships with community agencies, educators, and employers that diminish skill gaps and meet employment needs while simultaneously assisting individuals to enter the workforce or to help low-wage workers gain upward mobility.**

Section III

Research Methodology

Research Methodology

CE hired **Jennifer Evans, Principal Consultant of Meraki Strategic Group, LLC.,** to support the execution of work proposed in the initial grant, to investigate the local system and to conduct national research.

National and local research was conducted to authenticate best practices, challenges, and to gain a comprehensive understanding on how to serve and accelerate differently-abled populations to include residents who have been functionally and systemically disabled resulting from chronic substance abuse and/or mental health issues.

Findings range from local (Pinellas County) to national. Results of research include identification of fundamental steps to incorporate into a rehabilitation program. The intention of this work is to ensure that differently-abled residents integrate easily into employment successfully. Findings articulate what wraparound support is recommended to ensure sustainable success. Many national models were evaluated to learn what would most likely lead participants on a pathway of upward life and career mobility. The best practices and most successful approaches are detailed within the study. Information concluded from research is intended for a comprehensive understanding and is recommended to be used to institute a collaborative community-wide plan. The collaborative plan should be actionable in nature and serve as a blue-print foundation for programmatic efforts that will positively impact and mobilize the target population.

Community-resources and an inventory of organizations, programs, and other related supportive services were evaluated. Multiple meetings with community partners were convened to discuss how organization(s) could each play a significant role in serving and rehabilitating the target population. To get long-term, meaningful results, it's important to first recognize what exists, then create a call-to-action to address gaps.

IIn working to understand the current Pinellas County ecosystem of the mental and behavioral health system(s) and the workforce development community, both groups were explored to learn what was functioning in each that could support the purpose of this work. This exploration also avoided recommending new actions that would be duplicative in nature.

Section IV

Local Discoveries

Local Discoveries

a) Perspective of Mental/Behavioral Health Providers

The study concluded Pinellas County has a strong collaboration regarding connected efforts to understand, support, and provide necessary resources to residents who suffer from mental, behavioral, or substance abuse. Currently, there are two groups consolidating resources by sharing communication in an attempt to leverage efforts and pursue changes to status quo performance. Outcomes of these groups lead to enhanced and more efficient service for Pinellas County residents suffering from a variety of issues relating to mental and behavioral health stability. These groups are the *"The Empowerment Team"* and *"Pinellas County Behavioral Health System of Care."* Both groups facilitate monthly convenings with purposeful and focused agendas based around key objectives that foster community-wide connectivity. Activities of both groups focus on improving of service in both quality and efficiency for residents of Pinellas County experiencing challenges that relate to social health issues. These groups illustrate a comprehensive collaboration of efforts truly focused on the betterment of care for the end-user and the breakdown of walls of competitiveness in terms of service, funding, and community perception. As the context of both groups focus on the stabilization of health and life for high-need, high-risk residents, largely those with a need for in-depth rehabilitation due to mental illness, substance recovery, or homelessness, employment and stability of employment is included among their focused concentration.

Over a period of one-year, these groups were engaged to learn about efforts regarding training and connecting differently-abled Pinellas County residents to employment. Through participation, knowledge was gained on what support, if available, would best elevate current initiatives or bridge lacking resources and/or gaps in service. In addition to group meetings, one-on-one interviews were conducted onsite at various facilities to gain a better understanding as to the full scope of service offered. **A deeper insight to the infrastructure of each specific workforce-related support or initiative was observed. Interviews were not limited to mental and behavioral health organizations, but also extended to organizations that focus on workforce development.**

i. Survey

In partnership with James Winarski, M.S.W, of the University of South Florida College of Behavioral & Community Sciences Department of Mental Health Law & Policy, a survey was authored and conducted among the participating organizations of the Empowerment Team. Mr. Winarski helped ensure the positioning of questions would allow an accurate depiction of information the survey sought to collect. Surveyed organizations included those working directly with the target population. The result of the survey spoke to the alignment of support required to address the target population's needs. The intention of the survey was to understand our target population's most significant needs, identify the most consistent barriers they face in their pursuit, obtainment, and sustainment of employment- all from the perspective of agencies that primarily serve them.

All survey questions were multiple choice to categorize and evaluate responses.

MAJOR DISCOVERIES CONCLUDED FROM SURVEY FACILITATED AMONGST MENTAL/BEHAVIORAL HEALTH PROVIDERS

Primary Barriers Limiting the Ability to Participate in Training or to Obtain and Sustain Employment

- Chronic substance abuse (relapsing)
- Felony backgrounds
- Cognitive abilities
- Uncontrolled mental health symptoms
- Stigma and company perception
- Inability to complete job application and interview process
- Educational deficiencies
- High costs associated with participation in programs
- Transportation
- Gaps in employment history (due to illness)

Number of Days a Week Ideal for Work

Options included:
1-2 Days, 3- Days, 4-5 Days, Full-Time Work 40-Hours a Week

Most Common Response: **3-4 Days a Week**

Second Most Common Response: **4-5 Days a Week**

On Average, Number of Hours Worked Each Shift

Options included:
1-2 Hours, 3-4 Hours, 5-6 Hours, 7-8 Hours, 8+ Hours

Most Common Response: **3-4 Hours Daily**

Second Most Common Response: **5-6 Hours Daily**

Largest Issue Not Working in Current System

- Job Placement Retention
- Committed Employers
- Lack of Follow-Up

Type of Support Clients Need to Successfully Complete Training & Retain Employment

- Intensive Case Management
- A Coach/Mentor to Focus on Motivation & Engagement
- Controlled Mental Health Symptoms & Addiction
- Stable Housing & Transportation

What are typical forms of disabilities, disorders, special needs, or limitations do your clients face?

- Mental Illness (Generally Stated)
- Schizophrenia
- Schizoid-Active
- Depression
- Anxiety Disorder
- Obsessive Compulsive Disorder (OCD)
- Post-Traumatic Stress Disorder (PTSD)

Survey responses indicated a greater interest in the obtainment of employment rather than enrollment into training.

However, key skills and subjects indicated they felt would constitute beneficial training for the target population included:

- GED
- Financial Literacy
- Computer-Based Training
- Soft Skills
- Budget Planning

ii. Focus Group

In Spring 2018, a Focus Group of differently-abled Pinellas County residents, all in a different place in life with different skill-sets, and different stories, was hosted at The Vincent House. The Vincent House is a Pinellas County non-profit focused on helping clients with recovery through a variety of support programs and counseling. The Vincent House was strategically chosen as a location due its proximity to dense populations of residents with disabilities. The purpose of the focus group was to validate which recommendation(s) proposed within the study could overall enhance the quality of life for the differently-abled population.

Each participant of the group came with unique goals, however, all participants felt unfulfilled regarding employment. Participants expressed a lack of the right skills, an inability to access the right programs and/or the lack of funds to enroll in training. Although some felt a passion for a specific career to pursue, others felt they needed academic and career counseling to help align their interests and abilities to an appropriate career.

Taken following the Focus Group; Conducted at The Vincent House; Does Not Represent All Focus Group Participants, Some Chose Not to Be Photographed or Were Interviewed at Another Time

MAJOR DISCOVERIES CONCLUDED FROM FOCUS GROUP

Need help understanding different career pathways, certifications, training, or requirements to achieve employment, as well as enrollment, tutoring and support to encourage completion

Translates to:

- Need for career/job coaching
- Need for motivation to stay focused

Understanding their skill-sets and abilities and how that aligns to their passion

Translates to:

- Need for career/job coaching
- Providing skills assessments to determine strengths

Concerns with changes to disability payments due to increased earnings

Translates to:

- Public policy issue
- Support/liaison that is knowledgeable of guidelines

Lack of confidence, focus and sense of purpose

Translates to:

- Job coaching
- Case management
- Group sessions/activities
- Mentorship

Support with ongoing issues

Examples listed included:

- Medication being off
- May require sudden time off
- Behavioral issues
- If they must call in sick, access to support that will allow them to maintain employment
- Guidance on personal budgets
- Feelings and minds change often; Help to keep focus and motivation toward goal(s)

b) Perspective of Workforce Development Providers

A proven approach utilized by the National Fund for Workforce Solutions/CE model, is one where community-based partnerships are mobilized and engaged to institute regional goals for community-wide impact. In conducting the local evaluation of workforce agencies, programs and support available to help train and employ the target population, (3) approaches were taken to engage the workforce development providers:

One-on-one interviews with leadership of key workforce agencies were facilitated

+

Participation in various councils, committees, and other group meetings

+

On November 16, 2017, CE hosted the "Pinellas County Workforce Development Forum", where 30+ organizations attended to participate in a dynamic facilitated discussion

i. Pinellas County Workforce Development Forum

During the forum, current programs, and efforts toward mobilizing and employing hard-to-hire residents of Pinellas County were evaluated and compared to what initiatives were competitive, productive, duplicative, and what gaps need to be addressed. The intent of this evaluation was to gain a consensus among leadership that would equate to actionable change enhancing the quality of service to the community and to the target population.

The Forum sought to gain an understanding, directly from the source, of which organizations convened, what specific objectives those groups focused on and collect an inventory of initiatives. Initiatives and convenings were then measured by Forum participants by the greatest value in terms of: proactive dialogue, actionable agenda(s), and benchmark progress.

Key Outcomes from the "Pinellas County Workforce Forum" included below and were taken from the Real-Time Records. These are unaltered to maintain integrity of the response(s) collected. Exerts from the Forum/Records are marked by a (*).

*BRAINSTORMED ALLIANCES AND COUNCIL MEETINGS *(No Preference to Order)*

- Mid-County Council (JWB) - Youth Training
- CAPI City of St. Petersburg (Committee to advocate for persons with impairments)
- Pinellas Workforce Development Council
- Juvenile Welfare Board (JWB)
- Homeless Coalition (Service Provider Meeting)
- Grow Smarter (Chamber of Commerce)
- Junior Achievement
- St. Petersburg Economic Development Council
- Pinellas County Empowerment Team
- Homeless Empowerment Program – Pathways to Employment
- Suncoast Manufacturing Association
- Bay Area Manufacturing Association (BAMA)
- Florida Department of Transportation
- South Saint Petersburg Central Redevelopment Agency (CRA) Workforce Development Council and Collaborative

*PROPOSED NEEDS TO ADDRESS IN COLLABORATED MEETINGS

(No Preference to Order)

- Manufacturing needs north of Ulmerton that are unfulfilled; small manufacturers in Pinellas County
- Identify how to develop individuals with disabilities (based on) their capabilities
- Short-term training (can) lead to successful placement
- Transportation is significant challenge; getting potential workforce to the work place

*TOP (VOTED) ALLIANCES AND COUNCIL MEETINGS (IDENTIFIED) *(Ranked Order)*

1) St. Petersburg Workforce Development Team (PERC/South
   St. Petersburg CRA Workforce DevelopmentCouncil and Collaborative)

2) 2020 Plan Taskforce

3) CareerSource Pinellas

4) Urban League Workforce Development

5) Wrap-Around Services (YWCA)

A major goal of this forum was to learn how partnerships folded together, how efforts were leveraged, and what the community saw as proactive and productive meetings. Another goal was to involve organizational leadership and representatives in development of an action plan on how to address key challenges illustrated through the facilitated dialogue. First, facilitators divided the group into small teams and specific sets of recommendations were identified that would improve the way the workforce system collectively functioned. Then, the larger group reconvened, and the proposed recommendations were voted on, then prioritized. It will be the work of a lead agency to steer these recommended actions moving them from proposed plans to benchmarked success.

St. Petersburg Workforce
Development Team (PERC/South
St. Petersburg CRA Workforce
DevelopmentCouncil and
Collaborative)

01

Wrap-Around
Services
(YWCA)

05

*TOP (VOTED)
ALLIANCES
AND COUNCIL
MEETINGS
(IDENTIFIED

2020 Plan
Taskforce

02

04

03

Urban League Workforce
Development

CareerSource
Pinellas

*ACTIONABLE RECOMMENDATIONS MADE AND IDENTIFIED AS "TOP NEXT STEPS"
(No Preference to Order)

Develop a "Leadership Committee" Identify and prioritize a limited number of topics to be addressed by various committees, alliances, and providers *(For Example: Training, Data, Shared Successes, Potential Partners)*

Create a collective data report detailing metrics of success

Publish agendas for each meeting(s) Link to a shared community calendar

Share Data Avoid duplication of efforts, evaluate successes, and highlight challenges (to be addressed)
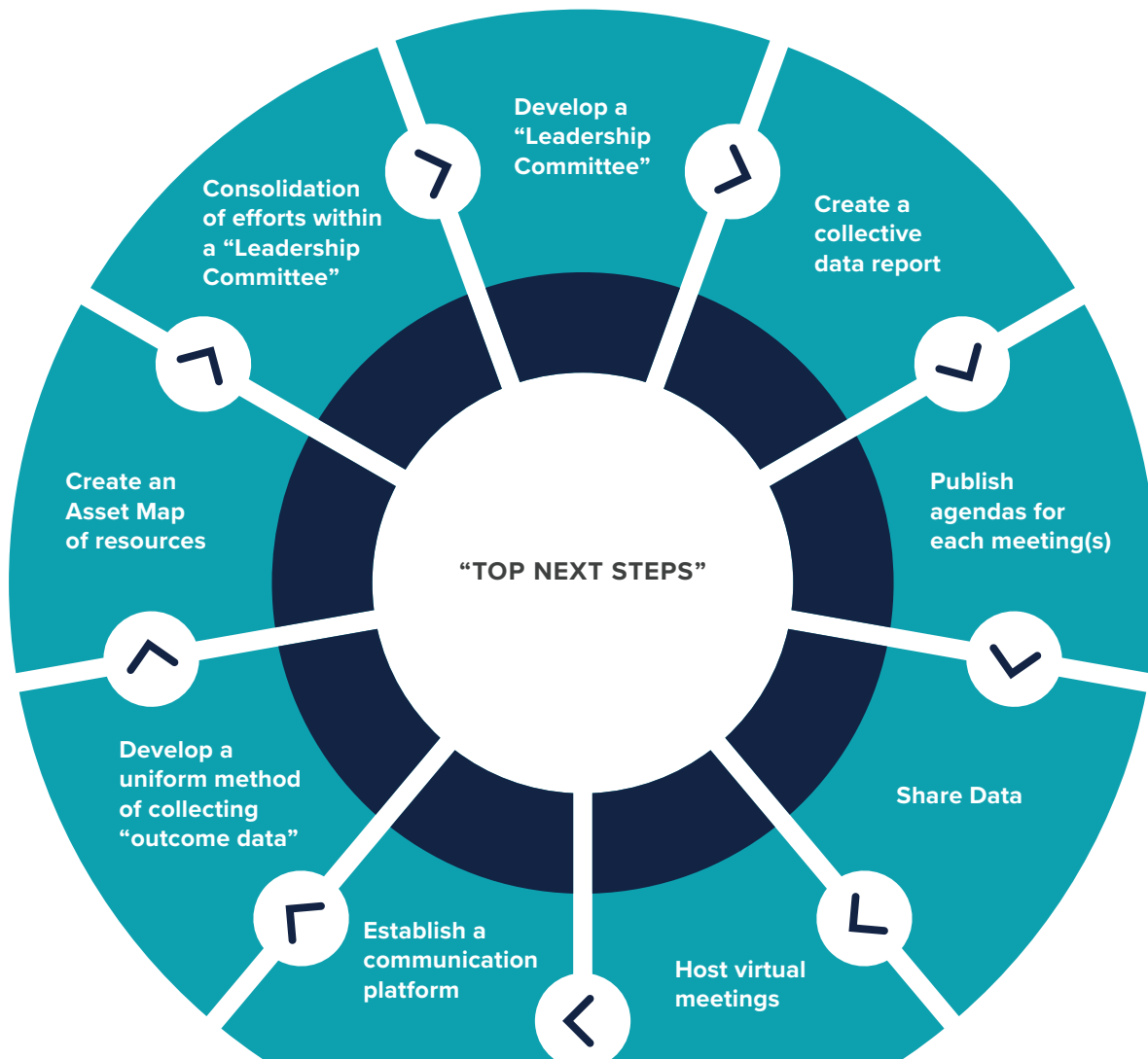
Host virtual meetings Enables greater participation

Develop a uniform method of collecting "outcome data" Assess community-wide data and strategize

Establish a communication platform Make readily available potential job openings via website or email

Create an Asset Map of resources Communicate what agency provides and the opportunities available to collaborate

Consolidation of efforts within a "Leadership Committee" to be the liaison for the various groups

"TOP NEXT STEPS"

- Develop a "Leadership Committee"
- Create a collective data report
- Publish agendas for each meeting(s)
- Share Data
- Host virtual meetings
- Establish a communication platform
- Develop a uniform method of collecting "outcome data"
- Create an Asset Map of resources
- Consolidation of efforts within a "Leadership Committee"

In addition to the full summary of this event offered via the Real-Time Records, there is a recap of the Workforce Asset Outline captured by the Collaborative Labs Team. The Workforce Asset Outline illustrated discussions among the small groups.

Below is an illustration by the Collaborative Labs Artist that captures the details and discussions from the *"Pinellas County Workforce Development Forum"*.

Section V

National Discoveries

National Discoveries

a) Correlation of Substance Abuse & Mental Illness

Research suggests it is difficult to disentangle overlapping symptoms of drug addiction and other mental illnesses, making diagnosis and treatment complex.

It is reported individuals with masked mental illness and undiagnosed social anxiety seek out illegal drugs for symptom management. This form of system management is otherwise known as "self-medication." National studies indicate a strong correlation between substance abuse and early, undiagnosed learning disabilities. Research concluded a sense of failure and early rejection by peers can lead an individual to turn to drugs or alcohol for a social life and feelings of acceptance, or to withdrawal from the challenges of life (Daw, 2001, para. 2[i]).

Studies conclude many differently-abled individuals have used substances for self-medication but later seek gainful employment. These individuals experience additional challenges in their pursuit of employment as their addiction has a likelihood of being coupled with a criminal background of drug-related offenses. Substance abuse is most common among individuals suffering from mood and anxiety disorders, and schizophrenia (Glenn, et.al., n.d, p. 6[ii]).

Referenced data indicates a strong association between individuals with serious mental illness and inadequate access to healthcare. Due to this relationship, mental illness can go undiagnosed until after the cycle of self-medication begins and then escalates (Miranda, et.al, 2008[iii]). The correlation between substance abuse, mental illness and a lack of proper healthcare are symptomatic of issues of a greater problem: health disparity.

Wrap-around support and incorporated program case management are crucial as studies reveal social insecurities recovering substance users with correlated mental illness face. It is reported many substance abusers begin using illicit substances to gain social acceptance (Shultz, et.al., 2011[iv]). These individuals find it easier to fit in through altered behavior. Studies indicate a minimization of social anxiety through self-medication allows these individuals to feel they are functioning better in groups, school and/or work. Ongoing support through groups, counseling, and case management allows consistent encouragement. Counseling and group therapy that provides reassurance to those who self-medicate helps ease social anxieties. Studies show when reassurance is frequently offered through various outlets it minimizes the chance of relapse and promotes long-term stability and success.

The correlation between substance abuse, mental illness and a lack of proper healthcare are symptomatic of issues of a greater problem:

heath disparity

b) Correlation of Health Disparities

Although the term "disparities" by itself is often interpreted to imply racial/ethnic disparities, there is much more disparity which exists in the United States, particularly in health. Many factors contribute to an individual's ability to achieve good health.

The impact of social determinants has an enormous influence on health outcomes for specific populations. Healthy People, which provides science-based, 10-year national objectives for improving the health for all Americans, cited the U.S Census, states that approximately 12% of the American population (36 million people) not living in assisted residential facilities had a disability (Disparities, n.d.[v]).
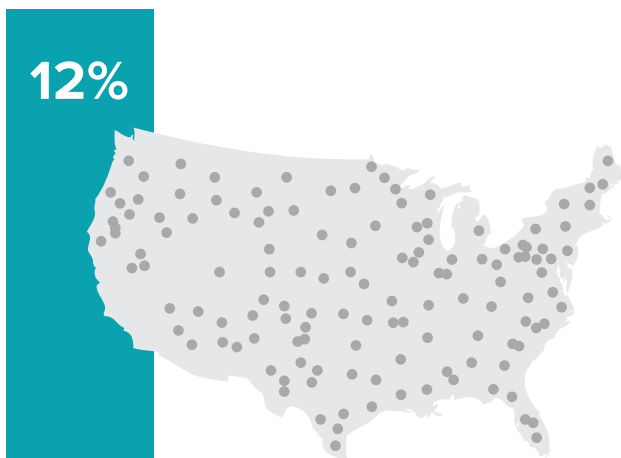
Health disparities adversely affect groups much like our target population, who similarly experience greater obstacles to good health based on factors ranging from racial or ethnic group, religion, socioeconomic status, gender, age, mental health, cognitive disability, sensory disability, physical disability, sexual orientation or gender identity, geographic location, or other characteristics linked to exclusion.

> Those who face mental and substance use disorders experience higher higher rates of suicide, poverty, domestic violence, childhood and historical trauma

It is reported those who face mental and substance use disorders experience higher rates of suicide, poverty, domestic violence, childhood, historical trauma, as well as involvement in the foster care and criminal justice systems. According to the Substance Abuse and Mental Health Services Administration (SAMHSA) and The Department of Health and Human Services (Supported Employment, 2009[vi]), these disparities are related to the following: a lack of access to health care, a lack of information, the need for a diverse health care workforce, and the need for culturally and linguistically competent care and programs, as reported by.

It is proven that as those with mental illness and health inequity gain more access to health and social services, their chances for positive outcomes regarding symptom management, access to education, stable income and employment will increase (Supported Employment, 2009, p.10[vii]).

12%

36 million people

Approximately 12% of the American population (36 million people) not living in assisted residential facilities had a disability.

Section VI

Research-Based Findings on Target Population

Research-Based Findings on Target Population

a) Employer Perspective

Research suggests mental illness creates several barriers to employment. Disability associated with illness itself may create problems. However, factors (such as the disparities like: poor educational achievements, stigma, lack of adequate vocational and clinical services, policy disincentives to employment, limitations of current disability support management services, legislation, and policy direction related to hiring and accommodating persons with mental health related disabilities) add to the barriers those with mental health illness face when seeking employment (Khalema, 2014, p. 2[viii]). The greatest barrier reported is employer stigma and discrimination at the workplace. Literature on employer attitudes shows employers express a wide range of negative beliefs regarding hiring individuals with mental illness.

COMMON (EMPLOYER) MISPERCEPTIONS OF EMPLOYING AN INDIVIDUAL WITH DISABILITY:

X Perception of poor quality of work

X Brief tenure

X Absenteeism

X Minimal flexibility

X Poor work personality

X Low pride in work

X Lower acceptance of work role(s)

X Difficulty following instructions

X Poor social competence

X Employee isolation

X Not "fitting in" work culture

X Low work persistence

X Requires additional supervision

X Work quantity is lower

X Increased likelihood of injury

X Easily angered/frustrated/upset

X Misalignment between employer needs and (potential) employee

X Disruptive behavior

X Lack of stable transportation

X Creates concerns of potential tardiness and/or absenteeism

"Job-tailoring costs" is one of the highest ranked fears reported by potential. Job-tailoring is defined as reported by the Job Accommodation Network (JAN) (Stevens, et.al. 2002, p. 9[ix]) the idea that employers must make changes to the work place that will cost time and money, however, "69% of employees with disabilities actually required no special assistance and half of the accommodations may cost less than $500 to implement (52%), with the typical cost being about $200"

Research suggests (Khalema, 2014, p. 2[x]). employers with previous experience of employing differently-abled individuals and employers in the social service and nonprofit sector are most likely to hire members of this population. Evidence suggests that the cultural backgrounds of those responsible for hiring influence willingness to accommodate the needs of workers with mental illness. Another factor influencing hiring is company size. Smaller businesses are reported as less likely to employ applicants who self-disclose having a mental or otherwise illness. This typically results from concerns that those individuals are less likely to fit in with the physically intimate and generalist nature of small businesses.

Surveys conducted in the U.S showed approximately 70% of employers are reluctant to hire someone with a history of substance abuse or someone currently taking antipsychotic medication. Almost a quarter of companies surveyed reported they would dismiss an employee who had not disclosed a mental illness. Additionally, in times of economic downturn, as reported in multiple studies on the tenure of employment of individuals with disability, these employees would be among the first to be downsized.

"Job-tailoring costs"

The idea that employers must make changes to the work place that will cost time and money
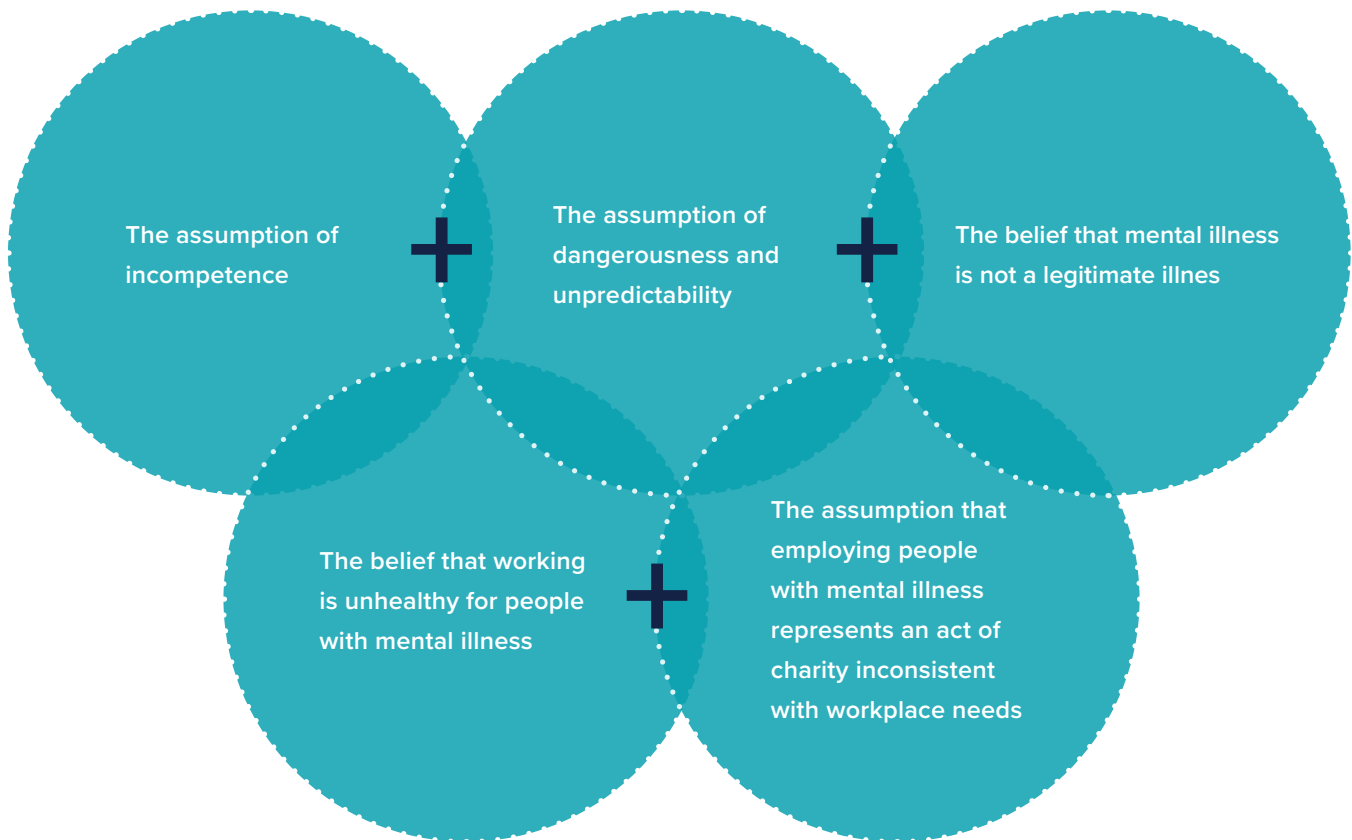
but 69%

of employees with disabilities actually required no special assistance

70%

of employers are reluctant to hire someone with a history of substance abuse or someone currently taking antipsychotic medication.

A CANADIAN STUDY FOCUSED ON STIGMA OF MENTAL ILLNESS DEFINED 5 DISTINCT ASSUMPTIONS HELD WITHIN THE WORKPLACE THAT CONTRIBUTE TO THE DISPOSITION TOWARDS ACTING IN A DISCRIMINATORY MANNER:

1) The assumption of incompetence

2) The assumption of dangerousness and unpredictability

3) The belief that mental illness is not a legitimate illness

4) The belief that working is unhealthy for people with mental illness

5) The assumption that employing people with mental illness represents an act of charity inconsistent with workplace needs

The assumption of incompetence **+** The assumption of dangerousness and unpredictability **+** The belief that mental illness is not a legitimate illnes

The belief that working is unhealthy for people with mental illness **+** The assumption that employing people with mental illness represents an act of charity inconsistent with workplace needs

b) Perspectives on Employment Integration, Mental Illness, Disability, Incarceration and Substance Recovery

It is common for people who have a substance use disorders to also have a mental illness.

Multiple national studies, dating back to the 1980's, document a high prevalence of co-occurrence between substance abuse and mental illness. On average, as many as 6 in 10 people with a substance use disorder also have a mental illness. For these individuals, one condition related to substance use may become more difficult to treat successfully as an additional mental illness condition is intertwined.

Research indicates (Severe Mental Illness, 2014, para. 2[xi]) persons diagnosed with mood or anxiety disorders were about approximately twice as likely to suffer from a substance use disorder. This high incidence of substance use disorders was also present in those diagnosed with an antisocial syndrome, such as antisocial personality or conduct disorder. Similarly, persons with substance use disorders were roughly twice as likely to suffer from mood and anxiety disorders.

Individuals who are not receiving treatment may engage in behavior that prevents them from successfully completing vocational rehabilitation programs which is another reason wraparound support is crucial to sustainable stabilization (Glenn, et.al., n.d, p. 6[xii]).

Individuals who may have been incarcerated for drug-related offenses can repeat those same tendencies once released, making it impossible to find or keep a job. Those able to find employment but do not undergo proper drug treatment may spend most of the money they earn on drugs or alcohol. This reasoning is why it is imperative to compliment wraparound support and service to participants of this program and ensure they can maintain and sustain successful outcomes.

Employees with mental health problems report that once their mental illness becomes known, they experience discrimination from coworkers (Khalema, 2014, p. 2). They begin to feel socially marginalized and cope with negative comments from co-workers.

Consequently, half of the competitive jobs acquired by people with mental illness end unsatisfactorily because of problems that occur once the job is in progress, largely because of interpersonal difficulties relating to their mental illness (Khalema, 2014, p. 2[xiii]).

6 in 10

people with a substance use disorder also have a mental illness.

1/2

of competitive jobs acquired by people with mental illness end unsatisfactorily because of problems that occur once the job is in progress, largely because of interpersonal difficulties relating to their mental illness.

COMMON IMPACTS RESULTING FROM SUBSTANCE DISORDERS/MENTAL ILLNESS

Combined related factors affect the achievement of a successful employment outcome for individuals within our target population. A program where applicable support and resources are wrapped into the model will not only minimize some of these challenges but in some cases, mitigate them. According to research from Wright State University (Glenn, et.al., n.d, p. 39[xiv]).

(REGARDING) EMPLOYMENT

- Frequent firings
- Lateness, absences
- Easy to engage in arguments on the job
- Cannot handle high pressure jobs
- Inadequate, incomplete education
- Vocational programs started, not completed
- Gaps in knowledge
- Poor concentration
- Poor performance
- Poor, fluctuating attitude toward work
- Inability to perform essential job functions
- Cognitive challenges
- Lack of marketable skills
- Lack of work experience

(REGARDING) ECONOMIC ISSUES

- Economic irresponsibility
- Unexplained expenditures
- Inability to budget, financially plan
- Issues with unstable transportation

(REGARDING) LIVING ENVIRONMENT

- Struggle with independent living
- Reside in high drug areas
- Lack stable living situation

(ADDITIONAL) OTHER

- Prior arrests/incarceration(s)
- Repeated, minor legal events
- Serving probation

ADDITIONAL TENDENCIES OF TARGET POPULATION *(According to research from Wright State University) (Glenn, et.al., n.d, p. 37-38[xv]).*

Problem Solving

A person may be ill-prepared to deal with their disability because problem solving skills have not been sufficiently developed due to substance abuse prior to being diagnosed.

Coping

The primary mechanism for coping may have been substance, which can pose additional challenges. Inadequate access to healthcare may result in the accentuation of issues. A person may lack an alternative to substance abuse for coping with their disability.

Enabling

Family and friends may neglect or overlook a person's substance abuse in light of the physical and mental suffering caused by the new disability or because of their own discomfort with individuals with disabilities.

Guilt

A person's substance abuse may have led directly or indirectly to the disability. This may cause the person to feel guilty or hold other parties responsible for the disability.

Lack of Support Structures

Support already eroded by substance abuse, may be further lessened by co-occurring disabilities. A person may have depleted financial, emotional, or cognitive resources, which may also lead to rejected or deteriorated relationships. Additionally, someone may not know how to deal with the original disability and may feel frustrated by yet another problem.

Masking of Symptoms

Substance abuse may mask symptoms of progressive illnesses and contribute to neglect of general health or an acceleration of the degenerative process.

Less Opportunity to Learn How to Socially Manage Substance Use

Negative consequences tend to occur sooner from relatively less consumption than for people without disabilities. Often, there are fewer peer models or mentors for illustrating a lifestyle with responsible non-use for those included in the differently-abled population.

Economic Issues

Cash rewards from accidents may be used for drugs, thus continuing the downward spiral of substance abuse. Providing resources that preclude looking inward or being open to help and guidance can perpetuate issues. Money also tends to provide temporary protection against the typical consequences of substance abuse, such as social isolation.

Lack of Monitoring Medication

Prescriptions can become addicting. A person's medication becomes the drug of abuse, so even when someone is acting to manage symptoms, this must also be monitored to avoid relapse or a new substance problem from developing.

Hidden Disability

Substance use disorders may mimic the disability itself, such as poor coordination or muscle control, and therefore go undetected.

Social Implications of Substance Use Disorders

The use of substances typically begins in social settings and often disrupts social functioning. Substance use disorders have a significant impact on how people interact with others and how they view their roles with their community (and with their employers).

c) Relapse Prevention

Assessing a person's readiness to meet the demands of school or work is important for the prevention of relapse. Many reports reviewed in this study concluded too many changes at one time (i.e. treatment, sobriety, work) or changes that are too dramatic (from unemployed to a full-time, responsible job) might be more than the person can manage, emotionally (Glenn, et.al., n.d, p. 47[xvi]). Pressure associated with change may precipitate a relapse and provoke mental breakdowns. As the community seeks to build a program that will serve the target population, preventative measures should be addressed by embedding appropriate support into the program infrastructure. This support will minimize the risk of relapse and contribute toward the likelihood of longer-term success following program participation.

POTENTIAL RELAPSE TRIGGERS
(According to Research from Substance Use Disorders and Vocational Rehabilitation VR Counselor's Desk Reference)
(Glenn, et.al., n.d 47-48[xvii])

Financial

- *Fighting urge to use income for substances*
- *Inadequate financial literacy, education, mismanagement of income, and financia gain may become financial strain*

Pressures of meeting dress/personal appearance requirements on daily basis

Confrontation with school/work authority figures

Stressors relating to commuting

- *Transportation issues*
- *Stress/anxiety of traffic*

Pressure of performing responsibilities of job

Negative influencers

- *Association with family, friends, and/or colleagues who are not in recovery, ex. negative influencers*

d) Evaluation of Local Population

To validate whether there is in fact a significant number of Pinellas County residents who define our target population, and to locate where those identified residents live, a third-party research firm, Up River Geographic Information Systems, was utilized. Up River provided population data from 2015 and 2016. Data collected accounts for the population, their location in Pinellas County, and how that intersects their location with access to care (hospitals and associated clinics), workforce solutions (namely the CareerSource Centers), and the public transit system. Kempton Research and Planning, another third-party evaluator, provided additional layers to the data to more specifically breakout the disability, area within the county (by zip code), age, family, and marital status, and as well as other demographic details which enabled a more comprehensive depiction of the population.

Key Findings from Evaluated Data

2016 Population	
< 5,000	34681, 33786, 33744
5,000 – 10,000	33715, 33762, 33785, 33767, 34688
10,000 – 15,000	33776, 33778, 33765
15,000 – 20,000	33711, 33706, 33708, 33708, 33701, 33704, 33714, 33716, 33777, 33773, 33760, 33774, 33760, 33759, 33763, 34695, 33761, 34685
20,000 – 30,000	33707, 33712, 33705, 33703, 33702, 33709, 33781, 33782, 33772, 33770, 33771, 33764, 33755, 34684, 34677, 34689
30,000 – 40,000	33710, 33713, 33756, 34698, 34683

Most Dense Population of Residents with Disability

As reported in 2016 population census
Pinellas Park
Clearwater
Dunedin
Tarpon Springs

Highest Levels of Poverty Amongst Population with Disability

As reported in 2015 population census
33712
33713
33714
33755
33756
33771

Classifications of disability were distinguished in the following categories of the Sub-Census, therefore, data is organized in the following categories of disability

- Hearing Disability
- Vision Difficulty
- Cognitive Difficulty
- Self-Care Difficulty
- Independent Care Difficulty

Major questions this study sought to answer was whether Pinellas county had a significant population of differently-abled residents needing additional support to be gainfully employed, challenges both the population themselves faced, gaps and opportunities for the community agencies serving the population to address to improve support and service. The presentation of material in this report unfolds as it was discovered. The categories represented in the data were based on how they were reported and indicate multiple special needs that should be further studied following the review of this support, so customized and catered service can be provided to uniquely fit each group.

In the beginning of this work, it was hypothesized transportation would be among top barriers experienced by our target population. However, in the review of data collected through this study, the hypothesis was not proved accurate as it was not one of the greatest barriers indicated. As a form of evaluation, to understand how the public transportation overlaps the communities where high disability and poverty were reported data was collected on the population and their proximity to public transportation routes.

Section VII

Best Practices

Best Practices

"Supported Employment" was a concept developed in the early 1980's to provide practical, on-the-job training to people with mental illness (Kamp et. al., 2007, p.4[xviii]). The intention of supported employment was to instruct and support individuals with a disability who would otherwise not seen as capable of 'real work'.

Systemic instruction and support both in and out of the workplace enables the target population to build skills, enter the labor market, and maintain support along the process are included in the Supported Employment program model. Supported Employment ensures stability and sustainability, providing wraparound support both in and out of the workplace (Kamp et. al., 2007, p.4[xix]). There are models that depict a structure which includes Supported Employment while also addressing other barriers presented throughout our study. Success in this work will be determined by placing differently-abled St. Petersburg residents into training, with successful completion, and (or) placement directly into competitive employment. Tactical approaches, including instrumental assurances that participants maintain a positive pathway for long-term sustainability will be incorporated into programmatic efforts to commence this work.

BEST PRACTICES IN A CUSTOMER-DRIVEN APPROACH TO SUPPORTED EMPLOYMENT
(According to Research from Bárczi Gusztáv Faculty of Special Education) (Könczei, 2009, p. 12-15[xx])

Choice
Allowing individuals to make choices regarding employment creates feelings of empowerment. Decision-making skills are often lacking or not taught as many individuals with disabilities are not always provided opportunity to make independent choices; Providing options that align with their goals increases personal satisfaction, motivation and gives a greater sense of ownership and accomplishment

Control
Allow participants to feel a sense of control over the services they seek and/or allowing input to be freely offered and directed by them

Careers
Allow career satisfaction to be a metric and duration of employment; quality of employment for participants over quantity of placements into employment

Full Community Inclusion
Represent population(s), in a positive manner within the business community; build strong relationships within businesses used in the program

Long Term Support
Provide care and support beyond the initial obtainment of employment, help promote retention through ongoing care and connection

Community and Business Support
Overlap care between Case Managers/Counselors and Employment Specialists

Continuous Quality Improvement
Maintain focus and time throughout service deliver to constantly reevaluate evolving needs and quality of care necessary to maintain competitive service and appropriate resolve

Assistive Technology
Use interactive and assistive technology as applicable to minimize barriers concerning accessibility, communication, and mobility

Person-Centered Planning
Build a support group to allow community networks to function together to assist the participant in their efforts to achieve their goals and aspirations; allowing groups to meet regularly provides a sense of community, family, and co-dependence through a positive network of connection

ADDITIONAL BEST PRACTICES USED IN VARIOUS MODELS

(According to Research from The Institute for Community Inclusion) (Marrone, 2005, p. 8[xxi])

➡ Use a person-centered employment and career planning approach in the assessment of interests and abilities and the design of service delivery

➡ Emphasize rapid job entry and wraparound planning that supports short-term training that will lead to employment

➡ Use of a facility which is also a local community rehabilitation provider contracting with the state VR for employment services, a public housing authority, or a local community-based center for service execution

➡ Emphasize capacity of housing and mental health staff to refer the target population for services

➡ Use peer and natural supports (peer support groups, personal networking for job acquisition, and housing/worksite mentors)

➡ Provide support from a program that assists with co-occurring disorders

STRATEGIES FOR EFFECTIVE JOB PLACEMENT

(According to Research from Substance Use Disorders and Vocational Rehabilitation VR Counselor's Desk Reference) (Glenn, et.al., n.d, p. 77-78[xxii])

Identify employers with **drug-free workplace policies** who also address supportive interventions

Assess work environments to identify that are conducive to abstinence

Identify jobs with **minimal exposure to substance using/abusing**

Consider **job search assistance**, either in a group setting or through one-on-one counseling or coaching

Avoid environments that include a high degree of negative reinforcement by supervisors

Check for **adequate levels of employee valuing** by the employer

Ensure **constructive employer interactions**/problem solving

Customize opportunities for individuals with the most significant disabilities

Offer **"Job Clubs"** with workshops

Provide **access to computers, phones, and peer support**

Avoid jobs with highly **stressful expectations**

PROGRAMMATIC EFFORTS SHOULD ADDRESS

→ Allocating appropriate amount of time to job hunt

→ Finding ways to compensate for the lack of a network of well-placed contacts

→ Using job search methods most likely to be successful

→ Being available for employer contact

→ Mastering the "Walk, Talk, and Dress" of an employable person

→ Identifying parts of a healthy approach to work

→ Learning to accept incremental progress

→ Handling disappointments appropriately

→ Keeping things in perspective

→ Counseling to learn to effectively communicate with a potential employer and co-worker

→ How to gauge a prospective employer's willingness to work with a person in recovery

→ Addressing gaps in employment that have resulted from being fired from previous jobs (or from being incarcerated)

→ Learning to frame treatment/incarceration as a transition, focusing on views for the future— but without dishonesty or denial

Section VIII

Opportunities to Improve Efforts

Opportunities to Improve Efforts

Stigma of Hiring with Disability

Embedded through the research findings are comprehensive illustrations of reasons companies shy away from employing individuals with known barriers relating to mental illness (Shultz, et.al., 2011 p.57[xxii]). Programmatic efforts must address the stigma and false perception companies have in their consideration of employing those who are differently-abled. As tragic events involving individuals with mental or behavioral health issues continue to increase, it is only accentuating false perceptions. Attention to diminish a furthered fear of potential instability and risk that could be associated with the employment of an individual suffering from mental illness should be considered and addressed.

Orchestrating a new rhetoric amongst Pinellas County companies that shows willing, able, talented, and competitive workers and how they can further the objectives, mission, and goals equally and as competitively as anyone else is a task for institutions that will lead programmatic efforts to train and support to employment this population.

Policy Issue(s)

One of the largest obstacles members of our target population must overcome to become gainfully employed lays within the function of our state system itself. The very system in place to work for them, also works against them. Florida Medicaid is a state and federal partnership that provides health coverage for Florida residents with low incomes. The purpose of Medicaid is to improve the health of those who otherwise would go without medical care for themselves and their children. To give perspective to the income levels to both qualify and to lose qualifications for these benefits, reference the income requirements below.

Annual Income(s)

(Before Taxes)

Household Size	Maximum Income Level (Per Year)
1	**$15,800**
2	**$21,307**
3	**$26,813**
4	**$32,319**
5	**$37,825**
6	**$43,331**
7	**$48,851**
8	**$54,384**

As individuals within our target population seek to obtain gainful employment, they risk losing their benefits as their income begins to increase. Healthcare is not a guarantee with every position especially with many part-time, entry-level positions, part-time positions. Supplemental Security Income (SSI) is a federal benefit received by many individuals with documented and diagnosed mental illness. The Office of Social Security Administration (SSA) reported in 2018 that 63 million Americans will receive approximately 1 trillion dollars in Social Security benefits (Social Security Administration, n.d.[xxiii]). For example, in the month of December 2017, 8.7 million work-age Americans received $10.4 billion of SSA Disability, which breaks down to roughly $1,197 (a month) of income.

63 million Americans *will receive approximately* **$1 trillion** *in Social Security benefits*

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8.7 million

work-age Americans received

$10.4 billion

of SSA Disability

Reported by the office of SSA, among disability insurance beneficiaries with less than 12 years of education and without the inclusion of these benefits, 79% has family income below 150% of the poverty level (Social Security Administration, n.d.[xxiv]). would be deemed living in poverty without these benefits. Disability insurance benefits consists of approximately 75% of personal income for 60% of disability insurance beneficiaries with 16+ years of education and 60% of disability insurance beneficiaries with less than 12 years of education.

In the most recent study (2013) conducted through SSA, the median annual personal income level for disability insurance beneficiaries aged 40 or older was $14,988, compared to $11,880 for disability insurance beneficiaries under 40. Among the over 40 group, 50% were in poverty and under the age of 40 it was 52%.

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The matrix and benchmark qualifications for both entering and exiting this funded system are unrealistic and de-motivates someone with a disability to want to work, not only for losing a monthly payment, but losing the medical benefits which they need to sustain for treatment.

Although mental illness is not specifically categorized as a subgroup of this data, many included in the target population receive these benefits and the illustrations of this data shows a strong correlation between poverty and receiving this assistance. This illustration shows that even with the support of the SSA, or the combination of SSI and Medicaid benefits, the target population is still facing below poverty standards of living.

Benefits received by the target population through SSI or Medicaid, become at serious risk once the beneficiary begins earning additional income. Within 90 days of a change in income, a participant can lose some, if not all their benefits. The matrix and benchmark qualifications for both entering and exiting this funded system are unrealistic and de-motivates someone with a disability to want to work, not only for losing a monthly payment, but losing the medical benefits which they need to sustain for treatment.

If the intention is to eliminate obstacles that prevent stabilization for this population, the policy issues surrounding this system, as well as the limitations and challenges within the state Vocational Rehabilitation system are ones to address.

Among the over 40 group,

50% were in poverty

and under the age of 40,

52% were in poverty

Lack of System Organization

Although there are many workforce meetings, there is no consistency among discussions that take place. There is a revolving door of representatives from each organization attending different sessions and meetings. It becomes challenging to progress new ideas and create strategic solutions when there is this inconsistency. Additionally, difficult, some representatives may not have influence to make formal recommendations within their own organization or implement changes as recommended by the community agencies.

Pinellas County Workforce Leadership Committee

In February 2018, CE launched the "Pinellas County Workforce Leadership Committee." To enforce equitable ownership for the "Pinellas Leadership Committee", CE suggested the meeting occur every six-weeks, and the host for each meeting also author the agenda and key points for discussion. CE set the first meeting and directed the agenda. The second meeting was hosted by the St. Petersburg Central Redevelopment Agency (CRA) on April 23, 2018. The CRA created the agenda for this meeting, both picking up where discussions left off in the prior convening, and directing new conversations based on new activity and challenges in the workforce community. To maintain the integrity of this group it is important not to dilute the aspect of convening "leadership." While participation of any kind is valuable, the intention of leadership was to engage in deeper, more strategic conversations about system-wide challenges, successes, and partnerships. Once organization's start replacing their seat at the table with substitutes the value of this group diminishes. Also, having multiple representatives from each agency overpowers the equity of the table. The dynamic of a true "Leadership Committee" allows each organization the opportunity to guide and direct the group. It allows equal representation and the opportunity to implement new changes to the system that will positively affect the end-user and all overall community.

CareerSource Pinellas

Present representation from CareerSource at workforce councils and meetings will enhance support and service to the end-user. During many meetings, including the Pinellas County Workforce Leadership Committee meetings, there were often discussions on how engaged leadership from CareerSource would extend and benefits efforts of individual organizations and more importantly those in need of the service. An increase in participation at both a fundamental and executive level would support positive, more fluid training and support offered to all residents seeking to enhance skills and connect to employment. With the help of the local Workforce Investment Board (WIB), a better allocation of state and federal funded resources can be delegated. Within the Employ Florida platform, CareerSource is already working with local employers to post jobs and recruit candidates to fill those positions. As the local WIB, CareerSource should be positioned as the nucleus for disseminating employment support services and available employment opportunities.

Company Communication

Providing a smoother, formalized process, protocol, and organization around timely responses to meet employer needs will increase job placements and economic growth. A disconnection between the community learning of the specific requirements of certain jobs, or a specific company need and delivering qualified, trained, and abled candidates for consideration will lead to disengagement from businesses and perpetuate unemployment as well as stagnate economic prosperity (Kamp et. al., 2007, p.8[xxv]). Instituting a formalized approach to flow information as it's received from the companies, directing it to the right organizations who can deliver results will help not only put more individuals into jobs, but will also allow an improvement of service and function for multiple systems.

Vocational Rehabilitation

It is/was assumed Vocational Rehabilitation (VR) would lead the way in helping successfully graduating our target population from training programs and assist them into employment. VR counselors are, after all, required to respond promptly to applications and their largest purpose is to help clients further their education and secure employment. However, it is reported in many states that the VR offices are understaffed, poorly run, or can be hamstrung by political battles. Staff turnover is high, successful job placement is fleeting and money is spent without significant placement results. Delays in service provision were so widespread that, in 2014, Congress mandated that a person with a disability must receive a plan for employment within 90 days of being deemed eligible for assistance (Kolodner, 2016, para. 8[xxvi]). In 20 states, more than one-third of cases stretched past the 90-day limit in 2015; close to 14,000 cases stretched past a year.

"

Part of the challenge with someone who has a disability fully utilizing the services of Vocational Rehabilitation (VR) is they lack adequate capabilities to follow through on tasks assigned by their counselors.

In 20 states, more than

1/3 of cases

stretched past the 90-day limit in 1015.

14,000 cases

stretched past a year.

Once an applicant gets an approved plan, the next step is to get the services — which often takes even longer. These delays can lead to missed job and educational opportunities and longer government dependence, all at a cost to taxpayers.

Part of the challenge with someone who has a disability fully utilizing the services of VR is they lack adequate capabilities to follow through on tasks assigned by their counselors. For example, they may express interest in an educational program and be instructed by their Counselor to complete an application for the program and return the completed application upon consideration of next steps.

For individuals suffering from mental illness, it can be quite challenging, to some nearly impossible, to independently complete this step; therefore, they do not progress with the assistance. This then delays their case until the allocated time has passed and they must start the process from the beginning once they decide they would like to again pursue employment or training support.

The VR counselor is often unable to distinguish between symptoms of substance abuse and coexisting disability-related behavior patterns. This can create additional challenges in identifying the most appropriate care and service that will yield successful and sustainable outcomes. Supported Employment reduces the use of hospital care and other services. Supported employment can be funded by Medicaid, which allows states to obtain substantial federal matching funds.

Despite the success of supported employment and the financial incentives to expand these services, their availability is scarce; only 1.7 percent of people served by public mental health systems in 2012 received supported employment services (Road to Recovery, 2014, p. 4[xxvii]). Instead, mental health systems continue to use decades-old day treatment programs that are based on the premise of life-long disability and dependence. The existence and extent of the impairment must be the primary reason that the individual is unable to achieve an employment outcome consistent with his or her strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice.

Although this research doesn't all particularly represent all cases and accounts for service in Pinellas County, it is an illustration depicting the need for additional support community agencies can provide those utilizing VR services. Providing additional structure and support to those trying to use the VR system will increase successful outcomes for the participant and for the agency itself.

1.7% of people

served by public mental health systems in 2012 received supported employment services.

Section IX

Recommendations

Recommendations

Integrating vocational assessment, counseling, training, placement, and follow-up throughout treatment is a challenge and requires consistent collaboration within and outside of agencies.

Public Policy

Florida State Representative Kathleen Peters has offered support in co-sponsoring an employer forum. Representative Peters is a huge advocate for equity amongst the differently-abled population. Representative Peters supports both policy and local initiatives that will minimize barriers for this population, as well as change the rhetoric and perception companies in Pinellas County may have of what it takes and is like to employ individuals who maintain any variety of disability, whether that be physical, mental, or behavioral. Her office will be instrumental in helping understand the current policies and their limitations regarding our target population and their ability to obtain employment successfully. The Florida Policy Institute is advocating for needs of Florida families living in poverty that lack economic mobility. This institution is one to consider engaging to further the rhetoric and discussions on how to address issues within the system, better align qualifications, expectations and requirements for funding assistance received by the target population.

Workforce Resource Map

Since early 2018, CE has been working with the St. Petersburg Area Economic Development Corporation (EDC) to develop a *Workforce Resource Map*. This is a recommendation that was discussed at the Pinellas County Workforce Forum. The intention of the Map is to create a one-stop shop for businesses to learn about things like: recruiting, incentives, training providers and diversity and inclusion. Housed on the EDC's webpage the *Workforce Resource Map* will be an online tool local companies can utilize to aide in their efforts to understand what services are offered to support the development of their workforce.

The "Map" will be housed on the EDC's webpage. As part of the study, CE has been taking inventory of local services, programs, incentives and support that companies can benefit from as they seek to recruit, retain, and train their workers.

Once the EDC and CE have finalized the site, it will be presented to the Pinellas County Workforce Leadership Committee for discussion.

Employer Engagement

Engaging a focus group of employers to discuss 1.) their perception on employing individuals from our target population and 2.) employment needs they have, career laddering opportunities, and specific training and credentials required to not only obtain competitive employment but what would be required for upward mobility.

Through conversations with the St. Petersburg Area Chamber of Commerce and the St. Petersburg Area Economic Development Corporation (EDC), it made sense to take a true census of the business climate and in conjunction with these partners, host a county-wide forum. Additional steps to plan this event are in progress with (Pinellas) County-Wide Chambers of Commerce.

To further enhance employer engagement, aligning to already identified target sectors for St. Petersburg, the EDC invited CE to attend their industry employer roundtables. Rather than engage the same group of Pinellas companies twice, these roundtables will open doors for further industry-focused conversations regarding pathways for employment not only for differently abled residents but pathways that will create new and competitive careers for all residents of the St. Petersburg area community.

Target Sectors

(As Identified Within Grow Smarter Target Business Analysis)

- → Marine and Life Sciences
- → Specialized Manufacturing
- → Financial Services
- → Data Analytics
- → Create Arts and Design

System Change

A better approach, one more system-wide, each organization will benefit with an overall enhanced experience to the end-users. Employers and clients which are seeking support to obtain gainful employment.

Outside of any programmatic work, additional efforts, and attention on the identified policy issues, as well as on better streamlining workforce strategies in terms of a workforce matrix and process to flow communication properly through channels that will result in organized, structured, and outcome driven results are recommended to develop.

Section X

Anticipated Outcomes

How to Increase Support, Training, and Connections to Employment for Pinellas County Differently-Abled Residents / Summer 2018

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Anticipated Outcomes

Upon the execution of recommendations made throughout this study, Pinellas County, most specifically South St. Petersburg, will experience a reduction in the number of chronically unemployed and underemployed residents, specifically within the population of differently-abled residents. Implementation of recommendations will result in a decline in the number of individuals who fall victim to repetitive cycles of relapse.

Implementation of recommendations will **result in a decline in the number of individuals who fall victim to repetitive cycles of relapse.**

A better engagement of community-organizations, employers, and policy makers more strategically aligned to resources will foster forward-moving actions. Uniting community organizations around a single mission-focused initiative will lead to quicker, more sustainable results.

A clear illustration within the context of this study shows significant barriers and stipulations of current state policies that have a significant effect on our target population's ability to obtain employment.

The acquisition of employment, as well as an influx in someone's earnings has a severe impact on their ability to sustain health and other necessary benefits. Lack of consideration, customization, and unreasonable benchmarks contribute to pushing our target population further away from seeking employment, even when able and motivated.

Addressing existing regulations from a policy standpoint would not only lead to a more effective system, but it will motivate our target population to obtain employment without having to choose between a sense of purpose and increased income and losing benefits their health and wellness rely on.

Strengthening the system of workforce development agencies will allow better alignment of workforce-related services in Pinellas County, a cost-savings to the individual service providers, an enhanced quality of service to the end-user, and a more timely and effective service to the companies within the community who require competitive talent to grow and sustain their business.

Section XI

Contributors and Reference(s)

a) Contributors

Pinellas County agencies who provided insight and contributions toward the efforts of this work and the understanding of the population needs.

• 2020 Taskforce	• Homeless Empowerment Program (HEP)
• Boley Centers	• Meraki Strategic Group
• CareerEdge Funders Collaborative	• On Board 4 Jobs Construction
• CareerSource Pinellas	• Pinellas County Schools
• Catholic Charities – Diocese of St. Petersburg	• Pinellas County Urban League
• City of St. Petersburg	• Pinellas Ex-Offender Re-Entry Coalition (PERC)
• City of St. Petersburg CRA	• Pinellas Hope
• Community Action Stops Abuse (CASA)	• Pinellas Opportunity Council
• Florida Department of Education	• Pinellas Technical College
• Florida Health and Human Services – Pinellas County	• St. Petersburg Area Economic Development Corporation
• Florida State Representative Kathleen Peters	• St. Petersburg Chamber of Commerce
• (Florida) Vocational Rehabilitation	• St. Petersburg College Workforce Institute
• Foundation for a Healthy St. Petersburg	• Suncoast Centers, Inc.
• Goodwill (St. Petersburg)	• United Way Suncoast

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