

Interview topics for VRF program staff

In this appendix, we provide a list of topics we will cover during the first and second site visits. During the site visits Mathematica staff will interview several types of respondents: RFs, KIR staff including the project director and members of the executive steering committee, and DVRS staff. Not all topics are applicable to all respondents. Mathematica likely will not cover all topics with a single respondent. For example, sustainability and scaling will be the focus of discussions with VRFD project director; counterfactual services will be the focus of discussion with DVRS staff, and service delivery will be the focus of discussion with RFs. We will tailor the interview guide for particular respondents, and we will build on information we obtain during early program implementation.

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Interview topics to cover during the first visit to interview VRF program staff

The goals of the first site visit are to (1) describe recruitment and enrollment processes and deviations from the planned processes, (2) describe how the VRF model components are being operationalized, and (3) identify factors that hindered and facilitated service delivery.

Orange = only asked during first SV

A. Background

- General background information
- Respondent's role in organization and tenure in position
- Respondent's role on VRFD
- Organization's role in VRFD
- Other staff in organization involved in VRFD (number and roles)
- How VRFD fits with organization's overall structure

B. Program environment – community context and the counterfactual

- What economic conditions, employment environment, and other state- or location-specific characteristics might have influenced VRF service delivery and impact on outcomes?
- Implications of the economy on the labor market over past year
- Implications of political climate on service environment over past year
- State/local policies and features (i.e., public transit) that assist or hinder people with disabilities in securing employment
- Description of geographic region/service area (size and distribution of population)

C. Recruitment and enrollment activities

- How did VRFD recruit patients for enrollment? Did this change during the project and if so, how?
- What motivated patients to enroll in VRFD? What other factors influenced the enrollment rate?
- Target population and strategies to identify workers who are eligible for VRFD
- Strategies used to recruit and enroll VRFD enrollees into the demonstration
- Challenges to recruiting and enrolling individuals into the demonstration
- Facilitators of recruiting and enrolling individuals into the demonstration
- Progress toward recruitment and enrollment goals
- Recruitment and enrollment activities compared to planned model of recruitment and enrollment and reasons for adaptations
- Reasons why eligible patients choose to participate in VRFD; reasons they choose not to participate in VRFD

D. Program operations and service delivery

- How did KIR partner with DVRS or others to implement and deliver VRF services?
- What training did KIR provide to RFs? What was the staffing structure?
- How did VRF service implementation change over time and why? How did the implementation of VRF services differ for patients with BI versus those with SCI?
- Overall organization and management structure of VRFD
- Roles of partner organizations in VRFD (organizations that support service delivery)
- Nature of communication and collaboration between organizations involved in VRFD
- Service delivery model
- Training RFs
- Integrating RFs into the clinical team
- Providing return-to-work services
- Engaging employers
- Providing benefits counseling
- Coordinating services
- Introducing peer mentoring services
- Tracking and monitoring the medical and employment progress of VRFD service users
- Changes made to services as a result of participation in VRFD
- Extent to which service delivery model was implemented as planned
- Functions and utility of the management information system and data entry processes

E. Barriers to and facilitators of program implementation

- What factors hindered VRF service delivery? How did service providers overcome these challenges?
- What factors enhanced VRF service delivery?
- Challenges to operationalizing each service delivery component, including provider and worker participation
- Facilitators of operationalizing each service delivery component, including provider and worker participation

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Interview topics covered in the second visit to interview VRF program staff

The goals of the second site visit are to (1) describe changes made to the topics covered in the first site visit, (2) describe plans for sustaining the model, (3) collect information about program costs, and (4) describe counterfactual services.

Purple = only asked during second site visit

A. Background (for new respondents only)

- General background information
- Respondent's role in organization and tenure in position
- Respondent's role on VRFD
- Organization's role in VRFD

B. Program environment – community context and the counterfactual

- What economic conditions, employment environment, and other state- or location-specific characteristics might have influenced VRF service delivery and impact on outcomes?
- Changes to the economy on the labor market over past year
- Changes to the service environment over past year
- Changes to state/local policies and features (i.e., public transit) that assist or hinder people with disabilities in securing employment
 - Services similar to VRFD available to patients who are eligible for VRFD
 - Similarities and differences to VRFD program services
- How were VRF services distinct from services available to the control group?
 - Changes in VR services during the demonstration period

C. Program operations and service delivery

- What training did KIR provide to RFs? What was the staffing structure?
- Changes to the service delivery model
- Changes to training RFs
- How did VRF service implementation change over time and why? How did the implementation of VRF services differ for patients with BI versus those with SCI?
 - Changes to integrating RFs into the clinical team
 - Changes to return-to-work services
 - Changes to engaging employers
 - Changes to providing benefits counseling
 - Changes to coordinating services
 - Changes to introducing peer mentoring services
 - Changes to tracking and monitoring the medical and employment progress of VRFD service users
 - Extent to which service delivery model was implemented as planned

D. Barriers to and facilitators of program implementation

- What factors hindered VRF service delivery? How did service providers overcome these challenges?
- Challenges to operationalizing each service delivery component, including provider and worker participation
- What factors enhanced VRF service delivery?
 - Facilitators of operationalizing each service delivery component, including provider and worker participation

E. Sustainability and scaling

- What are KIR's plans for sustaining VRF services after the project?
- What are program and partner staff recommendations for continuing, modifying, or expanding VRF services?
- Plans to sustain VRF service delivery after the end of VRFD
- Anticipated challenges for sustaining or scaling service delivery

F. Program costs

- What is the cost of implementing VRFD?
 - Project budget and funding
 - Additional revenue sources for VRFD aside from cooperative award funds
 - Financial reporting processes
 - Staff and volunteer time dedicated to VRFD and specific program components (and nature of time collection systems)
 - Overhead and capital costs allocated to VRFD (and nature of accounting systems)
 - Subcontract or vendor payments
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