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**ABSTRACT**

This user's guide, the last of four training modules for similar benefits usage, is the result of a project of the University of Michigan Rehabilitation Research Institute in conjunction with the Virginia Department of Rehabilitative Services (DRS) model program evaluation unit to examine the issue of similar benefits in the state-federal rehabilitation program. The introduction reviews the goals and objectives of the similar benefits project and briefly describes each module. Preceding the text of the volume is a list of frequently asked questions about similar benefits presented in major topic areas. This final volume discusses utilization incentive issues. Procedures for evaluation and monitoring are presented along with the descriptions of the counselors' and administrators' roles in the areas of similar benefits. Incentives for counselors, administrators, and the rehabilitation agency are considered with the suggestion that state agency administrators should understand the political ramifications of using similar benefits. The necessity of full documentation by vocational rehabilitation agencies to present a case for similar benefits usage is emphasized. (Author/NRB)

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VOLUME IV  
Incentives for Counselors and Administrators

SIMILAR BENEFITS IN REHABILITATION  
A User's Guide for Counselors and Administrators

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SIMILAR BENEFITS IN REHABILITATION

A User's Guide for Counselors and Administrators

VOLUME IV

Incentives for Counselors and Administrators

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VOLUME IV

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## PREFACE

The UM-RRI was established in 1976, with funding from the National Institute for Handicapped Research, in response to the mandate of the Rehabilitation Act of 1973 that programs and projects be evaluated in the state-federal program. The UM-RRI efforts are directed toward research and related activities to assist states in evaluating management practices and service delivery systems.

The UM-RRI has been working on several long and short range objectives in rehabilitation program evaluation to:

1. Develop alternative conceptual models that may be used as a framework for comprehensive program evaluation in the state-federal rehabilitation program
2. Conduct research on existing program evaluation instruments to determine their feasibility for current use and to determine their need for additional development and validation
3. Identify, design, test, validate, demonstrate, and disseminate program evaluation instruments, techniques, and methodologies that are consistent with conceptual models for comprehensive program evaluation in rehabilitation
4. Develop criteria for designing, developing, testing, and validating new and existing program evaluation instruments, techniques, and methodologies that consider measurement of impact, effectiveness, effort, efficiency and output

This investigation into similar benefits in rehabilitation is viewed as part of the UM-RRI's mandate in program evaluation. Feedback about this report is invited.

Ain Arbor  
June 1981

Ralph M. Crystal

## INTRODUCTION

The purpose of this project, undertaken by The University of Michigan Rehabilitation Research Institute (UM-RRI), in conjunction with the Virginia Department of Rehabilitative Services (DRS) model program evaluation unit, was to examine the issue of similar benefits in the state-federal rehabilitation program. The intent of the project was to (a) identify issues related to similar benefits, (b) develop training materials to assist state rehabilitation agency personnel in the use of similar benefits, and (c) develop evaluation procedures to document the impact of similar benefits on the state rehabilitation agency.

The funding for this project was through the Virginia DRS model program evaluation/management information support unit. The project was supported through the task related to the building of new evaluation capacity which can be generalized to other states. The overall model unit project is sponsored by the Rehabilitation Services Administration (RSA). The Model Evaluation Units (MEU's) were initially funded in six states by RSA in October, 1981. The objectives for the MEU's were to (a) develop a program evaluation model in state rehabilitation agencies in which comprehensive program and policy systems are linked by appropriate evaluation data; (b) field test and evaluate the effectiveness of the revised federal program evaluation Standards and the Facilities Information System for state rehabilitation agency management; (c) build new evaluation capacity which can be generalized to other states; and (d) develop linkages for a within-state agency and between-state

agency network for communication, dissemination, and utilization of evaluation topics, with special emphasis on developing and testing within the Model Evaluation Units.

### Similar Benefits Project

A major goal of similar benefits is to enable the state rehabilitation agency to maintain the quality and quantity of client services, in spite of financial fluctuations and uncertainties, by obtaining services from sources other than the state rehabilitation agency to meet, in whole or in part, the cost of client services. It is anticipated that through the utilization of similar benefits, additional clients will be served. The overall goal of this project was to develop a conceptual model for utilization of similar benefits within a state rehabilitation agency. The specific objectives of the project were:

1. To help insure that resources other than the state rehabilitation agency are utilized to meet the service needs of clients
2. To identify similar benefits resources and refine the existing similar benefits directory
3. To examine the nature of interagency linkages
4. To explore the development of a system for monitoring and tracking clients who are eligible and/or receiving similar benefits
5. To develop a training program for counselors and agency administrators in the use of similar benefits
6. To implement a similar benefits system in the state rehabilitation agency



7. To document through the program evaluation process the effectiveness and impact of the similar benefits program on clients, counselors, administrators, the community, and the rehabilitation agency

As the project progressed, issues were defined and the objectives of the project modified in light of the needs of the Virginia DRS in this area. As a result of the redefinition of issues, the final product (training materials for similar benefit usage) prepared by the UM-RRI has been incorporated into four modules. Each can be used separately or in conjunction with one another. The titles of each are:

Volume I: Background, History, and Issues

Volume II: Definitions, Policies, and Procedures

Volume III: Directory, Checklist, and Reporting Systems

Volume IV: Incentives for Counselors and Administrators

The following is a brief description of each of these sections:

Volume I: Background, History and Issues

This volume provides an introduction to the nature of similar benefits in the state-federal rehabilitation program. The background and legislative history of similar benefits are presented. Issues related to the use of similar benefits are described and discussed.

Volume II: Definition, Policies, and Procedures

A working definition of similar benefits is provided in this volume. Based on federal legislation, state mandates, and other information, policies and procedures relating to similar benefits are described.

Volume III: Directory, Checklist, and Reporting Systems

This volume contains directories, checklists, and reporting systems for use in the similar benefits program. Many of these have been revised

from existing Virginia DRS documents. Explanations for each, with usage examples, are provided.

Volume IV: Incentives for Counselors and Administrators

This final volume discusses utilization incentive issues. Procedures for evaluation and monitoring, along with the description of the role of counselors and administrators in the area of similar benefits are also presented.

## FREQUENTLY ASKED QUESTIONS ABOUT SIMILAR BENEFITS.

The following are questions frequently asked about similar benefits. The questions are presented in major topic areas. They are not listed according to any priority or degree of importance. Volume and page numbers are provided for readers interested in further discussion on particular questions.

	<u>Volume</u>	<u>Page</u>
<u>Usage and Policy Questions</u>		
1. What is the definition of similar benefits?	II	1-4
2. What types of services and resources should be considered as similar benefits?	II	2
3. Should the clients' financial ability to pay for part of their rehabilitation program count as a similar benefit?	II	3
4. Do different state interpretations of Federal guidelines for utilizing similar benefits prevent the development of consistent and standardized procedures concerning similar benefit documentation and evaluation?	II	4-5
<u>Documentation and Data Collection Questions</u>		
1. What are alternatives for reporting dollar cost figures of similar benefits?	III	19

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2. Should similar benefit data be collected on closed or active cases?	II	6-10
3. What types of similar benefit data are needed for documentation and evaluation?	II	5
4. What forms are necessary for documenting similar benefits?	II	6-10
5. What training do counselors need for similar benefit documentation?	II	6-10
6. How are state comparisons of similar benefit utilization possible with the lack of standardized documentation and data collection?	II	4-5

#### Monitoring and Procedures Questions

1. What procedures are available for counselors to monitor clients that are eligible and/or receiving similar benefits?	III	1-7, 8-23
2. What are the alternatives for reporting dollar cost figures of similar benefits?	III	19
3. What procedures are currently used for evaluating similar benefit utilization?	I	33-45

#### State Agency Questions

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Volume

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| 2.. What are the hidden costs in similar benefit utilization?   | I  | 42-45 |
| 3.. Does the amount of money saved in similar benefit utilization justify the amount of time spent pursuing similar benefits? | I  | 33-45 |
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| 3. Does similar benefit utilization result in loss of control or inadequate feedback on clients utilizing similar benefits? | I  | 38           |
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2. What are the responsibilities of administrators and counselors in cooperative agreements?
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4. What types of conflicts exist in policies and regulations between agencies?

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Incentive Questions

1. Does similar benefit utilization increase the number of clients served?

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2. Is similar benefit utilization a cost saving benefit?

IV

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Disincentive Questions

1. Does similar benefit utilization result in service and time delays?

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2. Does lack of feedback to counselors concerning similar benefits affect similar benefit utilization?

IV

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3. Does similar benefit utilization result in excessive paperwork?

IV

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4. Will the rehabilitation agency lose its identity as a result of similar benefit utilization?

IV

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VOLUME IV

INCENTIVES FOR COUNSELORS AND ADMINISTRATORS

The title of this volume could more aptly be called "Incentives and Disincentives for Counselors and Administrators." It is arguable that the more successful an individual counselor is in obtaining similar benefits for his/her clients, the more enticing it is for a supervisor to reallocate the counselor's case service funds to a counselor who is less successful in obtaining similar benefits. For the successful counselor in this situation, a decrease in his/her case service monies would hardly serve as an incentive to obtain similar benefits. At a different level, a state rehabilitation program that is successful in obtaining similar benefits may find any request for additional state appropriations questioned. However, if the state rehabilitation agency (or rehabilitation counselor) does not use similar benefits, it is likely that under the current conditions of constant or declining case service dollars, the number of clients who could be provided rehabilitation services would be substantially less than it is.

In many ways, similar benefits present a no-win, catch 22 situation. Being too successful using similar benefits may make the agency vulnerable to finding cutbacks in case service funds. Not using similar benefits could reduce the size and scope of the rehabilitation program. In either case, funding cutbacks could occur. In addition, a dependence



on similar benefits puts the VR agency in a precarious position if there are reductions in monies to those programs. However, if similar benefits are not used, resulting in less clients served, program sponsors could question the value of the VR program. A policy of heavy reliance on similar benefits may have the effect of just keeping the agency at the same level of service delivery as was previously the case. Although legislation encourages state agencies to obtain similar benefits, it appears that there may be some strong political overtones in the encouragement.

A further issue to consider is that clients who receive similar benefits are eligible for those services. While the VR program is designed to meet a wide range of human needs and purchase appropriate services, most similar benefit programs serve only one need area. However, VR clients who are eligible for similar benefits are entitled to obtain them.

One of the most difficult issues to get a handle on is documenting the impact similar benefits has had on the rehabilitation agency. A number of factors serve to complicate this issue. For one, similar benefits are not a new concept in rehabilitation. They have been part of the service delivery system almost from the beginning of the state-federal program. In a sense, there has not been a time when the rehabilitation program has not relied on some type of similar benefits. The real reliance on similar benefits began with the development of social programs in the 1960's and 1970's. Complicating the impact picture is the effect inflation has on the cost of services and the resultant loss in buying power of case service funds. These are just some of the factors which make comparisons and calculations of the impact of similar benefits

(e.g. more clients served, or just the same number served) difficult to calculate.

As stated, a dramatic increase in similar benefit usage has occurred in the past 10-15 years. As new programs became available, the VR program began using them as similar benefits. Because similar benefits are an engrained part of the VR program further complicates the evaluation of impact on the agency and a determination of their effectiveness in meeting VR clients' needs. The remainder of this volume is devoted to presenting issues which relate to incentives for counselors, administrators, and the agency to use similar benefits.

#### Incentives for Counselors

The rehabilitation counselor represents the VR agency to the client. As such, the counselor is often described as being in the front line trenches of the rehabilitation program. The incentives that can be offered counselors fall into the broad categories of monetary and non-monetary. In reality, the question of incentives to counselors extends beyond similar benefits. Incentives and rewards for exemplary effort relate to many of the functions and tasks the counselor performs. The discussion presented will focus on incentives for counselors as they relate to similar benefits.

Part of the incentive issue is how similar benefits are viewed. If the use of similar benefits is felt to be an extra task, over and above the rehabilitation counselors' regular duties, it is likely that the counselor will want some kind of reward in return for success in ob-

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taining similar benefits. If, however, similar benefits are seen as part of the expectations of the job, the demand for an incentive may decrease. Another way to look at this is in terms of whether using similar benefits is viewed as "above and beyond the call of duty."

The attitude of the VR agency at the state and district office is an important consideration. When the perception is that the agency is committed to the concept of similar benefits, and that rehabilitation counselors are expected to use similar benefits, it is more likely that counselors will be motivated to use similar benefits. If, on the other hand, a counselor is the only individual in a district office using similar benefits, a morale problem for that person may result.

Thus, the first incentive issue for counselors is how similar benefits are perceived in the agency. If using these resources is viewed as something extra that not all counselors do, the counselors who are successful obtaining similar benefits will feel entitled to some kind of reward. If similar benefits are thought of in the same context (or level) as case service 110 funds, the incentive issue takes on a different meaning.

A second issue was mentioned previously. If a counselor is successful obtaining similar benefits, how is that person rewarded? Does the counselor have his/her case service funds reduced? Does that counselor help put the agency's 110 funds in jeopardy by showing that these funds are not needed to provide rehabilitation services? A counselor doing a good job obtaining similar benefits may be viewed negatively if for some reason similar benefits are no longer available, and he/she needs to rely on 110 case service funds.

A third issue is professionalism. A rehabilitation counselor is a professional person. Obviously, compensation should be at a level commensurate with those professional responsibilities and expectations. However, the counselor's first commitment in the professional role is to the client. As such, the counselor needs to identify and use those similar benefits, in combination with case service 110 funds, that will provide the most effective combination of services to alleviate the handicapping conditions of the client. A counselor who wants to provide the highest level of services possible to the client may need to use similar benefits.

An incentive suggested in a monograph prepared on similar benefits from the Fifth Institute of Rehabilitation Issues is to make similar benefit utilization part of the criteria by which the counselor's performance is evaluated. This would only be effective if some of the issues addressed in this section, i.e., how similar benefits are viewed in the agency, are resolved. A complicating factor to this recommendation is the basis on which to establish criteria for similar benefit usage. This would appear to be a major obstacle to resolve.

#### Recommendations

In addition to the recommendations presented, the following are included:

1. Establish goals for each counselor specifying the percentage of the counselor's total budget that should be obtained from similar benefits. This could be included in the counselor's Annual Work Plan and would serve as a guideline for similar benefit usage.

2. Implement a policy that will lessen the disincentive that usage of similar benefits will reduce the counselor's budget. The policy could provide that a counselor will receive (all things being equal) at least the same budget appropriation regardless of the amount of similar benefits used the previous year. A counselor who utilizes similar benefits more than another counselor will not be penalized by receiving a reduced budget.
3. Permit the counselor to authorize services for the client while similar benefits are being pursued to eliminate delays. Once the similar benefits are obtained, the VR authorization can be cancelled.

#### Incentives for Administrators

In the discussions the UM-RRI had with Virginia agency personnel (counselors, supervisors, and administrators), a frequently mentioned concern was that the amount of time a rehabilitation counselor spends pursuing a similar benefit resource does not always justify the money saved. If the rehabilitation counselor alone is given the responsibility for pursuing similar benefits, he/she must spend a considerable amount of time becoming familiar with all the similar benefit programs available. This places a major responsibility on the rehabilitation counselors to keep abreast of potential similar benefit programs, services, and eligibility requirements.

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To alleviate the problem, a directory of similar benefit resources is a helpful tool. At a minimum, the directory should contain (a) an organized list and description of similar benefit resources, eligibility requirements, application procedures, and a contact person for each similar benefit resource. To ensure the directory is used, it is critical that the directory (a) is relevant to each geographic area in the state, (b) is updated on a continuing basis, and (c) does not contain similar benefit programs that are no longer in existence or not appropriate to the VR program.

A related approach for alleviating the time-consuming nature of similar benefit utilization is to employ counselor aide or similar benefit specialists to identify and obtain information concerning similar benefits and to assist with some of the clerical and administrative procedures associated with obtaining such services for clients.

Agency administrators can play a key role in ensuring that rehabilitation counselors do not spend excessive amounts of time identifying and obtaining similar benefits for clients. A goal for the agency could be to make the process of using similar benefits almost as routine for the counselor as using case service 110 funds.

Agency administrators, and especially counselor supervisors, can communicate to the counselor the commitment of the agency to use similar benefits. Supervisors can also ensure that all counselors under their jurisdiction make every effort to identify and use similar benefits. In this way, individual counselors will perceive that the use of similar benefits is expected of all counselors.

As with the individual counselor, an incentive to use similar benefits for administrators and supervisors is to ensure that quality rehabilitation services are provided to as many clients as possible. With constant or declining federal support and the effect of inflation on the cost of services, the use of similar benefits helps maintain the provision of services to clients. Administrators need to recognize that similar benefits, while not able to relieve all their service delivery problems, can at least help maintain the level of services provided. The next section on "Incentives for the Agency" addresses these concerns from the perspective of the political issues raised regarding similar benefit usage.

#### Incentives for the Agency

For the rehabilitation agency, similar benefits have had a positive effect. They have enabled the VR program to maintain the quality and quantity of services in an era of declining resources. However, a theme presented throughout this section is the fear that by being too successful using similar benefits, the VR program places the need for 110 case service funds in jeopardy with program sponsors. For this reason, it is essential that the VR program present the best possible case to show how similar benefits enhance and support the use of 110 funds as mechanisms for providing rehabilitation services to clients. In this context; similar benefits are not presented as a replacement for 110 funds. Similar benefit utilization can be presented to external program sponsors as innovative procedure for planning and funding client

rehabilitation programs as complimentary funding sources.

To ensure that the VR agency has the data to present its case for similar benefit usage, documentation is essential. The recommendations presented in Volumes II and III can assist the VR program in determining the extent to which similar benefits are utilized, the VR money saved, and the additional number of clients served. With these data, the VR program can take a proactive stance in terms of funding levels. Rather than the use of similar benefits being viewed as a reason to reduce case service funds, the case can be made that because the rehabilitation program is so successful in rehabilitating clients by managing and using its own as well as other agencies' funds, case service funds should be increased. In other words, by indicating all the positive and beneficial outcomes which the VR program achieves for clients, the case can be made for an increase in funding levels. At least this could be the approach used to justify using similar benefits without jeopardizing existing funds. A key to doing this is in documenting and knowing the impact similar benefit utilization has on the agency.

#### Summary

Recommendations for incentives to use similar benefits were presented in this volume. The use of these resources can put the VR program in a no-win situation. It was suggested that state agency administrators be aware of the political ramifications the use of similar benefits has. Through documentation, the VR program can make the best case regarding how the agency effectively uses case service funds and similar benefits to rehabilitate clients.



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