

Case Study of a Program Addressing Participants' Barriers Before Providing Training and Other Work-Related Activities

Rhode Island Works

Lindsay Ochoa and Linda Rosenberg

Lead entity:

Rhode Island Department of Human Services

Service area:

Rhode Island

Setting:

Rural, urban, and suburban

Focus population:

TANF recipients

Number of participants:

1,540 in January 2020

Initial year of operation:

2018, as redesigned

Introduction

The Rhode Island Department of Human Services (DHS) administers Rhode Island Works (RI Works), the state's Temporary Assistance for Needy Families (TANF) program. Before 2016, RI Works was primarily a work-first oriented TANF program. To receive cash assistance, most participants were referred to a job search, unless they had a disabling condition and could apply for Supplemental Security Income (SSI). Most TANF recipients (henceforth, RI Works participants) who were not exempt from TANF work requirements were referred to job search activities, regardless of their barriers to work, such as poor physical or mental health.

In 2013, working with an outside vendor, DHS began planning a redesign of the TANF program. DHS staff, vendors, participants, and stakeholders were consulted to re-design the TANF program in a way that first identified participants' barriers to employment, and addressed those barriers, before directing participants to look for jobs. In

2016, working with the Kennedy School Government Performance Lab, DHS issued a request for proposals for vendors to provide services to RI Works participants that prioritize connecting participants with supports to overcome their barriers to successful employment before placing them in job search or work. Using services provided by four vendors, RI Works participants can receive supportive services and then, when ready for employment, participate in vocational training and work readiness activities. This case study highlights RI Works' provision of supportive services to help participants overcome their barriers and participate in employment-related activities and find sustainable employment.

This case study includes the following sections: [Where RI Works Operates](#); [How RI Works is Administered](#); [How Participants Experience RI Works](#); [How RI Works Uses Data](#); and [RI Works' Accomplishments and Remaining Challenges](#).

About this report

This case study (OPRE Report # 2021-65) is part of a series of nine comprehensive case studies that showcase innovative approaches for supporting the employment of low-income individuals and families, including Temporary Assistance for Needy Families recipients. Each case study highlights key components of implementation, including their linkages to wraparound supports, to expand the knowledge base of these programs. The programs featured in the series represent a diverse range of service strategies, geographies and community contexts, focus populations, and service environments. The case studies are sponsored by the Office of Planning, Research, and Evaluation in collaboration with the Office of Family Assistance, both within the Administration for Children and Families in the U.S. Department of Health and Human Services.

Where RI Works operates

RI Works operates in the smallest state in the nation, with a population of just over 1 million, but also the second most dense state, with 1,018 people per square mile (U.S. Census Bureau 2010). At the time of the case study site visit in January 2020, the state's economy was strong, with an unemployment rate of 3.4 percent (U.S. Bureau of Labor Statistics 2020a).¹ Despite low unemployment rates, more than 13 percent of the population lived in poverty.

According to RI Works staff and participants, Rhode Island's low-income residents often struggle to find affordable and appropriate child care, transportation, and housing to successfully prepare for and maintain employment:

- **Child care availability for infants and other family needs.** DHS and vendor staff indicated that child care is generally available in most regions, but that participants often struggle to find open slots for infants or find providers that are located along their bus routes, particularly in the northwest corner of the state. Parents with multiple children can face an added challenge of finding available spaces with the same provider. In acknowledgement of low payment rates for the Child Care Assistance Program (CCAP) providers, DHS reported that they actively lobby the legislature to increase the rate.
- **Transportation access, especially outside of urban areas.** Even though Rhode Island is a small state, DHS and vendor staff noted that transportation can be challenging for families, especially those living in rural areas with limited access to public transportation. Even in areas with available public transportation options, traveling to transit hubs or bus stops can be a barrier for those without a car. In various cities where public transportation is available, the routes are not always practical for



Economic snapshot of Rhode Island

Total population (2018):^a 1,056,611

Median household income (2018):^b \$63,296

Percentage of people below poverty level (2018):^b 13.1%

Unemployment rate (2019):^c 3.6%

Sources: ^a U.S. Census Bureau (2019a); ^b U.S. Census Bureau (2019b); ^c U.S. Bureau of Labor Statistics (2020a).

¹ Unemployment data presented here do not reflect shifts in the economy that have occurred since the onset of the COVID-19 pandemic. See box on page 13 for more information about changes to the economy and how RI Works responded to the pandemic.

participants who need to go to work, drop their children off at child care, or access services in areas outside of Providence, the state's capital.

- **Housing crisis for low-income families.** Rising home prices and rents coupled with reduced construction of long-term affordable homes have caused a housing affordability crisis statewide. The 2014-2018 gross rent in Rhode Island was \$981 (U.S. Census Bureau 2019c). More than a third of Rhode Island households spend more than 30 percent of their income on housing costs, meaning they are cost burdened according to U.S. Housing and Urban Development standards (HousingWorks RI 2019). Moreover, the number of areas in the state where low-income residents can afford to live has declined in recent years. HousingWorks RI reported that households with an annual income of \$50,000 cannot afford to buy a home anywhere in the state and can only afford to rent a typical two-bedroom apartment in three municipalities statewide.

How RI Works is administered

To provide RI Works participants with “individualized plans with a logical progression...[from] removing barriers and stabilizing families, then increasing client education and building professional skills, and lastly moving clients into sustainable employment,” DHS released in 2016 a request for proposals (RFP) as part of the RI Works redesign (Harvard Kennedy School 2019a, 2019b). As DHS sought new and innovative ways to serve RI Works participants, the RFP was less prescriptive than for prior DHS procurements. After the initial RFP resulted in bids that proposed business-as-usual solutions, DHS discussed with potential vendors the state's vision for a more-holistic approach to supporting RI Works participants through supportive services and rereleased a similar RFP in June 2017. Ultimately, DHS contracted with four vendors to provide services statewide within one or more of these components.



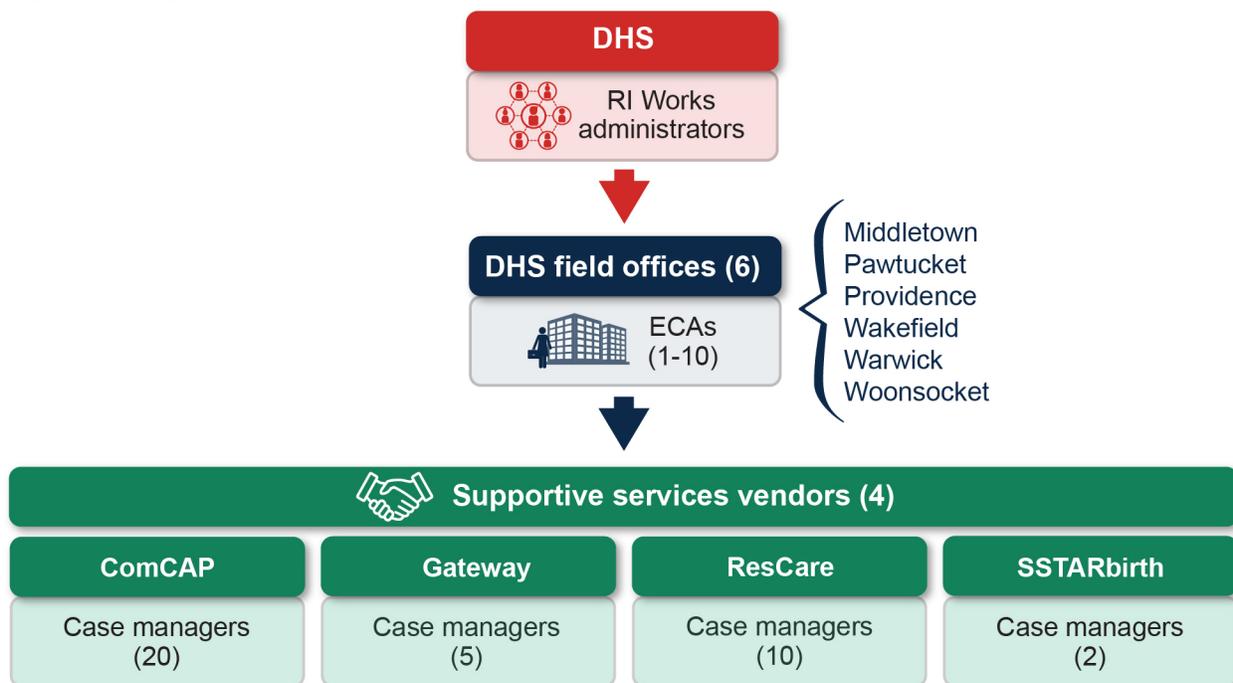
Key program practices

- Introduce active contract management and performance-based funding
- Leverage funding sources and reallocate excess funds to finance innovative approaches or programs that meet participant needs
- Embed supportive services in RI Works vendor contracts and emphasize a client-focused approach

DHS and RI Works vendor responsibilities

At DHS, the RI Works administration team manages the \$31.4 million TANF-funded program, coordinates with staff at the DHS field offices, and monitors the vendors (Figure 1). At each of the six DHS field offices, senior casework supervisors manage employment and career advisors (ECAs) who work directly with participants and refer them to a RI Works vendor. ECAs meet with participants as they come into the office to enroll in RI Works, develop new employment plans, or make other changes to their cases. They do not carry an ongoing caseload of participants. In the larger offices, in particular, the ECAs rely on detailed case notes to ensure a continuity of services.

Figure 1. Organizational structure of RI Works



Source: Interviews with DHS and vendor staff; staffing counts reflect staffing when fully staffed

Note: The number in parentheses represents the number of case managers at each location

Vendor service provision. The vendors are contracted to provide services in one or more of four primary areas: (1) supportive services to address health and other barriers, (2) teen and family services to help pregnant and parenting youth obtain a high school diploma or its equivalent and address their barriers to work, (3) vocational training, and (4) work readiness.

Each of the four RI Works vendors provide supportive services that address participants’ employment barriers (Figure 2).² DHS ECAs connect participants to case managers at these organizations who work with them to overcome their barriers to successful employment. Barriers might relate to mental or physical health, child care, transportation, housing, substance use disorders, and/or domestic violence.



Training for case managers and DHS ECAs

- Vendor case managers reported that they received training on several case management strategies, including motivational interviewing and providing trauma-informed services. For example, at ComCAP, case managers attend monthly meetings during which they discuss difficult cases and how best to support their participants.
- The DHS ECAs reported that they receive “one-off” trainings on relevant topics. For example, early in 2020, ECAs received training on the SNAP E&T program and its eligibility requirements.

² In January 2020, ResCare was not a formal supportive services vendor. However, because case managers at ResCare were providing supportive services to participants, DHS planned to update their contract and formalize their role as a supportive services vendor.

Figure 2. RI Works vendors that provide supportive services

ComCAP	Gateway
 <p>Comprehensive Community Action Program (CCAP) as the lead, the state’s seven regional CAP agencies bid together for the first time as the RI Works Statewide Community Action Program Initiative (ComCAP). ComCAP serves RI Works participants whom DHS identifies as needing services in any one of the four components. Together, the network has the capacity to connect participants to a range of services, including health, employment, and other wraparound services. The CAP agencies provide similar services, yet each might also offer special programs that other agencies do not offer. For example, the Community Care Alliance in Woonsocket treats people directly for mental health and addiction issues.</p> <p style="text-align: center;">● ● ● ●</p>	 <p>Gateway, whose partnership with DHS began in 2005, is a health care agency. Currently, it serves as the main vendor that assesses RI Works participants for SSI eligibility and thus serves participants who have pending applications for SSI. Gateway uses an intensive case management model where staff visit with participants in their homes at least once a week. Case managers connect participants with appropriate supportive service providers to address their employment barriers related to untreated behavioral health disorders, physical disabilities, trauma, substance use, and homelessness. When participants are ready for work, Gateway provides work readiness services.</p> <p style="text-align: center;">● ●</p>
ResCare	SSTARbirth
<p>ResCare ResCare’s presence in Rhode Island began in 2017 with its RI Works contract. ResCare works primarily with participants who are assigned to pursue vocational training or work readiness, but case managers also work closely with participants to address barriers within the supportive services component such as those related to clothing, child care, transportation, and housing. Participants also attend workshops on various topics related to employment, such as resume development and job search tools, and work one on one with their case manager to pursue career goals.</p> <p style="text-align: center;">● ● ● ●</p>	 <p>SSTARbirth has been a DHS partner since the 1990s. This six-month residential treatment program serves women with children (as well as those who are pregnant) who have substance use disorders and mental health barriers. The program has a physical capacity to serve 12 women and 24 children who live at the SSTARbirth facility and receive various wraparound services. Such services include child care (through a facility on-site), substance abuse treatment, intensive therapy, medication management, counseling, group therapy, housing support, benefits access, transportation, and other community resources as needed.</p> <p style="text-align: center;">●</p>

Notes: Colored circles denote the components in which each vendor can provide services to RI Works participants: ● supportive services; ● teen and family services; ● vocational training; ● work readiness.

Each vendor partner has a leadership team or project director who oversees the case workers’ efforts and serves as the primary point of contact with DHS. Vendor partners vary in size, but each has 2 to 20 case managers operating in various locations throughout the state. For example, ResCare, which served 414 (as

of January 2020) participants across all four components, has 10 case managers who work out of the state’s four one-stop career centers, which are also called American Job Centers. Staff caseloads vary by vendor and location but range from 6 receiving supportive services at SSTARbirth to about 50 participants per case manager at ComCAP.

Contract management and performance

With the new vendor contracts, DHS introduced active contract management (ACM) and performance-based funding.

- ACM to enhance coordination among the vendors and improve participants’ experiences.** ACM, developed by the Harvard Kennedy School Government Performance Lab, is a set of strategies that guides government agencies’ use of data and their purposeful and regular interactions with their service providers (Harvard Kennedy School 2017). As part of the ACM approach, RI Works administration meets with vendor leadership together monthly to discuss program improvements, challenges, and participant outcomes. DHS monitors and presents at each meeting participant data for the RI Works program overall and for each vendor. Using these strategies, leadership at DHS and vendor partners reflect on and improve RI Works services and participant outcomes in real-time (Harvard Kennedy School 2019a, 2019b).
- Performance-based funding to incentivize vendors.** Vendors receive about 80 percent in cost-reimbursement funding, and the remaining 20 percent is allocated based on performance. Vendors receive the performance payments as participants achieve certain outcomes or milestones specified in their contracts. Table 1 outlines the performance-based incentive payments available to vendors that serve participants within the supportive services component.



Funding innovations to meet participants’ needs

From year to year, the cost of RI Works fluctuates. DHS might have funds remaining after paying vendors or realizing other cost savings. At the end of each quarter, DHS challenges its vendors to develop new programs or plans that will better serve RI Works participants. If a vendor proposes a project that is possible and will address a program need, DHS allocates the extra funds to facilitate those enhancements.

Table 1. Performance-based incentive payments available to supportive services vendors

Performance measure	Dollar amount per client
Number of supportive service activity hours per month (payments made monthly)	
Participant achieves less than 75 percent of assigned activity hours	\$0
Participant achieves at least 75–84 percent of assigned activity hours	\$5
Participant achieves at least 85–94 percent of assigned activity hours	\$10
Participant achieves at least 95 percent of assigned activity hours	\$25
Participant earnings (payments made quarterly)	
Client (not on hardship) is employed 6 months after the Employment Plan start date	\$500*
Client (on hardship) is employed 6 months after the Employment Plan start date	\$750*
Client earns at least \$4,000 in the fifth quarter following the quarter of the Employment Plan start date	\$1,000*

Source: DHS contract addendum III, 2019.

* A vendor may receive two performance payments per participant: one for employment six months after enrollment (either \$500 or \$750) and one for earning \$4000 in the fifth quarter after enrollment (\$1000).

How participants experience RI Works

Before the redesign of RI Works, case managers' ability to help people in crisis was limited. ECAs could exempt participants and provide resource pamphlets about how to address their hardships, or they could make referrals to Gateway for SSI evaluation, make a referral to the Office of Rehabilitation Services (ORS), refer them for education or training, or send them to job search activities. The current approach allows ECAs and case managers to work together to provide individualized services to RI Works participants directly or through partners and community providers while also monitoring their progress. To fully capture the experiences of cash assistance recipients who have received referrals for services in the supportive services component, we follow them from approval for cash assistance through successful employment and exit from RI Works. Figure 3 shows how RI Works participants progress through RI Works.

DHS staff perspective

"I can send someone [for training]... all day long but if they have an 8th grade education, then they aren't going to get a job that can sustain their family."

Initial steps with DHS

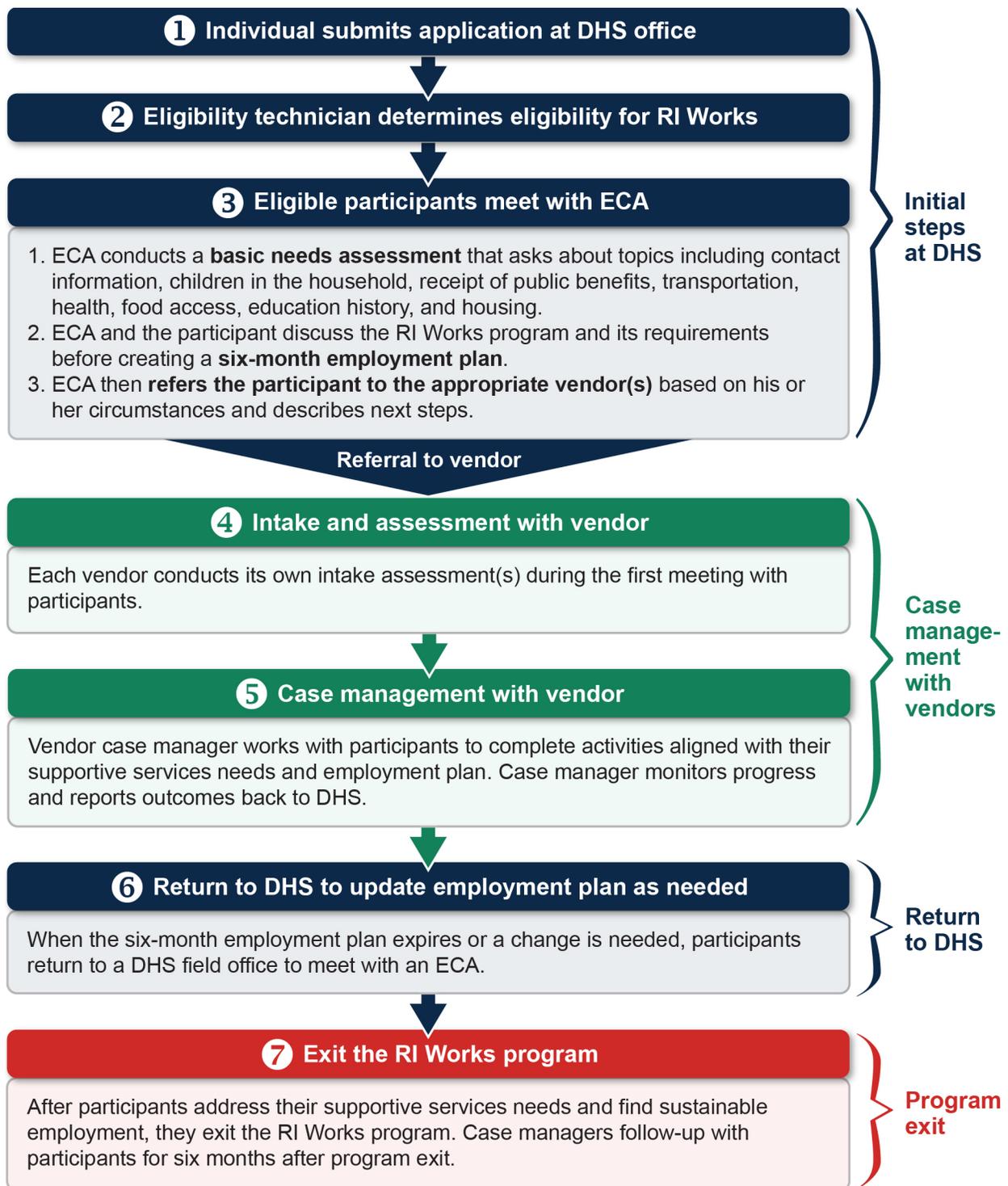
After a DHS eligibility technician determines a person's eligibility for cash assistance, the person meets with an ECA who carries out three initial activities. The ECA conducts a needs assessment, develops an employment plan with the participant, and connects the participant with the appropriate vendor.

- **Conduct needs assessment.** The needs assessment helps the ECA determine if the participant is prepared for work or if barriers would impede success in finding or maintaining work. A participant in the former category would receive a referral to a vendor for vocational training or work readiness, while one in the latter category would receive a referral for supportive services.
- **Develop employment plan.** The employment plan, which typically covers six months, specifies the assigned RI Works component. The plan does not specify required activities within the component, thus the participant does not have to reengage with DHS during the six months while working with his or her vendor case manager on personal goals. After initial enrollment, participants only come into a DHS field office to meet with an ECA if they need to change the plan or the six-month plan is ending.
- **Connect participants to vendors.** When selecting a vendor to provide these services, the ECA considers participant and vendor location, participant access to transportation, participant service needs, and any participant preferences. For example, some participants have worked with vendors in the past and might prefer to work with them again or, conversely, had a negative experience with a vendor and request a different placement. A participant might also receive a split referral to receive services in two areas and perhaps from different vendors. In these instances, the participant's required hours would be split between addressing supportive services needs and pursuing vocational training or work readiness. This tends to occur if the participant's supportive services barriers are minor, or if the participant insists on looking for work despite significant barriers.

DHS staff perspective

"It's kind of tough to take the supportive piece away, no matter what component you are in. The situation changes so quickly with these families... When they start looking at the individuals and the families... very often you see that they'll need assistance with other things."

Figure 3. RI Works participant flow



Source: Interviews with DHS and vendor staff.

Vendor case management

Vendor case managers are participants' primary point of contact. Vendor case managers must contact participants within two to three days of receiving the assignment from DHS. Each vendor then carries out its own in-depth intake and assessment processes with participants. For example, Gateway administers a psychosocial assessment and an extensive vocational assessment to gauge participants' function levels. After intake and assessment, vendor case workers help participants to complete activities that align with the component(s) specified in their employment plan. One vendor case manager described the current approach to case management as "meeting [participants] where they are to get them where they want to be while keeping them comfortable." As an example of providing extra support, a case manager described accompanying a participant to a medical appointment to translate the conversation between the Spanish-speaking participant and her doctor about her symptoms and the doctor's diagnosis.

Vendor staff perspective

"The lens is always: we have to deal with where we are, build you up to where you can be stronger, and figure out how to get you on the next pathway."

Participants often have more than one challenge preventing them from finding and maintaining employment, so case managers must prioritize the services or referrals they provide. For example, at ComCAP, case managers work with participants to create a goal sheet that they use to identify the areas of highest need and proceed accordingly. Case managers

described using the goal sheet to create incremental steps that participants can take to achieve their more immediate goals, noting the process to address their numerous barriers can sometimes feel overwhelming.

As appropriate, case managers from different vendors explained that they work with participants on activities outside of the referral component if they identify a need. For example, if a participant who requires supportive services is adamant about pursuing employment, a case manager might suggest the person work part time until resolving his or her immediate barriers. This flexibility allows case managers to effectively serve RI Works participants' range of service needs. Depending on the vendor and service, case managers provide the services directly, connect the participant to another specialized staff member at their organization (for example, a vocational specialist), or make necessary referrals to partner agencies. One vendor staff member explained that RI Works participants' needs are not easily compartmentalized and even the participants who are engaged in a job search still require supports to overcome challenges.

Participant engagement and retention

Case managers from all vendors described being in contact with RI Works participants on their caseload at least weekly. Participants and case managers maintain contact through in-person meetings, email, text messages, and telephone calls. Case managers check in with participants to ensure they are moving forward with their assigned activities and complying with their employment plan. In general, compliance indicates that participants are attending appointments and



Vendors emphasize a client-focused approach

ResCare staff who work with RI Works participants use the expression RAYS, which stands for ResCare At Your Service, to describe their client-focused approach. ResCare also surveys its participants regularly to assess their experience, the quality of the services they received, and any lingering needs.

completing the activities assigned by their case manager. If participants are not complying with their plan, the vendor case managers inform DHS, and an ECA follows up with participants to make an appointment to discuss potential changes to the participants’ employment plan. If participants miss the appointment or if the ECA is unable to contact them, a sanction on cash benefits takes effect.

Some vendors use group events or a cohort model to promote relationships between participants, which can increase engagement and retention in the program. For example, ComCAP brings participants together for certain voluntary services, such as financial literacy and self-esteem workshops, to connect participants. ResCare holds group orientations that enable participants to bond with one another and build networks that can help them in an emergency. For example, when one participant’s car broke down on the way to a ResCare workshop, she was able to call another participant who picked her up so they could both attend.

Supportive services

To build a strong foundation for success, RI Works first strives to help stabilize families by addressing their barriers—such as housing, mental health, transportation, child care, and substance use disorders—before guiding participants into training or employment. In January 2020, about 792 of 1,540 RI Works participants received supportive services.³ Table 2 presents the number of participants referred for supportive services, organized by barrier.

Table 2. Number of supportive service barriers identified by RI Works participants, January 2020

Mental health	Education ⁺	Housing	Substance use	Child care*	Transportation*
351	202	211	71	950	968

Source: DHS provided data.

Note: The number of RI Work participants was 1,540. Of these participants, 792 received supportive services. Numbers in each cell do not sum to the total because participants reported multiple barriers.

+ This case study does not discuss in detail strategies to address participants’ education barriers because these barriers are addressed in other subsequent components on the pathway to employment (for example, as part of vocational training or work readiness activities).

*Numbers in these columns include participants whose needs were successful addressed.

Vendors described several ways of working with participants to address commonly identified barriers:

- **Identifying mental health services.** Case managers work to form trusting relationships with participants with mental health issues and encourage them to pursue a formal diagnosis and treatment. If participants are not in treatment, case managers can refer them to specialists at their agency or to a partner agency that specializes in providing mental health services. ResCare staff described using an online platform, Zencare, that enables participants to review information about mental health providers that accept Medicaid, including their location and a video of the provider. Through this approach, participants have the autonomy to choose a provider who they feel comfortable with rather

³ This number does not include all the participants “informally” receiving supportive services at ResCare, as they were not an official supportive service vendor at the time.

than being assigned to one. If participants are already receiving services, case managers will check in regularly with them about the services to assess whether a change is necessary.

- **Helping participants find affordable housing.** A critical barrier many RI Works participants face is affordable housing. Case managers support participants' need for stable, affordable, or temporary housing, often by working with other providers, such as Crossroads, a statewide homeless services organization. Even after finding and moving into affordable housing, participants might need additional support to improve the quality of the housing. For example, if the housing needs repairs to be safe and livable, the case manager can assist the participant with options, such as seeking improvements from the landlord, identifying resources to make necessary improvements or purchase furniture, or working to find alternative arrangements.
- **Accessing transportation.** RI Works participants, particularly those who live outside of urban areas, do not always have reliable transportation options. For those with access to public transportation, RI Works provide bus passes, but case managers and other staff noted inefficiencies in the system for issuing these passes. As a result, one vendor provided bus passes directly to its participants. Many other participants do not have access to public transportation that they can take to work or services. Thus, some providers are developing other solutions to address transportation barriers. For example, for RI Works participants who do not live near a bus line, ComCAP obtained funding from the Rhode Island Public Transit Authority and DHS to provide van access for participants to travel to and from trainings and other program activities. In addition, case managers reported traveling to meet participants in locations that are convenient for them, such as a public library or a Dunkin' Donuts.
- **Supporting families' search for child care.** RI Works participants are eligible for child care subsidies through the CCAP. Parents receive a certificate to cover the costs of child care up to a certain amount that is valid for one year, regardless of whether they meet the requirements of the RI Works program. Case managers can advise families on accessing quality child care arrangements and can help participants find alternative arrangements. For example, case managers might make appointments for participants to visit five child care providers with openings to assess whether they would feel comfortable leaving their child there. If parents cannot find quality child care with openings, case managers work with them and, if necessary, case managers can use an "excused absence" in their employment plan until child care is located.
- **Providing supports for participants who struggle with substance use disorders.** DHS and vendor staff described serving RI Works participants who are self-medicating or struggling with substance use disorders and addiction. Case managers work with participants and encourage them to pursue substance use treatment or counseling aligned with their needs and preferences. For example, participants might prefer a walk-in facility over a residential treatment option (see box below for a



Innovative approach to leverage funding to enhance services

Even though RI Works provides bus passes to participants, public transportation throughout Rhode Island is very limited, especially in rural areas without bus lines. To better address this barrier, one of the RI Works vendors received a \$150,000 grant from the Rhode Island Public Transit Authority to implement van access for RI Works participants to get to and from trainings and other program activities. DHS was able to match the grant using unexpended TANF funds.

residential treatment option). Certain vendors can provide substance use services directly while others refer participants to specialized providers. As participants receive appropriate services, vendor case managers check in regularly and monitor their treatment.

RI Works participants can access other services through the vendors to help mitigate barriers to employment, such as the following:

- **Financial literacy.** DHS requires all vendors to help RI Works participants attain financial literacy. Although the specifics of the financial literacy curriculum and vendors' approach to providing financial literacy services vary, all vendors create financial plans or budgets with participants, provide coaching on credit scores and ways to increase credit scores, and provide benefits counseling to help participants effectively manage their benefits.
- **Legal services.** Multiple vendors offer connections to legal services for participants, including information sessions, expungement clinics, and access to pro-bono attorneys. For example, ResCare works with the public defender's office to help participants understand and navigate the expungement process, which addresses prior criminal convictions that restrict their employment.



Program to address substance use disorder barriers at SSTARbirth

At SSTARbirth, a residential facility for up to 12 women and their children, participants engage in treatment and activities to achieve sobriety. The facility views sobriety as the strong foundation that will help women when they return to the community. In addition to the six-month SSTARbirth housing, participants have access to on-site child care and receive treatment. SSTARbirth has an on-site licensed daycare where participants' children stay while the women receive treatment from a mental health specialist and substance abuse counselors. While undergoing treatment, women are connected to providers in the community who will maintain a relationship with participants after their treatment ends, such as recovery coaches. SSTARbirth facilitates access to any necessary services, such as housing, at the time of discharge in the communities to which participants are moving. Women receiving services at SSTARbirth do not focus on employment during their treatment. After they exit SSTARbirth, the ECA from DHS might refer them to another vendor to receive vocational training or work readiness services.

Employment and post-employment services

After barriers related to supportive services are adequately addressed, participants move into other components, such as vocational training and work readiness, to prepare them for employment. Depending on their needs, participants might receive a split referral, in which they meet required hours to address their supportive services needs and, concurrently, participate in vocational training or work readiness services. RI Works case managers facilitate access to employment services by providing them directly or connecting participants to another staff member at their agency who specializes in employment, or

through referrals to specialized partner providers. For example, ResCare case managers provide job search assistance, employment workshops on topics such as resume writing and interviewing techniques, and other direct employment services. ResCare also commonly refers participants to one of its partners, Genesis Center, to access specific training programs, including those in culinary arts, health services, homemaking, medical assistant training, and certified nursing assistant training, as well as English for Speakers of Other Languages (ESOL) classes.

How RI Works adapted during the COVID-19 pandemic

At the end of June 2020, Rhode Island had the highest rate of COVID-19 cases per capita in New England and one of the highest rates in the country, at 1,587 cases per 100,000 residents.^{a,b} The unemployment rate also rose dramatically as a result of the pandemic, reaching a high of 18.2 percent in April 2020, although it began trending downward in the following months, dropping to 13.5 percent in June 2020.^b At the height of the pandemic, DHS shifted its focus from employment activities to ensuring the safety and health of participants and their children. During this time, RI Works did not administer sanctions and limited case closures. To respond to the needs of participants, RI Works did the following:

- **Transitioned to virtual case management.** Most staff working for vendors and DHS received laptops and shifted to a largely work-from-home schedule. Vendor case managers and ECAs held phone and virtual meetings through Zoom to engage with each other and participants. Although ECAs continued coming into the office at least once per week, they did not meet with the public. As an alternative to visiting a DHS field office in person, ECAs set up phone appointments with participants.
- **Increased frequency of communication between vendor case managers and participants.** DHS required vendor case managers to reach out to participants more frequently during the pandemic. Instead of weekly contacts, case managers were expected to contact participants three times per week through texts, emails, and phone calls to ensure their needs were being met. DHS requested that vendor case managers ask specific questions to identify immediate family needs and asked vendors to collect additional data on the number of calls they had made and number of participants they had reached. These additions did not require a change to the original contracts.
- **Adapted to meet parents' basic needs.** Out of concerns for the health, safety, and needs of families and their children during the pandemic, the state worked to provide Rhode Islanders with access to basic needs, such as through food pantries, and with technology to support remote learning for school-age children. For example, the governor negotiated with cell phone carriers to provide unlimited data through smartphone data plans to enable free Internet access to many families. By June, most child care facilities re-opened across the state, but many participants did not feel safe sending their children to their child care providers. To address the need for child care while parents were engaged in activities, two RI Works partner vendors organized virtual camps or activities for children in the morning. The children also received an activity packet to work on during the afternoon.

Sources: ^a USA Facts (2020); ^b Johns Hopkins Coronavirus Resource Center (2020); ^c U.S. Bureau of Labor Statistics (2020a).

Vendor case managers engage with participants for up to six months after they begin employment and no longer receive cash assistance. During this time, case managers work with participants to develop plans for addressing potential crises and assist them in their financial planning, which is particularly important after they achieve a steady income and might become ineligible for certain benefits. For example, one participant who recently stopped receiving cash assistance explained that she planned to attend available workshops and continue to meet with her case manager, with whom she had a close relationship.



Sarah's* story

Sarah is a RI Works participant with a criminal background. She said that she would be called for job interviews based on her resume, but then would not be offered the jobs once employers conducted a background check. She noticed flyers at her vendor location for the expungement clinic and decided to attend. At the clinic, Sarah worked with legal professionals who set necessary court dates, explained her situation to a judge, and supported her throughout the expungement process. Ultimately, Sarah cleared her record of past charges and found work in a company that has opportunities for advancement.

**Participant's name has been changed.*

How RI Works uses data

Types and uses of collected data

As part of ACM, DHS analyzes each vendor's performance monthly. RI Works leadership also holds quarterly meetings with its vendors during which they extensively review program data and discuss ways to improve services. RI Works leadership relies on the collected data to assess the extent to which vendors are meeting their performance milestones for performance-based funding.

Data systems and data processes

For RI Works, DHS uses two state systems. One, Rhode Island Bridges, is an integrated eligibility data system for 17 DHS programs, including RI Works, the Supplemental Nutrition Assistance Program, Medicaid, and the CCAP. Vendors do not have access to Rhode Island Bridges. Second, to communicate participant information, such as attendance in required activities, to DHS, RI Works vendors enter data into a separate shared data system called Employment Activity Referral and Response system (EARR). Vendors also receive information about referred participants through EARR. DHS ECAs information automatically goes into EARR and vendor staff enter data into their own systems as well as EARR. For example, the CAP agencies all track their participants using their shared data system, Codect™.

Sample of data items that RI Works collects

- New enrollments by vendor, and in each component
- Number of participants engaged in each component
- Number and type of barriers that clients identify
- Participant attendance in activities
- Percentage of participants receiving or in need of:
 - o Transportation assistance
 - o Subsidized child care
 - o Financial literacy training
- Number of new job placements by vendor
- Starting wages of participants

DHS has worked with the vendors to create dashboards of important participant information. To ensure the dashboards present accurate data from vendors, DHS requires the vendors to submit monthly Excel spreadsheets completed with 80 data points about their RI Works participants. DHS then uses those data to monitor RI Works and participant outcomes as part of the ACM approach. Using the vendor-reported

data, DHS generates reports and dashboards and uses those to review vendor performance and track program trends over time. To ensure data quality, DHS cross-checks the information it receives in monthly reports with the EARR data that vendors enter.

RI Works' accomplishments and remaining challenges

DHS restructured the RI Works program to address participant barriers before moving participants to seek employment. Through the redesign, DHS and vendor case managers are working to address the needs of RI Works participants and their families in a holistic manner so participants can succeed in the workplace. Respondents identified promising practices and remaining challenges.

In particular, DHS implemented the following promising practices:

- **Active contract management and performance-based funding.** DHS uses this approach to actively monitor performance, enhance coordination among the vendors, incentivize vendors to achieve certain outcomes, and improve participants' experiences.
- **Leveraged funding.** DHS leverages other available funding sources beyond TANF and allocates excess TANF funds to vendors to implement new programs or services to address participant needs. For example, DHS supported a van service to serve families that do not have easy access to public transportation routes.
- **Supportive services to address client needs.** DHS embeds supportive services in RI Works vendor contracts. This allows vendors to use a client-focused approach and address participants' supportive service barriers while still receiving performance payments as participants achieve certain outcomes or milestones.

As they continue to enhance RI Works to better serve program participants, DHS reported several challenges. The first is data collection. Developing DHS' system to track and monitor its vendors' data



Work requirement participation in Rhode Island

Rhode Island redesigned its TANF program, in part, to address its low Work Participation Rate (WPR), the federal measure that reports the percentage of TANF recipients not exempt from work requirements who are engaged in allowable work activities. In fiscal year 2017, the state's WPR for all families was 8.5 percent, which exceeded its adjusted target of 0 percent but was below the national rate of 53 percent.^a Determining that participants were not engaged in work activities because of the barriers they faced, DHS moved to provide more employment-related supports, which are often not counted in the federal measure. After providing these supports, DHS expected that the number of participants engaged in the allowable work activities would increase. However, the state's fiscal year 2019 WPR remained about the same at 8.9 percent, which also exceeded its target of 0 percent but fell below the national rate of 47.1 percent.^b

Note: For more information about the WPR and how state WPR targets vary, see <https://fas.org/sqp/crs/misc/RL32760.pdf>.

Sources: ^a Office of Family Assistance (2018); ^b Office of Family Assistance (2020).

was labor intensive. Currently, although it is an efficient system to collect these data, DHS administrators must ensure uniform data collection across all RI Works vendors. Specifically, DHS staff described planned efforts to confirm that each data point means the same thing to each vendor and is being tracked consistently and comparably across all vendors. For example, all vendors provide data on the number of participants who receive financial literacy services, but financial literacy services vary across vendors. A related example is that some vendors use a curriculum to provide financial literacy services throughout the program while others only provide such services at intake and program exit. Such variation makes it difficult to compare that particular data point across vendors.

The second challenge is moving participants into competitive employment. RI Works is ultimately an employment program, encouraging its participants to find sustainable employment and no longer require cash assistance. However, the state's data showed that in the first quarter of 2020, the average amount of time participants spent in supportive services was eight months, indicating that many participants were not progressing from supportive services to employment-focused components. The multiple challenges many participants face might be more intractable and require more intensive supports than are possible through the six-month employment plan. Many RI Works participants receive multiple referrals for supportive services and make limited progress toward self-sufficiency. To address this concern, DHS is working closely with vendors to ensure participants are transitioning from supportive services into employment, vocational training, or work readiness. To facilitate this, DHS is actively monitoring vendor data to determine which supportive services are associated with the participants who are successfully moving into employment and encouraging co-enrollment in employment-related activities when appropriate.

FOR MORE INFORMATION

Rhode Island Works

Kimberly Rauch
RI Works / TANF administrator
Kimberly.Rauch@dhs.ri.gov
<http://www.dhs.ri.gov/Programs/RIWorksProgramInformation.php>

Office of Planning, Research, and Evaluation, Administration for Children and Families

Girley Wright
Senior program analyst
girley.wright@acf.hhs.gov

Mathematica

Linda Rosenberg
Principal researcher
lrosenberg@mathematica-mpr.com

Lindsay Ochoa
Researcher
lochoa@mathematica-mpr.com

Methodology

The State TANF Case Studies project seeks to expand the knowledge base of programs that help low-income individuals, including TANF recipients, prepare for and engage in work. The project is showcasing nine programs selected because of their different approaches to working with these individuals. Mathematica and its partner, MEF Associates, designed and conducted the study.

To select programs for case studies, the study team, in collaboration with the Administration for Children and Families (ACF), first identified approaches that showed promise in providing low-income individuals with employment-related services and linking them to wraparound supports, such as child care and transportation. These approaches might increase self-sufficiency directly by helping participants find employment or indirectly by providing supports and alleviating barriers to employment. The study team identified four approaches, or domains:

1. Wraparound supports
2. Full-family transitional housing and supports
3. Employment-based interventions
4. Collective impact and collaborative community initiatives

Within each domain, the study team then identified potential programs by searching key websites, holding discussions with stakeholders, and reviewing findings and lessons from ACF and other studies. The next step was to narrow the list of programs based on initial discussions with program leaders to learn more about their programs and gauge their interest in participating. The final set of case study programs was selected for diversity, in terms of geography and target population. Case studies of these programs illustrate the diverse practices operating around the country to assist TANF recipients and low-income individuals in finding and maintaining employment. Their selection does not connote ACF's endorsement of the practices or strategies described.

For each program selected, two or three members of the project team conducted a site visit to document its implementation. For eight programs, team members conducted two- to three-day visits to an average of two locations per program. The visit to the ninth program was conducted virtually via video conferencing due to COVID-19 pandemic travel restrictions. Each site visit consisted of semistructured interviews with administrators of the program, leaders of their partner agencies, and the staff providing direct services. The site visit teams interviewed, on average, 15 staff per program. During in-person visits, the teams also conducted in-depth interviews with an average of three participants per program and reviewed anonymized cases of an average of two participants per program. In addition, teams observed program activities, as appropriate.

For this case study, two members of the research team conducted a two-and-a-half-day visit in January 2020 to two Rhode Island Department of Human Services (DHS) offices and five vendor locations across the state. The team conducted semistructured interviews with six DHS staff, including administrators and employment and career advisors, and 15 vendor administrators and case managers. In addition, the team conducted in-depth interviews with five participants from three different vendors and reviewed anonymized case files for two participants with their case managers. The team conducted a follow-up telephone call in July 2020 with a program leader to learn how RI Works responded to the COVID-19 public health emergency.

References

- Harvard Kennedy School Government Performance Lab. “Active Contract Management: How Governments Can Collaborate More Effectively with Social Service Providers to Achieve Better Results.” Boston, MA: Harvard University, September 2017.
- Harvard Kennedy School Government Performance Lab. “Redesigning Employment Supports for Low-Income Families in Rhode Island.” Boston, MA: Harvard University, 2019a.
- Harvard Kennedy School Government Performance Lab. “Rhode Island TANF Work Supports.” Boston, MA: Harvard University, 2019b. Available at <https://govlab.hks.harvard.edu/rhode-island-tanf-work-supports>. Accessed April 6, 2020.
- HousingWorks RI. “2019 Housing Fact Book.” Bristol, RI: Roger Williams University, 2019. Available at https://www.housingworksri.org/Portals/0/Uploads/Documents/2019%20Pages/HFB2019_compressed.pdf. Accessed April 6, 2020.
- Johns Hopkins Coronavirus Resource Center. “Maps and Trends, Cumulative Cases.” 2020. Available at <https://coronavirus.jhu.edu/data/cumulative-cases>. Accessed July 2, 2020.
- Office of Family Assistance. “Work Participation Rates - Fiscal Year 2017.” June 2018. Available at <https://www.acf.hhs.gov/ofa/resource/work-participation-rates-fiscal-year-2017>. Accessed November 24, 2020.
- Office of Family Assistance. “Work Participation Rates - Fiscal Year 2019.” August 2020. Available at <https://www.acf.hhs.gov/ofa/resource/work-participation-rates-fiscal-year-2019>. Accessed November 24, 2020.
- U.S. Bureau of Labor Statistics. “Statewide Data, Employment status of the civilian noninstitutional population, seasonally adjusted.” June 2020a. Available at <https://www.bls.gov/lau/rdscnp16.htm>. Accessed August 20, 2020.
- U.S. Bureau of Labor Statistics. “Unemployment Rates for States, 2019 Annual Averages.” 2020b. Available at <https://www.bls.gov/lau/lastrk19.htm>. Accessed July 6, 2020.
- U.S. Census Bureau. “Selected Social Characteristics in the United States: Rhode Island. 2014–2018 American Community Survey 5-Year Estimates.” 2019a. Available at <https://data.census.gov/cedsci/table?g=0400000US44&y=2018&d=ACS%205-Year%20Estimates%20Data%20Profiles&tid=ACSDP5Y2018.DP02>. Accessed June 30, 2020.
- U.S. Census Bureau. “Selected Economic Characteristics: Rhode Island. 2014–2018 American Community Survey 5-Year Estimates.” 2019b. Available at <https://data.census.gov/cedsci/table?tid=ACSDP5Y2018.DP03&g=0400000US44>. Accessed June 30, 2020.
- U.S. Census Bureau. “QuickFacts: Rhode Island. 2019.” 2019c. Available at <https://www.census.gov/quickfacts/fact/table/RI/IPE120218#IPE120218>. Accessed April 6, 2020.
- U.S. Census Bureau. “Rhode Island: Basic Information.” 2010. Available at <https://www.census.gov/geographies/reference-files/2010/geo/state-local-geo-guides-2010/rhode-island.html>. Accessed April 6, 2020.
- USAFacts. “US Coronavirus Cases and Deaths.” July 30, 2020. Available at <https://usafacts.org/visualizations/coronavirus-covid-19-spread-map/>. Accessed August 20, 2020.

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