



Veterans CARE

Project Summary

December 2021

Project Background and Context

Launched in 2018, the Veterans Coordinated Approach to Recovery and Employment (Veterans CARE) Project is the first Pay for Success Project to explicitly focus on supporting veterans. The U.S. Department of Veterans Affairs (VA), Commonwealth of Massachusetts, City of Boston, and New York City Department of Veterans' Services collectively committed to pay up to \$6 million in outcome payments through June 2021 if the program's enrolled veterans achieved positive outcomes. Five lenders participated in the Project, committing a total of \$5.1 million to help unemployed or underemployed veterans with service-connected post-traumatic stress disorder (PTSD) attain competitive, compatible employment through the application of the Individual Placement and Support (IPS) model. The Tuscaloosa Research and Education Advancement Corporation (TREAC) coordinated the implementation of services. Social Finance, a national impact finance and advisory nonprofit, served as the intermediary, providing Project structuring and ongoing impact management support. A third-party independent evaluation was conducted by Westat.

In Summer 2020, in response to the ongoing negative impact of Covid-19 on program enrollment, the stakeholders restructured the Project to wind down lender participation and move to an outcomes-based contract with continued support from the VA, Commonwealth of Massachusetts, and the City of Boston. Services in New York City were delivered to enrolled participants through September 2021 under Veterans CARE. By leveraging outcomes-based payments from the VA, Commonwealth of Massachusetts, and City of Boston, the Project continued to deliver services and measure outcomes across its Massachusetts sites through September 30, 2021.

Following sustained, strong veteran employment outcomes throughout this period, the Commonwealth of Massachusetts funded a 15-month extension of Veterans CARE beginning in October 2021 and continuing through at least December 2022. Recognizing that IPS can work for all veterans, including those managing conditions outside of PTSD, the Veterans CARE extension expands eligibility criteria to reach veterans 18 and older with PTSD or military sexual trauma (MST), regardless of whether the diagnosis is service-connected, who are unemployed, underemployed, or vulnerably employed. Consequently, the extension will enable Veterans CARE to scale impact to date, extend IPS service delivery and create significant benefits for additional Veterans.

Project Achievements

Expanded access to IPS

Veterans CARE expanded access to IPS for 322 veterans¹ with Service-Connected PTSD across VA Medical Centers in four geographies: New York City (93 veterans enrolled), Boston (79 veterans enrolled), Brockton (63 veterans enrolled), and Central and Western Massachusetts (87 veterans enrolled).

Employed a population with PTSD and nearly 4 years of unemployment

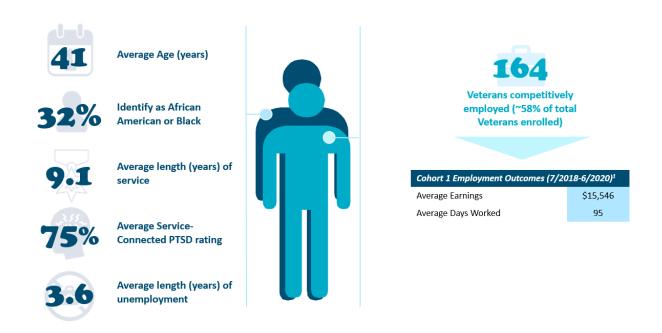
Veterans CARE enrolled a high-priority population with a diverse set of backgrounds at risk of experiencing unemployment or underemployment. Out of the 282 total veterans included in the evaluation², 164 (58%) obtained at least one competitive job. In addition, average earnings across sites matched or exceeded earnings recorded in the most recent 12-site randomized control trial (RCT) on IPS for veterans with PTSD.³ For example, the Project's first cohort of enrolled veterans earned an average of \$15,546 over the 18-month follow-up period, an amount that was 6% (+\$904) higher than the average earnings of veterans in the 12-site study.4

¹ Includes all veterans enrolled between 6/1/2018 to 9/30/2021.

² The outcomes evaluation conducted by Westat only included the 282 veterans enrolled between 6/1/2018 to 6/30/2020.

³ Lori Davis, et al., "Effect of Evidence-Based Supported Employment vs Transitional Work on Achieving Steady Work Among Veterans with Posttraumatic Stress Disorder: A Randomized Clinical Trial," JAMA Psychiatry, April 1, 2018,.

⁴ Average earnings for Cohort 1 were calculated by taking total earnings per veteran during the measurement period (18 months per veteran between 6/1/2018 to 6/30/2020) and dividing it by total veterans enrolled from 6/1/2018 to 12/31/2018.



Improved management of PTSD symptoms

As veterans gained employment, they also reported improved personal relationships and an overall decrease in stress levels. Veteran PTSD ratings were assessed periodically over 18 months. Forty-six percent of veterans' symptoms scores stabilized or decreased while enrolled in the Project.

"John was sitting across from the IPS Specialist and discussing 'what type of work' he could do and that 'he wasn't [trained] in anything' and couldn't really see himself doing 'much.' [The IPS Specialist] discussed the many different skills and the areas he could transform them into a viable employment trade. ... This positive discussion fueled a new desire to go back to work. ... After not being out of the house for nine years, not getting off the couch, this veteran has reclaimed his sense of worth and dedication to himself. In the last month, he has seen an employer, gone to an interview, gained a position as a warehouse manager, traveled from Brooklyn to Menlo Park, New Jersey, gotten his driver's license, and started a full-time job."

Adjusted service delivery to meet Covid-19 challenges

Despite challenges posed by Covid-19, between March 2020 and September 2021, the Project's employment rate grew from 42% to 58%. During this time, IPS Specialists provided additional support

to veterans and their families, delivering essential food and medicine, and linking veterans to emergency assistance. In addition, the Project led the IPS field in conducting one of the first hybrid fidelity reviews, while maintaining strong fidelity to the IPS model. These results were driven by holistic veteran support, highly individualized employment placement work, and the resiliency and agility of IPS teams.

"The IPS Specialists and Coordinators built effective trusting relationships with the veterans, as the many wonderful success stories demonstrate. These stories catalyzed the continuation of the Project and garnered respect from many of the clinical team leads and the VA Medical Center Leadership."

Key Project Learnings and Takeaways

In the spring of 2021, the Commonwealth of Massachusetts provided additional funds to extend and expand access to the Veterans CARE program across its Massachusetts sites, starting in October 2021 through at least December 2022. Similarly, IPS services will continue to be provided at the New York City site through the VA New York Harbor Healthcare System's Whole Health Program, a program focused on providing holistic care for the health and well-being of veterans.

Project champions are the gatekeepers of sustainability

Throughout its lifecycle, Veterans CARE faced many barriers to Project continuation—including, most recently, the end of the designed service delivery period. At each pivotal moment, the Project's champions rose to the challenge and helped to identify, advocate for, and implement a range of solutions that enabled the Project to continue. These champions share three characteristics that we believe contributed to their great impact:



- Commitment: Since the origination of the Project, these champions have maintained a foundational belief in the power of IPS and a desire to ensure that access to this service is scaled to as many veterans as possible.
- **Resilience:** These champions see every challenge as an opportunity. They are willing and able to persist and adapt in the face of uncertainty, while staying true to the Project's core principles.

Ownership: These champions use their engaging leadership style, creativity, and contagious optimism as tools to focus Project stakeholders on common objectives and create shared ownership of performance.

As we work with governments, funders, and service providers toward the continuation of other outcomes-based financing projects, we must strive to similarly leverage the power of these champions.

Trusting relationships strengthen service delivery

As one partner said, "Success was found by being trustworthy and authentic." Relationship-building helped successfully integrate Veterans CARE into the VA Medical Centers. Cultivating relationships with clinicians led to greater referral rates. Once the clinicians better understood the value of IPS and the impact it had on veterans and the members of the service delivery team, they were more comfortable referring their patients to the program. Establishing relationships with veterans was equally important. Like the clinicians, veterans needed to build trust in IPS team members before accepting their help.

"As [clinicians] saw the enthusiasm, productivity, and communications with patients, they saw that this program really works for PTSD conditions."

Multi-stakeholder collaboration creates space for effective performance management

"We had great participation from all the partners; it was a different level of participation than we had before."

performance The Project's most successful management strategies were derived from multistakeholder collaboration sessions. When stakeholders worked together, they successfully balanced priorities and converted different vantage points into catalysts for creative problem solving.

Community voice strengthens Project design and operation

The Project was strongest when it accounted for the perspectives of IPS recipients and community experts. Community input enabled Project teams to prepare for challenges down the road and, whenever possible, adjust to mitigate them. For example, when Covid-19 necessitated that the project deliver services remotely—a first for IPS—IPS teams, veterans, and members of the broader IPS community were instrumental in helping the project adapt and continue to drive outcomes. As one IPS specialist said, "The whole program changed pre-Covid and after-Covid. It shifted from not only finding

jobs for veterans but also developing more life skills. The team is doing [the] work [of] psychologists and social workers. Veterans are [actually] interacting more with IPS specialists than social workers." Whenever possible, community voice should be amplified to optimize Project outcomes.

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Acknowledgments

Veterans CARE and the subsequent expansion would not have been possible without steadfast commitment from our partners. We'd like to thank our partners for their dedication to helping veterans attain competitive and compatible employment that supports their recovery and reintegration.

U.S. Department of Veterans Affairs
Commonwealth of Massachusetts
City of Boston
New York City Department of Veterans' Services
Tuscaloosa Research and Education Advancement Corporation
Westat

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