

# IPS Employment Specialist

## Induction Workbook 2019



# Welcome

90% of people with severe mental illness want to work, but currently, only 8% are in work.

The aim of this induction book is not to replace nor duplicate your existing induction process but to compliment it and where possible to enhance the IPS specific elements.

This document is split into 3 sections, the first being an introduction and overview of IPS, the second focusing on fidelity and the third offers resources for you to excel within the role and consider your own development.

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Where you see this icon:



You can download additional material/resources to assist with your induction.

# Overview



## What is Individual Placement & Support (IPS)

IPS is a model of supported employment which is evidence based and proven to be the most successful way of supporting people with mental health difficulties into sustainable employment.

NICE recommend IPS as the leading model, to help people with mental illness into work. The model has 8 key principles of support, which inform the Employment Specialists practice. It is these key principles and the requirement of Fidelity reviews, which differentiates IPS from more traditional forms of employment support.



IPS achieves **twice the rate of job outcomes** for people with severe mental illness versus traditional employment support



IPS clients have **reduced relapse** and spend **fewer days in hospital**



IPS clients **sustain jobs for longer** and earn more per hour

The Model has 8 Key Principles of support which inform the Employment Specialists practice. It is these key principles and the requirement of Fidelity reviews that differentiate IPS from more traditional forms of employment support.

Most noticeably, more common employment and support programmes have eligibility criteria which promotes job 'readiness' and a 'train then place' ethos. IPS recognises the value of a place then train approach, it has a zero exclusion methodology and supports those who want support in finding employment, regardless of perceived job readiness.

### IPS Employment Model

- **Everyone has the potential to do real, paid work** with the right support
- **Start looking for work** as soon as possible, then continue to support the individual and the employer in work
- The focus should be **real, paid work**, not volunteering or other outcomes
- Employment specialists and health clinicians are **highly integrated** - and provide 'shared care' to clients

### Traditional Employment Models

- People's **readiness for work** depends on their health condition
- Spend an **extended period preparing for work**, before starting to look for jobs. No/limited support in work
- Focus on a range of outcomes, with **volunteering/training** more often achieved than real work
- Employment specialists work independently of health teams with **limited interaction** between them

**Can you give some examples of countries that provide IPS services?**

**How does this approach vary from previous work you have done?**

## Evidence based practice

There is overwhelming international evidence that 'place then train' models – and IPS in particular – are much more effective than traditional approaches (such as vocational training and sheltered work) in successfully getting people into work.

The **EQOLISE Project** compared IPS with other vocational/ rehabilitation services in six European countries, and concluded that:

- IPS clients were twice as likely to gain employment (55% v 28%) and worked for significantly longer;
- the total costs for IPS were generally lower than standard services over first 6 months;
- individuals who gained employment had reduced hospitalisation

IPS has been compared to traditional vocational rehabilitation approaches that typically include stepwise features such as pre-vocational assessment, sheltered setting, and voluntary work. In 25 randomised controlled trials, each showed a significant advantage for IPS.



What is IPS?

**What other findings have come out of the evidence?**

**How many randomised controls have there been for IPS?**

## **IPS Principles**

The backbone of the model are the 8 principles of support which govern the day to day practice of the employment specialist. It is these recommended behaviours which allow the employment specialist to engage with the client in a way that is proven to be the most effective.

### **1) Competitive Employment**

Although voluntary work and pre-vocational training can be beneficial, the evidence shows that these activities have little impact on a client's ability to gain employment.

By focusing on paid employment; the employment specialist and client start the vocational journey on a positive note, embracing what the client could achieve. This instantly raises the expectations of the client and the clinical team, and allows for the service to focus on supporting people at a point in which they feel they want to start looking for employment.

Many clients may feel they would benefit from completing volunteering as stepping stone towards employment. Whilst this may be helpful in some instances, clients should also be looking for and applying for paid, permanent employment.

**Can you think of examples of where you have witnessed this being done during your induction?**

**What would you do if the client wants to focus on voluntary work and pre-vocational training?**

## **2) Zero Exclusion**

The evidence demonstrates that diagnosis and/or prevalence of symptoms are poor indicators for employment outcomes.

By working with clients who want to find employment, the employment specialist is able to capitalise on intrinsic motivation. This also supports the ethos of recovery, and allows the employment specialists to have a positive relationship with their caseload.

**Why may a clinician not refer to the IPS Service?**

**Can you think of ways in which you could ensure all clients have access to your service/ support?**



### 3) Client Preferences

IPS promotes the values of collaboration with the client to ensure you support them to find jobs that they want to do.

Unlike some provisions who base job matches on what is available, employment specialist work with the client to understand their likes, dislikes and motivators. Once these are known - recommendations are based on client preferences and the support they need to gain and sustain this type of role.

**What do you think the advantages are of this approach?**

**What challenges do you envisage?**

**How will you manage the client's expectations?**

#### **4) Rapid Job Search**

High fidelity recommends that clients and/or the Employment Specialists have a meaningful meeting with an employer within the first 4 weeks of starting the service. This again capitalises on the client's motivation and demonstrates your belief in their ability to gain employment.

**Can you give feedback from other Employment Specialists on how they do this?**

**Are there any reasons why you think this may not be possible?**

## 5) Integration with Clinical Care

Employment Specialists are non-clinical workers based in a clinical team. This allows you to work alongside clinicians and integrate employment as a recovery intervention without becoming distracted by non-vocational activities. As well as supporting clients, you should also be supporting the team and raising their aspirations and expectations of clients.

**Can you give examples of where clinicians have been both supportive of, but also cautious about employment?**

**How do you think you could influence your clinical colleagues to support clients into paid employment?**

## 6) Employer Engagement

Employer engagement is considered by many employment specialists to be the most challenging part of the role.

Employer engagement is the process of you contacting local employers and building up profitable relationships for the benefit of your clients. You should be aware of local trends and opportunities, and be able to disseminate information to your clients.

**What is the recommended number of employer visits you should do each week?**

**What are your expectations about what this means?**

**How might you introduce yourself to an employer?**

## **7) The availability of time-unlimited support**

There is some confusion about the need to offer clients unconditional time unlimited support. IPS states that clients should have the availability of support. This is conditional on the fact they are engaging in the service to gain employment. If a client is hard to engage, then it is the responsibility of the employment specialist to assertively engage with them. Ultimately, for someone to receive continued support they must be an “Active Client” on your case load.

**How would you quantify an active client?**

**What do you think the challenges might be, of working with long term clients?**

## **8) Benefits counselling**

Within IPS, employment specialist should have sufficient knowledge to provide clients with benefits information but not necessarily advice.

This principle refers to the ability to support the client to understand any potential impact work may or may not have on their current entitlement. It is recommended that employment specialists establish and maintain a relationship with JCP staff.

**How often does Fidelity recommend you meet with a relevant JCP worker?**

**Can you list some advantages of having this contact?**

**Additional Comments:**

**Any Questions?**

# Fidelity

# 2



## **Fidelity**

By definition; fidelity refers to being faithful to the IPS model, and how, as a service you demonstrate continued support and loyalty. Within IPS, this is called a fidelity review.

A fidelity review is your opportunity to highlight your best practice, review performance and consolidate the work your employment team do in line with the recommendations and guidance within the IPS model. The closer you work to the model the greater the chance you have of supporting your clients to gain work. Fidelity should be an ongoing agenda item amongst your teams.

Avoid only talking about fidelity when you have a review planned and instead make it the integral part of your service it was intended to be.

**Can you list three components of fidelity?**

**What score would you need to achieve to be considered exemplary?**

**What do you think a review would entail?**

**When is it recommended for a new service to have a fidelity review?**



**Top Tip!**

We recommend that you start to compile your own fidelity folder of evidence as early as possible. This could be a physical folder and or a virtual one.

# Resources



## Recommended reading/distribution list

Below is a list of recommended websites, reports and literature which we feel will enhance the employment specialists' knowledge and competence. There are several resources and documents available to support both individual employment specialists and services.



IPS Grow



Mental Health Foundation



Centre for Mental Health



Mental Health - as a workplace asset



IPS Works



Time to change



Mind



Mental Health at Work Report



Thriving at Work: the Stevenson/Farmer review of mental health and employers

## Example Induction Plan

On the next page is an example of some IPS specific activities that will enable you to start to embrace and make links between the theory and practice of IPS. We recommend printing these pages with your manager and identifying dates and timeframes to carry out the below activities.

# Induction Planner

Activity

Proposed Date

Employment Specialist Feedback

Commence  
Induction  
Workbook

Set up with  
a buddy

Meet with TL to  
discuss role and  
team practices

Meet with clients (IPS  
Grow recommends  
asking existing clients  
to meet with new staff  
in an informal way and  
to have a conversation  
about that it is that they  
need from the service  
and why work is  
important to them. Try  
to get a mix of clients  
who are currently  
receiving support and  
those who have  
achieved their goals).

Activity

Proposed Date

Employment Specialist Feedback

Shadow multiple  
ES's

Review client case  
studies - both within  
your organisation  
and those online

If there's a recovery  
college in your area, these  
can often offer additional  
training and insight which  
would support a new staff  
member. It can also  
provide excellent  
examples of co-production  
and joint working.

Shadow clinical  
team members (to  
help establish  
relationships,  
understand different  
roles and identify  
potential sources for  
referrals)

Activity

Proposed Date

Employment Specialist Feedback

Review the research for IPS to draw comparisons to your own service and local demographics

Map out local employment labour market

E-Learning Course - Supporting people with mental health conditions into work: IPS

Complete IPS Quiz (see pages 24-28)

### Guidance

This quiz should be printed and completed within the first month of employment. We encourage all new employments specialist to research and speak with their colleagues in order to understand the IPS model and complete the questions.

Rather than simply completing the questions, we encourage you to find out the meaning and evidence behind the question/answer.

#### 1) Employment specialists may have caseloads:

- a) of up to 50 clients
- b) of up to 20 clients
- c) of up to 10 clients
- d) of any size; it will vary depending on how much support the different clients on the caseload need

#### 2) Employment specialists:

- a) should only provide employment services
- b) should provide both employment and care coordination
- c) may have some lead practitioner responsibilities in addition to their employment duties
- d) may support with some employment related activities such as crisis resolution and/or housing issues

#### 3) In the IPS model, benefits counselling is considered:

- a) an integral part of employment services that should be offered to every client
- b) a supplemental service that should be provided to clients who request it
- c) important, but beyond the scope of services provided by the employment program
- d) only important for clients who are working

#### 4) Employment specialists:

- a) should focus on one or two specific employment areas; such as job developing or job coaching
- b) should provide all support in all phases of the employment service
- c) are hired to carry out several job functions, but do not necessarily do the entire employment process
- d) will have varying responsibilities depending on the structure of the agency

#### 5) Client A was recently fired from their job for repeatedly showing up late. According to the IPS model, this:

- a) indicates that Client A is not ready to return to work yet
- b) demonstrates Client A's unwillingness to work
- c) is viewed as a positive learning experience
- d) is a good time to refer Client A to a training program that will teach them the skills they need to succeed in the future



## 6) Employment specialists:

- |  |  |  |   |
|--|--|--|---|
| a) work completely independently of the mental health treatment team | b) function independently of the mental health treatment team and attend treatment team meetings on an as-needed basis | c) serve as consultants to mental health treatment teams and occasionally provide input in treatment team meetings | d) are full members of the mental health treatment team and attend all of the treatment team meetings |
|--|--|--|---|

## 7) Clients who have a dual diagnosis (mental illness and substance misuse):

- |   |   |  |   |
|---|---|--|---|
| a) are eligible for employment services if they show some willingness to be abstinent | b) are eligible after 90 days of abstinence | c) are eligible for employment services even if they are unwilling to be abstinent | d) are not eligible for employment services |
|---|---|--|---|

## 8) Given the following scenario, please select the best answer from below:

Client B has bipolar disorder and hasn't worked for several years. He was recently referred to the employment service and says that he would like to try working as an office worker; even though his previous job experience has been as a mechanic. His employment specialist should:

- |  |  |  |  |
|--|--|--|--|
| a) help investigate a job as an administrator because that is what she wants to do | b) encourage him to look for a job as a mechanic because of his prior work history | c) get him a job in the local factory because several clients have already been successfully placed there as work experience | d) start him out in a transitional job to help her get back into the workforce |
|--|--|--|--|

## 9) Research has found that approximately what percentage of people with a mental illness say that they want to work?

- |                  |              |              |               |
|------------------|--------------|--------------|---------------|
| a) less than 25% | b) 25% - 50% | c) 51% - 75% | d) 76% - 100% |
|------------------|--------------|--------------|---------------|

## 10) Vocational profiling can be helpful in finding a good job match for the client. Which of the following best describes the initial assessment/vocational profiling activity?

- |   |   |  |  |
|---|---|--|--|
| a) a paper exercise of for filing and routine questioning | b) placing the client in a sheltered setting or in a voluntary job for a brief period of time to find out about their work habits | c) open dialogue and ongoing assessments to help gather information from the client, the clinical team, previous employers as well as friends and family | d) it is best to skip an initial assessment and get the client working because the first job is likely to be brief, but this promotes rapid job search |
|---|---|--|--|

## 11) Employment specialists help clients begin a job search:

- |   |   |  |  |
|---|---|--|--|
| a) within one month of the initial assessment | b) after the client's psychiatrist or other mental health providers decide that a client can work | c) only after a thorough assessment has been completed, using standardised tests regardless of time scales | d) when the client feels it is time to look for work, regardless of when this may be |
|---|---|--|--|

**12) Job searching should be:**

- |   |   |  |   |
|---|---|--|---|
| a) searching on the internet and in newspapers because this is an efficient way to find a variety of jobs | b) going out in the community and meeting employers to develop a large job network, so there are available jobs for clients | c) meeting face to face with employers to learn about jobs in the community that reflect the individual preferences of clients | d) employment specialists usually do not conduct job searches |
|---|---|--|---|

**13) Client C was fired for drinking alcohol on the job. His employment specialist should:**

- |  |   |   |   |
|--|---|---|---|
| a) help him identify ways to prevent alcohol use from interfering with future jobs and help him find another job | b) help him identify ways to prevent alcohol use from interfering with future jobs and tell him that they will help him obtain another job after a reasonable period of sobriety, such as 90 days | c) notify the referring agency and let them know that the employment specialist can no longer work with client c because of his alcohol use, which precipitated the job termination | d) refer client c to a specialist service and resume work with him once he's completed the program and has a period of sobriety |
|--|---|---|---|

**14) Of the following, which is the best way for benefits information to be given to clients?**

- |  |  |  |   |
|--|--|--|---|
| a) give beneficiaries a link to an information website in order to foster their autonomy | b) hold group meetings so that beneficiaries have the opportunity to learn from questions asked by others in the group | c) email beneficiaries a package of information about their benefits so that they always have something to refer back to | d) meet the beneficiaries individually to discuss their personal circumstances on a number of different occasions |
|--|--|--|---|

**15) After a client secures a job, he/she should continue to receive support:**

- |  |                                      |  |   |
|--|--------------------------------------|--|---|
| a) for as long as he/she wants the support | b) until he/she is stable in the job | c) for about 90 days, with occasional phone calls thereafter | d) for up to 6 months, or until he/she is stable in the job, depending on which comes first |
|--|--------------------------------------|--|---|
- e) for an initial 12 month period using a step down approach with the availability of time unlimited support

**16) Ideally, employment specialists should be out of the office and in the community:**

- |                              |                       |                       |                            |
|------------------------------|-----------------------|-----------------------|----------------------------|
| a) less than 15% of the time | b) 15-40% of the time | c) 41-64% of the time | d) 65% or more of the time |
|------------------------------|-----------------------|-----------------------|----------------------------|

**17) If a client misses several appointments with the employment specialist, the employment specialist should:**

- |  |   |   |   |
|--|---|---|---|
| a) recommend that the client return to the employment program when he/she is ready to keep appointments and be an active participant | b) continue to try to engage the client using methods of assertive engagement | c) contact the case manager and ask that a referral be resubmitted when the client demonstrates an interest in work | d) recommend that the client attend a pre-vocational program to become work ready |
|--|---|---|---|

**18) Which of the following is NOT an employment specialist responsibility?**

- |   |  |  |   |
|---|--|--|---|
| a) Ensuring that a client has information about his/her benefits? | b) Helping a client apply for housing assistance | c) Assisting a client with filling out a financial aid application for college | d) Communicating with the client's treatment team |
|---|--|--|---|

**19) It's best for employment specialists to:**

- |  |   |   |  |
|--|---|---|--|
| a) assist several clients to find jobs with a single employer, because this is most time efficient | b) assist several clients find jobs at the same job site so that they can provide support for one another | c) make decisions about which employers to contact, based on client preferences | d) establish a strong working relationship with the major employers in the community so that client's will be able to choose between a few different job options |
|--|---|---|--|

**20) Please describe different ways you can assertively engage with clients?**

21) Name the 8 IPS Principles and give an example of how you would embed this into your practice?

Principle

Example

## Hopes & Fears

As in any role, it's important to identify what you hope to achieve in the role (both from a professional and personal perspective) and what challenges or fears you may have. This can really help direct your training and support and also is a great reflection tool to review after 6 months in the role to see how far you've come.

**In this role I HOPE to:**

**I have some FEARS around:**

## Case Studies and Quotes

### Clinical staff see the value that IPS offers their clients

Mental health clinicians often make decisions their patients' job readiness without having those conversation with patients, despite many seeing paid work as a key recovery goal.

Once IPS employment specialists are fully integrated members of the mental health team, they raise the team's expectations about service users' potential to go back to work Clinical staff don't have to be experts in employment – they just need to raise work issues with service users and refer users to the IPS specialist.



*Prior to the ES working in the team, we rarely considered employment as an option for our patients. Since she has been around the prospect of employment has become real and staff are regularly discussing work as a possible option with our patients. These patients who have moved into employment have improved in their overall functioning and satisfaction with life, and some have been able to be discharge.*



**Consultant Psychiatrist**



*Having ES in the clinical team doesn't just give service users a sense of hope, it gives the whole clinical team a sense of hope.*



**Consultant Psychiatrist**

### IPS client stories



*The support I was given gave me some hope I may find work. [My employment specialist] continuously kept in touch with me. She was encouraging and supportive. The service I received helped to give me a new start and restore my pride.*



**Service User**



*I've felt like my Employment Specialist was there to help me and push me in the right direction. I definitely wouldn't be in the place I am today if I hadn't had their support.*



**Service User**

We recommend gathering as many case studies and quotes where possible. You can download templates for gathering Recovery Stories here:



## Glossary

**Term:**

**Meaning:**



This is a working document, and we are always keen to hear your feedback on what changes can be made.  
Please share your thoughts or any contributions by emailing [support@ipsgrow.org.uk](mailto:support@ipsgrow.org.uk)