

PSR Services: Supported Employment

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Learning Objectives

▮ Learning Objectives for this Session

- 1. Identify three findings related to supported employment
- 2. Mention four characteristics of supported employment important to maintain fidelity
- 3. Define cognitive remediation and social cognition in relation to PSR services

Psychosocial Rehabilitation Services

□ Psychosocial Rehabilitation (PSR) Services: What are they?

- From a scientific viewpoint (what works), there are three categories of PSR services:
 - Evidence Based Practices (EBP)
 - Promising Practices
 - Supporting Services
- While distinct as far as the evidence that supports them, components of the three categories are sometimes present across several of the programs and services

Evidence Based Practices

□ Evidence Based Practices (EBP)

- Research has determined that certain interventions work, i.e., help people achieve the things they want for themselves – based on a **substantial** body of research evidence
- When delivered as designed and researched – fidelity is extremely important!
- These interventions are now the gold standard* for helping people with serious mental illnesses to recover from the effects of their illness and regain their maximum functional capability

■ *Kreyenbuhl, J., Buchanan, R.W., Dickerson, F. B. & Dixon, L. B. (2010). The Schizophrenia Patient Outcomes Research Team (PORT): Updated treatment recommendations 2009. Schizophrenia Bulletin, 36, 1, 94-103.

Supported Employment

▣ Supported Employment (SE) Findings

- One of the most researched EBPs
- The majority of people with serious mental illness want to work – consistently identified as a top priority
- The majority of those who want to work can be successfully employed using SE
- SE is designed to help people find the right “fit” between their capabilities and the market place
- Becoming “work ready” is not necessary
- Benefits: increased self confidence, improved financial position, sometimes symptom improvement
- No adverse effects of SE program or working

Supported Employment

- ☐ **Supported Employment (SE) Characteristics**
 - ☐ Focus on competitive employment
 - ☐ Rapid job search at a pace comfortable for person
 - ☐ Jobs tailored to individuals
 - ☐ Caseload: 1 vocational specialist / 25 persons
 - ☐ On-going support
 - ☐ Time-unlimited follow-along supports
 - ☐ No impediments: substance use, symptomatology, diagnosis, work history, etc.
 - ☐ SE staff participate in clinical team mtgs. & vice versa
 - ☐ Integration of vocational and mental health services
 - ☐ Real world jobs – full or part time as person chooses
 - ☐ Zero exclusion criteria (no one is screened out because he or she is not thought to be ready)

Supported Employment

▣ Supported Employment (SE) Fidelity

- The findings for SE have only been sustained when the characteristics of the practice have been implemented as it was researched
- SE has a fidelity scale that helps programs determine how well they are adhering to the EBP
- The fidelity scale was developed by the researchers who designed the SE Toolkit and has proven to be very helpful to programs desirous of delivering SE as it has been shown to be effective

Supported Employment

- ☐ **Supported Employment (SE) Fidelity Scale**
 - Characteristics of an SE program that would have a perfect score on the SE Fidelity Scale*
- ☐ **Caseload:** Employment specialists manage caseloads of up to 25 consumers
- ☐ **Vocational services staff:** Employment specialists provide only vocational services
- ☐ **Vocational generalists:** Each employment specialist carries out all phases of vocational service
- ☐ **Integration of rehabilitation with mental health treatment:** Employment specialists are part of the mental health treatment teams with shared decision making
- ☐ **Vocational unit:** Employment specialists function as a unit
- ☐ **Zero-exclusion criteria:** There are no eligibility requirements to enter the SE program

Supported Employment

- ☐ **Supported Employment (SE) Fidelity Scale**
 - Characteristics of an SE program that would have a perfect score on the SE Fidelity Scale - continued:
- ☐ **Ongoing, work-based assessment:** Vocational assessment is an ongoing process
- ☐ **Rapid search for competitive jobs:** The search for competitive jobs occurs rapidly after program entry
- ☐ **Individualized job search:** Employer contacts are based on consumers' job preferences
- ☐ **Diversity of jobs developed:** Employment specialists provide job options that are in different settings
- ☐ **Permanence of jobs developed:** Employment specialists provide competitive job options that have permanent status

Supported Employment

- ▣ **Supported Employment (SE) Fidelity Scale**
 - Characteristics of an SE program that would have a perfect score on the SE Fidelity Scale - continued:
- ▣ **Jobs as transitions:** Employment specialists help consumers end jobs when appropriate and then find new jobs
- ▣ **Follow-along supports:** Individualized, follow-along supports are provided to employers and consumers on a time-unlimited basis
- ▣ **Community-based services:** Vocational services are provided in community settings
- ▣ **Assertive engagement and outreach:** Employment specialists make multiple contacts with consumers as part of initial engagement and at least monthly on a time-unlimited basis when consumers stop attending vocational services
 - *SAMHSA. (2010). Supported Employment Evidence-Based Practices (EBP) KIT. Rockville, MD: Author. Available on line at: <http://store.samhsa.gov/product/Supported-Employment-Evidence-Based-Practices-EBP-KIT/SMA08-4365>

Essential Provisions for Evidence Based Practices

□ Fidelity

- When providing a service that has been researched and shown to be effective, it is extremely important to provide the service exactly as it was developed and researched
- When the service is not provided with fidelity, the provider is not providing the same service
- The provider is providing a new, untested service
- There is no reason to believe the new, untested service will work
- Providers often call the new, untested intervention by the same name as the one that has evidence to support it. This is a serious problem because in most cases, the new (often limited) intervention fails to provide any benefit to the client, i.e., it has no effect
- This causes distrust among clients and administrators and leads to future unwillingness to provide researched services

Essential Provisions for Evidence Based Practices

□ **Appropriately Trained Staff**

- Many evidence based and promising practices require certain clinical skill sets for the service to be provided appropriately
- Without this knowledge and expertise, the service will not be provided as it was intended to be and as it was researched, i.e., determined to be effective
- Although many clinicians are trained in some components of many practices, most are not trained thoroughly in all of the components of any practice
- On-going continuing education and supervision are essential for all staff who provide clinical services

Essential Provisions for Evidence Based Practices

□ **Integration and Coordination of Services**

- Ideally, one person or one team is responsible for providing *all* services to any given individual
- Most often this is not the case. The classic example is mental health services which are almost universally separate from substance abuse services
- When services are not integrated and coordinated by one provider or one team, they are:
 - usually fragmented
 - often work against each other
 - sometimes have conflicting goals
 - many times become a destructive force which impedes, rather than facilitates, recovery for the individual
- Although this is a system issue, it impacts directly on the effectiveness of individual services

Essential Provisions for Evidence Based Practices

- **Services Tailored to the Wishes and Goals of Each Person**
 - Services should only be provided when:
 - The person expresses a desire for services
 - The person has set one or more goals for him/her self
 - A comprehensive rehabilitation assessment of capabilities and resources has been completed
 - The person has indicated a willingness to begin the rehabilitation process
 - Services should be tailored to the wishes and goals the person has set for him/her self and based on the rehabilitation assessment

Cognitive Remediation and Social Cognition

□ Cognitive Remediation and Social Cognition

- Both executive functioning and social cognition are often significantly impaired in schizophrenia and other serious mental illnesses that have psychosis as a predominant feature
- There is an increasing body of literature on cognitive remediation and social cognition showing that incorporation of interventions targeted to these two areas enhances the impact of other PSR interventions, including supported employment

Cognitive Remediation and Social Cognition

□ Cognitive Remediation

- Cognitive remediation interventions are aimed at improving executive functioning, i.e., improving cognitive processes, such as impaired thinking ability, working memory, reasoning, task flexibility, and problem solving as well as planning and execution
- Cognitive remediation interventions typically use computer assisted learning programs aimed at improving learning, memory, attention, concentration, and executive functioning

Cognitive Remediation and Social Cognition

▣ Social Cognition

- Social cognition includes affect perception, social cue perception, empathy, attributional style, and theory of mind, or the ability to make attributions about a person's mental state
- Social cognition interventions are aimed at teaching the skills needed to deal effectively with difficult social situations and make better attributions
- Social-cognitive interventions usually incorporate didactic teaching, modeling, and role-playing focused on building social competence and positive social interactions by enhancing communication skills

PSR Services: Need for Comprehensiveness

□ **Cognitive Remediation and Social Cognition**

- Because of the importance of executive functioning and social cognition, incorporation of these interventions with other PSR interventions is becoming increasingly recognized as essential

□ **Designing Comprehensive PSR Services Specifically for the Needs of Each Person**

- Increasingly, it is also becoming clear that providing individual interventions will have little effect. Comprehensively designed packages of PSR services must be designed for each individual based on his or her wishes and goals

Summary & Conclusions

- ▣ 1. All persons with mental illness have the potential to recover and achieve a maximum degree of self-sufficiency
- ▣ 2. The primary focus of PSR is on improving the capabilities and competencies of persons with serious mental illnesses
- ▣ 3. SE: one of the most researched and effective PSR interventions. Focus on competitive employment, intensive support, zero exclusion criteria
- ▣ 4. CR and SC: increasingly clear evidence of the importance of providing these together with other PSR interventions
- ▣ 5. Essential to provide evidence based practices with fidelity, appropriately trained staff, in an integrated manner and according to the wishes and goals of each person
- ▣ 6. Need to design a comprehensive set of PSR services for each person

Questions and Discussion
