



IPS Supported Employment February 27, 2015

Recovery Oriented Psychosocial Rehabilitation Employment Initiative
Douglas College
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Overview of IPS Supported Employment

- IPS Supported Employment helps people with serious mental illness work at regular jobs, those paying at least minimum wage and of their preferences
- Although variations of supported employment exist, IPS (Individual Placement and Support) refers to the evidence based practice of supported employment.
- www.dartmouth.edu
- Bond, G. 1999



IPS Supported Employment

- “readiness” often occurs only in retrospect after people have done something successfully, so waiting until a person with mental illness is ready to move on can often be stagnating and disempowering. Often people have to experience success before they believe they can be successful.
- *author unknown*



What makes IPS SE unique?

- Integrated with clinical services, that is the individual can access supported employment service at the same place as their doctor, case manager, other rehab services
- Job search is rapid; resume development, interview preparation, job search techniques, job marketing, interpersonal development occur simultaneously. individual preferences are primary
- Belief that pre-employment training does not necessarily dictate readiness/ability to work
- Zero exclusion



Fidelity Counts in IPS Supported Employment

- There are 4 most noteworthy components;
- 1. integration with mental health team
- 2. zero exclusion
- 3. competitive employment is the goal
- 4. rapid job search*****



IPS Supported Employment – what it is not

- It is not vocational training, work experience, work preparation, volunteering or practicums
- It is not based on length of time away from the work force
- Employment success is not necessarily correlated to pre-vocational training
- (individuals are not necessarily symptom free to work successfully)



IPS Supported Employment cont'd

- While supported employment services are offered in a clubhouse or other milieu, IPS SE is always within a community mental health team
- Certainly not the only type of supported employment available although the most rigorously researched
- Does not include programming such as group work



IPS Supported Employment Job Marketing/Development

- Job marketing assumes at least some level of disclosure by the IPS worker on behalf of the individual being supported/possible accommodations in the workplace
- Fear of external stigma, presence of internal stigma and concern for being treated “differently” are issues to consider
- Job marketing is an integral tool of the IPS worker role



Special Considerations

- Criminal Record Checks
- Nicotine
- Harm reduction in regards to substance abuse
- Involvement of family and significant others
- Canada vs USA Persons with a Disability Act



Case Study

- Jeffrey – 37 yrs old, Chinese Canadian, ESL, lives with his wife and Mother
- Attends the mental health team monthly
- Last worked 9 months ago as a breakfast cook part time, worked 18 months
- Left the position due to “feeling dizzy” all the time
- Expecting a child, family requires increased finances
- How would you go about assisting Jeffrey to find employment from a strength based point of view?



Common Questions and Answers

- 1. I haven't worked for a really long time so I don't know if I can anymore. What should I do? Give yourself the opportunity to try. People who are successful at getting and keeping jobs are the ones who really want to even when there are challenges. Don't sell yourself short.
- 2. Isn't going back to work stressful? Yes, but unemployment is stressful. In fact some people report that they feel better when they are working.
- 3. Can I expect the employment counselor to have a job waiting for me? No, job search and job marketing are part of the process. The ES facilitates this with you.



Follow Up

- Want to know more?
- Contact:
- www.dartmouth.edu
- ruth.maclennan@cmha.bc.ca



References

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- M. Crain et al, The contribution of IPS to recovery from serious mental illness, *WORK, A Journal of Prevention, Assessment & Rehabilitation*, **33** (2009)
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