

INDIVIDUAL PLACEMENT AND SUPPORT SUCCESSSES AND CHALLENGES

Jan Hutchinson

Jan.hutchinson@centreformentalhealth.org.uk

@Jan_CMH

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WHO WE ARE



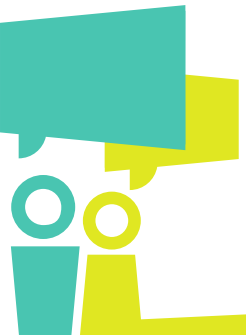
Centre for Mental Health is an independent charity.

We take the lead in challenging injustices in policies, systems and society, so that everyone can have better mental health.

By building research evidence to create fairer mental health policy, we are pursuing equality, social justice and good mental health for all.

INDIVIDUAL PLACEMENT AND SUPPORT

- ◎ IPS is a manualised approach to supported employment.
- ◎ It was developed in the USA in the 1990s, rigorously researched and tested, and is now operational in 29 countries.
- ◎ England has become a world leader. We are very active in the international IPS community.
- ◎ Last year Centre for Mental Health's IPS trainer won the international trainer of the year award.



WHAT IS IPS?

- ⦿ It's a voluntary programme - IPS is never part of a mandatory employment service.
- ⦿ It is described by six steps:
 - initiating referrals, engaging 'clients',
 - employment profiling, job search,
 - job coaching, in-work support
- ⦿ It provides a very personalised service due to small caseloads of #20 per FTE
- ⦿ 'Employment Specialists' work as part of a mental health team, but focus only on employment, in which they have significant expertise.

WHAT IS IPS?

- ⦿ The mental health needs of job seekers are met concurrently by professional mental health support and therapy.
- ⦿ No-one who wants to use the service to find paid work will be excluded by diagnosis or symptoms.
- ⦿ Employment Specialists work with each client on what and how they want to disclose their mental health difficulties.
- ⦿ 'Employer Engagement' is one of the key differences between IPS and other employment support. Employment Specialists should make at least 6 face-to-face employer contacts per week.
- ⦿ Intensive support is provided 1 week before the client starts their job, within 3 days after starting, weekly for the first month, and at least monthly, for up to a year or more.



GROWTH OF IPS SERVICES

- ⦿ IPS services are available in all mental health NHS Trust areas, and alongside drug and alcohol treatment.
- ⦿ IPS is provided by NHS Trusts themselves, or by local or national third sector providers. There has been interest from national employability companies, but the model of support is very different from their usual service.
- ⦿ NHS England's ambition (and ours) is that IPS is available through referrals from GPs, DWP, third sector community mental health services, social prescribing, etc. Primary Care IPS will become more nationally operational in the near future.

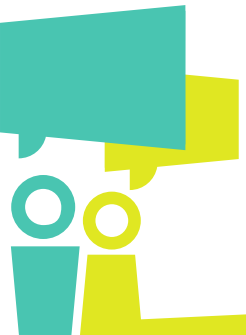


BARRIERS TO IPS

- ◎ Barriers to the effectiveness of IPS include
 - Potential referrers being averse to positive risk taking or a belief that working will cause unnecessary stress to individuals – [case studies](#)
 - Assumptions about how benefit claims will be affected – [information](#)
 - “Stepping stones to work is a safer approach” – [research evidence](#)
 - “Service users/patients may be unrealistic about what they can achieve” – [outcome data](#)
 - Employment Specialists having the skills to work effectively with each individual client and the ability and courage to approach employers – [training and support from Centre for Mental Health and IPS Grow](#)

THE EVIDENCE FOR IPS

- ⊙ Success and rising demand is increasing the need for services to expand and take higher number of referrals and self-referrals.
- ⊙ Mental health service commissioners have been provided with funding from the Government and information about why and how to commission IPS in the form of guidance and an infographic.
- ⊙ IPS is an enabler of Integrated Care System priorities.
- ⊙ The evidence for IPS is sufficiently robust that NICE guidelines recommend IPS for everyone with a diagnosis of psychosis, if they wish to take it up (although referral rates are puzzlingly low – the last NCAP Audit showed around 2% of people with psychosis were referred to IPS).



NHS ENGLAND INFOGRAPHIC

SUPPORTED EMPLOYMENT FOR PEOPLE WITH SEVERE MENTAL ILLNESS (SMI): INDIVIDUAL PLACEMENT AND SUPPORT (IPS)

IPS is a NICE-recommended, evidence-based model that consistently outperforms all other forms of employment support for people with SMI to gain or retain paid work.

If supported into employment with IPS, people with SMI are more likely to enjoy:



- good mental health & wellbeing
- social networks & inclusion
- lower suicide risk
- lower risk of relapse

...so are likely to need:



- less support from CMH services
- fewer admissions
- 50% fewer days in hospital, if admitted

... and are:

2x

twice as likely to have positive job outcomes than from other employment support.

A core part of transformed community mental health (CMH) services, IPS is a key Long Term Plan (LTP) deliverable and enabler of Integrated Care System priorities:



Improves population health and healthcare



Advances equality in access and outcomes

Paid work is central to our mental health, wellbeing and life chances



Enhances productivity and value for money



Supports broader social and economic development

Employment and mental health form a virtuous circle: suitable work improves mental health, and good mental health means that you are more likely to be employed.



~80%

of people with SMI want to work



6 - 8%

are in paid employment



minimum saving per person over 5 years from reduced hospital stays

What can you do?

1. **Invest** baseline funding in IPS services to increase workforce & achieve LTP targets (cost ~£1.5k/ person).

2. **Integrate** within transformed CMH models, enabling access via primary & secondary care, voluntary sector & self-referral.

3. **Implement:** Make IPS a system priority with clear metrics & close performance management of providers.

[Click for more info:](#)



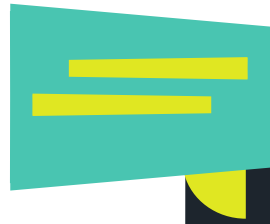
QUALITY ASSURANCE

- ◎ IPS flourishes and outcomes are most positive when the service is run with **high fidelity** to the prescribed model. In order to support this, fidelity reviews are carried out by IPS Grow and Centre for Mental Health.
- ◎ **The goal of IPS is recovery in and through paid work.** The cost of living crisis significantly affects people who are unemployed, but the personalised nature of the job search means that at least a third of people referred to IPS successfully gain work and benefit in a financial, social and emotional sense.



ANY QUESTIONS? 

THANK YOU



Jan Hutchinson

www.centreformentalhealth.org.uk

Jan.hutchinson@centreformentalhealth.org.uk

07890 519302