

# **IPS SUPPORTED EMPLOYMENT EVIDENCE-BASED PRACTICE**

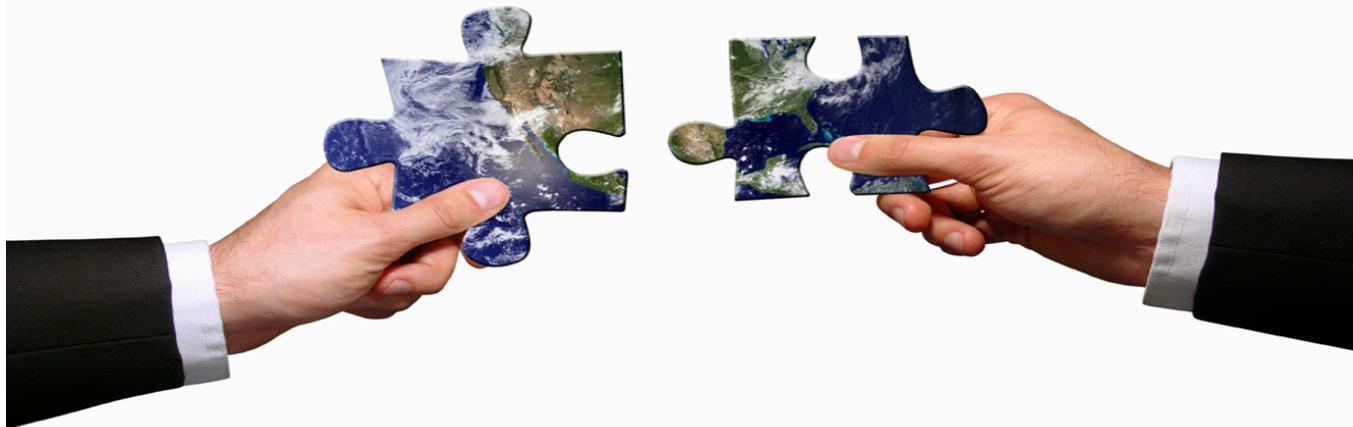
**Presenters:**

**Tish Thomas, IPS State Trainer,  
DMH/VR/MU**

**Mickie McDowell, Peer Services  
Program Specialist  
DMH - DBH**

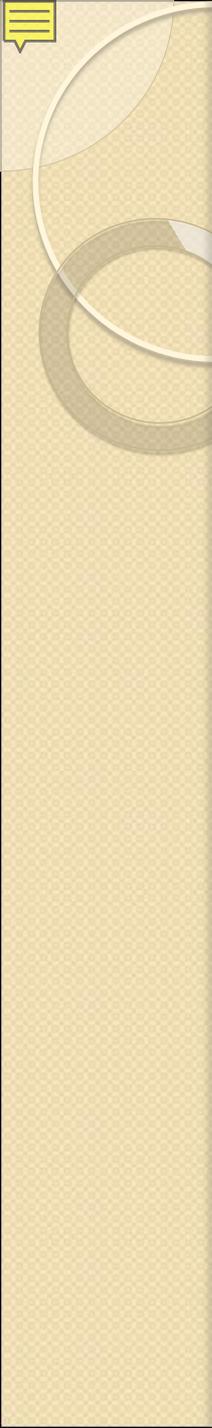
# Individual Placement & Support (IPS) Missouri Partnership

- **Vocational Rehabilitation & Department of Mental Health**



# Why Focus on Employment?

- **Viewed as an essential part of recovery & stable housing**
- **Most people want to work**
- **A typical role for adults in our society**
- **Cost-effective alternative to day treatment**

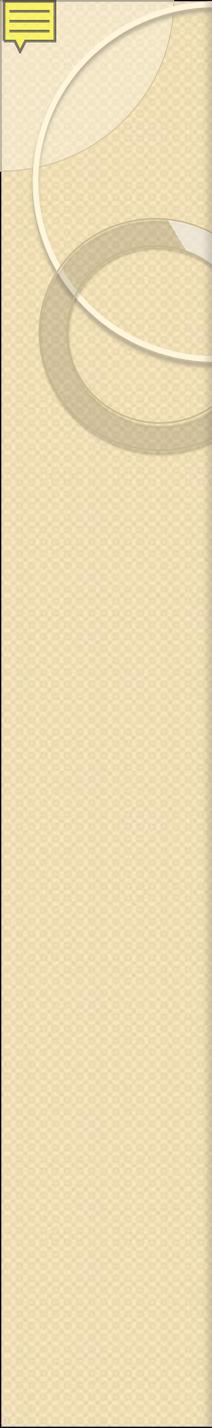


# **Positive Outcomes from Competitive Work**

- **Higher self-esteem**
- **Better control of psychiatric symptoms**
- **More satisfaction with finances and with leisure**
- **Maintenance of stable housing**

# Is Work Too Stressful?

- **As compared to what?**
- **Joe Marrone, an employment trainer:**  
**“If you think work is stressful, try unemployment.”**
- **Stresses of work do not translate into higher rates of hospitalization**

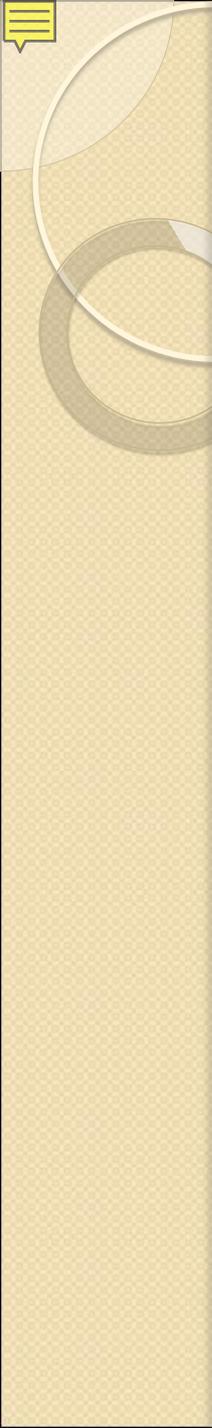


# **Negative Effects of Unemployment in General Population**

- **Increased substance abuse**
- **Increased physical problems**
- **Increased psychiatric disorders**
- **Reduced self-esteem**
- **Loss of social contacts**
- **Alienation and apathy**
  - **(Warr, 1987)**

# IPS Is Effective in a Wide Variety of Target Populations

- PTSD diagnosis
- Frequently hospitalized
- Mental illness + substance use
- Older adults
- Homeless
- Criminal justice history
- On disability benefits
- African American
- Hispanic

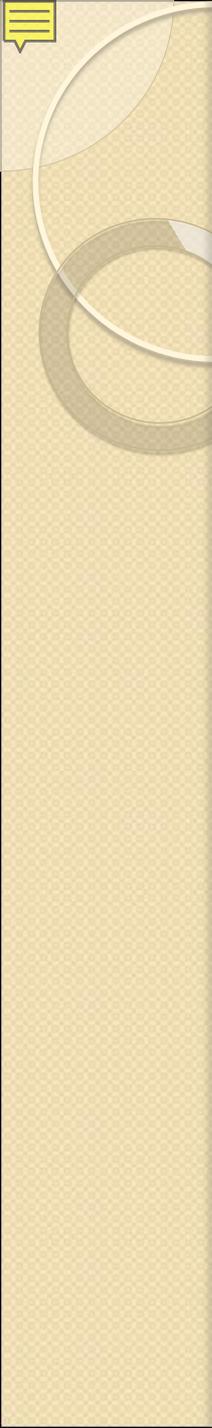


# **Competitive Employment for People with Severe Mental Illness**

- **Say they want to work: >70%**
- **Are currently working: <13%**

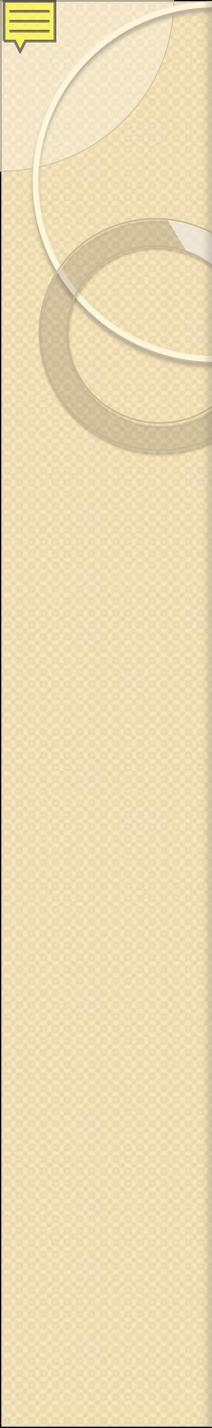
# Evidence-Based Principles

- **Eligibility based on individual choice**
- **SE integrated with treatment**
- **Competitive employment**
- **Personalized benefits planning**
- **Rapid job search**
- **Continuous follow-along supports**
- **Individual preferences with supports**
- **Systematic job development**



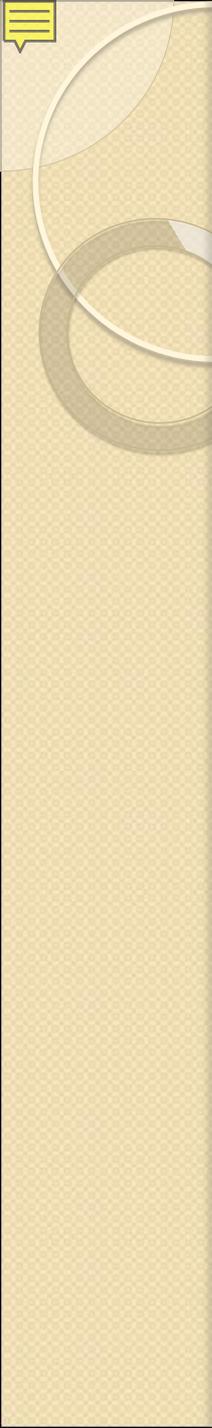
# **Eligibility Is Based on Choice**

- **People are not excluded because they are not “ready” or because of prior work history, hospitalization history, substance use, symptoms, or other characteristics.**
- **No one is excluded who wants to participate.**



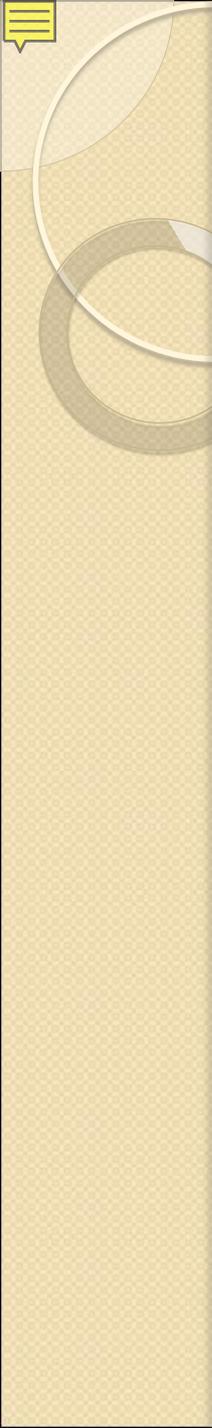
# **Supported Employment Is Integrated with Mental Health Treatment**

- **Employment specialists coordinate plans with the treatment team, e.g., case manager, therapist, psychiatrist, etc.**



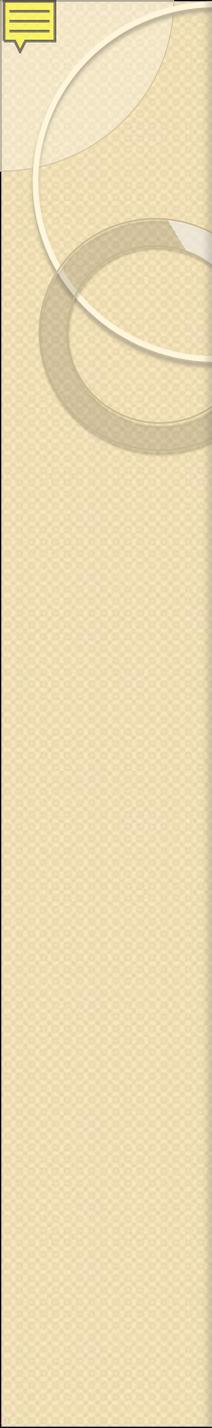
# **Competitive Employment Is the Goal**

- **Agencies devote resources to supported employment to provide full access to all people who seek competitive employment**
- **Individuals interested in employment are not steered into day treatment or sheltered work.**



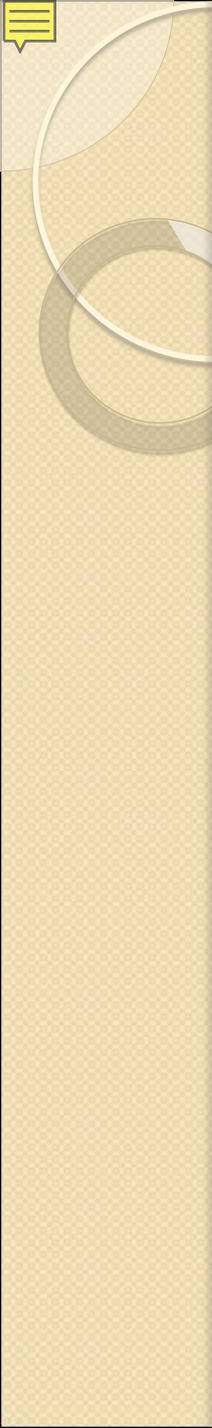
# **Personalized Benefits Planning Is Provided**

- **Benefits planning and guidance help individuals & families make informed decisions about job starts and changes.**



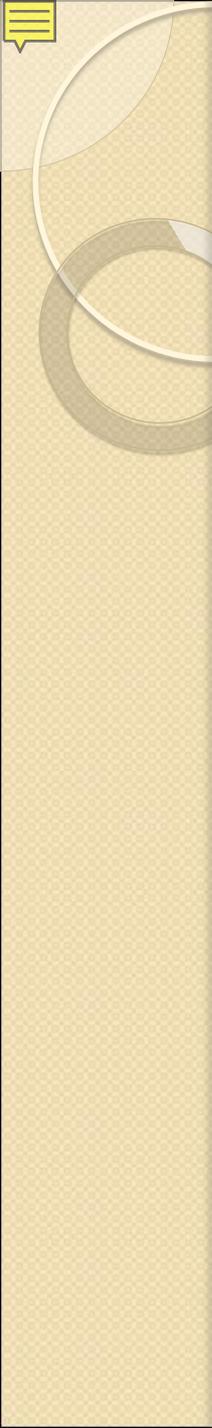
# **Job Search Starts Soon After A Person Expresses Interest In Working**

- **Pre-employment assessment, training, and counseling are kept to a minimum.**
- **Rapid job search is more effective than a step-wise vocational approach.**



# **Follow-Along Supports Are Continuous**

- **Employment Specialists continue to stay in regular contact with the person and (when appropriate) the employer without arbitrary time limits.**



# Individual Preferences Are Important

- **Job finding is based on a person's preferences, strengths, and work experiences, not on a pool of jobs that are available.**
- **Match the person with the job, work environment and support that meets their desires and needs rather than trying to change the person to fit the job.**



# Summary

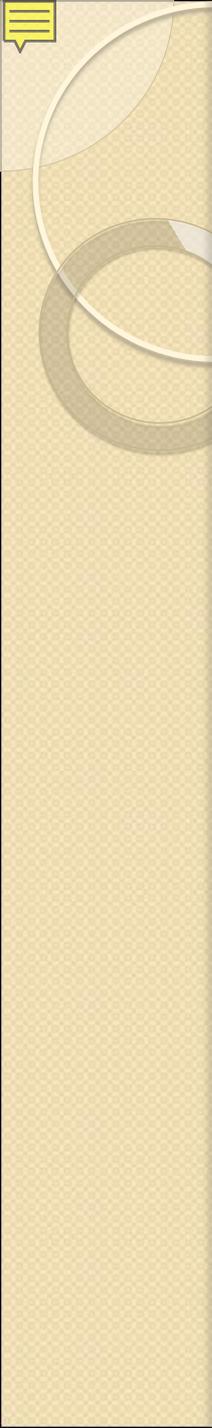
- **People with severe mental illness can work in competitive employment**
- **Programs following evidence-based principles of supported employment have better outcomes**

# Fidelity Scale

- **Dartmouth Supported Employment Fidelity Scale (2008)**
- **25 items, 2 day reviews**
- **<http://www.dartmouth.edu/~ips/>**

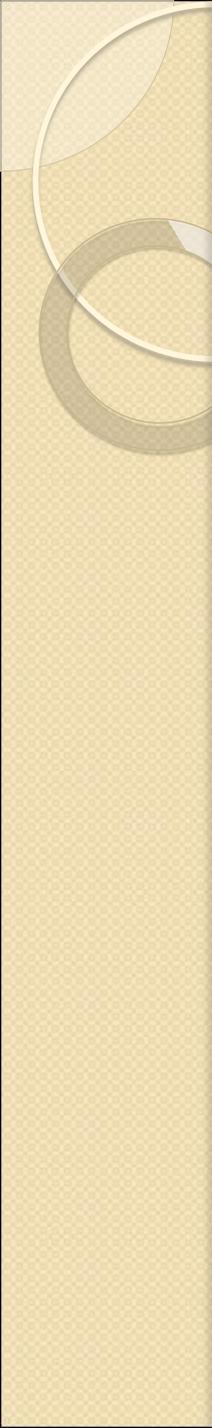
# Current Sites

- **Tri-County Mental Health Services, KC**
- **Truman Behavioral Health, KC**
- **Pathways, Clinton**
- **Pathways, Warrensburg**
- **Arthur Center, Mexico & Fulton**
- **BJC, St. Louis**
- **BJC, Farmington**
- **Independence Center, St. Louis**
- **Places for People, St. Louis**
- **Preferred Employment Services (AO),  
Springfield**

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- **Community Counseling Center, Cape Girardeau**
  - **Ozark Center, Joplin**
  - **Gibson Recovery Services, Cape Girardeau**
  - **Preferred – Advance, St. Louis**
  
  - **Potential Emerging/Future Locations**
    - **Burrell - Columbia**
    - **Burrell – Springfield**
    - **Crider Center, Warrenton**
    - **Comprehensive MH, Independence**
    - **SEMO Behavioral Health, Park Hills**

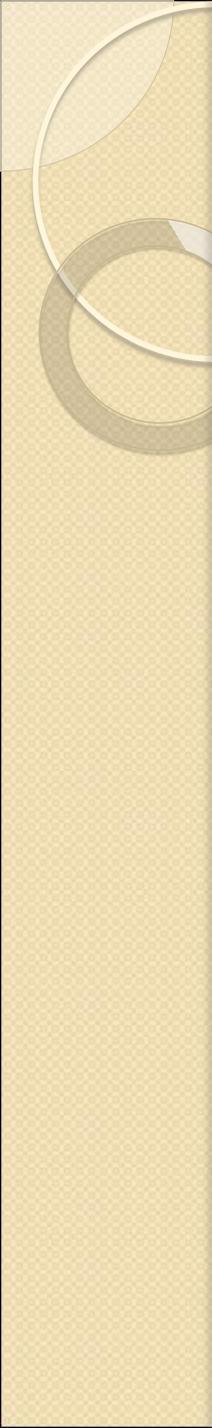
# Connecting with Employment Services

- Encourage tenants to have “getting a job” on their treatment plan – no matter where they receive mental health services
- Go to DMH – DBH website  
<http://dmh.mo.gov/mentalillness/adacpsemploymentservices.html>

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- Refer them to consumer-run programs for information & support (St. Louis, Kansas City, Springfield)

<http://dmh.mo.gov/docs/mentalillness/dropincenters.pdf>

- Refer to NAMI Missouri: (573) 634-7727

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- Refer them to your local VR office  
<http://dese.mo.gov/adult-learning-rehabilitation-services/vocational-rehabilitation/vr-offices>

# Questions?

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