David Law  
ESS Program Manager

Georgia Watson  
Mental Health Consultant
Inclusion of a psychologist into the employment assistance team;

the benefits of an integrated approach for participants with mental health needs and psychiatric disability.

Law D & Watson G 2014
Background

“Recovering from mental illness involves developing hope, moving beyond preoccupation with one’s illness, forging a new identity and pursuing meaningful life activities. For most people ... work is a central part of the recovery process. Finding a job and keeping it ... are not simple tasks.”

Drake RE et al 2003
Individual Placement and Support

- Developed by Becker & Drake (1993) and described in their book;

*A Working Life: The Individual Placement and Support (IPS) program.*
EPIC and IPS

1. DEN 2009 Sunshine Coast
2. DES 2012 Richmond
3. DES 2013 North Brisbane
EPIC model developed 2010-2013

• IPS model delivers positive outcomes
• Intersectoral links between ESP and community mental health service providers
Both of these models were targeting people with mental illness who were included in the community mental health services. Not all participants in DES who have mental illness are linked with community mental health services.
In 2010 SANE conducted a survey of people with mental illness, they concluded that:
Many employment service staff had difficulty understanding the needs of participants with mental illness or had unrealistic expectations of them and ...
... ... and

• Centrelink and employment service staff ... need training to better understand people with mental illness ... to help them find employment
Mental Health Consultant Role

The core function of the Mental Health Consultant is to;

1. help individuals with mental illness and disability secure and maintain sustainable employment in the open labour market
2. focus on the needs of people with mental illness to achieve greater social inclusion through workforce participation
3. engage with community programs to support the transition of individuals with mental illness to sustainable employment
4. to enable informed choice and decision making in relation to their employment and career options
5. and, to collect data and evaluate outcomes of the Mental Health Consultant role
What Does This Role Look Like?

• Sunshine Coast Employment Service Area
• Additional resource to the ESS team to assist job seekers with mental health issues or significant disadvantage
• Working collaboratively with Employment Consultant (EC)
• Reasons for referral to psychologist
• Program stage at referral to psychologist
• Duration of assistance
Interventions

• Psycho-education and individual skill building
• Suicide risk assessment and appropriate support engagement
• Referral to & liaison with appropriate services
• Supporting ECs & EAs to identify suitable employment opportunities
• Supporting ECs to implement work site support strategies
• Share resources with staff across entire ESA relevant to their participants
Results

• Pilot timeframe – 1 Jan 2013 – 19 March 2014 (<15 months)
• Participant numbers: N=61; F=45.9% (N=28); M=54% (N=33)
• Age distribution: 14 – 24 (N=25; 40.98%); 25 – 44 (N=20; 32.79%); 45-64 (N=16; 26.23%)
Results

- Looking for work at time of referral: N=31 (as determined by job seeker indicating interest in work)
  - 19 entered into employment = 61.29%
  - 2 entered into Certificate II study = 6.45%
  - 21 out of 31 engaging in employment or study = 67.74%
Results

- Not looking for work & not working at time of referral: N=12
  - 4 moved to more suitable payment type & exited as voluntary = 25%
  - 1 going through DSP application process (subsequently gained & exited voluntarily)
  - 2 voluntary exits (DSP recipients)
  - 3 suspensions/temporary work incapacities
  - 1 continued with program
Results

- Working at time of referral: N=18
  - 11 reached 26 week outcome or continued in role (61.11%)
  - 7 left position during their period of assistance with psychologist
  - 6 exits from program
Results

• Length of assistance (N=61)
  – 1 instance - <3 months (N=34; 55.74%)
  – 3-<6 months (N=14; 22.95%)
  – 6-<9 months (N=4: 6.58%)
  – 9+ months (N=9; 14.75%)
  – Longest period of assistance = 13.5 months
Participant Feedback

• I came to EPIC from another disability employment service. Their services felt very generic and impersonal. At EPIC it’s been helpful because you’re like a translator. Whenever I’m having trouble understanding something, you translate it. You understand my language.
Community Service Provider feedback

• Your understanding of the issues that people with mental health challenges are faced with brings appropriate levels of flexibility to your approach & the approach you seek from others you work with.

• What happens at EPIC is effective.

• The staff have an appreciation of the holistic needs of the challenges faced by people with mental illness.
Feedback from Colleagues

- Bringing a trained psychologist to the team is a resource that we can tap into.
- Gives the team a connection to the current state of services & who the current contact for the service is.
- So good for our service delivery to have the in-house skills to support participants.
• Not just about getting jobseekers into employment. When you have a participant with significant issues in employment (e.g., job in jeopardy), mental health consultant can step in & provide tailored support.

• It is a team approach and the mental health support has been a key component in keeping our participants engaged. I no doubt believe that some may have disengaged without the one on one support through our internal mental health service.
References

References


• SANE Research Bulletin 3 Employment and mental illness (June 2006)

• SANE research Bulletin 12 social Inclusion and mental illness (July 2010)

• SANE Research Bulletin 14 Working Life and Mental illness (August 2011)

IPS Fidelity Scale (15 point)

Staffing
1. Caseload
2. Vocational services staff
3. Vocational generalists

Organization
1. Integration of rehab with MH treatment
2. Vocational unit
3. Zero exclusion criteria

Services
1. On-going, work-based assessment
2. Rapid search for competitive job
3. Individualized job search
4. Diversity of jobs developed
5. Permanence of jobs developed
6. Jobs as transitions
7. Follow-along supports
8. Community-based service
9. Assertive engagement and outreach
Mental health is...

“a state of well-being in which every individual realises his or her potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”

*World Health Organisation*