

Honouring Aspirations

A plan to scale-up access to evidence-based employment support in mental health and addiction services.

By 2025 all adults seen by secondary mental health and addiction teams could have access to evidence-based employment support, to get and keep employment. This would mean lifting access levels from the current 26 per cent, to full coverage.

Improving access to intensive personalised employment support as part of mental health and addiction services, will lead to four times as many people achieving their employment aspirations.

Background: the inequity

People with mental health and addiction issues have significantly low levels of participation in the labour force. This is particularly the case for people accessing secondary mental health and addiction services who are four times more likely to be unemployed.

This is in stark contrast to people's desire to be employed, and resume careers. Research consistently shows that between 70-90% of people in contact with mental health and addiction services want to work.

Staying at work or returning to employment are wellbeing goals for people and whānau. Therefore, quality support to achieve these employment aspirations should be integral to a transformed mental health and addiction system.

Research on effective approaches to employment support have advanced significantly over the past 30 years, such that there is now a set of evidence-based practices known collectively as Individual Placement and Support (IPS) employment support. These practices have been proven, internationally, to be more effective than other approaches to vocational rehabilitation for people in contact with mental health and addiction services. This is because together they

provide personalised, high intensity employment support combined with mental health and addiction treatment and care. The most recent meta-analysis of 17 randomised controlled trials across 10 countries found that people in IPS employment support programmes were 2.4 times more likely to get a job than people in alternative vocational programmes.

Access to culturally led, intensive employment assistance is particularly important for Māori and Pasifika people with addiction and mental health issues who experience even greater labour force inequities. A recent evaluation of IPS employment support implemented in the Northland DHB region found that through good adherence to evidence-based principles and practices, the presence of on-site implementation expertise, and attention to culture, good numbers of Māori people accessed employment support and commenced employment.

“It's about finding out that person's strengths are and reminding them what they're good at. Because, they've been reminded so much what they suck at.... And just instilling that faith in them again to believe in themselves.”

Clinician

Ma te kotahitanga e whai kaha ai tatau

In unity we have strength



Key reports

The timing is right for scaling-up access to IPS employment support. **He Ara Oranga** and the **OECD Mental Health** and **Work New Zealand** reports recognise the importance of health-led, integrated IPS employment support services. He Ara Oranga found that people want person-centred, wrap-around support for their range of needs, including crisis support and acute care, social and employment support.

The **OECD report** found that whilst IPS employment support services are available in Aotearoa NZ, access is patchy and inequitable.

The OECD report calls for:

1. Measures for mental health and employment built into the Treasury's Wellbeing framework and implementation of a cross-government mental health and employment strategy.
2. A scale up of access to evidence-based employment support, integrated with mental health and addiction treatment.
3. Coordination of service procurement between the Ministries of Health and Social Development.

The **Wellbeing Manifesto** calls for employment support services alongside psychiatric treatment.

The **Welfare Expert Advisory Group Whakamana Tāngata** report recommends employment support services to intervene early and effectively, better support to young people for learning and earning and coherent policies that change behaviours of individuals, employment agencies, health practitioners and employers.

Scaling-up integrated health and employment services, including IPS employment support, is one of the priority actions in the cross-government Disability Employment Action Plan, **Working Matters**.

IPS employment support national steering group

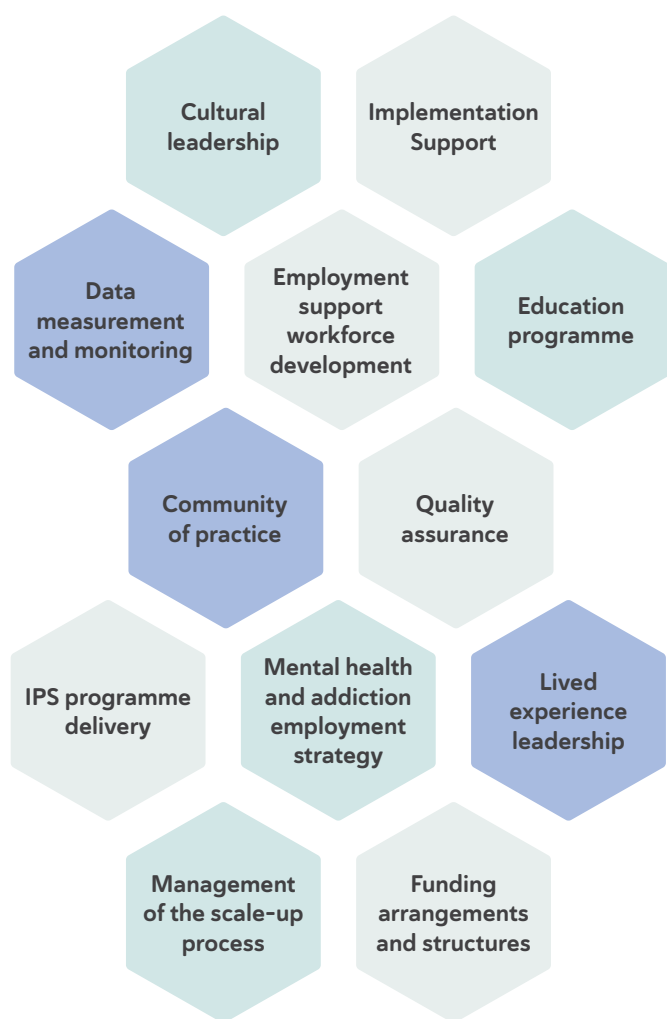
To address this employment inequity and to help improve the availability of employment support, an Aotearoa NZ IPS employment support steering group was established. This group is providing oversight in relation to the development of IPS employment support across the country. The steering group has representation from both the Ministry of Social Development and the Ministry of Health, as well as lived experience, Māori, NGOs and clinical directors, general managers and planners and funders from DHBs. One of the aims of the group is to increase access to high quality IPS employment support programmes, and the group has been developing **Honouring Aspirations** a plan for IPS employment support scale-up in Aotearoa NZ.

This implementation plan outlines building blocks required to scale-up access to employment support for people with lived experience. The plan includes a proposal for funding new service start-ups along with implementation support, lived experience and cultural leadership. The DHB clinical directors and general managers national forum and the DHB planners and funders forum' have supported the submission of this IPS scale-up plan.

*"My employment consultant is reaching
for the sky for me. It gives me some
uplifting hope. Because somebody else
is there fighting for me. I'm not alone.
She's giving me that much hope that I
can overcome it. The expectations that
she's got for me outweighs mine, but it
uplifts me. So, it makes me want to try."*

Dobby (Job seeker)

Building blocks for IPS employment support scale-up in Aotearoa NZ



IPS employment support practices

These practices are adopted by both clinical teams and employment specialists.

1. **Employment and clinical support are integrated** – support is coordinated and driven by the person. Treatment plans consider employment aspirations and employment status. Health care and treatment is wellbeing and work focused.
2. **Zero exclusion** – a person's desire to be employed is the only criterion for access to employment support. Individual characteristics like work history, current mental health symptoms, addiction issues, and convictions do not affect access, but are used to tailor the intensity of employment support.
3. **Individually tailored** – the employment support is person centred, focusing on what a person would like to do and their skills and experience.

4. **Rapid job search** – there are no lengthy preparations for looking for work, job search starts within four weeks of being referred to an employment specialist.
5. **Focus on competitive employment** – this is jobs in the open labour market paying minimum wage or above, and not jobs reserved for people with mental health and addiction issues.
6. **Financial guidance** – people are assisted to understand the financial implications of taking up work. Employment support services have excellent working relationships with local Work and Income staff.
7. **Job development** – employment specialists are actively out and about in the local community helping to identify and create job openings and opportunities. They do not rely only on job adverts and vacancies.
8. **Ongoing support to the employee and employer** – the person and the employer get ongoing support once employment commences, as needed.

Employment is a health intervention

IPS employment support programmes have been effectively established in some secondary and primary care environments, although coverage is based on local contracting arrangements and not routinely available across Aotearoa NZ.

Where IPS employment support programmes have been implemented programme outcomes are on a par with international benchmarks. Recent expansion of implementation to kaupapa Māori mental health and addiction services, along with a new IPS employment programme in Dargaville, Northland, demonstrate that the IPS employment approach is flexible enough to be able to be led by the cultural needs of the local population.

A critical practice is the integration of employment support services with mental health and addiction services. This ensures employment support is provided much earlier in a person's recovery process, is coordinated with health care, and clinical treatment can be tailored to the person's working life. Integrating employment support with care and treatment is the way to go – it promotes functional recovery i.e. supporting people to return to and stay at work, not just symptom recovery.

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Implementation support

WORK COUNTS

www.workcounts.co.nz

A systematic implementation programme is needed in Aotearoa NZ to move beyond the initial stages to sustained implementation. The call is strong from tāngata whaiora, whānau, clinicians, DHBs, NGOs and others for more integrated employment support. Aligned with the evidence on the value of implementation support, the Wise Group have established a business unit, Work Counts, to provide expertise and capability to support organisations to implement high quality evidence-based employment support. We know that implementation support improves fidelity to the evidence base, programme reach and outcomes, but most importantly it changes attitudes and practices.

IPS employment support programme coverage by district health board region February 2021

Excellent =

the region has more than 75% IPS coverage

Good =

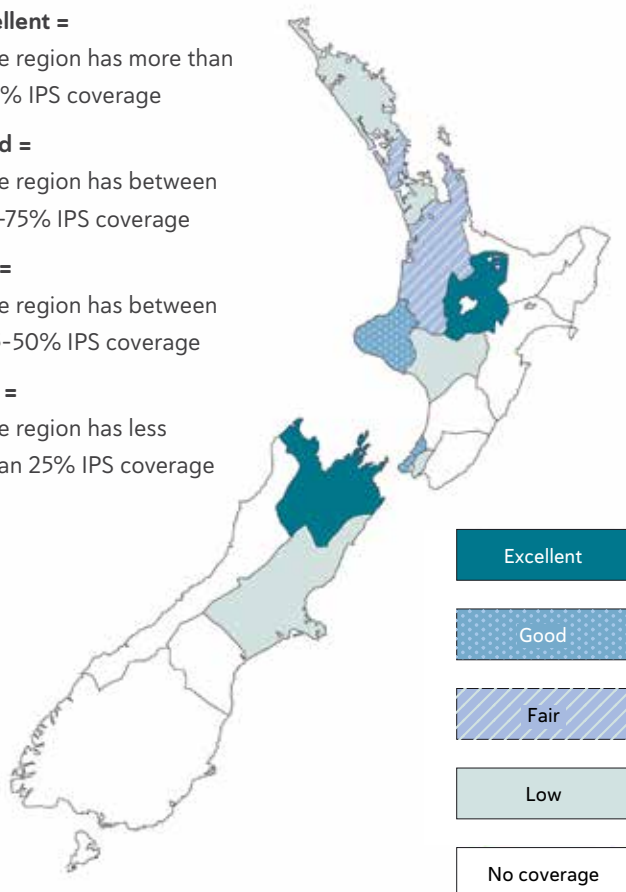
the region has between 51-75% IPS coverage

Fair =

the region has between 25-50% IPS coverage

Low =

the region has less than 25% IPS coverage



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Access to IPS employment support is not equitable

As at February 2021, there are 63.3 full time equivalent employment consultants across 12 regions, with eight regions having no IPS employment support coverage. Access to IPS employment programmes is therefore variable across the country and even within a region which has employment consultants working in clinical teams, access is not equitable. An additional 178 employment consultants are needed across the country. The building blocks in the implementation plan will support the recruitment, training and on-going development of this crucial part of the health workforce.

Aotearoa NZ IPS employment programmes are predominantly serving the general adult population, there is very minimal integration with Māori and Pasifika mental health services, youth services, and addiction services. Reach to these populations needs to be prioritised.

IPS employment support in Waitematā

In 2018, Waitematā DHB, funded through the Ministry of Social Development, established a prototype of IPS employment support. The prototype was successful in achieving a high-level of integration between employment and mental health services. Clinicians' perceptions of the programme and of changes in people who received IPS employment support, were overwhelmingly positive. Clinicians reported that IPS employment support practices align well with a kaupapa Māori approach. In 2019, this partnership won a Waitematā Health Excellence Award.

Initially the IPS employment support programme consisted of two FTE employment consultants integrated within two mental health teams. Nine months from service start up, 37% of participants had already secured employment. 80% of people who were employed were working more than 30 hours per week. Two-thirds of the participants had been out of work for more than a year or had never worked, and 78% had a diagnosis of psychosis. Since 2018, this prototype has now expanded to 13 full time employment consultants integrated within a range of mental health and addiction clinical teams.

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