

Individual Placement & Support Model of Supported Employment: Translating Research for Vocational Rehabilitation Practice

*A webcast of the Center on Knowledge Translation
for Disability and Rehabilitation Research (KTDRR)*

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Agenda

- Overview of Activity
- Presenters
- Discussion
- Wrap up

Overview

- What is Individual Placement and Support (IPS) and its evidence base?
- How has IPS been used in vocational rehabilitation (VR) practice?
- How can research about IPS be translated to support VR service delivery?
- What is the role of practice guidelines in implementing IPS to support VR service delivery?

Presenters

- **Deborah R. Becker**, MEd, CRC, Associate Professor of Community and Family Medicine and of Psychiatry, Geisel School of Medicine at Dartmouth and Director of Supported Employment at Dartmouth Psychiatric Research Center
- **Gary Bond**, PhD, Professor of Psychiatry, Geisel School of Medicine at Dartmouth and senior researcher at the Dartmouth Psychiatric Research Center
- **Eugene Oulvey**, PhD, Coordinator of Evaluation and Psychiatric Rehabilitation Services for the Illinois Department of Human Services - Division of Rehabilitation Services (DRS)

IPS Supported Employment

Quotes From Working People

“When I am working, the noise in my head gets quieter.”

“Working gives me a reason to get up in the morning.
And that is the best medicine.”

“In the past, people might have used labels to describe me such as ‘homeless,’ ‘mentally ill,’ and ‘welfare mother.’ Now my titles are ‘financial administrator,’ ‘college student,’ and ‘working mom.’”

Define terms

- Supported employment
- Evidence-based supported employment
- Individual Placement and Support (IPS)

IPS Characteristics

- Evidenced-based
- Practitioners focus on client strengths
- Work can promote recovery and wellness
- Practitioners work in collaboration with State vocational rehabilitation
- Practice changes the delivery of mental health services

Competitive Jobs

- Childcare Worker
- Meat Cutter
- Security Officer
- Reporter
- Receptionist
- Photographer
- Receptionist
- Machine Operator
- Sales Associate

Practice Principles

- Open to anyone who wants to work
- Focus on competitive employment
- Rapid job search
- Systematic job development

Practice Principles (continued)

- Client preferences guide decisions
- Individualized long-term supports
- Integrated with treatment
- Benefits counseling included

Supported Employment Fidelity Scale

- Practice guidelines for implementation and quality improvement
- 25-item scale
- Sections on Staffing, Organizational Structure, and Services
- 5-point response format
 - 1 = no implementation
 - 5 = full implementation

Partnership between Mental Health and Vocational Rehabilitation

Johnson and Johnson –
Dartmouth Community Mental
Health Program

- 16 States/regions
- 3 European countries

IPS Learning Collaborative



Individual Placement and Support: The Evidence

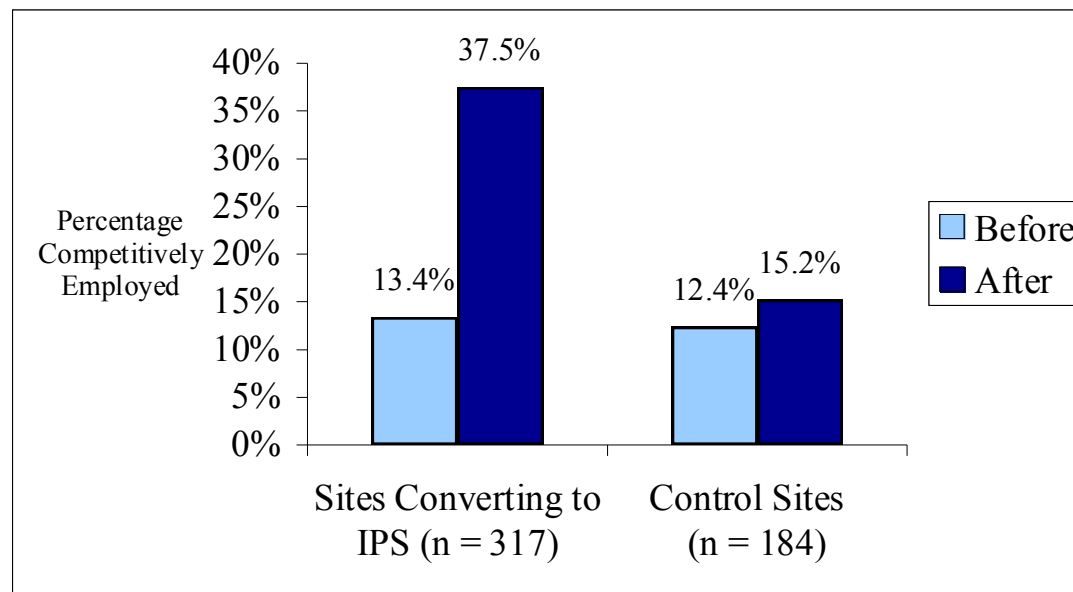
Need

- 2/3 clients with severe mental illness want to work, but only ~10% employed.
- Until the 1990s, no effective models for helping clients achieve stable competitive employment.

Day Treatment Conversions to IPS

- Discontinued day treatment
- Reassigned day treatment staff to new positions
- Implemented new IPS program
- Compared to 3 sites not converting
- Sources: Drake and Becker

Before and After Percentage Competitively Employed for IPS sites



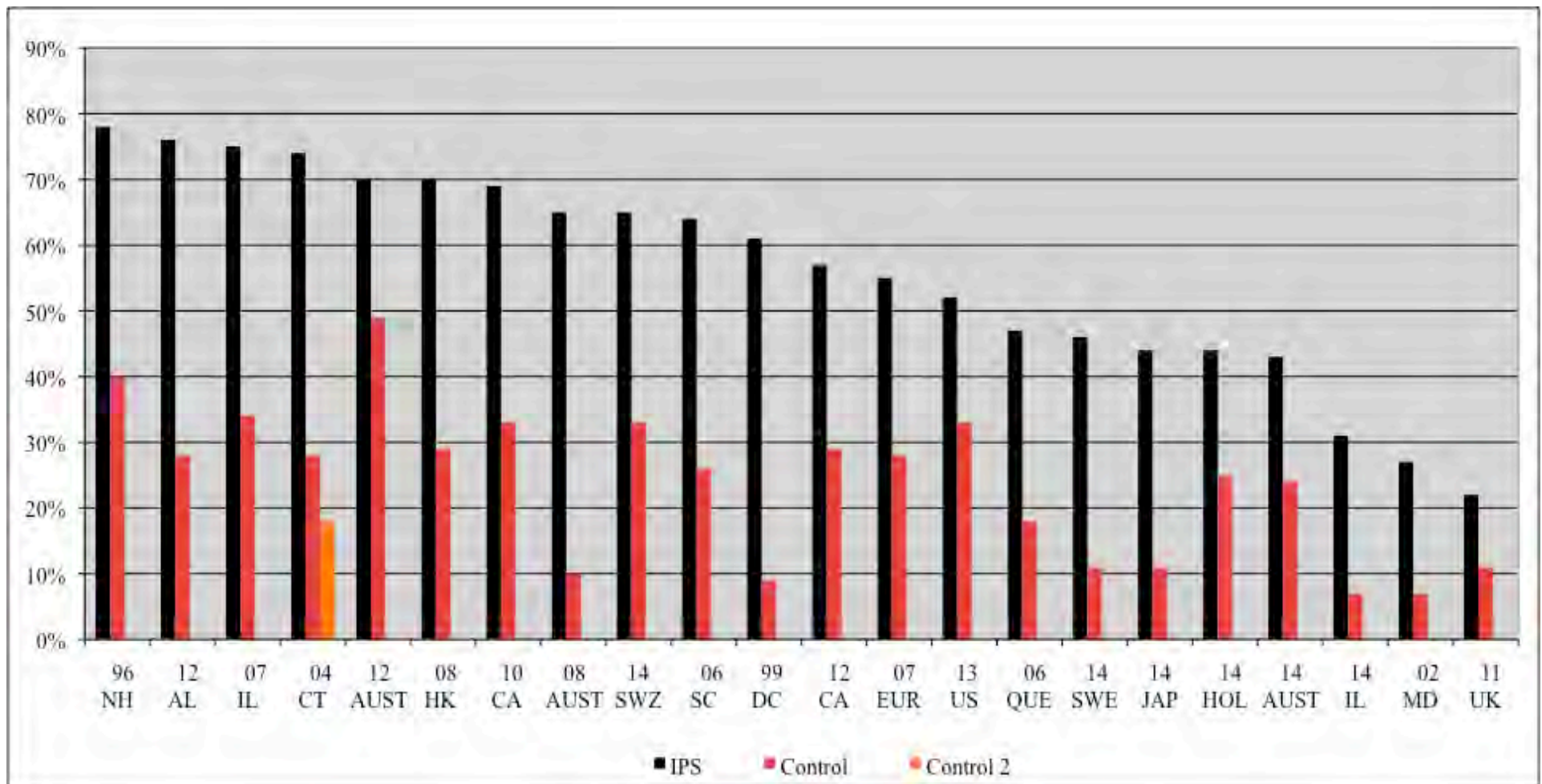
Summary: Day Treatment Studies

- Large increase in employment rates
- No negative outcomes (e.g., relapses)
- Clients, families, staff liked change
- Most former day treatment clients spent more time in community, even those not working
- Resulted in cost savings

22 Randomized Controlled Trials of IPS

- Best evidence available on effectiveness
- RCTs are gold standard in medical research

Competitive Employment Rates in IPS Studies



Overall Findings

- All 22 studies showed a significant advantage for IPS
- Mean competitive employment rates for the 22 studies:
 - 56% for IPS
 - 23% for controls

18-Month Competitive Employment Outcomes in 4 Controlled Trials of IPS

	IPS	Control	p
	<u>N</u> = 307	<u>N</u> = 374	
Job acquisition	216 (70.4%)	91 (24.3%)	<.001
Work ≥20 hrs/wk	128 (41.7%)	50 (13.4%)	<.001
Days to first job	140	212	<.001
Total hours	417.0	105.8	<.001
Total wage	\$3,704	\$1,001	<.001

(Bond, Drake & Campbell, 2012)

Mean Tenure of Longest-Held Job

Study	Follow-up Period	Sample Size	IPS	Usual Services
Bond & Kukla (2011)	2 Years	142	10.0 mo.	
Hoffman (2014)	5 Years	46/54	24.2 mo.	8.1 mo.

Job tenure for IPS was triple that for usual services in Hoffman study.

Steady Worker Rate in Three Studies

Study	Follow-up Period	Sample Size	IPS	Usual Services
Salyers (2004)	10 years	36	33%	
Becker (2007)	8-12 years	38	71%	
Hoffman (2014)	5 years	46/54	44%	11%
Overall Rate		120/54	49%	11%
Steady worker = Worked at least 50% of follow-up period				

IPS Is Effective for Many Populations

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

VR and IPS Complementary Strengths Flexible Roles

IPS provides unique opportunities for VR

- IPS is uniquely well described among vocational models
- This creates unique opportunities for clear definitions of VR roles, contributions, and responsibilities
- The VR systems and VR professionals cross-disability expertise is a good fit with the growing evidence for the effectiveness of IPS with diverse disability populations
- State VR's experience with IPS offers opportunities to develop practice guidelines

What IPS offers to VR

- Evidence-based practice
- Team approach
- Well defined roles of community agency mental health staff
- Predictive measurement tool
- Learning collaborative

What VR offers to IPS

- Expertise
- Consistency
- Accessibility
- Integration
- Resources

Quotes from Illinois Study

- Expertise: “(The VR counselor) helped... because he had all the inside track on really most of the businesses here... he probably saved a lot of time and effort... just knowing where to go, and where we might not be so successful.”
- Accessibility: “ The (VR counselor’s) door is always open. I could make an appointment with him and go talk to him and I know he would listen to me ... what’s going on with me so I can make a better employee... and not have mental blocks and insecurities.”

Quotes

- Accessibility: “I was able to take criticism from (the VR counselor) even when it was difficult to hear... because I knew he was on my side.”
- Integration: “I don’t think that consumers really notice a difference (between IPS team members and the VR counselor). I think that they see us as working together as a team... So when you say VR, they think it is us.”

Illinois Guidelines and Expansion

- IPS Chapter in VR Counselor Casework Manual
 - IPS services different from all other VR services
 - 10 days from referral to IPE (e.g., Individ. Plan for Employment)
 - Monthly IPS team meeting attendance
 - Backdate if working
 - IPS referral packet from community agency
 - Milestone payment system, 15-45-90 days
 - Post 90 day support, 120-150 days
 - Expands types of licensed diagnostic providers

IL Expansion of IPS Teams and Services

- 2012 - 37 IPS teams
- 2013 - 54 IPS teams
- 2014 - 73 IPS teams
- IPS services expanded to persons with Developmental Disabilities – 7 teams
- Focus on youth with mental illness – 11 teams
- Cross training in Customized Employment
- Opportunity for VR to build partnerships with other systems such as Developmental Disabilities, Commerce and Economic Opportunity

Summary and Steps

1. Cross-train. Observation of IPS fidelity reviews
2. Modify VR regulations to facilitate IPS services
3. Better define VR staff's roles in supporting IPS services and teams
4. Develop measurement tools to enhance VR support of and accountability for IPS services

Practice Guidelines

What is the role of practice guidelines in supporting the implementation of IPS?

- IPS implementation is guided by a 25-item fidelity scale, which indicates:
 - how the program is structured
 - what the responsibilities are for the employment specialists
 - how the employment specialists interact with the mental health treatment team, and
 - the role of VR counselors.

What is the role of practice guidelines in supporting the implementation of IPS?

- VR professionals make ongoing decisions about the broad array of vocational, clinical, support, and other services available to a diverse clientele.
- Practice guidelines can find no better vehicle for their realization than the principles and practices associated with the evidence-based IPS supported employment model.

How useful is the practice guidelines in helping VR counselors implement IPS?

- Give a roadmap of exactly how the services are being delivered
- Provide clear rules for state VR counselors and other state staff to select and to support community IPS services, teams, and the people they mutually serve
- Facilitate the recognition of the need to change guidelines and practices as the IPS services have been expanded to new groups of persons with disabilities and to the communities in which they reside

What should the practice guidelines include?

- Practice guidelines should be consistent with research evidence. The IPS fidelity scale consists of items reflecting the 8 IPS principles, each of which is supported by research evidence.

What should the practice guidelines include?

- The standards by which to determine the vocational and clinical effectiveness of VR supported services.
- Standards for making decisions about the appropriate individuals, groups, and circumstances for whom and in which IPS would be the best service option.
- A statement of the ethical and values-based standards that are the underpinnings for making these decisions.
- Standards for making cost/benefit comparisons when selecting and participating in the delivery of these services.
- Standards for selecting from and expanding upon the roles that VR professionals can play in the delivery and in the enhancement of IPS services.

Who should be involved in developing practice guidelines?

- A range of stakeholders were involved in developing the IPS fidelity scale including
 - the model developers
 - Researchers
 - Trainers
 - Program leaders
 - Employment specialists
 - VR counselors
 - Consumers

Who should be involved in developing practice guidelines?

- Family members
- VR administrators and staff
- Community agency representatives
- Topic experts from academia and persons with extensive practice experience
- Representatives from partner systems such as mental health, developmental disabilities, workforce development.

Wrapping Up

Thank you for participating!

- We invite you to:
- Provide your input on today's webcast
- Share your thoughts on future webcasts topics
- Participate in the Community of Practice to continue the dialogue
- PLEASE CONTACT US:

ktdrr@sedl.org

Please fill out the brief evaluation form:

www.surveymoz.com/s3/1798680/IPS-SupEmpl-Eval

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