

## Operating a Successful IPS Employment Program

Presentation speakers  
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## A Little Bit About Our Agencies

- Missy McGaw, Tri-County Mental Health, Kansas City, MO
- Gino Taylor, Truman Medical Center, Kansas City, MO

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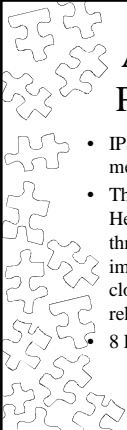
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## A Little Bit About Individual Placement and Supports (IPS)

- IPS supported employment helps people with severe mental illness work at regular jobs of their choosing.
- The Johnson & Johnson – Dartmouth Community Mental Health Program began in 2001 with a three-site pilot in three states for one year to demonstrate the feasibility of implementing evidence-based supported employment with close collaboration between mental health and vocational rehabilitation services.
- 8 Practice Principles of IPS Supported Employment.

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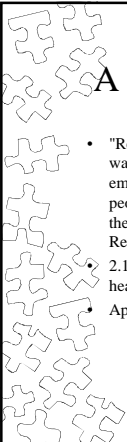
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## A Little Bit About IPS continued

- "Research tells us that 60-70% of people with serious mental illness want to work. However, fewer than 15% of these individuals are employed. These figures are troublesome because having a job helps people manage their symptoms, rejoin their communities and decrease their reliance on the social service system." - Dartmouth Psychiatric Research Center
- 2.1% of clients with severe mental illness in the U.S. public mental health system received supported employment in 2009.
- Approximately .5 -2% of BH clients are currently employed.

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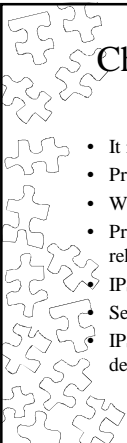
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## Characteristics of IPS Supported Employment

- It is an evidence-based practice.
- Practitioners focus on each person's strengths.
- Work promotes recovery and wellness.
- Practitioners work in collaboration with state vocational rehabilitation counselors.
- IPS uses a multidisciplinary team approach.
- Services are individualized and ongoing.
- IPS approach changes the way mental health services are delivered.

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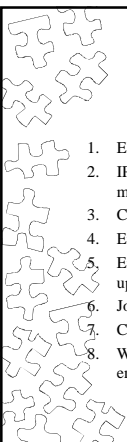
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## 8 Practice Principles of IPS

1. Eligibility is based upon consumer choice.
2. IPS supported employment services are closely integrated with mental health treatment services.
3. Competitive jobs are the goal.
4. Employer contact begins rapidly after consumers enter the program.
5. Employment specialists build relationships with employers based upon consumer job interests.
6. Job supports are continuous.
7. Consumer preferences are honored.
8. Work incentives planning is offered to all consumers who receive entitlements.

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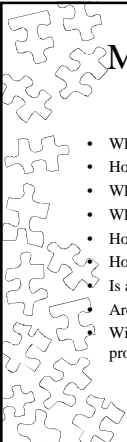
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### My Agency is Considering IPS. Now What?

- Where will I get funding for this model?
- How many staff members will I need?
- What should I look for in an ideal Employment Specialist?
- What kind of challenges might I face?
- How do I get “buy-in” agency wide?
- How do I integrate with treatment teams?
- Is a Certified Benefits Planner really necessary?
- Are the Fidelity Reviews “scary”?
- Will my outcomes be good enough to make this a sustainable program?

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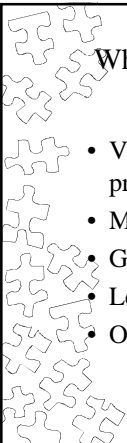
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### Where will I get funding for this model?

- Vocational Rehabilitation (VR) will be primary funding source.
- Medicaid
- Grants
- Levy/Taxes
- Other

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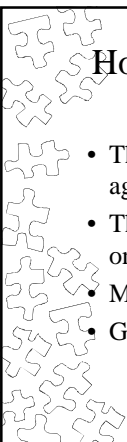
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### How Many Staff Members Will I Need?

- This will vary dependent on the size of your agency.
- This number could increase/decrease based on outcomes and performance.
- Missy/Tri-County Mental Health
- Gino/Truman Medical Services

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**What should I look for in an ideal Employment Specialist?**

- Marketing/Sales Experience
- Mental Health Experience
- Problem Solver
- Creative
- Outgoing/Unafraid
- Empathetic/Sympathetic
- Organized/Timely
- Persistent
- Professional

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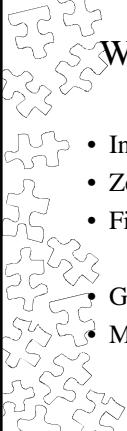
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**What kind of challenges might I face?**

- Integrating with treatment team(s)
- Zero Exclusion
- Finding the right ES candidates
- Gino/TMS
- Missy/TCMH

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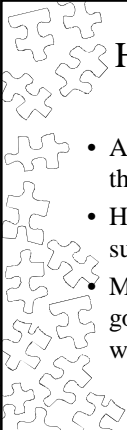
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**How do I get “buy-in” agency wide?**

- Attend treatment team meetings and explain the program.
- Have literature throughout agency supporting IPS.
- Meet with Board of Director’s or other governing body to express importance of work and recovery.

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### How Do I Integrate with Treatment Teams?

- Show Up!
- Be Consistent!
- Have Leadership that also supports IPS and work as part of recovery.
- Missy/TCMHS
- Gino/TMS

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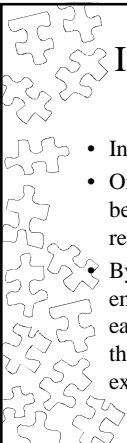
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### Is a Certified Benefits Planner Really Necessary?

- In short, Yes!
- Once on the disability rolls, less than 1% of beneficiaries per year move off of benefits to return to work.
- By helping people with mental illness gain employment, especially young adults experiencing early psychosis, IPS can help forestall entry into the disability system and reduce Social Security expenditures.

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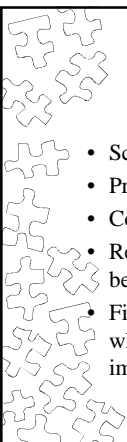
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### Are the Fidelity Reviews “Scary”?

- Scary-No. Stressful-Can Be.
- Preparation is the key.
- Collect and track the data.
- Read each section of the review and follow it as best you can.
- First one is just a baseline. You need to know where you are so that you can make improvements.

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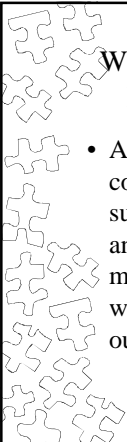
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### Will My Outcomes be Good Enough to Make This a Sustainable Program?

- A 10-year follow-up study of clients with co-occurring severe mental illness and substance abuse disorder found an average annual savings of over \$16,000 per client in mental health treatment costs for steady workers, compared to clients who remained out of the labor market.

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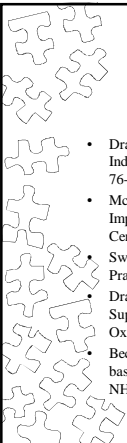
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### Recommended Readings

- Drake, R.E., & Bond, G.R. (2014). Introduction to the Special Issue on Individual Placement and Support. *Psychiatric Rehabilitation Journal*, 37(2), 76-78. PMID:24912057. DOI:10.1037/prj0000083.
- McGovern, M., McHugo, G.J., Drake, R.E., Bond, G.R., Merrens, M. (2013). *Implementing Evidence-based Practices in Behavioral Health Programs*. Center City, MN: Hazelden Press.
- Swanson, S.J., & Becker, D.R. (2013). *IPS Supported Employment: A Practical Guide*. Lebanon, NH: Dartmouth Psychiatric Research Center.
- Drake, R.E., Bond, G.R., & Becker, D.R. (2012). *Individual Placement and Support: An Evidence-based Approach to Supported Employment*. New York: Oxford University Press.
- Becker, D.R., Swanson, S., Bond, G.R., & Merrens, M.R. (2011). *Evidence-based Supported Employment Fidelity Review Manual (2nd. Ed.)*. Lebanon, NH: Dartmouth Psychiatric Research Center.

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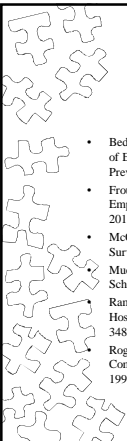
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### References

- Bedell JR, Daving D, Parrish A, Gervy R, Guastadisegni P. A Description and Comparison of Experiences of People with Mental Disorders in Supported Employment and Paid Prevocational Training. *Psychiatric Rehabilitation Journal* 1998;21(3):279-283.
- Frounfelker RL, Wilkiss SM, Bond GR, Devitt TS, Drake RE. Enrollment in Supported Employment Services for Clients with a Co-occurring Disorder. *Psychiatric Services* 2011;62:545-547.
- McQuilken M, Zahniser JH, Novak J, Starks RD, Olmos A, Bond GR. The Work Project Survey: Consumer Perspectives on Work. *Journal of Vocational Rehabilitation* 2003;18:59-68.
- Mueser KT, Salyers MP, Mueser PR. A Prospective Analysis of Work in Schizophrenia. *Schizophrenia Bulletin* 2001;27:281-296.
- Ramsay CE, Broussard B, Goulding SM, et al. Life and Treatment Goals of Individuals Hospitalized for First-episode Non-affective Psychosis. *Psychiatry Research* 2011;189:344-348.
- Rogers ES, Walsh D, Masotta L, Danley K. Massachusetts Survey of Client Preferences for Community Support Services: Final Report. Boston: Center for Psychiatric Rehabilitation, 1991: 1-59.

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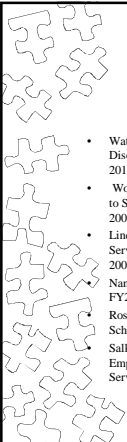
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## References

- Watkins KE, Pincus HA, Paddock S, et al. Care for Veterans with Mental and Substance Use Disorders: Good Performance, but Room to Improve on Many Measures. *Health Affairs* 2011;30:2194-2203.
- Woltmann E. Development and Evaluation of a Consumer-directed Decision Support System to Support Shared Decision Making in Community Mental Health. Dissertation: Dartmouth, 2009.
- Lindamer LA, Bailey A, Hawthorne W, et al. Gender differences in Characteristics and Service Use of Public Mental Health Patients with Schizophrenia. *Psychiatric Services* 2003;54:1407-1409.
- Nandini J, Leno S. Employment of CRT Clients: Third Quarters (Jan-Mar) of FY2000-FY2012. Waterbury, VT: Vermont Agency of Human Services, 2012.
- Rosenheck RA, Leslie D, Keefe R, et al. Barriers to Employment for People with Schizophrenia. *American Journal of Psychiatry* 2006;163:411-417.
- Salkever DS, Karakus MC, Slade EP, et al. Measures and Predictors of Community-based Employment and Earnings of Persons with Schizophrenia in a Multi-site Study. *Psychiatric Services* 2007;58:315-324.

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