

**HIP POCKET VERSION OF**  
*A Working Life for People with*  
*Severe Mental Illness*

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## **SOME HISTORY**

After the closing of many state hospitals, the first attempts at mental health programs replicated the hospital mentality in the community. Group homes, day programs, sheltered workshops and mental health centers should be seen as institutions in the community.

Employment was never part of the mental health programs.

If employment was offered, it was done through endless job trainings, readiness assessments or sheltered workshops. These were seen as safe environments. Even today, many of those who work in mental health still think that having a regular job for people with mental illness is too stressful.

Many of the employment programs in mental health kept people away from the community. People who worked in mental health thought that the clients that they worked with were not secure enough or stable enough to work in the community.

The idea that people needed to be trained and/or endlessly watched in a controlled environment before they could work was the accepted thinking for many years. Only if and when they could complete the training, were people seen as ready for work.

Over the past fifteen years, the mental health system has realized that people can be seen on the job and/or at home by outreach workers. These outreach workers or Employment Specialists work with people in the community.

Practical suggestions about how to better relate with people around them, not endless lectures about self-esteem need to be given to recipients of supported employment services. Individuals receiving employment services can go out and experience real work.

Instead of being placed in sheltered workshop, individuals can have a job in the community and have an Employment Specialist.

People need and can have a working life.

However.....

Employment Specialists and Supported Employment are new concepts.

Understanding where people with psychiatric conditions fit in this new mental health program called Supported Employment will require education for staff and consumers.

This Hip Pocket version of the book *A Working Life for People with Severe Mental Illness* by Robert Drake and Deborah Becker will attempt to provide some of that education for consumers and/or all people interested in Supported Employment.

## Our Story

For years, we were told we would never get better. Our states of psychosis and crisis would last forever. However, we got better.

We would fall apart sometimes. We continued on. Many times we still felt disjointed by this mental illness. We continued on.

All in all, we did well considering that no one told us what our mental illness was or how to live with it. We also did well finding part time jobs or under the table employment. Sometimes, we didn't tell staff in mental health programs that we had a working life.

In some ways, the silence about our working lives kept the mental health establishment from understanding what was fully possible for us.

### *The Consumer Movement*

All across the world, there is a consumer/recipient movement which advocates for better mental health services. The consumer movement also advocates for consumer/recipient run and directed services. This consumer/recipient movement continues to put pressure on the mental health system and political system for improved mental health services.

The design and implementation of supported employment and other evidence based practices is directly related to consumers and families asking for these services.

The idea of wanting a job and being able to work was not part of the mental health establishment for many years. Not being able to work was actually seen as part of the diagnostic criteria.

People who have a psychiatric condition want to work. I have talked to many people who want a part time job during the week. Some even hope for full time employment. Those of us in the mental health system want to do something useful with our time.

We want support and encouragement. We do not want to be put down as failures. We want people to work with us for a longer period of time than the mental health system thought we needed or planned. There are no six month miracles.

We also do not want to lose our benefits before we are-sane, stable, safe and sober.

In the past, we cried out for jobs and something to do. We cried out for the companionship which can come from the workplace. We cried out for the personal identity which comes from employment. We cried out for help in choosing, getting and keeping a job. Finally, people seemed to listen. Around 1988, the design of Supported Employment started.

### *The Family Movement*

In 1997, The National Alliance for the Mentally Ill gave a report on the failure of the vocational rehabilitation system to create and sustain employment for people with mental illness. The entire national system of vocational rehabilitation services was given a failing score.

Families demanded vocational services. Over the years, families started to learn about clubhouses, mental health programs and supported employment. As time has gone on, families realize that with proper supports over a period of time-most people can do some work.

Some people with psychiatric conditions might be able to only work four hours a week or more. Yet, many people with mental illness can work.

There can be a vocational opportunity for everyone.

### *Innovative Approaches to Community Mental Health*

During the deinstitutionalization era, when people with mental illness were released from the hospitals, people were put into settings which still had the attitudes of the long term hospitalization settings.

There was a lot of control, people were told what to do, there was not much education about disability awareness and there was almost no disability pride.

Two programs were designed which helped keep people out of the hospital and into the community. The Strengths Model of Case Management and Program of Assertive Community Treatment (PACT).

The PACT Model was one of first programs of mental health which realized that with an Employment Specialist on the team, employment outcomes improved dramatically.

The PACT Model delivers services through a multi-staffed unit. This means that, to avoid service fragmentation, different people with diverse skills make up the PACT Team.

The staff in the PACT model can also bring about a more educational approach by teaching people to be successful in housing, work, school and social settings rather than just medication management and program attendance compliance. The staff members are knowledgeable about housing, employment and education.

The Strengths Model has given people with mental illness a chance for employment. In the past, looking at what was wrong with the person or being evaluated by the severity of one's illness limited people's employment options.

Understanding and evaluating people's strengths opens the doors to opportunity.

The idea of early involvement in the community is important. Involvement in the community can come through employment when people want it. This is done through shared decision making.

The idea that people are ready to work when they want to work is one of the principles of Supported Employment. When people say they want to work, the system gets busy trying to find a job. The system finds the job that the person wants. The system finds the job in the time frame

that the person wants. The person who wants the job is also involved in the job search as much as possible. The quest for employment becomes a partnership where everybody on the support team is working together and working for the person seeking employment.

The goals for job placement are based on the wants of the person looking for employment.

By placing a person where they want to work and not an artificial work setting-a working life is possible for all people who want it.

### *Shared Decision Making*

The idea of client choice has been one of the central themes of the consumer movement. In today's medicine, the idea of client choice has moved away from the doctor as authority model and moved towards the model of providing people with information. Then, people can make choices about the type of health care which might work for them.

The idea that a person needs hours of counseling or pre-vocational work before they want to work is not the right one. People are ready when they say that they want to work. Finding work that is meaningful is a process. There are no quick fixes. There are no easy solutions. There will be no instant job offers.

However, when people on the support team with the Employment Specialist follow the client's choice-there is more success and a longer stay in employment.

People need to make choices and employment specialists need to work with people on their choices. Employment specialists need to have people succeed with their choices. Employment specialists and others are the motivators and facilitators for success.

Employment specialists encourage and facilitate a working life into become a reality.

### *Cross Cultural and Outcomes Research*

The prevalence of mental illness seems to be constant across all people, all nations, all races and all class backgrounds. However, the rate of recovery seems to improve with environments where there is less stigma.

A person can get better by having a job rather than being homeless.

Supported employment holds the promise of not only providing an income but also encouraging community and family acceptance.

Having a mental illness is not a linear progression. There are some studies which show that people improve with their mental illness. Our job is to help all people with mental illness get better. Supported employment seems like a great option for recovery.

Following people's ideas and trying to help implement their dreams seems to be one of the best ways to succeed with supported employment. When someone wants a job-the staff start working and looking. Everybody starts working and looking.

However, people start looking for employment at the pace with the person who wants the job. So, friends, staff, family; everyone connected with the job seeker starts working and looking in unison with the person who wants to work.

Finding each person a job means that the job search is individualized. Understanding there are both similarities and differences between people is also important. Not everybody is going to succeed in the job market. Not everybody wants to work or go back to work at the same speed.

Realizing that people have a mental illness and can also make good decisions is important. When people say that they want a job, it is because they want to work.

## Supported Employment

In the past, most mental health employment initiatives were based on the train-place model. A person spent time in vocational training or education until the vocational rehabilitation counselor felt the person was ready for employment.

However, many people were not interested in being good workers at the training sites and saw no future employment opportunities. Training seemed to discourage some people. Many of the training sites were seen as boring.

Along came Supported Employment. People were able to work in jobs that paid minimum wage and were in the community. Also, they were jobs in which people might work in and want to advance in.

People with mental illness can work with other people from the community.

People with mental illness don't need to be sheltered.

People with mental illness can work.

The book Working Life points that out:

“Determining needed skills and supports in the context of a competitive job is more straightforward. The individual has a job he or she is interested in doing. They have real demands for performance, they see that they need specific skills to do the job successfully, and they experience a real social situation on the job. At this point an employment specialist and a team can be more helpful. Along with the client, they can identify and develop the needed skills and supports” (Becker and Drake, 2003, p.16).

Supported Employment is not a fad in mental health.

Supported Employment is a part of the mental health services of the present and future.

Every person in our mental health system is a candidate for employment.

We have to give each individual a chance to work.

# **INDIVIDUAL PLACEMENT AND SUPPORT (IPS) APPROACH TO SUPPORTED EMPLOYMENT**

IPS brings standardization to Supported Employment.

## The Eight Principles of IPS

1. Rehabilitation is considered an integral component of the mental health system rather than a separate service.
2. The goal of IPS is competitive employment in integrated work settings, rather than pre vocational, sheltered, or segregated work experiences.
3. People with severe mental illness can obtain and succeed in competitive jobs directly, without pre employment training.
4. Vocational assessment is continuous and based in competitive work experience, rather than in artificial or sheltered settings.
5. Follow-along supports continue for a time that fits the individual, rather than terminating at a set point after starting a job.
6. Job finding, disclosure, and job supports are based on a client's preferences and choices, rather than a provider's judgments.
7. Services are provided in the community, rather than in the mental health treatment or rehabilitation settings.
8. A multidisciplinary team approach, rather than parallel interventions in separate agencies or systems, promotes the integration of vocational, clinical and support systems.

Employment specialists are co-located with the mental health treatment teams and not outside. They are part of the decision process in team meetings. They can provide connections with other agencies.

Employment Specialists work with 20 to 25 clients each.

IPS does not exclude people with severe symptoms, poor vocational histories, or uncertain readiness for employment.

IPS is a Place-Train model. People are placed in the jobs they want. Then, trained to help stay on the job. Employment is a part of the mental health program.



The book *Working Life* (Becker and Drake, p. 23) uses these examples:

A person who is restless and spends time walking might be better fitted delivering fliers rather than be trained to be less fidgety.

A person who has anxiety and fearfulness around people but comfortable around animals might be helped to find a job with pets or on a farm rather than be trained to control their feelings.

Too often people have been trained to get rid of symptoms, control feelings, find the right clothes and then go to work. Just the opposite seems to be true. People will get a job and stay on the job and work with others. Then, the other aspects like reduced symptoms or controlled feelings seem to happen.

When people go back to work, the Employment Specialist stays with the person.

The Employment Specialist can coordinate with the employer only after the client gives permission. Most people in the job benefit from support away from the job site. So, the Employment Specialist makes an appointment and supports the person away from the work site.

The Employment Specialist is part of the clinical team. Employment services are coordinated with the clinical team. The Employment Specialist is getting a person a job and the people treating the same person are not working against this.

Everybody is working toward the employment of the person. For instance, the clinical team is not working against the client by saying and/or thinking that the person is too sick to work. The treatment team tries to figure ways to help the person stay on the job.

When someone goes back to work, new clinical issues can arise. People on the treatment team will have to deal with new clinical issues. The clinical team does not try to keep someone from working so that there are no changes in their clinical status.

The Employment Specialist is there to work with the twenty to twenty five clients and address their clinical needs to the treatment team.

The Employment specialist will probably have to defend job readiness and job steadiness several times with treatment team. This is all the more reason to have the Employment Specialist as part of the treatment team.

IPS is not a unique vocational service. IPS is also part of traditional supported employment models and merely adapts itself to those services through the principles of IPS. These principles also help standardize the field and practice of Supported Employment.

## **PRACTICE GUIDELINES FOR IMPLEMENTING SUPPORTED EMPLOYMENT**

These guidelines will do two things:

We will come to understand and appreciate the joys of supported employment and the opportunities, which come from having a working life.

We will come to understand what the Supported Employment services are supposed to look and feel like. Understanding Supported Employment and the IPS model wrapped into Supported Employment leaves us informed to make better choices with the our treatment team. The Employment Specialist is part of the Treatment Team.

IPS happens simultaneously with other programs. For instance, a person doesn't have to go to a drug and alcohol program before they go to work. They are going to work and go to the program at the same time. For many people, the longer that one keeps working, the more likely that one will eventually succeed in other treatment programs. Supported Employment can be the glue that keeps people continuing with their treatment.

Work and mental health are interactive. People can become better mentally by working. Many people feel that working is central to regaining a life. Working with other people in the community leaves a person feeling accepted rather than lonely and alienated.

Many people have felt more complete by working with other people in an environment which also pays a full wage. People feel like they have returned to a sense of purpose through work. Their symptoms may or may not be reduced. However, many people can feel better about themselves working for a full wage in real work environment. They have a paycheck. They have a position. They have a title. They have somewhere to go. They have something to do. They have a working life!

The vocational assessment then becomes an ongoing process of the work experience. People do NOT have to wait for endless assessments before they work. They meet with the Employment Specialist to begin the engagement process. The Employment Specialist tries to match the person's abilities and skills with a job. But, first the Employment Specialist needs to understand and find out what are this person's unique abilities and skills.

No matter what the outcome-if they do or do not get the job or if they do or do not keep the job-people feel like they learn from the experience. There is no bad attitude like-well we tried that and it didn't work, so we won't try again. We keep trying all the time. We keep learning. We keep trying.

We don't give up on anyone. Anyone who wants to work-we try to find them a job. Our task in mental health, and this includes peer support, is to find someone a job. Family, friends, treatment team, other peers in the program; all are working with the recipient of Supported Employment Services and the Employment Specialist.

All work together to help people get a working life.

Some people want to move right into work and some are more hesitant. The Employment Specialist learns how to work with everyone who desires to work. Most people do start with part time jobs and the usual amount of five to ten work hours a week is common.

Fear of losing benefits is the biggest fear. The Employment Specialist helps clients understand the rules regarding benefits so people have the necessary information to make good decisions.

The person receiving the supported employment service makes the decision on what to disclose and what not to disclose. Some people want to find their own jobs and do not want to disclose because of fear of stigma. The Employment Specialist is there to support, nourish and encourage the person to continue the working life.

Some people can find a job without the help of the Employment Specialist.

However, the person who is trying to work and/or working understands that the Employment Specialist can and will talk to the treatment team. This is part of the Evidence Based Model.

IPS is part of mental health care. There are no divisions between the Employment Specialist and the team providing other mental health services.

The Employment Specialist brings other people on the treatment team up to speed about the person's ability to work and stay on the job.

## REMEMBER

For Supported Employment to eventually be accepted by the treatment team, by the public, by the families and by the people in our programs; seeing people working and seeing people staying employed is what convinces people of the value of Supported Employment.

## **STRUCTURE OF INDIVIDUAL PLACEMENT AND SUPPORT (IPS) IN THE MENTAL HEALTH AGENCY**

There are two ways that the Individual Placement and Support concept can be established

1. IPS is added to the current menu of services offered to different clients and the Employment Specialist joins a multi disciplinary treatment team.
2. IPS replaces some services like rehabilitative day programs.

With the first option, costs do rise. It costs more to have a new staff person. Some mental health agencies have a staff shortage. An Employment Specialist on the ACT team does cost more money. Providing more care to people is a job which requires people to be there and people to be paid.

Community Mental Health care costs can be offset by many other variables; less hospital time, better diet and better health.

Those cost savings are generally not part of the community mental health program's budget. By having an Employment Specialist at the agency, there can be less need for intensive staff time.

Understanding the funding situation and trying to come to a workable solution is important. Many times, those of us who receive services, the clients, want opportunities like an Employment Specialist without understanding what the agency has to accomplish to create these new staff positions.

We need to learn about these new staff roles and opportunities in mental health. We need to understand the costs. So then, we can better participate in our programs by appreciating the services which we are offered. And, we can ask to have these services, like Supported Employment as part of our mental health care.

In my situation, I still meet with a social worker. We talk about employment. I am going to train him in the book *A Working Life*. He will stay a social worker. He has other therapeutic relationships with other people, but he is assuming the role of keeping me employed.

This is not the ideal model. The ideal would be to keep the social worker and also have an Employment Specialist. Someday, I hope to have that.

However, by him working with me, the coworkers at the agency and the other clients can see the benefits of having someone helping with employment issues. Again, the success of employment is what sometimes increases the chance of acceptance by both agency and clients.

Everyone at a mental health program, clients and staff have to see the value of a working life. Once people see that working has become an important realistic option, then Employment Specialist positions and Supported Employment options will continue to increase.

There needs to be team approach to Individual Placement and Support models. Those of us that are clients need to remind everyone that we want our situation discussed. We sign off on a full treatment discussion about our employment. Treatment team participation by people working together will only increase our opportunity for a working life.

We want to succeed in employment. We want employment to be part of our lives. We want a working life!

For many years, mental health practitioners had not been thinking about employment. They had been spending time trying to get people to the program, take their medication, reduce crises and performing follow up in the individual client's life. Employment is a new idea as part of the mental health practice.

It is better to have the Employment Specialist as part of the team than in a separate agency. Those of us who receive mental health care are going to have to ask for Supported Employment. We need to know and learn about IPS and Supported Employment. We need to learn new developments in the practice of Supported Employment.

This hip pocket book about *A Working Life for People with Severe Mental Illness* is our first step to better understand the opportunity of supported employment.

We need to be prepared to continuously ask for this new day in mental health. A new day that has Supported Employment and a working life!

All the treatment team, preferably everyone in the agency and also the people who receive services at the agency, should be trained in the IPS model and the role of the Employment Specialists.

## The Treatment Team

The treatment team refers to a core group of people who provide and coordinate services. These people might be case manager, therapist, psychiatrist and/or nurse. The treatment team might also have specialists in housing, health care, substance abuse treatment, peer support and recreation.

Also, if a person is receiving care from Vocational Rehabilitation, people from that service should be part of the treatment team meetings and part of the treatment team planning and decision making.

The book *A Working Life* describes the role of the treatment team this way:

In the IPS, the treatment team works with a group of clients, meets regularly (at least weekly) to discuss the clients' situations, and generally makes recommendations as a group on all aspects of each client's service plan. (Becker and Drake, p. 54)

The Employment Specialist attends all meetings. The Employment Specialist is equal to all people in the decision making process.

Team meetings are where critical decisions are made and the Employment Specialists need to have their ideas heard. Employment Specialists are the staff members who represent the people in the programs and their dreams of having a job and having a working life.

Focusing on employment is going to be a new change for everyone. This will require people working toward having more people in our mental health programs employed. Then, people can begin to feel better from employment.

This is a reversal of past thinking, where people had to feel good before they could work.

However, Employment Specialists have to watch out and not get involved in becoming the case manager or other clinical decision makers. The Employment Specialist is there to focus on employment.

The team must be sure that it is the client's choice not to work rather than a failure of the treatment team to provide encouragement.

For instance, people experience stress on the job. Some members of the treatment team might feel that too much stress is bad for the person. The Employment Specialist would be able to provide another perspective about the person and the job. The Employment Specialist might be able to explain why and how the person is benefiting from a working life.

Stress can be reduced by going to work and learning how to work with other people in the workplace.

Also, the employment specialist can bring additional knowledge about how a particular person in the program functions in a specific environment to the treatment team.

Understanding what a person does and how one gets around in another community, outside the mental health world, is important for the treatment team.

## Planning

Putting the IPS model into the mental health agency is a big change. Having all people talk about their concerns and hopes concerning supported employment is important.

The book *A Working Life* says that the conversion process goes most smoothly in agencies which encourage everyone to talk about the transition and give input about supported employment.

Put the word and concept of WORK in the agency's mission statement!

IPS is not another new service. IPS can be part of the existing Supported Employment services. IPS defines what should take place as an optimal form of Supported Employment.

Evidence Based Practices are programs which are structured to bring about the most success to the most people through proven effectiveness. IPS in the Supported Employment model brings about the most success for the most people.

To bring about an Evidence Based Practice like IPS, everybody needs to become involved.

Through education, this Hip Pocket Book about IPS and Supported Employment hopes to bring about more consumer buy-in. The best way to state that an agency demonstrates buy-in comes from having work as an outcome in the agency's mission statement.

Again, having employment as a goal in the mission statement demonstrates the agency's public commitment to *A Working Life*!

### Committing the Resources

Having the IPS model implemented is a clear statement that the agency believes people with severe mental illness can manage their conditions and develop a greater level of independence and happiness. Work is often the vehicle to achieve this (Becker and Drake, p. 64.)

Finding a job as soon as possible is part of the Evidence Based Practice model.

There needs to be at least one Employment Specialist in place to have real supported employment. Money needs to be set aside to pay the employment specialist. Services follow the funding.

If there is funding for Employment Specialists and Supported Employment, then those staff positions will be established. The financial resources have to be committed to make Employment Specialists and Supported Employment happen.

Those of us, who receive mental health care, need to ask for those services.

We also need to ask our agencies to follow the guidelines for Supported Employment as established by the Evidence Based model.

These guidelines are found in the book *A Working Life* by Robert Drake and Deborah Becker.

### Anticipating the Effects of IPS on other Programs

The number of people going to work can grow tremendously with this IPS model of Supported Employment. This means that people are no longer around the agency or day programs. They are in the community. The staff's contact with clients changes.

The Employment Specialist is visiting people where they work or off site for a cup of coffee and conversation.

The Employment Specialist is a new staff position. The role of Employment Specialist is the role of doing the new work of finding a job and keeping people in a working life.

The changes at the agency, shifting people into new jobs will need to be done.

Supported Employment has the potential for also changing the look and feel of mental illness.

People with mental illness were seen as weak and unable to do anything. We were seen as people who needed to be cared for. We might still need care and employment at the same time.

For years, one of the symptoms of mental illness was inability to work. Our mental health system was set up to provide paternalistic care to and for people. The mental health system was not set up to help people return to work.

Now, work has become and is becoming a bigger part of the day for people with mental illness. Mental health workers are beginning to think about employment as part of mental health care.

If people are working in the community and not attending a program, then the agency loses money by not providing services which are reimbursable. There can be a shift in Medicaid money that the agency will receive.

These are some of the changes which can take place for an agency to continue to provide mental health services which are Medicaid billable.

1. An agency can be open on the weekend or after hours to reestablish the lost money from Medicaid.
2. People in recovery might also be a new source of employment in the agency. This could add cost effective staffing to help increase coverage.

So having billable peer support and/or night classes and weekend support meetings might be another option to add coverage and make up for funding shortfalls.

### Staff Attitudes and Training

Staff need to be trained in what Supported Employment is and how it can work at the agency site.

Many people think that clients of mental health services need training before we can work. Most people can start to work and develop skills as we work. Most people start at entry level jobs, wherever they are. They improve their job skills and get promoted. People can and do learn while working.

Supported Employment is a new concept in mental health. Most staff people are not familiar with Supported Employment.



Remember, we are all learning together.

An exercise in the agency might be:

Have the staff of mental health services think about and talk about how much having a job has done for them.

The staff talk about their successful feelings coming from the experience at work. How they feel better about themselves going to work day after day. They are then asked to talk to their clients about Supported Employment and how work can also benefit them.

So, the mental health staff first presents the positive aspects of work and then tries to show how clients might also benefit from going to a job every day.

These are some steps that staff can take to become familiar with Supported Employment:

1. Attend the same meetings and/or conferences that IPS specialists attend. Attend the same supervision, treatment and training meetings. Understand IPS from the inside.
2. Meet with a psychiatrist who embraces Supported Employment. Have the psychiatrist discuss why he or she believes in Supported Employment.
3. Meet with one or two case managers and/or outreach workers and have them describe their roles with the implementation of Supported Employment.
4. Learn from employment specialists in the community. Shadow or follow the Employment Specialist and learn by watching. Learn by meeting other clients working with the IPS and talking to them about Supported Employment.

Mental health staff can go with the Employment Specialist conducting job searches, meeting employers and learn.

Meet with anyone and everyone who is part of the Supported Employment experience. Discuss and learn from their experience.

These are some ways to learn about Supported Employment.

Educating people about Supported Employment takes time.

### Implementing IPS takes time.

IPS with an Employment Specialist is a new job and new skills. People need time to learn and practice these skills. Staff and the recipients of services need time to accept these services.

Supported Employment and the IPS model will not happen overnight.

1. The IPS model is integrated into the mental health treatment and employment services.

Again, everybody is working together for the good of the person who is asking for employment services. Everybody is communicating.

The person who wants to work is also part of the team.

2. Helping people find community jobs that at least pay minimum wage and are consistent with their job preference.

The idea of protected jobs (sheltered) conditions has not shown to help a person financially or emotionally. The Employment Specialist does not just assign people work from a pool of jobs which are readily available.

The Employment Specialist finds the job that the person wants.

3. Providing ongoing supports.

There is no time limit on supports. The team stays with people as long as wanted and/or needed.

### Locating Offices

The offices of the Employment Specialist needs to be located near the rest of the treatment team. The best experience is having the Employment Specialist right with the treatment team.

Again, not having the Employment Specialist off to the side is important!!!

### Staffing

The typical IPS unit is staffed by an employment coordinator and two Employment Specialists. The two Employment Specialists can provide coverage for each other when one of the specialists is not available. With two Employment Specialists, there will always be someone available.

## GETTING STARTED

### Who is Eligible?

1. A person must have major mental illness.
2. A person who expresses interest in competitive employment. This is not a volunteer job or sheltered employment. These are jobs which pay a fair wage for the experience of the person wanting to work or the person who is currently working.

Educate referral sources about the program, so that people are given accurate information from the beginning.

People who receive services need to understand supported employment.

The entire work force at the agency needs to understand Supported Employment.

When a person in our programs make comments about wanting to go to work or says he or she is thinking about employment, the staff makes an immediate referral to an Employment Specialist.

The people in our programs get referred to the Employment Specialist through staff.

There can be some self-referrals, but those might be few.

Everyone on the treatment team is thinking about employment and referring people to the Employment Specialist. There are brochures available. Supported Employment is part of all team meetings and discussions around the agency.

Case managers and everyone connected with the agency must have employment on their minds.

Supported Employment is always one of the agency programs which people are eligible for.

People in our programs can become more interested when they find that the Employment Specialist is there to help find a job. Many people with psychiatric conditions feel that searching for a job and trying to stay on a job is lonely.

The task of finding and keeping employment can seem too difficult. An Employment Specialist has a big role in the lives of the people in the mental health programs.

Understanding that there is a person there to help find employment and keep us on the job is a big part of getting people comfortable with the idea of Supported Employment.

The staff is always talking possibilities and hope. People in our programs can understand that they are disabled but not impaired.

Work can also help a person reduce substance abuse.

I first started to work to support my habit. In the end, I had to get clean and sober to continue my job. I couldn't keep working every day and stay drunk and high. The program does not have to wait for someone to get clean and sober before they find a job.

### Engagement and Building a Relationship

In the first few meetings, the Employment Specialist and the client spend time getting to know each other and identifying what the person in the program wants to do.

The client and Employment Specialist need to develop a working relationship because Supported Employment is ongoing as long as the client wants the services. The Employment Specialist needs to know the person well enough to keep engaged and connected; not just get to know the person as he or she is, but also to appreciate the person and become authentically interested in the person.

The Employment Specialist meets with the client out of the office. However, in the early days, meeting with someone in the office of the Employment Specialist is not uncommon. Also; there are computers, fax machines and telephones in the office of the Employment Specialist. The Employment Specialist needs to be able to communicate with employers.

People who receive mental health services need to feel comfortable with the Employment Specialist. People who are receiving the Supported Employment service need to feel comfortable enough that they stick with the Employment Specialist.

The Employment Specialist helps a person get through some of the up and down aspects of a mental health client's working life.

### Interviewing Skills

Good interviewing means asking questions and not making accusations. Good interviewing means reflecting together. Through continued interviewing the Employment Specialist learns the strengths and points out the successes.

Making positive statements doesn't mean that the Employment Specialist just blindly celebrates the person who they are with. The Employment Specialist is a realist.

Again, become authentically interested in the person who is being referred. Take time to have authentic conversations. Those of us with psychiatric conditions have been therapized to death. We know active listening! We want conversation! Truth! Share ideas and experiences.

The Employment Specialist avoids giving advice.

Disagreements should never lead to conflict. The Employment Specialist avoids struggling over issues over which they disagree.

The Employment Specialist identifies the next steps. The person receiving the Supported Employment service and the Employment Specialist review the time together and see how the time was spent.

There are Vocational Rehabilitation Departments in both the state and the VA system.

There needs to be close networking by the Employment Specialist and the people from the Vocational Rehabilitation.

### Understanding Benefits and Financial Planning

There needs to be a complete understanding of each person's benefits package. What are the person's benefits? Social Security, Workers Compensation, etc. People need to be given accurate information and a benefits plan needs to be in place.

Also, there needs to be money management work done with the person receiving the Supported Employment services.

We need to establish training's on how to do financial planning.

The Employment Specialist and the person in the program need to talk about these subjects; one at a time and fully over a period of time:

*Disclosure of Disability*-How much and where

*Family involvement*-How much, where and how

*Timing of Employment Initiatives*

What are other parts of life is the person dealing with?

Housing, substance abuse, relationships, marriage?

It is important to fit these other parts of life into the working life.

What are they and how do they affect the working life?

## COMPREHENSIVE WORK BASED ASSESSMENT

The people who will receive Supported Employment need to understand that part of the job of the Employment Specialist is making a vocational profile. This requires documentation.

There will be paperwork and records kept about the person who receives supported employment services.

In the old days, there were tests for job preferences and/or readiness. These days the employment process is more direct and immediate. Go out. Get a job.

People who are receiving Supported Employment will have ongoing talks about the many aspects of the job and what work means.

Try to develop work goals with the Employment Specialist. Through these goals, we can understand the job and where work can take us.

These are examples of work goals:

What is our dream for work?

What would we like to accomplish for the short term?

What is our education?

What is our real work history?

-Previous jobs

-Reasons for leaving jobs

-Problems on jobs

What did we like to do?

What are our coping strategies?

What is our physical health?

Who is our support network?

Do we have transportation?

Can we manage our money or do we need help?

How comfortable are we with our mental illness?

Family members work history

The persons' preferences for the work setting that they want

Two forms of identification will be needed for most jobs.  
The Employment Specialist insures the person has the proper documentation.

For the recipient of Supported Employment services:

These will be some of the questions asked. Answer these questions with a pen and paper. You will need to know these answers to help the Employment Specialist and Treatment Team get you a job.

## **EMPLOYMENT PLAN**

1. Statement of vocational goals.

What kind of job would you like to have?

Where would you like to work?

What hours would you like to have?

2 .List of objectives which help the client outline how to achieve these goals

Do you need transportation?

Do you need clothes?

Do you need more confidence?

What else do you need?

3. Names of people who might be of support.



Make a list of people around you who might be of help and support.

4. Plan is signed and dated by client, Employment Specialist, the case manager and psychiatrist.

### Supported Employment is Part of the Mental Health System

Many people want to come together and work with us and help us succeed in having a working life.

We show that we are part of the team:

When we agree with the ideas about employment-we sign off.

Supported Employment is part of our overall experiences in the mental health system.

### What Those Who Receive Mental Health Services Need to Know

The plan is specific as possible to help the employment process.

If we want a certain job, many of us can probably have the talent for that job. Sometimes, the problem is that most of us are not adept at finding a job, or learning how to keep a job. This is how the Employment Specialist assists. The Employment Specialist helps us find and keep a job. The Employment Specialist can help us find a new job.

People in Supported Employment are part of the clinical process and treatment team. There will be progress notes written about our history with Supported Employment.

This progress note might be written every month or more often.

We can participate in the writing of our progress note.

These notes are in the files so that other staff people realize what is being done with employment.

Supported Employment is trying to develop a new understanding about those of us in the mental health system, by seeing us on the job and at our best. Even though, we are part of the Supported Employment program, we are still connected to our mental health system. Therefore, we can work with reduced fear of losing our benefits. Losing benefits can produce a great deal of anxiety.

There will be difficulties. We will have hard times. Yet, having the ability to work with other people gives us a much broader and more positive opportunity for an improved life.

## **FINDING JOBS**

We need to understand that:

The goal of the IPS program is to help start people working in a community-based competitive job of their choice as soon as possible, without being required to participate in prevocational training.

Endless testing and sheltered workshops have numbed some people in the past. There are many jobs which we can have. The treatment team with the Employment Specialist and the help of others can find those jobs. People in our programs can begin to work.

Rapid job search doesn't mean getting a job right away. It does mean that the Employment Specialist with the treatment team takes the person's desire for employment seriously. Everyone starts to look for employment. The Employment Specialist starts to see the person requesting employment on regular basis.

Everyone shows interest in the search for a working life.

Some people want to try to work as volunteers. The Employment Specialist can help with that. However, Employment Specialists are mainly for people who need more intensive assistance in the competitive job market.

If the person chooses to stay as a volunteer, then the Employment Specialist won't be able to help past the point of job stabilization. The Employment Specialist serves people who want work in the community and receive a competitive wage.

The Employment Specialist might think that the person needs more education to work in the job they chose. The Employment Specialist can work with a person through the educational process. The Employment Specialist might also bring on a supported education specialist to help with the educational process.

First and foremost, the Employment Specialist is always encouraging employment as the goal.

Again, with IPS model, Supported Employment helps the person find the job as soon as possible.

### Obtaining Employment

We need to think about possibilities. People do have dreams.

People who are satisfied with their work have longer stays on the job.

The Employment Specialist always listens and tries to get someone working in the job that they want.

There can be coordinator of the Employment Specialists. The IPS coordinator always makes sure that the Employment Specialist listens to the person that they are they are working with. The Employment Specialist makes sure that the job selected is the work that the person wants.

We can understand people through their diagnosis and help people through their diagnosis. Diagnosis should not be used to limit people.

Working with someone to gain employment is a job which requires thoughtfulness and consideration.

Figuring out a good match between someone and their job is difficult.

*For the person receiving Supported Employment services:*

Job Accommodations: According the Americans with Disability Act, there are job accommodations which might be available for some people at some job sites.

- Flexible work hours
- Adjusting the work schedule for appointments and medical leave
- Availability of time without pay
- Availability of part time work
- More frequent breaks
- Modification of work space and job tasks
- Minimizing distractions and noise
- Access to water and liquids
- Gradual introduction of tasks
- Modification of job tasks
- Supervisor feedback and positive reinforcement

Ways the supervisor can support:

- Using written instructions
- Onsite support
- Pairing with another person for job support
- Temporary onsite job coaching
- Crisis intervention
- Procedures for emergency situations
- Telephone calls to employment specialists
- Private space

Probably the most important accommodation is the time needed for people to spend with the Employment Specialist to help integrate them into the work setting.

### Approaches to the Job Search

The good thing about working with an Employment Specialist is that the Employment Specialist has many job contacts on the community.

Also, rather than try to change the person to fit the job-the Employment Specialist finds a job which fits the person.

The people receiving Supported Employment services decide how much involvement they want the Employment Specialist to have in their lives.

The Employment Specialist can go to a job and search for employment without mentioning the person.

The Employment Specialist is also out continuously looking for employment and trying to establish a working life. The Employment Specialist thinks and searches for jobs, jobs, jobs!

#### *Strategies for Locating Jobs:*

The Employment Specialist is always combing the newspapers and Internet for job leads. Again, the Employment Specialist is always looking for job leads.

This keeps the Employment Specialist aware of what jobs are out there. There are some Supported Employment sites which have meetings where prospective job seekers come together and practice their interview skills and search the newspapers.

#### Contacting Employers Directly

For employer contacts, usually face to face contact is best. The Employment Specialist makes an appointment and goes in to meet with the employer about the candidate or future candidates. The Employment Specialist is there to help the employer find good workers.

The Employment Specialist becomes a labor resource for the employer.

#### Personal Networks

Everybody starts thinking about job leads. We can use the natural networks which are in place to help find employment and keep people employed.

#### Agency Boards and NAMI

Using the mental health system to find job is a new idea. The people who work at the agency and board of directors of the agency, NAMI and NAMI members are good resources to mobilize people to find jobs

#### Chambers of Commerce

Getting to know all the local merchants and employment sites is the job of the Employment Specialist. Very important to know other people who are employers or who represent employers in the community.

#### Job Fairs

Going to job fairs and getting to know the different presentations about employment is also very important. At each job fair, there is the chance to network and be with other people who might also have job leads.

### Introducing a Person

We are part of the mental health system getting some help with employment. We are not too sick to work or too difficult to work with. The idea of establishing a relationship with us and introducing us to employment opportunities is a different approach than what past mental health services offered.

Some employers might have a family member with mental illness. The probability that people with mental illness are more accepted by other people who have family members with mental illness can be a way that might even give us advantages in some employment situations.

What needs to be remembered by the Employment Specialist, the treatment team, the recipient of services and our friends and family- is to never give up on us.

We can all believe that employment is one part of a person's time and benefits in the mental health system. We can all have a working life.

## MAINTAINING JOBS

Following-along support is always there. Ongoing support is provided as long as necessary. There are no arbitrary times lines. The IPS and whole treatment team are committed to supporting the person in the employment as long as the supports are needed.

These are some of the supports which are mobilized to help the person stay on the job.

- Negotiating accommodations with employers
- Providing guidance and education to employers
- Social skills training
- Adjusting medications
- Counseling to address work related problems
- Dual diagnosis treatment
- Money management
- Family support
- Benefits counseling
- Transportation and leisure time activities

### Emotional Support

How do we feel about ourselves? With what can the Employment Specialist help?

Being upset and missing work means that we need support.

However, the best emotional support is before we become upset. Meeting with the Employment Specialist on a regular basis, before we become upset is important.

Regular visits with the Employment Specialist can go a long way to keep us working. The Employment Specialist can keep things from falling apart. We can continue to have a working life with the help of the Employment Specialist.

The Employment Specialist might be the one that the person on the job spends the most time with. Other members of the treatment team might not see the person whom they are supporting nearly as often as the Employment Specialist.

Emotional Support also means outreach. There are people who will drift off and the Employment Specialist needs to do outreach to them. For people to stay engaged with the IPS program, the Employment Specialist needs to make sure that everyone is working and receiving support.

If the person discontinues working, the Employment Specialist refers the person back to the case manager and the case manager continues to work with the client. The Employment Specialist is there for people who want to work.

## Support in the Workplace

The Employment Specialist is there to resolve situations in the workplace. There needs to be ongoing discussions about what the person needs to stay on the job.

The Employment Specialist finds the balance between offering sufficient support but also allowing room for the person to grow and be as independent as possible.

The Employment Specialist can maintain contact with the employer and can arrange periodic meetings with the person receiving the employment services.

## Family Support

Many families have never thought of Supported Employment as an option. Many families do not know or understand what an Employment Specialist does. The ideas that families need to understand all mental health services is important. This Hip Pocket version of *A Working Life for People with Severe Mental Illness* by Robert Drake and Deborah Becker is a good introduction to Supported Employment. Read the full text of *A Working Life*, also.

## Peer Support

Consider having a WRAP plan for the person who is going back to work. The WRAP plan might also be part of ongoing support meetings with other people who are working.

People can share their strength and hope. People can also share their coping skills and how to work through problems. Peer Support based on learning and sharing knowledge can go a long way to help people see the opportunities that they can have with a job and Supported Employment.

Many people don't see their time with the mental health system as an opportunity. Peer Support can bring people together and have people begin to discuss and learn how to get a job, how to stay on the job and/or how to get a new job.

Having this Hip Pocket version of *A Working Life*, read and discussed in a peer support environment, can lead people to establish ongoing support networks and educate people about Supported Employment.

In my life and in the lives of others, we often got peer support. Other people with mental illness encouraged me and supported me. We encouraged and supported each other.

Peer Support set up with a time to meet every week and a person paid and brought in to facilitate regular meetings can go a long way to help people succeed in Supported Employment.

## Skills Training and Problem Solving

Skills training can go a long way to help keep people employed. There are interpersonal skills which can be learned. Many times people need to be reminded what is happening with them on the job or how to better interact with their coworkers.

## Transitions

Job endings are always positive. We can learn. If the job doesn't work out, we can learn and make the next job better. There will always be transitions in employment.

### *Note:*

If you like what you read in this book, please spread the word that the time for Supported Employment has come. If you have succeeded in a Supported Employment program, let other people know the benefits. If you do not have Supported Employment, ask for this program. Study and become familiar with both the Hip Pocket version of *A Working Life* and the original text (which can be ordered from numerous bookstores or Oxford University Press). Not only ask for Supported Employment-make sure that you are receiving the Evidence Based Program of Supported Employment.