

Academy for Policymakers Podcast Transcript

Supported Employment in CCBHCs

Recorded by Samuel Shore & Kelsi Urrutia

Announcer: Thank you for visiting the University of Illinois at Chicago's Health & Recovery Academy for Policymakers. The following recording comes to you from the UIC Center on Integrated Health Care and Self-Directed Recovery. Visit our online Academy to obtain free information and resources about policies that promote health, self-direction, and employment for the behavioral health field.

KU: Hello. My name is Kelsi Urrutia. I'm here with Samuel Shore, Director of the Academy for Policymakers at the University of Illinois at Chicago's Center on Integrated Health Care and Self-Directed Recovery. In previous podcasts, we talked about Certified Community Behavioral Health Clinics, or CCBHCs for short. Today, our focus is on one of the services that will be available to many CCBHC clients called supported employment. Thanks for joining me today Sam. Could you begin by telling our audience what supported employment is?

SS: Absolutely, Kelsi. Supported employment is a service that helps people with disabilities find and keep jobs. However, these aren't just any jobs- they are competitive positions. By "competitive" I mean that these are jobs in the community that anyone can apply for. They pay at least minimum wage and there is no arbitrary limit on how long a person can keep that job. Anyone who wants to work can receive supported employment services. No one is excluded.

KU: How is this different than other types of employment services?

SS: It is important to know there are different types of employment programs and they are not all the same. Supported employment is different from traditional vocational rehabilitation, which focuses on pre-employment skills training. It is also not the same as the transitional employment model, which places people in time-limited jobs that can only be held by workers with disabilities. Supported employment uses the client's preferences, skills, and strengths to find compatible positions that job-seekers can apply for and keep permanently. These are jobs in the community that anyone can apply for, and not jobs from a pool of positions designated only for people with disabilities.

KU: It sounds like this model is a unique approach. How does supported employment work?

SS: Supported employment programs can differ from one another, so let me tell you about one that was developed for use by people with psychiatric disabilities. It is called Individual Placement and Support, or IPS for short. In the IPS model, anyone who expresses an interest in working is eligible, and the job search process starts relatively soon after the person begins receiving services. The philosophy is that most people do not require lengthy pre-employment training in order to be hired into a competitive position. Instead, after a short period of career exploration, and with the help of an employment specialist, individuals find jobs that interest them and fit their unique strengths and skill sets. Support is individualized and geared to the worker's preferences and choices. For

example, employment specialists provide as much or as little support as is desired. The employment specialist also helps the person anticipate how working might reduce their access to public disability benefits such as Supplemental Security Income or Social Security Disability Income. There is no limit on how long a person can receive supported employment services, though the long term goal is to transition the person to independence using natural supports for job maintenance.

KU: Do people receive supported employment in place of other services, or along with them?

SS: Supported employment services are integrated with whatever other services the person is getting, so the employment specialist working with each individual is actually a part of their treatment team. This multidisciplinary approach enriches the way mental health services are delivered by recognizing that working in the community facilitates recovery and overall wellness. Issues that affect peoples' ability to work, such as symptoms, medications, and stress, are discussed by the entire team to help the person keep their job even during times when their illness is more active.

KU: That sounds really great, but what does the evidence say?

SS: That's an excellent question. Again, not all programs are the same and it's important to make sure that the vocational service delivery model being used has a strong evidence base. IPS is the evidence-based practice of supported employment for people with serious mental health conditions. It is three times more effective than other vocational rehabilitation approaches at getting people with mental illness back to work, and these effects persist for up to 10 years. It works for a diverse group of people with a variety of mental health diagnoses, demographic backgrounds, and work histories. We also know that people who are able to work have better life outcomes than those who don't. They report fewer symptoms and require less mental health services. Their income grows, their self-esteem increases, and their quality of life improves.

KU: This sounds like a really beneficial program. But what would you say to someone with concerns, for example, that work might be too stressful?

SS: Well the evidence actually suggests that *not* working is more stressful, and can have a negative impact on mental health. Meanwhile, working promotes recovery, adds a sense of purpose and dignity to a person's life, and improves overall wellbeing. The majority of people with mental illness want to work, yet only around 20% do. With supported employment services, most of the remainder are able to find and keep competitive employment. This approach also benefits employers. This is because people receiving supported employment have additional resources to draw on and are highly motivated to work. Also, a lot of thought is given to what kinds of jobs and work settings each person prefers and what their strengths are. For these reasons, positions they obtain have a high potential for success. And that, combined with having a diverse workforce, is a benefit to employers. There is also evidence that supported employment is cost-effective. When a person is able to obtain competitive employment, particularly when they have a long career ahead of them, it substantially improves their financial status and can lower their

reliance on public disability benefits. Additionally, people who work have fewer hospital visits and use fewer mental health services, which also saves resources.

KU: Will all CCBHCs be providing supported employment services?

SS: Not necessarily. Supported employment is not one of the mandated services for CCBHCs. However, CCBHCs are required to coordinate care across a range of needs and must provide psychiatric rehabilitation services. Supported employment is type of psychiatric rehabilitation service and so I expect to see it offered at many clinics.

KU: Well thank you so much for all of this useful information. Where can our listeners go if they want more information about this approach?

SS: Well you're welcome. The Substance Abuse and Mental Health Services Administration, or SAMHSA, has a free toolkit that shows you how to establish an IPS supported employment program. It's called the Supported Employment Evidence Based Practices Kit, and it is available at www.store.samhsa.gov. You can also access a wealth of IPS training and other resources at the Illinois IPS web portal at www.illinoisips.org/. We also have helpful supported employment infographics available at our website at www.center4healthandsdc.org, that's center4healthandsdc.org. From there, navigate to policy academy, and then click on policy infographics.

Announcer: Thank you for listening. You can obtain additional recordings, or download a transcript, by visiting the Academy for Policymakers on the Center's web site.

Podcast References

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