



Supported Employment for Persons With Psychiatric Disabilities

A Review of Effective Services



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This document was developed by the National Mental Health Association as part of the Targeted Technical Assistance project of the National Association of State Mental Health Program Directors (NASMHPD) and the Division of State and Community Systems Development (Mental Health Block Grant) of the Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.



Introduction

For many Americans, working provides a sense of purpose and a source of dignity. Unfortunately, many individuals with disabilities do not have the same opportunity to contribute and achieve their potential because of barriers they face when trying to obtain competitive employment. In the United States, the unemployment rate for individuals with disabilities is approximately 75 percent. The unemployment rate for individuals with psychiatric disabilities is even higher — between 80 and 90 percent.

For many individuals with serious mental illness, the obstacles to getting and keeping a job are numerous, including the fear of losing healthcare insurance, stigma and discrimination at the job site, lack of housing and diminished self-confidence. To help individuals overcome these barriers to employment, local groups have embraced an innovative concept in employment services. Called supported employment (SE), this concept has proven to be more effective than traditional vocational rehabilitation services in getting individuals with psychiatric disabilities into competitive jobs. In fact, when supported employment practices are in place, the employment rate increases to over 50 percent.

This booklet explains the elements of effective supported employment services and strategies on how to start them in your state or community. If you are a consumer seeking services, the information can guide you when choosing a provider. If you are a provider looking to offer supported employment services, we encourage you to incorporate this information into your program.

What Is Supported Employment?

Supported employment is based on the idea that it is better to get persons with mental illness on the job and help them to keep the job rather than just provide vocational training.¹ Originally developed for people with developmental disabilities as a more effective, compassionate and cost-effective alternative to sheltered workshops, SE is intended for individuals who need more than traditional, time-limited vocational services.^{2 3}

What Makes Supported Employment Programs Effective?

Supported employment programs share similar goals and philosophies.

However, to be truly effective, every SE program should strive to implement each of the goals listed in the box on the right.

In addition to these elements, NMHA has identified 10 key elements that are fundamental to the success of all community-based programs, including employment services.

Critical Goals for Supported Employment

- Pay is at least minimum wage but preferably at the prevailing wage rate.
- People with and without disabilities work together in an integrated setting.
- Support is ongoing and provided as needed.
- Services are individualized.
- Job selection is based on a person's preferences and skills.
- Competitive employment is the goal.

These key elements are:

- **Recovery philosophy:** Recognize that people with mental illness, can and do recover and employment can play a key role in the recovery process.
- **State-of-the-Art:** Provide high quality services incorporating the latest advances in treatment and services that are evidence-based and/or at the cutting edge of the field.
- **Voluntary:** Give participants the choice to participate in the program as well as a wide range of options for services.
- **Empowering:** Create an environment that encourages individual choice and self-determination. Services are individualized to meet the needs of the participant.
- **Holistic Philosophy:** Maximize a person's strengths and abilities as well as management of symptoms.
- **Embraces True Community Integration:** Provide treatment and services in the community so people learn life skills in the environment where the skills will be used.
- **Community Supported:** Collaborate with other service providers and has the support (financial and otherwise) of a cross section of stakeholders.
- **Effective Administration:** Ensure a system of accountability, responsibility (to consumers, staff, volunteers, etc.) and fiscal success.
- **Culturally Competent:** Serve diverse populations reflecting the composition of the local community or recognizes the need for serving diverse populations and is taking steps towards addressing this need.
- **Measurable Program Outcomes:** Evaluate the services it provides to determine the effectiveness of its services with regard to consumer success and satisfaction.

How Are Supported Employment Services Offered?

Supported employment services can take a variety of forms, including:

Job Coach Model: A job coach assists a person with finding a job and provides vocational support both on and off the job site. Most support is provided in the community as opposed to a mental health or other treatment center. The job coach may work with the consumer, employer and others (e.g., coworkers or family members) to facilitate a successful work experience.

Choose-Get-Keep-Leave: This skills-oriented approach is named for the order in which persons with mental illness are provided employment support. First, the employment specialist helps the individual **choose** a job that is compatible with his or her needs, interests, experiences and personal values. Then the employment specialist works with the individual to **get** a job that meets those desires by developing an appropriate résumé, preparing the individual for interviews for prospective jobs and negotiating the terms for employment. Ongoing support helps the individual **keep** the job. Finally, the program works with the individual when he or she chooses to **leave** the job for another experience that contributes to future employment success.⁴

Assertive Community Treatment (ACT): This approach involves interdisciplinary teams that provide intensive case management, psychiatric medications and services including an employment specialist to work with individuals on employment needs. The ACT teams may provide or arrange for supported employment. While ACT has been shown to be effective in decreasing hospitalizations and increasing housing stability among individuals with serious mental illness, there are inconsistent findings on the effectiveness of social adjustment and work.⁵

Individual Placement and Support (IPS): IPS emphasizes integration of vocational and clinical services in multidisciplinary teams. It combines the interdisciplinary approach of ACT, the Choose-Get-Keep-Leave concept of client choice,⁶ and general supported employment concepts of long-term support and individual placement that are used in the job coach model. Six principles define the IPS model:⁷

1. Competitive employment as the goal
2. Rapid job search
3. Integration of rehabilitation and mental health
4. Attention to consumer preferences
5. Continuous and comprehensive assessment
6. Time-unlimited support

The Menu Approach: First coined by the Village Integrated Service Agency (ISA) in Los Angeles County, California, the menu approach to employment combines elements of various approaches under a new philosophical framework. The philosophy has four principles:

1. Work offers many benefits besides a means to "pay the bills." Work provides a sense of purpose, social interaction and an opportunity to contribute to the community.
2. Virtually all persons with mental illness can participate in and benefit from meaningful paid work.
3. Consumers should be able to choose from a "menu" of employment options.
4. Experience in different kinds of paid work is an important part of developing long-term employment in competitive settings.

In a traditional employment service model, an individual must progress through a series of vocational tasks and/or programs to become "work ready." With a menu approach, regardless of where an individual may be in recovery, he or she may pick and choose the type of employment services whether it be a more traditional approach, such as working at the agency-owned business, or pursuing competitive employment.

What Other Community Supports Are Necessary to Ensure Success?

Finding a job depends not only on your job skills, but also on your access to various resources. If you do not have an address, proper work clothing, access to transportation or appropriate educational requirements, it is difficult to get and keep a job. Therefore, supported employment services need to be well coordinated with other community supports such as supported housing, supported education, case management, psychosocial rehabilitation, child care and access to physical and mental health care services.

Who Funds Supported Employment Programs?

A number of funding sources are available to support employment programs. Resources include the following:

State Offices of Vocational Rehabilitation (VR) can utilize networks of local vocational rehabilitation counselors or contract with private service providers or community mental health centers to provide supported employment services to mental health consumers. State VR agencies can also support individuals with mental illness achieve education-related goals.

State Mental Health Authorities have traditionally funded supported employment services. This funding may appear in the administration's budget or can be provided through grant programs. A number of states allocate portions of the federal Mental Health Services Performance Partnership Block Grant to support employment services offered in the State.

Medicaid Rehabilitation Option or Case Management dollars can be used if available in the state. Often, this funding source is not utilized for supported employment services, as there are multiple restrictions on its use. Medicaid dollars cannot be used to fund vocational activities such as job coaching and placement, but these funds can be used for case management and other psychosocial rehabilitation services.

The federal Social Security Administration (SSA) has a number of initiatives that can help mental health consumers who want to return to work by continuing Medicaid coverage and Social Security cash benefits. The Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIA) established a new initiative to provide greater access and choice for employment services in the community. Under the Ticket to Work and Self-Sufficiency program, any VR agency, one-stop center or public/private provider group (with experience providing employment services) can apply to participate as an employment network and provide employment support services to individuals with disabilities. To find out more about work incentives and the Ticket to Work program, visit the SSA Work Site at www.ssa.gov/work.

Which Programs Have Shown Success?

A number of programs across the country have been successful in helping people with serious mental illness reintegrate into the workforce. These programs include:

Village, Integrated Service Agency (ISA)

Village ISA is a comprehensive system of care with employment as the cornerstone of its foundation. All members are encouraged to work and are assisted by Village staff with choosing, getting and retaining a job using a *menu approach*. The menu approach offers Village members a variety of choices so that they can decide what type of work they would like to pursue.

Types of employment service options under the menu approach include:

- Education and training for employment preparation;
- Paid work experience through agency-owned businesses;
- Community employment; and
- Supportive services.

As a capitated, or fixed funding system, the Village provides services without needing to focus on collecting funds for services offered. A capitated system means that the provider receives a set amount of funding for each participant and is responsible for providing or purchasing all the services an individual needs.

- Thirty-nine percent or \$350,000 of the Village's annual budget, which is received through state funds, goes to the employment aspect of the program.
- Approximately 50 percent or \$500,000 from the Department of Vocational Rehabilitation also goes into the employment program to assist on average 130 people per year with finding, getting and maintaining employment.

Consumer Connections

Consumer Connections recruits, trains and supports individuals with serious mental illnesses in jobs as human service and mental health service providers. The program is sponsored by the Mental Health Association in New Jersey (MHA-NJ) and co-sponsored by Collaborative Support Programs of New Jersey (CSP-NJ), a statewide self-help agency run by individuals with mental illnesses.

Consumer Connections consists of three basic components:

- Fifty-four hour training course that gives consumers an overview of what skills are needed to provide mental health services.
- Job Opportunity Bank that assists consumers with finding a job after receiving training.
- Support Network which provides on-going support to program participants once they find employment.

Consumer Connections receives funds from various state and private sources, including the Mental Health Association in New Jersey, the Collaborative Support Program of New Jersey, and the New Jersey Department of Mental Health Services.

Fast Track to Employment

Fast Track to Employment is an innovative employment training, placement and support service sponsored by the Mental Health Association of New York City, Inc. Fast Track's staff are trained mental health professionals and provide comprehensive vocational assessment, job placement and support services to individuals with mental health needs.

Services include:

- Vocational assessment;
- Job placement;
- On-going support;
- Internship; and
- Peer support.

Fast Track is funded by the New York City Department of Mental Health and Mental Retardation, and the New York State Office of Mental Health.

Louisiana H.I.R.E.

Louisiana H.I.R.E., an Individual Placement and Support (IPS) model of supported employment is designed to assist people with serious mental illness move into competitive employment as rapidly as possible. LA H.I.R.E. uses a treatment team approach, which encourages persons with psychiatric disabilities to actively participate in the business of finding, obtaining and maintaining jobs with ongoing support and guidance as a part of a treatment program.

Services include:

- Comprehensive assessment;
- Individualized assistance in finding, obtaining and maintaining jobs; and
- Coordination of all mental health services by employment specialist with members of the treatment team.

Louisiana H.I.R.E. receives funding from the State Department of Vocational Rehabilitation.

For information about supported employment services, please contact NMHA at 1-800-969-NMHA (6642).

¹ Bond, G., Drake, R., Muesler, K. 1997. An update on supported employment for people with severe mental illness. *Psychiatric Services*. Vol 48 No. 3 pp 335-346.

² Wehman and Moon. 1988 as cited in Bond, G., Drake, R., Becker, D., Mueser, K. 1999. Effectiveness of psychiatric rehabilitation approaches for employment of people with severe mental illness. *Journal of Disability Policy Studies*, Vol. 10 no. 1. p.34.

³ Ibid 1.

⁴ *Vocational/Educational Recovery and Rehabilitation — The Choose-Get-Keep-Leave Approach 2001*. Center for Psychiatric Rehabilitation. Boston University. Boston, MA. From website: www.bu.edu/cpr/expertise/vocedu.html.

⁵ Mueser, K., Bond, G., Drake, R. 2001. *Community based treatment of Schizophrenia and other severe mental disorders: Treatment Outcomes*. From website: www.medscape.com/Medscape/psychiatry/journal/2001/v06.no1.

⁶ Wehman and Moon. 1988 as cited in Bond, G., Drake, R., Becker, D., Mueser, K. 1999. Effectiveness of psychiatric rehabilitation approaches for employment of people with severe mental illness. *Journal of Disability Policy Studies*, Vol. 10 no. 1. p.34.

⁷ Bond, G. 1998. Principles of the Individual Placement and Support Model: Empirical support. *Psychiatric Rehabilitation Journal*. Vol.22 No.1 pp 11-23.



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