

# Leading the development of IPS across a health services

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Working together, changing lives



# Introduction

- Introduction to CNWL and our Employment Team
- Why is employment an important health outcome?
- What are the challenges for the individual and mental health services, and how can they be over-come?

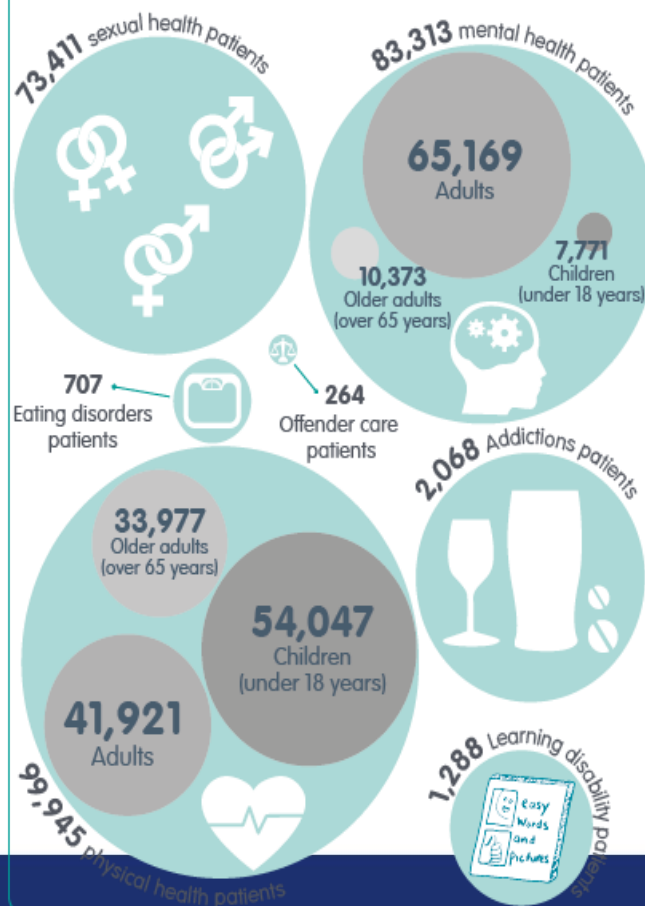


# CNWL

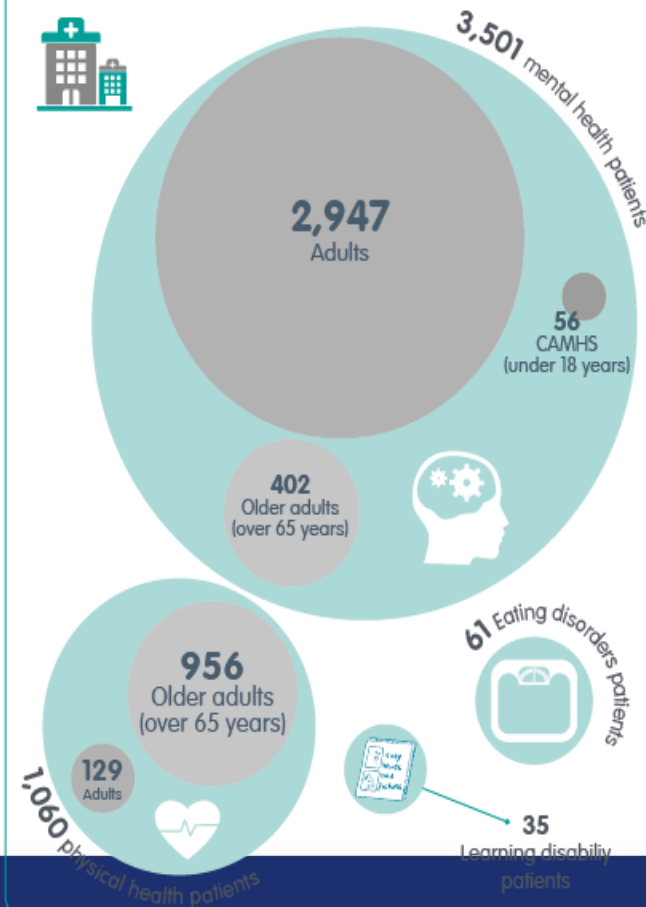
**NHS**

**Central and  
North West London**  
NHS Foundation Trust

## 290,996 patients treated in the community



## 4,561 patients treated in hospital



*Wellbeing for life*



# The challenge

- General employment rate = 73.5%
- Employment rate for people with mental health conditions = 42.7% (lower than people with other physical impairments or long term health conditions)

(Department for Work and Pensions, 2015)

- 45% of new claims for disability benefits have a mental health condition

(Department for Work and Pensions 2016)

- Employment rate for people with serious mental health conditions = 7.9%



# Impact on families

Unemployment doesn't just impact on individuals; children growing up in workless households are almost twice as likely to fail at all stages of education.

**PHE (2017) *Health Profile for England***



# Impact of unemployment

The longer you are out of work, the less likely you are to go back

(British Society of Rehabilitation Medicine: 12 months absence – 25% return; 2 years absence – 2% return)

“I lost all hope of ever working again, who would employ me when I cant stop crying”

**CNWL Service user**



# Impact on individuals

“Suddenly everything felt grey, I felt pain, bewilderment, alone, useless, alienated and isolated”

“I felt an overpowering sense of loss of loved ones, work, value and of hope for the future”

**CNWL service user**



# Low expectations on the part of health professionals

- Assumption that you have to get well first before you can work
- Culture of low expectations
- A focus on treatment only / employment not discussed
- A lack of access to employment services that work





# Importance of work in supporting recovery

**HOPE** - believing that a decent life is possible

**OPPORTUNITY** – the chance to do the things that you value, and participate as a full citizen

**CONTROL** – helping people get back in the driving seat, becoming an expert in your own self-care



# Service user feedback

“Now that I have a job I walk differently, talk differently, my life has been transformed”

“When I could not manage any vision for my own future, my employment specialist had that vision for me and slowly taught me how to see the future for myself”

**People who have accessed CNWL Employment Services**



# What is different about IPS

- Don't select people on the basis of their 'work readiness'
- Provide clinical treatment and employment support in parallel from the start
- Research into Individual Placement with Support shows that diagnosis, duration and severity of problems are not reliably associated with the outcomes (Bond, 2004).



## 8 Evidenced based Principals

- ES are integrated into the mental health team
- Competitive employment
- Rapid job search
- Eligibility is based on client choice
- Job choice follows client preference
- Ongoing support determined by need
- Personalised welfare & benefits advice is provided
- Building relationships with employers to access the hidden labour market



# Organisational commitment and sponsorship

- Senior Management commitment – building the case
- Represented at a Board level by the Chief Operating Officer
- Partnership with our Head O/TS and Borough SMTs
- Trust wide Employment leadership roles / link to the recovery agenda
- Local buy from clinical team leadership



# Integration into clinical teams

- Seeing access to employment as an important health outcome
- Myth-busting training
- Sharing successes – seeing is believing
- Sponsorship from the CMHT Manager and Consultant Psychiatrist
- Ensuring that ES has a clear role and is seen as an equal member of the team and creating an multi-disciplinary approach



# Clinical team feedback

“Having ES in the team, doesn’t just give service users a sense of hope it given the whole clinical team a sense of hope around what is possible”

CNWL Consultant Psychiatrist



# Employment Leadership roles

- Employment SMT – drive service effectiveness and stakeholder relationships
- Role of the Team Leader – leading by example – fidelity based supervision and training
- Co-ordinating service developments and partnerships





# Have ES with the right skills and qualities

- People who have a passionate belief that anyone can work, optimism, tenacity, self-starters, organised, motivated and motivating
- Able to build hopeful relationships with people who access the service
- Able to build early actions, network , build relationships with employers and help people manage their return to work



# Data and feedback mechanism

- Quarterly and Annual Reports
- Recovery stories
- Use of the DVD / podcasts
- Joint presentations / hosting visits



# Co-production

- Putting service users at the heart of service developments
- Service User IPS ambassadors – involved in training and presentations
- Branding / strap line / DVD
- Recruitment Assessment Centre
- Joint Away Days with people who access the service
- Recovery Wellbeing College courses



# Fidelity

- Fidelity workshops and training
- Fidelity based supervision
- Fidelity reviews
- Self assessments

# Challenges and developments

- Commissioning / meeting demand for the service
- Knowledge management / how we train and induct our staff
- Developing services within primary care and supporting step down



# Results

- Have supported over 1800 people into paid employment since we started
- Last year 494 people accessed the service , 246 paid outcomes for 192 people
- 38.9% placement rate
- Of those supported to access paid work at the end of the financial year 69% were either still working or had been closed in work



# Contact details

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