IPS Supported Employment March 4, 2016 Webinar 2



Canadian Mental Health Association

Vancouver-Fraser Mental health for all

# Recovery Oriented Psychosocial Rehabilitation Employment Initiative for Douglas College

- Presenters:
- Kyron, EPI Client
- Catherine Newstead, Senior Vocational Rehabilitation Counselor
- Lana Cullis, Vocational Rehabilitation Counselor

#### Today

- Personal Story Kyron
- Intro to Early Psychosis Intervention and Individual Placement and Support (IPS)
- Implementing IPS with EPI youth who also uses substances
- Question and Answer

#### A Personal Story

- School, Work , Substance Use and Mental Health
- Challenges and Triumphs
- The role of Early Psychosis Intervention (EPI)
- Key Learnings from Kyron's Story

## Review of IPS (Individual Placement and Support) Supported Employment Model

- IPS Supported Employment helps people with serious mental illness work at regular jobs, those paying at least minimum wage and of their preferences
- Although variations of supported employment exist, IPS SE refers to the evidence based practice of supported employment
- It is the most robustly researched model of its kind
- o Bond, G. 1999, Bond, G. & Drake, R. 2012

#### Introducing.....





Better health.
Best in health care.

- Occupational Recovery after First Episode Psychosis Research Project
- Principle Investigator: David H. Erickson,
   PhD Clinical Psychologist

#### WHY-WHO-WHERE-HOW

- To improve employment prospects for people dealing with serious mental illness, specifically young individuals who access Early Psychosis Intervention (EPI) services
- 100 clients are being randomly assigned to receive IPS supported employment services vs Treatment as Usual (TAU)
- 3 year research study started March 1 2015 with 21 months of recruitment
- Collaboration: Fraser Health, Federal Ministry of Social Development & Social Innovation, CMHA Vancouver Fraser

### WHY-WHO-WHERE-HOW CONT'D

- Began with EPI North: communities of Burnaby, Tri Cities , Maple Ridge and New Westminster
- Other areas now include EPI South (Surrey, Langley, Delta) and EPI East (Abbotsford, Chilliwack and Mission)
- Referred individuals are 18-30 years of age

#### SIGNIFICANCE

"....understand the interventions related to employment success in a representative sample of young adults with early psychosis. It will allow us to better choose or adapt those interventions according to individual predictive factors and their costs/benefits. By optimizing employment success during this critical period, we may prevent longer-term decline and thus avoidable use of health services and disability benefits"...

## Reflections on IPS Practice – The Past

- IPS SE is a well established approach and began over 20 years ago in the USA
- IPS SE is established in Canada, Europe, Australia, Hong Kong and UK
- Reflects a shift in psychosocial rehabilitation from traditional pre-employment "readiness" and the sheltered workshop milieu
- The recovery movement helped and continues to instigate true inclusion/ responsibility in one's community

## Reflections on Practice – The Now

- The IPS model is steadfast in fidelity, principles, ongoing research including that which affects young adults dealing with psychosis and substance abuse
- According to Drake et al (2014) EPI IPS programs average 82% employment success
- The benchmark for IPS employment success is minimally 50%
- Work BC's success rate for all user groups is 42% work placement (July 2015 Provincial Report) – consistent range is 40-50%

## IPS Supported Employment – What is in store for the future?

- Advocating for the model to be standard practice (not an add on) for and with young adults with serious mental illness/substance abuse and other populations
- Continue to research outcomes that demonstrate where improvements are necessary and hopefully confirm the improved economic, social and mental welfare of those people involved/the community at large – including the National IPS Project
- Research in the area of cognitive remediation is an area of emerging practice (Latimer, 2015)

## Persons with Psychosis who work ... (common threads in literature review)

- Experience less hospitalizations (relapse related)
- Are less likely to be restrained (chemically or physically, including seclusion) when hospitalized
  - 14% employed vs 64.5% unemployed (CIHI 2011)
- Utilize less financial disability supports over lifespan
- Report higher satisfaction on quality of life measures
- Are less likely to be incarcerated
- Have higher medication compliance
- Studies high lighting youth subsets (for both psychosis and psychosis with substance use) demonstrated greater recovery gains when work was a treatment intervention summary - both work and age are salient

#### Research Rigor to Pragmatic Applications

- 78% of youth with psychosis want help to find work Ramsey et al, 2011
- They are more likely to be using drugs than their adult counterparts in community mental health centers be aware
- Risk of suicide is much higher in persons with going thru first episode psychosis – reported rates vary in literature, increase when combined with substance use and (multi use) variable
- PSR best practices evidence often goes against natural desire to "protect our clients" but we must acknowledge what role can work play in as a "protective factor" with persons
- The importance of building hope with tangible supports i.e. no waitlist, one step re intakes, continuous time unlimited support, person centered plans
  - visible construction scaffolding metaphor



#### Substance Use, Psychosis and Youth – Key IPS Principles

- Zero exclusion to program access key here is substance use and continued use does not prevent work search and access to employment supports
- Rapid Job Search Persons using substances and receiving MH services are mostly to be discouraged from working because of being viewed as at risk for relapse

IPS philosophy incorporates **building tolerance to adverse work experiences**thru support and full utilization of
treatment team

## Substance Use and Key IPS Principles continued

- Individual Preference and job match extended to include substance use profile
- Utilize person's self knowledge about drug use to assist with strength profile i.e.
  - -time of day best for working hours vs substance using demands on time
  - -or their desire for full time work as strategy to help decrease drug use time
- Remember that clients are as unique in their drug use diversity as they are in their vocational diversity
- Need to provide clear information about possible outcomes of choices – maximum transparency about labour market conditions

#### Substance Use continued

- Continuous Assessment: co monitoring with your job seeker and their treatment team to see if what you are doing is working
- Be willing to start and stop jobs how to leave a job is just important as how to find one
- Be willing to support client to utilize other services – refer out, welcome back
- Practice moment by moment engagement, not "plan engagement"

#### Summary

 "Addressing SUD's and social and occupational goals in people with First Episode Psychosis (FEP) may offer opportunities to prevent SUD's becoming more severe or entrenched"

Rebgetz et al, 2014

o "The indicators that do appear to be robust predictors of work outcomes include recent employment history, motivation and self-efficacy. Wanting to work and believing that you can are the best predictors of work outcomes."

Miles Rinaldi et al., 2008

#### References

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#### Recommended Reading List

 Treatment of first-episode psychosis patient, psychosocial aspects.
 Drug Discovery Today: Therapeutic Strategies. 2012; 8(1-2): 37-41.

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#### More Reading

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- Interest in and obstacles to pursuing work among unemployed dually diagnosed individuals. Substance use & misuse. 2002; 37(2): 145-170. Laudet, AB; Magura, S; Vogel, HS; Knight, EL.

#### More Reading

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Journal of Vocational Rehabilitation. 1998; 11(2): 113-123.
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#### For further dialogue...

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