**Best Practice Spotlight**

**Issue #3: Individual Placement and Support (IPS)**

**What is IPS?**

Individual Placement and Support (IPS) is an evidence-based practice that is a core service in an organized system of care for adults with serious mental illness (SMI), including those with co-occurring disorders. These programs assist people with mental illness locate and begin work at competitive jobs of their choosing.

There are several key characteristics of successful IPS programs:

- Strengths-based approach
- Promotes recovery and wellness
- Practitioners work in collaboration with state vocational rehabilitation counselors as well as their respective mental health treatment teams
- Multidisciplinary team approach
- Services are individualized and long-lasting

Dartmouth College is a pioneer in the field of Individual Placement and Support. The Dartmouth Supported Employment Center advocates for the use of evidence-based IPS and houses a team of researchers and trainers dedicated to conducting research, providing training, offering consultation, and distributing guidance materials and resources. Dartmouth has identified eight key practice principles for IPS programs:

1. **Focus on competitive employment**
2. Eligibility based on client choice
3. Integration of rehabilitation and mental health services
4. Attention to worker preferences
5. Personalized benefits counseling
6. Rapid job search
7. Systematic job development
8. Time-unlimited and individualized support

These eight principles are at the core of any successful IPS program and set it apart from other services being offered in the field. Clients are offered real work in the community and a strong emphasis is placed on ensuring the process is rapid and efficient. In addition, these principles guarantee a client-centered, strengths-based approach for interested clients.

**Kentucky’s IPS Programs**

Kentucky was the 12th state to join the Johnson and Johnson Dartmouth Community Mental Health Program initiative to establish Individual Placement and Support (IPS). The program began in 2010 with four sites housed in community mental health centers: Four Rivers, North Key, Communicare, and Comprehend. Today, Kentucky recognizes IPS programs in all 14 community mental health centers and has recently added five additional providers to the roster. These programs are presently supported through Kentucky’s Office of Vocational Rehabilitation funding and with federal mental health block grant dollars from the state to help in providing long-term supports.
What Do Kentucky’s Programs Look Like?

Individual Placement and Support teams serve primarily adults with an SMI designation. In Kentucky, SMI is determined by indicators as designated within four domains and defined in the “Kentucky Determination Criteria Checklist for Serious Mental Illness (SMI)”. The IPS caseload may also include individuals with SMI and co-occurring substance use disorders. In reality, many individuals with SMI also have some diagnosable substance use condition.

Kentucky IPS programs have several unique features that allow it to stand out from programs not functioning within an evidence-based framework. These distinct characteristics are listed in Figure 1.

Fidelity Monitoring, Training & Coaching

FIDELITY MONITORING

The Institute for Excellence in Behavioral Health supports IPS statewide by providing fidelity monitoring, action plan formation with providers, and technical consultation.

Margaret Thurman and Melanie Randolph were hired in 2015 to serve as the Institute’s Fidelity Monitors. Their roles include the following tasks:

- Coordinate and/or conduct baseline and ongoing fidelity reviews across the state for a select set of evidence-based practices
- Develop reports based on fidelity reviews
- Provide necessary consultation and training to providers to support development of action plans subsequent to fidelity reviews
- Recommend additional training, coaching, and technical assistance to providers to support implementation of fidelity

The bulk of their work primarily focuses on assessing program fidelity in IPS programs operating statewide. Functioning with high fidelity is a goal of all programs to ensure clients are receiving the best employment support possible. Fidelity Monitors identify what is working for a particular program and areas for improvement. Once a report has been completed by Fidelity Monitors, the program is then provided feedback. This feedback delivers significant data to service providers; the information can then be used by the provider to enhance the program.

Please refer to Figure 2 to read a brief article on fidelity written by Kentucky’s Teresa Barney Brandenburg. Brandenburg is an OVR Supported Employment Branch
Manager and participates in statewide fidelity reviews.

TRAINING AND COACHING

A key element in implementing IPS supported employment with fidelity is the provision of effective training and coaching. The Division of Behavioral Health currently contracts with the University of Kentucky – Interdisciplinary Human Development Institute (IHDI) for the services of two full-time supported employment trainers. These trainers include Lori Norton and Lindsey Emberton. Their role is to train new providers in the basics of IPS as well as coach new employment specialists in how to conduct job development, how to work with local OVR counselors, and reinforce developing competencies in other related skills. This one-to-one coaching aids in skill development for the new employment specialist as well as setting a standard of practice for the delivery of supported employment services. The IPS Supported Employment trainers also provide support to program supervisors, individuals who may have no or limited experience in actually delivering supported employment services. Quarterly supervisor meetings are also convened by the trainers to allow for sharing of best practices and problem solving.

Kentucky is fortunate to have a highly skilled pair of trainers. Lori has been with the IPS initiative since 2010; Lindsey has been on board since 2013. They have both conducted fidelity reviews along with providing training and coaching. Currently they are focused on assisting the seven new programs in hiring qualified staff and providing individualized support.

Family Advocacy and IPS

The Johnson & Johnson – Dartmouth Community Mental Health Program (the “IPS Learning Community”) established the family advocacy project to advance family participation in state and local IPS initiatives in three ways. First, family advocates can help promote expansion of IPS services into other communities in their state and help sustain services by advocating with the state legislature for policy and budgetary supports for IPS programs.

NAMI Kentucky has been participating with DBH and OVR from the very beginning of the project in helping to recruit local NAMI affiliates in supporting the local IPS programs. Currently five CMHC regions have active family advocates working with their respective IPS program to ensure that families are aware of the services in their community, as well as promoting employment as a path to recovery for individuals with serious mental illnesses. Cathy Epperson, Executive Director of NAMI-KY, has been a strong advocate for IPS in Kentucky by serving on the state level supported employment steering team, attending national and local IPS training events and advocating for IPS with the state legislature. Family members interested in serving as a family advocate in their region or wanting more information about IPS should contact NAMI Kentucky at http://namikyadvocacy.com or by phone at 606-451-6935 or 1-800-257-5081.
Kentucky IPS Expansion

Through a partnership between the Office of Kentucky Vocational Rehabilitation (OVR) and the Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID), seven new IPS Supported Employment sites have been selected. New programs are being established by the following agencies:

- Wellspring (Louisville)
- Bridgehaven (Louisville)
- Mental Health America of Northern Kentucky/ Southwestern Ohio (Covington)
- Transitions, Inc. (Bellevue)
- Independence place (Pikeville)
- Cumberland River Behavioral Health (Corbin)
- Mountain Comprehensive Care (Prestonsburg)

Each agency has received $50,000 (using Mental Health Block Grant and Substance Abuse Prevention and Treatment Block Grant funds) to hire one to two employment specialists and a part-time supervisor. Programs are receiving training and technical assistance from two statewide supported employment trainers housed at University of Kentucky Human Development Institute. A unique characteristic of this expansion is that three of the seven new programs will be serving individuals with primary substance abuse disorders who are seeking employment.

These additions bring the number of IPS programs operating in Kentucky to a total of twenty. Individual Placement and Support is now available statewide in 61 counties. The image below provides a color-coded updated visual of IPS programs in Kentucky.
Is Job Tenure Brief in Individual Placement and Support (IPS) Employment Programs?

Research was conducted to determine whether brief job tenure is an issue for IPS programs. Previous findings stated that participants in IPS programs held jobs for less than four months (Bond & Kukla, 2011). Popular studies claiming brief job tenure were outdated, some reaching as far back as 1994. There was a need to see updated statistics that accurately represented job tenure as it currently relates to participants.

The research focused on 142 clients which were only accepted into the study if they met the designated criteria (Bond & Kukla, 2011):
- Age: 18+
- Diagnosed with Severe Mental Illness
- Currently working at least 10 hours a week in competitive employment and having begun a competitive employment position within the preceding six months

The clients were divided into prospective and retrospective samples. The prospective sample consisted of 82 clients who had recently begun competitive employment and the retrospective sample consisted of 60 clients who had begun competitive employment within the six months prior to the study (Bond & Kukla, 2011). Monthly data was collected on all participants and analyzed to determine job tenure.

Mathematical results concluded that participants worked a mean of 12.86 months overall and 9.96 months at their first job (Bond & Kukla, 2011). This research proves job tenure for IPS has increased significantly since the data collected more than twenty years ago was published. Major takeaways from this study include:

- Clients worked on average 11 months over the two year period
- 15% of completers were still working at the end of the two-year follow-up
- 15% of noncompleters were employed at the time of termination
- 40% of participants who started a competitive job after enrolling in high-fidelity IPS became steady workers

Another technology tool that has received positive reviews is the Dartmouth Career Profile (DCP). The goal behind IPS is not to find the client any job, but to find the client the right job. In an effort to facilitate a connection to a position that best fits the client’s preferences, updated information should always be on-hand. One key feature of the DCP tool is that it allows the client to frequently manage his or her profile. Interests and preferences may change over time, and the DCP provides the client with the ability to make adjustments. The outcome is an individualized profile that can be used by employment specialists to assist in the job search. Both the client and employment specialist have access to the information which opens the door for progress by eliminating the need for additional scheduled face-to-face meetings. Participating in the process may also be viewed as empowering by users by providing them the opportunity to engage in the process.

Technology tools designed to overcome cognitive challenges are also seen as being beneficial additions to IPS services. Cognitive enhancement strategies are broken down into two categories (Lord, McGurk, Nicholson, Carpenter-Song, Tausher, Becker & Bond, 2014).

- Restorative task practice – cognitive exercises designed to improve cognitive skills
- Cognitive/compensatory strategies – helping people work around their persisting impairments

One program that identifies these needs is Thinking Skills for Work. The program is accessed through a computer software...
package and is made available to clients through IPS programs. Clients utilizing Thinking Skills for Work engage in restorative task practice and compensatory strategies.

Clients with combined support from Thinking Skills for Work and IPS showed increased cognitive functioning and improved work outcomes (Lord, McGurk, Nicholson, Carpenter-Song, Tauscher, Becker & Bond, 2014). Due to these findings, it is the opinion of the authors that the accessibility of programs designed to overcome cognitive challenges be increased. Applications providing cognitive enhancement strategies could be offered through mobile devices so that more individuals have access to its benefits.

Introducing technology to IPS programs has the potential to create positive changes for both provider and consumer. The authors suggest a push for an increase of mobile connections with clients. Placing the right app in a person’s hand has the ability to work wonders. Some suggested technology advancements include (Lord, McGurk, Nicholson, Carpenter-Song, Tauscher, Becker & Bond, 2014):

- Developing a program that has the ability to send reminders pertaining to client’s job search
- Offer job interview simulation with constructive feedback
- Client’s preferences and interests are connected to employers within a database
- Client and employment specialists are able to communicate in real-time

**Resource:**

**Adapting IPS for Young Adults with Serious Mental Health Conditions**

Researchers adapted Individual Placement and Support (IPS) for young adults with Serious Mental Health Conditions (SMHC) in a study conducted within Thresholds Young Adult Program (YAP). YAP is a specialized residential treatment program that provides comprehensive clinical services for youth (Ellison, Klodnick, Bond, Krzos, Kaiser, Fagan & Davis, 2014).

Participants in this study were young adults between the ages of 17 and 20 and were known to have a serious mental illness (SMI) or serious emotional disturbance (SED). Researchers felt it was imperative to address modifying IPS for a younger population due to the fact that statistically, young adults with SMHCs have difficulty finding employment and education opportunities.

Serious mental health conditions affect young adults in an intense growth period while completing high school, attending post-secondary schools, or choosing a vocation. A serious mental health condition may make it more difficult for a person to partake in these societal milestones, causing an individual to feel alienated from his or her peers. In fact, 77% of participants in this study lacked a high school diploma when they initially joined (Ellison, Klodnick, Bond, Krzos, Kaiser, Fagan & Davis, 2014). Therefore, it was proposed by the researchers to adapt IPS to address these unique needs and assist youth in achieving these developmental goals. The research adapted traditional IPS by providing three key additions that appeal to a younger population: Supported Education (SEd), peer monitoring, and career development.

The following section breaks down the IPS additions and discusses their importance:

- Supported Education (SEd) – addresses many aspects of education. This process may include exploring post-secondary options and assisting in the enrollment process. Sometimes it may be assisting a youth in finishing high school; statistics state that only 56% of youth with SMHCs finish high school (Ellison, Klodnick, Bond, Krzos, Kaiser, Fagan & Davis, 2014).
- Peer Mentoring – a peer mentor with a similar background is made available to program participants. This is an individual whom the participants can relate to and consider a role model. A peer mentor should be someone willing to provide encouragement and support to those in the program.

The primary goal of this study was to refine the SE/SEd EA model and examine the feasibility with the target population (Ellison, Klodnick, Bond, Krzos, Kaiser, Fagan & Davis, 2014). Major positive takeaways from this study as discovered by Ellison, Klodnick, Bond, Krzos, Kaiser, Fagan & Davis (2014) are listed below:

- It was determined that the SE/SEd EA model is feasible. The research states that participants utilized their SE/SEd specialists and peer mentors at reasonable rates.
- Approximately half of the study participants worked or enrolled in an education program in the year after enrolling in SE/SEd EA.

Lastly, the authors of the study identified two major lessons learned upon completion (Ellison, Klodnick, Bond, Krzos, Kaiser, Fagan & Davis, 2014):

1. It was difficult to provide both SE and SEd through the same staff person
2. The role of the peer mentor and how to integrate the individual into the team should be clearly defined.

**Resource:**

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Resources
Dartmouth Supported Employment Center
Information on IPS, Resources, Training & Consultation
www.dartmouthips.org

The Association of People Supporting People First
Information on Kentucky’s state chapter
www.apse.org/chapter/kentucky

Human Development Institute
Information on projects, trainings, and additional resources
www.hdi.uky.edu

Kentucky Office of Vocational Rehabilitation
Information on Vocational Rehabilitation efforts in Kentucky, directory, and publications
www_ovr.ky.gov

The Institute for Excellence in Behavioral Health is a contracted initiative of the Department for Behavioral Health, Developmental and Intellectual Disabilities in partnership with the Training Resource Center.

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