

# **Job Retention Case Management in Mental Health**

**Welcome!**

# Learning objectives for the Day

- To understand the principles & practice of the case management approach.
- To learn how a healthy work environment is essential for successful job retention.
- To become familiar with a practical set of tools which you can apply in your service

# The why, what when & how of job retention

- WHY?
- Looking at the evidence:
- The economic costs.
- The human cost.
- WHAT?
- Linking prevention with prevention & vocational rehab.
- The case management approach.
- Holistic Care
- Multi-disciplinary Approach
- WHEN?
- Early Intervention
- Working with the G.P.

# The economic argument

- Mental health disorders account for 41% for those on incapacity benefit (2006)
- Mental health & stress related problems are the leading cause of absence from work
- Annual cost of lost employment in England - £19.4 billion. Total economic cost est. at £103 - £129 billion (2007)
- Employers costs: sick leave, lost production, recruitment & training, litigation/insurance etc

# U.K. playing catch up!

- Scandinavia – 50% return to work after major injury.
- U.S.A. – One in Three
- U.K. – One in Six!
- As many as 4 people in 10 return to benefits after 6 months back at work – low paid jobs; unsuitable employment; lack of support & lack of external agency support once back at work.
- Australia: for every dollar spent on rehabilitation, 33 dollars are saved.

# The Human Cost

- The breakdown of marriages.
- Falling into debt.
- Loss of friends
- Social isolation – economic exclusion.
- Dependency on professional services (chronicity)

# Singing from the same hymn sheet

- Many Agencies involved: Human Resources, Occupational Health, Line Manager, work colleagues, G.P./clinical support, trade union reps. etc.
- Different players – different agendas.
- Who stands alongside the client in their vulnerability?
- Case Managers provides: advocacy, coordination, support, negotiates & provides information.

# Why early intervention?

- 6 months off work? - only 50% chance of returning to work; 1 year – 25%; 2 years – nil!
- Presenteeism? – people get depressed before they go sick.
- Grievances, disciplinary issues work place conflict are the result
- So early involvement avoids interventions which are often damage limitation.



# The G.P. Picture

## The Facts

- 35% of consultations involve a mental health problem.
- 90% of mental health care provided by primary care.
- Unemployment increases workload of G.P. – strong links between unemployment & health problems

## Background

- Signing off - a protective strategy often at the expense of the patients health.
- They do not have the time and often the skill or knowledge to deal effectively work absence issues.
- Access to talking therapies has been patchy

# And most important: the HOW

- A service based on individual need – not service led.
- Solutions Focussed.
- Transparent Process
- Recovery based practice
- Facilitating Healthy Relationships – bridge building.
- Holistic Assessment

# Recovery based practice

- Based on individual need not service led
- Diagnosis not a good indicator of workability.
- Gestating hope
- A time to get well - not a time to be sick!
- Support is better than care.
- Health professionals no substitute for friends.
- Supporting the naturally occurring support.
- Recovery is a process not an event

# The Employer needs your services too!

- Workplace assessment linked to client assessment will identify where the employer needs to 'get well' too.
- Employers' need help and advice on mental health issues. "We knew she had a nurse but they never included us.....The job retention worker made some useful suggestions and the support they gave her made all the difference. We'd have had to let her go – things couldn't have carried on the way things were" (*Avon Pilot*)

# I belong, therefore I am

- People living alone has doubled in Europe since 1947
- Loneliness as bad for you as smoking 15 a day
- Review of studies shows people had 50% better survival rate if they belonged to a wider social group (Holt-Lundstad)
- 1 in 10 adults often felt lonely - 1 in 3 would like to move closer to their family – Mental Health Foundation – May 2010

# Summing up the 'how' of job retention

- Mental Health? It's all about relationships
- If I don't know what's happening to me, how can I tell my wife?
- Saving the job –saving the marriage
- Shaman
- Canaries
- The Core Economy
- It's bridge building, detective work, problem solving, resolving conflict and diplomacy.

# “Working for a healthier tomorrow”

## Dame Carol Black – March 2008

- “N.H.S. professionals and their organisations – along with their regulators – should recognise retention in or return to work as a key indicator of their successful treatment of working age people and appropriate data should be collected to monitor it.”

# Fit Note v Sick Note

- “Employers tell us that managing sickness absence can be challenging. This is compounded by the sick note system that makes sickness a black and white issue, either your fit for work or you’re not. We recognise how important it is to get people back to work quickly – the new fit note will do just that”
- *Lord McKenzie, Work & Pension Minister*



# Action on the Fitness Note

- Launched in April 2010
- National training programme for G.P. Practice
- The job case manager will provide the assessment information to advise both G.P. and Occupational Health.
- South Staffs Fit for Work pilot has produced a referral 'stamp' for GPs so that employers can seek help from FfW case managers

# Challenges for I.A.P.T. Employment Advisers

- To work in an integrated fashion with therapists.
- Immediate referral to address workplace issues.
- To ensure there is sufficient time for complex cases – particularly regarding advocacy with the employer prior to return to work.
- Be creative with the monitoring – which currently is biased towards the individual getting well with less regard to environmental change.
- Don't let the paper work interfere with your client relationship

# Delphi Study – Sainsbury Centre for Mental Health & Nottingham University

- 80 ‘experts’ throughout the U.K. consulted to establish the priority skills & knowledge set for the delivery of job retention services
- Acknowledged that the specialist skills and knowledge required, cross traditional professional boundaries.
- Skills such as negotiation, advocacy & conflict resolution.
- Knowledge & understanding Employment Law; D.D.A.; Health & Safety legislation

# Job Retention Team (the trainers!)

## Activity

- Establishment of regional networks for peer support; training & development – in London & South East; East of England; Yorkshire; Lancashire; Cheshire & West Midlands
- Training events: Mediation Skills (London, Wales & Yorkshire).
- Principles & Practice paper & The What ifs of Job Retention followed by Best Practice Handbook endorsed by Dame Carol Black available from May 2011

# Useful Links & References

- <http://www.workingforhealth.gov.uk/Initiative/mental-health-and-employment-strategy/Default.aspx>
- Working for a Healthier Tomorrow – Dame Carol Black’s Review, 2008 – [www.workingforhealth.gov.uk](http://www.workingforhealth.gov.uk)
- Work Place Interventions for People with Common Mental Health Problems – BOHRF Report, 2005 – [www.bohrf.org.uk](http://www.bohrf.org.uk)
- Mental Health & the U.K. Economy, 2007 – [www.oxfordeconomics.com](http://www.oxfordeconomics.com)
- ‘Back before Christmas’ – The Avon Pilot – Thomas, Secker, Grove, 2002 – from [www.scmh.org.uk](http://www.scmh.org.uk)
- Work & Wellbeing – Briefing Paper 34/Sainsbury Centre – also ‘Delivering Job Retention Services’ - [www.scmh.org.uk](http://www.scmh.org.uk)
- You can also sign up for the monthly Centre for Mental Health email bulletin
- ‘Working our Way to Better Mental Health’ – 1<sup>st</sup> nationwide strategy for mental health & employment
- ‘New Horizons’ – improving quality of life/wellbeing & accessibility of services for people with poor mental health

# Life after Pilots?

- Cuts, redundancies, folding services
- Consortiums for survival
- Will employers pay for services?
- Creating whole packages for employers
- Cashing in our track record
- Competing with the private sector