

# Stay Well – Stay Working: Richmond Fellowship Employment Service working to support adults with mental illness into work and learning

**Ross Hall and Vicky Edmunds**

With the current changes in the economic climate there has been a marked increase in the numbers of people unemployed. For those in work there are increased pressures to perform with a wide concern about job loss. As the recession bites and unemployment mounts and these trends have an increasingly detrimental effect, NHS services around the country are reporting a rise in mental health problems.

## What are the facts?

- 1 in 6 people (amounting to 7 million adults), in England suffer from a common mental health problem. The cost to employers is estimated at £26 billion (Sainsbury Centre, 2007)
- The onset of mental health problems is associated with double the risk of leaving employment compared to other health conditions or impairments (Social Exclusion Unit, 2004)
- Nearly 3 in 10 employees will have mental health problems in any one year, the majority of which will be anxiety and depression (Mental Health Foundation, 2003)
- After 12 months absence from work there is only a 25 per cent chance of returning to work (Sainsbury Centre, 2007)

## What is the Richmond Fellowship?

The Richmond Fellowship is one of a number of voluntary sector organisations who work with adults with mental health problems to offer support with work and learning. This year the organisation is celebrating 50 years of working within the mental health sector, during which time they have offered a wide range of services including supported housing, registered care, community links and support for employment, education and training. More recently job retention services have been included.

We have been providing vocational services since 1985, and for the past 24 years the Richmond Fellowship and its staff have worked to develop a high quality employment service for people disadvantaged or disabled by severe and enduring mental health problems.

The employment advice services draw on a range of models to inform their work. They provide specialist assessment, guidance and support to assist clients into work and/or education, with ongoing support to both clients and their employers. They are also now at the forefront of providing early intervention support for employed people experiencing difficulties associated to their poor mental health.

During the last year (April 2008 to March 2009) the Richmond Fellowship worked with:

- 3,197 primary clients (clients accessing our core service), an average of 1,417 at any one time
- 767 secondary clients (clients receiving a 'light touch' service), an average of 356 at any one time.

During that same period 61 per cent of our primary clients and 68 per cent of our secondary clients gained a positive outcome.

## What type of support do people with mental health problems need in connection with employment, education and training?

The first principle of the service is recovery. The idea of 'recovery' derives from a set of values about a person's right to build a meaningful life for themselves with or without continuing mental health symptoms. It is based on a principle of self-determination and self-management. The emphasis is on instilling hope and the belief that there is something for the individual to strive for. This can help to sustain motivation and support the individual's expectations of a full life. It does not mean 'cure'. It is more about learning the life skills to self-manage and deal with the challenges and changes in both personal health and life in general.

The Richmond Fellowship also works closely to the Individual Placement & Support (IPS) model. This takes the idea that clients with severe mental illness can achieve competitive employment, and encourages them to access it in integrated/mainstream settings, working in regular places of business with non-disabled employees rather than in specialist vocational settings. The main principle is that all are capable of employment, and it places an emphasis on early job search that is driven by the client's

choice and preferences. This is assisted by the provision of accurate information about career choices, labour market, legislation, benefits and financial implications to enable a truly informed choice. We also view moves into education and work-based training as of equal value to the individual.

We aim to offer our clients a professional relationship based on equality, offering support whilst always respecting their capacity to direct their own growth and development. We offer impartial, non-directive advice.

Advisers working with the Richmond Fellowship come from a wide range of backgrounds. Many will have experience in the mental health sector, and in advice, guidance, counselling and/or education. Others will have developed knowledge and experience in the private or public sectors, and a few will have developed an interest in working in this field after recovering from mental illness themselves. The advisers use a wide range of guidance, counselling and other support models to inform their practice. They are expected to hold an NVQ level 4 in guidance or a similar qualification. This integrated method allows us to offer a client-centred approach to our clients.

Clients will come from a range of backgrounds and stages in their recovery. Most Richmond Fellowship employment services are commissioned to work closely with NHS mental health teams and other health professionals. Clients have the opportunity to access the service independently, or will do so following discussion with the health professional responsible for their care. Health professionals themselves will also introduce people to our service. Clients will vary in their proximity to the labour market. Some we work with have never been employed, or have been unemployed for long periods of time, and may also have low skills and/or very little current work experience. Others can be highly qualified professionals who have either just lost their job, or are at risk because of a mental illness. Our service recognises that everyone is an individual and the impact of mental ill health will affect people and their lives in different and unique ways. Therefore advisers need to use a holistic and flexible approach to their working with clients.

### **What does this type of service offer that makes it different from any other IAG service?**

**‘Richmond Fellowship has helped me to gain confidence and the skills to pursue a career. I now have a permanent position, thanks to help from the RFES service.’ Dan**

Firstly, it is important to have the time and resources to adhere closely to normal guidance practice. The ability to offer a good advice and guidance service coupled with the time to follow up clients goes a long way to support individuals with mental health problems. Richmond Fellowship’s experience is that:

- clients need time to build trust and to be offered a supportive and understanding environment where they can be open and honest about their concerns
- it is important that all clients have their hopes and aspirations acknowledged
- clients require time to move at their own pace – they are their own best expert
- targets and goals are more achievable when broken down into manageable steps
- there needs to be opportunities to review and to understand personal progress and life changes
- we have to be flexible enough to deal with the inevitable relapses that occur when dealing with a fluctuating health condition
- doors need to be kept open for clients to return when they are feeling well, or ready for the next step
- it is vital that clients are totally involved in the process as a whole and take responsibility for the choices they make.

Advisers need to have not only a good knowledge of their skills and understand clear boundaries, but also be aware of where their role ends and where support and advice is best given by others. For example, because the role requires a lot of listening, it can be easy to slip into counselling mode. Advisers have to be aware of when there is a need to refer a client to appropriate professionals if psychological intervention is required.

In addition we have found:

- advisers must recognise the importance of facilitating self-direction for the client and foster a solution-based approach
- there is a need to work within the individual client’s own networks
- promoting self-efficacy by working alongside the client is essential
- advisers need to develop their own support networks, identifying the resources and skills which will help them to support themselves in the future. They need to know where they can get help and resolve issues for themselves and their clients without having to refer back to the service.
- the facilitation of peer group support has proved extremely effective, reducing isolation and encouraging personal reflection and self-determination. Individuals are able to share experience and realise they are not alone – it is not just them experiencing problems.

- clients may require access to other types of activities. These can include job- seeking skills, assertiveness training, access to basic skills, work placements, access to careers software etc.
- it is important for advisers to build a relationship with the client so that they can understand their motivation and readiness to move forward, to know when and how to challenge and motivate a particular individual and when to back off.

Key elements of our model include:

- the involvement of clients at every stage to ensure agreed actions, with regular reviews
- the use of a holistic, flexible and non-judgmental approach
- the need to identify support networks
- the understanding of motivation and readiness
- the need to keep our door open for re-entry
- the keeping of clear boundaries
- the keeping open of clear channels of communication
- the need to support the client to develop their own self-advocacy skills, but to advocate when necessary.

**'Richmond Fellowship helped me move from a stage in my life, where I felt of no use to anyone, to a time where I now have hope and look forward to a normal life.'** Paul

### Early intervention – Why offer a service for employed people?

Evidence from our employment advice services suggested that many of our clients who were seeking work had previously held employment. Most had lost their jobs following the onset of mental health difficulties which then exacerbated stress and problems in the work place. Support for individuals struggling to hold down jobs while trying to cope with the debilitating effects of mental health difficulties has historically not been catered for, especially if people are not able to access secondary care through NHS provision.

**'The longer a person is off sick, the more difficult it becomes for them to return to work and the less likely it is that they will return to work at all'**  
Unum Limited IfES, 2001

### Richmond Fellowship Retain – an additional service provision

RETAIN, Richmond Fellowship's national Job Retention Service for people with mental health problems, was launched in 2006. Its long-term aim is to improve the working environment for all people experiencing mental health difficulties and maximise the availability of early intervention support services.

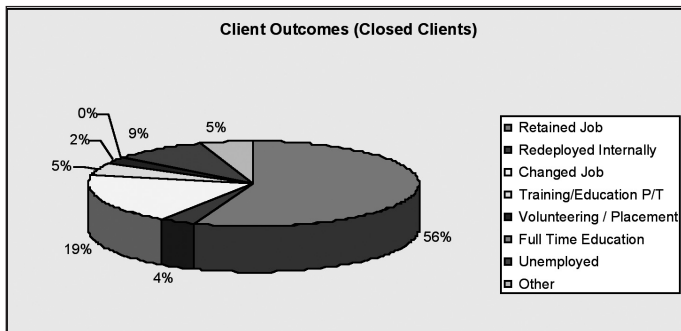
Retain supports people experiencing mental health problems including stress, depression or anxiety at work. These clients are unlikely to be receiving any care service through the NHS. The service aims to maximise a client's chance of maintaining their employment when problems arise, by working with them on a one-to-one basis and also directly with their employer.

Using the same principles, Retain facilitates employed clients who are experiencing difficulties in the workplace to find solutions to their problems, improve their mental health at work, or return to work after a period of absence. Employees report that the service supported them to review their current situation and opened up different ways of looking at things, offering new options and less negative possibilities in what could be described as 'reframing' or 'reappraising'.

**'...during the meeting with [the adviser] I realised I really do want to come back, yes I actually really do have skills that I can use and that... If they [employers] are a bit more flexible, and they take into account that I have this severe long term problem, that it's not my fault, it's just how it is, that they can accommodate me.'** Alice

If required Retain can give support and information to employers and offer mediation in order to bring about a successful outcome. Retain also recognises the lack of specialist support for employers and maintains a neutral stance.

**'The thing that's most difficult to manage as an employer when people have mental health problems is getting them to talk about it with us. Having RETAIN to help make those conversations possible has been really constructive. The great thing about RETAIN is also that you're not on anyone's side. You're helping us as well as the employee through your knowledge of employment issues as well as mental health.'** Sonya Taylor, Coaching and Advice Officer, HR department, Brighton & Hove Council.



**Retain clients, July06- Aug.09 internal RF monthly report**

Since its formal launch in 2006, RETAIN has worked with over 800 people, of which 79 per cent have had a positive outcome – they have retained their job, been redeployed or changed job.

Recent research on Richmond Fellowship’s Retain model (Cameron and Walker, unpublished) concluded that this service provided:

- positive work outcomes
- help to preserve and develop work related identities and aspirations
- increased confidence, communication skills and an approach to problem solving
- increased sense of hope, increased confidence to approach employers
- reduced self-blame and isolation.

The Sainsbury Centre for Mental Health has recently completed research to understand the impact of Employment Advisers in Primary Care. This is based on a study of both our Cambridge and our Huntingdon and Fens Retain services (Sainsbury Centre, forthcoming). The Cambridge Retain service was successful at helping over 80 per cent of people to retain their job, and its positive impact is demonstrated by a continued funding grant from Cambridgeshire Primary Care Trust as part of the NHS’s Improved Access to Psychological Therapies (IAPT) programme. Research by Cameron and Walker on the Brighton Retain service (unpublished) also highlights good practice and the positive outcomes achieved by our clients.

**The future**

Richmond Fellowship is continuing to develop its services in response to the needs of both clients and funders. Recently it has been working in partnership with local Primary Care Trusts to use IAPT funding to place specialist employment advisers within health teams to offer timely support when ill health might be affecting a persons ability to sustain work, or when a lack of employment might be contributing to mental illness. This approach fits well with the concept of the ‘Fit For Work’ model outlined in the Black report (Black, 2008), that promotes taking a more

holistic view of people in the early stages of sickness and offering support on a wide range of areas including an emphasis on work.

An ongoing concern for our services is that funding in this area is often short term and driven by changes in local and national policy. However, Richmond Fellowship continues to strive to inform good practice in the sector and to support the development of services. We are committed to working with external research bodies, policy makers and other partnership organisations, hopefully to sustain a continuity of provision for this type of valued support.

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