



# briefing

MARCH 2010

ISSUE 200

## Working it out: employment for people with a mental health condition

### Key points

- Fewer than 16 per cent of people with a mental health condition (except depression) have a job, yet between 86 and 90 per cent of this group want to work.
- The NHS could save £555 million a year by reducing sickness absence by a third.
- The Individual Placement and Support Model is the most successful vocational model for getting mental health service users back to work.
- For those who gain employment, mental health service usage and costs decrease significantly.
- Tackling stigma and intervening early are key, both for employers and for mental health services.

The link between employment and positive mental health is an issue of great importance for the NHS, both in terms of supporting service users to recover from mental health conditions and for improving staff productivity. Between 10 per cent and 16 per cent of people with a mental health condition, excluding depression, are in employment.<sup>1</sup> However, between 86 and 90 per cent of this group want to work.<sup>2</sup> Meaningful work is integral to recovery.

Employers who take steps to improve the management of mental health at work can help to improve staff productivity and save money. As the NHS enters a challenging period for future funding, reducing the costs of staff sickness absence and driving up productivity are critical. This *Briefing* outlines the key themes from recently launched government policies in this field and sets out actions for the NHS, as both an employer and service provider.

### Background

The relationship between employment and mental health is clear. Numerous studies have linked unemployment with poor mental health. One in seven men develop clinical depression within six months of losing their job.<sup>3</sup> For many, the journey into unemployment often begins with a period off sick with 'stress' or depression. This outcome could often be avoided if employers were better able to manage mental distress at work, and if health services were more proactive early on in a period of sick leave.

There is a great associated economic cost. Mental ill health is now the most common reason for claiming health-related benefits. There are an estimated 1.3 million people with mental health problems on benefits,<sup>4</sup> and 86 per cent of them remain on benefits for longer than three months.<sup>5</sup>

Poorly managed mental health in the workplace has a huge cost for employers. The recent Boorman Review into NHS staff health and well-being estimated that the service could save £555 million a year if sickness absence was reduced by a third.<sup>6</sup> Investing in the well-being

of staff, including through better management of mental health at work, is crucial.

## Policy context

A number of high-profile policy announcements relating to mental health have been made over the last year.

The Boorman Review, published in November 2009, raised the profile of physical and mental well-being at work. Boorman asserts that where NHS organisations prioritise staff health and well-being, performance is enhanced, patient care improves, staff retention is higher and sickness absence is lower. In turn, agency staff costs are reduced and productivity improves. The Government has accepted in full the recommendations set out in the review.

December 2009 saw the launch of *New horizons*, the cross-government strategy for improving mental health services and wider public mental well-being. Alongside that launch came two strategies related to mental health and employment.

The first, *Work, recovery and inclusion*, is part of the government response to the Perkins Review and sets out policy relating to employment support for people in contact with secondary mental health services.

The second, *Working our way to better mental health: a framework for action*, takes a broader look at what actions are needed from government, employers, healthcare professionals and the third sector to help people with mental health conditions prepare for, find and stay in work.

All these initiatives sit alongside existing policy such as Public Service Agreement (PSA) 16 – the

cross-government target that aims to increase the numbers of socially excluded individuals in settled accommodation and in employment, education or training. This specifically includes adults in contact with secondary mental health services.

Improving employment outcomes for those who use mental health services also has a key part to play in the wider agenda around improving quality and productivity. Improving employment outcomes has strong potential to both increase the quality of services the NHS provides and to reduce costs.

Key themes from these policies are set out below.

## Supporting staff well-being

There is a clear economic case for employers to invest in the well-being of their staff. The Boorman Review estimated the NHS could save £555 million a year by reducing staff sickness absence by a third. Measures to invest in the well-being of staff, including better management of mental health issues, are central to achieving this.

Key recommendations from the Boorman Review included:

- ensuring that NHS organisations have a prevention-focused health and well-being strategy in place for staff
- making senior management accountable at each organisation

for staff health and well-being, which will be measured as part of the annual assessments of NHS performance

- early interventions for staff with musculoskeletal and mental health conditions to help minimise the time that staff suffer with these conditions and to support an early return to work.

Supporting better staff well-being is important for all employers. To encourage this, the Department for Work and Pensions (DWP) is establishing a network of health, work and well-being coordinators across Great Britain to champion integrated approaches to health, employment and skills support. They will work locally to encourage public sector employers to become exemplars and build engagement with small businesses.

The SHIFT programme, funded by the Department of Health (DH), will work with business and health services to provide better information about locally available health and well-being advice, support and services, including business-to-business support. It will also publicise good practice for mentally healthy workplaces.

The Department for Business, Innovation and Skills (DBIS) will seek to improve the take-up and success of work-based learning for people with mental health conditions, through greater support from the Train to Gain service.

## Open Your Mind

In March 2010, NHS Employers will launch its Open Your Mind campaign to reduce stigma and increase understanding of mental health issues within the NHS. NHS Employers is also working in partnership with six NHS organisations to develop models of good practice and practical resources to share throughout the service. A dedicated website with information on policy, examples of innovation and good practice and other tools for employers will support the campaign.

## Public sector organisations as exemplar employers

The public sector could become an exemplar in employment practice in this area, both in terms of looking after the mental well-being of staff and of improving the recruitment and retention of people with existing mental health problems.

The Social Exclusion Task Force (SETF) will identify a champion of mental health and employment across government and the public sector, and is working with civil service departments on improving their own employment practices. Jobcentre Plus and SETF are also tasked with encouraging local authorities to directly employ more people who are in contact with secondary mental health services.

## Tackling stigma

The stigma surrounding mental illness is a barrier both to people accessing help from services and for people being open about mental health issues at work. The Government has made a number of commitments to challenge the stigma around mental health, including using the upcoming Equality Act to strengthen anti-discrimination legislation. The Government will also concentrate on encouraging employers, particularly in the public sector, to offer more employment opportunities to people with mental health conditions. Other anti-stigma initiatives are raising awareness and promoting mental well-being, including the BBC's Headroom campaign, Time to Change, SHIFT and various regional programmes.

The Learning and Skills Council will promote take up of the Mindful Employer standard and promote mental health awareness training. At a

## Making employment part of care and support

Ensuring that employment is part of the care and support offered to people with mental health conditions requires a cultural shift in the way that services are delivered. Experience from trusts that have been most successful at getting people into work suggests that the following commitments need to be in place:

- having a board member with responsibility for leadership in this area
- ensuring that policies and services are recovery-focused, with a particular emphasis on supporting people into work
- supporting strategic and practical links between relevant partner agencies, including the third sector
- raising awareness among clinical and other staff (through, for example, training) of the economic and clinical benefits of work for people with mental health conditions and the challenges that might exist, including stigma and discrimination
- examining the organisation's policies and practices as an employer to ensure that it supports the employment of people with mental health conditions and that current staff with mental health difficulties are identified and well supported.

Extract from *Work, recovery and inclusion: employment support for people in contact with secondary mental health services*<sup>7</sup>

## Case study: Cambridgeshire and Peterborough NHS Foundation Trust

This mental health trust is taking a holistic approach to employment and mental health. Its employment campaign has three strands, looking at the trust's role as a:

- service provider
- employer
- wider influencer in the community.

As a service provider, the trust makes sure that inpatients have access to the internet so that they can keep in touch with their employer, and works with Remploy to provide individual placement support for employment.

As an employer, the trust is starting a training programme for 80 people in spring 2010, aiming to employ people who have previously been mental health service users as peer support workers.

The trust is also working locally with Mind to develop a best practice mental health resource pack, including success stories, key research and information, to encourage local businesses and organisations to become better employers of people with mental health conditions.

regional and local level, deputy regional directors for social care and partnerships (DRDs) and regional employment leads will also need to consider how to encourage more people to sign up to Mindful Employer. DRDs should ensure they have a joint plan with their strategic health authorities (SHAs) to increase the number of people engaged with secondary mental health services in employment.

## Intervening early

When people begin to struggle with a mental health problem at work, managers often fail to recognise the signs and may not know how to get practical support. Individuals may not spot their own need for employment-focused health support, or not know how to access it. Furthermore, healthcare and associated professionals may not fully appreciate that work is often a necessary element of recovery.

*Working our way to better mental health* commits the Government to encourage employers to provide training for managers on supporting mental health and well-being at work, and to give managers the skills to hold supportive conversations.

## Cross-government contributions

The DWP will support the effective management of sickness absence through promoting the use of return-to-work action plans agreed between employer and employee. It will work to provide easier access to practical advice for managers to help them deal with individual employee health and mental health conditions or distress at work, and will launch an occupational health advice line for small business in nine pilot sites across Great Britain. The advice line will also support employees and GPs.

## Time to Change

The Time to Change programme is led by Mind and Rethink. The campaign aims to inspire people to work together to end the discrimination surrounding mental health through activities ranging from local community projects to national campaigns. Many NHS organisations already support the campaign. Toolkits and resources are available at [www.time-to-change.org.uk](http://www.time-to-change.org.uk)

## Mindful Employer

Led and supported by employers, the Mindful Employer initiative is aimed at increasing awareness of mental health at work and providing support for businesses in recruiting and retaining staff. Since it was launched in 2004, 594 employers have signed the *Charter for employers who are positive about mental health*. More information is available at [www.mindfulemployer.net](http://www.mindfulemployer.net)

The Government also hopes that the introduction of ‘fit notes’ will enable GPs to provide better return-to-work advice. Further initiatives include the DH and DWP Fit for Work service pilots across England and Wales trialling models of work-focused, health-related support for people in the early stages of sickness absence from work, helping to identify the most effective ways of treating people and helping them back into work. The DH and DWP are also piloting integrated support in psychological therapy services, with employment advisers giving job retention advice to people who have mild-to-moderate conditions.

The DBIS will work with partners to train managers in absence management and rehabilitation, and share best practice in job retention among employers and employee representatives.

The DWP is working with the Royal College of GPs and the Faculty of Occupational Medicine to deliver a new education programme for GPs to raise awareness of employment and mental health issues. The Government is also working with the Royal College of GPs and *The British Medical Journal* on developing e-learning support.

The DWP is working with the Royal College of Psychiatrists to develop guidance for individuals who have mental health conditions, including chronic or fluctuating conditions, which will provide simple, practical advice and information.

## Evidence-based support for recovery

Recent DWP and DH guidance, and the Perkins Review, point to the success of the Individual Placement and Support (IPS) model of support for people in contact with secondary mental health services. This has the most developed evidence base of all models for vocational support and is built around embedding employment specialists within mental health clinical treatment teams. The Perkins Review cites evidence from 16 randomised control trials that have now demonstrated that IPS achieves far better outcomes than other models across varying social, political, economic and welfare contexts.<sup>8</sup> The trials show an average of 61 per cent of people with serious mental health conditions can successfully gain open competitive employment using IPS, as compared with 23 per cent for

vocational rehabilitation. Evidence from the UK, Europe and the USA shows that among those who gain employment, mental health service use and costs decrease significantly.

*Work, recovery and inclusion* makes a number of commitments for further government work in this area. The National Mental Health Development Unit (NMH DU) will ensure future commissioning guidance on mental health and well-being makes appropriate reference to employment for adults in contact with secondary mental health services. The NMH DU will also scope the need to improve the evidence base for under-researched models of vocational support in secondary care. DRDs and SHAs are also told they should consider working with mental health providers and commissioners to consider how best to increase access to vocational services in secondary care as part of their regional planning process.

### Employment as a measure of success

Employment should be considered a key outcome for services at every level of the mental health system, and in

many instances already is. Improving the employment outcomes of those with learning disabilities, and for those in contact with secondary mental health services, are both outcomes that primary care trusts can choose to prioritise locally under Vital Signs. Many organisations are already including employment outcomes as measures within their CQUIN (Commissioning for Quality and Innovation) schemes and forthcoming quality accounts.

In 2010, there will be further work to embed this approach. The world-class commissioning assurance framework for year two includes employment outcome indicators for mental health. By April, the NMH DU will publish guidance on personalisation in mental health needs, which will include how personalisation can support employment. The DH, from April, will also include employment in the new performance framework for non foundation trust mental health providers. Through its guidance on the standard mental health contract for 2010–11, the DH will encourage primary care trusts to include employment and accommodation as indicators that providers should routinely supply.

Also in 2010, the NMH DU and DRDs will work with SHAs to encourage clinical care pathways groups to incorporate employment outcomes into their work and highlight good practice on organisation-wide approaches to recovery. There will also be a push from DRDs and SHAs to improve regional baselines and engagement with PSA 16 data collection.

### Joining up services

At a local level, improving the employment outcomes for people with a mental health condition involves a variety of agencies, including the NHS and Jobcentre Plus. A number of NHS trusts are already signed up to local employment partnerships and all NHS employers are encouraged to enter into them to ensure that appropriate job opportunities are open to people who are at a disadvantage in the labour market. As part of a local employment partnership, trusts can:

- access local training
- improve the speed of recruiting
- boost their reputation as an employer in the local community.

NHS Employers is working with Jobcentre Plus and the Government to support trusts with these partnerships and share good practice.

At a national level, the DWP has committed to improving the training that advisers in Jobcentre Plus receive, and ensure that, wherever possible, people can receive continuity of contact from the same adviser where they need more intensive help. The DBIS and the DWP are also committed to improving access to advice and support services dealing with employment, debt and financial advice, relationship and housing problems.

### Key principles of Individual Placement and Support

- Competitive employment is the primary goal.
- Everyone who wants it is eligible for employment support.
- Job search is consistent with individual preferences.
- Job search is rapid, beginning within one month.
- Employment specialists and clinical teams work and are located together.
- Support is time-unlimited and is individualised to both the employer and the employee.
- Welfare benefits counselling supports the person through the transition from benefits to work.

Source: *Work, recovery and inclusion*<sup>9</sup>

Regionally and locally, DRDs and SHAs are tasked with considering working with mental health providers and commissioners to look at how best to increase access to vocational services in secondary care. Jobcentre Plus is also encouraged to ensure there are agreements about referrals between its suppliers for Pathways to Work and Work Choice and vocational support services provided by the NHS. Disability employment advisers will also want to ensure they are aware of the vocational services

being provided by the NHS in their area so that they are able to make appropriate recommendations to their customers.

### Viewpoint

As the largest public sector employer in the UK, the NHS can make a significant contribution to both improving services for people with mental health conditions and being a better employer.

The NHS is well placed to provide high-quality, evidence-based support to help mental health service users retain, or return to, employment.

Employing people with mental health conditions in the NHS has potential benefits for the individuals concerned, and also for the productivity of the NHS and the quality of services it provides.

For more information on the issues covered in this *Briefing*, contact [rebecca.cotton@nhsconfed.org](mailto:rebecca.cotton@nhsconfed.org)

## References and further information

For all references in this *Briefing* and for further information, please see the appendices: [www.nhsconfed.org/publications](http://www.nhsconfed.org/publications)

## The Mental Health Network

The Mental Health Network was established as part of the NHS Confederation to provide a distinct voice for mental health and learning disability service providers. We aim to improve the system for the public, patients and staff by raising the profile of mental health issues and increasing the influence of mental health and disability providers.

For further details about the work of the Mental Health Network, visit [www.nhsconfed.org/mhn](http://www.nhsconfed.org/mhn) or email [mentalhealthnetwork@nhsconfed.org](mailto:mentalhealthnetwork@nhsconfed.org)

## NHS Employers

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NHS Employers represents trusts in England on workforce issues and helps employers to ensure the NHS is a place where people want to work. NHS Employers is part of the NHS Confederation.

For more details about the work of NHS Employers, visit [www.nhsemployers.org](http://www.nhsemployers.org) or email [enquiries@nhsemployers.org](mailto:enquiries@nhsemployers.org)

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