



## Ensuring appropriate employment support for people with mental health problems

Stable employment is a major factor in maintaining good mental health and is an important yardstick to recovery for people with a mental health problem. There is a strong relationship between unemployment and the development of mental health problems, including increased suicide risk.

The COVID-19 pandemic has led to redundancy notifications by employers running at more than double the levels seen following the 2008/09 recession. This is likely to lead to a significant increase in those seeking support with their mental health. As such, there needs to be a range of therapeutically informed services to complement the more traditional approaches to employment support. This briefing is designed to help systems and their partners understand why employment support for people with mental health problems is important and how it can look in practice.

### Key points

- For people with mental health problems, the parallel provision of clinical and employment support services is critical to their recovery.
- All staff working with people with a mental health problem have an important role in promoting the benefits of appropriate employment and in promoting a positive view of the person's skills and ability to work.
- Social prescriber link workers and mental health practitioners in primary care networks have a major role in both raising and discussing employment with the people they support and signposting them to specialised employment support based on the person's needs.
- Both local authority and NHS commissioners work with wider system partners to integrate and embed employment support alongside clinical services to improve access, integration and visibility of employment support.
- The full implementation of the NHS Long Term Plan commitment to increase access to specialist employment advice for people with mental health problems requires the provision of employment advice within improving access to psychological therapies services and an individual placement support service at the level of 'place', if the full benefits are to be realised.

# Employment support

Stable employment is a major factor in maintaining good mental health and is an important yardstick to recovery for people with a mental health problem. Unemployment is associated with increased physical health problems and premature death and there is a strong relationship between unemployment and the development of mental health problems, including increased suicide risk.<sup>1</sup>

The economic impact of the COVID-19 pandemic is estimated to be far greater than after the 2008 recession. Analysis from the Institute of Employment Studies shows that redundancy notifications by employers are running at more than double the levels seen in the 2008/09 recession. It is estimated that this may lead to around 450,000 redundancies in the third quarter of 2020 and a further 200,000 redundancies in the final quarter of the year,<sup>2</sup> which is significantly higher than the quarterly peak in the last recession of just over 300,000. The Centre for Mental Health has modelled that up to 10 million people in England (almost 20 per cent of the population) will need either new or additional mental health support as a direct consequence of the crisis.<sup>3</sup>

As the job retention scheme<sup>4</sup> is replaced by the job support scheme<sup>5</sup>, there is likely to be an increase in referrals to primary care driven by people who are experiencing poor mental health as a result of unemployment. So, as the transformation of community mental health services gathers pace and primary mental health provision is built up, it is important that employment services are seen as an essential part of the pattern of provision at a neighbourhood level, both in terms of attaining and retaining employment.

- The NHS Long Term Plan envisages that there will be significantly improved access to employment advice for people affected by mental health problems. At a local level there will be:
- the universal offer of employment advice provided by the Department for Work and Pensions (DWP)/JobCentre Plus
- employment advisers located within IAPT services
- individual placement and support (IPS).

The creation of primary care networks (PCNs) provides an opportunity to embed employment support at neighbourhood level. The additional social prescriber link workers in PCNs have a major role in both raising and discussing issues of employment with the people they support and signposting them to local specialised employment support based on the person's needs. The increase in mental health practitioners in PCNs is also an opportunity to build on and further promote the benefits of employment and support people with mental health problems into appropriate work.

Given the trauma likely to be experienced in light of the COVID-19 pandemic, it will be important that there is a range of therapeutically informed services to complement the more traditional approaches to employment support. The services provided or funded by DWP/JobCentre Plus do not always provide people facing mental health problems with the support they need to successfully gain employment. For example, a high proportion of those on Employment and Support Allowance report having suicidal feelings,<sup>6</sup> hence the need for more specialist services.

One of the objectives of the IAPT initiative is to increase the availability of talking therapies to people who are unable to work as a result of mental health problems. Employment advisers who work within IAPT ensure that there is integrated psychological treatment and employment support for individuals who require additional interventions based on their employment needs and, in particular, in addressing the emotional challenges of continuing in, starting or resuming work. The IPS approach to vocational rehabilitation is recommended in NICE guidance for psychosis and schizophrenia, and bipolar disorder.

When someone gains employment it makes a significant contribution to population health and leads to a reduction in health service usage, including reduced psychiatric bed usage.<sup>7</sup> One study found mental health service costs over a ten-year period were 50 per cent lower for people supported into regular employment through IPS than among other groups.<sup>8</sup>

Clinical commissioning groups (CCGs) and local authorities are in a good position, especially if they jointly commission mental health services, to understand what support is needed for their population and to commission this in an integrated way. It is key that employment support is integrated and embedded into clinical care. This will increasingly be the case with the development of integrated care systems.

The table on page 5 sets out what a 'graded offer' that is designed to meet the likely range of need might look like across a local system.\*

\*The NHS Long Term Plan talks about three levels: i) System – an ICS covering a population of 1–3 million that sets strategy and delivers large-scale transformation; ii) Place – a town within the ICS often (but not always) co-terminous with the local authority covering a population of 250–500,000 where the majority of service change and delivery will take place; iii) Neighbourhood – an area typically covering a population of 30–50,000 covered by a primary care network.

## A graded offer

Some people with mental health problems can gain and retain employment with no more than the universal JobCentre Plus offers for people claiming welfare benefits. However, some may require more intensive and specialist support than these can provide. Therefore, in any area a 'graded offer' of possibilities is required.

Evidence indicates that the most effective way of helping people with mental health problems to gain, retain and sustain appropriate employment requires:

- integration of clinical care and employment support and providing these in parallel
- the input of clinicians, social prescribers and employment specialists, which are central to the process of enabling people with mental health problems to gain and retain employment.



# What a graded offer might look like across a system

## Conversations about employment with clinicians

Health professionals are not employment specialists, but they have an important role in actively promoting the benefits of appropriate employment:

- disavowing commonly held, but inaccurate assumptions (for example, 'employment is bad for your health' and 'you have to be fully well before you can work')
- assisting people to work out ways of managing their condition in a work context
- referring people to appropriate employment support services
- working closely with the employment specialists within these services.

## The 4Rs for health professionals

**Raise** the issue of employment with people who have a mental health condition and convey a positive view about the person's skills and ability to work.

**Respond** positively to people's questions about work.

**Recommend** that the right kind of work is good for mental and physical health, explain the harmful effects of unemployment and encourage the person to think about what they might be able to do.

**Refer** the person who wishes to explore the possibility of work to a service that can help them in their journey to work.

Ref: Perkins et al (2009), Realising Ambitions: Better Employment Support for People with a Mental Health Condition, DWP

## Employment support offered by JobCentre Plus and their partners

A range of universal offers for anyone receiving welfare benefits including people with **mental health problems who do not want or need more specialist help**.

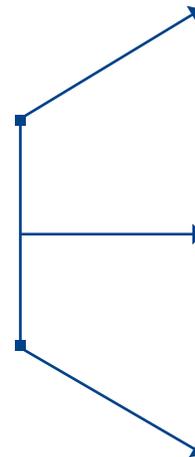
## Employment support in psychological services in primary care (IAPT)

For people with **common mental health problems** who require additional specialist support than can be offered by JobCentre Plus.

## Individual placement and support service

For people with **serious mental health problems** who are on the **Serious Mental Illness (SMI) register or in contact with secondary mental health services** (as recommended by NICE).

Employment support provided at a 'place' (ICP) level and integrated with other treatment and social care the person is receiving.



## Conclusion

The economic and social impact of COVID-19 will be with us for a very long time. With that in mind, the evidence clearly shows that for people with mental health problems, the integration of clinical and employment support, and providing these in parallel, is critical.

The full implementation of the NHS Long Term Plan's commitment to increasing access to specialist employment advice for people with mental health problems, can lead to improved recovery, improved wellbeing and improved social cohesion at a neighbourhood level. It will be important to ensure that each 'place' has employment advisers within IAPT and an IPS service if the full benefits are to be realised.

## References

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This briefing was written by Peter Molyneux, Rachel Perkins and Miles Rinaldi. The authors are grateful to the members of the IPS Grow Expert Forum PCN Working Group for their contribution to the development of the briefing.

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