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Feature Article

Outcomes of an individual placement and support programme incorporating principles of the collaborative recovery model

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***Introduction*:** *Engaging in employment enhances mental health recovery and is therefore of central focus for many occupational therapists working in mental health. Individual placement and support (IPS) is an evidence-based, supported employment model specifically designed for individuals with severe mental illness who have the desire to work. Despite strong support for IPS in Australia, implementation challenges have been encountered. This study evaluates outcomes achieved by participants engaged with WorkWell, an IPS programme delivered by a large Australian non-government organisation. In addition to following IPS principles, WorkWell was informed by principles of the collaborative recovery model (CRM).*

***Method*:** *De-identified outcomes data for each participant were analysed by an independent research team. The proportion of individuals engaged with the programme who achieved a competitive employment placement was calculated. Average employment duration and weekly wages were calculated for individuals who achieved a competitive employment placement. Finally, the proportion of individuals who achieved some form of vocationally relevant outcome was calculated.*

***Results*:** *Ninety-seven participants were engaged with the programme. Forty-eight participants (49.5%) gained a competitive employment position. Average employment duration was 151 days (21.6 weeks) and average weekly wage was $478. Overall, 62 participants (63.9%) were supported to achieve some kind of vocationally relevant outcome (e.g. competitive employment, education, work trial or voluntary work) as a result of their engagement with the programme.*

***Conclusion*:** *While the addition of CRM principles appears to have supported positive outcomes for participants, especially in terms of employment duration, results for employment placement rates were lower than expected. While the employment placement rate compares favourably to results from the international literature and numerous programmes in Australia, more development is required to increase the proportion of individuals who are supported into competitive employment positions. Future research should focus on the specific elements of CRM that most contribute to enhancing IPS processes.*

KEY WORDS *mood disorders, psychiatric rehabilitation, schizophrenia, supported employment.*

Introduction

Gaining employment is an identified goal for many individuals living with mental illness, but employment rates remain unacceptably low (Waghorn *et al.*, 2012). Additionally, engaging in employment is an important factor linked to mental health recovery. Therefore, finding ways to best support individuals with mental illness to gain and maintain employment is a key focus for many occupational therapists (Jarman, Hancock & Scanlan, 2016; Machingura & Lloyd, 2017).

Individual placement and support (IPS) is a model of supported employment specifically designed for individuals living with serious mental illness (Bond, Drake & Becker, 2012). It is based on eight core principles: '(i) eligibility based on client choice, (ii) focus on competitive employment, (iii) integration of mental health and

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employment services, (iv) attention to client preferences, (v) work incentives planning, (vi) rapid job search, (vii) systematic job development and (viii) individualised job supports' (Bond *et al*., 2012p. 32). International evidence has demonstrated that IPS is superior to other approaches to vocational rehabilitation in terms of achieving placement into competitive employment positions for individuals with serious mental illness who have a desire to work (Bond *et al*., 2012; Modini *et al*., 2016).

Evidence for IPS is well-recognised within the Australian policy context (Department of Social Services, 2014; King *et al*., 2006; Waghorn, Collister, Killackey & Sherring, 2007) and occupational therapists have frequently been involved in the development and implementation of IPS programmes (Machingura & Lloyd, 2017). However, numerous barriers to implementation in the Australian context have been identified (King *et al*., 2006; Stirling, Higgins & Petrakis, 2018; Waghorn *et al*., 2007). Central to these challenges are the difficulties associated with trying to achieve fidelity to the third principle of IPS: integration of mental health and employment services (Chang, Douglas, Scanlan & Still, 2016; King *et al*., 2006; Stirling *et al*., 2018).

In Australia, mental health services are typically funded by state governments, whereas employment services are funded by the federal government. This funding approach has meant that many of the IPS projects that have been established in Australia are delivered under cross-sector partnership agreements whereby employment specialists from federally funded employment services are embedded into state-funded mental health services. Differences in physical location, workplace cultures, processes and policies between the employment and mental health services mean that establishing and maintaining services under such agreements is challenging (King *et al*., 2006; Stirling *et al*., 2018; Waghorn *et al*., 2007).

In an attempt to overcome some of the challenges associated with 'cross-sector partnership agreement' approaches to IPS, other variants of the IPS approach have been developed in Australia. One of these variants is the enhanced intersectoral links (EIL) approach (Chang *et al*., 2016; Sherring, Robson, Morris, Frost & Tirupati, 2010). The EIL approach focuses on establishing and maintaining strong relationships between employment and mental health services, but does not require formal service-level agreements or physical colocation of employment service staff within the premises of the mental health service. Other IPS implementation projects in Australia have not taken a cross-sector agreement approach, but rather, have provided both mental health and employment support through staff employed by the same programme (Killackey, Jackson & McGorry, 2008; Killackey *et al*., 2018), or have adopted other key principles of IPS without including mental health and employment service integration (Parlettaa & Waghorn, 2016).

In the context of IPS programmes, two outcomes are essential: employment placement rate (i.e. proportion of people being placed into a job) and employment duration (i.e. how long individuals remain in employment). While employment placement rates have been reported in all studies, employment duration has been reported less frequently. This is notable as supporting sustained employment has been identified as a continuing challenge in IPS programmes (Kern *et al*., 2018).

International studies have identified that IPS programmes implemented outside of the United States of America (US) have tended to achieve lower employment placement rates than those in the US (Bond *et al*., 2012; Modini *et al*., 2016). Bond *et al*. 2012 reported that an average of 62% of participants in IPS programmes in the US achieved competitive employment, whereas this was 47% for programmes outside of the US. In terms of employment duration, the average annualised employment duration was 20.0 weeks (Bond *et al*. 2012).

Cross-sector partnership IPS programmes in Australia have achieved variable outcomes in terms of employment placement rate. One programme achieved a 57% employment placement rate (Morris, Waghorn, Robson, Moore & Edwards, 2014), whereas others have been less successful, achieving between 28% and 43% employment placement rates (Waghorn, Dias, Gladman & Harris, 2015; Waghorn, Dias, Gladman, Harris & Saha, 2014; Williams, Lloyd, Waghorn & Machingura, 2015). Two of these studies reported on employment duration. Of the 54 participants who gained employment in the Morris *et al*. (2014) study, study, 43 (80%) achieved a 13-week employment outcome and 31 (57%) went on to achieve a 26-week employment outcome. Williams *et al*. (2015) reported on 13-week outcomes only, with 13 of 22 individuals who gained employment (59%) achieving a 13-week outcome.

Research into alternative IPS implementation approaches in Australia has typically demonstrated comparable or stronger outcomes than cross-sector partnership agreement approaches to IPS. Employment placement rates from these programmes have ranged from 63% to 77% (Chang *et al*., 2016; Killackey *et al*., 2008, 2018; Parlettaa & Waghorn, 2016; Sherring *et al*., 2010). Four of these studies reported on employment duration. Parlettaa and Waghorn (2016) reported that 17 of 46 participants (37%) achieved a 26-week employment outcome. Killackey *et al*. (2008), Chang *et al*. (2016) and Sherring *et al*. (2010) reported mean employment duration as 8.6 weeks (SD = 9.2 weeks), 10.9 weeks (SD = 10.4 weeks) and 34.1 weeks (SD = 27.1 weeks) respectively.

One large non-government mental health service in New South Wales implemented an IPS programme where both mental health and employment support were provided by staff from within the organisation. This programme was implemented in response to the acknowledged challenges of cross-sector partnership agreement approaches to IPS, and because of the organisation's strong commitment to supporting

employment outcomes for consumers. The programme also included the integration of principles from the collaborative recovery model (CRM) (Oades, Deane & Crowe, 2017; Oades *et al*., 2005), which is described further in the methods section. It was hypothesised that combining the collaborative, recovery-oriented, consumer-directed CRM approach with IPS would enhance employment outcomes, both in terms of gaining and sustaining employment. Using the CRM approach also provided specific tools and resources that supported the local implementation of IPS. These included strategies for strengths and values exploration, explicit guidance on the coaching stance and tools for collaborative goal setting. While fidelity instruments and other resources (Becker, Swanson, Reese, Bond & McLeaman, 2015; Becker *et al*., 2008; Waghorn & Linnott, 2011) specify what should be done in IPS programmes, there has been less detailed guidance on how this should be done.

This research project was established to: (i) examine the outcomes achieved by individuals accessing this programme; (ii) explore the relationship between demographic and programme-related variables and employment outcomes; and (iii) describe the specific strategies used to integrate IPS and CRM principles into practice in the context of this specific programme.

Method

This study was approved by The University of Sydney Human Research Ethics Committee (approval number: 2017/130).

Support model

The IPS approach adopted by the service was named 'WorkWell' and integrated CRM approaches with IPS principles. The CRM is a conceptual model and coaching/training resource emphasising hope, growth and personal meaning for increasing wellbeing and living well (Oades *et al*., 2005, 2017). CRM provides a model that is underpinned by two guiding principles: (i) recovery as an individual process and (ii) collaboration and autonomy support. The model draws on four collaborative central processes: (i) identification of strengths and values, (ii) visioning and goal setting, (iii) action and monitoring and (iv) change enhancement. Collaborative coaching relationships are critical to the CRM. All staff employed by the non-government organisation, including staff in the WorkWell programme, received two days of initial training in CRM. The CRM principles also underpin the approach to professional development and supervision of staff within the organisation. Supervision takes the form of professional coaching and occurs fortnightly, allowing staff ongoing reflection and practice as both coach (in interactions with consumers) and coachee (during supervision).

Staff employed in WorkWell were therefore guided by the principles of both IPS and CRM. IPS principles directed the focus of work, e.g. competitive employment goals, eligibility based on client choice, rapid job search, time-unlimited support and systematic job development. CRM supported the process of working with individuals, with initial discussions linking people's values and strengths with their employment goals, employment coaches holding extreme hope around gaining employment, and framing employment challenges as competing priorities rather than deficits to be overcome. In the WorkWell approach, identifying employment preferences, searching for and gaining employment, was understood to be a 'job' in itself. The goal was to build participant capacity for job searching so participants could return to this as required over their lifetime. Job seeking was therefore a shared task and responsibilities were negotiated between the coach and participant, with capacity for seeking and gaining employment developed through explicit teaching, building self-awareness, opportunities to practice and fostering confidence for the worker role through carefully calibrated support. While CRM practices are consistent with general IPS principles they provide additional guidance on the way to collaborate and a clear attitudinal stance. Table 1 details how some of the fidelity elements of IPS were implemented through the use of the CRM approach.

In operating outside the government-regulated Disability Employment Services scheme that dominates Australian disability employment support, WorkWell was not hampered by rigid reporting and targets that have been criticised for restricting longer term supports and prioritising certain targets (e.g. 13-week employment outcomes) over others, such as client preferences and long-term maintenance of employment (Stirling *et al*., 2018; Waghorn *et al*., 2007). This allowed for increased latitude for job coaches to work in highly individualised ways as jobseekers moved from considering employment right through to attaining and maintaining employment. Operating outside the federally funded employment service system meant that wage subsidies were not available to prospective employers and brokerage funds needed to be provided from the organisation's existing resources.

The fidelity of WorkWell's provision of employment support was independently examined against the IPS principles using the Australian and New Zealand version of the 25-item Supported Employment Fidelity Scale (known as the IPS-25) (Becker *et al*., 2008, 2015; Waghorn & Linnott, 2011). This scale is used to assign an overall fidelity rating on a scale of 25–125. Scores ≤73 are considered 'Not supported employment'; scores between 74 and 99 are 'Fair' fidelity; 100–114 'High' fidelity and 115–125 'Exemplary high' fidelity (Becker *et al*., 2008). Three annual reviews have reported fair to

TABLE 1: *Overview of how the collaborative recovery model (CRM) approach facilitated the implementation of individual placement and support (IPS) in the WorkWell programme*

Phases	IPS fidelity items†	How IPS principles are enacted, and informed by CRM principles, in WorkWell
First contact	Zero exclusion (9)	Extreme hope: job coach believes they will be able to support each job seeker into employment and conveys that message to job seeker Strengths focus and human rights-based approach
Exploration	Work incentives planning (12) Ongoing vocational assessment (14)	Strengths, values, lifestyle and interests exploration Collaborating to complete 'Find your niche' worksheet
Goal setting	Ongoing vocational assessment (14)	Collaborative employment focussed goal setting – small/large, short- and long-term goals – employment is central focus but may include broader or related goals Use of 'Career profile' to collaboratively document employment goals, employment history, health and finance management Collaborative completion of 'Employment map' to distil steps, strengths and barriers to attaining dream job
Goal setting/ Job search	Disclosure counselling (13)	Referred to as 'managing your personal information' Based on informed choice: two worksheets used to support informed decision-making Job searching strategy influenced by disclosure choice Consumers can change preference at any point Topic is discussed after every job searching activity
Job search	Rapid search (15) Individualised job search (16) Job development (17) Job development with specific employers (18)	Coaching approach: Job searching as collaborative effort – job seeker works alongside job coach in all activities (building skills and capacity for job searching in the future) Less emphasis on job development with specific employers – as job match for individual job seeker and capacity building through coaching both seen as critical
Support	Individualised follow along support (22) Ongoing support (23) Support provided in community (24) Assertive outreach as necessary (25)	Flexible support with a focus on building rapport and skills for job seeking. Increased understanding between job seeker and coach may facilitate goal shifting or a change in the type of employment sought Venue for support negotiated with job seeker – place of greatest comfort If job seeker leaves a job because it is not suitable or seeking to upgrade, support provided for further job search and transition Respect job seekers' choice to stop participating in programme

†Fidelity items listed are related to active supports provided to the job seeker. Numbers in parentheses refer to item numbers on the Supported Employment Fidelity Scale (IPS-25) (Becker et al., 2008; Waghorn & Linnott, 2011).

high fidelity scores for the WorkWell programme (scored from 98/125 to 104/125).

Data collection and analysis

The first referrals for the programme at the first site were received at the end of May 2015, with first meetings commencing in August 2015. Two additional sites commenced receiving referrals in March 2016. Data collection was closed in June 2017.

A range of data was collected for each individual engaged with the programme, including demographic and diagnostic information, date of referral, date of commencement, date of employment placement, type of employment, date of employment termination and information about other vocationally relevant outcomes (such as volunteer work, work trials and study). All data were de-identified and provided to the university-based research team for analysis.

Descriptive statistics were calculated for number of participants achieving competitive employment placements (at least one day of paid employment in a competitive position), as well as average employment duration. Employment duration was calculated based on number of calendar days from the date each

individual commenced in employment to the date the job finished or the individual's last contact with the service prior to close of data collection. For those individuals who had more than one employment placement, duration of employment was based on number of days worked in all jobs.

Analyses were also completed to determine if any demographic or diagnostic factors were associated with greater likelihood of achieving an employment outcome or longer overall employment duration. Chi-square analyses were used for employment outcomes and independent samples *t*-tests were used for employment duration.

Consistent with analyses reported by Chang *et al*. (2016), correlations between time from referral to commencement in the programme, time from commencement to first job placement, time from referral to first job placement and employment duration were also calculated. This allowed for the exploration of whether prompt action on referrals and rapid job placement was related to sustained job tenure.

Proportion of participants achieving other vocationally relevant outcomes was also calculated.

Results

A total of 97 participants were engaged with the programme. Participants ranged in age from 20 to 68 years, with a mean age of 43 years (standard deviation 10.5 years). Other demographic characteristics are presented in Table 2.

Competitive employment

A total of 48 participants (49.5%) gained a competitive employment position as a result of their engagement with the programme. Nine participants worked in two

TABLE 2: *Demographic information and outcomes data*

	n	%	Proportion achieving employment outcome	Between-groups analyses†	Employment duration, mean (*SD*)	Between-groups analyses†
Gender						
Male	46	47.4%	19/46 (41.3%)	$\chi^2_{(1)} = 2.34$, $P = 0.13$	165 days (144 days)	$t_{(45)} = 0.46$, $P = 0.66$
Female	51	52.6%	29/51 (56.9%)		143 days (169 days)	
Diagnosis‡						
Psychotic disorders	22	22.7%	7/22 (31.8%)	$\chi^2_{(1)} = 3.55$, $P = 0.06$	211 days (169 days)	$t_{(45)} = -1.08$, $P = 0.29$
Bipolar affective disorder	20	20.6%	15/20 (75.0%)	$\chi^2_{(1)} = 6.56$, $P = 0.01$	128 days (94 days)	$t_{(45)} = 0.67$, $P = 0.50$
Major depression, dysthymia	43	44.3%	22/43 (51.2%)	$\chi^2_{(1)} = 0.09$, $P = 0.77$	180 days (207 days)	$t_{(28)} = -1.04$, $P = 0.31$§
Anxiety disorders	50	51.5%	23/50 (46.0%)	$\chi^2_{(1)} = 0.50$, $P = 0.48$	156 days (195 days)	$t_{(45)} = -0.19$, $P = 0.85$
Personality disorders	2	2.1%	2/2 (100.0%)	$\chi^2_{(1)} = 2.09$, $P = 0.15$	416 days (567 days)	$t_{(1)} = -0.69$, $P = 0.62$§
Substance dependence/ misuse	2	2.1%	1/2 (50.0%)	$\chi^2_{(1)} = 0.00$, $P = 0.99$	8 days	$t_{(45)} = 0.91$, $P = 0.37$
Other psychiatric disorders	1	1.0%	0/1 (0.0%)	$\chi^2_{(1)} = 0.99$, $P = 0.32$	n/a	n/a
Other non-psychiatric conditions	6	6.2%	4/6 (66.7%)	$\chi^2_{(1)} = 0.76$, $P = 0.39$	69 days (92 days)	$t_{(45)} = 1.09$, $P = 0.14$

†For gender, analysis groups were male versus female; for diagnosis, analysis groups were presence or absence of particular diagnostic category.

‡Participants could have more than one diagnosis listed, so percentages do not add up to 100%.

§Correction made for non-equality of means.

TABLE 3: *Detailed outcome information*

Outcome area	Outcomes achieved
Individuals attaining competitive employment position	48/97 (49.5%)
Mean hourly wage	$29.16 (*SD* $16.40)
Median hourly wage	$25.00 (IQR: $20.00 to $34.07)
Mean weekly income	$477.97 (*SD* $375.30)
Median weekly income	$387.50 (IQR: $188.00 to $715.95)
Average duration of employment (each position)	124 days (17.7 weeks)
Average duration of employment (all positions)	151 days (21.6 weeks)
Individuals attaining 13 weeks of continuous employment†	30/97 (30.9%)
Proportion of individuals who gained employment who achieved 13 weeks of continuous employment†	30/48 (62.5%)
Individuals attaining 26 weeks of continuous employment†	14/97 (14.4%)
Proportion of individuals who gained employment who achieved 26 weeks of continuous employment†	14/48 (29.2%)
Individuals still working‡	29/48 (60.4%)

All dollar figures are Australian Dollars.
†Figure represents those individuals who achieved this employment outcome in a single position.
‡Based on individuals who were still working at the close of data collection or who were working at the date of last contact. Percentage based on those individual who gained competitive employment.

TABLE 4: *Descriptive statistics and Spearman's rank order correlations for duration of employment, days from referral to commencement, days from commencement to first job placement and days from referral to first job placement*

			Spearman's correlation (r_s)		
	n	Mean (*SD*)	R to C	C to J	R to J
Days from referral to commencement	97	84 days (70 days)	—		
Days from commencement to first job placement	48	81 days (63 days)	−0.08	—	
Days from referral to first job placement	48	169 days (96 days)	0.73***	0.56***	—
Total employment duration†	47	151 days (159 days)	−0.35*	−0.04	−0.37*

R to C = days from referral to commencement; C to J = days from commencement to first job placement; R to J = days from referral to first job placement.
*$P < 0.05$; **$P < 0.01$; ***$P < 0.001$.
†Employment duration could not be determined for one participant.

positions during their engagement with the programme (eight worked in two consecutive positions and one worked in two positions concurrently). Mean duration of employment (number of days employed in all positions) was 151 days or 21.6 weeks (standard deviation: 159 days). Other characteristics of jobs and outcomes attained are listed in Table 3.

Participants were placed into a total of 57 positions. These positions were very diverse, including positions in the service sector, teaching and tutoring, information technology roles and disability support work. Position titles are listed in Table S1.

Between-group analyses for attaining an employment outcome or employment duration revealed few significant results (see Table 2). No significant differences were found between men and women. In terms of diagnosis, those individuals with a diagnosis of bipolar disorder were more likely to gain an employment outcome (15/20: 75.0%) than those without a diagnosis of bipolar (33/77: 42.9%; $\chi^2_{(1)} = 6.56$, $P = 0.01$). There was also a trend towards those individuals with a diagnosis of a psychotic disorder to be less likely to gain an employment outcome (7/22: 31.8%) than those without a diagnosis of a psychotic disorder (41/75: 54.7%; $\chi^2_{(1)} = 3.55$,

$P = 0.06$). There were no differences in terms of diagnosis and employment duration.

Correlations between time from referral to commencement, time from commencement to first job placement, time from referral to first job placement and employment duration are presented in Table 4. Total employment duration had a significant negative correlation with both time from referral to commencement and time from referral to first job placement. This means that those individuals who were commenced in the programme promptly and those who had shorter durations from referral to first job placement were more likely to achieve more sustainable job placements. Time from commencement to first job placement was not correlated with employment duration.

Other vocationally relevant outcomes

While competitive employment was the goal for all participants, some identified that education or training was required to achieve their preferred job. Consistent with the CRM idea that participants should be supported to pursue their goals and dreams, they were also supported to engage in relevant training or education through WorkWell. A total of 11 individuals were supported to undertake an educational programme during their engagement with the programme. Eight participants enrolled in courses as their initial outcome from engagement with WorkWell. Of these, one went on to gain a competitive position for 32 weeks and one completed a seven-week work trial. At the end of data collection, none of these eight individuals were in competitive employment. Additionally, two participants undertook courses while they were working and one undertook a course following a short competitive job placement and then gained another competitive job placement. All three of these participants remained employed at last contact/end of data collection.

A total of eight participants undertook voluntary work or completed work trials. Of these, none went on to gain a competitive employment placement.

When considering all vocationally relevant outcomes, a total of 62 participants (63.9%) achieved some kind of outcome as a result of their engagement with the programme.

Discussion

This study was established to explore the outcomes achieved by individuals accessing an employment service based on IPS and CRM principles. Almost half of all participants ($n = 48$, 49.5%) gained a competitive employment position. Average employment duration was 151 days (21.6 weeks). Competitive job placement results compare favourably with average job placement outcomes achieved in IPS studies completed outside of the United States (an average of 47%) (Bond *et al*., 2012) and Australian-based studies using cross-sector partnership agreement models of IPS (ranging from 28% to 57%) (Morris *et al*., 2014; Waghorn *et al*., 2014, 2015; Williams *et al*., 2015). However, these results are generally less favourable when compared with employment placement rates achieved in other Australian IPS-based programmes (Chang *et al*., 2016; Killackey *et al*., 2008, 2018; Parlettaa & Waghorn, 2016; Sherring *et al*., 2010). In terms of average employment duration, the result from this study (151 days, 21.6 weeks) is similar to results reported in the international literature (Bond *et al*. 2012) and is higher than the results reported from the majority of cross-sector partnership and alternative IPS-based approaches in Australia. The IPS-related design of the WorkWell programme is most similar to that reported by Killackey *et al*. (2008). While the Killackey *et al*. (2008) study reported a higher employment placement rate than in this study (65.0% cf. 49.5%), the average employment duration was much lower (8.6 weeks cf. 21.6 weeks).

Results in terms of pay were also promising. The average hourly wage (mean = $29.15; median = $25.00) was substantially higher than the national minimum wage ($17.70) (Fair Work Commission, 2016). However, the average weekly income (mean = $477.97; median = $387.50) was substantially lower than the average Australian weekly earnings of $1177.70 (Australian Bureau of Statistics, 2017), reflecting that almost all individuals were employed part-time.

On reflection, two specific aspects of the WorkWell programme appear to have supported positive outcomes. First, funding the job coach from within existing resources meant that integration of employment and mental health support was far easier to achieve than it has been in many other Australian programmes (King *et al*., 2006; Stirling *et al*., 2018; Waghorn *et al*., 2007). Second was the integration of CRM principles. CRM provided tools, resources and an attitudinal stance that enabled the implementation of IPS principles in a powerful way (see description in Table 1). The deeply collaborative approach enabled job coaches to gain a detailed understanding of participants' strengths and desires and worksheets guided discussions on optimal job options. This process enabled job search to be directed towards jobs that were optimally aligned to individuals' strengths and goals. This is one of the factors likely to be related to the positive results seen in terms of employment duration in this study as well as the large proportion (29/48, 60.4%) of individuals who continued working at the close of data collection or at last contact with the programme. The individualised approach to job matching is also reflected in the diverse range of positions that participants were successful in attaining (see Table S1).

However, some aspects of the WorkWell programme that were influenced by the CRM approach did lead to lower scores for some of the fidelity items in the on the IPS-25 (Becker *et al*., 2008; Waghorn & Linnott, 2011).

The most significant of these aspects were in items related to rapid job search for participants. The process of exploration of participants' goals and desires meant that, in some cases, priorities changed from 'getting a job' to some other vocationally relevant outcome. While some research highlights the potential value of other outcomes, most especially engagement in education to support sustainable and meaningful long-term employment outcomes (e.g. Ennals, Fossey, Harvey & Killackey, 2014; Robson, Waghorn, Sherring & Morris, 2010), these elements of the WorkWell programme should be further explored. Fifteen participants (15.5%) were supported to engage in a work trial, voluntary work or education as their first 'outcome'. Notably only one of these individuals went on to gain a competitive employment placement during the study. Given that all of these activities were designed to support gaining competitive employment, these results could indicate that delays in the job search process, even those intended to support better outcomes, may be unhelpful. Alternatively, these results may reflect that it may take longer to achieve employment placements for individuals who identify that they wish to undertake other 'preparatory' actions prior to seeking employment. If this were the case, then the data collection period in this study may not have been long enough to capture these outcomes.

The IPS literature has placed strong emphasis on fidelity; however, more recent research has suggested that fidelity alone does not always explain positive outcomes. Findings from a recent systematic review and meta-analysis (Lockett, Waghorn, Kydd & Chant, 2016) suggest that while good fidelity is a prerequisite for positive outcomes, it is not a guarantee of success. In the meta-analysis, no programmes with low fidelity achieved employment placement rates higher than 44%. However, those programmes with good fidelity had variable outcomes in terms of overall employment placement: some very good and some poor. This suggests that other elements apart from fidelity have an impact on employment outcomes. Contextual factors, such as the way health and social support systems are designed and delivered, can have a substantial influence on the effectiveness of interventions (Rubin *et al*., 2016). These factors, as has been seen in the implementation of IPS in Australia, create a tension between achieving fidelity to the intervention approach while at the same time making adaptations to suit the local context.

One additional aspect that may influence outcomes in the context of IPS might be the relationship established between the job coach and the participant. The importance of working alliance has been highlighted in a range of mental health service contexts (Howgego, Yellowlees, Owen, Meldrum & Dark, 2003; Schweizer *et al*., 2018) and has recently been explored in the context of IPS (Topor & Ljungberg, 2016). Topor and Ljungberg (2016) explored perceptions of IPS participants about their relationships with their job coach. Consistent with literature from other areas, participants reported that the relationship with the job coach was pivotal to feeling empowered and confident in the job search process. While the authors suggested that IPS principles supported the development of positive relationships between participants and job coaches (Topor & Ljungberg, 2016), the addition of principles from relationship-based models such as CRM may further enhance the quality of the relationship and may support better IPS outcomes.

Several other aspects of the results also warrant further exploration. These include: (i) the observed relationship between time from referral to commencement, time from referral to first job placement and employment duration; (ii) the somewhat lower employment placement rate achieved in this study in comparison to other non-cross-sector partnership approaches to IPS in Australia; and (iii) outcomes in terms of job tenure.

The relationships between time from referral to commencement and time from referral to first job placement and employment duration are similar to findings reported in a previous study (Chang *et al*., 2016). This suggests that prompt action on referrals to engage consumers may support job tenure. The specific mechanisms behind this relationship are unclear, but are likely to be related to acting on consumers' motivation to work promptly and support the concept of rapid job search, as well as rapid engagement with the programme after referral. An alternative hypothesis, that those individuals who are 'easier' to place will also find it easier to sustain their employment, is not supported by these results. If this was the case, then it would be expected that there would be a strong relationship between time from commencement to first job placement (a proxy for 'easiness' of job placement) and total employment duration. This was not the case in this study. The fact that this is the second study to demonstrate these relationships, suggests that further exploration is warranted.

While the employment placement rate of 49.5% compares favourably with results for non-US IPS trials and most results reported from cross-sector partnership agreement IPS programmes in Australia, this result is lower than employment placement rates for non-cross-sector partnership IPS programmes in Australia. This may be accounted for in part by some participants achieving other vocationally relevant outcomes – work trials, voluntary work and education – that were also considered acceptable in WorkWell. An additional aspect of the programme that may have contributed to this lower than expected outcome may have been the strong focus on seeking employment positions that were very well-matched to individuals' job preferences. While this is a positive aspect of the job search process, and is generally related to better job retention (Kukla & Bond, 2012), the job search focus may have been too

narrow. Taking a broader view of 'potentially suitable' positions from the outset may support better employment placement outcomes and offer a wider range of potential options to pursue if individuals are unsuccessful in securing their preferred role.

Finally, while results for total employment duration (average of 21.6 weeks) were in line with international results and exceeded results reported from some Australian studies (e.g. Chang *et al*., 2016; Killackey *et al*., 2008; Williams *et al*., 2015), these results were still lower than would be hoped for. In considering this result, it should be noted that that the majority (29/48, 60.4%) of people who had gained employment were still working at the end of data collection or at their last contact with the service. This means that the actual average total employment duration is likely to be higher than the reported 21.6 weeks. Despite this, results do suggest that job retention issues for individuals with mental illness remains a substantial issue and requires further exploration in terms of effective strategies to support job retention. Additionally, the large standard deviation for mean employment duration reported in this study and others (e.g. Chang *et al*., 2016; Killackey *et al*., 2008; Sherring *et al*., 2010) highlights the wide variability in employment duration. This suggests that for some people retaining their employment is easier than for others. It may be useful to further explore the experiences of those individuals who do retain their positions long term to uncover those personal strategies and job characteristics that may support job retention (Jarman *et al*., 2016).

Study considerations

As a relatively small, retrospective analysis of outcomes data from a single organisation, this study has a number of limitations that should be taken into consideration. As there was no comparison group, it is not possible to definitively conclude that the outcomes achieved are a result of the IPS and CRM approach adopted. While it is unlikely given the international literature on topic, it could be that individuals in this programme may have achieved these outcomes even without this programme. Secondly, there was only a limited amount of data for each participant, so detailed exploration around the various reasons for the outcomes achieved was not possible. However, despite these limitations, this study does add valuable information in terms of how CRM can help to implement the principles of IPS in practice and provides some evidence for the usefulness of the approach to supporting individuals with mental illness to achieve competitive employment outcomes.

Conclusions

This study has described outcomes associated with an IPS programme implemented in a large non-government mental health service in New South Wales. A unique feature of this programme was the integration of principles from the CRM as well as the provision of both employment support and mental health support from within the same service. This is a relatively unusual approach to IPS in Australia, which is typically implemented via cross-sector partnership models. The findings from this study provide guidance to occupational therapists and others who are involved in strategic developments to support enhanced employment outcomes for individuals living with serious mental illness, as well as therapists working directly to support individuals to gain and maintain employment. To develop a deeper understanding of the strengths and challenges of this approach to the delivery of IPS, future research should explore: (i) a more detailed analysis of how CRM principles can support the IPS process; (ii) how employment placement rates can be enhanced in the combined CRM/IPS approach; (iii) the contribution of the relationship between job coaches and participants to positive employment outcomes; (iv) the mechanisms behind the relationships between time from referral to commence and first job placement and total employment duration; and (v) strategies to support enhanced job tenure among individuals with mental illness.

Key points for occupational therapy

- This model of IPS and CRM appears to support positive employment outcomes, in particular sustaining employment beyond 13 weeks.
- CRM provides tools and resources to assist with the operationalisation of principles of IPS.
- Integrating CRM principles into employment support programmes may support optimal outcomes.

Declaration of authorship

JNS and NH conceived the analysis approach used in this study. JNS and NH completed the analyses. KF and PE designed and described the IPS support model evaluated in this research project. JNS drafted the manuscript and all authors contributed to the critical review and revision of the manuscript. KF and PE were not involved in the interpretation of results.

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Supporting Information

Additional supporting information may be found online in the Supporting Information section at the end of the article:

Table S1. Position titles of employment positions gained by participants (N = 57)