

Employment Works

Report on IPS Supported Employment in Tennessee

May 2024



TN Department of Mental Health & Substance Abuse Services





A Letter from the Commissioner

Dear friends, colleagues, and fellow Tennesseans,

For so long for those living with serious mental illness, the thought of work was rarely a consideration let alone a question posed to the individual. As people became more and more integrated into supports in their community as opposed to spending long periods in institutions, employment conversations started to happen. **People living with mental illness**, as with persons of all abilities, have desires and goals around employment. They gain self-worth and find fulfillment in work. They experience independence through earning a wage.

For the last decade plus, Tennessee has been a leader in not only providing supported employment opportunities but also spreading the evidence-based model of Individual Placement and Support (IPS). Since inception in 2013, IPS supported employment providers in our state have worked with more than 10,000 Tennesseans with life-changing results. In this report, you will learn how IPS is different in many ways, but the factor that impresses most is the concept of zero exclusion. Oftentimes, employment services are used as an incentive to draw someone into compliance with treatment, but with IPS, if a person expresses a desire to work, they are immediately eligible for services. With IPS, employment is an adjunct to treatment and integrated with other services rather than a reward for compliance.

This work happens with the support and partnership of so many people and organizations at so many levels. At the state government level, our partners at the Department of Human Services Division of Vocational Rehabilitation are essential. Their federal funding source acts as a supplement and a multiplier for state dollars. In recent years, we have worked together for a roughly four to one leverage which has nearly doubled our capacity to provide IPS services in Tennessee.

It is our goal that, after reading this report, you will have a greater understanding of IPS, learn how Tennessee is a leader in this important field, and value the investment our state is making to ensure that people of ALL abilities can find gainful employment and fully contribute to and participate in their communities.

Have a blessed day,

Marie Willes

Marie Williams, LCSW

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Individual Placement and Support

Overview

Tennessee's Individual Placement and Support (IPS) community providers assist people with mental health and or substance use conditions to get jobs in areas of their choosing. Tennessee's IPS projects provide a full range of employment services and supports to assist people with serious mental illnesses (e.g., schizophrenia spectrum disorder, bipolar,

depression) to achieve competitive, integrated, and steady employment. IPS services emphasize a rapid search for competitive jobs consistent with the individual's goals, interests, and experience and are available to anyone who wants to work regardless of diagnosis, past work history, or assessment of work readiness.

IPS is an evidence-based practice that helps people with mental health conditions get and keep competitive jobs matching their preferences. In the disability employment field, competitive jobs are ones where employees make at least minimum wage, are paid similar wages for comparable roles; where employees are eligible for benefits like employees in similar roles; where employees work in jobs that anyone can apply for and not in jobs set aside for people with disabilities and jobs where employees have opportunity for advancement.

Practice Principles of IPS

Focus on Competitive Employment: *IPS agencies are committed to competitive employment as an attainable goal for people with behavioral health conditions. Mainstream education and specialized training may enhance career paths.*

Eligibility Based on Client Choice: *People are not excluded from IPS services based on readiness, diagnoses, symptoms, substance use history, psychiatric hospitalizations, homelessness, level of disability, or legal system involvement.*

Attention to Worker Preferences: Services are based on each person's preferences and choices, rather than provider staff judgments.

Rapid Job Search: *IPS programs use a rapid job search approach to help job seekers obtain jobs quickly, rather than providing lengthy pre-employment assessment, training, and counseling. If further education is part of a client's plan, IPS specialists assist in these activities as needed.*

Systematic Job Development: *Employment specialists* systematically visit employers, who are selected based on job seeker preferences, to learn about their business needs and hiring preferences.

Time-Unlimited and Individualized Support: *Job supports are individualized and continue for as long as each worker wants and needs the support.*

Integration of Rehabilitation and Mental Health Services: *IPS programs are closely integrated with mental health treatment teams.*

Personalized Benefits Counseling: *Employment specialists help people obtain personalized, understandable, and accurate information about their Social Security, Medicaid, and other government entitlements.* IPS differs from other types of supported employment because employment services and supports are **integrated within mental health treatment services**. IPS has been proven effective for people with different mental health diagnoses, educational levels, and prior work histories; long-term Social Security beneficiaries; young adults; older adults; people with justice system involvement; people with experiences of chronic homelessness; and people with co-occurring mental illness and substance use disorders. IPS is used in 26 US states and seven countries.

People living with serious mental illness **want to work.** IPS helps them **attain their goals.**



Studies show **60%** of people with SMI want to work, but only about **15%** are employed.

Worldwide evidence continues to accumulate rapidly on the effectiveness of IPS. **Twenty-eight** randomized controlled trials suggest that IPS is the most effective way to provide employment services for persons with serious mental illness. IPS is more effective than other vocational approaches in helping people with psychiatric disabilities to obtain and retain employment, increase income, enhance self-esteem, improve quality of life, and reduce symptoms. Over the last decade, several systematic reviews and meta-analyses have confirmed this basic finding. Summarizing the employment outcomes from these studies indicates that the average employment rate was 55 percent for IPS compared to 25 percent for the control groups.

Participants in IPS also had 33 percent fewer days to first job, four times as many weeks worked during follow-up, triple the earnings from employment, three times or more the number of working 20 hours/week. They reported greater job satisfaction and maintained employment four times longer during follow-up. Long-term studies show that half of all IPS participants become steady workers, maintaining employment for 10 years or longer. About 40 percent of IPS participants who obtain a job with help from IPS teams become steady workers and remain competitively employed a decade later. IPS is more effective than alternative vocational approaches, regardless of a variety of client background factors (e.g., ethnicity, gender, socioeconomic status).

Cost-Effectiveness of IPS

In state fiscal year 2022-2023, Tennessee's IPS teams expanded by more than 40 positions with new state funding and through partnership with the Department of Human Services – Division of Vocational Rehabilitation (DHS-VR). By utilizing the 4-to-1 match program DHS-VR has with their federal partners, Tennessee was able to use \$900,000 in state funding to leverage an additional \$3.2 million in federal dollars to expand services.



IPS is also cost-effective based on the outcomes of these programs. For every 100 people who enroll in an IPS program, 60 obtain employment which is more than double the success rate of any other employment program. In addition to providing income, employment also reduces the amount of mental health services that clients utilize, such as crisis services and psychiatric hospitalizations. Employment helps people become more self-reliant and less dependent upon government funded programs like SNAP, TANF, SSI, etc. Tennessee data regarding benefits at the beginning of a job search compared to benefits after the start of employment shows people still choose work even if they experience a reduction of a benefit.

People with serious mental illnesses continue to constitute the largest and fastest-growing group of beneficiaries in Social Security Disability programs. By helping people with mental illnesses gain employment, especially young adults experiencing the emergence of mental

illness symptoms, IPS can help forestall entry into the disability system and reduce Social Security expenditures. The data in figure 1 reflects one fiscal year FY23 (July 1, 2022 – June 30, 2023). The blue bar represents the benefits people reported at enrollment and the gold bar represents those whose benefits reduced because of going to work.



Figure 1: Reduced reliance on public benefits among TN IPS Clients in state fiscal year 2023.

IPS Success Story

Can the principles of IPS help someone after incarceration? Just ask Rodmetris Lockridge in Memphis, Tennessee. She engaged with the IPS team at CMI Healthcare services through a pilot project called NextGen and found meaningful employment.

"I drive for a non-medical transportation service. I just pick up patients from their appointment or drop them off to their appointments," Lockridge said. "I like the conversation with the customers. I have way more confidence in myself than I had a year ago."

"NextGen takes IPS to a new population, because in NextGen we are able to work with people who have been a part of the legal system. We are giving them a second chance to be reacclimated back into the community," said Tracie Pointer, Employment Specialist with CMI Healthcare Services. "We are giving them a chance to seek financial stability. Through getting a job, we are giving them a chance to get their family back together. We are giving them a chance to depend on themselves rather than others."

Re-entering the workforce is an essential part of re-entering the community for formerly incarcerated individuals, but supports can be slim and employers are often wary of someone with a record.

"For me it was hard because when folks know your background, they treat you differently. They only see your past. They don't see you," Lockridge said. "It hurts because they don't even try to get to know me, they just see my background. This happens a lot."

Now with steady employment, Lockridge is reclaiming the good things in life like meaningful relationships with her children. None of it is easy, but she says it's worth it.

"No matter what you go through, there is always a second chance," Lockridge said. "Most people say they want things, but they do not put forth the effort to go get it. It's all about the effort and trying. You have to try first."



IPS History in Tennessee

IPS in Tennessee started in 2013 and continues as a joint venture between the Department of Mental Health and Substance Abuse Services (TDMHSAS) and the Department of Human Services, Division of Vocational Rehabilitation (DHS/VR). In 2023, Tennessee celebrated 10 years of IPS services in this state, highlighting the growth and progress at the annual Wellness through Employment Conference. Below is a timeline of IPS in Tennessee. Tennessee began IPS in October 2013 with four pilot sites.

2013	IPS begins in Tennessee with four pilot sites: Frontier Health, Helen Ross McNabb Center, and Ridgeview Behavioral Health in East Tennessee and Park Center in Nashville
2013	IPS Trainer Program is established to provide technical assistance and support to agencies with implementation and creating a fidelity review process
2014	Tennessee joined the IPS International Learning Community in 2014 to receive training and technical assistance from the IPS Employment Center at the Research Foundation for Mental Hygiene at Columbia University (formerly located at the Dartmouth Psychiatric Research Center and Westat Research).
2015	IPS services expanded to include an additional 8 mental health providers
2016 - 2021	IPS services expanded to include an additional 6 mental health providers
2022	IPS expands by 55 positions (including the addition of 2 mental health providers) by using a direct state appropriation to leverage federal funding
2022	The IPS Benefits Counselors program is created to address the need for personalized benefits counseling in Middle and West Tennessee
2022	The IPS Statewide Steering Committee is established to focus on ensuring the IPS needs of all Tennesseans are met

There are **17 IPS supported employment providers**, 14 of which partner with DHS/VR to deliver IPS services. IPS is provided in **49 counties** across Tennessee, 32 of which are in rural areas of the state, and 17 in urban areas. One of the goals of the TN IPS Community is to expand the availability of this service to all 95 counties in Tennessee.



Figure 2: Tennessee Counties served by IPS teams shaded in blue.

IPS Outcomes

Program Outcomes for Participants in IPS

In fiscal year 2023, Tennessee IPS Supported Employment teams helped 1,298 people with an employment or education goal, of which 151 were youth and young adults. Most participants remain engaged in the job search process until employed. After the job start, they 151 Youth and young adults were supported with an employment or education goal in FY23.

continue to receive help from an IPS team until they can self-support or transition to receive assistance from clinical staff, family members, friends, or co-workers. In the ten-year history of IPS in Tennessee, more than 10,000 people have been supported by IPS teams with 44% beginning work and an estimated 50% of those who began working, continuing to work for 90 days or more. These data points are consistent with the 25 other states across the country who have IPS teams.

17 Community Providers
19 Tennessee Counties

People Served in FY23

Of Successful Placements Worked 90 Days or More

Average Wage and Hours Worked

The average hourly wage for IPS participants in FY23 was \$12.98, which is almost 80% higher than the current federal minimum wage. The average number of hours worked each week by IPS participates in FY23 was 29.6 hours. IPS participants work in a variety of fields and for multiple employers, i.e., assembler for Volkswagen, animal caretaker for Johnson City Animal Shelter, auto specialist for Latitude,

Half of those supported by IPS teams began work and half of those who began working did so for 90 days or more.

barista for Dunkin Donuts and carpenter for Gilmore Home Repair.

Average earnings for TN IPS Clients are well above state minimum wage.



Who Are We Serving?



In the last two fiscal years, there has been a positive shift in the primary age of those who engage support from an IPS team. Prior to fiscal year 2021, the age most likely to seek support from an IPS team was between the age of 41-45 but as of FY2022, this age is 21-25. This reflects significant progress as it could show more willingness of adults with behavioral health conditions to seek help and live a life of recovery beginning at a much younger age.

Figure 3: TN IPS Clients by age range served in state fiscal year 2023.

Demographics

While most IPS participants are white, there is a higher percentage of African Americans when compared to state demographic data who receive supported employment help in Tennessee. This is common across the country because many IPS teams have their largest percentage of support located near or in urban communities where many African Americans live. Most IPS participants are white, but when compared to state demographic data, a higher percentage of African American people were supported.

Figure 4: TN IPS Clients by race served in state fiscal year 2023.



IPS Success Story

Before David engaged with the IPS team at McNabb Center in Knoxville, he wasn't working. Through McNabb Center, David landed a job with the City of Knoxville's Public Service Department. He likes that it's different every day, and his employer likes that they're getting an employee they can rely on.



"There is never really one set thing that I do every day, so there is something new every day and I like that," David said.

"David has been great from the get-go. His personality is such that he fit right in with the crew and has turned out to be an all-around great employee," said Scott Jenkins with the City of Knoxville. "They also do a good job of letting the candidate know what our expectations might be. When I get a referral from a partner like the IPS program, I know it is a person who wants to get themselves out there, wants to get going and wants to build a career."

For Caroline Sands with the McNabb IPS team, the relationship with the employer is ongoing to ensure success.

"We are able to provide support to the individuals on the job. When there are issues, we can help troubleshoot the concern and help the employer prevent having more vacancies," said Sands.

David says he's already seeing the benefits of steady employment.

"When you get up and you go to work every day, it's going to make you feel better about yourself, it's going to give you more confidence, it's going to make you feel like you are just as good as everybody else," David said.

Incidence of Mental Illness in Tennessee

In 2022, there were an estimated 392,260 adults in Tennessee who had serious mental illness. With this need in mind, new funding was appropriated in 2022 to expand the reach of IPS to support an additional 860 people in search of work. Currently, the Tennessee IPS community has the capacity to support 2,000 people with serious mental illness annually.

Based on national studies over the past 35 years, most people with serious mental illness are not working (less than 15 percent) and people with SMI experience the highest unemployment rate and the lowest workforce participation rate of any disability group. Despite the desire of most people with psychiatric disabilities to be employed and many having previous work experience, they have the lowest employment rates in the United States.¹ Even though there are decades of evidence and recognition at the federal and state level of the success of and the need for IPS, the availability of these services remains scarce in some Tennessee counties and many people who need these services are not able to access them.



Sources: SAMHSA/Hendall 2021, National Survey on Drug Use and Health 2021, U.S. Census population estimates for Tennessee 2021. Upper Confidence Limit used to calculate estimates.

¹ https://secureservercdn.net/198.71.233.69/d25.2ac.myftpupload.com/wpcontent/uploads/2020/10/Policy-Opportunities-for-Promoting-Employment_UMMS_Bazelon_2016_FINAL.pdf

Sustainability and Expansion of IPS

The effectiveness of IPS has been well-established since at least the early 2000s. The key question for IPS, as for other evidence-based practices, is how to close the gap between the known population of those who want and need these evidence-based services and those who

IPS is listed in the TN F&A, Office of Evidence and Impact Mental Health Program Inventory. have access. As noted previously, most people with serious mental illness want to work. About 6 in 10 people with mental illness are interested in competitive employment, but most surveys indicate that 15% or less are employed at any time. Up to 85% of people with schizophrenia remain unemployed for a decade or longer after their first hospitalization.

Fortunately, most people *can* work in regular community jobs if provided appropriate help. The primary barriers have been inadequate funding and the lack of methodology for large- scale expansion.

IPS in Tennessee involves partnerships between mental health programs (private, not for profit, or county operated) and community rehabilitation programs who specialize in employment services. Three of the 17 IPS providing agencies are also Certified Community Behavioral Health Centers (CCBHCs), which is an emerging, evidence-based integrated care model. These agencies provide a comprehensive range of mental health and substance use disorder services and

THE IPS MODEL IS EVIDENCE-BASED

U.S. and International Randomized, Controlled Trials Show:

- IPS greatly outperforms standard employment supports.
 IPS works in both urban and rural communities.
 - IPS works for youth and young adults.
 IPS works for people

from different racial, ethnic, and minority backgrounds.

• **IPS supports** people with education goals.

IPS practitioners believe that EMPLOYMENT IS PART OF RECOVERY, not a reward for having recovered. coordinate with other essential community services. IPS teams have the capacity to support 52 percent of Tennessee counties. However, some larger counties only have limited access to IPS, for example Davidson, Shelby, Knox, and Hamilton counties.

TN IPS Leadership and Support

Tennessee IPS Leadership

IPS in Tennessee is managed by the Tennessee Department of Mental Health and Substance Abuse Services and made possible through the partnership with the Department of Human Services, Division of Vocational Rehabilitation. The Tennessee IPS Leadership is comprised of TDMHSAS, TDH-VR, and the Tennessee IPS Trainers. This group meets quarterly to ensure IPS services are being provided to fidelity, celebrate successes, and address concerns.

- Tennessee Department of Mental Health and Substance Abuse Services, Division of Mental Health Services, Office of Wellness and Employment: responsible for the contract management and monitoring with community mental health providers, oversees the IPS program statewide
- Tennessee IPS Trainers: provides technical assistance and training to all IPS providers, helps with implementation of IPS at new agencies, and conducts annual fidelity reviews at all IPS agencies to ensure IPS is being implemented to fidelity
- Tennessee Department of Human Services, Division of Vocational Rehabilitation: DHS/VR helps to ensure IPS participants have opportunity to reach their full potential as members of the TN community, workforce, and economy.

Partners: Employment First, DD Council, other partners

The Office of Wellness and Employment also partners with many other stakeholders to ensure all Tennesseans have access to evidence-based supported employment services. These partnerships are necessary to provide quality services but also to advocate for all populations. These partnerships include, but are not limited to:

- Community Mental Health Providers statewide
- Tennessee Department of Intellectual and Developmental Disabilities
- Employment First Task Force
- Council on Developmental Disabilities
- Vanderbilt Kennedy Center
- Tennessee Department of Labor and Workforce

- Tennessee Department of Transportation
- U.S. Department of Veterans Affairs
- Committee for Providing Competitive Integrated Employment for Individuals with Severe Disabilities

*Claims in this document are supported by more than three decades of research. Visit IPSworks.org to learn more.