

New IPS quality tool – in Denmark

- An alternative to the IPS-25 fidelity scale?

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&

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Agenda

Presentation

Why develop a new IPS Quality Tool

Presentation of IPS Quality Tool

Process and quality dialogue meetings

Mini World Café

Wrap up and closing

Why develop a new IPS Quality Tool?

- Individual focus based on the specific needs and wishes of each IPS-collaboration
- Less financial and resource demanding
- Less assessment and more dialogue and local ownership
- Adapted to Danish
- Easy to use – no reviewer needed
- Alternative format to the IPS-25 scale but very inspired by IPS-25 items

The purpose is to support that a given IPS program is adherent to IPS principles and effective regarding employment rates.

Fidelity is important; however, the format might transform!

What we know from research

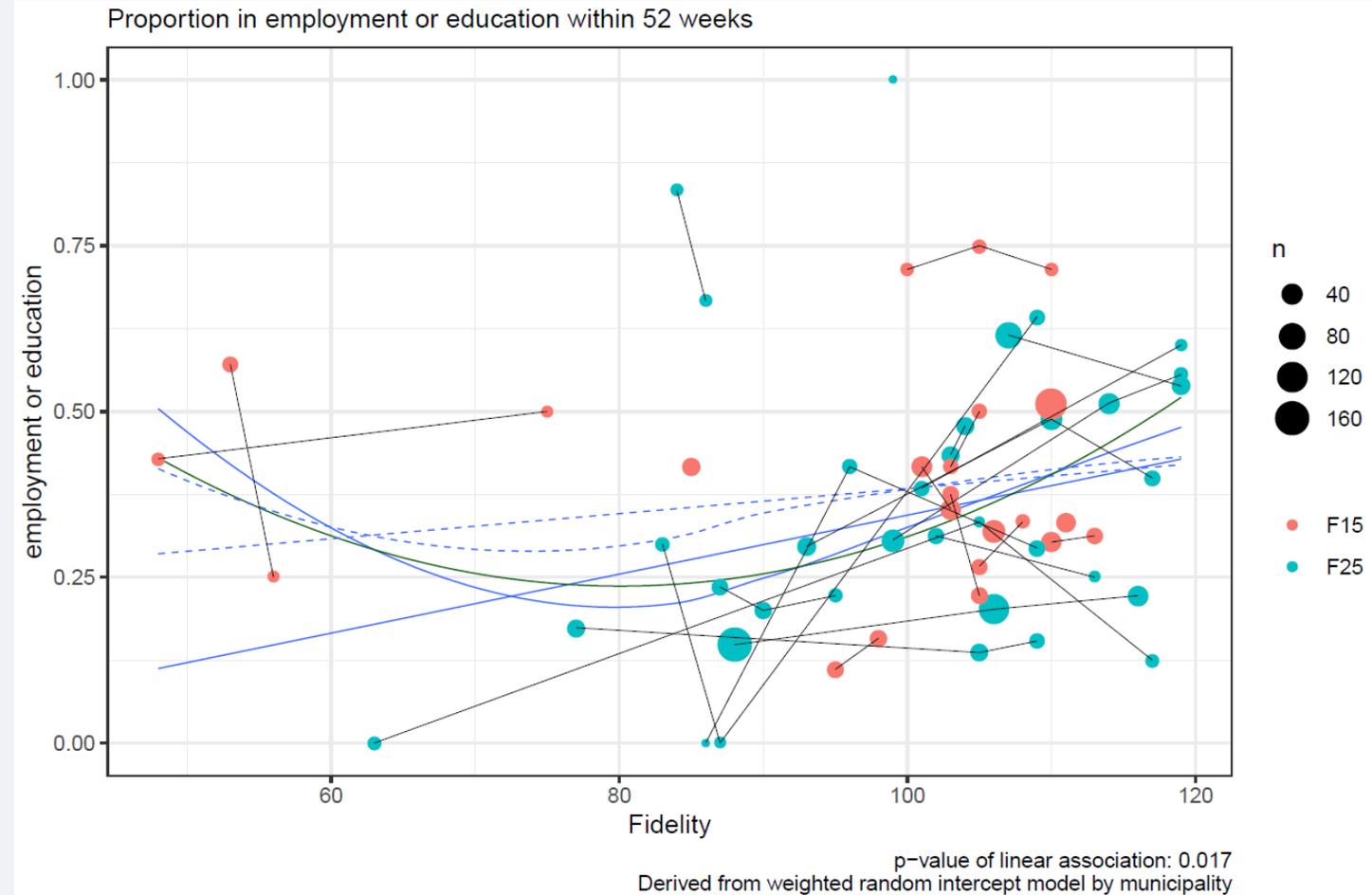
- Low fidelity = low employment rate
- Weaker association at high fidelity

Important ingredients to transform the current format

- Employment data
- Client Satisfaction data
- Individualized format
- Dialogue

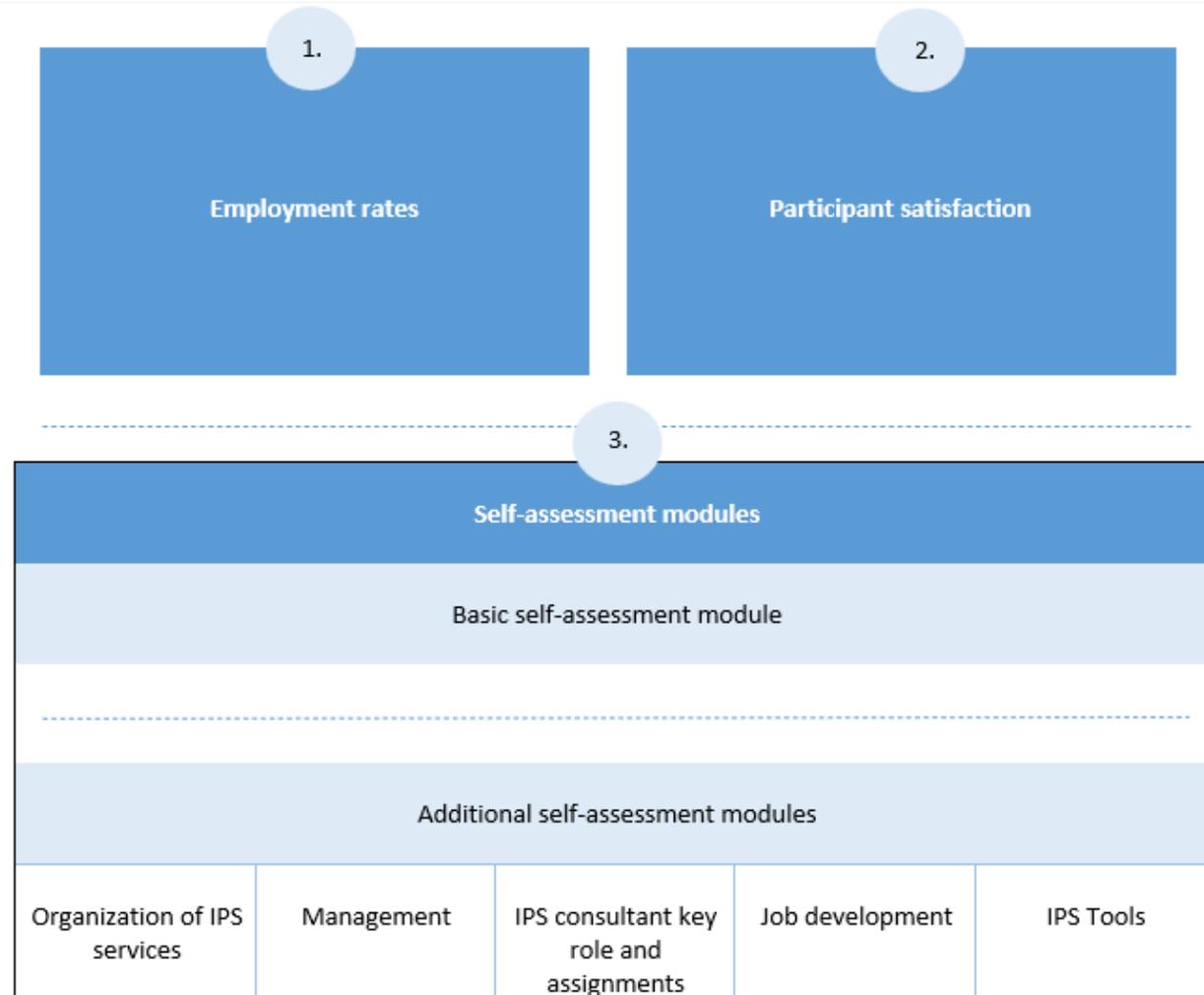
Fidelity doesn't stand alone:

- IPS training and education
- Casework supervision
- Networking & Booster Sessions

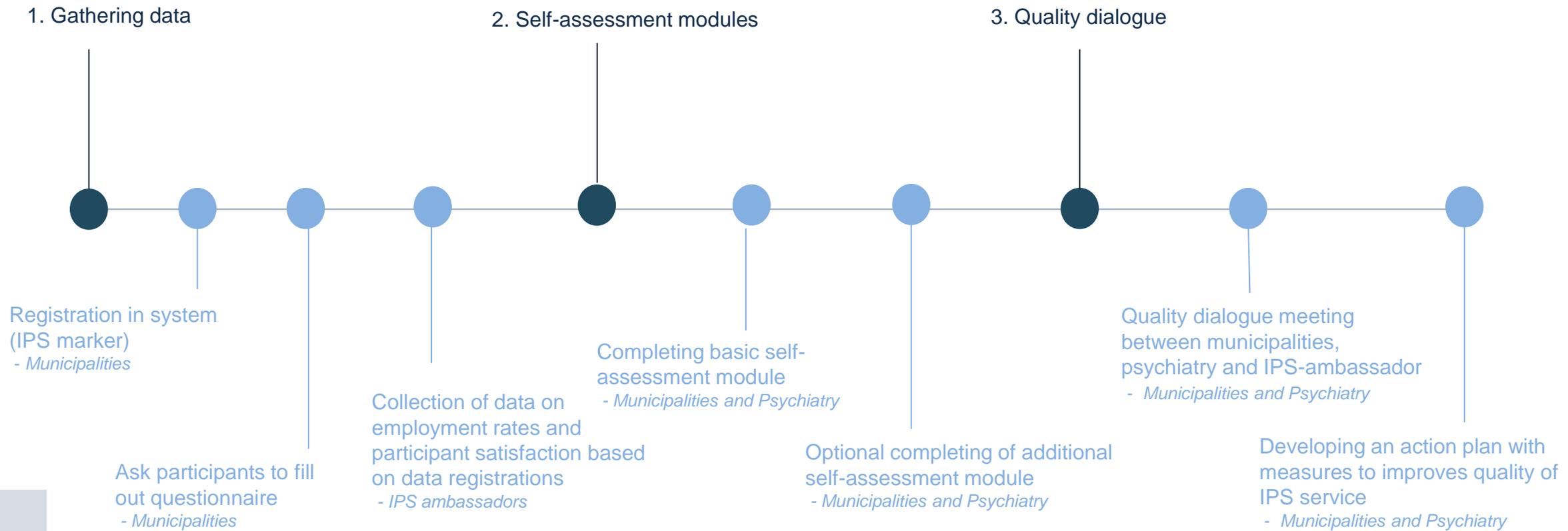


Presentation of IPS Quality Tool Model

- Employment rates (cut-off at 30 %)
- Participant satisfaction (cut-of at 24 points & 30% response rate)
- Self-assessment modules
 - Basic (caseload and IPS principles)
 - Organization of the IPS services
 - Management
 - IPS consultant key role and assignments
 - Jobdevelopment
 - IPS Tools



Process



Example of Basic Self assessment module

- Both IPS team and psychiatry fills out self-assessment
- Options a to e
- Possible to add comment
- Possible to choose proposed measures to improve IPS services

2.1. Offer of IPS

To be completed by the municipality and psychiatry

Tick the box that best describes your IPS program in relation to this specific point

Significant exclusion occurs due to a lack of knowledge of IPS within the municipality and/or psychiatric services, resulting in only a small proportion of potential candidates being informed about and offered IPS.

a

Exclusion occurs due to a lack of knowledge of IPS within the municipality and/or psychiatric services, which results in not all potential candidates being informed about and offered IPS.

b

In addition, extensive exclusion takes place based on screening of readiness factors such as symptoms, substance abuse, previous

Some potential candidates are excluded based on screening of readiness factors such as symptoms, substance abuse, previous convictions, etc.

c

Exclusion of potential candidates only occurs in exceptional cases, based on either readiness factors, lack of established referral procedures, and/or a waiting list for IPS.

d

All eligible candidates are offered IPS. In both the municipality and psychiatric services, procedures have been implemented to ensure that all individuals in the target group are systematically offered IPS. Referrals to IPS come from both the municipality and psychiatry. There is no waiting list for IPS.

e

Please feel free to provide additional comments on this point:

IPS Action plan - Example

Name of module (from IPS Quality Tool)	IPS tools		
Item name	Career Profile		
Agreed action	Description of action	Responsible person(s)	Follow-up and date
Fill out a vocational profile form for every IPS-candidate	<ol style="list-style-type: none"> The IPS team leader reviews all IPS cases with each IPS employment specialist to determine whether a career profile has been initiated for all current IPS candidates. The IPS team leader prepares a plan to initiate a career profile for all current IPS candidates together with each IPS employment specialist. 	IPS-teamleader	Follow-up at IPS team meeting on 01.05.2025
Item name	Follow along support plan		
Agreed action	Description of action	Responsible person(s)	Follow-up and date
Incorporate information from treatment team in the job support plan	<ol style="list-style-type: none"> The IPS team leader discusses the wish to involve psychiatric services in completing the job support plan with the relevant leader in psychiatry. IPS employment specialists share the job support plan with the psychiatric team. IPS employment specialists discuss the content with the psychiatric clinician, and input is added to the job support plan 	IPS Team Leader and Lead Social Worker in Psychiatric Services	Follow-up at cross-sectoral IPS leadership meeting on 16.06.2025

What advantages and disadvantages do you see in the new IPS quality tool?

Advantages:

Disadvantages:

What advantages and disadvantages do you see in the IPS-25 fidelity scale?

Advantages:

Disadvantages:

What considerations have you had regarding alternatives to the IPS-25 fidelity scale in your country?

Nations:

Considerations:

Outcomes of the workshop

- Participants found new tool interesting. One country expressed interest in using the tool
 - Score replaced by a-e
- Constructive feedback on pros and cons of both the 25-fidelity scale and the new tools
- Interesting to follow over time
- How to make the tool fail-safe besides client satisfaction and employment rates
 - Other relevant parameters to incorporate?