

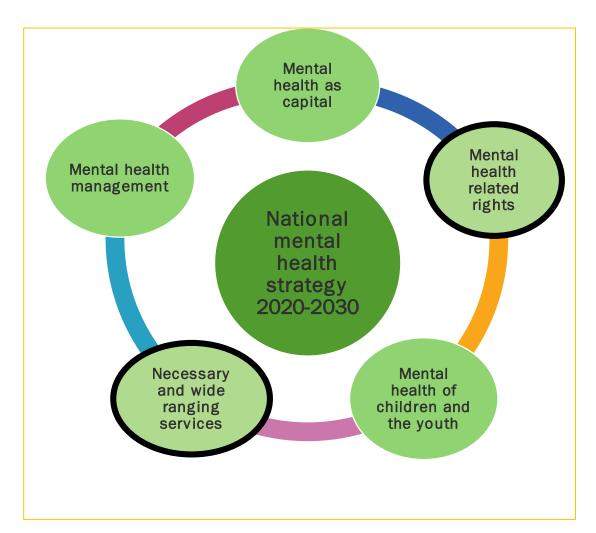
IPS-Development project in Finland 2020-2023

IPS Europe Learning Community Meeting, Berlin 27.-28.10.2022

Helka Raivio 10/31/2022

Finnish Institute for Health and Welfare

IPS- Place and train! -development project 2020-2022/23



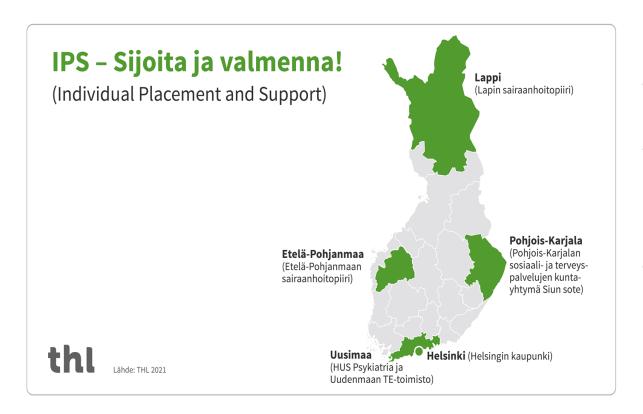
- Background: the preparation of the national mental health strategy 2020-2030
 - The project is to implement the reform of the work related rehabilitative services in Finland
 - For promoting (re)employment, return-to-work and staying-at-work for people with mental disorders (aged 18-64 years)
- The IPS-model is taken in use in psychiatric services across Finland in five regional pilots within the project
 - Funding comes from the Finnish Ministry of Social Affairs and Health
 - We are expanding IPS-activities into 5-6 more regions next year
- At the same time national "workability" program in action in Finland
 - SE –job coach model and the "employment supportive social services path" is taken in use in municipal social services



Helka Raivio 31.10.2022

Regional IPS-pilots 2020-2023

Firstname Lastname



- Uusimaa is run by the Hospital District of Helsinki and Uusimaa (HUS), Department of Psychiatry together with Uusimaa PES-office
- The city of Helsinki is implementing IPS in two of its outpatient clinics for people with psychosis
- Etelä-Pohjanmaa pilot is administered by the joint municipal authority for specialized health care and IPS is implemented in the out-patient clinics of the region for people with psychosis
- Pohjois-Karjala and Lappi pilots are also administered and organized as E-P pilot and IPS is implemented in the outpatient clinics
 - In the Pohjois-Karjala pilot focus group is younger (aged 18-30 years)



10/31/2022

Some expriences and results

- Original (IPS Employment Center, USA) materials and guidelines are followed very strictly
 - All the material has been translated into finnish and swedish languages
 - some minor modifications have been made to the Supported employment fidelity scale to fit into the Finnish society = criteria number 3. Collaboration between employment specialists and Vocational Rehabilitation counselors)
- IPS seems to be succesfull and working in Finland too ©
 - In the end of September 542 clients had begun in IPS-services and of which 226 (42 %) already employed in the open labor markets



* Very much aligned with the Recovery-thinking IPS seems to be a powerful tool to 10/31/2022 change the nevel intrincers paradiam



Finnish IPS Evaluation Study (2020-2023) A mixed methods intervention study

Noora Sipilä & Kaija & Appelqvist-Schmidlechner

Finnish Institute for Health and Welfare

Aims at investigating

Primary outcome: Employment

 Any paid employment in the competitive labour market during follow-up

Secondary outcomes: Psychosocial well-being

- Mental health and well-being (SWEMWBS and K6)
- Self-esteem (Rosenberg selfesteem Scale)
- Social inclusion (Social inclusion Scale)
- Life satisfaction (3x10D survey)
- Work-ability (Work ability Scale, Return to work self Efficacy Scale)
- Social provision (SPS)

Implementation study

The quality of the implementation

- Success and challenges in finding regular jobs
- Co-operation between job specialist and mental health professionals
- Success and challenges in providing support for both job seeker and employer
- Factors promoting and inhibiting the success in implementation of the programme

Outcome / efficacy study

Feasibility study

- Feasibility of the programme from the perspective of different stakeholders
- Potential of the programme to support the aim of the psychiatric treatment to recover
- Potential of the programme to support employees returning to work and managing & staying well after settling into work again



employers

mental health professionals

Interviews

IPS employment specialists

Job seekers

Fidelity Scale

Mixed method approach

Register data

IPS employment specialists

Questionnaires:

Job seekers

N=281 (recruiting still ongoing), participation rate 69 %

Researc h data in all

Documents collected within the project and workshops



Register based case-control study

- Retrospective and prospective approach: data will be collected five (5) years before and after the programme
- First data collection 12 months and second collection 5 years after the programme
- For the follow up, matched controls will be selected to detect the effects of the programme in terms of
 - Employment
 - Income
 - Use of mental health services





PRELIMINARY FINDINGS: Based

on baseline data n=213 and 6 months follow-up data n=96)

Characteristics of the study participants:

- All diagnosed with a mental health disorder, mostly with schizophrenia / psychotic disorder
- Males 62 %
- Average age 37 years
- Without vocational education 25 %
- University degree 20 %
- Rehabilitation benefit or disability pension 52
- Without any work experience 22 %
- At least 10 years work experience 25 %





PRELIMINARY FINDINGS:

Employment and financial situation during the first 6 months

- Of study participants, 50 became employed at least once (work try outs, internships and voluntary work included) during the first 6 months and 33 % in competitive labour market
- Employment relationship were mostly part-time (85%) and based on hourly wage rate (68%)
- Finding a job took approximatyely 96 days
- Most of the employed study participants (68%) have not told about their mental health disorder at workplace
- The financial situation was improved assessed by the study participants (satisfaction with the financial situation 5,6 at baseline and 6,1 at 6 months follow-up, scale 1-10 in the 3x10D Life Satisfaction Survey)





Small Group discussion sessions

- Participants will be divided into 6 groups in separate rooms
- 20 mins discussion on "What makes a good implementation of IPS services?"
- Back to the main room and 10 mins all group recap / review
- 5 mins for wrapping up and conclusion
- THEMATIC TOPICS FOR THE GROUPS TO DISCUSS / REFLECT UPON:
- 1. Adherence to the fidelity scale
- 2. Strong support from the management
- 3. Genuine integration of IPS-service with the psychiatric care and rehabilitation
- 4. Paradigm shift within the psychiatric care; recognition of employment as part of the recovery / rehabilitation
- 5. Readiness / willingness of the employers to tailor /customize work (tasks)
- 6. Presence / absence of stigma; can the mental health disorders be discussed in the workplace, and does this influence on the work of job specialists

