

# 3rd European IPS Learning virtual meeting 30th November 2021 by MS Teams

# **Spain**

**Débora Koatz** 

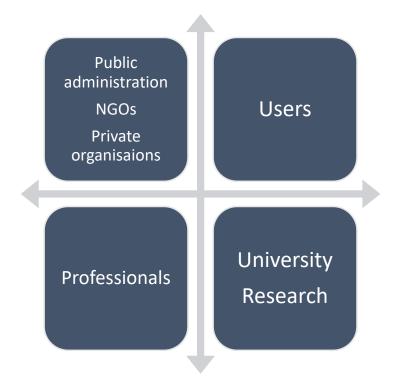
IPS trainer and project coordinator

**Avedis Donabedian Research Institute** 





FAD's Background The Avedis Donabedian Research Institute (FAD) aims at translating knowledge and evidence into practice. As such, it has the capacity of supporting public administrations, NGOs and private organizations at any level, regarding planning and implementation in integrated services such as employment, social affairs and mental health.



# **Owerview of Spain**





#### **Spain:**

- 17 autonomous communities
- 46 million population
- Economy deeply rooted in Services and Tourism
- Common universal framework regarding health, social security system and employment, but each autonomous community has their own system, programs and service networks.
- Programs for people with a MH condition regarding employment depend on different regional departments.

#### **Employmemt Programs:**

- Decentralisation at a regional level.
- Different types of program related to work coexist: vocational services, pre-labour services, shelter work programs.
- Most programs have specific inclusion criteria: clinical stability, no current substance use, adherence to treatment, illness conscious...
- Some programs are deeply rooted in the "train and place" model.
- Public funding is based on annual bids regarding all kind of disabilities.
- Difficulties to keep regular funding to give continuity to employment programs.
- Programs focus on competitive employment and shelter work compete for funding. Harder competition after crisis cuts.

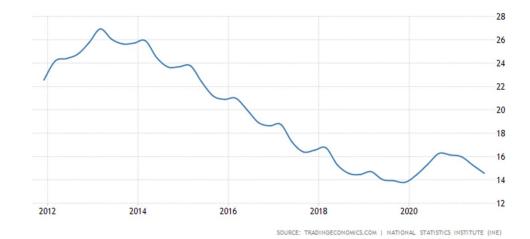
# **Owerview of Spain**





#### **Background**

- There are different kind of tax benefits for employers that hire people with disabilities.
- Certification is needed >33% to access this recognition.
- Employment rate of people with mental disorders was the lowest (27,8% in 2019) among all types of disability in pre-Covid 19 context.
- It involves disclosure to obtain job accommodations.
- Stigma could be a barrier. People also have the option to work in competitive jobs without disclosing.



**INE: National Stadistics Institute** 

# Starting IPS commitment in Spain





# Pilot project in Catalonia





• IPS Pilot **started in 2013** with an agreement among Ministry of Health, Ministry of Business and Labor and Ministry of Social Wellbeing and Family; "la Caixa" Banking Foundation, Government of Province of Barcelona, and the IPS Employment Center.

# **IPS Main Objectives**





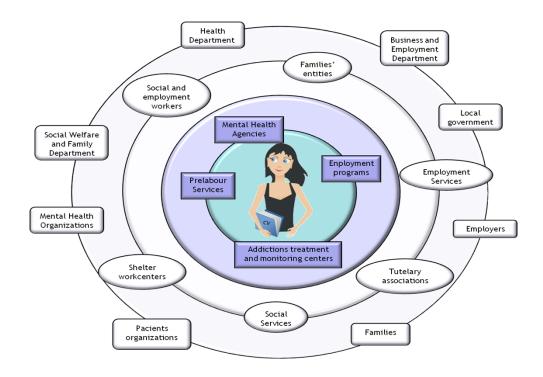
#### Main goal

To improve labour and social inclusion of people with severe mental disorders.

#### Specific goals:

- I. To spread IPS principles
- 2. To implement Fidelity Scale to evidencebased supported employment through a close collaboration between Mental Health Services and Employment Services.
- 3. To improve employment specialists' skills (job development, benefit planning, interviewing, community approach...).
- 4. To foster the integrated network with mental health and other community services.

#### **Stakeholders**



# Overview of IPS in Spain – 4 years pilot project in Catalonia 2013-2017





**IPS** 

3 regions in Catalonia

7 sites in Pilot, 2 more sites trained

12 MH centres participated in the project actively. Others also referred people to the programs.

20,8 people served in IPS per 1000 patients with mental health diagnosis Health Ministry leaders, with partnership of Ministry of Social affairs and Employment

IPS programs - Different kind of organizations: Public, Private, NGOs, from health sector or employment and social background.



### **Action taken**







- Training
- Support for supervisors and teams
- Visits to services and employers
- Online indicators follow-up
- Territory support
- Action plan in each Employment Service to improve practices.
- Job development with employment specialists.

- Leadership and dynamization for territory
- Barriers and facilitators identification
- Coordination of joint activities among employment organizations: sharing documentation, promoting implementation strategies, etc.
- Quarterly follow-up meetings among regional leaders, MH teams, FAD and Employment Services to identify opportunities for improvement.

Territory leaders

#### Strategic team

- Frequent follow up with Departments responsible
- · Action to better Integration of agents involved
- Barriers and facilitators analysis
- Training and commitment

Agents' coordination: Activities to improve integration between MH and Employment Services.

mplementation of improvement strategy

# Approach to quality and innovation





Quality assurance

2 reviewers trained in IPS Employment Center

IPS Fidelity reviews by external evaluator. Funded by Agreement for Pilot Project. Fidelity reviews done every 6 month up to Good Fidelity results. Then, once a year. Quarterly outcomes monitored by regional leaders and a follow-up committee, for pilot project.

Fidelity report delivered after reviewing with an improvement plan IPS platform for knowledge and data management 22 month study to know client's profile and jobs' obtained by people served.

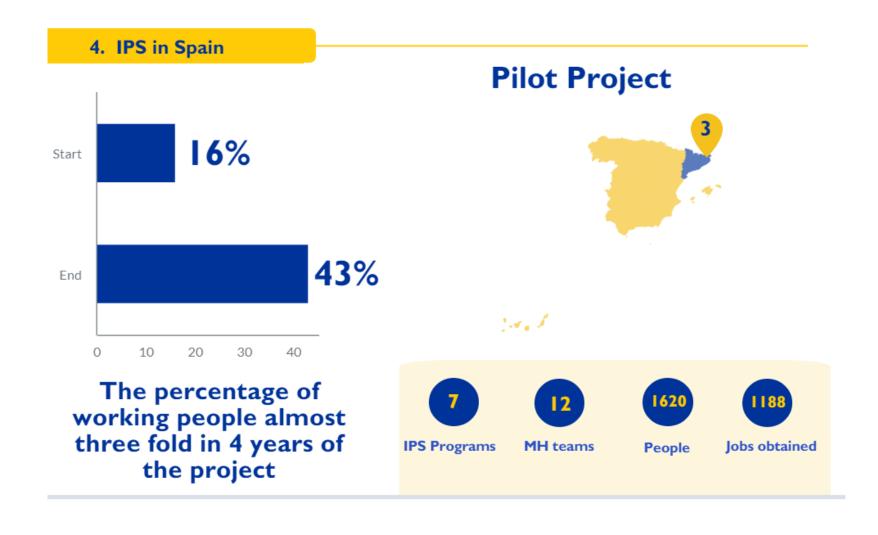
 Translation and adaptation of IPS Fidelity Scale, indicators and some material. Main differences in job development, supporting clients and team approach.



## **Main Outcomes**





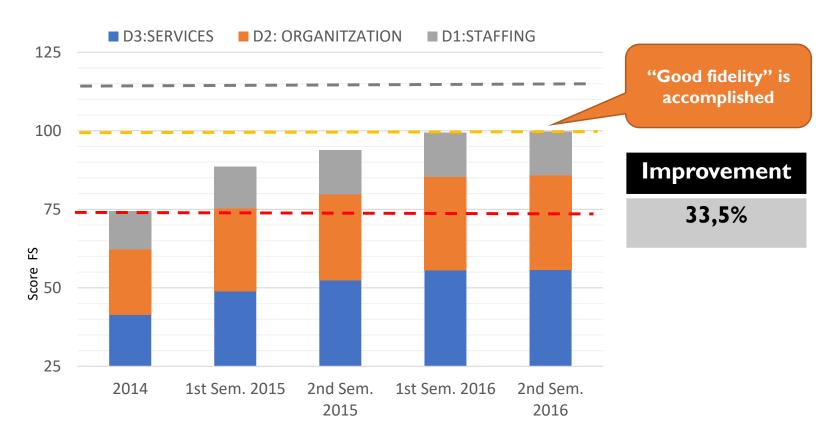


# **Acompliment Fidelity Scale (FS)**





# Pilot regional acomplishment



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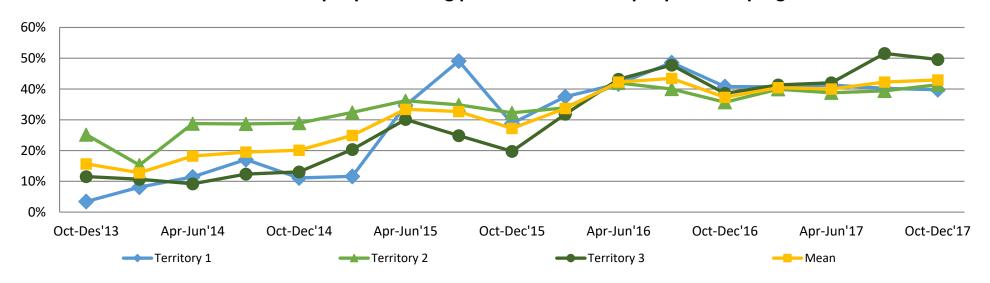
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# **Employment outcomes**





#### % people working per total number of people in IPS programs

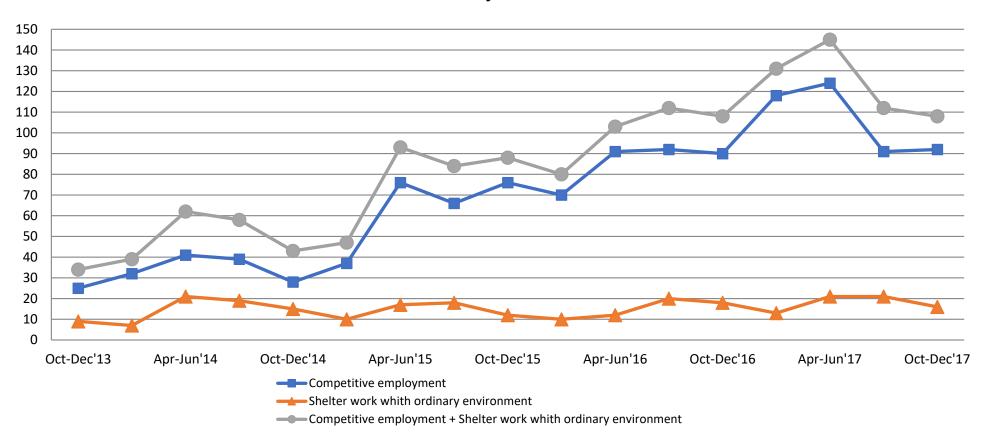


# **Employment outcomes**





#### New job starts



### Other outcomes





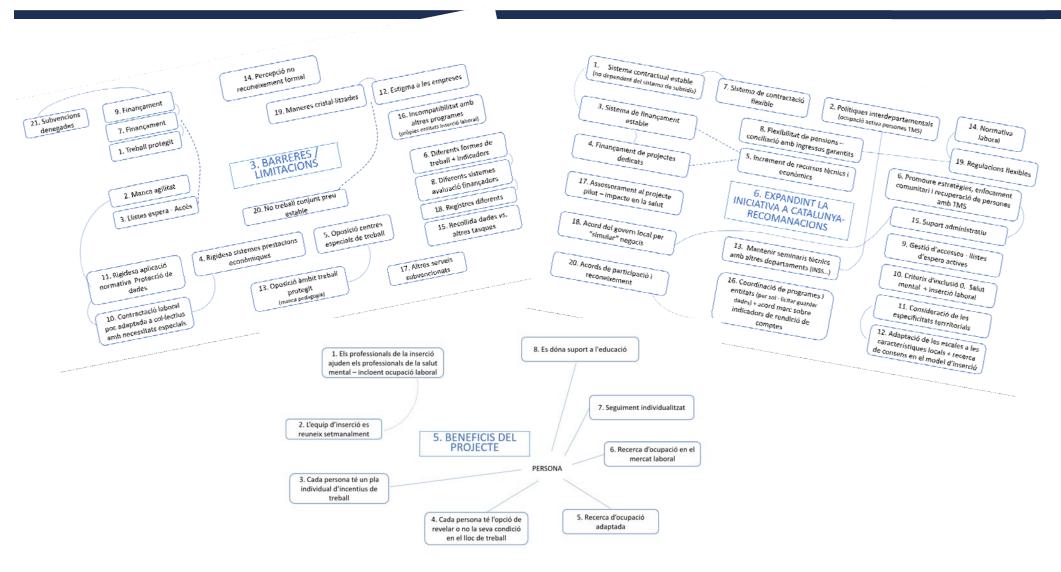
- 913 participant's files reviewed at a cohort study on the 22 month.
- Job placement's length and income (if available)
- Three open-ended group interviews of stakeholders and professionals from every territory

#### Main outcomes

- Median hours worked 35 h per week
- 41% of people has at least one job
- The average of contracts for each person employed was two.
- Nearly all jobs were temporary jobs: median length was 34 days, and 25% were for less than a week.
- 55,5 % men 44,5% women
- Age average: 38,4 (DS:8,7) 11,4% had less than 30 years old.
- 84% were connected to mental health treatment teams.
- 92 different agencies referred people to the IPS programs.
- More than 80% of the participants had a diagnosis of SMI

# **Development of IPS in Spain**





# **Development of IPS in Spain**





#### **Barriers**

- Uncertain funding for programs development.
- Different reporting indicators for different funding sources.
- Need of further integration among Employment Services and Mental Health Agencies, and lack of shared electronic records with confidentiality implications.
- Background: economic crisis and stigma.

#### **Facilitators**

- Strong government support for the project.
- Improving communication among services and increasing access to multidisciplinary resources.
- Friendly professionals' network.
- Strong senior leadership that supports the integration of different services.
- Support mechanisms for rapid solution to benefits queries.

# **Development of IPS in Spain**





#### Innovation and future direction

- We trained ONGs and public services in IPS in other regions. (Madrid and Murcia)
- Participating in ESCF IPS project with 4 more countries to propose a scaling-up plan for Spain let us explore other regions applying IPS (Tenerife) or willing to apply it (Madrid and Andalusia).
   Other cohorts: rural areas and youth. Funded is needed.
- A regional approach, considering every region context, mental health and employment resources and scaling up possibilities and funding for services.
- We did some dissemination training for other regions (Basque Country, Castile la Mancha, Castile and León, Valencian Community, Madrid, etc...). To know what IPS is and rise interest in organizations.
- We explore networking possibilities to foster a IPS Spanish Network.

European

Social Catalyst

# **IPS Spanish Network**



A key tool to share, to learn and to cohesion professionals and teams working with IPS model, updating research and improve practices.

- It will put isolated organizations in contact with each other share knowledge and experience on IPS and explore further opportunities for funding the model across Spain.
- Sharing documents and news from International and European networks, as other organizations do not have contact with other IPS programs around the world (the language is a barrier for learning and sharing for some organizations, professionals and users).
- Furthermore, to search and participate on funding opportunities together, and dissemination activities.



# People in IPS programs





"They have always helped me a lot in everything, they worry about everything ... I know I can count on them"











"They try to let me do things on myself. They always encourage me and take into account what I like the most and what I want to do ..."



"It has been easier because they have helped me to find a job.

Before, I searched on my own and I couldn't find anything."







"They have helped my son find the right job for him. He is happy, he feels good ... much better than before"



# **Backup**



Hilarión, P., Koatz, D., Bonet, P., Cid, J., Pinar, I., Otín, J. M., Espallargues, M., Molina, C., & Suñol, R. (2020). <a href="mailto:limplementation of the individual placement and support pilot program in Spain">lmplementation of the individual placement and support pilot program in Spain</a>. Psychiatric Rehabilitation Journal. Advance online publication.

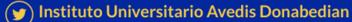
Sunol, R., Koatz, D., Bonet, P., & Hilarión, P. (2017). Mental Health Social inclusion through Job Placement: Implementing IPS in Spain. International Journal for Quality in Health Care, 29(suppl\_1), 60–60.

"Employment is a critical mental health intervention."

Drake and Wallach (2020)

# Thank you!





(f) @Inst\_Donabedian



#### **BARCELONA**

C/ Provença, 293, pral. 08037 Barcelona Tel: +34 932 076 608

#### **MADRID**

Paseo de la Castellana, 141 (Edificio Cuzco IV) 28046 Madrid

Tel: +34 917 498 046

#### **BOGOTÁ (COLOMBIA)**

Carrera 7A 123-24, Of.503

Bogotá - Colombia Tel: +57 I 744.99.76

FAX: +57 | 755.00.31

fad@fadq.org www.fadq.org