

SUPPORTED EMPLOYMENT IN ASHLAND

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First Things First

- How does the County view Mental Health & Substance Use Disorders?
 - Genetic (“Broken Brain)
 - Chronic/lifelong?
 - Require Medications?
 - Require changes to a persons hopes/dreams?
 - Limiting?

- In short, what’s possible for persons diagnosed with these disorders?

Second Things Next

- What experience does the County have with the notion of “Recovery” and “Recovery Oriented Systems of Care”?
- What importance is Employment given in the recovery efforts of persons diagnosed with Mental Health and/or Substance Use Disorders?

In Order to Minimize Frustration

- Supported Employment cannot be implemented successfully without certain attitudes, beliefs and commitments
- Fidelity Scales Measure both
 - ▣ System Readiness &
 - ▣ Model Faithfulness

Our Experiences

- Started with a common belief about the nature of MH/AoD disorders
- A common belief in the benefits of employment in the recovery process
- An understanding that funding would always be a challenge until state-wide reforms were enacted
- A commitment to each other
 - ▣ A priority to the Board (part of Strategic Plan)

Our Experiences

- Our county choose SE primarily because we feel employment is critical to recovery and the model emphasizes that:
 - ▣ Competitive employment is the primary goal;
 - ▣ Everyone who wants it is eligible for employment support;
 - ▣ Job search is consistent with individual preferences; and
 - ▣ Job search is rapid: beginning within one month

Our Experiences

We've supported our SE Program Fiscally by

- ▣ Local Levy Funding when possible
- ▣ Supporting VRP3 Grant Submission
- ▣ Being an active member of the Steering Committee
- ▣ Highlighting the program in Board public relations material
- ▣ Highlighting the program at the Multi-County R.S.V.P. Conference

Our Experiences

- People have been successful in finding employment
- Some people stay longer than others
- Some don't find their "perfect" job the first time
- No one has been pre-screened and hospitalized because of their involvement with SE program
- Our county will begin tracking SE participants outcomes via the MHSIP in SFY 12.

Challenges & Reform

- What did Mike Hogan say again?
- Boards would like the flexibility to fund services/programs that work
 - Many EBP's can't be funded via Medicaid
 - Employment
 - Housing
 - Case Rate/Voucher Approach

To Medicaid or not to Medicaid

- Medicaid Services have a place BUT
- Non-Medicaid Services ALSO have a place!
- Many of the activities performed by SE workers are not appropriately billed as CPST or Counseling but nonetheless are critical for the success of the program

But Baby It's Cold Outside

- Economy isn't booming yet; employment opportunities are a challenge for everyone
- Competition is fierce
 - ▣ “Chronically Normals”
 - ▣ Sheltered Workshops/Enclaves
 - ▣ Stigma
- Bottom Line: Hire the right person to lead your SE Program!!!

So Long and Thanks for all the Fish

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Selected References

- *A Working Life for People with Severe Mental Illness* by Deborah R. Becker and Robert E. Drake
- *Supported Employment: A practical guide for practitioners and supervisors* by Swanson, Becker, Drake, & Merrens
- Watch Bob Drake discuss the future of SE at:
http://www.centreformentalhealth.org.uk/employment/ips_resources.aspx
- *Anatomy of an Epidemic* by Robert Whitaker
- *Making Recovery a Reality* – Geoff Shepherd, Jed Boardman & Mike Slade