

**TITLE OF REPORT: Mental Health Employment Trailblazer Pilot -
Update**

Purpose of report

1. The purpose of the report is to provide a progress update on the Mental Health and Employment Trailblazer project being led by Northumberland County Council on behalf of the North East Combined Authority (NECA).

Key issues

2. The links between mental health and employment are well established. The right employment has positive mental health impacts and poor mental health negatively impacts job prospects. Nationally, over 40% of Employment and Support Allowance claimants have mental or behavioural disorders as their primary condition and almost nearly 25% of Jobseekers Allowance (JSA) claimants also experience mental health issues. The NE Local Enterprise Partnership area has almost 45,000 claimants with a mental health condition, almost 10,000 of whom are required to seek work.
3. In July 2014, the Government announced via the Growth Deal for Local Enterprise Partnerships, the commissioning of four two-year pilots to better integrate mental health and employment support in the North East, Greater Manchester, Blackpool, and West London.
4. On completion of a credible business case, the North East Combined Authority was awarded £1.1m Transformation Challenge Award funding from DCLG with an expectation to match using European Social Fund to a total £2.2m programme. Due to delays in the European programme the programme will start later than expected.
5. The main outcomes anticipated from the trailblazer are:
 - Supporting people to compete in the open-labour market
 - Better job entry and sustainability
 - Improved clinical recovery rates
 - Benefit off-flows
 - Improved service integration

Context

6. The North East Combined Authority Area has 44,970 residents claiming Employment and Support Allowance (ESA) for a mental or behavioural disorder (February 2015). 9,800 of these are in the ESA Work Related Activity Group (WRAG) and receive benefits conditional on involvement in jobsearch activity. However, this shows only those where mental health is the primary reason for the claim, and a greater number may have mental health as a secondary condition. Further, many Jobseekers Allowance (JSA) claimants are also known to have a mental health condition.
7. This is compounded by a lack of integration between employment and wellbeing interventions and with no coordination between referrals to mental health services and employment support. As a consequence, employment support programmes have performed poorly in securing job outcomes for benefit claimants with mental health conditions.
8. In 2013 the Department of Work and Pensions (DWP) and the Department of Health (DH) commissioned RAND Europe to investigate further the links between mental health and employment and to report on prospective interventions which could tackle the issue. In January 2014, RAND recommended feasibility tests of four Psychological Wellbeing and Work pilots to better support those with mental health needs into work. A number of six month pilot programmes were tested, including one in Durham and Darlington. Evaluation of the pilots (An Evaluation of the 'IPS in IAPT' Psychological Wellbeing and Work Feasibility pilot, The Work Foundation, March 2015) recommended a longer term and larger scale trial.
9. In July 2014, the Government announced in Growth Deal for Local Enterprise Partnerships the commissioning of four Mental Health Trailblazers to better integrating mental health and employment support in the NECA, Greater Manchester, Blackpool, and West London. DCLG Transformation Challenge Award (TCA) of £1.1m was approved in early 2015 and an application for European Social Fund (ESF) 50% match was submitted in May 2015. Delays in the European programme have resulted in a subsequent delay to the Trailblazers. However, TCA funds were received in August 2015 and a successful ESF decision is expected mid December to allow the programme to start in early 2016.

North East Mental Health Trailblazer

10. The North East Growth Deal included the commitment that: 'the North East LEP and partners will work with the Government to jointly design and develop a mental health and employment integration trailblazer to inform future national and local support for people with mental health conditions. The trailblazers will further test support to boost employment and clinical outcomes for people with mental health conditions, as well as testing integrated and better sequenced delivery models to better complement public services at the local level at scale'. Trailblazers will implement the Individual Placement and

Support (IPS) model, endorsed by the Centre for Mental Health. The IPS model is characterised by full integration of employment support with mental health care and treatment. It focuses on paid employment only and aims to find work for people quickly. Intensive and flexible support is at the core of the model, employment coaches will have optimum caseload sizes of 30, and jobsearch is based on the type of job, location and hours sought to suit the individual. Jobsearch begins almost immediately without stepping stones of 'work preparation' activities. The key IPS principles are:

- Competitive paid employment is the goal;
 - Everyone who wants it is eligible for employment support;
 - Job search consistent with individual preferences;
 - Job search is rapid: beginning within one month;
 - Employment specialists and clinical teams work and are located together;
 - Employment specialists develop relationships with employers;
 - Support is individualised
 - Welfare benefits counselling
11. Employment Coaches will be co-located with and fully integrated into teams delivering Increasing Access to Psychological Therapies (IAPT) services.
 12. Participants will have access to intensive and flexibly delivered tailored support from an employment coach working in co-ordination with a clinical therapist. This will include job brokerage and job matching. The Coaches will be able to link into vacancies identified through existing Employer Engagement functions within each individual local authority. Coaches will broker additional support (such as debt advice, housing etc.) where needed. Once placed in-work, the coach will continue to offer support for 26 weeks to help job sustainability.
 13. The target cohort is in large part ESA claimants experiencing mental health conditions, but other benefit claimants seeking a mental health treatment will also be eligible. The only exceptions will be those engaged in mandatory DWP activities, such as Work Programme. The trailblazer is expected to engage and support 1,500 participants over two years.

Outcomes

14. The main outcomes anticipated from the trailblazer are:
 - Improved job entry rates for people with mental health conditions
 - Better job sustainability rates
 - Benefit off-flows
 - Improved clinical recovery rates (measured by IAPT GAD7 and PHQ9 assessments).

15. Service integration is a key principle of the model. The model is testing effectiveness of employment support integrated into psychological well-being services to help more of the cohort into work. Employment Coaches will be fully integrated into the teams delivering IAPT services. The model fits within the wider context of better integrating public services for residents who need a range of support from different agencies.

Evaluation

16. Government has commissioned the Behavioural Insights Team (BIT) to conduct a meta-evaluation of all four trailblazer areas. Evaluation metrics will cover out-of-work benefit off-flows, job starts and sustained job outcomes, and clinical recovery rates (measured by GAD7 / PHQ 9 scores). The evaluation will utilise a Random Control Trial (RCT) methodology, measuring impact by comparing users of the IPS service with a control group receiving IAPT 'treatment as usual'. The BIT evaluation team have regularly reported to the steering group and consulted the research and evaluation leads of Northumberland, Tyne and Wear and Tees, Tees, Esk and Wear Valley NHS Foundation Trusts.
17. Evaluation ethics protocols will ensure participants' have given their informed consent to take part. Data will be treated confidentially and anonymously. The trial protocol is registered on the ISRCTN Trial Registry as per the requirements set out by the World Health Organization (WHO) International Clinical Trials Registry Platform (ICTRP) and the International Committee of Medical Journal Editors (ICMJE) guidelines to ensure a level of scrutiny that is sufficiently high and directly relevant to the intervention. NHS ethical clearance is being sought and will be sought and an outcome is expected following the NHS ethics panel by early December.

Progress and Next Steps

18. All IAPT providers across the seven LA areas have been engaged with and are ready to support the programme by integrating employment coaches into their clinical delivery teams. The IAPT providers include:
 - Northumberland Talking Therapies
 - Newcastle Talking Therapies
 - North Tyneside Talking Therapies
 - Gateshead and South Tyneside Talking Therapies
 - Sunderland Psychological Wellbeing Service
 - Talking Changes Durham
19. DWP has been engaged at national and local levels to ensure the model is fully supported with referrals and put effective mechanisms in place for referral and monitoring. This has included consultation with Jobcentre managers and frontline Jobcentre staff to better understand the needs and issues faced by claimants. Development of the model nationally has been led by the DWP / DH Work & Health Joint Unit.
20. Performance management will be carried out in area clusters: North Tyne

(Northumberland, North Tyneside and Newcastle), South Tyne (Gateshead, South Tyneside and Sunderland) and a separate Durham group in recognition of the different DWP / CCG boundaries and ESF regional categorisation. Operational groups in each cluster will monitor performance and address any under-performance. Groups are composed of the IAPT providers, LA representatives, and DWP Jobcentre staff.

21. A multi-agency group with representatives of local authorities, CCGs, NHS Trusts and DWP will continue to provide strategic direction and scrutiny. Health and Well Being Boards will receive progress reports.
22. Northumberland County Council is acting as lead on behalf of NECA and will project manage and recruit and employ all staff. A project manager was employed in late August to complete development work and begin the implementation phase. Recruitment of Employment Coaches will commence in late January 2016; staff will undergo training and be placed with respective IAPT teams to begin the first phase of implementation by Early 2016.
23. The 2-year pilot programme will commence from the day delivery starts.

Recommendations

24. The Health and Wellbeing Board is asked to:
 - (i) consider the progress made in developing the Mental Health and Employment Trailblazer pilot and the next steps set out above.

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NE Mental Health Trailblazer – Process Map

