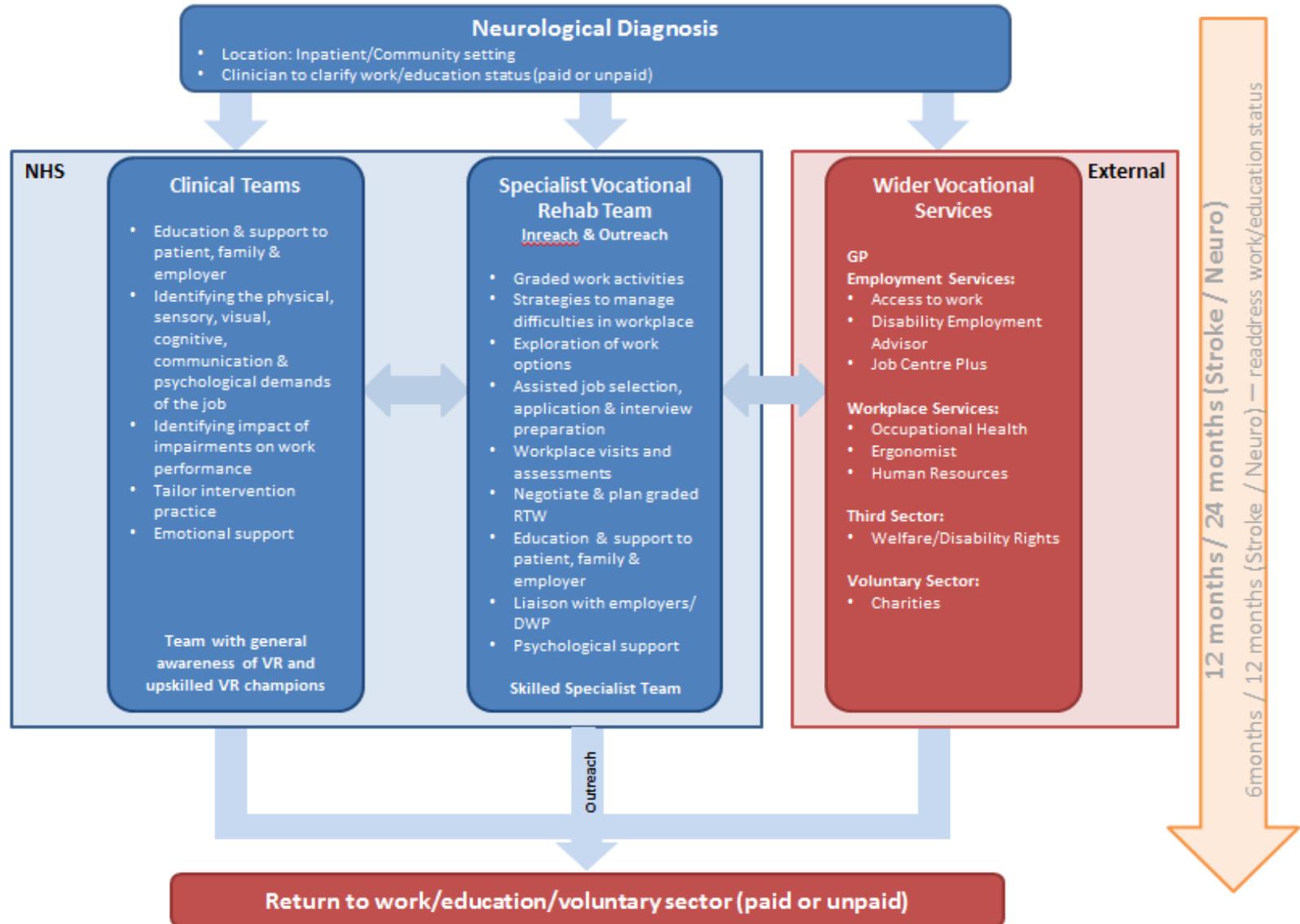


Vocational Rehabilitation

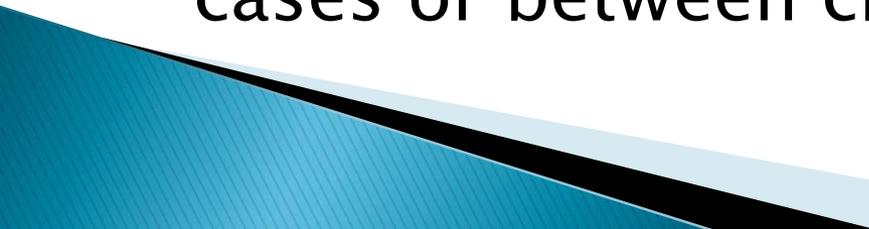
Service Provision across Greater Manchester

Gemma Smith & Nicola Shankey,
GMNRODN facilitators

INTEGRATED VOCATIONAL REHABILITATION MODEL



Clinical Teams

- ▶ In order to up-skill the clinical teams the ODN arranged a 2-day training course for clinicians across GM in 2017
 - ▶ Resources were then shared via the GMNRODN website to enable these clinicians to cascade this training locally
 - ▶ Peer support has been provided via e-mail between clinicians in relation to complex cases or between clinicians in larger teams
- 

Challenges

- ▶ Being asked to provide reports for employers detailing the time frames in which individuals will be able to return to work
 - ▶ Not being familiar with the legislation surrounding employment termination and thus not being able to advise individuals accordingly
 - ▶ Not knowing who to signpost individuals to for this legal support
- 

Current position in GM

- ▶ No funding has been allocated to a specialist VR role
 - ▶ Linking with Ray Langford (VR specialist in Merseyside), Wendy Owen (OT at Walton Centre) & Julie Peacock (CMRN manager) to see how this service was established and generating a business case
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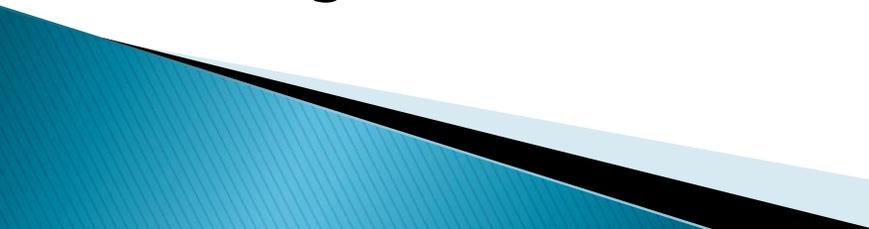
Specialist Vocational Rehab Team

- ▶ Involved from admission to hospital to discharge from CNRT. Establishing structured routines with patients gradually increasing activity levels.
 - ▶ Work across GM.
 - ▶ Early intervention enables quicker recovery by introducing work-related tasks earlier in the individual's recovery. There is an anticipated peak in demand towards end of the pathway.
 - ▶ Liaise with employers/ tutors and disability employment advisors and signpost individuals to access legal support.
- 

Specialist Vocational Rehab Team

- ▶ Support the other team members who are equipped to give generalised support e.g. practising work skills on the computer to build concentration.
 - ▶ Support individuals with returning to their existing role OR with re-training for a new role (career re-direction).
 - ▶ Work closely with Psychology services to facilitate personal adjustment.
 - ▶ Serve as a link between health and Department for Work and Pensions (DWP) services to access additional support.
- 

Specialist Vocational Rehab Team

- ▶ Work closely with Occupational Health services to produce AHP work reports (problems, solutions & summary) to be sent to employers.
 - ▶ Identify the need for workplace or job adaptations.
 - ▶ Use specialist language tailored to Occupational Health style when communicating with employers.
 - ▶ Can conduct work site visits e.g. to gain a better insight into an individual's role.
- 

Wider Vocational Services

Motiv8

- Health condition impacting on ability to work
- No current plans to return to work
- Could support getting back into voluntary work

Work & Health

- Not yet in work but aiming to return to work within 1 year

Working Well Early Help

- Vocational Rehab Caseworker (VRC) allocated to support those wanting to get back to work who have worked at least 1 day of paid work in the last 6 months

Maximus

Working Well Early Help

Rebecca Thorpe & Matthew Robinson

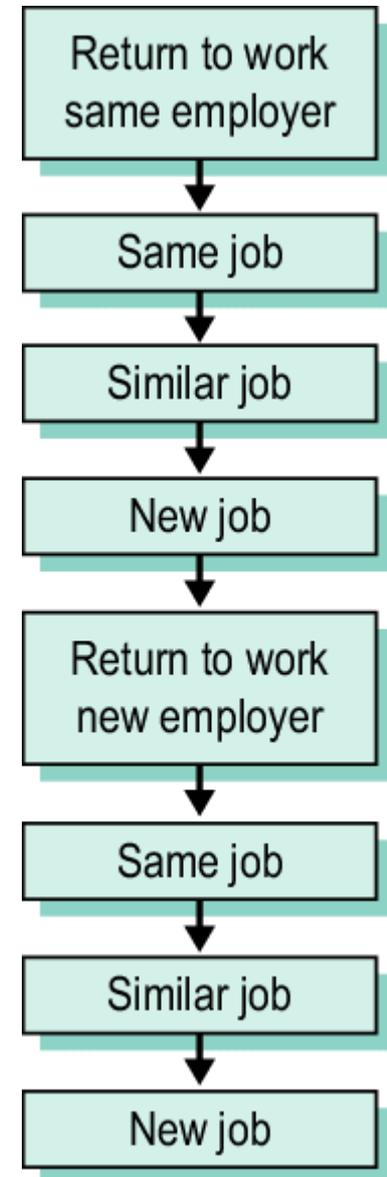
What is Voc Rehab?

- ▶ Services / Approach designed to facilitate a return to work
- ▶ Supports those with health conditions or disabilities overcome barriers to employment
- ▶ “Work” is part of recovery and not a separate entity
- ▶ Can include vocational assessments, training, skill upgrading, refresher courses, on-the-job training, career coaching/counselling, job carving and employment searches, guidance on reasonable adjustments
- ▶ “Individual” Led

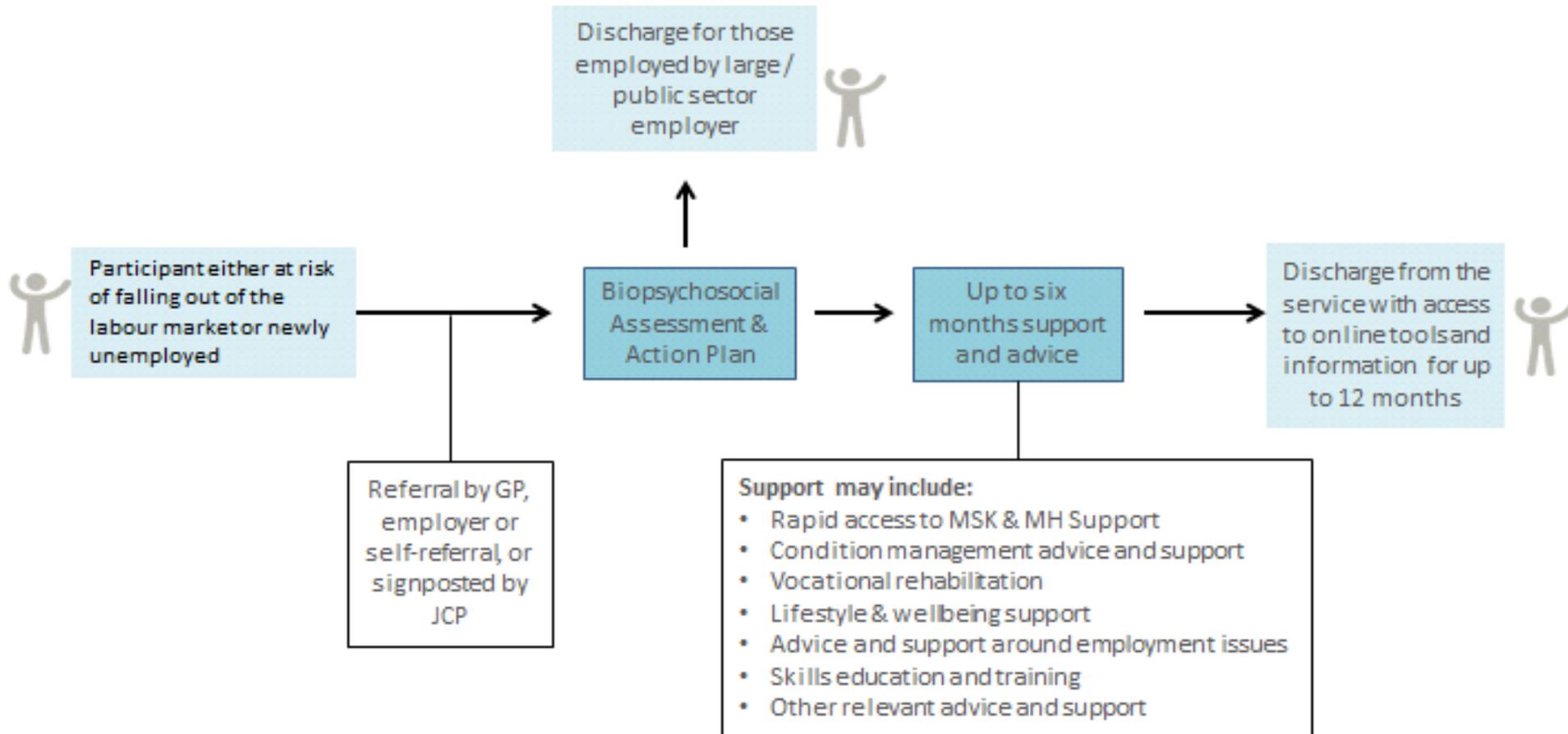


VR on Early Help

- ▶ Vocational Rehabilitation Case Workers; wide array of skills in health management, wellbeing, employability and more
- ▶ Biopsychosocial model used; taking a holistic approach
- ▶ Action Planning and Goal Setting
- ▶ Expert Practitioner Network; early access to health provisions and treatment to aid with recovery
- ▶ Healthworks Online; digital platform empowering individuals to manage their own recovery
- ▶ **Return to Work Hierarchy ->**



The Delivery Model Summarised



How have we helped people?

Reason for Referral

- Autism Spectrum Disorder and associated mental health difficulties i.e. anxiety, lack of confidence
- Recently fallen out of work; history of manual labour but found these jobs difficult due to Neuro-Diverse condition
- Limited coping strategies in place for health
- Impacting home life and social interactions

Patient Goal and Outline of Support

- Condition Management Techniques and Coaching - ASD and Mental Health specific
- Job Carving
- Skills training courses to focus on jobs identified e.g. retail, customer service....
- Work Placement at a large supermarket chain

Overall Outcome of Support

- Participant's work placement led to a permanent part time job at the company
 - Feels more in control of his Mental Health and ASD
 - Positive effect on social and home life
 - Continuing to develop in-work coping strategies with suggestions for reasonable adjustments to employer
- 

Questions for you?

- ▶ Where have you identified a lack of health provisions within GM, causing high sickness absence rates?
 - ▶ What do you feel contributes to continuous fit notes? How can employers support the reduction in these?
 - ▶ How can Vocational Rehabilitation be integrated more into organisations?
- 