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reSearch

A collection of research reviews on rehabilitation topics from NARIC and other information resources.

Best practices in Vocational Rehabilitation

Information Specialists at the National Rehabilitation Information Center field requests on a wide range of disability rehabilitation issues. Information on vocational rehabilitation is a common request. This edition of *reSearch*, explores the topic of best practices in vocational rehabilitation.

While the main search terms were best practices and evidence-based vocational rehabilitation and supported employment, the combined total of the NARIC, ERIC, PubMed, and the Cochrane database descriptors was over 60 terms. A sample of these terms can be found on the back page of this document.

Research in the area of vocational rehabilitation is extensive. Based on information requests from our patrons, the objective of this research brief is to provide a “snap-shot” of the most current and relevant research available on in best practices in vocational rehabilitation. The REHABDATA search resulted in 32 documents ranging from 2005-1998. Eleven documents ranging from 2006-1997 resulted from the ERIC database. PubMed’s database search resulted in 22 documents ranging from 2006-2001. Finally, there were two systematic reviews from the Cochrane Library search from 2006 and 2001. The complete citations are included at the end of this research brief.

In addition to document searches, NARIC searched its Program Database of the National Institute on Disability and Rehabilitation Research (NIDRR) projects to locate grantees/projects related to the topic of vocational rehabilitation. NIDRR has a strong history of funding vocational rehabilitation research. There are over 100 current and previously funded projects listed in the Program Directory. NIDRR funded projects and their publications are offered as additional resources for

our patrons. For a full listing of vocational rehabilitation projects, please visit www.naric.com/research, and select Research Projects, type in the keyword, and press “search.” Included below is a listing of five actively funded Rehabilitation Research and Training Centers (RRTCs) with a focus on vocational rehabilitation:

Rehabilitation Research and Training Centers on Vocational Rehabilitation

RRTC on Employment Policy and Individuals with Disabilities.

Project Number: H133B040013

RRTC on Improving Employment Outcomes.

Project Number: H133B040014

RRTC on Improving Vocational Rehabilitation Services for Individuals Who Are Deaf or Hard of Hearing.

Project Number: H133B010501

RRTC on Substance Abuse, Disability, and Employment.

Project Number: H133B040012

RRTC on Workplace Supports and Job Retention.

Project Number: H133B040011

For project information, you may visit www.naric.com/research, select Research Projects and type in the project number. Each project listing includes citations from NARIC holdings.

Documents from NARIC's REHABDATA search listed are listed below:

2005

Dew, Donald W., & Alan, Greg M. (Eds.). (2005). **Innovative methods for providing vocational rehabilitation services to individuals with psychiatric disabilities: 30th Institute on Rehabilitation Issues.** NARIC Accession Number: O16015

ABSTRACT: Monograph presents alternative methods for providing vocational rehabilitation (VR) services to people with psychiatric disabilities. Topics discussed include: (1) characteristics of people with psychiatric disabilities and barriers preventing VR from providing them services; (2) the history of public VR programs; (3) current and best practices, in addition to new and alternative service delivery methods; (4) systemic issues impacting service delivery; and (5) managing change in the VR system. Study questions at the end of the chapters provide an opportunity for readers to earn online continuing education credit for Certified Rehabilitation Counselor. Appendices include a glossary of terms, public VR data on individuals with psychiatric disabilities, and a list of Rehabilitation Services Administration special demonstration grantees.

Drake, Robert E., Merrens, Matthew R., & Lynde, David W. (Eds.). (2005). **Evidence-based mental health practice: A textbook.**

NARIC Accession Number: R08653

ABSTRACT: Book provides an overview of the background, principles, and the challenges of implementing evidence-based practices (EBPs) for people with severe mental illness. Chapters include case examples to illustrate six EBPs: (1) assertive community treatment, (2) integrated dual-disorder treatment, (3) supported employment, (4) illness management and recovery, (5) medication management, and (6) family psycho-education.

Razzano, Lisa A., & Cook, Judith, A. (2005). **Evidence-based practices in supported employment.** In C. E. Stout, R. A. Hayes (Eds.). *The evidence-based practice: Methods, models, and tools for mental health professionals*, 10-30.

NARIC Accession Number: J49133

ABSTRACT: Article reviews research that investigates supported employment as an evidence-based best practice. Research-based principles related to vocational re-

habilitation (VR) services are identified, including: (1) competitive or supported employment services, (2) situational assessment, (3) rapid placement, (4) ongoing vocational supports, (5) clients' individual preferences, and (6) economic disincentives. Methods for assessing efficacy and effectiveness of supported employment, provider competencies that support best practices in VR, and other tools for evaluating VR services are discussed. Success stories and a case example illustrate supported employment programs that represent best practices.

Revell, Grant, & O'Brien, Dan (Eds.). (2005). **Special issue: Funding consumer directed employment outcomes.** *Journal of Vocational Rehabilitation*, 23(2), 69-136.

NARIC Accession Number: R08676

ABSTRACT: Journal issue provides an overview of the evolution in supported employment as represented by current best practices in funding, consumer-directed supports, and employment outcomes. Topics include: using vouchers and personal budgets to support recovery and employment for people with psychiatric disabilities, performance-based funding of supported employment, the Milestone Payment System, telework and employees with disabilities, and supporting consumer-directed employment outcomes. Five articles are included separately in the NARIC collection under accession numbers J49778 through J49782.

2004

Bond, Gary R. (2004). **Supported employment: Evidence for an evidence-based practice.** *Psychiatric Rehabilitation Journal*, 27(4), 345-359.

NARIC Accession Number: J47594

ABSTRACT: Article reviews research on supported employment for people with serious mental illness. Findings indicate that between 40 and 60 percent of consumers enrolled in supported employment obtain competitive employment while less than 20 percent of similar consumers do so when not enrolled in supported employment. The strongest evidence focuses on competitive employment, rapid job search, and integration of mental health and vocational services.

Cook, Judith, A. (2004). **Blazing new trails: Using evidence-based practice and stakeholder consensus to enhance psychosocial rehabilitation services in Texas.** *Psychiatric Rehabilitation Journal*, 27(4), 305-306.

NARIC Accession Number: J47590

ABSTRACT: Introduces a series of articles that describe an initiative to use evidence-based practice along with stakeholder consensus to a design a package of psychosocial rehabilitation (PSR) services for people using public mental health services in Texas. PSR services included supported housing, supported employment, integrated mental health and substance abuse treatment, case management, life skills training, and peer support, self-help, and consumer operated services. Articles examining the research evidence on the quality of service delivery in each of these areas are included separately in the NARIC collection under accession numbers J47591 through J47597.

Havranek, Joseph E. (2004). **Best practices in cases of gifted individuals who sustain acquired brain injuries.** *RehabPro (formerly The Rehabilitation Professional)*, 12(3), 58-60.

NARIC Accession Number: J48309

ABSTRACT: Article presents four case examples of best practices for successful vocational rehabilitation services for gifted individuals who sustain acquired brain injuries. Information analyzed for each case includes: date of initial injury, pre-and post-injury IQ, work history, service plans, vocational outcome, occupation, pay, date of placement, length of service, total cost of services, and closure dates. These cases show that ingenuity and imagination are critical ingredients to successful rehabilitation outcomes for this disability population.

Latimer, Eric A., Bush, Philip W., Becker, Deborah R., Drake, Robert E., & Bond, Gary R. (2004). **The cost of high-fidelity supported employment programs for people with severe mental illness.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 55(4), 401-406.

NARIC Accession Number: J47522

ABSTRACT: Supported employment programs known to follow the principles of evidence-based supported employment provided detailed information on program costs, use, and staffing. Program fidelity was assessed using the Supported Employment Fidelity Scale. Cost and utilization data were analyzed in a comparable manner across sites to yield direct and total costs per client served, per full-year-equivalent client, and per employment specialist. Usable data were obtained from

seven programs in seven states: Indiana, Kansas, Massachusetts, New Hampshire, Oregon, Rhode Island, and Vermont. All programs received high fidelity ratings, ranging from 70 to the maximum value of 75. Annual direct costs per client served varied from \$860 in New Hampshire to \$2,723 in Oregon, and direct costs per full-year-equivalent client varied from \$1,423 in Massachusetts to \$6,793 in Indiana. Direct costs per employment specialist did not show as much variation, ranging from \$37,339 in Rhode Island to \$49,603 in Massachusetts, with a mean of \$44,082. Differences in cost per client arose in part from differences in rules for determining who is or is not considered to on a program's caseload. By assuming a typical caseload of about 18 clients, it was estimated that the cost per full-year-equivalent client averaged \$2,449 per year, ranging from \$2,074 to \$2,756.

Smits, Stanley J. (2004). **Disability and employment in the USA: The quest for best practices.** *Disability & Society*, 19(6), 647-662.

NARIC Accession Number: J48445

ABSTRACT: This paper documents the progress to date in the development of infrastructure and services supporting the employment of people with disabilities. It presents the results of a study of best practices found in state vocational rehabilitation agencies and One-Stop centers. Several unresolved issues are discussed and the paper concludes by urging greater involvement by people with disabilities to help resolve existing issues and improve services by identifying and promoting the adoption of best practices.

Surdick, Renee S., Pierson, April, Menz, Frederick E., Hagen-Foley, Debra L., & Ussif, Al-Amin. (2004). **Rehabilitation industry benchmarks and new approaches for the future.**

NARIC Accession Number: O16395

ABSTRACT: Article presents findings from research conducted at 64 community rehabilitation programs (CRPs) serving people with disabilities. This data is presented as evidence-based industry benchmarks and provides essential information about the populations served, rehabilitation service processes used, and employment outcomes achieved. Suggestions are offered for applying these benchmarks to organizational effectiveness and examples are provided of approaches used by CRPs across the country.

2003

Durand, Marie-Jose, Vachon, Brigitte, Loisel, Patrick, & Berthelette, Diane. (2003). **Constructing the program impact theory for an evidence-based work rehabilitation program for workers with low back pain.** *Work: A Journal of Prevention, Assessment, and Rehabilitation*, 21(3), 233-242.

NARIC Accession Number: J46663

ABSTRACT: Article describes the development of the program impact theory for a work rehabilitation program designed for subjects with low back pain. Program impact theory is a model of how a program is intended to work to achieve its expected outcomes. The model was developed using several strategies for data collection: unpublished documents analyses, scientific literature analyses, and interviews with various stakeholders, group discussions, and observation. The work rehabilitation program's goals and objectives were defined for the three dimensions of the model: the worker, the work environment, and the interaction between the worker and the work environment. Two program action mechanisms were identified to describe how the program achieved its goal.

Foley, Beth E., & Staples, Amy H. (2003). **Developing augmentative and alternative communication (AAC) and literacy interventions in a supported employment setting.** *Topics in Language Disorders*, 23(4), 325-343.

NARIC Accession Number: J46570

ABSTRACT: Article describes the development and implementation of an intervention program for adults with autism that incorporated evidence-based practices in augmentative and alternative communication and literacy. The program took place in a supported employment/sheltered workshop facility. Specific assessment and intervention strategies as well as general outcomes of the program are discussed. Three detailed case studies describe approaches used with participants who had emerging, beginning, and more advanced levels of communication and literacy skills.

Growick, Bruce. (2003). **The U.S. Department of Labor: Opens new office for individuals with disabilities: Hopes to be user friendly and useful.** *The Rehabilitation Professional*, 11(2), 24-25.

NARIC Accession Number: J45340

ABSTRACT: Announces the opening of the Office of Disability Employment Policy, a new office created specifically to address the employment needs of people with disabilities. Responsibilities include policy analysis, technical assistance, and development of best practices, as well as outreach, education, and constituent services. One of the first acts of this new office was to create the Employer Assistance Referral Network (EARN), a system for employers to assist rehabilitation professionals with job openings. Benefits and contact information for the EARN services are included.

Lamb, Peg. (2003). **The role of the vocational rehabilitation counselor in procuring technology to facilitate success in postsecondary education for youth with disabilities.** *Journal of Special Education Technology (JSET)*, 18(4), 53-64.

NARIC Accession Number: J47130

ABSTRACT: Article presents study conducted to identify best practices of vocational rehabilitation counselors who have successfully transitioned youth with disabilities to postsecondary education and employment. Data was obtained through interviews conducted with counselors and college students with disabilities about how counselor viewed their roles with the students in the transition process and what students identified as the most beneficial supports provided in completing their education and attaining employment. Findings regarding the use of rehabilitation resources in non-traditional ways to overcome barriers to transition are reported in the form of case studies.

2002

Strobel, Wendy, Revell, Grant, & Wehman, Paul (Eds.) (2002). **Supported employment best practices fact sheet.**

NARIC Accession Number: O15442.

ABSTRACT: Fact sheet identifies a number of best practices in supported employment that have effectively assisted people with disabilities in finding and maintaining competitive employment. Best practices discussed include helping consumers to identify career goals, developing a customer profile, finding the right job, providing job site training and support, and providing ongoing, long-term support. Ten indicators of

the success of these best practices are outlined.

2001

Bond, G.R., Becker, D.R., Drake, R.E., Rapp, C.A., Meisler, N., Lehman, A.F., Bell, M.D., & Blyler, C.R. (2001). **Implementing supported employment as an evidence-based practice.** *Psychiatric Services*, 52(3), 313-322.

NARIC Accession Number: J41610

ABSTRACT: Article providing stakeholders with an overview of supported employment for persons with psychiatric disabilities. The article defines supported employment, summarizes the evidence for its effectiveness, and discusses implementation issues, including availability, barriers, and strategies.

Green, J. Howard, & Brooke, Valerie. (2001). **Recruiting and retaining the best from America's largest untapped talent pool.** *Journal of Vocational Rehabilitation*, 16(2), 83-88.

NARIC Accession Number: J44787

ABSTRACT: Article discusses reasons why businesses should include people with disabilities in the workplace. Authors describe employers' attitudes toward diversity and include suggestions made by human resource personnel regarding issues related to recruiting, hiring, accommodating, and promoting people with disabilities.

Holzberg, E. (2001). **The best practice for gaining and maintaining employment for individuals with traumatic brain injury.** *Work*, 16(3), 245-258.

NARIC Accession Number: J42549

ABSTRACT: Article reviewing the literature on vocational rehabilitation programs for persons with traumatic brain injury (TBI), including holistic cognitive rehabilitation, school to work transition programs, and supported employment. Factors affecting employment reentry and maintenance by persons with TBI are discussed, and best practices are identified based on the literature review.

Lamb, Peg. (2001). **Findings brief #21: The role of the rehabilitation counselor in transitioning youth with disabilities to postsecondary education and employment.**

NARIC Accession Number: O14995

ABSTRACT: Discusses preliminary findings of study conducted to identify best practices of rehabilitation counselors who have successfully transitioned youth with disabilities to postsecondary education and employment. Data was obtained through interviews conducted with rehabilitation counselors, special education teachers/transition specialists, and college students with disabilities. Findings are reported in the form of case studies.

Miller, J. (2001). **Rehabilitation leadership education and training: Impact on succession planning.** *Journal of Rehabilitation Administration*, 25(2), 99-105.

NARIC Accession Number: J42708

ABSTRACT: Article on leadership training and education in the public vocational rehabilitation program. Topics include reasons for doing leadership training, its outcomes and benefits, and the role of leadership training as part of a succession plan. Best practices and current practices at the national level are identified.

Voit, S. (2001). **Intervention options: Participation in work activities for people with schizophrenia.** *Work*, 16(2), 139-151.

NARIC Accession Number: J42274

ABSTRACT: Article reviewing research on vocational rehabilitation (VR) intervention for people with psychiatric disability, in order to identify best practices for obtaining and maintaining participation in work activities by persons with schizophrenia. Sixteen studies were reviewed, including seven focused solely on persons with schizophrenia. Results indicate that there exist a variety of VR intervention methods that may be effective for persons with schizophrenia. The most effective programs were those that had a client-centered approach and enabled the client to play an active role in his or her own vocational rehabilitation.

2000

Bishop, M., Tschopp, M.K., & Mulvihill, M. (2000). **Multiple sclerosis and epilepsy: Vocational aspects and the best rehabilitation practices.** *Journal of Rehabilitation*, 66(2), 50-55.

NARIC Accession Number: J39505

ABSTRACT: Article discussing vocational aspects of multiple sclerosis and epilepsy, including issues of vo-

ational assessment and job retention, and vocational rehabilitation best practices in relation to these issues.

Brooke, Valerie, Green, Howard, O'Brien, Dan, White, Byron, & Armstrong, Amy. (2000). **Supported employment: It's working in Alabama.** *Journal of Vocational Rehabilitation*, 14(3), 163-171.

NARIC Accession Number: J44170

ABSTRACT: Article describes changes made by the state of Alabama to improve the quality of supported employment services for individuals with significant disabilities. The changes include a new payment system that compensates employment services providers based on outcomes achieved by the new employee in competitive employment. Also, a new personnel training certificate program as developed that integrates the new payment system with best practices in supported employment using an employee-directed approach. Participant training data and preliminary outcomes illustrate the success of the project.

1999

(1999). *Issue brief in independent living and disability policy.*

NARIC Accession Number: O13157

ABSTRACT: Series of briefs on policy issues affecting people with disabilities and the progress of the independent living (IL)/disability rights movement. Each brief presents research results on a particular topic. V1, N1 (Winter 1999): "Collaboration between publicly-funded rehabilitation programs and community-based independent living centers" presents preliminary results from a study of best practices and exemplary collaborations between Independent Living Centers and vocational rehabilitation (VR) agencies.

Dew, D.W., Lucas, L.H., & Tomlinson, P.A. (1999). **Serving individuals who are low-functioning deaf: 25th Institute on Rehabilitation Issues.**

NARIC Accession Number: O13354

ABSTRACT: Volume on vocational rehabilitation (VR) services for persons who are low-functioning deaf (LFD), highlighting best practices and new approaches. Topics include: identification and assessment of LFD clients; the role of service delivery systems in work transition for LFD youth; the team approach to achieving employment outcomes; management of VR person-

nel, with attention to the need for qualified staff to serve persons who are LFD; and evaluating services in the state-federal VR program.

Marini, I., Stebnicki, MA (1999). **Social Security Administration's Alternative Provider program: What can rehabilitation administrators expect?**

Journal of Rehabilitation Administration, 23(1), 31-41.

NARIC Accession Number: J38073

ABSTRACT: Study examining the experience of alternative providers under the Social Security Administration's Alternative Provider (AP) program, in which private vendors are contracted to provide vocational rehabilitation and return-to-work services to SSDI and SSI recipients. Data are from 11 responses to a survey of 50 APs. Participants were asked: number of beneficiaries contacted; types of disabilities; reasons cited by beneficiaries for not participating in the return to work program; what proportion of beneficiaries the AP believed to be "too disabled to work"; how many beneficiaries had signed an IWRP; how many had returned to work; successful strategies used (best practices); problems and concerns; and suggestions for improving the program. Responses indicate that no recipient served by any of the respondents had returned to work. Problems identified and suggestions for improvement are discussed.

Sutton, B., & Walsh, P.N. (1999). **Inclusion International's Open Project on inclusive employment.** *Journal of Vocational Rehabilitation*, 12(3), 195-198.

NARIC Accession Number: J37885

ABSTRACT: Article reviewing Inclusion International's Open Project Group 4 (OPG 4), "Models and good practice of inclusive employment." OPG 4 was a project aimed at examining national policies and good practice models related to inclusive employment of persons with intellectual impairments/developmental disabilities. Summarizes data from 52 organizations or individuals in countries around the world concerning opportunities, national policies and laws, and best practices related to employment of adults with developmental disabilities. Themes emerging from this cross-cultural survey are identified. OPG 4 was largely supported by Inclusion International members in Argentina, Australia, Canada, India, Ireland, and New Zealand.

1998

Brooke, V., Revell, G., & Green, H. (1998). **Long-term supports using an employee-directed approach to supported employment.** *Journal of Rehabilitation*, 64(2), 38-45.

NARIC Accession Number: J35208

ABSTRACT: Article about best practices in employee-directed long-term supported employment. Describes seven focal points to guide the employment specialist in using long-term supports to assist the employee in reaching personal career goals. These focal points include: appraising employee and supervisor satisfaction; expanding job responsibilities; keeping career goals in mind; monitoring and coordinating supports; using Employee Assistance Programs; employment mentors; and funding support and services. Also describes a number of implementation strategies, and presents a case study.

Griffin, C. (1998). **Job carving as a job development strategy.** In D. DiLeo & D. Langton (Eds.), *Facing the future: Best practices in supported employment*, pp. 36-38.

NARIC Accession Number: J35248

ABSTRACT: Chapter in a book on best practices in supported employment, focusing on job carving as a job development strategy. Job carving is defined as analyzing work duties at a job location and identifying specific tasks that might be assigned to an employee with severe disabilities. The author describes three cases of successful job carving, illustrating different approaches to job site research.

Griffin, C. (1998). **Time and a studied approach required of natural job supports.** In D. DiLeo & D. Langton (Eds.), *Facing the future: Best practices in supported employment*, pp. 57-59.

NARIC Accession Number: J35249

ABSTRACT: Chapter from a book on best practices in supported employment, focusing on natural job supports. The author discusses steps in the development and utilization of natural job supports, and warns against expecting immediate gratification through their use.

Sample, P.L. (1998). **Post-school outcomes for students with significant emotional disturbance following best-practice transition services.** *Behavioral Disorders*, 23(4), 231-242.

NARIC Accession Number: J35510

ABSTRACT: Article reporting on a study to determine whether the use of transition best practices in the educational program of students with significant emotional disturbance is predictive of successful post-school outcomes for the students (i.e., employment and community adjustment). Data are from telephone and in-person interviews with 30 (57 percent) of 53 former secondary level students who participated in supported employment and entrepreneurial education transition grant projects between 1989 and 1994. Predictor variables were six best practices: vocational instruction, parent involvement, interagency collaboration and service delivery, individual plans and planning, paid work experience, and social skills instruction. Students were interviewed at 6 months, 12 months, and 24 months post-school about employment, post-secondary education, living situation, finances, leisure, and citizenship (i.e., voting, volunteering, and membership in groups). It was found that students out of school for six months who had been employed for long periods of time while in school had higher rates of employment than those who had not worked. Students out of school for one year whose parents were actively involved in their educational programs were more likely than their peers with uninvolved parents to have a successful community adjustment.

Shafer, M.S., Middaugh, A., Rubin, M., & Jones, R. (1998). **Career recovery: Best practices in the vocational rehabilitation of persons with serious mental illness.**

NARIC Accession Number: R08252

ABSTRACT: Booklet covers the best practices on various topics in vocational rehabilitation related to people with serious psychiatric disabilities. Topics include: consumer involvement, interagency collaboration, vocational assessment, job development, supported education, supported employment, transitional employment, work readiness, and work adjustment programs.

Full-text copies of these documents may be available through NARIC's document delivery service. To order any of the documents listed above, note the accession number and call an information specialist at 800/346-2742. There is a charge of cents for copying and shipping with a \$5 minimum on all orders.

Document from the Education Resource Information Center (ERIC) search at www.eric.ed.gov are listed below:

2006

Cavanaugh, Brenda S., Giesen, J. Martin, & Steinman, Bernard A. (2006). **Contextual Effects of Race or Ethnicity on Acceptance for Vocational Rehabilitation of Consumers Who Are Legally Blind.** *Journal of Visual Impairment & Blindness*, 100(7), 425-436.

ERIC #: EJ740866

ABSTRACT: Race or ethnicity, demographic, and disability factors were investigated as predictors of vocational rehabilitation acceptance. Severity of disability was the strongest predictor, followed by education, a secondary disability, race or ethnicity, and age at the time of application; gender was not significant. Acceptance rates differed with specific race or ethnicity and influence of control variables. Implications for policy and research are discussed. *This document is indexed in REHABDATA under NARIC Accession Number J50986.*

Herbert, James T., & Trusty, Jerry. (2006). **Clinical Supervision Practices and Satisfaction within the Public Vocational Rehabilitation Program.** *Rehabilitation Counseling Bulletin*, 49(2), 66-80.

ERIC #: EJ722350 ABSTRACT: Rehabilitation counselors and supervisors affiliated with a state vocational rehabilitation program were surveyed to assess supervisor practices and satisfaction when providing or receiving supervision. Results indicated general satisfaction with both administrative and clinical supervision provided or received. Although counselors and supervisors were less satisfied with clinical supervision as compared with administrative supervision, they perceived both the degree to which supervisors provide support and encouragement to counselors and the emphasis on promoting counselors' understanding of their clients similarly. Supervision relies on counselor self-report of counseling sessions more so than any other supervisory method. Individual supervision is used almost exclusively and on average lasts 20 min each month. Supervisors tend to adopt a consultant role more than administrator, counselor, evaluator, or teacher roles. Multiple regression analysis indicated that gender, frequency of supervision, and a supervisory consultant role were predictors of satisfaction with clinical

supervision. Implications for rehabilitation counseling practice and research are examined. *This document is indexed in REHABDATA under NARIC Accession Number J50400.*

2003

Luecking, Richard, & Gramlich, Meredith. (2003). **Quality Work-Based Learning and Postschool Employment Success.** *Issue Brief*

ERIC #: ED482637

ABSTRACT: This brief highlights the benefits of work-based learning for students with disabilities, what constitutes quality work-based learning, and selected evidence-based models of work-based learning. Benefits to students include providing them with the opportunity to identify career interests, skills, and abilities, explore career goals, develop employability skills, and gain work experience. Characteristics of quality work-based programs are listed and include clear program goals; clear roles and responsibilities for work site supervisors, mentors, teachers, support personnel, and other partners; training plans that specify learning goals tailored to individual students with specific outcomes connected to student learning; convenient links among students, schools, and employers; on-the-job learning; range of work-based learning opportunities; mentor(s) at work site; clear expectations and feedback to assess progress toward goals; assessments to identify skills, interests, and support needs; reinforcement of work-based learning outside of work; and appropriate academic, social, and administrative support for students, employers, and all partners. Successful models of work-based learning programs are highlighted, including the "High School/High Tech" model and the "Bridges... from School to Work" program. The issue concludes with a list of basic responsibilities of students, teachers, and employers that contribute to the effectiveness of work-based learning experiences.

2000

Bartik, Timothy J., & Hollenbeck, Kevin. (2000). **The Role of Public Policy in Skills Development of Black Workers in the 21st Century.** *Upjohn Institute Staff Working Paper*.

ERIC #: ED446253

ABSTRACT: This paper discusses the role of public policy in the skills development system of the United States. It further examines the implications of that policy for the skill development and career progression of

black workers. The paper describes the current “system” for skills development as a two-tiered system composed of (1) the “first chance” or conventional system, which allows individuals to proceed through an extensive public elementary, secondary, and postsecondary educational sector supplemented by private educational institutions and is followed by employer-provided job training and work experience, and (2) the “second chance” system for individuals who do not successfully transverse the first chance system, which includes public job training programs, public assistance, rehabilitation programs for offenders, and educational remediation. The paper considers the rationale for public policy intervention in the skills development process and then reviews public policy at the federal, state, and local levels that fosters skills development. Next, the paper reviews recent policy demonstrations in the area of skills development. The review of the evaluative evidence leads to several general “best practice” principles about content, delivery mechanisms, and administrative characteristics. The last section reviews how well federal Workforce Investment Act programs are likely to fare against the best practices criteria.

1999

Cozzens, Gary, Dowdy, Carol A., & Smith, Tom E.C. (1999). **Adult Agencies: Linkages for Adolescents in Transition.** *PRO-ED Series on Transition.* ERIC #: ED432094

ABSTRACT: This book is intended to be a practical reference for accessing agencies that provide transition services for students with disabilities after they exit school and for including those agencies in the transition planning process while the student is still in public school. Emphasis throughout is on interagency collaboration and the various available services. Following an overview chapter, each chapter focuses on a different agency that may provide transition support. Each chapter begins by identifying the law that mandates that agency’s participation in the transition process and the agency’s definition of a disability. Each chapter also includes suggested strategies for dealing with the specific agency as well as some best practices used throughout the United States. Chapters discuss the following types of agencies and programs: (1) state departments of education, (2) vocational rehabilitation, (3) the Social Security Administration, (4) mental health, (5) developmental disabilities, (6) state departments of la-

bor, and (7) postsecondary education. The final chapter discusses interagency agreements, noting the importance of addressing agency responsibilities, referral procedures, and guidelines for accessing and exchanging tests, records, and information. Two appendices offer a sample interagency agreement and a list of national organizations and other resources.

Dew, Donald W., Ed. (1999). **Serving Individuals Who Are Low-Functioning Deaf.** *Report from the Study Group, 25th Institute on Rehabilitation Issues, 1999.*

ERIC #: ED447639

ABSTRACT: This report is the outcome of study group that investigated best practices for serving individuals who are deaf and low functioning. It is designed to help State Vocational Rehabilitation (VR) Agencies assist individuals with disabilities in securing competitive employment and is meant to be a source for innovative ideas for program development and a tool for use in training of general VR counselors as well as rehabilitation counselors for individuals with deafness. Chapter one frames the areas of consideration when serving individuals who are deaf and low functioning, including education, family, rehabilitation, and environment. Chapter two discusses methods of identifying and assessing persons who are low functioning deaf. Chapter three describes the importance of school-to-work transition and the roles of family, education, and other service delivery systems throughout the process. Chapter four advocates the team approach in achieving employment outcomes. Chapter five describes the critical need for qualified staff to serve persons who are deaf and low functioning. The final chapter examines the need for agency assessment of the quality of services provided to this population. Appendices include an explanation of the Workforce Investment Act of 1998, outreach and supported employment, a communication assessment case study, and rehabilitation Web sites. *This document is indexed in REHABDATA under NARIC Accession Number O13354.*

1997

Brooke, Valerie, Ed. (1997). **Supported Employment Handbook: A Customer-Driven Approach for Persons with Significant Disabilities.**

ERIC #: ED408736

ABSTRACT: This manual provides training information for implementing supported employment by using

a customer-driven approach. Chapter one, "Supported Employment: A Customer-Driven Approach" (Valerie Brooke and others), describes current best practices, a new customer-driven approach to supported employment, and the role of the employment specialist. Chapter two, "Organizational Marketing" (Amy Armstrong and others), discusses developing and implementing a marketing strategy for supported employment programs. The following chapter, "Customer Profile" (Wendy Parent and others), describes the process of developing a customer profile to assist individuals in finding a job. Chapter four, "Job Development: The Path to Careers" (Karen Flippo and others), discusses techniques for increasing customer involvement in job development, developing business partnerships, crafting the job search plan, job analysis, and accommodations. The next chapter, "Employment Selection" (J. Michael Barcus and others), describes how to assist a customer in applying for a job and job interviewing, and activities that need to be coordinated prior to a customer's first day of work. Chapter six, "Job Site Training" (Katherine Inge), discusses job duty and task analysis, natural supports and cues, instructional strategies, self-management, job site modifications, and fading from the job site. Expanding job responsibilities, monitoring and coordinating of supports, employee assistance programs, and funding supports and services are covered in chapter seven, "Long Term Supports" (Valerie Brooke and others). The final chapter, "Quality Supported Employment Services" (Howard Green and others), addresses the importance of assessing the quality of supported employment programs and the purpose of quality indicators. Each chapter includes case studies, related blank forms, and specific references. *This document is indexed in REHABDATA under NARIC Accession Number O12252.*

Ely-Pagan, Lucy, Haugh, Bob, Grover, John, Lauria, Nancy, & McKenna, Kerry. (1997). ***School-to-Work Transition: Developing Collaborative Partnerships for the Inclusion of Students with Disabilities at the State, County and Local Level.***

ERIC #: ED420477

ABSTRACT: The Individuals with Disabilities Education Act (IDEA) mandates transition services to prepare students with disabilities to live and work in the community as adults; the School-to-Work (STW) Opportunities Act requires that all students, including those with disabilities, have access to all STW activities. This

paper provides an overview of the collaborative efforts in New York and New Jersey to meet these two legislative mandates. In New York, state agencies work closely together on all initiatives. Transition coordination sites established to assist school districts with IDEA requirements now provide technical assistance to local STW partnerships to ensure inclusion of students with disabilities in STW activities. The New Jersey Partnership for Transition from School to Adult Life project aims to establish a statewide coordinated system reprograms and services that facilitate the transition of students with disabilities to adult life. Activities are outlined for each of the project's five objectives: reviewing and revising state policies related to transition in the areas of STW initiative, workforce development, education, and vocational rehabilitation; supporting county-based consortia to coordinate and expand transition services; developing self-determination training and related activities for parents, students, and professionals; increasing parent and family access to transition information; and providing training, technical assistance, and information to stakeholders to increase knowledge of best practices. Training materials and publications are listed.

McAfee, James K., & McNaughton, David. (1997). ***Transitional Outcomes: Job Satisfaction of Workers with Disabilities Part Two: Satisfaction with Promotions, Pay, Co-Workers, Supervision, and Work Conditions.*** *Journal of Vocational Rehabilitation*, 8(3), 243-51.

ERIC #: EJ566253

ABSTRACT: Satisfaction with pay, promotions, co-workers, supervision and work conditions of 236 workers with disabilities was examined. Analysis indicated strong dissatisfaction with pay and mild dissatisfaction with promotions. Participants in transition programs which incorporated best practices were more satisfied with their work and with the social contexts of their employment. *This document is indexed in REHABDATA under NARIC Accession Number J33784.*

Sikka, Anjoo, & Stephens, Barry C. (1997). ***Intervention Practices in the Retention of Competitive Employment among Individuals Who Are Blind or Visually Impaired.***

ERIC #: ED407821

ABSTRACT: This report discusses the results of a national study of 89 rehabilitation counselors that inves-

tigated the methods by which an individual could retain competitive employment after the onset of a significant vision loss. The purpose of the study was to identify and describe strategies that contribute to successful job retention and identify best rehabilitation practices in regard to job retention for the visually impaired. Rehabilitation counselors were interviewed who described 189 cases of which they had first-hand knowledge. The study found that as a result of retention efforts among the 189 cases reported, 88 percent of the workers with visual impairments were able to remain in their existing job setting, two percent were able to obtain a promotion, 25 percent experienced an increase in salary, and 67 percent had no change in salary. Data also indicate that strategies involving job site modifications were the most frequently used by counselors, particularly modifications related to access and safety issues such as changes in lighting, enlarged print, and low technology adaptations in general. Recommendations for interventions in job retention for individuals who are blind or visually impaired are made for five primary areas: technology, communication, networking, assessment, and timeliness of response to a request for intervention. *This document is indexed in REHABDATA under NARIC Accession Number O12196.*

Document from the National Library of Medicine PubMed search at www.pubmed.com are listed below:

2006

Becker, D.R., Xie, H., McHugo, G.J., Halliday, J., & Martinez, R.A. (2006). **What predicts supported employment program outcomes?** *Community Mental Health Journal*, 42(3), 303-13.

PMID #: 16532378

ABSTRACT: Numerous state systems and local mental health and vocational rehabilitation programs are currently attempting to implement supported employment. This cross-sectional survey of 26 mental health agencies, partnering with federal-state vocational rehabilitation, identified differences in access to supported employment services and rates of competitive employment (efficiency) as well as predictors of access and efficiency. Access varied from 2 to 100 percent and was related to the percentage of supported employment specialists per consumers with serious

mental illness served by the mental health agency (funding). Efficiency varied from 7 to 75 percent and was related to implementation of the critical components of evidence-based supported employment and to the local unemployment rate. To help mental health clients achieve their employment goals, state systems and local programs should address consolidation of resources in supported employment and the quality of implementation of supported employment.

Drake, R.E., Becker, D.R., Goldman, H.H., & Martinez R.A. (2006). **Best practices: the Johnson & Johnson—Dartmouth community mental health program: disseminating evidence-based practice.** *Psychiatric Services*, 57(3), 302-4.

PMID #: 16524985

ABSTRACT: This column describes a private-public-academic collaboration in six states and the District of Columbia designed to provide evidence-based supported employment for persons with psychiatric disabilities by using best practices for program implementation. Dissemination strategies included collaborative state-level administrative oversight, longitudinal training based on established fidelity criteria, outcome-based supervision, problem solving by local experts, and selection of intervention sites on the basis of their motivation to participate. The number of clients served at participating sites increased steadily over 11 quarters, and the proportion of clients competitively employed stayed consistently over 40 percent. The project successfully combined industry's emphasis on outcomes with academia's emphasis on research-based interventions to enhance public services.

Hart, T., Dijkers, M., Fraser, R., Cicerone, K., Bogner, J.A., Whyte, J., Malec, J., & Waldron, B. (2006). **Vocational services for traumatic brain injury: treatment definition and diversity within model systems of care.** *The Journal of Head Trauma Rehabilitation*, 21(6), 467-82.

PMID #: 17122678

ABSTRACT: OBJECTIVE: To examine characteristics and diversity among vocational treatment services in model programs for traumatic brain injury (TBI) rehabilitation.

SETTING: Vocational or post-acute treatment components of 16 TBI Model System

(TBIMS) centers. PARTICIPANTS: Vocational director/coordinator from each TBIMS surveyed in semi-

structured phone interview. MEASURE: Survey of vocational services for people with TBI, with about 100 closed and open-ended questions on vocational assessments; pre- and post-job placement treatments; program philosophies; funding; and integration of cognitive, behavioral, family, and medical rehabilitation interventions. RESULTS: Great diversity was found among the vocational services of the 16 TBIMS. Programs fell into three clusters emphasizing medical rehabilitation services, supported employment, or a combination of these with an emphasis on case management. Job coaching was identified as a key intervention, but there was great variability in intensity, availability, and funding of coaching services. CONCLUSION: Diversity in vocational services appears related to funding differences and “parallel evolution” rather than strong treatment philosophy or scientific evidence base. Multi-center research on effectiveness or establishment of best practices in vocational rehabilitation after TBI must deal with substantial existing variability in treatment models and specific interventions, and must examine the relationship of treatment variations to case-mix factors.

Ikebuchi, E. (2006). **Support of working life of persons with schizophrenia.** *Psychiatria et Neurologia Japonica*, 108(5), 436-48. (Article in Japanese).

PMID #: 16869391

ABSTRACT: The aim of this study was to review the theories and methodologies for helping persons with schizophrenia to gain employment because working is one of the important factors for normalizing lives. The rate of employment among schizophrenics is determined by several factors including the unemployment rate of the nation, the date, sampling method and so on. However, persons with schizophrenia generally have had a lower employment rate around 20 percent, calculated as the rate of competitive employment compared to other psychiatric disorders both in the U.S. and Japan. Because traditional vocational rehabilitation did not lead to a good vocational outcome, supported employment has been developed over the last 20 years. Many studies clarified that supported employment led to a better outcome in the competitive employment, especially “Individual Placement and Support (IPS)”. The systematic review of the Cochrane database, the Treatment Guideline of Schizophrenia of APA, and the PORT Treatment Guideline of Schizophrenia recommended the use of supported employment. Supplementary programs such as cognitive re-

habilitation have been recently developed because psychiatric symptoms and social functioning were not improved and income and tenure of employment were not sufficient, even with supported employment. Cognitive functioning, attention, learning, memory, and executive functioning were verified to have influences on vocational functioning in many studies, and cognitive rehabilitation with supported employment was verified to improve vocational outcome. Six evidence based technologies of vocational rehabilitation were discussed. Vocational rehabilitation centers, day treatment centers aiming at competitive employment, and NPOs for employment of disabled persons are recommended as good clinical models of evidence based vocational rehabilitation. Professionals of the same agency in these models help people concerning both working and independent living, which is one of the important principles of IPS. Finally, we discussed several issues about methodologies and social framework which need further research and social agreement.

Killackey, E.J., Jackson, H.J., Gleeson, J., Hickie, I.B., & McGorry, P.D. (2006). **Exciting career opportunity beckons! Early intervention and vocational rehabilitation in first-episode psychosis: employing cautious optimism.** *The Australian and New Zealand Journal of Psychiatry*, 40(11-12), 951-62.

PMID #: 17054563

ABSTRACT: OBJECTIVE: While there are now effective interventions for the symptoms of psychosis and schizophrenia, treatment for the functional domains of these illnesses has received less attention. A key area affected by psychotic illness is vocational functioning. This area is currently of interest to clinicians, policy-makers, politicians and patients. This paper reviews several forms of vocational intervention practiced over the years and highlights the issues around adopting an early intervention approach towards vocational rehabilitation. The paper has four aims: (1) to consider some of the consequences of unemployment for those with psychotic illnesses; (2) to review methods that have been used to address unemployment among the mentally ill; (3) to highlight the importance of vocational development at a developmentally appropriate life stage; and (4) to consider the application of evidence-based vocational rehabilitation to those with first-episode psychosis. METHOD: An initial broad literature search was conducted using PsychInfo and Medline databases. Further narrower searches were conducted electronically where indicated. Finally, some articles

were sourced through manual searches of relevant journals. RESULTS: People with psychotic illness have a high rate of unemployment at the outset of their illness which tends to worsen over time. This is complicated by systemic factors such as the structure of the welfare system. Approaches for assisting people with mental illness return to work have evolved over the history of psychiatry. There now exists an evidence-based method of intervention. To date this has not been trialed in a systematic way with people in the early stages of psychotic illness. CONCLUSIONS: There is cause for cautious optimism in the vocational recovery of people with psychotic illnesses. Limited evidence exists that the individual placement and support approach developed with chronic populations is very effective in early episode patients. There are a number of challenges to implementing vocational intervention in first-episode psychosis. Overcoming these obstacles will require the cooperation of clinicians, those with illness, policy-makers and politicians. However, the potential economic, health and personal gains, as well as current and future research should provide sufficient motivation to overcome these barriers.

King, R., Waghorn, G., Lloyd, C., McLeod, P., McMah, T., & Leong, C. (2006). **Enhancing employment services for people with severe mental illness: the challenge of the Australian service environment.** *The Australian and New Zealand Journal of Psychiatry*, 40(5), 471-7.

PMID #: 16683974

ABSTRACT: OBJECTIVES: Comparatively few people with severe mental illness are employed despite evidence that many people within this group wish to obtain, can obtain and sustain employment, and that employment can contribute to recovery. This investigation aimed to: (1) describe the current policy and service environment within which people with severe mental illness receive employment services; (2) identify evidence-based practices that improve employment outcomes for people with severe mental illness; (3) determine the extent to which the current Australian policy environment is consistent with the implementation of evidence-based employment services for people with severe mental illness; and (4) identify methods and priorities for enhancing employment services for Australians with severe mental illness through implementation of evidence-based practices. METHOD: Current Australian practices were identified, having reference

to policy and legal documents, funding body requirements and anecdotal reports. Evidence-based employment services for people with severe mental illness were identified through examination of published reviews and the results of recent controlled trials. RESULTS: Current policy settings support the provision of employment services for people with severe mental illness separate from clinical services. Recent studies have identified integration of clinical and employment services as a major factor in the effectiveness of employment services. This is usually achieved through co-location of employment and mental health services. CONCLUSIONS: Optimal evidence-based employment services are needed by Australians with severe mental illness. Providing optimal services is a challenge in the current policy environment. Service integration may be achieved through enhanced intersectoral links between employment and mental health service providers as well as by co-locating employment specialists within a mental health care setting.

Li, E.P., Li-Tsang, C.W., Lee, T.K., Lee, G.W., & Lam, E.C. (2006). **Vocational rehabilitation program for persons with occupational deafness.** *Journal of Occupational Rehabilitation*, 16(4), 503-12.

PMID #: 17103325

ABSTRACT: INTRODUCTION: A pilot return-to-work program based on the concept of work readiness and three-month job placement with support was developed to enable people with occupational deafness to return to the workforce. METHODS: A convenient sample of six male persons with occupational deafness completed the program. A Pretest-Posttest Single Group Design was utilized to measure the program outcome. Two instruments: the Chinese version of SF-36 Health Assessment Questionnaire and the Chinese version of Lam's Assessment of Stage of employment readiness were used to measure the participants' health status and their work readiness respectively. RESULTS: The preliminary findings indicated that the six participants showed improvement in their general health and work readiness. The employment outcome indicated that three of the participants had secured a job and another two participants had attained job offers. CONCLUSION: This pilot study suggested that a systematic vocational rehabilitation program can facilitate persons with occupational deafness to return to the workforce. Further research using a controlled investigation with larger sample size is recommended for evidence-based practice even though the results of this return-to-work program appear promising.

2005

Corbiere, M., Bond, G.R., Goldner, E.M., Ptasiński, T. (2005). **Brief reports: The fidelity of supported employment implementation in Canada and the United States.** *Psychiatric Services, 56*(11) 1444-7.

PMID #: 16282266

ABSTRACT: Supported employment has been documented in the United States as an evidence-based practice that helps people with severe mental illness obtain and maintain employment. The evidence is strongest for the programs that follow the individual placement and support model. This brief report examines the degree to which supported employment programs in British Columbia, Canada, are similar to those in the United States. Data from the Quality of Supported Employment Implementation Scale were compiled in 2003 for ten supported employment programs from vocational agencies in British Columbia and were compared with data from 106 supported employment programs and 38 non-supported employment programs in the United States. Overall, the Canadian supported employment programs that followed the individual placement and support model had the highest fidelity.

Gowdy, E.A., Carlson, L.S., & Rapp, C.A. (2005). **Organizational factors differentiating high performing from low performing supported employment programs.** *Psychiatric Rehabilitation Journal, 28*(2), 150-6.

PMID #: 15605751

ABSTRACT: This study sought to uncover the factors that contributed to differences in competitive employment rates for adults with severe mental illness between high and low performing programs. The five programs with the highest competitive employment rates were compared to the four lowest performing programs. Using qualitative methods, researchers used site visits and in-depth interviews with program directors and supervisors, consumers, and front line staff. Using a combination of constant comparative methods and content analysis, the study found notable and consistent differences between the two groups in administrative practices and the roles of case managers and therapists. The role of administration has been largely overlooked in the supported work literature yet it may be the administrator's efforts to shape an organizational culture that is the driving force behind the implementation of evidence-based structures and practices.

Mowbray CT, Collins ME, Bellamy CD, Megivern DA, Bybee D, Szilvagy S. (2005). **Supported education for adults with psychiatric disabilities: an innovation for social work and psychosocial rehabilitation practice.** *Social Work, 50*(1), 7-20.

PMID #: 15688676

ABSTRACT: With medications that improve cognition and advances in knowledge of successful rehabilitative approaches, adults with psychiatric disabilities are increasingly able to pursue desired personal and career goals in their communities. This article focuses on supported education (SEd) one of the newest psychosocial rehabilitation (PSR) models for adults with mental illness. The mission, principles, and service components of SEd are presented, reflecting its basis in PSR practice. Evidence of the effectiveness of supported education, based on research and evaluation studies, is provided. The authors conclude with a discussion of why PSR and SEd are important to social work and how social workers can effectively use this evidence-based practice to maximize opportunities for consumers with a mental illness.

Oldman, J., Thomson, L., Calsaferrri, K., Luke, A., & Bond, G.R. (2005). **A case report of the conversion of sheltered employment to evidence-based supported employment in Canada.** *Psychiatric Services, 56*(11), 1436-40.

PMID #: 16282264

ABSTRACT: This case report describes the transformation of a sheltered workshop program to a program that provides evidence-based supported employment services in partnership with five community treatment teams. Over a 15 year period, a Canadian nonprofit agency that provides employment services for persons with severe mental illness made a series of programmatic changes to increase the effectiveness of the services. The agency initially modified its facility-based sheltered workshop to include a pre-vocationally oriented work preparation program, later added brokered supported employment services, and finally completely transformed its organization by relocating its vocational rehabilitation counselors to five community mental health teams, in order to implement an evidence-based supported employment program that is based on the individual placement and support model. During the initial period in which the sheltered employment program was utilized, less than five percent of clients who were unemployed when they entered the workshop

achieved competitive employment annually. The annual competitive employment rate did not increase during the prevocational phase; it increased during the brokered supported employment phase but did not exceed 25 percent. By contrast, after shifting to evidence-based supported employment, 84 (50 percent) of 168 unemployed clients who received between six and 27 months of individual placement and support services achieved competitive employment. This article also documents the role of agency planning and commitment quality improvement in implementing change.

Rose, V.K., & Harris, E. (2005). **What employment programs should health services invest in for people with a psychiatric disability?** *Australian Health Review: a publication of the Australian Hospital Association*, 29(2), 185-8.

PMID #: 15865569

ABSTRACT: Employment has significant health benefits for people with a psychiatric disability, including improved mental health and wellbeing and a reduction in symptoms and rates of relapse. Systematic reviews show that supported employment is more effective than prevocational training in achieving open employment for this group. Health services should invest in developing partnerships and structures to ensure access to evidence-based supported employment programs for people with a psychiatric disability. We draw on exploratory research in south-west Sydney to discuss some of the challenges that a focus on employment presents for mental health services.

2004

Bond, G.R. (2004). **Supported employment: evidence for an evidence-based practice.** *Psychiatric Rehabilitation Journal*, 27(4), 345-59.

PMID #: 15222147

ABSTRACT: Supported employment for people with severe mental illnesses is an evidence-based practice, based on converging findings from four studies of the conversion of day treatment to supported employment and nine randomized controlled trials comparing supported employment to a variety of alternative approaches. These two lines of research suggest that between 40 percent and 60 percent of consumers enrolled in supported employment obtain competitive employment while less than 20 percent of similar consumers do so when not enrolled in supported employment. Consumers who hold competitive jobs for a sustained pe-

riod of time show benefits such as improved self-esteem and better symptom control, although by itself, enrollment in supported employment has no systematic impact on non-vocational outcomes, either on undesirable outcomes, such as ehospitalization, or on valued outcomes, such as improved quality of life. The psychiatric rehabilitation field has achieved consensus on a core set of principles of supported employment, although efforts continue to develop enhancements. A review of the evidence suggests strong support for four of seven principles of supported employment, while the evidence for the remaining three is relatively weak. Continued innovation and research on principles is recommended.

Henry, A.D., Lucca, A.M., Banks, S., Simon, L., & Page, S. (2004). **Inpatient hospitalizations and emergency service visits among participants in an Individual Placement and Support (IPS) model program.** *Mental Health Services Research*, 6(4), 227-37.

PMID #: 15588033

ABSTRACT: Supported employment (SE) is considered an "evidence-based" practice for people with serious mental illness. We examined inpatient hospitalizations and emergency service visits among clients in a SE program based on the Individual Placement and Support (IPS) model in comparison to a propensity score matched group of clients who did not participate in IPS. A significant interaction showed that only IPS/SE clients who were also high in regular mental health services had fewer hospitalizations and emergency service visits than matched controls. The interaction effect was moderate, even when we controlled for client functioning. These findings provide support for the integration of mental health and vocational rehabilitation services, a key feature of evidence-based SE services.

Latimer, E.A., Bush, P.W., Becker, D.R., Drake, R.E., & Bond, G.R. (2004). **The cost of high-fidelity supported employment programs for people with severe mental illness.** *Psychiatric Services*, 55(4), 401-6.

PMID #: 15067152

ABSTRACT: OBJECTIVE: This study determined the costs of evidence-based supported employment programs in real-world settings. METHODS: A convenience sample of 12 supported employment programs known to follow closely the principles of evidence-based supported employment was asked to provide de-

tailed information on program costs, use, and staffing. Program fidelity was assessed by using the Supported Employment Fidelity Scale. Cost and utilization data were analyzed in a comparable manner to yield direct and total costs per client served, per full-year-equivalent client, and per employment specialist. RESULTS: Usable data were obtained from seven programs in rural and urban locations in seven states: Indiana, Kansas, Massachusetts, New Hampshire, Oregon, Rhode Island, and Vermont. All programs received high fidelity ratings, ranging from 70 to the maximum value of 75. Annual direct costs per client served varied from dollars 860 in New Hampshire to dollars 2723 in Oregon, and direct costs per full-year-equivalent client varied from dollars 1423 in Massachusetts to dollars 6793 in Indiana. Direct costs per employment specialist did not show as much variation, ranging from dollars 37339 in Rhode Island to dollars 49603 in Massachusetts, with a mean of dollars 44082. Differences in cost per client arose in part from differences in rules for determining who is or is not considered to be on a program's caseload. By assuming a typical caseload of about 18 clients, it was estimated that the cost per full-year-equivalent client averaged dollars 2449 per year, ranging from dollars 2074 to dollars 2756. CONCLUSIONS: The results point to the need for greater uniformity in caseload measurement and help specify the costs of high-fidelity supported employment programs in real-world settings.

Morris, P., & Lloyd, C. (2004). **Vocational rehabilitation in psychiatry: a re-evaluation.** *The Australian and New Zealand Journal of Psychiatry*, 38(7), 490-4.

PMID #: 15255820

ABSTRACT: OBJECTIVE: To highlight the vocational gap in the provision of psychiatric rehabilitation, to outline the goals and conceptual framework of psychiatric rehabilitation, and to discuss rehabilitation interventions with specific reference to vocational rehabilitation and the evidence base for supported employment. CONCLUSIONS AND SERVICE IMPLICATIONS: Vocational psychiatric rehabilitation has been a neglected area of practice in Australian psychiatry.

Psychiatric treatment needs to adopt a more balanced approach in the provision of a range of services, including vocational rehabilitation, in order to improve long-term outcomes for people suffering from psychiatric disability. A vocational focus should be included in psychiatric rehabilitation and better integration between mental health services and vocational services needs to take place. Supported employment is an evidence-based practice that is designed to help people with psychiatric disabilities participate as much as possible in the competitive job market.

Salyers, M.P., Becker, D.R., Drake, R.E., Torrey, W.C., & Wyzik, P.F. (2004). **A ten-year follow-up of a supported employment program.** *Psychiatric Services*, 55(3), 302-8.

PMID #: 15001732

ABSTRACT: OBJECTIVE: Supported employment has steadily increased in prominence as an evidence-based mental health practice, and research shows that the service significantly improves employment outcomes over one to two years. The objective of this study was to examine the outcomes of supported employment ten years after an initial demonstration project. METHODS: The study group consisted of 36 clients who had participated in a supported employment program at one of two mental health centers in 1990 or 1992. Clients were interviewed ten years after program completion about their employment history, facilitators to their employment, and their perceptions of how working affected areas of their lives. RESULTS: Seventy-five percent of the participants worked beyond the initial study period, with 33 percent who worked at least five years during the ten-year period. Current and recent jobs tended to be competitive and long term; the average job tenure was 32 months. However, few clients made the transition to full-time employment with health benefits. Clients reported that employment led to substantial benefits in diverse areas, such as improvements in self-esteem, hope, relationships, and control of substance abuse. CONCLUSIONS: On the basis of this small sample, supported employment seems to be more effective over the long term, with benefits lasting beyond the first one to two years.

2003

Gowdy, E.L., Carlson, L.S., & Rapp, C.A. (2003). **Practices differentiating high-performing from low-performing supported employment programs.** *Psychiatric Rehabilitation Journal*, 26(3), 232-9.

PMID #: 12653445

ABSTRACT: This paper reports on a qualitative study designed to uncover the practices that differentiate programs producing high rates of competitive employment from those with low rates. The study found 13 differentiating practice factors in three areas: building consumer interest in working, getting a job, and maintaining a job. The congruence between these findings and current definitions of "best practice" is discussed.

Moll, S., Huff, J., & Detwiler, L. (2003). **Supported employment: evidence for a best practice model in psychosocial rehabilitation.** *Canadian Journal of Occupational Therapy*, 70(5), 298-310.

PMID #: 14753072

ABSTRACT: BACKGROUND: Traditional approaches to vocational rehabilitation in mental health settings have had only limited effectiveness in enabling clients to meet their employment goals. Within the last decade the individual Placement and Support Model (IPS) has emerged as an alternate, evidence-based approach to providing vocational services with individuals who have severe and persistent mental illness. METHOD AND SCOPE: This review of the literature critically examines research regarding the IPS model of supported employment then discusses implications of this research for occupational therapists. PRACTICE IMPLICATIONS: In order to enable clients to achieve their competitive employment goals, it is imperative that occupational therapists incorporate best practice models of supported employment. IPS is one model that appears to hold significant promise for occupational therapists and their clients.

Mueser, K.T., Torrey, W.C., Lynde, D., Singer, P., & Drake, R.E. (2003). **Implementing evidence-based practices for people with severe mental illness.** *Behavior Modification*, 27(3), 387-411.

PMID #: 12841590

ABSTRACT: Persons with severe mental illnesses (SMI) often lack access to effective treatments. The authors describe the Implementing Evidence-Based Practices (EBPs) Project, designed to increase access

for people with SMI to empirically supported interventions. The EBP Project aims to improve access through development of standardized implementation packages, created in collaboration with different stakeholders, including clinicians, consumers, family members, clinical supervisors, program leaders, and mental health authorities. The background and philosophy of the EBP Project are described, including the six EBPs identified for initial package development: collaborative psychopharmacology, assertive community treatment, family psycho-education, supported employment, illness management and recovery skills, and integrated dual disorders treatment. The components of the implementation packages are described as well as the planned phases of the project. Improving access to EBPs for consumers with SMI may enhance outcomes in a cost-effective manner, helping them pursue their personal recovery goals with the support of professionals, family, and friends.

2002

Travis, J. (2002). **Cross-disciplinary competency standards for work-related assessments: communicating the requirements for effective professional practice.** *Work*, 19(3), 269-80.

PMID #: 12547971

ABSTRACT: The purpose of this article is to introduce the cross-disciplinary competency standards for work-related assessments, why they are needed and how they have been developed in New South Wales (NSW). Cross-disciplinary competency standards communicate the benchmarks for effective performance of work-related assessments. They outline what is expected of rehabilitation professionals, including the ability to apply and transfer competence across different conditions and workplace contexts. Outcomes in occupational rehabilitation are affected by the efficacy of the work-related assessments performed, which is dependent upon competent, clinical decision-making by rehabilitation professionals. However, in Australia, work-related assessment practice is not governed by universally accepted competency standards or by any competency-based training/education and assessment system. To enhance professional practice, WorkCover NSW has developed cross-disciplinary competency standards for work-related assessments. The competencies provide (1) quality standards for professional workplace training and development, (2) benchmarks for assessing the competence of rehabilitation professionals, (3) a framework for evidence-based practice, (4) benchmarks for

measuring service quality and (5) “real world” learning outcomes and assessment criteria for professional education programs.

2001

Bond, G.R., Becker, D.R., Drake, R.E., Rapp, C.A., Meisler, N., Lehman, A.F., Bell, M.D., & Blyler, C.R. (2001). **Implementing supported employment as an evidence-based practice.** *Psychiatric Services*, 52(3), 313-22.

PMID #: 11239097

ABSTRACT: Supported employment for people with severe mental illness is an evidence-based practice, based on converging findings from eight randomized controlled trials and three quasi-experimental studies. The critical ingredients of supported employment have been well described, and a fidelity scale differentiates supported employment programs from other types of vocational services. The effectiveness of supported employment appears to be generalizable across a broad range of client characteristics and community settings. More research is needed on long-term outcomes and on cost-effectiveness. Access to supported employment programs remains a problem, despite their increasing use throughout the United States. The authors discuss barriers to implementation and strategies for overcoming them based on successful experiences in several states.

Documents from the Cochrane Database of Systematic Reviews search at www.thecochranelibrary.org are listed below:

2006

Nair, A., Turner-Stokes, L., & Tyerman, A. (2006). **Vocational rehabilitation for acquired brain injury in adults.** *Cochrane Database of Systematic Reviews: Protocols 2006, Issue 2, John Wiley & Sons, Ltd.*

Accession Number: CD006021

ABSTRACT: This is the protocol for a review and there is no abstract. The objectives are as follows: Specific questions that will be addressed in this review include: Does vocational rehabilitation enable adult survivors of ABI return to and stay in employment? What approaches are effective and in what setting? Does Vocational rehabilitation provide demonstrable cost-benefits?

2001













































Crowther, R., Marshall, M., Bond, G., & Huxley, P. (2001). **Vocational rehabilitation for people with severe mental illness.** *Cochrane Database of Systematic Reviews: Reviews 2001, Issue 2, John Wiley & Sons, Ltd.*

Accession Number: CD003080

ABSTRACT: BACKGROUND: Unemployment rates are high amongst people with severe mental illness, yet surveys show that most want to work. Vocational rehabilitation services exist to help mentally ill people find work. Traditionally, these services have offered a period of preparation (Pre-vocational Training), before trying to place clients in competitive (i.e. open) employment. More recently, some services have begun placing clients in competitive employment immediately whilst providing on-the-job support (Supported Employment). It is unclear which approach is most effective. OBJECTIVES: To assess the effects of Pre-vocational Training and Supported Employment (for people with severe mental illness) against each other and against standard care (in hospital or community). In addition, to assess the effects of: (a) special varieties of Pre-vocational Training (Clubhouse model) and Supported Employment (Individual Placement and Support model); and (b) techniques for enhancing either approach, for example payment or psychological intervention. SEARCH STRATEGY: Searches were undertaken of CINAHL (1982-1998), The Cochrane Library (Issue 2, 1999), EMBASE (1980-1998), MEDLINE (1966-1998) and PsycLIT (1887-1998). Reference lists of eligible studies and reviews were inspected and researchers in the field were approached to identify unpublished studies. SELECTION CRITERIA: Randomized controlled trials of approaches to vocational rehabilitation for people with severe mental illness. DATA COLLECTION AND ANALYSIS: Included trials were reliably selected by a team of two raters. Data were extracted separately by two reviewers and cross-checked. Authors of trials were contacted for additional information. Relative risks (RR) and 95 percent confidence intervals (CI) of homogeneous dichotomous data were calculated. A random effects model was used for heterogeneous dichotomous data. Continuous data were presented in tables (there were insufficient continuous data for formal meta-analysis). A sensitivity analysis was performed, excluding poorer quality trials. MAIN RESULTS: Eighteen randomized controlled trials of

reasonable quality were identified. The main finding was that on the primary outcome (number in competitive employment) Supported Employment was significantly more effective than Pre-vocational Training; for example, at 18 months 34 percent of people in Supported Employment were employed versus 12 percent in Pre-vocational Training (RR random effects (unemployment) 0.76 95 percent CI 0.64 to 0.89, NNT 4.5). Clients in Supported Employment also earned more and worked more hours per month than those in Pre-vocational Training. There was no evidence that Pre-vocational Training was more effective in helping clients to obtain competitive employment than standard community care. **AUTHORS' CONCLUSIONS:** Supported employment is more effective than Pre-vocational Training in helping severely mentally ill people to obtain competitive employment. There is no clear evidence that Pre-vocational Training is effective. **PLAIN LANGUAGE SUMMARY:** A majority of severely mentally ill people would like to work and there are compelling ethical, social and clinical reasons for helping them to achieve this goal. Pre-vocational Training and Supported Employment are two different approaches to helping severely mentally ill people obtain employment. The key principle of Pre-vocational Training is that a period of preparation is necessary before entering competitive employment. In contrast, the key principle of Supported Employment is that placement in competitive employment should occur as quickly as possible, followed by support and training on the job. This systematic review found that people who received Supported Employment were significantly more likely to be in competitive employment than those who received Pre-vocational Training (at 12 months 34 percent employed in Supported Employment compared with 12 percent in Pre-vocational Training).








Search Terms for Best Practices in Vocational Rehabilitation

-  Accommodation
-  Best Practices
-  Career Development
-  Case Management
-  Case Studies
-  Certification
-  Client-Counselor Relations
-  Clinical Management
-  Combined Modality Therapy
-  Community-Based Services
-  Competitive Employment
-  Consumers
-  Cooperative Behavior
-  Counseling Techniques/Education
-  Disabilities
-  Disability Studies
-  Education/Post-Secondary
-  Employer Attitudes
-  Employment/Programs/Re-entry/
Success
-  Evaluation Methods
-  Evidence-Based
-  Hiring Practices
-  Incentives
-  Independent Living
-  Job Development/Placement/
Satisfaction/Search/Training
-  Occupational Injuries
-  Organizational Innovation
-  Outcome Assessment
-  Patient Satisfaction
-  Performance Standards
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-  Private Sector Rehabilitation
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