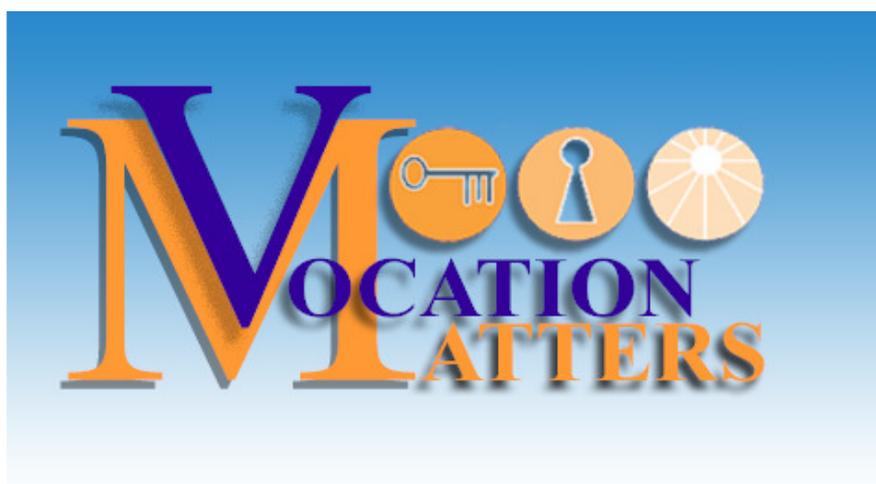


Vocation Matters Report 2008



“Engagement with Vocation Matters has often been the component that my clients have felt most useful and helpful in their recovery.”

Health Professional

Shaun Williams
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Shaun Williams: Vocational Information Project Manager January 2009

Introduction

Vocation Matters is a service user led project providing accurate, in - depth information that helps service users make informed choices about their options with regards to employment, education, welfare, volunteering and training. It is based within the Effra Resource Centre in Brixton and is an integral part of Lambeth Rehabilitation Services - South London and Maudsley NHS Foundation Trust. The project recently secured 2 years funding from Lambeth PCT to enhance the project. A Vocation & Social Inclusion Officer has now been recruited, so there are currently two paid staff members plus a service user who works in a voluntary capacity on the website. Shortly, Vocation Matters will move to a new Vocation & Social Inclusion Resource Centre and will work in collaboration with partner organizations such as Status Employment, Capital Volunteering and Clapham Park Time Bank.

“Through Shaun’s help I’m starting to achieve my goal. Shaun has gave me that kick start out of a very long dark hole, which I needed badly.”

Service User

Summary

This report contains a range of quantitative and qualitative data including verbatim responses from service users and health professionals. An explanation of the known outcomes is also included along with further description of these in the appendices. A case study example is presented to highlight the difficulties overcome and significant outcomes achieved by a service user accessing the project. We then have a short section focusing on the evaluation form responses from service users & health professionals. There is then a discussion of the issues encountered in the year. Finally, we touch upon the priorities for the year ahead and offer a conclusion.

“The service has changed my life by helping me raise my self-esteem and confidence and as a result Shaun helped me to find voluntary work, and this enabled me to go out and find paid employment.”

Service User

Quantitative data:

47 Male 42 Female

6.0 % DNA (not included in figures)

10% regularly attend Effra Resource Centre

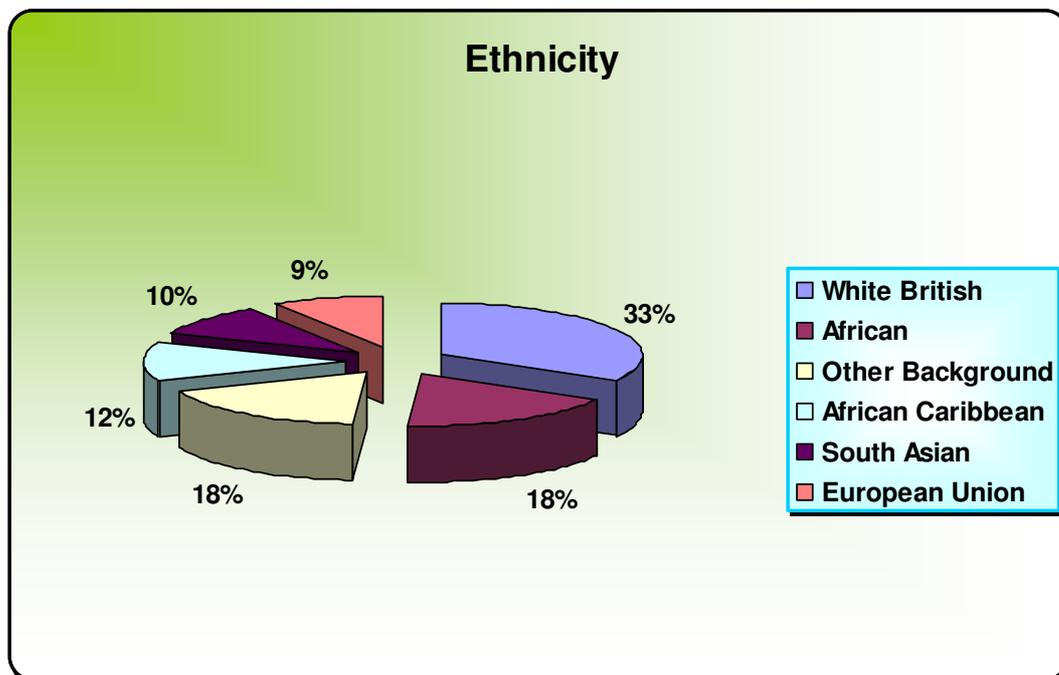
17% previously accessed project

48% two or more appointments

"We were continuously provided with feedback and was impressed at how much help was given"

Health Professional

Ethnicity:



36% attending come from African or Other Backgrounds. The box below shows this diversity;

Angolan, Ethiopian, Eritrean, Sierra Leone, Nigerian, Ugandan
Ghanaian, Tunisian, Dual heritage, Ecuadorian, Mauritian,
Albanian, Brazilian, Iraqi, Turkish, Asian Caribbean, Peruvian

“We were very satisfied with the level of patience and therapeutic way of working with our patient. It was also motivating and encouraging for our patients to work with a new person outside the ward environment.”

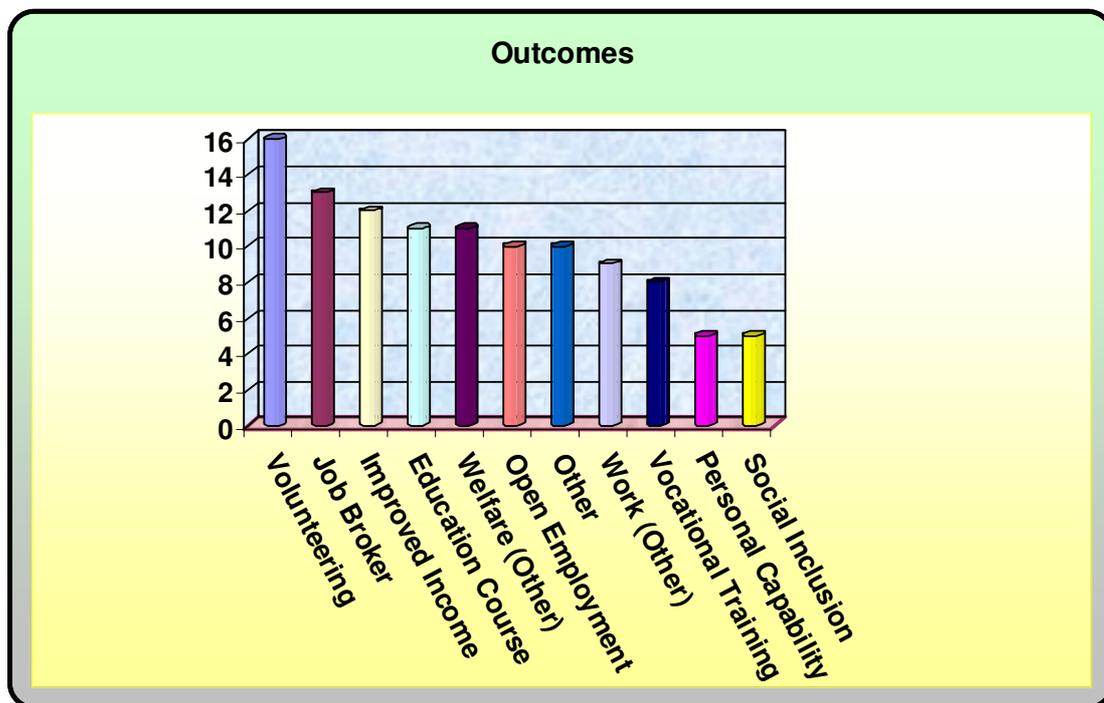
Health Professional

“Really good service to involve clients in, in terms of proactively getting back into finding paid work”

Health Professional

Outcomes:

112 outcomes have been recorded this year. Referrals to other agencies have not been counted as an outcome unless there has been a tangible and sustainable outcome, for example actively engaging with a Job Broker. 71% of individuals who attended are known to have achieved an outcome. Of these, one third has attained more than one outcome. The figure of 71% is likely to be an under estimate of the outcomes- it has not always been possible to follow up every individual due to the projects capacity. I believe that it is very likely that outcomes of 80% - 90% are a more accurate figure because most individuals who attend the information point state that they have been empowered to make real change in their lives (examples are highlighted throughout the report). Two outcomes are within mental health specific projects -permitted work & sheltered training and two are education courses in pan – disability organizations. All other outcomes are within mainstream settings.



See appendix 1. For detailed outcome notes

“Everything that I needed explaining to me was done so clearly and sensitively. I applied for relevant benefits and was successful. I am now studying.”

Service User

“Found the meetings to be useful, Shaun to be approachable and knowledgeable”

Service user feed back from referrer.

Case Study:

A 43-year-old male referred via an Occupational Therapist whilst he was an inpatient in May. This was his third admission for alcohol detoxification and severe depression in recent years. He had taken no part in paid employment or any other vocational activity for 11 years; however he had spent some time caring for a terminally ill partner and also caring for an elderly person. Prior to this he had worked as a butcher and care assistant.

Other than his mental health needs he has significant physical health needs partly due to alcohol abuse including severe pain in legs, balance and memory problems. He also has possible spinal and brain damage. Because of these difficulties he can often become distracted and confused at times. He attends neurology and physiotherapy appointments regularly.

During an appointment his income was assessed to see if he was in receipt of correct welfare entitlements. As a result of this intervention it was found that he was entitled to a further £2,300 per annum, and he made a successful claim. He had been entitled to this for many years and had lost thousands of pounds. He was also told about a disabled person's rail card that he was unaware of.

He visited the information point for a number of times for career counseling. He knew what he wanted to do i.e. caring work. However, the vocational options that suited him took a while to emerge because his physical health and memory were still poor. Regular meetings and support enabled him to feel empowered enough to act- he took the lead and contacted various placements arranging start dates etc. He now volunteers with the Passage - a charity that assists the homeless in Westminster. He works in the catering department and hopes to play a more hands on role with clients in the near future. He volunteers with the elderly in a care home in Nunhead weekly, as a befriender. He has completed a course - Foundation Support Time and Recovery & Level 2 Certificate in Mental Health with Camden Mind. He also volunteers with Vitalise- they manage a number of holiday centres for people with disabilities. After ten weeks of volunteering he was offered a full time job. However, the job is a live-in role so he would need to give up his flat, the wages are relatively low and because of his health needs his benefit income is high. So although he enjoys the volunteering immensely and is very pleased at the offer he cannot accept presently.

He has decided to continue volunteering for at least 12 months then re- assess his options. He wants to find paid employment, but does not want to be worse off financially. He has been told about claiming tax credits and keeping DLA. Since referral in May 08 he has abstained from alcohol. He can contact us by telephone or make another appointment if he requires any further support, but for the present he is coping independently, and is very happy.

Evaluation:

100% of evaluation forms received by health professionals have been very positive. One thing mentioned that could improve the efficacy of the project is improved communication after referral. This will be a priority now there are extra staffing levels. 95% of service users who responded to the evaluation forms said that the information and appointments adequately met their needs. The lack of office space and suitable times to assist with welfare forms was the main negative comment to note. This will be fully addressed at the new Vocational & Social Inclusion Resource Centre.

“Very comprehensive, no judgment, very supportive and effective research! Perfect!”

Service User

Discussion:

Statistics indicate that individuals from a wide variety of backgrounds are currently accessing the project for in-depth vocational information and support. The South Asian figure of 10% is higher than the Asian population as a whole in Lambeth 4 -5%. This is due to many individuals being referred via Amardeep. Of note, is the first person accessing the project from accession countries in the EU i.e. Poland.

48% of people have been seen more than once for in-depth information and support- a 10% increase on 38% last year. To manage this need, it has been vital to recruit a SI Officer, to increase the capacity of the project. This role is to give ongoing and flexible support to people accessing the information point. Examples include: supporting people by researching job opportunities, helping to construct an up-to-date CV and acting as a reference point throughout an application process. Another active part of the role is to promote social inclusion and encourage service-users to engage in new activities, providing encouragement and emotional support where needed.

Referrals – have come from all disciplines within CMHT's and beyond. One thing to note is the lack of referrals from voluntary sector providers & service user ran organisations such as Lambeth Mind. They are aware of the project and its remit and yet they do not refer. One can only assume that they feel they have the skills / knowledge to empower service users into socially inclusive vocational opportunities. Unfortunately, over the last quarter of the year the number of referrals from community mental health teams decreased dramatically. This is as

a direct result of Vocational OT's being incorporated within CMHT sectors. We will need to meet with them and the Vocational Development Manager to explore effective working partnerships.

The report does not include diagnosis or CPA level, as this is not usually recorded during meetings. If the process is truly person centred a diagnosis is not needed as everyone has completely different vocational / welfare needs. However, the majority who are referred would be classed as having a severe MI as opposed to common MI. The CPA process has recently changed and has never been an accurate portrayal of need, especially in relation to vocation.

Of note is the fact that 24% of females attending mentioned sexual abuse, psychological abuse and domestic violence, (without being asked). A number of these have at times been placed in women's refuges for their own safety. These alarming statistics show the sort of issues that need to be worked through. It is often taking into account these issues that can make a difference between an effective sustainable outcome and a failure. Other issues widely mentioned and therefore need to be taken into account include, housing & homelessness, family breakdown, financial worries, alcohol and drug abuse.

The website www.vocationmatters.org.uk has seen a significant increase in the number of hits for the year 2008-140,891 (see appendix) compared to 88,351 for year 2007. We do however currently have slight problems with the site. The volunteer who has built and updated the website since 2004 is unwell, and is also intending to move back to his country of origin. We have identified another possible volunteer but we need to manage the hand over sensitively so as not to upset the existing volunteer. Once this has been addressed we can update the website and ensure it is accurate and fully accessible.

"I received DLA which has helped immensely in basic expenditure, reducing stress, and paying for holistic treatments, which work to release energy, calming, reducing anxiety and depression."

Service User

Priorities for the year ahead:

- Move to new office space, thereby creating a new vocational information bureau including drop in space for users to access pc's
- Re-advertise the project- mentioning the increased support capacity within the project
- Enhance the mechanism of feedback / evaluation for both users and professionals
- Make significant improvements to the website enhancing its functionality

- Keep up-to-date with welfare changes which will have an impact upon individuals accessing mental health services for the first time
- Make links with mental health team that have not referred users as yet, for example - home treatment teams

“There is a whole new world out there for me, I’m going out meeting new people and friends, I’ve also got the confidence in myself to start new courses Thanks to Shaun I now have three volunteering places which I just love.”

Service User

Conclusion:

The significant outcomes - 71% achieving at least one outcome and the verbatim responses from both service users and health professionals show that the information project is valued and responsive to local need. Significant improvements and therefore outcomes will come as result of recruiting the Vocation & Social Inclusion Officer. This will be most advantageous for service users requiring greater support, to ensure that outcomes are achievable and sustainable. The unique person centred and empowering approach of Vocation Matters and the fact that it is truly service user managed seems to set it apart from other projects. The two following responses from a senior medical professional and a service user highlight the positive impact the project continues to deliver in a very challenging environment:

“Engagement with Vocation Matters has often been the component that my clients have felt most useful and helpful in their recovery.”

“Having someone to talk to who seemed to understand the problems I was facing and helped me to get to a point to where I could take some action to move things forward”

**Shaun Williams
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**www.vocationmatters.org.uk
www.slam.nhs.uk**

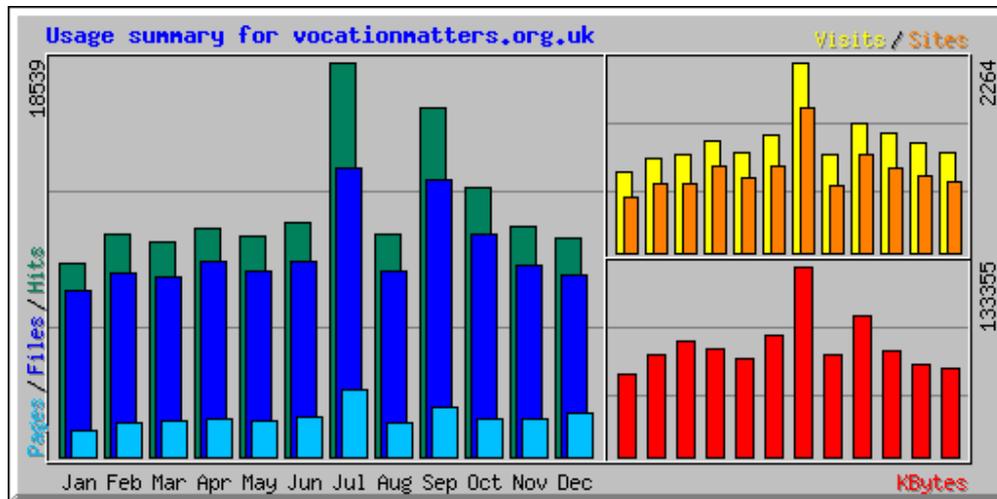
Appendix:**Outcome Notes:**

- **Volunteering 16** = individuals volunteering in mainstream organizations. The majority of these are supported solely at the volunteer placement, however a number are supported as and when necessary by the Capital Volunteering coordinator or Vocation Matters.
- **Job Brokers 13** = actively engaging with job brokers at various stages of job searches with Status Employment or Work Directions.
- **Improved Income 12** = an improved welfare income as a result of referral to the project. This is often due to a successful new claim of DLA or a higher award level of DLA. However a number of people also received extra Income Support or Child Tax Credits
- **Education 11** = accessing education courses with both large and small mainstream education providers.
- **Other welfare 11** = outcomes which are mostly made up of successful DLA renewal claims at the same rate.
- **Open Employment 10** = individuals who have gained mainstream open paid employment. Quite a few individuals have found employment independently after receiving relevant information regarding disclosure, disability and welfare rights. However, a number have also received support from Job Brokers to find paid employment. Permitted work has not been counted in this section.
- **Other 10** = includes outcomes relating to GP access, passport issues, housing, freedom passes, immigration status, debt, physical health, alcohol and regular supportive telephone calls.
- **Other work 9** = includes permitted work, mainstream work placement, sheltered training, support to stay in employment, issues around workplace bullying, career counseling, first interview for over 10 years, job offer- not able to accept because worse off than on benefits.
- **Vocational training 8** = mainstream training with qualifications likely to lead to paid employment, for example plumbing, social work and interpreting.
- **Personal capability assessment 5** = individuals claiming Income Support or Incapacity due to health needs are regularly assessed to see if they are incapable of working. The PCA is very stressful for many

individuals and requires expert support when completing paper work or attending interviews. All individuals who have required such support this year have successfully passed the assessment without further stress.

- **Social inclusion 5** = including active walks, time banking and actively engaging with the Vocation & Social Inclusion Officer.

Summary Period: Last 12 Months
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Summary by Month										
Month	Daily Avg				Monthly Totals					
	Hits	Files	Pages	Visits	Sites	KBytes	Visits	Pages	Files	Hits
Dec 2008	341	284	69	39	846	61626	1192	2090	8525	10254
Nov 2008	361	299	59	43	905	64755	1306	1786	8972	10836
Oct 2008	407	338	58	45	997	74624	1423	1815	10486	12643
Sep 2008	547	433	77	51	1169	99073	1546	2330	13004	16415
Aug 2008	337	280	52	37	790	71603	1175	1628	8700	10457
Jul 2008	598	438	101	73	1721	133355	2264	3141	13600	18539
Jun 2008	366	305	63	46	1033	85028	1407	1909	9156	10986
May 2008	333	282	53	38	885	68758	1189	1654	8750	10353
Apr 2008	357	307	58	44	1021	75564	1332	1761	9211	10733
Mar 2008	325	273	53	37	831	81111	1169	1671	8490	10097
Feb 2008	360	297	55	38	829	71393	1109	1601	8629	10467
Jan 2008	293	251	39	31	658	58041	963	1224	7807	9111
Totals						944931	16075	22610	115330	140891