

Economy and Fair Work Committee – supplementary briefing from SAMH

We thank the Committee for giving us an extra opportunity to brief them ahead of giving oral evidence. We have a case study from someone who has successfully gone through out Individual Placement Support service, as well as a bit more information on our 'In Reach' services.

Case Study: Client A

Client A was referred to SAMH IPS in November 2023. They had been out of work for almost 3.5 years and had a previously diagnosis of autism, and a weakened immune system. The client had applied to minimum 12 jobs per week in either admin or call centre roles, but their last interview was at the start of 2023.

The client was hugely motivated to find a job, so we initially worked on updating and perfecting their CV. They were offered an interview, and we put them through a practice interview, however they were unsuccessful in securing this role. Feedback was that they could have sold themselves a little more – so we focused heavily on interview technique. We prepared answers for both general and competency interview questions, enabling client to practice selling themselves more effectively.

Another potential role was identified and with our support through the process Client A was offered the role. Due to the location of the job, we signposted them back to Job Centre Plus to access funding for their travel for the first month.

The client is enjoying their role, and knows they have much to learn but is feeling fully supported by the team around them on site. We have agreed to weekly in-work support for the first month, and then this will move to twice monthly. The timing of Client A securing this job could not have been better – they got their first pay on the week of their 30th birthday, and see this as a sign of a positive future.

Client A Feedback

“If someone was to ask me today what my dream job would be, I honestly don't think I could answer. But what I do know is that wherever I am, so long as I feel supported within that environment and I am managing my health then I would be okay. At present, I feel that with the right support from my employer and additional support of Emma at SAMH Retention service, I am looking forward to the future, whatever that may hold.”

Case Study: Client B

Prior to starting on the IPS programme Client B had not been working since 2019, when they last worked as an audio typist. Shortly after leaving that role, Client B was diagnosed with depression, and this had such an impact on their life they rarely left the house. Client B joined SAMH IPS at the start of Aug 2023.

In Client B's mind, their biggest barrier was that they were 62 and they thought nobody would want to employ them. We discussed this issue at length and also

worked with Client B on a CV refresh as well as practicing interview techniques. Client B was offered a hybrid role and SAMH supported them through their induction period by helping with setting up at home.

In-work support has been important to Client B over the first 13 weeks of their new role, as clients are sometimes overwhelmed by the sheer volume of new learning in a role, and we kept in regular contact with Client B during this time.

Client B Feedback

“Because of my depression and age I never saw myself working again, but for the first time in a very long time, I love my job and look forward to going in every day – and this is all because of the support I have received from SAMH.”

In-reach service

As well as our Individual Placement Support services, detailed in our previous submission, we also run In-Reach Services. These are designed to reach those with severe and enduring mental health problems that are furthest from the job market. The support starts while individuals are still in hospital.

Our In-Reach Support service is designed to reduce the number of (re-)admissions to hospital for people with mental health problems.

Its primary aims are to:

- Ensure people have the right support in place prior to discharge from wards
- Prevent (re-)admission by providing flexible, community-based support, such as building life/coping skills, or early intervention to prevent crisis
- Integrate SAMH support with clinical teams to ensure seamless and sustainable discharge process.

Participants report:

- Reduction in number of re-admissions
- Higher change of sustaining community ‘placement’
- Higher self-esteem, resilience and ability to cope
- Improved mental health/wellbeing.