Working Well

How the Retain project has supported workers in Brighton with mental health problems

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Executive Summary

What do we already know about this topic?

- Many people who work experience mental health problems. Some of these people risk losing their jobs. This may have financial consequences but also costs to their health and wellbeing.

- Employers and society do not benefit from this situation either.

- There is legislation to protect and support employees with mental health problems. Unfortunately many still experience stigma and discrimination.

- Job retention projects can help employees to retain their work.

What does this evaluation research add?

- The Retain project helps its clients to retain work and work related identities and aspirations.

- This was achieved by skilled use of a range of methods, informed by a range of established and emerging mental health approaches, focussing on the individual worker, their job and their employer and wider workplace. Helping employees to reduce self blame and low self esteem by reframing or reappraising their understanding of the situation was a key initial step for many.

- Most of this support was delivered by individual project workers – but the use of a support group showed promise as a complementary intervention.

- Clients of the Retain project considered it to be a high quality service which made significant positive impacts on their working life and mental health in general.

What do we still need to find out?

- There is a need to find more out about which of the range of methods used work best for people and in what circumstances.

- There is a need for comparative research into similar and contrasting projects in a range of geographic areas and with different groups of people.

- There is a need for research into employers' experiences of job retention projects like Retain.

Background information about job retention and mental health, the Retain project and the evaluation

Why provide a job retention service for people with mental health problems?

- In the UK at any one time it is estimated that 1 in 6 employees are experiencing a mental health condition. Many of these will take sick leave amounting to a total of 70 million days per year. This is estimated to cost £8.5 billion to employers. The cost to individuals experiencing mental health problems can include loss of employment and some of these people will lose their jobs and experience great difficulty in finding work in the future (Sainsbury Centre for Mental Health 2007).

- Such experiences can have a negative impact on people's self confidence, sense of identity and financial situation. Whilst some jobs can contribute to stress, on balance research suggests that people with mental health problems are likely to do better in health and wellbeing terms if they are in work than if they are not (Waddell and Burton 2006). This is consistent with ideas of mental health "recovery" which focus on quality of life rather than presence or absence of symptoms (Gray 2006).

- Research suggests that it is not just the individual employees who suffer if they lose their jobs but employers and society as a whole both in financial terms and in terms of social cohesion (Social Exclusion Unit 2004; Oxford Economics 2007).

- The Disability Discrimination Act provides most employees who experience mental health problems with some legal rights not to be discriminated against for their mental health problem and for reasonable changes to be made which can help them remain in work.

- There is a limited body of evidence (some from outside of the UK) supporting the value of projects which specifically aim to help employees with mental health problems to retain employment by offering them a range of support and advice, by helping identify possible solutions and by supporting communication between the employee and their employers (Gates 2000; Secker and Membrey 2003; Nieuwenhuijsen, Verbeek et al. 2004; Thomas, Secker et al. 2005; Krupa 2007).

How do the Richmond Fellowship job retention projects work?

- Retain is run by the mental health charity the Richmond Fellowship who have been developing job retention services since 2000. They currently run a number of projects across England from various funding sources. These projects are supported by a cross services manager whose role is to: share best practice information; coordinate meetings of project workers; support development, marketing and evaluation of the Retain projects; and, identify staff training needs. This has helped to ensure a broadly consistent approach to the interventions.

- These interventions follow a vocational guidance model in which clients are provided an opportunity to explore their situation. This is facilitated by project workers who listen, clarify, give information, refer on to other services, and collaborate to draw up client action plans. These can involve a range of interventions, notably: supportive counselling; confidence building; problem solving; education on employment law; negotiating return to work redeployment and/or adjustments. Central to the approach is a view that the client owns the process and the plan, and that project workers should not specifically direct them.

- Clients may choose to use the service in confidence without involving their employer, or may ask for Retain to help by supporting clients in meetings and negotiations with employers with an emphasis on assisting clients to "find their voice" and have open conversations with employers about their mental health and work.

- The Retain projects have sought to provide early intervention to try and increase the chances of success and consequently have largely focussed on primary care health services as sources of referrals (Edmonds and Neumann 2007).

How does the Brighton Retain job retention project work?

- The Brighton project was funded by Big Lottery funding to provide a job retention service for employees who experience mental health problems in the Brighton area. There are currently two part time project workers covering one full time post. People can be referred by their GP (the main source in Brighton), other health worker, employer, or can self refer. The project mainly works with employees by providing support and interventions from a project worker on an individual basis (usually involving their employers) but it also provides a monthly evening

support group hosted by a Retain project worker.   The support group provides a combination of peer support and facilitated discussion of relevant topics.

What was the purpose of the evaluation?

- Whilst there has been considerable research and service developments for people who are unemployed and experience mental health problems there has been limited research into job retention projects.

- The purpose of the study was to evaluate the Retain job retention project as part of a broader research project investigating the work related needs of employed people recovering from mental health problems.

- The main aims were to find out detailed information about what interventions employees received from Retain, in what ways, if at all, they helped them remain at work and their general experiences of the Retain project.

Who took part in the evaluation?

- 14 people who were using the Retain project were individually interviewed.   Participants reported a range of mental health diagnoses (including depression, bipolar disorder, schizo-affective disorder) which most had experienced as a recurring or enduring condition. Most were being supported for their mental health problems by primary care (GP level services) though some were currently receiving input from specialist mental health services. There were 10 women and 4 men aged between 29 and 54 (average 42.5).   12 were single, one married and one had a non cohabiting partner.   All were White British.

About the evaluation project

- The project began after Vicky Edmonds (Development Manager - RETAIN) and Imogen Haslam (Senior Project worker) from the Richmond Fellowship approached the Research Helpdesk of the Community University Partnership Programme at the University of Brighton seeking evaluative research into the Retain project.   Following this they met with Dr Carl Walker and Josh Cameron, academics with active research interests in work and mental health.   It was agreed to meet with a group of Retain clients to discuss their views on a potential research project and what methods to use.

- The meeting with Retain clients found very strong support for the evaluative research to be carried out. A preference for individual as opposed to group interviews was expressed. The discussion was used to inform an initial interview schedule which was then presented back to a subsequent group meeting and further amended. Further group meetings with Retain clients took place which discussed and informed analysis of findings and how to best disseminate results.

- After approval from the relevant University of Brighton research ethics committee a total of 14 people were interviewed by the University researchers using the semi structured scheduled developed with the Retain clients. These people were recruited by written invitation and information sheets being sent to those who had been on the Retain caseload for the longest until a minimum of 12 agreed to participate. 2 individuals declined to participate.

- The information gathered was predominately qualitative (with some supporting demographic details). The participants were asked to respond to questions about their experiences of mental health issues at work and support received from the Retain project. Being "semi structured" questions meant that they were designed to be flexible enough for participants to raise issues and express their own views. This resulted in data which provided the information that was agreed to collect during the research design and additional information which participants thought most important and relevant. The data was analysed by identifying themes in the transcripts. Some of these themes came from the research questions and others arose from the participants' words. The process and results of analysis were confirmed by both University researchers and (in summary form) with Retain client group meetings.

What kind of difficulties were employees facing at their work?

- The participants described a range of issues related to the direct and indirect impact of their mental health problems at work. These included symptoms of their mental health problem, side effects of medication, and challenges of attending health appointments in working hours. Many described either experiencing, or fearing that they might experience, stigma from managers or colleagues at work. This was often related to another concern about whether and how much to disclose about their mental health problems to employers and colleagues. Most stated that they lacked confidence in themselves.

I felt so dreadful, my depression was so bad, I was really in a bad place mentally and physically as well because I wasn't sleeping or anything and ended up taking, well after… as soon as Christmas… after the Christmas break, I couldn't go back. I had to contact them. I felt dreadfully guilty because I'd had that brief time before and didn't even feel that I could speak to my line manager because she was so unsupportive and uncommunicative as well. Alice.

- Some people described challenges they were facing with either work tasks, roles or the organisation of their working life (e.g. hours worked, workload, start finish times).

I was much more chaotic in my work, didn't feel that I had managed to, didn't feel that I'd complete all that I had to do, found it quite difficult to concentrate on particular things and my memory was a bit – not as good as it used to be. I was also really tired all the time, I was having to go home at lunch time and have like, half an hours' sleep, just in order to get through the day. Rebecca.

- It was notable that many of the participants blamed themselves for the problems they were facing at work and felt guilty about this.

When pay day came around I felt like my colleagues were working hard for their money… maybe I didn't… I didn't deserve maybe the full money. Ruth.

- Despite these challenges it was very clear that all participants saw work as an important part of their identity and wanted to be working (though not necessarily in their current job).

I would always need that structure of work. I think it kind of normalises me really … I like the social aspect of it but I also like the structure of it. Mary.

What did Retain do to try and help employees in relation to their self confidence, communication skills and approach to problem solving?

- **Reframing/reappraising.** Employees described ways in which the project supported them to review their current situation in a way that opened up new options, possibilities and hope. Current restricting or self blaming understandings and interpretations were challenged. For some, this led to considering whether there may be factors other than their mental health issue which might account for the problems they were facing. It also helped a number of people recognise their own worth.

  it was through coming to those groups … that I realised that actually what was happening was not … necessarily about my mental health condition, it was about the fact I wasn't being supported and I was being overworked. John.

  I think this service is very good at … helping you to see yourself as you are and with the work side of it…look at you, you are still valuable, you are still important… Naomi.

  I can you know remind me 'actually hey you got a first class degree, you know, you are an asset to your company if it's done in the right way and you're not under too much pressure'. She [Retain worker] really made me see that and it's amazing because it turned around my view of the situation. Alice.

- **Reducing sense of isolation.** Employees also described how they were helped to look at their situation differently by realising that they were not the only person to be facing such problems. This was a notable achievement of the support groups as well as in one to one sessions.

  sometimes you have a tendency to think…, maybe it's just me, maybe it's because, I'm struggling because I've got a mental health problem, maybe I just can't cope with it. And that was something that Retain really helped with … because you come to the drop-in groups and everyone says the same! John.

  Sometimes you think you're alone, you're experiencing a unique experience but then you come up and meet up, you find 'ah' you all face the same problem. It sort of makes you less bothered… Steve.

Retain … really helped validate … my whole experience … I'd just not had that experience before. I just thought… 'it's only me' and 'I don't know what happens' and 'I'm frightened' and 'what does actually all this mean' … [the retain worker explained] 'actually this is just, this is the way it works, it's a completely normal thing … given your set of experiences and this is what people do and this is what you can … expect and this is, this is … what happens it's a normal procedure, it's a normal process'. Zoe.

- **Boosting confidence.** All employees described times when their levels of self confidence were very low, particularly when on sick leave from work. Expressions of confidence in the employee and helping them to identify their positive achievements and skills were revealed to be effective in increasing their self esteem.

There have been times when I've thought oh God I can't cope. I'm not doing this very well and with [Retain worker] there for support it's being able to say those things to someone that's not kind of judgemental. It's just made me feel like actually I can go ahead and that I have got certain skills, I'm not a complete waste of space, I'm not a gibbering wreck… there is a future, not just feeling completely useless. Laura.

I mean I feel like a capable person and I feel that I do have respect at work … my perception is changing in terms of how I see that people see me. That's maybe part of coming out of depression, but … it's also about … actually looking up and just sort of like thinking, 'actually, people do actually respect me and I think that people want me to be successful and can see that I can do things as well'. Zoe.

- **Confidence in planning return to work and communication.** There was evidence of increased confidence in relation to planning return to work and in being able to clearly express themselves to employers.

During the meeting with [Retain worker] I realised 'yes I really do want to come back, yes I actually really do have skills that I can use and that…if they're a bit more flexible, and they take into account that I have this severe long term problem that is not my fault it's just is how it is, that they can accommodate me. Alice.

How stressful it was for me [before] to even see my line manager, never mind sit in meetings…, to the last meetings that he was in … to actually say to him 'when you did this, this is how it made me feel and I understand that you're saying you didn't intend to do that, but it's how I was made to feel. Alice.

We were then talking about … finding my voice and that helped me … begin to have the confidence to … put my point of view. Zoe.

- **Increasing hope.** Employees (including those who did not return to their job) expressed a sense of hope for their future working lives and how work could be part of sustaining their mental wellbeing.

So just stay on this road, that will involve promotion and that will involve moving to other jobs and what have you … My goal is just to continue to grow, stay on the right road… Harry.

I honestly feel that because I've had all of this support with [Retain worker 1], and we've been looking at actually what is ok about me with my illness and not what's wrong with it, has helped me to … really stay above that and keep myself from getting really negative… I've not had to go into hospital and I've actually had a really positive outcome. Alice.

What did Retain do to try and help employees in relation to possible changes to their jobs?

- **Analysing jobs.** Employees described how Retain helped them analyse their jobs and identify any changes which might help them remain at work. These included changes to patterns of working (shift start finish times, varied hours, change of location).

one of the very first things that [Retain worker] did … was … to try and offer suggestions of adjustments, proper adjustments, probable things that they could do like changing my start time slightly so that I wasn't battling rush hour traffic when I was feeling very stressed already, which would also help my childcare situation. Or the possibility of …transferring here … perhaps of a job share and making lots of

suggestions, things for them to think about, things that are potentially answers to the situation. Alice.

I wasn't able to do as much as I normally would because I was so tired at the end of the day. So that was taken into account and I just… did what I could to begin with and if I couldn't manage it, I would do my two and half days but I would just be doing less and I'd do what I could manage in that time. Anna.

I needed a reasonable adjustment in that I needed time off to go and have my appointments if I was going to be able to manage my condition, and they agreed to that. Mary.

- **Temporary accommodations/adjustments.** Accommodations considered and agreed also included changes to work tasks and roles. As with adjustments to working hours these were mainly reported to be temporary changes to facilitate return to work.

When I first went back because I went back only doing four hours a day and occupational health had written to me saying look, you know, non managerial responsibilities, you need to just be an extra pair of hands for a little while until you go back to full hours. Sonia.
At that time it was just to… to really get a plan in place like to reintegrate me, because I was finding a full day hard, so maybe try half a day and then increase it by an hour every week. Ruth.

- **Permanent changes.** More permanent changes were described in relation to workers' performance approach to their work which was viewed as making work more sustainable:

I no longer have to try and push and work harder than everyone else. It doesn't matter, I just do what I can do and that's all I need to do and it doesn't matter. Alice.

[The Retain worker] helped me look at the issues of perfectionism and if I felt like too much has been asked of me at the moment, she would talk me through that. Anna.

- **Problem solving workplace issues.** The problem solving of workplace issues included for some, consideration of the job tasks and roles and social process around them

I was having problems settling in. I didn't quite know what my role was and [workplace name] was absolutely chaotic… [The Retain worker] came and supported me to settle in. Steve.

She's [Retain worker] helped me with things like putting a proposal together, sorting out my CV, thinking about how to, how to deal with different situations that I'm finding difficult, how to approach people. Laura.

- **Considering alternative employment.** For a number of workers analysis of the job involved considering whether alternative jobs with different employers might be preferable:

I came to see Retain and talked at length to [Retain worker] about were there any other adjustments, but I think I just reached the conclusion that …I just wasn't going to have the confidence to carry on working there … and my plan initially then was to have enough time to find another job. Naomi.

Maybe find that, you know, I could move to another job. … I had kind of hit a point where I wasn't too happy in the office where I was anyway and I did have plans, long-term plans to do something else. Ruth.

I spoke about it with [Retain worker] and said "well you know, we need to then come up with a solution because I don't think I can sustain working there."
So, we had this meeting and we … arranged I think for six weeks notice to try and get me another job. John.

What did Retain do to try and help employees in relation to collaborating with their employer?

- **Job retention as a shared issue between employees and employers.** Retain appears to have helped individual workers to see their job retention problems as a shared issue. This opened up the potential for employers to respond (if they had not done so already) by engaging in a process to agree on accommodations and other solutions. A number of interventions were reported and considered to be effective to support this. Retain was instrumental in arranging some meetings and notably in ensuring that they were used constructively. Rather than advocating for or representing the worker it was apparent that for most people preparation for meetings involved helping the worker to feel confident and clear about what they wanted to say themselves:

  Before any meeting there's been a discussion, we've gone through what [Retain worker name 1] role is, what my role is, what we'd like to happen in a particular meeting … so we go in there very prepared. Alice.

  It was more helping me with how I was going to try and explain how stress affects me in that appraisal situation … when I did approach my line manager … I did use terminology that [retain worker 1] had helped me with, which was good. Mary.

- **Ensuring employee's views are communicated.** Even where the Retain worker did actively communicate the worker's views to the employer this was only done when the worker felt they could not carry on doing so themselves and what they said had be agreed prior to the meeting.

  We also know that I might not actually be able to say what I need to say so it's knowing that actually I can have a signal that I can give to [Retain worker] if I need her to come in and say things for me. But also knowing that she's not going to go in there and talk for me and I think that has been incredibly powerful. Alice.

  So she, we, went over like a structure of like what we thought was going to happen and how she could support me. And when I burst into tears she would just fill in and carry on the conversation until I got myself back together and it kept continuity. Anna.

I mean she had a meeting here with my boss and myself in which, because at that time I was very upset, she spoke on my behalf and clearly understood everything that I'd said and that we'd spoken about and the last time that I saw her. Sonia.

- **Helping employers to hear and understand.**   Analysis suggested that a key outcome of such meetings was that the employer had heard their voice and increased their understanding of mental health problems:

Even to be able to say that, he heard what I said, he listened and he apologised for something in that meeting and that meant the world, it was so important and I thanked him in that meeting as well and so it was very cathartic. Alice.

And I'd written out a two page… document really about the experience of the anxiety and the depression and what it was like, and took that to the meeting which I think, well [Retain worker 1] said that they both found very moving. Anna.

- **Establishing more permanent dialogue.**   The emphasis on supporting workers to express their own views and concerns themselves may have also contributed to the establishing more enduring patterns and lines of communication between the worker and employer:

We set up another meeting, maybe even another two meetings, where we had the four of us and it was agreed that I would have regular supervision. Anna.

We were then talking about finding my voice and that helped me … on a continuing basis …, I can take that information and begin to have the confidence to say … either verbally or by email or whatever being to actually say, just put my point of view. Zoe.

- **Ensuring process and legislation is observed.** There is some suggestion that the presence of the Retain worker in the meetings may have helped ensure that due processes were followed and relevant legislation observed.   When asked what she thought would have happened if she had not made contact with Retain Rebecca replied:

I think that they would have heard the [disciplinary] – I wouldn't have had the strength to fight it, umm I think that they, I think either, … they would have made a finding against me based on what this woman had said which wasn't even true, I wouldn't have had the strength to fight it because I was so ill… Rebecca.

- **Mental health awareness in wider workforce.** Alice reported her employers were now looking at providing mental health awareness training for their staff. She believed that her case may have left a legacy that would benefit other people in a similar situation:

it felt really important for me … to challenge the [employer name] and what they've done and push for what I wanted and what they should have done and all of those things, not to just do that for me but to do that so that that is less likely for them to do that to someone else and for them to actually realise the impact of what they've done on people that have got mental health problems and I think I've achieved that, actually, in this case with [Retain worker's] help. Alice.

Sonia promoted Retain to a colleague:
The lady I've got at work who's been off, you know, I suggested myself, I gave her [retain worker 1]'s number. Sonia.

- **Collaborating to make return to work plans.** Constructing plans for return to work with the employer constituted a major part of these dialogues along with problem solving workplace issues and it is clear that they can result in accommodations and other effective supports for the workers:

That was one of the first things that she did, was lay all of those things on the table and say "well have you thought about this"…. Just really, really useful things like that that I wouldn't even have been able to think about… and we're looking at me going back and working up to 16 hours a week. Alice.

At that time it was just to… to really get a plan in place like to reintegrate me, because I was finding a full day hard, so maybe try half a day and then increase it by an hour every week. Ruth.

I needed a lot of support from [Retain worker 1] to get back into work and for her to reassure me that it was not impossible, and also to meet with my manager and somebody from HR. We had a three-way meeting, so that I could set up… special arrangements, adjustments. Anna.

What established approaches can be identified in Retain's work?

The Retain project provided individual project worker interventions (notably meetings alone with the worker and meetings with employers with the worker present) and also a monthly evening support group.   Individual interventions were provided for everyone, although not everyone participated in the support group.

Analysis supported the identification of a number of established mental health and generic approaches which can be used to describe the interventions.

Table 1 Approaches Used

Case management
Problem solving
Cognitive strategies
Recovery orientated
Occupational analysis
Group work

An individual *case management approach* in which those supporting people with mental health problems are prepared to enter the workplace with their clients (Gates 2000) was apparent, involving co-ordination, liaison, information gathering and sharing, arranging meetings and supporting discussions within them.   Allied to this was a pragmatic *problem solving approach*, advocated by Thomas and Secker (2005).   This focussed on helping the worker identify issues and potential solutions and drawing on this in discussions with employers.   That process, and notably that of reframing/reappraising situations, can be considered as drawing on *cognitive strategies* for which there is some emerging evidence for its utility in vocational interventions for people with mental health problems (Rose and Perz 2005; Binnie 2008; Kidd, Boyd et al. 2008).   The *recovery orientated character* of the interventions was also apparent in the accounts of supportive listening, empathetic validation of workers' experiences, person centred and collaborative ap-

proaches used. This parallels research which has associated effective employment support interventions within recovery orientated approaches (Secker, Membrey et al. 2002; Farkas, Gagne et al. 2005; Woodside, Schell et al. 2006; Lloyd, Waghorn et al. 2008). The identification and suggested modifications to work tasks, schedules or performance approach, identified as crucial to job retention in Secker and Membrey's (2003) qualitative study, required *occupational analysis* skills (Lysaght, Shaw et al. 2008). Finally, *group work*, well established in mental health generally (Davidson, Chinman et al. 1999; Free 1999; Yalom 2005) used processes of peer support empathy and education for those who attended the support group.

Did the workers who used the Retain project retain employment?

The table below shows the employment status outcomes of the participants.

Employment status outcome 6-9 month post interview (Jan 09)	Number
Retained a job (previous or new post) with current employer	6
Obtained new job with new employer	4
Left job – not currently employed	4

The employment statuses of the workers were identified in January 2009 (6-9 months post interview). 6 had retained employment (previous or new post) with their original employer, 4 had gained a new job with a new employer and 4 had left their job and were unemployed. In job retention terms measured by employment status the outcomes were positive for 10 of the 14 participants. Analysis of the 4 individuals who had not retained employment revealed some potential mitigating factors which may explain this outcome and also suggested that positive work related outcomes can be identified for 3 of these 4 individuals.

Factors associated with workers who did not retain employment

The workers who were not employed at follow up reported factors involving tensions, conflicts (including some stigmatising attitudes) with managers or colleagues and/or stigma and workload pressures.

[my manager] was basically complaining about the fact that I'd gone off sick … – oh, what was it her words were – "oh I don't suppose you can help your sickly friend out can you and do this visit for her." It was that sort of attitude and I made a complaint about her. Rebecca.

[my manager] called me in to have a meeting and she was actually really quite aggressive with me. She said "you're not doing your work" and I said "well I am doing my work, I'm doing it to the best of my ability, but you know I'm struggling." And she was quite aggressive and just basically said to me "well I think you need to find another job."…And there were other things about working there… they'd see clients on incapacity benefit with mental health problems and… these clients would come in and they'd go and you'd get comments like "I can't stand seeing that nutter" and things like this and you, I just sort of thought, ok maybe I'm not in the right place here. John.

There was three original people … ganging up really, stirring up of one of the people … to complain about me and it was soon after that the problem started…. When I went off sick they were okay, you know, it was tolerable but then when I went back off of being off sick, they didn't speak to me for a month. Linda.

For John and Ruth workload pressures and insufficient workplace support/isolation combined to make job retention unsustainable.

I think within the team I just kind of isolated myself and you know I think when it got to that point I felt really uncomfortable… and also my boss kind of, he was under quite a strain and also I just couldn't face the work anymore. Ruth.

I realised that actually what was happening was not about, necessarily about my mental health condition, it was about the fact I wasn't being supported and I was being overworked, yeah. John.

For Linda also the main issue in her view was not her mental health problem:
Well, it's physical… if I didn't have the physical problem then I wouldn't have come to Retain and I wouldn't be taking anti-depressants which I think are just masking the problem anyway. Linda.

Whilst issues of conflict, stigma and workload were experienced by some of the other workers who retained their original employment, and more so by those who gained new jobs, they were generally most severe for the 4 people who were unemployed at follow up.   This is consistent with the identification of a positive relationship with the line manager as being a prime factor in job retention (Thomas and Secker 2005) and with St-Arnaud et al's (2007) Canadian study which found that the likelihood of successful return to work was reduced when an employee believed their work was implicated in making them unwell.

Positive outcomes for the unemployed group: retaining working identity and aspirations

For three of the four clients who had not retained their original jobs or found new work there is evidence that the Retain project helped them to retain both work aspirations and a work identity.

My greatest hope would be to… get my mental health sorted out… to be …doing something in paid employment by the end of the year. Rebecca

I mean at the moment I'm not looking for work because it's, I need to get well again first, but certainly when I go back to work eventually, I will try to involve Retain because I think from the start I would like to disclose my mental health problem, I think that's really important, and I would actually also be quite happy about saying to any employer you know, I'm involved with a service called Retain which is there to help me retain myself in work. John.

I'm studying at the moment, studying Buddhism. So my main hope is to progress with that and maybe do a couple of courses for a bit more security and get some experience in a job. Ruth.

What did employees say about the quality and organisation of the Retain project worker interventions?

The content of the Retain project worker interventions has already been presented in this report.   In terms of quality and organisation workers were very positive about the support

that they had received from the project   A number commented on project workers' qualities:

"a very good listener" " "very, very helpful" "a very calming and soothing influence". Naomi.

[the Retain worker] went through everything with me and he was sort of, and he was brilliant actually. John.

I feel really at ease with [retain worker]. [She]'s the only person I've told everything to…   I trust her and because she actually seems to be genuinely interested. Sonia.

Retain as an organisation I think are amazing. Everybody is so nice so pleasant, and [Retain worker] has been really helpful in any way she possibly can, always been very supportive, very kind and has supported me in issues not just to do with work. Linda.

John and Mary commented on the skill set and knowledge base of the project workers:
I mean from my point of view, it is, it's a fantastic service 'cos you've got people like [Retain worker 2] involved who's been a service user so you've got that, you've got that side of it, you've got, umm, people like [Retain worker 1] who's got such amazing knowledge. John.

It's about people isn't it? It's the quality of who you're recruiting and why, getting the right person for the job, a person with the right skills so that they can do the job properly. It's a good mix of skills that [retain worker] has I think because she's obviously not a counsellor but she's done occupational health [actually occupational psychology] and been involved in HR and I think that's what people need and that sort of viewpoint. Mary.
One worker who had had contact with two project workers perhaps inevitably compared them and considered that one of them was "*stronger than the other*".
The only other criticism about the project worker intervention related to the use of a clock during meetings (used to promote focussed use of time if a client was significantly late):
There's only one thing that I don't like … and that is always having the clock there. That's the only thing that's not very personal for me because I walk in and the first thing she does is put the clock down and she says 'right well we've got 45 minutes' and so I'm constantly looking at the clock and that, you know, it's like a counsellor putting a box of tissues on the table. That just upsets me because it reminds me that I'm a client and not somebody that she really cares about. Apart from that I think she's great, I really do. You

know, and how she retains my information and makes sense of it and actually under-stands, you know... Sonia.

What did employees say about the quality, organisation and impact of the Retain support group interventions?

This report has described above employees views of some of the impacts of the support group.   More experiences are outlined below in addition to discussion of the quality and organisation of the group.

Anna described the development of the support group:

Well it's been quite an organic experience, because first of all we met in a pub, twice we met in a pub and that just wasn't working. It was too noisy. Even when we had a room people were coming in and we were discussing confidential stuff so the decision was made to move it here. It became fairly packed, kind of free floating, dah dah dah this is what's happening with me. So the idea was that we'd have one session where someone comes in and talks… and then the next would probably be us catching up and talking about how things were going so we'd have both but it was more structured and also food was introduced. Anna.

Others agreed with this understanding of the support group providing a combination of peer support and sharing of experience and knowledge (sometimes making use of invited guests or project workers to introduce topics).

Yeah, it's [the support group] very good. I mean there was one or two things that they had running like the mood thing. I mean I didn't go to that but the welfare benefits and other things that seemed to be very [good]… I mean just coming and having support from other people. Steve.

The support groups they run every month, yeah.   And obviously sometimes they're themed, but even if they are there's always,… a chance to talk to people and it's actually, it's such a relief to … start talking and you can tell they've been waiting to talk about this stuff for ages and it all comes out and it's just hearing how similar those experiences are and it is actually thinking, "it's not just me" … and that's a real, real help. John.

John went on to point out that the sharing of experiences in the group could help in problem solving:

… someone might say, "well you know they did this" and someone "well actually I was in that situation and this is how I got out of it." It is a kind of sharing of experience and knowledge as well. John.

Harry expressed some dissatisfaction with the lack of structure to the groups:

It's hard to say, because if there wasn't more of a set pattern to the groups that may not have worked itself, do you know what I mean? It might have been good that it was a bit more sort of organic … but really I suppose what, well perhaps I'm skirting round the fact that I feel that the groups weren't at the point yet where they were as good as they could have been. Harry.

In apparent contrast Charles wanted to see the social aspect of the support groups developed further including more:

flexibility within the support groups themselves. Because at the moment they're sort of really fixed periods. In a sense, a discussion or social group that's sat round that's actually quite flexible. Charles.

Whilst valuing some aspects of the group process some workers suggested that they personally found interaction in a group setting difficult:

but I think it kind of depends on what the subject is. What they're covering in that particular time. I did do sessions which I thought were really helpful but there are times when kind of interaction gets a bit too much for me really. Laura.

Sometimes I was fine and everything would just flow and I would be able to contribute and, but often I couldn't and I'd start to get uncomfortable. I do feel that I gained from them even so… Harry.

Rebecca decided not to participate at all in the support group for this reason:

No, I thought maybe it might be therapeutic, but then I just thought, no I don't really want to, so no, no. I'm able to do it on my own, I mean I had to learn to do it on my own and I'm not really a group-y type person. Rebecca.

Others didn't attend because of timing and other commitments:

No I haven't but I was made those offers but it, it always seemed to clash with other things Mary.

[Attending the group] would be difficult for me just because I've got two children and I'd have to pay a babysitter to do it … and because of where I live and everything it would be, it's quite hard just to get out in the evenings full stop! Zoe.

Anna saw in the support group potential for an ongoing resource of support after she had finished working with the individual project worker:

.. they've set up support groups. That has been really useful. We've kind of finished our work together in terms of [Retain worker] supporting me and I know that she'll be there if anything slips. But having that link and having support through hearing other people's stories and kind of keeping the link with Retain has made it feel quite safe for me. Anna.

How did employees judge the project overall?

As with specific appraisal of project worker and support group interventions overall comments evaluating the project were invariably very positive.   For John one of the strengths of the project lay in its independence:

I think that's a really, really important thing about Retain is that they're independent and you actually feel like it's someone on your side, which is really important, so I, yeah, it's a fantastic service you know… John.

Laura and Sonia contrasted the project to other support they had received:

I think it's brilliant actually. I don't really have any other kind of support now. I've been signed off by the psychiatrist. I don't really see the GP for anything regarding mental health issues. So it's my only kind of place where I can just… you know, there's someone there that knows the score, I don't feel like they've got 3 minutes to assess the situation and write a load of rubbish down and then get turned away and never speak to them again. The interaction is real it's not just clinical. I hope that makes sense. Laura.

Oh, all sorts of things were suggested … The only thing that worked was here, for me, it's the only place that I came to and went away feeling like I'd achieved something or I felt a bit more at peace with myself. The doctors… I just felt that nobody actually had a clue. Sonia.

Anna stated that for "*anybody with a mental health issue who's having difficulties facing going back to work, I would absolutely recommend trying to get access to this service.*" Whilst Sonia revealed that she had actually done so: "t*he lady I've got at work who's been off, you know, I suggested myself, I gave her [Retain]'s number*".

Suggestions made regarding what could be done to improve the project

When asked about what could be done to improve the project many made comments about increasing its resources so more people could benefit as they had done.   Steve suggested "*they should have a welfare benefits advisor, attached to the service. Some-one who's an expert in employment laws*".   Ruth did not like the use of forms:

I don't know. I guess there's a lot of forms, one thing I did find is there's a lot of forms. Well not a lot of forms really, like a couple of forms to do at the very beginning and then during each session and it kind of feels a little bit weird, you know, having to fill in a form. Ruth.

Comments regarding the impact of Retain on workers' lives

General comments about the impact of the project upon further underscore their appreciation of its impact on their lives:

I couldn't have done all of this without this project, it has been amazing. Rebecca.

to have someone to reflect back that was actually at that meeting … that's been amazing helpful but also looking, actively looking for solutions. Alice.

It just makes me feel like a human being rather than just being a problem. Laura.

It wasn't only getting back it was sustaining me as well. Anna.

And my thoughts on work and mental health is that work is … a really good medicine, I think, it really is… if you can manage to get back to work, even if it's just part time, it's really good for you, that may just be my personal experience, but I really feel that that might be true for most people. Harry.

What can we conclude from the evaluation?

- The employees who used Retain's services greatly valued the project and considered it made in 13 of the 14 cases a significant contribution to positive work related outcomes – notably for 10 of the 14 to retain employment. Analysis of the results supports this by being able to present logical explanation for how the interventions contributed to the reported outcomes.

- Within vocational projects supporting people with mental health problems it is accepted that retention is focussed on supporting people to retain employment which may include finding a new job. This was reflected in this evaluation which found that 4 of the workers found new jobs.

- We found that by helping employees recognise their skills, achievements and value as workers Retain helped preserve and develop work related identities and aspirations. This was the case even for 3 of the 4 employees who were not employed at follow up. This suggests a further extension of the understanding the possible outcomes of job retention which might not have been revealed by quantitative measures.

- Employees reported a range of methods by which Retain helped them increase their confidence, communication skills and approach to problem solving. Notably the process by which they were encouraged to reappraise or reframe their situation was identified as a starting point which enabled employees to reduce the self blame and isolation which they felt and to recognise the work related skills they had. For many this contributed to an increased sense of hope, legitimacy and confidence to approach employers and plan for return to work. Education about formal legal rights (whilst also cited as having helped) may not have achieved this alone.

- Another group of methods which Retain was found to have used with reported positive effects focussed on the employees' jobs. This often began with a process of analysing jobs which then enabled potential temporary or permanent accommodations or adjustments to be identified to support return to work and longer term sustainability. Additionally Retain provided employees with a space to problem solve issues which arose in the work place. In some cases consideration of job

related issues involved considering whether alternative employment might be the best solution.

- A third cluster of interventions related to ways in which Retain helped employees to collaborate with employers to support return to work and job retention. For many this developed from the reappraisal of the situation (outlined above) by helping the employee recognise that job retention was a shared issue which both employees and employers had interests and responsibilities to engage in. This then helped employees approach and engage their employers. Once engaged in a process of dialogue Retain helped employees to effectively communicate their views and experiences in a manner which assisted employers to understand their experiences. There is some evidence that the involvement of Retain as an external third party helped ensure that internal organisational policies and external legislation were observed. Taken together these elements supported detailed planning to achieve successful return to work usually in meetings with employees and their managers.

- Analysis was able to identify a range of approaches informing the work of Retain. These were case management, problem solving, cognitive strategies, recovery orientated approaches as well as occupational analysis and group work. In the main these are similar to those described in job retention literature – notably the Avon pilot (Thomas and Secker 2005) which was a similar scale research evaluation of a job retention project. Notably the significant direct involvement in discussions between employees and employers was apparent. One difference was that Retain users tended not to perceive Retain as acting as an advocate for them – rather as a support to their own self advocacy in a manner consistent with the Sainsbury Centre's proposal for mental health workers to provide their clients with a coaching role (Shepherd, Boardman et al. 2008). In this sense Retain could be seen as helping clients to become one of their own natural supports. A second difference was the use of a support group (see below).

- Retain clients praised greatly the qualities of the project workers who supported them. A number explicitly commented on specific interpersonal and vocational expertise. Taken alongside a recognition of the range of approaches used this supports a conclusion that the skill set of the project workers is likely to have a significant impact on the success of their work with clients.

- A distinguishing feature of the Retain project, in comparison to published literature, is the provision of a support group for Retain clients. Not all clients accessed it – either because of access issues or because they did not see themselves as able to make use of groups. Those that did access it considered that it was an effective forum for peer support by sharing experiences which served to reduce isolation and related feelings of self blame. Some considered that these experiences could also assist in practical problem solving of their issues. In addition to peer support, clients valued the educational component of the groups. There were differing views on what the balance should be between these two elements with some wanting more structure and set topics whilst others either liked the current balance or wanted a looser more social structure. More focussed research on the use of the support group could usefully explore this further.

In what ways do we need to qualify these findings?

- The design of the project whilst helping to facilitate a depth of analysis and collaboration also gives rise to a number of limitations. Even though researchers concluded that the 14 interviews provided sufficient data to enable a saturation of themes to emerge in relation to interventions and outcomes the same claims for generalisation cannot be made for the findings from this data as they could from larger numbers – notably in quantitative research.

- More significantly this investigated one project in one geographic location. Most of the participants received interventions from just one project worker (as the other part time project worker had left the project and not yet been replaced at the time of the interviews). This means that relative importance of the skill set and experience of the project worker on the one hand, and the project's design on the other remain relatively unexplored. A number of participants commented on the skills and experience of their project worker – whether a less skilled/experienced project worker would be able to deliver the interventions as successfully remains unanswered. Schneider (2008) has drawn attention to the lack of confidence of many supported employment practitioners in use of cognitive behavioural interventions amongst others. Evidence from this study suggests that the main project worker was able to successfully deliver interventions some of which can be seen as of a cognitive behavioural nature.

- The Big Lottery charitable funding which supported this pilot project may have helped it maintain a person focussed quality service with manageable sized case load being held by the Retain project workers. The Sainsbury Centre for Mental Health (2008) has expressed concern that the emphasis on outcomes and a temptation to discharge people from caseloads of some employment support projects mean that quality is lost.

- The collaborative nature of the research, whilst presented as a source of validity, could also be seen as a potential limitation. There is a risk that the clients may have felt it important to emphasise the positive outcomes of the work out of gratitude though as one participant put it:

  Like I say I wouldn't normally come to something like this. There's no benefit to me, I'm doing it for [retain worker] because I think what's she done, even though I can't put it into words, has been really helpful. Sonia.

What should happen next?

- Information gathered for this research will be analysed further to help understand the employees' experiences and gain further insights into what interventions work best for which people in what circumstances.

- A research study focussing on the role of the innovative Retain support group may be of particular value given the lack of previous research.

- Further research is also recommended into similar and contrasting job retention projects in a range of geographic areas, with greater ethnic diversity. Longer term follow up of people who have used these projects is also recommended.

- The collaborators in this research, notably the Retain project service user group, are keen to ensure that the results of this evaluation are shared as widely as possible. To do this a range of methods are being planned from traditional conferences and research papers to more creative formats. Target audiences will include employees with mental health problems, employers, mental health/ vocational workers and academics and researchers.

- It is hoped that people who commission and provide job retention services for people with mental health problems will be able to draw on the findings of this project to support and develop their essential work.

- Further research to explore *employer* perspectives of using the Retain service would be useful. Following this evaluation, research (Walker and Fincham 2009) is being carried out in the South East of England to explore the experiences of line managers and senior managers with regard to mental health at work. The intention is that opening up dialogue with employers could provide information to strengthen job retention services like Retain.

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