

Vocational rehabilitation after brain injury: the national scene

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Effects of brain injury

Interaction of:

- Physical and sensory difficulties e.g:
 - motor skills, mobility, balance/coordination, vision etc.
 - + headaches, fatigue + ? seizures, dizziness etc.
- Cognitive and communication difficulties e.g:
 - attention, memory, speed, language, executive function etc
- Behavioural difficulties e.g:
 - irritability, frustration, aggressive outbursts, disinhibition etc
- Emotional difficulties e.g:
 - volatility, mood swings, anxiety, depression, confidence etc

Cognitive & communication – Executive e.g:

- Poor performance at work in spite of appearing to have the required knowledge and skills
- Reduced awareness, monitoring / management of work performance and behaviour in the workplace
- Difficulty in adapting coping strategies developed in rehabilitation within the workplace
- Difficulty in planning, prioritising & organising work to achieve objectives and meet deadlines
- Difficulties in starting and/or completing tasks

..... cont.

Cognitive & communication – Executive 2:

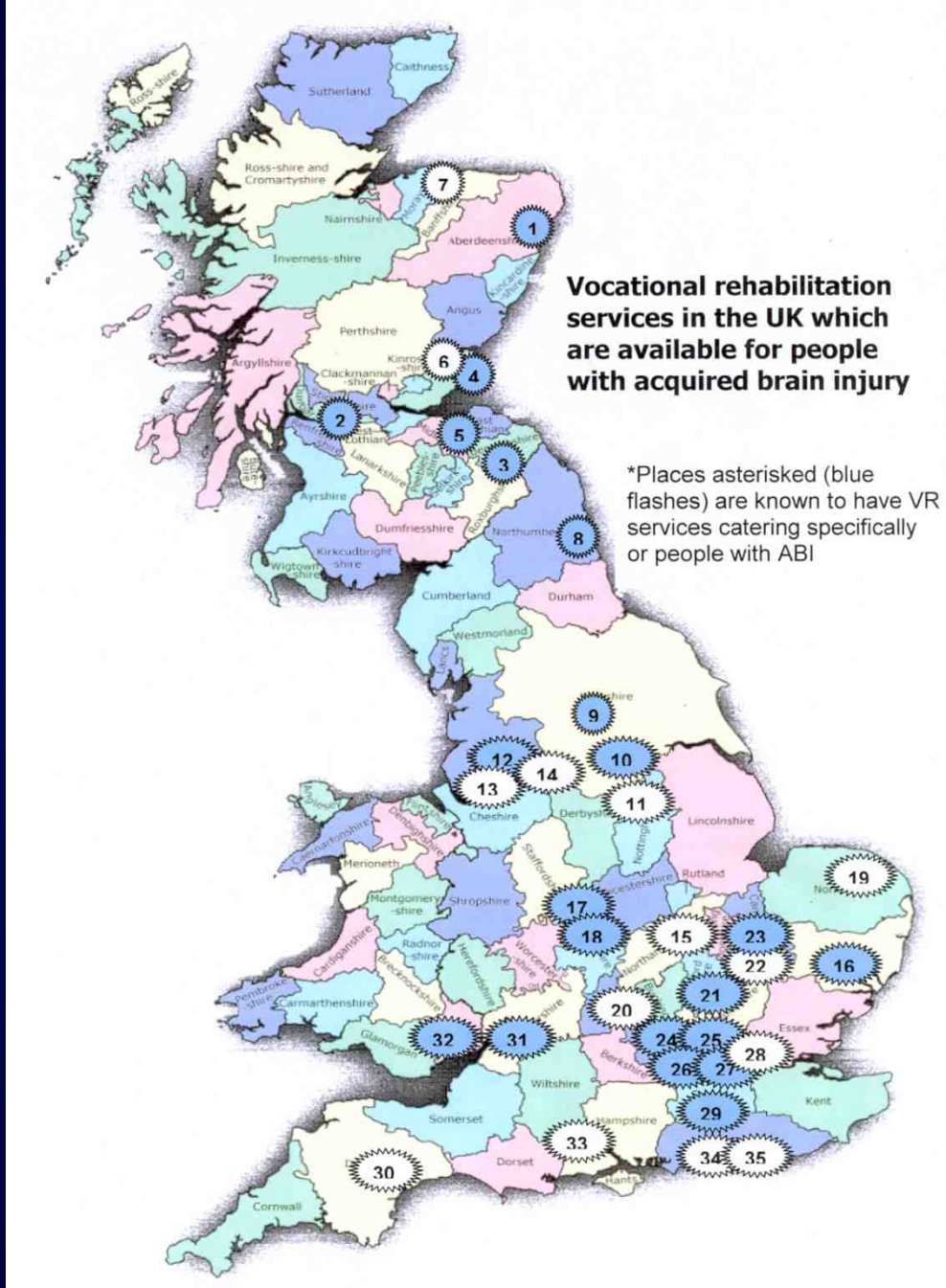
.... cont.

- Difficulty in improving work skills / behaviour in response to feedback / supervision
- Difficulties (e.g. inflexibility) in coping with changes in role, duties or work practices
- Lack of awareness of impact of own work performance & behaviour on colleagues
- Poor judgment of behaviour in workplace (e.g. ill-judged humour, insensitive comments)
- Disagreement with managers (e.g. about the existence or cause of difficulties at work)

Survey of ABI Vocational Rehabilitation in UK

- Only 8% of rehabilitation services reported that they provide specialist vocational rehabilitationbut 80% refer clients on to vocational services.
- 36 such services for people with ABI identified:
 - ABI services which include a vocational element
 - specialist ABI vocational rehabilitation services
 - pan-disability voc. / FE programmes open to ABI

(from Deshpande & Turner-Stokes, 2004)



Department for Work and Pensions (DWP): Jobcentre Plus – key services 1990s-2000s

- Disability Employment Advisors (DEAs)
- Work Psychologists (WPs)
- Key Government funded programmes e.g.:
 - Access to Work provision
 - Work Preparation (incl. specialist ABI programmes)
 - Job Introduction Scheme
 - WORKSTEP (supported employment programme)
 - Permitted work
- + Incapacity Benefit Personal Advisors >
- + Pathways to Work – Condition Management Programmes

Jobcentre Plus ABI Work Preparation

- A. Job finding / occupational decision making needs.
- B. Job keeping needs incl. pre- & post-employment support
 - + **Additional / key ABI components:**
 - ✓ interpersonal/communication skills related to work
 - ✓ anger management
 - ✓ cognitive techniques for work / specific job
 - ✓ vocational adjustment and/or psychological therapy
 - ✓ work simulation/experience
 - ✓ appropriate ad hoc on-site support (incl. job coaching)

(Adapted from BSRM / Jobcentre Plus / RCP, 2004)

Jobcentre Plus: Specialist Brain Injury Work Preparation Providers in UK

(13 programmes in 2003)

- England – 7 programmes:
 - Aylesbury, Banstead, Birmingham, London, Newcastle, Rochdale, Liverpool.
- Scotland – 5 programmes:
 - Aberdeen, Dundee, Edinburgh, Glasgow, Kirkaldy
- Wales - 1 programme:
 - Cardiff

Inter-Agency Advisory Group on Vocational Rehabilitation after Brain Injury

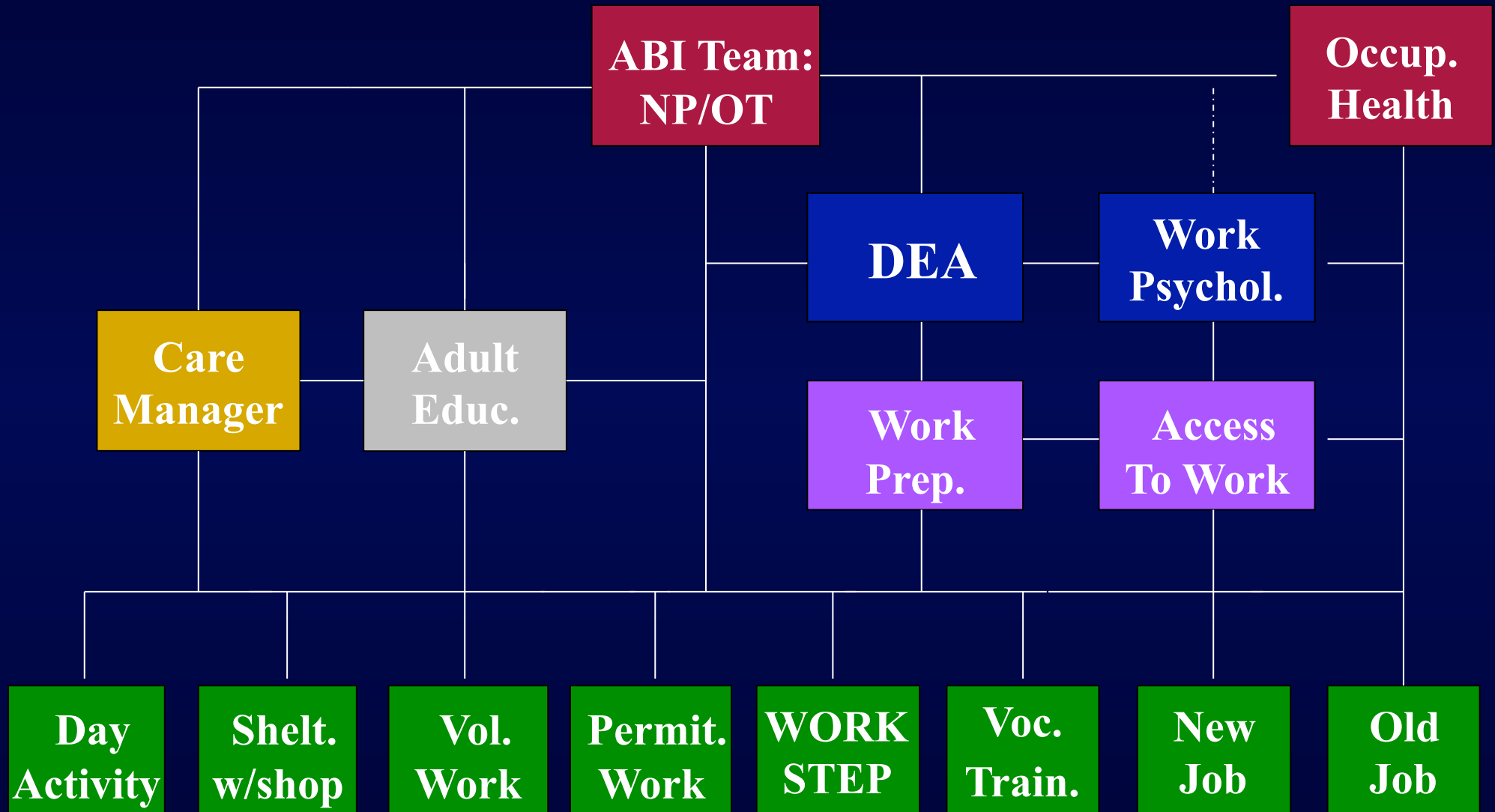
Vocational Assessment & Rehabilitation
after Acquired Brain Injury:
Inter-Agency Guidelines
(eds. Tyerman A & Meehan M)

(British Society of Rehabilitation Medicine / Jobcentre Plus /
Royal College of Physicians, 2004)

ABI: Vocational Service Guidelines

- Guidance / support on return to previous employment, education or training.
- Vocational / employment assessment to determine alternative avenues of employment or training.
- Vocational rehabilitation to prepare for return to alternative employment, education or training.
- Supported employment for those requiring ongoing support and/or additional training.
- Alternative occupation - permitted work, voluntary work or other occupational / educational provision.

Brain injury vocational rehabilitation provision



UK National Service Framework (NSF) for Long-term (Neurological) Conditions

Quality Requirement 6. Vocational rehabilitation

People with long-term neurological conditions are to have access to appropriate vocational assessment, rehabilitation and ongoing support to enable them to find, regain or remain in work and access other occupational and educational opportunities.

(Department of Health, 2005; www.dh.gov.uk/longtermnsf)

QR6 Markers of good practice:

1. co-ordinated multi-agency vocational rehabilitation that takes account of national guidance/best practice
2. local rehabilitation services:
 - address vocational needs during review of integrated care plan and as part of any rehabilitation programme;
 - work with other agencies to provide:
 - basic vocational assessment
 - support & guidance on return to work
 - support & advice on withdrawing from work
 - refer complex needs to specialist vocational services.....

QR6 Markers of good practice :

3. specialist vocational services address complex needs
 - specialist vocational assessment & counselling
 - interventions for job retention (incl. workplace support)
 - vocational rehabilitation or work preparation programmes
 - alternative occupation or educational opportunities
 - advice to other services.
4. routine monitoring vocational outcomes (including the reasons for failure)

DWP / Jobcentre plus: Recent and forthcoming changes to statutory provision

- Pathways to Work - Condition Management Programmes
 - for people on Incapacity Benefit >
- Introduction of Employment Support Allowance (ESA) +
 - Work Capability Assessment / work-focussed interviews
- New specialist disability employment provision ‘Work Choice’, replacing Work preparation, Workstep (supported employment programme) and Job Introduction Scheme.
- From 2011 planned new ‘Work Programme’ for wide range of ‘customers’, replacing other return to work schemes.

DWP/ Jobcentre Plus Provision – **Work Choice**

Suitability:

Suitable candidates for Work Choice are people with complex work-related barriers arising from disability; and

- have in-work requirements that cannot be met through work-place adjustments; and
- need longer-term support in work and/ or help to find work; and
- cannot be helped through the Work Programme; and
- expect to be able to work at least 16-hours per week

(adapted from Tyerman & Meehan, 2010)

DWP/ Jobcentre Plus Provision – **Work Choice**

The Work Choice programme is designed as a four-stage, modular, specialist provision. The four stages are:

- **Initial Provider Interview;**
- **Module One (Work Entry Support).** This will normally last for a maximum of 6-months
- **Module Two (In Work Support).** This module can last up to 2-years; and
- **Module Three (Longer Term In Work Support).** This module will focus on helping provide a stable working environment and help the individual develop their career.

(Adapted from Tyerman & Meehan, 2010)

Vocational assessment and rehabilitation for
people with long-term neurological conditions:
Recommendations for best practice
(VA&R-PwLTNC-RfBP)

Recommendations Development Group
(Co-convenors: M Meehan, V Neumann & A Tyerman)

A DH funded / DWP-Jobcentre Plus supported project

(British Society of Rehabilitation Medicine, 2010)

VR-PwLTNC-RfBP

5. Recommendations for Best Practice

1. General issues (e.g. disclosure; consent & capacity; access)
2. Identification of need / provision of information
3. Vocational / employment assessment
4. Job retention interventions
5. Return to occupation
6. Withdrawal from work on health grounds
7. Preparation for alternative occupation
8. Transition: education to employment or other occupation
9. Occupational / educational provision

(BSRM, 2010)

VR–PwLTNC–RfBP : Referral for vocational rehabilitation (VR)

When a need for vocational rehabilitation is identified people with a neurological condition should be referred to a vocational programme appropriate to their needs.

People with complex vocational needs should be referred (whenever possible) to a specialist programme for people with a neurological condition in accordance with Quality Requirement 6 of National Service Framework for Long-term (Neurological) Conditions (Department Health, 2005)

(BSRM, 2010)

VR–PwLTNC–RfBP : Pan-disability provision

When a practitioner is aware that a person with substantial or complex needs has been referred to a pan-disability programme consent should be sought from the person to contact the relevant adviser or provider to explain the vocational needs of the individual and to discuss the most appropriate provision.

When a practitioner is concerned that a course of action poses a risk to the health or well-being of the person or any third party, this should be brought to the immediate attention of the adviser/provider and confirmed in writing.

(BSRM, 2010)

VR–PwLTNC–RfBP: Implementation:

Inter-agency recommendations

- Inter-agency review of local services in context of NSF
- Develop local referral criteria/protocols across agencies
- Establish service links to discuss specific client needs
- Review by all relevant professions of training in VR.
- Inter-agency approach to raising awareness of vocational needs and specialist VR skills training.
- Research to identify new and effective VR for PwNC.
- Regular audit of provision against requirements of the Disability Discrimination Act (DDA) and the NSF.

(BSRM, 2010)

References

BSRM/Jobcentre Plus/RCP (2004). *Vocational assessment and rehabilitation after acquired brain injury: inter-agency guidelines*. (eds. A Tyerman & M Meehan). London: British Society of Rehabilitation Medicine; Jobcentre Plus, Royal College of Physicians.

BSRM (2010). *Vocational assessment and rehabilitation for people with long-term neurological conditions: recommendations for best practice* (eds. M Meehan, V Neumann & A Tyerman). London: British Society of Rehabilitation Medicine.

Tyerman A & King NS (eds.) (2008). *Psychological Approaches to Rehabilitation after Traumatic Brain Injury*: Oxford: BPS Blackwell:

14. Return to previous employment (R Johnson & S Stoten)
15. Vocational rehab. programmes (A Tyerman, R Tyerman & P Viney)
16. Supported employment & job coaching (D Carew & S Collumb)