

Putting occupational psychology to work

Making a difference

'AN insightful senior manager once observed that psychologists in commercial organisations are like bidets. They add class but no one is quite sure if they are using them correctly.' (Acker *et al.*, 1998, p.12.) From my experience there can also be considerable confusion about what might be expected of psychologists in public sector settings. And the pressures on resources in the public sector ensure that an indefinable benefit such as 'adding class' would not keep a psychologist employed for long.

Any organisation is entitled to expect clarity about the benefits that have accrued, or could accrue, from investment in psychologists. The impact of interventions should be evaluated by practitioners, not only so they can provide such information to their customers, but for two additional reasons — as part of evaluating the effectiveness of their own practice for personal continuous improvement, and to add to the body of knowledge of the profession itself in developing an evidence-based occupational psychology (Briner, 1998).

There is increasing emphasis on the development of evidence-based practice in the public sector. Healthcare has led the way, but it is emerging in a range of areas, including housing policy, social care, transport policy, the probation service, and education (Davies *et al.*, 1999a). Evidence-based practice requires the collection of evidence of effectiveness. *The Psychologist* has recently included articles on assessing the impact of psychological interventions designed to improve the effectiveness of the



MARY DALGLEISH discusses the role of occupational psychologists in the Employment Service.

NHS (Baker & Firth-Cozens, 1998), and educational psychology (Cavill, 1998.) This article focuses on the impact of occupational psychologists in the Employment Service, while identifying issues common to applied psychologists more generally.

The Employment Service

The Employment Service employs around 100 occupational psychologists within trainee, higher, senior and principal grades. About three-quarters of these work across Great Britain as part of nine regional disability service teams. Each is headed by a senior psychologist reporting to a regional administrator, but professionally managed by a principal psychologist. Psychologists in these teams support disability employment advisers in carrying out assessments to help unemployed people with disabilities move into, or move closer to, employment.

These psychologists contribute in a range of ways to disability service development: by developing effective delivery teams; by contributing to programmes to help our providers (such as work preparation providers) promote clients' personal effectiveness; by working with test publishers to establish the value of new psychometric tests for disabled people; and by improving practice in

diagnosis and appropriate referral for people with particular disabilities (Meehan *et al.*, 1998).

The remaining psychologists form a head office team who carry out a range of functions to develop mainstream Employment Service business across a network of over 1000 Jobcentres. Some work directly with local Jobcentres and regional teams. Others work with those whose remit is to translate policy into practice, implementing new initiatives such as New Deal. A current example of their work is the development of the Client Progress Kit (James, 2000). This is a tool for Jobcentre advisers to help clients review progress against a range of attributes relevant to employability.

Some psychologists concentrate on issues around human factors of IT, for example advising on the usability of new IT developments. Others are responsible for the annual survey of all Employment Service staff and its use in organisational development nationally, regionally and locally. In addition, we contribute to the evaluation and development of personnel processes and policies, and have recently contributed to a new recruitment system designed to make the process of recruiting Jobcentre staff more effective, efficient and flexible.

A challenge for us as a professional group is to draw together the lessons from these diverse activities. We need the psychologist assessing a person with a very specific type of disability in Scotland to be able to learn from the experiences of the psychologist in southwest England who has tackled a similar issue. We want the psychologist who is asked to address management style in a particular district to be able to draw on materials that have proved effective in another region. Without

LETTER FROM DISABILITY EMPLOYMENT ADVISER TO HER MANAGER

'Our Occupational Psychologist is extremely helpful in bridging the gap between professional medical guidance and relating this to individual clients' needs. He offers practical realistic suggestions when I am really scratching my head at what do next with some cases. He has a broad depth of knowledge which he is only too willing to share to explore a situation — on one occasion he was able to advise me that a forensic psychologist would appear to be appropriate for a case we were discussing. I was unaware of the role of such a person.'

the capability to learn lessons from one another, we lose the benefits of being a national service, we fail to build on our collective experience, and we compromise our potential efficiency and effectiveness. To supplement links between individuals and teams, written reports, occasional conferences, and an internal information service, we have recently set up an in-house journal to capture and share lessons learnt from the delivery of employment assessments to disabled clients.

Demonstrating value in supporting client assessments

In the Employment Service there is greatest clarity around the role of psychologists in supporting the assessment of clients with disabilities. By employing a small number of psychologists across the network of more than 1000 Jobcentres, advisers have access to in-depth assessments for their clients when required. This obviates the need to train all advisers to a level that they might need only rarely, and enables Jobcentres to offer services to a wider range



Disability employment advisers carry out assessments to help unemployed people with disabilities move into employment

of jobseekers. In other European countries too, occupational psychologists perform a similar role with clients. The impact of this role is difficult to demonstrate, because advisers only approach a psychologist with the hardest-to-help clients. Rates of placing clients into work are therefore not a good measure of gauging the psychologist's contribution.

Evidence of effectiveness in supporting client assessments

Information about the volumes of clients seen, or the number of clients helped through supporting advisers, is collected and used to monitor psychologists' performance. Over 5000 full client assessments (often involving specialised psychometric testing to establish the nature

of strengths and employment and training options) are carried out annually, with support to a further 7500. More than 600 people at risk of losing their job because of their disability are assisted.

But to supplement such 'input' information we also collect case-study information and feedback from the client or the adviser (who is the customer for the psychologist's service). These can be powerful in clarifying the nature of the psychologist's contribution. Psychologists support disability employment advisers (see box opposite), and help clients directly, to identify realistic job goals and demonstrate their potential. For example:

Clare, with learning difficulties and no realistic work goal, was referred to a psychologist at the recommendation of the community psychiatric nurse for a literacy assessment. The assessment included some counselling alongside a full assessment of basic literacy, numeracy and general learning potential. This showed that social relationships were more of a problem than literacy and numeracy. The psychologist enabled the client to focus on work skills and interests and helped identify a new realistic work goal. A work placement was arranged as a care assistant with the elderly. She is enjoying it and is expected to keep the job.

Demonstrating value in organisational developments

There is less clarity about the other roles performed by psychologists in the Employment Service, despite the wide range of contributions we make (or perhaps because of that — we appear to be Jacks and Jills of all trades). There can be confusion about our role relative to trainers, researchers or management consultants, depending on the specific intervention. Our professional label is unimportant to our customers. We do develop strong advocates; but job changes are frequent, so it is often not possible to trade on past successes with specific individuals. There is a continuous challenge to influence and inform to ensure relevant people are aware of, and continue to get the best value from, in-house psychologists.

Advocacy is a skill that often does not come easily to psychologists. As Tizard (1990) put it, '... good researchers make poor advocates, because of their awareness of the inevitable limitations of their findings. This can lend a lack of conviction to their advocacy.' (p.436.) This laudable

concern for purity can be interpreted by customers as lack of responsiveness to organisational demands, where the psychologist is trying to be realistic about the feasibility of a project. Practitioners have to develop both an appreciation of operational requirements and a clarity about what is an effective and valuable response for the given time scale and conditions. Even an imperfect solution may help something to be done better than would have been possible otherwise.

Tizard (1990) also highlights that advice has to be acceptable within the constraints of current thinking. An important lesson is the need to repeat and reinforce messages. Sometimes our work serves to prepare the ground to facilitate change. For example, it was only after a particularly nasty incident in a Jobcentre that our recommendations on workplace violence were implemented. The underpinning work had been carried out some time earlier; this meant we could offer a speedy response, even though at the time the work was completed it had little impact.

It can also be difficult to assess the impact of process skills, for example where a psychologist has worked closely with customers to influence and help them towards 'owning' an intervention. The more effectively this is done the greater the potential influence on the organisation, but the less the psychologist may be seen to have added value in substantive terms.

Evidence of effectiveness of organisational interventions

Over the last two years we have increased our efforts to gather and share evidence to demonstrate how we improve organisational effectiveness. This forms part of our annual report to senior managers. Feedback suggests there now is less 'mystery' about what we do, and that this enables people to seek our assistance. We have produced three kinds of evidence.

First, and most direct, we have examined the impact on key business results: the number of unemployed people placed into work. In a study of interventions in seven Jobcentres we identified a greater improvement in this headline business measure in most Jobcentres where we intervened, compared with the relevant regional average (Table 1).

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TABLE 1 Change in the percentage of unemployed people placed into work between first and second quarter 1998

Jobcentre where psychologist intervened	Average for that region
1. 19.8%	3.8%
2. 13.2%	1.9%
3. 12.0%	3.3%
4. 6.0%	2.4%
5. 2.4%	1.9%
6. 2.2%	1.7%
7. -3.9%	1.7%

The considerable variations in effectiveness reflect the 'noise' inevitable in real-world research, often the reason given for not attempting to assess impact in the first place. The interventions were tailored to the requirements of the individual Jobcentres. The main areas of activity were in:

- improving team working;
- developing management skills;
- developing interviewing skills;
- improving customer service;
- managing sickness absence; and
- improving the management of clients with severe behaviour problems.

The lessons from that work have been captured in a booklet designed to help Jobcentre managers identify when a psychologist might help (Employment Service, 2000). The booklet highlights the signs that suggest a particular area might need attention, and how to collect further evidence to clarify whether intervention is necessary. For example sickness absence may be high, or increasing or being managed ineffectively. In this case an internally developed workshop ('Managing to Motivate') might be appropriate for managers. This is based on research demonstrating a link between particular manager behaviours and sickness absence in their staff. The workshop helps managers assess their own style, understand its implications and identify ways to become more motivating.

The second kind of evidence provides quantitative measures of predefined intermediate outcomes. For example in one region with above average sickness absence, case work and case conferencing were introduced to improve management of long-term sickness absence, and systems were developed to help line managers monitor and take action on absences. The level of sickness absence fell to the lowest

of the nine regions. We have demonstrated a reduction in the time taken to recruit Jobcentre staff through the newly designed recruitment system from an average of 12 weeks to five weeks. We have demonstrated improved rates of clients joining programmes as a result of workshops teaching influencing skills to advisers: prior to the workshops 50–55 per cent of clients referred actually attended compared with 80–91 per cent of clients referred by trained advisers. A study of 49 managers found evidence of change in aspects of individuals' management style, including more use of positive feedback for good performers and giving more attention to staff development, following facilitated use of an upward feedback instrument.

Many managers find even such basic quantitative information clear and persuasive. Its influence fully rewards the additional efforts required of a busy practitioner in collecting the necessary figures. But not all our customers are convinced by logic. Nor are reliable quantitative measures often available within a fast-changing, real-world setting. As described above in our work with disabled clients, case studies and the inclusion of quotes from satisfied customers can also be influential in clarifying what we can offer to assist organisational developments.

Examples of this third kind of evidence include extracts from letters to a Jobcentre manager from advisers who attended a workshop (developed and facilitated by a psychologist) to help manage jobseekers with severe behavioural problems:

I found the event very useful. The facilitators allowed us a good deal of freedom to discuss case histories and other problems at work. I think their 'hands off' approach allowed us to go quite deeply into issues which were obviously a source of concern. The talk was as much about our own reactions to difficult clients and stressful situations at work as it was about the clients themselves.

Following the workshop I felt more confident about confronting him [a client who regularly smelled of alcohol] about this, and felt able to do so in a tactful way. As a result the client has attended a special rehabilitation programme.

Another example is a note from Jobcentre

manager to a psychologist:

Staff morale in my office had reached an all time low ... and I experienced severe doubts and concerns over my ability to manage and my management style. I recognised I needed help to halt the downward spiral as I did not know specifically where the problems lay and could not therefore begin to make constructive changes. I view the decision to seek your help as the turning point. ... With your help I was able to identify the main problem areas and to see a way forward. My staff and myself have been steadily moving upwards ever since.

While such information can be persuasive and informative for 'selling' purposes and improving customers' understanding of what we offer, there are concerns about using this kind of data as evidence of more general effectiveness. Unless derived from a systematic evaluation study (for example analysing the outcomes for a representative sample of those involved in an intervention, with clear stated expected outcomes), such data may be selective and may provide a biased picture. Practitioners might resist seeking more rigorous evidence, arguing that the impact is hard to capture because of the extent of organisational change or other uncontrollable factors, or that there simply is not time.

Lessons for practitioners

A number of lessons can be extracted from the above that are relevant across applied psychology in general.

First, influencing potential customers about the value of psychologists' interventions is a continuing process because our customers are continually changing and do not have the same interest or understanding as we do about applied psychology.

Second, practitioners need to respond to organisational priorities and culture. Considerable benefits can be reaped from less than perfect interventions. Sometimes we may need to continually repeat important messages, and be alert for when the conditions are right for some messages to be heard.

Third, we need to become better at collecting rigorous evidence about the impact of our work. Robson (1993) provides guidance on the many ways this can be done in the 'real world'. We have developed an internal manual tailored to our circumstances, to promote a systematic

approach, and to be clear to new recruits what is required. The manual encourages structuring interventions to produce evidence of effectiveness, for example by including a comparison group, or collecting 'before' and 'after' measures. Even where this is not appropriate or possible, being clear about evaluation requirements before beginning can lead to an intervention being delivered in a way that can produce systematic evidence with little additional effort. While persuasive information can be collected about outcomes in qualitative terms and from a range of sources (such as letters of praise, minutes of meetings, mentions in policy papers), the practitioner needs to be clear about the status of

selective, *ad hoc* information. The manual provides a variety of different examples, ranging from simple customer reactions, through specially designed evaluation exercises, to making use of organisational measures such as performance data or the annual staff survey (for feedback about personnel systems changes, or differences between specific groups).

Finally, improving the supply of good evidence is an essential step in building evidence-based practice, but it is not sufficient. It is good to know that an intervention has a specific impact, but it is not enough in terms of building a science. A practitioner needs to consider why the intervention was effective, and under what

conditions, in order to extend its applicability (Davies *et al.*, 1999b). The messages must be clarified for there to be an agreed evidence base, which is then made available to practitioners via an effective knowledge management system. Practitioners need to take the time to assimilate new evidence, and need the skills to build this productively into their current practice.

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