

2015 Early Onset Community of Practice

Webinar 2: *Referral, Outreach and Early detection*

June 11, 2015 | 12pm-1pm ET

Presenters:

Jake Bowling

Bryan Gibb

Sarah Lynch



Webinar Logistics

- We recommend calling in on your telephone.
- Remember to enter your Audio PIN so we can unmute your line when you have a question.
- Audio PIN: Will be displayed after you login.

This button should be clicked if you're calling in by telephone.

Here's your audio PIN

Audio

Audio Mode:

Use Telephone Edit ▾

Use Mic & Speakers

Dial: 41 (773) 943-1017

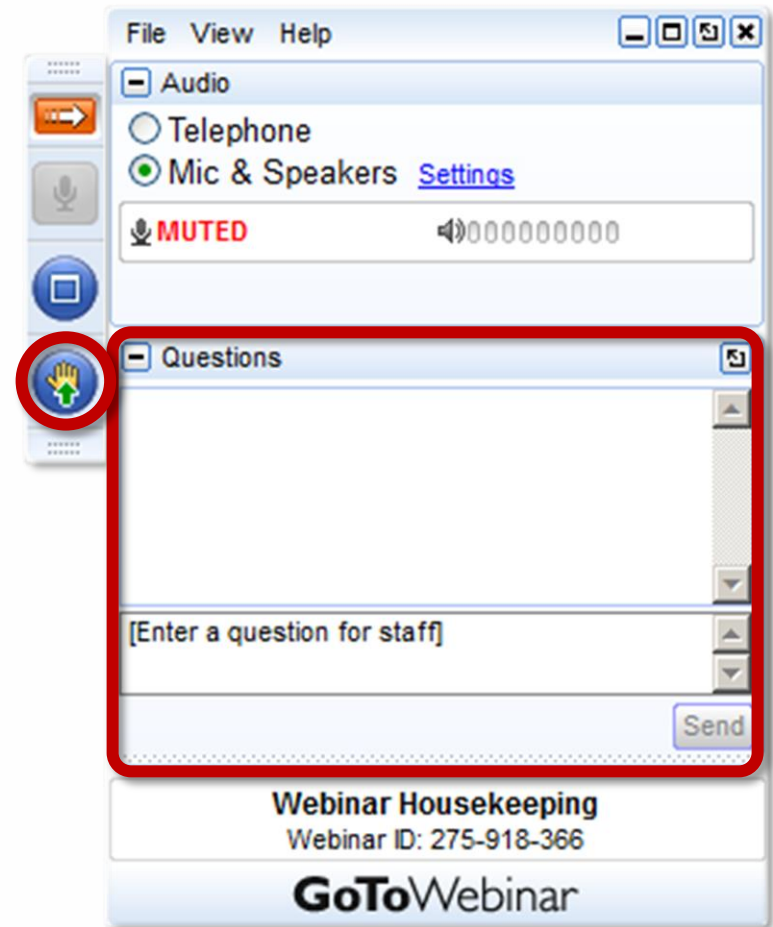
Access Code: 007-050-002

Audio PIN: 43

If you're already on the call, press #13# now.

How to ask a question

- You are currently muted.
- To speak, please “raise your hand.”
- We will call on you in the order in which hands are raised and unmute your line.
- Feel free to use the questions dialogue box to submit additional comments.



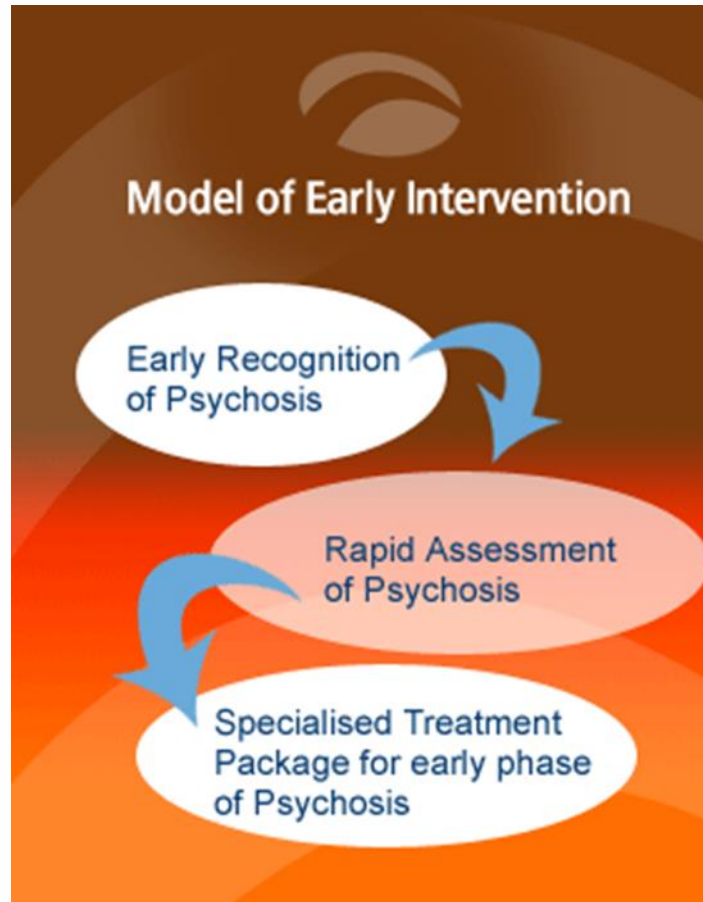
Early Onset Schizophrenia: Forging Community Partnerships

Jake Bowling, MSW

Director, Practice Improvement
National Council for Behavioral Health
JakeB@thenationalcouncil.org



Early Intervention



Which partners can support you with early recognition of Psychosis?

Why Partnerships Are Important

- Early recognition of psychosis is critical ingredient in an early intervention model.
- People with EOS interface with many systems outside of the community behavioral health system (meet people where they are).
- Partners can identify and connect people in need to your program.
- Partners may have credibility and community trust that can be leveraged.
- Partners may have connection with families who are affected.

Successful Early Intervention Programs Engage Multiple Systems and Employ a Public Health Approach



Ingredients to Successful Partnerships

- Make the case and secure buy-in.
- Identify champions.
- Facilitate foundational knowledge or screening capability among partners.
- Facilitate strong bi-directional relationships.
- Conduct workflow analysis & strategies for collaborative care/information sharing.
- Resource and support reciprocity.



Potential Partnerships

- Primary Care
- Juvenile Justice
- School Systems, Colleges, and Universities
- Community Behavioral Health Organizations
- Faith Communities
- Employers
- Media Outlets

Exemplar Models



Early Onset Schizophrenia: Building Community Support Engaging Stakeholders

Bryan Gibb

Director, Public Education

National Council for Behavioral Health

BryanG@thenationalcouncil.org



Early Involvement Yields Success

- Identify community need:
 - Service gaps, health and community demographics.
- Identify stakeholders:
 - Who needs to be at the table and why?
- Gauge the climate:
 - Timing is everything.
- Learn from others:
 - Local successes and not.



Getting Started

- Find your champion(s):
 - Research and think broadly.
- One champion yields another.
- Builds credibility and reliability of issue and organization.



Consensus Not a Natural State

- One process: neutral facilitator.
- Identify stakeholders interest.
- Confidentiality is key!
- Group definition of problem and issue.
- National best practice of solutions.
- Local adaptation of community solution.



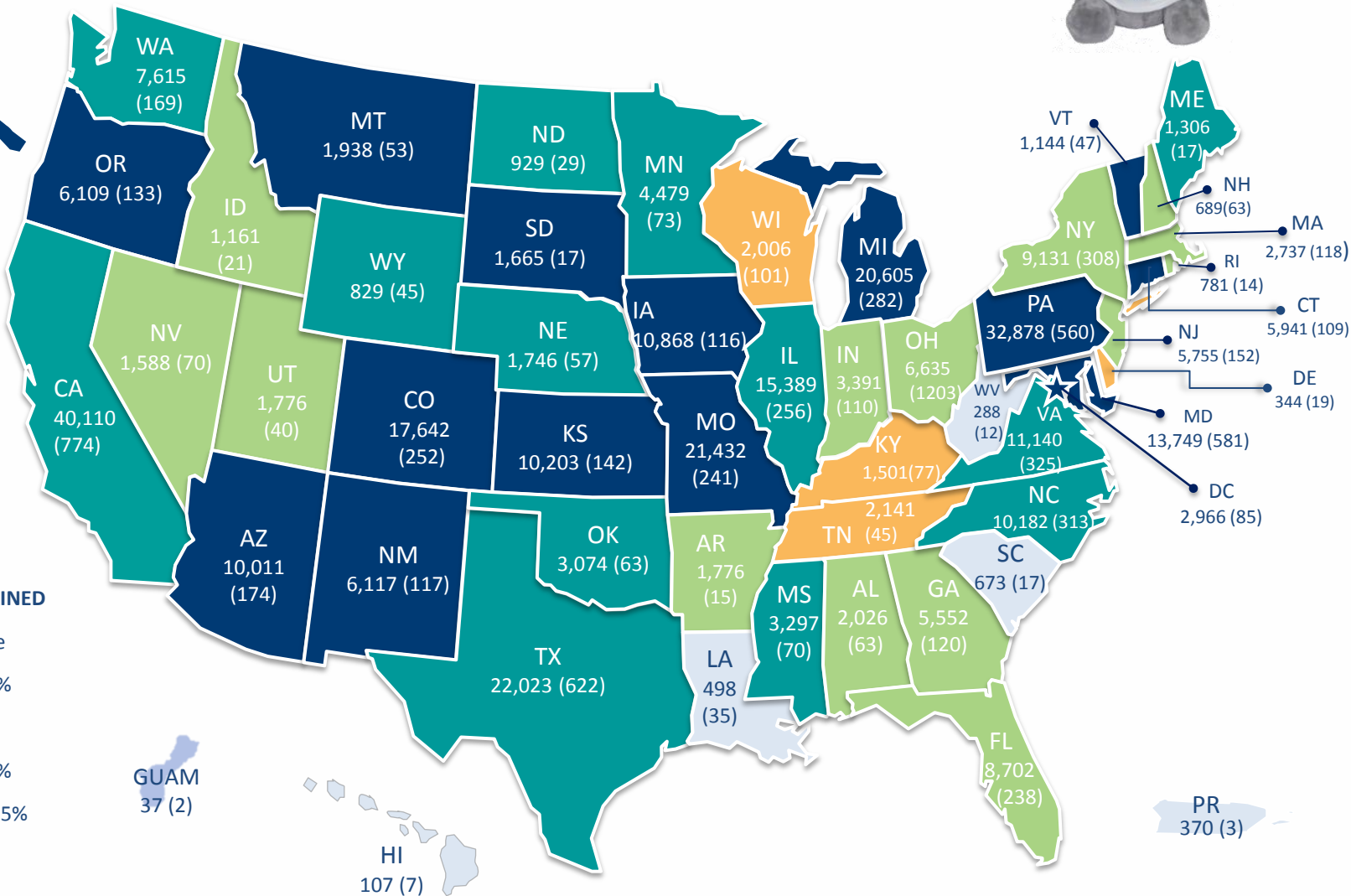
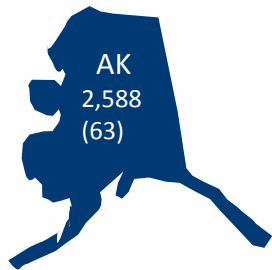
“ It really gives you the skills you need
to identify—and ultimately help
—someone in need. ”

- First Lady Michelle Obama
on being trained in Mental
Health First Aid



ALGEE-OMETER

More than 360,000 First Aiders in the US
Trained by more than 7,500 Instructors



PERCENTAGE OF POPULATION TRAINED

- 0.15% or more
- 0.075%-0.149%
- 0.04%-0.074%
- 0.025%-0.039%
- Less than 0.025%

Reported through April 2015



Strategic Growth Strategies: Population-based MHFA plan

 State legislation: population-based


 Example:

> If 500 Instructors co-teach 3 Courses per year with 20 First Aiders per class = 15,000 First Aiders in year.

> 5 year Pledge = 75,000 First Aiders trained


Additional Strategic Growth Strategies


 Mandate or require training and/or certification standards


 Create statewide/local audience-specific training programs

State & Regional Growth Strategies: Examples



-  **New Mexico: Center For Children and Youth**
 - > Focus on rural populations
 - > Dedicated staff to coordinate instructors across state
 - > Supplement state funding through private/public partnerships (e.g. local universities, tribal communities)
 - > Host trainings bi-annually

-  **Colorado: Colorado Behavioral Healthcare Council**
 - > 247 instructors
 - > 17,772 First Aiders

-  **Philadelphia: Philadelphia Department of Behavioral Health and Intellectual disability (DBHIDS)**
 - > 10% population goal
 - > 150 instructors
 - > 8,000+ First Aiders



Community Outreach and Education: Key Components of an Early Intervention Program

Sarah Lynch, LCSW

PIER Program Manager

Maine Medical Center

sarahlynchlcsw@gmail.com

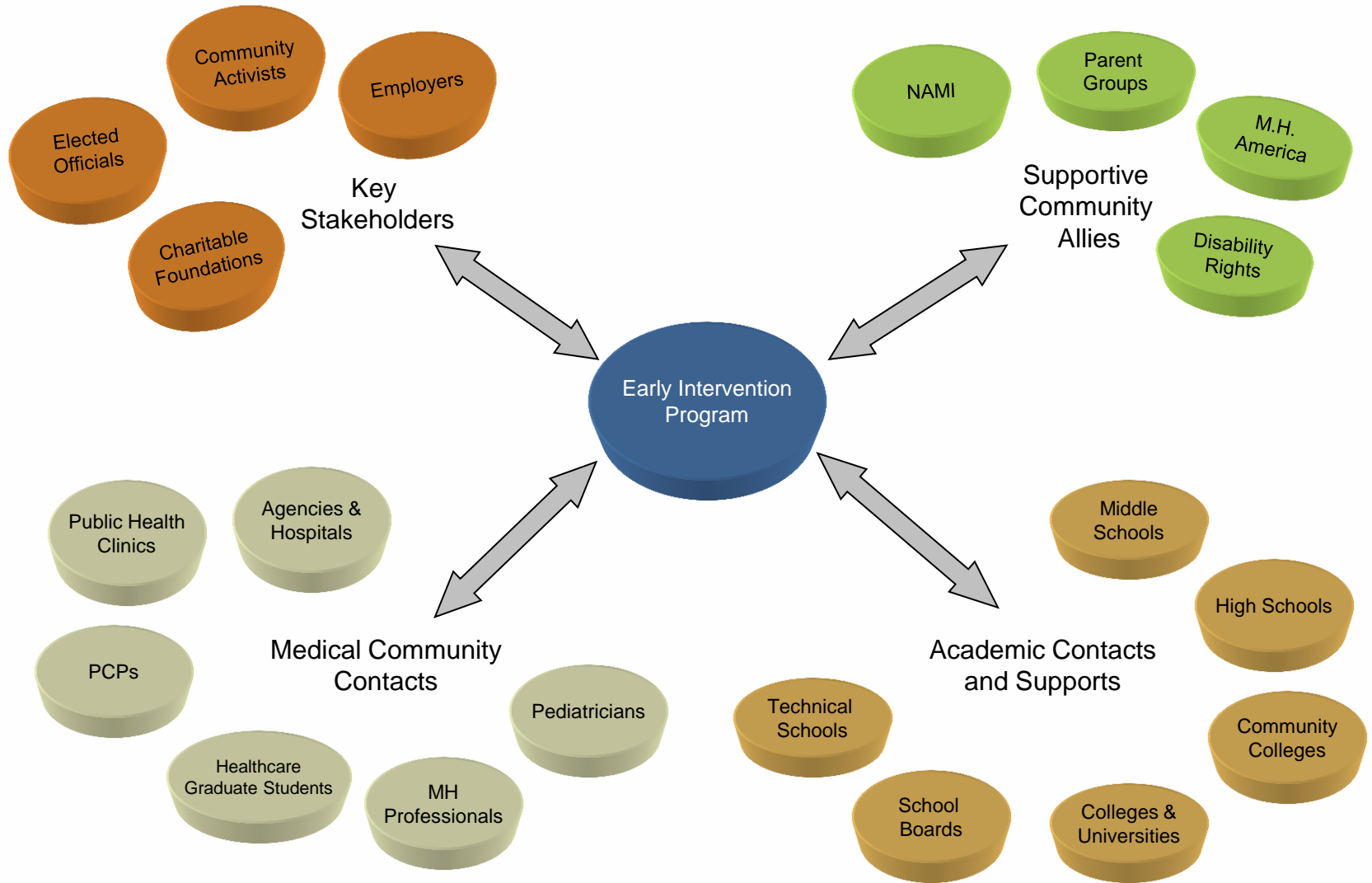


Professional and Public Education

- Reduces stigma.
- Provides information about modern concepts of psychotic disorders.
- Increases understanding of early stages of mental illness and prodromal symptoms.
- Provides information about consultation, specialized assessments and getting into treatment quickly.
- Offers ongoing inter-professional collaboration.



Community Mapping Tool



Outreach Process

- Map your catchment and community.
- Establish a Steering Council.
- Identify key audiences.
- Develop messages for specific audiences.
- Deliver the messages.
- Evaluate your efforts.



Delivering the Message: Mechanisms

- In person presentation
- Webinar
- Video (<https://youtu.be/5AA54ujxiCc>)
- Website
- Email newsletter
- Social networking
- Print materials
- Story telling



A FEW SAMPLE OUTREACH PRESENTATION SLIDES

Partnership in Early Intervention of Psychotic Disorders

Key Role for School-Based, Mental Health and Medical Professionals



Douglas Robbins, MD
Donna Downing, MS, OTR/L
Sarah Lynch, LCSW

June 1, 2015



Objectives

- Learn the symptoms of psychosis and which illnesses can include symptoms of psychosis.
- Learn the warning symptoms and behaviors of an emerging or first psychotic illness and how they interfere with learning, school participation, and social relationships with family and friends.
- Understand how symptoms are assessed for psychosis.
- Learn about the treatment components of the PIER Program and the PIER MAY Study, and how to make referrals.



Early Detection Makes a Difference



Early intervention is associated with:

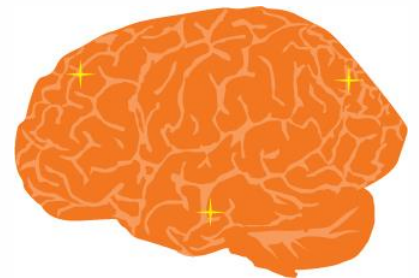
- More rapid and complete recovery
- Preservation of brain functioning
- Preservation of psychosocial skills
- Decreased need for intensive treatments
- Preservation of supports, especially family/friends
- Less stigma and perception of rejection



What Is Psychosis?

Any of a number of symptoms indicating loss of contact with reality, including:

- **Hallucinations:** Hearing voices or seeing visions.
- **Delusions:** False beliefs or marked suspicions of others.
- **Disorganized thinking:** Jumbled thoughts, difficulty concentrating.



Psychosis Can Develop In...

- Schizophrenia
- Spectrum Disorders
- Bipolar Disorder
- Major Depression
- Obsessive-Compulsive Disorder (OCD)
- Autism Spectrum Disorders
- Substance Use or Abuse
- Medical Illnesses
- Trauma and Post Traumatic Stress Disorder (PTSD)



Psychosis occurs on a spectrum

Youth enjoys basketball and plans to attend college on a full scholarship.

Grandiosity

Youth is heading to New York City because he believes he is talented enough to join the Knicks.

Young woman goes to the mall and feels like people are looking at her sometimes.

Suspiciousness

She refuses to go to the mall because she is certain that a specific person is out to harm her.

Hearing indistinct buzzing or whispering

Auditory hallucinations

Hearing a voice clearly outside one's head saying, "You're a loser" or "You're a failure."

PIER Program

Clinical and Functional Intervention

- Community outreach and education
- Rapid initiation of treatment
- Integrated services on multidisciplinary team
- Psychoeducational multifamily groups
- Individual counseling (CBTp) and family counseling
- Supported employment and education
- Cognitive assessments used in school or job
- Medication management
- Case management
- Peer support (provided by Youth MOVE Maine)



PIER Program – How To Make a Referral

- Contact Sarah Lynch 662-3162 or lynchs@mmc.org with questions or to make a referral.
- Important Resource: “Early Intervention in Psychosis” website to be launched at National Association of Mental Health Program Directors (<http://www.nasmhpd.org>)



Tracking your referrals so you know where to focus your efforts

If the caller is a family member or client, who suggested they call?

(Name, agency, phone)

From what setting did the referral come originally?

- School
- Primary Care Clinic
- Emergency Room/Crisis
- Community Mental Health Clinic
- Inpatient Psychiatric Setting
- Partial Hospital
- Residential Setting
- Private Practice
- Community Program
- Justice System
- Clergy
- Natural Support (family, friend)
- Other _____

If the caller is a professional, is it their first referral? YES NO

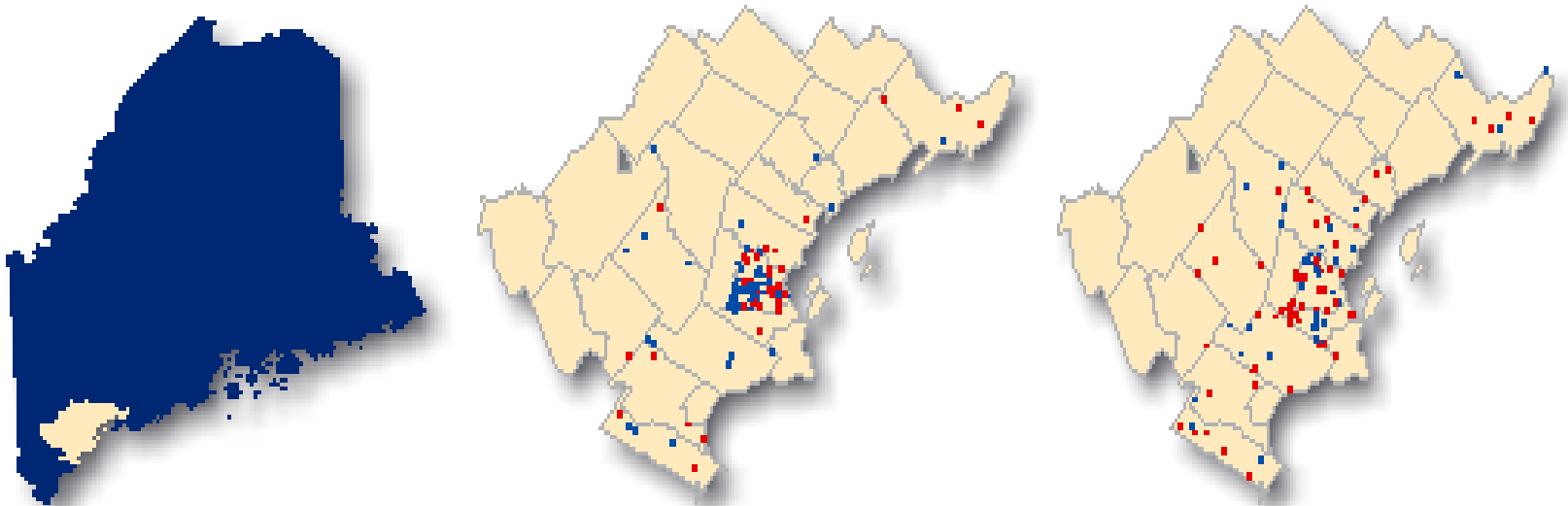
Did the referrer attend an outreach presentation? YES NO

How did they hear about the program?



Number of outreach activities and referrals *within catchment areas* during two years, by town or by zip code

- Maine
- One dot = one event Year 2 (3/09-3/10)
- Catchment Area Outreach Activities Referrals



Discussion/Considerations

- What existing referral and outreach program do you currently have?
- What relationships can you leverage now?
- What new initiatives might you need to pursue in order to create a robust referral and outreach early intervention program?
- Obstacles/barriers to implementing?



COP: Next Steps

- **Peer to peer phone calls.**
 - Indicate your interest in today’s post-webinar survey.
- **June office hours with Sarah, Jake and Bryan**
 - Selections must be made by COB 6/17.
- **Webinar 3:**
 - Thurs., 7/16, 12-1pm EDT.
 - “Clinical models/core components for both prodromal and first episode, including organizational workflow and training the staff team.”



Webinar Dates Reminder

- ~~Thurs., May 14; 12pm-1pm EDT~~
- ~~Thurs., June 11; 12pm-1pm EDT~~
- Thurs., July 16; 12pm-1pm EDT
- Thurs., August 13; 12pm-1pm EDT
- Thurs., September 10; 12pm-1pm EDT
- Thurs., October 15; 11am-1pm EDT



Additional Questions?

