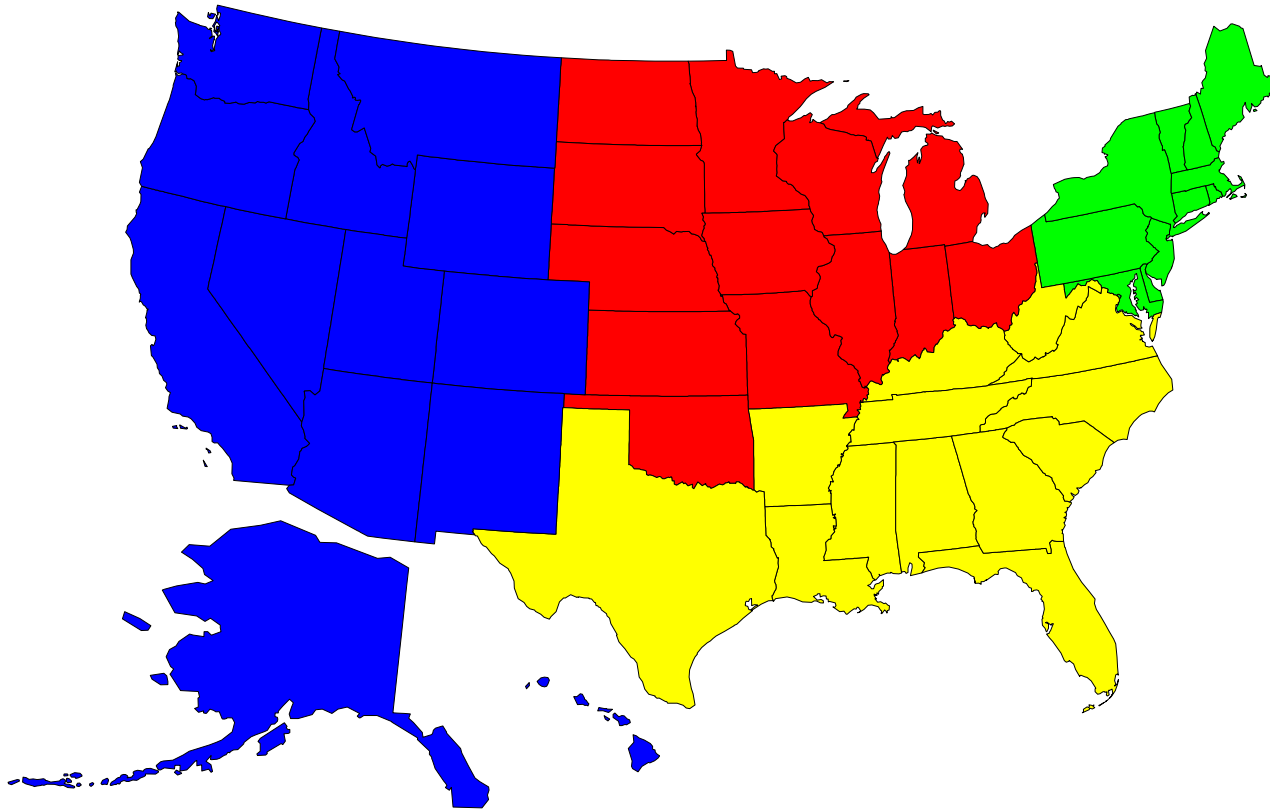
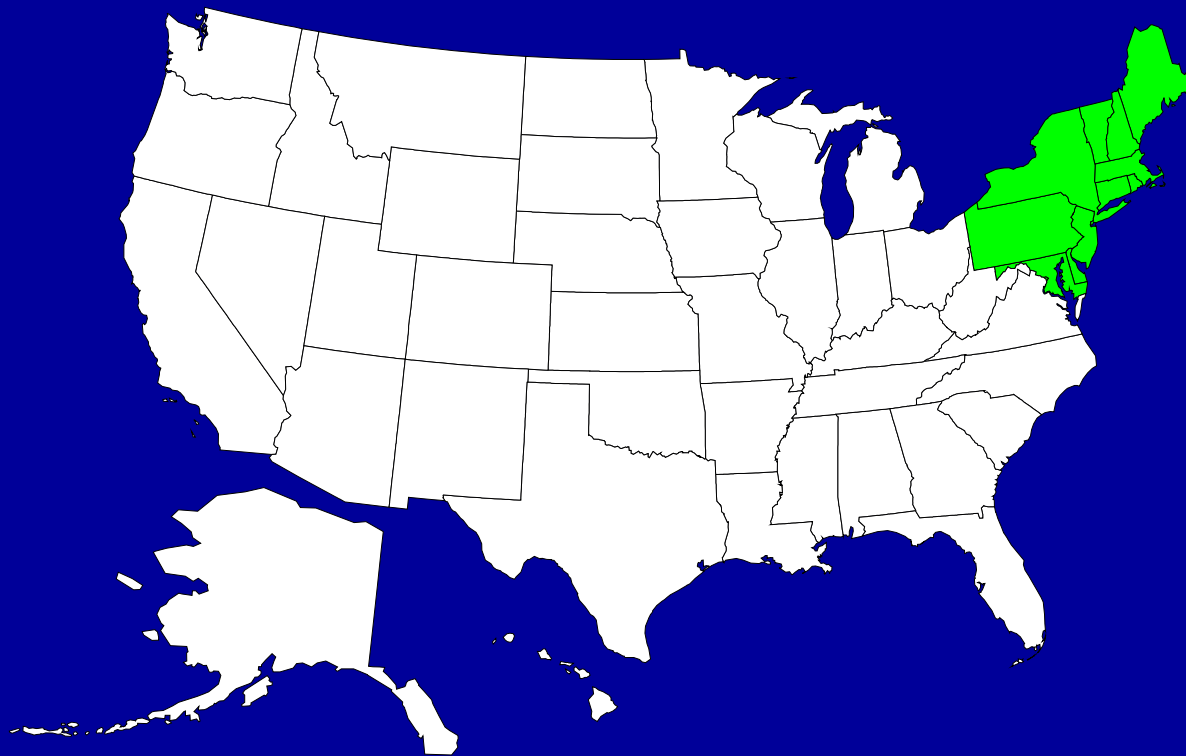


# State Psychiatric Hospital Regional New Freedom Commission Goals and Activities



# Northeastern State Psychiatric Hospital Region



## Goal 2: Mental Health Care is Consumer and Family Driven

- Recommendation 2.2:
  - Involve consumers and families fully in orienting the mental health system toward recovery.

# Activities

- Peer Support
  - Two consumers work with patients on Wellness and Recovery Action Plans (WRAP) (NH)
  - Active Peer Education Program (ME)
  - Link discharge-ready patients with consumers in the community (NJ)
- Relapse Prevention Plans (ME)
- Recovery and Stigma Workshops (MD, NJ)

# Activities

- Consumers Actively Involved in Inpatient and Outpatient Treatment Planning
  - Designed Modules to enhance consumer participation in treatment planning (ME)
  - Involve consumers and their families in planning for recovery (DE)
    - Housing
    - Community support systems
    - Community services

# Activities

- Recovery Initiative (CT)
  - Empowerment
  - Individualized and Person-Centered
  - Built on Cornerstones
  - Systematic Emphasis
  - Quality and Outcome-Oriented

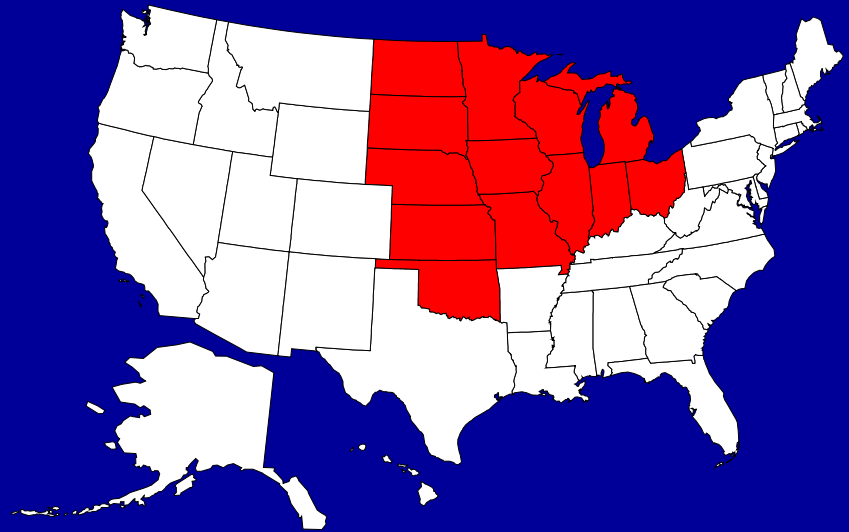
# Activities

- Administrative Role for Consumers and Families
  - Hospital Committee Membership for Consumers and Families (NJ)
  - Input in strategic plan development and implementation (NJ)
  - Consumer family members speak as part of new employee orientation (NH)

# Activities

- Hospital Plans
  - Coordination with the Alliance for the Mentally Ill (NH)
  - Family Monitoring Program (NJ)
  - Hospital has individualized plan of care for every patient with a mental illness (DE)
  - Treatment staff and social workers meet weekly with community liaisons about transitions (DE)
  - Division increasing supported apartments (DE)

# Midwestern Association of State Mental Health Organizations



## Goal 2: Mental Health Care is Consumer and Family Driven

- Recommendation 2.2:
  - Involve consumers and families fully in orienting the mental health system toward recovery.

# Survey on Consumer Participation in State and Hospital Administrative Roles

- Five Indicators
  - Consumers employed in “Consumer Advocate” positions
  - Number of former patients currently employed in state positions
  - Number of consumers involved in hospital committees
  - Number of hours of presentations made to staff and/or consumers by consumers over past year
  - Number of staff who received “recovery” related training over past year

# Summary of Results

- Consumers employed in “Consumer Advocate” positions
  - The number of consumer advocates per facility was less than one per facility.
  - Except one facility with 3, all hospitals reported either NO consumer rights advocate or 1.
  - Fourteen facilities of 20, or 70%, had no consumer rights advocate.

# Summary of Results

- Number of former patients currently employed in state positions
  - The number of consumers hired into staff positions such as consumer advocate was less than 1 per facility.
  - All facilities reported 0,1, or 2 consumers hired into state positions.
  - 11 of the 20 facilities, or 55% reporting, had no consumers hired into state positions

# Summary of Results

- Number of consumers involved in hospital committees
  - There was an average of 4 consumers involved in committees and boards per facility.
  - The number of consumers involved in committees and boards ranged from 0 to 35 per facility.
  - Nine facilities, 45%, reported that NO patients/residents were on committees or boards.

# Summary of Results

- Number of hours of presentations made to staff and/or consumers by consumers over past year
  - There was an average of 43 hours of training per facility where consumers made presentations to staff to tell their story.
  - The averages at the facilities ranged from 0 hours to 398 hours per facility.
  - Seven facilities, 35%, reported NO presentations by consumers to staff.

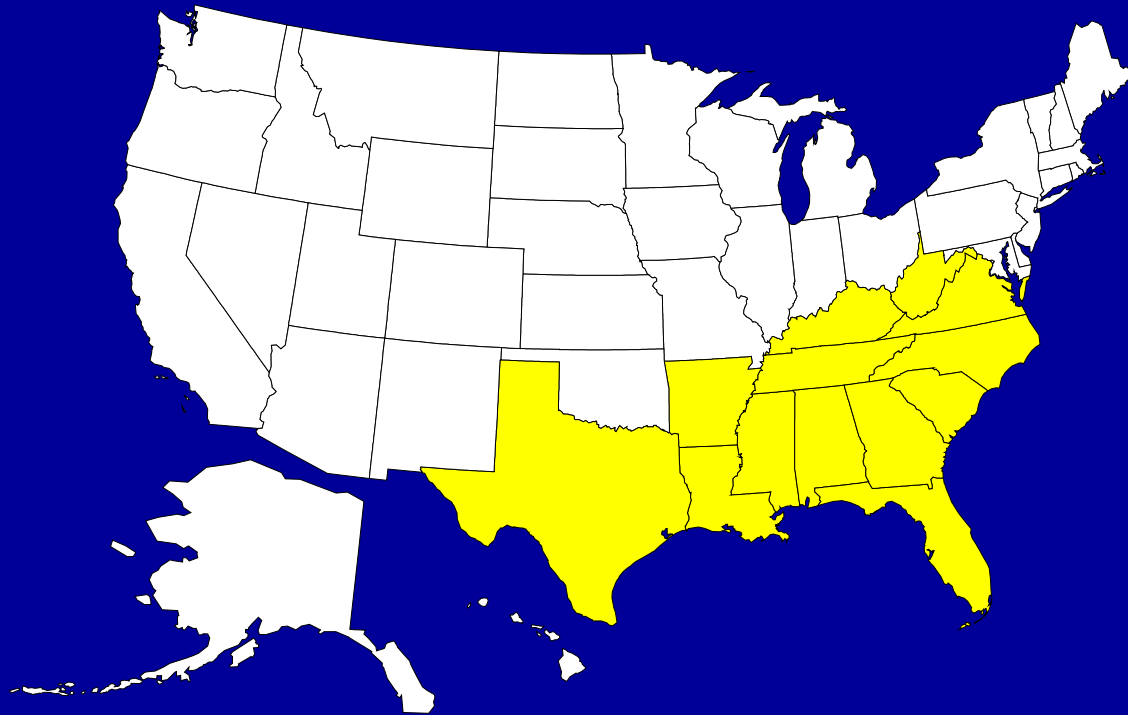
# Summary of Results

- Number of staff who received “recovery” related training over past year
  - “RECOVERY” related training has been presented to 44% of the staff at these facilities.
  - The % of staff trained in recovery ranged from 2% to 100%.
  - Only one facility reported zero hours of training about recovery.

# Activities

- Clearly, there is more work to be done
- Each of the areas surveyed has been identified as a regional priority, and has been incorporated in planning efforts
- Additional commitment has been made to the introduction of “Peer Specialist” positions

# Southern States Psychiatric Hospital Association (SSPHA)



# **Goal 4: Early Mental Health Screening, Assessment, and Referral to Services are Common Practice**

- 4.3 Screen for co-occurring mental and substance use disorders and link with integrated treatment strategies.

# Activities

- Regional Workgroup (GA, LA, TX)  
Appointed to do Literature Search
  - Include subject matter experts and identify best practices
- Hospitals in all states in the region report at least basic level ability to screen for, assess and treat co-occurring psychiatric and substance disorders.

# Activities

- Regional workgroup activity has focused on dissemination of best current information to all SSPHA member hospitals regarding:
  - relationship between chemical dependency and psychiatric disorders
  - nature and availability of a variety of assessment instruments
  - principles of treatment for psychiatric and substance use disorders
  - identifying strategies for community integration

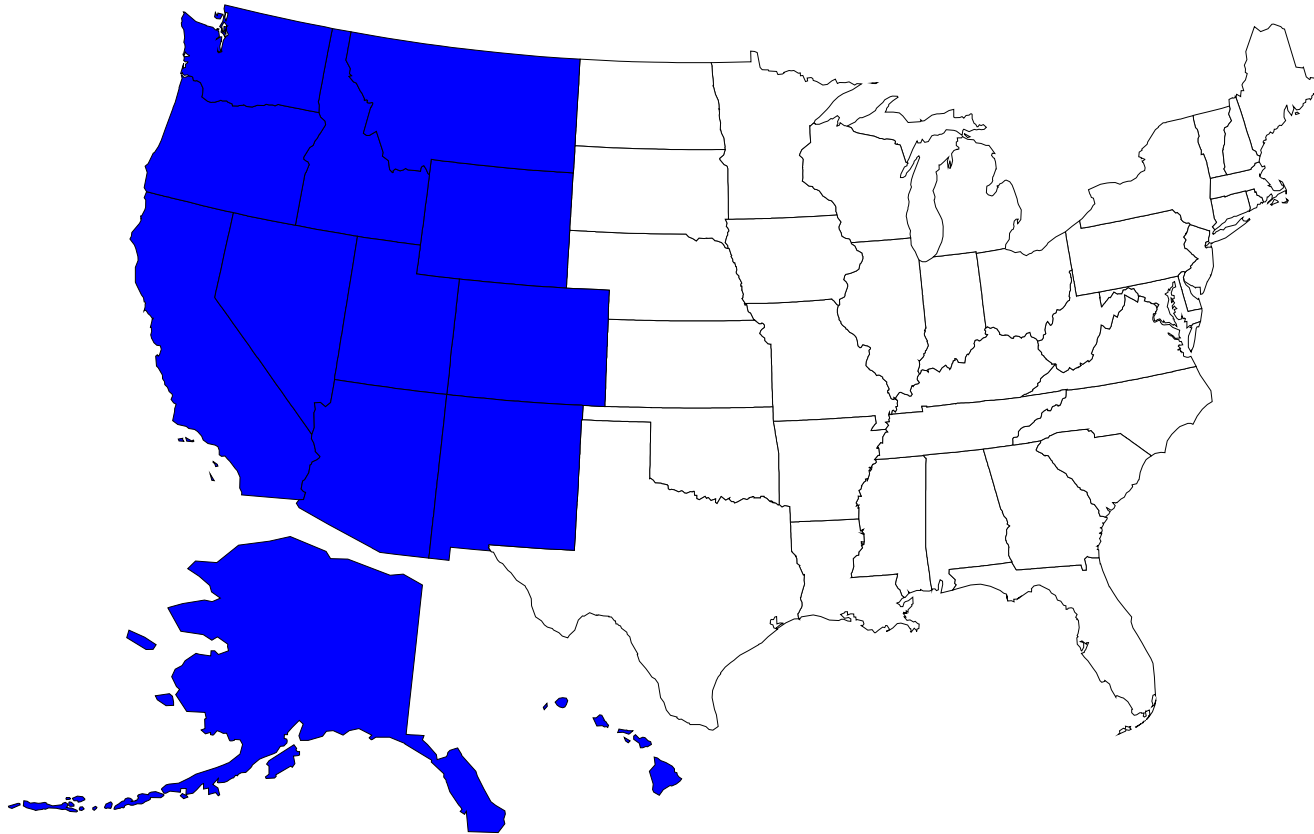
# Activities

- Regional workgroup activity has focused on dissemination of best current information to all SSPHA member hospitals regarding (Continued):
  - APA's Practice Guidelines
  - comprehensive and integrated treatment models
  - categorical models of care relating to dual disorders treatment.

# Activities

- Identification and showcasing of a “best practice” model (Georgia)
- The Regional Workgroup’s efforts were showcased in the SSPHA newsletter which is widely disseminated throughout the Southern region and other states as well.
- This project was presented during a plenary session at the SSPHA 2004 Regional Conference held in Atlanta, Georgia

# Western State Psychiatric Hospital Association (WPSHA)





# New Freedom Commission Projects

- 3 Committees established in 2003
  - Reduce or Eliminate Use of Seclusion or Restraint Interventions
  - Develop Effective Treatment Strategies for Co-Occurring Mental Health and Substance Abuse Disorders
  - Expand the Use of Technology to Improve Treatment Outcomes and Access to Care

# Technology Project

- Model System implemented in Alaska uses state hospital staff to provide clinical services to remote communities using televideo technology
- Benefits
  - Supports providers in distant communities
  - Brings services and expertise to the consumer
  - Effective utilization of state hospital resources
  - Usually available upon request – no waiting

# Other Technology Applications

- Utah State Hospital Electronic Medical Record
- Use of Televideo in Commitment Proceedings in Montana and California
- Use of Computer-based patient education programs in several states
- WPSHA is seeking to use technology to share resources and provide staff training among member hospitals