Massachusetts

FY2018 TTI Project:

RECOVERY ORIENTED COGNITIVE THERAPY (CT-R)

key outcomes:

- Massachusetts, in partnership with The Bridge of Central MA, now known as OpenSky, has implemented CT-R, in pilot sites across our continuum of services. Over the past 2 years, The Bridge of Central MA, Inc. (the Bridge) has been pioneering CT-R implementation in Massachusetts in collaboration with Aaron P. Brinen, formerly of the Aaron Beck Center at the University of Pennsylvania and currently Assistant Professor at Drexel College of Medicine.

- The Massachusetts Department of Mental Health (DMH) identified 6 multi-disciplinary teams to undergo CT-R training. DMH chose teams from across our continuum of services, both state-operated and vendor operated services. A team was selected from Carney Hospital which has acute inpatient psychiatric units in a private for-profit general hospital, and a team from Tewksbury Hospital, a State-operated intermediate care psychiatric facility. In addition, two PACT/ACT Teams were selected; one which is operated by DMH in the Southeast area of the state, and one which specializes in forensically involved individuals in Western MA. Also included was the team from our Prevention and Recovery in Early Psychosis (PREP) first episode psychosis team from Western MA and a team from our Projects for Assistance in Transition from Homelessness (PATH) team. Teams chosen were required to have a peer specialist as part of their team.

- All team members received three-day training by trainers from The Bridge, and regular consultations from Bridge instructors and UPenn staff. The trainers visited all of the sites within the first month following the workshop to provide tailored consultation regarding implementation of CT-R. Sites received a final site visit in the last month of the grant reporting period. Teams were offered phone consultation every other week during the grant reporting time. Teams varied with their level of participation of this regarding who attended the meetings and how often they occurred. The trainers developed a series of “mini-trainings” for teams to utilize. These are being used to refresh team members on the strategies, and to train new staff. We also held a follow up half day training in May for leadership and champions for the teams. This included the expert consultant from UPenn, who provided training and consultation at this event. We also had a ½ day training for Prescribers from the teams.
By implementing CT-R across multiple settings and service providers DMH achieved the overarching goal to strengthen capacity and enrich the culture of service delivery for individuals with serious mental illness. DMH also got to explore which parts of our continuum of services would benefit the most from CT-R. Our conclusion is that with some adaptation, it works across our continuum.

**Ongoing Project Activities After Grant Period:**

- At the Forensic PACT Team, CTR is still influencing the way that they approach work with individuals primarily related to expectations of what a person can and cannot achieve. The staff person who was the lead there has remained on the team. Once they are able to fill their clinical vacancies, the CTR lead will train the new staff in the CTR approach. The CT-R lead received additional training to be able to orient her team to CTR and to provide the 15 minute trainings on various aspects of the model.

- At Tewksbury State Hospital, they have been able to keep the clubs going and as well as having a really well attended unit meeting. This is a HUGE change from where it started with very low attendance in their daily unit meetings and no input from the individuals. They have started to approach work with each person through the lens of what is possible rather than what has always been done. Clinicians in the facility trained in CT-R continue to incorporate the practice into their approach.

- Examples of successes continue to be documented and shared as CT-R continues to improve clinical practice. These demonstrate how functioning improvements are achieved by patients in various settings.

**Benefit of the 2017 TTI Project:**

- This treatment has been successful in helping people shift the direction of their energy towards meaningful recovery as well as energizing staff that had been working at sites for years by breathing new life into treatment teams.

*For more information, contact:*
Robert Walker  
MA Department of Mental Health  
25 Stanford St.  
Boston, MA 02114  
Phone: (617) 626-8275 ; Email: Robert.Walker@massmail.state.ma.us