Innovations in Linkage & Referral

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The Peer Recovery Call Center

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Two Program Ideas – One Program

Information Referral Meets Peer Support
Why?

Traditional Information & Referral Programs

Were cloaked in anonymity
ONLY Quantitative Outcomes
No way to know how effective it is
(Qualitative Outcome)
Funders transforming to Outcome
Based Funding Models
If you’re not changing.......
Flipping the Model

• Step One – Remove caller anonymity
• Step Two - Recruit, Hire & Train Peers
• Step Three – Limited Self – disclosure
• Step Four – The Ask...
  = trust building
  = caring
Power of Peer Support

As Often as Necessary

1. Plan /schedule the date of next contact

2. Plan the content /goals of support

3. Repeat as necessary to achieve desired outcomes
   - Linkage to resources
   - Follow through with the linkage
   - Make an appointment
   - Go to appointments
   - Following treatment plan
Data Tells the Story

Quantitative at Intake

- # inbound contacts
- # follow up contacts
- % Caller type (self)
- % type of call
  - (MH, SA)
- % by gender
- % insured & type
- % caller location

High Quality Outcomes Through Follow Up

- % engaged in treatment
- % following recovery plan
- % wants follow up peer support
- MORS Scale
What is MORS?
The Milestones of Recovery Scale (MORS) is an effective evaluation tool for tracking the process of recovery for individuals with mental illness.

MORS is rooted in the principles of psychiatric rehabilitation and defines recovery as a process beyond symptom reduction, client compliance and service utilization.

It operates from a perspective that meaningful roles and relationships are the driving forces behind achieving recovery and leading a fuller life.

MORS can help systems and programs demonstrate to funding sources, politicians and the public that mental health systems can be cost-effective and achieve positive outcomes.

MORS has been extensively tested and researched for validity and reliability.

MORS is a recovery-based outcome tool that can help all levels of mental health systems answer the question: Are we offering effective services that are helping individuals to achieve more meaningful lives?

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Long Beach, CA 90802
For more information about MORS please contact:
(562) 645-3222
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# MORS Scale

## What it looks like

<table>
<thead>
<tr>
<th>MORS Scale</th>
<th>Description</th>
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<tbody>
<tr>
<td>1. Extreme Risk</td>
<td>Absolute DENIAL, must get sicker to be committed, or NEEDS CRISIS SERVICES or OTHER SERVICES NOW</td>
</tr>
<tr>
<td>2. High Risk / Not Engaged</td>
<td>Non-compliant, Has Been Hospitalized Frequently</td>
</tr>
<tr>
<td>3. High Risk / Engaged</td>
<td>IP or Recently diagnosed (DX), has started out-patient (OP) services</td>
</tr>
<tr>
<td>4. Poorly Coping / Not Engaged</td>
<td>Recently diagnosed, missing appointments, not taking meds. NEEDS supports to stay connected to treatment, treatment supports and or substance abuse treatment</td>
</tr>
<tr>
<td>5. Poorly Coping / Engaged</td>
<td>Started and engaged in treatment &amp; supports</td>
</tr>
<tr>
<td>6. Coping / Rehabilitating</td>
<td>Improved, more stability</td>
</tr>
<tr>
<td>7. Early Recovery</td>
<td>More independent, demonstrates less reliance on others</td>
</tr>
<tr>
<td>8. Advanced Recovery</td>
<td>Independent, may not identify as having a psychiatric disability. Completely self-supporting. They are basically indistinguishable from their non-disabled neighbor</td>
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</tbody>
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Peer Intensive Care Program

Lisa Ragan, MSSW

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Tennessee Department of Mental Health and Substance Abuse Services
Peer Intensive Care Program

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Peer Intensive Care Program

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Tennessee Mental Health Consumers’ Association
Transformation Transfer Initiative (TTI) Grant from SAMHSA

SAMHSA Statewide Consumer Network grant

Both grants focus on systems change and emphasize developing partnerships
Tennessee Mental Health Consumers’ Association (TMHCA)
100% peer-run, peer-led statewide organization
“Giving people with mental illness a reason to believe since 1988.”
TMHCA hires, trains, and supervises Certified Peer Recovery Specialists to provide peer support in:

- Crisis Stabilization Units operated by community mental health agencies.
- Regional Mental Health Institutes (psychiatric hospitals) operated by the state.
- The person’s local community after discharge.
TMHCA’s Certified Peer Recovery Specialists

- *Share their stories of recovery*
- *Introduce people to the Wellness Recovery Action Plan®*
- *Focus on engaging people into their own recovery*
- *Share information on where to find peer support services in their local community*
TMHCA’s Certified Peer Recovery Specialists

- Make contact within 24 hours of discharge
- Meet people (if desired) at their first appointment with a behavioral health provider in their community
- Provide peer support for up to three months
- Focus on engagement and relationship building
Program Goals

- Engagement in recovery
- Connections in the community to increase social inclusion
- Reduced use of crisis services
- Reduced need for inpatient hospitalization
Program Outcomes

• *Effective working relationships between TMHCA and four community mental health agencies*
• *Effective working relationships between TMHCA and four RMHI’s*
• *Total served in fiscal year 2017: 232*
• *11% reduction in 180-day readmission rate in fiscal year 2016*
Additional Benefits to TMHCA’s Certified Peer Recovery Specialists

• Being valued by facility staff
• Participating in treatment team meetings
• Being a role model of recovery to thousands
• Inspiring staff to believe in recovery
Challenges

- Homelessness
- Data comparisons
- Staff turnover
- Long-distance support
Overcoming Barriers

• Meeting at safe places in the community
• Identifying novel ways to look at data
• Broadening the search for applicants who have lived experience
• Using warm hand-offs to appropriate providers and resources