Webinar: Implementing the Trauma-Informed Principle of Collaboration and Mutuality in a Crisis Service Setting

July 24, 2017 ~ 3:00-4:00 PM (EDT)

Registration Link:
https://nasmhp.adobeconnect.com/crisisvlnjuly_reg/event/event_info.html

The Substance Abuse and Mental Health Services Administration’s (SAMHSA) National Center for Trauma-Informed Care and Alternatives to Restraint and Seclusion (NCTIC) is pleased to announce the fourth webinar in a 6-part series: Trauma-Informed Innovations in Crisis Services:

Collaboration and Mutuality: Harbel Community Organization

Monday, July 24, 3:00 - 4:00 PM EDT

Jihad Ali, an addictions counselor from the Harbel Community Organization and William Miller, a peer outreach worker from Behavioral Health Systems Baltimore (BHSB), will discuss the essential roles they play in addressing the opioid crisis through community organization. Harbel provides recovery services, and their unique approach is how they use collaborative relationships with a wide range of community partners. Harbel employs persons with lived experience in all aspects of service delivery. A critical role includes outreach and support to individuals struggling with opioid addiction. Peer workers are trained to carry and administer Naloxone to revive individuals who have overdosed and provide recovery and trauma-informed services, thus helping to address the opioid epidemic. For more information, visit:
http://www.harbel.org

About the Series

The series runs from April – September 2017 on the 4th Monday of each month, from 3:00-4:00 PM (EDT) and will highlight the innovative work of crisis service providers employing a trauma-informed approach, including prevention, engagement, and inclusion of lived experience and peer support. Each 60-
A 60-minute webinar will focus on how an agency implements one of the principles from SAMHSA’s Concept and Guidance for a Trauma-Informed Approach: Safety, Trustworthiness and Transparency, Peer Support, Collaboration and Mutuality, Empowerment, Voice and Choice, and Cultural, Historical, and Gender Issues. After the provider presentations, a moderated Q&A will follow. Intended audiences for this webinar series include: state mental health authorities, providers of crisis prevention and intervention services, as well as peers, families, and community members.

According to SAMHSA’s publication: Crisis Services: Effectiveness, Cost-Effectiveness, and Funding Strategies, “National statistics attest to the significant need for crisis services. In 2010, 2.2 million hospitalizations and 5.3 million emergency department visits involved a diagnosis related to a mental health condition. Not everyone will experience a need for crisis services but some factors may increase the risk of crisis such as poverty, unstable housing, coexisting substance use, and other physical health problems. The research base on the effectiveness of crisis services has been growing, with evidence that crisis stabilization, community-based short-term crisis care, peer crisis services, and mobile crisis services can divert people from unnecessary hospitalizations and insure the least restrictive treatment option. A continuum of crisis services can assist in reducing costs and address the problem that lead to the crisis. The primary goal of these services is to stabilize and improve symptoms of distress and engage people in the most appropriate treatment.

In response to these trends and statistics, more and more states/organizations have developed innovative crisis services/teams through the implementation of SAMHSA’s Trauma-Informed Approaches. Crisis services/supports may include: short-term crisis residential programs, crisis stabilization programs (i.e., community-based, ER, psychiatric ER), peer-run and other crisis respite programs, comprehensive psychiatric emergency response centers, emergency response recovery/detox programs, and mobile crisis outreach programs.

Upcoming Webinars in the Series

**Cultural, Historical, and Gender Issues: The Ali Forney Center**
Monday, August 28, 3:00 - 4:00 PM EDT

This webinar will feature insights from staff at the Ali Forney Center (AFC) in New York, NY, the largest program dedicated to meeting the needs of LGBTQ homeless youth in the nation. AFC provides a comprehensive range of services to LGBTQ homeless and street-based youth, including a drop-in center, mobile outreach, and emergency housing. Their Peer Educator program was created based on the recognition that homeless youth are most likely to trust outreach workers who have been formerly homeless themselves. In addition, their
Community outreach program is designed to help mental health providers to serve LGBTQ youth in a more culturally-competent manner. For more information, visit: http://www.aliforneycenter.org

**Trustworthiness and Transparency: Baltimore Police Department**
Monday, September 25, 3:00 - 4:00 PM EDT

Sergeant Joanne Wallace, Crisis Intervention Team Coordinator for the Baltimore Police Department, will discuss an innovative approach to crisis prevention and intervention in the City of Baltimore. Sgt. Wallace and her partner provide support to individuals experiencing homelessness, including helping people to secure needed medical, behavioral health and other services to prevent crisis and enhance outcomes. They will expound on their creative, unique, and inspiring approaches to engaging people who are experiencing homelessness, understanding the very complicated homeless community communication network, and maintaining trust within these networks; and their work with the Recovery Network and Baltimore Crisis Response when acute crisis services or immediate access to recovery support is necessary.

**Previous Webinars in the Series**

For more information on the series or to access archived webinars for this series, go to: https://www.nasmhpd.org/content/crisis-services-vln/

**Safety: Common Ground**
Monday, April 24, 2017
This webinar provided a brief introduction by SAMHSA’s National Center for Trauma-Informed Care (NCTIC) staff to SAMHSA’s six principles of a trauma-informed approach. Heather Rae from Common Ground, located in Oakland County, Michigan presented on how they promote Safety in a crisis services setting. Common Ground provides a lifeline for individuals and families in crisis, victims of crime, persons with mental illness, people trying to cope with critical situations and youths who are experiencing homelessness. It was intentionally designed as a trauma-informed crisis services program.

**Implementing the Trauma-Informed Principle of Peer Support in a Crisis Service Setting. Freise Hope House**
Monday, May 22, 2017
Rebecca Ollivier and Ronald Cordy will present Crestwood Behavioral Health’s Freise HOPE (Helping Others through Peer Empowerment) House approach to crisis services. Freise Hope House is a short-term, voluntary, mental health Crisis Residential Treatment Program (CRT) in Bakersfield, CA that welcomes guests into a warm, homelike environment. Guests are provided a short-term safe place to land during a psychiatric crisis. Guests are also engaged using a
variety of recovery-based tools such as Dialectical Behavior Therapy (DBT), Wellness Recovery Action Plans (WRAP) and trauma-informed approaches to help them manage their symptoms and develop skills to live effectively in the community. The treatment team is comprised entirely of people with lived experience, who are trained and certified peer providers. For more information, visit: http://crestwoodbehavioralhealth.com/location/bakersfield-friese-hope-house/

**Implementing the Principle of Empowerment, Voice and Choice: Grassroots Wellness Peer-Run Respite and Learning Community**

Monday, June 26, 2017

This principle is rooted in the primacy of the people served; in resilience; and the ability of individuals, organizations, and communities to heal and promote recovery from trauma. There is a recognition of the ways in which trauma survivors, historically, have been diminished in voice and choice. Victoria Welle, program coordinator with the Grassroots Wellness Peer-Run Respite and Learning Community in Wisconsin, discussed how the peer-run respite fosters empowerment, voice and choice as part of an overall trauma-informed approach, and that people seeking support have the opportunity for shared decision-making and goal setting to determine the plan of action they need to heal and move forward.