

COMMUNITY CARE
Behavioral Health Organization

Recovery Learning Collaborative

May 4th, 2009

Teleconference/Webinar Agenda

12:00 *Logistics* – **Paul Wittman, MPA , MSW,LSW** , Training Manager, Community Care

12:05 *Welcome* – **James Schuster, MD, MBA**, Chief Medical Officer, Community Care

12:10 *Presentation* by **Pat Deegan, Ph.D.**, Pat Deegan Ph.D. & Associates, LLC and **James Schuster, MD, MBA**, Chief Medical Officer, Community Care

12:45 *Question & Answer Session*

1:00 *Conclude Teleconference*






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Submitting Questions

Questions may be submitted throughout the Webinar. The presenters will answer as many questions as time permits during the Q & A portion.

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Q&A icon

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About Community Care Recovery Institute

Statewide Recovery program, in collaboration with Pat Deegan, Ph.D. & Associates and Advocates for Human Potential for:

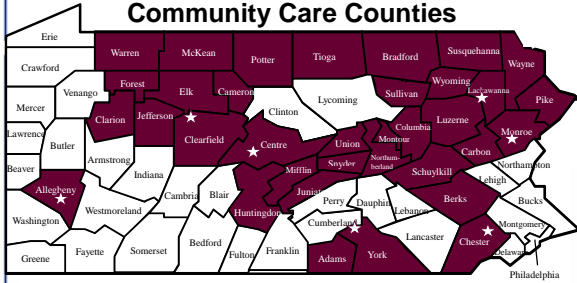
- Members
- Providers
- Families
- Our Staff

Consultation and training to support the Recovery initiative; implementing recovery-oriented, consumer-directed services in the communities it serves, known as the Community Care Recovery Institute.



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Community Care Counties



☆ Community Care Office



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Community Care's Recovery Focus

- A contract with Pat Deegan, Ph.D. & Associates
 - To provide consultation and training on their system-wide effort to implement recovery-oriented services at all levels of their behavioral health service system.
- Recovery education and training
- Empathy for Hearing Distressing Voices
- Common Ground Decision Support Centers
- Common Ground Toolkits
- RoadMap to Recovery
- Regional Institutes



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Recovery
KEEPING THE PROMISE.

In keeping with its commitment to transform behavioral health service delivery systems' focus to recovery, Community Care is sponsoring regional recovery-focused behavioral health institutes throughout Pennsylvania.

06/16/09 • Chester County • Inn of Chester Springs, Chester County
 06/17/09 • Berks County • Abraham Lincoln Hotel, Berks County
 06/18/09 • York/Adams Counties • Yorktowne Hotel, York County
 07/28/09 • North Central Region • Nittany Lion Inn, Centre County
 07/29/09 • North Central Region • Lake View Lodge, Clearfield County
 08/12/09 • Northeast Region and Carbon/Monroe/Pike Counties • Radisson Hotel, Lackawanna County


Make plans to attend a behavioral health institute sponsored by Community Care.
 SAVE THE DATE!




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Event Speakers


Patricia E. Deegan, Ph.D.
 Patricia E. Deegan, Ph.D. is an activist in the disability rights movement, a writer, lecturer and researcher. Pat is also an independent consultant with Pat Deegan & Associates, LLC and an adjunct professor at Dartmouth Medical School and Sargent College of Health and Rehabilitation Sciences at Boston University. She has many published papers, some of which have been translated into 9 languages. Pat has lectured on the topics of self-directed recovery and empowerment around the world, and has made three films on disability related topics. Pat's current projects include developing software to support shared decision-making in psychiatry, researching a recovery-based approach to using psychiatric medications in collaboration with the University of Kansas, developing recovery-based workforce trainings for mental health practitioners and helping to restore forgotten cemeteries at state hospitals. Pat has lived her own journey of recovery, having first been diagnosed with schizophrenia as a teenager. She received her doctorate in clinical psychology from Duquesne University.



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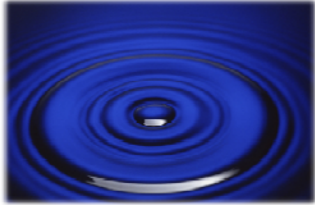
Event Speakers

James Schuster, MD, MBA
 James Schuster, MD, MBA, is the Chief Medical Officer of Community Care. In this role he is responsible for professional advisors and credentialing and clinical oversight of quality programs. Dr. Schuster is board certified in psychiatry and in the subspecialties of geriatric and addiction psychiatry.
 After obtaining a medical degree from the University of Louisville in 1985, Dr. Schuster completed psychiatric residency and MBA programs at the University of Pittsburgh. He has published articles and book chapters in the areas of managed care and emergency psychiatry.

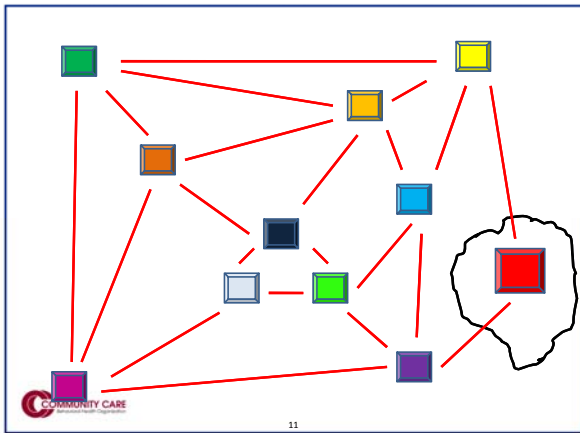


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Recovery Transformation ≠
Implementing a Recovery Program



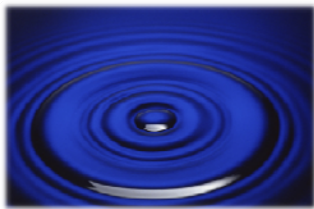
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What is a Learning Collaborative?

Start,
Sustain and
Spread
a
new practice



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The Mission

Every single consumer served by our agency will have the opportunity to become activated and empowered to participate in shared decision making related to the use of psychiatric medication in their recovery process.



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The CommonGround™ Approach

- ✓ A suite of practical tools for recovery transformation
- ✓ Personal Medicine Toolkit
- ✓ Power Statement Toolkit



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The CommonGround™ Approach



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Personal Medicine™



COMMUNITY CARE
Personal Health Organization

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Voices

Delusions

Negative Thoughts

Self Harm

Worry

Depression

Grounded

Sleep

Concentration

Blank 

COMMUNITY CARE
Personal Health Organization

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R Personal Medicine™: *It's what I do for my recovery.*



Who is my assistant
"reality tester?"
Before I act on an important thought or belief,
I will check first with someone I trust.

 Delusions 4.0708 Pat Degan PhD & Associates, LLC © 2008

Learn to double check matter-of-fact-thinking



Special Instructions for My Personal Medicine

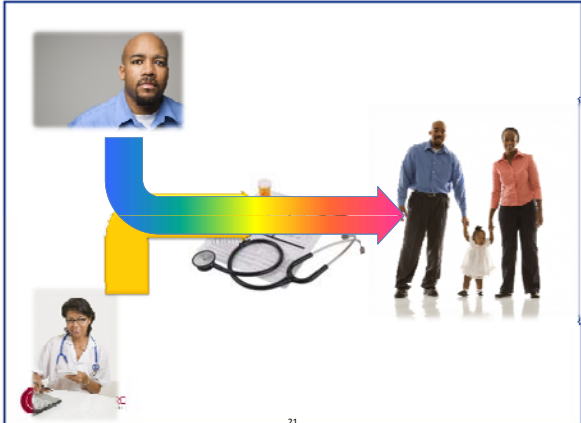
People are poisoning me! People are spying on me! I must atone for the sins of the world! These are examples of "big", important thoughts and beliefs that many of us have found to be false realities. Before acting on such thoughts, it can be helpful to check with someone we trust and whose opinion we respect. Do they agree with our thinking or do they suspect we are in touch with a false reality? Who can be your assistant reality tester?

My Assistant Reality Testers

1st Assistant: _____ Phone #: _____
2nd Assistant: _____ Phone #: _____

Did this Personal Medicine work for me? Yes, I will use it again. No, I will try another.





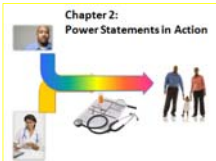
Steve's Power Statement

Someday I want to be a sports broadcaster. Today I am a volunteer at the nursing home. I read the sports section of the newspaper to residents each day. I want you to work with me to find a medicine that helps me focus on reading the paper, instead of focusing on my voices.



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Rapid e-Learning Screencasts



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Screencasts = Learning-on-the-go



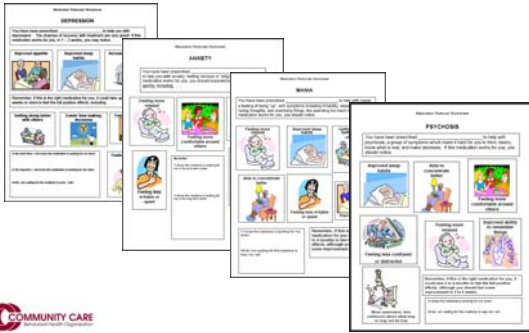
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Viewers Guide



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Supporting Materials



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Responsibilities of Agencies Joining the Recovery Learning Collaborative

1. Complete and submit an application to join the Community Care Recovery Learning Collaborative by May 15, 2009
2. A 2- year commitment to the Recovery Learning Collaborative
3. Identify one program in your agency as the starting point for implementing the CommonGround approach



Responsibilities of Agencies Joining the Recovery Learning Collaborative

- Identify and empower a 4-person Quality Improvement Team (QIT) whose members typically include;
 - A clinical supervisor of the selected program
- An upper level administrator with access to executive leadership and
 - authority to support the implementation, sustaining and spread of the CommonGround Approach across the agency



Responsibilities of Agencies Joining the Recovery Learning Collaborative

4. Identify and empower a 4-person Quality Improvement Team (QIT) whose members typically include;
 - a. A clinical supervisor of the selected program.
 - b. An upper level administrator with access to executive leadership and authority to support the implementation, sustaining spread of the CommonGround Approach across the agency.



Responsibilities of Agencies Joining the Recovery Learning Collaborative

- 4. Identify and empower a 4-person Quality Improvement Team (QIT) whose members typically include;
 - c. A consumer representative
 - d. A quality assurance/improvement person who can support data collection and analysis.
 - e. NOTE: The work of the core QIT members should be integrated into formal work-related duties



Responsibilities of Agencies Joining the Recovery Learning Collaborative

- 5. Agency leadership must communicate with employees through written and/or electronic methods to start, sustain and spread the CommonGround Approach to shared decision making and recovery transformation at all levels of the organization.



Responsibilities of Agencies Joining the Recovery Learning Collaborative

- 6. The agency must support clinical staff who are implementing the CommonGround Approach. Clinical supervisors and supervisees must meet and include issues related to the initiative during supervisory activities as one means of reinforcing and sustaining progress.



Responsibilities of Agencies Joining the Recovery Learning Collaborative

- 7. At least one member of the QIT must participate in monthly, hour-long phone calls with other regional Recovery Learning Collaborative members. These calls will be facilitated by Community Care experts in the CommonGround Approach.
- 8. Representatives of the QIT will have opportunities to meet for further training at regional and statewide conferences sponsored by Community Care



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Responsibilities of Agencies Joining the Recovery Learning Collaborative

- 9. Performance Indicators: The agency agrees to collect performance indicators of process and outcomes. Examples include:
 - a. Number (%) of clients with Personal Medicine
 - b. Number (%) of clients with Power Statements
 - c. Number (%) of Personal Medicine and Power Statements at 6 month intervals



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Responsibilities of Agencies Joining the Recovery Learning Collaborative

- d. Number (%) of Personal Medicine and Power Statements included in current treatment plans
- e. Number (%) of Personal Medicine and Power Statements in the medical record
- f. Number of Personal Medicine Cards distributed
- g. Number of staff who have watched the Personal Medicine and Power Statement screencasts.
- h. Number of staff trained in Hearing Voices simulation and possible pre-post measures.



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Responsibilities of Agencies Joining the Recovery Learning Collaborative

Baseline measures of one or more of these items will be gathered and then reassessed at least annually. In addition, the agency agrees to review at least 10 charts per year using the fidelity assessment tool included with each toolkit.



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Resources and Supports Provided by Community Care

1. A panel of expert consultants to the Recovery Learning Collaborative, to include staff from Pat Deegan PhD & Associates. Other expert consultants will assist with data collection and analysis, supervision strategies and Quality Improvement strategies.
2. Regional Learning Collaborative Facilitators who will work with agencies at the local and regional level to plan, start, sustain, spread and evaluate the CommonGround Approach in the organization



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Resources and Supports Provided by Community Care

3. All resources required to implement the CommonGround Approach including:
 - a. Enhanced Personal Medicine Toolkit
 - b. Enhanced Power Statement Toolkit
 - c. Access to the Recovery Learning website www.ccbh.com
 - d. Monthly Learning Collaborative calls
 - e. Consultation and technical assistance
 - f. A newsletter to keep Learning Collaborative members informed about the progress of the initiative



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Resources and Supports Provided by Community Care

4. Regional and statewide meetings of Recovery Learning Collaborative members at Community Care conferences and events. The QIT will be invited to attend a Summer 2009 Recovery Institute in the region at no cost. One member of the QIT may attend the statewide recovery conference sponsored by Community Care without a registration fee. CEU's will be provided to social work and psychology members of the QIT at these events, for no cost.



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Resources and Supports Provided by Community Care

5. Hearing voices simulation training for agency staff provided by certified trainers at no cost to the agency.
6. Interested members of the Recovery Learning Collaborative will have opportunities to present reports and publications about the Recovery Learning Collaborative.



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Q&A icon



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For More Information

For more information regarding the presentation and Community Care Learning Collaborative, contact:

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Thank you for participating in today's teleconference and for completing your evaluation form. We appreciate your feedback.



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