Family Education and Support in the Coordinated Specialty Care (CSC) Model for First Episode Psychosis

Susan Gingerich Kathy Swearingen Kurt Kirchoff

June 2nd, 2022





Housekeeping Information



Participant microphones will be muted at entry



If you have questions during the event, please use the chat

This session is being recorded and it will be available by the next business day. If you have questions after this session, please e-mail: <u>newengland@mhttcnetwork.org</u>.

Acknowledgment

Presented in 2022 by the Mental Health Technology Transfer Center (MHTTC) Network.

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At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D, served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

The opinions expressed herein are the view of TTC Network and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

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Presented 2022

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED AND HOPEFUL

INCLUSIVE AND ACCEPTING OF DIVERSE CULTURES, GENDERS, PERSPECTIVES, AND EXPERIENCES

PARTICIPATING IN THEIR OWN JOURNEYS

PERSON-FIRST AND FREE OF LABELS

NON-JUDGMENTAL AND AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR AND UNDERSTANDABLE

HEALING-CENTERED AND TRAUMA-RESPONSIVE

CONSISTENT WITH OUR ACTIONS, POLICIES, AND PRODUCTS

Adapted from: https://mhcc.org.au/wp-content/uploads/2019/08/Recovery-Oriented-Language-Guide_2019ed_v1_20190809-Web.pdf



Sponsored by:

Healtheknowledge Subgroup of the MHTTC Early Psychosis Working Group

Catherine Adams, Michelle Friedman-Yakoobian, Kate Hardy, Amanda Lipp, Ann Murphy, Laura Yoviene

and the New England MHTTC Region 1

Raquelle Mesholam-Gately, Courtney Spitzer, Vanessa Wronski

BASICS OF COORDINATED SPECIALTY CARE COURSE

Designed to help orient new staff and providers

Evidence-based care model for early psychosis care

Each 45-min session includes

- 1) Introduction to area by professional
- 2) Co-presentation by individuals with lived experience
- 3) Time for audience questions

Sessions are recorded and will be included in an upcoming asynchronous course that is freely available via healtheknowledge.org





Healtheknowledge.org





* Every first Thursday at 2PM EST, 11 AM PST *

		Topic Overview	Lived experience
Date	Topic	Presenter	presenter
Feb 3	Peer specialist services	Patrick Kaufmann	Jacobi Nabors
	Culturally responsive CSC for Early		
Mar 3	Psychosis	Iruma Bello	Drew Musa
April 7	Individual therapy	Raelyn Elliott-Remes	Jacob Halmich
May 5	What is early psychosis?	Chantel Garrett	Danny Sosa
			Katharine
	Family psychoeducation and		Swearingen and Kurt
Jun 2	support	Susan Gingerich	Kirchoff
			Nate Schwirian and
			Charles Stromeyer
Jul 7	Medication management	Matcheri Keshavan	IV
Aug 11	Supported employment	Shirley Glynn	Coming soon!

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Why are families so important?

- Research shows that family involvement improves the outcomes of the individual with psychosis, including reducing relapses
- Families can do a variety of things that help with recovery and resilience: support participation in treatment, provide concrete supports, reduce stress, encourage pursuit of goals, praise progress, discourage use of alcohol and drugs, be alert to early warning signs of relapse, convey hope that things can get better
- Provide a "wrap around of support"

What emotions do families experience

- Discouragement
- Confusion
- Feeling of loss of knowing what to do
- Helplessness
- Hopelessness
- Fear that they cannot keep their loved one safe or that they might do "the wrong thing"
- Exhaustion

What are families looking for?

- Information
- Strategies
- Skills
- Support

What are some examples of information that families find helpful?

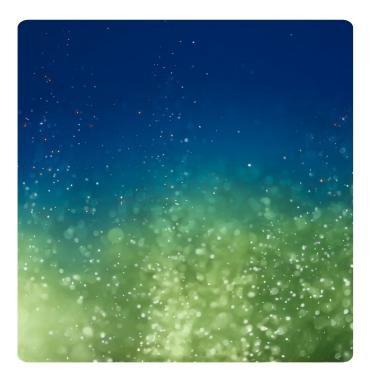
Facts about:

- 1. Psychosis
- 2. Medication
- 3. Coping with Stress
- 4. Alcohol and Drugs
- 5. Healthy Lifestyles

- 6. Resiliency
- 7. Effective Communication
- 8. Wellness Planning
- 9. Working with mental
- **Health Professionals**

What are some examples of tips that families find helpful?

- 1. Keep expectations minimal at first, but don't let them all go
- 2. Encourage but do not nag
- 3. Help your relative keep to as close to a normal routine as possible
- Don't argue with a relative about worrisome thoughts (delusions)
- 5. Continue to do enjoyable activities together
- 6. Take care of yourself
- 7. Get help in managing crises



What are some things that families tell us they appreciate from the family education clinician?

Accurate information, tips about what to do	Kindness	Compassion
Calmness	Good listening Help with	Appreciation about what they have gone through
	navigating their way through unfamiliar	



In summary

- Families often naturally feel alone and confused about what to do
- Family education provides a setting in which families can be fully honest about what's going on and recognize that they are not alone
- Family education is extremely valuable to people who might otherwise feel lost about what to do and where to go
- Family education provides hope



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UPCOMING SESSIONS

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Jul 7	Medication management	Matcheri Keshavan	Nate Schwirian and Charles Stromeyer IV
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The purpose of the MHTTC Network is technology transfer - disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office.

Our collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals. Our services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

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