

# Integrating Core Skills from Evidence-Based Practices into Your Work

*A Learning Collaborative*

*Today with: Michelle Salyers and Emily Treichler*

Hosted by

The Southeast Mental Health Technology Transfer Center

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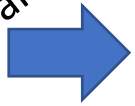
# Today's Roadmap

- Check in: how did things go?
- Common barriers & facilitators to meeting our goals
- Defining collaborative decision-making & why it fits with recovery-oriented, evidence-based care
- Role of client-directed goal setting

# The Series: Topics

1. Introductory session on doing more with less -- Core skills from Evidence-based practices in under-resourced communities (Michelle and Sandy)
2. Client-directed goal setting and collaborative decision-making (Emily)
3. Using measurement-based care principles to guide your practice (Sandy)
4. Coaching clients to work with providers/advocating for themselves (Emily)
5. Working with community members (Marina)
6. Recovery in challenging situations and wrapping it up (Michelle and Emily)

We are here



# Checking in

Some reflections (pen & paper/open word document)

1. Last week you set a SMART goal for something to try. How did it go?
  - SMART goals are: specific, measurable, attainable, realistic, timely
2. If you met your goal, what helped you reach it?
3. If you had trouble with your goal, what got in the way?
4. When is your birthday (month/day)?



## Next Step

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You will be invited to join a break-out room. In those rooms, the person whose birthday is soonest is the “leader” and note taker for today

- 1) Introduce yourselves, including your favorite birthday cake flavor (or non-cake treat), something fun you did outside of work this past week.
- 2) Discuss your goals from the past week and how they went
- 3) Write down 3-4 common things that tended to help you reach your goal and 3-4 things that tended to get in the way
- 4) Troubleshoot- what might help you overcome those barriers?

Goals, barriers & facilitators

# Collaborative decision-making

Client-directed goal setting & empowered decision-making

# Psychiatric Rehabilitation

“...promotes recovery, **full community integration, and improved quality of life** for persons who have been diagnosed with any mental health condition that seriously impairs their ability to lead meaningful lives.

Psychiatric rehabilitation services are **collaborative, person-directed and individualized.**

These services are an essential element of the health care and human services spectrum, and should be **evidence-based.**

They focus on helping individuals **develop skills and access resources** needed to increase their capacity to be **successful and satisfied in the living, working, learning, and social environments of their choice.**”

*-Psychiatric Rehabilitation Association-*

<https://www.psychrehabassociation.org/about/who-we-are/about-pra>



# Collaborative Decision-Making

*“A voice and a choice.”*



- An approach to making decisions about mental health care that
  1. Meaningfully and powerfully includes clients
  2. Makes sure the decisions fit with clients' needs, preferences, goals, values, and culture
  3. Is flexible

# Why Collaborative Decision-Making?

- People in mental health care tend to want to be involved in decision-making

What do clients value & prefer during decision-making?

1. Communication
2. Transparency
3. Trust
4. Being treated like a person & honored for who they are as an individual
5. Feeling cared for

# Why Collaborative Decision-Making?

- Associated with improved:
  - Symptoms
  - Social functioning
  - Knowledge about diagnosis & treatment
  - Treatment adherence, engagement & satisfaction
  - Quality of life
  - Personal recovery

“Recovery is unique for every person. The whole idea that you can participate [in] decision making kind of reinforces a recovery model in that no one can tell you what your goals are in life but you. No one knows what you want to strive for. You can have a doctor and a clinician deciding that these are the things you want to work on, but they might not even be what is important to you in your life. That may not be what moves you forward in your recovery. So I think it’s important to be at the table when, you know, decisions are made and to feel like there’s some mutuality there like you guys are on the same level.”-Person with SMI, quoted in Mahone et al 2011

# Collaborative Decision-Making

**Meaningfully and powerfully includes clients**

**Be able to:**

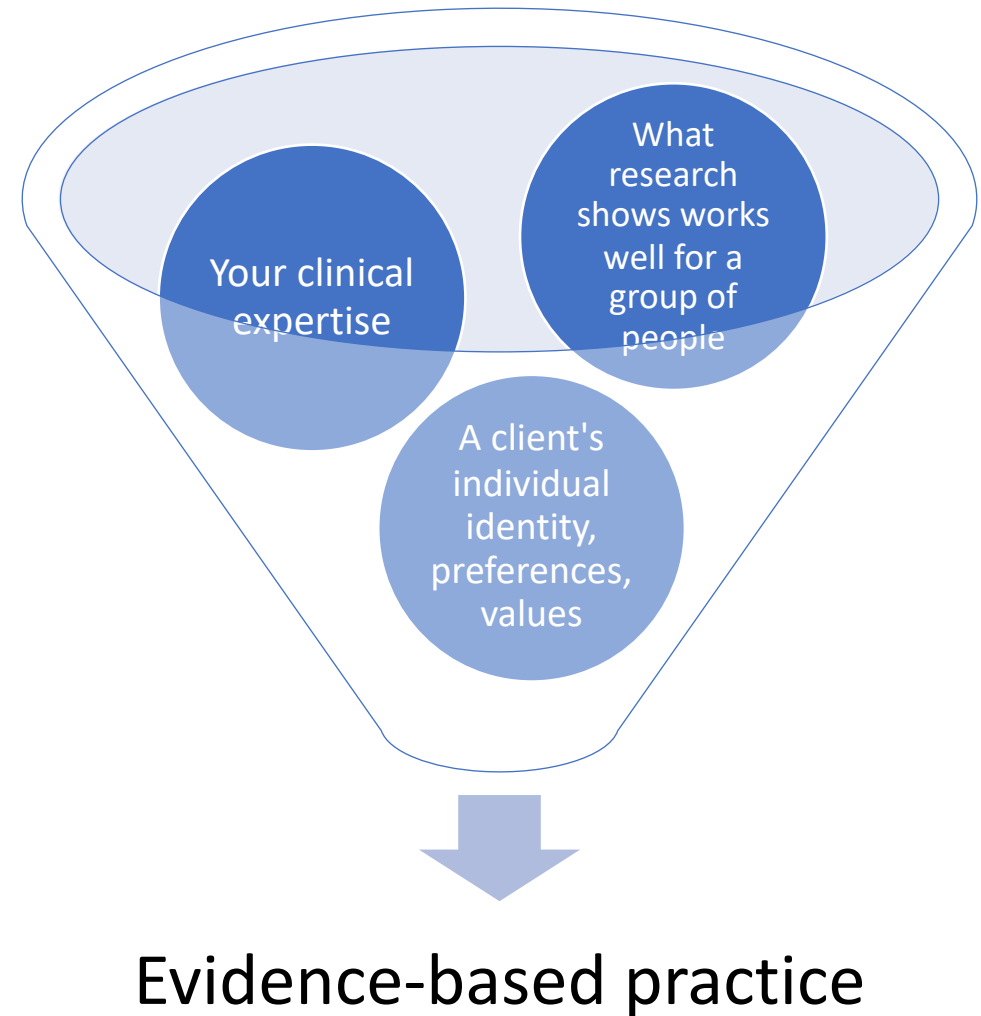
- Choose whether and how they'd like to participate in the decision-making process itself (opting out is okay!)
- Voice their opinions and preferences
- Ask questions and have access to all the information they need
- Have a meaningful say over the ultimate decision made

# Collaborative Decision-Making

**Makes sure the decisions fit with clients' needs, preferences, goals, values, and culture**

Collaborative decision-making

- prioritizes clients
- helps you and the client discuss and integrate each part actively as you make each decision.

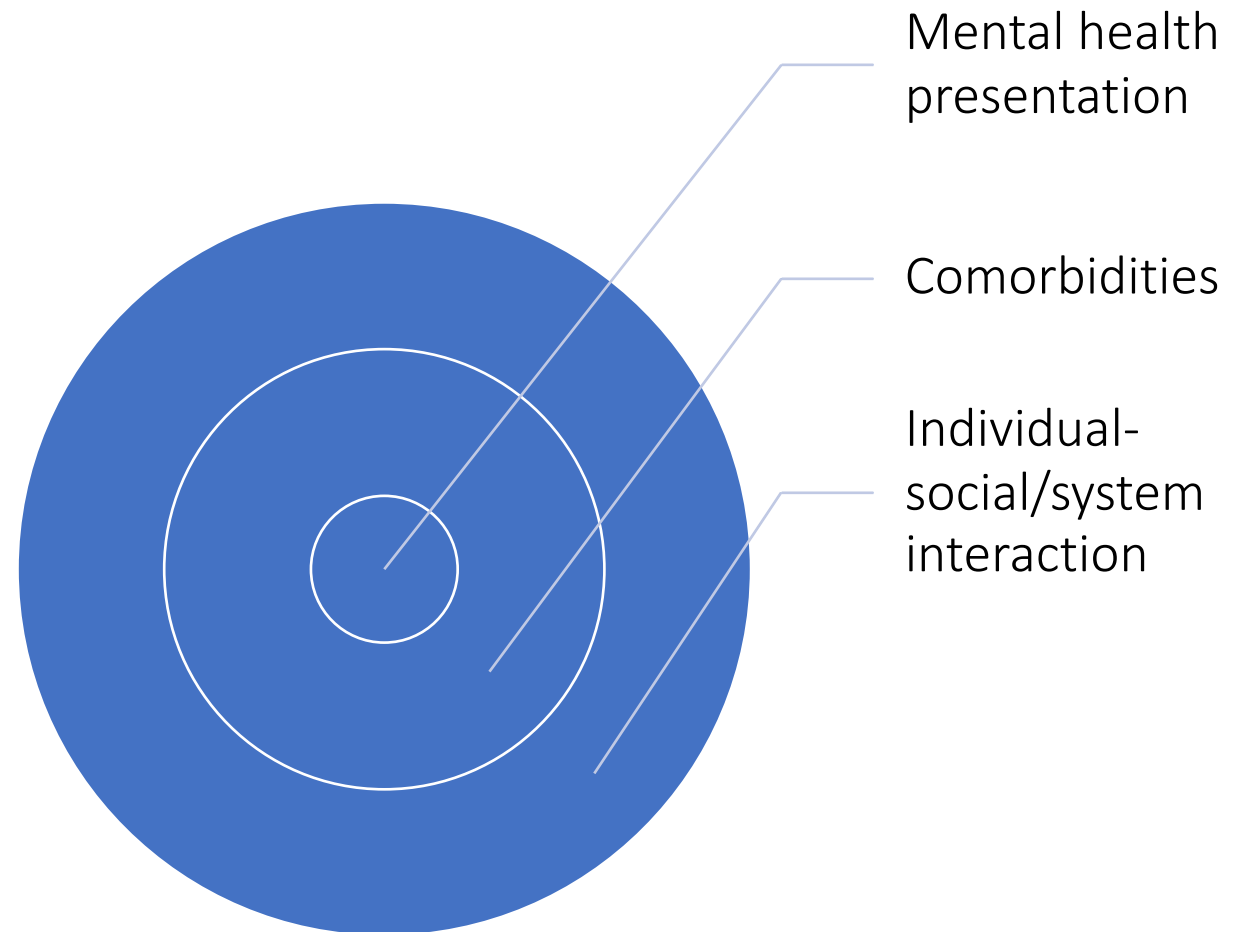


# Collaborative Decision-Making

## Is flexible

Decision-making is complicated!

Many of the folks we see have complicating factors that increase complexity of decision-making progress



# Collaborative Decision-Making

## Is flexible

- Not a fixed set of steps
- Can include multiple clinicians and other folks
- Revisit and adjust anytime
- Can be done at any “level” including clinic and system

# Let's do an initial brainstorm...

Lorenzo had been working hard on his recovery, and notices a lot of improvements in his symptoms. However, he feels like his days were pretty empty, and often feels bored and lonely. He wants to go back to work, but his psychiatrist is worried about this and cautions him that the added stress could cause a relapse.

1. Who should decide if Lorenzo is ready to work?
2. What are the risks and benefits to Lorenzo of working again?
3. What are the risks and benefits for Lorenzo's treatment team?
4. How should the risks and benefits impact what decision is made?



# How to do collaborative decision-making?

- You don't need to be an expert!
- More about key elements than set steps
- Flexible, so make it work for you and the person you're working with

# Key elements



Jointly setting recovery goals



Meaningful choice over what & how



Clients are empowered to speak up



Two way information exchange



Risks and benefits weighed



Choices made based on client identified goals, values & preferences

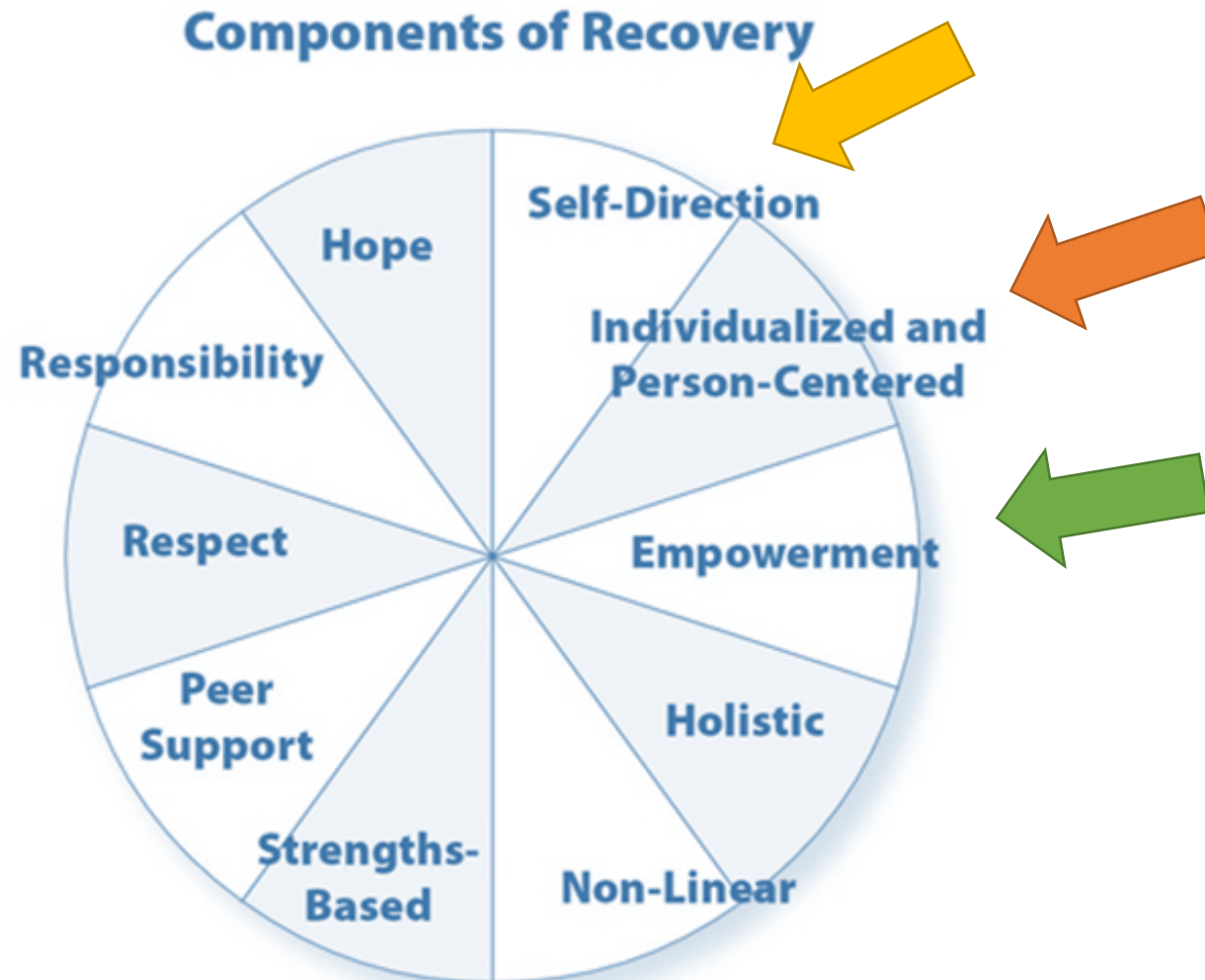
# Some examples...

- Lorenzo had been working hard on his recovery, and he noticed a lot of improvements in his symptoms. However, he felt like his days were pretty empty, and often felt bored and lonely. He wanted to go back to work, but his psychiatrist was worried about this and cautioned him that the added stress could cause a relapse. Lorenzo never wanted to be hospitalized again so he didn't know what to do. Lorenzo decided to talk to case manager about it. Together they decided that trying out the supported employment program could help him try out working with support and at a pace he was comfortable with.
- Rosie's case manager thought Rosie would benefit from therapy for her PTSD. He asked Rosie what she thought about going to therapy. Rosie expressed some worries about whether she would have to tell a stranger about her trauma history right away. The case manager answered Rosie's questions and suggested that he could talk to the therapist briefly before Rosie's first meeting to help make sure the therapist understood what Rosie wanted. Rosie agreed to this.
- Maria's case manager asks Maria's preferences about housing options after she discharges from inpatient hospitalization. Maria says she trusts her case manager and will go with what she thinks is best. (opting out)
- Max is involuntarily hospitalized with acute psychosis. He has an psychiatric advanced directive on file, so his treatment team consults it. They find that he has had a negative reaction to some medications in the past, so they don't give him those medications and check for adverse reactions to his current meds. His documented wellness plan includes holistic elements like music and exercise, so they help him incorporate this into his stay.

# Collaborative decision-making and low-resourced environments

- The good news: adding “decision aids” to appointments adds only ~2.5 minutes
- The better news: you don’t necessarily need a decision aid or anything extra
- So much of collaborative decision-making is about communication & trust
  - Free (?) but time-consuming to foster

# Client directed goal-setting



Coping effectively with life and creating satisfying relationships

Developing a sense of connection, belonging, a well developed support system

Personal satisfaction and enrichment derived through one's work, school, and/or volunteer work

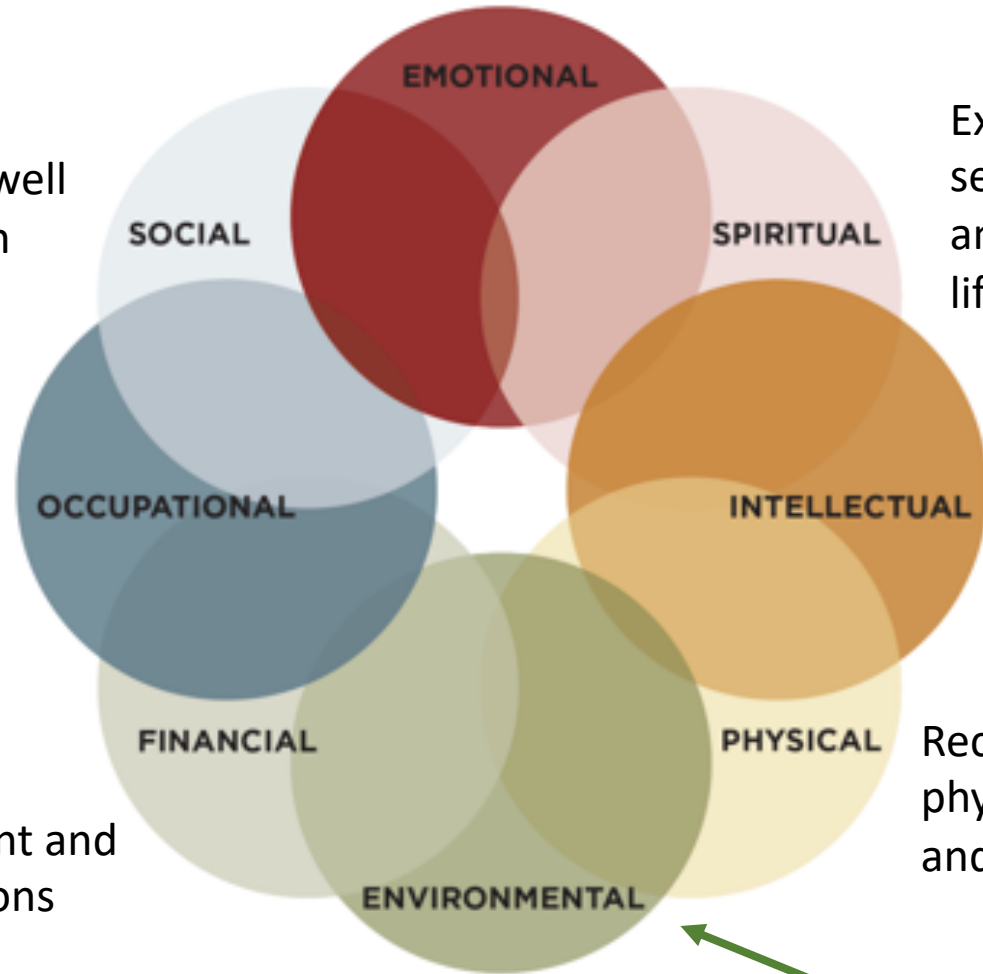
Satisfaction with current and future financial situations

Expanding our sense of purpose and meaning in life

Recognizing creative abilities and finding ways to expand knowledge and skills

Recognizing the need for physical activity, diet, sleep, and nutrition

Good health by occupying pleasant, stimulating environments that support well-being



**WELLNESS**

Source: Adapted from Swarbrick, M. (2006). A Wellness Approach. *Psychiatric Rehabilitation Journal*, 29(4), 311-314.

Thinking big  
about goals

# Reflections (paper/pen, word doc)

- What does goal setting and treatment decision-making look like in your setting?
- How do you and others in your setting collaborate with clients?
- Where do you see room to grow?

# Small Group Activity

- What does goal setting and treatment decision-making look like in your setting?
- How do you and others in your setting collaborate with clients?
- Where do you see room to grow?
- Same leader/note taker jot down a few ideas for successful strategies and possible new pathways



# Big Group Sharing

- What were a few highlights?
- Group leader can you email me notes? [mpsalyer@iu.edu](mailto:mpsalyer@iu.edu)

# Reflection

- What is one thing you plan to try differently this week?
- Write it down for yourself

Remember SMART goals are: specific, measurable, attainable, realistic, timely

- Then write it in chat

# Next Week

- Check in with how it is going
- Talk more deeply about **measurement-based care**
- More small-group sharing