The Basics of Coordinated Specialty Care for Early Psychosis

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Introduction

Coordinated Specialty Care (CSC) is a team-based, multidisciplinary treatment program for individuals experiencing early psychosis (EP). CSC services aim to improve quality of life by restoring hope and fostering resilience during care.



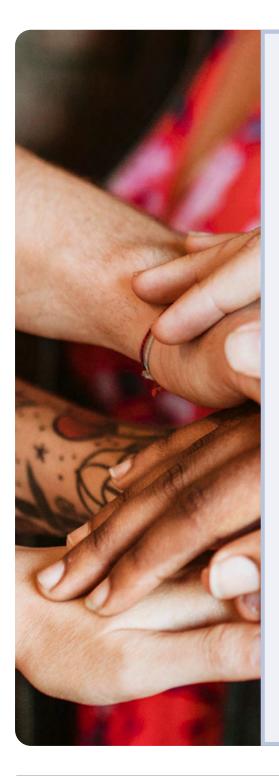
1. What is Early Psychosis?

- **a.** Psychosis is a set of symptoms referring to a loss of contact with consensus reality or difficulty telling what is real from what is not. A person may experience psychosis in the context of drug use, medical issues such as seizures or sleep deprivation, or a mental health condition such as schizophrenia, bipolar disorder, or depression. Psychosis exists on a spectrum ranging from mild experiences to more severe difficulties that can significantly impact daily life. Common signs of psychosis include sensory or perceptual changes and confusing thoughts or feelings that make it difficult to tell what's real and what's not.
- **b.** CSC teams work to help individuals pursue recovery by establishing trust, focusing on goals, and using constructive, recovery-oriented language in care.



2. Culturally Responsive Care

- a. Culturally responsive care refers to a provider's ability to maintain a relational stance that is oriented to the cultural aspects of identity that are most important to the person involved in care. An important aspect of providing culturally responsive and culturally humble care involves understanding the social and economic conditions that influence the prevalence of mental health conditions, as well as the extent to which people are diagnosed and have access to care.
- **b.** Culturally responsive CSC involves:
 - Cross-cultural interpersonal skills and an anti-oppressive framework in a collaborative team effort to provide individualized care.
 - Intentionally acknowledging, respecting, and celebrating **intersectionality** (how social categorizations such as race, class, and gender interconnect and amplify experiences of discrimination and disadvantage).
 - Cultural humility, which means that providers are aware of and sensitive to historical realities such as legacies of violence and oppression, as well as entitlement and privilege, for certain groups of people.



3. Peer Support

- **a.** Peer support specialists have lived experience with psychosis and engage with people in care in a mutual and supportive way. They often act as a bridge between the language of the mental healthcare system, people in care, and their families.
- **b.** Peer support involves:
 - Supporting individuals in staying engaged with their recovery.
 - Promoting recovery with shared experiences.
 - Valuing mutuality & reciprocity, focusing on reducing power imbalances, and fostering growth.

4. Individual Therapy

- **a.** Individual therapy involves:
 - Clarifying values, incorporating strengths, and developing shared goals.



- Helping people better understand their psychosis experiences by asking curious and nonjudgemental questions.
- Sharing information about psychosis symptoms and how they fit on a continuum.
- Introducing and practicing new skills and tools to cope with symptoms and work towards therapy goals.



5. Medication Management

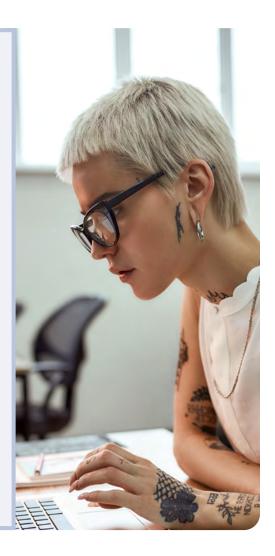
- **a.** Medication management in CSC is the process by which prescribing clinicians collaborate with people in care to form a medication plan. The role of a prescribing clinician is to bring in the perspectives of both the clinician and individual engaged in treatment and recovery; this is called **shared decision-making**.
- **b.** Medication management involves:
 - Sharing information about available treatment options and their potential benefits and side effects.
 - Balancing treatment benefits and side effects through informed consent.
 - A holistic health approach that considers the persons' prior medication experiences.

6. Family Education and Support

- **a.** Family education and support in CSC involves teaching families about psychosis symptoms and strategies for supporting their loved one's recovery.
- **b.** Family education and support involves:
 - Teaching families about the nature and principles of early psychosis treatment.
 - Obtaining family support for the person's involvement in treatment.
 - Practicing low-stress strategies for communicating and solving problems together.

7. Supported Employment and Education

- a. Supported employment and education in CSC is designed to help people identify and pursue their school and work goals. This approach to care aims to support people in finding meaningful work or pursuing education opportunities that are tailored to their personal goals and strengths.
- **b.** Supported employment and education involves:
 - Identifying the person's talents and strengths that can be used as the foundation for success in their chosen pursuits.
 - Working collaboratively with individuals to find the right job or educational opportunities that align with their goals and preferences.
 - Providing ongoing support, assistance and encouragement as the individual works towards their goals and navigates challenges that come up.



Conclusion

CSC is an evidence-based, recovery-oriented, multidisciplinary treatment program tailored for individuals experiencing EP. CSC involves joint treatment planning (or shared decision-making) between the people in treatment and recovery and their care team, which can include mental health providers such as peer specialists, psychiatrists, psychologists, social workers, and case managers. CSC can provide individual and family counseling, medication management, case coordination and assistance with educational and career objectives, as well as other services.



If you would like to learn more about CSC, take the online course: https://mhttcnetwork.org/centers/new-en-gland-mhttc/online-courses-healtheknowledge

Take the online course

This 5-hour, asynchronous course is a free, self-paced, basic orientation to the components of CSC for EP. It is appropriate for new staff working on an EP team or anyone interested in learning more about this topic. Each course module is co-presented by individuals with professional and lived experience. Topics cover: introduction to psychosis, culturally responsive CSC, peer support services, individual therapy, medication management, family psychoeducation and support, and supported education and employment.

Additional Resources:

- Learn more about CSC through the OnTrackNY program and it's training materials: https://ontrackny.org/Learn-Train/Training-Manuals
- Learn more about CSC through the NAVIGATE program and it's training manuals: http://navigateconsultants.org/manuals.html
- Find a provider who specializes in early psychosis: https://strong365.org/find-support/professional-support/psychosis-support-provider-directory
- Find a program that specializes in early psychosis: https://easacommunity.org/national-directory.php
- Learn more about early intervention in psychosis through the National Association of State Mental Health Program Directors (NASMHPD) virtual resource center:

 https://www.nasmhpd.org/content/early-intervention-psychosis-eip
- Find more products about early-psychosis care and CSC: https://mhttcnetwork.org/centers/global-mhttc/early-psychosis



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Do you have questions that you would like us to address in future clinical briefs?

Do you want further information about specialized assessment or treatment for early psychosis?

WEBSITES

MHTTC Early Psychosis Working Group https://mhttcnetwork.org/centers/global-mhttc/early-psychosis

New England MHTTC Early Psychosis Learning Collaborative https://mhttcnetwork.org/centers/new-england-mhttc/news/early-psychosis-learning-collaborative-eplc

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This EPLC is part of an initiative by the Substance Abuse and Mental Health Services Administration (SAMHSA)'s New England Mental Health Technology Transfer Center Network (MHTTC), which provides training, technical assistance, and tool and resource development to enable states and mental health practitioners to provide recovery-oriented practices within the context of recovery-oriented systems of care.

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