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CCBHC-E National Training and Technical Assistance Center

CCBHC Crisis Services Learning Community
Session 5: Engaging Peers in Providing the
Full Continuum of CCBHC Crisis Services
May 30, 2024

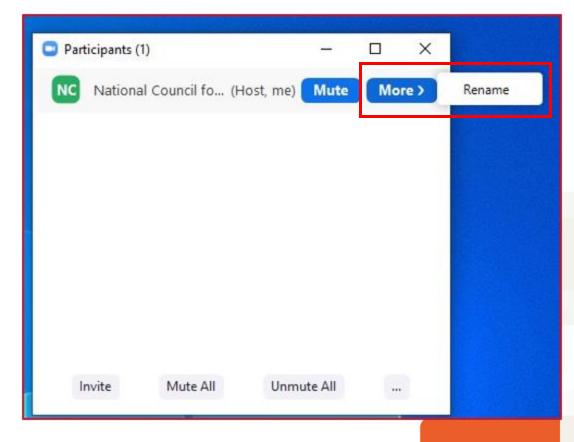
CCBHC-E National Training and Technical Assistance Center

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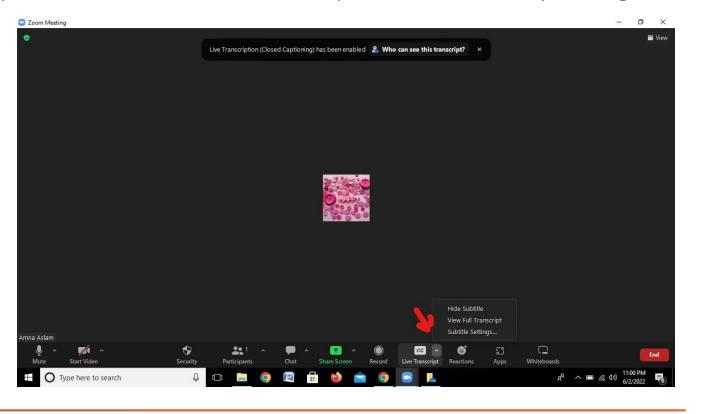
- Please rename yourself so your name includes your organization.
- For example:
 - Kat Catamura, National Council
- To rename yourself:
 - Click on the **Participants** icon at the bottom of the screen
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 - Click Rename
- If you are having any issues, please send a Zoom chat message to Kat Catamura, National Council



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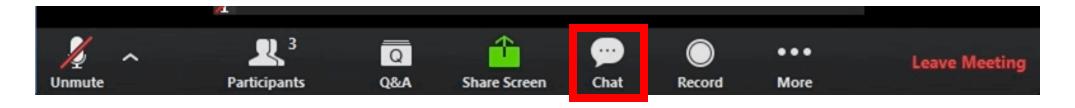
How to Enable Closed Captions (Live Transcript)

Next to "Live Transcript," click the arrow button for options on closed captioning and live transcript.





How to Ask a Question



Please share questions throughout today's session using the **Chat Feature** on your Zoom toolbar. **We'll answer as many questions as we can throughout today's session.**

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Learning Community NTTAC Team



Clement Nsiah, PhD, MS
Director



Blaire Thomas, MASenior Project Manager



Kathryn Catamura, MHS
Project Coordinator

Learning Community Faculty



Kenneth Minkoff, MD

Vice President and COO ZiaPartners



Carrie Slatton-Hodges, M.S., L.P.C.

Senior Behavioral Health Advisor National Association of Mental

Health Program Directors

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Today's Guest Presenters



Josh Cantwell, MBA, LCSW, CPRSS Chief Operating Officer GRAND Mental Health



Nicholas Allgood, LPC, CPRSS Chief Clinical Officer of Crisis Services GRAND Mental Health

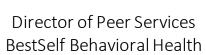


Chief of Quality & Clinical
Innovation
Connections Health Solutions

Margie Balfour, MD, PhD



Jeffrey Fyvie, CRPA





Brittany Derry, LMHC

Director of Crisis Center & Clubhouse Programs
BestSelf Behavioral Health

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Polling Question

- In which of the following crisis services are MH and/or SUD peers providing services in your organization? (Check all that apply)
 - o Call center
 - o Mobile crisis
 - Walk in urgent care
 - o Crisis stabilization/crisis center with observation
 - o Peer respite
 - o Crisis follow up and/or peer bridgers
- How many peers are working in your agency providing crisis services (including urgent care and crisis follow up)?
 - 0 0-5
 - 0 6-10
 - 0 11-20
 - o Over 20
- Do you have focused training and supervision for peers doing crisis work?
 - Not yet
 - o Yes, provided only by non-peer staff
 - o Yes, provided by both peer and non-peer staff



Today's Agenda

Engaging Peers in Providing CCBHC Crisis Services: Expectation and Opportunity

____ How we engage and support peers in our crisis continuum: Best Self, NY

Developing a robust continuum of peer delivered crisis services in rural OK, GRAND

Peers as engagement specialists in a secure Crisis Response Center - Tucson

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Engaging Peers in Providing CCBHC Crisis Services: Expectation and Opportunity

Engaging Peers in Providing CCBHC Crisis Services: Expectation and Opportunity

• Expectation: Including peers in provision of crisis services is a requirement for CCBHCs (CCBHC Criteria, 2023)

Opportunity:

- Peer support workers engage in a wide range of activities. These may include advocating for people in recovery, sharing resources and building skills, building community and relationships, leading recovery groups, and mentoring and setting goals.
- Peer support roles may also extend to providing services and/or training, supervising other peer workers, developing resources, administering programs or agencies and educating the public and policymakers.



How to Engage and Support Peers in our Crisis Continuum

BestSelf Behavioral Health, NY



How to Engage Peers - BestSelf

- Cultivating a Community
 - o Diverse recruitment, role clarity and respect, involvement in decision making and treatment teams
- Recognition and Appreciation
 - o Global Peer Support Celebration Day, email group notifications about achievements
- Professional Development
 - Career pathways, certification and training programs, continuing education
- Feedback and Communication
 - Open communication and feedback channels

Engaging peers effectively in a crisis continuum involves creating an inclusive, supportive, and empowering environment that values their contributions and addresses their needs.



How to Support Peers in our Crisis Continuum

Supporting peers in the crisis continuum involves tailored strategies that acknowledge their unique role, experiences, and needs. Strategies that assist in supporting peers are as follows:

- Active listening
 - Validate feelings, provide non-verbal cues of support
- Practical Assistance
 - Providing resources for support (ie: buddy system, resource kits, workshops/webinars), inclusion in decision-making, crisis intervention tools
- Self-Care and Boundaries
 - Encourage the prioritization of self-care, setting boundaries to maintain personal well-being, offer support without compromising one's own mental health
- Follow-up and Continued Support
 - Check in regularly, recognizing signs of distress in peers, importance of timely intervention

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Developing a Robust Continuum of Peer Delivered Crisis Services in Rural Oklahoma

GRAND Mental Health, OK





Peers at GRAND

- Focus to enhance and extend workforce
- Utilized as part of the outreach team
- Importance of utilizing peers
 throughout our treatment continuum

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Snapshot of peer utilization

- Increase in peer staffing agency wide and in crisis continuum
- Recruiting
 - Self-help groups
 - Past clients who has discharged successfully
 - Creative ad postings in unique environments
 - Local workforce and employment offices
 - Openness to hire individuals with non-violent offenses

Year	Agency	Crisis
2018	41	13
2019	76	32
2020	113	49
2021	193	63
2022	293	100
2023	410	185
2024	437	197

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Region 3 Region 1 Miami OTTAWA Bartlesville 0 Pawhuska **MENTAL HEALTH** 0 Jay 0 Perry Cleveland Region 1 Region 2 Region 2 Region 3 Tuisa County Clinic (13) Satellite Clinic (7) Administration Office (6) **Urgent Recovery Center (5)** Brief Stay Therapeutic Home (2) Family Treatment Center (1) Residential Treatment Center (2)

www.GRANDmh.com | Main Phone: 844.458.2100 | Crisis Line: 800.722.3611

UPDATED April 7, 2023

GRAND's crisis continuum

- 10,000 square miles
- Population of 480,000
- 5 URCs currently
- 3 structured crisis centers
- 14 adult beds
- 145 chairs

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Peer impact on crisis continuum

- Crisis staffing patterns
- Peer roles in the crisis centers
- No security in our urgent recovery centers

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Unbridled access through MyCare technology

- Peer utilization of mobile technology
- Number of completed MyCare calls since 2022
 - 2022 29,234
 - 2023 35,731
 - 2024 YTD 11,616 on pace to exceed 45,000 calls for the year
- 12,452 iPad calls have been answered directly by peers since 2022
- Calls best handled by peers



Mobile crisis and transport

- 83 Peers have been involved in 988 mobile crisis response YTD.
- Peers involved in transport

Year	Adult over 30	Adult under 30	Child over 30	Child under 30
2022	1091	N/A	96	N/A
2023	1281	133	191	2
YTD 2024	410	373	77	5

Concept of therapeutic transport as an extension of our crisis centers



Peers as Engagement Specialists in a Secure Crisis Response Center

Connections Health Solutions



Role of peers in a high acuity crisis facility

Groups

 Focused on goals, coping, community resources, safety planning, pet therapy

Engagement

- Circulate in the milieu and waiting areas
- Requested by clinicians due to similar lived experience
- Some have received services here themselves (the "yoga lady" story)

Enhance safety

De-escalation but also proactively engage to prevent agitation

Culture

- Full and integral part of the team
- Former peers in many other roles throughout the organization
- Reduced stigma for self-disclosure from other staff?



Talk to Individuals Who **Have Lived Experience** with Substance Abuse, Mental Illness. Depression/Anxiety, and/or Trauma

Morning Introduction 10-11AM

How are you feeling? What can we do to help your current situation? What goals would you like to accomplish for the day? Who are you grateful for?

Join our daily discussion and discover how and why recovery is 100% possible.

"I came in 100% sure I was going to kill myself, but now (after group) I'm hopeful that it will change.

Thank you, RSS members."

Coping Skills Group 1PM-2PM

Addiction, Depression, PTSD, Anxiety, Anger, Hopelessness, Mental Illness, Medication Issues, Loss of Loved Ones, Homelessness, Life Stressors. We talk about it all. Whatever physical and mental pain you are in, we try to find REAL solutions and help guide you through your current crisis. We provide a vast array of group topics, work sheets, resources, and reading material to get the process started.



Art Therapy Group 4PM-5PM

Listen to music, sing, rap, dance, color, design, journal, write poetry, doodle, draw, paint, cut and paste collages, create 3D art, construct a whole new world. The ideas and options are endless. Art therapy helps you manage daily stress and your current situation, and may even be the path to your future career.



Connections Crisis Response Center (Tucson) Brochure made by Recovery Support Specialists

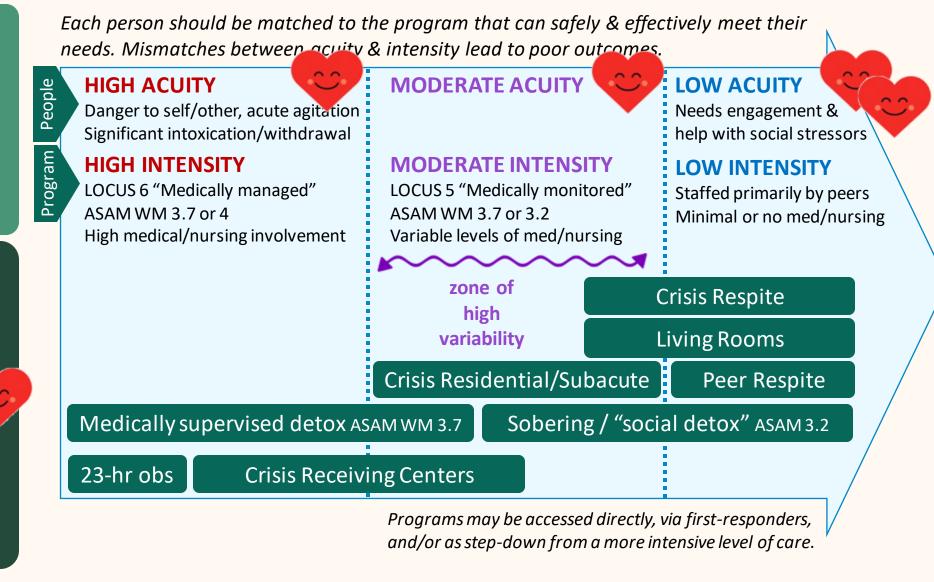
"Crisis Stabilization Units" & Facility-Based Crisis Services – An Imperfect Guide

Lots of local variation in:

- Licensing
- Nomenclature
- Reimbursement
- Involuntary process
- Locked vs unlocked
- Police drop-offs
- Length of stay

But ALL should provide

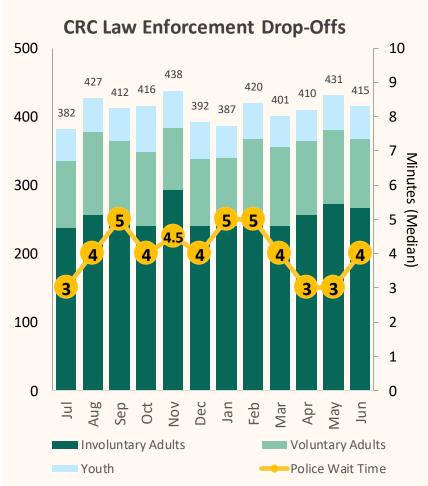
- Crisis intervention/treatment (vs holding to await transfer to another level of care)
- Safe and therapeutic milieu
- Peer support & engagement
- Care coordination and help with social determinants of health
- Trauma-informed approaches
- Capability of addressing cooccurring MH and SUD needs



"No Wrong Door" approach to reduce ED and jail use:

- > Treat law enforcement as a "preferred customer" with quick & easy drop-off
- > Take every individual including those with the highest behavioral acuity



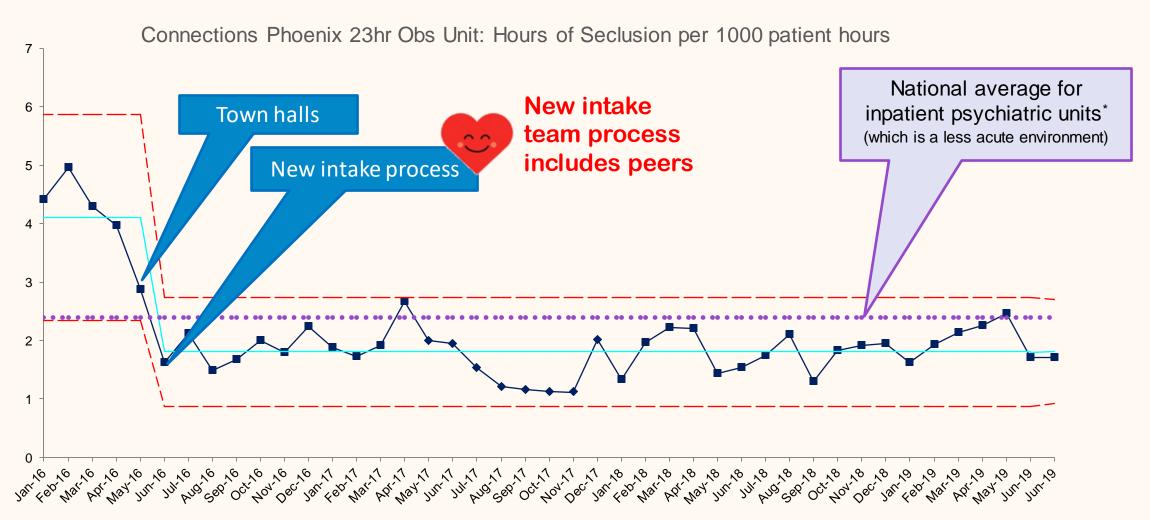




What "no wrong door" means in practice:

- Be easier to use than jail.
- Drop off time less than 10 min
- Never turn police away.
- Take <u>everyone</u>:
 - High acuity: No such thing as "too agitated" or violent
 - Can be highly intoxicated
 - Involuntary or voluntary
 - Without using security guards

QI Initiative to reduce seclusion/restraint



Closing: Sharing and Preparing



- Brave Volunteers: We need 2-3 volunteers to lead off the discussion next time
- Next Session: June 27, 2024: 3pm ET
- Topic: Providing a Continuum of CCCBHC Crisis Services for Children
 - Consider how your mobile crisis team (direct or DCO) works with children, families, and child-serving agencies like schools? What is your service model or approach (e.g., MRSS)?
 - Consider how children/adolescents receive crisis walk in or crisis center with observation services in your community? Are there specific settings for children?
 - Be prepared to discuss both successes and challenges.

All slides and recordings will be posted to our learning community website within 48 hours

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CCBHC-Expansion Grantee National Training and Technical Assistance Center

We offer CCBHC grantees...



Virtual Learning Communities, Webinars and Office Hours

Regular monthly offerings that are determined based on grantees expressed needs.



Opportunities for Collaboration with Other Grantees

Monthly Peer Cohort Calls for CCBHC Program Directors, Executives, Evaluators and Medical Directors.



Direct Consultation

Request individual support through our website requesting system and receive 1:1 consultation.



On-demand Resource Library

Includes toolkits, guidance documents, and on-demand learning modules.

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About Us V Our Work V Get Involved V

Working to ensure that mental wellbeing is a reality for everyone.

















Keeping Youth Mental Wellbeing in Mind (Part 2)

Sep 15, 2023



Recovery Month: Let's Hear it for Peers

Hill Day at Home 2023

Register now for our Virtual Policy Institute, where we'll contact our elected officials and urge them to pass meaningful legislation supporting expanded access to mental health and substance use care.



National Recovery Month 2023

Read more →

How You Can Get Involved



Questions or Looking for Support?



Visit our website and complete the CCBHC-E **NTTAC Request Form**



thenationalcouncil.org/program/ccbhc-e-nationaltraining-and-technical-assistance-center/requesttraining-assistance/

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