Preparing the Adult Mental Health Workforce to Succeed in a Transformed System of Care

Setting the Stage for Transforming Mental Health Treatment and Service Settings



Module I NASMHPD/OTA Curriculum Module Created by Huckshorn, Putnam and Jorgenson December 2008

#### LEARNING OBJECTIVES



- **1. Describe the evolution of this project**
- 2. Understand the significance and urgency to change the current Mental Health system of care
- **3.** Link change goals, aims, knowledge, skills, and attitudes to direct care staff roles
- 4. List steps taken to assure rigor when developing training materials

# You are a Valuable Resource!

"Human Capital is our most valuable resource, and as such, we must invest wisely in it"

A. Kathryn Power



## Our Healthcare System:

What have you or your loved ones experienced with your/their health care provider or insurance company lately?

Have you been satisfied with your service, your interactions with your physician, your or someone else's hospital stay?



## Mental Health Service Provision

Historically, serious mental conditions, such as schizophrenia, bi-polar disorders, psychotic disorders, major depression, and personality disorders were seen as chronic, debilitating illnesses with a negative progression. (*Surgeon General's Report*, 1999)



## Mental Health Service Provision in the U.S.

Currently, there is no medication that cures mental illness; serious mental conditions are much more complicated and require more than medication.

(Surgeon General's Report, 1999)



"I medicate first and ask questions later."

## Mental Health Service Provision in the U.S.

Basically, there was **no hope** provided for a better life.

(Surgeon General's Report, 1999)



Mental Health Service Provision in the U.S.

The U.S mental health system's fairly pessimistic view has not helped people to recover.

People have recovered "in spite of us."

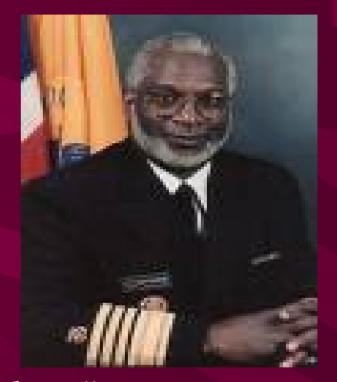
There is now much more hope and optimism regarding recovery and agreement that we need to do things differently if we are to see better outcomes



(New Freedom Commission, 2003; Anthony et al, 2002)

#### Surgeon General's CHALLENGE

"So the big challenge for us is how are we going to respond? And it's really time for us to respond in a much more sophisticated manner than we have in the past. We owe that to the American people ..."

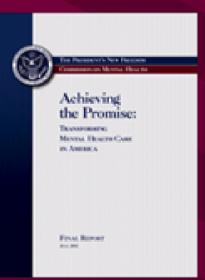


Former Surgeon General, David Satcher

#### New Freedom Commission

This Commission was appointed by the U.S. President and was asked to evaluate, report, and make recommendations on the current mental health system of care in our country. (handout)

(New Freedom Commission, 2003)



#### New Freedom Commission

✓ Mental Health is essential to overall health

✓ Mental Health is consumer/family driven

✓ Disparities in health care are eliminated



## New Freedom Commission



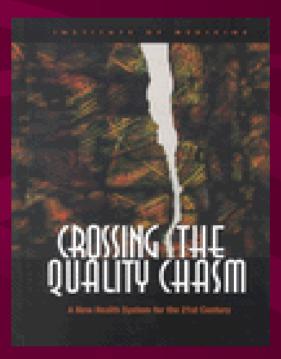
 Early screening, assessment, referral to services is common practice

 Excellent Mental health care is delivered and research is accelerated

 $\checkmark$  Technology is used to access care, information

## Institute Of Medicine Report: Six Aims of High Quality Care

Safe Effective **Patient-centered** Timely **Excellent** Equitable



(Institute of Medicine, 2001, 2005)

## Mental Health: Report of the Surgeon General

This first report on Mental Health by a U.S. SG was lauded for its comprehensive review of the U.S. system of care Mental Health: A Report of the Surgeon General



Department of Health and Human Services

(USDHHS, 1999)

Mental Health: Culture, Race, and Ethnicity, Supplement to Mental Health: Report of the Surgeon General

• In acknowledgement of the fact that quality mental health care is not uniformly accessed and/or available to all groups, this supplement to the original Surgeon General's Report on Mental Health came out in 2001 focusing on the mental health needs of African American, Latino, Asian American, and American Indian and Alaskan Native populations.



**Prevention interventions** 

Meaningful involvement

Gather data

Cultural diversity



Reduce waiting times for services

Value evidence and outcomes



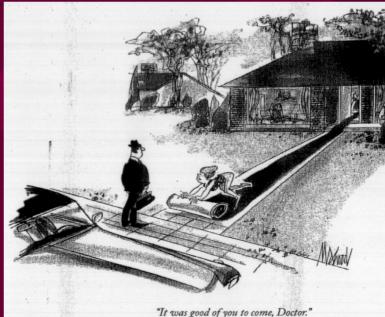
Recognize our own discriminatory attitudes and practices and it's legacy of stigma

Understand pervasive traumatic life experiences and it's effects

Understand the facts about conditions, signs, and symptoms

Understand our ethics codes and concepts

Understand what recovery means to the people we serve, and **our own roles** in that process



# History and Development of this Training

Why this training ...how was it put together?

Review of current literature and textbooks on recovery concepts, violence, medication use, peer support, evidence-based practices, stigma, person-driven care, language, and practice implications





# What we Found

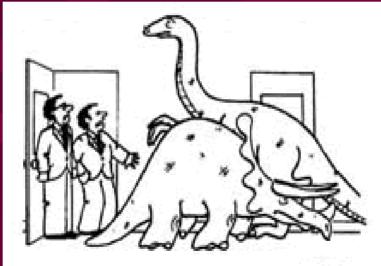
Core Constructs underlying this training are:

Staff need information....changing attitudes

Supervision and mentoring...practice behaviors

Institutional leadership...key

# They are extinct in the wild but some still exist in mental health, too



"They are extinct in the wild but some still exist in academia"

#### Final Comments

"All work that uplifts humanity has dignity and importance and should be undertaken with painstaking excellence"

- Martin Luther King, Jr.

## Optional Video: Inside Outside 60 minutes

(Deegan, P., Strecker, T., & AHP, 2004)

