



## Meet Patrick Hendry <a href="Program Director">Program Director</a>

Patrick Hendry is the Vice President of Peer Advocacy, Supports, and Services for Mental Health America and has worked as a mental health advocate for the past 24 years. His areas of expertise include peer-provided services, selfdirected care, recovery-based trainings, and social inclusion. Patrick received MHA's highest honor, the Clifford W. Beers Award in 2012 and the SAMHSA Voice Award and Eli Lilly Reintegration Lifetime Achievement Award in 2014.





## Meet Kirsten Kaiser Head Life Coach, CPSS



• Kirsten has Associates in Arts Degree in Liberal Arts. She also has extensive training as a Certified Peer Support Specialist and WRAP Facilitator. She has a thorough working knowledge of the many resources in the Northern Virginia area. She gained this information from her past work experience as a CPSS for the last 6 years, and from her lived experiences. Her goal is to help others, as she was helped in the past, to assist in building a support system and social network as well as improving and maintaining human relationships for those we serve.



## Meet Shavonne Carpenter Life Coach, CPSS

Shavonne has extensive training as a Certified Peer Support Specialist, Counselor, and facilitator. She also has experience dealing with co-occurring disorders. As one of the Life Coaches piloting this program, her philosophy was to assist participants to connect with what is most important to them and to make choices from love rather than fear.





## Mental Health America

- MHA is the nation's oldest/largest advocacy and education organization.
- Founded in 1909 by Clifford Beers, an individual with a mental illness.
- MHA helps to empower and support people with mental illnesses.
- We embrace social justice and emphasize autonomy, dignity, inclusion.



## It's My Life ~ Social Explorations

- Purpose: Advance recovery and improve the lives of individuals with serious mental illness with a focus on some of the most isolated, misunderstood members of our communities. Participants are accompanied on their recovery journeys by trained Life Coaches who help them bridge the gap to a larger social world.
- Innovation:
  - > Evidence based Psychiatric Rehabilitation and Peer Support
  - ➤ Emerging Best Practice Self-Directed Care
  - ➤ Individualized, Person-Centered, Strength-Based
- Results: Social inclusion so individuals feel less isolated which helps to increase self-esteem and self-worth improving overall functioning with networks that include supportive and sustainable relationships that will increase their quality of life



## It's My Life ~ Social Explorations

- Non-clinical: all clinical language removed with the exception of diagnosis and hospitalization history.
- All participants had a diagnosis of schizophrenia or schizoaffective disorder. Schizophrenia is a serious disorder which affects how a person thinks, feels and acts. Someone with schizophrenia may experience difficulty distinguishing what is real from what is imaginary; may be unresponsive or withdrawn; and may have a hard time expressing "normal" emotions in social situations. Individuals with schizoaffective disorder may encounter similar troubles in addition to a mood disorder.
- Given the complexity of these conditions and that social functioning impairments seem to be evident at all stages of the illness, the need for innovative approaches in helping people develop social skills, friends, and intimate relationships is particularly acute for people with schizophrenia.



## It's My Life ~ Social Explorations

- "Traditional approaches such as medications, hospitalization, and dynamic psychotherapy have had limited effectiveness when applied to the socialization and work aspects of individuals with psychiatric disabilities" (Chan et al., 1998)
- Although the piloting of this program focused on individuals with schizophrenia or schizoaffective disorder, the principles and practices of Social Self-Directed Care can be applied with any mental health diagnosis.
- The pilot program focused on the most isolated and marginalized individuals in the community. Social functioning impairments seem to be evident at all stages of the illness. Recent data shows that these difficulties may even predate any signs of illness, often by many years (Hooley J.M., 2010)
- "The impairments in social functioning that influence the lives of patients with schizophrenia are well captured in one simple observation. The majority of people with this disorder do not marry. Compared with people in the general population, patients with schizophrenia are more than six times more likely to remain unmarried." (MacCabe, J. H., Koupil, I. a& Leon, D.A., 2009)

### How It Works





## Life Coach Training

### **Social Self-Directed Care**

- The It's My Life Program is based on the belief that individuals are capable of choosing services and making purchases that will help them begin or remain on the road to recovery and to develop or regain a social life of meaningful, productive activity.
- People at all levels of recovery can benefit from SSDC
- The ability to complete the Personal Outcome Measure Interview and develop an Action Plan and budget, with the assistance of a Life Coach, is the primary qualification.
- In Self-Directed Care the individual controls their own budget.



## Life Coach Training

### **Privacy and Confidentiality**

- All members of the program staff will be trained in the importance of ensuring privacy and confidentiality, and the Health Insurance Portability and Accountability Act (HIPAA)
- Data collection instruments will be used only for the purpose of collecting qualitative and quantitative information specific to the services provided by the program staff
- Data gathered for program evaluation will be stored separately from other SSDC data in a secured location. This information will only be accessible to a limited number of personnel
- The identity of participants will be kept private through the use of a coding system on records as well as through the limitation of access to records.



## Life Coach Training

### Peer Support Specialist

- Ethics and Boundaries
- Mutuality

### **Professional Life Coaching**

- Guide participants to discover their own answers
- Help identify challenges and work in partnership to turn them into victories
- Challenge thought/behavior patterns
- Provide accountability

- Shared Decision Making
- Effective Listening

### **Psychiatric Rehabilitation**

- Emphasizes that recovery is possible and highly probable
- Person-centered
- Strengths based
- Recovery model vs. Medical model



## Life Coach Training

### **Additional Training**

- Mental Health America's experienced Life Coaches are available for FREE individual or group training by phone or video calls.
- (In-person training is also available for a reasonable fee.)
- Personal training identifies key parts of:
  - Center for Psychiatric Rehabilitation from Boston University Online (http://www.bu.edu/cpr/training/distance/courses)
  - Life Coaching: Becoming a Professional Life Coach: Lessons from the Institute of Life Coach Training by Patrick William and Diane Menendez
  - Motivational Interviewing: <a href="http://www.motivationalinterviewing.org/">http://www.motivationalinterviewing.org/</a>

# žii...

## Life Coach Training

### Peer Support

- As Peers, Life Coaches Build Trust
- We Understand /We've Been There
- Equality of the Relationship
- Information and Experiences Are Freely Exchanged
- Both Parties Benefit from Each Other's Strength and Hope

### How It Works

| / Direct marketing efforts      |             |                  |
|---------------------------------|-------------|------------------|
| towards Community               |             |                  |
| Behavioral Centers, Drop-In     |             |                  |
| Centers, Recovery Centers, etc. |             |                  |
| Give presentations to local     |             |                  |
| providers                       |             |                  |
| Post flyers, brochures, etc. in | Outreach    |                  |
| targeted areas                  |             |                  |
| Reach out to potential          |             |                  |
| contacts via email, phone       |             |                  |
| and social media                |             |                  |
| and social media                |             |                  |
| Participants must be:           |             |                  |
| At least 18 years of age        |             |                  |
|                                 |             |                  |
| Competent and able to           |             |                  |
| give informed consent           |             |                  |
| Able to manage their            |             |                  |
| own finances                    | Eligibility |                  |
| Willing to complete             | Lingitomicy |                  |
| Guided Journals,                |             |                  |
| exercises and keep              |             |                  |
| receipts for spending of        |             |                  |
| stipend                         |             |                  |
| Need for Services               |             |                  |
| determined by POM               |             |                  |
|                                 |             |                  |
|                                 |             | $\wedge X X I =$ |
|                                 |             | For              |
| Life Coacl                      |             | Partne           |
| Trainin                         | g 🥕 Re      | cruitment        |
|                                 |             |                  |

| _        |  |
|----------|--|
| <b>二</b> |  |
| _        |  |

| How It Works        | Explanation of Program | Participation is voluntary Confidentiality (HIPPA) Participants receive a binder that includes every control of the program: Enrollment agreement Worksheet/Handouts Guided Journal Various Forms Appropriate use of Social Stipend and receipts are control of the professional Boundaries Structure of visits with Coach Professional Boundaries Professional Boundaries Phasing out process |  |  |
|---------------------|------------------------|--|--|--|
|                     | Getting<br>Acquainted  | All Coaches meet with new participant     Coach's Bios shared with Participant     Participant selects their coach     Build trust and solidarity through     strategic self-disclosure, empathy,     honesty and authenticity   |  |  |
|                     | Goal<br>Setting        | Evaluate feelings about current social standing     Assess hobbies, interests and community involvement and accessibility to them     Action Planning and IMPACT     Create monthly Social Spending Plan   |  |  |
|                     |                        | Skill Building   |  |  |
| Forming Partnership |                        |  |  |  |



## Forming Partnership

### **Explanation of Program**

- Participants were given the opportunity to select their own Life Coach, given they were of the same gender.
- Participants were introduced to all available Coaches to determine their level of "peer-ness" and compatibility; who they could relate to most.
- The male/female dynamic was taken into consideration to avoid transference and counter-transference.



## Forming Partnership

### **Explanation of Program**

- Participants receive a monthly allowance of \$60.00 to be spent on advancing toward the three (3) social goals that will be set with the assistance of the Life Coach
- The amount is pending completion of weekly guided journaling and consistently providing proof of purchase (receipts) for how the money was spent
- All expenditures must correlate to the social goals, action plan and spending plan. Activities must be approved by the Life Coach and the Program Director



## Forming Partnership

### **Explanation of Program**

- Documentation for all purchases is to be recorded on the Budget Tracking Sheet provided in the Program Participant Handbook
- If receipts are not provided or funds are spent on unauthorized expenses, the allowance for the following month will be reduced by the amount unaccounted for or misused
- Any money not used to accomplish social activities will roll over to the next month. This will allow participants the option to save for larger purchases related to achieving their social goals



## Forming Partnership

### **Explanation of Program**

- Visits with Life Coach take place weekly or bi-weekly
- Initial meetings include working on goal setting and budget planning
- When not on outings, visits are spent reviewing journaling, goals, skills sets and handouts/worksheets that will assist the participant in progressing toward their identified social goals
- Life Coaches will be a safe sounding board for participants to express themselves and work through challenges

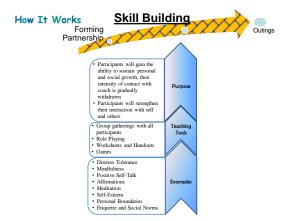


## Forming Partnership

### **Explanation of Program**

- Boundaries are an important part of the partnership. They are not intended to be
  a barrier, but rather the framework for a healthy and productive relationship.
  Additionally, dual roles may lead to conflicts of interest that can jeopardize the
  peer connection. Life Coaches must not engage in these kinds of relationships.
  They do not act as therapists, sponsors, payees or medication/treatment
  adherence monitors.
- The importance of co-creation or negotiation of conditions should also be noted. It requires a conversation that is ongoing throughout the relationship. Subjects of discussion should include mutuality, respecting one another's time, personal space, how one would like to be addressed, topics considered to be "off limits", cultural/religious or other considerations on how to BE with one another. Everyone needs to state their limits and restate or redefine if necessary.

| • |
|---|
| • |
| • |
| • |
| • |
|   |
| • |
|   |

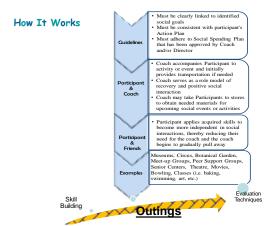




## Skill Building

### **Life Coach Functions**

- Life Coaches provide assistance and new social-life skills in several different areas, including:
  - Identifying areas of participant's interests.
  - Collaborating in decision making with the participants.
  - Budgeting a spending account and attending social activities.
  - Assisting in building community inclusion.
  - Help form and enhance healthy friendships and intimate relationships.
  - Coaching and feedback regarding progress.
  - Building connections to employment/volunteerism if desired.



| <u>Guidelines</u>                 |  |  |   |  |  |
|-----------------------------------|--|--|---|--|--|
| 11's My Life-Social Speeding Flan |  |  |   |  |  |
| ind stophe                        |  |  | - |  |  |
|                                   |  |  |   |  |  |
|                                   |  |  |   |  |  |
|                                   |  |  |   |  |  |

## •

## Outings

### Participant & Coach

Coach accompanies Participant to event or activity and initially provides transportation if needed

### Participant, Coach & Friend

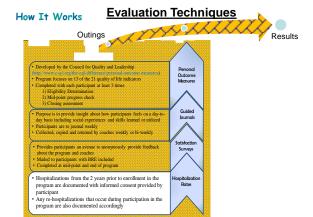
Coach serves as a role model of recovery and positive social interaction

Coach may take Participant to stores to obtain needed materials for upcoming social events or activities

### Participant & Friend

Participant applies acquired skills to become more independent in social interactions, thereby reducing their need for the coach and the coach gradually begins to pull away







## **Evaluation Techniques**

### Personal Outcome Measures

- Developed by the Council for Quality and Leadership (http://www.c-q-l.org/the-cql-difference/personal-outcome-measures)
- Program focuses on 13 of the 21 quality of life indicators
- Interviews completed with each participant at least 3 times
  - 1) Eligibility Determination
  - 2) Mid-point progress check
  - 3) Closing assessment



## **Evaluation Techniques**

### **Personal Outcome Measures**

- PERSONAL: Starts with the person's own view of his or her life
- OUTCOME: Defines what is important to the person
- <u>MEASURES</u>: Offers objective determination of whether people are getting what is personally important
- Instead of looking at the quality of how the services are being delivered, Personal Outcome Measures® look at whether the services and supports are having the desired results or outcomes that matter to the person



## **Evaluation Techniques**

### **Personal Outcome Measures**

- POM interviews are conducted as in-person conversations in which the participant tells their story as the interviewer listens and asks questions to reveal inner feelings of what is being shared pertaining to the individual's quality of life
- POM's are a way to gauge and analyze information that is nontangible in nature. It is a qualitative analysis expressed quantitatively
- The POM tool has been in use for over 20 years



## **Evaluation Techniques**

### **Guided Journals**

- Purpose is to provide insight about how participants feel on a day-to-day basis including social experiences and skills utilized
- Participants are to journal weekly
- Completed journaling is collected, copied and returned by coaches weekly or bi-weekly



## **Evaluation Techniques**

### **Satisfaction Surveys**

- Provides participants an avenue to anonymously provide feedback about the program and coaches
- Mailed to all participants with BRE included
- Completed at mid-point and end of program

| • |  |  |  |
|---|--|--|--|
| • |  |  |  |
|   |  |  |  |
|   |  |  |  |
| , |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
| , |  |  |  |
| • |  |  |  |
| • |  |  |  |
|   |  |  |  |



## **Evaluation Techniques**

### **Hospitalization Rates**

- Hospitalizations from the 2 years prior to enrollment in the program were documented with informed consent provided by each participant.
- Any re-hospitalizations that occurred during participation in the program were also documented accordingly
- Note was also taken of any changes in services that participants received while in the program



Success

### How It Works

- Increase in quality of life as described by participants
- Overall satisfaction with the program expressed by participants
- Marked decrease in hospitalization rates





## Results

### Personal Outcome Measures

• Increase in quality of life as described by participants

| POM Stateme   | nt            |             |                 |  |
|---|---------------|-------------|-----------------|--|
| Question Number                                       | Initial Score | Final Score | Change % Points |  |
| 1-People are connected to natural support networks    | 25%           | 75%         | 50%             |  |
| 2-People have intimate relationships.                 | 25%           | 63%         | 38%             |  |
| -People exercise rights                               | 63%           | 88%         | 25%             |  |
| 5-People are treated fairly                           | 50%           | 75%         | 25%             |  |
| 1-People use their environments                       | 13%           | 88%         | 75%             |  |
| 4-People interact with other members of the community | 25%           | 63%         | 38%             |  |
| 5-People perform different social roles               | 25%           | 63%         | 38%             |  |
| 17-People choose personal goals*                      | 100%          | 80%         | -20%            |  |
| 8-People realize personal goals                       | 63%           | 67%         | 5%              |  |
| 9-People participate in the life of the community     | 0%            | 75%         | 75%             |  |
| 20-People have friends                                | 0%            | 63%         | 63%             |  |
| 21-People are respected                               | 75%           | 88%         | 13%             |  |

\*According to participants setting their own goals in this program made them realize how many of their other goals were set for them

| "It has helped me to reach out and connect with other people. I love the program; it is like a dream come true. I am learning new things about myself and others."   |  |
|--|--|
| Results  |  |
| Guided Journals  |  |
| The program assisted participants in going   |  |
| outside of their comfort zone to become more connected to the outside world.   |  |
| Cant. The  |  |
| friendships I have not the   |  |
| of isolation with the with the court of the with the court of the cour |  |
| triends. Edent skroding for Poston   |  |
| " ran more conformation to the transfer of the |  |
| Goneto at the Coved."  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| "I feel better when "I felt good about "I felt good about I stay "I felt good about "I fe |  |
| better when I stay busy."  Results  "I felt good about "I felt good about pushing myself to go pushing myself to g |  |
| busy." Results public class. It man to baldet class. I |  |
| Guided Journals  |  |
| <ul> <li>The program participants generally tended to feel good about getting out of the house and interacting</li> </ul>  |  |
| with others, even when they weren't particularly excited about doing it in the first place   |  |
| "I liked hanging   |  |
| out on Friday. It was fun and "It brings tears to my   |  |
| provided some stress relief."  cyes when I think about this program. It was a  |  |
| "I am coping revival for me. Going to Starbucks for the first  |  |
| "I am coping revival for me. Going to Starbucks for the first time was a big treat."   |  |
|  |  |
|  |  |
|  |  |
|  |  |
| "I am more confident when  |  |
| I speak with people that I<br>don't know. I used to wait<br>for people to come to me.  |  |
| Results for people to come to me.  Now I start the conversation."  |  |
| Guided Journals  |  |
| <ul> <li>When participants realized they were more than<br/>capable of learning new skills and responding</li> </ul>   |  |
| appropriately to social stimuli, they had a boost in self-confidence and self-esteem that encouraged   |  |
| them to pursue further social interaction  |  |
| "I learned that if you follow your own path "I learned that if you follow yourself to addon't constantly compare yourself to tongue can be used to tongue can be used and help and to hust and help |  |
|  |  |
| others, you is that's win God In the   |  |
| alway forefront or thoughts.   |  |
|  |  |



## Results

### Satisfaction Surveys

- 17 participants completed the survey
- 95% of respondents rated their satisfaction with the program with the highest rating

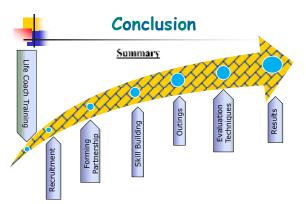
| For the following statements, please check the box that best reflects now you feel. | Agree | Agree | Disagree | Disagree |
|---|-------|-------|----------|----------|
| My Coach is willing and able to meet me where I choose                              | 15    | 2     | 0        | 0        |
| My Coach has explained to me how they can and cannot assist me                      | 15    | 2     | 0        | 0        |
| When I need help I know who I can call to get support                               | 17    | 0     | 0        | 0        |
| I feel respected and listened to by my coach  | 15    | 2     | 0        | 0        |
| The money for the program is assisting me to reach my social goals                  | 15    | 2     | 0        | 0        |
| My coach works in partnership with me to reach my social goals                      | 17    | 0     | 0        | 0        |
| I am satisfied with the help I have received from my coach                          | 17    | 0     | 0        | 0        |
| The services I have received have helped me reach my social goals                   | 15    | 2     | 0        | 0        |
| My coach is sensitive to my cultural and ethnic background                          | 17    | 0     | 0        | 0        |
| I think my coach supports my well being   | 17    | 0     | 0        | 0        |
| Overall I feel that my social life is getting better because of the program         | 16    | 1     | 0        | 0        |



## Results

### **Hospitalization Rates**

 In the two years prior to entering the Social Self-Directed Care Program, participants had experienced a total of 15 hospitalizations. In the 19 months of activities, 1 member had experienced a single hospitalization





## **Conclusion**

### Summary

The It's My Life Social Self-Directed Care Program is designed to help individuals with SMI to build networks of friends and intimate relationships, thus creating a strong social support system. This in turn helps the Participant to become an active member of the community and feel less isolated which also helps to increase self-esteem and self-worth, improving overall social functioning. The increase of overall physical health has shown to decrease the need for hospitalization as well as avoiding premature death.

| _ |   |
|---|---|
| _ | _ |

### Conclusion

### **Summary**

- The It's My Life Social Self-Directed Care Program is highly relevant to any whole health approach to behavioral health.
- Savings in the reduction of emergency services, increased overall health, and lowered re-hospitalization rates makes this an affordable service for managed care and state funded programs.
- The program would also be ideal for operation by a peer-run organization
- Having focused on one of the most marginalized populations and receiving such remarkable results, it would be a reasonable expectation that even greater outcomes would be achieved for individuals with less complicated mental health challenges





for providing the grant to train other organizations to end social exclusion and isolation through the It's My Life: Social Self-Directed Care program.

| For Additional Information  |  |
|---|--|
|   |  |
| Contact:  |  |
| <ul> <li>Shavonne Carpenter at<br/>scarpenter@mentalhealthamerica.net</li> <li>Patrick Hendry at</li> </ul> |  |
| phendry@mentalhealthamerica.net   |  |
| http://www.mentalhealthamerica.net/it%E2%80<br>%99s-my-life-social-self-directed-care                       |  |
|   |  |
|   |  |
|   |  |
| Thank You   |  |
| 新 M-  |  |
| It's My Life -  |  |
| Facilitating Recovery through Social Self-Directed Presented by:  |  |
| Care Patrick Hendry Kirsten Kaiser Shavonne Carpenter   |  |
| MHAZ  |  |
| Mental Health America   |  |