

Realizing the Recovery Vision in Florida: Implications for Justice Involved Individuals

Florida Criminal Justice, Mental Health, and Substance Abuse Technical Assistance Center Webinar Presentation Tampa, FL March 26, 2019

James Winarski, M.S.W. University of South Florida

Today's Focus

- Recovery: What It Is and Why It Is Important
- Recovery Oriented System of Care (ROSC) System Improvement Activities in Florida
- Importance of ROSC for High Service Utilizers and Justice Involved Individuals



Recovery and the Justice Involved Individuals

- Much can be learned from analysis of findings of high-service users in Florida, including high levels of Baker Act encounters, crisis service admissions, arrests, and incarceration.
 - Pinellas county Empowerment Team High Utilizer Behavioral Pilot (2018)
 - Reports to the Florida Department of Children and Families in Response to the Governor's Executive Order 15-175 (2016)



- Complex Diagnoses
 - Moderate to severe levels of both mental health and substance use disorders.
 - Broad range of substance abuse: alcohol, crack/cocaine, opioids/heroin, spice, and marijuana.
 - Co-occurring mental health and substance use disorders
- Creates complex challenges for both diagnosis and treatment



- Homelessness
 - Homelessness and housing instability almost universal
 - High risk for disease & violent victimization
 - Profoundly disaffiliated from mainstream support, including family



- Trauma histories, including:
 - Childhood physical and sexual abuse,
 - Abuse in the foster care system,
 - Witness to violence as a child,
 - Victims of violence in adulthood.
- Profound influence on expression of symptoms and coping difficulties.



- Resilience
 - Reflected in each individual's ability to survive.
 - ...utilizing the systems that can't say no.



Chart Review Findings from Governor's Executive Order Report

- Little evidence of the following:
 - Service specifically addressing co-occurring mental health and substance abuse disorders
 - ...and co-occurring primary health problems
 - Supports for persons with substance abuse disorders to engage in treatment services
 - Services that focus community integration(e.g., employment, education, social connections)
 - For Baker Act clients, assertive follow-up that might prevent rapid cycles of decompensation and readmission



Chart Review Findings from Governor's Executive Order Report

- Little Evidence of the following:
 - Coordination with jails/criminal justice system, other than reference to an arrest, sentence served, or probation.
 - Strength-based or consumer driven comprehensive Treatment planning



Recovery Oriented System of Care

- Critical for both:
 - Diverting individuals away from justice involvement
 - Supporting individuals for successful re-entry to live in community





SAMHSA's Working Definition of Recovery

A process of change through which individuals improve their health and wellness, live in a self-directed life and strive to reach their full potential.

- Health Overcoming (managing) one's disease as well as living in a physically and emotionally healthy way.
- Home A stable and safe place to live
- Community Relationships and social networks that provide support, friendship, love and hope
- **Purpose** Meaningful daily activities; job, school, volunteerism, family caretaking, creative endeavors, independence, & resources to participate in society.

(SAMHSA, 2011)



Recovery is Not...

- A cure
- An end to experiencing symptoms
- An end to struggling with the effects of behavioral health disorders
- A complete return of functioning

Though many individuals experience some or all of these improvements over time.



Recovery and Loss

- Many individuals with serious behavioral health disorders describe profound losses as being more distressing than symptoms.
 - We need to provide support in grieving these losses.
 - Recognize that dealing with the losses and the effects of mental illness/substance abuse requires great courage.



Common Losses Include:

- Jobs
- Relationships
- Rights
- Valued Roles
- Responsibility

- Home
- Possessions
- Security
- Potential
- Means for Livelihood



Messages that Promote Hopelessness are Common

"Why did the doctors tell me--an intelligent, gifted person--that I would never work, would never get through school, would be on medications for the rest of my life, and should stay on social security disability indefinitely? I tend to excel at whatever I do, but I was told I'd never do anything beyond a social security check."

Mike Hlebechuk from Mind Freedom



The Struggle to Survive In Community

- People with mental illness are more likely to live in poverty.
 - The unemployment rate for persons with serious mental illness in the United States is about 90%.
 - Social Security often does not cover basic living costs.

Office of the Surgeon General, 1999

People served in public mental health system die, on average, 20-25 years younger than the general population.

NASMHPD, 2006



Recovery Supports A Hopeful Outlook

- Hope that disturbing symptoms can be overcome.
- Hope to become a meaningful participant in community.
- Hope in the possibility of a life fully lived.



Recovery-Oriented Services Focus on the Person First

- Behavioral health challenges and the symptoms associated with them <u>pose challenges</u> to the person but <u>do not define the person</u>.
- Hope for improvement comes from the inherent capacity in all human beings to heal and grow.
- All mental health services should begin with this assumption.



Evidence in Support of Recovery-Oriented Services



Research Evidence: A Longitudinal View of Schizophrenia

- Harding and associates conducted a 32-year longitudinal study of 269 back-ward patients from Vermont State Hospital
 - At selection, subjects had an average of 6 years continuous hospitalization and 16 years of illness
- Found that ½ to 2/3 of subjects studied longer than 20 years achieved recovery/significant improvement.
- Symptom configurations in "chronic" schizophrenia change over time.

Louis de la Parte Florida Mental Health Institute



(Harding, 2004, 1994, 1987)

Harding's Recovery Criteria

- Having a social life indistinguishable from your neighbor – living in community
- 2. Holding a job for pay or volunteering
- 3. Being symptom free, and
- 4. Being off medication
- Significantly improved means recovered in all above areas but one



The Vermont Longitudinal Study

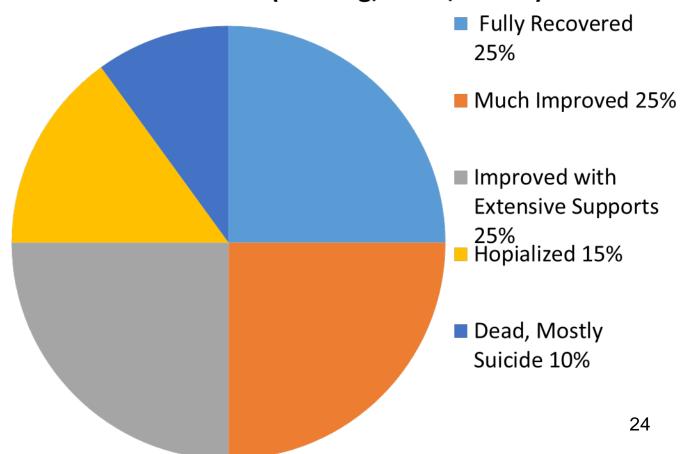
(Harding et, al. 1987a, 1987b)

At both 10 and 30 years, 75% of people with schizophrenia are in the recovered, recovering or improved category.



Long Term Course – 10 Years

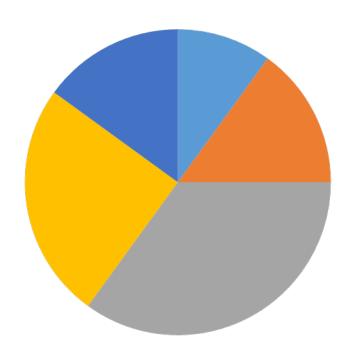
Outcomes 10 Years After Discharge from Back Wards (Harding, et.al., 1987a)





Long Term Course – 30 Years

Outcomes 30 Years after Discharge from Back Wards (Harding, et.al., 1987a)



- HopializedUnimproved 10%
- Dead, Mostly Suicide 15%
- Much Improved,RelativelyIndependent 35%
- Completely Recovered, 25%
- Improved; Require
 Extensive Support
 Network 15%



Implications of Longitudinal Studies

"The current state of the art is such that <u>clinicians</u> <u>are unable to predict</u> who will remain truly chronic and who does not have to remain at that level. Therefore <u>programs must operate "as if"</u> <u>improvements will happen for anyone</u> in order to maximize the number of turnarounds toward higher functioning."

(Harding, 1987)



Assumptions and Reality

"The reasons organizations fail is because the assumptions around which they were originally based no longer reflect reality."

Peter Drucker.

Treatment systems are mostly set up for either acute or chronic illnesses, and not prolonged conditions that remit/improve.

 Thus the need for Recovery Oriented Systems of Care



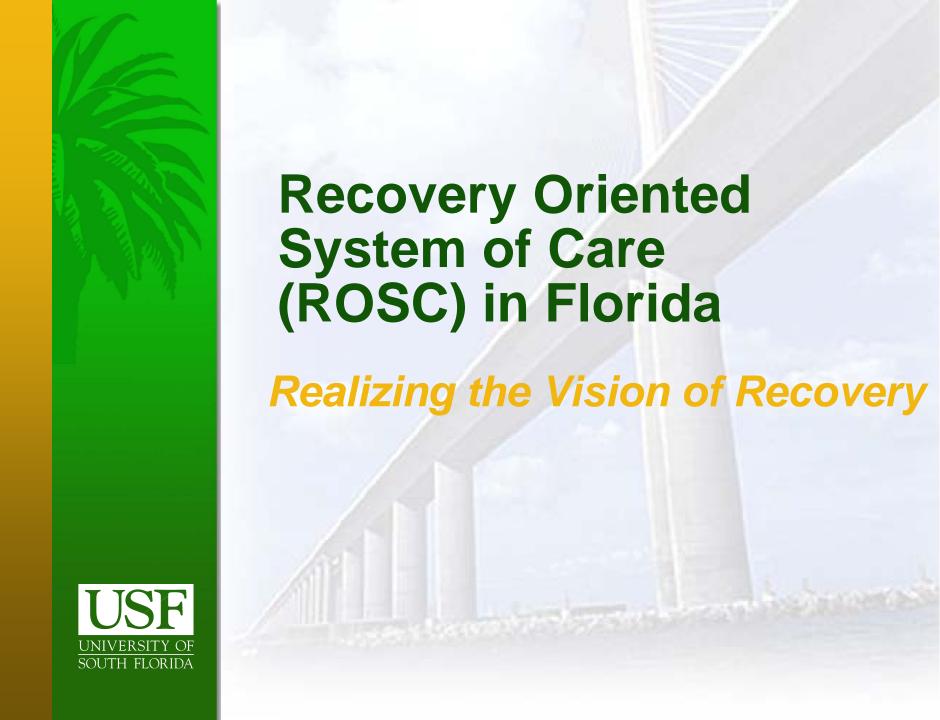
What's Different About Recovery-Oriented Services?



Recovery-Oriented Services Differ from Traditional Services in Four Key Areas

- Assumptions
- 2. Vision
- 3. Anticipated Outcomes
- 4. Roles and Responsibilities





Recovery Oriented System of Care (ROSC)

A values-driven approach to structuring a behavioral healthcare system and a network of clinical and non-clinical supports.

A framework to guide system transformation...

And realize the vision of recovery



DCF ROSC Initiative

- Welcome to two representatives from the Substance Abuse and Mental Health Program Office:
 - Wesley Evans Statewide Coordinator of Integration and Recovery Services
 - Lisa Hetrick Continuity of Care Liaison
 Mental Health Treatment Facilities



ROSC Initiative in Florida

- Ten Summits were facilitated in every region of the state as a part of this process.
- These Summits were held in all regions of the state from September 2016 through January 2017. They were followed by analysis and strategic planning in the spring and summer of 2017.



ROSC Initiative in Florida

- 1,100 individuals participated
 - Developed shared vision
 - Identified priorities
 - Mapped plans for regional and statewide approaches



Florida ROSC Vision

Establish an integrated, values based recovery oriented system of care where recovery is expected and achieved through meaningful partnerships and shared decision making with individuals, communities and systems.



ROSC in Florida

- Transforming the culture and practices of our system of care to a recovery orientation.
 - Can seem like a daunting task that is difficult to get a handle on.
 - In reality, <u>changing culture</u> is about <u>changing performance</u>.
 - It is not easy, but with a compelling vision and a clear map it is quite achievable



DCF SAMH Milestones

- Implement effective outreach, engagement, and retention strategies;
- Instill the ROSC framework into the daily practices of the behavioral health community providers funded by the Managing Entities;
- Develop enhanced standards for ME system of care administration;
- 4. Incorporate enhanced standards into all tiers of system planning; and
- 5. Adapt oversight mechanisms for coordinated implementation of enhanced standards.



Self-Assessment/Planning Tool for Implementing Recovery-Oriented Services (SAPT)

- The SAPT was developed by a team of faculty, people with lived experience of behavioral health disorders, and service providers at the University of South Florida's Florida Mental Health Institute (FMHI).
- The SAPT was developed under contract to Florida's Medicaid Authority, the Agency for Health Care Administration (AHCA).



Recovery Vision to Practice

The SAPT helps behavioral health service provider agencies translate the (ROSC) recovery vision into effective policies and practices.



SAPT Organization

The <u>SAPT Survey</u> and <u>SAPT Planning and</u> <u>Implementation Guide</u> are organized under three primary domains:

- Administrative
- Treatment
- Community Integration



SAPT – Linkages to RSA-R Outcomes

- Recovery Self-Assessment (RSA-R)
 - Recovery outcome measure developed at Yale University
 - Closely corresponds to the domains of the SAPT.



SAPT – Linkages to RSA-R Outcomes

- SAPT Supports the achievement of outcomes described in the Recovery Self-Assessment (RSA-R) measure.
- The SAPT and RSA-R are being used used together to support processes for policy development, program planning, staff development, and outcome evaluation.



SAPT and RSA-R

By administering both the SAPT & RSA-R during the same 6 or 12 month interval, agencies will have performance data from the perspective of both staff and persons served.



SAPT and RSA-R (continued)

Identifying areas where there are discrepancies between the perspectives of staff and persons served is especially helpful in establishing priorities for quality improvement.



SAPT Web Site

- WWW.SAPTRECOVERY.ORG
- The SAPT web site includes everything needed to implement the SAPT, as well as important background information and resources:
 - SAPT Survey –
 Planning/Implementation Guide
 - Studies that supported SAPT development



ROSC References

- Achara, Ijeoma, <u>Recovery-Oriented Systems of Care:</u> <u>Setting the Context</u>.
- Achara, Ijeoma, Peer Support Tool Kit
- Florida ROSC Google-Drive Folder https://drive.google.com/drive/folders/0B51vSZLhd_rsS HhNX0gxeFhhZHMusp=sharing
- Florida ROSC You Tube Video (9 minutes)
 https://www.youtube.com/watch?v=mPE_zRmrcTo
- Foglesong, Dana, Recovery Oriented Systems of Care in Florida, 2015.
- Substance Abuse and Mental Health Administration,

 The Role of Recovery Support Services in Recovery
 Oriented Systems of Care, 2008.



ROSC References (continued)

- The Peer Support Coalition of Florida at http://www.peersupportfl.org/ Cameron @peersupportfl.org.
- Winarski, James., DeLuca, T., <u>Recovery Oriented</u>
 <u>Medicaid Services for Adults with Severe Mental</u>
 <u>Illness</u>, University of South Florida, 2006.
- Winarski, James., Dow, M., Hendry, P., and Robinson, P., Self-Assessment Planning tool for Implementing Recovery-Oriented Mental Health Services (SAPT)

 Version 2.0, University of South Florida, 2011.



For More Information

Contact:

James Winarski, M.S.W.

University of South Florida

College of Behavioral & Community Sciences

Dept. of Mental Health Law & Policy,

Louis De La Parte Florida Mental Health Institute

13301 Bruce B. Downs Blvd.

Tampa, FL 33612-3807

(813) 974-6490

jwinarski@fmhi.usf.edu

