Changing the World:
Inspiring Hope, Health & Recovery

Transforming systems at every level
to be about the needs, hopes and dreams
of the people and families with complex needs
who come to our door

What are "Co-occurring conditions"?

- Any combination of any MH issue, including trauma,

- And/or any SUD issue, including gambling,

- And/or any cognitive issue, I/DD or Brain Injury

- Plus in the CJ system, include criminogenic thinking

- As well as other complex health and human service needs

- ***The more issues people have, the less likely they will do "what we tell them to do" without help***

The Hope Challenge

Many people in trouble with the law have no hope that their lives will get better, so they give up before they get started.

People with multiple issues and multiple challenges most need **HOPE** in order to be inspired to do the work to succeed.

The Complexity Challenge

- Individuals with complex multiple issues have the poorest outcomes in multiple domains.

  – Most likely to get in trouble with the law.

  – Most likely to violate probation.

  – Most likely to lose hope

Recovery-Oriented, Principle-Driven Adult and Child Systems of Care

ALL services (including CJ related treatment services) are:

- Hopeful

- Person- or family-centered

- Trauma-informed and strength-based

- Designed to help people achieve their most important and meaningful goals.

Integrated Systems of Care

- Complexity is an expectation, not an exception.

- ALL services (including CJ related treatment services) are designed to welcome, engage, and provide integrated services to individuals and families with multiple co-occurring complex issues (MH, SUD, cognitive disability,, criminal justice involvement, criminogenic thinking, housing, trauma, health, etc.).

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Comprehensive, Continuous Integrated System of Care
CCISC

- All programs in the system become welcoming, recovery-oriented, trauma-informed, and complexity-capable.

- All persons delivering care become welcoming, recovery-oriented, trauma-informed, and complexity-capable.

- 12-Step Program of Recovery for Systems

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Recovery-Oriented Complexity Capability

Each program organizes itself,

within its mission and resources,

to deliver integrated, matched,

hopeful, strength-based

best practice interventions for multiple issues

to individuals and families with complex needs

who are coming to the door.

Complexity Capability in Criminal JusticeA

- All <u>programs</u> (e.g. treatment courts, diversion programs, residential services, etc.), <u>services</u> (e.g. community corrections interventions), and <u>expectations</u> (e.g., conditions of participation and program contracts) must be designed with the expectation that <u>participants will have co-occurring conditions, including at times cognitive disabilities</u>, as well as other complex needs, and that <u>they will receive integrated best practice interventions</u> that improve their ability to be successful

Recovery-Oriented Complexity Capability

- CCISC Program Self-Assessment Tool: COMPASS-EZ™

- 12 Steps for Programs Developing Recovery-oriented Complexity Capability

Recovery-Oriented Complexity Competency

Each person providing services is helped to develop core competency, within their job and level of training, licensure or certification, to become an inspiring and helpful partner with the people and families with complex needs that are likely to already be in their caseloads.

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Recovery-Oriented Complexity Competency

- CCISC Clinician Self-Assessment Tool: CODECAT-EZ™

- 12 Steps for Staff Developing Recovery-oriented Complexity Competency

Is this your vision?

If so, how do you get there?

How do we get there clinically?

- Research-based principles of successful intervention that can be applied to any population in any program by any person delivering care.

- The SAME principles are consistent with best practice "therapeutic justice"

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Quality Improvement

- Recovery process for systems
- Horizontal and vertical quality improvement partnership
- Empowered Change Agents
- Anchoring value-driven change into the "bureaucracy"
- Serenity Prayer of System Change

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What is a System?

Sets of nesting Russian dolls
that are not quite so nesting:

Systems

within systems

sitting next to other systems

within systems.

Transformation

- Involves EVERY system, subsystem, and sub-sub-system in a common process to achieve a common vision, with EVERY dollar spent and EVERY policy, procedure and practice.

- In any provider organization, that means the agency as a whole, every program in the agency, and every person delivering care is working toward a common vision.

Vision-Driven Quality Improvement Challenge

- How well are your criminal justice services and programs organized to empower staff as partners in vision-driven quality improvement?

- How well are you organized to build inspiration:
  - In the face of complex challenges in your program
  - To utilize the principles of co-occurring capability
  - To provide services that effectively and efficiently match the complex challenges of your clients?

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Principles Made Simple

Principle #1

Complexity is an expectation.

- Welcome people with complexity as priority customers.

  – *This is not just about "being nice"; this is welcoming the opportunity to work with people exactly as they are.*

- Remove access barriers that interfere.

- Welcome the chance to see ALL the complex issues: integrated screening and documentation.

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Principle #2

Service partnerships are empathic, hopeful, integrated, and strength-based.

- Hopeful goals for a meaningful, productive life.

- Work with all the issues step by step over time to achieve success.

- Identify and build on strengths used during periods of success.

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Principle #3

All people with complex issues are not the same.

- Different individuals with co-occurring conditions may have different needs

- Different criminal justice behavioral health programs have different jobs for different populations.

- Risk-need-responsivity (RNR) and Four-Quadrant model (HI-HI, HI-LO, LO-HI, LO-LO for MH-SA) may help with service mapping and service matching.

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All co-occurring conditions, including criminal justice issues, are primary.

Integrated multiple primary condition-specific best practice interventions are needed.

Always consider criminogenic thinking as well as each behavioral health issue as a "primary" condition to address

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Parallel process of recovery for multiple conditions

- Recovery of the *person* with one or more conditions.

- Recovery involves:

  - Addressing each condition over time.

  - Moving through stages of change for *each* condition.

- Integrated services involve stage-matched interventions for *each* condition.

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Stage-Matching in Criminal Justice Settings

- For many people, the "most active" stage of change will be their interest in not being incarcerated.

- Integrated stage-matching for multiple conditions means that you engage the person to make progress toward his/her hopeful goals, utilizing addressing the issues with "more active" stages of change to leverage progress in addressing related issues in "earlier" stages of change.

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Stages of Change

Issue-specific, not person-specific.

- **Pre-contemplation:** You may think this is an issue, but I don't—and even if I do, I don't want to deal with it, so don't bug me.

- **Contemplation:** I'm willing to think with you and consider if I want to change, but have no interest in changing, at least not now.

Stages of Change

- **Preparation:** I'm ready to start changing but I haven't started, and I need some help to know how to begin.

- **Early Action:** I've begun to make some changes, and need some help to continue, but I'm not committed to maintenance or to following all your recommendations.

Stages of Change

- **Late Action:** I'm working toward maintenance, but I haven't gotten there, and I need some help to get there.

- **Maintenance:** I'm stable and trying to stay that way as life continues to throw challenges in my path.

Principle #6

Adequately supported, adequately rewarded, skill-based learning for each condition.

- Small steps of practical learning

- Self-management skills and "asking for help" skills

- Compliance does NOT equal learning skills

- Make it easy to ask for help when things are not going well.

- Rounds of applause for each small step of progress

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There is no one correct intervention or program.

In CCISC, every program, policy, practice, etc., is organized to match interventions based on the principles.

In CJ services, matching is also based on nature of the offense, and MH-SA- other issues that contribute to criminogenic risk.

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Summary

- Welcoming, empathic, hopeful, continuous, integrated recovery partnerships
  - Addressing multiple primary issues
  - Providing adequately supported, adequately rewarded, strength-based, skill-based, stage-matched, community-based learning for each issue
  - Moving toward the goal of a happy, meaningful life, while maintaining safety in the community

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Change Made Simple:
12 Steps of Recovery
for Systems, Agencies & Programs

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12 Steps of Recovery: Step 1

- Welcome all staff into an empowered partnership.

- Define a vision for all programs and all staff.

- Define the vision as related to core values:

  - Welcoming, hope and recovery

  - Matching services to the needs and dreams of the people and families with complexity.

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12 Steps of Recovery: Steps 2, 3, 4

- **Step 2:** Define your CQI "Recovery Team" for the agency.

- **Step 3:** Identify Change Agents from each program to represent the voice of front-line staff and consumers.

- **Step 4:** Engage all staff as partners in improving their own competency.

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12 Steps of Recovery: Step 5

- Perform a system/agency/program baseline self-assessment.

    - Engage staff in a "democratic" conversation.

    - Evaluate program policy, procedure, practice (not people).

    - Use a structured tool to guide the conversation.

    - Rounds of applause for finding improvement opportunities.

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12 Steps of Recovery: Step 5 Tools

- **COMPASS-EZ™** for behavioral health programs

- **COMPASS-PH™** for primary health programs

- **COMPASS-ID™** for intellectual disability services

- **COMPASS-Prevention™** for prevention and early intervention programs

12 Steps of Recovery: Step 6

- Achievable Quality Improvement Plan for each program
  - Small measurable steps in the direction of the vision.
  - Progress not perfection.
  - Rounds of applause for each step of progress.
  - Share success in the QI team; identify and remove barriers.
  - Anchor changes in policy, procedure, and paperwork.

12 Steps of Recovery: Steps 7, 8, 9

- **Step 7:** Welcoming individuals and families with complex needs.

- **Step 8:** Seeing the complexity in the people we serve: integrated screening and counting.

- **Step 9:** Establishing hopeful goals for a happy life. Identify periods of strength and success.

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12 Steps of Recovery: Steps 10, 11, 12

- **Step 10:** Integrated recovery-oriented strength-based assessment for multiple primary issues.

- **Step 11:** Stage-matched interventions: celebrating small steps of success with big rounds of applause.

- **Step 12:** Integrated stage-matched recovery planning.

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What will be your next small step of success
as a system, agency or program?

And let's give each other
a round of applause!!!

Thank You