

MISSOURI ASSERTIVE COMMUNITY TREATMENT NEWSLETTER

Issue 2

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HELLO FROM DMH!

Well it is time for another newsletter. At DMH we have been busy with ACT. For starters, we have begun round two of fidelity reviews which are now completed in the East region. We were very fortunate to have Maria Monroe-Devita lead two of those reviews. She was in St. Louis to train MIMH staff on using the improved TMACT, but we definitely benefited from her live and in-person tutelage. Now Lori and I are on the train to the West region- Springfield, then Joplin. Woot woot!

All the teams can be looking forward to training plans based on the fidelity reports.

As these roll out, Lori and I will keep track of lower scores and offer any assistance. We plan to review the plans of action created by the teams in response to the fidelity scores, then use those to help the teams identify and overcome any roadblocks. After all, "we're from the government and we're here to help"! 😊

We are also excited to be completing two first time fidelity reviews this year with the new ACT teams: Ozark Center and the FACT team.

In addition to ongoing fidelity reviews, we have been working on outcome data. Susan, Lori, and I have started

comparing the fidelity scores to the quarterly report data. We are hoping this will give us a better picture of where we are as a state and how fidelity correlates with the outcomes here in Missouri.

As always, we look forward to seeing all of the teams across the state. It is a pleasure to watch each team blossom and to continually improve the awesome work you are already doing. We love our Missouri ACT teams!

Kelli Hood

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Just a reminder:

- You can receive ACT specific technical assistance from DMH.
- Contact Lori in the west Lori.Norval@dmh.mo.gov or Kelli in the east Kelli.Hood@dmh.mo.gov. They are happy to assist!

Michelle Fassler, Vocational Specialist with the ACT 1 Team in St. Louis, will be presenting at the 28th Annual ACTA Conference. Her presentation will be "Implementing IPS Within ACT: Making It as Easy as ABC".

Congratulations Michelle!

We're glad to have a representative of our Missouri ACT Teams.

Inside this issue:

New Faces	2
FACT Team	2
ACT Tips	2
Spotlight	3
Comparison: ACT vs. Case Management	3
Is Your Team Trauma Informed?	4
MO ACT Website	4

SPECIALIST NETWORKING CALLS

We are excited to announce that the monthly specialist calls have commenced! Remember, the purpose of the specialist networking calls is to provide an arena for problem solving, fostering support, and building unification across Missouri's ACT teams.

So far, calls have been initiated for the Peer Specialists, Nurses, Program Assistants, and Substance Abuse Specialists. If you are one of these specialists and have not participated, it's not too late! Contact Lori or Kelli.

Please watch for emails about upcoming specialist calls for:
Vocational Specialists and Mental Health Professionals.

MISSOURI

WELCOME NEW FACES!

We want to take time to welcome those that have recently joined or changed positions on our ACT teams.

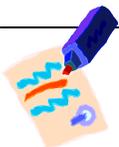
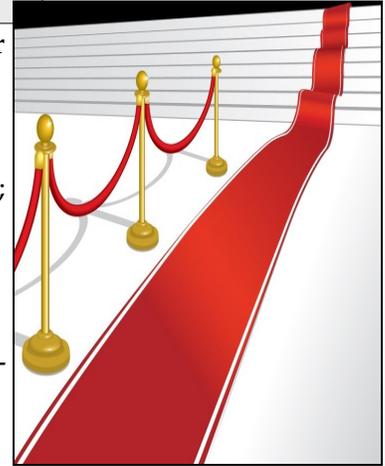
Burrell Center: **Mike Carlton-** RN

Home Team at Places for People: **Marion Cody-** Peer Specialist;
Sharis Adkisson- RN

St. Patrick Center ACT: **Genera Hodges-** Vocational Specialist

Family Guidance Center: **Erin Murphy-** Team Leader; **Melissa Gasper-**
Vocational Specialist; **Lori Kanke-** Substance Abuse Specialist

Truman Medical Center: **Connie Bates-** Program Assistant



ACT TIPS AND TOOLS OF THE TRADE

Methods of Rehabilitation Services

"The ACT team provides rehabilitation services through the following methods:

- **Helping clients establish and maintain normal life routines.** Planning and scheduling life activities (i.e. activities of daily living, employment, and social leisure-time activities) with clients is a normalizing way to structure their days and weeks. ...
- **Lending side-by-side help and support to establish or reestablish activities of adult role functioning.** ...Side-by-side help and support means that team members actively participate with clients to plan and carry out any or all activities to live independently, work, and socialize. ...

- **Modeling (demonstration), rehearsal (practice), coaching (prompts), and feedback.** Coaching (e.g., whispering prompts or directions) is used in community settings when a client is anxious or having problems with concentration and attention.
- **Environmental adaptations to meet client needs.** Careful assessment with a client and analysis of his or her surroundings (e.g., neighborhood, work site, relationship with a supervisor or family member) can lead to ideas of ways to adapt the environment to better suit the client's needs and improve instrumental role functioning."

Taken from page 132-134 of A Manual for ACT Start-Up.

New ACT Team: FACT at Places for People

Missouri is happy to welcome the Forensic ACT (a.k.a. FACT) team in St. Louis. The FACT team joins the ACT 1 and Home teams at Places for People and makes team #8 for us in Missouri. The team has been focusing its early energies on serving those discharged from St. Louis Psychiatric Rehabilitation Center and folks already on conditional release in the community that need additional services. FACT has the components of the ACT team with the addition of a "legal leverage" piece. Welcome FACT Team!

Team Leader: Robby Giunta

Psychiatrist: Dr. Maurice Redden

Mental Health Specialist: Katie Beebe

RN: Emmett Taylor

Peer Specialist: Kevin Cook

Vocational Specialist: Georgie Trammell

Substance Abuse Specialist: Mark Gamache

Program Assistant: Kim Wilson



TEAM MEMBER SPOTLIGHT: AMBER SIMPSON

Name: Amber Simpson
Team: St. Patrick Center ACT
Position: Substance Abuse Specialist

What is your favorite part about being on an ACT team?

I really like the community integration aspect of community visits- For example, the part where you take somebody to get coffee and help them learn socialization skills.



How long have you been on the team?

2 1/2 Years

What is your favorite food?

Thai food. Any Thai food but my favorite is Vegetable Curry.

What is something you would like to share?

It is really important to do fun things as a team without a focus on clients. It allows the team members to get to know each other on a more personal level which helps with communication on a day to day level. It helps to build the team dynamics.

The 28th Annual Assertive Community Treatment Conference is scheduled for May 16th - 18th. It will be held at the Boston Park Plaza in Boston, MA. For more information, go to www.actassociation.org

COMPARISON: CASE MANAGEMENT VS. ACT

*Case Management model –

- Individual caseloads
- “Primaryship”
- Working as a generalist
- Team meetings weekly or bi monthly
- Work and respond in weekly or bi-weekly intervals
- Assessment at intake
- Engagement complete once consumer starts service
- Treatment planning domain focused
- Brokering services

*ACT model -

- Team caseload
- Individual treatment team model
- Work as generalists and specialists
- Daily team meetings
- Work and respond 24 hour intervals
- Ongoing Assessment and Engagement
- Consumer driven treatment planning
- Provides all services

Success Stories: Family Guidance Center

The Family Guidance Center ACT team has successfully transitioned consumers from the team to a less intensive level of care. This is a brief summary about one of those individuals who has been so successful in his recovery.

When the individual came to the team, he thought that the Missouri seal was speaking to him and believed that it had thrown him. He was not initially adherent to medications which made the delusions caused by his mental illness difficult to handle. He now understands his delusions. He takes his medications daily and identifies that he knows he needs the medications to “think better”. Most importantly, however, is that he now has his own place and a stable relationship with his small son. His ability to “think better” has allowed him to give his son the attention and focus that is needed from a parent. Now that’s a great success!

If you have an ACT success story for the newsletter, please contact Kelli or Lori.



You can now find Missouri ACT on the web!

Visit

<http://dmh.mo.gov/mentalillness/provider/ACT.htm>

for forms, resources, tools, newsletters, and policies.

Is Your Team Trauma Informed: Traumatic Experiences

For many years, the traumatic things that happened to people were overlooked as a possible cause of frightening, distressing, and sometimes disabling emotional symptoms such as depression, anxiety, phobias, delusions, flashbacks, and being out of touch with reality. In recent years, many researchers and health care providers have become convinced of the connection between trauma and these symptoms. This becomes especially relevant when these symptoms are compounded by a severe mental illness. Though this is likely not new information to you, it is always good to be reminded of the different examples of potential sources of traumatic experiences that may cause symptoms:

- Physical, emotional, or sexual abuse
- War experiences
- Outbursts of temper and rage
- Physical illnesses, surgeries, and disabilities
- Loss of close family members and friends
- Neglect
- Alcoholism
- Accidents
- Natural disasters
- Sickness in the family

It is important to remember that some things that may be very traumatic to one person hardly seem to bother another person.

This was adapted from “Dealing with the Effects of Trauma -- A Self-Help Guide” which was prepared by Mary Ellen Copeland and originated at SAMHSA’s Center for Mental Health Services. A copy can be found at <http://dmh.mo.gov/mentalillness/provider/recovery.htm>.

ACT TEAMS ACROSS MISSOURI



Burrell Behavioral Health - Springfield

Family Guidance Center - St. Joseph

Ozark Center - Joplin

Places for People ACT 1 - St. Louis

Places for People Home Team - St. Louis

Places for People FACT - St. Louis

St. Patrick Center - St. Louis

Truman Medical Center - Kansas City