



Here's the latest Ohio Coordinating Center for ACT E-Newsletter! 9/20/07

PROGRAM SPOTLIGHT

The Mental Health & Recovery Center of Clinton County, Inc. (MHRCCC) began implementation of ACT services in the summer of 2006. Earlier that year the Mental Health Recovery Services of Warren and Clinton Counties (MHRS) clearly defined a system need to decrease state and private hospital days as well as increase use of more independent, less expensive housing for the SMD population in Warren and Clinton counties. In short, MHRS determined that ACT would be the most efficient fiscal and effective clinical resource allocation for people with the most severe mental illnesses and disabilities.

From the beginning MHRS and MHRCCC have been focused on being true to the evidence-based practice of ACT. Although it took some time to get all staff positions filled and stable, they now have all components called for by the model and are able to provide a multidisciplinary team approach to service. One specific focus area for the team over this last year has been explicit admission criteria. MHRS and the MHRCCC ACT team realize the importance of using resources efficiently and appropriately to serve a very specific population and achieve the improved outcomes expected by the model. Currently the administration and Team Leader work very hard to ensure a thorough screening and intake process for new admissions to the team.

This team also stands out because of their efficient use of team space. They utilize many of the structural team meeting tools (client cardex, staff schedule, etc.) as well as dry erase boards and large poster boards to guide the team's day to day work and track client outcomes. Perhaps the most notable system outcome achieved by the team is a significant decrease in hospital days for this population. Many of the team's clients are now more integrated into the community, residing in independent living situations.

Lastly, the Ohio Coordinating Center for ACT (OCCA) has completed two fidelity assessments that show a great deal of progress made by this team since inception. The team is now in stage two (Refinement) of ACT program development. Now that they have all of the ACT elements in place, the team continues to refine the core processes necessary in providing recovery focused ACT services.

OCCA recognizes the great effort put forth by MHRS, MHRCCC and the ACT team itself in providing quality ACT services in Warren and Clinton counties. You're well on your way to meeting specific system needs and, even more importantly, helping individuals with the most severe mental illnesses achieve their own recovery. Keep up the good work!

SUCCESS STORY

One client served by the MHRCCC ACT team has made great progress toward her own recovery. Diagnosed with Schizophrenia in her mid twenties, she has led a difficult life with many barriers to her own health and independence in the community. Due to paranoid delusions and substance abuse issues, she was constantly in and out of the hospital before working with the ACT team. Her symptoms and substance abuse also caused conflict in her relationships with others and she eventually became estranged from her husband. Although she had her own apartment for years, she rarely stayed there due to frequent hospitalizations. She was unengaged in traditional mental health services and refused AA and other substance abuse treatment. She was in the state hospital when referred to the ACT team for assistance.

At first, like many ACT clients, she was difficult to engage with the team. However, the ACT team was persistent in developing a relationship and proving that she could trust them. As the team helped her take steps toward achieving the goals that SHE wanted to accomplish, she began to engage more with team members. Soon she was discharged from the state hospital and back in her own apartment.

It seemed what she wanted most was to mend the relationship with her estranged husband and develop a healthy marriage. Once back in her own apartment, the team began helping her monitor medications to relieve the symptoms of her illness. Daily med monitoring allowed the team to encourage her to maintain her apartment and develop independent living skills. Simultaneously the team began encouraging her to engage in substance abuse treatment provided by the team. Again, this took time, persistence and clinical skill by the entire staff. However, because of the developing treatment relationship, she began engaging in some of the individual and group substance abuse treatment offered by ACT.

After months of hard work by the client and the team, she was regularly attending substance abuse groups and began rebuilding the relationship with her husband. She gained insight into her illness through medication education and by experiencing improved symptoms. Due to her substance abuse education and treatment, she began striving for a drug and alcohol free lifestyle, which was a key component in rebuilding her marriage. To help her re-unite with her husband, ACT team members advocated among other providers for them to be permitted to live together again. Soon she and her husband were back in the apartment together.

Today this client manages her own weekly medicine box and no longer needs daily medication monitoring by the team. She has been admitted to the hospital only once in the last year and she has been sober for almost 4 months. She currently resides in an apartment with her husband and frequently attends social events and other activities with other couples. The ACT team has truly been instrumental in assisting her progress toward recovery.