



USING MEANINGFUL ENGAGEMENT STRATEGIES AND PROMOTING A POSITIVE SERVICE CULTURE

MODULE 2

MODULE 2 OUTLINE

1

Learning Objective 1

**Establish engagement
as an overarching
standard of care**

2

Learning Objective 2

**Facilitate an
understanding of the
importance of
engagement
strategies**

3

Learning Objective 3

**Describe how
engagement is
operationalized
across the continuum
of care**

4

Learning Objective 4

**Identify ways to create
a culture and language
of hope through
focused engagement
strategies**



CORE PRINCIPLE ENGAGEMENT

WHY FOCUS ON ENGAGEMENT?

Individuals living with mental health and substance use conditions are often difficult to engage and retain in ongoing treatment.

- Unsuccessful engagement may lead to poor clinical outcomes and a return to symptoms or substance use.

The first moments of interaction between a service provider and a person seeking care can set the tone and course of treatment.

- This first interaction can start a journey to recovery and a satisfying life—or it can leave a person unsure or even hopeless about their future and unwilling to go back a second time.

OVERARCHING PHILOSOPHY OF CARE

ENGAGEMENT

- Is a recovery-oriented principle that should be infused in all strategies throughout the continuum of care
- Being *engaging* is synonymous with being *recovery-oriented*

DEFINITION OF ENGAGEMENT

“Engagement is the strengths-based process through which individuals form a healing connection with people that support their recovery and wellness within the context of family, culture and community.”

National Alliance on Mental Illness NAMI, 2016)



ENGAGEMENT

Engagement has multiple dimensions and must embrace the whole person in the context of *family, language, culture* and *community*.



Hallmarks of RECOVERY-ORIENTED CARE

“When care is respectful, compassionate and centered on an individual’s life goals, the likelihood of recovery is sharply increased.”

(NAMI, 2016)

ENGAGEMENT

- Goes beyond traditional medical goals of symptom reduction and functioning to include *wellness* and *connection* to
 - family
 - friends
 - community
 - faith
 - school
 - work
- Recovery-oriented care is a helpful framework to provide tools and techniques to enhance engagement throughout the system of care.



(NAMI, 2016)


WHY IS ENGAGEMENT IMPORTANT?



- Engaging persons with mental health and substance use conditions in care and behavioral change is critical to their health and wellbeing.
- Many variables may affect level of treatment engagement, including therapeutic alliance, accessibility of care, and the trust of the person served that treatment will address his/her own unique goals.

(NAMI, 2016)

ENGAGEMENT ACROSS THE CONTINUUM OF CARE

- 
- Outreach/Pretreatment
 - Initiation of Services
 - Treatment Level
 - Continuing Care/Recovery Support

Engagement across the continuum of care fosters dignity, hope, resilience, relationships, creating meaning in one's life, and self-efficacy.



VALUES & ATTITUDES

ENGAGEMENT

VALUES AND ATTITUDES OF PROVIDERS



Under the framework of recovery, *the primary goal of behavioral health services is to support individuals in their journey towards overall health, well-being, and social integration.*

Engagement is not a “*one-and-done*” strategy.

Engagement has to be sustained over time and requires *developing respectful, honest, and collaborative relationships* with each and every person.

VALUES AND ATTITUDES IN ENGAGEMENT

Integrity at every level of treatment

Commitment to long-term relationships

Respect for diversity

Equality in decision-making and choice

WHEN WE VALUE THE PROCESS OF ENGAGEMENT, WE...

1

Establish a
personalized
relationship with the
individual

2

Maintain this
relationship
throughout their
recovery journey

3

Focus on the unique
and diverse needs of
the individual

ORGANIZATIONAL ATTITUDES AND VALUES

- Valuing respectful and honest collaborative relationships
- Enhancing relationships with individuals served
- Creating trusting relationships
- Increasing access to services
- Providing diverse opportunities for the individuals to become more involved in their recovery support services and activities



WHAT WE KNOW FROM RESEARCH **ENGAGEMENT**

REQUIRED KNOWLEDGE BASE THAT IS NEEDED



Practicing person-first approaches and recognizing diversity of needs requires us to:

- Understand the individual and personal nature of recovery and recovery approaches.
- Respect, learn from, and understand the approaches developed by people with lived experience.
- Understand how basic needs impact recovery.
- Learn how to assess for basic needs and strengths.

ENGAGEMENT



Is an on-going process!



The process is incremental.



The process is supported by the structure of policies that support a recovery-oriented organizational culture.



Is inclusive and necessary for the service practices (HOPE) that operationalize the recovery-oriented principles (CONNECT).

ENGAGEMENT CREATES A CULTURE AND LANGUAGE OF HOPE

- Recovery is personal.
- The focus is on the individual receiving services.
- Values, hopes and dreams are included in planning and service delivery.
- Consider the impact of distress in every part of life.
- Accept the individual for who they are.
- A genuine belief that every individual has the potential to build a purposeful and meaningful life is needed.

PERSON-FIRST LANGUAGE

- Consciously recognizes people as individuals and uses respectful language that emphasizes the person rather than their disorders or disabilities.
- Honors the individual's special skills, qualities, values, and experience.
- Recognizes that the individual holds multiple roles and identities that fuel a sense of personal agency and can be tapped into when identifying ways to support recovery.

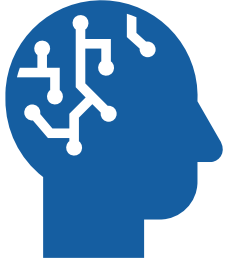
(Mental Health Commission of Canada, 2015)

PERSON-FIRST LANGUAGE - EXAMPLES

Stigmatizing Terminology	Appropriate Terminology	Why? This terminology...
a person is “a schizophrenic” or “an anorexic”	a person who has or is being treated for schizophrenia or anorexia	labels a person by their mental health condition.
“addict” or “alcoholic”	a person with a substance use disorder or a person with alcohol use disorder	labels a person by their substance or substance use condition.
suffering from mental illness	a person with a mental health condition	suggests a lack of quality of life for people with mental health conditions.
“crazed” “deranged” “mad”	person’s behavior was unusual or erratic	describes behavior that imply existence of mental a mental health conditions or is inaccurate.
“dirty” drug screen	testing positive for substance use	conveys a judgmental attitude about the test results.
former addict	a person in recovery or a person in long-term recovery	perpetuates stigma and does not convey the nature of the recovery process.



APPLICATION TO PRACTICE ENGAGEMENT



Calls for *open-mindedness and flexibility* about a shifting structure and delivery of care



Requires service providers to also *feel engaged* with the work they are doing



Focuses on a variety of *practical methods and tools*

HAVING AN ENGAGEMENT “MINDSET”

APPLYING ENGAGEMENT STRATEGIES ALONG CONTINUUM OF CARE

Remember, throughout the continuum of care:

- Become an extension of hope
- Model what hope looks and feels like
- Use hopeful language
- Use person-first language



ENGAGEMENT STRATEGIES FOR PRE-SERVICE & OUTREACH

- Make outreach an important and formal part of our care system; do not wait for individuals in need to come to us.
- Work with the community to create strong and sustainable relationships, multidisciplinary teams, and partnerships.
- Enhance relationships with underserved communities and populations.
- Integrate peers with lived experience with substance use or mental health disorders into all outreach activities.
- Take whatever time is needed to build a trusting relationship with the people you serve and be upbeat, hopeful, and persistent every time

ENGAGEMENT STRATEGIES – WELCOMING



A *welcoming outreach* approach will:

- Make the first contact personal and engaging.
- Be deliberate and systematic in applying “welcoming” to clinical and non-clinical aspects of the organization.
- Treat all persons and their family members equally and with respect related to their ethnic, cultural, and linguistic diversity, sexual orientation and gender identity, religious and spiritual background, age and socioeconomic issues.

ENGAGEMENT STRATEGIES AT SERVICE INITIATION

Reduce

Reduce waiting times for appointments.



Be Deliberate

Be deliberate and systematic in using welcoming approaches.



Explain

Clearly explain to individual what they can expect at first appointment.



Build

Build an alliance through empathy, confidence, flexibility, genuineness, attentiveness, skill, and respect



Identify

Identify service areas that emerge from the person's values and preferences.

ENGAGEMENT STRATEGIES DURING THE COURSE OF TREATMENT

Focus

Focus on the whole person including their goals, strengths, and interests to strengthen and enhance recovery efforts. Use active problem-solving.

Partner

Engage persons served as active partners in determining the treatment they will receive and the treatment team that will deliver services.

Collaborate

Collaborate with other community agencies and providers to offer comprehensive care, as needed.

Enhance

Use technology-based resources to enhance access to education, outreach, and direct therapeutic services.

Support

Use peer services when appropriate and available to help diminish barriers and increase engagement in services.



QUESTIONS FOR REFLECTION ENGAGEMENT



REFLECTIVE PRACTICE

Please reflect on the following questions and write down your responses.

Direct Service provider: What engagement strategies are you using?

Management: How do you ensure that engagement strategies are applied in all levels of care?

Administrative (to include support staff): How do you model person-first language?

CONNECT TO HOPE



PRINCIPLES

- C**reate a culture and language and hope
- O**ffer a comprehensive and holistic service array
- N**on-judgmental
- N**avigating diverse needs
- E**ngagement strategies
- C**ollaborative relationships and reflective practice
- T**ransforming services and systems

PRACTICES

- H**onor the differences and diverse needs of each individual served
- O**ffer various opportunities and resources that support the recovery journey
- P**rovide an environment to encourage personal control
- E**ngage in personal recovery by understanding personal recovery narrative in the treatment process and within the community

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THANK YOU!

QUESTIONS?