



In our own words:

**'I realized I wasn't alone...
I am part of a community.'**

- D.B. aged 63

Before I came to Central Nassau Guidance's Roads to Recovery PROS, I really didn't understand all aspects of my mental illness diagnosis.

The familiar ups and downs were hard enough, but learning how to cope with symptoms was at times very scary and I didn't have consistent ways of dealing with these symptoms. Things like racing thoughts and wanting to isolate when I felt symptoms starting to come on, and getting down on myself and not believing that it would ever pass plagued me all the time.

When I first went to PROS, I wasn't ready. Then I came back and tried it again. I hadn't been exposed to a lot of programs at the time, so it was a process.

Little by little I started trusting staff more; they weren't just sitting in an office doing paperwork - they were really involved and talked to everyone, checked on everyone. I started talking about my symptoms during groups and learning how to fight off my scary thoughts. The groups I found most helpful were Wellness Self-Management services such as Gaining Perspective, This is Me: Owning Who I Am (our self-esteem group), Finding My Purpose, and Courage to Change (our stages of change group).

I realized I wasn't alone. I started building a new confidence in talking with staff and peers and overcame the social phobia that I had had for most of my life. I started trusting in the process and trusting myself more as the months went on. I started making friends and now have many supportive friends, some who will be lifelong friends. I organize lunches outside of program with my peers, and I love doing it and seeing people come together with a common bond — mental illness.

Going to PROS changed my life, or you could say it saved my life. I am more confident, more social, and got the strength to be myself. I am part of a community. I found joy in my life and my life now has substance and meaning. Even my family relationships have improved, since they now understand my mental illness too. All because I went to this program and was given the tools and education I need to not only understand my mental illness better, but also the tools I need to fight and live with it. Roads to Recovery PROS is a very special program and taught me how to set future goals and accomplish them, which I am grateful for. I hope others will realize there are programs available like this and that they do indeed work.

Editor's Note: "Finding the strength to be myself" and finding joy in your life are goals that most people dream of, and it is fantastic that you found the courage to face your challenges and achieve those goals.



SAVE THESE DATES!

**NYAPRS Annual Conference
September 22 to 24, 2020**

Hopefully, in person at the Villa Roma Conference Center, Callicoon, NY, in the beautiful Catskills.

NYAPRS' 2020 Rehabilitation & Recovery Academy - November 18 and 19, 2020

This annual event is designed for all PROS staff and HCBS providers. We hope that each PROS program will be represented at this event, and always appreciate when an agency can arrange for multiple staff to participate; this is a great training opportunity that offers CEUs.

NYAPRS has successfully been conducting large conference events virtually throughout the pandemic; there will be plenary sessions as well as break out workshops whether the Academy is held in person or virtually. Details regarding how this event will take place will be announced closer to the date.

Virtually Producing Meaningful Outcomes and Full-Service Delivery

This spring, as the world experienced major upheaval, PROS providers rushed to adapt their care delivery to continue to best meet the needs of those they serve. What Zucker Hillside Hospital (ZHH) PROS (Queens, NYC) shares below on how they were able to surmount the challenge will likely resonate with PROS providers statewide. ZHH demonstrates how to “walk the talk” to continue to improve measurable outcomes as they monitor the progression of the pandemic as well its impact on the community and the participants.

The following was submitted by the Team at Zucker Hillside Hospital PROS Team

The ZHH PROS program moved rapidly in mid-March to ensure the safety of its participants and team members while continuing its person centered and life role goal-oriented approach. They quickly set up teleconference groups which focused on crisis intervention, coping with isolation and counseling to support participants with adjusting to the ongoing developments of the pandemic. Soon they added modified group services to support participants with not only coping with the pandemic but also keeping connected to their community. In early May, they introduced telehealth video services, which participants appreciated so they could see their PROS peers and the counselors for the first time since the pandemic began.

As the new group format continued, program participants began to provide facilitators with feedback that they were getting tired of discussing COVID19 and coping skills. They expressed the return of groups more oriented towards their goals and the program conducted a survey with the participants to identify the types of groups they wanted to see on their next schedule. The participants highlighted many of the pre-pandemic PROS groups that the program offered. They also expressed the desire to include a virtual version of activities including daily community meetings, birthday celebrations and PROS Talent Show to help with providing a sense of normalcy. The program team members worked together to strategize how to host these events in a virtual format and began launching them throughout May and June. These groups have helped the program resume delivery of its full array of services in a virtual format while ensuring that participant’s voice and interest continues to be included in the planning process throughout the pandemic.

Telehealth & ORS

The ZHH PROS program found significant benefits for participants while providing services via telehealth. The program supported 28 participants with working during the COVID-19 pandemic and met with these participants via telehealth either at their job sites or in the comfort of their homes based on the participant’s wishes and needs. The program has received direct feedback from the employed participants that they prefer telehealth meetings due to the convenience of either logging in or calling into their meeting without having to worry about extra travel time to a community location during their breaks or feeling the need to meet with a counselor after a long shift of work.

Participants working at a physical site elected to utilize their lunch breaks to find a private area and speak with their PROS counselors for their ORS sessions. Participants that were working remote utilized the comfort of their home for

sessions. The participants also highlighted that they felt more comfortable speaking with counselors in this type of format in comparison to their pre-pandemic meetings in public spaces where both the participant and counselor felt more stress discussing their mental health barriers due to privacy concerns.

Bringing Skills Building and Practice into the Participant’s World

Via telehealth, ZHH PROS program focused on teaching participants how to share their device’s screen. This provided counselors the ability to guide participants how to find virtual resources, conduct job searches and research related to their goals and collaboratively complete applications for school, employment and benefits. Prior to COVID-19 the services would provide these same types of services where participants would engage in these activities while in the office with their counselors. During the session they would communicate and demonstrate understanding of the skill. Some of these participants would report in the next session that they did not follow up with practicing the skill at home and ongoing sessions would focus on trying to identify and address the stated barriers.

During the pandemic via telehealth (Zoom) and its shared screen feature the counselors have had the ability to work with participants in practicing a skill (i.e. completing an application) on their home device. The counselor offers support by guiding the participant as they learn and independently complete the steps in their home. The PROS counselors have also been able to engage the participant in real time problem solving and application of coping skills when technical challenges and mental health barriers emerge while completing the task. The participants that were able to participate in these services reported a higher level of confidence with applying the skill and demonstrated a higher likelihood to follow through with additional related tasks in between sessions.

Telehealth has also allowed participants to provide PROS counselors with a better picture of their home environments. This has offered an additional layer of support to participants as counselors have been able to physically observe goal progress and barriers.

For example, one participant had a goal to address cleaning up the clutter in their home. Through telehealth the counselor was able to view the cluttered area together and develop a collaborative plan to address this task both during and following the session. Another participant was practicing communicating with others in a more respectful manner. The participant continuously worked on these with their counselor during a session. During that same session the participant stepped away and was observed screaming at their parent. Following the event, the counselor utilized this observed event to help raise real time awareness of the disrespectful behaviors, processed the situation and discussed how the practiced skills could have been applied in the same situation.

Education Goals

11 participants have continued to pursue an education goal which ranged from continuing studying for the GED, some form of virtual training and

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Moving Forward – Maximizing Services while Social Distancing

While much is still in flux, over the past few months we have learned that being “person centered” means really examining how services are delivered to accommodate the learning style and preferences of the individuals we seek to support. Many programs have seen increased participation when services are available remotely via telehealth.

Programs are evaluating how to optimize their ability to serve individuals within the limits of their physical space. There are a lot of logistics to consider, including traffic flow in the hallways and elevators, and doing the math to calculate how many individuals can fit while six feet apart. Where can counselors meet 1:1 and have privacy if their office is too small? Some programs are using group rooms for their 1:1 meetings, but this obviously may impact the group schedule.

Consider offering some groups completely off site, at a suitable place in the community. It’s easy to envision a group such as Structured Skill Development and Supports (SSDS) “Doing Social Distancing Right” on a schedule, held completely off site in natural settings; this alleviates crowding at the PROS site and provides an important service that is billable.

Staff will be developing their own skill sets to ensure that connections created with virtual technology continue to be effective in helping people reach their recovery goals. While many programs have begun to adapt their schedules to include using this platform, further adaptation will evolve.

For example, a group service might be delivered via face-to-face modality and simultaneously using a platform such as Zoom. While at first it may seem odd, it can be helpful to have even those on site also connect via their own cell phones, if possible, so that the people at home will have a better view of the individuals’ faces and perhaps better sound quality rather than peering into a classroom on a screen.

It will be useful for the facilitator to verbally acknowledge the facial expressions and body language that they observe during remote calls in order to relay relevant non-verbal communication that might have been taken for granted if face to face. Success is better measured by the number of people attaining their recovery goals than by simply watching your census. Creativity will be essential.

See infection control guidance for essential details. [COVID-19 Infection Control in Reopening Public Mental Health System Sites](#) (Revised – 6/25/2020).

The Coalition for Behavioral Health

Opportunities for staff training are expanding as the need to travel decreases. The Coalition for Behavioral Health has long worked with New York City PROS providers, offering technical assistance and support. Now, wherever you are located in the state, you can engage in their trainings. Here are a few titles of upcoming August trainings:

- Designing Virtual Groups: Skills Focused Group Curriculum Outlining in 7 Steps
- Introduction to Virtual Shared Decision Making
- Rethinking Trauma
- Just What Happened There? Leading Groups with Self Awareness

[See the Coalition’s full training schedule.](#)

Best Practices for Conducting Groups via Telehealth

The COVID-19 pandemic rapidly shifted the delivery of behavioral health services to virtual platforms – but how has this transition impacted group sessions? Moving group work from in-person to virtual raises questions around confidentiality and safety, establishing new group norms, client engagement, and more. Listen to the discussion around best practices, evidence-based recommendations, and practical tips to help foster effective group work engagement with the National Council of Behavioral Health. Their archived 1 hour webinar from June 18, 2020, [COVID-19 Office Hours: Conducting Groups via Telehealth](#) includes practical tips on informed consent, and pre-group screening appointments to optimized the telehealth time, and discussion on ways to keep members feeling engaged to maintain participation, and addressing access challenges.

Coming Soon... TAY!

OMH is developing a Transition Age Youth (TAY) “Community of Practice” to bring PROS programs together to share and learn best practices and training resources as we work together in order to achieve quality outcomes for young adults. The needs and interests of this cohort are much different than “historical” PROS enrollees as younger adults prefer more community-based interventions as they pursue employment and/or education goals. As PROS programs start to serve more TAY participants, some are unsure of how to best meet their needs. However, other agencies have served this population for some time and have the experience and resources through specific staff or engagement strategies. **Nancy Hollander**, Assistant Commissioner (OMH), will join our “Community of Practice” through regional calls, along with other stakeholders, to help foster this effort. Stay tuned; we plan to schedule these calls in coming months.

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attending their college courses virtually. The PROS counselors supported these individuals with adjusting to the new virtual format that their class/training was provided on while also assisting them with building their structure and discipline to follow through in this more self-dependent model.

Included in this number is also a participant that has overcome her mental health barriers and pandemic based stressors to continue her studies in Nursing. She plans to begin her residency in the fall.

By listening to the needs and desires of the participants during the tumultuous period of change, ZHH was able to protect the physical health of all while continuing to support the emotional health of participants and stay the course on helping them attain their life role goals.

PROS IPS data summary

Individual Placement and Supports (IPS), an evidence-based approach, is considered the “gold standard” of imbedding supported employment throughout the program.

This past year, many PROS programs worked closely with the Center for Practice for Innovations (CPI) Training Team on implementing or improving the Individual Placement and Supports (IPS) approach to better serve PROS clients who are interested in employment.

The 2019 data is in and shows that employment outcomes are improving as IPS permeates the PROS culture. More than half (50 out of 89) PROS programs provided IPS services in 2019.

- Across all regions the prevalence of employment for PROS clients increased approximately 8 percentage points between admission and most recent assessment. Statewide 11% of PROS clients went from not employed at admission to employed at a later assessment.
- On average per month, 50% of clients served by IPS were employed. **For those supported by IPS, average monthly employment rates ranged within regions from 33% to 69%.**
- Clients receiving IPS have substantially higher rates of employment – at least 50% on average – compared to PROS clients in general.

PROS Demographics

- Age: Approximately 1/3 of PROS participants are age **34 and younger**.
- The median age range is **35 to 50**.

Statewide total number of cases: **14,551**

Percent of cases

18-21	22-34	35-50	51-64	65+
2.9%	32.2%	32.6%	25%	4.5%

PROS CAIRS Data - Jan. 1, 2017, to Dec. 31, 2019

Other PROS sites are encouraged to learn more and implement IPS. It is not only the employment specialist who can offer services which support employment goals. For example, any PROS practitioner may assist an individual with improving communication skills and problem-solving skills, which in turn helps them be ready for job interviewing. The best results occur when the entire PROS staff supports employment as a means to recovery and wellness.

For more information about IPS and to be connected to CPI's Training Team, contact Liam.McNabb@omh.ny.gov.

Resources



Center for Practice Innovations (CPI) released a 1 hour training on [SP-TIE: Telehealth with suicidal clients during the COVID-19 Crisis](#). Relias helped promote this training, with accompanying resources, through a blog post: [Assessing Risk and Preventing Suicide via Telehealth](#).

The National Academy of Medicine addresses the stress on clinicians with resources on their website that offer information to support the health and well-being of clinicians during public health emergencies, including the COVID-19 response: [Clinician Resilience](#).

The National Council for Behavioral Health offers free toolkits:

- [Summer of Advocacy for BH Providers](#) to help behavioral health providers connect with their Congress representatives at this critical time to emphasize the value services so many are depending on right now.
- Available in multiple languages, the [Get-Out-the-Vote 2020 Toolkit](#) will help your organization create, launch and sustain a successful in **nonpartisan** voter virtual registration and education program amidst the COVID-19 pandemic.

MCTAC offers Documentation Toolkits - Documentation Done Right is a set of “workbooks” (tip sheets) designed to share best practices in documentation and provide users with exercises that provide an opportunity to practice these skills. Each stand-alone Documentation Done Right workbook targets a specific skill area. We highly encourage you to share this free resource with your staff. If you don't yet subscribe to the mctac listserv, we recommend that you sign up. <https://ctacny.org>.

PROS Newsletter Archive: PROS Newsletter began in Fall 2016. To check previous editions, you can view the entire PROS Newsletter collection on the NYAPRS Clearinghouse: <http://pros.nyaprs.org/resources>.



Office of
Mental Health

This newsletter is written by the Bureau of Rehabilitation Services and Care Coordination at the New York State Office of Mental Health.

Please distribute to all PROS staff.