

# COMPANION GUIDE

## Module 7: “We Have Another Call About Nell!”

### Tips for facilitators:

- Watch the Module 7 DVD prior to the training so that you can anticipate questions and identify supplementary materials needed for your particular audience.
- This module is 36 minutes.
- Review your county profile and be prepared to talk about the prevalence of schizophrenia in your community.
- Consider working with a co-facilitator who will complement your own expertise and knowledge of the community and resources available for people with severe mental illness.
- Handouts for this session include PowerPoint slides, Participant Companion Guide, and evaluation forms.
- Feel free to stop the DVD at any point in the program for discussion.
- Refer to the introduction of this manual for more tips.

### Plan for the Session

- With knowledge you have from stakeholder interviews and with assistance from your manager/supervisor, determine optimal scheduling. Consider
  - the best times to help ensure cross-training (i.e., participation from both aging and behavioral health services)
  - how many modules to view at one time—modules are designed for 90-minute sessions to allow time to view the DVD and discuss content and implications for the community
  - frequency of training (e.g., weekly, monthly)
- Calculate the prevalence of schizophrenia in your community.
  - Approximately 0.5% (0.005) of the 65 and older population is estimated to have schizophrenia. Use your county profiles to estimate the prevalence of schizophrenia among older adults in your community. First multiply the percentage of adults age 65 and older (e.g., 13.6% → 0.136) by the total population in your county (e.g.,  $0.136 \times 375,922 = 51,125.392$ ). Then multiply that number by 0.005 to estimate the prevalence ( $51,125.392 \times 0.005 = 256$ ). The resulting number gives you an estimate of the prevalence of schizophrenia among older adults in your community (e.g., 256

older adults with schizophrenia). Explore the resource section in the *Participant Companion Guide* to identify prevalence of other types of severe mental illness among older adults to calculate the prevalence in your community.

- Prepare handouts:
  - Copy PowerPoint handouts for participants.
  - Copy the resource section of the *Participant Companion Guide* as a handout.
  - Determine which, if any, fact sheets you will copy and distribute as handouts.
- You may adapt the PowerPoint slides to fit community needs and interests. The presentations are saved to your project flash drive.
- Anticipate responses from participants and plan how to redirect comments if necessary. For example, typical responses when people view Module 7 are
  - “Nell is not representative of the people we see because she is ‘over-resourced.’”
  - “Nell would not be eligible for ACT services.”
  - “Guardians are a good idea, but they can’t force people to accept treatment or live where they don’t want to.”

Keep the focus on collaboratively addressing the needs of adults with a serious mental illness and the age-related changes that occur prematurely. The multidisciplinary team, for example, presents an ideal system that Older Adult Behavioral Health Specialists are trying to create. Comments about Nell or individual providers can contribute to exploring issues in your community such as autonomy versus safety, evidence-based best practices, and opportunities for collaboration.

- Offer NASW CEUs when the DVD is presented with discussion:
  - Fill in forms with the title of the module, date, and location. Forms include roster and evaluation.
  - Ask participants to sign in and complete the evaluation at the end of the session.
  - Give the participant a certificate with their name and date.
  - Mail roster and completed evaluation forms to the Oregon Chapter of NASW (address is on the form)

## **Welcome the Participants**

If you are presenting the modules in sequence, most of the participants may be familiar with each other by now. You can use the introduction time for participants to reflect on the previous module and how they have used information since the last training. Be sure to welcome and include new members.

## **Show the DVD**

If you wish, you may stop the DVD for discussion rather than watching it all the way through prior to discussion.

## Facilitate Discussion

Much of the learning will take place or be reinforced through discussion. Because no module can cover all aspects of serious mental illness and co-occurring disorders, discussion is important for exploring variations on the scenarios presented to address the expertise and learning needs of the people in the room. You will have important information from the stakeholder interviews you have conducted to help you with this.

Below are some questions designed to help participants connect the material to their own practice and to their communities. Consider how much time you will have for discussion and select the questions you feel are most important. Note that some questions focus on clinical issues and others on systems issues of the broader community.

Use the resource guide (that is, the *Participant Companion Guide*) for Module 7 to identify supplemental information that will be relevant for your audience.

## *Discussion Questions*

1. If you wish, stop the DVD after Nell and the nurse present the situation and the slide titled “What did you Notice?” appears.

***What did you notice? Be specific. Would you be concerned? What else would you want to know?***

After the DVD concludes, consider these questions:

2. Many people with a severe mental illness (SMI) like Nell are “frequent flyers” or high utilizers of services when they have a psychotic episode or relapse.

***In our community, what is the usual point of entry into the system for someone like Nell? What are we doing well with this population? Where is there room for improvement?***

3. Assertive Community Treatment (ACT) is an evidence-based program that has demonstrated a significant impact on helping people with SMI stay in the community and function at their highest potential.

***Do we have an ACT team in our community? If not, how could we establish one?***

4. As a result of aging with a psychiatric disability, the older SMI population is at risk for being in situations that result in neglect and maltreatment. These cases require collaboration between mental health and protective service workers to resolve issues successfully.

***What is the current status of collaboration between the mental health, protective service and law enforcement agencies in our community? For example, do they agree about what constitutes an emergency or high-risk situation? Do they understand each other’s roles, policies and procedures?***

***How would aging and behavioral health protective services work together in your community to support someone like Nell?***

5. In this scenario, Nell was not intoxicated at the time of her appearance in the emergency department, yet there are indications that she might have a history of alcohol abuse.

***How should the team assess for and monitor Nell for substance abuse? If she begins drinking again, how will this complicate her treatment and recovery?***

6. Nell is an example of an older adult with SMI who has a sibling who is willing to be involved with her care to a certain extent. Other adults with SMI are not so lucky and may eventually require a conservator or guardian to remain in the community.

***What is the current availability of guardians for older adults with SMI in our community? Is there a wait list? Are there particular problems with the current process?***

7. Family members who continue to be caregivers for older adults with SMI often don't receive the information they need about the age-related changes in the disorder and how to cope. As a result, they may experience additional demands for caregiving and experience burn-out.

***In our community, what kinds of information and peer support are available to family members of older adults with SMI?***

8. Nell's health and living situation deteriorated when her parents died.

***What kinds of services are available to support aging parents of those with SMI? What help is available to help people with SMI transition from one support system to another?***

9. Nell represents a new population of older adults with special needs that will be eligible for Aging Services. As Liz Bartell says in the Module, "They are coming."

***What efforts could be undertaken now to prepare aging services staff and other non-behavioral health providers in our community? For example, encouraging attendance at Mental Health First Aid programs?***