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Mental Health Practices and Programs: Occupational Therapy Service Delivery within a Recovery Perspective

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Learner Outcomes

As a result of this course, participants will be able to:

1. Describe the current and future trends, as well as the organizational structure, of mental health service delivery.
2. List the different forms of recovery and explain the congruence between occupational therapy and recovery philosophy.
3. Define occupational therapy as a psych rehab specialty.

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Service Delivery Organizational Structure

Basic Mental Health Services

- Diagnoses and Psychotherapy
  Licensed Practitioners of the Healing Arts (LPHA)

- Psychotropic Medication
  Formerly the exclusive domain of MD's
  PA's, & NP's now also prescribe
  Increased use of Telepsych

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Service Delivery Organizational Structure

Expanded Mental Health Services

- Psychosocial/Psychiatric Rehabilitation
  (Occupational Therapy, Social Work, Case Management –Other related fields )

- Peer Services
  Clubhouse and Wellness Center staffing
  Support services, mentoring

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Service Delivery: Current Trends

- The medical model continues to dominate but rehabilitative and social perspectives are being further incorporated.
- Decrease in reliance and length of hospitalizations.
- Merger of mental health services and AOD (Alcohol & Other Drugs) – Community based behavioral health services.

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Service Delivery: Future Trends

- Overarching recovery philosophy (mandated but not fully implemented).
- Single point of entry for all health care (not implemented).

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Service Delivery with a Recovery Emphasis

- The “expanded” services of rehabilitation and support are coming to the forefront.
- Multiple funding streams (grants) are critical for the provision of preventative and wellness oriented services. (non-medical model).

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What is Recovery?

“Recovery is described as a deeply personal, unique process of changing one's attitudes, values, feelings, goals, skills, and/or roles. It is a way of living a satisfying, hopeful, and contributing life even with limitations caused by illness. Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of mental illness” (Anthony, 1993).

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Key Features of Recovery Based Services

◆ Conveys a message of hope and optimism.
◆ “Client” (consumer) driven.
◆ Goal oriented and practical.

Misconceptions about Recovery

Misconception
◆ Recovery is a “fad”.
◆ A recovery approach is not meant for people with acute or serious/persistent MI.
◆ A recovery orientation diminishes the role of the professional.

Understanding – Solution
◆ History and context of the recovery movement.
◆ Recovery is a process with various types of outcomes
◆ Role clarification and collaboration
1. The Evolution of the Recovery Perspective: Consumer Driven

*(History of Recovery Movement Handout)*

The concept of recovery was first advocated in the literature by survivors of mental illness. It is a genuine “grassroots” movement.

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2. The Evolution of the Recovery Perspective: Scholarly Exploration

*(History of Recovery Movement Handout)*

Scholars and researchers began to seriously consider using this concept as a basis for mental health treatment in the early 1990’s.

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3. The Evolution of the Recovery Perspective: Service Operationalization

*(History of Recovery Movement Handout)*

The “Recovery Movement” is now a worldwide phenomenon with profound effects on intervention, program development, grants, and research.

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4. The Missing Piece: Full Service Implementation

◆ *What needs to happen?* Education and realignment of funding.

◆ *How can occupational therapists be a part of recovery in service delivery?* Clear communication of unique skills; identifying role on service team.

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Recovery Process and Outcomes

◆ Focus on recovery should commence at the beginning of treatment regardless of acuity or severity of illness. Recovery is an individualized process with self directed and step by step goals.

◆ Outcomes differ depending on perspective. May be clinical, functional or personal. *(See “Occupational Therapy: Bridging Two Worlds” Handout)*

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Congruence of Recovery and Occupational Therapy Philosophy

◆ Incorporates an individual's strengths into intervention.
◆ Facilitates personal advocacy. (empowerment)
◆ “Client centered” and “top down” approach.
◆ Addresses all contexts of a person’s life and both the physical & social environment.
◆ Focuses treatment on practical goals, broken down into achievable, success oriented, steps.
◆ Emphasizes quality of life and participation in meaningful occupations.

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**Definition of Psych Rehab (Also Occupational Therapy!)**

Psych Rehab is the process of restoration of community functioning and well-being of an individual who has a psychiatric disability. Rehabilitation specialists seek to effect changes in a person's environment and in a person's ability to deal with his/her environment, so as to facilitate improvement in symptoms, full community integration, and improved quality of life.

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**Occupational Therapy/Psych Rehab Approach**

- Contextual, requiring knowledge of home and community.

- Skill based, therefore requires practice!

- **Assessment** for identifying function/dysfunction, exploring context and environment, developing recovery oriented goals, and determining need for specific evaluation(s).

- Intervention can be provided individually, in groups, or through consultation, with immediate application to daily living.

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Reintroducing Occupational Therapy as a Mental Health Profession: Communication

◆ Convey the rich history of occupational therapy as a mental health profession.
◆ Focus on congruence and understanding of recovery.
◆ Use terminology known to behavioral/mental health services (OT as a psych rehabilitation specialty).

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Reintroducing Occupational Therapy as a Mental Health Profession: Action

◆ Represent OT on mental health advocacy and policy boards as well as in family and peer organizations.
◆ Expand mental health intervention in all service settings.
◆ Emphasize unique skills and multiple roles (assessment, intervention, program development, consultation, supervision).

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Closure

Any questions?

Please feel free to contact me with any further questions or comments:
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Thank you!

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