Rehabilitation and Recovery

A Certificate Program in Psychosocial Rehabilitation

Instructor’s Manual

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Phone (925) 229-2300
Fax (925) 229-9088
E-mail casra@casra.org
Website www.casra.org

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Instructor’s Manual

Rehabilitation and Recovery

This course is designed to provide a theoretical and practical knowledge base for the entry-level skills required to deliver psychosocial rehabilitation (PSR) services to adults experiencing mental illness. In addition to lecture, each class will introduce discussion topics and/or activities that bring the concepts of recovery into focus and give each student the opportunity to rehearse and experience the application of these skills. In addition to working with service recipients, students will also learn basic skills to support family members. Throughout the course, skills for greater self-awareness and cultural competence will be identified and developed.

Learning Objectives

1. Demonstrate the ability to work in partnership with persons receiving services towards culturally relevant goals that apply the Recovery concepts of Hope, Choice, Responsibility and Niche.

2. Identify the major groups (diagnostic categories) of internal experiences (symptoms) often described in adults experiencing mental illness.

3. Demonstrate effective communication skills (via classroom role-play) in individual, group, family and milieu modalities.

4. Demonstrate competence in ethical standards for PSR practitioners.

5. Recognize, respect and incorporate cultural influences and practices in the design and delivery of Recovery strategies.
# Handout 2 Syllabus

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<th>Reading</th>
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| 1     | Welcome and Introductions  
Class Structure  
Class Agreements  
Opening Exercise | • Deegan, Pat  
Recovery is a Journey of Hope  
• Poem: You and Me |  
| 2     | Person-driven Help: Review of Central SR themes | • IAPSRS Practice Guidelines |  
| 3     | Working with Individuals in Recovery: Instilling Hope |  
| 4     | Working with Individuals in Recovery: Highlighting Choice |  
| 5     | Working with Individuals in Recovery: Sharing Responsibility |  
| 6     | Working with Individuals in Recovery: Exploring and Defining Niche |  
| 7     | The Face of Recovery: Speaker Panel | Submit journal |  
| 8     | Experiences vs. Symptoms – DSM and Beyond: SR vs. Medical Models | • DSM excerpts |  
| 9     | Empathy vs. Labels: Working with thoughts and voices (Delusions, hallucinations and psychoses) | • Amy Long’s Seven Suggestions |  
| 10    | Empathy vs. Labels: Working with disruptions of behavior (Obsessions/Compulsions, anxiety, addictions and impulses) | • Stages of Change and Motivational Interviewing Handouts  
• Robbins excerpts of "failure" |  
| 11    | Empathy vs. Labels: Working with problems with energy and daily activity (Mood Disorders) | • Consumer pieces on depression and mania |  
| 12    | Empathy vs. Labels: Working with interpersonal difficulties (Personality Disorders) | • DSM Chapter on Personality D/Os |  
| 13    | Prioritizing Presenting Issues: Assessing Health and Safety Concerns | • CASRA Training module for Safe Environment |  

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<td>Boundaries and Confidentiality: An Ethics Workshop for PSR Practitioners</td>
<td>• IAPSRS Code of Ethics (All students should have read the IAPSRS Code of Ethics prior to class and have it ready for quick reference.) • Challenges</td>
<td>Submit journal</td>
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<td>21</td>
<td>Agency Presentations and Discussions</td>
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Class 4  Highlighting Choice

NOTE: Allow 1.5 hours for Exercise 1: Symptoms and Choice

PSR Philosophy of Commitment

- As you work to establish a relationship and understand the personal landscape of a member, keep in mind the PSR philosophy of commitment to personal choice.

- You may feel that a certain course of action is best but, unless the member is presenting a significant risk to him/herself or someone else, the choice and resulting consequences are up to the member.

How Does the Member’s Mental Illness Affect Their Desired Goals

- For example: Do variations in mood affect stability in housing? Employment? Relationships? Does having thoughts that others don’t share make it hard to attend church or the YMCA?

- By understanding symptoms in relation to life goals, the PSR practitioner can engage in discussion about how and where to proceed.

  - Medications can help with many common symptoms. Does the member have a primary mental health service provider for medication evaluation and therapy?

  - If medications are being used, are they effective and what side effects does the member have to contend with? Have they discussed these with their doctor? What other behavioral or self-help techniques are available?

    - Refer to Eight Suggestions for Voices from Class 6. Give resources for other self-help strategies.

    - You don’t have to know all of the resources, but you must be willing to try to help find some.

    - Symptoms or personal experiences of the member must be understood in relation to the total environment of the member.

Is the Member Aware of What Situations Are Likely to Cause Symptoms to Reappear or Get Worse?

- Getting to know what the “red flags” or early warning signs are, you can help a member develop coping strategies so they have more choice over their responses.

  - Coping strategies can include: Calling the doctor, removing oneself from the situation, practicing deep breathing or self-talk, reality checking, attending a support group meeting, etc.
- When collaborating on strategies, the member is the expert in what he/she experiences and you are the co-experimenter and supporter of the member’s strengths and choices.

**Class Discussion**

- As a class, discuss the possible impact on choice of mental health providers who insist on medication as the primary tool for symptom management. How might this affect your desire to respect and support individual choice?

**Exercise 1: Symptoms and Choice**
Exercise 1  Symptoms and Choice

- Break into small groups (n = 6-8).
- Discuss the following:
  - One member’s auditory hallucinations may mean that the Devil is trying to get them. For another member these could be the voice of God.
    - How would you respond differently to these two individuals?
    - How might the individual’s culture impact their interpretation of their experience? How would you assess this?
    - How can you help?
  - Another member experiences elevated moods. During these periods, she feels especially creative with her poetry and art. She has had financial and housing difficulties during these periods as well and her family and doctor want her to take medications regularly.
    - Have one student role-play the member while another attempts to understand and collaborate on a plan.
    - The remaining students should observe one or the other of the role-players and comment on how the interaction looked and felt to them.
    - Member: Did you feel understood and respected? Did you feel you were encouraged to make a personal choice about what to do with you experiences?
    - Staff: Did you feel judgment about the member’s choices? How did you respond to your feeling?
- Reconvene large group for class discussion of group insights.
Class 14  Boundaries in Professional Help: An Ethics Workshop for PSR Practitioners

Overview

- “Boundaries” in the helping professions is a term used to refer to where we draw the limits in our interactions with others. It can include the times and places in which we interact with others, the familiarity or formality with which we address each other, and the kinds of interactions we expect from each other.

- PSR practices encourage us to see, understand and interact with service recipients in ways that maximize dignity and strive to fully include the person in community life. (Read pg 1, paragraph 2 of Code of Ethics aloud).

- These practices differ somewhat from “traditional” standards for other helping professions (e.g., psychology, social work) where strict boundaries are encouraged between professional and social settings and contacts.

- These differences can be confusing for practitioners and service recipients and require careful consideration of the wants and needs of both parties in the helping relationship.

Exercise 1: Ethics Workshop

Exercise 2: Challenges
Exercise 1  Ethics Workshop

- Using the Code, facilitate a deeper grasp of the concepts as well as practical applications by offering as many of the following as class time will allow.

- Discuss each in relation to the Ethical Principle noted. Assure that the discussions include action at the level of the service recipient, fellow staff members and supervisor, interagency levels, and self-reflection. (Several sample discussion elements are included for clarity)

**Ethical Situations**

- You notice that a monolingual (non-English) client’s Service Plan goal is “to be able to speak English to peers”. How might a PSR practitioner proceed in keeping with Major Ethical Principle I, A-D.

  - Sample discussion elements
    - Is this the member’s goal or is it for the convenience of a primarily English speaking membership and staff?
    - How might program operations be improved in the areas of cultural competence?
    - How could you, as a staff member, help to bring about program change?
    - What resources exist for the client and for the agency?

- A new member is referred by their doctor who calls to tell you to remind the person to take his noon medications while he is at the center. The client’s goals with you do not involve medication and he has reported to you that his medications make him drowsy during the day and impair his ability to concentrate. (Major Ethical Principle II, A-E and III)

  - Sample discussion elements
    - What steps could you take before responding to the doctor?
    - What do you say to the member about the doctor’s call?
    - How do you support the member’s maximum self-determination and right to confidentiality while remaining respectful of the doctor’s viewpoint and expertise in attempting to help his patient medically?
    - How might your feelings about doctors affect your responses as a staff member?

- While getting lunch at a neighborhood store, the clerk asks if you work at the place where “all those street people live.” He adds that “some of them look pretty crazy” and wonders how you do it. (Major Ethical Principle V)
- You earn extra income by selling specialty-cleaning products to neighbors and friends. You use the products yourself and believe them to be of extremely high quality and excellent value. Your employment at an agency more than doubles your exposure to potential customers. (Code I A1, A3, C1-3)

- You arrive at a family gathering and discover that a cousin of yours is dating a client who is attending your program and is assigned to you. (Code II A4, A10, A11-14)

- You have fallen behind in your paperwork! You have seven service plans and two weeks worth of chart notes to write. If you take some of it home you can catch up by Monday. (Code I E4)

- You share an office with three others. One colleague’s daughter comes by to visit her father regularly during time that you use to return phone calls. Her father explains that she is interested in social work and may want to enter the field. (Code III A1-3)

- A new member asks for help in finding work because her case manager at another agency won’t help her. A co-worker in your agency tells you that this particular case manager has a reputation for denying vocational referrals to clients with a diagnosis of schizophrenia. (Code III A4-8)

- You receive voice mail from a member’s psychologist to inform you that the rehabilitation services your client requested are not indicated at present since she is “actively psychotic and that until the patient is stabilized there is no use in her continuing to attend your program”. (Code IV A, C1-3)

  Sample discussion elements

  - Strategize on how to discuss the benefits of socialization and meaningful daily activity on symptom reduction and quality of life, which can have a positive impact on willingness to continue with services.

  - Discuss possible ways to assist the client with self-determination while maintaining respectful and open interagency collaboration

- You are watching a TV drama with friends in which a character who commits a violent crime is described as “a paranoid schizophrenic”. Your friends ask you if you feel scared to work with those people. (Code V A1-3)

  Sample discussion elements

  - Discuss the possible effects on your life outside of work of working with a group of people that is often misunderstood and/or misrepresented to the public.

  - Do you think is it your responsibility to share your knowledge outside of work?
Exercise 2  Challenges

- Explore several of the following more complicated situations with the class. Emphasize the importance of acknowledging ethical issues early and bringing them to supervision as soon as possible.

- You have developed strong feelings for a member you have been assigned to work with and you believe that these feelings are reciprocated.

- A member you are working with on decreasing social anxiety asks if you will attend church with them.

- In your AA meeting a peer announced that she relapsed last week. The same peer shows up for a job interview at your place of work where there is a one-year sobriety policy in effect.

- Your office-mate seems to be a whiz at paperwork. You watch closely for helpful hints only to discover that she pads her time and writes notes on clients who may have been present, but she did not serve.

- A member is short on cash and can’t make rent. He has a spare bicycle that will be the perfect size for your son.

- You see a colleague from another agency at bar with a mutual client.
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