

# Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover

# Creating Environments of Hope and Wellness: Recovery in Hospital Settings

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**Recovery to Practice**  
Resources for Behavioral Health Professionals

Substance Abuse and Mental Health Services Administration  
**SAMHSA**  
www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

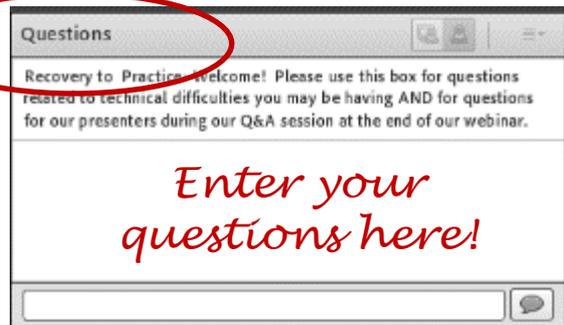
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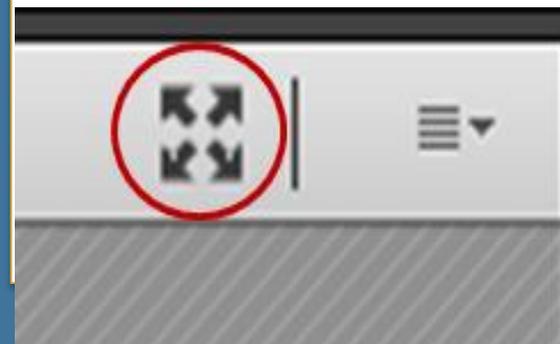
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# Resources and Continuing Education

## “Download Materials” available now

- Speaker bios
- Presenter materials

## Available at end of webinar

- Certificate of Participation
- Link to NAADAC Continuing Education
- Link to participant feedback



# Recovery to Practice

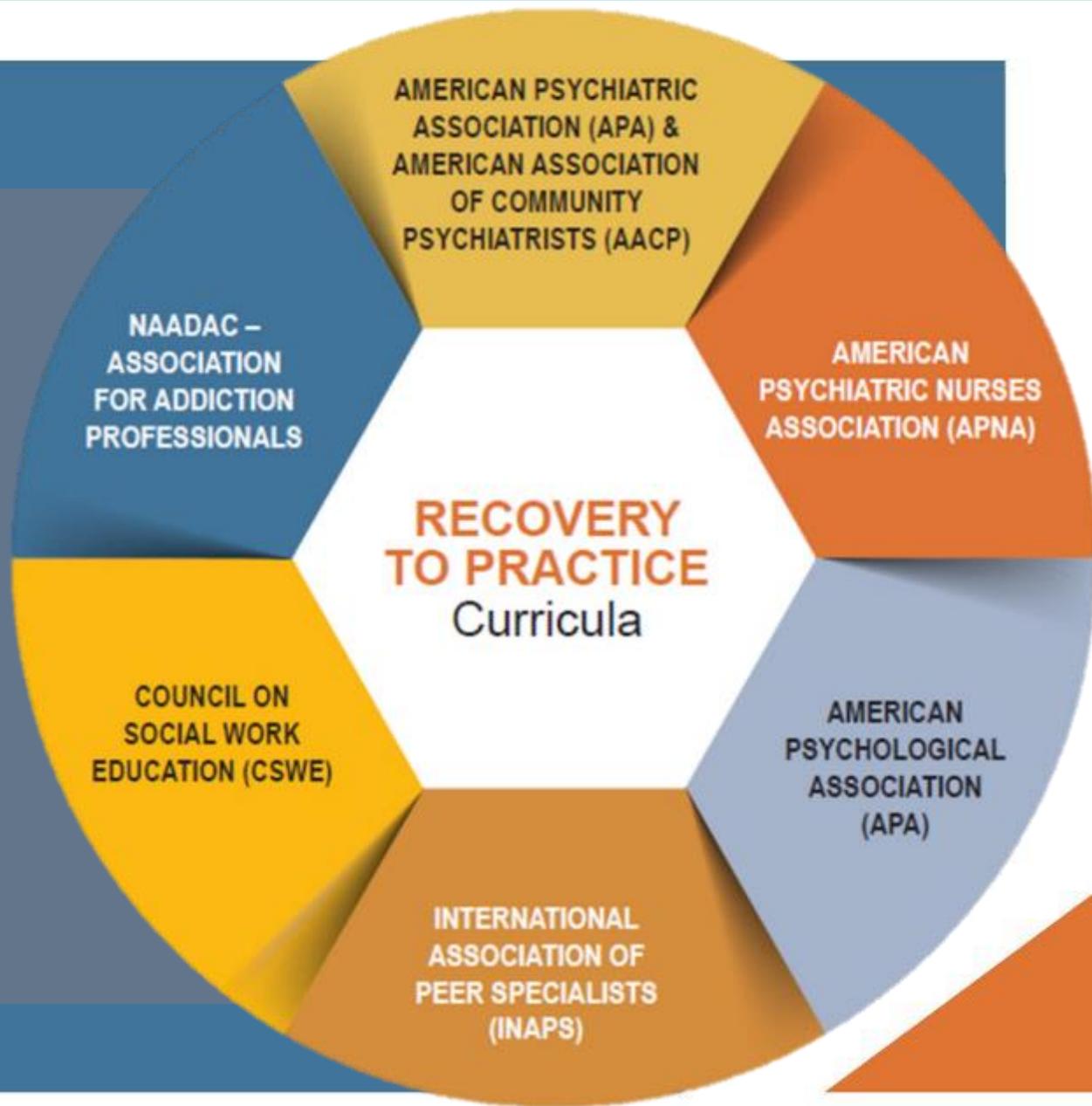
A graphic illustration featuring several interlocking gears in various colors (pink, light blue, green, orange, blue, yellow) arranged in a horizontal line. Two dark grey hands are shown reaching up from the bottom, with one hand holding a green gear and the other holding an orange gear, symbolizing support and collaboration.

Through education, training, and resources the Recovery to Practice (RTP) program supports the expansion and integration of recovery-oriented behavioral health care delivered in multiple service settings.



**SAMHSA's**  
**10 Principles**  
**and**  
**4 Dimensions**  
**of Recovery in**  
**Behavioral**  
**Health**

RTP  
discipline-  
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curricula



**FREE**  
**webinars on**  
**recovery-oriented**  
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# RTP Training and Technical Assistance

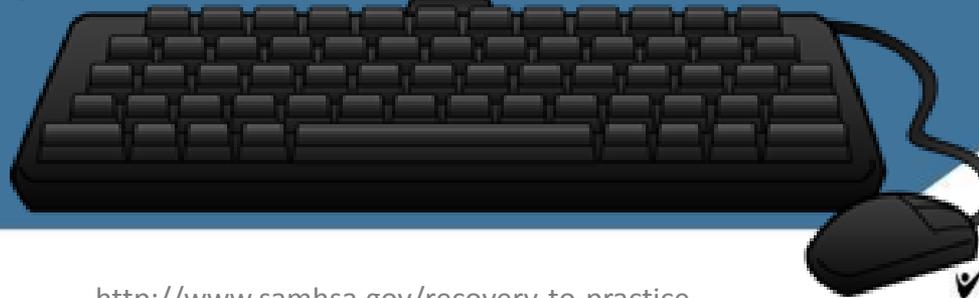
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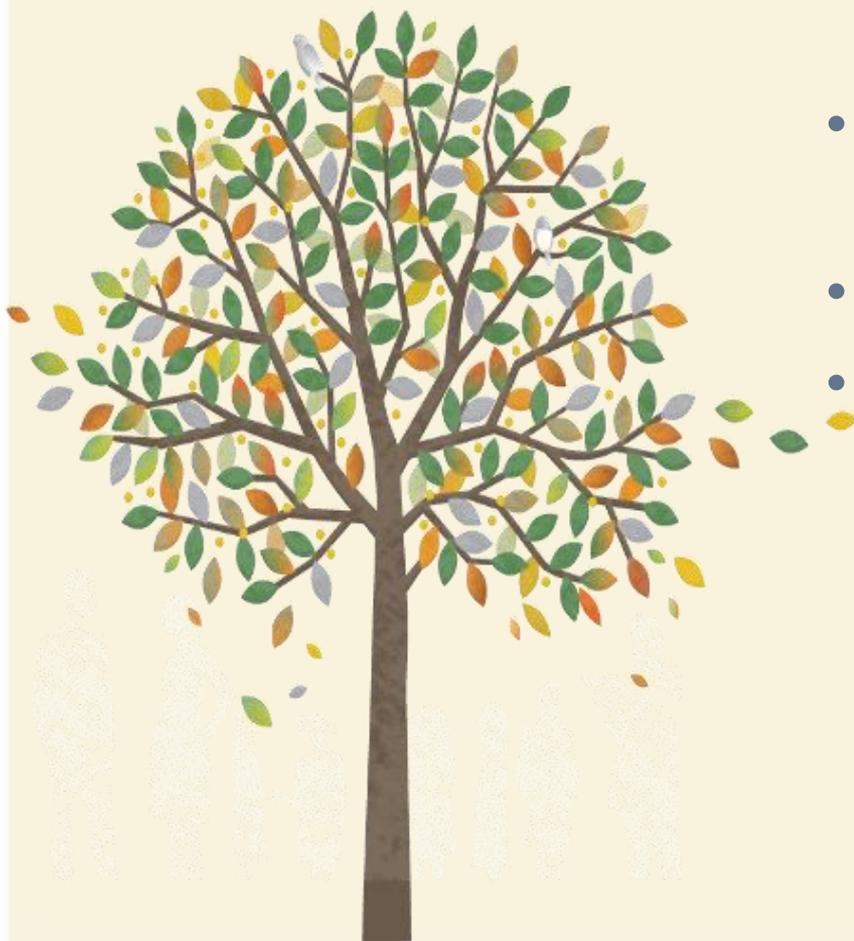
## **Margaret (Peggy) Swarbrick, PhD, FAOTA**

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# Recovery-Oriented Support in Hospital Settings



- ***Daily opportunities exist*** — even in inpatient and forensic settings
- ***Individual interactions matter***
- ***Change is challenging***
  - Guiding principles
  - Concrete steps for transforming services

# Agenda

- Wellness framework
- Practical strategies for creating hope-filled recovery-oriented environments
- Recovery Network Program (example)
- Staff development and training
- Role of psychiatrists and the multidisciplinary team
- UBHC “Wellness Week” (example)

## Emotional

Developing skills and strategies to cope with stress.

## Financial

Satisfaction with current and future financial situations.

## Environmental

Good health by occupying pleasant, stimulating environments that support well-being.

## Social

Developing a sense of connection and a well-developed support system.

## Intellectual

Recognizing creative abilities and finding ways to expand knowledge and skills.

# WELLNESS

## Spiritual

Search for meaning and purpose in the human experience.

## Physical

Recognizing the need for physical activity, diet, sleep, and nutrition.

## Occupational

Personal satisfaction and enrichment derived from one's work.

# Wellness Framework

(Re)-establish valued roles

Work towards personalized recovery goals

Empower the person (and supporters) to take personal responsibility

Offer education, guidance, and support

Motivation for change: health / control

# Physical Wellness Strategies

- Encourage and involve people in balanced daily exercises
- Medication education
- Psycho-education groups on physical health needs, stress reduction
- Structure unit routine to allow for a balance of productive activity, positive social support, emotional expression, and positive interactions.



# Spiritual Wellness Strategies

- Explore, respect, and add personal values, beliefs, and life goals into treatment plan
- Provide opportunities for self-reflection, meditation, and relaxation
- Respect personal values and beliefs
- Link and connect with cultural, religious, and/or spiritual traditions that enhance self-identity and a sense of belonging, including chaplaincy services within hospital settings



# Emotional Wellness Strategies

- Build self-esteem and control through involvement in successful activities that allow for expression of choice, self-control, and self-responsibility
- Promote healthy, constructive expression of feelings, needs, wishes, values, beliefs and goals

# Social Wellness Strategies

- Engage in respectful communication
- Expose staff and persons served to peer role models including in direct service and administrative roles
- Offer opportunities to work cooperatively to maintain community connections
- Link to family and supporters, including them as desired by person



# Occupational / Wellness Strategies

- Document strengths, gifts, talents
- Offer programming that is congruent with personal values, interests, and beliefs
- Integrate “asset mapping” activities
- Discharge planning includes helping the person to participate in work and/or volunteer activity as well as any activity or tasks that the person believes will provide pleasure and satisfaction



# Intellectual Wellness Strategies

- Provide educational materials to help people keep up on current issues and ideas
- Encourage and offer activities that enhance “brain power”
- Explore and educate persons served on healthy behaviors and coping skill strategies (choices and alternatives)

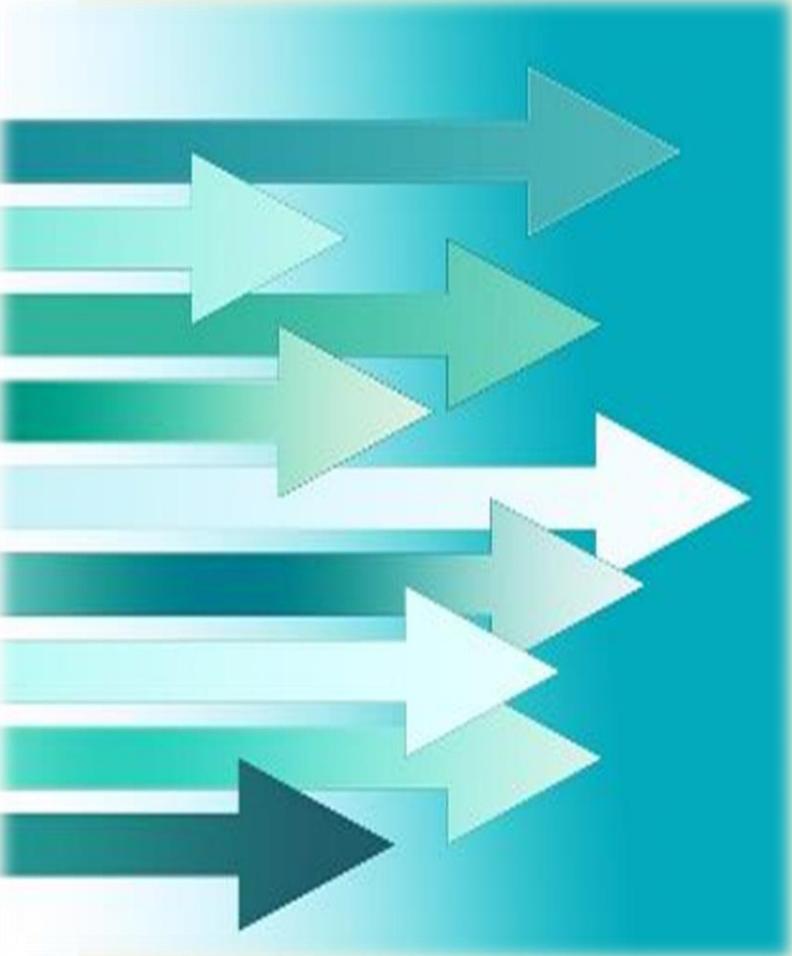


# Environmental Wellness Strategies

- Living, learning and working spaces are clean and free of clutter and debris
- Pleasant, shared living spaces
- Décor reflects cultural preferences
- Quiet space for relaxation
- Ward shouldn't be noisy, over-stimulating.
- Music that promotes learning / relaxation



# The Recovery Network Project

- 
- State hospital setting
  - Peer-operated program
  - 10 to 13 people
  - OT / Rehabilitation staff
  - Medical Security Officers sometimes participate
  - Participant and staff surveys
  - Graduation Certificates

# Recovery Network Training

- Philosophy and content: Both peer and staff educators
- Trainings as peer consultants
- Partnership and collaboration
- Vitality of life experiences
- Clinical Services: Consultants refer peers to hospital clinicians
- The Recovery Journey and role modeling

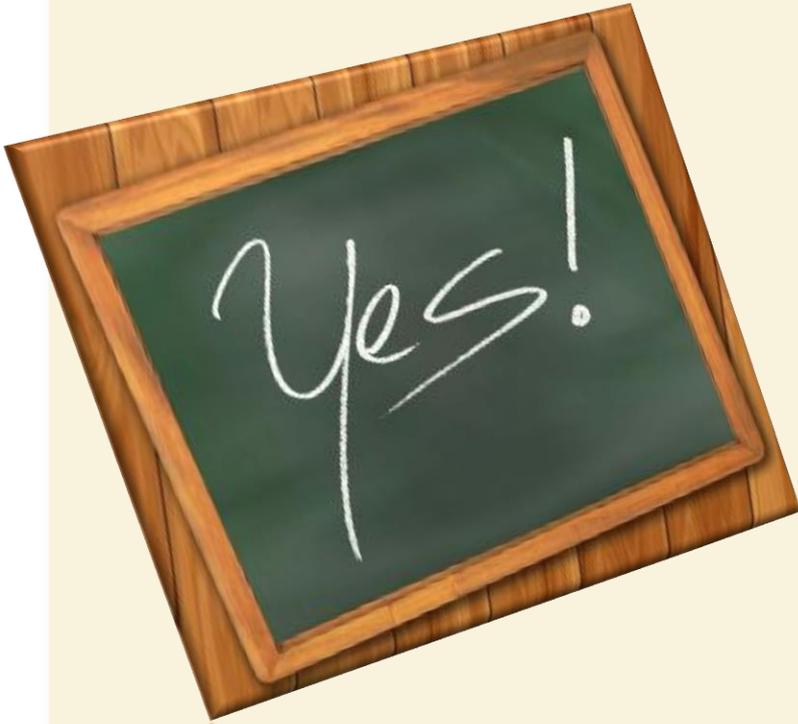


# Outcomes



- Group participants learn to formulate ways to promote their own recovery and have hope.
- Empowering experience for both patients and peer consultants
- Opportunity for both patients and staff to see actual successful recipients of mental health services living successfully in the community

# Staff Development for Positive Change



- Include peers as trainers
- Train *all* staff in your work setting
- Make part of new employee orientation
- Pay attention to staff wellness, too!

The background of the slide features a large, faint, circular seal of Rutgers University. The seal contains the text "RUTGERS UNIVERSITY" and "THE STATE UNIVERSITY OF NEW JERSEY" around its perimeter, with a central emblem. The seal is rendered in a light red color, matching the overall theme of the slide.

# RUTGERS

THE STATE UNIVERSITY  
OF NEW JERSEY

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# Holistic Care: Evidence-Based Rationale

- Individuals diagnosed with serious mental illness are at higher risk for medical problems such as high blood pressure, heart disease, and diabetes (de Hert et al., 2010)
- On average, persons with serious mental illness die prematurely compared to the general population (Walker et al., 2015;
- Premature deaths due to medical problems alone account for more deaths than suicide (Parks et al., 2006)
- Co-occurring mental and physical illness results in decreased work productivity (Katon, 2009)

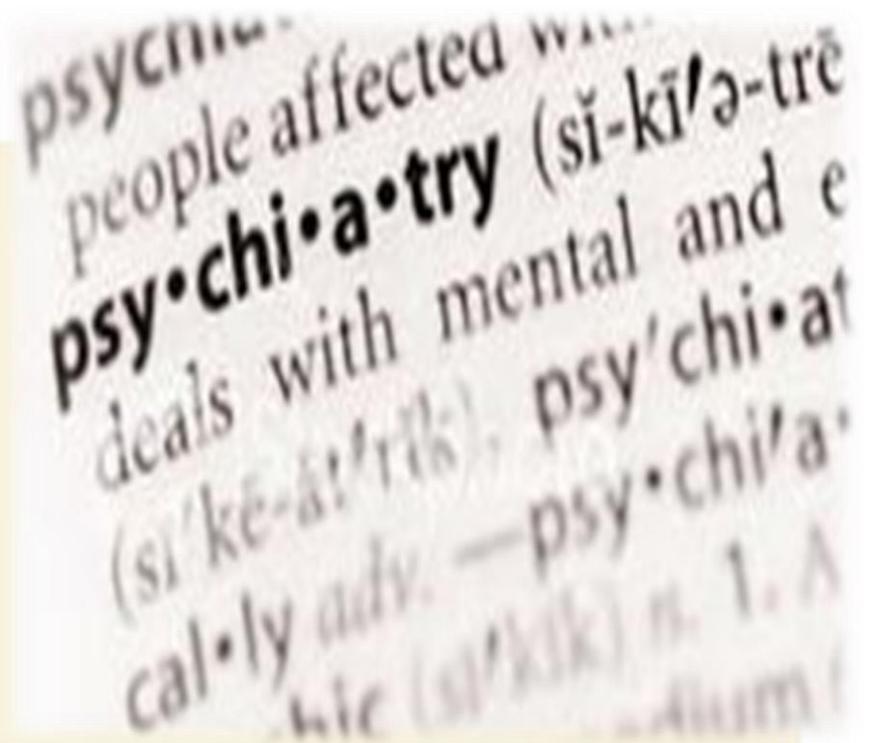
# Psychiatric Multidisciplinary Teams

- Coordinate efforts to instill hope and wellness in an acute psychiatric setting
- Address fragmentation of care
- Make-up of a multidisciplinary team
  - Traditional members
  - Incorporating non-traditional team members
- Continuity of care
  - Informational
  - Management
  - Relational



# Role of Psychiatrist

- Team leaders of multidisciplinary teams
- Set the tone to fully integrate physical health in mental health settings
- Most current standards of practice and care
- Screen for unintended or secondary effects of psychotropic medications
- Minimize metabolic effects of psychotropic medications
- Counsel on lifestyle choices



# Psychiatric Workforce Development: Immediate Needs

- Diverse psychiatric physician workforce
- Focused training
  - Physical care integration
  - Recovery-oriented care
  - Trauma-informed care



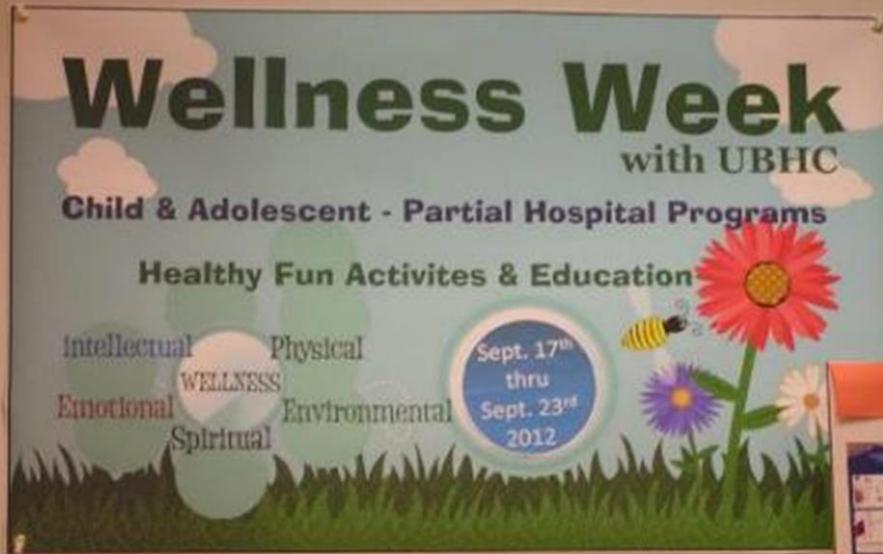
# Take Action Behavioral Health Organizations!



# Wellness in Practice: Rutgers UBHC Celebrates National Wellness Week

- Wellness planning meetings with UBHC “Wellness Champions”
- Distribution of SAMHSA announcement and Wellness Initiative materials
- UBHC Newark Adult Health And Wellness Fair
- UBHC Newark Child and Adolescent Wellness Week events
- UBHC Newark, Piscataway, and Monmouth Junction Adult Partial Hospitalization wellness events
- Outpatient Wellness Groups
- UBHC Intensive Family Support Services of Middlesex County wellness fair
- Centennial Ave staff wellness fair
- UBHC Piscataway wellness fair
- UBHC staff lunch and distribution of “Learn Mindfulness” flier and many more

# Take Action Behavioral Health Organizations!



Rutgers University  
Behavioral Health Care  
National Wellness Week  
Activities

# Take Action Behavioral Health Organizations!

The Monmouth Junction Partial Hospital Program won **first place** at the **5th Annual New Jersey Behavioral Health Quality Improvement Fair**.

The project, titled “Step Into Better Health”, focused on the effects of wellness groups with aerobic exercise on mental health in adults with schizophrenia.



# Take Action Behavioral Health Organizations!



Rutgers University Behavioral Health Care (UBHC) teaches heart-healthy wellness.

# Take Action Behavioral Health Organizations!

## Health Promotion, Prevention, and Wellness Screenings at UBHC's Health Fairs



# Why Integrate Physical Health into Behavioral Health Care?

*Early death from medical conditions prevents recovery from mental illness.*

*It's a medical fact that once you're dead of a heart attack you cannot recover from schizophrenia.*

~Joe Parks, M.D.

Director, Missouri Institute of Mental Health

Distinguished Professor of Science, University of Missouri - St. Louis

Medical Directors' Council of the National Association of State Mental Health Program Directors  
(NASMHPD)

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**Recovery to Practice**

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# Coming up soon!



- **January 19: Supporting recovery in acute care and emergency settings**
- **January 26: Recovery-oriented community-focused responses to behavioral health crises**
- **February 2: Hospital diversion and alternatives in crisis response**



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