

Family Caregiver Community of Interest Webinar Series

Promising and established
practices for family caregiver
engagement

Today's Webinar:
**Using the Pyramid of Family
Care to Guide Family
Centered Practice**

April 27, 2017



Canadian Mental
Health Association
Peel Dufferin
Mental health for all

Association canadienne
pour la santé mentale
Peel Dufferin
La santé mentale pour tous

camhPSSP
Provincial System
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Housekeeping

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- This webinar is being recorded and will be posted on www.eenet.ca.
- We would appreciate having your feedback on today's webinar. A link to an online survey will be provided towards the end of the webinar. Thanks in advance for the 5 minutes of your time to complete our online feedback survey. Some collected data from the webinar might also be used for reporting (e.g. poll questions).

Family Caregiver Community of Interest

- Provincial forum for knowledge exchange and collaborative knowledge creation focused on issues related to **family caregivers of individuals with mental health and addictions issues.**
- Convene a range of stakeholders from across and beyond Ontario's mental health and addictions system to **share and build on existing forms of evidence to improve planning, practice and policy.**

Join our online community!

www.eenetconnect.ca/g/caregivers

Keep up-to-date!

<http://eenet.ca/project/family-caregiver-community-interest>

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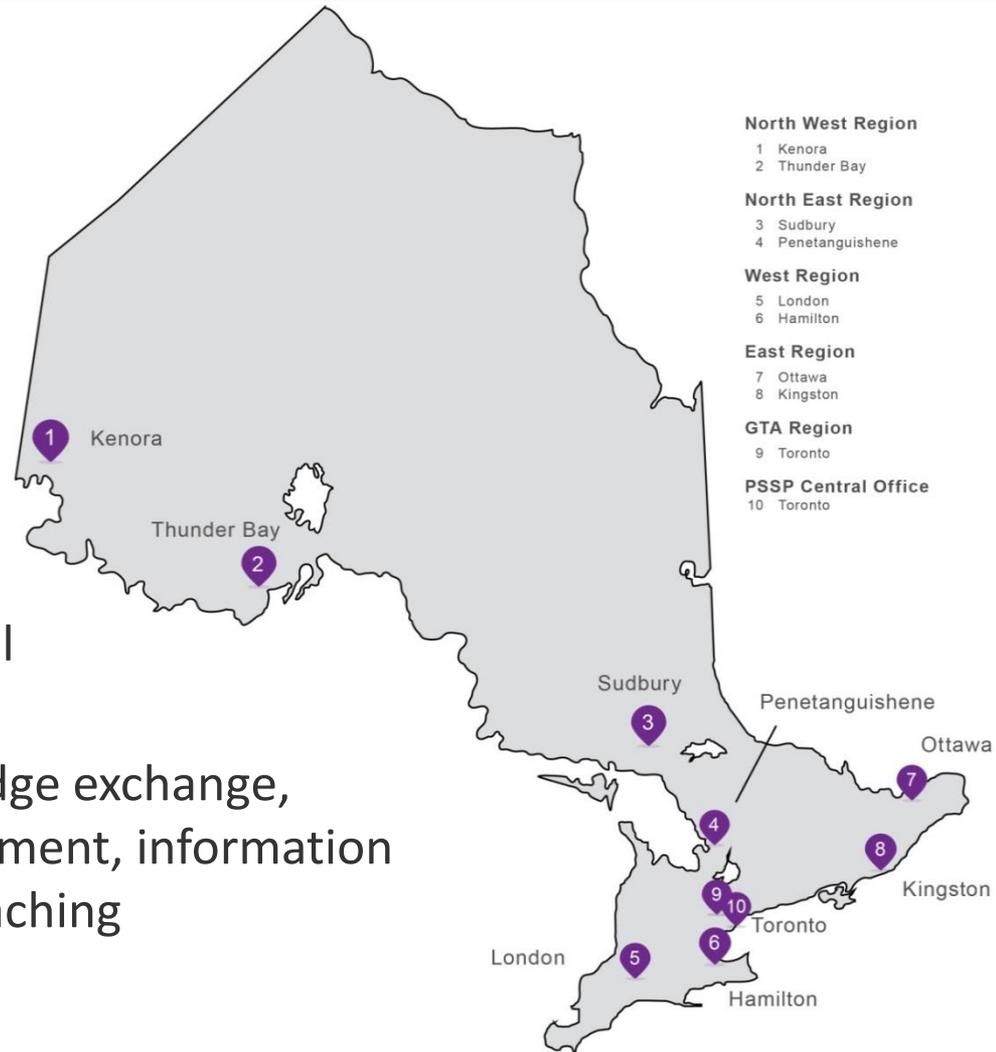


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camh PSSP

Provincial System
Support Program

- PSSP houses **EENet**
- PSSP moves evidence to action to transform MHA systems and improve lives
- Supports Ontario's 10-year Mental Health and Addictions Strategy
- Capacity and expertise in knowledge exchange, implementation, equity & engagement, information management, evaluation, and coaching





Ontario Family Caregivers'
Advisory Network

Ontario Family Caregiver Advisory Network

in support of Mental Health and Addiction

Lead Agency for the **Family Caregiver Community of Interest**



Ontario Family Caregivers'
Advisory Network

OUR PURPOSE:

TO build a strong network of family groups who have the shared goal of enhancing mental health care and addiction services;

TO foster relationships and the exchange of information between individuals and organizations involved in the provision of mental health and addiction care; and

TO educate and encourage communication and partnerships between family caregiver groups.



Ontario Family Caregivers'
Advisory Network

OUR MISSION:

To develop a community of Ontario family caregiver organizations in mental health and addictions through information sharing, supporting strong partnerships and providing a collective voice.

OUR VISION:

An Ontario Mental Health and Addictions healthcare system that values and empowers family caregivers.



Ontario Family Caregivers'
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Please visit our website

www.ofcan.org



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Using the Pyramid of Family Care to Guide Family Centered Practice

Leanne Needham &
Janet Durbin

Objectives

1. Review evidence on barriers and facilitators to supporting families of individuals with mental health problems
2. Introduce the Pyramid of Family Care to guide delivery of family support
3. Describe use of the Pyramid for planning, delivery and evaluation of family-centered services at CMHA Peel Dufferin

Facilitators and Barriers to Implementing Family Support

Research team: J. Durbin, A. Selick, N. Vu

Knowledge users: G. Langill, K. O'Connor

HSRF Grant: Caregiver experience (E. Lin)

Approaches to Family Support

- 1950s: Family therapy
- 1980s: Family as partner with support needs
- 1990s: Family psychoeducation
 - structured, multiple sessions, multi-family
 - Robust evidence, guidelines (Dixon, 1999, 2009)
- Paradox – strong evidence but low uptake (Luckstead, 2012)

Family Support in Early Psychosis Intervention (EPI)

- EPI targets young adults 14-35, many living at home (~70%)
- EPI families are new to caring
- EPI – international model of care includes family support
 - client recovery, maintain their own wellbeing
- Ontario released EPI Program Standards 2011
- EPI sector surveys on Standards implementation (2012, 2014)
 - different structures
 - moderate delivery
 - challenges: time, training, materials, family uptake

Literature review – Facilitators and Barriers to Implementing Family Support in EPI (Selick, 2017)

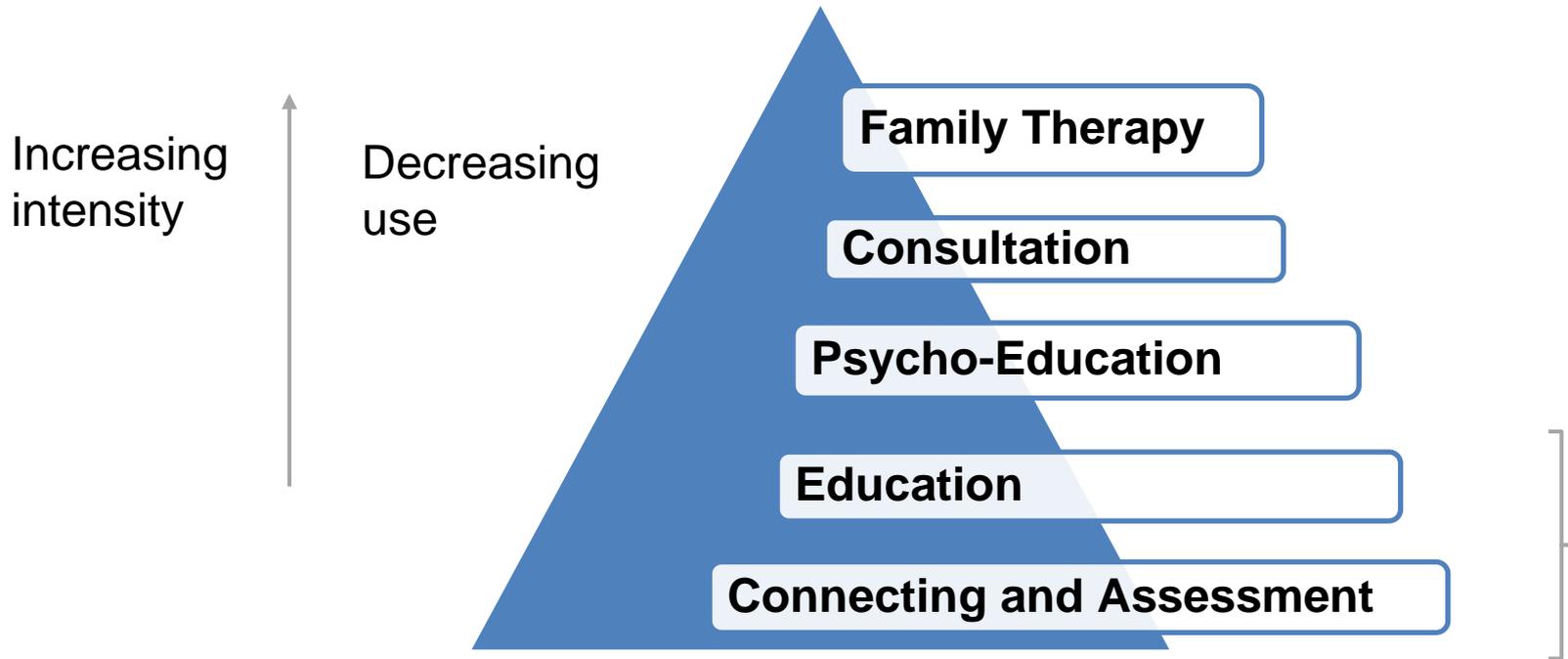
- Small literature, most studies multi-family psychoeducation
- Barriers
 - Staff: training, supervision, time, tools
 - Families: access, support preferences, change over time
- For many a lower level of support is sufficient (Slade, 2007)
- Flexible responsive support options (Cohen, 2008)
- ‘No blueprint exists for incorporating family work into the everyday practice’ (Mottaghipour/05, p2)

Pyramid of Caregiver Support

- Initially proposed in Australia (Mottaghipour, 2005, p2);
- Recommended in 'Guidelines for a comprehensive service system to support family caregivers of adults with MH problems & illnesses (MHCC, 2013)
- Tiered model of family support options
 - ➔ Most families require minimal supports
 - ➔ If most family members have basic needs met, only a small portion will need specialized services
 - ➔ It is within the scope and competence of generalist mental health providers to address the basic needs of most family caregivers
 - ➔ 'minimal sufficiency principle' (Cohen 2008)

MHCC Pyramid of Family Care

(Mottaghipour, 2005; MHCC 2013)



All front line workers should be offering the first two levels of care to their clients' families (minimum standard of care).

Potential Value - Pyramid of Family Care

- Clinical tool
- Service development
- Routine care → more systematic & standardized
- Measurement for improvement - intended, effective
- Training tool - capacity
- Research



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Utilizing the Pyramid of Care at CMHA Peel Dufferin

Leanne Needham, RSW, MSW
Family Work Lead

Agenda

- Family Support at CMHA Peel Dufferin
- Implementation
- Evaluation
- Lessons Learned
- Next Steps



CMHA Peel Dufferin

CMHA Peel Dufferin is the leading community mental health and addictions services provider in the region.

We support youth, adults and their families.

- Dufferin, Brampton, Caledon
- North Etobicoke, West Woodbridge
- Rexdale, Mississauga

Development of Family Services at CMHA Peel Dufferin

- July 2015 Family Worker hired for ACT & EPI
- 2015-2016 program development and implementation
- July 2016- Two Family Workers hired for north and south parts of CWLHIN
- 2016-2017 Program Implementation and Evaluation

Uses of Pyramid

- Clinical Tool
- Quality Assurance
- Standardization
- Training Tool
- Service Development
- Research

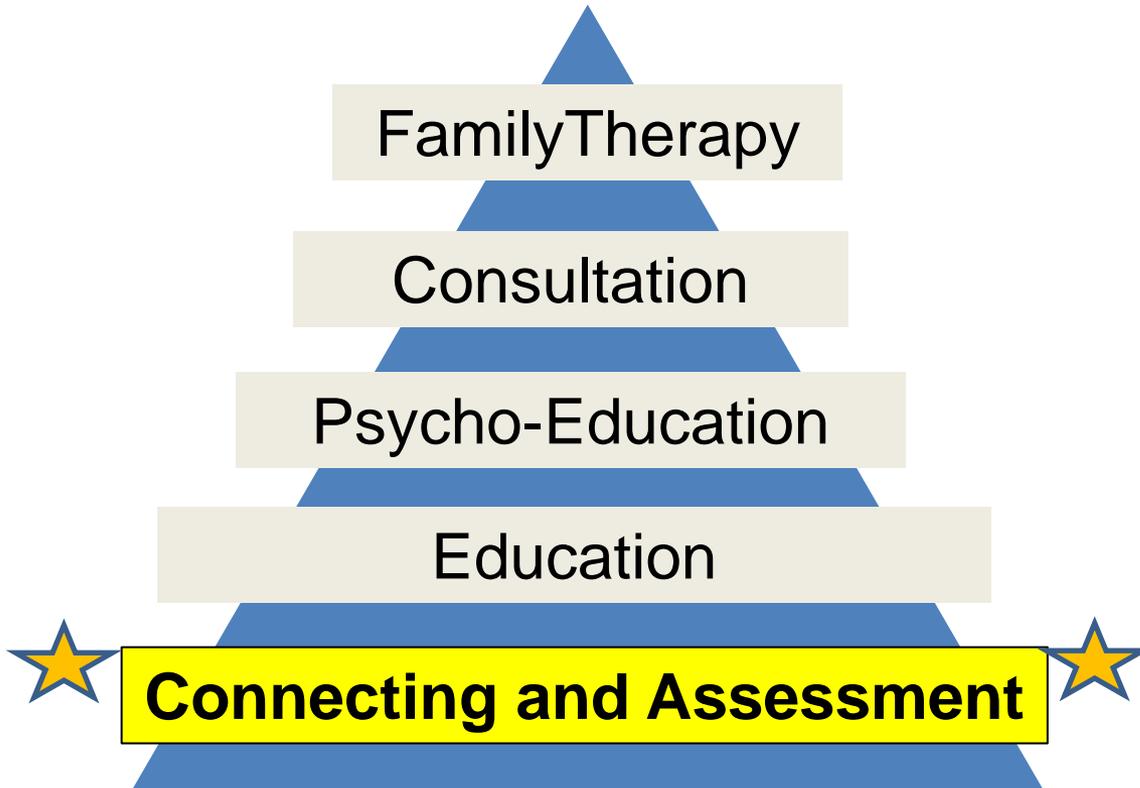
Choosing the Pyramid

- The pyramid addresses many of the recommendations made for improving access to support and education made in the MHCC Caregiver Guidelines
- The Pyramid supports a Family-Centered Care Model (Mottaghipour & Bickerton, 2005)
- Family support & education enhances recovery

Case Example

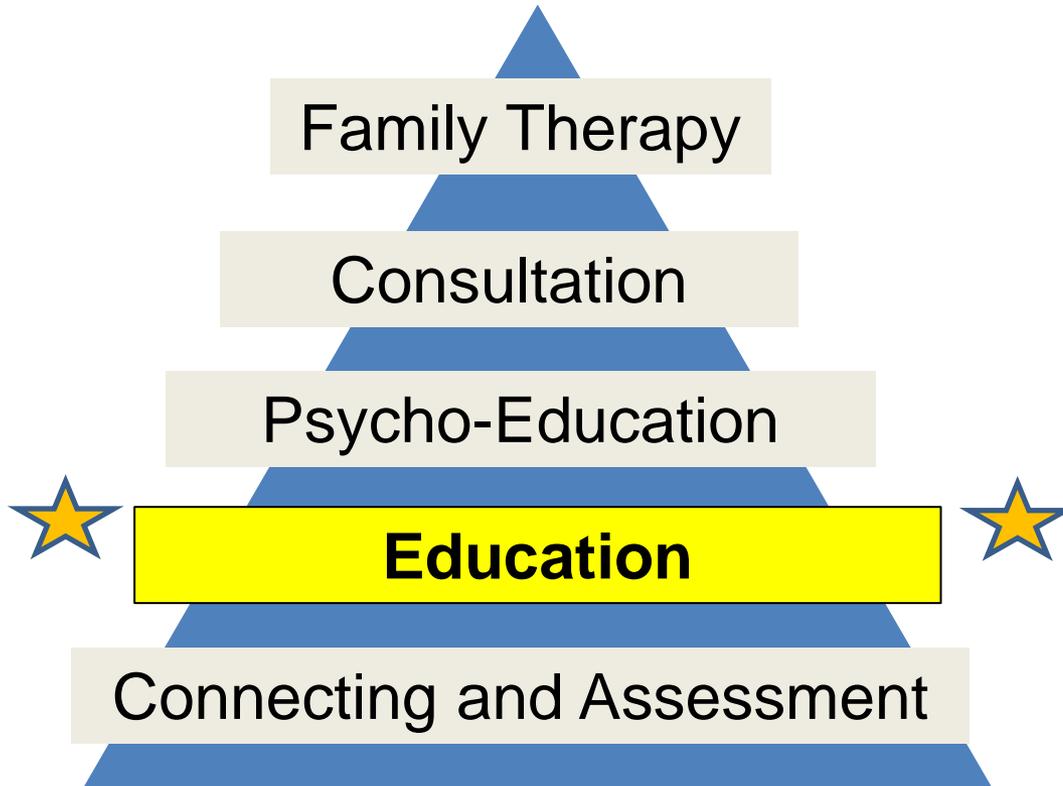
- 19 year old man presenting with psychosis and occasional use of marijuana
- Client moved to Canada at age 12 from a country engaged in civil war
- Lives at home with mom and younger sibling
- Client is guarded and somewhat suspicious
- Recently hospitalized after being found outside in winter without shoes and not making sense

Connecting and Assessment Tasks



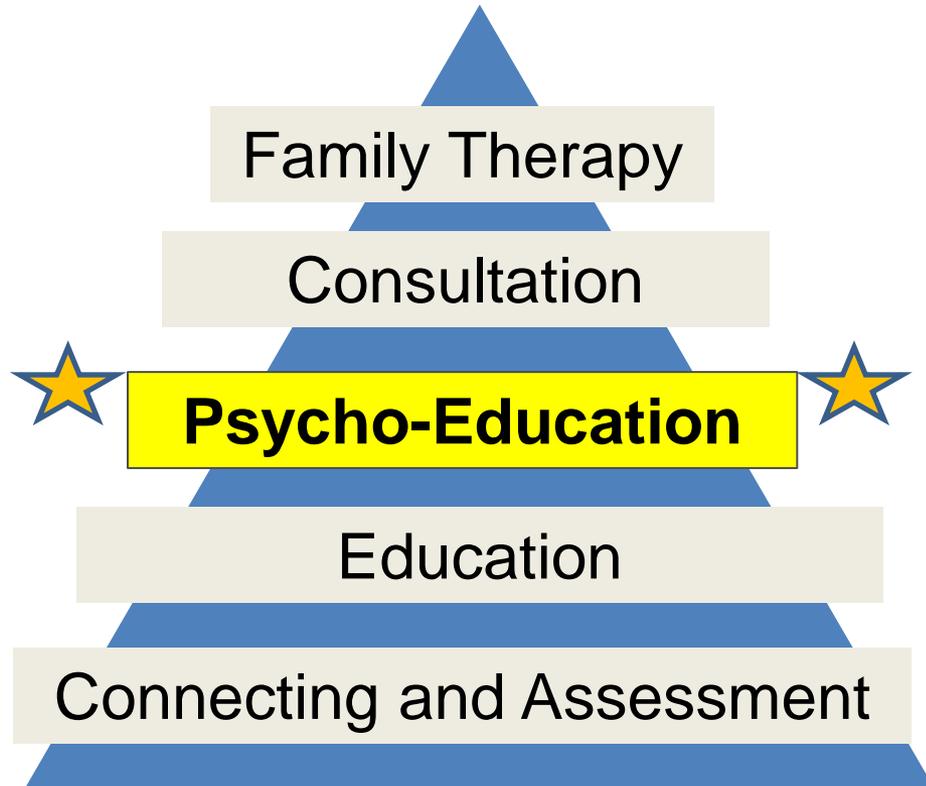
- Introduce mental health and family services
- Assess urgent and basic needs
- Explore understanding of mental health issue

Education Tasks



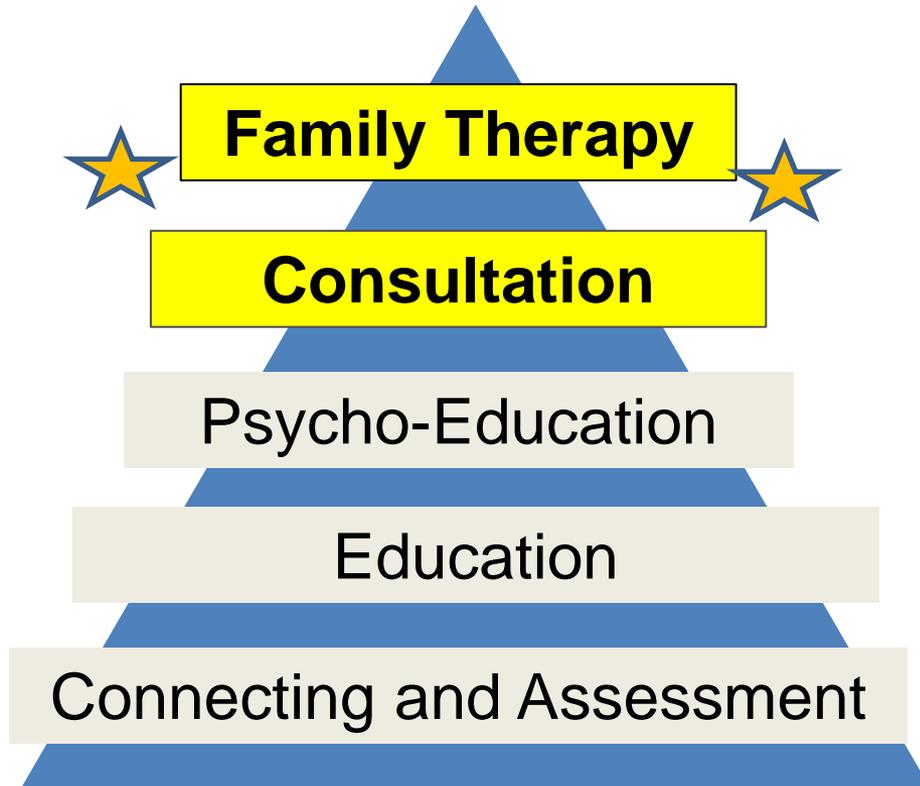
- Provide appropriate methods of education
- Stay open to your own bias and the family's understanding of what helps

Psycho-Education Tasks



- Offering appropriate menu of supports ie. Single family session versus multiple family group, online versus in-person, etc.

Consultation and Family Therapy Tasks



- Assessing service to date and ongoing needs
- Looking at appropriate referrals

Implementing the Pyramid



Evaluation

- SURVEY – families, staff (early results)
- Being implemented the way intended



Family Feedback

What was helpful?

- Skills & information
- Help navigating the system
- Advocacy in times of crisis
- Family meetings

Implementation Challenges

- Teaching new staff
- Booking time with family
- Confidentiality
- Large geography



Next Steps

- Build on types of interventions (on-line, one day vs multiple weeks)
- Continuing staff training-addictions, hoarding
- OPOC implementation

Discussion

What tiers of service does your program provide?

How do you get feedback about your service, could the pyramid be helpful in this?

Can the pyramid help in thinking about meeting the needs of diverse clients?

Can you think of other ways you can use the pyramid in your program?

References

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