

*Lessons Learned:
From Principles to Practice -
A Territory-wide Recovery-oriented
Movement in Mental Health
Occupational Therapy*

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Content

Why?

1. My path to Recovery-oriented practice (June)

How?

1. OT, our path to Recovery-oriented practice (June)
2. What our services users told us? (June)

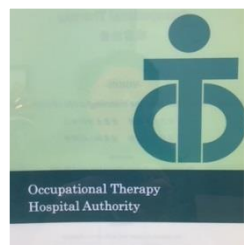
What?

1. What have we changed? (Mayie)

What else?

1. Discussion:
 - What are the challenges?
 - How can we keep the “Recovery” momentum going?

My paths to Recovery-oriented service



As an Occupational
Therapist

Mental Health Service
Provider



Administrator of Phoenix
Clubhouse

Why Recovery
for ME?

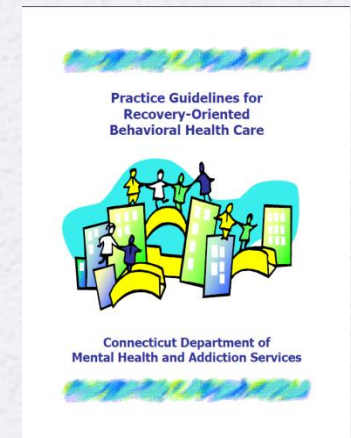
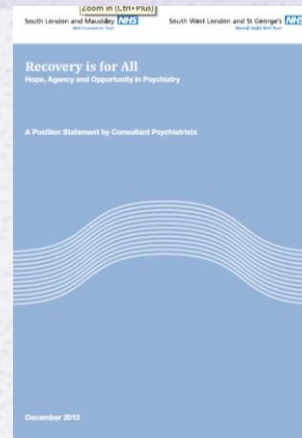


From definitions ...

Classical definitions:

- 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 within the 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 (Patricia Deegan 1993).
- Recovery refers to the lived or real life experience of people as they accept and overcome the challenge of the disability... they experience themselves as recovering a new sense of self and of purpose within and beyond the limits of the disability (William Anthony 1988).
- A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. (SAMSHA 2012)

... to documents...



Traditional approach	Recovery approach
Values and power arrangements	
(Apparently) value-free	Value-centred
Professional accountability	Personal responsibility
Control oriented	Oriented to choice
Power over people	Awakens people's power
Basic concepts	
Scientific	Humanistic
Pathogenetic	Biography
Psychopathology	Distressing experience
Diagnosis	Personal meaning
Treatment	Growth and discovery
Staff and patients	Experts by training and experts by experience
Knowledge base	
Randomised controlled trials	Guiding narratives
Systematic reviews	Modelled on role models
Decontextualised	Within a social context
Working practices	
Description	Understanding
Focus on the disorder	Focus on the person
Stress-based	Strengths-based
Based on reducing adverse events	Based on hopes and dreams

... comparison with traditional model...

... Occupational Therapy is Recovery-oriented?

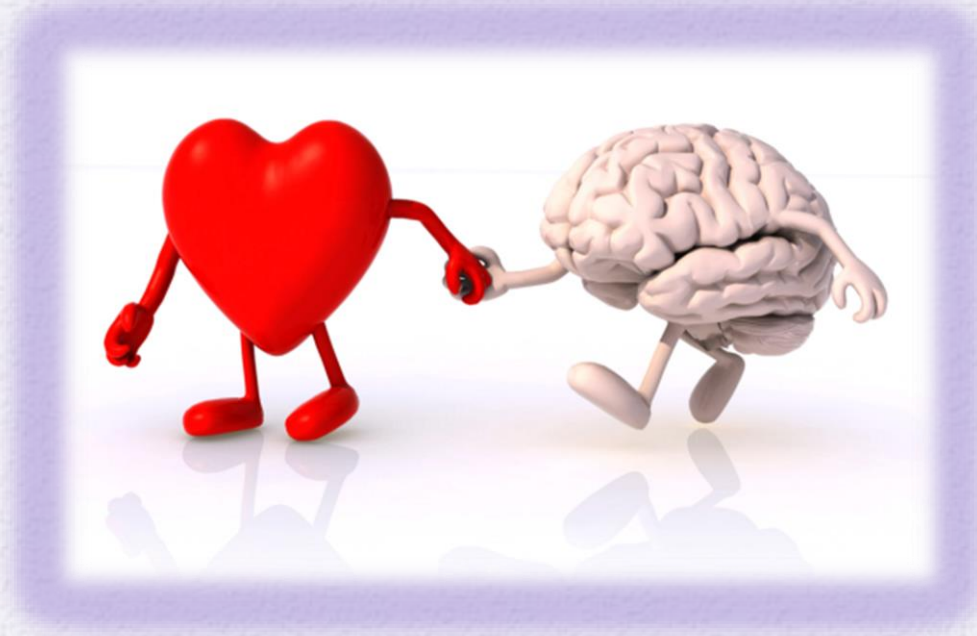
“All our clients shall lead a meaningful life of their choice.”

HA Occupational Therapy Vision

“The fundamental recovery principles are in full alignment with the philosophy of occupational therapy practice, which is inherently client-centered, collaborative, and focused on supporting resiliency, full participation, health promotion, and a wellness lifestyle.”

T Champagne AOTA

... to getting the accent of Recovery...



16th International Conference Seminar
Stockholm, Sweden





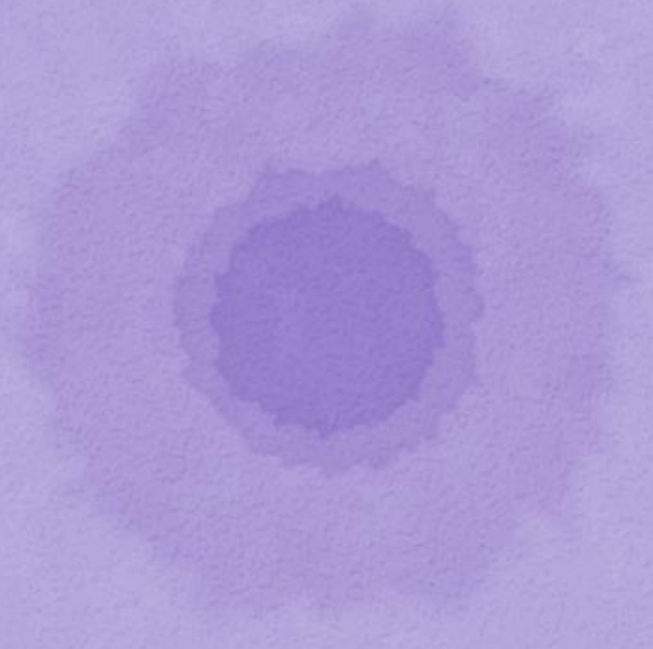
To be authentically Recovery-oriented

- Respect the experience of people in recovery
- Equality in the access to resources and decision making (use of consensus)
- An assessment or accreditation system that is organic and involves service users
- Peers involvement to combat isolation and bring hope

Our path to Recovery-oriented practice

Mental Health Occupational Therapy Services





Overseas Training

Eye opening

Overseas Training



**Institute of Psychiatry,
Maudsley International,
United Kingdom**



**The Program for Recovery and Community Health (PRCH)
Yale School of Medicine and Yale University
USA**

**Postgraduate Overseas Training
St. Vincent Mental Health, Melbourne,
Australia**





Task Groups and Framework

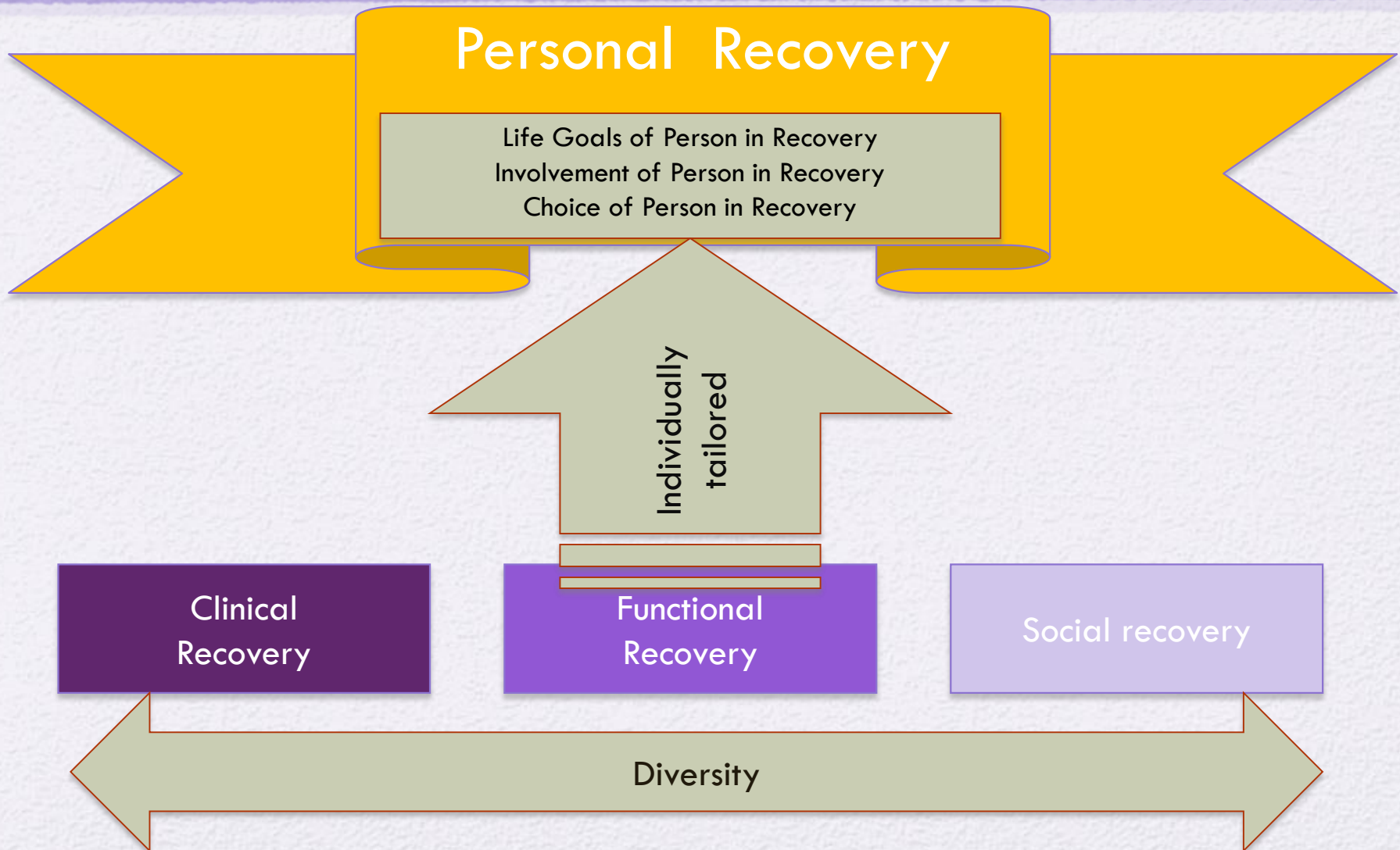
Start the ball rolling

Recovery-related OT Task Groups

- Recovery Framework
- Recovery Training
- Illness Management and Recovery Program development
- Transforming Relapse and Instilling Prosperity Program development
- Peer Support Worker development
- Recovery Self Assessment (RSA) Project

OT framework to promote Recovery

from Clinical Recovery to Personal Recovery using the 5 factors of RSA





Local Training

Reframing mindset

Build competency

Sharing

Training supporting Recovery Oriented Practices

- **Facilitate understanding** eg. Wellness Coaching
- **Focus on the person** e.g Model of Human Occupation, Functional-based training
- **Strength-based** eg. Solution Focused Therapy, Strength Model
- **Based on hopes and dreams** eg. Occupational Life Style Redesign, Positive Psychology
- **Foster Empowerment** eg. Motivational Interviewing, Family Intervention
- **Self Management** eg. Illness Management and Recovery (IMR), Transforming Relapse and Instilling Prosperity (TRIP), 5 Ways to Wellbeing, CBT on Insomnia

Training supporting Recovery Oriented Practices

- **Employment & Recovery** e.g. Helping people with mental illness to return to the job market 2015/16
- **Peer Support** e.g. Peer Specialist in enhancing Mental Health Service – Occupational Therapy Perspective 2015/16
- **Sharing of Practices** e.g. OT Clinical Conference: Recovery Oriented Practice of Occupational Therapy in Mental Health Service 2013/14

E-courseware

Recovery-oriented practice in Mental Health Service

Recovery-oriented practice in Mental Health Service



登入



「首次完成日期」
將會被記錄
(按此了解更多)

Recovery-oriented practice in Mental Health Service

首次發表於

2015-03

目標

- To provide basic knowledge of Recovery-oriented Practice - To outline Recovery-oriented Practice in HK - To serve as a reference to Recovery-oriented Practice ... [詳情](#)

CNE/CPD

CPD(OT):2.0

注意：學員於首次完成此課程後將獲得CNE/CPD學分，往後的課程溫習將不會獲得CNE/CPD學分。

測驗設定

滿分: 100 及格百分比: 60%

瀏覽器兼容性

桌面電腦瀏覽器：



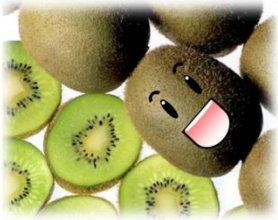
IE8-10 IE11 Firefox Chrome Safari (按此了解更多)



Program Development

Facilitate practice

Training Manual of TRIP Program



職業治療精神健康自助課程

奇異自助之旅



Transforming Relapse and Instilling Prosperity (TRIP)

4-session illness management program for in-patients
A territory wide double blinded randomized control study in HA



Illness Management and Recovery
(IMR)



Evidence-Based Practice KITs offered by the Substance Abuse and Mental Health Services Administration (SAMHSA) translated and territory wide randomized control study done in HA

**樂天生活
在五常 1**

常連繫

常連繫身邊的人，包括於家中、學校、工作間、社區裡的家人、朋友、同事和鄰居。我們應該把生活重心放在家人、朋友和鄰居，和他們建立一些聯繫，或與父母及親屬的聯絡。

**樂天生活
在五常 2**

常參與

請到戶外走走看看，嘗試一些令您感覺良好的活動，如散步、運動、閱讀、舞蹈或運動。重點是發掘一些合適自己能力及享受的活動。

**樂天生活
在五常 3**

常細味

請保持好奇心，請從每段美好光景、那些不平凡的經歷、困難克服變化、取得生命的一刻、於前行中、於奮鬥中、於朋友交談轉瞬、關心世界的發展及自己的感受。時刻對自己的經驗作出觀察，令自己覺得欣賞。

**樂天生活
在五常 4**

常學習

嘗試新事物，嘗試發掘一些未達了的新境，在學習過程中，您能不斷學習和成長。學習新技能、學習新知識或重新學習舊知識。學習能令您感到生活更有目的、令您更有動力、令您更有信心、令您更有成就。

**樂天生活
在五常 5**

常施予

照顧人及外人需要一點、當領導、與社區參與義務工作或社區服務。常聯繫及自修。將生活重心放在個人生活及活動，當您感覺滿足並想與他人聯繫。

**樂天生活
在五常**

“樂天生活 在五常”透過多元化的活動，體驗生活重整，提升身心健康狀態，活出正向積極、均衡快樂的人生。

醫院管理局
HOSPITAL AUTHORITY
醫院管理局康樂及護理服務部

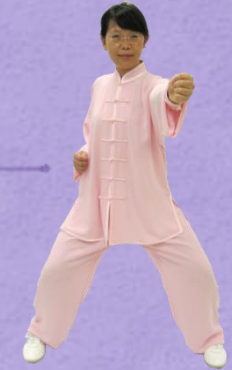
Five Ways to Well-being

Connect...
Be active...
Take notice...
Keep learning...
Give...

Evidence base project for improving people’s well-being from UK translated and single-centre study done in Kowloon Hospital



Wellness Promotion Activities



Qigong classes helping heart patients physically and mentally

By Sue
 Hong Kong's oldest newspaper, the South China Morning News, has a feature on Qigong classes for heart patients. The article discusses how these classes help improve physical and mental health. It mentions that Qigong is a traditional Chinese practice that involves slow, controlled movements and breathing exercises. The article highlights the benefits of Qigong for heart patients, including improved circulation, reduced stress, and enhanced mental clarity. It also notes that these classes are often held in community centers and are open to people of all ages and fitness levels.

Physical and Mindful Activities: Ba Duan Jin, Yoga, Tea art...





Occupational Lifestyle Redesign

Based on Positive Psychology and Behaviour Activation concepts helps people to achieve Wellness and improve Quality of Life by setting and achieving Occupational Goals.

STRATEGY

A paradigm shift for result using the Influencer Model

The Six Sources of Influence

	Motivation	Ability
Personal	<p><u>Service Users' Involvement</u></p> <ul style="list-style-type: none"> Service users' sharing Peer involvement in OT programs Peer support development group 	<p><u>Training on Recovery</u></p> <ul style="list-style-type: none"> Concepts Programs Related skills
Social	<p><u>Sharing of Good Practices</u></p> <p>Development of more than 100 local Good Practices and Leaderships since 2011</p> <p>For example :</p> <ul style="list-style-type: none"> Recovery story sharing Goal setting Celebrate achievements Hope instilling User led activities... 	<p><u>Occupational Therapy Framework for promoting Recovery-oriented practices in Psychiatric Services</u></p>
Structural	<p><u>Recovery survey with 20 settings in 7 clusters</u></p> <p>Chinese Recovery Self Assessment</p> <p>Total score: 3.174 (2011) Total score: 3.877 (2013) ($p=0.001$)</p> <p>Improvement in all 5 factors and in all settings</p>	<p><u>Development of Multi-cluster Recovery Based Programs and Studies</u></p>

What did our services users told us?
Recovery Self Assessment (RSA)



Recovery Self Assessment (RSA)

- The Recovery Self Assessment (RSA; O'Connell et al., 2005) is among the most widely used rating scales to facilitate reflection on the strengths and limitations of services within a recovery framework.
- This 36-item questionnaire has versions for administrators, service providers, family members/key supports, and person in recovery



RSA Subscales:

- **Life Goals** (how the system encourages clients to pursue individual goals and interests)
- **Involvement** (how the system allows clients to become involved in recovery-oriented programs)
- **Diversity of Treatment Options** (how the system offers a range of treatment options and styles)
- **Choice** (how the system takes into account client preferences and choices during the recovery process)
- **Individually-Tailored Services** (how the system helps clients tailor their treatment program to their individual needs)

RSA of OT Services in Public Hospitals

- All In, Day, Out and Community Psychiatric Occupational Therapy Services invited
- RSA surveys:
 - RSA-Administrator
 - RSA-Service Provider
 - Chinese RSA- Person-in Recovery
- In 2011, 2013 and 2016

CRSA-Service Users (5 Factors)

2011, 2013, 2016

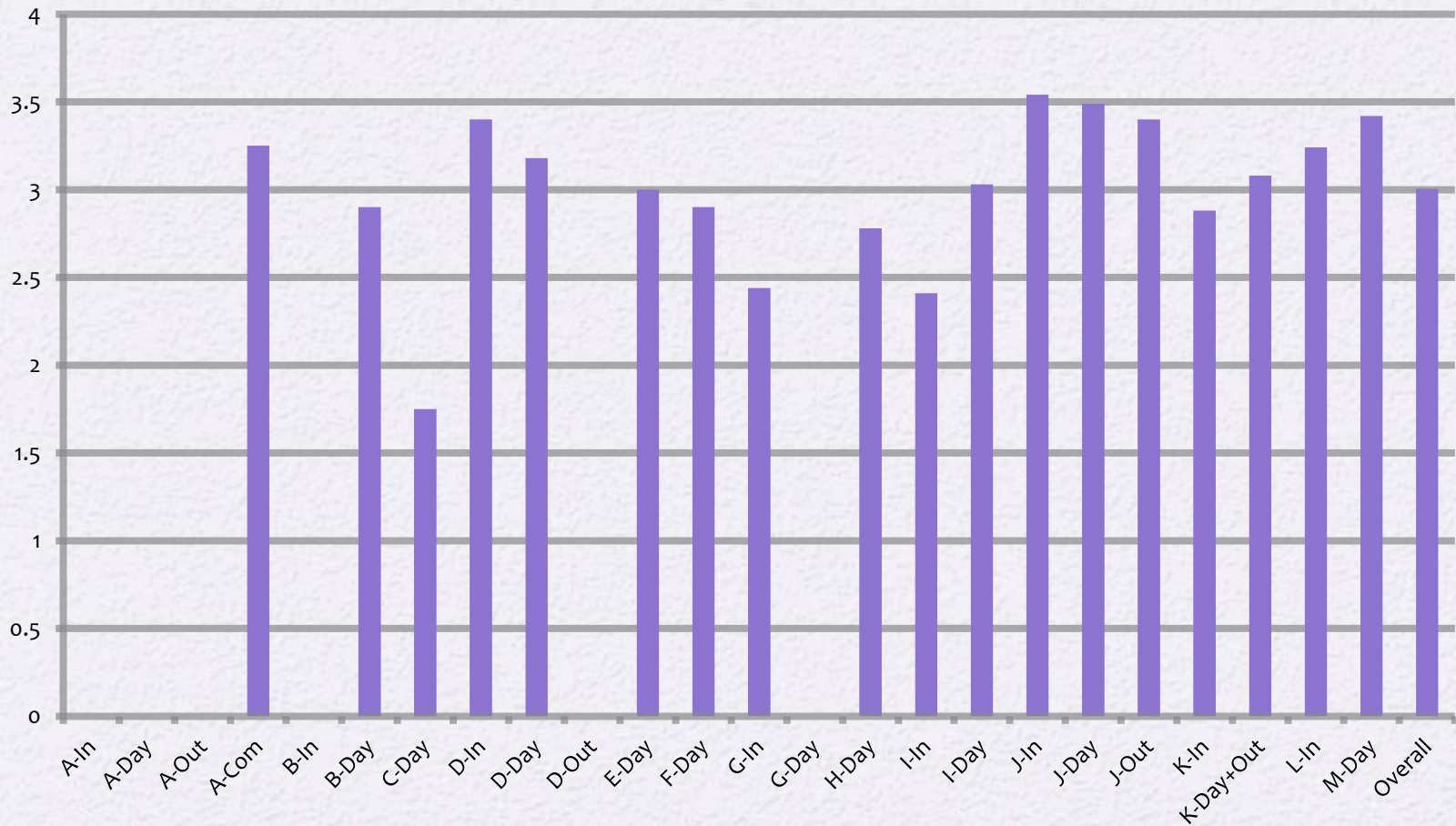




How the data helps

Continue Quality Improvement
Project

CRSA-Service User Total 2011

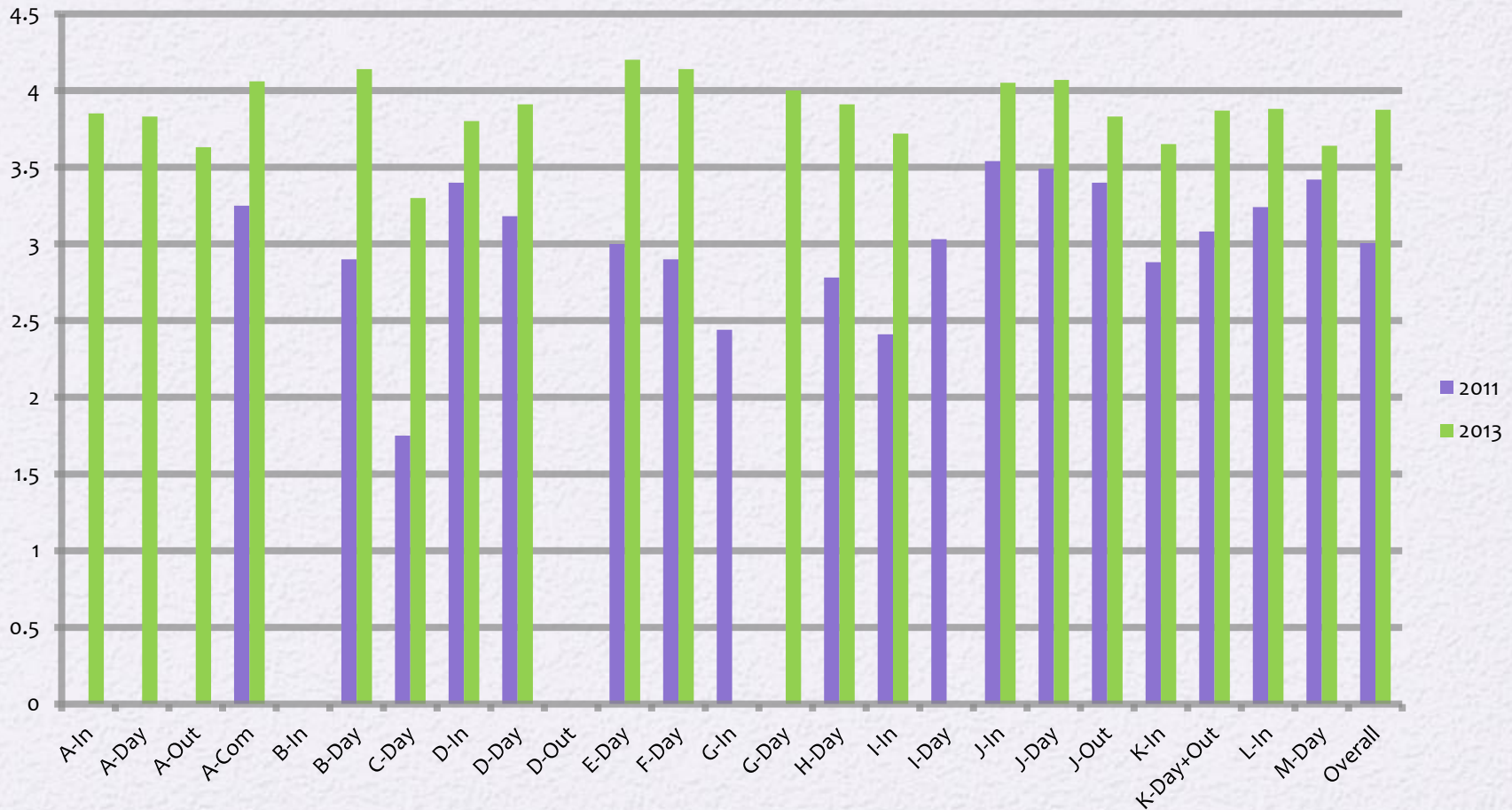


18/24 settings participated, result reported anonymously

Post 2011 RSA survey action

- Feedback data to settings and their bosses with other settings anonymous
- Therapists and service users sharing from “Top 3” settings
- Training supporting Recovery-oriented service

CRSA-Service User Total 2011 & 2013



20/24 settings participated, result reported with open label

Post 2013 RSA survey Action

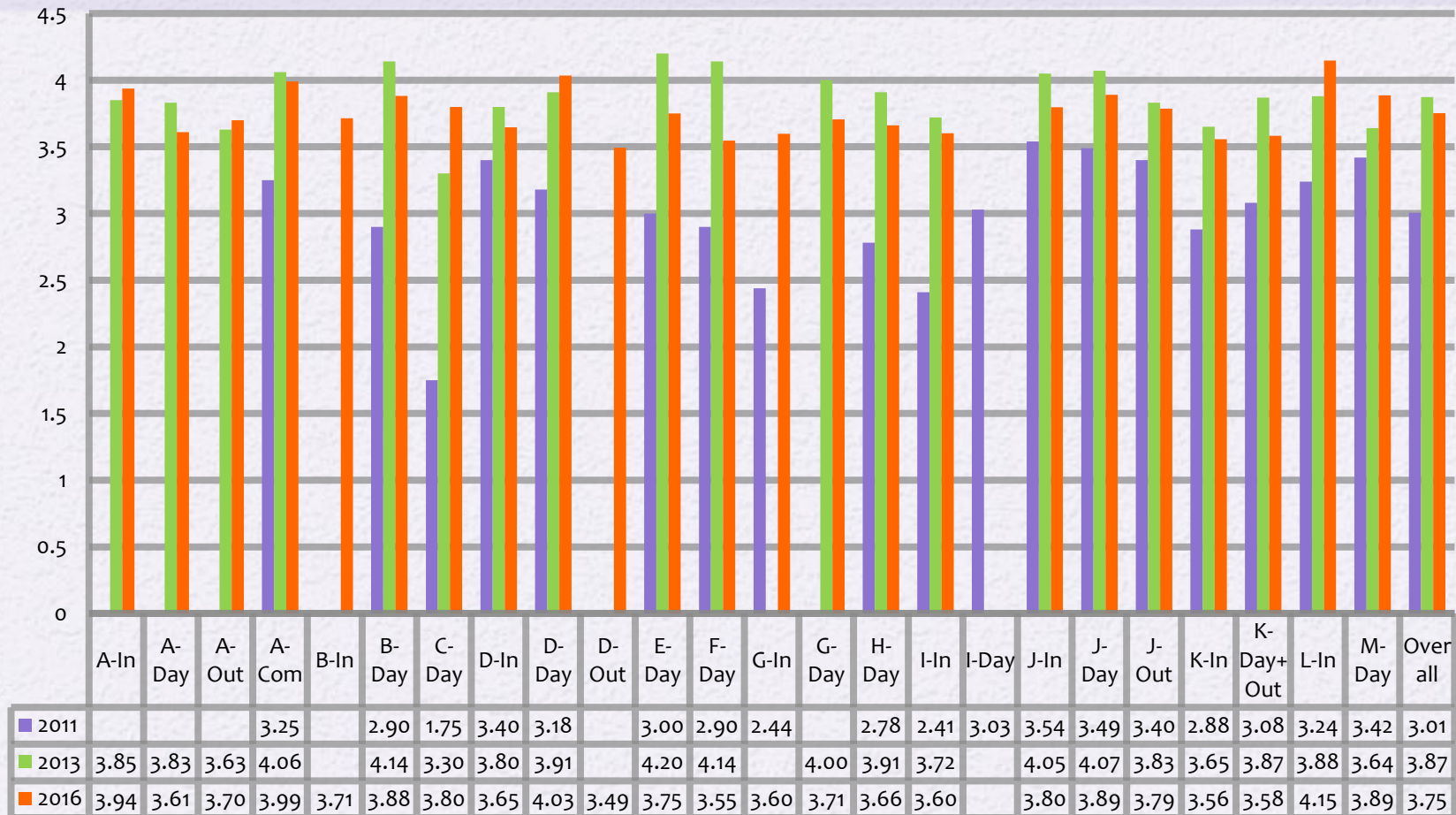
- Feedback data to settings and their bosses with “open label”
- Sharing from “Top 3 progress making setting”
- Investigate the “Missing data”

Missing Data

CRSA-SU with most “NA” or “Don’t Know”

4. I can change my clinician or case manager if I want to.
5. I can easily access my treatment records if I want to.
15. I am given opportunities to discuss my sexual needs and interests when I wish.
17. Staff help me to find jobs.
21. Staff offer to help me connect with self-help, peer support, or consumer advocacy groups and programs.
24. I am encouraged to be involved in the evaluation of this program’s services and service providers.
25. I am encouraged to attend agency advisory boards and/or management meetings if I want.
26. Staff talk with me about what it would take to complete or exit this program.

CRSA-Service User Total 2011,2013 & 2016



23/24 settings participated, result reported with open label, deleted "NA" and "Don't know"

Application of RSA

- Regular RSA survey every 3 years
- Chinese RSA-Service User validation study done
- Future analysis of the survey will base on local study findings
- **Poster presentation:** Chinese Version of the Recovery Self-Assessment Scale: Psychometric Evidence from Rasch Analysis and Reliability Estimates
- Andrew M.H. Siu¹, June Chao², Menza Chu², Siegfrid Lee², Ada Lo², Odelia Leung², Chris Auw², Victor Lee³, Will Chien¹

What we have changed

An example in a local psychiatric hospital
Castle Peak Hospital (CPH)

New Direction for Adult MHS

Hospital Authority Mental Health Service Plan For Adults 2010-2015

- A new strategic direction (vision of the service)

*“The vision of the future is of a **person-centred service based on effective treatment and the recovery** of the individual...”*

*...The new model will **focus on the recovery from mental illness** of individual people and support of those suffering from chronic illness.”*



Goal of the mental health
system

**creating an
environment
in which
recovery can
take place**

(Deegan)



Recovery is facilitated by **relationships**
and environments

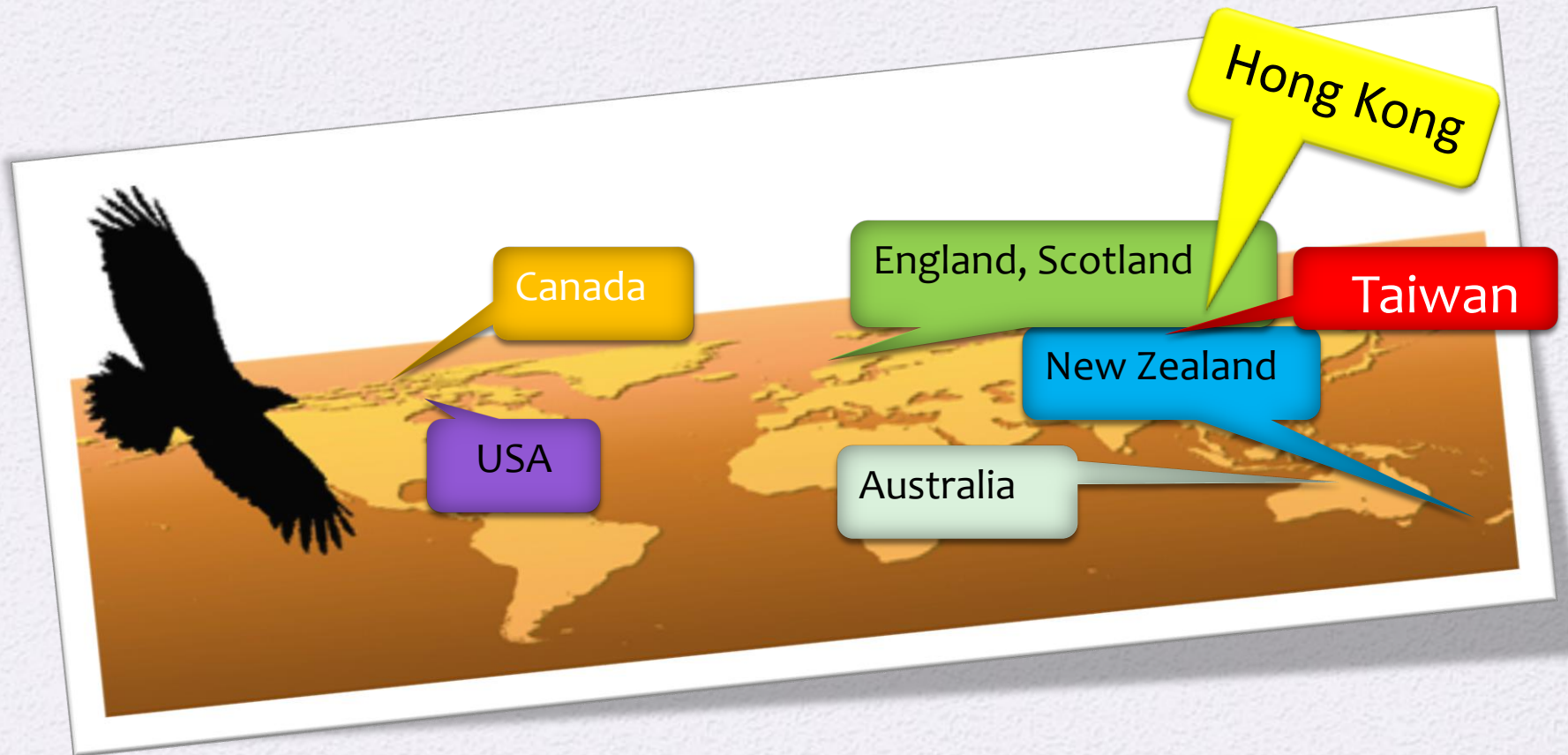
(PA Department of Public Welfare, Office of Mental Health and Substance Abuse Services.)

Recovery is what users do!

Facilitate recovery is what we do!

Recovery-oriented Practice

Global Trend of Mental Health Service Reform



Committee on Recovery-oriented Service
and Quality Improvement in NTWC
Psychiatric Services

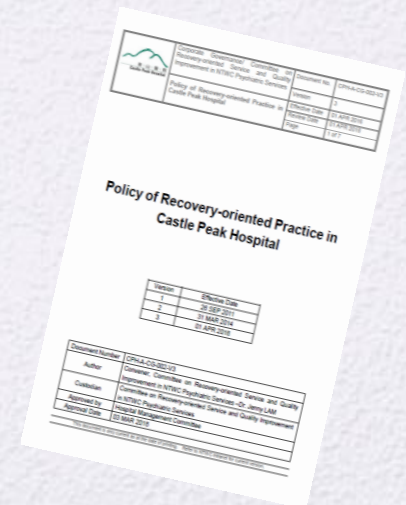
CPH Policy Statement on Mental Health Recovery



Policy on Recovery-oriented Practice in CPH

Mission Statement

“Castle Peak Hospital strives to promote the principles and implementation of Recovery-oriented practice for the psychiatric services in order to provide quality treatment with emphasis on recovery and with respect to human right.”



Working Definition **from**

Organization and Service Provider's

Perspectives

“Empowering people with mental illnesses to have effective self-management for their wellness and meaningful life with community participation.”



10 Principles

of Recovery-oriented Practice

in Castle Peak Hospital



Hope; Satisfying and
Meaningful Life



Empowerment
and Choice



Family and
Peer Support



Sense of
Identity



Individualized
Approach



Holistic
Approach



Community
Integration



Personal Responsibility
and Self Management



Strength-based
Approach



Partnership



From Principles to Practice



From Principles to Practice



How about BOTTOM UP level?



Kick off ...

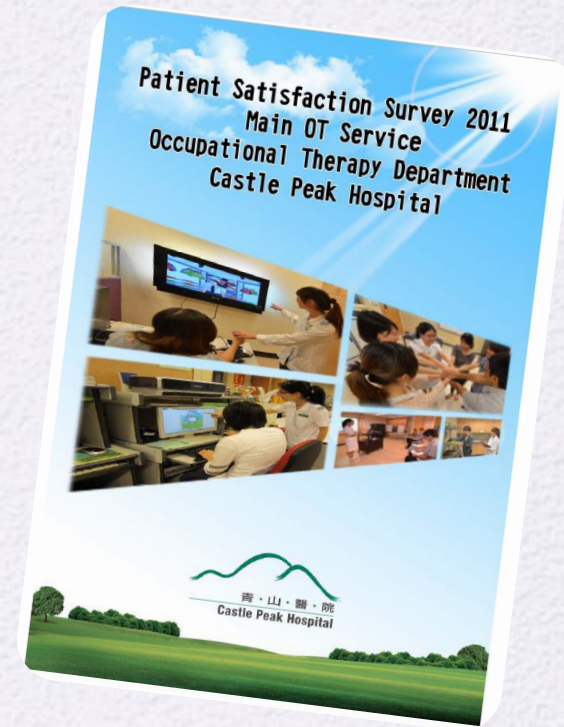


Start from a Patient Satisfaction Survey 2011

Enrich therapeutic groups
Improve training facilities & environment



Committee on Recovery
Oriented Practice in OT

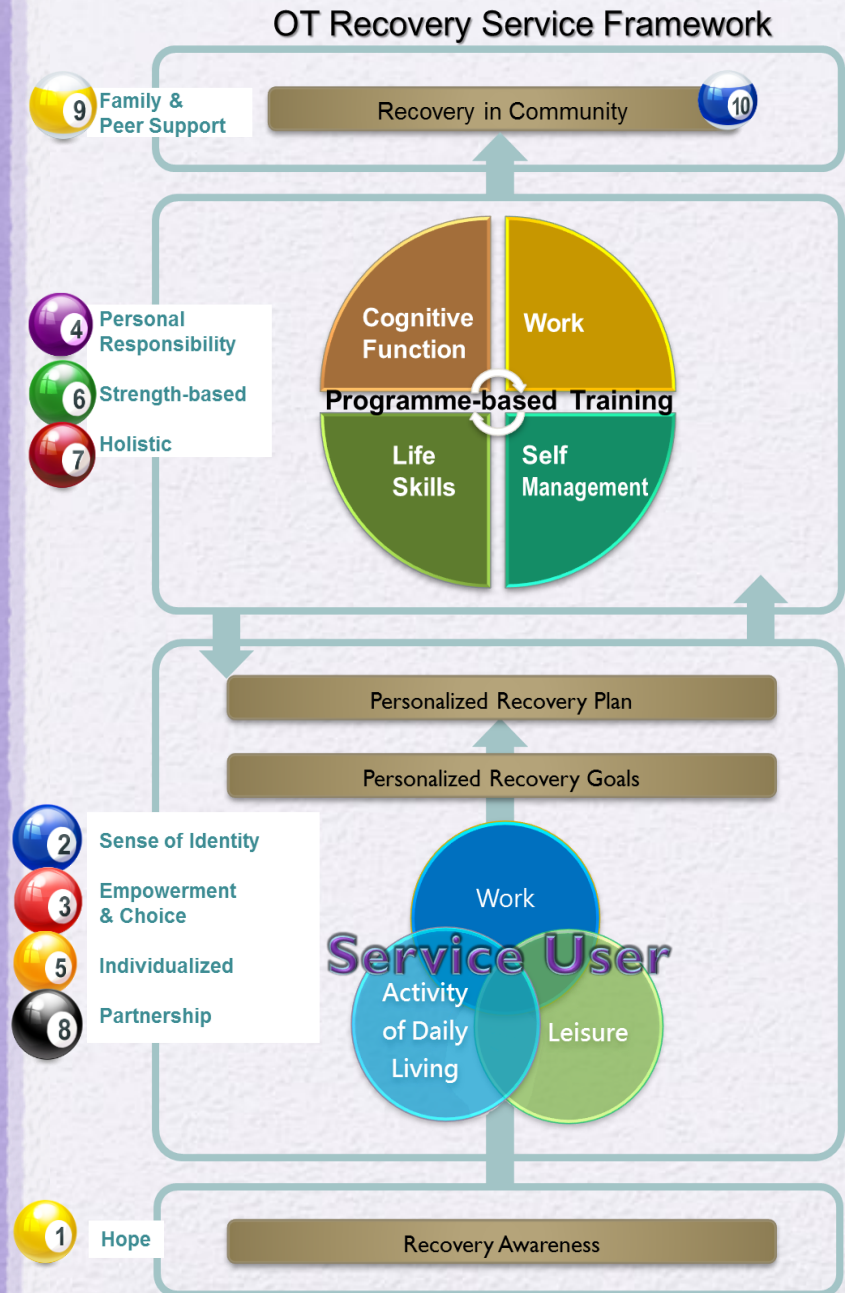


What the committee did?

Reviewed the existing service provision

Developed service framework

Promulgated and implemented the framework in the OT in-patient and out-patient services in CPH



Development of programme based training

- Developed a total of 48 programmes
- Developed strength-based programme for different client types
 - Personalized Recovery Oriented Programme (PROP) for acute in-patients
 - Recovery-oriented Stress Management and Engagement Programme (RISE) for EASY in-patients
 - Abbreviated Illness Management and Recovery Programme(AIMR) for service users in Day Hospital
 - Montessori-based activity program for both in and out-patients with major neurocognitive disorder
 - Happiness reconstruction programme for service users with mood disorder in TMMHDSC (Mindset)





Shifting from Traditional Practice to Recovery-oriented Practice

What are the essential elements??



PPE + T

Our strategies to promote RoP

Empowering through Participation

Recovery handbooks

-A personal reference for service users to promote participation and facilitate goal setting.



Communication platform

-A focus group with service users and carers at hospital level and an Interaction Channel has been set up for out-patients
-Regular community meetings are held for in-patients.
-Bi-yearly patient satisfaction survey at department level.



Peer instructors

-Service users are being invited to lead some interest classes such as photography, craft work, cooking, sign language and Chinese tea appreciation class.
-Some others have been invited to introduce the OT service to visitors and new comers.

Peer support

-Peer sharing of their recovery journeys are arranged for services users.
-Two booklets have been published for sharing among peers.

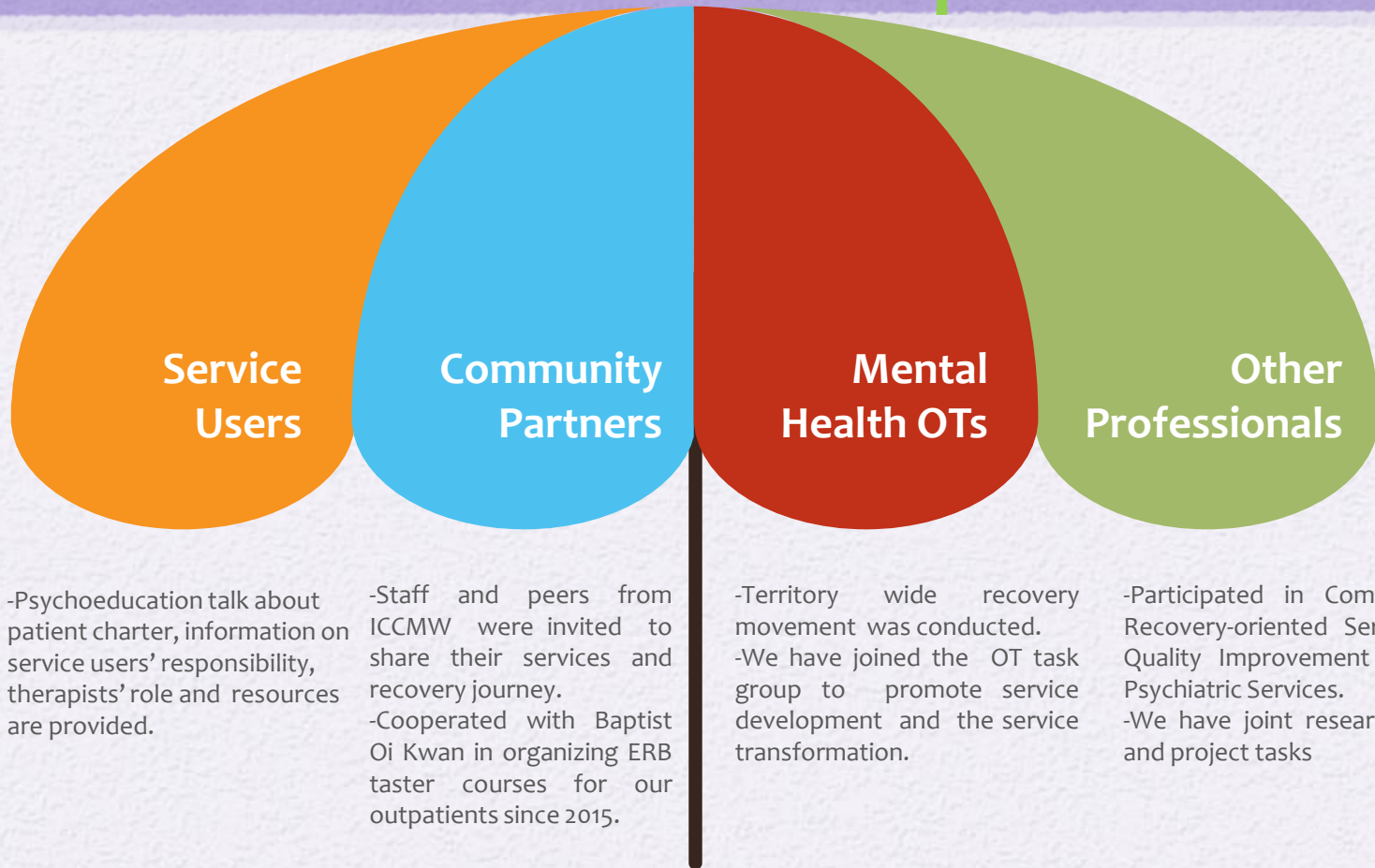


Employment

-Service users were employed as staff to facilitate community integration.



Promoting through Partnership



Recovery promoting

Environment

One Zone

A multi-activities area located at the ground floor of Tuen Mun Mental Health Center (TMMHC)



OT Department

Restructure the department with new function rooms and LCD monitor

TMMHDSC (Mindset)

Renovate the center to engage service users in new Day Service Centre (supported by NTWC Patient Empowerment Fund)



Work Enhancement Center

Renovate the center with -Recovery Gallery and Well-being Room



Recovery promoting

Env



One Zone

A multi-activities area located at the ground floor of Tuen



Free Place

IMMENSE (Mindset)



Renovate the center to engage service users in new Day Service Centre (supported by NTWC Patient Empowerment Fund)



LCD monitor to display recovery concept

OT Department

Restructure the department with new function rooms and LCD monitor



Interview Room



Work Enhancement Center

Renovate the center with -Recovery Gallery and -Well-being Room

Recovery promoting

Event



Café Training



Well Being room



Recovery Gallery



1



Work Enhancement Center

Renovate the center with Recovery Gallery and Well-being Room

Recovery promoting

Environment

TMMHDSC (Mindset)



(Mindset)
Renovate the center to
engage service users in new
Day Service Centre
(supported by NTWC Patient
Empowerment Fund)

Mingle Zone – Waiting areas for service users and carers



Promoting



Well-being club – provide updated information & education talks

One Zone

A multi-activities area located at the ground floor of Tuen Mun Mental Health Center (TMMHC)



NGO Promotion Corner – partnership with more than 10 NGOs

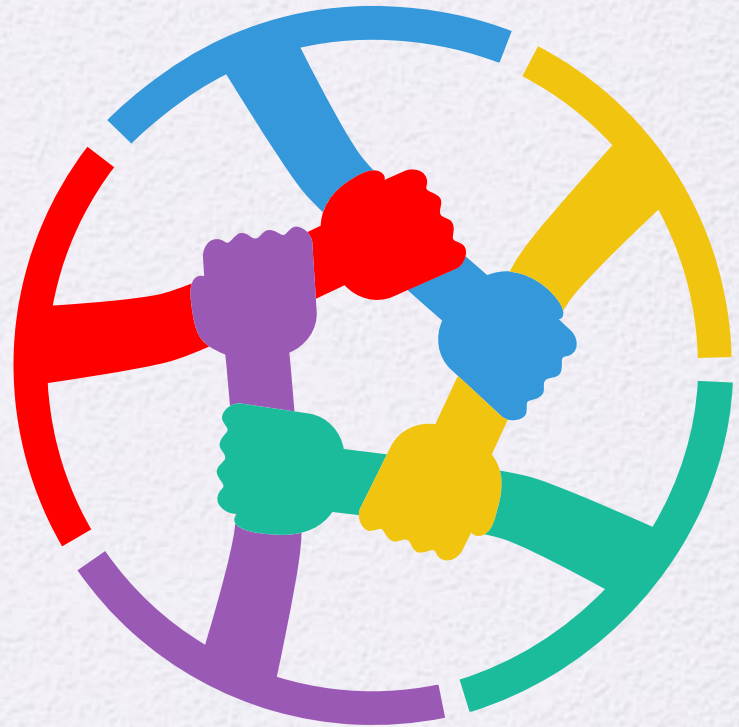


JobLink – provide updated information on labor market



Staff Training

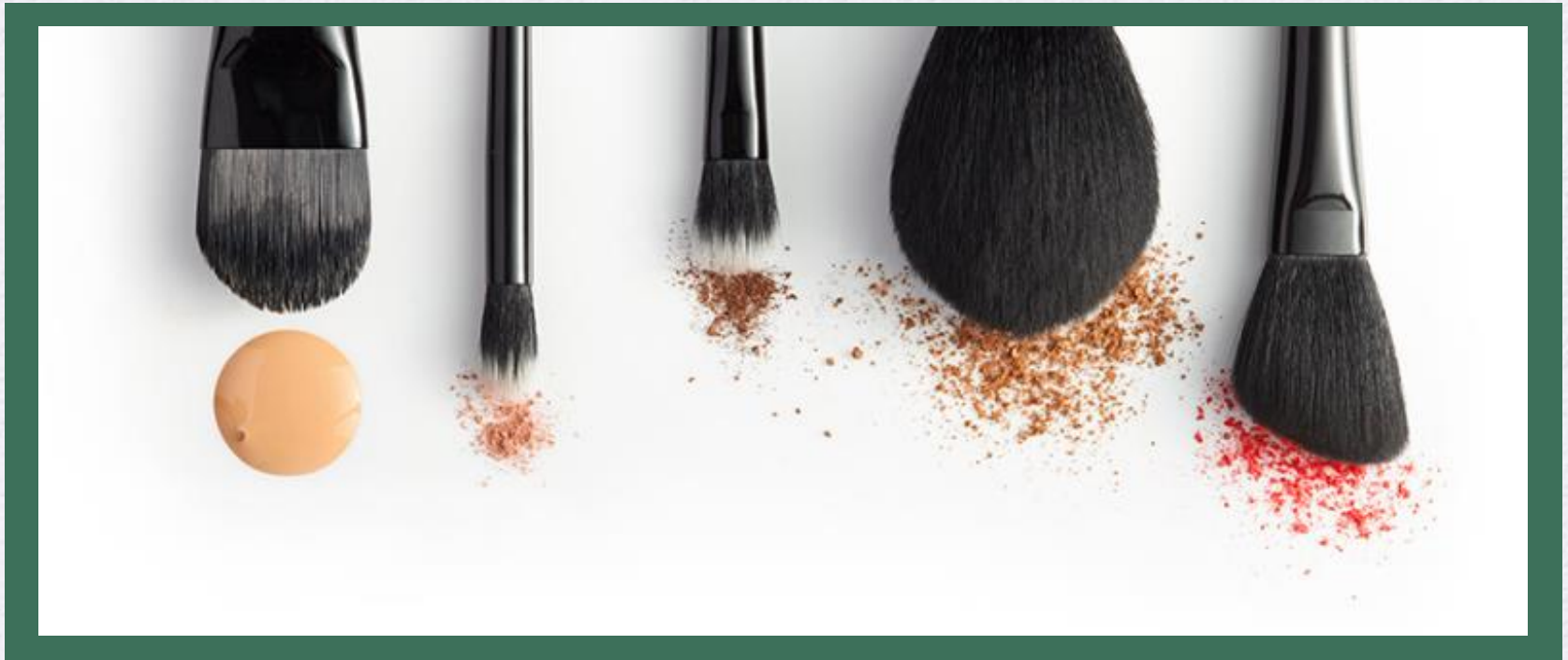
- In-service training to both professional and supporting staff.
- Overseas attachment in King's college and Yale University in 2011 and 2012.



Discussions

Learning, Challenges,
Experience, Reflections,
Feedbacks, Way forward...

Recovery in Medical Settings?



Can it be REAL or just a MAKE UP?

Is there a sweet spot ?



Clinical Recovery

Personal Recovery

Occupational Therapy and Recovery



What lens are we using?

Challenges

- Undo non-Recovery concepts
- Showing the evidence of Recovery-oriented practice
- Preserving Authenticity in Recovery-oriented Practice
- Finding the “sweet spot” between bio- psychosocial treatment and personal recovery
- Empowerment of service users

Keep the momentum going

- Repeat RSA every 3 years
- Recovery related training
- Peer involvement
- Develop Recovery-oriented program with local evidence
- Helping people in recovery get employed
- Seek for engagement not compliance