

# Silver and Bronze Achievement Awards

## **Silver Award: Early Assessment and Support Team, Mid-Valley Behavioral Care Network, Salem, Oregon** —Early Intervention for People With Schizophrenia

The Early Assessment and Support Team (EAST) is an early intervention project to reduce the biopsychosocial impact of schizophrenia and thereby improve the lives of people with this disease. It is a program of the Mid-Valley Behavioral Care Network (MVBCN), a managed care mental health organization that serves five Oregon counties. It was founded in 2001 as a creative, collaborative partnership between the MVBCN and Salem Hospital, the regional acute care facility. EAST follows best practice guidelines from the foremost international experts, the Early Psychosis Prevention and Intervention Center in Australia, and has integrated best practice toolkits from the U.S. Substance Abuse and Mental Health Services Administration.

In recognition of successfully implementing an exemplary early intervention model into a wide community network, providing treatment and family support to young people in early stages of psychosis, and providing education and support to their communities, EAST was selected to receive APA's 2007 Silver Achievement Award.

EAST is a collaborative partnership including Salem Hospital and the county mental health programs of Linn, Marion, Polk, Yamhill, and Tillamook counties, which have a population of 590,000. EAST has operated continuously since March 2001. In 1999 MVBCN hired a mental health prevention researcher to identify evidence-based prevention models. MVBCN set out to look for programs that would address the discouraging levels of disability, poverty, and marginalization faced by people with schizophrenia in the region. Australia's Early Psychosis Prevention and Intervention Center served as the

model. With operations in Melbourne, the center was systematically researching and integrating best practices associated with early psychosis intervention. For the next year, MVBCN went through an implementation planning process, and in January 2001 EAST was created. It consisted of a full-time coordinator, a part-time psychiatrist, and part-time social workers from each of the five counties.

From March 2001 to April 2006, with the exception of a one-month interlude in the first year, EAST has never turned anyone away from its program. EAST serves all individuals who have had a first episode of schizophreniform or bipolar spectrum psychosis within the past 12 months. EAST serves approximately 50 new clients each year. It has had almost 600 clients referred to date, half of whom have been accepted into services. EAST also has provided short-term case management and facilitated access for those who were not appropriate for EAST.

In 2003 EAST began offering multifamily psychoeducation under the supervision of experts from Maine Medical Center. This approach gradually became the routine standard of practice, and today multifamily groups are available to participants in four counties, with Tillamook (population 24,000) doing primarily individual family work. EAST also has integrated the Illness Management and Recovery program and has worked with Chemeketa Community College to offer the curriculum as a for-credit college course.

EAST is now an outstanding national program that serves as a beacon of hope for young people and families. For example, EAST actively works to identify people at the earli-

est possible stage of psychosis in order to minimize the consequences. EAST routinely does outreach to engage people into a positive, voluntary treatment relationship based on their interests, strengths, and motivation. EAST team members routinely exceed expectations in forming positive relationships.

Another principle of EAST is to treat family members as core members of the team. EAST practitioners work closely with clients' families. Also, services are provided regardless of a client's ability to pay, and services continue to evolve on the basis of the most recent research.

With significant support from local partners, EAST members reached out to all high schools and colleges, as well as to primary care physicians and others. Community education was a major priority, although as referrals came in, the clinical team became less able to conduct these activities.

From its inception, EAST was charged with constructing a new way of doing business within the managed care network. The team faced many challenges. For example, originally all members except the coordinator were assigned to the program only ten hours per week, and all worked for different agencies. The idea behind this structure was to give everyone an entry point into a much larger system change. The team had to create and develop all of its own procedures and practices, with international consultation via the Melbourne program, and then those procedures required careful integration into six different sets of agency-specific requirements. Each individual operated on his or her own "home turf," implementing a program model that was fundamentally inconsistent with the usual way of doing business.

The team rapidly discovered that the program model was intensive and involved a steep learning curve. Team members came from as far away as

120 miles, and they met weekly for two years. Eventually the level of staffing was nearly doubled, some positions were consolidated, vocational services were added, and additional local team members were included. A research position and clinical coordinator position were created to adequately address the tremendous needs of data and clinical oversight unhindered by fund development and similar activities. After the first two years, local teams and case review processes were developed, and annual training for new staff was initiated.

There are many indicators of national- and state-level commitment to the continuation and sustainability of EAST. Over \$3 million has been raised in private funds to supplement restricted Medicaid (Oregon Health Plan) dollars. In April 2007 EAST was awarded a \$2 million grant by the Robert Wood Johnson Foundation under the Early Detection and Intervention for the Prevention of Psychosis Program, a four-year national effectiveness study that will document the individual and community impact of making prodromal and first-episode evidence-based support available. The directors of the Department of Human Services and Addictions and Mental Health for the state are advocating actively at the federal level to establish funding and have successfully prioritized sustainable funding for

EAST. The Oregon State 2007–2009 budget, recently approved by the legislature, includes \$4.3 million to fund and begin to disseminate EAST to the rest of Oregon.

With additional support of the Robert Wood Johnson Foundation, EAST has initiated an ongoing sustainability effort aimed at further developing strategic, collaborative long-term public and private partnerships.

Numerous positive outcomes point to EAST's success. Participants in the program have dramatically reduced hospitalization rates, dropping from nearly 50% within the first three months of program participation to approximately 10% in the next quarter, with a gradually reducing trend. About 70% of EAST clients have remained in school or work, and additional vocational supports are being modeled on individual placement and support practices. About 95% of EAST participants have strong family support and involvement in treatment. Medication adherence rates are around 85%, and EAST prescribers strive for low doses with careful monitoring of side effects.

Quarterly data show steady progress on several functional indicators, such as level of independence and time spent with friends. Dozens of EAST graduates volunteer to mentor, speak to groups, and even speak to the media. The fundamental differ-

ence with EAST, volunteers often repeat, is that clients feel befriended and can make their own positive choices throughout the program. Numerous individuals state openly that they feel enriched for having experienced psychosis. Although about half of EAST clients choose to apply for Social Security Disability primarily for insurance reasons, many continue to work while they are on disability, and most are active participants in family and community life.

EAST received the Oregon Department of Mental Health and Addiction Services Award for Excellence in 2002, and MVBCN received an award from the National Mental Health Association (now Mental Health America) for its prevention activities in the same year.

As further testament to its success, EAST's staff have been asked to provide technical assistance or training to numerous audiences, including presentations in California, at National County Developmental Disability and Mental Health Directors meetings, and for other Oregon programs. The state of Oregon is now contracting with EAST to become a technical assistance center for other sites interested in adopting early psychosis practices.

*For more information contact Robert Wolf, M.D., 2478 13th St., Suite 200, Salem, OR 97302 (e-mail: robert.wolf@salemhospital.org).*