PLANNING FOR WEB-BASED CONSULTATION

Getting an OT Perspective On Challenges Related to Community Integration and Social and Living Skills

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Common Challenges

- Maintaining preferred level of cleanliness
- Preparing meals
- Navigating personal relationships and community
- Filling and structuring time in a way that is meaningful to them
- Safety planning and execution of such plans
- **Boredom, loneliness, and isolation**
- Others?
What Resources Have so Far Been Made Available to Help Providers?

- Trainings:
  - Tenancy Supports
  - Psychiatric Rehabilitation 101 and Social Skills
  - Others?

- Consultation / Learning Collaborative
  - NC ACT Coalition
  - MCO-driven consultation (examples?)

- Onsite Coaching
  - Primarily with ACT and topic varies
Augmenting Current Resources with Web-Based Consultations

• Positives:
  • More efficient use of time (no driving, no time away from office)
  • Offer at higher frequency
  • Opportunity for more-informed consultation
  • Create space that limits attendance, but has diverse perspectives “in the room”
  • Option of recording webinar

• Negatives:
  • Less personal interaction
  • Risk of more passivity in audience

CAVEAT: Consultations are limited in that we do not have all of the information on what is relevant to decisions for this particular individual.
Consultation Overview

• We will be hosting 2 web-based meetings per month for the next three months.
• We will limit attendance to 10 individuals during each consultation session.
• To receive consultation on a specific client you are working with, you will need to submit a completed consultation form at least 3 business days ahead of consultation.
• Of those submitted, only 2 consultations will be selected for discussion.
• We want the consultation to be interactive between you (providers who submitted particular consultation) and us, but will be inviting others on the call to weigh in with ideas. Interaction is essential!
• We encourage attendees to call in with a computer so they are able to visually see information being presented, but telephone is also adequate.
• We may invite those who received a consultation to follow-up and share what had been tried, what worked, what challenges remain approximately one month from their consult.
Consultation Form Overview

• **Demographic Information**
  - Be careful not to overshar and violate HIPAA

• **Targeted Activity**
  - Be specific (not “housecleaning,” but washing and putting away dishes or emptying trash)
  - The focus is on **behavior and participation** that helps with **maintaining in their independent living environment**. These consultations will not address specific psychiatric symptoms, nor substance abuse.

• **Meaning and Motivation of Activity to Client**
  - Provide some information about why this activity is important to the client – what are the consequences of not succeeding with activity, and what may be the benefits of performing the activity. The activity likely relates to other goals.
  - How much does the client value this activity and is motivated to master it?
Consultation Form Overview

• **Describe the Activity**
  • Break down the steps – when, where, and how the activity is performed.
  • Include any tools or materials used/
  • Numbering the steps may be most helpful.

• **Performance Analysis – Which parts does your client perform successfully and unsuccessfully?**
  • Which parts of the activity (steps above) can they do successfully on their own?
  • Which parts of the activity can the client not perform on their own successfully?
    • Why do you think the client is not performing successfully?

• **Environmental Factors Affecting Performance**
  • Attending the physical (e.g., layout of apartment space) and social factors (e.g., parental perspective or involvement) that may be impacting performance

• **Personal Factors Affecting Performance**
  • Cognitive, knowledge, experience, physical mobility and range of motion, overall health – consider strengths that may be relevant to success with this activity, as well as potential barriers.
Consultation Form Overview

- **Interventions you have tried for this activity with your client**
  - Describe anything you and the team has so far attempted
    - Anything that has worked a little bit?
    - What has definitely *not* worked?
- **Other**
  - Anything else obviously helpful, but not sure where it should be included