

Wisconsin Public Psychiatry Network Teleconference (WPPNT)

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WPPNT Reminders

How to join the Zoom webinar

- **Online:** <https://dhs.wi.zoomgov.com/j/1606358142>
- **Phone:** 669-254-5252
- Enter the Webinar ID: 160 635 8142#.
 - Press # again to join. (There is no participant ID)

Reminders for participants

- Join online or by phone by 11 a.m. Central and wait for the host to start the webinar. Your camera and audio/microphone are disabled.
- [Download or view the presentation materials](#). The evaluation survey opens at 11:59 a.m. the day of the presentation.
- Ask questions to the presenter(s) in the Zoom Q&A window. Each presenter will decide when to address questions. People who join by phone cannot ask questions.
- Use Zoom chat to communicate with the WPPNT coordinator or to share information related to the presentation.
- [Participate live to earn continuing education hours](#) (CEHs). Complete the evaluation survey within two weeks of the live presentation and confirmation of your CEH will be returned by email.
- A link to the video recording of the presentation is posted within four business days of the presentation.
- Presentation materials, evaluations, and video recordings are on the WPPNT webpage: <https://www.dhs.wisconsin.gov/wppnt/2024.htm>



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Coordinated Specialty
CARE *for*
Early Serious Mental Illness

Monique Hicks, APSW, CPPS



Presentation Overview & Objectives

Early serious mental illness (ESMI) and first episode psychosis (FEP) can impact a young person by causing unexpected changes in their thinking and perceptions. This can get in the way of everyday activities, make school or work difficult, affect relationships, and interrupt life goals and dreams. Coordinated Specialty Care (CSC) connects people ages 15 to 25 to services in their community soon after they start experiencing these challenges. It is a model of care that supports participants on their unique path to recovery.

Participants will:

1. Gain an understanding of early serious mental illness (ESMI), first episode psychosis (FEP), and Coordinated Specialty Care (CSC)
2. Recognize the benefits of and need for CSC across the state.
3. Explore ways that the CSC model of care can be integrated with other programs and models of care.

ESMI

Early Serious Mental Illness

What is early serious mental illness?

Serious Mental Illness (SMI): a diagnosable mental, behavioral, or emotional disorder that causes serious functional impairment that substantially interferes with or limits one or more major life activities.

ESMI refers to the initial period of onset.

Symptoms can be difficult to identify and often first appear in early adulthood.

Serious mental illnesses include:

Bipolar disorder

First episode psychosis (FEP)

Major depressive disorder

Schizophrenia

Schizoaffective disorder

csc

Coordinated Specialty Care

“Trust is treatment”

- A CURRENT CSC
PROVIDER IN
WISCONSIN

What is Coordinated Specialty Care?

CSC is an evidence-based approach to the delivery of services and supports for early serious mental illness that can be implemented on its own or as part of an existing program.

CSC is most effective with young people when they get help early.

Supporting Young Adults with ESMI



First
Episode
Psychosis

BHD Behavioral Health Division
A Division of the Department of Health & Human Services
WRAPAROUND MILWAUKEE

STEVEN DYKSTRA, PhD
CLINICAL PROGRAM COORDINATOR, MILWAUKEE COUNTY BHD

[2020 WRAP MODULE 1 THE FEP MODEL V4](#)

What is Coordinated Specialty Care?



Shared
decision-
making



Individualized
care



Team
approach

Care coordination

Medication management

Psychotherapy

Supported employment and
education

Family education and support

Peer and parent peer support

A proven way for young people to have improved outcomes

Purpose

Participants are supported in having independence and resources to reach their full potential.

Empowerment

Participants have voice and choice so that their journey is grounded in their goals and values.

Relationships

Participants benefit from meaningful connections with service providers, friends, family members, and others focused on helping them live their best lives.

A proven way for providers to support young people



Outreach

Providers educate the community so that young people who need help know when and how to access it early.

Community

Services and supports take place in the most inclusive, responsive, and accessible settings and draw on the connection of family, friends, and natural supports.

Collaboration

Team members and participants work together. They share responsibility for setting up, making happen, watching over, and reviewing a care and treatment plan.

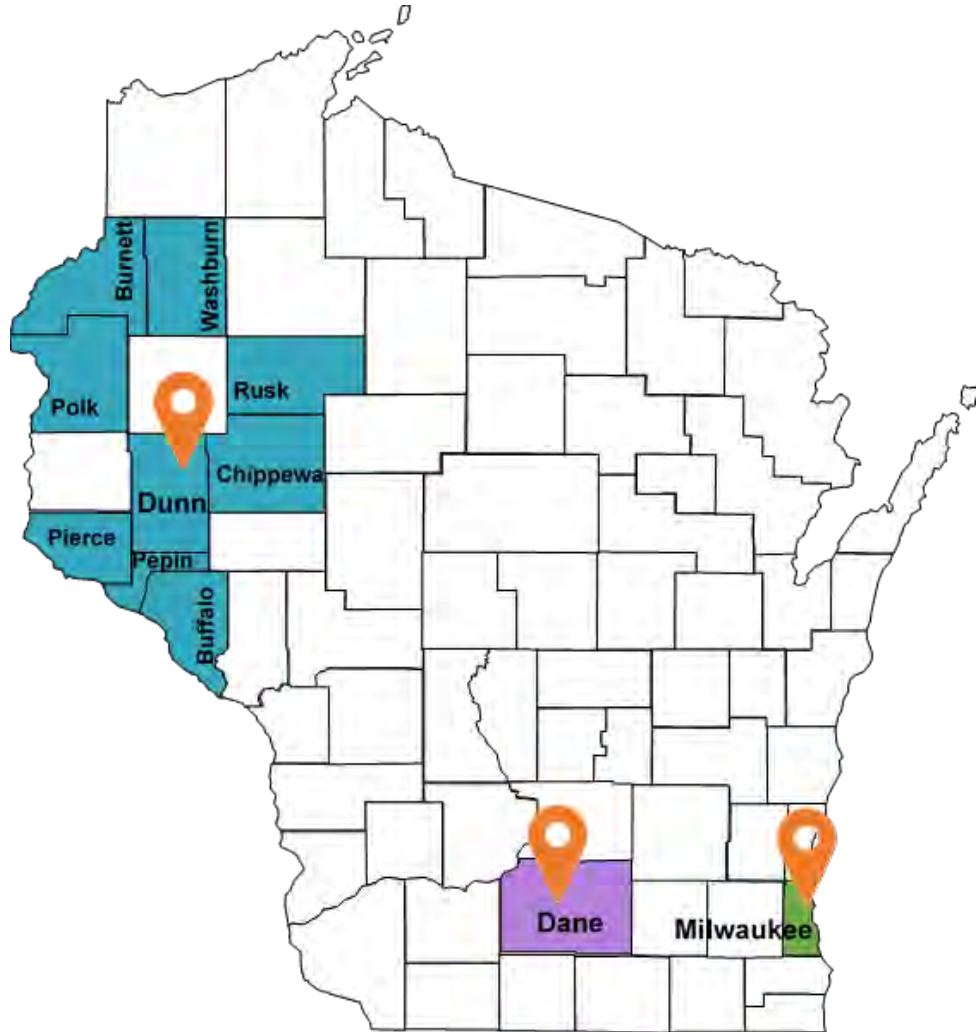
Key Takeaways

- **Early** treatment means better outcomes.
- Treatment focuses on **support, relationships,** and **connection** to community.
- Acknowledging and supporting a young person's **interests, goals, and dreams** while addressing mental health needs helps them maintain or improve their **quality of life** and **relationships**.
- Integration of **education, employment, community, therapy,** and **medication** honors the young person as a unique individual.
- Young adults and families need **support, guidance,** and **information** throughout their journey.

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CSC programs in Wisconsin

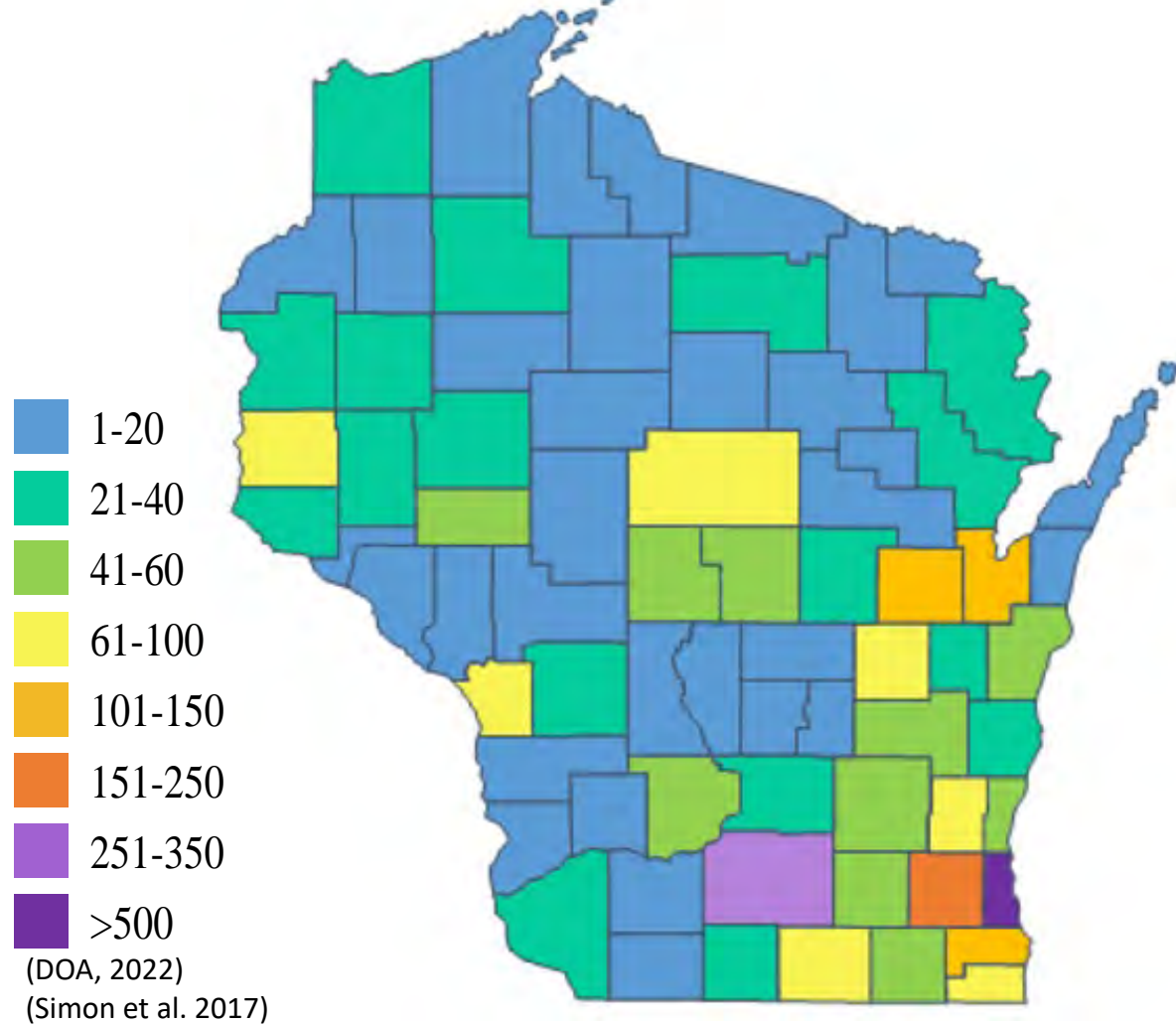


- Dunn County Human Services (CHOICES)
- Journey Mental Health Center (PROPS)
- Milwaukee County Department of Health and Human Services and Wraparound Milwaukee (CORE)

Need for CSC

Annual first episode psychosis (FEP) estimates by county

(median incidence rate of 58/100,000 population)



3,500-5,000

Wisconsinites estimated to experience FEP each year.

185

Number of individuals served in 2022.

Positive outcomes with CSC

DECREASED

suicide attempts

REDUCED

hospitalizations

IMPROVED

symptoms

INCREASED

overall quality of life

SOURCE: Wisconsin Coordinated Specialty Care demographic and outcome data 2014-2021.

Positive outcomes with CSC

A marked **decrease** in suicide attempts
and emergency department visits

Hospitalizations **decreased** by

41% over a period of
6 months



Positive outcomes with CSC



“The impact on hospitalizations alone is astounding.”

- A CSC ADMINISTRATOR IN WISCONSIN

“[The CSC model of care]’s outcomes have far exceeded any expectation that [any]body had...both in terms of the number of youth served as well as just the impact [of] that service on the youth and their families.”

-ANOTHER CSC ADMINISTRATOR IN WISCONSIN



Cost effectiveness

One year of community-based support through CSC is about

1/2

the cost of just one inpatient hospitalization

Cost savings

- Less wait times for services
- Fewer lost wages due to missed work
- Fewer health care costs related to inpatient care and emergency room visits
- Fewer justice system interactions
- Less reliance on long-term supports

Implementing CSC

“You have to be brave. You have to have some courage to serve people differently and know that it usually works.”

- A WISCONSIN COUNTY ADMINISTRATOR

“Don’t feel like you have to reinvent the wheel but make it your own and make it work for your community.”

- A WISCONSIN CSC ADVOCATE



Implementing CSC

- Explore stand-alone programs from other states
 - [Early Assessment and Support Alliance](#)
 - [NAVIGATE](#)
 - [OnTrack NY](#)
- Use the [First Episode Psychosis Services Fidelity Scale and Manual](#)
- Review resources from the [Substance Abuse and Mental Health Services Administration](#)
- Use resources from the National Implementation Research Network



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www.dhs.wisconsin.gov/csc

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