### Pathway Home



2019 ANNUAL STAFF RETREAT





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#### 2019 Staff Retreat

It has become a tradition each summer at Pathway Home to gather for an annual retreat.

PATHWAY HOME

The retreat is a wonderful opportunity to share ideas and get to know each other even better. This year, Pathway Home held the annual retreat on June 26th, hosted by CIMH. The day commenced with a fun icebreaker activity called 'Get Up and Move!' where PH staff shared a fact about themselves to the group and anyone who also was described like this would need to stand up and find another seat and the one remaining standing would then share something about them self, and repeat. The aim was to get everyone up on their feet and moving about the room as we learned more about the things we all share in common! We reviewed accomplishments and recognitions of the last year, including awards, publications, new staff, celebrations, new teams, conferences presented at, value-adds like specialty meetings and monthly newsletters, and more. Mark Graham joined us and talked about Pathway Home @ 5, with a top 10 list and discussion on the CBC Care Continuum.



Wednesday June 26th, 2019





The afternoon began with a staff appreciation lunch, followed by a team building activity led by Angelo Barberio (see pg. 7). Ajani C. Benjamin from DOHMH then presented on A Public Health Approach to Alcohol and Drug Use and the Continuum of Care. Staff received a sneak peek of one of the videos for the Pathway Home Training Institute with a viewing of a video on topic of Consumer Choice. The day concluded with a presentation on the Call Me First Campaign (see pg. 8). For more highlights, check out our video!



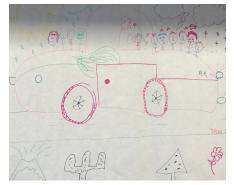


#### WHERE WORDS FAIL, ARTE SPEAKS

#### **TEAM ARTWORK**

Take a look at some of the fabulous designs!







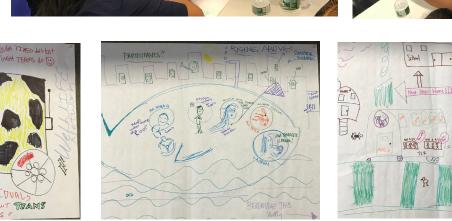
#### Vehicle for Change

By Angelo Barberio

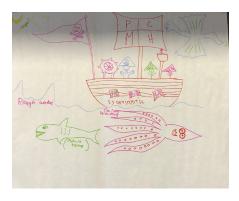
"Where words fail, art speaks"...The use of artistic metaphors and silent group work can help staff surface difficult issues or even highlight successes when words can't seem to drive the point across. During the all-day Pathway Home staff event teams participated in "Vehicle for Change" activity where they were asked to work in groups to draw a "vehicle" that represented their team. This activity consisted of two parts; in the first part teams were asked to draw in silence and were given prompts or questions to help the creative juices flow such as "what condition is the vehicle? Who is driving? What obstacles are in the way?" They then presented the drawing to full PH audience. In the second part of the activity, the teams were asked to draw again (either the same vehicle or an entirely different one) and this time they were allowed to communicate during drawing. They were again given prompts or certain questions to consider when drawing. They finally participated in discussion on themes or differences they noticed across both drawings and the difference between drawing and working together in silence over being able to communicate while working. This activity uses vehicles as a metaphor to stimulate thinking about teams and working relationships in present and future states. Using vehicle as a symbol allowed teams to quickly see what was on everyone's mind and what obstacles and strategies they had in place.













The comorbidity of Substance Use and Severe Mental Illness is extremely prevalent in the population we serve. Due to the complex nature of both, collaborative insights into how we approach treatment and care of these disorders

are always welcome. During this year's Pathway Home All Staff Retreat, Ajani C. Benjamin, the Workforce Development Manager for DOHMH, presented on A Public Health Approach to Alcohol and Drug Abuse and the Continuum of Care. He highlighted the societal stigma around substance use and how it impacts whether or not people seek out treatment, and the ways they do so. Mr. Benjamin noted that many overdoses occur not only when people use alone, but also when people use together and one party is afraid to ask for help when the other overdoses.

Every 6 hours someone dies of a drug overdose in New York City, and 82% of those overdoses involve some form of Opioid. As behavioral health care aims to become more holistic in its approaches to treating people, it is important that Pathway Home stay current on the many methods of addressing substance use in our population. Mr. Benjamin highlighted the combination of traditional drug treatment settings, with evidence-based treatment, harm reeducation, Medication for Addiction Treatment (MAT), and concrete services to provide personalize treatment. "You can't treat substance use, you can treat a substance use disorder," notes Mr. Benjamin. We often compare substance use to a medical model, but fail to respond to substance use in the same manner as we do to medical concerns. The goal should always be to improve our participants' health.

The Call Me First Campaign is PH's efforts to increase education on an important feature of the program. The goal is to encourage participants, their family, caregivers, or providers to know that they can call their Pathway Home team when a participant starts showing early signs and/or symptoms exacerbation. Symptoms happen - we want participants to call as soon as they are concerned, at the first sign their condition is beginning to worsen. Furthermore, when someone doesn't feel well, is anxious or feels down, or even feels lonely, they should know there is someone they can call. As Benjamin Franklin said "an ounce of prevention is worth a pound of cure," when participants call with whatever is bothering them, we want them to be able to talk to someone right away. Many participants find themselves in a situation experiencing worsening symptoms often don't know if they should call the PH team or go to the

hospital. Staff can direct the participant to make a plan for best course of action.



CALL ME FIRST CAMPAIGN

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Physical aids were handed out including a postcard flyer for participants that includes information on Call Me First, with space for PH staff to write a Staff

Name and the On call Phone Number. On the back is a Wellness Recovery Plan, calendar, and information on NYC Well. Magnets were handed out so postcards can be posted on a fridge or convenient location.

The teams were asked to consider pledging to the campaign. 31 pledgers!

#### Specialty Meetings



## Experts of the Field: Our Peer Specialists

By Sarah Abramson

The Peers met for their monthly croissants and coffee session on June 18. An open round table led to a lively discussion on an array of topics, from tips on navigating relationships with social workers and doctors to strategies in supporting members struggling with sexual issues after prison release. The group shared different viewpoints, ideas, and resources. Angela Buono (SUS Peer Specialist) eloquently commented on engaging with psychiatrists and social workers, "They have to go to school to learn what we know! Once they understand our voice deserves to be heard just like anyone else, they give us a seat at the table, but we have to earn that seat." The next Peer Meeting will take place on 7/23/19 at 10am at CBC. The topic will be Supporting an Inclusive LGBTQ Narrative.







By Katrina Chen

Three months behind in rent and several eviction letters later, Trevor J had only 30 days to vacate 1-bedroom apartment. Trevor receives SSI as his form of monthly income, and his rent is just \$225 a month. Coupled with poor money management skills and a Bipolar diagnosis, Trevor's small income was spent elsewhere. Before all of this, Trevor had worked hard to prove that he was capable of living independently in the community. Trevor was able transfer from the Adult home to his very own 1-bedroom apartment and live his life the way he had always dreamed. He was looking forward to spending his time reading, watching movies, eating out, and hanging out with friends. Yet, despite the difficulties Trevor encountered to get to the point of achieving independence in the community, budgeting was a difficult skill for him to master. Trevor kept finding himself further and further in debt, as he was frequently eating out, paying other bills, and spending his money frivolously. It had been years since Trevor had to really take control over his own finances and think about his spending. When his goal of living independently in the community was put at risk due to his impending eviction, Trevor was referred to the Pathway Home WellLife Network Team. Consequently, WellLife Senior Case Manager Katrina entered the picture, and

she knew his immediate need was budgeting and money management. After Katrina explained Pathway Home services, he decided to make a change in his life and agreed to sign up for services. They didn't waste any time getting to work. After reviewing his checking account statements, monthly bills and debt, together they came up with a feasible budget and money management plan that catered to Trevor's needs and interests. Katrina even showed Trevor how to acquire monthly money orders so he could pay his rent on time, and together they called his housing provider to come up with a plan to start chipping away at his arrears. He agreed to this plan immediately. Katrina observed from the beginning that Trevor just needed someone to encourage him and show him that they care and with the right tools he could his achieve his goals. Throughout the process, Trevor stayed strong, persistent, and determined to do whatever it took to keep his apartment. Trevor expressed his gratitude to Katrina for her compassion and assistance, and even explained that he has a dream of opening his own business one day. Learning how to budget greatly benefitted Trevor in the short-term, and will be beneficial for Trevor and his future life goals as well. Katrina will continue to encourage him to follow his money management plan so that he has the necessary skills to fulfill his dreams.

#### The Serge Smile Effect

By Edward O'Dowd

Serge is a quiet person. When CA PH began meeting with Serge, he seemed to be looking to team for directions on his next steps. Since Serge struggled previously with engaging with providers, team gently guided Serge towards services that he chose, empowering him to find the type of services he wished to participate in. Taking the subway or traveling by alone was challenging for Serge. He requested several times for team accompaniment to appointments. With team reassurance and travel training, Serge began to grow more confident in traveling on his own. There was a noticed change in his demeanor; joking around with team and flashing what we affectionately call the "Serge Smile". Edward Odowd (Peer) explained "he began to start putting together his own days and to regularly text and call the team, letting us know what he had going on for the day." Serge took even further steps by signing up and attending an orientation with volunteer agency New York Cares and completing his first volunteer opportunity, not to mention his work towards understanding living with voice hearing by attending several of the "Complex Minds" groups at Jefferson Library. "Serge now identifies goals that he wishes to achieve and diligently works towards them every day" Edward related, "whether it's data collection so he can apply for a NYS non drivers ID or staying in touch with his care coordinator, Serge is on the case." As a result, Serge has made significant movement towards independent living. He is collaborating with the CA PH team and shelter staff on completing a housing application so that he can place himself in the running to achieve his ultimate dream; independent housing.



"...regularly text and call the team, letting us know what he had going on for the day."





#### Pathway to Collaboration

By Shannon Cameron

Mr. Henry spent three months at Rikers Island after he went through a turnstile without paying. While there, he refused psychological exams, denying that he had any behavioral health symptoms. The Rikers psychological exams, however, indicated otherwise. Prior to this, Mr. Henry had an arrest history, but he had never been psychiatrically hospitalized or medicated.

The MHC embedded team, Peer Pam and MHC Shannon, with the support of inpatient psychiatrist Dr. Singh, immediately engaged Mr. Henry when he arrived at the Metropolitan Emergency Room. Upon his arrival, it was deemed that Mr. Henry did not need to be admitted for a psychiatric admission and would benefit tremendously from connection to Pathway Home. After hearing about the services offered, specifically housing support, he agreed to work with Pathway Home in the community. Once he was discharged from the emergency room, Mr. Henry received a PH lender phone to help remain in contact with PH team and providers and

a MetroCard to ensure he would be able to make it home. On the way home, Mr. Henry shared with Shannon that he had assisted in building many homes in New York City, and that he feels depressed that he cannot live in any of the houses that he worked on. Shannon offered him counseling on the benefits of housing, as well as the benefits of maintaining a connection with the Pathway Home team.

Shannon visited Mr. Henry in the community to introduce him to the ICL PH Team. To assist with housing, PH Clinician Alison Haan

completed a comprehensive psychiatric evaluation, which would be necessary him to obtain housing services in the community. The MHC embedded team and the ICL team worked together to submit a supportive housing

application. He was subsequently approved for Level II: Community Care supportive housing. With the combined efforts of 3 Pathway Home teams,



Mr. Henry received weekly visits, met potential behavioral health providers, and obtained the necessary documentation. Mr. Henry will receive assistance with obtaining housing at the support of level where he can have visits from family members, particularly his daughter about whom he has shared a desire to reconnect. Additionally, they will support his efforts to attain consistent employment through vocational rehabilitation services. Moving forward, the ICL Pathway Home team will continue to support Mr. Henry so that he can keep moving in the right direction.

# Who Inspired You This Month?



Ashley Bleich, RN PGCMH

"OUR TEAM CAN NOT EXPRESS HOW GRATEFUL WE ARE FOR
JOINING OUR TEAM. YOU HAVE MADE SUCH A HUGE IMPACT
ON NOT ONLY THE PARTICIPANTS SO FAR BUT ALSO OUR TEAM.
EVEN THROUGH THE TOUGHEST CHALLENGES YOU ALWAYS SEEM
TO SHINE A POSITIVES LIGHT. FOR THIS WE THANK YOU FOR
BEING A PART OF OUR FAMILY" - KATHY DOR, TEAM LEADER



Imagine a world where you could be imprisoned for showing affection toward someone you love. Envision being hospitalized psychiatrically for your attraction to another consenting adult. Visualize instilled fear and shame of holding a part of yourself back from the world, because you have no choice but to conform.

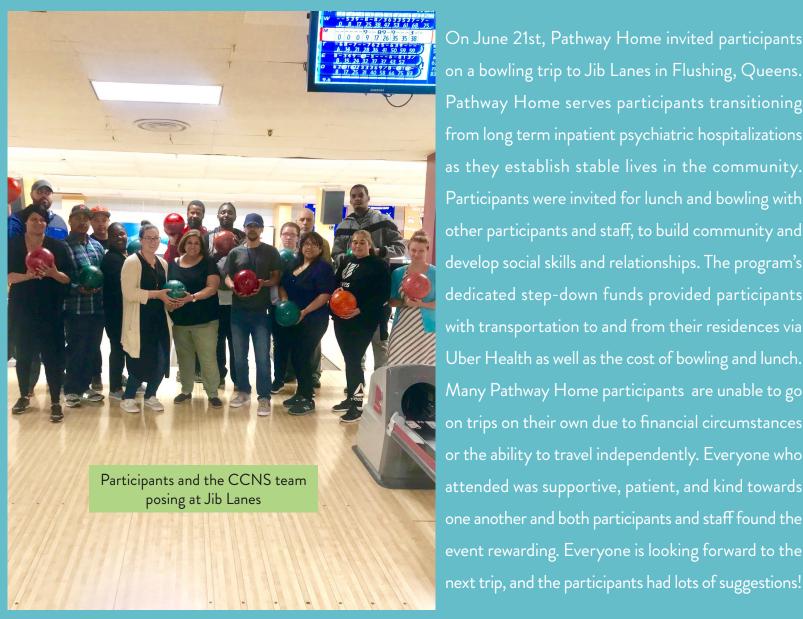
In 1969's America, homosexuality was illegal in 49 states; punishable by jail time, extended experimental hospitalizations, and shunning by communities. Inner cities were the only havens where some could gather and create community such as The Stonewall Inn – but not without risk of arrest, beatings, and regular raids by the police.

It's been 50 years since The Stonewall Riots and the LGBTQ+ community has a lot to show for this short period of time. We've achieved decriminalization of gathering as people, the right to have our own businesses, the right to cohabitate, the reversal of homosexuality being listed as a mental disorder, and not long ago, the ability to marry. While these strides are significant, in many states today people can be fired from jobs, evicted from their homes, and denied medical care for being LGBTQ+.

As a gay clinician, it's been inspiring to be a part of Pathway Home's evolution. Not long after Pathway Home was founded, hospitals began turning to our program asking for help in supporting individuals within the LGBTQ community who were diagnosed with severe mental illness with complex needs. Pathway Home took this call to action for our clients in stride, having staff attend specialized trainings, partnering with specialized clinics, and empowering our clients to return to the community, go to work, go to school, and navigate reunification with family. It's inspiring that 50 years ago myself and the clients who identify with me as part of the LGBTQ+ community would have been labeled as ill, unable to live a normal life – but today we're watching thousands of clients within the LGBTQ+ community be empowered to be who they are with the full support of their providers, leading to dramatic improvement in overall outcomes and wellbeing.

## Cleaning Up Strikes

By David Rood-Ojalvo



on a bowling trip to Jib Lanes in Flushing, Queens. Pathway Home serves participants transitioning from long term inpatient psychiatric hospitalizations Participants were invited for lunch and bowling with develop social skills and relationships. The program's dedicated step-down funds provided participants Uber Health as well as the cost of bowling and lunch. Many Pathway Home participants are unable to go or the ability to travel independently. Everyone who attended was supportive, patient, and kind towards one another and both participants and staff found the event rewarding. Everyone is looking forward to the next trip, and the participants had lots of suggestions!