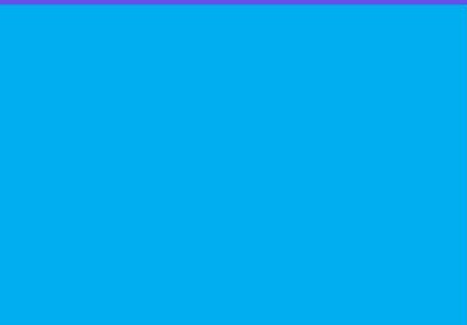




# IN-HOME THERAPY PRACTICE PROFILE

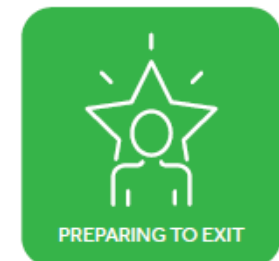


# Webinar Goals

- Present the IHT Implementation Workgroup
- Describe the IHT Supervisory Strategies
- Share the Results of the Usability Tests
- Preview FY18 & FY19 Scaling Up Work
- Share Resources Available on the CBH Knowledge Center Website

# Core Elements

- Each matrix describes the work of IHT as a **SHARED** practice between clinician and TT&S (unless specifically noted).
- The core elements and activities are not necessarily linear.
- Many themes repeat across core elements and are inter-related.
- Care coordination & collaboration matrix distinguishes between the role of IHT as hub versus when it is not the hub.



# Implementation Workgroup

BAMSI, Brockton

Family Continuity Program, Hyannis/ Plymouth

Gandara, Holyoke

High Point Tx Center, Brockton/Taunton

JRI/ Children's Friend, Lynn/ Salem

North Suffolk Mental Health, Boston/ Metro

Pyramid Builders, Boston

South Shore Mental Health, Southeast

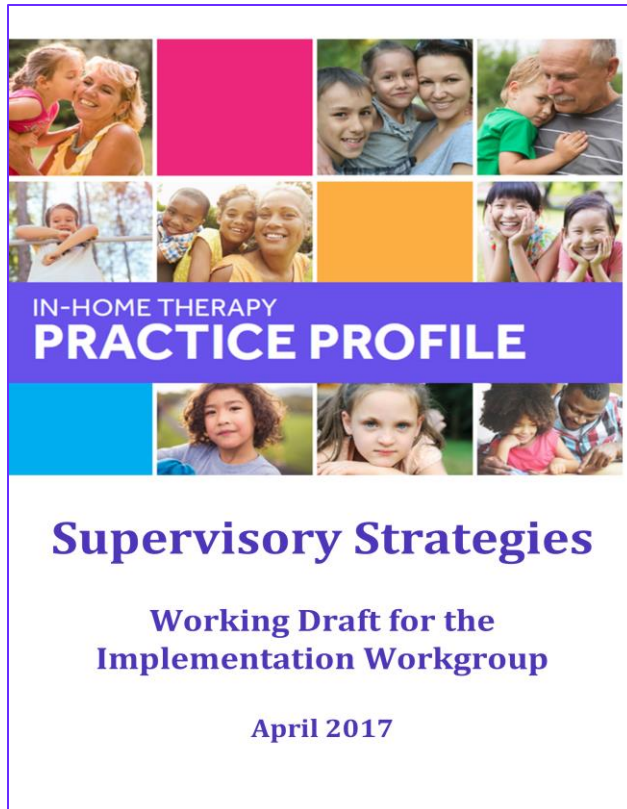
Wayside, Metrowest

**MassHealth**  
CHILDREN'S BEHAVIORAL HEALTH INITIATIVE (CBHI)

**CBH**  
KNOWLEDGE  
CENTER



# IHT Supervisory Strategies



1. Self-Assessment to guide supervision
  2. Behavioral Rehearsals
  3. Field Observations
- Definition / Purpose
  - Outcomes/ Theory of Change
  - Preparing and Conducting



IHT Practice Profile

TEST

May 15 - June 21

July 5 – August 15

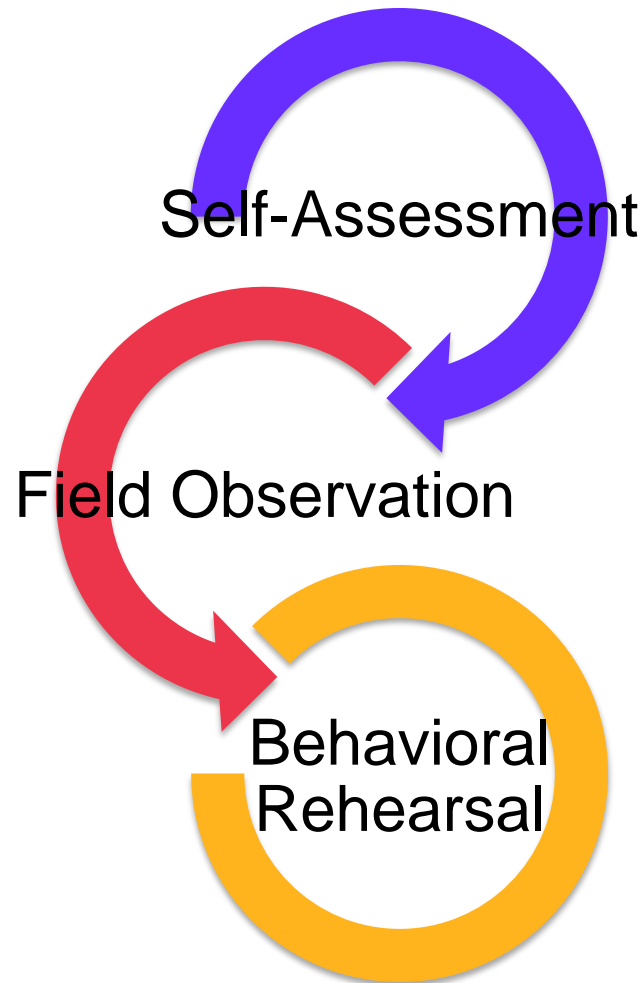
August 29 – Sept 19

REVIEW

June 28

August 23

Sept. 27





## Monthly Supervision Guided by Staff Self-Assessment

### Definition

Supervision meetings that are guided by the IHT Practice Profile self-assessment are intended to be discussions about the quality and consistency of IHT staff's practice across cases, within and across Practice Profile elements. The supervisor and supervisee have a joint obligation to ensure that regular (we suggest monthly) times are dedicated to supervisee-focused discussions.

### Purpose

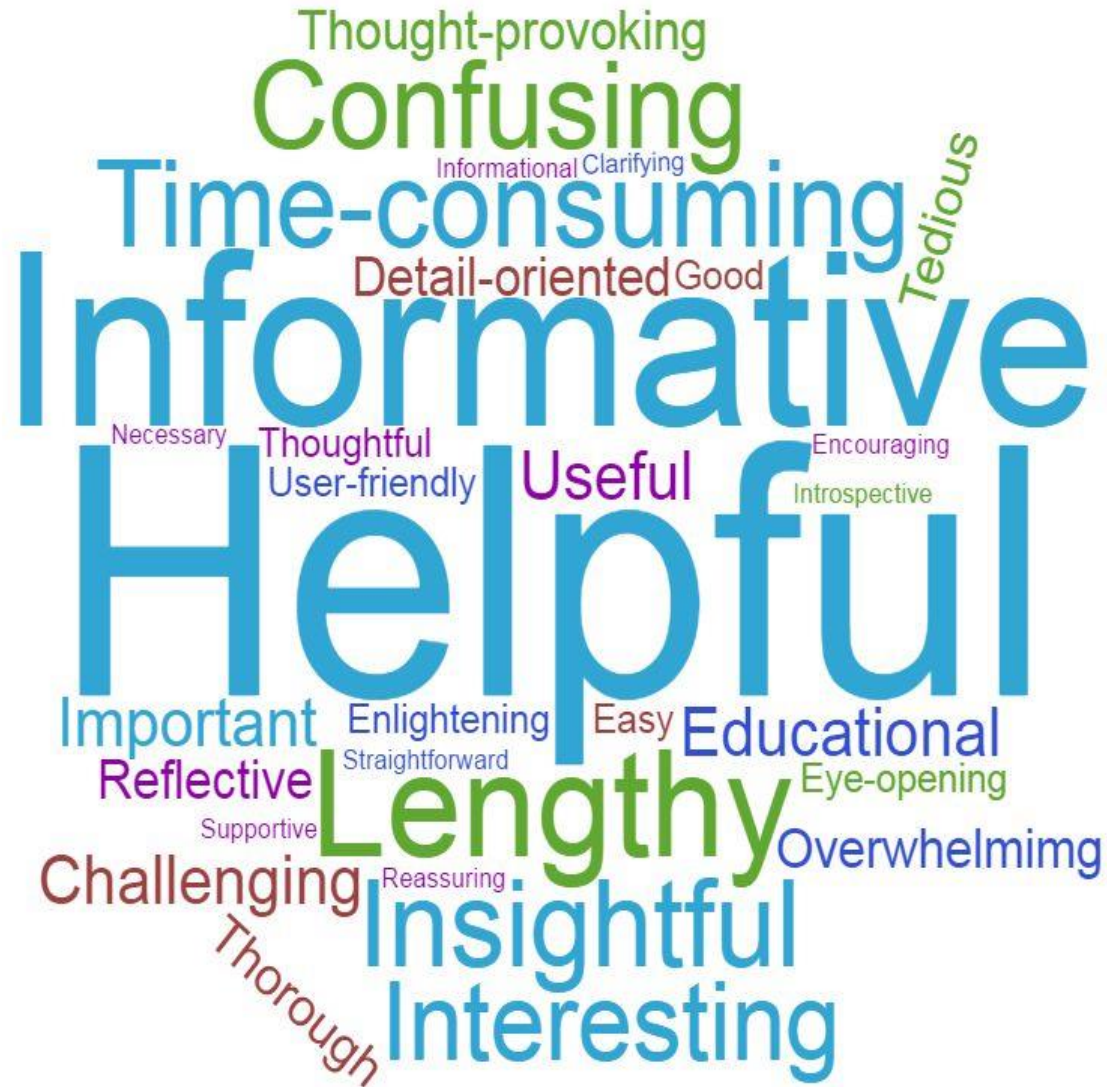
A supervisory session that is focused on a clinician's or TTS's practice development allows supervisors to:

- Reflect with IHT staff about their practice.
- Mutually assess staff's knowledge, skills, and attitudes
- Support staff in their practice development progression

### Tools

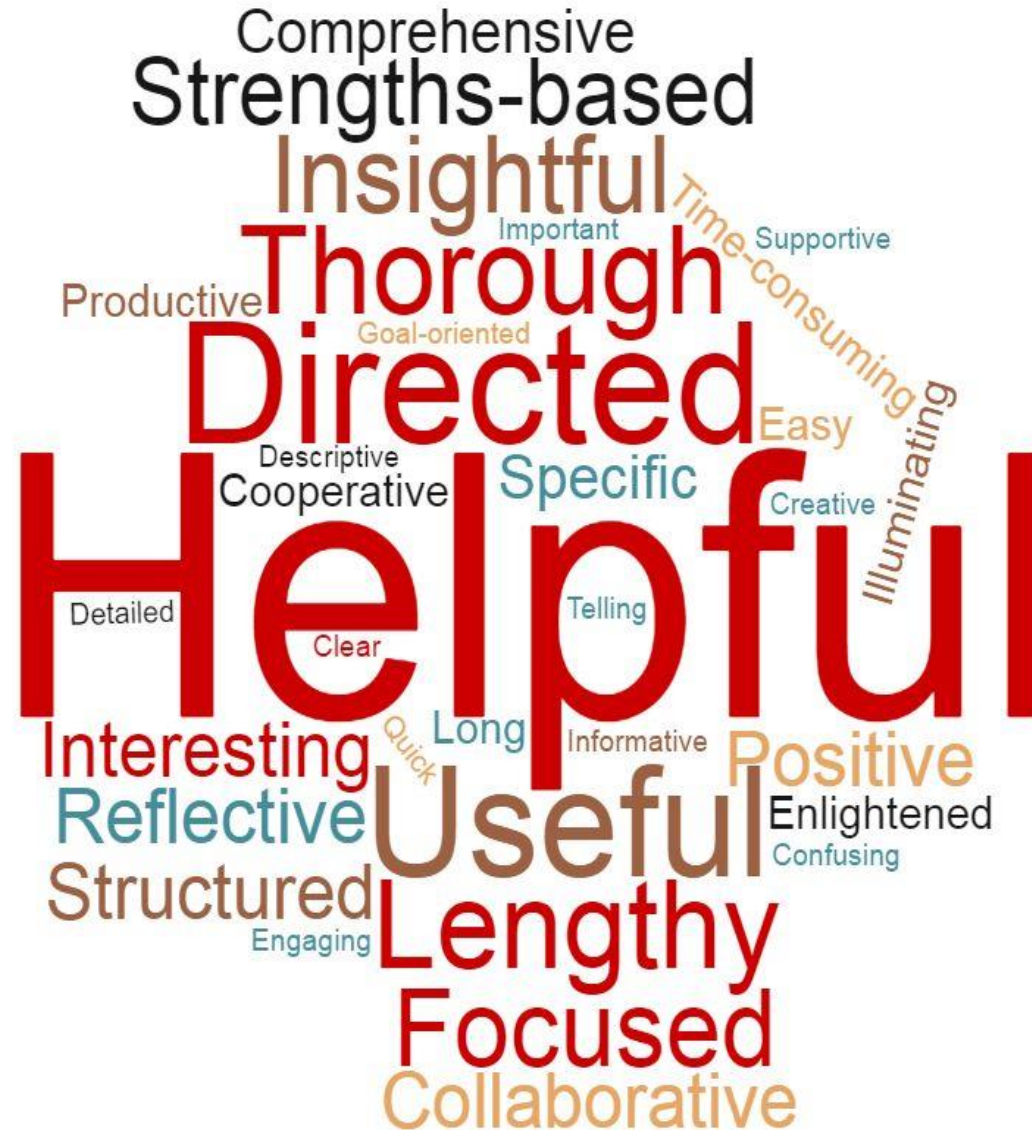
- Self-Assessment Tool
- Individual Skill Plan

# Staff Feedback on Self-Assessment

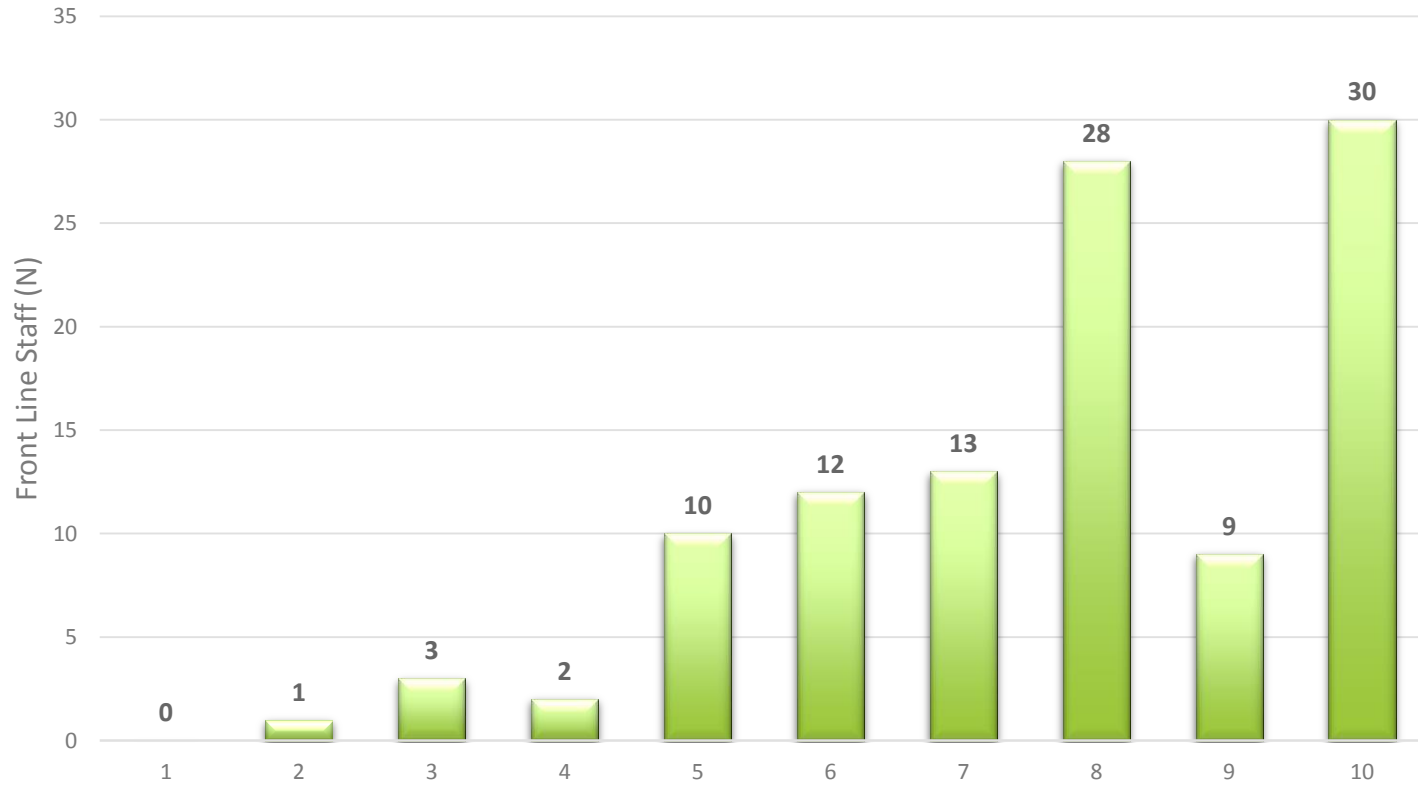




# Supervisors Feedback on Self-Assessment



# How likely is it that staff would recommend completing a self-assessment to a colleague?

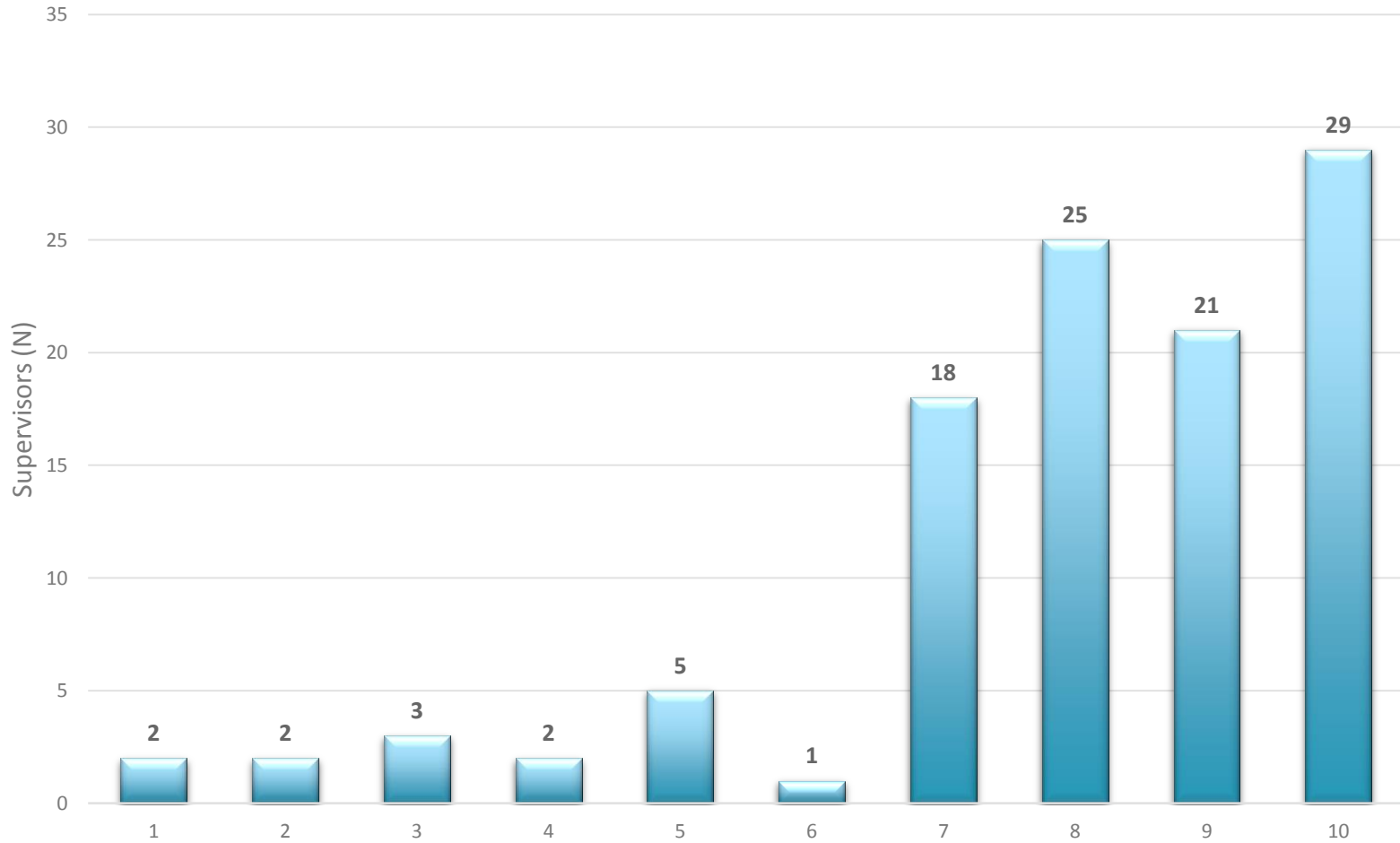


1 = I would not recommend this

5 = I'm unsure if I'd recommend this

10 = I would strongly recommend this

# How likely is it that supervisors would recommend utilizing a self-assessment in the context of supervision to a colleague?



1 = I would not recommend this

5 = I'm unsure if I'd recommend this

10 = I would strongly recommend this

## Self-Assessment: Provider Perspective

Erin L. Hourahan, LICSW

IHT Southeast

South Shore Mental Health



- ✓ What were your team's hopes and fears about testing this strategy?
- ✓ How did you implement it?
- ✓ What were the reactions of your staff? What lessons learned can you offer?

## Field Observation

### Definition

A field observation is a direct observation by the Supervisor of IHT staff outside of the office in order to directly assess their practice skills. Direct observation ensures that supervisors are not relying solely on staff self-reports or case documentation to understand a staff's practice skills and knowledge.

### Purpose

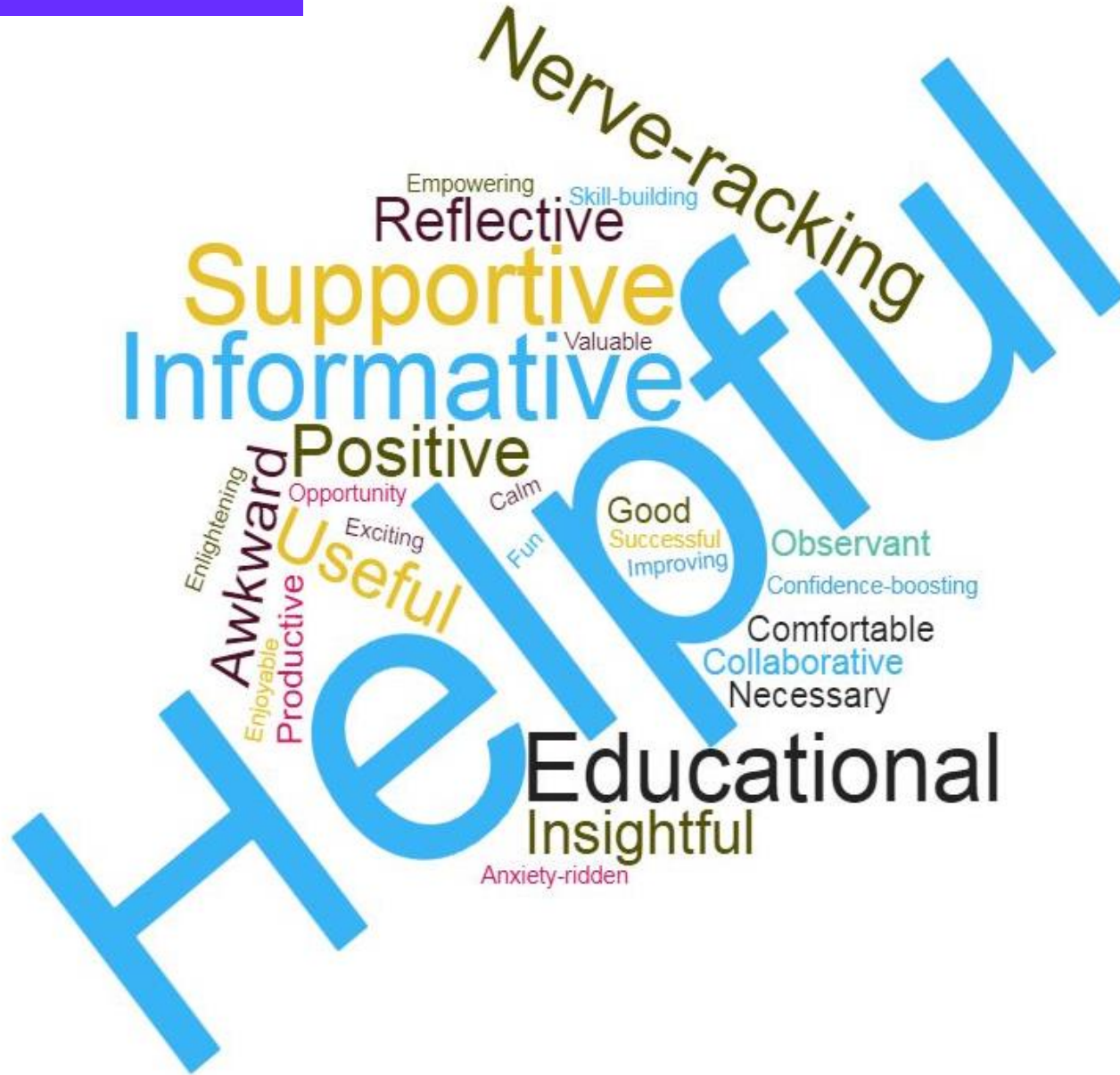
Field observation allows supervisors to:

- Assess staff's skills and attitudes in working with families.
- Assess the degree to which staff practice is consistent with case documentation and self-reports.
- Assess progress on skill development plans.
- Understand the nature and challenges of the work and the working environment.
- Join with supervisees around the experience (positive and negative aspects) of practicing in a home environment.

### Tools

- Field Observation tool
- Guidance for debriefing and providing feedback

# Staff Feedback on Field Observation

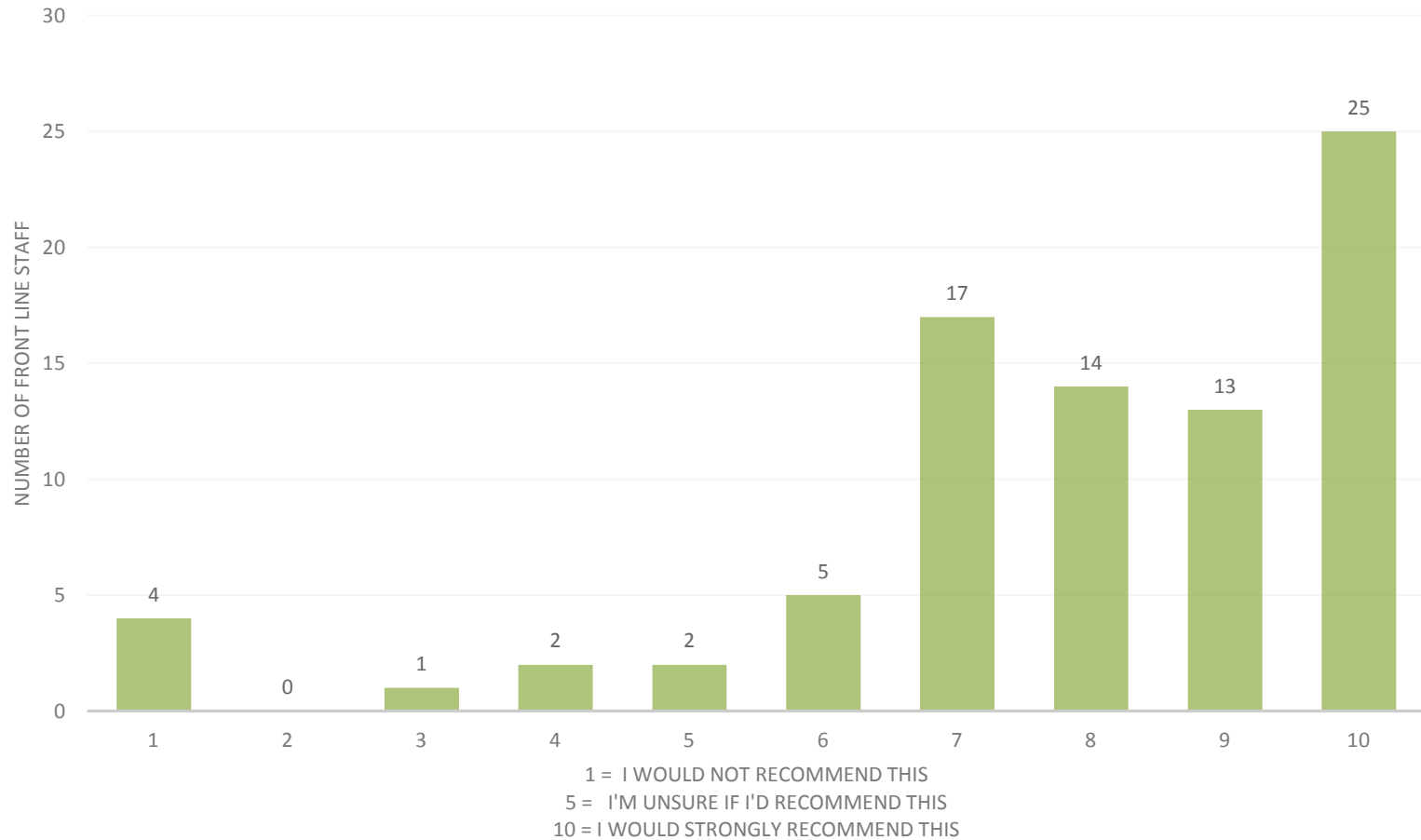




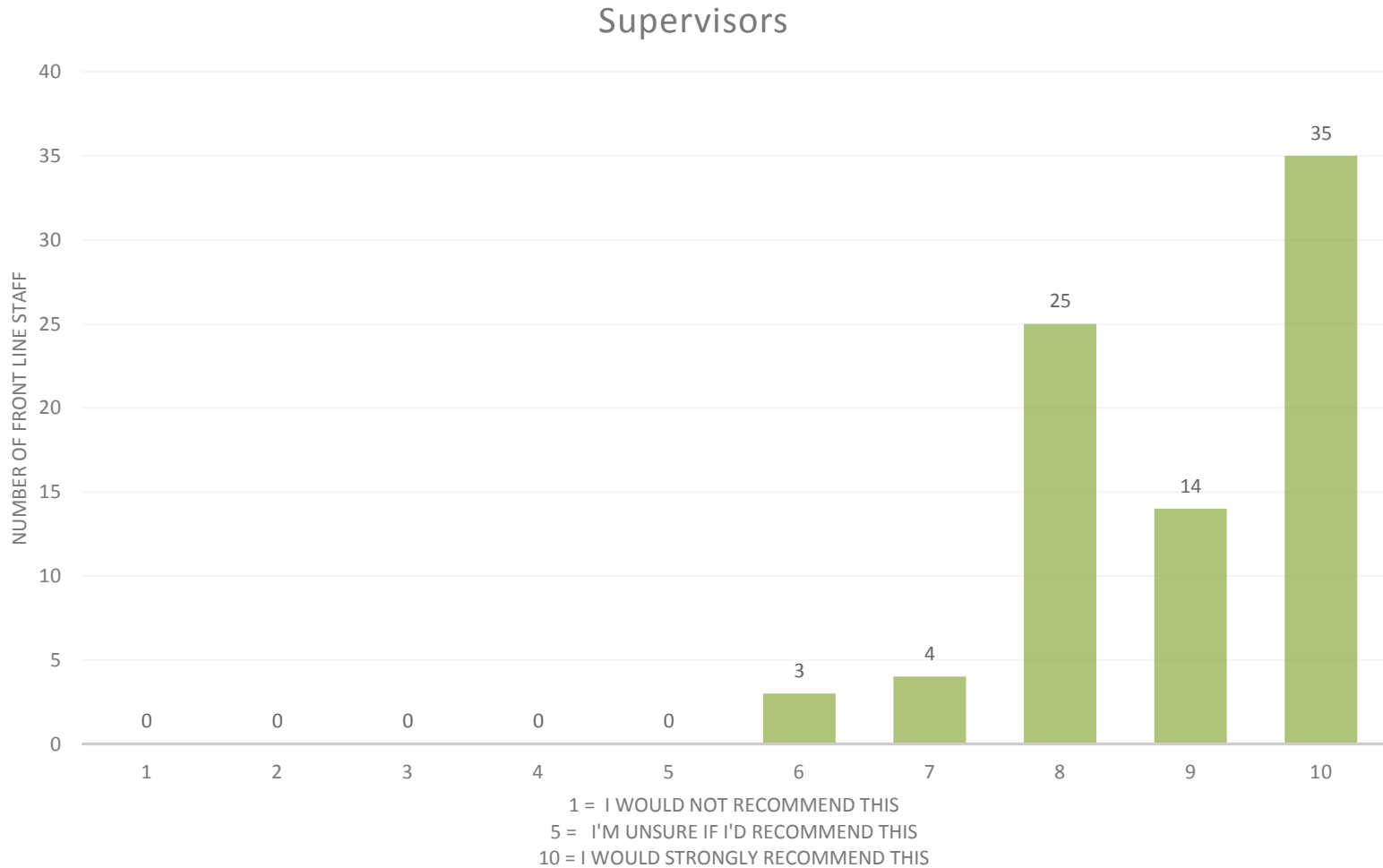


# How likely is it that staff would recommend a Field Observation to a colleague?

Front Line Staff



# How likely is it that you would recommend conducting Field Observations to a colleague?



## Field Observation: Provider Perspective

Meg List, LICSW

Clinical Director

CBHI/Home Base Therapy

High Point Treatment Center

- ✓ What were your team's hopes and fears about testing this strategy?
- ✓ How did you implement it?
- ✓ What were the reactions of your staff? What lessons learned can you offer?



## Behavioral Rehearsals

### Definition

Behavioral rehearsals are opportunities to practice skills using realistic scenarios while in a safe and supportive environment. Using a real or constructed case scenario, IHT staff practice their skills with colleagues who act in the roles of a youth, family member(s), and/or stakeholder(s).

### Purpose

Behavioral rehearsal allows supervisors to:

- Bring staff together in a group venue to share experiences and expertise.
- Build a collaborative work environment.
- Share best practices among staff.

### Tools

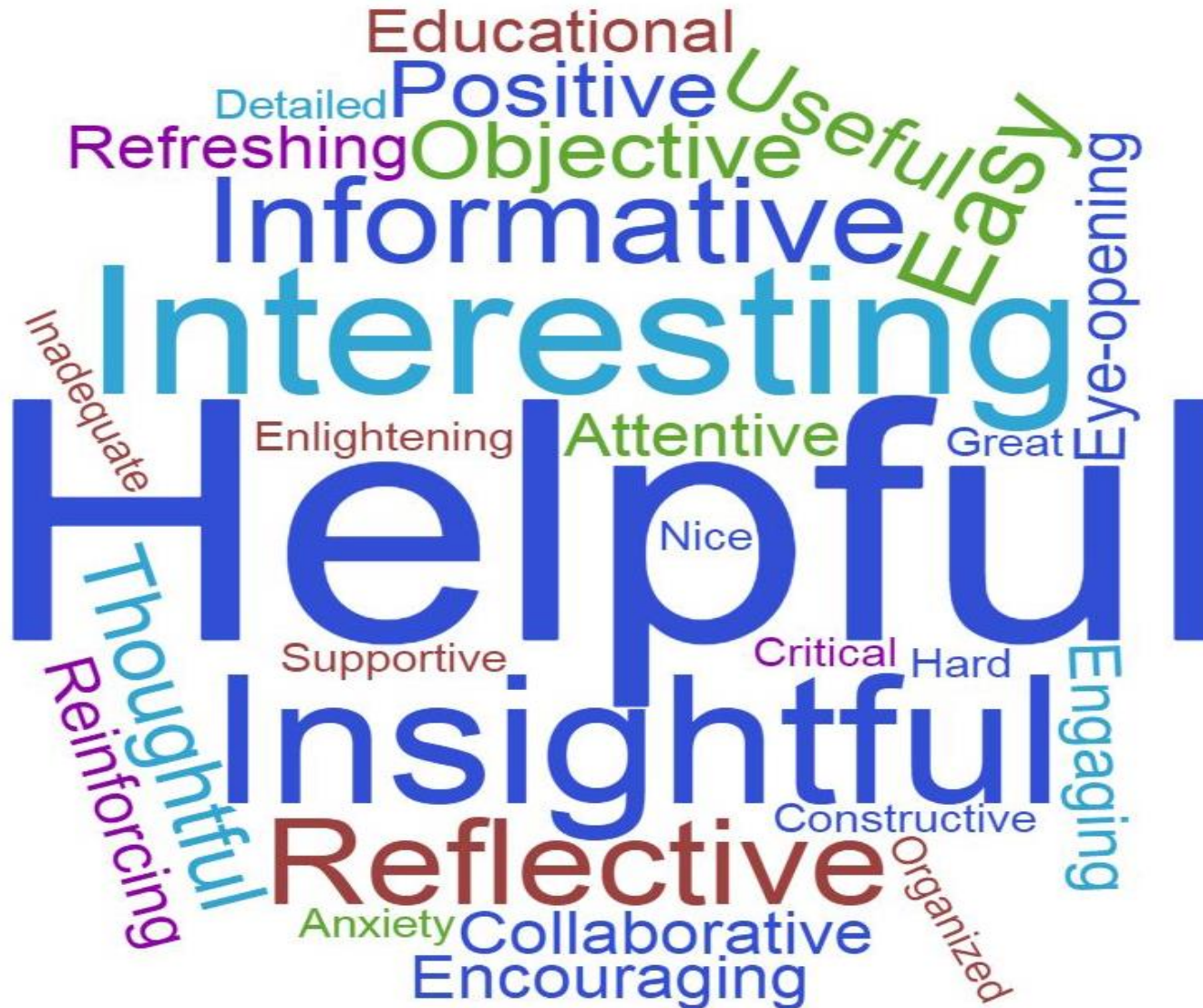
- Behavioral Rehearsal Observation tool
- Guidance for debriefing and providing feedback
- Sample Scenarios

# Staff Feedback on Behavioral Rehearsals as a Practitioner

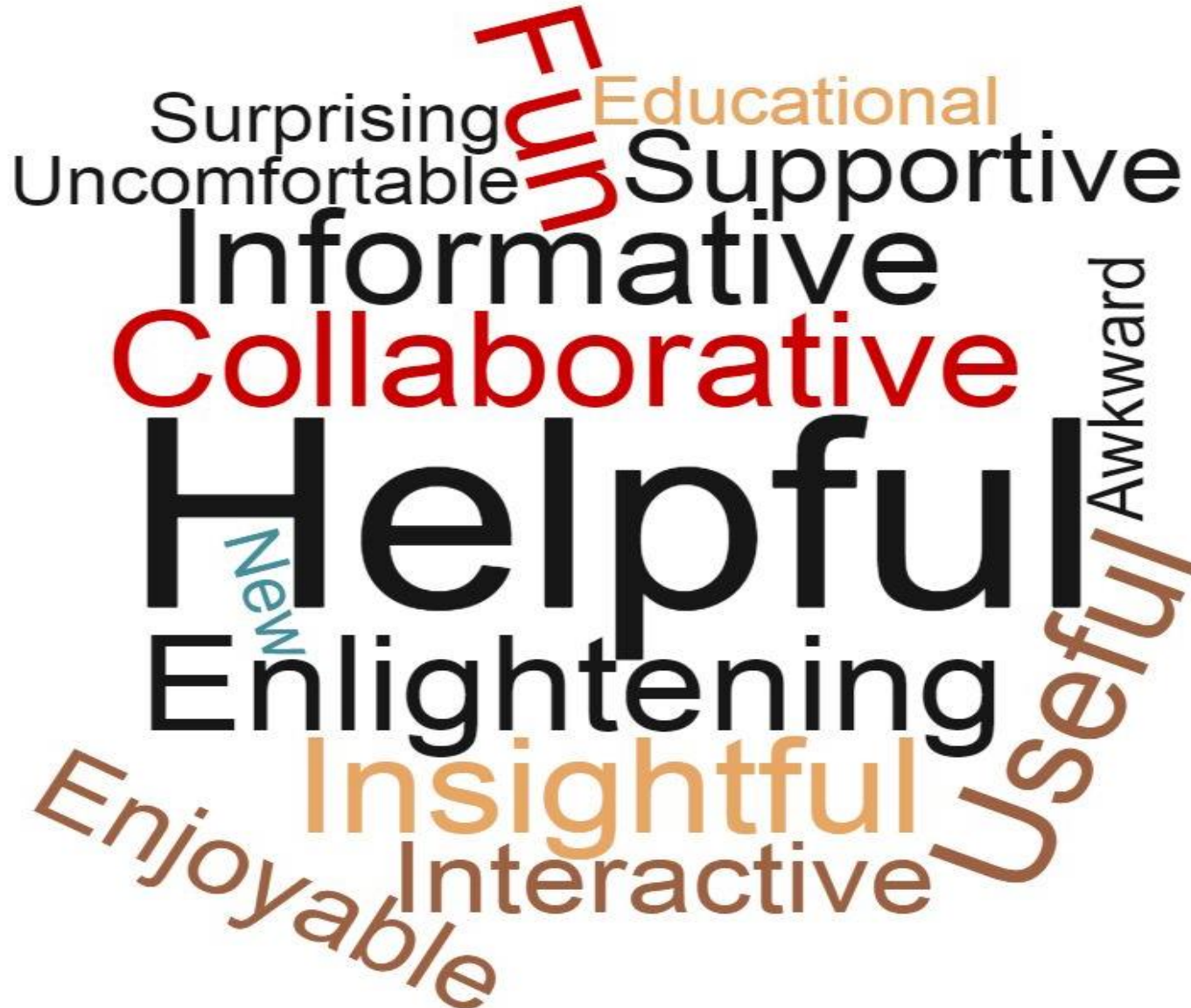




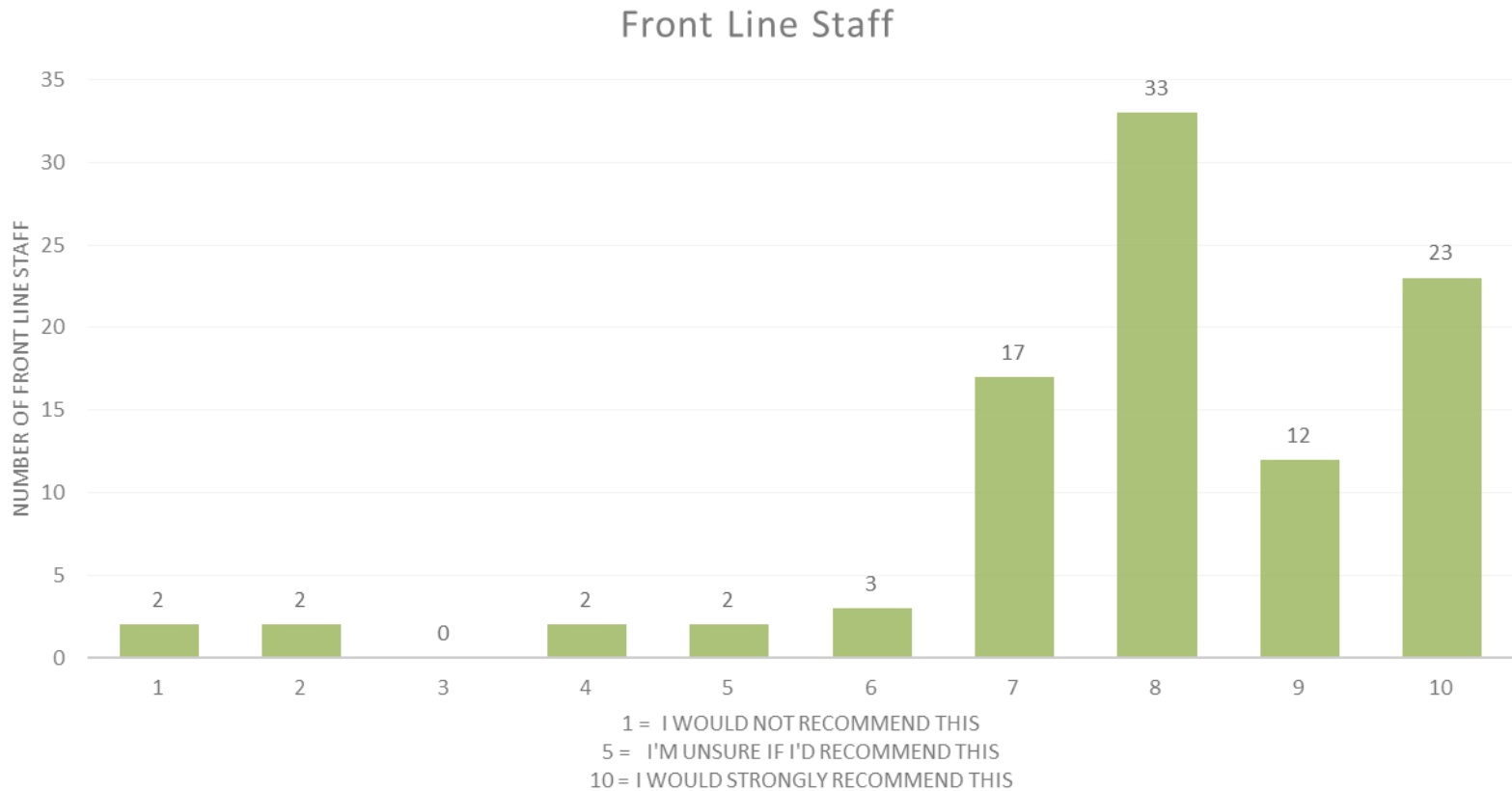
# Staff Feedback on Behavioral Rehearsals as an Observer



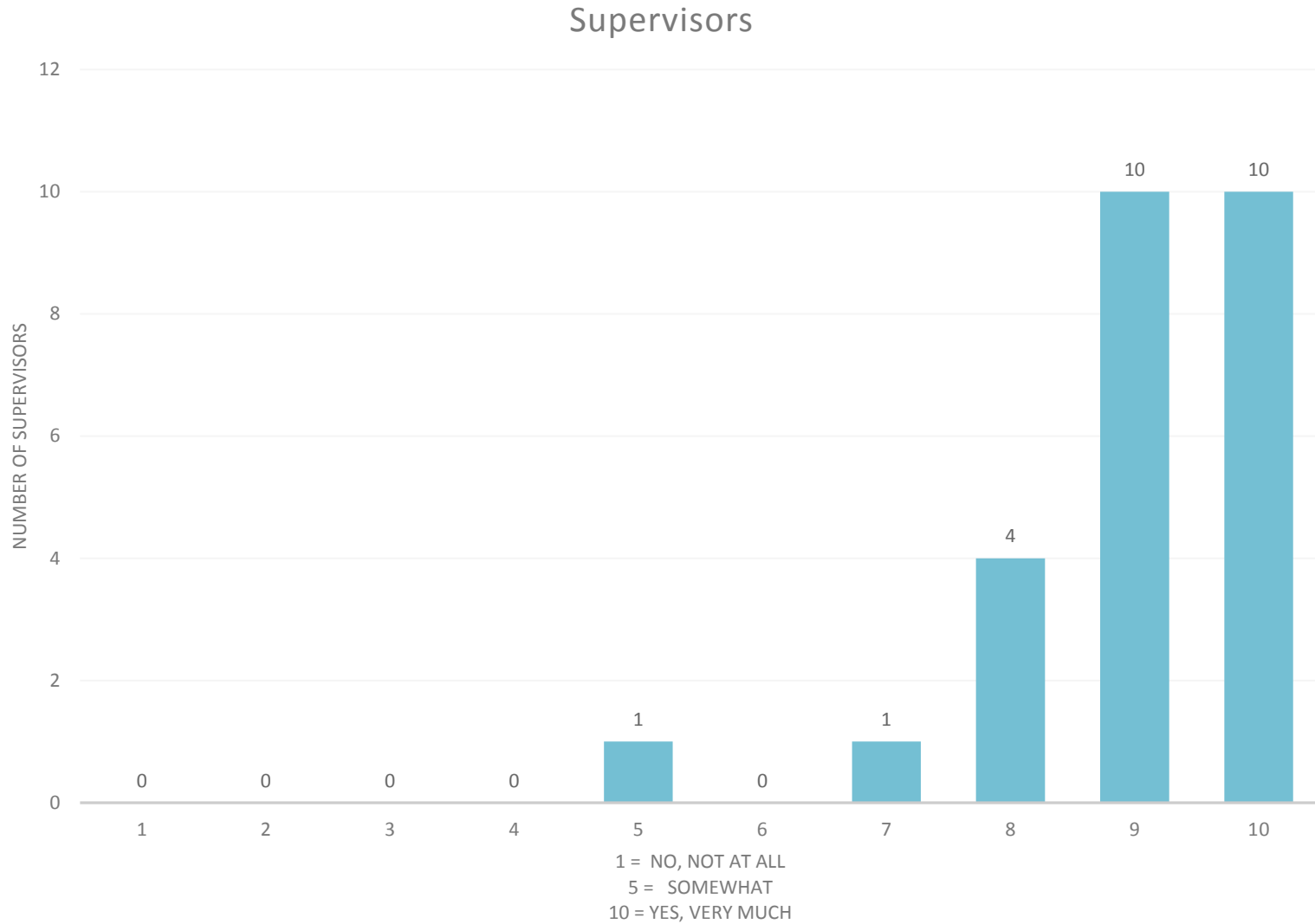
# Supervisors Feedback on Behavioral Rehearsals



# How likely is it that staff would recommend conducting Behavioral Rehearsals to a colleague?

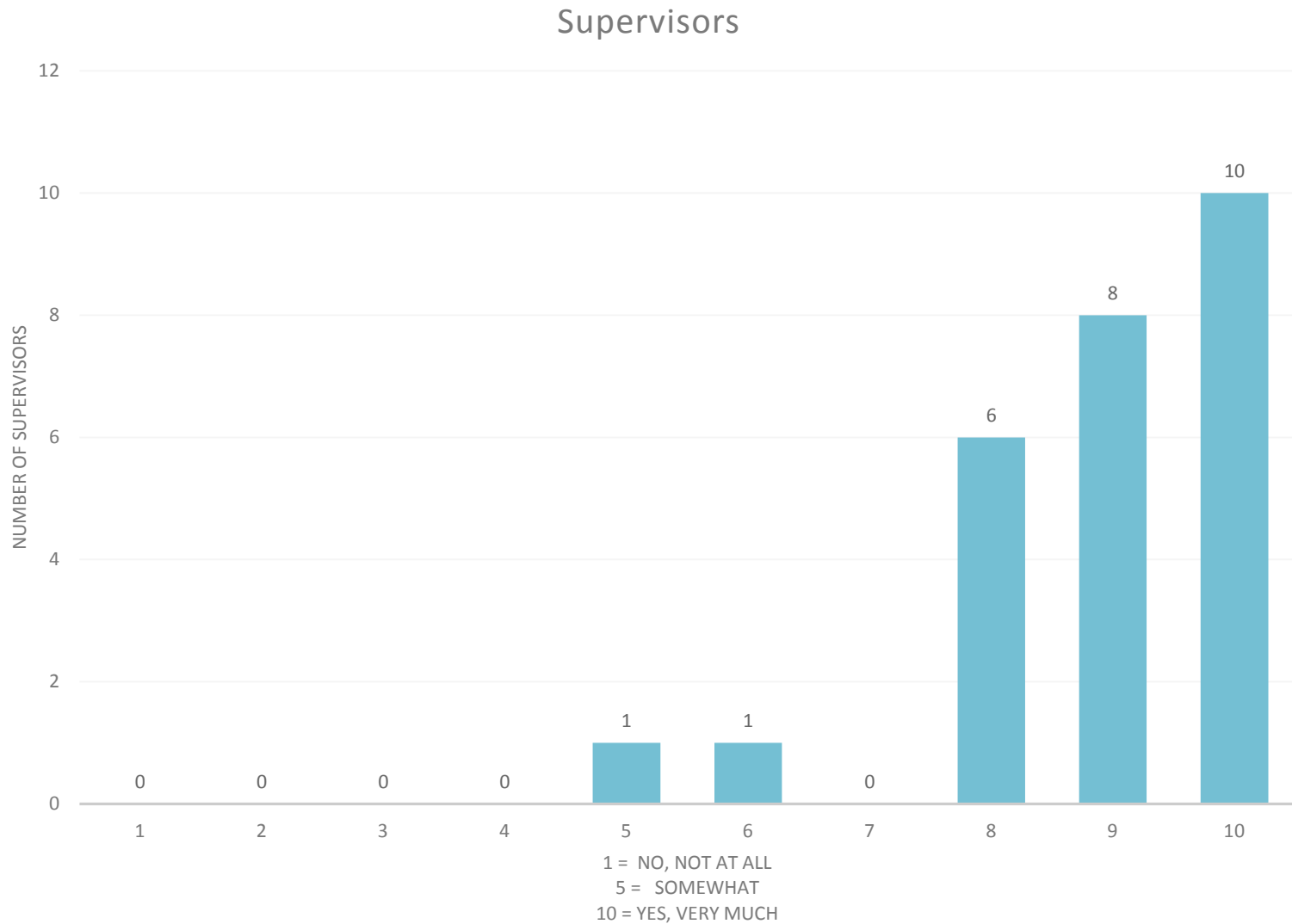


The Behavioral Rehearsal helped me bring staff together in a group environment to share experiences and expertise.

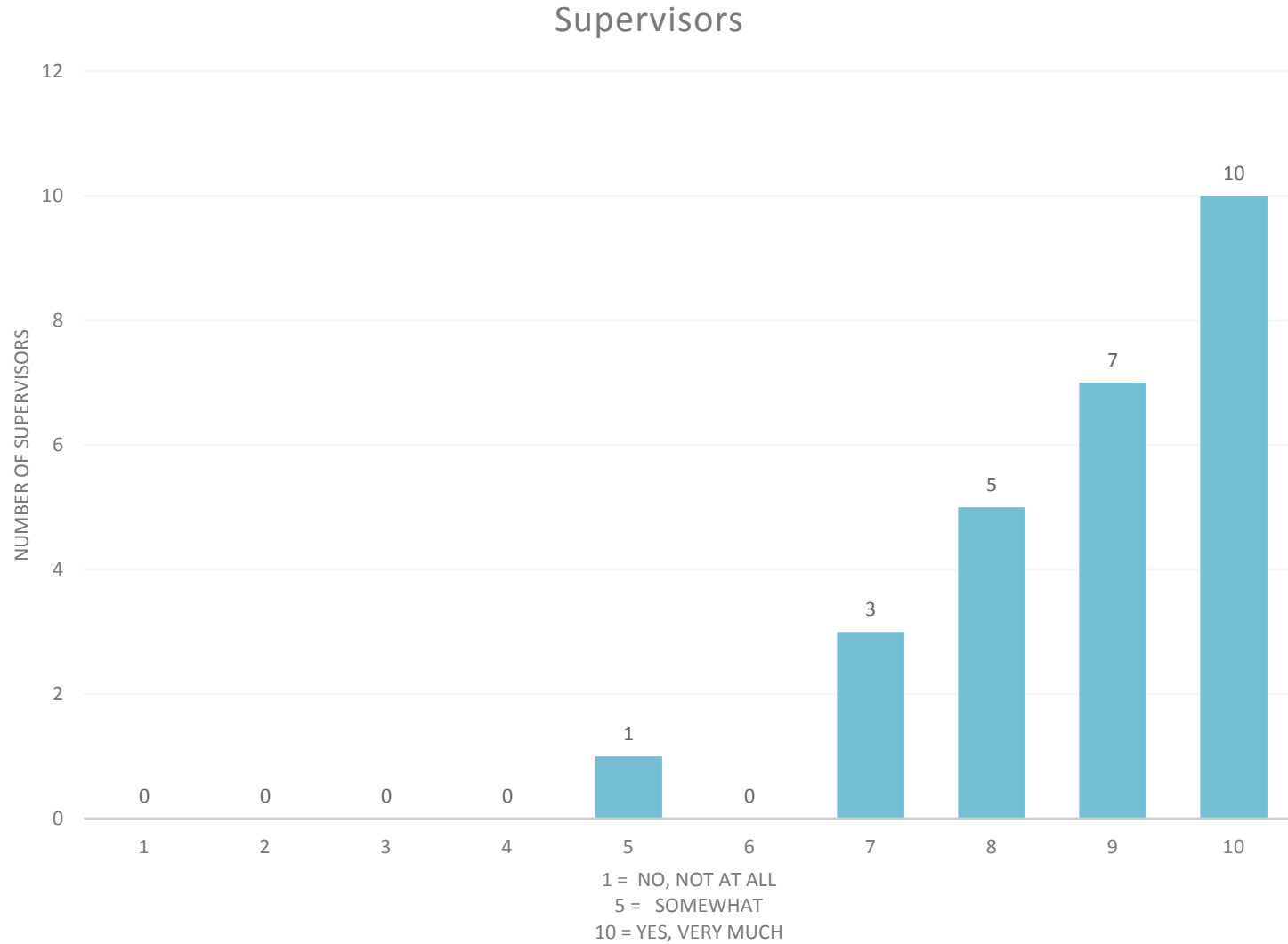




# The Behavioral Rehearsal helped me build a collaborative work environment.

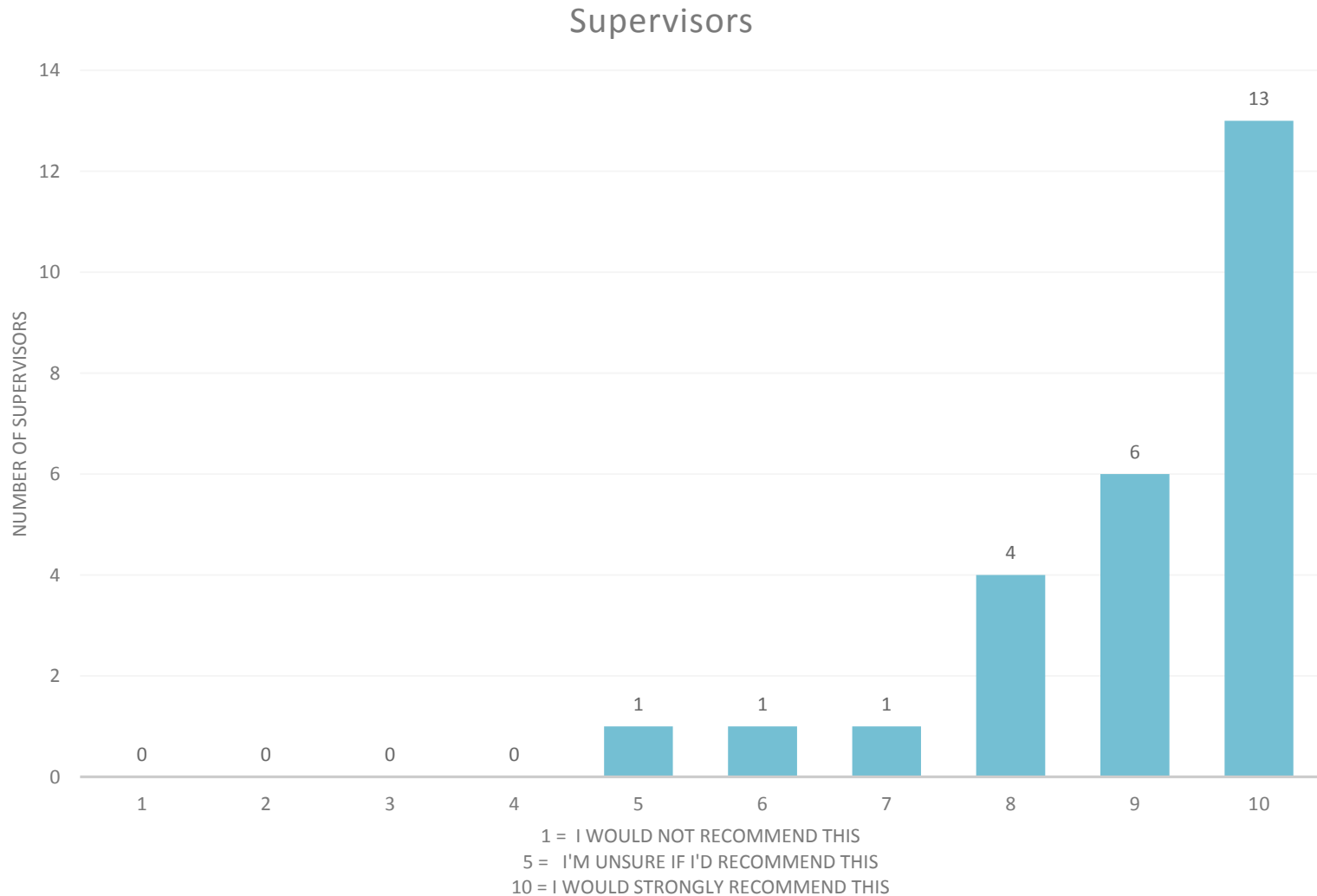


The Behavioral Rehearsal **helped me support my staff in demonstrating best practices.**





# How likely is it that supervisors would recommend using Behavioral Rehearsals to a colleague?



## Behavioral Rehearsal: Provider Perspective

Katelyn Gawthrope, LICSW

Clinical Director

Wayside Metrowest

Community Services



- ✓ What were your team's hopes and fears about testing this strategy?
- ✓ How did you implement it?
- ✓ What were the reactions of your staff? What lessons learned can you offer?

# What's Next?

November 1  
December 13

Scale Up Planning

January 2018

Begin Full Implementation

April 2018

Statewide Meetings



About The Center / Evidence-Based Programs / Practice Profile Library / Workforce / Hot Topics / Resources / Events / Contact

# In-Home Therapy Practice Profile: Overview

- What Are Practice Profiles?
- In-Home Therapy
- Young Adult Peer Mentoring
- Caring Together Continuum

**READ THE EXECUTIVE SUMMARY**



**DOWNLOAD THE IHT PRACTICE PROFILE**

In-home therapy (IHT) is a structured, strengths-based, collaborative therapeutic relationship among a clinical team, a youth, and the youth's family, developed with the purpose of treating the youth's behavioral health needs. The IHT Practice Profile describes the **nine core elements** of IHT practice. For each core element there is a detailed document that describes ideal, developmental, and unacceptable practices at the level of "saying and doing".

The IHT Practice Profile is a "co-created" product that was jointly produced by the CBH Knowledge Center and MassHealth's Children's Behavioral Health Initiative in partnership with seasoned IHT practitioners from across the Commonwealth and representatives from MassHealth's Managed Care Entities. A literature also informed the content within each core

Core Elements of IHT Practice Profile. Click on each icon to learn more.

- PRACTICING CULTURAL RELEVANCE
- ENGAGEMENT
- ASSESSMENT & CLINICAL UNDERSTANDING
- RISK ASSESSMENT & SAFETY PLANNING
- FAMILY-CENTERED CARE
- TRAUMA-INFORMED CARE

## IHT Practice Profile Resources and tools on the

CBH Knowledge Center  
website, in the Practice  
Profile Library

<http://www.cbhknowledgecenter/iht-practice-profile-1/>



### RESOURCES AND TOOLS

- [Expectations about race & racism in a helping relationship](#)
- Hardy, K.V. (2013). [Healing the hidden wounds of racial trauma](#). *Reclaiming Children & Youth*, 22(1), 24-28.
- Substance Abuse and Mental Health Services Administration. [Improving Cultural Competence. Treatment Improvement Protocol \(TIP\) Series No. 59](#). HHS Publication No. (SMA) 14-4849. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.
- Substance Abuse and Mental Health Services Administration. [Improving Cultural Competence: KAP Keys for Clinicians](#).
- Concha, M, Villar, M.E., & Azevedo, L, (2014). [Health Attitudes and Beliefs Tool Kit](#), Technical Assistance Network for Children's Behavioral Health, University of Maryland, Baltimore, MD.

### DOWNLOAD THIS SECTION

In the context of in-home therapy, practicing cultural relevance is: 1) the ongoing process of acquiring an understanding of how the values, beliefs, attitudes, and traditions of racial, ethnic, religious, sexual orientation, gender identity, socio-economic, and other groups contribute to our own and other people's cultures; 2) learning about personal circumstances, conditions, nature, and experiences that influence our own and other people's thinking, behavior, and community roles; 3) acknowledging differences and similarities in power and privilege among groups of people; and 4) using this knowledge to work effectively with all people.

**Contribution to the Outcome:** Actively working to understand the broadly defined, overall norms for each family's identified culture, the conditions of the family's local community, and the family's specific beliefs and traditions demonstrates that the IHT team values diversity and can adjust treatment to each family's situation. Discussing cultural considerations with each family highlights differences and similarities with the clinician's own culture that may either enhance or interfere with collaboration. Evidence of cultural considerations throughout the work — from first to last meeting with the family — underlines the strengths-based approach of IHT. Continuous learning about each family's culture shows commitment to reducing health disparities through ongoing learning and improvement.

### RESOURCES AND TOOLS

- [Race Matters: How to talk effectively about race](#)
- [Multicultural intake checklist](#)
- [The LEARN mnemonic](#)
- [Awareness tools: Self Client](#)
- [How to use a culturagram](#)
- [Combating mental health stigma in the African American community \(video\)](#)
- [Kujichagulia: Effective strategies in addressing trauma in African Americans \(webinar\)](#)
- [Meeting the Needs of Children, Youth, Young Adults, and Their Families Who are LGBTQI2-S \(webinar\)](#)
- [Tools to Help You Implement Culturally & Linguistically Competent Service Delivery](#)

## Resources Needed for Core Elements:

- Engagement
- Collaborative intervention planning
- Intensive therapeutic intervention
- Care coordination and collaboration
- Engaging natural supports
- Preparing to exit

Email resources to: [CBHKnowledgeCenter@MassMail.State.MA.US](mailto:CBHKnowledgeCenter@MassMail.State.MA.US)

