

EASA Staff Certification Process Rubric & Checklist

This rubric is meant to clarify the certification process for EASA program staff by clearly explaining what each element of the process is, how to complete it, and review the expectations for certain items that receive evaluation.

Please use this Rubric as a supplement to the full explanation of the certification process which can be found here:

www.easacommunity.org/resources-for-professionals.php

At the end of this document there is a checklist with all the certification elements, so you can track your own progress.

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GLOSSARY

Team member: Refers to EASA staff including direct and indirect service providers and appropriate support staff (for example: non-clinical supervisors, administrators, managers, peer support specialists). Team members can also include an individual's primary support system like family and friends.

Medical Provider: Refers to a Licensed Medical Provider with the ability to prescribe medications, or a nurse.

Provider: Refers to you a service coordinator/case manager, counselor, occupational therapist, peer support, and employment/education specialist.

Do you have a term in mind that you'd like to see defined in the glossary?

Let us know at easa@ohsu.edu!

Things to remember:

Some EASA Training can be provided on an as-needed basis, especially in rural and frontier communities and new EASA sites. If you would like to schedule a group or individual training session near you, please contact Ryan Melton (meltonry@ohsu.edu) or Katie Hayden-Lewis (haydenle@ohsu.edu).

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Core

Introductory Training

The Introductory Training for New EASA Team Members is offered by the EASA Center for Excellence 1-3 times per year. It is also available via webinar recording at www.easacommunity.com/resources-forprofessionals.php under the "Training Materials" section.

Multi-Family Group (MFG) Training

The MFG Training is offered by the EASA Center for Excellence 1-3 times per year, including an Overview Webinar option for non-facilitators. If you plan to facilitate MFG for your team, you must attend a 2 day inperson training OR the Overview Webinar PLUS a 1 day Skills Training.

SCID-5 Training The SCID Training is offered by the EASA Center for Excellence 2 times per year as a 2 day in-person training. The SCID is used to determine appropriate diagnosis and eligibility for CSC programs. This training is typically followed by another training on the SIPS diagnostic tool.

12 hours Consultation Participate in monthly consultation calls, feedback sessions at fidelity reviews, or meet with senior staff to gain consultation hours.

Check out the Conference Calls Info Sheet to find out when your group's monthly calls are scheduled. *Click here for Eastern Oregon Calls.

Community Education Demonstration Perform a Community Education Presentation and have it reviewed by certified staff, either in person or via video.

See the next page to review all the elements your presentation should include for a positive review.



Target a specific audience

Psychosis info is tailored to specific group values and interests

Early Recovery Message

- Positive & Hopeful
- Combat negative messages about life trajectory & stigma
- Why people develop these mental health symptoms
- Strengths-based successful life with psychosis messages
- Promotes understanding of adolescent and young adult typical developmental experiences to combat stigma



Core Elements of Treatment

- Psychoeducation, MFG, SFG
- Individual & Family Counseling
- Assertive Case Management
- Access and Approach to Medications
- Supported Employment/ Education

EASA Referral Process

- How to refer to EASA
- What referents, individuals, and families can expect from a referral
- Policies around accepting individuals with a range of insurance statuses and coverage (Emphasizes free consultation to promote early detection and referrals)

Symptoms

- Specific information re: observable psychosis risk symptoms
- Promote through education and success stories the early recognition of signs and symptoms of psychosis in the risk state and during active stages of psychosis
 and schizophrenia

Core

Medications Exam

Whether or not you prescribe medications, it is important to understand the rationale for medication treatment decisions, general treatment targets, and the side-effect profiles for six common medication classes.

Use the <u>Medications Exam Study Guide</u> to pass the <u>Medications Exam</u>.

Assignments:

Complete one (1) of each of the following tools and review your work with C4E staff:

- ☐ 1 Treatment/Service Plan
- ☐ 1 Strengths Assessment
- ☐ 1 Relapse Prevention Plan
- ☐ 1 Comprehensive Risk Assessment

See pgs. 6 - 11 for more information!

Many team members use these tools in their daily work—you can use one you've already done to review and get feedback. If you don't typically use these tools with EASA participants, you can borrow an example from a team member to review, or you can make up an imaginary participant for practice.



Don't forget to track your progress on the Checklist!

Advanced

SIPS Training The Structured Interview for Prodromal Syndromes (SIPS) Training is offered by the EASA Center for Excellence 2 times per year as a 2 day in-person training. The SIPS is a clinical tool used to diagnose high risk for psychosis. In order to use the SIPS you must complete this training.

Supported Ed./Employment Training

Complete either Individual Placement and Support (IPS) or Community Integrated Services (CIS) training to understand evidence-based approaches to support EASA participants in finding steady, meaningful employment or education. EASA C4E does not directly offer these.

Psycho-Social Practices Training Complete (or show that you have previously completed) at least 6 hours of training in each of the following areas:

- ☐ Client Outcomes (Feedback informed Treatment)
- ☐ Motivational Interviewing (MI)
- ☐ Cognitive Behavioral Therapy (CBT / CBTp)
- ☐ Strengths Based Model (SB)
- ☐ Dual Diagnosis (DD)

10 Case Presentations

Present individual cases during (in-person or phone) consultation meetings, individual consultation, feedback or interactive elements of fidelity review, or assignment reviews. The presentation can be based on a differential diagnosis, treatment interventions, engagement issues, etc. You must present a case, not just provide feedback on another case.

Advanced

14 hours Consultation

Continue to participate in monthly consultation calls, feedback sessions at fidelity reviews, or meet with C4E staff to gain consultation hours.

For instance, when you complete & review a Strengths Assessment (above) you also gain 1 consultation hour!

36 hours
Diff Dx.
Consultation

Differential Diagnosis Consultation hours are accumulated when this topic is discussed during general consultation (conference calls, review sessions, etc.)

15 hours
MFG
Consultation

MFG/Family Psychoeducation Consultation hours are accumulated by participating in the MFG conference call and/or when the topic is discussed during other consultation.

Assignments:

Complete the indicated amount of each of the following tools and review your work with C4E staff:

- ☐ 2 Treatment/Service Plans
- ☐ 2 Strengths Assessments
- ☐ 2 Relapse Prevention Plans
- ☐ 2 Comprehensive Risk Assessments
- ☐ 3 Assessments related to staff role on team: mental health assessment, SCID, OT, supported employment, psychiatric, etc.
- □ 3 Transition Plans





Individually driven (and family driven where indicated) goals and objectives



Individualized and strengths-based language



Reflection of individual (and family where indicated) changes as they occur over time, to represent the step-by-step and changing nature of the recovery process



Clearly measureable objectives



Identified individual (staff, family, natural support, etc.) responsible for assisting the individual and/or family or natural support system with goal



Clearly outlined time frames for completion of goals



Transition goals and plans

Strengths
Assessments
should
consist of:



Inventory

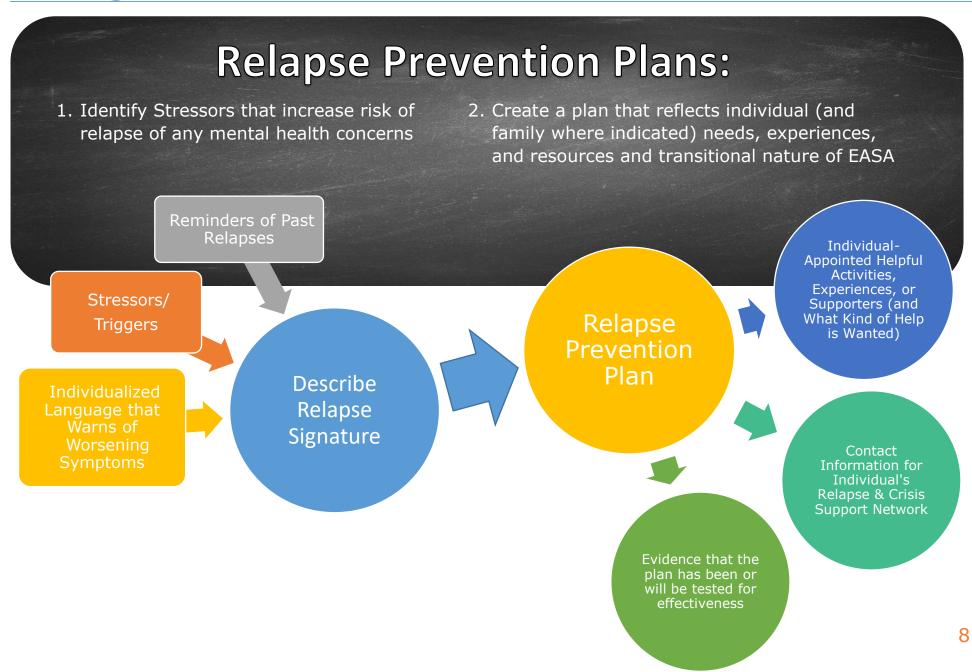
Current Status, Desires, Aspirations, & Resources

Consider:

Daily Living Situation Finances and Insurance Vocation and Education Social Supports Health Leisure/Recreational Spirituality

Prioritization

A collaborative list of action steps to reach individual's goals



Comprehensive
Risk Assessments
should include:



Evaluation

Unique Risks for The Individual

May include:

Suicide
Violence
Victimization
Disorganization
Impulsivity
Delusional Content,
suggesting harm to self or others
Family Conflict, which might lead to increased risks

Planning

A safety/crisis plan is completed, and when permission is given, there is evidence it has been shared with relevant members of the individual's support network and clinical team.

Assessments should be...

- Comprehensive
- Culturally informed

And should consider...

- Bio-social-social assessment
- Strengths assessment
- Clinical recommendations
- Diagnostic rule-outs



EASA teams (and Assessments) Demonstrate Cultural Awareness & Humility by:

- Including interpreters and translations for the preferred language of individuals and their families
- Identifying appropriate location of these activities
- Use of relevant language and references
- Use of accessible written communication styles
- Following individuals' values & preferences

Transition Plans

Make a plan for continued success as the individual graduates from the EASA program. In the final 3-6 months of EASA participation, gather & review all of the following with the individual:

Checklist

- Relapse prevention plan & strengths assessment reviewed and updated
- Relapse prevention plan is realistic and has been tested for effectiveness
- 1+ advocates have been identified and know the plan in case of relapse

Crisis and/or Safety Plan

- · Individual's demographics
- Includes accessible resources for individuals / their support networks
- General history of effective and ineffective interventions/strategies, and preferences around use of medication

Medical Provider

- An identified medical provider or nurse
- Completed Release of information
- Individual has agreed about appropriate 'fit' of medical provider
- Individual's insurance has been verified as valid for after program completion
- Accessible means of transportation or form of communication (i.e. telemedicine) to and from medical provider has been established
- Assessments, medication history, and relapse prevention plan have been shared with medical provider

Mental Health Counseling

- Individual and family identify if they want to continue counseling services after program completion
- · Counselor is identified, been met and accepted as a good 'fit' by individual and/or family
- Insurance and accessible transportation to attend sessions is planned or verified
- Consented release of information has been signed to allow sharing of information between existing and future counselors

Medications

- Continued access to prescribed medications after program completion
- A medication prescriber identified to meet meds needs within 3 months of program completionIndividual knows how to secure access to medications

Support System

- Natural support system members have been consulted and are in agreement that the individual is ready for transition
- Meeting has occurred and transition plan has been reviewed, revised if necessary, and transition scheduled

Checklist

Core	Intro Training 🏶
	Multi-Family Group Training 🏶
	SCID Training 🏶
	Pass Medications Exam
	Community Education Demo Reviewed
	12hrs Consultation (conference calls): / 12
	Assignments:
	☐ 1 Treatment/Service Plan
	☐ 1 Strengths Assessment
	☐ 1 Relapse Prevention Plan
	☐ 1 Comprehensive Risk Assessment
Advanced	SIPS Training 🏶
	IPS/CIS Training
	Psycho-social Practices Training:
	☐ MI Certificate
	☐ SB Certificate
	☐ CBT Certificate
	☐ CO Certificate
	□ DD Certificate
	Assignments:
	☐ 3 Assessments: / 3
	☐ 3 Transition Plans: / 3
	☐ 2 Treatment/Service Plans: / 2
	☐ 2 Strengths Assessment:/ 2
	☐ 2 Relapse Prevention Plan:/ 2
	☐ 2 Comprehensive Risk Assessment: / 2
	10 Case Presentations: / 10
	14hrs Consultation: / 14
	36hrs Diff Dx Consultation: / 36
	15hrs MFG Consultation: / 15