

Felton Institute in partnership with California Institute for Behavioral Health Solutions (CIBHS)

# Cognitive Behavioral Therapy for Psychosis (CBTp) Training and Implementation

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# Learning Partnership and Collaboration

Offering the most relevant, innovative, and effective training and implementation programs requires:

- Learning from one another
- Partnership and sharing ideas
- Willingness to adapt

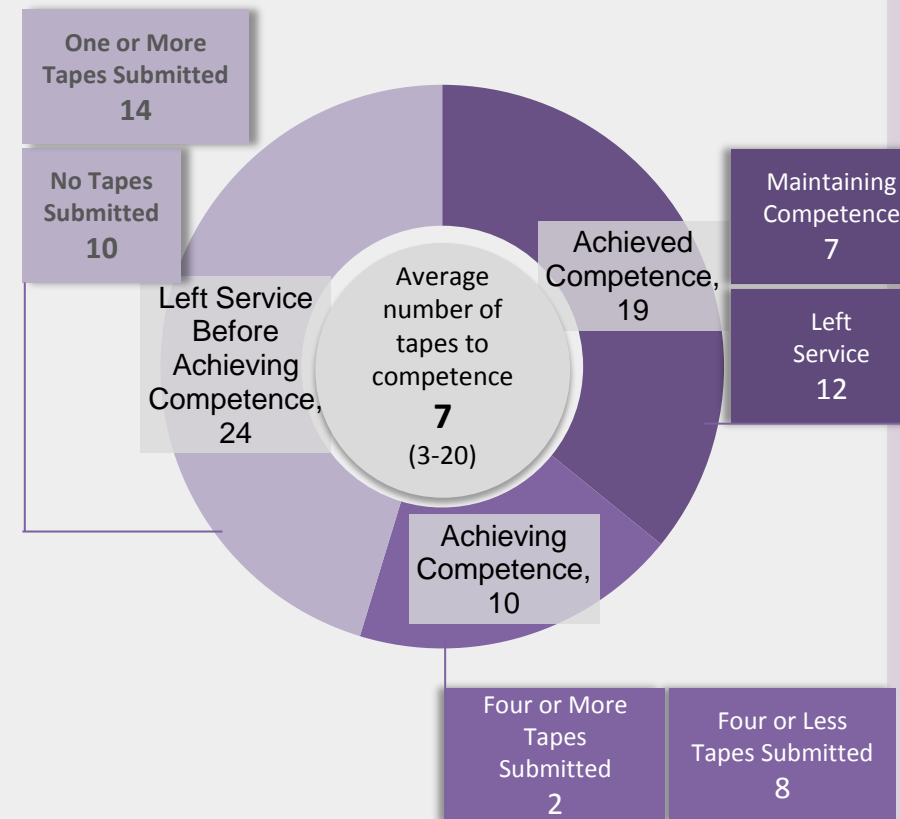
Felton Institute, CIBHS, and The BeST Center will demonstrate two methodologies for CBTp implementation today.

# Felton Institute History

Prevention and Recovery from Early Psychosis Program was incubated in Felton Research and Training under the Clinical Training Direction of Dr. Kate Hardy.

- PREP provides CBTp for individuals with a recent-onset of psychosis in a community setting.
- Since its inception, PREP has provided diagnostic and/or referral services to 842 individuals and treated 482 individuals in 5 Northern California counties.

## Total Clinicians Trained in PREP 53



# CIBHS History

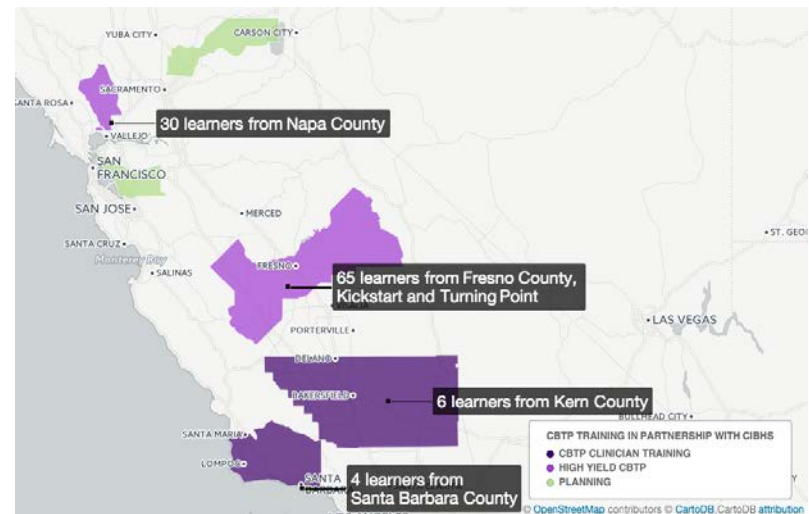
- The California Institute for Behavioral Health Solutions (CIBHS) is a non-profit agency that helps health professionals, agencies and funders improve the lives of people with mental health and substance use challenges through translation of policy to practice change, training and implementation, evaluation, workforce development, technical assistance, and research.
- CIBHS was established as the **California Institute for Mental Health (CiMH)** in 1993 to promote excellence in mental health services. Local mental health directors founded CiMH to work collaboratively with all mental health system stakeholders. The commitment to collaboration has led the board to expand board membership to include consumers, family members, and other interested persons representing the public interest.
- On July 1, 2014, CiMH merged with the **Alcohol and Other Drug Policy Institute (ADPI)** to form the California Institute for Behavioral Health Solutions (CIBHS).



# Collaboration and Partnership

## ➤ CIBHS & Felton Institute Partner with Insight UK

- Provided series of 1 day intro to CBTp workshops across California with Douglas Turkington and David Kingdon
- Insight UK provided Master Trainer Training in CBTp for Clinicians to Felton/CIBHS Trainers
- Insight UK provided Master Trainer Training in CBTp High Yield
- Training and implementation in both models took place across California
- In response to the specific needs of both providers, and populations served in CA, a new model was formed in collaboration with Sara Tai and Robert Reiser.



# Lessons Learned

- Learn from Partners: collaborative efforts from other leaders in the field
- Supervisory support is essential
- Consistent coaching increases engagement
- Infrastructure to support practice ongoing
  - Who should be trained?
  - Are we addressing the specific needs of the populations served in your organization?
  - Will the organization support CBTp ongoing?



# Cognitive Behavioral Therapy for Psychosis for Front Line Providers (CBTp FLP)

- Pre-Implementation Planning Meeting (in-person or webinar, conf. call)
- Pre-Training Participant Survey
- 2 Day Initial Clinical Training for Supervisors and Staff
- 1 Day Training for Supervisors Only
- Coaching – 11 one hour sessions
  - Supervisors and Staff for the first month, supervisors only for the remainder
  - 2 times per month for 8 sessions total followed by
  - 1 time per month for 3 sessions total

# Cognitive Behavioral Therapy for Psychosis for Front Line Providers (CBTp FLP)

- Review of 2 Supervision Tapes using the evidence-based clinical supervision model developed by Derek Milne
- Review of CBTp FLP Checklist to monitor fidelity to the model
- Monthly Administrator Calls (for TA, peer to peer learning support)
- Evaluation Protocol and strategy-measure effectiveness of practice at client level
  - Data Coordination and Collection
  - Bi-annual Program Performance Dashboard Reports



# Evaluation Protocol CBTp FLP

- At the beginning of services and every 1 month, practitioners will be asked to administer brief assessment tools
- Evaluation is a main component of providing CBTp FLP. Without evaluation, we have no way of knowing if the service is successful.

Assessment Tool	Description	Type of tool	Time to complete
Patient Health Questionnaire (PHQ-9)	Measures the severity of depression	Client Self-Report	2-5 minutes
Generalized Anxiety Disorder (GAD-7)	Measures the severity of anxiety	Client Self-Report	2-5 minutes
Distress Rating Scale	measures distress rate	Client Self-Report	2-5 minutes
Global Functioning Scale – Social and Role	Measures functioning in areas of relationships and school/work	Practitioner/Client report	5-10 minutes
Work and Social Adjustment Scale	Measure of functioning and Adjustment	Client Self-Report	5-10 minutes
Outcomes Rating Scale/Youth Session Rating Scale (ORS/YSR)	Process measures	Client Self-Report	1-2 minutes

- Two important questions guide the evaluation:

- Is service benefitting clients as intended?

- Is service progressing as planned?

- The tools that practitioners will administer are brief, valid and reliable.
- Results will be entered into electronic data reporting system called eBHS. Data entry is easy and simple and will not take much time.

# California Institute for Behavioral Health Solutions (CIBHS) in partnership with Felton Institute

To join our collaboration or to find out more information about how you can implement CBTp FLP please contact:

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