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Program Strategy

Amy N. Cohen, PhD

Director | SMI Adviser

American Psychiatric Association

The Clinical Support System for Serious Mental Illness (CSS-SMI) is a Substance Abuse and Mental Health Services Administration (SAMHSA) funded initiative implemented by the American Psychiatric Association (APA).



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DISCLOSURES

I have no relationships or conflicts of interest related to this presentation.

SMI ADVISER VISION STATEMENT

To transform care for people who have serious mental illness so they can live their best lives.



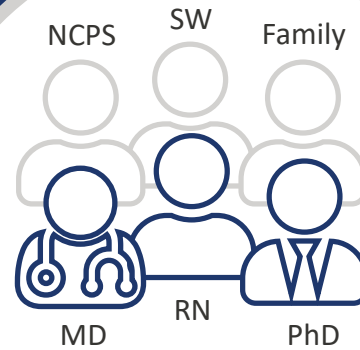
SMI ADVISER IS...

A national initiative that serves clinicians and providers across all mental health practice settings

Focuses on the three most common conditions associated with serious mental illness: bipolar disorder, major depressive disorder, and schizophrenia

SMI ADVISER OFFERS...

EDUCATION ON EVIDENCE-BASED PRACTICES



SMI Care Team

DIRECT CONSULTATION TO CLINICIANS

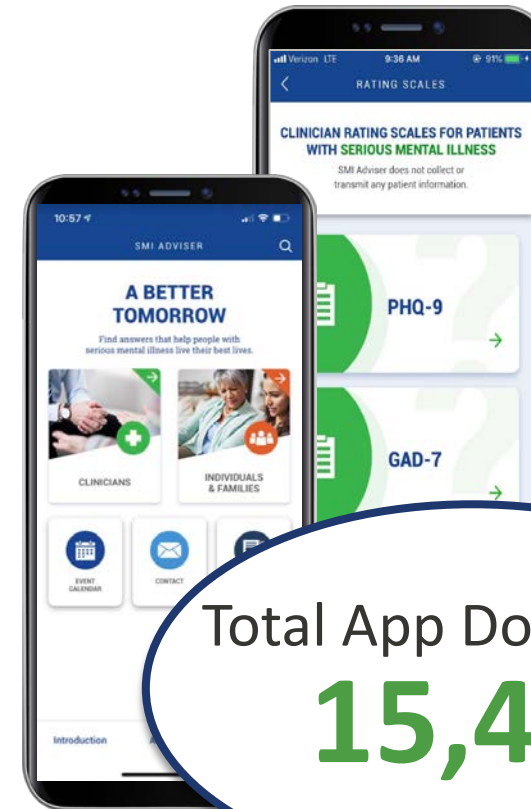
VETTED, EVIDENCE-BASED RESOURCES

MULTIPLATFORM CONTENT DELIVERY



Total Website Users
1,094,377

Visit at SMIadviser.org



Total App Downloads
15,435

Download at SMIadviser.org/app

Data as of August 31, 2021

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An APA and SAMHSA Initiative

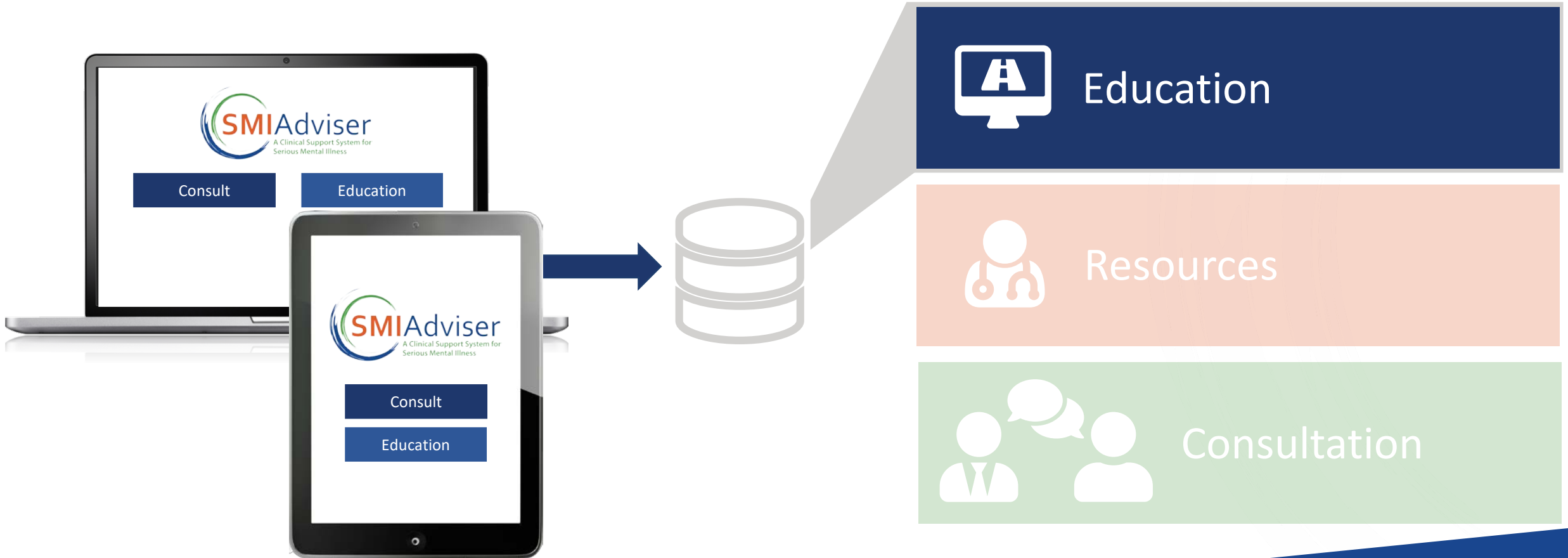




PROBLEMS THAT SMI ADVISER SOLVES FOR CLINICIANS

PROVIDE OPPORTUNITIES TO IMPROVE KNOWLEDGE AND SKILLS

SMI ADVISER STRATEGIC APPROACH



SMI ADVISER EDUCATION CATALOG

200+ webinars
and online modules

Trained
42,000+ clinicians

The screenshot displays the SMI Adviser Education Catalog interface. At the top left is the SMI Adviser logo, and at the top right is a 'Catalog' link. Below the logo is a 'FIND COURSES' section with a search bar containing the text 'I'm looking for....' and buttons for 'Search' and 'Clear'. Underneath the search bar are three dropdown menus for filtering: 'Filter By', 'SMI Subject', 'Activity Type', and 'Credit Type'. Below the filters, it shows 'Result 1 - 20 of 176' and a 'Sort By' dropdown set to 'Most Recent'. The main content area features four course cards, each with a 'New!' badge in the top left corner. The first card is titled 'Bipolar and Alcohol Use Disorders: Break the Magnetic Force!' and lists credits: CME: 1, NCPD: 1, Psychology CE: 1, and Social Work CE: 1. The second card is titled 'Leveraging Knowledge of Clozapine's Pharmacodynamics and...' and lists credits: CME: 1, NCPD: 1, and Participation: 1. The third card is titled 'Integrating Equity and Diversity in Digital Mental Health Interventions for...' and lists credits: CME: 1, NCPD: 1, Psychology CE: 1, Social Work CE: 1, and Participation: 1. The fourth card is titled 'Integrating Cultural Competence into Evidence Based Practices with...' and lists credits: CME: 1, Psychology CE: 1, Social Work CE: 1, and Participation: 1. Each card includes a 'View Details' button and a 'Launch' button.

VIRTUAL LEARNING COLLABORATIVES

- Hands-on, in-depth, interactive online courses led by subject matter experts
- Real-world, evidence-based approach to address specific topics and challenges around SMI

The screenshot displays a course interface with a dark sidebar on the left and a main content area on the right. The sidebar menu includes:

- Getting Started/Schedule
- Prework: Welcome and Overview
 - Objectives and Assignments
- Module 1: Principles of Integrated Treatment in a Program Serving People w/SMI
 - Objectives and Assignments
 - Developing Welcoming Systems for Individuals with Co-Occurring Disorders
 - View Slide Handout
 - IDDT Clinical Guide (Optional)
- Module 2: Welcoming Individuals with Co-occurring SMI and SU and Harnessing Hope and Strength
- Module 3: Integrated Longitudinal Strength-based Screening and Assessment

The main content area has a top navigation bar with tabs for COURSE CONTENT, DISCUSSION, RESOURCES, CLAIM CREDITS, and buttons for Next and Home. The content is organized into sections:

- Overview:** This week participants will learn why all SMI programs should become “co-occurring” programs, and what evidence-based principles and interventions can be implemented in order to achieve this goal. Each participant should determine the scope of the work to which they will be applying what is learned in this VLC: Are you applying this learning only to your own work? Are you a program leader applying what is learned to your whole team or program? Are you an agency leader applying what is learned to a range of programs in your agency? Assignments will be tailored to the appropriate scope for each participant.
- Learning Objectives:**
 - Define a “co-occurring capable” SMI program and staff
 - Identify the six principles of successful integrated treatment in an SMI program, and the interventions associated with each
 - Identify basic approaches to implementation of integrated services within an SMI program or agency.
- Assignments:** A group video call was hosted via Zoom on May 11, 1:00-2:00pm ET. Missed the meeting? You can review the recording here. Prior to live session:
 - Read: Developing Welcoming Systems for Individuals with Co-Occurring Disorders
 - Review: Slide handout from live virtual learning session
 - (Optional) Read: IDDT Clinical Guide; this is not required but will help as an introduction to the course

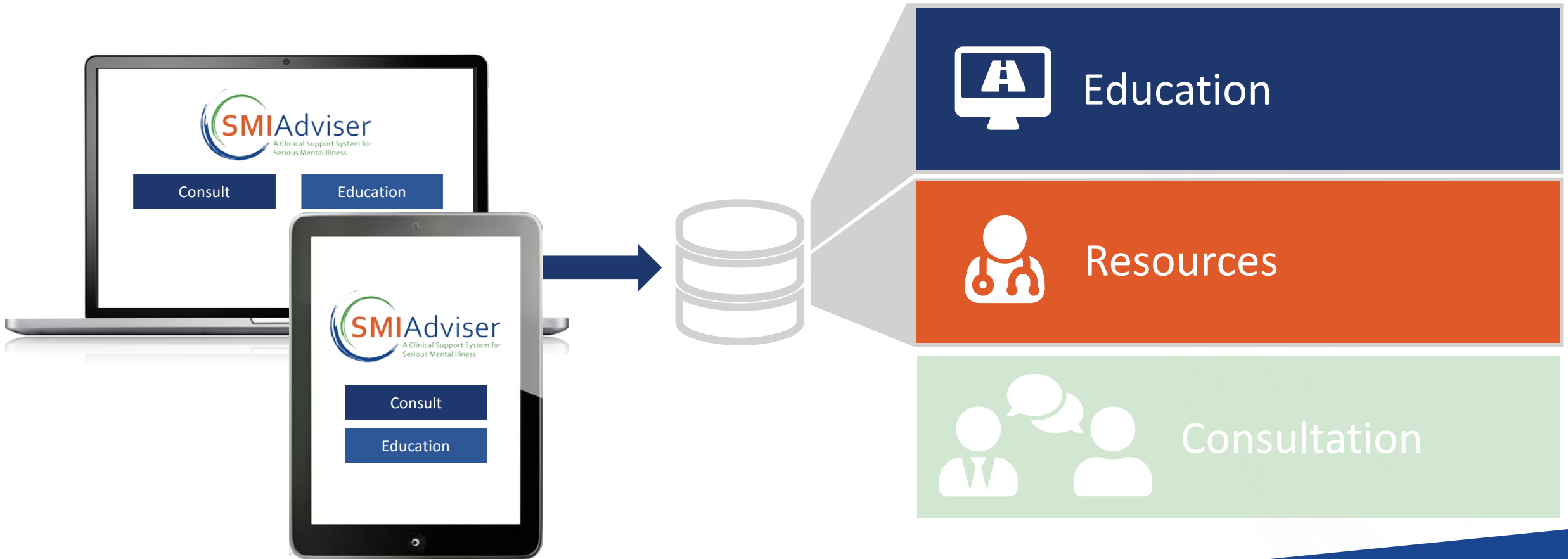
A red text box at the bottom of the main content area states: **Make sure that you have downloaded the Implementation Guides - we will be using and referencing these throughout the learning collaborative. You can download the guides by navigating to the Resources tab at the top right of the screen, then choosing the Implementation Guides folder. This week, we will be referencing Implementation Guide #1: Serious Mental Illness (SMI) and Co-Occurring Disorders (COD).**



PROBLEMS THAT SMI ADVISER SOLVES FOR CLINICIANS

FIND EVIDENCE-BASED, UNBIASED RESOURCES

SMI ADVISER STRATEGIC APPROACH



SMI ADVISER KNOWLEDGE BASE

- 1,000+ evidence-based resources in Knowledge Base

The screenshot displays the SMI Adviser Knowledge Base website. On the left, a sidebar contains the SMI Adviser logo and the text: "FIND THE ANSWERS YOU NEED IN OUR KNOWLEDGE BASE. Search topics, find resources, and enhance what you know about SMI." Below this is a search bar and a breadcrumb trail: "Home / Knowledge Base (Clinicians)".

The main content area features a grid of article cards, each with a title, a representative image, and a list of key points. The visible articles include:

- Clozapine**: Includes points on REMS, blood count monitoring, and side effects like orthostatic hypotension.
- Co-morbid Medical Conditions**: Discusses management of physical health conditions and integration of mental and general health care.
- Co-morbid Substance Disorders**: Addresses the legality of marijuana, substance abuse prevalence, and cessation tools.
- Manualized Psychotherapies**: Lists evidence-based strategies for borderline personality disorder, interpersonal therapy for depression, and manualized treatments.
- Mood Disorder**: Explores the impact of sleep apnea, depression severity, and genetic predisposition for bipolar disorder.
- Peer Specialists**: Examines support specialist roles, supervision models, and reimbursement.
- Collaborative Care / Integrated Care Models**: Shows a group of healthcare professionals in a meeting.
- Family Involvement / Engagement**: Shows two men in a conversation.
- Forensics**: Shows a person reading a document.
- Psychopharmacology**: Shows a pharmacist at a counter.
- Schizophrenia**: Shows a person sitting on the floor in a hallway.
- Self-management**: Shows a person using a laptop.

Each article card includes a "VIEW ALL" link. At the bottom of the page, there is a blue button that says "Can I help you?".

EXPANDING RESOURCES ON SMI

The inventory of educational resources features both **NEW** and **EXISTING** materials

What is AOT?
 Assisted outpatient treatment (AOT) is the practice of delivering outpatient treatment under court order to adults with severe mental illness who meet specific criteria, such as a prior history of repeated hospitalizations or arrest. It is a tool for assisting those individuals most at risk for the negative consequences of not receiving treatment.

THOSE MOST IN NEED: AOT laws have been shown to reduce hospitalization, arrest and incarceration rates and violent acts associated with mental illness. AOT participants typically represent less than .05% of a state's population. Yet, they are the people most at risk to be on the streets or behind bars.

AOT RECIPIENT CHARACTERISTICS:

- Majority have schizophrenia or severe mood disorder
- 97% percent had been hospitalized previously
- 47% had co-occurring substance abuse
- 47% did not adhere to needed medication before AOT

THE REVOLVING DOOR'S COSTS: Each prison admission costs on average \$7,000¹, and non-prison incarceration costs on average \$20,000². Mental illness is nearly 20% of all Medicaid re-admissions.³ Medicaid has more than 75,000 mental health re-admissions 30 days in one year.⁴ Nearly 25% of Medicaid recipients were re-admitted within one month of discharge.

SAVING LIVES AND COSTS: By creating a continuum of care between the individual and the mental health system, medication adherence, hospital readmissions⁵ and other revolving-door behaviors are reduced, and mental health recovery is promoted.

AOT WORKS: Of participants in New York's program, called Kamira's Law:

- 77% fewer hospitalizations
- 74% fewer arrests
- 83% fewer incarcerations
- 87% fewer incarcerations

MYTH vs FACT on Serious Mental Illness
 PSYCHOPHARMACOLOGY

There are many myths around serious mental illness (SMI) that are not always accurate. Let's take a look at common myths around SMI and psychopharmacology.

MYTH	FACT
You Should Not Prescribe Clozapine Until All Other Medications Have Failed	Do not think of clozapine as a last resort of patients with schizophrenia because a patient shows no or minimal response to adequate doses. The risk of suicide attempts or suicidal ideation is lower for those with SMI on clozapine than for those on other antipsychotics.
Weight Gain from Antipsychotics is a Side Effect that Cannot Be Treated	There are options to help manage this side effect. Some medications have higher risk for weight gain than others (e.g., olanzapine, risperidone, and melperone). There are other approaches that can be used: • Nutritional counseling • Exercise • Cognitive-behavioral therapy Finally, you can augment with medication. Orlistat is an option.
Long-Acting Injectables Are Only For People Who Are Nonadherent	Even if adherence is not a problem, some antipsychotic medications ^{1, 2} are more effective when given as long-acting injectables (LAIs). In fact, some LAIs to be more effective than oral medications. ^{3, 4} Studies across different populations have shown that LAIs are more effective than oral medications in people who experience first episode of psychosis. ⁵ Clinicians can discuss LAIs in the context of: • inform your patients about long-acting injectables • discuss the available advantages and disadvantages • let patients make the best decision
You Should Not Prescribe Antidepressants to Individuals Who Have Bipolar Disorder	A subset of people actually appear to be responsive to antidepressants. However, in general, antidepressants are not recommended for people with bipolar disorder because they can increase the risk of treatment-emergent affective switch (TEAS). ¹⁻³ You should avoid antidepressants: • in people who have a history of antidepressant-induced mania • for those with recent rapid cycling • for those with current mixed features • as monotherapy for people with bipolar depression

Join our #MissionForBetter at [#MissionForBetter](#)

Suicide and Serious Mental Illness
 An Overview of Considerations, Assessment, and Safety Planning

Co-presented by
 Suicide Prevention Resource Center

Interdepartmental Serious Mental Illness Coordinating Committee

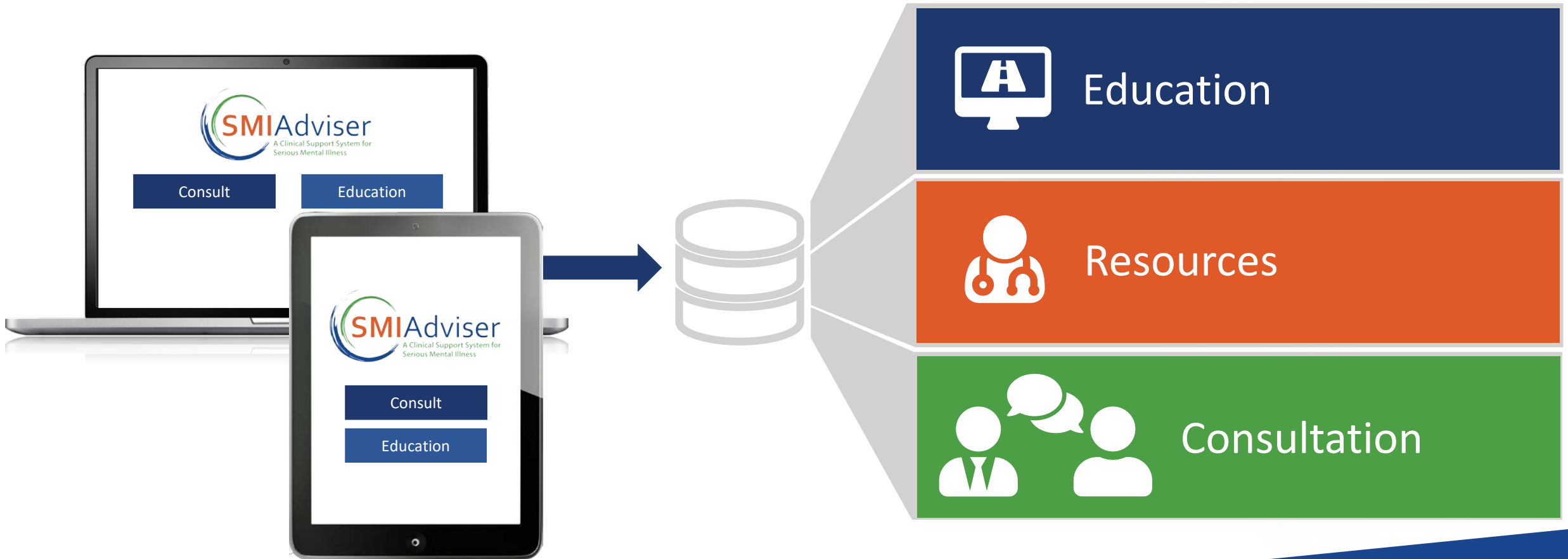
Action for a System That Works With SMI and SED and Their...



PROBLEMS THAT SMI ADVISER SOLVES FOR CLINICIANS

FIND TRUSTED, RELIABLE ANSWERS WHEN
COMPLEX CLINICAL CHALLENGES ARISE

SMI ADVISER STRATEGIC APPROACH



CONSULTATIONS FROM EXPERTS IN SMI

The image shows a screenshot of the SMI Adviser website. The top navigation bar includes the SMI Adviser logo, the text "An APA and SAMHSA Initiative", and logos for the American Psychiatric Association and SAMHSA. The main navigation menu contains links for "CLINICIANS", "INDIVIDUALS & FAMILIES", "ABOUT US", "CALENDAR", and "CONTACT". The main content area features a large banner with the text "A BETTER TOMORROW" and "Find answers that help people with mental illness live their best lives." Below this is a smaller image of a person using a tablet. A callout box highlights a "Request a Consultation" form with the following text: "Our clinical experts can answer questions about SMI from all mental health clinicians. Ask us about psychopharmacology, therapies, recovery supports, patient and family engagement, education, and much more." A green "SUBMIT NOW" button is visible at the bottom of the callout.

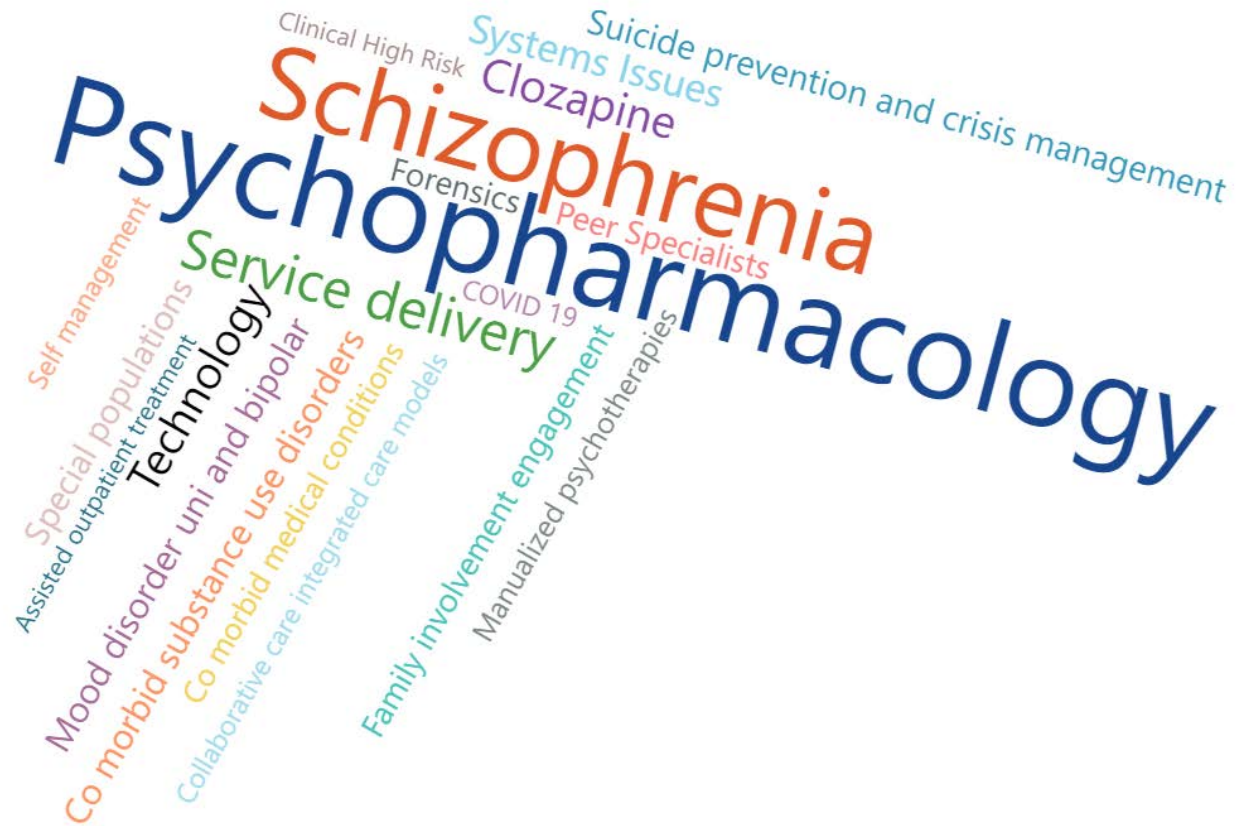
Ask about psychopharmacology, therapies, recovery supports, patient and family engagement, education, and more

Receive guidance within one business day

CLINICIAN-TO-CLINICIAN CONSULTATIONS

Total Number of Consultations:

2,220



Data as of August 14, 2021





SPECIALIZED MICROSITES

ALL THE INFORMATION ON A SPECIFIC TOPIC
IN ONE EASY-TO-ACCESS PLACE

CLOZAPINE CENTER OF EXCELLENCE

- Focused on increasing and improving the use of clozapine in treatment refractory schizophrenia
- Led by Robert Cotes, MD and NASMHPD
 - <http://SMIAdviser.org/clozapine>



LONG-ACTING INJECTIBLES CENTER OF EXCELLENCE

- Provides resources, education, consultation, and tools on using LAIs
- Led by Robert Cotes, MD, and Donna Rolin, PhD, APRN
 - <http://SMIAdviser.org/lai>



SMI ADVISER RESPONSE TO THE COVID-19 PANDEMIC

SMIadviser.org/COVID

Education Activities about COVID-19



The screenshot shows the SMI Adviser website header with the logo and navigation menu. The main content area features a large image of COVID-19 particles and a headline: "Make Informed Decisions Related to COVID-19 and Mental Health". Below the headline is a paragraph of text explaining the site's purpose during the pandemic.

Resources on COVID-19 and Serious Mental Illness

SMI Adviser compiled a list of resources for clinicians who serve individuals with serious mental illness (SMI). During this crisis, refer to the evidence-based resources below for specific guidance around COVID-19. If you have specific questions on recent changes in telepsychiatry, prescribing clozapine, or any other topic, you may request a consultation from one of our national experts.

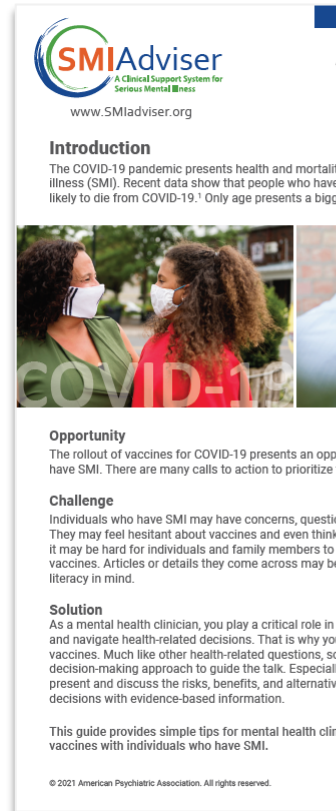
COVID-19 Resources

Browse trending questions, clinician resources, and patient handouts on COVID-19.

- TRENDING COVID-19 QUESTIONS
- COVID-19 GUIDELINES AND TOOLS
- PATIENT HANDOUTS ON COVID-19
- CDC INFORMATION ON COVID-19

COVID-19 VACCINES AND SMI


- ✓ New resource to help facilitate conversations
- ✓ Provides guidance on effective motivational interviewing techniques



SMIAdviser
A Clinical Support System for Serious Mental Illness
www.SMIadviser.org

Introduction

The COVID-19 pandemic presents health and mortality risks for individuals with serious mental illness (SMI). Recent data show that people who have SMI are more likely to die from COVID-19.¹ Only age presents a bigger risk factor.



Opportunity

The rollout of vaccines for COVID-19 presents an opportunity for mental health clinicians to help individuals with SMI. There are many calls to action to prioritize this population.

Challenge

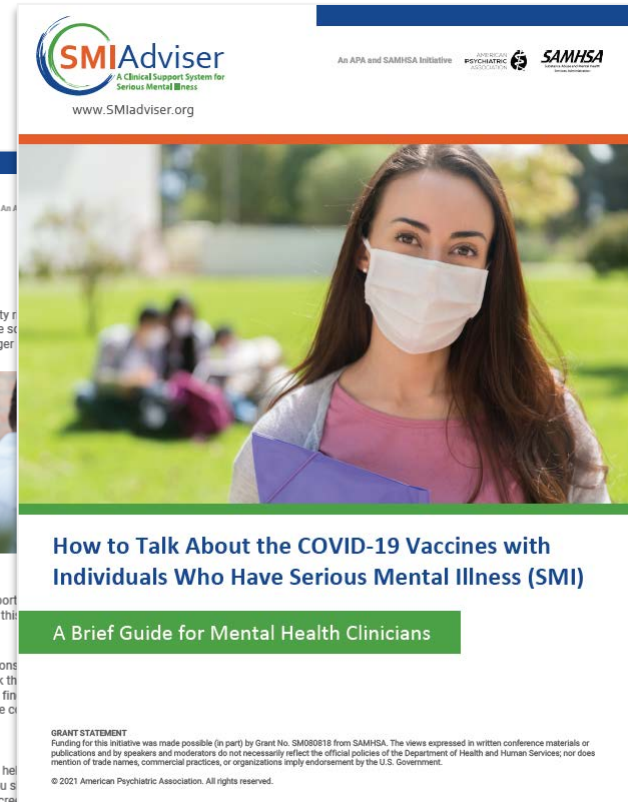
Individuals who have SMI may have concerns, questions, and fears. They may feel hesitant about vaccines and even think that getting a vaccine may be hard for them and their family members to find. It may be hard for individuals and family members to find reliable information about COVID-19 vaccines. Articles or details they come across may be confusing or difficult to understand due to low health literacy in mind.

Solution

As a mental health clinician, you play a critical role in helping individuals with SMI understand and navigate health-related decisions. That is why you should use a decision-making approach to guide the talk. Especially with this population, it is important to present and discuss the risks, benefits, and alternatives. This helps individuals make informed decisions with evidence-based information.


This guide provides simple tips for mental health clinicians on how to talk about the COVID-19 vaccines with individuals who have SMI.

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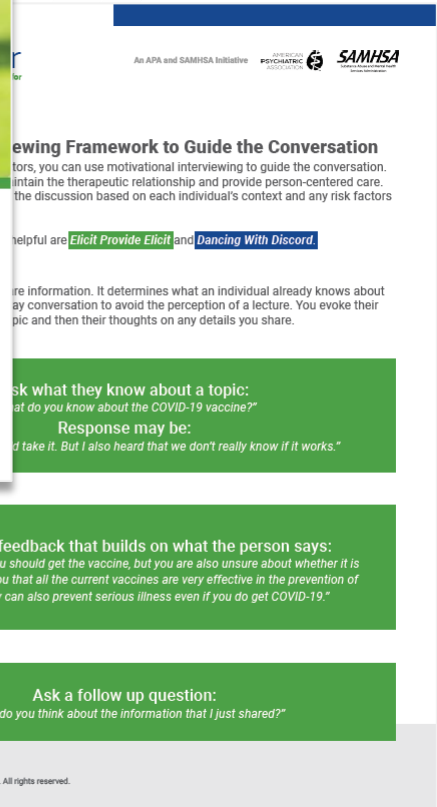
An APA and SAMHSA Initiative



How to Talk About the COVID-19 Vaccines with Individuals Who Have Serious Mental Illness (SMI)

A Brief Guide for Mental Health Clinicians

GRANT STATEMENT
Funding for this initiative was made possible (in part) by Grant No. SM080818 from SAMHSA. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.
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Motivational Interviewing Framework to Guide the Conversation

Motivational interviewing is a client-centered, goal-oriented counseling approach that helps individuals explore and resolve ambivalence. It is a collaborative process that helps individuals find their own reasons for change. It is based on the idea that people have the capacity to change and that the most effective way to help them do so is to work with them rather than for them. It is a process of eliciting and strengthening the client's own motivation for change. It is a process of helping the client to explore and resolve their ambivalence about change. It is a process of helping the client to find their own reasons for change. It is a process of helping the client to explore and resolve their ambivalence about change. It is a process of helping the client to find their own reasons for change.

Helpful are **Elicit Provide Elicit** and **Dancing With Discord**.

Information. It determines what an individual already knows about a topic and then their thoughts on any details you share.

Ask what they know about a topic:
"What do you know about the COVID-19 vaccine?"

Response may be:
"I don't know. I've heard that it's safe, but I also heard that we don't really know if it works."

PROVIDE


Offer clear feedback that builds on what the person says:
"So you know that you should get the vaccine, but you are also unsure about whether it is effective. I can tell you that all the current vaccines are very effective in the prevention of COVID-19. They can also prevent serious illness even if you do get COVID-19."

ELICIT

Ask a follow up question:
"What do you think about the information that I just shared?"

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REOPENING MENTAL HEALTH PRACTICES

 **New guide to help clinicians think through all the things to consider for reopening**



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www.SMIadviser.org

An APA and SAMHSA Initiative

OFFICE SET UP (continued)

Stage your physical office space.

- Review and adhere to physical space and social distancing guidelines and/or state agencies


Assess how to reduce physical items in your office.

- Can you move PHQ-9s and other surveys to online solutions?
- Can you transition people toward at-home monitoring solutions?
 - Are the solutions HIPAA compliant?
 - Do they integrate data into your EHR?

Assess how to approach physical contact with people and objects.

- Establish a policy for person-to-person contact such as handshakes
- Make sure enough personal protective equipment is available for reuse
- Create a process to clean door handles, chairs, desks, pens, and other items that may come into contact with

Reopening Your Mental Health Practice

 **A Checklist to Help You Prepare for In-Person Office Visits**

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CONSIDER

the emergency waiver for telehealth ends.
software for HIPAA compliance
Business Associate Agreement (BAA) this is a warning that your system is not HIPAA compliant.
state grants
other services
ensure there are no gaps in service.
return to in-person practice settings?
requirements around vaccination?
practice and liability insurance
risks around a positive COVID-19 diagnosis among staff and/or patients

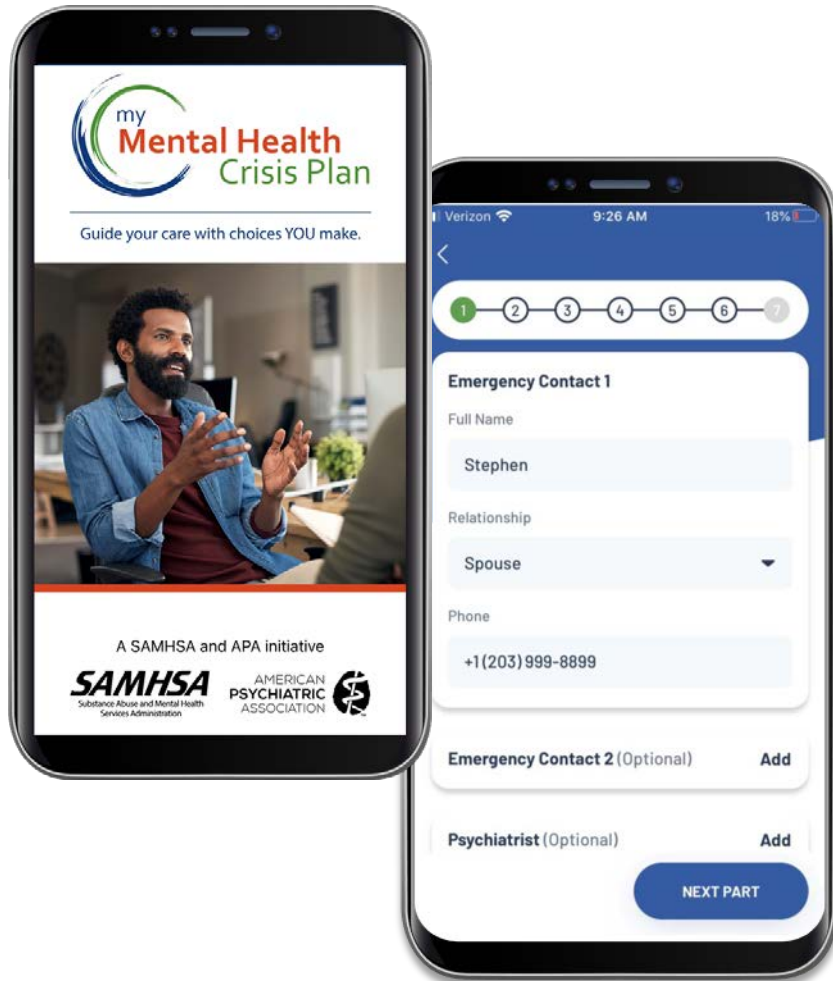
tion is all local or across state lines.
is for those who live in states where you cannot practice
tion chapters for help
[Psychiatric Association](#) [American Psychological Association](#)
[Psychiatric Nurses Association](#) [National Association of Social Workers](#)

ADDITIONAL GUIDANCE

[Control and Prevention Medical Boards](#)
[SMI Adviser Knowledge Base](#)

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MY MENTAL HEALTH CRISIS PLAN



The app allows individuals to:

- Clearly state their treatment preferences
- Designate someone to legally make decisions on their behalf
- Update their PAD at any time and access it right in the app
- Easily share their PAD with family members and friends
- Provide clinicians with access to all information in their PADs

SMIadviser.org/padapp



VISION FROM SMI ADVISER



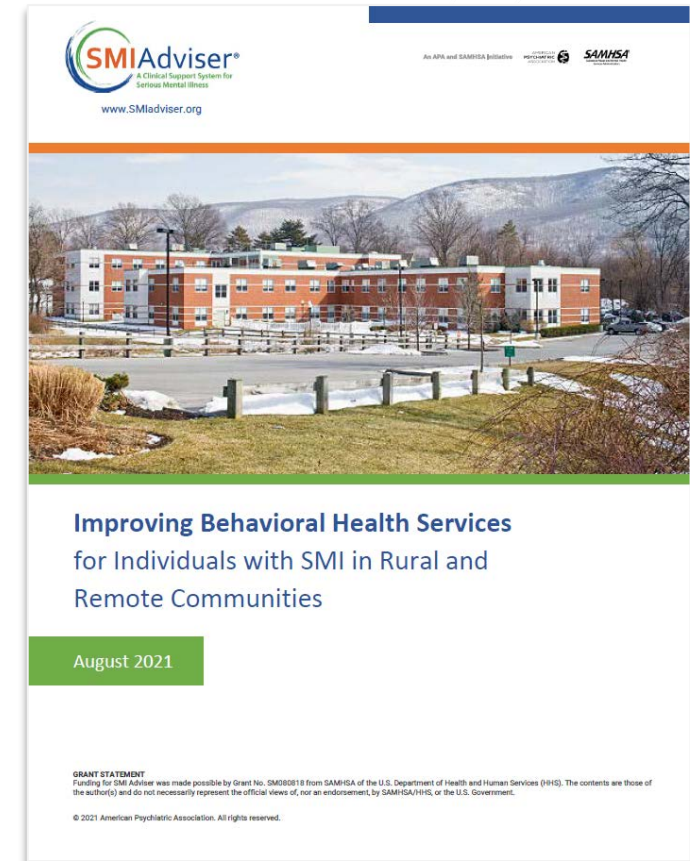
Digital Health Navigator



988 Implementation



Support for Rural Care Teams



ACTION STEPS TO COLLABORATE WITH SMI ADVISER



Share information about SMI Adviser with your stakeholders

- Partner Action Toolkit – SMIadviser.org/toolkit



Direct any questions to our consultation service

- SMIadviser.org/submit-consult



Subscribe to our Clozapine and LAI CoE Exchange

- SMIadviser.org/clozapine



SMIadviser.org

Amy Cohen, PhD
acohen@psych.org

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