



# MAINSTREAM MENTAL HEALTH

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*“Anything that  
inspires addiction or  
obsession—  
substances,  
entertainment,  
beauty, secrecy—is  
dangerous in that it  
can lead to isolation,  
self-absorption, and  
disconnection, to  
paralyzed stasis: an  
immobility that  
gathers like a force.”*

*~Greg Carlisle,  
Elegant Complexity:  
A Study of David  
Foster Wallace’s  
Infinite Jest*

## SOCIAL ISOLATION

There are barriers that clients present as reasons why they do not want to participate in the community:

- lack self-esteem and confidence
- report social anxieties
- have feelings of embarrassment
- lack of transportation
- overall, a lack of knowledge

Erika King, QMHP A/C, helps the client to overcome these barriers. She says, “When brainstorming ways to assist individuals in overcoming these barriers, I normalize conditions/diagnosis, find activities that correlate with the individual’s interests, introduce esteem building activities, increase awareness of activities and upcoming events, and always provide empathy and support.” Lorenzo Ingram, QMHP-A, helps the client with insecurities also. He says, “I always try to get my clients to focus on the tasks at hand. [And I] work with them on their social skills so they’re not as insecure about being able to communicate with their peers.”

For clients in rehabilitation, there lurks in the community those people, places and things that can trigger abusive situations. Lorenzo does not leave the client’s side when they are out in the community. One of his clients suffers from anxiety attacks when surrounded by too many people. Erika likes to be aware of those warning signs so she can deescalate when triggered. She says, “I educate on awareness and characteristics of healthy interactions/relationships. Rapport is always a big thing for me. Having a sound and safe therapeutic relationship with my individuals has generally put me in a position to offer a

calm, safe place for them to be expressive.”

QMHPs try to promote positive outcomes with community interactions. Lorenzo says, “We practice having normal conversations and working on barriers so they can set clear and firm boundaries but also respect someone else’s boundaries.” Erika King celebrates with the client. She says, “We do not work with children, but everyone appreciates being celebrated. I make small moments celebratory! Every achievement is worth praise. I would never make individuals feel guilty about “having a bad day,” but use it as a teaching opportunity. I pitch the idea that bad days are needed too to help them give themselves Grace and not regress during small barriers. Also helping them and those around them understand that being overstimulated on a ‘bad day’ increases the possibility of unwanted behaviors and negative interactions with others.”

The QMHP role needs to be clear that it is a therapeutic relationship, and the client needs to accept responsibility for their own decisions. Erika says, “during rapport building, it is necessary for me to provide an explanation [of] services [as] well as what my ‘job’ consists of. I describe myself as a ‘support person’ in the simplest form and set clear boundaries on our therapeutic relationship and interactions with others. I assume that most have received services by another QMHP, so I like to be clear about what Mental Health Skill Building looks like with me. I educate on cause and effect and actions and reactions to help individuals understand that although they are allowed to make their own decisions, they also have to accept responsibility for their own decisions with just as much confidence.”

The QMHP is able to address behavior issues in an accommodating manner. Erika coaches her clients. She says, “It is important for me to model the skills that I am teaching as well as role-play situations that the individual could encounter or has encountered. I make it a point to use real life examples and situations that clearly depict results of positive social skills, negative social skills, or no social skills. To whatever capacity that I am allowed, I practice interventions and activities alongside the individual to help them understand that I’d never ask them to do anything that I could not or would not be willing to do. Often times, when individuals portray unwarranted negative behaviors, I redirect them with corrective action but also facilitate role play to give them an accurate picture of what their behaviors look like as well as how their behavior could possibly make others feel.”

For clients with mental health issues working on goals, progress can be measured on issues like depression and negative thinking. It is good to track progress, so the relationship can be productive. Erika writes, “being able to measure progress is an important component of effective treatment. I have years of experience utilizing assessments that measure, depression, anxiety, and daily living skills completion. I encourage the individuals to also track their moods, behaviors, and thoughts for review and accountability. We are consistently reviewing goals, progress, and continuing needs to accurately document progress in notes, QR’s, and authorization requests. I help the individuals connect the dots between being productive and having a purpose and increased self-identification and positive mood.”

QMHPs provide employed support that will end at the completion of Mental Health Skill Building. Therefore, conversations need to take place to prepare for discharge plans. Lorenzo is truthful about his clients’ progress and what needs to be done to complete MHSB successfully. Erika allows the client to consent to whether or not to include natural supports in discharge planning. She explains, “It is more important for me to maintain my therapeutic relationship with the individual, so I would never include natural supports without consent, preparation and support. In most cases, everyone wants to be heard. I provide a listening ear, so everyone feels better but only make treatment decisions based on individuals’ preference, collective observations and reports, and ongoing assessments. Discharge conversations happen, consistently, as a reminder that the service is temporary. Individuals and supports are encouraged to review discharge plans, weekly, and link with lower level of care supports in preparation for the transition. Having a clear understanding of the purpose of services and regular discharge discussions, typically eliminates confusion.”

Indeed, QMHPs help clients overcome barriers to participating in the community. They create a safe relationship by building rapport and deescalating when triggered. A way to promote positive outcomes is to celebrate good days and learn from negative behaviors during bad days. The role of the QMHP is a therapeutic relationship and the client needs to accept responsibility for their own decisions. Erika role-plays situations to depict results of using social skills. The issues in mental health can be measured by reviewing goals and tracking moods. Lastly, discharge conversations include discussions on lower level of support and the purpose of services.

## **BIRTHDAYS**

Khadija M.  
Paul K.

Myra M.  
Latoya H.

Kathryn Y.

# May PSR Calendar

## Health is important (month)

2023

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 Discuss the new walking program-AM Blue Fitness outside-PM	2 Bowling-AM Why are Balance meals important?-PM	3 Effective communication-AM Summer Collage-PM	4 Troutville park-AM Knowing your Human Rights-PM	5 South County Library-AM Citi Trends-PM	6
7	8 Blue Fitness -AM Reviewing PSR rules-PM	9 Valley View Mall-AM Patience group-PM	10 Wasena Greenway- AM Borderline Dependent personalities-PM	11 Goodwill-AM Board Games/video games/walk laps -PM	12 Longwood Park Picnic AM/PM	13
14	15 Blue Fitness-AM Why do we isolate?-PM	16 5&Below-AM Knowing when to dial 911-PM	17 Salem Greenway-AM Knowing when to say no !!!-PM	18 Walmart-AM Troutville Park-AM	19 Trash(game) tournament-AM In house Movie-PM	20
21	22 Blue Fitness-AM Dodgeball-PM	23 Vinton Library-AM Inappropriate vs Appropriate (role play)-PM	24 Dollar Tree-AM What is your Safe Haven?-PM	25 Ways to practice mindfulness-AM In house Movie-PM	26 Fun Friday All Day (Games, video games, inhouse movies)	27
28	29 Closed Memorial Day	30 Bowling-AM Calendar Planning-PM	31 Duck Pond/Burger King How do you relax? AM/PM			