

TOUR OF NORWAY ASKER, LARVIK, KRISTIANSAND, SANDNES, MOLDE

Presentation of the model of Italian Community Psychiatry in the Mental Health Department

of Trento according to the "Doing Together" approach

and with the kind presence of the UFE (Users and Family-members Experts)

Renzo De Stefani

with Maurizio Capitanio, Roberto Cuni, Njouokou Fabien Lexus, Alice Sommavilla, Valentina Zanon

15^{th -} 19th February 2016









"Av små frø blir det store tre"

Special gratitude to **Anders Vege** and his section, for the extraordinary work and the dedication they put in making this happen!

Thank you, my dear friend Anders !!!

















In **Trento** we try to apply the principles of the **Italian Community Psychiatry** with some peculiarities:

the "Doing Together" Approach, and the UFE (Users and Family-members Experts)







The starting point:

Law 180 / 1978 - promoter was psychiatrist Franco Basaglia

- closes Psychiatric Hospitals (for the 1[^] time in the world)
- transfers care and rehabilitation to community centers
- opens small psychiatric wards for crisis situations within the General Hospitals (maximum 15 beds)
- prescribes stricter regulations for Compulsory Treatments







The implementation of Law 180, especially in the first years, has encountered many difficulties.

The population and in particular the families of the mentally ill, were not ready for this revolution. The community services could not develop in a short time. For these reasons, Law 180 has been, and still is, a law that stimulates debate.

Law 180 signals the end of an era. The era during which patients in the psychiatric hospitals lived in unacceptable conditions and where they did not receive appropriate and adequate care.

Unfortunately Law 180 has not been correctly applied all over Italy and in the places where this happens, there are evident problems for users and family members.





Personally I really love Law 180.

I think and see that it is possible to implement it well and I have no doubts about the fact that in those places in Italy where the Law has not been implemented, the fault lies not within the law itself but within the people (politicians, administrators, psychiatrists, different people) that did not know / want to engage with science and passion in its application.







Integration of all services in a sole organization: the Mental Health Department (MHD)

Continuity of care and case management

Assistance and integration of the person inside the community, outside of the Hospital.

In Trento we apply the "Doing Together" approach:

valorization of the knowledge and resources of users, family members and citizens,

and their active involvement in all activities of the Mental Health Department (MHD).

Key words: social inclusion, integrated services, continuity of care and case management

THE MENTAL HEALTH DEPARTMENT OF TRENTO (MHD)

fareassieme

al Servizio di salute mentale di Trento



1 ORGANISATION, 1 MISSION, 1 DIRECTOR





One example: Valentina's care pathway

A delicate situation: the crisis moment and the places to accommodate her

Valentina is a young new user in a crisis situation. She arrives at the Mental Health Centre (MHC) alone or together with her family members. The MHC is the heart of the MHD, and in Italy, it is always outside the hospital. Valentina's crisis can be monitored at home, at the MHC, at the Day Centre, in a sheltered home or in other places. Rarely, and if in an extreme situation, at the hospital. Valentina is accompanied through the various MHD areas by a team of dedicated professionals that keep track of all developments.







THE MENTAL HEALTH CENTER

It is always located outside of the hospital.

It is the main entrance and the "heart" of the MHD. It deals with all requests related to mental health issues in Trento.

It is the first reference point for various community agencies (GP, municipality, social services, law enforcement, schools, associations).

Deals with crisis situations at a territorial level (outside the hospital), activating all available internal and/or external resources of the MHD.

2 psychiatrists + 10 professionals (nurses and educators) + 3 UFE Open every day of the week

This is one of the main caracteristics of the Italian model and of Trentino in particular.





THE MENTAL HEALTH CENTER INFORMATION SHARING

		- Database co											
			nserisci Formato Str									Digitare	upa dan 🖕 🔹
	i 🖬 🔁						00% 🔹 🎯 💱 🎐 🦞 🥛						
al		• 10 •	G C <u>§</u> ≣ ≣	= 🗰 🗟 🚞 🗰	1 🕄 🛒 % 000	€ % 🖧 🗄	ቛ 肆 ⊞ • <mark>◇</mark> • <u>▲</u> • 8= 3= ¥ Ω 🔋						and bad
G	211 -												
	A	В	C	D	E	F	G	н	1	J	K	L	M
							_				CHI FA CHE COSA		
	G. / N.	Data 🗸 🗸	Medico	Cognome Nome	✓ Med. Ref.	Op. Ref.	Consegne	HS SPPÇ	Crisi 🗸	Equipe 🗸	UFE 🗸	Note	
							Stamane ben disposta al dialogo, assume la terapia del						
							mattino senza alcun problema. Verso ora di pranzo si ripresenta per assumere la sua th, ma quando scopre che il						
							dosaggio del Seroquel è stato aumentato si allontana						
							arrabbiata. Sentita operatrice della CDR, informata di quanto						
VE	=NI	28/02/2014	Marchiori/Franzoi/	C. L.	Di Gregorio		successo e presi accordi per la gestione della terapia nel fine settimana (MM).	нs					
VE	-19	20/02/2014	Doralli	C. L.	Di Gregorio		oggi non viene al centro, si allontana un paio d'ore dalla RSA	113					
							poi torna assume la terapia rifiutando il seroquel. Sentiti più						
							volte gli operatori della RSA, con cui restiamo d'accordo che						
SA	AB	01/03/2014	Esposito	С. L.	Di Gregorio		ci risentiamo domani per una eventuale ∨AD. Nel pomeriggio Loretta stava molto bene (CP).	HS					
							contatti telefonici con Casa di Riposo: ci comunicano che						
							Loreta sta arrivando al csm accompagnata da un volontario.						
DC	ЭМ	02/03/2014	Franzoi	С. L.	Di Gregorio		Successivamente ci cinformano che si è fatta accompagnare in stazione per andare a Bolzano (McF)	нs					
							si decide in microequipe2 cambio medico, verrà seguita da						
							Re. Informare la pz. Nel pomeriggio viene al Gruppo Uditori di		a hai in fanns a t				
							∨oci: urlante, arrabbiata e offensiva nei confronti di Marchiori,		chi informa la	fissare app con Re			
			Marchiori/Franzoi/				nel tentativo di riportarla al contesto si mostra urlante e		P.2				
VE	EN	28/02/2014	Bolaffi	D. I.	(Marchiori) Re		offensiva nei confronti della sottoscritta. Si allontana (McF).						
							Sentita telefonicamente la madre, oggi Verena piu tranquilla		03.03 contatto				
							e minimamente disponibile nei loro confronti, ha accettato anche visita del ex marito. Madre e sorella resteranno in città		Telefonico con				
							sicuramente fino a giovedì prossimo. D'accordo di risentirsi		la madre				
							telefonicamente lunedi per aggiornamento. Se criticità si		Franceschini; concordare vad				
			Marchiori/Franzoi/				faranno sentire. Da programmare vad congiunta con MMG		csm + Clerici				
VE	EN	28/02/2014	Bolaffi	F. V.	Zona Turchetti		per prossima settimana (MM).						
VE	=NI	28/02/2014	Marchiori/Franzoi/ Bolaffi	M. L.	Franzoi		Dimessa dal SPDC	DSPDC		coll Franzoi 6 marzo ore 17.00			
VE		20/02/2014	Marchiori/Franzoi/	WI. L.	Franzoi		Dimessa dal SPDC	Darbc		016 17.00			
VE		28/02/2014		C. N.	Bologna	Nicoletti		DSPDC					
NC	DTTE	28/03/2014	Bolaffi				nulla da segnalare						
							Dalle 5 è in PS; nelle prime ore non crea problemi di gestione. Vista da Esposito verso le 9, escalation di						
							aggressività (graffi ad Esposito). Si allontana dal PS e vaga						
							per l'ospedale con atteggiamenti incongrui. Nel pomeriggio si						
							reca spontaneamente in SPDC: accetta di fermarsi, ma mantiene un atteggiamento oppositivo. Successivamente						
I SA	AB	01/03/2014	Esposito	F. A.	Di Gregorio		viene attivato TSO (SB).						
		01/03/2014	-				Assume la terapia ribadisce che preferirebbe un curante						
2 SA 3 SA		01/03/2014	Esposito Esposito	P. A. T. A.	Esposito Esposito		maschio (CP). assume terapia senza problemi (CP).						
I SA		01/03/2014	Esposito	P. M.	Turchetti		viene per flebo, bene (C.P.).						
		01/03/2014	Esseries	A. G.	Enner		viene per flebo, injizialmente agitata nel corso della seduta si						
5 54	×0	01/03/2014	Esposito	A. G.	Franzoi		calma (CP). viene per flebo.bene. Non presente acatisia, torna lunedì						
DC	ЭМ	02/03/2014	Franzoi	A. G.	Franzoi		come da programma (CP).						
							si presenta al csm abbattuta perché nell'ultimo colloquio con						
							Re, avrebbe appreso che dovrà assumere il neurolettico per mesi. Confronto rassicurante con Esposito. Ha						
							appuntamento con Re tra un mese. Se problemi, tornerà						
SA	AB	01/03/2014	Esposito	L. A.	Re		prima (C.R.).						
							Viene per assunzione terapia. Molto più angosciato rispetto		valutazione				
							a ieri. Colloquio con Franzoi+Biasi: presente sintomatologia		medica				
							delirante con accelerazione del pensiero (ruminazioni,		possibile				
							interpretatività a sfondo persecutorio). Proposto ricovero che rifiuta. Verrà rivalutato quotidianamente (S.B.).	AHS	Esposito?				
	-	02/03/2014	Franzoi	G. C.	Esposito								

The importance of sharing information





THE MENTAL HEALTH CENTER INFORMATION SHARING

Day	DATE	Dr.	NAME	Ref. Dr.	Ref. Prof.	Info •	WARD	Crisis	Equipe	UFE
THU	15.10.15	RE	Valentina	Di Gregorio	Tiziana	Arrives at 9.30 at the centre accompanied by mother. Very agitated. Long interview with Dr.Re and UFE Maurizio. Negotiated daily therapy administration in Day Hospital.		16.10 Re- evaluation by Dr. Re	Day Hospital / Daily access at Day Centre	Maurizio Daily home visit

The importance of sharing information





TERRITORIAL ÈQUIPES

The Mental Health Department of Trento and its approach



They guarantee continuity of care and case management over time.

They are **multi-professional and operate at various levels**: clinical, home care, and in all settings where the person lives and works.

They are responsible for the care pathway.

They accompany the user also while he is interacting with all other Service's areas.

7 psychiatrists + 12 professionals (nurses and educators) + 2 UFE Active from Monday to Friday. 2000 Users, about 800 of them with high requirements.





The Mental Health Department of Trento and its approach



DAY HOSPITAL (4/8 USERS A DAY)

It welcomes users experiencing a crisis. It is used as an alternative to hospitalization and administers psychopharmacological care.

DAY CENTRE (30/40 USERS A DAY)

It welcomes users during a crisis situation or people in need of socialization (between 1 month and 1 year)..

It favors group settings fostering mutual help between users. Many activities are organized by citizens volunteers experts in various activities.

It is a way to inject new "life" inside the Centre.

DAY CENTRE 7 professionals (nurses and educators) + 1 UFE Open from Monday to Friday. 30/40 users / day





THE PSYCHIATRIC WARD IN THE GENERAL HOSPITAL

The Mental Health Department of Trento and its approach



Receives users in crisis situations that cannot be dealt with at a territorial level. It has 15 beds (limit set by Law 180).

Receives also users undergoing Compulsory Treatment (5-10/year).

The ward has open doors and implements a no-restraint policy.

Patients are never tied to their beds. Everyday it hosts meetings between the users and rehabilitative activities organized by volunteers. This is also a good way to inject new "life" inside the ward.

3 psychiatrists + 23 professionals (nurses and educators) + 7 UFE 300 admissions/year. Average lenght of stay : 12 Days









One example: Valentina's care pathway

Once the crisis is over ...

Valentina may need a "sheltered" home (about 100 users involved in Trento)

In the past we used high protection residential facilities. Today, we mostly rely on **cohabitation agreements between users** (that stimulate responsability, mutual help and recovery) or **foster care arrangements** with people willing to live with Valentina. These can be "normal" families, but more often, they are **political refugees** that are willing and have the heart and mind to share an apartment with one of our users, **a very innovative solution**. One example is Fabien, who is here with us and who lives with Adriano, one of our most "vivacious" users.











THE HOUSING AREA

Having a house and a job are fundamental aspects of a successful care pathway. Especially for users with high requirements.

The MHD offers different housing solutions to match users' needs.

- The "Sun House", with its 13 beds, is the only facility with a 24 hour professional/UFE presence.
- There are around **10 low protection** flats with 1 professional present for 1/2 hours a day.
- The most used solutions are **co-habitation agreements between users** or **foster care** by families or another willing person (for example **political refugees**).

The choice between the various options is taken together with the user following the "Housing Map".

8 professionals + 7 UFE (Casa del Sole)
7 professionals + 4 UFE teritorial housing
150 Users involved in Housing Projects





THE HOUSING AREA THE HOUSING MAP







THE HOUSING AREA THE NUMBERS 2014: 164

Facility	N. guests 2014 turnover
Sun House	28
Low Protection Apartments	22
Self Help House	16
Cohabitation between users	57
Foster Care with Political Refugees	41

2014: 164 users involved in various housing projects





One example: Valentina's care pathway

Once the crisis is over ...

Valentina may need a "sheltered" job (about 130 users involved in Trento)

Valentina may need a job to come back on track. A few years ago we created some working teams composed by "difficult" users who are tutored by volun-teers who train them in their area of expertize. The working teams produce high quality goods and services that are sold on the open market for a profit. This is a wonderful paradox and **a very innovative solution at no cost**!

For example, our Borderbags ...







The Mental Health Department of Trento and its approach









THE WORKING AREA

The Service has a dedicated team of professionals that offer different employment opportunities according to 2 possible paths:

1) Institutional Path: offers job opportunities to people with disabilities thanks to national and local laws. The user must possess some basic competences so "severely ill" patients cannot access it.

2) Internal Path: thanks to a co-operation between the Department and its partner association "La Panchina". New working areas are created and lead by volunteers to absorb some of the "severely ill" patients. The goal is the production of high-quality goods for the open market (bags made of recycled materials, catering service, car wash, social tourism, gardening...)

3 professionals + 4 Volunteers 165 Users on Path 1 141 Users on Path 2





THE WORKING AREA WORK WITH US, WE ARE A LITTLE **CRAZY!**





Invita amici, conoscenti colleghi o clienti provenienti da altre città che devono pernottare a Trento, a farlo alla Casa del Sole. Una luminosa struttura residenziale riabilitativa adibita anche a B&B, che offre 10 posti letto.

Giardinaggio



manutenzic

aiuole

Richiedi collaborazione del gruppo del giardinaggio per la ne di giardini e/o





Siamo al Servizio di salute mentale di Trento in via San Glovanni Bosco, 10 (zona Piazza Fiera). Il bar è aperto dal lunedi al venerdì, dalle 8,00 alle 16,00. Vieni a trovarci!

Bar-Circolo 'Baraonda'



Associati al circolo "Baraonda" presso la Casa del Sole per poter ordinare da bere in un contesto tranquillo e accogliente.

t. 393 0735692



l servizio

Porta a lavare la tua auto all'autolavaggio "La Panchina" in via delle Crosare a Gardolo (servizio accurato e lavaggio a mano). t. 393 9748763

Autolavaggio

Il gruppo delle pulizie



t. 393 0735692

Le borse

del caffè.

Trucco



Acquista le borse "Borderbag' prodotte riciclando i sacchetti Richiedi l'intervento del gruppo delle pulizie presso i propri locali o uffici. t. 393 0735692

t. 393 0735692

La squadra di manutenzione



& Parrucco



Commissiona la tinteggiatura e testa a posto" alla Casa del Sole. altri piccoli lavori di manutenzione del tuo appartamento o ufficio. 393 0735692

t. 393 0735692





THE HOUSING AREA THE NUMBERS 2014: 306









"DOING TOGETHER"

The Department has a dedicated team of professionals that promotes the "Doing Together" activities both inside and outside the Department (Family Members meetings, Leopoldo, awareness campaigns in schools, sport activities, Liberalamente newsletter, selfhelp groups, etc.).

In addition to this, the team is in-charge of spreading the approach and practices of "Doing Together" inside the Service.

3 professionals (Educators) + 3 UFE + 3 Volunteers







The Quality Group aims to improve the quality of the services offered by the Department. It includes professionals, users, family members and volunteers.

The group meets once a month, it gathers critical issues and identifies appropriate actions to improve quality.

Of primary importance, the contribution brought by two family members that work in the area of quality improvement in the private sector and that can transfer the typical efficacy and efficiency of the private sector to a Public Service.

3 professionals + 2 Family Members + 2 Trainees

THE QUALITY GROUP





AN EXAMPLE OF QUALITY THAT INVOLVES ALL PROFESSIONALS AND UFE

Azienda Provinciale r i Servizi Sanitar DI'LA TUA! In 2015 Objectives, each professional and each UFE had to present 2 suggestions on actions to implement in the different Department's areas. By the end of 2015 have gathered over 200 proposals. **Proposals will be evaluated by a jury of experts and the best 20 suggestions will be implemented during 2016**.

As many of you know, this is a very valuable tool used by the private sector to involve all employees in corporate management, to make them feel more involved with corporate politics and improve general quality of the services provided.



One example: Valentina's care pathway

The advantages of this organisation to Valentina's Pathway

- permits to go through the crisis outside the hospital (WHO, literature, guidelines)
- supports a strong integration between all service areas
- offers continuity of care during the crisis in different moments and places
- offers innovative solutions in housing, working and socialising opportunities
- gets Valentina involved through the "Doing Together" approach
- offers Valentina the UFE's support and presence
- taking good care of Valentina during her crisis is the best way to fight stigma and prejudice





TO DO GOOD MENTAL HEALTH

The principles from the Italian Community Psychiatry are important, Evidence Based Medicine is important and we believe in it. ...

But, perhaps, what is even more important is:

-a warm welcoming in all areas of the Department -empathy and emotional closeness -strong attention to the diffusion of **Trust & Hope**

to put it simply ... an approach which is ... humane!

Too often, these things are missing from our MHDs. Users and family members are unhappy, desperate, angry.

The "Doing Together" and the UFE believe in people, in their resources and in their humanity.





To do Good Mental Health is possible !





THESE ARE THE COSTS OF TRENTO'S MHD

Italy has a public national health service. Citizens can access health services free

of charge (in some cases they might be requested to pay a small fee)

COSTS 2014 – MENTAL HEALTH DEPARTMENT TRENTO

Hospital Ward	Community	Out of province admissions	Private Facilities	Drugs	General Costs
1.150.000	3.950.000	420.000	220.000	1.700.000	670.000
TOTAL	8.110.000		Cost per inhabitant	62 Euro	

In Italy the average cost pro capita for Mental Health is about 100 Euro.

In Trento we spend a lot less, while guaranteeing high quality services. And the trick is...





OUR APPROACH: "DOING TOGETHER"







WHAT DOES "DOING TOGETHER" MEAN?

"Doing Together" means to involve equally users and family members in their care pathways and in all activities, groups and working areas of the MHD.

In this way, users, family members and citizens learn to be and "work" together.

"Doing Together" is an approach to mental illness that valorizes the experience and the knowledge, of everybody.





SHARED CARE PATHWAYS An instrument for a real and verifiable sharing of the care pathways

Key Thought: to say 'equally' and 'working together' is simple. To put it into practise is something else.....





"DOING TOGETHER" SOME "GOOD" THOUGHTS: SIMPLE, POSITIVE AND SMILING

- Change is always possible
- Everybody has resources
- Coherence between "said" and "done" is fundamental
- Everybody's active participation in every activity is 'normal'
- A good atmosphere is of fundamental importance
- Money is useful, but it is not everything.
- Research is very important.



Key Thought: the small utopia of simple things and common sense





"DOING TOGETHER" MAIN ACTIVITIES

2000	2003	20	004	2006	2007	2015
Self Help Groups Regular family members me Leopoldo discussion table Awareness campaigns in sc and communities						
	Self	Help House	Sport Associatio Questionnaires made by users	n		
				Extra-Ordin Shared Care Pathways	nary Events	
					Quality Gr	oup GPP

In 15 years, more than 1200 people have been involved. This is an extraordinary number for a small reality like Trento





"DOING TOGETHER" SOME EXAMPLES

Regular Family members meetings

Series of meetings : 8 weekly/2 hours meetings for 10/15 families, facilitated by 1 professional and 1 UFE

- to give information about the Service, the illness and the medications
- to make the family feel less "alone"
- to favor an "exchange" of experiences between the families
- to favor the "exchange" of knowledge between professionals and family members
- to invite the families to some of the "Doing Together" activities
- to offer family members the opportunity to join one of the self-help groups

2000-2015 : 41 series of meetings with over 450 Families




"DOING TOGETHER" : SOME EXAMPLES

Do you want a better Mental Health Service?

Is there anything that can be improved?

Would you like to suggest something new?



Next meeting : February 16 at 16.30

info Servizio di salute mentale - via S. G. Bosco, 10 Trento Stefania Biasi | 0461 902886 - stefania.biasi@apss.tn.it

THE LEOPOLDO TABLE



"DOING TOGETHER" SOME EXAMPLES

THE LEOPOLDO TABLE

All main changes in the Department have passed through the Leopoldo Table.

Leopoldo is a meeting open to users and family members. It is held every two months to discuss improvements in the Department's organization.

• 1° example

Some family members asked for the centre to be opened also on Sundays (in 2000 the Service would close at 12.00 on Saturdays). "Crisis" never take a day off! After a long negotiation process and after 6 months, the Mental Health Center opened also on Saturdays and Sundays. A huge victory for family members and the "Doing Together".

<u>2° example</u>

A group of users criticizes our "Guide to Services" that I had just sent in print. For me it was the most beautiful Guide in Italy, it was like a child to me! "It is too long, users don't read it. We need a brief and easy guide to the services!". A mixed working group was created and after 2 months a "User Manual" postcard was created. Users went and distributed it in town, in the pharmacies, GPs and in the hospital.

Many understood in that moment that "Doing Together" was truly a reality!!!

2000-2015: 92 meetings with over 600 Partecipants





A RECENT EXAMPLE OF "DOING TOGETHER"

"Doing Together" radically applied: Shared Care Pathways 2

A paper instrument that puts together a team (user, family members, professionals and other important figures) in order to:

-build a care pathway that is equal and shared -verify the information received by the User regarding the Department, the illness and the medications.

-let the user express their thoughts regarding important areas such as: awareness, emotional burden, trust, hope, desires, communication within the team.

-learn to work in an atmosphere of equality and freedom of expression.
-to register and use potential "triggers" and desires in the event of a crisis
-to a have an external Guarantor that facilitates sharing and equality within the team.



Azienda Provinciale per i Servizi Sanitari Provincia Autonoma di Trento North Central District Mental Health Service of Trento

SHARED CARE PATHWAYS An instrument for a real and verifiable sharing of the care pathways



Each year there are around 150 new teams



A RECENT EXAMPLE OF "DOING TOGETHER"

FARe – Responsible Training Together



SECONDA EDIZIONE 2015



SERVIZIO DI SALUTE MENTALE DI TRENTO

FARE FORMARSI ASSIEME RESPONSABILMENTE

PROGRAMMA FORMATIVO SULLA SALUTE MENTALE IN CUI IL SAPERE ESPERIENZIALE DI UTENTI, FAMILIARI E CITTADINI SI INTRECCIA CON QUELLO PROFESSIONALE DEGLI OPERATORI - INCONTRI COPRODOTTI APERTI A TUTTA LA COMUNITÀ





THE MOST RECENT (AND MOST IMPORTANT) NOVELTY OF "DOING TOGETHER"

10th April 2015 : The birth of the Parliament of the Mental Health Department of Trento (Local Newspaper Headlines)

It is called "Gruppo di Progettazione Partecipata" and it is formed by 6 professionals, 5 users, 3 family members, 1 volunteer that have been democratically elected between users, family members, citizens/volunteers and professionals from the Department.

This is an original and unique initiative in Italy, inspired by the "doing together" approach that wants to favor the shared management of the Department, concretely involving users and family members.

The group meets once a month for 3 hours and discusses topics proposed by anyone in the service. The group detains real power within the Department. The director of the Department must also obey!

An example of direct democracy.

A huge challenge born from "Doing Together".



Azienda Provinciale per i Servizi Sanitar



Gennaio 2016



Trento 10th April 2015, Servizio di salute mentale, Via San Giovanni Bosco, n. 10



A VERY SPECIAL AGREEMENT INSTITUTIONAL "DOING TOGETHER"

A great strength:

A convention between the Provincial Health Agency and 2 private self help associations: "AMA" and "La Panchina".

Thanks to this conventions, the most important areas of rehabilitation are managed "together" and "equally":

- HOUSING
- WORK
- "DOING TOGETHER" AND UFE



UFE: our reason to be here with you today





UFE USERS & FAMILY MEMBERS EXPERTS

UFE

are the most (User & Family membersExperts) important visit card of the"Doing Together" approach.









THE RECOGNITION OF THE EXPERIENTIAL KNOWLEDGE OF USERS AND FAMILY MEMBERS IN THE WORLD

In the world of Mental Health (and wherever there is a prolonged suffering) there are many experiences that spring from the principles of "peer support" and of the recognition of the experiential knowledge of Users and Family Members.

some remain on the outskirt of health systems
 other start co-operating with the health system
 others are completely integrated within the health system



The UFE experience is an example of "peer support" that is strongly integrated within the system, within the Department.

UFE are normal people with good human resources and the richness that derives from having personal experience of the illness.





UFE - USERS & FAMILY MEMBERS EXPERTS

- have experienced a successful care pathway
- have matured a full awareness of the value of their experiential knowledge
- are willing to transmit their knowledge to peers in distress
- are welcoming and positively oriented towards their peers
- provide structured and continuous services, side by side with the professionals, in all areas of the MHD
- are formally recognized by the Provincial Healthcare Agency of Trento and are paid through a partner association

UFE have received prizes from important agencies in Italy and abroad.





UFE.... HAVE WON MANY AWARDS

- >Region Emilia Romagna, Premio Gulliver, innovative experience, 2008
- Active citizenship, Best practice , 2009, Roma
- Age.N.As. (National agency for regional health services), Best example of organizational empowerment, 2009, Roma
- Clinical Micro-systems Festival, Best practice, Jönköping (Svezia), 2010
- Tribunal for patient's rights, Alesini Award, Roma 2010
- Ministry of Health Agenas, Good practice to transfer to other regions, 2011, Roma
- Lebanon (New Hampshire), Dartmouth Hitchcock Medical Center, Institute for Healthcare Improvement, Best

practice, August 2011

- >Arendal, Norway, International meeting, Best practice, June 2013
- ➢FIASO. Federazione italiana aziende sanitarie e ospedaliere. Best Practice. 2013
- ➢Porto Alegre, Brasil International meeting on "Doing Together" between users, family members and

professionals, Best pratice, April 2014

But the most important prize, it is to be here with you today!







UFE ARE BORN OUT OF A KEY THOUGHT

PROFESSIONAL KNOWLEDGE

CONTAMINATION INTEGRATION USERS & FAMILY MEMBERS KNOWLEDGE

If we value both types of knowledge we create a system that greatly enhances the quality of services.





RESULTS / STRENGHTS

PROFESSIONAL FRONT

Increased emotional attention to the world of users and family members

USERS AND FAMILY MEMBERS FRONT

Increased compliance and trust towards the MHD offers

Increased decisional power and self management in the own care pathway

Increased hope towards change and recovery

UFE FRONT

Increased quality of life and social capital

MHD FRONT

Better atmosphere

COMMUNITY FRONT

More positive attention to the world of Mental Health

(UFE are good testimonials and the media often talk about them positively!)



Often, UFE "improve" professionals' hearts and minds! This is a beautiful thing!

Most importantly UFE presence radically changes the context! To work towards changing the context is crucial!





RELATIONSHIP UFE/ PROFESSIONALS



When we started to discuss the possibility of having UFE "inside" the Department, the majority of professionals were puzzled/contrary.

Today UFE are very well accepted because they provide support to users and family members. For professionals, UFE have become 'colleagues'!





UFE NUMBERS 2014

N. total	45	
Users	32	
Family members	13	
Women	29	
Men	16	
Average Age	52	
N. a <mark>verage</mark> hours of service	10	
Total hours/year	<mark>21</mark> .265	





UFE: WHAT THEY DO AND WHERE THEY DO IT DATA 2014

Area	Activity	n. UFE	n. hours/year
Mental Health Cent <mark>er</mark>	Front office	7	2.268
Mental Health Center	Call center	5	2.394
Menta <mark>l Health C</mark> enter	Crisis sup <mark>port</mark>	2	2.640
Terr <mark>itorial Èqui</mark> pe	Presence in complex situations	2	2.310
Hospital Ward	Crisis support	5	4.745
Sun House	Night presence	6	4.380
Sun House	Daily activities	3	1.277
Self Help Apartments	Daily support	2	1.640
Shared Care Pathways	Guarantor	7	240
Family	Facilitator for groups	2	36
Awareness Campai <mark>gn</mark>	Awareness campaigns and testimonials	10	225
Quality Group	Evaluation research	2	260
Total		50	21.265





TRENTO'S MENTAL HEALTH DEPARTMENT







TRENTO'S MENTAL HEALTH DEPARTMENT



If health is on the table, then the patient and the family must be at the table. Lucian Leape Institute, 2008





FRONT OFFICE - UFE MARA











GENERAL MORNING MEETING UFE GIUSEPPE AND ENZO







TERRITORIAL ÈQUIPE UFE MAURIZIO







CRISIS AREA UFE MAURIZIO







THE SUN HOUSE UFE MIRELLA













THE HOSPITAL WARD UFE DONATELLA







SHARED CARE PATHWAYS UFE MICHELE





North Central District Mental Health Service of Trento Director: Renzo De Stefani









AWARENESS CAMPAIGNS IN SCHOOLS UFE MIRELLA







BAR DOLCE & CAFFÈ



This bar is a bit ' the heart of the MHD. Users, family members and professionals share an atmosphere rich in friendship and affection.'





SUMMARY : KEY ASPECTS OF ITALIAN COMMUNITY PSYCHIATRY IN THE MENTAL HEALTH DEPARTMENT OF TRENTO

- Establish all possible networks with the local community
- Strong "actions" against stigma and prejudice
- Full cooperation with family members
- Real time crisis management outside hospital
- Shared subscription of all care pathways by users, family members and professionals with 1
 external Guarantor (UFE) : work in team!
- •1 lively hospital ward with "no restraint" policy
- A stable reference professional for each user and his/her family
- Particular attention to housing, working and social inclusion
- Strong attention to contrast drop-out
- A continuous evaluation of our work
- The valorization of everybody's knowledge starting with Users and Family Members

The majority of Mental Health Departments in Italy and abroad have a 20/30 % drop-out rate. In Trento, drop-out rates are between 2.5 and 5%.





RECRUITMENT

Today, the UFE pathway is offered to all users and family members of the Service through different referrals: from the active UFE, professionals, word of mouth or other informal contacts.

Candidates are interviewed by a professional from the "Doing Together" area and by a UFE to evaluate motivation and comprehensions of the UFE's tasks.

Later, the UFE is assigned to one of the Department areas according to his/her own interests and the Department needs.









BASE AND CONTINUOUS TRAINING AN IMPORTANT THEME, OBJECT OF FREQUENT DISCUSSIONS

The UFE have received their "primary training" while experiencing in first person, a mental illness.

For this reason, there are no prescribed traditional or structured trainings.

The important thing, are the monthly meetings in each working areas where UFE are present. UFE and professionals from the area exchange their experiences to solve possible problems. "Experience is the teacher of all things."

Julius Caesar

Base and continuous training - a frequent discussion





THE TRANSFERIBILITY OF THE UFE IN ITALY AND ABROAD



UFE are present in 20 Italian cities and are also growing in some other countries. We hope in Norway as well!



The 1[^] Chinese territorial Mental Health Center was inaugurated in Beijing in January 2010 born out of an important cooperation between Trento and Beijing. It is based on Trento's "Doing Together" approach and today there are over 150 UFE in Beijing.

UFE's transferability is very easy!





UFE AND "DOING TOGETHER" PRODUCE QUALITY

UFE have received an important quality award by the Quality Research Center

of Qulturum, Jönköping (Sweden).



This recognition derives from the fact that UFE produce quality because they enhance users' centrality in their care pathway and in the system.

User's centrality is one of the 6 fundamental factors that produce quality within the Health Systems.

(the other 5 factors are: security, efficacy, accessibility, efficiency and equity)

Qulturum is one of the most important Research Centres in the world for quality in Health Systems.





TO CONCLUDE ... A HEALTHY PROVOCATION ON POWER



"Possibly, good Health Systems in the future will require some radical changes in terms of power relations. Control and power that must start moving from the hands of those who administer the cures into the hands of those who receive the cure."

> DM Berwick, What "Patient Centered" should mean: confessions of an extremist. Health Affairs 2009



UFE are special to transfer power



TO CONCLUDE ... A HEALTHY PROVOCATION ON POWER



"To plan and build systems is important for health professionals, but it is not sufficient. They are instruments.

It is the ethical dimension of all professionals that is essential

for the system to succeed.

After all, the secret of quality is love."

Avedis Donabedian

(1919 – 2000) physician; founder of the study of quality in health care and medical outcomes research

UFE are special to bring love !





EXTRA ORDINARY EVENTS

Last but not least "Doing Together" organizes every year some extra ordinary events!

And these events are important actions to fight stigma and prejudice.



Atlantic Ocean, China, Muyeye, UFE & USA, UFE & Japan, UFE & Norway



EXTRA-ORDINARY EVENT 2006: ATLANTIC OCEAN CROSSING





10 people from Trento's MHD sailing from Cadice to the Caribbeans like Cristoforo Colombo





EXTRA-ORDINARY EVENT 2007: THAT SPECIAL TRAIN TO BEIJING





208 people (users, family members, professionals, citizens) from Venice to Beijing like Marco Polo





EXTRA-ORDINARY EVENT 2009-2010



un ramo di follia fa bene all'albero della vita







MUYEYE IS A VERY POOR VILLAGE IN KENYA. TRENTO'S MHD AND OTHER ITALIAN MHDS FUNDRAISED TO BUILD THE SCHOOL. 250 OF US TRAVELLED TO MUYEYE TO FOLLOW THE CONSTRUCTION PROJECT.



On 17th February 2011 the school was

inaugurated!!!

The school represent the hope for a better life for many youths of Muyeye





EXTRA-ORDINARY EVENT 2011:

UFE & USA



From Boston to Los Angeles 11 conferences on "Doing Together" and the UFE. Invited by prestigious universities and research centres in the USA.





EXTRA-ORDINARY EVENT 2015: JAPAN

TOUR of GIAPPONE 3 - 13 SEPTEMBER 2015

PRESENTATION OF THE ORGANISATION OF THE MENTAL HEALTH DEPARTMENT OF TRENTO, THE DOING TOGHETER APPROACH & THE UFE (USERS & FAMILY MEMBERS EXPERTS)

AMBASSADORS ELEONORA ESPOSITO, MAURIZIO CAPITANIO, RENZO DE STEFANI, RENATO DUCHES, ROBERTO CUNI

STOPS IN

3.09.2015 - FUKUSHIMA
 6.09.2015 - OKAYAMA
 11.09.2015 - KOKUBUNIJ (TOKYO)
 12.09.2015 - CHIBA
 13.09.2015 - TOKYO

PROMOSSO DA: ASSOCIAZIONE "OKAYAMA-UFE"



3rd-13th September 2015 - Fukushima, Okayama, Kokubunij, Chiba & Tokio





EXTRA-ORDINARY EVENT 2016: NORWAY

Strand Wind For



15 - 19 FEBBRUARY 2016

PRESENTATION OF THE ORGANISATION OF THE MENTAL HEALTH DEPARTMENT OF TRENTO, THE DOING TOGHETER APPROACH & THE UFE (USERS & FAMILY MEMBERS EXPERTS)

AMBASSADORS NJOUOKOU FABIEN LEXUS, RENZO DE STEFANI, ROBERTO CUNI, VALENTINA ZANON, MAURIZIO CAPITANIO, ALICE SOMMAVILLA

STOPS IN

15/02/2016 - ASKER
 16/02/2016 - LARVIK
 17/02/2016 - KRISTIANSAND
 18/02/2016 - KLEPP
 19/02/2016 - MOLDE

15th/19th February 2016 – Asker, Larvik, Kristiansand, Klepp, Molde







OUR MARKET !!!!!



Once in a lifetime opportunity!





LOOKING AT THE FUTURE



This is the Sun House, a residential facility, with a playground open to the children of the neighborhood.

A true example of integration !

"Be the change you want to see in the World" (Gandhi)







TRUST & HOPE



The world is full of UFE...

... Naturally, you must want to see them!



- Thank you all for your presence and your attention.
- We hope to continue a cooperation
- between Trento and Norway.



