

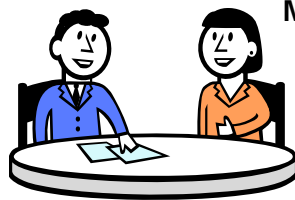
## Consumer and Family Satisfaction Team (CFST)

CFST is a great tool for Recovery. Why? Because information in CFST reports helps providers of mental health and drug and alcohol services and systems understand what helps someone in their Recovery, and what is a barrier to Recovery. CFST questions individuals who use behavioral health services, takes their opinions and information and uses it to make recommendations for service improvements. Questions such as:

- “Were you treated with respect by your treatment provider?”
- “Do you pick your treatment goals?”
- “When you ask questions about your treatment, does the staff answer your questions to your satisfaction?”
- “Overall, How satisfied are you with the service you receive?”

The level of satisfaction individuals have with their services, and their comments about what they like and what they dislike all go into a report and are given monthly to Community Care Behavioral Health, the managed care company in Schuylkill County. If individuals are very satisfied, the providers are told this. If individuals are unsatisfied with a part of their services, providers are also told and asked to make a plan to improve.

So whenever you see an opportunity to take part in a CFST survey, know that your opinion matters!



**Mental Health Advance Directives**  
Classes are offered at the  
**Recovery Center on**  
**Thursday afternoons from**  
**2:00 P.M. – 4:00 P.M.**

## Recovery Tools Matching Game

Write after the number the letter it matches. Sign your name at the bottom and bring to the Recovery Center for a chance to win a Bagel Basket.

1. \_\_\_\_ Wellness Action Recovery Plan
2. \_\_\_\_ Recovery Center
3. \_\_\_\_ Community Support Program
4. \_\_\_\_ Mental Health Advance Directive
5. \_\_\_\_ Certified Peer Specialist
6. \_\_\_\_ CFST

Name \_\_\_\_\_  
Phone Number \_\_\_\_\_

- A. A document that allows a person to make their wishes regarding mental health treatment known in the event that the person is unable to make decisions because of their mental illness.
- B. A safe and supportive place where individuals who have mental illness can come and socialize, enjoy activities, and receive help with their Recovery.
- C. Meetings where individuals who have a mental illness join in a common voice with others to work toward: insuring the rights of persons who have mental illness; ending stigma; supporting legislation favorable to mental wellness; and helping the community.
- D. An individual who provides Peer Support Services.
- E. WRAP
- F. The process of surveying and reporting on consumers and families satisfaction with the mental health and drug and alcohol services they use.

## Listen

When I ask you to listen to me and you start giving advice you have not done what I asked.

When I ask you to listen to me and you begin to tell me why I shouldn't feel that way, you are trampling on my feelings.

When I ask you to listen to me and you feel you have to do something to solve my problems, you have failed me, strange as that may seem.

Listen! All I ask is that you listen – not talk or do – Just hear me.

–Anonymous

Where  
Recovery  
from  
Mental Illness  
Is Not a  
Solo Effort.

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# The Recovery Messenger

November 2007



## TOOLS FOR RECOVERY

- Wellness Action Recovery Plan
- Consumer and Family Satisfaction Team
- Mental Health Advance Directive
- Community Support Program
- Recovery Center
- Supportive Friends
- Encouraging Staff
- Self-Care



The Recovery Center  
300 South Centre St  
Pottsville, PA  
(570) 628-0155  
Hours:  
Monday – Friday  
2:00 PM – 6:00 PM

the Advocacy Alliance

## The Community Support Program (CSP) Corner

### What is CSP?

The Community Support Program (CSP) of Pennsylvania is a coalition of mental health services consumers, family members, advocates and professionals working to help adults with serious mental illnesses and co-occurring disorders live successfully in the community. Anyone that is interested is welcome to come to the meetings.

Schuylkill County CSP meets the last Tuesday of each month at 2:00 P.M. Regional CSP meets the 3rd Tuesday of each month from 10:00 A.M. to 1:00 P.M. at the Recovery Center in Scranton. The Regional CSP is a meeting of local CSP representatives from all over Northeast Pennsylvania. It's fun. You get to meet people, work together and make a difference. For more information, contact Lynn Houseknecht at the Recovery Center at 570-628-0155.

## What is a Certified Peer Specialist?

A Certified Peer Specialist is an individual who is self-identified as having a mental illness and has been trained and certified by the Department of Public Welfare to help her/his peers identify and achieve specific self-determined goals. A Certified Peer Specialist provides Peer Support Services.

## What can a Certified Peer Specialist help you with?

They can assist someone who has a mental illness:

- Develop a Wellness Recovery Action Plan (WRAP) or a Mental Health Advance Directive.
- Learn how to use their skills to avoid an unnecessary psychiatric hospitalization or incarceration.
- Develop natural supports.
- Maintain stable housing or learn how to improve or change an inadequate housing situation.
- Talk about their medication or diagnosis with the Physician or Nurse and help guide them toward a proactive role in his or her own treatment.
- Make informed, independent choices.
- Develop and maintain positive personal/social supports (e.g., going to a movie with a new friend, meeting someone new at a social gathering).
- Improve communication with family members, agencies and others.

Sounds great? What should you do if you are interested in Peer Support Services? Talk to your therapist or case manager. Ask them to help you come up with some goals and ask your doctor to recommend Peer Support Services. Then you can call or ask your therapist or case manager to call the Recovery Center at (570)628-0155 and ask for Irene Burke, a Certified Peer Specialist. She can make an appointment and help you decide on a plan.

## Are you interested in becoming a Certified Peer Specialist?

In January 2008 there will be training in Pottsville for two individuals to become Certified Peer Specialists. If you are interested in applying for the training you must:

- Have a high school diploma or GED;
- Self-identify as having a mental illness;
- Have worked or volunteered at least 12 months within the past three years;
- Have a goal of going to work (paid employment) as a Certified Peer Specialist;
- Have the reading and writing skills needed to complete the academic work in the training; and
- Be committed to actively participating in a two-week training and meeting all attendance and course requirements.

Individuals who are interested or would like more information can contact Irene Burke, Certified Peer Specialist at (570) 622-1631 or [ib@theadvocacyalliance.org](mailto:ib@theadvocacyalliance.org).



## My Story

By Irene Burke, Certified Peer Specialist

I have been a survivor of Major Depression all my life. In 1991 I started the steps to my Recovery although I didn't know it. I started going to counseling where a woman I met in my partial hospitalization program told me about the Doorway Drop-in Center in Pottsville. With her encouragement I started to attend and although I was scared I became more involved and changed from just attending the Drop-In Center, to participating. While going to the Doorway I had an opportunity to go to the Drop-In Cen-

ter Conference held in State College. There I first learned about Recovery and that you could live a full life along with having a mental illness. I started becoming more confident with every new thing I became involved with.

I just kept on going and growing. I attended the Leadership in Recovery Conference, got involved in the Schuylkill County Community Support Program (CSP), and then became a Co-Chair of both the local and regional CSP. The more I involved myself, the more my confidence and self-esteem developed. I became a monitor for the Consumer Satisfaction Team and I was now interviewing others to see their satisfaction with their services and supports.

Today I am a member of the Mental Health/Mental Retardation Program Advisory Board where I represent others who have a mental illness. Today I am a Certified Peer Specialist which allows me to help others in something I believe in – Recovery. Years ago I was scared but the more I got into activities and consumer run projects, the easier it got. It is much better now; I have things I look forward to. Before, I was just giving up. Now I am still growing and becoming more aware of what I can do, as the mental health 'system' is becoming more aware of what individuals who have mental illness can do. Today the Doorway Drop-in Center in Pottsville is the Recovery Center and instead of just dropping in, I am also Recovering.

## Ideas to Help Agencies Move Recovery Forward

The following "Guiding Principles" were taken from an article by Laurie Ashcroft, Ph.D., and William A. Anthony, Ph.D., in the April 2005 issue of Behavioral Healthcare Tomorrow. These Principles help to keep staff moving in a Recovery direction:

- Learn to use language that promotes hope. Avoid language that relates to sickness.
- Raise expectations of what people are capable of accomplishing.
- Stay focused on strength no matter what.
- Build everyone's hope, because hope is the energy that moves transformation forward.
- Celebrate accomplishments with graduations and social events.
- Find ways to listen to the customers. They are the real teachers.
- Re-engineer forms, procedures and processes to help staff focus on recovery instead of stability and maintenance.
- Re-create existing services to an educational approach model wherever possible, helping people move from the role of "mental patient" to the roles of student, learner and teacher.
- See Recovery as something that happens to staff and organizations, not just people receiving services.
- Provide lots of training opportunities for staff to get good training in recovery practices and principles.
- Focus on results. Become a creator of the future rather than a victim of the system stuck in too many rules, too much paperwork, and not enough funding.