

Clinical Psychiatry and Mental Health

December 12-13, 2023 | Paris, France

Volume: 14

Early evaluation of a proactive and time-unlimited wraparound behavioral health intervention for people with serious mental health challenges

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Traditional community mental health services typically focus on alleviating distress through a combination of psychotherapy and psychopharmacology but fall short of supporting recovery and rehabilitation. Addressing this, the Enhanced Treatment and Recovery (EnTRy) Program was developed as an innovative intervention. Based on an evidence-based time-limited model for early psychosis, Entry offers a large-scale and time-unlimited service menu. At a Federally Qualified Health Center (FQHC) in a racially and ethnically diverse American urban community, EnTRy supports recovery through traditional services, crucially augmented with community engagement, proactive in-home outreach, in-reach into psychiatric inpatient services, family support, and facilitation of employment and educational resources. The multidisciplinary team of recovery-trained psychotherapists, psychiatrists, care managers, peer specialists, and patient navigators, also facilitate low-threshold access to co-occurring substance misuse and global healthcare services within the FQHC. At enrollment, Entry's first 358 patients individuals with schizophrenia, bipolar disorder, and major depression with psychotic features completed a battery of social, mental health, and self-report assessments, including those relevant to community functioning, psychological distress, and inpatient recidivism. In addition to examining program tenure, measures were repeated at 6 months. Compared to baseline, and with exceedingly low program dropout, at 6 months there was significantly improved inpatient and emergency recidivism, personal sense of overall health, mental wellbeing and daily functioning..

Entry expands traditional services with a distinctly proactive and multifaceted team approach that serves patients for as long as is needed over the lifespan. Initial data shows promise in improved functioning and in reduced psychological distress within this population.

Biography

Through a career in academic, public policy, clinical, and administrative roles, Dr. McQuistion's expertise concerns community-based systems of care. He has extensively published and taught on community mental health and the needs of marginalized populations, especially regarding recovery. Orientation, advocacy, clinical engagement, psychiatric rehabilitation, and substance misuse. He completed Residency at NYU Medical Center and the Public Psychiatry Fellowship at Columbia. He is past president of the American Association for Community Psychiatry, recipient of the National Alliance on Mental Illness Exemplary Psychiatrist Award, Fellow of the New York Academy of Medicine, and Distinguished Life Fellow of the American Psychiatric Association.