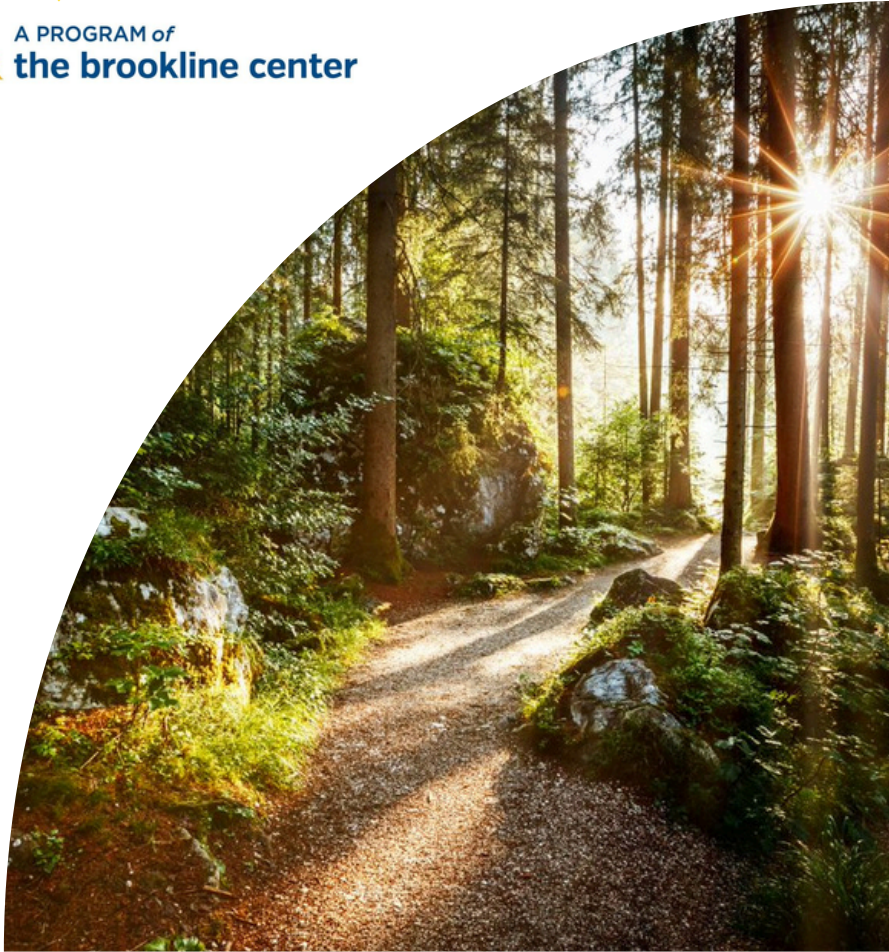




M-PATH



A PROGRAM of
the brookline center



2024

ANNUAL REPORT

Massachusetts Psychosis
Access and Triage Hub

M-PATH'S EXPANSION

We are excited to tell you about how much M-PATH has grown over the past year and to fill you in on our plans for the year ahead!

People have reached out to us from across the state, from the Berkshires to the northeastern border with New Hampshire to the Cape and Islands. One important trend is the increase in inquiries about teens under the age of 15 who are experiencing symptoms that may be related to psychosis; to address this, we have joined a new workgroup focused on expanding resources, knowledge, and care for this population. This group also includes psychiatrists, public health experts, and DMH administrators.

Our work continued to expand into two major areas – directly supporting young people and their families and providing expert consultation and training to youth-facing community providers. In 2024, we worked with well over 100 families to provide psychoeducation, coaching, and connection to community resources, as well as support with making referrals to clinical high risk for psychosis (CHR-p) and first episode psychosis (FEP) programs. We continue to receive feedback that this support is meaningful and important to families at a time when they are feeling confused and adrift in the maze of mental health services (see pgs. 18-19 to read some of their kind words).

We also heard directly from young people seeking answers to questions about psychosis and looking for support during a difficult time. Our young adult peer mentor has responded to these calls, talking with them about her own experiences and offering an empathic listening ear. In 2025, we will be working to increase the volume of calls from young people by deepening our connection with youth-focused community organizations including the DMH-funded Young Adult Access Centers and clubhouses.

We completed over 70 provider consultations; these included outpatient mental health clinicians, pediatric and primary care providers, high school and college counselors, clinicians in higher levels of care (inpatient, PHPs), and behavioral health providers at state agencies like DMH, DCF, and DYS. M-PATH staff provide guidance in diagnostic and case formulation, education regarding symptoms of psychosis and screening, connection to community resources, and support in referring young people to FEP and CHR-p programs when appropriate. We also gave almost 40 presentations and trainings to over 1400 participants! See pg. 10 for a list of the agencies and community groups we spoke with.



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M-PATH'S EXPANSION

We have also significantly expanded our outreach to pediatric and primary care providers, with particular focus on community health centers (CHCs). Young people often see their primary care doctors more frequently in the months leading up to a first episode of psychosis. We want to make sure providers in these settings feel confident in their ability to identify and monitor potential signs of risk for psychosis. Additionally, CHCs are often located in underserved areas and are treating individuals who may not have easy access to specialized psychosis treatment. We believe that our innovative approach to early psychosis, **Psychosis Informed Care**, can help providers in any setting have the basic knowledge and skills they need to support young people that might be experiencing early symptoms. See pgs. 11-12 for more information.

We have also expanded our collaboration with state and local agencies. We have begun to work closely with staff from the Department of Children and Families, the Department of Youth Services and those involved in planning the Crisis Intervention Team (CIT) training for local police departments. Our goal is to ensure that staff who are working with youth and young adults, including police officers and co-response clinicians, gain an understanding of psychosis including how to empathically and appropriately respond when individuals are in distress.

We are grateful to have so many enthusiastic and supportive colleagues and collaborators that have helped us grow and expand the M-PATH program. We want to express our gratitude to the Massachusetts Department of Mental Health, SAMHSA, the Sidney R. Baer Jr., Foundation, the Blue Cross Blue Shield of Massachusetts Foundation, and other generous private donors for their financial support which has made this program possible.

We look forward to continuing to work with you to improve the care of young people and their families facing the challenge of early psychosis.

Sincerely,

Emily Gagen, PhD
M-PATH Program Director

Henry White, MD
Senior Advisor for Innovation, Brookline Center



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A REVIEW OF M-PATH'S DEVELOPMENT

2022

M-PATH launched in late 2022 as a response to the Massachusetts Strategic Plan for Early Psychosis (Mass-STEP) and its determination that there was a need for easier and more efficient access to specialized early psychosis services.

2023

Throughout 2023, we hired staff and began reaching out to youth-facing community providers as well as family organizations to inform them of the ways in which we could offer support.

2024

In 2024, we made a significant effort to expand our work outside of the Boston area into the western side of the state as well as the Cape and Islands. We initiated partnerships with primary care practices, community health centers, MCPAP, and the Massachusetts League of CHCs. We have also focused our work on developing our model of **psychosis-informed care**.

M-PATH SERVICES



FOR YOUNG PEOPLE

We work with many young people directly, answering questions about psychosis and treatment and assisting them with practical aspects of seeking out mental health services like obtaining medical records and submitting referrals to programs. Our young adult peer mentor is a large part of this support; she meets with individuals to discuss their experiences, share her own, and offer thoughts and suggestions on next steps they might choose to take.



FOR FAMILIES

In 2024, we had well over 150 meetings with families. These included consultations with our director and clinician where we are able to offer family members psychoeducation on psychosis, coaching on how to have effective conversations with their young person, and suggestions for community resources including support groups and materials to help them feel more confident and informed. Our family partner also met with many families to offer empathic support informed by her own experiences of supporting her child who experienced psychosis.

We also support families in making referrals to specialized early psychosis programs and offer care coordination throughout the process. This includes assistance in obtaining medical records, support and guidance with submitting DMH applications, and connection to other community agencies and organizations.



FOR PROVIDERS

In 2024, we completed over 70 provider consultations. We are able to meet with community providers individually or with an entire team that may be supporting a young person. We offer suggestions regarding diagnostic conceptualization, education regarding psychosis symptoms and screening, connection to community resources, and support in referring young people to specialized psychosis programs when appropriate.



M-PATH

OUR TEAM



Emily Gagen, PhD: Emily is a clinical psychologist; she is the director of the M-PATH program and a member of the CEDAR team.



Rebecca Wlcek, BA: Rebecca is the program coordinator; she is the primary M-PATH contact and manages all incoming calls and emails.



Charlene Flynn, LMHC: Charlene is a licensed mental health counselor who provides clinical consultation and care coordination to young people, families, and providers. She is also a member of CEDAR.



Natalia Nodiff: Natalia is M-PATH's young adult peer mentor. She provides support and guidance to youth and young adults connected to M-PATH.



Tanya Trevett, M.Ed.: Tanya works with M-PATH as a consultant to offer her insights and share her family's story in our outreach presentations.



Meghan Wales, PMHNP-BC: Meghan is a psychiatric nurse practitioner. She is working with M-PATH on the CHC Project and is a member of CEDAR.



Henry White, MD: Henry is a child and adolescent psychiatrist; he is the founder of and lead consultant for M-PATH and is also a senior advisor for innovation at the Brookline Center.



Jessica Stern, MD: Jessica is a child and adolescent psychiatrist; she is the chief medical officer at the Brookline Center, the medical director of CEDAR, and is a co-founder and consultant for M-PATH.



Amanda Weber, PhD: Amanda is a counseling psychologist; they are the director of the CEDAR Clinic and are a consultant for M-PATH.



OUR PARTNERS AND COLLABORATORS

We continue to work closely with many partners to develop and grow M-PATH's ability to support young people, their families, and providers. The **CEDAR Clinic**, a clinical high risk for psychosis program at the Brookline Center for Community Mental Health, continues to be an important partner in this work and several members of CEDAR's leadership provide consultation and expertise to the M-PATH team. **MAPNET**, the statewide early psychosis technical assistance center, continues to collaborate with M-PATH to ensure efficient and equitable access to early psychosis care. We also continue to work with the **Massachusetts Psychosis Prevention Partnership (M3P)**, a SAMHSA-funded initiative to expand CHR-p care in the state.

In 2024 we launched a new project, the CHC Early Psychosis Outreach Initiative. In partnership with the **Massachusetts League of Community Health Centers**, we are working with CHCs across the state, with a focus on racially diverse and economically disadvantaged youth between the ages of 12 and 30. The initiative will help primary care and behavioral health providers recognize, engage, and treat young people with early psychosis. The project includes training and education regarding the use of effective screening tools, onsite consultation opportunities, and support with making referrals to specialized care when needed. We will help staff improve clinical assessment and provide ongoing support as they incorporate these skills into their workflow.

We are also partnering with **Massachusetts Child Psychiatry Access Program (MCPAP)** to further improve our ability to reach pediatric providers across the state. We will be working with MCPAP child and adolescent psychiatrists to develop materials that primary care and pediatric providers, especially integrated behavioral health clinicians, can use for quick and easy reference to better identify and understand when young people they are treating may be experiencing signs of risk for psychosis.

OUR PARTNERS AND COLLABORATORS



We have continued to partner with many other wonderful collaborators, including:

- bryt
- NAMI Compass
- Pediatric Physicians Organization at Children's (PPOC)
- Parent Professional Advocacy League (PPAL)
- Department of Youth Services (DYS)
- Department of Children and Families (DCF)
- Brookline Police Department
- Massachusetts Behavioral Health Partnership (MBHP)
- And many more!



COMMUNITY OUTREACH



In 2024, we gave 37 presentations and trainings on early psychosis to a total of over 1400 participants. Many of them included our family partner and our young adult peer mentor, who were able to share their stories of their lived experiences with the audiences. We offered these presentations to youth-facing providers in several different domains, including emergency services, outpatient mental health, high schools and colleges/universities, state agencies including DMH, DYS, and DCF, and also pediatric and primary care practices.

Please email us if you'd like to schedule a presentation for your organization!

2024 PRESENTATIONS

Pediatric/Primary Care and Behavioral Health

- Needham Pediatrics
- Longwood Pediatrics
- BMC TEAM Up for Children
- Reliant Medical Group - Pediatric Behavioral Health
- BIDMC Cognitive Neurology
- MGH Revere CHC
- NEW Health Charlestown
- Southern JP Health Center
- Bay State Community Services
- Massachusetts League of Community Health Centers

State Agencies

- Department of Children and Families
- Department of Youth Services
- DMH PACT-Y Leaders

Law Enforcement and Crisis Response

- Norfolk County CIT Training
- Norwood Mobile Crisis
- Riverside Mobile Crisis

Schools, Colleges, and Universities


- Harvard University
- University of Massachusetts Dartmouth
- William James College
- Massachusetts Institute of Technology
- Salem State University
- Boston Public Schools- Behavioral Health Services
- Rennie Center
- MA School Psychologist Association
- MA School Counselors Association
- Brookline Center for Community Mental Health School Telebehavioral Health Project
- bryt

Conferences

- International Society for the Social and Psychological Approaches to Psychosis (ISPS)
- SuccessFest (DMH)
- Pathways For Children - Youth At Risk Conference

A major focus of our presentations has been the principles of Psychosis-Informed Care!

PSYCHOSIS INFORMED CARE



Early detection of psychosis and risk for psychosis is critical to improving long-term outcomes. However, many community providers report not feeling confident in identifying signs and symptoms of psychosis/risk for psychosis; some assume they will “know it when they see it” because they are expecting very explicitly noticeable symptoms, but in the process are missing more subtle warning signs or are attributing them to other things (e.g., depression, anxiety).

While connection to specialized early psychosis programs is a useful and appropriate next step for many young people, others do not require the wraparound level of care that these programs offer, and can be well-supported by general outpatient providers. Additionally, many live in areas of the state where the closest program is still too far to be a reasonable treatment option.

The principles of trauma-informed care do not require that providers become experts in trauma and PTSD. They do encourage providers to understand how trauma can impact people and how those experiences can influence the ways in which a person interacts with the world. They emphasize the importance of being aware of this when trying to understand and connect with a person with whom they are working.

To a similar end, M-PATH has worked to develop the principles of **Psychosis-Informed Care**. Rather than feel the need to have expertise and extensive experience working with individuals with psychosis, Psychosis-Informed Care aims to help providers understand what psychosis is (and isn't) and to offer resources, information, and as a result, confidence, to work with young people that may be experiencing these symptoms without feeling like they must find an expert to work with them instead.

PSYCHOSIS INFORMED CARE



Normalize

Unusual perceptual experiences (psychotic-like experiences) are common and part of many different clinical issues and presentations (e.g., psychotic disorders, trauma, substance use).



Engage

Early intervention and engagement in treatment can lead to significantly improved long-term outcomes for people with persistent psychotic experiences. Approaches that include choice, collaboration, empowerment, and (when appropriate) engagement of family tend to work best.



Open Door

Because people are often reluctant to reveal these experiences, inquire and respond with an “open door” – being curious, thoughtful, and empathic, without needing to be the voice of reality or assuming there are safety concerns, so that people will want to continue to share their experiences with you.



Open Mind

Because these experiences can be a part of many different clinical issues, a careful differential diagnosis is often the best approach; this may require some tolerance of diagnostic uncertainty.

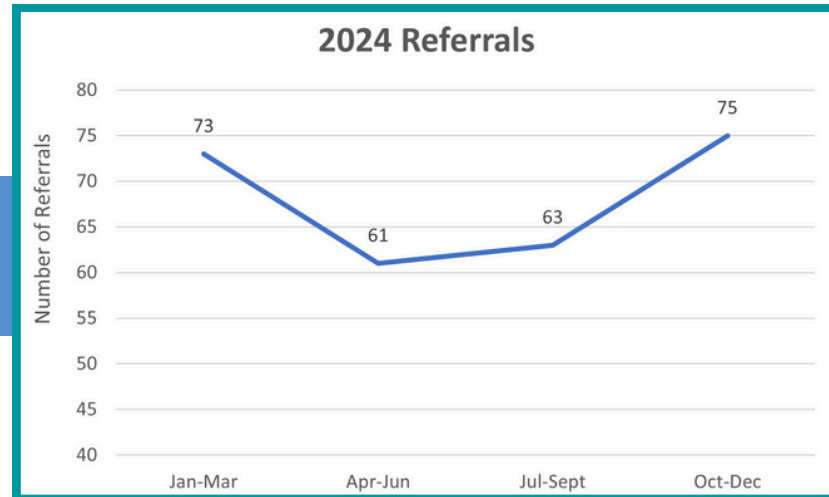


Consult

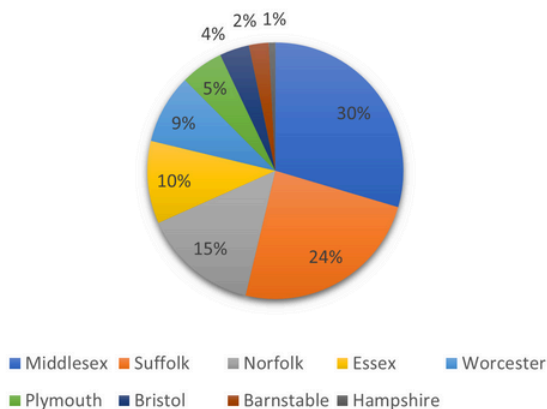
Talking with mental health professionals with expertise in early psychosis can help sort through the complexities that are often characteristic of young people having these kinds of experiences.

WHO ARE WE HEARING FROM?

We experienced a steady flow of referrals throughout 2024. We primarily heard from family members (40%) and from providers (51%). We are working hard to expand our outreach to young people directly in 2025.



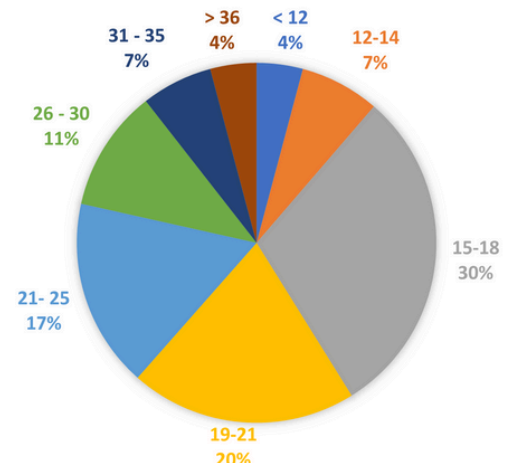
Referrals by County



We also received referrals from individuals in Vermont, Maine, Connecticut, Rhode Island, New York, New Jersey, and Oregon!

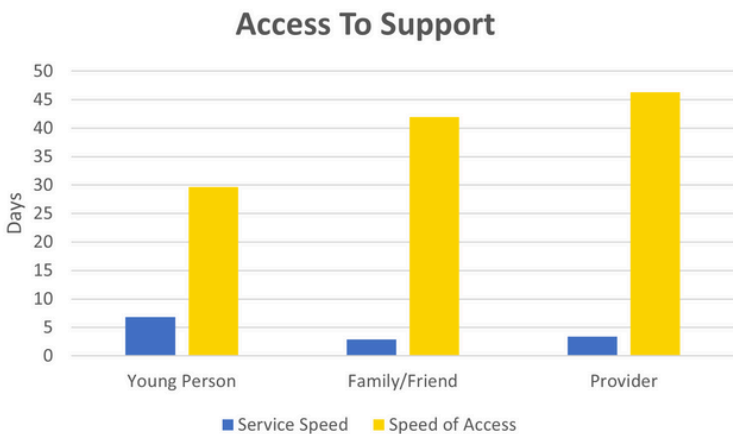
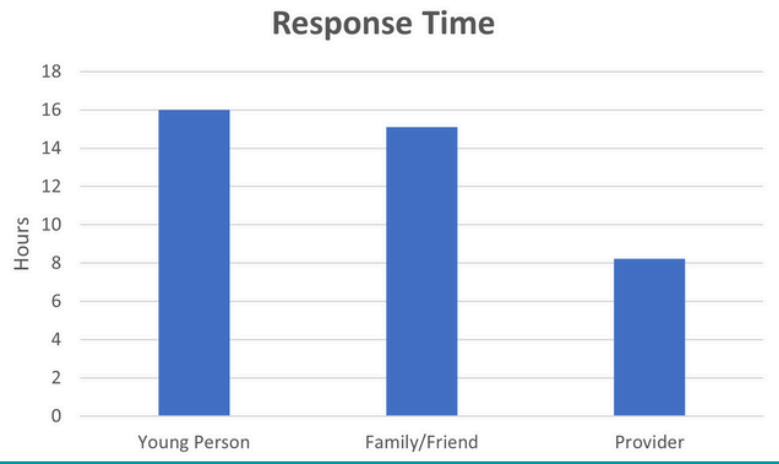
Anecdotally, M-PATH has been hearing from more families and providers about younger adolescents and children experiencing psychosis-like symptoms. This information has informed the development of the Youth & Psychosis Advisory Committee, supported by the M3P SAMHSA grant. Experts from several different fields meet regularly to discuss ways in which we can support these young people and offer expert consultation to providers working with them.

Ages of Young People Referred



HOW CAN WE HELP?

In 2024, we were able to respond to every outreach in well under 24 hours.



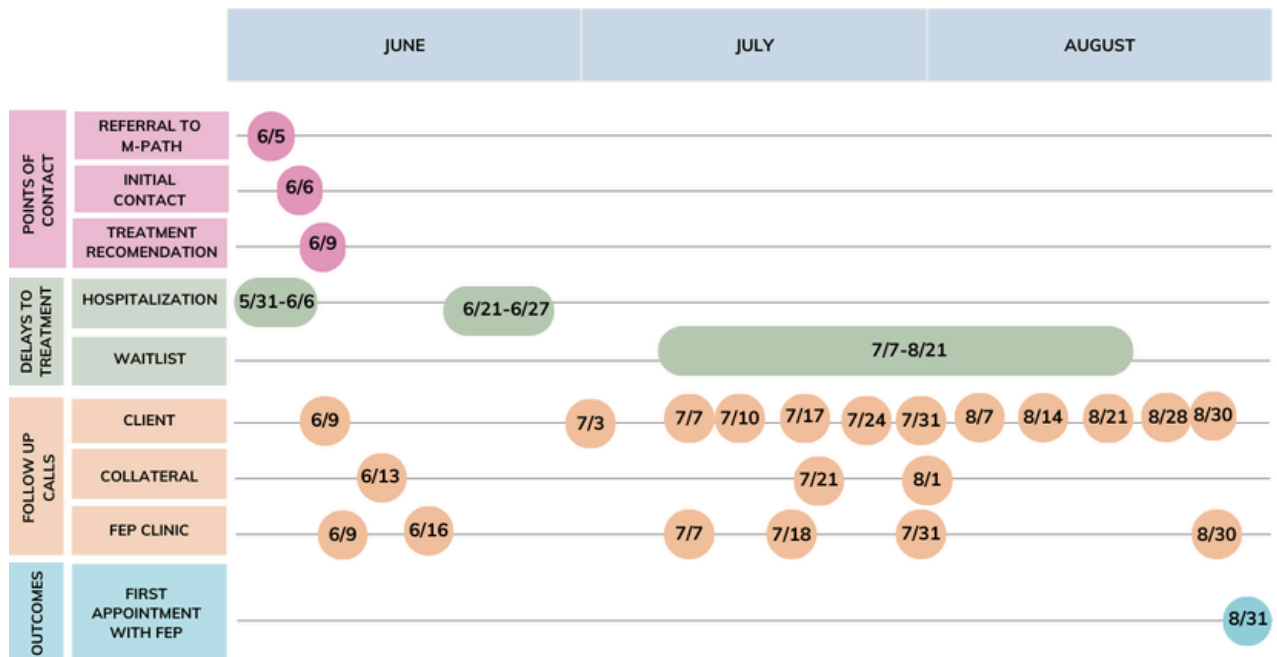
We were able to provide people with a concrete next step in their journey (e.g., a consultation, a referral, a community resource) in under a week. We will continue to work with FEP/CHR-p programs to reduce the time to connect to care.

Service speed: Amount of time taken for M-PATH to provide a recommendation (e.g., consultation, referral, community resource).

Speed of access: Amount of time for individual to be connected to care.

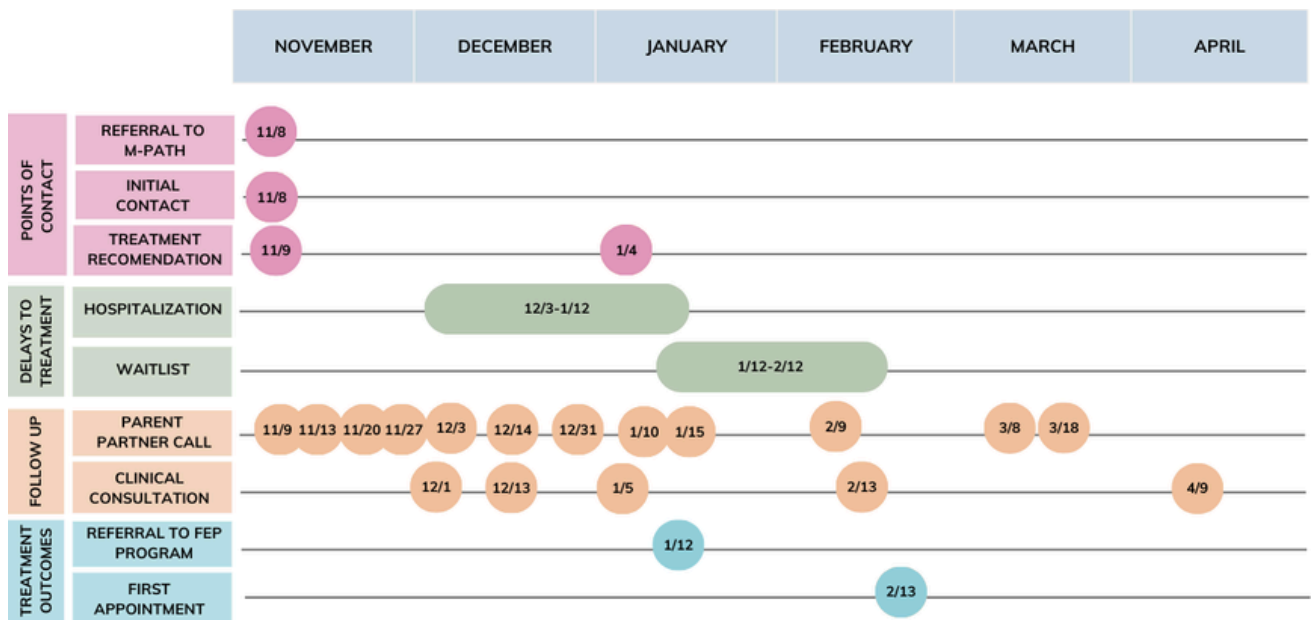
In 2024, we made almost 70 referrals to FEP and CHR programs. We also helped connect many young people and their families to other community resources including CBHCs and general outpatient mental health services, family and peer support groups, and higher levels of care (e.g., PHPs and IOPs).

CASE EXAMPLE: WORKING WITH A YOUNG ADULT



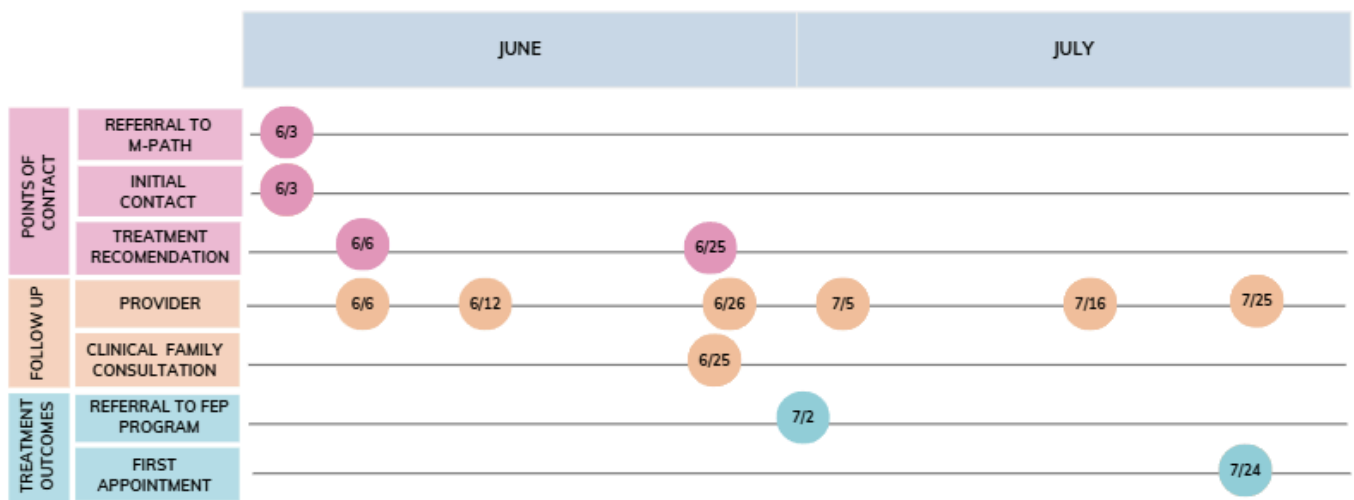
M-PATH was contacted by a young person in their late twenties. This person was referred to us by an inpatient social worker following a hospitalization for symptoms of early psychosis. Weekly follow up calls were made to the individual to check in, answer questions about treatment, and assist in obtaining medical records. Multiple calls were also made to collect collateral information to support a referral, and to the FEP clinic to further coordinate and monitor the status of the referral. This person attended their first appointment at an FEP program in late August.

CASE EXAMPLE: WORKING WITH A FAMILY MEMBER



M-PATH was contacted by the parent of an individual in their mid-twenties. This person connected with M-PATH's family partner for support as the caregiver of a person experiencing early psychosis. This person also received clinical consultation from M-PATH staff to discuss treatment options and communication strategies. Their child was referred to an FEP clinic by an inpatient social worker with M-PATH's support and attended their first appointment in February. Family partner and clinical consultation continued as needed following their child's first appointment.

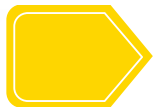
CASE EXAMPLE: WORKING WITH A PROVIDER



M-PATH was contacted by a case manager working with an individual in their late teens. This provider worked in a jail diversion clinical setting and was seeking longer term care for a young person recently diagnosed with schizophrenia. M-PATH connected with this individual's parent to provide psychoeducation about treatment options and benefits of coordinated specialty care. A referral was submitted to a FEP clinic in early July and the young person was seen for their first appointment that month.

CLINICIAN AND FAMILY FEEDBACK

What was most helpful to you?



This was the most confusing thing I have ever gone through. Not only is it like being in a foreign country and not speaking the language, but the stress and anxiety is beyond anything one can comprehend. M-PATH was amazing... Patient, kind, and explained everything thoroughly. So supportive. Can't say enough good things about this program. We spoke to so many experts but often times they talk over your head or are rushed or assume that you know certain terminology. The folks at M-PATH broke down into bite-size pieces that were easily understood.



Confirmation of the team my patients will be working with as well as guidance/ recommendations about how to communicate with the team and receive clinical updates. Overall, this has been an incredibly helpful service. Early onset psychosis is not something that most primary care providers are comfortable managing, and it is great to have clear guidance as well as assistance in getting patients established with a team which does have the expertise to evaluate and manage the patient.




A quick reply in time of need when otherwise there is nothing but unavailability to MH services, as well as consistent and caring follow up.




Consultation and information. While I wasn't able to connect them with my client, it was still a valuable asset to have in my wheelhouse. Working in a high acuity city, it's also great to know that this is out there and that someone is ready to talk about a case even if they can't help. Community and collaboration is everything!


CLINICIAN AND FAMILY FEEDBACK




I think their screening process was very comprehensive and your suggestions on next steps were very helpful and saved me time.



Rebecca's kindness and knowledge were both very helpful. This has been such a difficult and frightening experience for me, so have both—kindness and knowledge—were so so helpful to me.



M-PATH was prompt, attentive and available while navigating a slow, dense mental healthcare system full of obfuscation and what I experienced as neglect. What was most helpful in my experience were the periodic check-ins, where M-PATH provided a generous and compassionate listening ear; access to resources/referrals; information on both psychosis and the mental health institutions surrounding it in Boston; and explanations about a system that was very new to me. It was deeply helpful to have an informed, empathetic individual voice with 'inside' knowledge to support while navigating a very illegible system that breeds feelings of deep isolation and lack of support during a very challenging time. M-PATH felt like having someone on my team. Thank you to the entire organization, and in particular, to Charlene!



I had felt very alone and overwhelmed before finding M-PATH, and M-PATH's expertise in a field with which I had absolutely no experience was a huge practical and morale booster. I appreciated the fact that there are experts in psychology/psychiatry on the staff and that M-PATH is well-informed on what kinds of possibilities there are for pursuing treatment.

THANK YOU

We are grateful to the Department of Mental Health, the Substance Abuse and Mental Health Services Administration (SAMHSA), the Sydney R. Baer Jr. Foundation, the Blue Cross Blue Shield of Massachusetts Foundation, and other generous private donors for their financial support which has enabled us to build our team and make our services accessible and equitable to young people, families, and providers.

CONTACT US!



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www.mpathcares.org



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