

PEPPNET Training and TA Work Group Training Survey Summary

INTRODUCTION

The Training and Technical Assistance Workgroup was initially formed as part of the larger Prodromal and Early Psychosis Program Network (PEPPNET) to share information about technical assistance (TA), training activities, and related resources. Although the goals of the group have since expanded (see mission goals) the dissemination of a training and TA survey to all group members was an early attempt to illustrate a national picture of currently occurring training and TA efforts offered across the US.

METHOD

The survey was developed by the co-leads of the work group (Kate Hardy and Tamara Sale) and distributed by survey monkey to all members of the Training and TA workgroup and larger PEPPNET group in April and May 2015.

RESULTS

11 respondents completed the survey from 8 states and comprised of individuals representing agency training efforts (9 respondents), individuals offering direct TA and training independent of an agency (1 respondent) and 1 respondent indicating that the agency was currently in the development stage of offering training and TA.

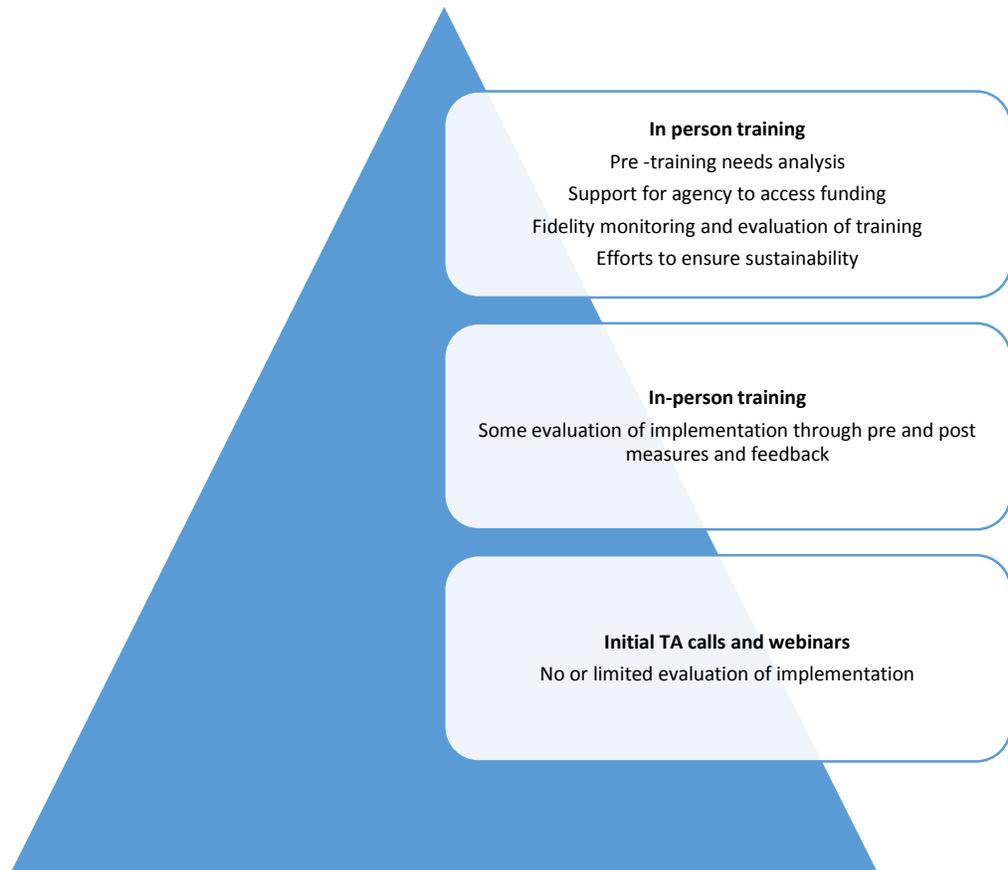
The survey indicated that training offered typically focused on developing early psychosis services and clinical interventions for early psychosis and that these trainings are offered to a range of providers including non-profit and for-profit agencies, behavioral health agencies, and academic institutions. There was apparent discrepancy between requests for training and ability to meet these requests. Additional supportive training elements such as pre-training needs analysis, evaluation of training, and ongoing sustainability/supervision, was dependent on the type of training and the agency providing the training.

CONCLUSIONS

Although this survey is a preliminary attempt at documenting current early psychosis training occurring in the US it is possible to draw some conclusions from the above data.

1. There are multiple training efforts currently in existence in the US focused primarily on early psychosis. These training efforts cover a wide range of topics ranging from assessment and clinical intervention in ultra-high risk (UHR)/early psychosis through to setting up UHR/early psychosis services.
2. Of the 11 respondents there was some overlap in agencies trained (i.e. an identified community agency may have received training from 1 or more of the respondents in different elements of early psychosis intervention)
3. It was notable that the requests for training in the past 12 months outweighed the amount of training offered. One respondent indicated that they are currently not offering training due limited staffing and resources highlighting the question of not just ensuring sustainability in agencies trained but also within the training agency itself.
4. Although most respondents identified strategies implemented to evaluate the training provided less than half utilized specific fidelity monitoring to evaluate implementation of the training.

5. Use of a pre-training needs analysis and supporting agencies to access possible funding for training was relatively evenly split across respondents. For those implementing a pre-training needs analysis respondents indicated that the benefits of doing so resulted in trainings being adapted to local communities and establishing feasibility of the training a prior.
6. Training and TA could be considered to be offered in a stepwise manner dependent on the resources of the training agency, level of training offered (i.e. webinar vs. training in a clinical model), and needs of the agency to-be trained. See below for example of this.



If you are currently offering early psychosis or ultra-high risk training and would like to contribute to this data by completing the survey please contact Vicki Harrison at vickih@stanford.edu