# LAPEER COUNTY COMMUNITY MENTAL HEALTH

<u>Date Issued 08/22/2017</u> <u>Date Revised: 05/25/2022</u>

CHAPTER	CHA	PTER	SECT	ION	SUBJECT
Service Delivery	02 004		004		185
SECTION	DESCRIPTION				
Clinical and Support Services Recovery Oriented Systems of Care			of Care		
WRITTEN BY	REVISED	BY		AUTHOR	IZED BY
Julie Cooley, MSA Quality	Lisa Rude	dy, MPH, CH	ES	0	
Improvement Coordinator	Quality Improvement				
	Coordinator			Lauren Er	nmons, ACSW
				CEO	

### APPLICATION:

⊠CMH Staff	☐Board Members	⊠Provider Network	⊠Employment Services Providers
□Employment Services Provider Agencies	⊠Independent Contractors	⊠Students	⊠Interns
⊠Volunteers	⊠Persons Served		

### POLICY:

Lapeer County Community Mental Health (LCCMH) will assure all services are delivered consistent with Recovery Oriented Systems of Care (ROSC).

## STANDARDS:

- A. LCCMH provides services based on the Substance Abuse and Mental Health Services Administration's (SAMHSA) Guiding Principles of Recovery and ROSC:
  - 1. Recovery emerges from hope
  - 2. Recovery is person-driven
  - 3. Recovery via many pathways
  - 4. Recovery is holistic
  - 5. Recovery is supported by peers and allies
  - 6. Recovery is supported through relationship and social networks
  - 7. Recovery is culturally based and influenced
  - 8. Recovery is supported by addressing trauma
  - 9. Recovery involves individual, family, and community strengths and responsibility
  - 10. Recovery is based on respect

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- 11. Inclusion of the voices and experiences of recovering individuals, youth, family, and community members
- 12. Integrated strength-based services
- 13. Services promoting health and wellness will take place within the community
- 14. Outcomes-driven
- 15. System-wide education and training
- 16. Research-based
- B. Promotes changes in state law and policies at all levels to establish effective communication between peers, within systems and among service providers.
- C. Develops policies and procedures ensuring seamless and timely entry and reentry into services and supports.
- D. Aligns policies, procedures and practices to:
  - 1. Foster and protect individual choice, control and self-determination
  - 2. Assure the provision of holistic, culturally based and influenced, strengthand research-based, and trauma informed services
  - 3. Are inclusive of person-centered planning process, community based services and supports, and enhanced collaborative partnerships
- E. Encourages peer support including the choice of working with Certified Peer Support Specialists (CPSS) and/or Recovery Coaches as a choice and option for individuals throughout the service array and within the person-centered planning process.
- F. Aligns services and supports to promote and ensure access to quality health care and the integration of mental and physical healthcare. Specific concerns to address include screening, increased risk assessments, holistic health education, primary prevention, smoking cessation and weight reduction.
- G. Assesses and continually improves recovery promotion, competencies and the environment in organizations throughout the service array.

#### PROCEDURES:

A. Staff provide ongoing education to stakeholders on recovery principles and practices in conjunction with state level policies including recovery, trauma informed care, person-centered planning, and self-determination.

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- B. Communications Department develops and maintains a plan to educate and increase communication within the broader community using guidance and leadership from the Citizen's Advisory Council.
- C. The Michigan Department of Health and Human Services ROSC/Transformation Steering Committee (TSC) provides knowledge and education to LCCMH stakeholders on recovery related policies and practices.
- D. LCCMH provides a person-centered and peer-oriented access and welcoming process for individuals assessed for eligibility addressing the unnecessary paperwork.
- E. LCCMH policies are written to assure pathways are in place for expedited reentry into services for individuals who have been discharged, but once again need services and supports from the public mental health system.
- F. Primary case holders provide guidance during ongoing recovery planning with verbal and written information on how to access mental health and other community services.
- G. LCCMH Administration develops a proactive plan using baseline data and ongoing regional recovery survey results to improve and expand the behavioral health recovery services system of care, and to strengthen the quality and delivery of recovery services and supports.
- H. Primary case holders provide an estimate of the cost of services annually, when significant changes occur to the individual plan of service and as requested by the individual following the person-centered planning process.
- I. LCCMH provides Independent Facilitators to persons served upon request for the person-centered planning process.
- J. LCCMH connects persons served / peers with resources for Independent Facilitator training.
- K. LCCMH and Region 10 PIHP develops and implements an educational approach with written materials to provide information to stakeholders on peer support services.

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- L. Primary case holders provide information on the choices and options of working with peers in a journey of recovery including CPSS/Recovery Coaches as part of the person-centered planning process.
- M. LCCMH Quality Department collects baseline data on the number of persons served who receive peer support services with a proactive plan on increasing the number of individuals served.
- N. LCCMH regularly offers and provides classes ideally promoted, led and encouraged by peers related to whole health, including Personal Action Toward Health (PATH), Wellness Recovery Action Planning (WRAP), physical activity, smoking cessation, weight loss and management etc.
- O. The Clinical Case Review Committee collects information on morbidity, mortality and co-morbid conditions with an annual planning process to address and decrease risk factors associated with early death.
- P. Primary case holders provide referrals and outreach to assist individuals with meeting their basic needs, including finding affordable housing and having enough income to address risk factors associated with poverty, employment and education assistance, etc.
- Q. LCCMH Administration identifies, develops and strengthens community partnerships to promote models and access for the integration of physical and mental health.
- R. Primary case holders discuss and coordinate transportation for individuals to attend appointments, classes and health-related activities discussed in the person-centered planning process.
- S. LCCMH Administration completes an annual planning process that builds on the actions of and information from the ROSC/TSC, including results from the recovery survey implementation and review.
- T. LCCMH provides ongoing education of recovery and environments promoting recovery with all staff, including executive management, psychiatrists, case managers, clinicians, support staff, leadership, board members, community members, etc.
- U. Includes a list of competencies in recovery principles and practices in employee job descriptions and performance evaluations.

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V. Staff work in partnership with persons served, including CPSS, in all aspects of the development and delivery of recovery-oriented trainings and activities.

### **DEFINITIONS:**

**Recovery:** A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Recovery Oriented System of Care: Supports an individual's journey toward recovery and wellness by creating and sustaining networks of formal and informal services and supports. The opportunities established through collaboration, partnership and a broad array of services promote life enhancing recovery and wellness for individuals, families and communities.

#### REFERENCES:

MDHHS Office of Recovery Oriented Systems of Care (OROSC) Recovery Policy and Practice Advisory #12

Substance Abuse and Mental Health Services Administration (SAMHSA)

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