

#4 Quality Improvement Plan:

Upon completion of the environmental scan and PPGs related to supporting maximum consumer choice and control, the information notes consumers may be more interested in choices outside the limits of the formal definition of self-determination arrangements. Consumers/families seem more interested in non-formal self-determination practices such as having choices around how they accomplish their goals, who they want have in their lives, and choices they can make overall, beyond/more so than employing their own staff. Since the key concept of self-determination is consumer choice, our plan for maximizing consumer choice and control will include exploring this on the broader continuum consumers/families have identified. In addition, for over a year the CMHPSM has been conducting an affiliate-wide person-centered plan (PCP) project, also based on stakeholder feedback and data, with the aim to improve consumer choice, enhance both staff and consumer knowledge base and skill on PCP philosophies, reduce obstacles for full consumer experience of choice, and assure consumers/families as primary decision-makers. CMHSPM therefore identifies the following areas as the focus for additional improvements:

Enhance Consumer Education/Knowledge Base

The environmental scan and PPGs show consumers perception/knowledge of self-determination arrangements and independent facilitators could be enhanced; whether having this knowledge affects their interest to pursue those choices needs further review. The majority of consumers and families initially report not wanting the responsibility of an SD arrangement, or having someone they do not know facilitate their PCP. The data (including PCP satisfaction surveys) also shows they need more knowledge of their choices in the PCP process and more resources to maximize those choices. More accurate and expansive evaluation on the reasons consumers do/don't pursue these choices and the level of interest they have in obtaining IFs or SD arrangements will be part of the plan for improvement. Since under-use is higher in the MI/Co-Occurring population, this will be an additional focus for benchmarking and will include Peer Supports Specialists roles in providing consumers the necessary resources to make informed choices. Ways to elicit ongoing feedback on the PCP process will be included and used for future planning.

Enhance Staff Education/Knowledge Base

The data shows a broad continuum in the level of staff knowledge and skill in educating and assisting in maximizing consumer choice and control. PCP surveys show (for reason yet unknown) consumer's perception is staff are not yet consistently providing consumers/family members with information on alternative choices to traditional CMH service structures or on the full philosophy of the PCP process. The plan will include measuring staff needs for, and

increase in, knowledge and skill to promote consumer choice and control. It will also include other resources by which consumers/families can gain this knowledge. The design will include consumer, family, provider, and advocate input; PCP satisfaction surveys and other methods of feedback designed to measure success and ongoing improvements.

Increase Capacity for Consumers to Pursue SD Arrangements, Fiscal Intermediaries, and Independent Facilitation

Baseline PPG data shows that we have the means and structure in place to provide self-determination arrangements (SD), fiscal intermediaries (FIs), and independent facilitators (IFs). The majority of individuals using SD arrangements, FIs, and IFs, are persons with developmental disabilities (DD). Expanding this to persons with MI could be an area of opportunity if the plan shows interest from these consumers. Increasing the choices of IFs and FIs may also assist with individuals engaging in these choices. The availability of IFs and SD arrangements in the MI/Co-Occurring population will be an area of added exploration. Existing utilization data and network provider data structures will measure capacity needs. Consumers and providers are and will continue to be decision-making members of our network management committee, our boards, and consumer advisory committees to assist with setting policy and providing feedback for service capacity.

Enhance the Culture of Consumer Choice and Control

We believe using strength-based language is inherent to consumer experience in maximizing choice and control. To that end PCP processes need to be as consumer focused and user friendly as possible while preserving compliance standards. This plan includes reviewing the language used in PCP documents, the ease with which consumers can access choices and use individual budgets, the ease with which consumers can provide feedback, and giving consumers sufficient time and resources for PCP preparation. The plan will also include ongoing education for consumers/families that speaks to multiple aspects of choice and control, including resources, SD arrangements, FIs, IFs, Person Centered Planning and navigating the CMH System. The orientation will include use of Peer Support Specialists and a plan for stakeholder feedback.

2009 APPLICATION FOR RENEWAL AND RECOMMITMENT TO QUALITY AND COMMUNITY IN
THE MICHIGAN PUBLIC MENTAL HEALTH SYSTEM
Final: February 1, 2009

ATTACHMENT A TEMPLATE
Milestones and Timeframes

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ARR Section Number: 4

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Milestones	Baseline Data (where applicable)	Timeframe for Achieving Milestone: Begin* and end dates	Comments
Develop an orientation for all new and current consumers that includes promotion of PCP process, SD, FI, and IF and is available in a variety of formats/methods for ongoing use		Begin 6/1/09 End 12/2010	Invite consumers to participate in the development of an orientation by 6/1/09 Develop written materials by 6/1/10 Video/DVD materials by 6/1/11 Seek consumer feedback (including Peer Supports Roundtable and Regional Consumer Advisory Committee) on written materials by 12/31/09; video/DVD materials by 12/31/10
Increase skill level and involvement of Peer Support Specialists as a resource in the PCP process to enhance consumer choice.		Begin 6/1/09 End 6/2014	Obtain PSS feedback on their needs in the areas of PCP, SD, FI and IF Explore use of models such as WRAP, Pathways, and PATH to include in PSS training options Based on needs identified by the PSS, train all Peer Supports Specialists on areas to include the PCP process, SD, FI, and IF At least one PSS per county will be dual-skilled as an IF by 12/2010 Assess PSS training and PSS feedback at least annually for improvements/revisions
Increase education opportunities and resources for staff and providers that includes use of SD, FI, and IF.		Begin 10/1/09 End 12/2010	Through opportunities such as focus groups/staff meetings, gather staff feedback on their needs for improving SD and IF discussions in the PCP process, by 4/2010 Based on staff feedback from the PCP project, develop training for CMH staff

Milestones	Baseline Data (where applicable)	Timeframe for Achieving Milestone: Begin* and end dates	Comments
			<p>and providers that can be used in an ongoing/accessible way by 12/2010</p> <p>Incorporate resources on SD arrangements and IFs in the staff UR Manual by 12/2010</p> <p>Incorporate education of SD arrangements and IF in provider meetings by 12/2009</p>
<p>Enhance the structure of our affiliation PCP process to support consumer choice.</p>		<p>Begin 10/1/09 End 12/1/11</p>	<p>Expand ways to measure ongoing consumer/family satisfaction by 10/1/10 that include SD concepts Implement availability of user-friendly individual budget process 12/1/10</p> <p>Support inviting provider to PCP in staff and consumer trainings by including this option in PCP materials and staff/consumer trainings</p> <p>Complete recommendations of PCP project by 6/1/11</p>
<p>Evaluate use of SD and IF for persons with DD Evaluate (non)use of SD and IF for persons with SPMI/Co-Occurring</p>	<p>Number of persons with DD using SD arrangements: Lenawee: 31 Livingston: 30 Monroe: 78 CSTS: 154</p> <p>Number of persons with MI using SD arrangements: Lenawee: 0 Livingston: 1 Monroe: 0 CSTS: 1</p>	<p>Begin 6/1/09 End 9/2014</p>	<p>Through opportunities such as focus groups, town hall meetings, and other dialoguing opportunities, identify consumer experiences with being offered SD and IF, and reasons why they would or would not pursue them, by 10/2010</p> <p>For consumers who currently use SDs and/or IFs develop ways to seek their feedback on strengths and opportunities of these options by 10/2010</p> <p>Identify champion for system review of SD use with SMI consumers by 6/1/09 Complete system review by 10/2010</p> <p>Incorporate questions on use/knowledge of SD arrangements and IFs in the PCP survey (ongoing)</p> <p>Review data in Regional PI for any potential PI projects</p>

Milestones	Baseline Data (where applicable)	Timeframe for Achieving Milestone: Begin* and end dates	Comments
			Incorporate data in PCP project implementation where applicable.
Based on consumer feedback, determine whether there needs to be an increase in IF capacity and then set benchmarks on the number of available IFs.	<p>Number of IFs: Lenawee - 7 Livingston - 3 Monroe - 1 CSTS - 3</p> <p>Number of consumers using an IF: Lenawee: 3 Livingston: 27 Monroe: 0 CSTS: 6</p>	Begin 10/01/09 End 9/2014	<p>Through opportunities such as focus groups, town hall meetings, and other dialoguing opportunities, identify consumer experiences with being offered an IF, and reasons why they would or would not pursue them, by 10/2010</p> <p>For consumers who currently use IFs develop ways to seek their feedback on strengths and opportunities of these options by 10/2010</p> <p>Analyze feedback and determine need by 12/1/10</p> <p>Set benchmarks by 12/31/10</p> <p>Evaluate feedback and benchmarks on at least an annual basis</p>
Based on consumer/family feedback, determine whether there is a need to increase the use of SD arrangements by persons with a DD	<p>Number of persons with DD using SD arrangements: Lenawee: 31 Livingston: 30 Monroe: 78 CSTS: 154</p>	Begin 10/01/09 End 9/2014	<p>Through opportunities such as focus groups, town hall meetings, and other dialoguing opportunities, pursue stakeholder feedback on interest with SD by 10/2010</p> <p>Analyze feedback and determine need by 12/1/10</p> <p>Set benchmarks by 12/31/10</p> <p>Evaluate feedback and benchmarks on at least an annual basis</p>
Based on consumer feedback, determine whether there is a need to increase the use of SD arrangements by persons with an MI.	<p>Number of persons with MI using SD arrangements: Lenawee: 0 Livingston: 1 Monroe: 0 CSTS: 1</p>	Begin 10/01/09 End 9/2014	<p>Through opportunities such as focus groups, town hall meetings, and other dialoguing opportunities, pursue stakeholder feedback on interest with SD by 10/2010</p> <p>Analyze feedback and determine need by 12/1/10</p> <p>Set benchmarks by 12/31/10</p>

Milestones	Baseline Data (where applicable)	Timeframe for Achieving Milestone: Begin* and end dates	Comments
			Evaluate feedback and benchmarks on at least an annual basis
Based on consumer feedback around their interest in SD arrangements, determine whether there is a need to increase the capacity for FIs.	Number of available FIs: Lenawee: 1 Livingston: 2 Monroe: 1 CSTS: 3	Begin 10/01/09 End 9/2014	Through opportunities such as focus groups, town hall meetings, and other dialoguing opportunities, pursue stakeholder feedback on interest with SD by 10/2010 Analyze feedback and determine need by 12/1/10 Set benchmarks by 12/31/10 Evaluate feedback and benchmarks on at least an annual basis