

Region 1_ Table 2: Plan and Report on Action/ Progress toward ROSC/ Recovery Implementation and Enhancement

December 2018: Annual Plan for FY19

Overview of Region 1-NorthCare Network's efforts toward Recovery Oriented System of Care (ROSC) Implementation and Enhancement

In the fall of FY13, a NorthCare workgroup including Peer Support Specialists, consumers and Customer Service Staff developed a plan for measuring consumers' sense of moving toward recovery. It was implemented across the Community Mental Health Specialty Providers (CMHSPs) and Substance Use Disorder (SUD) treatment providers and sent to consumers as "Part B" to the regional Customer Satisfaction Survey. We will continue with that survey as part of the customer satisfaction survey to follow trend data about the consumer experiences of his or her personal recovery.

Additionally, in FY17, Region 1 joined the NIMH grant-funded national research project that is being conducted by the Yale Program for Recovery and Community Health. A regional team composed of staff, including Peer Supports, and consumers worked with Yale and Customer Services Staff to ensure there was adequate education and training on the survey processes to maximize participation. That participation included the annual surveying of the management teams, providers, and consumers of our Network Providers of CMHSP and Substance Use Disorder Treatment Providers.

In FY18, the survey was sent to consumers, providers, and administrators again. Yale shared their methodology with us for calculation. Results of the survey are available in Table 3. The plan identified below will be implemented in FY19 and is based on results identified in Table 3.

NorthCare's vision for strengthening the Recovery Oriented System of Care involves looking at data for at least three years. The statistical differences between consumers, providers, and administrator's responses will guide the quality improvement activities in the future to bring them into greater alignment with recovery values and practices. The Recovery Self Assessment (RSA) for all groups will be repeated in FY19 and the results will be used to broaden and improve all groups' experience of a ROSC.

Each year plans based on lessons learned will be developed and implemented. We will continue to measure success in terms of the three areas of alignment identified in the ROSC Framework for the Transformation Process. By the end of this major system wide improvement project, our identified goals are:

- ✚ an educational program to introduce all new members to our system about the value of a Recovery Oriented System of Care and sustain a culture that supports those values;
- ✚ evidence-based and best practices used by our providers that recognize that to fully engage in recovery, an individual needs a trauma-informed system of care that provides the safety and healing of trauma-specific practices as the individual is ready to participate;
- ✚ more peer-driven services that create the opportunities to expand the recovery community in our region.

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	Conceptual Alignment Phase 1: Early Phase 2: Intermediate Phase 3: Advanced <i>When reporting indicate to which phase your activity/accomplishment is associated</i>	Practice Alignment Phase 1: Early Phase 2: Intermediate Phase 3: Advanced <i>When reporting indicate to which phase your activity/accomplishment is associated</i>	Contextual Alignment Phase 1: Early Phase 2: Intermediate Phase 3: Advanced <i>When reporting indicate to which phase your activity/accomplishment is associated</i>
Elements of ROSC/Recovery	(Develop consensus; promote an in-depth understanding of a ROSC/Recovery)	(Align services and supports with a ROSC/Recovery and resilience orientation)	(Change policy, fiscal, regulatory and administrative infrastructure so that it supports the sustainability of ROSC/Recovery)
Holistic and integrated services beyond symptom reduction	First year and second year data was reviewed with multiple committees within NorthCare and with regional providers. 1. Phase 2: NorthCare and provider staff will provide data to stakeholders (e.g. courts) to increase their understanding of recovery-oriented services and how the community can help with the ROSC goal. 2. Phase 3: Develop a list of volunteer activities available in the area. 3. Phase 3: Develop a list of committee meetings that are available for consumers to attend and invite consumers to attend.	Based on first year data NorthCare started initiatives such as MyStrength, an online health tool available to all community members to help track mood and provide EBP resources to the user. This will continue to be available in FY19. 1. Phase 2: Recovery Oriented training will be mandatory for all NorthCare staff. It is available on the improvingmipractices.org website; titled <i>Recovery-Enhancing Environment</i>.	Based on first year data, NorthCare staff have been working on increasing discharge planning and coordination of care for hospitalized individuals. This effort continues in FY19. 1. Phase 2: Inclusion Policy and Recovery Policy revised to include more specific procedural guidance related to services that support ongoing community integration. 2. Phase 3: Contracts, at next scheduled update, will be changed to include Recovery-Oriented language. RFP's will

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			<p>include Recovery-Oriented language.</p> <p>3. Phase 3: NorthCare has implemented a Performance Improvement Project for FY19 regarding 7-day follow up to inpatient psychiatric services.</p>
Person-Driven	<p>In 2017 a Person-Centered Planning brochure was mailed to all CMH consumers with Upper Peninsula Health Plan Insurance.</p> <p>1. Phase 1: In FY19, Person-Centered planning brochures will be mailed to all SUD providers and all SUD consumers currently open to services.</p>	<p>In FY18, the regional Home and Community Based Services committee met monthly to discuss the need for community inclusion and choice. These meetings will continue in FY19. The NorthCare personnel training policy was updated and all staff now take a Person-Centered Planning training. Credentialed staff take an additional Person-Centered Planning training as well.</p> <p>1. Phase 2: NC will work with the regional team to ensure choice is identified in the Person-Centered Planning process, with the goal of increasing HCBS compliance.</p>	<p>The NorthCare training policy was updated in FY18.</p> <p>1. Phase 3: Ongoing expectation will be that CMH and SUD providers will have training policies that require a Person-Centered Planning training.</p>

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<p>Continuity of care – assertive outreach and engagement; and ongoing monitoring and support</p>	<p>In FY18 Anti-stigma trainings were provided across the region in a variety of hospitals/clinics to reduce the stigma associated with substance use. The initial stages of placing a peer recovery coach in War Memorial Hospital was started in FY18. NorthCare SUD staff worked on project ASSERT (Alcohol and Substance Abuse Services Educational Referral Treatment). This project will continue in FY19.</p> <p>1. Phase 1: NorthCare will continue to strive to get a peer recovery coach imbedded within WMH.</p> <p>2. Phase 1: NorthCare will have a ROSC related article in the annual newsletter to consumers.</p>	<p>NorthCare staff job descriptions were updated to address a Recovery Oriented System of Care.</p> <p>1. Phase 2: CMH's will promote events via Facebook</p> <p>2. Phase 2: NorthCare, via the CMH's and SUD providers, will encourage and invite people in recovery to attend agency advisory boards and management meetings.</p>	<p>In FY18, via the integrated care electronic systems, detailed reports are sent to each CMH quarterly highlighting gaps in care which has led to data-driven decision making; however, this is excluding SUD. All SUD data is completely stripped by the state. These reports will continue in FY19.</p> <p>1. Phase 1: Data indicates that consumers continue to feel that they are not involved. NorthCare will identify and implement strategies to increase consumer involvement in the Customer Services Committee meetings and add a standing agenda item to address "community activities," such as volunteering, that may be available to consumers in each area.</p>
<p>Culturally responsive services</p>	<p>FY17 results were posted on NorthCares website and printed in the annual newsletter and performance report.</p> <p>1. Phase 1: FY18 results will be posted on NorthCare website.</p>	<p>All NorthCare staff take a <i>Diversity in the Workplace</i> training upon hire and annually. Credentialed staff take a <i>Trauma-Informed Care</i> training and Customer Service staff take a <i>Trauma Informed – Assessing your</i></p>	<p>NorthCare's Cultural Sensitivity Policy requires cultural sensitivity plans and training.</p> <p>One growth area mentioned on the ROSC results from FY17 related to participants opportunity to discuss their</p>

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	<p>2. Phase 1: CMH's will encourage staff to discuss sexuality during the BPS assessment process.</p>	<p><i>Agency to become Trauma-Informed training.</i></p> <p>1. Phase 2: Ensure all CMH and SUD provider staff take a trauma-informed training.</p>	<p>sexual needs. In FY18 the screening and intake form were updated to add gender options other than Male Female; including: "Identifies as Male, Identifies as Female, Female to Male, Male to Female, Genderqueer, Other, and Choose not to disclose." Additionally, Sexual Orientation is a new field and can be listed as "Heterosexual, Homosexual, Bisexual, Other, Unknown, and Choose not to disclose."</p> <p>1. Phase 1: NorthCare will be creating an online provider directory in FY19 that will identify if providers have had cultural competency training.</p>
<p>Occurs via many pathways</p>	<p>In FY18, SUD staff were trained in multiple pathways, including AA, Celebrate Recovery, Smart Recovery, etc.</p> <p>1. Phase 1: Ensure that staff training contains the principle of multiple pathways: focusing on the various strengths, needs, preferences, and background of each consumer,</p>	<p>In FY18 providers were educated about consumer choice via the HCBS rules. Copper Country CMH created a directive related to HCBS and this was shared with the region.</p> <p>1. Phase 1: NorthCare Access will update</p>	<p>Co-occurring disorders training is required for credentialed NorthCare staff.</p> <p>1. Phase 1: Due to low response scoring on this question, staff believe that program participants have the ability to manage their symptoms,</p>

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	<p>and understanding that recovery is non-linear.</p>	<p>community referral letters annually.</p> <p>2. Phase 1: The CMH Consumer directory will be added to the NorthCare website.</p>	<p>NorthCare will encourage staff to discuss alternative treatment options with providers in their area and encourage use of all providers necessary to the individual (e.g. primary care doctors, dentists, eye doctors, dietician, etc.).</p>
Peer supports and services	<p>There were 54 total peers trained by April 2018 that have the potential to be employed. There are currently 10 employed.</p> <p>1. Phase 3: NorthCare will work to have a recovery coach available in every county.</p>	<p>NorthCare recognizes that a Peer Recovery Coach is different than a Peer Support Specialist. However, it appears this may not always be clear to stakeholders.</p> <p>1. Phase 1: NorthCare will create a brochure outlining the various peer-related services and how they are different.</p> <p>2. Phase 2: Peers will be encouraged to facilitate staff trainings at the CMH.</p>	<p>NorthCare hosted trainings on Parent Support Partners and Youth Peer Supports in FY18. The Recovery Coach Certification program was held in Marquette August 13-17th.</p> <p>1. Phase 3: NorthCare CFO will discuss consistent wages across the region with regional CFO's.</p> <p>2. Phase 3: Trainings continue to be different for Peer Recovery vs. Peer Support Specialists. This is a large barrier. Also, location of Peer trainings (mainly downstate) creates barriers. NorthCare will contact the</p>

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			Department about training delivery in the UP.
Community health and wellness	<p>In FY18, NorthCare provided Integrated Care documents provided to consumers about health-related topics, such as “reading food labels.” This will continue in FY19.</p> <p>1. Phase 3: The NorthCare Recovery conference will discuss the process of gaining independent employment.</p> <p>2. Phase 1: NorthCare Network will work collaboratively with the Medicaid Health Plan to produce health education materials and outreach to shared members on diabetes prevention and other health topics as applicable.</p>	<p>In FY18 Northcare Veteran Navigator had a workshop at the recovery conference. Communities that Care is available in every county. Other programs such as In-Shape, Diabetes prevention, and Smoking cessation are available to CMH consumers. An online resource, MyStrength was rolled out in June 2018- this service is available to all community members. This will continue in FY19.</p> <p>1. Phase 2: NorthCare will be facilitating and hosting a Recovery Story Workgroup. Individuals in recovery will be able to share their stories with community members. All are invited to attend.</p>	<p>In FY18 The Prevention Coordinator completed presentations in the community and with the UP coalition. Providers hosted a “Run for Recovery” in Marquette.</p> <p>1. Phase 3: NorthCare staff will actively address barriers to co-occurring service delivery in the region.</p>
Family and Involvement of Significant Others	<p>In FY18, the ROSC survey results from FY17 were available on NorthCare website.</p> <p>1. Phase 3: NorthCare will encourage the use of recovery-oriented language in marketing material and encourage the use of programming that involves family in treatment.</p>	<p>1. Phase 1: Provide information during orientation and continue to disseminate written information in reception offices to encourage participation in Person Centered Planning by family members.</p>	<p>In FY18 participated in Disable the Label, NAMI events and supported two Walk-A-Mile events. There were various run/walks for recovery across the region. Also, Alger Co. Community Collaborative had an event for suicide prevention in September 2018.</p>

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		2. Phase 2: Increase family involvement by starting new Family Psychoeducation groups.	1. Phase 1: NorthCare will continue to participate in community events and encourage families to also participate in mental health related community events.
Systems/services anchored in the community	<p>FY17 individualized ROSC results were provided to those with a high enough response rate in FY18.</p> <p>1. Phase 1: NorthCare will increase awareness of ROSC vision in the community by presenting at the Regional Mental Health Advisory Committee.</p> <p>2. Phase 1: Community inclusion will be encouraged through the promotion of Drop-In programs.</p>	<p>In FY18, HAB waiver consumers were surveyed for HCBS and corrective action plans were developed and monitored for compliance to the rule.</p> <p>1. Phase 3: Community Inclusion will continue to be a priority in FY19 to align with the Home and Community Based Services final rule.</p>	<p>In FY18, staff were trained in HCBS.</p> <p>1. Phase 1: In FY19, NorthCare CMH's will work with the local VA hospital to ensure services for dually insured consumers.</p> <p>2. Phase 3: NorthCare will actively address regulatory barriers to ensure full compliance and implementation of HCBS final rule which includes services anchored in the community.</p>
Evidence-and Strength-based practices	<p>In FY18, NorthCare updated their training policy to ensure EBP for all credentialed staff. There was also an article about EBP in the annual performance report. This will continue in FY19.</p> <p>1. Phase 2: Continue system-wide education on the value of</p>	<p>In FY18 NorthCare hosted a Co-occurring Disorders and IDDT training for both MH and SUD staff. MIFAST reviews were completed for all 5 CMH's for IDDT teams.</p> <p>1. Phase 2: NorthCare will continue to contract with</p>	<p>1. Phase 1: NorthCare will identify training needs in the region.</p>

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	<p>focus on best practices and evidence-based practices to increase stakeholder understanding.</p>	<p>an FPE clinical supervisor who will provide regional support to FPE staff.</p>	
Trauma-informed	<p>In FY18, regional basic trauma training was offered in July 2018.</p> <p>1. Phase 1: NorthCare will increase the awareness of the need for trauma-informed practice throughout the region.</p>	<p>1. Phase 3: NorthCare will identify the need for trauma training and implement as available.</p>	<p>1. Phase 3: NorthCare will continue to monitor trauma-informed language in policies and procedures.</p>
Based in respect	<p>In FY18, the consumer satisfaction survey has 7 questions based on recovery and two questions specific to respect were added.</p> <p>1. Phase 1: NorthCare will add a question in the consumer satisfaction survey that asked individuals if they feel they are able to communicate with their case manager effectively.</p>	<p>The annual newsletter in FY18 addressed respect.</p> <p>1. Phase 2: NorthCare will increase consumer involvement in planning committees.</p> <p>2. Phase 2: Peer Supports will be encouraged to be involved in cross training efforts for staff.</p>	<p>In FY18 Clinical Practices policies were updated to reflect respect and recovery-based terminology.</p> <p>1. Phase 1: In FY19, questions related to respect will be added to the Annual Access Consumer Survey.</p>