

ODADAS/ODMH Department Consolidation

External Relations / Client Involvement Consolidation Workgroup Summary and Recommendations

Scope

Develop recommendations for programmatic and operational alignment between ODADAS and ODMH in the following areas:

- Advocacy;
- How we support and engage;
- Opportunities for improvement;
- Consumer issues/stigma;
- Communicating with the field; and
- Change management

Process

- The workgroup met three times:
 - July 24, 2012: Initial group convened to brainstorm process for moving forward, including additional membership and topics to be addressed. Initial inventory of functions developed.
 - August 24, 2012: Feedback received on inventory, consolidation challenges were identified, clients' rights issues discussed.
 - September 6, 2012: Recommendations finalized, feedback received on potential new agency names, discussion on format for input from stakeholders and other block grants.
- Participation in the group included representatives from:
 - ODADAS and ODMH (various divisions)
 - Boards (association and clients' rights)
 - Provider trade organizations
 - Consumers and families

Next Steps

- Outreach to the field at upcoming events using a survey tool based on the inventory to help prioritize the new agency's external relations activities
- Encourage the field to work together and develop relationships AOD/MH – Have a party!
- Work together to combat stigma issues

Challenges of consolidation and recommendations for moving forward

1. Terminology: Use of the words client and consumer – offensive to some
 - Recommendation: We need to ask the people we serve regarding their preferences and use “People First” language.
2. There are multiple versions of clients’ rights (ADA – DMH – accreditation – JFS)
 - Recommendation: We need to take the strengths of all versions and streamline into one version for ADA and DMH. (See tool from clients’ rights office)
 - Recommendation: We need to have clear communication that illustrates clients’ rights to the people we serve – can be produced by the new state agency by working with providers and boards.
 - Recommendation: Need to figure out where prevention falls with regard to clients’ rights. This issue comes up most often around certification. Rules and Policy has previously discussed responsibilities here, and it is important to be sure that the department’s expectations are reasonable and clearly communicated.
3. Continuity of care is an issue on the AOD side due to 42 CFR
 - Recommendation: Need training for providers in the context of information sharing and the rest of the field so they understand their rights and responsibilities.
4. Written publications in consumer-friendly language that incorporates AoD and DMH issues
 - Recommendation: OLRS has a good example document for MH.
 - Recommendation: Use other tools like videos, social media.
5. There is a need for a clients’ rights network
 - Recommendation: New agency can work to put together resources useful for clients’ rights officer tools and a network for the exchange of information.
6. Need to keep a user friendly approach to consumers doing grievance follow-up
 - Recommendation: Agency needs to be able to summarize grievances received and share information with the field.
 - Recommendation: Cross check this with the work of the provider regulation group
7. Improve outreach to families dealing with addiction – similar to the NAMI organization.
 - Recommendation: Agency will find ways to encourage and strengthen advocacy and build on to family engagement groups.
8. Timeliness of communication with the field can always be improved
 - Recommendation: Consolidation website has been a best practice.
9. Two separate advisory bodies are employed by the two agencies to get feedback for block grant and other agency policy
 - Recommendation: Merge the two groups into one with a balanced representation of stakeholders.
 - Recommendation: Be sure that the group is advisory, not only used to report out department updates.
 - Recommendation: Keep the dialog at a higher level, not detailed grant review.

Inventory – External Relations and Client Involvement

Activity	Agency	Statutory or Rule Citation (if applicable)
Clients' Rights office	ODMH	
Toll-Free Bridge help line	ODMH	
Hospital clients' rights officers	ODMH	ORC 5122.29 and 5122.301
Conferences – several times a year	ODADAS	
Behavioral Health Leadership Group	ODMH and ODADAS	
Council on Alcohol and Drug Addiction Services	ODADAS	ORC 3793.09
Planning council	ODMH	Federal requirement
Monthly BH update	ODMH and ODADAS	
Funding for advocacy <ul style="list-style-type: none"> • SOLACE • NAMI • OEC • Ohio Citizen Advocates • Ohio Federation for Children's Mental Health • MACC 	ODMH and ODADAS	
Rules and policy	ODMH and ODADAS	
Department websites	ODMH and ODADAS	
Consolidation site and blog	ODMH and ODADAS	
What do boards do	ODMH and ODADAS	ORC 340.04(A)(11)(j)
What do providers do	ODMH and ODADAS	ORC 5119.611(E)(1)
Gambling hotline	ODADAS	
Youth Led Prevention Network	ODADAS	
Access to Recovery	ODADAS	
FASD Initiative	ODMH and ODADAS	
Rally for Recovery	ODADAS	
Town hall meetings – opiates	ODADAS	
ENGAGE planning grant	ODMH	
Prevention/Wellness and Clinical Roundtables	ODADAS	
Communications tools (annual reports, Facebook, Twitter)	ODADAS and ODMH	
Youth Action Council	ODADAS	
Resiliency Ring	ODMH	
CCOEs	ODMH and ODADAS	
State hospital volunteer coordinators	ODMH	
Community Linkage Workers	ODMH	