

Collaborating Across Systems

Welcome!!

Today's Presenter's Include:

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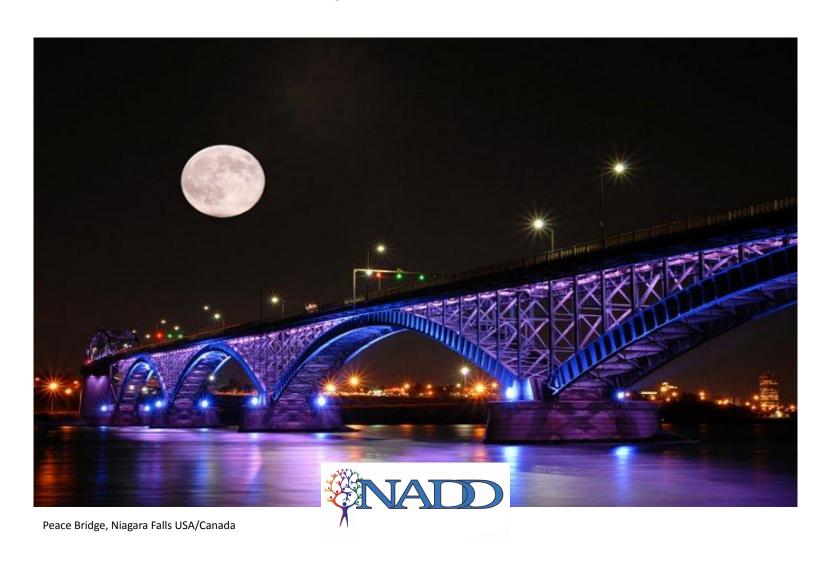
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Inter-Systems Collaboration



The Series of EASA Presentations:

- 1. Signs and Symptoms of Mental Illness
- 2. Comprehensive Assessment Planning
- 3. Collaborating Across Other Systems
- 4. Adapting Therapy Practices
- 5. Trauma Informed Support/Crisis Prevention



Learning Objectives

- Discuss how limited collaboration between mental health and IDD systems can result in barriers to service delivery.
- Recognize that assessment of individual need is at the center of effective person-centered service planning for individuals with MI/IDD.
- Identify the four planning and practice elements essential to working together and the factors that make each of these achievable.



Collaborating Across Systems

- Barriers to service delivery
- Principles in service planning
- Community collaboration and teamwork
- A framework to promote cross-system collaboration
- Service planning recommendations



Policy and Advocacy

Policy is the rules and laws passed by the government.

In the past, policies about disability-related topics assumed that people with disabilities needed to be "fixed" to live in the community. -

-separated people with disabilities from their communities and limited their opportunities to make choices for themselves.



From Institutionalization to Home and Community: Complexities Challenging Community Support Systems

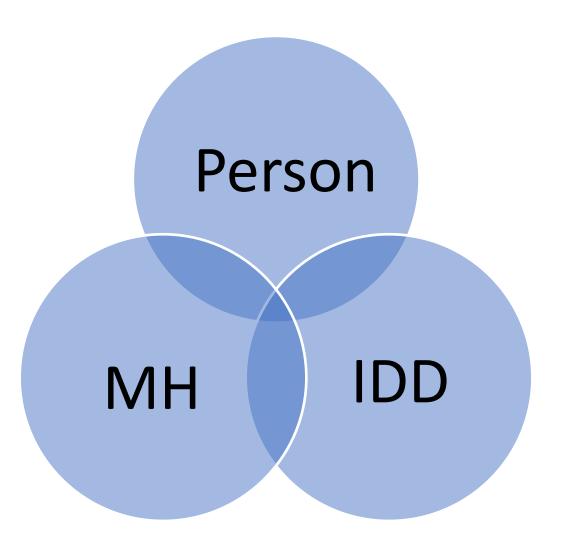
Complex Support Profile/Issues	Challenges
Individual with relatively minor support needs for typical daily living needs but with diagnosis of borderline personality disorder	 Frequent staffing changes throughout the day more challenging, but may be necessary Professional oversight of interventions as often as needed Professional help for support staff to sustain the challenges daily and consistently implement needed intervention strategies
Individuals with anticipated needs for crisis services for Psychosis	 Quick access to crisis services by professionals familiar with the individual and his/her needs Who is around the individual What does recovery look like
Individual with a dual diagnosis who needs medication, behavioral strategies and instructions for family/staff support	 Coordination of medication changes/needs with implementation of behavioral strategies Clear guidelines on which professional to seek when problems occur Consistency in instructions to family/staff across professionals
Individual with significant medical issue and co-occurring behavioral health need	 Coordination and prioritization of needed medical interventions when behavioral issues may impact cooperation Coordination of needed medication changes and impact on behavioral presentation and

Mental Health

AND

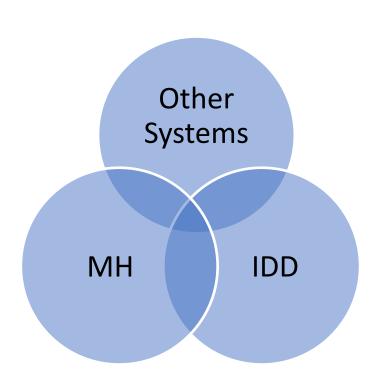
Developmental

Disability





Cross-Systems Interface: Multiple Systems



Other systems

Criminal justice system

Juvenile justice system

Educational system

Health care system

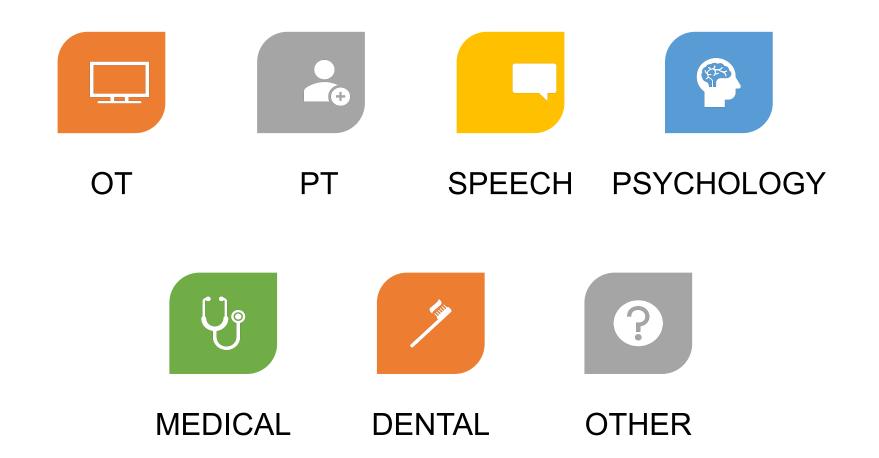
Substance use system

Older adult system

Other systems



Institutions Provided Care in These Disciplines:







Consequently, systems rarely have protocols established to plan for inter-systems collaboration. We need to advocate for inter-systems collaboration, through thoughtful inter-system planning that would support service options and funding across multiple systems.



Barriers to Service Delivery

The Typical Picture:

Lack of Strategic Planning

Failure to fund flexible services

Failure to obtain technical assistance



The Typical Picture:

MH providers perceive that they do not have the skills to serve adults or children with a dual diagnosis of IDD

IDD providers do not understand the services the MH sector offers.

MH providers do not understand the services the IDD sector offers.



Policy and Advocacy

More recently, policies about disability-related topics assume that disability is a natural part of the human experience.

- -Focus more on changing our society and removing the barriers from past policies
- -Policies made under this new assumption promote inclusion, equality, and greater access to quality services.

Advocacy is critical to advancing and improving these policies for years to come



MH System

- Short to mid-term episodic treatment
- Focus on psychiatric needs
- Recovery model
- Local authority
- Medication treatment
- Consumer/client /patient

IDD System

- Services/supports over lifetime
- Emphasis on direct support
- Self-determination
- State authority
- Behavioral support (PBS)
- Self-advocate/consumer





Collaboration: EASA and IDD Services

First step:

Find out who your county IDD Director and Program Manager is:

2021 list of IDD Directors >>

County specific list of DD service providers within each county developmental disability program. Some are run by non-county sources. Comprehensive list:

https://www.oregon.gov/DHS/SENIORS-DISABILITIES/DD/PROVIDERS-PARTNERS/Documents/DD-County-Directory.pdf

Collaboration: EASA and IDD Services

Second Step:

Establish a Liaison or Specific contact for your group:

Individual which facilitates a close working relationship between the two groups

Support to bridge the gap between service systems

- help families with the eligibility process
- soft introductions and collaboration between both systems offers an increased sense of safety and security for the participants and their care needs
- partnership and communication support for evolving family needs





Effort to provide increased collaboration between DCBH Behavioral Health and I/DD program

- INTENSIVE YOUTH SERVICES CARE COORDINATOR I/DD LIAISON
- I/DD & MENTAL HEALTH COLLABORATION COMMITTEE CHARTER
- I/DD CONSULTATION

I/DD & Mental Health Collaboration Committee CHARTER

- THE MISSION OF THE IDD/MH COLLABORATION COMMITTEE IS TO PROMOTE INTEGRATION OF BEHAVIORAL HEALTH AND INTELLECTUAL/DEVELOPMENTAL DISABILITIES SERVICES THROUGH COLLABORATION AND COORDINATION OF RESOURCES IN ORDER TO IMPROVE SERVICES, MAXIMIZE EFFECTIVENESS OF PROGRAMS AND ACHIEVE BETTER OUTCOMES FOR INDIVIDUALS WITH DUAL DIAGNOSES. THE COMMITTEE IS FORMED TO ENHANCE COMMUNICATION AND SHARE EXPERTISE BETWEEN THE TWO PROGRAMS TO BETTER SERVE THE POPULATION OF CLIENTS WHO ARE DUALLY DIAGNOSED WITH IDD AND A MENTAL HEALTH CONDITION.

Intensive Youth Services Care Coordinator I/DD Liaison

Treatment teams to include:

- I/DD service coordinators
- · Behavior Professional collaboration on shared goals
- Goal to include Direct Support Workers & Personal Support Workers

Monthly consultation for I/DD service coordinators

• The purpose will be to meet with either of them to ask questions, staff cases, discuss access to services or learn about their program.

I/DD presentation to Behavioral Health

- Eligibility for Intellectual Disability & Developmental Disability
- I/DD Services 101
- Role of I/DD service coordinators
- Accessing Services





Dual Diagnosis Planning Principles



Co-occurring disorders should be treated as multiple primary disorders, in which each disorder receives specific and appropriate services.

Collaboration of appropriate services and supports must occur as needs are identified.

Services provided to the individual are consistent with what the person wants and what supports are needed.



Dual Diagnosis Planning Principles

Services are determined on the basis of comprehensive assessment of the needs of each individual.

Services are based on individual needs and not solely on either MH or IDD diagnosis.

Emphasize early identification and intervention.





Dual Diagnosis Planning Principles

Involve the person and family as full partners.

Coordinate at the system and service delivery level.



Collaboration: EASA and IDD Services

Recommend monthly meetings with IDD representative, liaison or EASA representative and those involved in the individuals care

Possibilities for discussion in the monthly meetings:

Explore barriers to care

Discuss clients needs

Service needs

Systemic support

Problem solve upcoming transitions and challenges

Ongoing partnership for Crisis Support/ Wellness Plans





Service Systems Important Considerations

- Support access to state and local services, benefits and community-based resources.
- Recognize cultural, accessibility and linguistic barriers to service access and take steps to improve the situation.
- Advocate for a community inclusive of all citizens, including those with IDD/MI.

Facilitating Positive and Cooperative Relationships

- Navigate recommendations between systems (e.g., psychiatrists and other health professionals, employment, residential settings).
- Work positively with professionals and multiple systems as a collaborative and cooperative member of the team.
- Maintain professional and empathetic communication and partnership with family members and friends of the individual.
- Advocate with allegiance to the individual served.



Discussion

During a meeting with Conner, a young adult with autism, schizophrenia, and anxiety disorder, his father is monopolizing the conversation and answering for his son.

Topics including choosing a college, auditioning for the community theater and an overnight camping trip. Dad is worried about Conner's ability to manage his diagnosis away from home or take the correct bus to the theater.

- How do we honor Connor's choice and respect the family?
- What other systems may be a resource?





- 1. Leadership
- 2. Effective staff
- 3. Effective treatment
- 4. Staff training





1. Leadership

- Commitment
- Clear lines of authority
- Commitment to collaboration
- Focus on the individual



2. Effective Staff

- Build trust, dependability
- Focus on the inter-system collaboration
- Drive toward equity and advocacy
- IDD/MH interface



3. Comprehensive Care Plan

- Appropriate psychiatric diagnosis
- Effective medication treatment if needed
- Positive behavioral supports
- Holistic care and treatment strategies



4. Staff training

- Professional Support Workers
- Clinicians
- Service Coordinators
- Supervisors
- Administrators





Purpose/Function of a Dual Diagnosis Committee

- Gather relevant data/information
- Identify strengths in service delivery systems
- Identify challenges/gaps in service delivery system
- Develop solutions to address challenges and gaps





Stakeholders from other than MH & IDD systems could be included as appropriate. These include but are not limited to representatives from:

- Substance abuse
- Justice
- Health department
- Social services
- Parents
- Consumers
- Advocacy organizations

- Special education
- Early intervention
- Child welfare
- Coordinated children's services
- Service providers



Activity: Improving Communication and Collaboration

Reflect on your own work and communication style. How can you improve on one of the best practices mentioned to facilitate effective collaboration within agency or across systems?

What do you need to do this?

Who is a potential ally?



Oregon Resources

State of Oregon: Intellectual and Developmental Disabilities - Intellectual and Developmental Disabilities

https://www.oregon.gov/dhs/SENIORS-DISABILITIES/DD/Pages/index.aspx

Adults over 18 can choose to have service coordination through what is called a brokerage and here are all of those in the state - https://www.oregon.gov/DHS/SENIORS-DISABILITIES/DD/Pages/Support-Services-Brokerages.aspx

General information about behavior professional services through I/DD in the state -

https://www.oregon.gov/dhs/SENIORS-DISABILITIES/DD/PROVIDE RS-PARTNERS/Pages/behavior-professional-resources.aspx



Oregon Resources, Cont'd.

This link is through the Oregon Council on Developmental Disabilities with information and a way to connect with statewide Family Networks. An excellent resource especially in regards to kids and families.

https://www.ocdd.org/families-supporting-families

The Autism Society of Oregon https://autismsocietyoregon.org

University Center for Excellence in Development Disabilities https://www.ohsu.edu/university-center-excellence-developme
nt-disability



In Summary

Today we discussed the ways in which inter-systems collaboration will support the individuals within our program and decrease systemic barriers to care. We discussed how to prioritize care with the concerns of the individuals and families as central, and how to be inclusive of both their IDD and mental health needs.

Collaborating across systems successfully, requires us to be planful and open, with positive communication and understanding as we develop our partnerships with other systems. Together we are stronger.

Questions?

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