



PERSONS POINTS OF VIEW



Detroit-Wayne County Community Mental Health Agency
Consumer Newsletter

Peer Support In the Community Conference

Volume 1, Issue 2
February 2007

The Peer Support Movement continues to gain momentum, and it's really cool to see how quickly administrators and other professionals are getting behind us. At Thursday's conference, **Veda Sharp** (*D-WCCMHA Interim Director*) and **Edith Killins** (*Wayne County Director of Human Services*) each gave what could be described as impassioned, eloquent speeches supporting the movement. **Madelyn Kilpatrick Hargiss** (*Detroit Mayor's Aunt*) spoke on how amazed she was that such a positive movement and pledges her support. **Annette Williams** (*Detroit Recovery Project*) gave a portion of her recovery story and spoke of the dynamic efforts of the "Project" in uniting the community in the recovery of not only people, but also the City of Detroit and the County of Wayne.

Irene Kazieczko (*Director, Bureau of Community Mental Health Services MDCH*) spoke on "The Power of Peer Supports" answering most questions about who we are and where we are headed. **Dana Parker** of "Dig My Roots" and co-

sponsor of the conference, spoke of her years of hard work attempting to combat stigma, and enlightening the community about recovery. **Genevieve Clark** of "Arise Detroit" gave a well received presentation on "Community Gardening". Personally, I am not big on veggies, but I love the idea of neighborhoods and communities coming together to accomplish a goal, and she showed us how it can be done. **Dr. Harriet Green** (*MD, Medical Director / Care Link*) presented "Collaboration towards System Transformation".

Cody Fitzpatrick (*Director of Services for Persons with MI, Kalamazoo*) spoke on System Transformation, and the role of Peers in the recovery process. I asked **Cody** to speak because she is spearheading what is considered a model of "Community Outreach" in Kalamazoo. During her talk, **Tammy Lademer**, a Peer Support Specialist, voiced concern over how she should be referred to. Although the "Consumer Council" may or may not take up this issue, the important thing is this: as

Peer Supporters we are willing to lay the cards on the table, and deal openly and honestly with whatever the issues are. Peers are asking the questions and finding answers to those concerns because they affect our recovery. No matter the task at hand, without hope of a positive outcome, there is little desire in taking the first step. **Sherri Rushman** (*Peer Support Specialists / Oakland County*) spoke on "Hope Givers & Hope Receivers" and as far back as the 1999 National Summit of Mental Health Consumers and Survivors report, HOPE was and is the number 1 "Value" important to recovery. **Sherri** has been bringing her message of hope to Consumer Conferences for years and today she has become a necessary component of the Peer Movement.

Kendra Binkley (*MDCH / Contracts Manager*) energetically told us about "The Michigan Experience in Training and Supporting Peers". **Kendra** is hard to describe as she does everything from lifting heavy boxes to picking us up at train and bus stations late at night, writing documents to giving talks.

Notification :

Under State requirement recipients are to be notified of their rights on an annual basis.

Recipients have a right to information about the provider network, grievance and appeals, fair hearing process, time frames, receiving benefits from out-of-network providers, emergency services, advance directives, availability of information on PHIP's structure, physician incentives, and requirements for annual notification of availability of recipient information. For your convenience a list of your enrollee rights are included in this month's Consumer Newsletter as an insert. (see page 6)

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Michele Vasconcellas gave a presentation on “The Role of D-WCCMHA Customer Services in Supporting the Peer Movement”. She and **Risa Coleman** (*Clinical Services Director / D-WCCMHA*) gave us a glimpse of the future for peers in Wayne County and it looks bright. Besides giving her recovery story earlier, **Karrie Cross** sang what has become the movement’s theme song: “*Life Uncommon*” which has become to us what “We Shall Overcome” was to the Civil Rights Movement of the sixties. We ended with the peers in attendance each saying a few words,

and you could literally feel the positive energy in the room.

Peer Support is not a mere concept that will one day go away. If Peer Support could be put into a pill form, it would be declared a wonder drug because about 90% of the consumers taking the course say it changed their lives. Hope is like gold to us, and the Peer Support Movement provides us with that hope. We realize the importance of passing that hope onto others who are going through what we went through. This conference was a clear demonstration how, through the

Peer Movement, everyone involved in the system can work as a well-oiled machine to achieve: better outcomes, even with budgetary limitations.

Gerald Butler
CPSS / Consumer Advocate

Consumer Family Advocate Council (CFAC)

By: **Mary Ann Bozenski, CFAC Chairperson**

We invite you to join us as a guest at one of our upcoming CFAC meetings. Meetings are held the third Friday of the month at 640 Temple in the 6th floor auditorium at 12:30 p.m.—2:30 p.m. Come to a meeting, have lunch with us and see what we do. If you like what you see think about becoming

a CFAC member and attending meetings regularly. We need your help in fulfilling our mission and attaining our goals and objective. As a CFAC member you will receive regular Agency reports from the Executive Director and other D-WCCMHA staff on current local and statewide

mental health issues and programs. There is much to learn and personal satisfaction in giving of yourself to the community. CFAC reinforces recovery and can help you to grow as you advocate for yourself and others. For more information or becoming a member

Peer Support/Co-Occuring: *by Joel Berman*

The Michigan Department of Mental Health and Substance Abuse Services invited me to speak at an IDDT/Co-Occurring Disorder Seminar on November 28, 2006 in Ann Arbor. I was asked to present to an audience of doctors and psychiatrists just how I have lived my life with a Co-Occurring Disorder. In the ten minutes allotted to me, I was able to effectively narrate just how difficult of

a struggle it has been for me as I have attempted to cope with the mental illnesses and substance abuse problems that have plagued me my entire and adult life. Breaking a forty-year addiction to marijuana and the cessation of using beer as a way to self-medicate myself from major depression, a life-time battle with anxiety, and the confusing panic attacks that have stopped me in my tracks, has

been a daunting task, indeed.

I left the audience with the idea that the rewards of living a clean and sober life for me has been uplifting, and has offered me much hope in the future to lead a happy and content life. Also, despite the fact the addiction is a life-long disease. Some of us will overcome it, and lead the kind of life which we desire, living it one day at a time.

Agency News: MDCH Site Visit

The State of Michigan's Department of Community Health will be conducting its Annual Site Review

Michigan Department of
Community Health Site Visit
February 21st – 23rd
640 Temple

HSAG will be back at the Agency to review the Plan of Corrections on Standards to ensure consumers needs are being met.

The HSAG Site Visit
March 29th & 30th
640 Temple



The Consumer Resource Center at the Detroit-Wayne County CMH Agency (DWCCMHA)

The purpose of the Consumer Resource Center of D-WCCMHA is to provide the developmentally disabled and their guardians/care providers and secondary Consumers knowledge on how to improve the quality of life such as literature, education training and information about Peer-To-Peer Support Specialist.

The mission statement is to provide D-WCCMHA with a Consumer Resource Center, which promotes venues for educating, networking and communicating on recovery, self-determination and empowerment, which supports access to community connections and outreach.

The Resource Center Committee meets on the first Wednesday of each month at 10:00 a.m. The next Resource Committee Meeting will be held at 640 Temple on Wednesday, March 7, 2007 in Room 210 on the 2nd Floor. The group discussions are regarding preparations for the Resource Center.



Did You Know?

It is mandated by the State that Consumers are notified of their rights and provided updated informational materials regarding their rights and mental health services on an annual basis.

Mailing Address:

**Detroit-Wayne County CMHA
640 Temple, 8th Floor
Detroit, MI 48201**

IMPORTANT PHONE NUMBERS

Customer Service:

Phone Number: 1(888)490-9698

TDD Line: 1(800) 630-1044

Fax: (313) 833-2217

Grievances & Appeals: 1(888)490-9698

Office of Recipient Rights: 1(888)339-5595

Family Support Subsidy: (313)833-2493

Communications &:
Community Collaboration (313)833-3984

24 hour help line: 1(800)241-4949

(313)224-7000

TDD Line: (866)870-2599

Persons Points of View Newsletter

Can also be found on our website

www.waynecounty.com

Click on Health Services and then Mental

Health and go to

Customer Service and click POV

DWCCMHA CUSTOMER SERVICE

Our Motto:

“To Exceed Our Customers Expectations”

Our Mission

To assure the accessibility of effective

community services that empowers

individuals and families

to achieve an enhanced quality of life.

DWCCMHA - Executive Board

Bernard Kilpatrick, Chairperson

John Barden

Eric J. Campbell

Dorothy Doyley

Mohamed Okdie

Frank J. Ross

Tim Attalla, Secretary

Laura Cox

George Gaines

Constance Rowley

Gary Burtka

Cindy Dingell, Vice-Chairperson

COMMUNITY CORNER

CALENDAR OF EVENTS

Monthly Consumer

Meeting

Thursday, February 15th

11:00 a.m.

640 Temple, 6th Floor

Auditorium

Consumer Family Advocate

Council

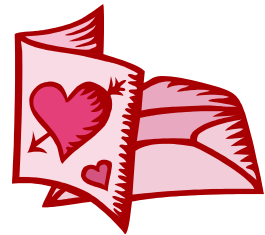
CFAC

Strategic Planning Meeting

BPHI

Friday, February 16th

9:00 a.m. - 2:00 p.m.



Happy Valentine's Day!!!

February 14th

WHAT YOU NEED TO KNOW ABOUT PERSON CENTERED PLANNING

Person-Centered Planning is a tool that guides your treatment in your recovery? You can ask for information about what PCP is all about but be sure to ask your treatment team if you don't have one.

Your treatment team can provide a list of people who can act as facilitators or you can find someone yourself.

Changes can be made in your treatment plan under specific guidelines but you are always entitled to know when a change is to be made. You should keep your plan updated with changes whenever necessary.

You can ask for a "preplanning meeting" in preparation for your actual Person Centered Plan meeting. This will enable you to do a good job arranging your priorities.

In the Plan, you can decide for yourself what works and what doesn't. Get assistance in stating your needs and goals.

You should know the services that are to be provided for you and ask for details.

Friends and family members can play a role in your treatment plan. Think how you can benefit from the advice of others.

Staying connected with services and programs in the community can keep you building on your personal plan by learning about the successes of others.

You should speak up any time you have questions about your program because the treatment team is there to help. Keep appointments, make face-to-face contact with your team so they know how things are going for you.

Within 15 days after your first meeting, you are due a copy of your treatment plan.

A treatment plan is made specifically for you. Decide what you want to get out of it and what you think you'd like to change.

AND DID YOU KNOW....

Treatment you are receiving from your medical doctor needs to be shared with your psychiatrist.
Treatment plans have to be personalized for the Consumer, and include goals and objectives that are measurable.

Families should have a part in the treatment of children.

Your treatment psychiatrist should communicate with your other referred service providers.

Consumers who have received services in clubhouses should have their treatment plan from the clubhouse integrated into their Person Centered Plan.

Persons with substance abuse problems need access to services and their individual plans of service should include treatment plans for substance abuse.

If you are denied hospital admission you can ask for a second opinion. Upon denial, a referral needs to be made at a mental health facility.

You should receive a written discharge plan when you are released and this plan should include your aftercare services.

Psychoactive medications are never to be used to control a Consumer's behavior.
The privacy of an individual is always protected according to federal guidelines.

List of Enrollee Rights
Under State requirement Recipients have a Right to the following:

Recipients have a right to information about the provider network, grievance and appeals, fair hearing process with time frames, receiving benefits from out-of-network providers, emergency services, advance directives, availability of information on PIHP's structure, physician incentives, and requirements for annual notification of availability of recipient information.

- 1. Recipients have a right to:*** a list of where non-English languages about mental health services are spoken and by whom within the provider network.
- 2. Recipients have the right to:*** the rules that govern representation at hearings, requirements and time frames and the toll free number, or information regarding continuation of benefits during the process of the hearing if requested.
- 3. Recipients have a right to:*** request the process by which benefits from out-of-network providers are obtained.
- 4. Recipients have a right to:*** be fully informed about emergency and post stabilization services (outpatient services received during follow-up after an episode of care) and prior authorization is not required to receive emergency care from any hospitalization.
- 5. Recipients have the right to:*** request information on advance directive. All adult recipients must be provided written information on advance directives including any State law that apply to advance directives.
- 6. Recipients have the right to:*** request additional information, including information on the structure and the operation of the PIHP and whether the PIHP or its network providers use physician incentive plans. The PIHP is responsible for providing this information upon request.
- 7. Recipients have the right to:*** request informational materials regarding their rights as a recipient of mental health services. The Agency will notify you of your right to obtain information materials.

Standard VIII – External Quality Review
GMBrown/1-12-06

