R C D C

Recovery , Coalition of Dane County

ABLe Change Workgroup
Directions for Collection of Ideal Flow Feedback and Stories
March 2018

Introduction

The Recovery Coalition of Dane County (RCDC) is working on a project to try to improve entry into the mental health and substance use systems within the Dane County community. RCDC chose to participate in the ABLe Change training, which focuses on how to make system changes to improve the lives of individuals in a community. More information about ABLe Change can be found here. The training consisted of two separate trainings in 2016. In between those meetings, RCDC had to collect data on its chosen targeted problem. The problem RCDC chose was: "Embarrassment and stigma create an environment where not all people seek assistance and support for substance use disorders and mental illness." RCDC held a session where consumers, peer specialists, providers, decision-makers, and other community stakeholders provided feedback on the targeted problem. We had approximately 45 individuals provide responses and we received about 20 pages of single-spaced data. A group of us themed the data. RCDC voted to work on a goal and an issue based on the data. The goal is that "Services are accessible or reaching all consumers" and the specific issue RCDC chose to work on is, "There is no simple, standardized enrollment process or point of entry across agencies for accessing services, preventing some consumers from enrolling." A subgroup of RCDC members worked to put together a draft ideal flow into the systems based on the feedback we received and also by researching other systems.

We need input on the draft ideal flow to make further modifications and improvements. We also want to capture stories from consumers about what has worked and not worked with their past/current experiences with the systems so we have qualitative data as well. Stories are critical in helping change systems.

Directions

Ideal Flow: Any individual can provide feedback on the ideal flow. We would like as many consumers as possible to provide feedback as this flow affects them the most. The ideal flow is simply a concept at this stage and RCDC is working on ideas for how to make the flow a reality. The ideal flow was based on the listening session we did with consumers, peer specialists, providers, and others that are involved with the systems in 2016. We want input from individuals on whether we got things right or missed the mark as the flow needs to be understood and usable by consumers and others. After reviewing the ideal flow, use the ideal flow feedback form to record your thoughts.

Storytelling: For the storytelling document, we would like stories from individuals that have used the mental health and/or substance use systems. If an individual would like to share their story, the individual must fill out the consent form and answer the questions. Individuals can respond to whatever questions they want.

The deadline for collecting feedback and stories is May 31, 2018. The forms should be emailed to Sarah Johnson at Public Health Madison and Dane County at sjohnson@publichealthmdc.com or faxed to Sarah at 608-266-4858.

Please email Jami Crespo (jcrespo@publichealthmdc.com 608-243-0326) or Sarah Johnson (sjohnson@publichealthmdc.com 608-242-6394) with any questions.

Thank you for helping us collect feedback and stories to move this process forward!

RCDC ABLe Change Workgroup

RCDC System Change Workgroup

Improving access to the Behavioral Health System in Dane County

Background & Purpose

The Recovery Coalition of Dane County (RCDC) System Change Workgroup is attempting to improve access into the behavioral health system in our community. In 2016, several RCDC members participated in a training focused on how to make system changes to improve the lives of individuals in a community. RCDC held a session with consumers, peer specialists, providers, decision-makers, and other community stakeholders to better understand the challenges within the behavioral health system. One of the key themes from the feedback was that due to the system silos and fragmentation, many people were re-traumatized by having to tell their story over-and-over to different providers.

RCDC used this information to prioritize work on developing a model for a simple, standardized enrollment process or single point of entry for accessing behavioral health services. The RCDC System Change Workgroup has taken several action steps to address the target issue.

Action Steps

Research and consult with communities throughout the country on their enrollment systems.

Collect stories and feedback from people with experience in the behavioral health system to identify the challenges and benefits of the current system and opportunities for improvement.

Design a model for a simplified enrollment process into the behavioral health systems in Dane County based on research and community feedback.

For More Information & To Get Involved

Contact Jami Crespo at: JCrespo@publichealthmdc.com

R C D C

Recovery   Coalition   of Dane   County

Hurdles on the Road to Recovery

The Recovery Coalition of Dane County collected stories from individuals about their experiences within the behavioral health system

Below are the themes and direct quotes from these stories

Stigma

'Whenever I mention my mental health issues to family or friends, it gets really uncomfortable for them and me'

'I am labeled a *drug seeker* because I have different prescribers [due to insurance changes]'

'They [providers] responded to me as if I was a child'

Waiting List

'They [provider] had a waiting list, after 2 months I got in to see someone'

'Client came in because of being suicidal or homicidal and now we are releasing them and telling them to be safe for 3 months [until they can see a psychiatrist for meds]'

Jail

'Not really able to have meds for 2 days because it wasn't in the system yet'

'How about … being released from jail at 5am?…Where do they go? What is open at that time? The buses aren't even running. But guess who is waiting for them? Drug dealers.'

Navigation

'Nothing was easy to navigate'

'Felt overwhelmed by bureaucracy'

'So many people were unaware of those services [mental health and AODA] and didn't know what they were for'

Limited Access to Peer Support

'Having a peer specialist to encourage and support treatment being possible would have helped a lot.'

'I received no peer support, but I could have benefited from it.'

Insurance

'I needed residential treatment, but it was denied, so instead I had 13 emergency psychiatric hospitalizations'

'The entire process depends on what insurance you have'

Lack of Client Centered Care

'Services need to be introduced in a way that clients can understand the process from their level, not the providers'

'They [clients] didn't know they had choices'

Crisis Driven Response

'It always took escalating/spiraling to a higher level of care to get any useful help'

'I would have no choice but to let my mental health deteriorate'

Key Words Needed

'[I had to] tell them I was having suicidal thoughts in order to get checked into…'

'[Clients] lied to providers in order to get what they needed'