

**Broome County Dual Recovery Project Work plan
January 2006-December 2006**

Awareness and Networking:

Objective 1: DRC has **ongoing** attendance/participation in coordinating bodies in the County/community to ensure coordination and attention to client and system issues related to individuals with co-occurring disorders.

Activities:

- a) Single Entry for adult case management and residential and Single Entry Advisory Board
- b) Co-Chair Continuum of Care of the Homeless Coalition
- c) Professional Advisory Group
- d) Management Council
- e) Adolescent Addictions Taskforce
- f) Family Treatment Court Planning Team
- g) KYDS Coalition
- h) Alcohol and Substance Abuse Subcommittee
- i) Mental Health Subcommittee

Objective 2: Promote Wellness and Recovery

Activities:

- a) Implement the Connect Project Wellness and Recovery Module
 - o With Probation Department staff. - **Spring 2006**
 - o With Expanded CJS staff - **end of 2007**
- b) Provide **ongoing** support to consumer groups and peer advocates
- c) Explore Mental Health Anonymous
 - o Contact **Spring 2006**

Evaluation: DRC maintains ongoing documentation of meeting attendance and participation in the community and as evidenced by meeting minutes etc.; DRC maintains documentation of all contacts with other agencies and nature of these contacts; meeting timelines specified by OMH for the Connect Project will ensure ongoing Connect activities.

Inter-Systems Management (Provider level):

Objective 1: The Dual Recovery Project's five workgroups and Core Group continue to meet **ongoing** to best coordinate, enhance and deliver services for individuals with co-occurring disorders through the following activities and initiatives.

Activities:

- a) Determine standard for Patient Placement Criteria (among agencies involved in Dual Recovery Project)
 - o Explore ASAM to use across mental health and substance abuse agencies – **October 2006**
 - o Train agencies in ASAM cross walk – **January 2007**

- b) Share regulations among agencies as they pertain to admission/discharge - **February 2006**
 - o Determine next steps i.e updated linkage agreements and interagency agreements - **April 2006**
- c) Establish and distribute a point of contact list- **March 2006**
- d) Establish linkages with new forensics mental health unit at the jail – **March 2006**
- e) Standardized Assessment/Evaluation
 - o Maintain focus on screening - **ongoing**
 - o Support ACBC’s implementation of the MMS- **ongoing**
 - o Establish standardized assessment package that could work across agencies- **Spring 2007**
- f) Develop a common client data base – (coordinate with Broome County Performance Management Analyst) **December 2006**
 - o Review 2002 MICA Care Coordinator grant proposal
 - o Look into DSS tracking form and HMIS for possible information or process here that could assist
- g) Establish quadrant IV instrument to be used by participating agencies – (coordinate with Broome County Performance Management Analyst) **June 2006**
- h) Taskforce to look at MICA inpatient unit at UHSH- **April 2006**
- i) Update Consumer Pocket Guide – **October 2006**
- j) Complete Housing Workgroup project to expand housing options for quadrant IV individuals – **April 2006**

Evaluation: DRC documents all project workgroup meetings with written minutes and written correspondence to and from participants. This documentation reflects all process and content progress of all activities ongoing in the project. Products: quadrant IV instrument; client data base; housing resource guide; point of contact listing; successful implementation of MMS.

Program and Workforce Competence:

Objective 1: Continue to develop, plan, coordinate, and execute ongoing interagency and community wide trainings in co-occurring disorders and related topics

Activities:

- a) Education/Training Workgroup to organize and execute training on ASAM - **January 2007**
- b) Round Table – **April 2006**
- c) Fully implement the Connect Project training
 - o For Probation/ATI staff- **December 2006**
 - o Expand to CJS staff (including attorneys and Judges)- **end of 2007**

Objective 2: Utilize ongoing project workgroups to identify barriers and strategies to address the barriers - **ongoing**

Objective 3: DRC to provide consultation to agencies and consumers **ongoing**

Objective 4: Fully utilize the Dual Recovery Review Committee and case conference capability of the Treatment Workgroup

Evaluation: DRC documents all project workgroup meetings with written minutes and written correspondence to and from participants. This documentation reflects all process and content progress of all activities ongoing in the project. DRC maintains grid of all trainings available, planned, and executed. Products: successful Connect training; numerous other trainings held.

County COD Infrastructure:

Objective 1: Continue to support the Dual Recovery Project's five workgroups and Core Group through ongoing participation of all OMH and OASAS licensed treatment and residential agencies, DSS, housing, support services, and consumers essential to the coordination and delivery of services for individuals with co-occurring disorders.

Activities:

- a) Determine whether we need certain protocols added to our established structure- **June 2006**
- b) Update our structure annually- **December 2006**
- c) Plan and exercise team building activities- **December 2006**

Objective 2: DRC has an active role in developing goals and objectives for the OASAS Local Services Plan as it pertains to systems and services for individuals with co-occurring disorders. **September 2006**

Objective 3: All OMH and OASAS licensed agencies will meet basic standards of being Dual Diagnosis Capable programs as guided by the Patient Placements Criteria published by the American Society of Addiction Medicine and agreed upon by the Core Group and Treatment Workgroup. **December 2006**

Activities:

- a) Agencies to share regulations in Treatment Workgroup
- b) Involve Broome County Performance Management to support agencies
- c) Plan and execute strategies to deal with barriers identified

Objective 4: Explore possibility to expand the collaboration and coordination of care for co-occurring disorders to include developmental disabilities. **April 2006**

Evaluation: Ongoing support of the Commissioner and Deputy Commissioner of Mental Health on all levels (State, and County) for the Dual Recovery Project and all of its goals and objectives as evidenced by: agenda item on mental health and substance abuse provider groups and subcommittees; attendance and active participation in the Core Group and workgroups; advocacy; pursuing additional funding and supportive resources for the project.