Module X

Inter-Systems Collaboration

Inter-Systems Collaboration

Peace Bridge, Niagara Falls USA/Canada

Learning Objectives

- Articulate 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.

- Explain how communication, cooperative relationships, and knowledge of service delivery are key to supporting someone with IDD/MI.

- Identify the 4 planning and practice elements essential to working together, and the factors that make each of these achievable.

- Describe the purpose, stakeholders, and potential roles of a Dual Diagnosis Committee.

- **Barriers to Service Delivery**

- **Principles in Service Planning**

- **Guidelines for Emergency Responders**

- **Community Collaboration and Teamwork**

- **A Framework to Promote Cross System Collaboration**

- **Service Planning Recommendations**

Barriers to Service Delivery

The Typical Picture:

Individuals with MI and IDD are among the most challenging persons served by both MH and IDD Service Delivery Systems.

The Typical Picture:

- **Failure to plan services**

- **Failure to fund flexible services**

- **Failure to obtain technical assistance**

Mosely, 2004

The Typical Picture:

- **MH providers perceive that they do not have the skills to serve adults or children with a dual diagnosis.**

- **IDD providers do not understand the services that the MH sector offers.**

- **MH providers do not understand the services that the IDD sector offers.**

Dual Diagnosis Policy Barriers

MH System

- **Short 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**

←—————— **Little Collaboration** ——————→

Principles & Practices

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Intersystems Service Planning

- **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.**

Fletcher, Beasley, & Jacobson, 1999

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.**

Fletcher, Beasley, & Jacobson, 1999

- **Involve the person and family as full partners.**

- **Coordinate at the system and service delivery level.**

The system recognizes and values the long-term cost effectiveness of providing best practice services and supports for persons with co-occurring disorders.

Fletcher, Beasley, & Jacobson, 1999

Knowledge of Service Systems

People with IDD and mental health needs are often served by different programs. Treatment and care is enhanced when knowledge and efforts across systems are considered in a community-based approach. This includes:

- **knowledge about state and provincial systems and services including education, health care, DD/IDD services, mental health services, inpatient referral process, the justice system, foster care, youth services, community disability services, transportation and employment**

- **knowledge on issues and practice related to informed consent to protect an individual's confidentiality to promote both privacy and respect for the client**

Communication with Multiple Systems

Supporting someone with IDD/MI

- Communicate signs and symptoms of individuals' mental health concerns to others across multiple systems.
- Articulate knowledge about the treatment history and current support needs of individuals
- Can present a professional approach to working with others across systems for the benefit of individuals, including sensitivity to the policies and procedures of other professionals
- Can convey complicated information sensitively to others who need to know about an individual's needs and supports, particularly during a behavioral or medical crisis

Facilitating Positive and Cooperative Relationships

- Demonstrates ability to navigate recommendations between systems (e.g., psychiatrists and other health professionals, employment, residential settings)

- Demonstrates the ability to build positive and cooperative relationships with other health and mental heath professionals

- Can work positively with multiple systems as a collaborative and cooperative member of the team

- Maintains professional and empathetic communication and partnership with family members and friends of individual

- Recognizes family members as integral partners in support and gathers input from them

- Demonstrates problem solving and teamwork skills

Effective Planning and Practice Elements

1. **Leadership**

2. **Effective Staff**

3. **Effective Treatment**

4. **Staff Training**

Adapted from Moseley, 2010

Effective Planning and Practice Elements

1. Leadership

- **Commitment**
- **Clear lines of authority**
- **Commitment to collaboration**
- **Focus on the Individual**

Adapted from Moseley, 2010

Effective Planning and Practice Elements

2. Effective Staff

- **The right person**
- **The right match**
- **Build trust, dependability**

- **Focus on the Interystem**
- **Collaboration System**
- **IDD/MH interface**

Adapted from Moseley, 2010

Effective Planning and Practice Elements

3. Effective Treatment

- **Appropriate psychiatric diagnosis**

- **Effective medication treatment if needed**

- **Positive behavioral supports**

- **Effective treatment strategies such as DBT, CBT**

Adapted from Moseley, 2010

Effective Planning and Practice Elements

4. Staff Training

- **DSP**

- **Clinicians**

- **Service Coordinators**

Adapted from Moseley, 2010

Purpose/Function of A Dual Diagnosis Committee

- **Gather relevant data/information**

- **Identify strengths in service delivery systems**

- **Identify challenges/gaps in service delivery system**
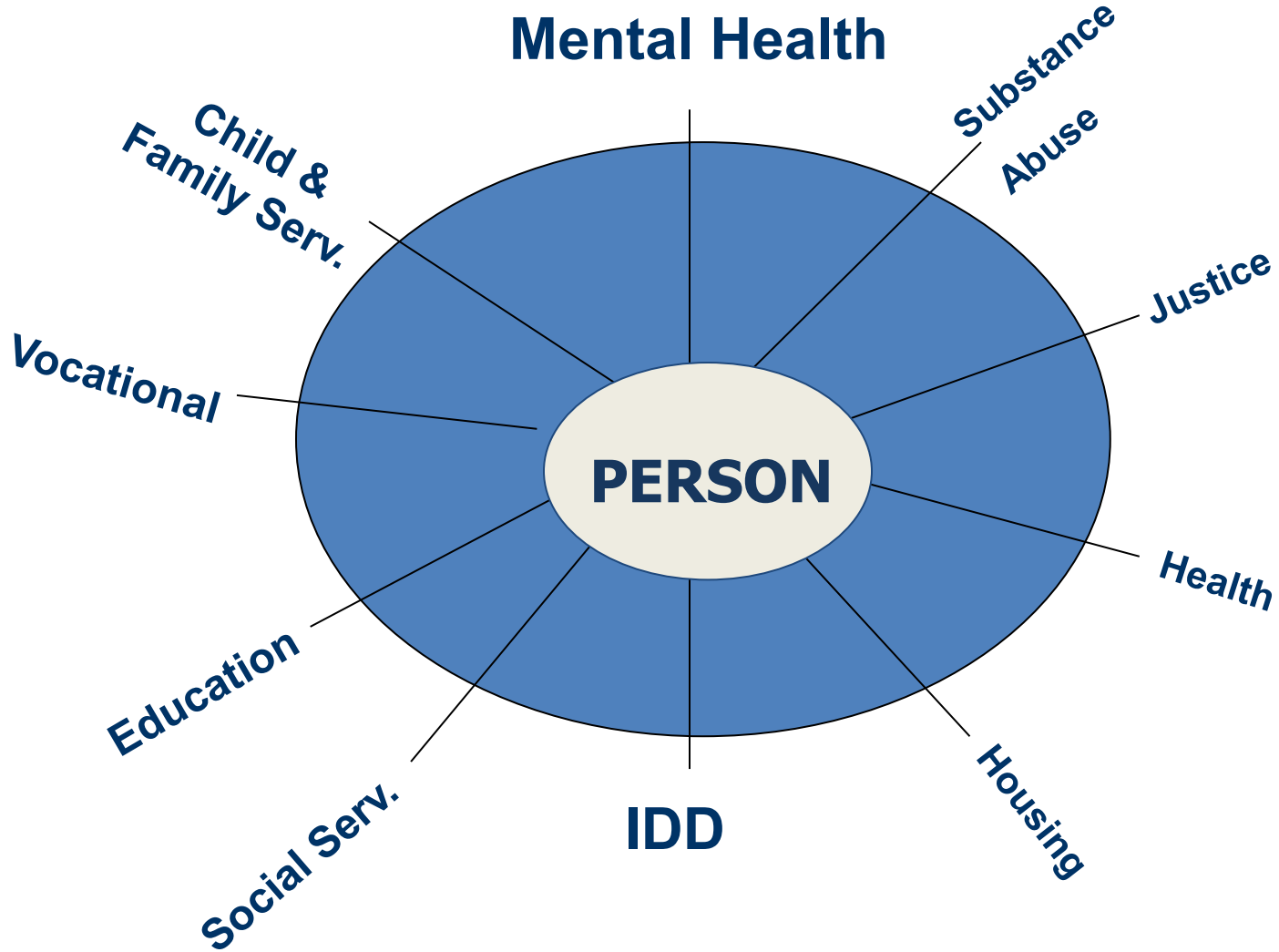
- **Develop solutions to address challenges and gaps**

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**
- **Senior Services**

Intersystem Collaboration

Mental Health

Substance Abuse

Child & Family Serv.

Justice

Vocational

PERSON

Education

Health

Social Serv.

IDD

Housing

IDD/MI Discussion Matrix

	State	Regional	County	Staff Training	Clinical Quality	Advocacy/ Other
How are you doing now?						
How could you improve over the next year?						
What plans can you make for the next 1-3 years?						

IDD/MI Action Plan

	Action to be Taken	Resources Needed to Complete Action	Date of Expected Completion	Responsibility Person(s) Organization(s)
System Strategies				
State				
Regional				
County				
Staff Training				
Clinical Quality				
Advocacy/ Other				