



Progress on the BluePrint for Ohio's
Community Mental Health and Addiction System

November 2016

Recovery Is Beautiful: A BluePrint for Ohio's Community Mental Health and Addiction System is a five-year plan designed to transform Ohio's mental health and addiction system from one that focuses on the illness, to one that focuses on RECOVERY! Local Alcohol, Drug Addiction, and Mental Health (ADAMH) Boards and their communities are now beginning their third year in moving Ohio's mental health and addiction system to a Recovery-Oriented System of Care that emphasizes a community-based system of care that includes prevention and wellness, crisis and treatment services, and recovery supports to help individuals with a mental illness and/or addiction achieve recovery. The local Recovery-Oriented Systems of Care support all individuals, families and communities in getting healthy, being healthy, and staying healthy!

Over the past two years, Recovery Is Beautiful has moved from a simple BluePrint document to an actual movement across Ohio. More communities are utilizing the messaging behind Recovery Is Beautiful to engage local citizens in the health promotion activities of their local areas, and in helping to reduce the stigma of and discrimination against mental illness and addiction by ensuring that people understand:

- Mental illness and addiction are ***chronic illnesses***;
- Mental Illness and addiction can be treated – ***Treatment Works and People Recover***; and
- ***Recovery is to be CELEBRATED*** – individuals in recovery become active, productive, contributing members of their communities!

In working to change the conversation to move Recovery-Oriented Systems of Care forward, Boards have engaged their local communities through hundreds of presentations, trainings, workshops, planning sessions, activities, and events over the past two years that focus on how we are all working together to make Ohio a place where individuals and families embrace living healthy, drug-free lives, with access to the necessary community-based mental health and addiction services.

While much has occurred in the past two years, there is still a long way to go, both to change the conversation and to move the entire state to a fully-integrated Recovery-Oriented System of Care.

Changing the conversation will require an attitudinal change that may well take a generation to be fully realized. Moving to a Recovery-Oriented System of Care will take several years to ensure that it benefits all Ohioans as we navigate the implementation of behavioral health redesign and the continued evolution of community behavioral health services. Additionally, we will need to continue to fight the opiate epidemic plaguing Ohio, while we simultaneously continue to integrate behavioral and physical health. Through all of this, we must stay focused on the individuals and families in need of mental health and addiction services, as we cannot allow the bureaucratic issues that so often arise to steer us off our path to full implementation of a Recovery-Oriented System of Care.

We hope that as you read this document, you will be inspired to join and engage in the Recovery Is Beautiful **movement** in Ohio. If we all work together to let everyone know that mental illness and addiction are illnesses, that they are treatable, and that we should celebrate individuals in recovery, Ohio will become the place to live and work in America.

Stay well,



Kim Fraser, President
OACBHA



Cheri L. Walter, CEO
OACBHA



MOVING TOWARD A RECOVERY-ORIENTED SYSTEM OF CARE

Ohio's Boards are continuing their efforts to implement Recovery-Oriented Systems of Care in their communities. A Recovery-Oriented System of Care (ROSC) is built upon a framework in which Boards locally manage the system of care as the "hub" for their local communities. A ROSC is a coordinated system that ensures local entities offer community-based mental health and addiction prevention and wellness programs; treatment services; and recovery supports. These programs and services build on community strengths, incorporating a coordinated and collaborative approach across the community. A ROSC ensures access to a full continuum from prevention through recovery supports designed to help individuals and families achieve and sustain long-term health and recovery while also helping communities become healthy, safe, and drug-free.

Local communities do this by offering community-based mental health and addiction prevention and wellness programs, crisis and treatment services, and an array of recovery supports (housing, employment, peer support, etc.) that are person-centered, trauma-informed, culturally competent, and designed to meet the needs of individuals, families, and communities.

A ROSC is a coordinated network of community-based services and supports that builds on the strengths and resiliencies of individuals, families, and communities to achieve improved health, wellness, and quality of life for those with or at risk of mental illness or substance use disorders. By design, a ROSC provides individuals and families with more options to make informed decisions regarding their care. Services are designed to be accessible, welcoming, and easy to navigate. The fundamental value of a ROSC is the involvement of people in recovery, their families, and their communities to continually improve access to and quality of services.

To move forward, we know that we need to have baseline starting points for communities to help them see where their strengths and opportunities lie, and to identify gaps that need to be addressed. To this end, over the past two years, Boards have worked to complete community-based Recovery-Oriented System of Care Assessments that look at their local community strengths, identify areas of opportunity, and plan for how they can be maximized. The ROSC Assessment also helps to develop strategies for addressing any gaps that were identified, so communities can continue their progress in developing Recovery-Oriented Systems of Care. The assessments were completed, focusing on the five driving principles of the Recovery Is Beautiful BluePrint:

- 1. Focusing on Clients and Families**
- 2. Ensuring Timely Access to Care**
- 3. Promoting Healthy, Safe, and Drug-Free Communities**
- 4. Prioritizing Accountable and Outcome-Driven Financing**
- 5. Locally Managing Mental Health and Addiction Systems of Care**

Once communities have completed their assessment, they work to implement a complete Recovery-Oriented System of Care by strengthening the areas that were identified as having gaps, and build upon the areas that are working well. Boards do this by: working with individuals in recovery to identify logical supports; working with providers to increase access and quality of services; working with schools and other community organizations to provide prevention and wellness programs; working with community stakeholders to identify needs within the community; expanding recovery support services; working with managed care to ensure that individuals and families in need can navigate the system as behavioral health redesign moves forward; and helping behavioral and physical health further integrate in the local community. Through these steps, Boards build the services and supports necessary to help individuals, families and communities become and stay healthy, strong, and drug-free.

BUILDING AN UNDERSTANDING OF RECOVERY IN A ROSC

Recovery is about living a life that allows individuals to be as productive as possible, as active, contributing members of the community. We know that recovery occurs via many pathways. Individuals are unique with distinct needs, strengths, preferences, goals, culture, and backgrounds that affect and determine their pathway(s) to recovery. Recovery is built on the multiple capacities, strengths, talents, coping abilities, resources, and inherent value of each individual. Recovery encompasses an individual's whole life, including mind, body, spirit, and community. Recovery is not simply about personal health, but the health and well-being of the entire community, and as such we need to include the entire community in the planning and implementation of a Recovery-Oriented System of Care.

As Ohio's Alcohol, Drug Addiction, and Mental Health (ADAMH) Boards continue to drive Recovery-Oriented Systems of Care in their communities, they are placing their primary focus on the individuals in need of recovery services and their families, building on their strengths, and incorporating a coordinated and collaborative approach across the community. The foundation of Ohio's Recovery-Oriented System of Care is that locally managed continuums of care are designed to provide prevention, treatment, and support services to support and educate communities and to help individuals and families impacted by mental illness and addiction achieve and sustain long-term recovery, thus strengthening the entire community.

Local Boards do this by ensuring that their community has local mental health and addiction **prevention and wellness programs, crisis and treatment services**, and an array of **recovery supports**.

Prevention and Wellness Programs

Prevention and wellness programs play a key role within a ROSC framework due to the long-term benefits they provide for individuals, families, and communities. Prevention programs and services help prevent or delay the onset of symptoms and build resilience within individuals to help them make informed, healthy choices that support their overall physical and emotional well-being. Wellness programs and services help individuals, families, and community members identify, understand, and respond to mental illness and addiction. These programs and initiatives support an individual's journey toward wellness and recovery, should they ever experience issues with mental health and/or a substance use disorder. Community education helps change the conversation so that people understand that **mental illness and addiction are chronic illnesses**.

Crisis and Treatment Services

Crisis and treatment services provide individuals experiencing a mental health or substance use disorder with the opportunity to address these issues in a setting that is person-centered, trauma-informed, culturally competent, and designed to meet their needs. Through the utilization of appropriate crisis services, individuals are often helped in a way that keeps them out of settings such as emergency rooms, in-patient hospitals, and jails. Early treatment services help individuals identify the issues they are facing and work with them to develop a plan to move toward recovery. Treatment services help individuals and families on the journey to recovery by offering therapies that are designed to address the individual's and family's unique needs. The bottom line is we know that **Treatment Works and People Recover!**

Recovery Supports

Recovery Supports such as housing, employment, and peer support are person-centered, culturally competent, and designed to help individuals working toward or in recovery stay in recovery over the long term. We know that mental illness and addiction are chronic illnesses, and individuals may need long-term supports to help them stay in recovery, stay employed, and remain in the community being as productive and safe as possible. Recovery supports, inclusive of the support and involvement of others, help individuals understand and believe in recovery. The belief and hope are compounded as we all continue to **celebrate those in recovery**.

A ROSC provides individuals, families and communities with more options to make informed decisions regarding the system of services and an individual's choice in care. Programs and services are designed to be accessible, welcoming, and easy to navigate, both for the individual needing services and for the community at large to understand their value. One fundamental advantage to a community in having a ROSC is the involvement of people in recovery, their family, and the entire community to continually improve access to and quality of programs and services.

Ohio's Recovery-Oriented System of Care



ROSC IS WORKING IN OHIO COMMUNITIES

Precia Shenk Stuby, Executive Director

Hancock County Board of Alcohol, Drug Addiction and Mental Health Services

Imagine coming home one day and your neighbor tells you he or she has been diagnosed with cancer. Your intuitive response is to be immediately empathic and sympathetic. Most of us would offer a hug and/or a kind word followed by “What can I do to help?” In our mind we begin to think of things we can do to help out: mow their lawn, bring over a meal, offer to watch their children, drive them to appointments, etc. I suspect the conversation would end with “Let me know if there is anything I can do.” From that point on, each time you run into your neighbor you’d likely ask how things are going and if there is anything he/she needs.

We assume that our neighbor will have access to excellent medical care and that there will be some sort of financial coverage for the treatment he/she needs. We expect that his/her employer will be flexible, allowing him/her time off to go to their treatment, and time off without question, as he/she deals with the side effects. Co-workers pick up the “extra load” to help out, sometimes even donating their sick time to help. They offer words of encouragement and expressions of hope. Members of church congregations add them to prayer lists and provide symbols of hope (knitted hats and shawls). The community shows visible signs of support in purchasing items that are “pink,” and participating in fundraisers.

That is ROSC. ROSC is having an intuitive response of support and knowing what that support might look like.

Now imagine coming home one day and your neighbor tells you they are dependent on heroin or they have just been diagnosed with bipolar disorder. Is your intuitive response one of empathy and sympathy? Do we embrace him/her, offer him/her help and hope? Do we assume he/she will have access to the best care science has to offer? Do we expect that when he/she shows up at his/her place of employment he/she will be supported and that everything will be done to maintain him/her in his/her position? Are churches praying for him/her? Is the community visibly showing support?

Implementing ROSC requires a change in community culture, access to care and support from many. Most of all it puts the person with the disease in the “driver’s seat,” allowing him/her to choose the path that will most likely lead him/her to success.

As we move forward with ROSC we must think outside of our behavioral health system and be inclusive of the entire community. Health will follow.

Hancock County adopted a Strategic Framework for the Implementation of ROSC in 2013. The Framework builds on strengths and identifies priorities for our local system. Some accomplishments to date include: the transformation of our drop-in center to a recovery support center; becoming a trauma-informed community; the development of a substance use residential treatment facility; increasing access to medication-assisted treatment; expanding mental health first aid; increasing services to the criminal justice system and the development of two recovery homes. While we have a long way to go, the culture is beginning to change.



Kim Fraser, Executive Director

Lake County Alcohol, Drug Addiction and Mental Health Services Board

The Lake County ADAMHS Board was proud to be one of eight ROSC “pilot boards” in Ohio when it was first introduced 18 months ago, and we continue to prioritize the integration of ROSC principles into our system today.

ROSC principles are important to us in many ways. We strive to be very client- and family-focused — the numerous support groups and trainings offered through our network help families understand and deal more effectively with their loved one’s illness.

We believe in the celebration of recovery, and use events like our annual Expressions of Recovery show to spotlight and celebrate the role that the creative process can play in recovery from mental illness or addiction. Access to care is a priority, and our Compass Line and Transportation Line are innovative ways we’re helping ensure that local residents have timely access to services. We value collaboration and understand the importance of working with our local partners to make locally driven decisions that are best for our community.

The perspectives and expertise of the Lake County residents on our Board are vital when it comes to decisions about our local network of services. We are always mindful that we need to be accountable — to clients and families, as well as to the taxpayers who support our work. Thus, we demand much of ourselves relative to our system’s efficiency and effectiveness.



Karen Scherra, Executive Director

Clermont County Mental Health and Recovery Board

The Clermont County Mental Health and Recovery Board had failed in six previous attempts since 1990 to increase our levy. So undertaking another effort for the November 2015 ballot was a risk. However, the impact of the heroin epidemic on Clermont County is staggering, considering the number of overdoses and overdose deaths, so the risk was necessary.

A lot of thought went into our levy slogan because we wanted it to be something to which voters could relate. Historically, our levy campaigns focused on youth prevention services and mental health treatment, but not on addiction treatment, as there was a strong bias against tax dollars funding these services. We knew that the widespread nature of heroin use across all demographics was changing many people’s minds about the urgent need for services, but we also wanted to have voters see the levy in a positive light, not just think about the many county residents currently affected by addiction, along with mental illness.

Board staff and Board members had embraced the “Recovery is Beautiful” phrase and logo, as had our Opiate Task Force and providers. Using that as our tag line for the levy seemed appropriate, especially after we added “Help Others Achieve It” to emphasize the primary goal of our increased funding request. All of our levy materials carried the tag line, but perhaps most important of all, we used a video to showcase Clermont County people in recovery, what recovery means, and why people should vote for the levy. Originally, we borrowed the video concept and the music from the Allen/Auglaize/Hardin Board, and a community member on our Opiate Task Force produced a Recovery Is Beautiful video. For the levy, we used the best sections of the video and added messages from key stakeholders, Board staff and our Board of Directors about the levy and recovery.



We received a great response to the video and the entire campaign. It provided a positive note and hope in the midst of real pain in the community. And on November 3, 2015, our levy passed: a renewal of our .5 mil levy and an increase of .25 mil, which meant an additional \$1.1 million annually for our system, and the only mental health levy with an increase on the ballot. Maybe most important of all, the use of “Recovery is Beautiful” and highlighting those in recovery strengthened our relationship with consumers and built a strong foundation for peer support and recovery coaching that was funded for SFY 2017 with additional levy dollars. Clermont County believes in recovery – we are always working toward it for all of our consumers, and we’re not afraid to show it!

Judy Wortham Wood, Executive Director

Mental Health and Recovery Services Board of Wayne and Holmes Counties

The Mental Health and Recovery Board of Wayne and Holmes Counties (WHMHRB) continues to transform the local system toward a Recovery-Oriented System of Care (ROSC). The Board embraces recovery services and supports as the crucial Long-Term Services and Supports (LTSS) necessary to increase quality, effectiveness and cost efficiency. Picture a triangle with each of these: quality, effectiveness and efficiency — with recovery in the center, or at the “heart of it all.”

For recovery, linkages to recovery social systems are required. These can be group treatment services, family support groups, AA groups or a consumer-operated center, capable of reflecting the needs and values of the individual. To move toward value-added, outcome-driven treatment and financing, the local continuum of services must include recovery-oriented, long-term recovery supports, including supported employment, permanent supported housing, recovery housing and peer support.

Well-considered, board-driven action plans that result in sound service investments are essential to provide and maintain a full continuum of care. Quality continuums include long-term support services. The Wayne/Holmes behavioral health system of care has been transforming to a Recovery-Oriented System of Care for the last eight years. Some examples:

- The MOCA House program of NAMI of Wayne & Holmes counties, developed in 2010, is a premier recovery center offering expanded consumer-operated services and peer support. MOCA members very successfully advocated with the legislature by speaking before the Ohio House of Representatives Finance Committee and members met personally with Governor John Kasich. MOCA received the OACBHA 1st Annual Advocacy Award for its advocacy for Medicaid Expansion.
- The Board sponsored peer support training for Certified Peer Supporters and Recovery Coaches, and now funds three peer support positions at our agencies.
- Through One Eighty (previously known as STEPS and Every Women’s House), our system has added recovery housing beds, including two houses receiving OhioMHAS Community Capital Funding, and remodeled two additional houses, for a total of five recovery houses providing 17 beds.
- Through our OhioMHAS Community Capital Grant for housing, The Counseling Center has added 15 apartments for transitional-aged young adults with severe and persistent mental illness, providing permanent supported housing.
- NAMI/MOCA and Anazao Community Partners have completed a newly renovated building offering integrated behavioral health.
- The Supported Employment Program was re-instituted at The Counseling Center and has grown, providing measurable outcomes for people with mental illness achieving employment.
- The Board has focused on increasing the number of Evidence-Based Practices, utilizing OhioMHAS and foundation grants to move toward wrap-around services for youth, multi-systemic treatment (MST), supported employment, QPR suicide prevention and mental health first aid.
- Thanks to diverse funding sources, including: local levy funding, OhioMHAS board and grant funding, OhioMHAS Community Capital Grants, Recovery Housing Capital Grants, 507 & 505 funding from OhioMHAS, and foundation grants, the Board has been able to expand ROSC. These targeted goals assure that local citizens have increased access to mental health permanent supported housing, recovery housing, consumer-operated services, certified peer support, recovery coaches, and supported employment.



Recovery is our priority. The Board is investing in the future to assure the availability of comprehensive mental health and addiction services, including a full continuum of recovery supports to provide a Recovery-Oriented System of Care.

Joe Trolan, Executive Director

Mental Health and Recovery Services Board of Richland County

Richland County is working to evolve the evidence-based model of Recovery-Oriented System of Care to a Trauma-Informed Recovery-Oriented Community of Care. The purpose of this change is to empower all residents of Richland County to become partners in creating an effective community. The Community of Care project involves implementing an organizational trauma-informed care (TIC) approach, in combination with recovery-oriented philosophies and principles. Rather than focusing on a specific technique or tool that can be used in the clinical setting, it is the hope that by changing the foundational environment, we will create fertile soil to grow several TIC and ROSC clinical techniques with customers and create a lasting change in the system as a whole.

In the first year the Trauma-Informed, Recovery-Oriented Community of Care (TIROCC) partners have all undergone detailed organizational evaluations performed by consultant L. Harrison Associates out of Pittsburgh, Penn. These evaluations included reviews of programs, interviews with staff at all levels, interviews with primary customers and referral sources. Each partner was given a report that pointed out where he/ she excelled, as well as opportunities for change.



Each partner chose certain elements of his/her report to supply to the Board and to be a part of a five-year, Trauma-Informed, Recovery-Oriented, system-wide strategic plan. This plan will be developed during the next few months and become a guiding document to address the behavioral health systems as we move into an era of Medicaid re-design and managed care.

Vickie Hare, Executive Director

Mental Health and Recovery Services Board

servicing Coshocton, Guernsey, Morgan, Muskingum, Noble, and Perry Counties

The Mental Health and Recovery Services Board serving Coshocton, Guernsey, Morgan, Muskingum, Noble, and Perry Counties is excited about all of the work underway to transform our local service system into a Recovery-Oriented System of Care. We are working with our clients and families, our provider agencies, our criminal justice partners, and our citizens to ensure that our communities understand that Recovery Is Beautiful. As our systems evolve we are truly embracing the recovery principles that guide a Recovery-Oriented System of Care.

Our local ROSC efforts are influencing how we develop programs and make systemic policy changes to ensure that our local system embraces all that comes with being truly recovery-oriented. We have provider agencies that have taken on the task of assessing their services from top to bottom to ensure that their programs and services are recovery-oriented. As a result, we've seen some tremendous changes, including changes in policies and practices, developing more alternative treatment and engagement options, increasing educational opportunities for staff, focusing on long-term outcomes for clients, and ongoing work to eliminate stigma. Our ROSC focus is also demonstrated by our Bridge Builders program that wraps services around high-utilizers and at risk adult clients with a mental illness where we've put in place a Saturday group activity to help reduce the number of emergency room visits occurring on weekends. We also facilitate criminal justice collaboratives in two of our counties and have a reentry and citizen circle helping ex-offenders transition back into the community in Muskingum County.

One of our recovery activities that we are most proud of is the annual Recovery Summit. For the last several years, we have partnered with the Belmont-Harrison-Monroe Board and the Washington County Board to host a Recovery Summit for individuals in our communities. The Recovery Summit is planned, organized, and facilitated by clients. This year, we hosted the 16th annual Recovery Summit and we had nearly 200 people in attendance. While addressing the crowd, James McDonald, the President/CEO of Six County, Inc. encouraged participants to live by this pledge: ***"I am proud! I am amazing! I am strong! I will fight! I will recover!"*** We believe this pledge and this message is one that can flow through our local Recovery-Oriented System of Care to provide hope and inspiration throughout our Board area.

BLUEPRINT PRINCIPLES, GOALS, AND ACTION STEPS

The goals and action steps for the Recovery Is Beautiful Blueprint have been updated for SFY 2017-2019. These updates include added emphasis on prevention and wellness, and continued prioritization of the involvement of individuals in recovery and the community in the overall development and management of the local Recovery-Oriented System of Care. The five principles, along with their corresponding goals and action steps, are as follows:

1. Focusing on Clients and Families

Principle

Healthcare is personal and is most effective when it is delivered based on the needs and values of the individual receiving care. A Recovery-Oriented System of Care allows individuals and families to drive the mental health and addiction services that they receive within their local community. (Research shows that recovery levels are highest when individuals are fully engaged.)

Goal

Fully involve clients and families in orienting Ohio toward a Recovery-Oriented System of Care encompassing mental health and addiction prevention, treatment, and recovery supports.

Action Steps

- Protect and enhance the rights of individuals with a mental illness and/or addiction
- Ensure that clients and families have the right to design, drive, and manage their own care.
- Ensure that all individuals are treated in the least restrictive environment accessible through the community.
- Through community education on mental illness and addiction, reduce stigma and discrimination.
- Ensure that communities have a system of recovery that includes prevention, treatment, and support services.
- Sustain the Recovery Is Beautiful Advisory Committee.
- Further engage clients and family members as participants in the local Recovery-Oriented Systems of Care.



2. Ensuring Timely Access to Care

Principle

Local Boards ensure that Ohioans have access to a continuum of high quality, culturally competent, integrated care that is available in a timely manner for individuals and families in need of treatment and recovery supports.

Goal

All clients will be engaged in needed mental health and addiction treatment in a timely manner with sustained recovery management.

Action Steps

- Increase access to the ROSC continuum of mental health and addiction services for individuals, regardless of where they live or their ability to pay, including:
 - Increase access to crisis and detox services.
 - Enhance approaches to engagement in services.
 - Improve access to treatment and recovery support services by removing barriers.
 - Improve retention in services.
 - Establish and implement recovery management processes.
- Increase the number of practitioners available to provide mental health and addiction services, including medication assisted treatment and psychiatric services for both youth and adults.
- Increase the number of benefit specialists helping clients enroll in Medicaid and other coverage.
- Increase coordination with managed care organizations to help integrate services.
- Increase access to peer and recovery supports.



3. Promoting Healthy, Safe, and Drug-Free Communities

Principle

Local Boards promote the health, wellness, and safety of children, adults, and communities by offering a Recovery-Oriented System of Care that includes prevention, community education, crisis services, treatment, and recovery supports, such as housing, employment supports, and peer support. When individuals in healthy and stable recovery meet their fullest potential, businesses have access to a healthy, drug-free workforce, and families and communities flourish.

Goal

Strengthen a culture of partnership and collaboration (with local providers, businesses, law enforcement, criminal justice, faith-based and veterans' organizations, schools, child welfare, public health, and healthcare systems, etc.) to provide community education and prevention, reduce stigma, and allow for greater opportunities for individuals and families to achieve wellness and thrive in their communities.

Action Steps

- Ensure an array of treatment services and recovery supports, including: transportation, housing, peer support, supported employment, etc.
- Provide education and awareness that help the general public identify early, understand, and respond to mental illness and addiction.
- Create, sustain, and enhance local task forces and coalitions based on identified community needs to engage community leaders and citizens to respond to and address emerging issues.
- Promote and support prevention and wellness programs within schools and communities that support recovery, resilience, and the development of healing, safety, and protective factors.
- Promote public safety by educating, collaborating with, and supporting state and local criminal justice, law enforcement, and judicial systems focusing on mental illness and addiction.



4. Prioritizing Accountable and Outcome-Driven Financing

Principle

Maximizing the use of federal, state, and local funds to meet locally identified outcomes, ADAMH Boards utilize a blended funding approach that aligns resources and improves coordination among local community stakeholders. This approach enhances accountability and allocates scarce taxpayer dollars in the most efficient and effective manner possible.

Goal

Improve the performance of recovery supports by increasing the effective and efficient use of resources.

Action Steps

- Annually measure approved outcome/output measures.
- Define and establish consistent and acceptable administrative cost standards and parameters.
- Build on the success of shared service arrangements, looking across the system.
- Develop, define, and educate on outcome-based contracting measures.
- Enhance and promote the delivery of high quality, cost-effective mental health and addiction treatment and recovery services in order to improve individual health.
- Develop and implement a resource strategy for implementing Recovery Is Beautiful Recovery-Oriented Systems of Care at the local level.



5. Locally Managing Mental Health and Addiction Systems of Care

Principle

Healthcare is delivered locally, and individuals and communities are best served when the healthcare system is designed and managed locally. Innovation driven at the community level will lead to the implementation of improved mental health and addiction service delivery solutions. By planning for, designing, managing and advocating for adequate financing, Boards, working with their local partners, are able to determine what works best in their communities. This type of planning and coordinating requires a systems approach and effective collaboration among local stakeholders, including: schools, law enforcement, child welfare, the courts, human services, healthcare, businesses, employment services, and others.

Goal

Working with their local partners, ADAMH Boards shall plan for and manage a local system that provides individuals with access to a holistic model of care and wellness that integrates physical and mental health and addiction services with the social and emotional supports necessary to achieve and maintain recovery.

Action Steps

- Train all governing board members on their roles, rights, and responsibilities, along with the Ohio ethics and sunshine laws.
- Educate the community on local Board roles and responsibilities in managing Recovery-Oriented Systems of Care.
- Strengthen public and private partnerships across local communities and the state, while educating, advocating, facilitating, and coordinating a local Recovery-Oriented System of Care.
- Actively acknowledge and address local emerging issues utilizing best practices.
- Utilize the ROSC self-assessment to assess and improve the quality of services by seeking input from clients, families, and stakeholders.
- Ensure the provision of culturally and linguistically appropriate services (CLAS) and supports.
- Continue to work with state and local partners to further integrate physical and mental health and addiction treatment, services, and supports.
- Partner with managed care organizations and other community organizations to integrate their roles within the Recovery-Oriented System of Care.



CONTINUING FORWARD

The Recovery Is Beautiful BluePrint is a long-term strategy for moving Ohio's mental health and addiction continuum of care away from a crisis-oriented and professionally directed model, toward a Recovery-Oriented System of Care. This ROSC is a solution-focused approach where communities manage their local system of programs, services, and supports, while the person needing services directs his/her own process of recovery. Local Alcohol, Drug Addiction, and Mental Health Boards, working with all of the stakeholders (healthcare, law enforcement, the judiciary, education, businesses, local politicians, etc.) throughout their communities are looking at the overall health of the community and designing programs and services that help the community become and stay healthy, safe, and drug-free.

For individuals in recovery, a ROSC addresses the importance of ongoing supports, including peer support, housing, transportation and employment supports. By moving Ohio to a Recovery-Oriented System of Care we have placed the emphasis on people instead of systems. We continue to change the conversation so that everyone understands that mental illness and addiction are chronic illnesses, that treatment works, and all people have the potential to recover. When we all celebrate recovery, we say it is okay to admit that you have a mental illness and/or addiction, that we will help you, and most importantly, that there is hope!



Recovery Is Beautiful

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