

AMBASSADOR HANDBOOK

Community Mental Health: A Valuable System for Valued People



Be an advocate for adequate funding of Michigan's Public Mental Health System.
Visit the Advocacy Center Online at: www.macmhb.org

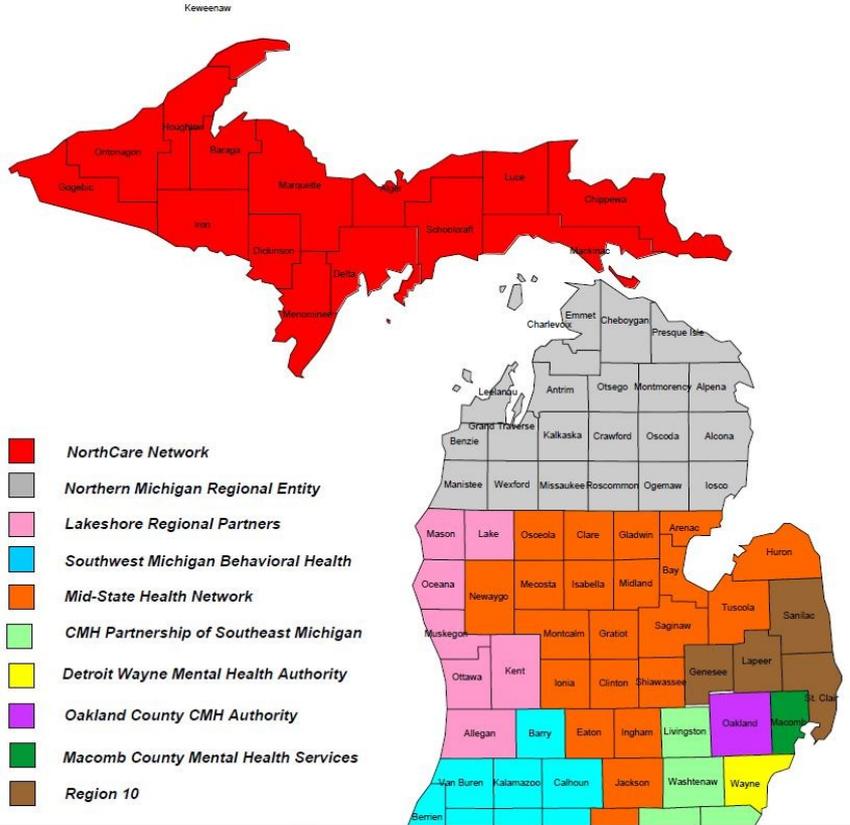
Michigan's Public Mental Health System

Service Delivery System

Community Mental Health Services Programs (CMHSPs) – The forty six (46) CMHSPs and the organizations with which they contract provide a comprehensive range of mental health services and supports to children, adolescents and adults with mental illnesses, developmental disabilities and substance use disorders in all 83 Michigan counties. [\(CMH Directory\)](#)

- Medicaid Prepaid Inpatient Health Plans (PIHPs) – Ten (10) PIHPs manage the services and supports for persons enrolled in the Medicaid, MICHild, Healthy Michigan Plan, Autism services and substance use disorder programs.
 - Seven (7) of these regional entity PIHPs are made up of an affiliation of multiple CMHs (as few as 4 and as many as 11). These affiliations were created in order to realize administrative efficiencies in managing services and to provide a sufficiently large base of Medicaid enrollees to manage the risk-based, capitated funding system used to finance the system of care for Medicaid beneficiaries.
 - PIHPs contract with the CMHs and other providers within the region to deliver services.
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Michigan PIHP Restructure



Michigan's Public Mental Health System

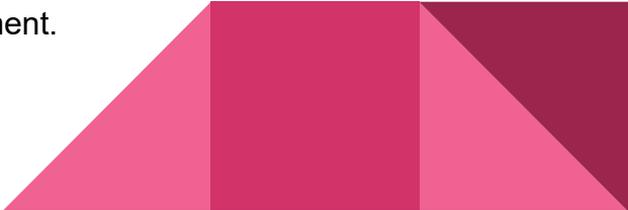
Vision

All people in Michigan will have access to a public mental health and substance abuse services system that supports individuals with mental illness, emotional disturbance, developmental disabilities, and substance use disorders.

Mission

To provide leadership by establishing, articulating, and implementing policies, standards and practices that assure high quality, effective and efficient services and supports The Behavioral Health and Developmental Disabilities Administration is located within the Michigan Department of Community Health (MDCH).

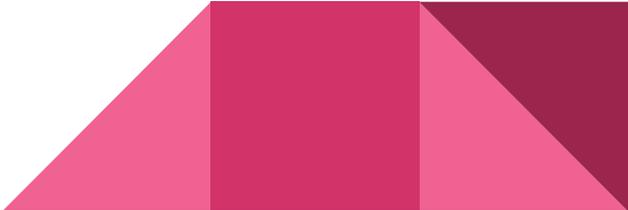
The administration carries out responsibilities specified in the Michigan Mental Health Code, the Michigan Public Health Code and administers Medicaid Waivers for people with developmental disabilities, mental illness, serious emotional disturbance and substance disorders. Public Act 258 of 1974 codified, revised, consolidated and classified the laws relating to mental health. The Public Health Code defines the laws for substance abuse treatment.



Who Receives Services

Section 208 of the mental health code establishes service priorities for CMHSPs as to who receives services.

MUST SERVE

- Persons in emergent / crisis situations
 - Persons with more severe forms of severe mental illness (SMI), serious emotional disturbance (SED), intellectual developmental/disability (IDD), and substance use disorders (SUD)
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Who Receives Services

Section 208 of the mental health code establishes service priorities for CMHSPs as to who receives services.

IF FUNDING EXISTS

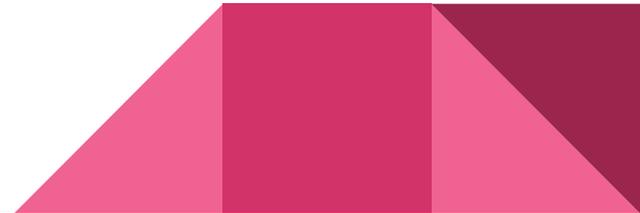
- Persons with SMI, SED, and I/DD
- Mild/moderate mental illness,
- The general community including prevention.

Due to dramatic general fund shifts in recent years those persons in categories 3 – 5 for most parts of the state are not receiving services. Ability to Pay (ATP) is taken in account for those that do not have insurance (Medicaid or private insurance). People cannot be denied services because of an inability to pay. If a person does not have Medicaid or private insurance their ability to receive services is based on the severity of their condition.



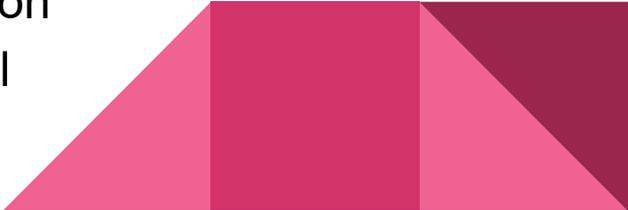
Waitlists

If a condition is NOT considered severe, individuals may be placed on a waiting list depending on the county in which they live. Unfortunately, many people who are on wait lists never receive services. In order for those individuals on waiting lists to receive services their condition must worsen to a crisis state where they become a threat to themselves or the community. Many instances these individuals will seek treatment in more costly settings such as emergency rooms and/or county jails.



How Do People Access Service

All CMHSPs must have & advertise points of access within 30 minutes or 30 miles (rural exceptions) and 24 hour emergency service. When someone asks for help, a brief evaluation will result in a referral within 15 days for ongoing service. In emergent situations the person must be served within 3 hours.

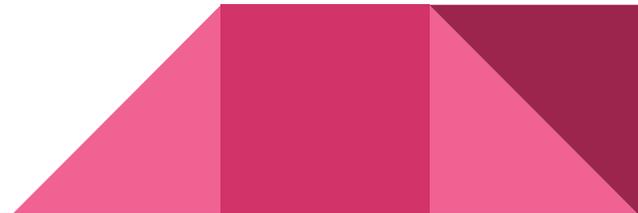
- People have a choice of provider
 - People must sign a permission for treatment form
 - People must complete the financial determination
 - People denied service may have a second opinion
 - People may file appeals at the local & state level
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Service Supports

What is Customer Services?

Every Community Mental Health (CMH) system is required to have a Customer Service Department to help people navigate the public mental health system and to assist with other related issues. In some CMH's the Customer Service Department directs phone calls coming in to the agency and in others their function consists of giving information to callers or assisting those who want to apply for services. They can assist consumers and family members in navigating the public mental health system. They can provide information about the appeals and grievance process, and may serve as an advocate for consumers accessing services within the agency and resources in the community.

Each CMH is required to have a live answer to the Customer Service phone during regular business hours. An automatic phone service can be difficult for some people; Customer Service is designed to make access easier with person to person communication. This department is set in place to assist people with issues that come up in applying for services or in dealing with public mental health services.



Service Supports

What is Recipient Rights?

People receiving services from a CMH have certain rights guaranteed to them by the Michigan Mental Health Code. The Office of Recipient Rights is responsible for completing investigations of suspected rights violations. These rights violations are generally reported to the office by consumers of services or someone close to them. Upon receipt of a complaint, the Rights Officer or Rights Advisor starts an investigation by interviewing all of the people involved with the alleged violations. The person that filed the complaint gets regular updates on the status and results of the investigation. If it is determined that a rights violation has occurred, specific action is taken to make sure this does not happen again.

Every person who receives services from a CMH gets a copy of "Your Rights," a booklet published by the Michigan Association of Community Mental Health Boards. Each CMH purchases these booklets from them. To learn more about the rights protection system, contact the Rights Office within your CMH.

If you want to learn more about Community Mental Health, please refer to your Michigan Community Mental Health Customer Services Handbook.



Myths vs. Reality

Myth:

Mental illness does not affect the average person.

Reality:

No one is immune to mental illness. The National Institute of Mental Health's statistics show one in five Americans have some form of mental illness in any given year.

Myth:

Most people who struggle with mental illness live on the streets or in psychiatric hospitals.

Reality:

About two thirds of Americans who have a mental illness live in the community, either with their family or in a community living settings.

Myth:

Children do not get mental illness.

Reality:

Twelve million children and adolescents suffer diagnosable mental disorders including depression, attention deficit disorders, and conduct disorder.



Famous Persons with Mental Illness

Jimmi Hendrix
bipolar

Winston Churchill
bipolar

Princess Diana
Eating disorder

John Keats
bipolar

Elton John
Bulimia nervosa

Carly Simon
social phobia

Boris Yeltsin
depression

Cole Porter
depression

Tipper Gore
depression

Vaslav Nijinsky
schizophrenia

Kurt Cobain
*bipolar
addict*

Richard Dreyfuss
depression

Dick Clark
depression

Edgar Allan Poe
depression

F. Scott Fitzgerald
depression

Charles Schultz
depression

Ludwig van Beethoven
bipolar

Virginia Woolf
bipolar

Leo Tolstoy
*Depression
hypochondriasis*

Charles Dickens
depression

Kitty Dukakis
bipolar

Sarah Melbaehlan
depression

James Taylor
*depression
bipolar*

Patty Duke
bipolar

Ted Turner
bipolar

Sigmund Freud
depression

Abraham Lincoln
depression

Harrison Ford
depression

Courtney Love
depression

Francis Ford Coppola
bipolar

Jim Carrey
depression

Sylvia Plath
depression

Ernest Hemingway
depression

Audrey Hepburn
depression

Kim Basinger
panic disorder

Winona Ryder
depression

Drew Carey
depression

James Garner
depression

Drew Barrymore
depression

Vincent Van Gogh
bipolar

Ray Charles
depression

George Fredrick Handel
bipolar

Marilyn Monroe
bipolar

Ernest Hemingway
depression

Theodore Roosevelt
bipolar

Isaac Newton
bipolar

Anthony Hopkins
depression

John Nash
schizophrenia

Natalie Cole
depression

Irving Berlin
depression

Paula Abdul
Bulimia nervosa

Janet Jackson
depression

Axl Rose
bipolar

Eric Clapton
depression

Barbara Streisand
social phobia

Charles Darwin
panic disorder

Sheryl Crow
depression

Myth vs. Reality

Myth:

A person can recover from a mental illness by thinking positively and praying.

Reality:

Recovery is possible when the person receives treatment and supportive services.

Myth:

People who have a mental illness are dangerous.

Reality:

Most individuals suffering from even the most severe mental illness are much more likely to make them victims of violence, not perpetrators.

Myth:

If people with other disabilities cope on their own, people who have a mental illness should be able to as well.

Reality:

Most people who have been through a disabling illness need help, or rehabilitation. Physical therapy often fills this role after physical illness. Similarly, following mental illness, social rehabilitation is often needed.



Famous Persons with Developmental Disability



Abbey Nicole Curran: **Pageant Contestant**

Abbey Curran represented Iowa at the Miss USA 2008 pageant in Las Vegas, held on April 11, 2008. Abbey was born with Cerebral Palsy.



Marlee Matlin: **Actress**

Marlee Matlin is a stand-up comedian and an actress. Some of her films include *Dead Silence*, *It's My Party*, *Hear No Evil*, and *Children of a Lesser God*. In 1987, she won the Academy Award for Best Actress in the film *Children of a Lesser God*. Marlee Matlin became deaf in infancy due to Roseola infantum.

Temple Grandin, Ph.D.: **Professor, Author & Speaker**

Temple Grandin has been featured on major television programs, such as *Primetime Live* and *20/20* and written about in *Time* and *People* magazines. Dr. Grandin Professor of Animal Science at Colorado State University. Temple has autism.



Vernon L. Smith: **Nobel Laureate**

Currently a Professor of Economics and Law at George Mason University. Vernon has autism.



Franklin D. Roosevelt **President**

He was the 32nd President of the United States. While vacationing at Campobello Island, New Brunswick, Roosevelt contracted an illness, at the time believed to be polio, which resulted in his total and permanent paralysis from the waist down.

Brian McKeever **Olympic Athlete**

At 19, Brian began losing his vision due to Stargardt's disease. He is the first Canadian athlete to compete in both the Paralympic and Olympic teams and has won multiple gold medals.



Jane Cameron: **Artist**

Jane's embroidered tapestries are glowing statements of her imagination and her love for life.. Her tapestries are on display throughout the world and have been showcased in numerous magazines and books. Jane has Down syndrome.



Danny Glover **Actor**

Danny Glover struggled with dyslexia at school when he was younger and staff labeled him retarded. He also developed epilepsy at the age of 15 and once had six seizures in a row during a cross-country trip with his family.

John Cougar Mellencamp **Singer**

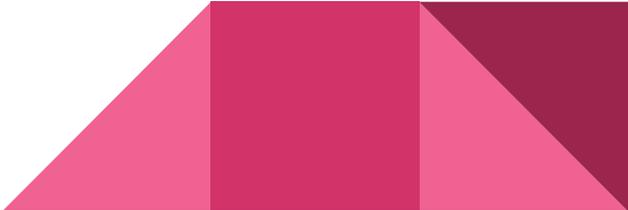
John Cougar Mellencamp is best known for being an American rock singer-songwriter. As a child he experience a number of setbacks, including being born with spinal bifida. He formed his first band at the age of 14.



Advocate For Yourself & Others

Advocacy is:

The act or process of supporting a cause or proposal: the act or process of advocating for something or someone. In practical terms, advocacy is a form of problem solving. It is finding the best way to improve a situation. Problem solving is used to:

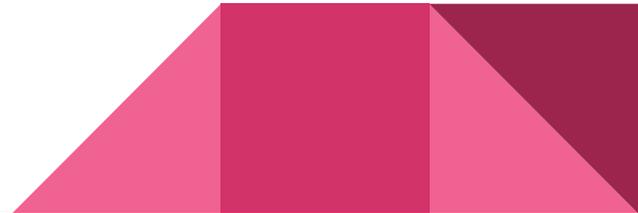
1. Protect the rights of people to receive fair, equal, and human treatment.
 2. Improve services, eligibility for services, and enhance service quality
 3. Ensure adequate funding is made available for valuable services that improve the lives of individuals with disabilities.
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Advocate For Yourself & Others

An Advocate is a:

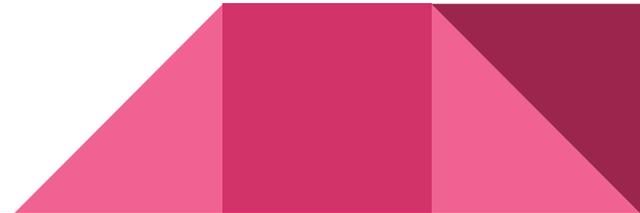
- Person who supports and champions for a cause or policy
- Person who works for a cause or group
- Person who argues for the cause of another person in a court of law

Effective advocates influence public policy, as well laws and budgets by using facts, their relationships, the media, and messaging to educate government officials and the public on the changes they want to bring for themselves, their family, and their community.



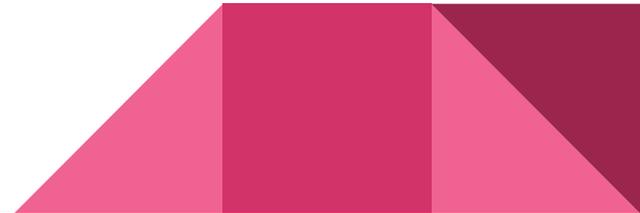
Tips for Effective Advocacy

- **Know the Facts:** To gain and maintain credibility, it is critical that you have all of the facts on both sides of any issue. Having this information at your finger-tips will help you in conversations with government officials, the media, other advocates, and the general public.
- **Use the Facts:** Any position you take should be grounded in the facts. It is often helpful to put your facts into a one-page fact sheet that you can distribute.



Tips for Effective Advocacy

- **Have Clear and Concise Message:** Government officials, the press, and the general public do not have time for long conversations or documents—you need to get to your point quickly and concisely. Remember to watch out for the jargon and acronyms used in different fields—you want everyone to understand the issues you are discussing.
- **Nurture Relationships and Collaborative:** Advocacy is a joint venture—you need to find your allies and work with them. Your chances of success are much greater when there are large numbers of organizations and people on your side.



TIPS FOR EFFECTIVE ADVOCACY

- **Engage the Public:** Use the media, social media, petitions, letters, e-mails and other grassroots strategies to engage as many people as you can. Remember numbers speak loudly to elected officials!
 - **Make your Voice Heard:** Make sure you spread the word—through meetings with government officials, press conferences, letters, petitions, rallies, phone calls, social media. Talk about what you are advocating for at dinner parties and social events. You never know who can become a useful ally.
 - **Say Thank You:** Remember that everyone is busy and their time is valuable. Keep your meetings short and always say thank you afterwards. When your advocacy is a success, always thank everyone who helped you achieve your victory!
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Interacting with Your State Lawmaker

Every business should have a working knowledge of government relations in order to establish two-way communication with its elected representatives. Our purpose is to build and maintain productive relationships with state and federal legislators to maximize their support for strengthening the health care system. Please refer to any policy your agency may have regarding working with legislators.

Overview of the Legislative Process

A new two-year legislative session began January 2015.

- 110 state representatives (56 votes needed for passage, some exceptions)
- 38 state senators (20 votes needed for passage, some exceptions)
- Term limits: House members are limited to three 2-year terms; Senators are limited to two 4-year terms; statewide officials are limited to two 4-year terms
- Session days – Tuesday, Wednesday and Thursdays throughout most of the year

Advocacy – What works best?

Lobbying vs. Public Relations:

Independent, but supporting functions: Lobbyists work to educate and convince lawmakers to take a certain position. Public Relations works to support lobbying functions, through media relations, grassroots mobilization and communication

Elected officials are motivated in varying degrees by three generally accepted principles:

Policy	Are you right on the issue? Which groups support or oppose? Where is the party or leadership?
Politics	Will this hurt re-election efforts? Where is the public? Political contributors?
Advocacy	Are there organizations, corporations and grassroots behind the issue?

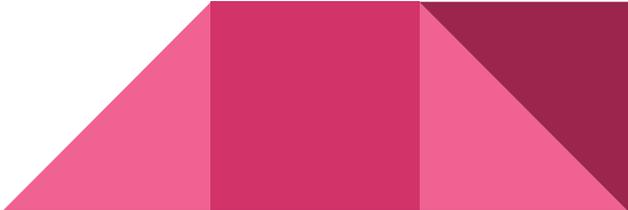
Working With Legislators

Tips for Advocating with Your Legislator:

- Stay solution focused. Work toward win-win strategies.
 - Be prepared to explain your legislative interest in detail. Explain your problem, and then propose a solution.
 - Know the details of what you are advocating for: a bill number, the status of the proposal, costs, etc..
 - Make sure to communicate to the correct level of government (county, state, federal).
 - Timing is important. Learn the decision-making process and communicate to the official when he/she has a say in that process.
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Working With Legislators

Tips for Advocating with Your Legislator:

- Know the position of other organizations: who supports/does not support an issue.
 - In-person meetings, while difficult to arrange, are most beneficial.
 - Keep in mind that things change as they go through the process. Do not expect a commitment if the final product is in doubt.
 - Always remember to let your elected official know that you appreciate any help he or she may have provided.
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Working With Legislators

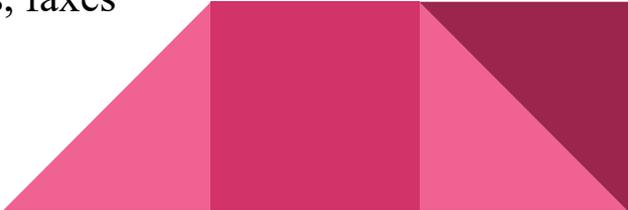
Identifying the committee and departments that impact your issue

- Policy committees debate policy issues that don't involve spending
- Appropriation committees debate spending decisions
- Identifying the committee members and their staff



Working With Legislators

Out of sight is truly out of mind

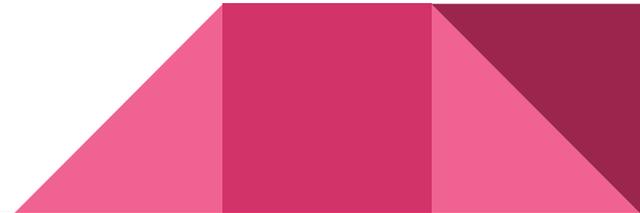
- Meet with lawmakers in their district on Mondays and Fridays at Coffee meetings, Facility Tours, and District Hours
 - Meet with lawmakers in Lansing, typically on Tuesday, Wednesday or Thursday at Office meetings, Capital Days, Receptions
 - Invite lawmakers to your board meetings or conferences
 - Contact lawmakers through personal letters, emails, phone calls, faxes
 - Form letters rarely work
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Working With Legislators

For More Information or Help

Visit www.legislature.mi.gov to review legislation, bill analyses and public acts. You can also review committee meeting notices, journals and calendars.

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