

## **ODADAS/ODMH Department Consolidation**

### **Treatment & Community Supports Consolidation Workgroup Summary and Recommendations**

The purpose of the Treatment and Community Supports Work Team is to identify the similar and separate functions of each agency and establish a set of recommendations for the consolidated Department. These recommendations will be a platform to allow the integration of these services, acknowledge the unique areas, provide suggestions for ongoing structure and functions, and support an integrated delivery system for treatment and community supports needs for the new Department.

#### **Framework Considerations:**

- Transition offers opportunities for business improvement
- Encourage increased coordination and collaboration across local and state systems
- Make services more readily accessible and minimize “wrong door” experiences
- Reduce fragmentation of services
- Streamline work processes for stakeholders
- Improve communication to the field
- Improve efficiency by reducing administrative burden and duplication of efforts
- Improve the continuum of care for dually diagnosed clients
- Improve quality teams for community resources
- Encourage and develop measures and outcomes
- Reduce disparities/increase equity with regard to access to quality services and supports

#### **Process:**

The Treatment and Community Supports Workgroup is comprised of internal staff from each agency and external stakeholders. A four step process for developing recommendations to be considered was utilized:

1. Inventory of current functions, common and unique, through existing staff from both agencies.
2. Draft results and send to identified stakeholders for review.
3. Seek stakeholder input.
4. Use internal and external feedback to finalize recommendations to be presented to the Treatment and Community Supports Work Team for consideration for consolidating services.

#### **Principles/Approaches:**

- Recovery/Resiliency Focused
- Consumer/Youth Guided
- Family driven as indicated (based on the population)
- Culturally Competent
- Trauma-Informed
- Community Base/In Vivo
- Individualized/Person Centered
- Continuum of Care Approach
- Evidence-Based/Promising Practices
- Ensure the provision of developmentally and age appropriate services
- Acknowledge and respect the distinct/unique approaches to treatment for AoD and mental health populations
- Understand the importance and need to ensure treatment in the least restrictive environments

### **Outcome Goals:**

- Improve access to quality comprehensive services
- Improve behavioral health outcomes

### **Process Goals:**

- Lower anxiety regarding the transition for staff and stakeholders
- Ensure no noticeable gaps in current services offered by the Departments
- Single system to improve efficiency of the delivery of care

### **Priority Populations:**

#### **1) Unique to ODADAS**

- Pregnant Women
- Women with Children
- IVDU

#### **2) Unique to ODMH**

- SPMI (Adults and Transitional Age Youth)
- SMI (Adults and Transitional Age Youth)
- SED (Children)

#### **3) Common and Shared Priority Populations**

- Criminal Justice
- Veterans
- Adolescents and Young Adults
- Dually Diagnosed
- Gambling
- Immigrants
- Aging
- DD
- Children, Youth, and Young Adults

### **Workforce Requirement:**

- Trained workforce skilled in treating addiction and mental illness using evidence-based practices
- Ensure license and/or credentialing staff will promote evidence-based and promising practices specific to addiction and mental health populations

### **Functions: (see next page)**

- Special Populations
- Criminal Justice
- State/Local Partnership

## Functional Array of the Department of Mental Health and Addiction Services

Function		Includes (but not limited to)
1	Medical Director	AOD lead and MH lead
2	Special Populations	Children; Women, particularly pregnant/parenting; Cultural competence; Gambling; Other...
3	Criminal Justice	MH forensic services; Specialty dockets and service integration; Partnerships with DRC, DYS; Therapeutic Communities; TASC and specific community interventions
4	State/Local Partnership	Community plan; Block grant planning processes; Residency processes; ADAMH board appointments; Targeted employment initiatives; Benefits integration; Diversity and inclusion
5	Physical/Behavioral Health Integration	Medicaid policy; Telemedicine and community EHR technical assistance; MACSIS/MITS coding alignment
6	Prevention	Substance use prevention; Mental health wellness; Stigma reduction; General concept of health promotion
7	Research & Evaluation	Research and evaluation; Outcomes and process improvement; Technical assistance
8	Hospitals	Hospital policy/administration; Emergency preparedness; Survey prep, external clinical consultation, etc.
9	Legal & Regulatory	Legal services; Licensure and certification; Provider relations; PASRR
10	Fiscal	Budget; Operations; Community and hospital services
11	Human Resources	Human capital management; Benefits; EEO; Professional development
12	Office of Support Services	Central pharmacy; Pharmacy services; Food/supply procurement and distribution
13	IT	Project management; Production support; Desktop support and help desk; Network infrastructure; Information delivery; Architecture; Enterprise solutions
14	Public Affairs	Communications; Client Rights; Legislation
15	Housing & Capital	Hospital physical facility management; Housing policy; Community technical assistance
16	Workforce	System capacity development; Evidence-based practices