## DMH CONSTITUENT SERVICES: ADVOCATING – SERVING – SUPPORTING



Michelle Gerstner, Director Amy Miller Barnes, Coordinator



## Purpose of the OCS

- Office of Constituent Services (OCS) was created in 1997 to advocate for individuals (and their families) who receive services for developmental disabilities, mental illnesses, and substance use disorders.
- Primarily guided by:
  - Missouri Revised Statutes Chapter 630
  - Missouri Code of State Regulations Title 9
- OCS staff understand the unique challenges facing DMH constituents and their families.
  - OCS employees have personally experienced one or more of these conditions and/or have a family member with lived experience.



# **Roles and Responsibilities**

- Process contacts from a variety of methods and sources, including:
  - ▶ Phone, email, fax, standard mail, walk-in, internal routing.
  - ▶ Governor's Office, Depts. of Social Services and Health & Senior Services, MO Protection & Advocacy, peer groups/organizations.
- Review and research to determine routing/processing.
- Provide copies of DSS/DHSS reports to Investigations Unit (IU) upon request.
- Provide training and presentations to public mental health and/or developmental disabilities groups regarding abuse and neglect, rights awareness, and reporting of suspected violations.



# **Roles and Responsibilities**

- Development of Consumer Safety and RESPECT Institute brochures\*:
  - Provides statutory definitions of abuse/neglect, describes warning signs, gives 'story' examples, and provides resources for reporting (DMH OCS and DSS + DHSS Hotlines).
- Educate consumers, their guardians/family members, other agencies, and the general public regarding:
  - Consumer rights, the grievance process, consumer safety (abuse/neglect of vulnerable persons), and assist those who may have difficulty understanding content of written materials.

<sup>\*</sup>Consumer safety brochure (created in 2008) and RESPECT Institute brochure (last revised in 2012) will be updated in 2018.



# **Roles and Responsibilities**

- Host booths at conferences/events to distribute consumer safety information and help raise awareness of abuse/neglect of vulnerable persons.
- Provide training to internal staff (and, upon request, to peer groups and state government agencies) on:
  - ▶ Mental health in the workplace: customer service and situation de-escalation; effective and positive communication; taking care of your own mental health first.
  - ▶ Given in conjunction with Mental Health First Aid overview.
- **RESPECT Institute (RI):** 
  - Director of the OCS serves as Statewide Coordinator for the RESPECT Institute.
  - OCS oversees and coordinates all aspects of RI in Missouri.



## **Senate Bill 3**

- 2007: Senate Bill 3 introduced by Senator Michael Gibbons (R), Kirkwood
  - Signed by Governor Matt Blunt: July 13, 2007
  - Effective date: August 28, 2007
- Modified various provisions relating to mental health, including:
  - Defined "vulnerable person", created the crime of "vulnerable person abuse", and provided for mandatory reporting and investigation protocols.
  - Required that reports of suspected abuse/neglect received by the Departments of Social Services (DSS) and Health & Senior Services (DHSS) be forwarded to DMH.



### **Senate Bill 3**

- Designated DSS and DHSS abuse hotlines as alternative means of reporting suspected abuse/neglect of DMH consumers.
- ▶ DMH created Memorandum of Understanding (MOU) with DSS and DHSS for sharing of information (PHI).
  - Relationships built with DSS and DHSS hotline supervisory staff.

#### As a result of SB 3:

- Methods of receipt changed -
  - Prior to SB 3 (1997-2006): majority of contacts came directly from constituents and/or family members via telephone and standard mail.
  - After SB 3, increase in the daily email volume due to DSS/DHSS reports = up to 40% of contacts received.



### **Contacts**

### Contact History: 2012 to 2016 by Source\*

	2012		20:		
SOURCE	Total	%	Total	%	Change
- Consumer	451	26%	882	34%	+8%
- Consumer Relative	85	5%	148	6%	+1%
- DMH Staff	10	1%	94	4%	+3%
- DHSS Hotline	360	20%	484	19%	-1%
- DSS Hotline	730	41%	642	25%	-16%
- Anonymous	62	3%	64	2%	-1%
- Non-DMH/Other	69	4%	248	10%	+6%
Total Contacts	1767		2562		+31%

<sup>\*</sup>Historical data prior to 2012 not available at time of this report



### **Contacts**

### Third Quarter Comparison: 2015 to 2017 by Source

	2015 – Q3		2017		
SOURCE	Total	%	Total	%	Change
- Consumer	273	40%	270	36%	-4%
- Consumer Relative	26	4%	50	7%	+3%
- DMH Staff	19	3%	20	3%	0%
- DHSS Hotline	124	18%	169	23%	+5%
- DSS Hotline	133	19%	156	21%	+3%
- Anonymous	17	2%	19	3%	+1%
- Non-DMH/Other	99	14%	56	7%	-7%
Total Contacts	691		740		+6%



### **Contacts**

### Third Quarter Comparison: 2015 to 2017 by Reason/Method

	2015 – Q3			2017		
REASON	Total	%		Total	%	Change
- Care/Treatment	511	74%		547	74%	
- Consumer Safety	45	7%		94	13%	+6%
- Enviro Cond/Other	68	10%		41	6%	-4%
- Guardianship/Info	50	7%		48	6%	-1%
- Medication	17	2%		10	1%	-1%
- Total Contacts	691			740		+6%
METHOD = Phone	345	49.93%		235	31.76%	-18%
METHOD = Written	342	49.49%		504	68.11%	+19%
METHOD = Other	5	<1%		1	<1%	



## **OCS** and the RESPECT Institute

- In 2001, Fulton State Hospital (FSH) hired Joel Slack, internationally known mental health consumer and advocate, as a consultant to present his RESPECT Seminars to facility staff and residents.
- RESPECT is an acronym for the seven qualities Mr. Slack believes describe respectful behavior: Responsive, Encouraging, Sensitive, Perceptive, Empowering, Caring, and Thoughtful.
- FSH administration asked Mr. Slack to help consumers become more involved in staff training and other activities at the hospital.



## **RESPECT Institute in Missouri**

- With assistance from Dr. Jane Smith, the chaplain at FSH, Mr. Slack facilitated the first RESPECT Institute (RI) in 2002 to teach a group of FSH residents to tell their stories.
- Starting in 2007, Mr. Slack presented the first RESPECT seminars to staff and residents of all DMH psychiatric facilities as well as communities throughout Missouri.
- In 2008, Mr. Slack established RESPECT Institutes at all DMH psychiatric facilities.



# The RESPECT Institute Today

- Regional RI Coordinators facilitate trainings, cultivate community support, schedule speaking engagements, and accompany RI members to speaking venues.
- Monthly meetings allow RI members to discuss speaking experiences, to practice their speeches, to assist the newer participants with improving their speeches, and to volunteer for speaking engagements.
- RI includes members who have many different diagnoses some co-occurring such as mental illnesses, developmental disabilities, and substance use disorders.
- RI participants revealed they felt more empowered and had increased self-awareness following the RI training.



## **Evaluations of the Program**

In 2012, the Missouri Institute of Mental Health conducted a survey to assess the effectiveness of RI presentations to educate and reduce stigma among audience members.

### Personal Experience with Mental Illness

- Respondents were asked about their own experiences with mental illness. They were asked whether they:
  - Had experienced a mental health problem, and
  - If anyone in their family ever experienced a mental health problem.
    - Approximately one-quarter (24.5%) reported having personally experienced a mental health problem, and
    - Over half (63.3%) reported having someone in their family who had experienced a mental health problem.



# **Evaluations of the Program**

#### **Desire for Social Distance**

- Respondents were also asked a series of questions designed to address the stigma they attach to mental illness.
- Results indicate that respondents were more willing to interact with someone who has a mental illness, after having listened to a RESPECT presentation.
  - ▶ Before hearing the RI speakers, only 49.5% of audience members said they would consider being friends with a person who has a mental illness.
  - ▶ Following the presentations, 73.2% said they would definitely consider being friends with a person who has a mental illness.



## **Evaluations of the Program**

#### Community Attitudes toward Mental Health

- The survey also measured public attitudes and community contact with those who are mentally ill. It included five statements concerning respondents' willingness to interact with individuals with mental illness: Conversation With Work Closely With Maintain Friendship With Live Next To Diagnosed Family Member Marry into Family.
  - ▶ Results provide evidence that respondents had **improved attitudes** toward individuals with mental illness, **after having listened to a RESPECT presentation**.
  - Percentage of those who responded "Strongly Agree" increased for every item from pre- to post-test.
  - Most pronounced changes occurred in areas of social restrictiveness.



### **Positive Results**

- ✓ Jan 2013 Dec 2016, RI speakers presented at 1,465 venues.
- Venues included staff and consumers meetings/trainings at DMH psychiatric facilities and private provider locations, colleges and universities, high schools and middle schools, law enforcement agencies, service club meetings, and churches.
  - Psychiatric facility staff receive SMART / ART Training: SMART = Situational Management and Response Training / ART = Annual Refresher Training.
  - ▶ Three day course focusing on staff's interactions with clients.
  - Emphasizes that interactions with clients should be respectful and trauma-informed. RI speakers illustrate the importance of treating clients with respect and dignity, rather than just their diagnosis.
  - ▶ Added value if speaker shares how an episode of restraint was traumatic or harmful to their relationship with staff guides staff to use all other available tools to prevent instances of restraint.

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### **Positive Results**

- RESPECT Institute members reported they felt encouraged to move forward with their treatment and recovery – and willingly volunteered to speak whenever/wherever requested.
- Engagements at those **1,465 venues** reached a total of **43,166** audience members who heard RESPECT Institute members share stories that illustrate how respectful treatment from mental health professionals and staff contributed to their recovery.
  - ▶ The majority of the audience members were reached by RI speakers facilitated by:
    - CBM Kansas City: 10,853 (27%)
    - FSH Fulton State Hospital: 10,400 (25%)
    - SMMHC Farmington (APS & SORTS): 7,841 (14%)
    - SLPRC St. Louis: 4,792 (12%)



### Missouri RESPECT Institutes

#### Central Region:

- Fulton State Hospital
- New Horizons Community Support Services
  - Columbia and Jefferson City

### Kansas City Region:

- Center for Behavioral Medicine
- Northwest Region:
  - ▶ Northwest Missouri Psychiatric Rehabilitation Center St. Joseph
- St. Louis Region:
  - St. Louis Psychiatric Rehabilitation Center
- Southeast Region:
  - Southeast Missouri Mental Health Center Farmington



# Today's RESPECT Speaker

## Meet Stella Hawley...

- Retired elementary teacher
- Graduate of Northwest Missouri State
  University degree in Elementary Educ.
- Mental health consumer since 1984
- > Joined Kansas City RESPECT Institute in 2014
- Certified Missouri Peer Specialist
- Peer educator in the CBM Rehabilitation Dept.
- Recipient of the 2017 Outstanding Consumer of the Year from Tri-County Mental Health Services, Inc. in Kansas City

