

**NORTHERN MICHIGAN REGIONAL ENTITY
SELF-DETERMINED ARRANGEMENTS PLAN
PLAN #: 07-05-002-14**

The Application for Participation (AFP) addressed several public policy initiatives, including Recovery. Self-determined arrangements are addressed as a key component of recovery. Systemically, self-determined arrangements are less frequently seen for adults with mental illness than for adults with intellectual/developmental disabilities. To address this, item 5.5.6 of the AFP states: By January 1, 2014, the applicant will have region-wide policies, procedures, and a process in place that support and encourage the opportunity for individuals with serious mental illness to participate in self-determined arrangements.

Current NMRE Self-Determination Protocols and Guidelines address the policy and procedure aspects of these requirements. Specifically, it states:

- I. Self-determination will be available in each Community Mental Health Services Program (CMHSP), for adults with intellectual/developmental disabilities and adults with mental illness. Each CMHSP will make a set of methods available that provide opportunities for the consumer to control and direct their services and supports arrangements.
 - A. Participation in self-determination will be a voluntary option on the part of the consumer.
 - B. Consumers will have the authority to select, control, and direct their own services and supports arrangements through authority over the resources allotted in an individual budget.
 - C. A CMHSP will assure that full and complete information about self-determination and the manner in which it may be accessed and applied is provided to each consumer. This will include specific examples of alternative ways that a consumer may use to control and direct an individual budget, and the obligations associated with doing this properly and successfully.
 - D. Self-determination will not serve as a method for a CMHSP to reduce its obligations to the consumer, or to avoid the provision of needed services and supports.
 - E. A CMHSP will actively support and facilitate a consumer's application of the principles of self-determination in the accomplishment of his or her Plan of Services.

- II. Self-determination will be available to each consumer who requests the opportunity to participate, and for whom an agreement on a Plan of Services and Supports, along with an acceptable individual budget, can be reached.
 - A. Development of an individual budget will be done in conjunction with development of a Plan of Services and Supports, using a person-centered planning process.
 - B. The individual budget represents the expected or estimated costs of a concrete approach to accomplishing the consumer's plan.
 - C. The amount of the individual budget will be formally agreed to by both the consumer and the CMHSP before it may be authorized for use by the consumer. A copy of the individual budget must be provided to the consumer prior to the onset of a self-determination arrangement.
 - D. Proper use of an individual budget is of mutual concern to the CMHSP and the consumer.
 1. Mental Health funds included in an individual budget are the property and responsibility of the CMHSP. Authority over their direction is delegated to the consumer, for the purpose of achieving the goals and outcomes contained in the consumer's plan.

2. An agreement shall be made in writing between the CMHSP and the consumer delineating the responsibility and the authority of both parties in the application of the individual budget, including how communication will occur about its use. The agreement will include a copy of the consumer's plan and individual budget.
3. An individual budget, once authorized, shall accompany the consumer's plan of service. It shall be in effect for a defined period of time, typically one year. Since the budget is based upon the consumer's plan of services and supports, when the plan needs to change, the budget may need to be reconsidered as well. In accordance with the Person-Centered Planning Practice Guidelines, the plan may be reopened and reconsidered whenever the consumer, or the agency, feels it needs to be reconsidered.
4. An individual budget shall be flexible in its use.
 - a. The consumer may adjust the specific application of funds within the budget between budgetary line items and/or categories in order to adjust his/her services and supports arrangements as he or she deems necessary to accomplish his/her plan.
 - b. Unless the adjustment deviates from the goals and objectives in the consumer's plan, the consumer does not need to seek permission from the CMHSP nor be required to provide advance notification of an intended adjustment.
 - c. When a consumer makes adjustments in the application of funds in an individual budget, these should be communicated to the CMHSP.
 - d. The funds aggregated and used to finance an individual budget may be controlled by more than one funding source. Flexibility in the use of these funds is therefore constrained by the specific limitations of funding sources (e.g., Home Help, Vocational Rehabilitation, etc.)
5. Either party -- the CMHSP or the consumer -- may terminate a self-determination agreement, and therefore, the self-determination arrangement. Prior to the CMHSP terminating an agreement, and unless it is not feasible, the CMHSP shall inform the consumer of the issues that have led to considering termination and provide an opportunity for problem resolution. Typically this will be conducted using the person-centered planning process, with termination being the option of choice if other mutually agreeable solutions cannot be found. If necessary, the local process for dispute resolution may be used to address and resolve these issues.
6. Termination of a self-determination agreement shall not, by itself, change the consumer's plan of services, nor eliminate the obligation of the CMHSP to assure services and supports required in the plan.

While the policy and procedure are in place, this does not ensure implementation. This is evidenced by the CMHSP self-reported lack of successful implementation of self-determination for adults with mental illness. IN an effort to address this, the Operations Committee of the Northern Michigan Regional Entity is adopting the following plan:

Information

Each CMHSP will ensure that all adults with mental illness receiving services will be informed of the opportunity for self-determination arrangements. All Case Managers and Assertive Community Treatment (ACT) staff will be knowledgeable of the NMRE Self-Determination Protocols and Guidelines.

An appropriate brochure, providing information regarding self-determined arrangements, and identifying a resource for additional information, will be provided to those receiving services.

Capacity

Each CMHSP will maintain an adequate number of fiscal intermediaries. Fiscal intermediaries will be third party organizations or individuals, not directly employed by the CMHSP. The CMHSP will ensure that all fiscal intermediaries have received adequate training and are competent to perform the necessary duties.

Each CMHSP will ensure that staff has had appropriate training regarding self-determined arrangements.

Improvement and Monitoring

The NMRE Quality Oversight Committee (QOC) will collect data regarding the implementation of self-determined arrangements at each CMHSP. This will include adults with intellectual/developmental disabilities and adults with mental illness. Data will be reported to the NMRE Operations Committee.

The QOC, in coordination with the clinical leadership of each CMHSP, will develop an appropriate plan for increasing the number of individuals in self-determined arrangements. The plan will include consumer input and be data driven and responsive to needs of those served.

REFERENCE

NMRE Self-Determination Protocols and Guidelines

REVISED:

REVIEWED:

APPROVED: December 18, 2013

Signed copy is on file with NMRE

Dave Schneider
Northern Michigan Regional Entity Chief Executive Officer

Date

Signed copy is on file with NMRE

Joe Stone
Northern Michigan Regional Entity Board Chair

Date