

Individual and Family Affairs At a Glance

Arizona Department of Health Services
Clinical and Recovery Services



Individual and Family Support

■ Arizona ... the past

- Some participation from different organizations
- Several individuals throughout the State involved in a few committees
- No statewide network or framework ... but we are heading in that direction!

New Freedom Commission

The President's New Freedom Commission Report recommends that the behavioral health systems must:

“Involve consumers and family members fully in orienting the system to recovery...local, state and federal authorities must encourage consumers and families to participate in planning and evaluating treatment and support services.”

(The New Freedom Commission on Mental Health 2003)

NASMHPD Position Statement

- NASMHPD recognizes that former/mental health consumers (*and family members*) have a unique contribution to make to the improvement of the quality of mental health services in many arenas of the service delivery system.
- The significance of their unique contributions stems from expertise they have gained as recipients of mental health services (*and family members*), in addition to whatever formal education and credentials they may have.

(National Association of State Mental Health Program Directors, 1989)

Consumer Contributions

- Their contribution should be valued and sought in areas of program development, policy formation, program evaluation, quality assurance, system designs, education of mental health service providers, and the provision of direct services (as employees of the provider system).
- Therefore, ex-patients/consumers (*and family members*) should be included in meaningful numbers in all of these activities. In order to maximize their potential contributions, their involvement should be supported in ways that promote dignity, respect, acceptance, integration, and choice.

(National Association of State Mental Health Program Directors, 1989)

Core Elements for an Office of Consumer (and Family) Affairs

- Establishment, planning and hiring must be supported by and involve consumers/survivors
- Must be directed by a self-identified consumer/survivor
- Must be part of senior management team
- An adequate support system must be in place and ongoing
- Must serve as a systems change agent
- Does not relieve other senior management staff from interacting with consumers/survivors

(National Technical Assistance Center, 2000)

Technical Assistance

- Over the period of a few months, the Arizona Department of Health Services and NASMHPD Office of Technical Assistance conversations:
 - Dialogue with Matt Matson and the Depression Bipolar Support Alliance (DBSA)
 - Coordination with NASMHPD Office of Technical Assistance (OTA)
 - Teleconference calls and planning TA
 - Larry Fricks (DBSA and Appalachian Consulting Group) and Peter Ashenden (DBSA) identified as two consultants to work with Arizona.

Arizona's Office of Individual and Family Affairs

- The Office includes the Individual and Family Affairs Manager and three Individual and Family Representatives
- The Office was developed to partner with and gather the “voice” of the following three groups:
 - Youth
 - Adults
 - Families

Individual and Family Voice

- Individual and family involvement to help develop an infrastructure built upon four principles:
 - Coordination
 - Collaboration
 - Communication
 - Partnership

Individual and Family Affairs

- The Manager serves as a key member on the Arizona Department of Health Services (ADHS) Department of Behavioral Health Services (DBHS) Management Team and the Executive Team.
- Provide training, technical assistance and related instructional materials to adults, youth, and families on areas such as leadership and advocacy skills, program development, resource identification and coordination.

Day One Morning

- **Executive Senior Leadership Team**
- Discuss the State's perspective of what the State would like to see from the Office of Individual and Family Affairs. Topics included in the discussion:
 - Policies and procedures
 - Protocols and organization
 - Support for the Office
 - Reporting level for the Office
 - Other issues, thoughts and/or concerns.

Day One Afternoon

- **Senior Management and Bureau Chiefs**
- **Introductions**
 - Share the discussion from Executive Senior Leadership meeting
 - Discuss some of the best practices for an Office of Individual and Family Affairs
 - Discuss thoughts on possible inter-departmental roles, responsibilities and working relationships with the Office of Individual and Family Affairs

Day Two – Individual & Family Summit

- Welcome and introductions
- What is an Office of Individual and Family Affairs?
- Small group breakout
- Small group presentations
- Larger group discussion (vision and mission)
- Best practices presentation (Larry)
- “Grassroots” networking (Peter)
- The future of Arizona’s Office of Individual and Family Affairs

Contact Information

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References

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National Association of State Mental Health Program Directors (1989). *Position Statement on Consumer Contributions to Mental Health Service Delivery Systems.* Approved by the NASMHPD Board 12/12/89, and by Membership on 12/13/89 at the Winter Commissioner's Meeting in Alexandria, VA.

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