

2011 REGION 3 FAMILY LEADERSHIP ACTION PLAN

Strategic Goal #1
Region 3 Partnership Team Development
& Sustainability in three phases (pg 1-3)

Action Priorities/Objectives	Action Strategies/Steps	Potential Outcomes	Considerations	Resources Required	Key Implementation Partners	Date to be accomplished	Current Status	
<i>Major overarching objective that will help achieve the stated goal</i>	<i>Key action steps necessary to achieve objective</i>	<i>Broad expected outcome if objective is achieved</i>	<i>Issues, opportunities, barriers that could impact achievement of the objective</i>	<i>Human and financial resources needed to achieve implement the action steps</i>	<i>Groups / agencies / individuals who are key to successful implementation of the objective</i>			
Cross-sectional regional representation of parent/caregiver leaders through outreach and engagement.	PHASE I - Meetings	1. Publications: - Website ✓ - Brochures ✓ - Calendar of Events	<ul style="list-style-type: none"> Parent/caregiver attendance and participation team increases. ✓ 	<ol style="list-style-type: none"> Geographical constraints Communication <ol style="list-style-type: none"> Language Culture Edu Level Techno-savy Overcoming Stigma of 'Mental Health' 	<ul style="list-style-type: none"> Offer travel incentives: Gas Card, Food/Snacks, Child Care, Carpool Technology Investment <ul style="list-style-type: none"> - Webinars - Conf Calls - GoTo Meeting Sensitive Accommodations to needs i.e. interpreter Family Stories 	<ol style="list-style-type: none"> State-wide coordinator Regional Coordinator CMH Caregiver ongoing recruitment efforts Regional Family Leadership Roles i.e. 	December 2011 & ongoing	Brochure completed. Customized to each coalition dates and times. Distributed regionally Several hundred parents reached through 1:1, small group, and large group presentations
		<ol style="list-style-type: none"> Publications to CMH providers and agencies 1:1 Outreach to CMH providers and agency reps 	<ul style="list-style-type: none"> CMH provider and CMH agency representative attendance and participation increases. 	<ol style="list-style-type: none"> Geographical constraints Budget constraints <ol style="list-style-type: none"> travel costs staffing costs Lack of value for parent voice – misconception that a family on a committee is enough. "Provider-ease" versus family engagement language 	<ul style="list-style-type: none"> Prioritized publicity of value of family voice. Technology IWebinars <ol style="list-style-type: none"> Conf Calls GoTo Meeting In-Kind utilization of existing community resources. 	5. All public and private CMH providers and service agencies.	throughout Grant continuation	Hundreds of providers have been reached through regional meetings, and discussion of initiative at regional events.

<p>(con't)... representation of parent/caregiver leaders.</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">PHASE II - Presentations</p>	<p>1. Presentations to parent oriented:</p> <ul style="list-style-type: none"> - Public events - Conferences - Organizational trainings - Public/Private Entities - 1:1 Outreach 	<ul style="list-style-type: none"> • Parent/caregiver are reached through CMH youth service organizations and agencies "portals". • Parent/caregiver advocacy voice at state level political events. 	<p>1. Geographical constraints</p> <p>2. Communication</p> <ol style="list-style-type: none"> a. Language b. Culture c. Edu Level d. Techno-savy <p>3. Overcoming Stigma of 'Mental Health'</p>	<ul style="list-style-type: none"> • In-Kind utilization of existing community youth service resources and facilities. • Family Stories 	<ol style="list-style-type: none"> 1. State-wide coordinator 2. Regional Coordinator 3. Caregivers 	<p>December 2011 & ongoing</p>	<p>Nearly 50 presentations throughout last year to groups.</p>
<p>(con't)... representation of public/private providers of services to children ages 0-18+</p>		<p>2. Presentations to CMH provider oriented:</p> <ul style="list-style-type: none"> - Public events - Conferences - Organizational trainings - Public/Private Entities - 1:1 Outreach <p>3. Survey of CMH providers for their perspectives and value of family engagement.</p>	<ul style="list-style-type: none"> • Collaboration of resources and funding for parents and caregivers. <ol style="list-style-type: none"> a. grant co-writing b. shared existing resources c. shared event planning 	<p>SAME</p>	<ul style="list-style-type: none"> • Promote: True Family Engagement = Greater capacity to provide services • Promote: True Family Engagement = Increased Revenue through increased parent/caregiver satisfaction and community support. • Support and train public psycho education by providers in common language (i.e. No Acronyms) 	<p>4. Regional existing family supports:</p> <ol style="list-style-type: none"> a. FRD b. SEL c. PEP d. School Personnel e. Peers f. Consumers g. NAMI 	<p>throughout Grant continuation</p>	<p>Reg Coord Frequent Attendance and Networking at regional CMH oriented conferences and workshops</p> <p>Survey and data gathering begun October 2009</p>

<p>(con't)... representation of parent/caregiver leaders.</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">PHASE III – Media/PR</p>	<p>1. Media/PR</p> <ul style="list-style-type: none"> - E-blasts - Articles - Interviews - PSA - Newspapers - Comm Calendars 	<p>1. Community at large awareness of Regional efforts to empower parent/caregiver.</p>	<p>1. Communication</p> <ol style="list-style-type: none"> a. Language b. Culture c. Edu Level d. Techno-savy <p>2. Overcoming Stigma of 'Mental Health'</p>	<ul style="list-style-type: none"> • Family Stories 	<p>1. State-wide coordinator</p> <p>2. Regional Coordinator</p> <p>3. Caregivers</p>	<p>December 2011 ongoing</p>	<p>PSA and Initiative introduction information content is being reviewed and edited</p> <p>Collection of community calendar sources</p>
<p>(con't)... representation of public/private providers of services to children ages 0-18+</p>		<p>2. Media/PR</p> <ul style="list-style-type: none"> - Above + - State licensing board mailings - State/National certifying organizations (i.e. ACA, ICA, NBCC, NSWA, AMCHA, etc.) 	<p>3. Professional community of providers becomes more aware of family engagement best practices and</p> <p>4. Increase desire of providers to engage families in CMH care.</p>	<p>3. Stigma of 'power differential' by providers over families regarding care.</p>	<ul style="list-style-type: none"> • Professional Accountability at state/national certification level • Propose legislation for larger reimbursements for CMH providers who are accountable for family engaged/driven care. • Provider + Family Stories of success 	<p>5. Regional existing family supports:</p> <ol style="list-style-type: none"> h. FRD i. SEL j. PEP k. School Personnel l. Peers m. Consumers <p>NAMI SAME</p>	<p>throughout grant continuation</p>	<p>In Collaboration with regional agency PR campaigns.</p>

REGIONAL FAMILY LEADERSHIP ACTION PLAN

Strategic Goal #2
Region 3 Development & Sustainability of multi-regional Family/School/Community Coalitions (pg 4 & 5)

Action Priorities/Objectives		Action Strategies/Steps	Potential Outcomes	Considerations	Resources Required	Key Implementation Partners	Date to be accomplished	Current Status			
<i>Major overarching objective that will help achieve the stated goal</i>		<i>Key action steps necessary to achieve objective</i>		<i>Broad expected outcome if objective is achieved</i>		<i>Issues, opportunities, barriers that could impact achievement of the objective</i>		<i>Human and financial resources needed to achieve implement the action steps</i>		<i>Groups / agencies / individuals who are key to successful implementation of the objective</i>	
Caregiver Empowerment	PHASE I	1. Survey of caregiver perspectives and desires for empowerment training.	<ul style="list-style-type: none"> Dialogue with CMH families for input on local (coalition area) needs. – family buy-in to CMH coalitions. 	1. Ongoing data collection and summary.	<ul style="list-style-type: none"> Web based survey software 	1. Caregivers 2. State-wide coordinator	Ongoing through grant continuation	Localized priorities continually revisited.			
	PHASE II	2. Education/Training: - Local Resources - Self/Child Advocacy Skills - Parent/Consumer Rights. - SEL 3. Modules of sub-systems of CMH care (ISBE, Juv Justice, DHS, EI, PCP, HD, etc.).	<ul style="list-style-type: none"> Increased family linkage to local CMH services. Successful family navigation once within the CMH system. Reduction in service replication. Increasing provider value of family voice. 	1.. Geographic boundaries. 2. Lack of organized family self assessments and self navigation tools. 3. Geographic specific resources organized in available/family friendly format. 4. Communication	<ul style="list-style-type: none"> Investment - Webinars - Conf Calls - GoTo Meeting Coalition training events with agencies Web-based training: module based accessible at caregiver’s availability. 	3. Regional Coordinator 4. Existing CMH caregivers 5. CMH service providers	Twice annual Trainings per coalition.	Three successful multi-disciplinary trainings held across region. Additional planning for 2011 parent trainings.			
	PHASE III	1. Organized and ongoing legislative lobbying efforts	<ul style="list-style-type: none"> Increased legislative funding for CMH services due to increased knowledge and awareness. 	1. Organized parent voice with thematic CMH educational points along with solutions.	<ul style="list-style-type: none"> Database of voluntary caregiver emails/addresses Calendar of CMH themes & evidence based solutions. Coordinated e-blasts and 411 sheets with attached family stories. 		Ongoing through grant continuation	Themes and solutions of CMH issues being gathered and evaluated			

Caregiver Leadership Development

PHASE I	<ol style="list-style-type: none"> Development of a CMH caregiver leadership certification process 	<ul style="list-style-type: none"> Certified CMH Caregiver Leaders who can teach and advocate on behalf of other CMH caregivers. Possible reimbursable services. 	<ol style="list-style-type: none"> Training/CEU tracking system Annual renewal and/or updated training Disjointed and repetitive CMH sub-systems of curriculum. 	<ul style="list-style-type: none"> Access to on-line training/cert. Collaborative Curriculum: <ul style="list-style-type: none"> ISBE MHJJ Early Childhood DHS CMH theory and evidence based treatment Etc. Skill Building: <ul style="list-style-type: none"> Cultural Sensitivity Communication Skills Technology Skills 	<ol style="list-style-type: none"> CMH Caregivers State-wide coordinator Regional Coordinator Existing CMH youth service providers i.e. <ol style="list-style-type: none"> FRD SEL PEP School Personnel Peers Consumers NAMI Etc. 	<p>Summer 2010 and ongoing until completion</p>	<p>Invitation and attendance at multi-disciplinary approach to the CFPP credential.</p>
PHASE II	<ol style="list-style-type: none"> Development of a CMH Peer to Peer caregiver mentorship system 	<ul style="list-style-type: none"> Network of experienced CMH caregivers who are trained to support newly identified CMH caregivers. 	<ol style="list-style-type: none"> Supportive family engagement administration and state leadership model. 	<ul style="list-style-type: none"> Skills training: <ul style="list-style-type: none"> Empathy Knowledge to be a support to other caregivers Crisis/Triage 	<ol style="list-style-type: none"> Universities Technology Consultant Curriculum consultant 	<p>As coalition development allows.</p>	<p>TBA Parent to Parent program?</p>
PHASE III	<ol style="list-style-type: none"> Develop active voice in the community <ol style="list-style-type: none"> Advocate for provider relations and provider re-trainings Speaker's Bureau for community outreach 	<ul style="list-style-type: none"> Provide an organized CMH caregiver voice at the individual, community, and state level. 	<ol style="list-style-type: none"> Lack of respect and acceptance of caregiver voice by CMH providers. <ol style="list-style-type: none"> Cultural & Communication Differences. Lack of public speaking experience and support. 	<ul style="list-style-type: none"> Provider Relations/Training by caregiver leaders <ul style="list-style-type: none"> LCPC/LCSW MA curriculum (CACREP) IDFPR Req. MD Req. 		<p>As coalition development allows.</p>	<p>Successful development of <i>SEL: Basics with Behavioral Approach</i> Ongoing</p>