

2016

**ACCESSIBILITY PLAN**

## Table of Contents

1. Purpose of Plan	1
2. HBH Mission, Vision, Values	1
3. Description of HBH	2
4. The Accommodation and Accessibility Policy (1.17)	3-5
5. Accessibility Work Group	6
6. Approval Process	7
7. Review and Monitoring Process	7
8. Communication of the Plan	7
9. Barriers Identified	Attachment A

## Purpose of Plan:

To ensure all services provided by HBH are accessible to all consumers. HBH will assure that individuals with disabilities have an equal opportunity to benefit from all services offered in accordance with the Americans with Disabilities Act (particularly Title I and Title II) and any applicable law or regulation. Programs and services shall be optimally accessible to persons served by the removal of barriers to services including architectural, attitudinal, employment and/or other identified barriers. The goal of this plan is to promote equal accessibility for all person's served, personnel, and other stakeholders through a barrier free physical plant and accommodations provided by trained and informed staff. Coordination of this plan occurs with the assistance and input from;

- > The Consumer Family Advocacy Panel
- > Building & Grounds Committee
- > Quality Improvement Committee
- > Safety Committee

## **Mission, Vision, and Values**

**FY 2015/2016**

**Board approved: May 2016**

### **Mission Statement**

Hiawatha Behavioral Health is committed to provide comprehensive, integrated mental health, substance use disorder, and intellectual/developmental disability services that promote the health and quality of life of our community members.

### **Vision**

To serve as a catalyst for positive social change, promote a philosophy of recovery, and assure the highest quality of behavioral health services in our community.

### **Values**

Hiawatha Behavioral Health will:

- Respect rights, choices and needs of each individual
- Treat individuals with compassion, respect, and dignity
- Focus on the strengths of each person
- Foster resilience, recovery, and independence

Commit to promote and improve the mental well being of our communities

People and Mission – First and Always

Description of Hiawatha Behavioral Health (HBH)

HBH is a governmental authority created by the merging of Eastern Upper Peninsula Community Mental Health and Schoolcraft County Community Mental Health on October 1, 1997. HBH serves 3 rural counties in Michigan's Upper Peninsula; Chippewa, Mackinac and Schoolcraft. It is governed by a 12 member Board, appointed by the County Boards of Commissioners.

As a Community Mental Health Authority, HBH primarily serves individuals with serious mental illness, serious emotional disturbance and developmental disabilities, in compliance with PA 258, the Michigan Mental Health Code. HBH owns and operates 3 clinic sites and several 24 hour care residential homes. In addition, HBH contracts out the operations of several homes owned by HBH and contracts with a number of external organizations for various types of non-clinic based services, including residential.

HBH employs approximately 200 full or part time and contract staff. It serves approximately 1000 consumers annually.

## HIAWATHA BEHAVIORAL HEALTH

### Administrative Policy

CHAPTER: Board Organization/Operation	SECTION: 1.17 – Accommodation and Accessibility
EFFECTIVE DATE: 11/20/06	APPROVAL /REVISED DATE: 9/28/15
REVIEW DATE: 9/8/15	REVIEW COMMITTEE: Building & Grounds

#### I. Purpose

To ensure that all services provided by HBH are accessible to all consumers. HBH will assure that individuals with disabilities have an equal opportunity to benefit from all services offered in accordance with the Americans with Disabilities Act (particularly Title I and Title II) and any applicable law or regulation. Programs and services shall be optimally accessible to persons served by the removal of barriers to services including architectural, attitudinal, employment and/or other identified barriers.

#### II. Policy

The Hiawatha Community Mental Health Authority Board recognizes the diversity in the population of its service area along a number of dimensions including, but not limited to: ethnicity, gender, age, language, socioeconomics, spiritual beliefs, and physical and communication challenges. Staff must be sensitive to and appreciate how important accommodation is to effective service delivery. Creating an atmosphere of openness and equal opportunity requires a physical environment designed to eliminate potential barriers; ongoing staff training regarding the assessment of the need for accommodations; and the actual implementation of necessary modifications. HBH will have policies, procedures and practices that promote equal accessibility for all consumers and ongoing staff training in these areas:

- Access and accommodation of persons with limited English proficiency.
- Sensitivity and accommodation of diverse ethnic and cultural backgrounds
- Accommodations for those with visual impairments or mobility challenges
- Accommodations for individuals with communication impairments (including persons who do not use verbal language to communicate or who use alternative forms of communicating (e.g., TTY)
- Staff education on the importance of each individual's diverse needs and the necessity to utilize person-centered thinking to create individual plans of service and actions to meet those needs. This training will recognize the disabilities affecting members may not be visible to the naked eye and may require accommodations in areas such as recognizing the effects of medications and adjusting meeting schedules and the length of meetings.
- A commitment to remove any barrier that may not be currently addressed this may be accomplished by a variety of means such as, focus groups, consumer complaints, consumer surveys.

### III. Procedures

#### A. Accessibility

1. HBH will identify and respond to a variety of different needs for language accommodations. These may include making accommodations for an individual with a hearing or speech loss; an individual with English as a second language or an individual with limited English proficiency. HBH will have adequate technology and the ability to provide the audio and written formats to respond to a consumer's needs. HBH will have procedures in place to obtain any necessary resources to respond to a specific need. Choices regarding services and providers must be available in understandable and varied formats.
2. Geographic access to supports and services shall be in accordance with the following standards:
  - For office or site-based mental health services, the mental health recipient's primary service provider (e.g. case manager, psychiatrist, primary therapist) will normally be within 60 miles or 60 minutes of the recipient's residence.
  - If transportation is requested by a consumer with special needs, HBH will help make arrangements with the parties with whom that responsibility is shared (e.g., DHS)
3. Employment opportunities will be available to all eligible consumers. HBH endorses a philosophy that they hire/train the disabled. HBH will maintain compliance with all federal regulations, including accessibility and ongoing compliance with ADA standards.

#### B. Accommodations

HBH will have an annual Accessibility plan that identifies barriers and reports on progress towards removing those barriers through:

1. The identification and enumeration of barriers in the areas of employment, consumer and staff education, architectural, transportation, timeliness of services and accommodations.
2. Devising strategies to address identified barriers including timelines and assigned staff.
3. The implementation of these strategies and evaluation of its success.
4. A community education plan to inform the public of our priority populations and steps taken to reduce stigma.
5. An ongoing process to review consumer complaints and their resolution.

### C. Evaluation

Status reports on activities under the Accessibility plan will be reported to the CEO and communicated through the QI Council.

The HBH Consumer Family Advocacy Panel will also review and provide input on Agency activities undertaken to accomplish the above mandates. Methods of evaluation include review and input on:

1. Focus group interviews to help with a needs assessment. The primary population groups interviewed should include persons as specified in the mental health code. Primary topics might include: access, diversity, vocational services, and prevention.
2. Stakeholders Focus Groups – Primary topics could include: access, strengths, services that need improvement, concerns and questions.
3. Customer satisfaction surveys
4. A review of the grievances and complaints during the year and an analysis of any systemic problems or barriers that need to be resolved.
5. Review of NorthCare screening, and access processes to ensure that individuals are not inappropriately denied services.
6. Review of the Agency's annual strategic plan.

## The Accessibility Work Group

The Quality Improvement Council at HBH acts as the Accessibility Work Group. This group reviews consumer survey information and customer complaint information, which can often be a source for accessibility or accommodation requests/concerns. In addition, this group reviews focus group and stakeholder information to assist in identifying barriers that exist within our facilities, staff and communities. The Building and Grounds Committee of the Board is tasked with identifying architectural barriers in all HBH facilities and approving the Annual Accessibility Plan and its periodic updates.

### Approval of the Plan

The HBH Accessibility Plan is reviewed by the Quality Improvement Council, the CEO, the Consumer Family Advocacy Panel and is approved by the HBH Board Building and Grounds Committee.

### Evaluation and Monitoring:

A status report is provided at least annually to the QI Council the CFAP Committee and the CEO. This plan is also reviewed by the PHIP (Northcare) and DCH annually and CARF, the national accrediting body, every 3 years.

### Communication of the Plan

The Accessibility Plan is posted on the HBH external and internal web sites and is available to the public on request.

<u>IDENTIFIED BARRIER</u>	<u>PROPOSED SOLUTION</u>	<u>COMPLETION DATE</u>	<u>REPORT STATUS</u>	<u>RESPONSIBILITY</u>
<b>ARCHITECTURAL</b>				
<b>Sault Clinic - Mackinac Trail</b> no scheduled projects/issues				
<b>Meridian Home:</b>				
New Siding for Home	replace	ongoing	Completed 9/2015	CFO
Meridian Roof	replace	7/30/2016	Completed	CFO/Maintenance
<b>Mstq. Clinic:</b>				
Replace Day Program Flooring	replace	7/31/2015	Completed 07/2015	CFO/Procurement Manager
Remodel Manistique Clinic	replace	ongoing	Starting August 2016- Flooring Upgrade	CFO/ Procurement Manager
Parking Area for accessibility	replace	ongoing	Waiting for quotes/ Collaborating with City	CFO/Procurement Manager
New Roof	replace	ongoing	FY 17- to be examined in spring	CFO/Procurement Manager
HVAC upgrade	replace	7/1/2016	In progress	CFO/Maintenance
<b>New Delta</b>				
Windows	replace seals/windows	ongoing	looking into replacing seals	CFO/ Maintenance/ procurement
<b>St. Ignace Clinic:</b>				
2 windows	Replace	ongoing	not leaking currently -to be monitored	CFO/Maintenance
<b>Pleasantview:</b>				
Cabinets & countertops	Replace	to discuss with B & G	Proposed-being examined May 2017 site review	CFO/ Procurement Manager/Maint.
Expand Med Room	Expansion/Move Wall	completed	completed 2/2016	CFO/ Procurement Manager/Maint.
<b>ATTITUDINAL</b>				
Community Stigma regarding Persons with MI/DD/SED	Mental Health First Aid (MHFA) Training	Ongoing	MHFA completed for Law enforcement in Mackinac Co. in June 2016 Looking to schedule in Schoolcraft Co.	Office Supervisor/HR
	Develop ads/verbage to include regarding stigma	Ongoing	Complete-ongoing	Office Supervisor
Lack of community knowledge regarding consumers, their successes, activities in the community, etc.	Present "Kids on the Block" program to communities/schools & Princesses & Pirates	Ongoing	completed 04/2016 Ongoing	Office Supervisor
	Participation in Health Fairs	Ongoing	Ongoing	Office Supervisor/ Clinicians
	Continue WRAP program for consumer empowerment	Ongoing	Ongoing	SMI Manager

Lack of trained consumers/cost of training	Continue to provide Financial Support for consumer training	Ongoing	Ongoing	SMI Manager
Stigma of illness/lack of hope	Continue to Develop Staff Peer Support Specialists and Expand PSS services	Ongoing	Ongoing	SMI Manager
Community stigma	Peers develop board for cmh lobby covering issues such as Peers, Recovery, Mental and Physical Health Issues	Monthly	Ongoing	PSS Office Supervisor/HR
	Continue MHFA training	Ongoing	Ongoing	
	Health Fairs	Ongoing	Ongoing	Office Supervisor
Lack of dialogue for early prevention/system of care development for children	Host Princesses and Pirates event for youth in collaboration with other agencies to fund raise for suicide prevention and enhance community awareness around mental health issues	5/9/2015	Yearly-scheduled for May 2016	Office Supervisor
	Invite ISD to participate in monthly Children's Unit meetings	Ongoing	Complete - ongoing	Children's Mgr

**COMMUNICATION**

lack of understanding of services CMH's are able to provide	reach out to community partners and do presentations regarding access and services available	ongoing	ongoing- advocacy group meeting monthly in 2016	CEO/ Children's Manager
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**EMPLOYMENT**

Poor Job market	Contract with NT1 - Chippewa	Ongoing	Ongoing	DD Manager
	Contract with Goodwill - Mack	Ongoing	Ongoing	
	Chippewa	Ongoing	Ongoing	
	Schoolcraft	Ongoing	Ongoing	
	Implement use of Peers w/DD	ongoing	Reviewing State policy/practices	DD Manager
			action plan	

Lack of trained Peers	Need to meet benchmarks of peer services	ongoing	complete-ongoing- job posting as of 07/2016	SMI Manager
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### ENVIRONMENTAL

Lack of available, affordable housing	Participate in housing coalitions in all 3 counties	Ongoing	Complete-ongoing	All Site Coord.
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### FINANCIAL

Lack of adequate funding	Participate in regional discussions of equitable MA allocations	Ongoing	Ongoing	CEO/ CFO
	CEO discussions with regional partners and state leaders	Ongoing	Ongoing	CEO
Lack of funds for consumer needs	Establish consumer fund	12/1/2012	Ongoing	CFO
	Develop optional payroll deduction for staff contributions to consumer fund	12/1/2012	Completed	HR Manager
	Coordinate and participate in fundraisers to enhance consumer fund	Ongoing	Ongoing- completed sault vending machine proceeds to consumer fund 10/01/2015	Office Supervisor/HR Manager

### TRANSPORTATION

Consumers experiencing difficulty securing transportation. No public transportation available in Mackinac County.	Provide assistance in securing transportation. RICC, CAA, HSCB identified	Ongoing	Ongoing	Clinical staff
	as issue, assigned work teams	Ongoing	Ongoing	Clinical staff
Public transportation not available evenings/weekends in Schoolcraft.	RICC, CAA, HSCB identified	Ongoing	Ongoing	Clinical staff
	as issue, assigned work teams; local home development			
Public transportation not available evenings/weekends in Chippewa	RICC, CAA, HSCB identified	Ongoing	Ongoing	Clinical staff
	as issue, assigned work teams; local home development			

Donated van to Drop-In Center	Complete	Complete	Recovery Coord.
Include transportation in PCP's where it is a covered service (Skill Bldg, CSL)	Ongoing	Ongoing	Clinical Staff

**OTHER BARRIERS**

Internal Stigma	Host luncheon inviting diverse individuals to speak. Create survey to analyze employees bias and stigma. Analyze results	12/1/2014	Survey Completed Luncheons Ongoing	SMI Manager/PSS/Office Super/CS
Access to services for those not eligible		Ongoing	04/2016-ongoing continue to work with NC and UPHP regarding Provider Network for those that do not meet CMH Priority Population	Clinical Coord.
Technology institute ipads for behavioral supports		ongoing- testing phase	complete by 06/30/17	clinical coord.