

Self-Direction: Consumer Choice in Action

(from SAMHSA's Mental Health Transformation Trends July–August 2005)

The following comes to us courtesy of the Center for Mental Health Services (CMHS). CMHS plans to release a National Consensus Statement on Mental Health Recovery later this year that will say that recovery is an individual's journey of healing and transformation to live a meaningful life in a community of his or her choice while striving to achieve maximum human potential. The consensus statement emerged from the deliberations of over 100 consumers, family members, advocates, and professionals.

Self-Direction: Consumer Choice in Action

What could transform mental health systems more than having consumers and families choose what services and providers they want? Self-directed care calls for a real shift in power as well as a true acceptance and implementation of values and principles critical to consumers and families and their mental health care.

Why consider self-directed care? What are the benefits of self-directed care and why should public and private providers consider it?

Self-directed care offers a truly transformative approach that gives persons with mental illnesses and families of children with serious emotional disturbances the opportunity to choose their providers of care and have greater control over funds spent on these supports. Too often consumers and families do not control their own paths of recovery. Without availability and the choice of acceptable options for services and supports, people with mental illnesses are less likely to engage in services, and more likely to have poor outcomes. Placing financial support under the management of consumers and families will enhance their mental health care choices. Having a choice of services and supports with control of funding can encourage and facilitate personal responsibility, create an economic interest in obtaining and sustaining recovery, and promote learning, self-monitoring and accountability. Most important, choice and control can lead to recovery and improved quality of life.

What is self-directed care?

Self-directed care is an approach used for more than a decade by people with developmental and physical disabilities and older adults. Research has shown that it results in higher client satisfaction and an increased number of needs being met. The following five values serve as the foundation for this approach:

- o Freedom to live a meaningful life in the community.
- o Authority over dollars needed for one's own care and support.
- o Support for participants' efforts to make the choices that are best for them.
- o Responsibility for managing finances, choosing services, handling the tasks of daily living, and wise use of public funds.
- o Confirmation through participation– the opportunity for service recipients to participate in decision making about the delivery system.

Under self-directed care, informed consumers or families with children with serious emotional disturbances, in partnership with support and information brokers or coaches, can do the following:

- o Assess their needs.
- o Establish an individual plan of care.
- o Budget funds to meet their needs.
- o Choose how and by whom these needs will be met.
- o Monitor the quality of services they receive.

They may use vouchers to pay for services, or they may use financial management services that track and monitor their budget and handle billing. They also may use supports brokerage, which can provide education and assistance with organizing resources.

SELF-DIRECTION:

Consumer Choice in Action: Florida SDC

The Florida Self-Directed Care (SDC) program is just one example of how focusing on recovery through choice truly transforms the mental health system.

The Florida Self-Directed Care program is based on:

- o the individual's ability to have control and choice in the services deemed necessary to facilitate recovery;
- o a community advisory board that is composed of true stakeholders; and
- o the safety of the participants as well as the community.

These are the results of a 100-participant study of Florida SDC:

- o In the first 19 months of the program only 16% of participants were hospitalized.

- o Participants spent a significantly greater number of days in the community (i.e., not in jails or hospitals) after joining the program compared to the year before.
- o Many of the participants engaged in a productive activity such as paid employment (34%), vocational skills training (19%), volunteer activities (16%), post-secondary education (7%), and General Equivalency Diploma classes (3%).
- o Only 10 individuals who joined the Florida Self-Directed Care program chose to return to traditional case management services.

Source: SAMHSA:

http://www.samhsa.gov/Matrix/MH_tranformation_trends.aspx