



MEETING NOTICE
INVITATION TO NEGOTIATE COMMITTEE
WEDNESDAY, JUNE 27, 2012
7:30 - 9:30 a.m.
COUNTY – CITY BUILDING – 555 S 10TH ST
ROOM 113

AGENDA

1. **Approval of Minutes** - June 13, 2012
2. Region V Programs and Services - Region V Systems
3. Organization of Subcommittee to Develop RFP and RFP Process
4. Next Meeting

MINUTES
COMMUNITY MENTAL HEALTH CENTER (CMHC)
INVITATION TO NEGOTIATE (ITN) COMMITTEE
WEDNESDAY, JUNE 27, 2012
COUNTY-CITY BUILDING, ROOM 113
7:30 A.M.

Committee Members Present: Ron Sorensen, Community Mental Health Center (CMHC); C.J. Johnson, Region V Systems; Judy Halstead, Lincoln-Lancaster County Health Department (LLCHD); Lori Seibel, Community Health Endowment (CHE); Cpt. Joe Wright, Lincoln Police Department (LPD); Gary Lorenzen, Mental Health Foundation; Brent Smoyer and Jane Raybould, County Commissioners; Gail Anderson, CMHC Advisory Committee; J Rock Johnson, consumer advocate; Kerry Eagan, County Chief Administrative Officer (Ex-Officio); Scott Etherton and Wendy Andorf, CMHC (Ex-Officio)

Committee Members Absent: Pat Talbott, Mental Health Association; Vince Mejer, Purchasing Agent (Ex-Officio)

Others Present: Larry Hudkins, County Commissioner; Ann Taylor, County Clerk's Office

Sorensen called the meeting to order at 7:35 a.m.

1 APPROVAL OF THE JUNE 13, 2012 MINUTES

MOTION: Raybould moved and J Rock Johnson seconded approval of the minutes. Sorensen, C.J. Johnson, Halstead, Seibel, Wright, Lorenzen, Smoyer, Raybould, Anderson and J Rock Johnson voted aye. Motion carried 10-0.

OTHER BUSINESS

- A. J Rock Johnson asked that recognition of Pat Talbott be added to the agenda. There was no objection to the request.
- B. Sorensen gave a summary of the presentation Kathy Reynolds and Jeff Capobianco, National Council for Community Behavioral Healthcare, gave at the June 22nd meeting regarding their experiences with integration of behavioral health and primary care, as some members of the Committee were not able to attend the meeting.

Raybould said they discussed an approach in which they partnered mental health professionals (psychiatrists, psychologists, psychiatric nurses and therapists) with

physicians in different clinics and said there were successes in both the behavioral health and health side with the holistic approach. They reported a reduction in hospitalization costs but indicated the cost of the loaned mental health professionals is still borne by county government. She said they also had access to more state funding. Seibel said they indicated consumers adapted well to the new system (new locations, new providers and new ways of doing business). Lorenzen said they also reported success in bringing potential providers in to discuss what they could, or could not, provide. There was also consumer involvement in the process. Seibel felt it would be helpful to engage Reynolds again further along in the process to review the Committee's work. J Rock Johnson said perhaps Reynolds could also assist the Committee in developing a plan for consumer involvement.

It was noted there is a limited integrated behavioral health/primary care system in place at the People's Health Center (PHC). Information regarding how many individuals who receive services at PHC are also served at the Community Mental Health Center (CMHC) was requested.

2 REGION V PROGRAMS AND SERVICES - C. J. Johnson, Region V Systems Administrator

C. J. Johnson, Region V Systems Administrator, gave an overview of Region V Systems Programs and Services, noting the following (Exhibit A):

- Legislative History
- Geographic Area
- Statutory Responsibilities
- Network Management
- Contracted Network Providers
- Levels of Care
 - ▶ Community Support
 - ▶ Non-Residential
 - ▶ Residential
 - ▶ Emergency
 - ▶ Children's

C.J. Johnson said emergency services will always be the priority in terms of funding. In response to a question from Seibel, C.J. Johnson said all of the programs listed under emergency services (see Exhibit A) are either associated directly with the Crisis Center, indirectly supported, or part of Cornhusker Place (a non-profit organization in Lincoln that provides a safe environment for intoxicated individuals to become sober).

Lorenzen felt it would be helpful for the Committee to see a list of the providers Region V is currently partnering with so those successes could be built on during the transition. C.J. Johnson said he will put together a list.

Seibel said an outside study on Douglas County's mental health system was recently completed and suggested it may be of value to look at the report.

J Rock Johnson asked C.J. Johnson to send Committee members the uniform resource locators (URL's) for Region V's Strategic Plan and Annual Report.

Halstead asked C.J. Johnson what services he believes should not be overlooked in terms of importance to the support of the overall system. C.J. Johnson said he believes it is important to remember that Lancaster County has 64% of the population and over 90% of the service funding and that 77% of all individuals that were served at CMHC are residents of Lancaster County. He said the County Board need to be careful about jeopardizing funding because millions of dollars could easily be shifted to the rural counties.

Lorenzen said many rural communities are building small hospitals and suggested one of the models may be to contract with local hospitals for emergency crisis intervention. It was suggested that finding staff who have training in that area may be difficult.

C.J. Johnson also disseminated copies of the Region V Systems, Adult Planning Process Outline that was used in 2002 (Exhibit B). Sorensen noted the Division wrote a report on the study and said he will try to locate a copy. There was Committee consensus to study the outline and discuss it further at the next meeting.

3 ORGANIZATION OF SUBCOMMITTEE TO DEVELOP REQUEST FOR PROPOSAL (RFP) AND RFP PROCESS

Sorensen noted the Committee has agreed to have a draft report ready by the end of August. He suggested the Committee form a subcommittee to work on the ITN document and bring it back to the Committee for comment and revisions. The following names were suggested: Eagan; Mejer; C.J. Johnson; Linda Wittmuss, Region V Systems; and a CMHC representative. They will bring a rough draft back to the Committee in two weeks.

Seibel asked whether the public and consumers would have input in drafting the ITN document. Eagan said there could be a community input process or a public hearing on the draft document but said he envisioned it being drafted by those with technical expertise, with input from of the Committee. Sorensen added that the Committee's meetings are open to the public. C.J. Johnson felt there would be benefit in soliciting consumer input, once the Committee has a sense of direction, because there may be some considerations the Committee hasn't thought about. Raybould thought the CMHC

Advisory Committee would also be a good "sounding board." Seibel felt they also need to pay attention to what was said in the focus groups that were part of the CMHC Planning Committee process.

J Rock Johnson said she has some documents she would like sent out to the Committee and agreed to forward them to Sorensen.

RETURNING TO OTHER BUSINESS

MOTION: Seibel moved and Raybould seconded to send a letter to Pat Talbott thanking her for her service on the Invitation to Negotiate (ITN) Committee.

It was also suggested that the County Board recognize Talbott at a County Board of Commissioners Meeting.

ROLL CALL: Sorensen, C.J. Johnson, Halstead, Seibel, Wright, Lorenzen, Smoyer, Raybould, Anderson and J Rock Johnson voted aye. Motion carried 10-0.

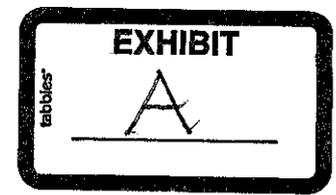
4 NEXT MEETING

The next meeting will be held on July 11, 2012 at 7:30 a.m.

5 ADJOURNMENT

There being no further business, the meeting was adjourned at 8:54 a.m.

Submitted by Ann Taylor, County Clerk's Office.

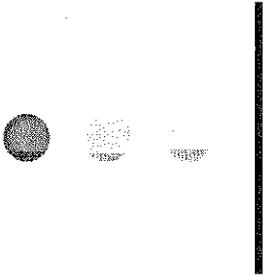


Region V Systems Provider Network

By:

C.J. Johnson, L.M.H.P., L.C.S.W.

Regional Administrator



Legislative History

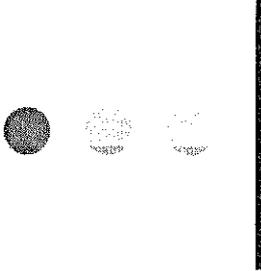
1974

LB 302 was the original bill – designed to provide public mental health services.

- Resulted in 16 interlocal agreements with each of the 16 counties in southeast Nebraska
- Each county participates in county tax match based on population
- Formation of the Regional Governing Board

1977

LB 204 was passed – designated to provide public alcohol and drug abuse services.



Legislative History

2004

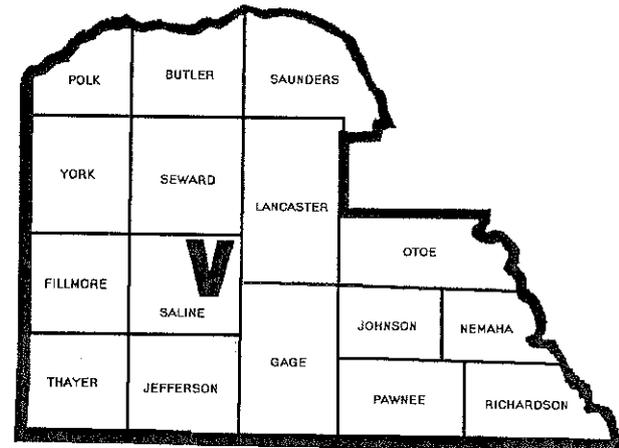
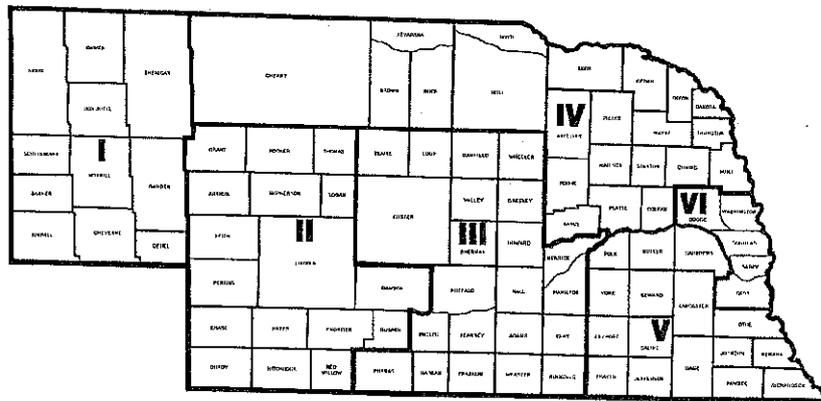
LB 1083 was passed – known as the Behavioral Health Reform Act.

This bill now overrides LB 302 and LB 204.

Its primary purpose was to:

- * Ensure better services and outcomes to consumers.
- * Provide more community-based services.

Region V Systems' Geographic Area

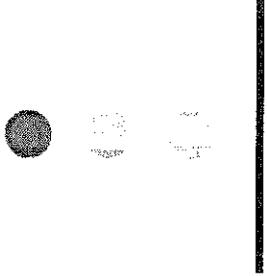


Statutory Responsibilities

- Organize and supervise comprehensive mental health and substance abuse services.
- Ensure that needed services are provided.
- Report annually to the Department of Health and Human Services regarding the expenditure of funds and evaluation of services.
- Develop an annual regional plan based upon need and availability of resources.
- Appoint an advisory committee.
- Consult with advisory committees on planning, organizing, contracting, program evaluation, and fiscal analysis of services in the region.

Region V Systems Network Management

- Administers approximately \$20 million dollars annually to support mental health and substance abuse needs in our community (southeast Nebraska).
- Maintains a major contract with the state of Nebraska, Department of Health and Human Services, which includes administration and/or management oversight of a network of providers that deliver behavioral health services in 16 counties.
 - Network of 12 provider agencies
 - Services include mental health and substance abuse assessment, treatment, and rehabilitation.
 - Continuum of care including 65 behavioral health programs



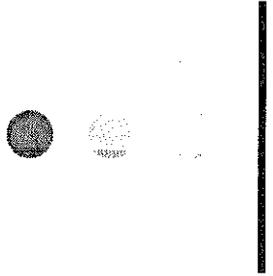
Region V Systems Contracted Network Providers

- Blue Valley Behavioral Health (Rural)
- CenterPointe
- Child Guidance Center
- Community Mental Health Center
- St. Monica's
- Our Homes
- Cornhusker Place
- Houses of Hope
- Lincoln Council on Alcoholism and Drugs
- Lincoln Medical Education Partnership
- Lutheran Family Services
- Mental Health Association



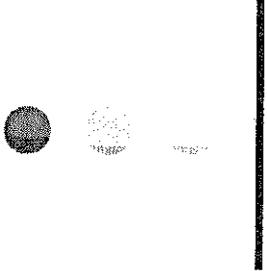
Levels of Care

- Community Support
- Non-Residential
- Residential
- Emergency
- Children's



Community Support

- Assertive Community Treatment (ACT)
- Bi-Lingual/Bi-Cultural Service Coordination
- Community Support Mental Health
- Community Support Substance Abuse
- Intensive Care Management
- Recovery Support



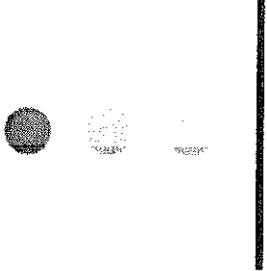
Non-Residential

- Assessment
- Day Rehabilitation
- Day Treatment
- Supportive Living
- Intensive Outpatient
- Medication Management
- Outpatient Mental Health
- Outpatient Substance Abuse
- Projects for Assistance in Transition from Homelessness (Path)
- Supported Employment/ Benefit Analysis



Residential

- Intermediate Residential
- Psych. Residential Rehabilitation
- Short-Term Residential
- Therapeutic Community
- Dual Disorder Residential
- Halfway House



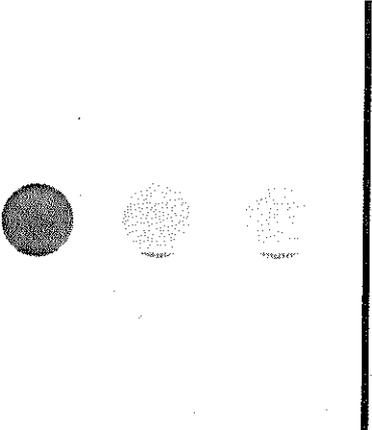
Emergency

- Civil Protective Custody
- Crisis Assessment (Substance Abuse)
- Crisis Line (24-hour Clinician-Phone)
- Crisis Response Teams
- Emergency Community Support
- Emergency Protective Custody (EPC)
- Hospital Diversion
- Post Commitment
- Short-Term Respite
- Social-Setting Detoxification

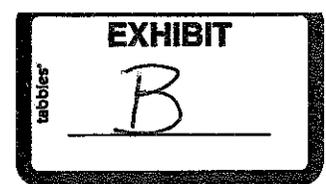


Children's

- Intensive Outpatient Mental Health
- Outpatient Mental Health
- Outpatient Substance Abuse
- Professional Partner Mental Health
- Therapeutic Consultation Mental Health
- Youth Assessment MH/SA



Check out our web site at
www.region5systems.net



ADULT PLANNING PROCESS OUTLINE

May 2002

The outline below is to clarify the proposed planning process Region V will undertake to determine where we are at in our System of Care and where we want to focus our resources in the upcoming years.

- 1. Establish New Baseline of Current Services**
 - A. Review current services, capacity, resources, and utilization.
 - B. Review new services, capacity, resources, and utilization (including progress toward implementation).
 - C. Review funding issues as identified by providers, including services that are losing funding.

- 2. Assess Unmet Needs**
 - A. Review updated waiting list information.
 - B. Review prevalence, economic, and population data by county.
 - C. Review implementation of Region V System's FY 2002 -2005 Service Plan.
 - D. Conduct key community interviews.

- 3. Compare Region V Systems' Service Priorities with Other Stakeholder Priorities**
 - A. Review existing planning documents such as CSIP (mental health, substance abuse and housing) juvenile justice plans, health departments, prevention needs assessments, Nebraska Mental Health Association, etc.
 - B. Review current Region V planning process involving the review, impact, and implementation of the Assertive Community Treatment Team and/or Village Models.

- 4. Establish Revised Priorities for New Services for Region V Systems for FY 2003**
 - A. Update recommendations for new funding.
 - B. Receive feedback and revise as necessary.
 - C. Behavioral Health Advisory Committee and Regional Governing Board approves priorities.
 - D. RFPs developed and distributed.

Provider Survey

Part One: Service Barriers

A number of barriers may interfere with providing mental health and substance abuse services to consumers and their families. Please indicate the extent to which you believe each of these potential barriers interferes with the delivery of services in your community by circling the appropriate number. Circle #4 if you believe an item is a major barrier, circle #3 if you believe an item is a moderate barrier, circle #2 if you believe an item is a minor barrier, and circle #1 if you believe an item is not a barrier. Circle only one number per item (for adult and/or child).

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1. Inconveniently located services	4	4	3	3	2	2	1	1
2. Lack of evening and weekend hours	4	4	3	3	2	2	1	1
3. Insufficient service capacity	4	4	3	3	2	2	1	1
4. Excessively long waiting period	4	4	3	3	2	2	1	1
5. Excessive cost of services	4	4	3	3	2	2	1	1
6. Lack of flexible funds	4	4	3	3	2	2	1	1
7. Lack of consistent eligibility criteria across agencies	4	4	3	3	2	2	1	1
8. Lack of qualified personnel	4	4	3	3	2	2	1	1
9. Lack of culturally competent staff	4	4	3	3	2	2	1	1
10. Lack of interagency client tracking system	4	4	3	3	2	2	1	1
11. Lack of family-centered services	4	4	3	3	2	2	1	1
12. Consumers lack information about services	4	4	3	3	2	2	1	1
13. Lack of flexible services (i.e., categorical constraints)	4	4	3	3	2	2	1	1
14. Lack of single entry point to system of care	4	4	3	3	2	2	1	1

Other barriers to services:

Part Two: What Services are Needed?

Below is a list of services for families and consumers. Please indicate which of these items you think should be given priority either increasing existing services or developing new services. Circle #4 if you believe an item is a major priority, circle #3 if you believe an item is a moderate priority, circle #2 if you believe an item is a minor priority, and circle #1 if you believe an item is not a priority. Circle only one number per item (for adult and/or child).

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1. Cornerstone Services								
1a. Emergency								
• Telephone hotline	4	4	3	3	2	2	1	1
• In-home crisis response	4	4	3	3	2	2	1	1
• 24-hour crisis screening and assessment for hospitalization	4	4	3	3	2	2	1	1
• Crisis Response (a place to stay for a few days)	4	4	3	3	2	2	1	1
1b. Prevention	4	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1c. Wraparound	4	4	3	3	2	2	1	1
1d. Case Management	4	4	3	3	2	2	1	1
2. Non-Residential Mental Health Services								
• Day Treatment	4	4	3	3	2	2	1	1
• Intensive Outpatient Therapy	4	4	3	3	2	2	1	1
• Day Rehabilitation	4	4	3	3	2	2	1	1
• Outpatient Therapy (Ind./Family/Group)	4	4	3	3	2	2	1	1
• Medication Management	4	4	3	3	2	2	1	1
• Psychological Testing	4	4	3	3	2	2	1	1
• Vocational Support	4	4	3	3	2	2	1	1
• Day Support	4	4	3	3	2	2	1	1
3. Residential Mental Health Services								
• Secure Residential	4	4	3	3	2	2	1	1
• Intermediate Residential	4	4	3	3	2	2	1	1
• Psychiatric Residential Rehabilitation	4	4	3	3	2	2	1	1
• Dual Disorder Residential	4	4	3	3	2	2	1	1
4. Non-Residential Substance Abuse Services								
• Partial Care	4	4	3	3	2	2	1	1
• Intensive Outpatient	4	4	3	3	2	2	1	1
• Outpatient Therapy (Ind./Family/Group)	4	4	3	3	2	2	1	1
• Medication Management - Meth	4	4	3	3	2	2	1	1
5. Residential Substance Abuse Services								
• Intermediate Residential	4	4	3	3	2	2	1	1
• Dual Disorder Residential	4	4	3	3	2	2	1	1
• Short-Term Residential	4	4	3	3	2	2	1	1
• Therapeutic Community	4	4	3	3	2	2	1	1
• Halfway House - Men	4	4	3	3	2	2	1	1
• Halfway House - Women	4	4	3	3	2	2	1	1
6. Other								
• Outreach (provided in schools, communities)	4	4	3	3	2	2	1	1
• Special Education Services	4	4	3	3	2	2	1	1
• School-Based Counseling Services	4	4	3	3	2	2	1	1
• In-Home Services	4	4	3	3	2	2	1	1
• Respite Care	4	4	3	3	2	2	1	1
• Parent Groups	4	4	3	3	2	2	1	1
• Vocational Services	4	4	3	3	2	2	1	1
• Recreational programs	4	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
<ul style="list-style-type: none"> Providing basic needs: assistance in obtaining food, clothing, shelter, financial assistance 	4	4	3	3	2	2	1	1
<ul style="list-style-type: none"> Medical screening, treatment, referral services, and follow-up 	4	4	3	3	2	2	1	1
<ul style="list-style-type: none"> Transportation to and from service-related appointments 	4	4	3	3	2	2	1	1
<ul style="list-style-type: none"> Information about services 	4	4	3	3	2	2	1	1

Other services needed:

Part Three

A. Describe in your own words the single barrier that most severely restricts or impedes services to consumers and their families.

B. Describe in your own words the service that should be given the highest priority for improving the system of care for consumers in need of mental health and substance abuse services.

Part Four

Please check the category which most accurately describes your current position (if none are accurate, please specify your position after "Other").

- Administrator
- Agency Administrator (i.e., supervisor)
- Attorney
- Case Manager
- Child Advocate
- Community Volunteer
- Consumer of Services
- Foster Parent
- In-home Family Therapist
- Judge
- Law Enforcement Officer
- Legislator or other elected official
- Parent / family member
- Parole / Probation Officer

- Physician (speciality): _____
- Psychologist
- Respite Care Worker
- School Counselor
- School Nurse
- School Social Worker
- School Principal
- School Psychologist
- Social Worker
- Teacher
- Other: _____

★ County of residence: _____

If you are interested in receiving a summary of the questionnaire results, please check this box and include your name and address below:

Return this survey to Region V Mental Health, Alcoholism, and Drug Abuse Program at 315 S. 9th Street, Suite 200, Lincoln, NE 68508 by Monday, April 24, 2000.

Family & Consumer Survey

Part One: What Barriers Exist in Providing Effective Services?

At times, there are problems or barriers in obtaining services. Please indicate the extent to which you believe each of these barriers get in the way with the delivery of services to you or your child. Circle #4 if you believe an item is a major barrier, circle #3 if you believe an item is a moderate barrier, circle #2 if you believe an item is a minor barrier, and circle #1 if you believe an item is not a barrier. Circle only one number per item (for adult and/or child).

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1. Inconveniently located services	4	4	3	3	2	2	1	1
2. Lack of evening and weekend hours	4	4	3	3	2	2	1	1
3. Long waiting periods	4	4	3	3	2	2	1	1
4. Cost of services too high	4	4	3	3	2	2	1	1
5. Lack of ability to use funds in a creative manner	4	4	3	3	2	2	1	1
6. Lack of qualified staff	4	4	3	3	2	2	1	1
7. Lack of culturally competent or bilingual staff	4	4	3	3	2	2	1	1
8. Inability to share records between agencies	4	4	3	3	2	2	1	1
9. Services do not address family or consumer needs	4	4	3	3	2	2	1	1
10. Agency staff do not have information about community services and resources	4	4	3	3	2	2	1	1
11. Parents and children do not have information about community services	4	4	3	3	2	2	1	1
12. Agency will provide only certain types of services because of agency roles	4	4	3	3	2	2	1	1
13. Services for my child are not available locally	4	4	3	3	2	2	1	1
14. The number of forms to fill out	4	4	3	3	2	2	1	1
15. Lack of transportation to services	4	4	3	3	2	2	1	1
16. Lack of central place to find information about services	4	4	3	3	2	2	1	1

Other barriers to services:

Part Two: What services are needed?

Below is a list of services for families and consumers. Please indicate which of these items you think should be given priority either increasing existing services or developing new services. Circle #4 if you believe an item is a major priority, circle #3 if you believe an item is a moderate priority, circle #2 if you believe an item is a minor priority, and circle #1 if you believe an item is not a priority. Circle only one number per item (for adult and/or child).

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1. Cornerstone Services								
1a. Emergency								
• In-home crisis care response	4	4	3	3	2	2	1	1
• Telephone hotline	4	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
• 24-hour crisis screening and assessment for hospitalization	4	4	3	3	2	2	1	1
• Crisis Response (a place for you to stay for a few days)	4	4	3	3	2	2	1	1
Ib. Prevention	4	4	3	3	2	2	1	1
Ic. Wraparound	4	4	3	3	2	2	1	1
Id. Case Management	4	4	3	3	2	2	1	1
2. Non-Residential Mental Health Services								
• Day Treatment	4	4	3	3	2	2	1	1
• Intensive Outpatient Therapy	4	4	3	3	2	2	1	1
• Day Support	4	4	3	3	2	2	1	1
• Day Rehabilitation	4	4	3	3	2	2	1	1
• Outpatient Therapy (Ind/Family/Group)	4	4	3	3	2	2	1	1
• Psychological Testing	4	4	3	3	2	2	1	1
• Medication Management	4	4	3	3	2	2	1	1
• Vocational Support	4	4	3	3	2	2	1	1
3. Residential Mental Health Services								
• Secure Residential	4	4	3	3	2	2	1	1
• Intermediate Residential	4	4	3	3	2	2	1	1
• Psychiatric Residential Rehabilitation	4	4	3	3	2	2	1	1
• Dual Disorder Residential	4	4	3	3	2	2	1	1
4. Non-Residential Substance Abuse Services								
• Partial Care	4	4	3	3	2	2	1	1
• Intensive Outpatient	4	4	3	3	2	2	1	1
• Outpatient Therapy (Ind/Family/Group)	4	4	3	3	2	2	1	1
• Medication Management - Meth	4	4	3	3	2	2	1	1
5. Residential Substance Abuse Services								
• Intermediate Residential	4	4	3	3	2	2	1	1
• Dual Disorder Residential	4	4	3	3	2	2	1	1
• Short-Term Residential	4	4	3	3	2	2	1	1
• Therapeutic Community	4	4	3	3	2	2	1	1
• Halfway House - Men	4	4	3	3	2	2	1	1
• Halfway House - Women	4	4	3	3	2	2	1	1
6. Other Mental Health Services								
• Outreach (provided in schools, communities)	4	4	3	3	2	2	1	1
• Early identification (children below 5 years of age)	4	4	3	3	2	2	1	1
• Individual child therapy	4	4	3	3	2	2	1	1
• Family Therapy	4	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
• Psychological Testing	4	4	3	3	2	2	1	1
• Hospitalization	4	4	3	3	2	2	1	1
7. Special Education Services								
• Self-contained classroom	4	4	3	3	2	2	1	1
• Alternative school	4	4	3	3	2	2	1	1
• Extended day school	4	4	3	3	2	2	1	1
• Homebound tutoring	4	4	3	3	2	2	1	1
• Transition program (prepare student for change of placement)	4	4	3	3	2	2	1	1
• Summer school program	4	4	3	3	2	2	1	1
8. School-Based Counseling Services								
• Support for the youth in the school setting	4	4	3	3	2	2	1	1
• Support for the parents in the school setting	4	4	3	3	2	2	1	1
9. In-Home Services: Family-focused advocacy and counseling provided in the home								
• In-home service 1-4 hours per week	4	4	3	3	2	2	1	1
• In-home service 5-15 hours per week	4	4	3	3	2	2	1	1
10. Out-of-Home Services								
• Therapeutic foster homes (a foster home with specially trained foster parents)	4	4	3	3	2	2	1	1
• Group home (a home where 4-8 youth live under the supervision of house parents)	4	4	3	3	2	2	1	1
• Residential center (where your child can live with other children while receiving counseling)	4	4	3	3	2	2	1	1
• Supervised independent living apartments	4	4	3	3	2	2	1	1
11. Respite Care: Respite is getting someone to provide care to your child while you are away for short periods of time								
• In-home respite for a period of a few hours, or a few days	4	4	3	3	2	2	1	1
• Respite to attend meetings	4	4	3	3	2	2	1	1
12. Parent Groups								
• Groups led by parents to provide support and assistance	4	4	3	3	2	2	1	1
• Advocacy groups (to promote parental rights)	4	4	3	3	2	2	1	1
• Formal parental skill training	4	4	3	3	2	2	1	1
13. Vocational Services								
• Career preparation	4	4	3	3	2	2	1	1
• Career training	4	4	3	3	2	2	1	1
14. Family Support Needs								
• Recreational programs	4	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
• Provide basic needs: assistance in obtaining food, clothing, shelter, financial assistance	4	4	3	3	2	2	1	1
• Medical screening, treatment, referral services, and follow-up	4	4	3	3	2	2	1	1
• Transportation to and from service-related appointments	4	4	3	3	2	2	1	1
• Information about services	4	4	3	3	2	2	1	1

Other services needed:

Part Three

A. Describe in your own words the single barrier that most severely restricts or impedes services to consumers and their families.

B. Describe in your own words the service that should be given the highest priority for improving the system of care for consumers in need of mental health and substance abuse services.

Part Four

Please check the category which most accurately describes your current position (if none are accurate, please specify your position after "Other").

- Administrator
- Agency Administrator (i.e., supervisor)
- Attorney
- Case Manager
- Child Advocate
- Community Volunteer
- Consumer of Services
- Foster Parent
- In-home Family Therapist
- Judge
- Law Enforcement Officer
- Legislator or other elected official
- Parent / family member
- Parole / Probation Officer

- Physician (specialty): _____
- Psychologist
- Respite Care Worker
- School Counselor
- School Nurse
- School Social Worker
- School Principal
- School Psychologist
- Social Worker
- Teacher
- Other: _____

★ County of residence: _____

If you are interested in receiving a summary of the questionnaire results, please check this box and include your name and address below:

Return this survey to Region V Mental Health, Alcoholism, and Drug Abuse Program at 315 S. 9th Street, Suite 200, Lincoln, NE 68508 by Monday, April 24, 2000.

Family and Consumer Survey

Part One: What Barriers Exist in Providing Effective Services?

At times, there are problems or barriers in obtaining services. Please indicate the extent to which you believe each of these barriers get in the way with the delivery of services to you or your child. Circle #1 if you believe an item is a major barrier, circle #2 if you believe an item is a moderate barrier, circle #3 if you believe an item is a minor barrier, and circle #4 if you believe an item is not a barrier. Circle only one number per item.

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1. Long waiting periods	4	4	3	3	2	2	1	1
2. Cost of services too high	4	4	3	3	2	2	1	1
3. Lack of culturally competent or bilingual staff	4	4	3	3	2	2	1	1
4. Services do not address family needs	4	4	3	3	2	2	1	1
5. Lack of transportation to services	4	4	3	3	2	2	1	1

Other barriers to services:

Part Two: What Services are Needed?

Below is a list of services for families and consumers. Please indicate which of these items you think should be given priority either increasing existing services or developing new services. A definition of each of the services are included. Circle #1 if you believe an item is a major priority, circle #2 if you believe an item is a moderate priority, circle #3 if you believe an item is a minor priority, and circle #4 if you believe an item is not a priority. Circle only one number per item.

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
1. Cornerstone Services								
1a. Emergency								
• Telephone hotline	4	4	3	3	2	2	1	1
• In-home crisis care response	4	4	3	3	2	2	1	1
• 24-hour crisis screening and assessment for hospitalization	4	4	3	3	2	2	1	1
• Crisis Response (a place for your child to stay for a few days)	4	4	3	3	2	2	1	1
1b. Prevention								
1c. Wraparound								
1d. Case Management								
2. Non-Residential Mental Health Services								
• Day Treatment	4	4	3	3	2	2	1	1
• Intensive Outpatient Therapy	4	4	3	3	2	2	1	1
• Day Support	4	4	3	3	2	2	1	1
• Day Rehabilitation	4	4	3	3	2	2	1	1
• Outpatient Therapy (Ind/Family/Group)	4	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
• Psychological Testing	4	4	3	3	2	2	①	1
• Medication Management	4	4	3	3	2	2	①	1
• Vocational Support	4	4	3	3	2	2	①	1
3. Residential Mental Health Services								
• Secure Residential	4	4	3	3	2	2	①	1
• Intermediate Residential	4	4	3	3	2	2	①	1
• Psychiatric Residential Rehabilitation	4	4	3	3	2	2	①	1
• Dual Disorder Residential	4	4	3	3	2	2	③	1
4. Non-Residential Substance Abuse Services								
• Partial Care	4	4	3	3	2	2	①	1
• Intensive Outpatient	4	4	3	3	2	2	①	1
• Outpatient Therapy (Ind/Family/Group)	4	4	3	3	2	2	①	1
• Medication Management - Meth	4	4	3	3	2	2	①	1
5. Residential Substance Abuse Services								
• Intermediate Residential	④	4	3	3	2	2	①	1
• Dual Disorder Residential	4	4	3	3	2	2	③	1
• Short-Term Residential	4	4	3	3	2	2	③	1
• Therapeutic Community	4	4	3	3	2	2	①	1
• Halfway House - Men	4	4	3	3	2	2	①	1
• Halfway House - Women	4	4	③	3	2	2	1	1
6. Other								
• Outreach (provided in schools, communities)	4	4	3	3	2	2	①	1
• Special Education Services	4	4	3	3	2	2	①	1
• School-Based Counseling Services	4	4	3	3	2	2	①	1
• In-Home Services	4	4	③	3	2	2	1	1
• Respite Care	④	4	3	3	2	2	1	1
• Parent Groups	4	4	3	3	②	2	1	1
• Vocational Services	④	4	3	3	2	2	1	1
• Recreational programs	④	4	3	3	2	2	1	1
• Providing basic needs: assistance in obtaining food, clothing, shelter, financial assistance	④	4	3	3	2	2	1	1
• Medical screening, treatment, referral services, and follow-up	④	4	3	3	2	2	1	1

	Major		Moderate		Minor		None	
	Adult	Child	Adult	Child	Adult	Child	Adult	Child
• Transportation to and from service-related appointments	(4)	4	3	3	2	2	1	1
• Information about services	(4)	4	3	3	2	2	1	1

Other services needed:

Part Three

A. Describe in your own words the single barrier that most severely restricts or impedes services to consumers and their families.

money

B. Describe in your own words the service that should be given the highest priority for improving the system of care for consumers in need of mental health and substance abuse services.

more inpatient treats

Part Four

Please check the category which most accurately describes your current position (if none are accurate, please specify your position after "Other").

- Administrator
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- Psychologist
- Respite Care Worker
- School Counselor
- School Nurse
- School Social Worker
- School Principal
- School Psychologist
- Social Worker
- Teacher
- Other: _____

☆ County of residence: Lancaster

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