

Turning Up the Volume of the Consumer Voice:

Building the



CONSUMER QUALITY TEAM OF MARYLAND

Joanne Meekins
CQT Director

Katie Rouse
CQT Program Manager

**ALTERNATIVES 2010
PRESENTATION HANDOUTS**

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ALTERNATIVES 2010



"Whether they considered themselves
consumers or survivors, movement
activists demanded a voice...

a "seat at the table."

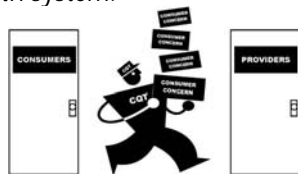
History of the Consumer Movement
National Mental Health Consumer's Self-Help Clearing House



CQT **creates a table** where consumers' ideas
and needs are brought to the people with the
power to address problems and improve services
in the public mental health system.

... in **REAL TIME**

... with **REAL ACTION**



PART 1:

How did Maryland get that
freakin' awesome program?

HISTORY

In the **1990s**....

consumer and advocacy organizations
and
2 Core Service Agency directors

became interested in bringing a CQT program to
Maryland.

They joined forces,
Created a Working Group,
& received a small research grant.

HISTORY

This Working Group included:



Core Service Agencies

Step 1: Local Research



Step 2: National Research





CONSUMER QUALITY TEAM OF MARYLAND **HISTORY**

Step 3: The Magic Combo

The diagram illustrates the 'Magic Combo' as the combination of three elements:

- A yellow icon of a dollar sign inside a circle, followed by a blue equals sign, and the logo for the State of Maryland Department of Health and Mental Hygiene (DHMH).
- An icon of three people sitting at a table, followed by a blue equals sign, and the logo for the Mental Health Association of Maryland (mhamd).
- An icon of three stylized human figures in purple, green, and blue, followed by a blue equals sign, and the logo for the STEERING COMMITTEE.

CONSUMER QUALITY TEAM OF MARYLAND **HISTORY**

STEERING COMMITTEE Includes representatives from the original 1990s Work Group

The slide lists the following organizations as part of the Steering Committee:

- mhamd (Mental Health Association of Maryland)
- OUR of MARYLAND (Our Community Network)
- CBH (Community Behavioral Health Association of Maryland)
- DHMH (State of Maryland Department of Health and Mental Hygiene)
- Systems Evaluation Center (University of Maryland School of Medicine)

Core Service Agencies

CONSUMER QUALITY TEAM OF MARYLAND **HISTORY**

CONSUMER QUALITY TEAM OF MARYLAND

becomes a reality

VISION

We envision a mental health system where individuals who receive services are **full participants** in the **design, delivery and evaluation** of services.

MISSION

The Consumer Quality Team of Maryland **empowers individuals** who receive services as **partners** with providers, policy makers and family members, to **improve care** in the public mental health system and ensure services meet the **expressed needs** of consumers.

VALUES

- The knowledge that individuals with mental illness are **resilient and can and do recover** and lead healthy and productive lives
- The right of individuals with mental illness to be equal partners in their health care
- The important role of health care professionals in the treatment of individuals with mental illness
- The important role of family support in the treatment of individuals with mental illness
- A diverse network of providers and policy makers who deliver mental health services in a culturally competent manner
- Education and ethical research designed to improve the quality of life for individuals and their families living with mental illness
- **Open-mindedness and avoiding blame**



GOALS

Effect **positive change** by addressing the **needs and concerns** of **individuals** served by the Public Mental Health System

Provide **consumer feedback** to bring about **quality improvement** at the **provider/program level**

Provide **consumer feedback** to bring about **quality improvement** at the **system level**



PROGRAM DESIGN

- Focus is on the **individual** consumer
- **Partner** with consumers, providers, and funding agencies to present, discuss, and find resolutions to problems experienced by individuals
- Reports provide **immediate feedback** to providers, including accolades
- Regularity of CQT site visits and the feedback process results in **systemic feedback**



BUILDING THE ORGANIZATION

Public Relations & Marketing

Intro Meetings

How's it going?

CQT

CONSUMER QUALITY TEAM OF MARYLAND

Empowering Partnerships in Mental Health Services

CONSUMER QUALITY TEAM OF MARYLAND **HISTORY**

BUILDING THE ORGANIZATION

Policy, Procedure & Paperwork

CONSUMER QUALITY TEAM OF MARYLAND **HISTORY**

BUILDING THE ORGANIZATION

Office & Staffing

Staffed solely by self-identified Consumers and Family Members

CONSUMER QUALITY TEAM OF MARYLAND **HISTORY**

IT'S A PILOT'S LIFE FOR ME...

- Site Visits to PRPs in 3 counties
- Interview adult consumers only
- Qualitative interviews with 5 MHSIP questions
- 1st Site Visit on **JANUARY 24, 2006**
- First allegation of abuse/misconduct

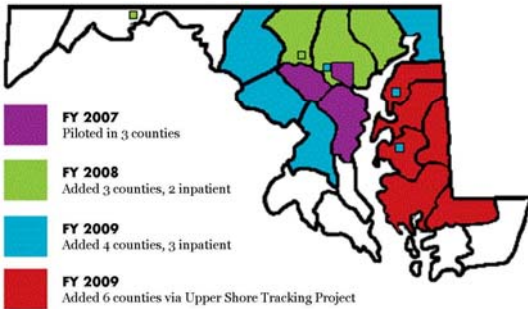


In **DECEMBER 2007**,
with the support of consumers, providers
and advocacy organizations,
MHA provides funding to begin to take CQT

STATEWIDE



EXPANSION: New Places






EXPANSION: New People

AREA	FY 2007	FY 2008	FY 2009	FY 2010
Staffing	Director	Director	Director	Director
	Program Assistant	Program Manager	Program Manager	Program Manager
		Program Assistant	Program Assistant	Program Assistant
	2 Part-Time Interviewers	5 Part-Time Interviewers	1 Full-Time Interviewer	1 Full-Time Interviewer
	1 On-Call Interview	1 On-Call Interviewer	6 Part-Time Interviewers	6 Part-Time Interviewers
Total Staff:	5	9	10	10

EXPANSION: By The Numbers

AREA	FY 2007	FY 2008	FY 2009	FY 2010
# Counties	3	6	10	16
# PRP Programs	16	29	42	51
# Inpatient Facilities	0	2	5	5*
Total # Site Visits	22	96	170	180
Total # Interviews	200+	526	850	1080

CHECKING OUR QUALITY

- Multi-year evaluation by  **Systems Evaluation Center**
- Collaborative process
- Only CQT to do program evaluation
- Joint presentations at 2009 Annual Conference

of 

PROGRAM EVALUATION

FY 2008	FY 2009 – FY 2010
<ul style="list-style-type: none"> ▪ CQT Staff interviewed via focus group ▪ Suggestions for policy/procedure improvement 	<ul style="list-style-type: none"> ▪ CQT Staff, Feedback Meeting members interviewed via focus group ▪ Provider input by phone interview, survey ▪ Feedback results in major changes to scheduling procedures, increased PR activity, internal policy

Executive Summary available at www.cqtm.org

UPPER SHORE TRACKING PROJECT

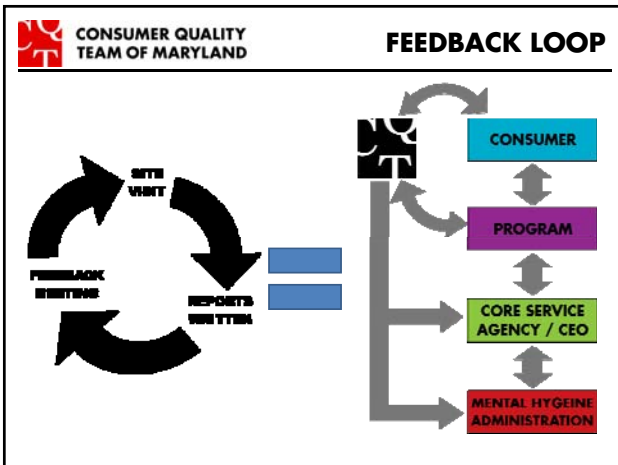
- Upper Shore Community Mental Health Center (40 bed / 2 unit inpatient facility) closed February 28, 2010
- CQT asked by Department of Health and Mental Hygiene to track 63 consumers who were being discharged
- CQT interviews consumers by phone or in-person 4 times / year to identify needs and report on quality of life.



COMMITTEE WORK

- | | |
|---|--|
| Maryland Consumer Leadership Coalition | JHU Sar Levitan Center
MH Workforce Development
Consumer Advisory Council |
| Maryland Association of Peer Support Specialists | Mental Hygiene Administration
Recovery in Inpatient Facilities
Committee |
| Johns Hopkins
Bayview Medical Center
Recovery Centers of Excellence
Leadership Council | Mental Hygiene Administration
Office of Consumer Affairs
Consumer Advisory Council |
|  | Eastern Shore Behavioral Health
Services Network Working Group |
| | Baltimore County Mental Health
Advisory Council |

So how does it work?



CONSUMER QUALITY TEAM OF MARYLAND **SITE VISITS**

SITE VISITS

- MHA/CSA direct CQT to programs
- PRPs
- Inpatient Facilities
- Intro Meeting with each program
- First 3 site visits are scheduled and announced
- Subsequent visits alternate unannounced / announced
- Each site visited 4 times / year

CONSUMER QUALITY TEAM OF MARYLAND **SITE VISITS**

SITE VISITS

- Intro Speech
- Set up in private, accessible space
- Interview consumers on voluntary basis
- Give *Immediate Site Visit Report (SVR)* to program staff

INTERVIEWS

- Consumer-focused, qualitative, and consumer-driven
- If an individual has a specific concern,



CQT asks permission to report the issue to program staff with the **consumer's name**.

IMMEDIATE SVR

CQT meets with program staff before leaving the site to give:

- Overview of general comments
- List of individual requests with consumers' names
- Staff responses are recorded



Many concerns are immediately addressed or resolved

SITE VISIT REPORT

- Sent out within 10 days of site visit to:
 - Contacts at program site
 - Director of program
 - CSA or Inpatient CEO
- SVR includes:
 - Individual's requests with staff response
 - Index of anonymous, general comments
 - Consumer's names are never included



FEEDBACK MEETINGS

PRP

- Meets every month
- Reps from CSAs, CBH (providers), MHA (state), Value Options, all CQT staff



INPATIENT CEO

- Meets every 2 months
- Inpatient Facility CEO, CQT Management

MHA

- Meets every 3 months
- MHA Senior Management Staff, CQT Management

FEEDBACK MEETINGS

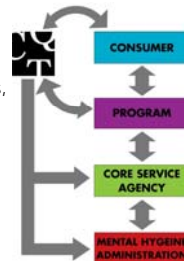
FEEDBACK MEETINGS

- Every Site Visit Report is discussed
- CSA/Inpatient CEO gives CQT a written report documenting follow-up actions
- Individual, Programmatic and Systemic issues addressed



REAL TIME, REAL ACTIONS

- Focus is on the individual consumer
- Partner with consumers, providers, and funding agencies to present, discuss, and find resolutions to problems experienced by individuals
- Reports provide immediate feedback to providers, including accolades
- Regularity of CQT site visits and the feedback process results in systemic feedback



PART 2:

Turning Up the Volume of the Consumer Voice

CQT works as reporters of consumer comments,
not as advocates for individuals or for changes to programs
or a system.

We report what we are told, without judgment or
comment, to the people who are in the positions to verify the
information and make corrections or changes as necessary.

RECORDING THE CONSUMER VOICE

What does a **consumer-focused**, **qualitative**,
consumer-driven **interview** look like?

How can you accurately capture the
individual consumer's voice
in their own words?

ADJUSTING THE VOLUME

COMPARING STORIES

- PRP Consumer / PRP Staff
- Inpatient Consumer / Inpatient Staff

REPORTING IN CONTEXT

- SVR is a snapshot, not a scientific sample or evaluation
- Focus is on individual consumer

PUTTING IT ON REPEAT



www.CQTMD.org



**CONSUMER QUALITY
TEAM OF MARYLAND**

711 W. 40th St., #460
Baltimore MD 21211
410 .235 .1314 phone
800-572-6426 toll-free
410 .235 .1180 fax
www.cqtm.org

PRP SITE VISIT

Notes Form

ISVR Form

Program Name: _____

Visit Date: _____

Consumer Name: _____

CQT Staff: Q: _____ N: _____

CIRCLE AND WRITE "GAVE PERMISSION TO USE NAME"

Large empty rectangular area for notes or data entry.

GENERAL/ANONYMOUS CONSUMER COMMENTS:

POSITIVE (at least 3):

STAFF RESPONSE (if any):

CONCERNS/PROBLEMS (if any):

SUGGESTIONS (if any):

INDIVIDUAL CONSUMER REQUESTS:

Gave **PERMISSION TO USE NAME** with staff. List multiple requests for 1 person together.

1. **Consumer:** _____

Request(s): _____

<p>Staff: ___ informed ___ already aware ___ will follow up</p> <p>Comments:</p>



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INPATIENT SITE VISIT

Notes Form

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Program Name: _____

Visit Date: _____

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CIRCLE AND WRITE "GAVE PERMISSION TO USE NAME"

Large empty rectangular area for notes or data entry.



IMMEDIATE SITE VISIT REPORT

INPATIENT SITE VISIT INFORMATION:

Hospital Name: _____ County: _____

Building Name: _____ Unit: _____

Date of Visit: _____ / _____ / _____

Contact Person: _____

CQT Staff: Q: _____ N: _____

IMMEDIATE SITE VISIT REPORT TO STAFF

ORAL REPORT GIVEN TO: _____ DATE: _____

Name: _____

Title: _____

Phone #: _____

DAILY ATTENDANCE: _____ TOTAL # INTERVIEWS: _____

CQT STAFF GENERAL COMMENTS:

PROGRAM STAFF GENERAL COMMENTS:

GENERAL/ANONYMOUS CONSUMER COMMENTS:

POSITIVE (at least 3):

STAFF RESPONSE (if any):

CONCERNS/PROBLEMS (if any):

SUGGESTIONS (if any):

INDIVIDUAL CONSUMER REQUESTS:

Gave **PERMISSION TO USE NAME** with staff. List multiple requests for 1 person together.

1. **Consumer:** _____

Request(s): _____

<p>Staff: ___ informed ___ already aware ___ will follow up</p> <p>Comments:</p>



CQT SITE VISIT REPORT

SITE INFORMATION:

Date of Visit:	Start/End Time:
County:	Program Name:
Contact(s):	
Program Type:	Population Type:
Daily Attendance:	No. of Interviews:
CQT Team(s):	

GENERAL SUMMARY:

CQT Staff Comments: *[General information, CQT staff observations]*

Consumer Comment Summary: *[Summary of consumer comments, "hot topics"]*

Program Staff Comments: *[Any general comments from program staff]*

INDIVIDUAL COMMENTS/CONCERNS:

The following consumers gave permission to use their name with staff to address individual concerns and requests.

1. **If the consumer gave permission to use their name with staff, their request will be listed here. CQT does not use consumer names in this report.**
 - Staff response.

The following consumers did NOT give permission to use their name with staff to address individual concerns and requests.

2. **Specific requests that did not require a consumer's name.**
 - Staff response.

INDEX OF CONSUMER COMMENTS BY SUBJECT AREA:

Some comments have been paraphrased for clarity.

Staff Attitudes and Performance:

[A list of comments culled from all interviews]

Programming & Daily Activities:

[Comments]

Community Involvement & Participation:

[Comments]

Vocational Services:

[Comments]

Forensic & Legal Services:

[Comments]

Facility, Transportation & Related Services:

[Comments]

Clinical/Medical:

[Comments]

Residential:

[Comments]



ADJUSTING THE VOLUME

For each song, write down 5 words that best describe it

SONG 1

SONG 2

SONG 3

SONG 4