



DEPARTMENT OF MENTAL HEALTH POLICY/PROCEDURE

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APPROVED BY: <div style="text-align: center; margin-top: 10px;">  Director </div>	SUPERSEDES	ORIGINAL ISSUE DATE	DISTRIBUTION LEVEL(S) 2

PURPOSE

- 1.1 To assure the incorporation of the Recovery Model into all Department of Mental Health (DMH) system-of-care services, both direct and contracted.
- 1.2 To establish guidelines for practices and services that promote a recovery oriented mental health system.

DEFINITION

- 2.1 Recovery is an organizing principle for mental health services, programs, and supports that is based on consumer values of hope, choice, respect, cultural sensitivity, achieving meaningful roles, self-determination, acceptance, and healing.

Mental health research has shown that people can and do fully recover, even from the most severe forms of mental illnesses. For recovery to take place, the culture of mental health care must shift to one that is based on self-determination and partnership of mental health clients in the system of care itself and community life including meaningful activity and gainful employment.

POLICY

- 3.1 DMH and its contracted agencies shall provide client-driven services. Clients may choose services and programs that are designed to:
 - assist them to self manage their recovery from mental health problems;
 - achieve their own personal goals; and
 - develop skills and supports **in the areas of health, education and employment** leading to a constructive and more meaningful and satisfying life in as free and non-stigmatizing an environment as possible.
- 3.2 DMH and its contracted agencies recognize the value, importance, and cost effectiveness of self-help and client-run services as validated by empirical research and client testimony. In order to assure client participation in self-help and client-run activities as a valuable adjunct to traditional therapeutic practices, mental health agencies and their staff are requested to:



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- inform clients of the relevance of participating in self-help/client-run activities and programs that emphasize mutual support, illness management, socialization, and advocacy;
- inform clients of the opportunity to serve on DMH related committees and/or boards, workgroups, or task forces;
- inform clients that the Countywide Client Activity Fund may provide reimbursement for their expenses related to their participation;
- document each client's choices and/or referrals in his/her treatment plan;
- facilitate and provide transportation and needed supports, where possible, to assist clients in their participation in the aforementioned activities and programs; and
- sponsor attendance at local mental health conferences and trainings.

AUTHORITY

1995 California State Health and Welfare Institutions Code, Title 9
1991 Federal Americans with Disabilities Act
Mental Health: A Report of the Surgeon General – 2000
Commission on Accreditation of Rehabilitation Facilities Requirements
Comprehensive Community Care
The President's New Freedom Commission on Mental Health

REVIEW DATE

This policy shall be reviewed on or before August 1, 2009.