

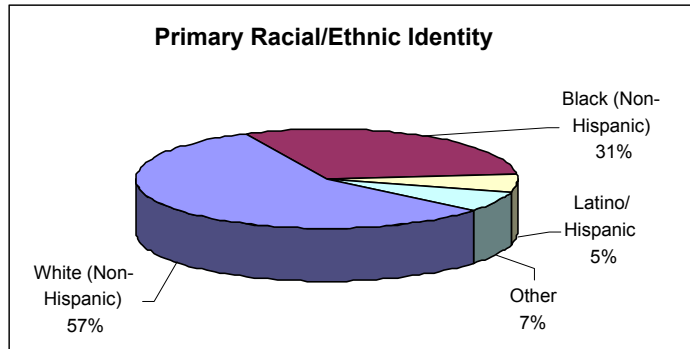
## 2007 WNYCCP ENROLLEE SURVEY RESULTS

The Western New York Care Coordination Program (WNYCCP) is dedicated to improving outcomes for adults with serious behavioral health concerns through person-centered, recovery-focused practices. Approximately 3,000 persons are currently enrolled in WNYCCP through case management programs across six counties: Chautauqua, Erie, Genesee, Monroe, Onondaga, and Wyoming.

The annual Enrollee Satisfaction Survey is an opportunity for enrollees to rate the services they are receiving through the Care Coordination Program. The 2007 Enrollee Satisfaction Survey was conducted during November - December 2007.

### DEMOGRAPHICS OF SURVEY PARTICIPANTS

- 556 Enrollees participated in 2007, up from 391 in 2006
- 42% more Enrollees participated in 2007 than in 2006
- Gender: 51% male and 49% female
- Ethnicity: 57% white, 31% black, 5% Latino/Hispanic, 7% other



### THE MAJORITY OF SURVEY PARTICIPANTS REPORTED THEIR EXPERIENCES WERE PERSON-CENTERED AND RECOVERY-FOCUSED.

- 89% thought their Care Coordinators believed they could grow, change, and recover.
- 84% were satisfied with the range of services available to them.
- 83% felt their dreams, interests, preferences, and strengths were clearly acknowledged and used to drive activities, services and supports.
- 79% said their Individual Service Plan reflected their strengths as well as their weaknesses.
- 78% felt free to choose or reject services.
- 77% said their Individual Service Plan reflected their plan for recovery.

### THE MAJORITY OF SURVEY PARTICIPANTS REPORTED DOING BETTER IN THE FOLLOWING AREAS.

- 79% dealt more effectively with daily problems.
- 75% were better able to control their lives.
- 73% were better able to deal with crises.
- 71% had improved housing situations.
- 67% got along better with their families.
- 66% were less bothered by symptoms.

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## BRIDGES TO RECOVERY

February 28, 2008, the Western New York Care Coordination Program (WNYCCP) presented the *Bridges to Recovery: Developing Recovery Management and Person-Centered Care* provider conference. 277 people attended the day long conference in Rochester, NY.

The day began with an introduction to the WNYCCP and welcoming remarks by representatives from the NYS Department of Health (William A. Hoogland), the NYS Office of Alcoholism and Substance Abuse Services (Thomas Haschmann) and the NYS Office of Mental Health (Michael Hogan).

Michael F. Hogan, Ph.D., Commissioner, NYS Office of Mental Health, captured the theme of the day with his words, "Embrace and explore all the meanings and implications of a recovery-focused system." (continued page 2)



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## Work Together

by Martha

a graduated enrollee of the Western New York Care Coordination Project

It was not until someone close to me made the comment that addicts and alcoholics have no hope that I truly believed in the word. Hope. Nourishment the soul needs to exist and move forward. Now my entire belief system is based on the concept of hope. I have hope for a bright future for my child. Hope that we will soon be free of the bonds of stigma.

During the past few years, I have had a lot of support in the work of moving forward. I have been very fortunate to have close family, friends, and service providers help me along on my journey of recovery

I landed at the bottom of the "rabbit hole" four years ago. Drenched in despair with no way out (or at least I thought) than to intoxicate myself by any means possible for as long as possible. The words of one person made all the difference at that crisis point.

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I was told, stay away from the drugs and everything will be okay. That is all I needed to make the turn from despair to hope and to begin the rebuilding process. All I needed was some reassurance that I would survive. I was soon engulfed in a whirlwind of services. I transitioned into a group home, became a participant in Care Coordination Services, and started outpatient treatment. Through coaching and gentle nudges, I was beginning to string more good days together than bad. I could see the sky again as I ascended out of the pit.

Now, nothing was magically fixed. It took a lot of work and good support to get to a place where I felt I was growing again. A place where I could remember who I was as a person and where I wanted to go. Now I know that I want to give back. I want to help others with similar struggles make their way through the world in a manner that the individual feels satisfied.

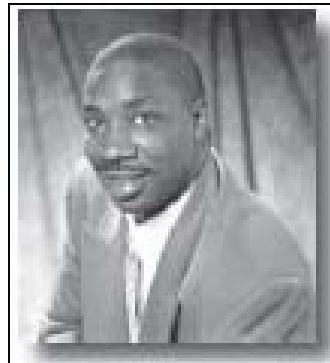
Currently things are changing very rapidly in the world of Care Coordination. There is a push toward person-centered practices, while at the same time there are funding issues that make that push harder and requires more creativity. I have to remember to be grateful that I was given the gift of direct care and the positive impact it had on me. Now I make it my fight to be a part of the team that is working to ensure that for others. There is so much to be done. So much that we cannot do alone. I discovered on the road toward recovery that we do not have to do it alone. All we have to do is be willing to participate, collaborate, and work together.



Keynote speaker, Mark Sanders, LCSW, CADC, Trainer and Consultant in the addictions and dual disorders fields, spoke of the core values of recovery management, which include the utilization of community resources for recovery support, self-direction of care using a person-centered approach, and a partnership among the treatment community, recovery community, and the communities where people live.

Speaker Janis Tondora, Psy.D., Assistant Clinical Professor, Department of Psychiatry, Yale Program for Recovery and Community Health, spoke of recovery planning as establishing services for the person to develop a healthy and safe life in the community. She emphasized, "Building a life in the community is NOT a task that comes AFTER discharge... The pursuit of a meaningful community life must be at the heart of the care and planning process throughout!"

Speaker Matthew Federici, MS, CPRP, Program Manager, Institute for Recovery & Community Integration, discussed the benefits of community integration, including: less reliance on traditional supports, more job opportunities,



Mark Sanders  
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hope/belief in recovery, empowerment for the person to own his or her recovery, having more choices, and decreased sense of being alone in ones illness.

Sanders, Tondora, and Federici all stressed the importance of peer specialists/ recovery coaches to the recovery process of individuals.

As Sanders said a core value of recovery management is the use of self-direction using a person-centered approach, Tondora said, "The practice of person-centered planning can only grow out of a culture that fully appreciates recovery, self-determination, and community inclusion."

Based on these workshops of the *Bridges to Recovery* conference, one could surmise that person-centered care and recovery management are deeply intertwined and mutually-dependent on each other. These practices are enhanced when backed up by the use of self-determination, community inclusion, and peer support.

Another workshop of the day, *Stepping Stones: Person-Centered and Recovery-Oriented Treatment for Co-Occurring Disorders*, was presented by: Michael Dorr, BS, Coordinator for Dual Recovery Services, Genesee, Wyoming and Orleans Counties, Joseph S. Scripa, MSW, CASAC, Dual Recovery Coordinator, Onondaga County, Jay Swarthout, BA, CRC, LMHC, Dual Recovery Coordinator, Erie County, and Valerie Way, MSW, LCSW-R, Program Manager, ViaHealth Behavioral Health Network. This session explored treatment for co-occurring chemical dependency and mental health disorders as a natural stepping stone and partner to person-centered and recovery management orientations.

*Managed Care: The Real Deal: Individualized Service and Flexible Cost-Effective Care* was presented by Ann M. Boughtin, MS, MPA, Consultant, and C. Richard Orndoff, M.ED., Consultant and EVP of Corporate Development, Integra Health Management. This session dispelled some myths about managed care as strictly a cost saving device designed to reduce access to care.

*Bridges to Recovery* also provided history and insight into the Western New York Care Coordination Program (WNYCCP). Robert C. Long, MPA, Acting Commissioner, Onondaga County Department of Mental Health, spoke on WNYCCP and the Personal Health Advantage Plan. Brian Phillips, Consultant, Christopher Wilkins, MHA, Vice President, DePaul Addiction Services and CEO (Interim), Westside Health Services, and John S. McIntyre, MD, Clinical Professor of Psychiatry, University of Rochester, presented the peer, chemical dependency, and mental health provider perspectives, respectively, on the WNYCCP and person-centered, recovery-focused approaches.

The day concluded with conference coordinator, Mathew Roosa, ACSW, LCSW-R, Director of Planning and Quality Improvement, Onondaga County Department of Mental Health, facilitating a dialogue between the attendees and the presenters about the obstacles and challenges related to implementing person-centered, recovery management practices.

In conclusion, *Bridges to Recovery* was a successful conference, which both disseminated needed information on recovery management and person-centered care and created a forum for providers to come together with experts to have meaningful dialogues on the aforementioned topics.

