

## 2012 Public Policy Platform

### Who are we?

NAMI Maryland is a statewide organization, with twelve local affiliates, dedicated to education and support of persons with serious brain disorders/mental illnesses, their families and the community. Through peer education and support, we empower those directly affected by mental illness to advocate effectively for themselves and others, to improve the lives of individuals with mental illness and their families. NAMI Maryland advocates for the public and private resources needed to assure the availability, accessibility and quality of comprehensive mental health treatment, prevention and recovery services throughout the State of Maryland.

### Core Values Informing NAMI Maryland's Policy Advocacy

- The belief that services should be relevant to the person's culture and life experiences and barriers to treatment such as lack of language access and lack of cultural competence must be eliminated.
- The recognition that mental illness is a brain disorder and should be treated with a level of understanding and competency equal to treatment of any other chronic illness.
- The acknowledgement that persons with mental illness can effectively manage these illnesses with appropriate treatment and support, and often recover and live healthy and productive lives, and that they have a right to plan their own goals, advocate for themselves and choose their own advocates.
- The belief that the practice of blaming family members for the mental illness of their loved ones should be eliminated and, instead, that families be treated with understanding, compassion, and sensitivity.
- The belief that families should be involved in ongoing mental health treatment planning with the individual, with the individual's permission.

## **In 2012, NAMI Maryland will advocate for:**

### **Financing of Treatment and Services**

- Support funding of services integration for the full continuum of recovery-based mental health treatment and rehabilitative services for adults and children. This includes Assertive Community Treatment (ACT) teams, 24/7 crisis services, and criminal justice diversion programs, and supported housing. Support expansion of these services to underserved communities, including in Maryland's rural areas.
- Support increased funding for mental health services, including dedicating Alcohol Tax revenue toward mental health services.
- Support Tobacco Tax revenue initiatives to increase funding for health services, including smoking cessation programs to support persons with mental illness who want to stop smoking.
- Public and private mental health care delivery and funding systems are undergoing significant review and assessment with the passage of the Affordable Care Act in 2010 and other potential health reform. We will advocate that any changes must support the needs of persons with mental illness.
- Ensure that systems provide for comprehensive and integrated behavioral health (mental health and substance use disorder) care, ensure a broad range of effective mental health services, allow for expanded and accessible services and allow incorporation of promising practices
- Ensure that private insurance companies provide a full range of recovery oriented mental health services comparable to those currently provided by the publicly supported Medicaid system.
- Monitor the implementation of insurance parity and healthcare reform to ensure compliance with federal law, maximize benefits to persons with mental illness, and support policies that will ensure that public and private health insurance plans provide adequate mental health coverage.

### **Access to Effective Services throughout All Stages of Life**

- Improve access to and availability of high quality, culturally and linguistically competent, recovery-oriented and safe mental health services that promote best practices in care for all individuals regardless of insurance status, ability to pay or geographic location.
- Support preventive and diagnostic services and programs serving the physical health and mental health needs of children and adults.
- Ensure adequate and safe crisis and acute care bed capacity is available. Acute and longer-term inpatient treatments are vital components in the array of treatment interventions and services that are necessary to assure a timely and durable recovery from the symptoms of mental illness.
- Ensure that discharge planning and community reintegration are consumer-driven, with family participation whenever possible and appropriate, and that housing, supported employment, and adequate therapeutic and community supports are included.

- Ensure continuity of care and access to medications for people regardless where they receive treatment, including the transition from institutional care to community living.
- Adopt incentives to increase and sustain a better-qualified mental health workforce, including recovery oriented, family friendly training for peer specialists, psychiatric rehabilitation paraprofessionals and direct care workers.
- Ensure adequate support and education for families of persons with mental illness of any age, orientation, or location.
- Require that service providers prioritize access to services to people with serious and persistent mental illness, providing oversight and advocacy through well-trained care managers. Services should use an integrated, consumer-centered, resiliency oriented and family friendly approach that may take professionals out of the traditional office setting to a location that is comfortable for the consumer.
- Provide solutions that support treatment of and assistance to individuals with severe mental illness who do not acknowledge their illness and/or resist treatment and who, without treatment and supports, present a danger in the community.
- Provide easily accessible emergency services, available 24 hours a day, seven days a week in professionally staffed crisis centers or psychiatric emergency departments.

### **Services and Supports for Adults**

- Provide adequate, effective and coordinated mental health treatment and services throughout Maryland, based on a Recovery Oriented System of Care model.
- Ensure that evidence-based or best practices are utilized to provide the most effective services, while still encouraging the development of innovative practices.
- Provide coordinating services for people, such as case management, to assist in their recovery wherever they reside.
- Provide safe, affordable housing for individuals with serious mental illness, with sufficient supports to aid success, and where possible attempt to keep families together if they desire.
- Ensure medical and psychiatric care is coordinated to address the health needs of the whole person across all social determinants of health.
- Provide meaningful employment opportunities with supports available for all levels of abilities, including supportive employment programs and other programs to help individuals succeed in the workplace.
- Eliminate policies that create barriers to employment for individuals with mental illness.

## **Services and Supports for Children, Adolescents, Young Adults and Their Families**

- Implement an effective, comprehensive, statewide system of care for children and youth with mental health needs and their families based on a Recovery Oriented System of Care model.
- Allow parents wherever possible to retain custody of their children, with adequate supports, regardless of their ability to pay.
- Provide limits on the use of restraint and seclusion for children.
- Train teachers, school counselors and primary care providers in early detection of mental illness and in making referrals to appropriate mental health professionals to encourage them to work with mental health professionals to coordinate, or when necessary provide, ongoing care.
- Ensure that parents are full participants in their child's Individual Education and Treatment Plans.
- Ensure that the transition from systems for children and adolescents to adult systems is smooth, supportive and effective.

## **Special Populations**

- Ensure access to appropriate, timely services for individuals in the military, veterans, and their families in all stages of recovery, regardless of discharge status or disability.
- Provide dual diagnosis programs for treatment for those with both substance use problems and a mental illness so that both conditions are addressed at the same time and, if possible, at the same site.
- Provide improved coordination and treatment for individuals with co-occurring disorders including substance use, developmental disorders and functional limitations.
- Support person centered health homes for persons with mental illness and other chronic conditions.
- Develop policies that recognize and provide for the unique needs of aging caretakers of people with psychiatric disabilities.
- Develop suitable, non-discriminatory community residences and the same improved services for elderly persons with serious mental illnesses as for other adults.
- Address disparities in mental health identification, access and treatment for special populations, including those involving race, ethnicity, sexual and gender identification, and urban or rural location.

## **Criminal Justice and Forensics Issues**

- Ensure that individuals entering the criminal justice system are screened at point of entry for serious mental illness and co-occurring disorders and that provision is made for effective services to be provided to address their needs.

- Ensure that persons with psychiatric or co-occurring disorders across the state who become involved in the criminal justice system receive a continuum of care. This includes Crisis Intervention Teams (CIT), jail diversion programs, In-Prison Therapeutic Community (ITC) programs, mental health courts, forensic ACT teams and adequate transition services, and other forensic services, along with the supports necessary to provide safe and effective services in the community.
- Make provisions for post-release medication, identification, and access to treatment providers in the community.
- Require targeted training for corrections, judicial, and law enforcement personnel to promote effective and compassionate interaction with people living with a mental illness and their families and to reduce injury, unnecessary incarceration and criminal involvement and increase referrals to appropriate services.

### **Quality Monitoring, Accountability and Accreditation**

- Improve data collection, promote quantitative and qualitative outcomes measurement and ensure accountability in mental health services delivery, including promoting new technology. Outcomes should be measured for systems, specific programs and providers as well as for individuals.

### **Research**

- Support both effective and efficacy-based research, focusing on severe and persistent mental illnesses.
- Support efforts to collaborate across the wealth of institutions, organizations and programs within Maryland to develop research protocols to promote investigation into mental illness, its causes, possible prevention or mitigation, early detection, and effective treatments.
- Support research on services for individuals and their families, effective services to support special populations, and individuals involved in multiple systems.

### **For additional information, please contact:**

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The NAMI Maryland Board of Directors approved this platform on January 10, 2012.