

DIVISION OF MENTAL HEALTH
 STAKEHOLDER EDUCATION SERVICE STANDARDS AND GUIDELINES

DMH STANDARD	GUIDELINES
<p>Stakeholder Education: The services provided are activities that promote the health, strength and recovery of consumers by educating and training the following two groups:</p> <ol style="list-style-type: none"> 1. Community stakeholders who frequently interact with individuals who have or are suspected of having serious mental illnesses or serious emotional disorders, and 2. The general community. <p>The objective is to teach stakeholders how to understand, approach, and when necessary, refer individuals to public mental health services.</p>	<p>Examples of community stakeholders include:</p> <ol style="list-style-type: none"> 1. Police officers 2. Providers of homeless services 3. Ambulance staff 4. Employers <p>Examples of general community:</p> <ol style="list-style-type: none"> 1. Block clubs 2. School staff and faculty 3. Day care staff 4. Landlords 5. Health care providers 6. Support groups 7. Local businesses
<p>Intended Outcomes: The goals of this service activity include:</p> <ol style="list-style-type: none"> 1. Educating and training individuals in the community to recognize the signs and symptoms of serious mental illnesses and serious emotional disorders. 2. Promoting public awareness of available mental health service options, including how and when to refer to services. 3. Reducing stigma and barriers associated with serious mental illnesses and serious emotional disorders. 4. Teaching stakeholders how to understand, approach and effectively refer individuals to public mental health services. 	

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<p>Service Activities and Interventions: Examples of activities and interventions include conducting meetings with community stakeholders to provide the following services:</p> <ol style="list-style-type: none"> 1. Formal education on how to recognize the signs and symptoms of serious mental illnesses and serious emotional disorders, including effective ways to interact with individuals who exhibit those symptoms. 2. Promoting public awareness of available mental health service options, including how and when to refer to services. 3. Explaining the scope of services offered by specific agencies. 4. Public speaking engagements that will strengthen the collaborative relationship between the community, stakeholders, and the local public mental health system. 	<p>These Stakeholder Education events must be preplanned presentations or training events as evidenced by advanced preparation of materials covered.</p>
<p>Ineligible Activities and Interventions: The following scenarios are examples of ineligible activities:</p> <ol style="list-style-type: none"> 1. The gathering is an ad hoc event with an absence of handouts, flyers, or resource sheets for distribution. 2. The trainings are found to be repetitious in nature, content, and attendees. 3. Time and activities related to making arrangements, preparing for a stakeholders education event or traveling to or from the event. 4. Provision of Stakeholder Education to an individual. 	<p>Examples of ineligible activities:</p> <ol style="list-style-type: none"> 1. Staff attendance at a meeting where the staff person provides an impromptu presentation. 2. Providing the exact same presentation to the same group of stakeholders. (It is recommended that the presentation not be provided more than once per fiscal year, unless there is comprehensive documentation supporting the need).
<p>Service Requirements:</p> <ol style="list-style-type: none"> 1. Service provision will occur face-to-face or by videoconference. 2. Services provided must be designed to educate community stakeholders on how to understand, approach, or effectively refer people having or suspected of having serious mental illnesses or serious emotional disorders. 3. Services may be provided in any location where community stakeholders meet as a group (e.g. shelter providers' meetings, police stations, training academies, churches, and community centers). 4. A staff dyad may be utilized if the second staff person is in recovery 	<p>It is recommended that an individual in recovery</p>

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<p>from the same agency.</p> <ol style="list-style-type: none"> 5. Documentation must demonstrate how the community stakeholders are connected to the target population and why stakeholder education is needed. 6. The majority of Stakeholder Education services should be provided to groups interacting on a frequent basis with people who have or are suspected of having a serious mental illnesses or a serious emotional disorder. 7. Service provision may not exceed a total of 1% of the agency's total billable services, i.e., Medicaid and non-Medicaid amount. 	<p>actively participate in the delivery of Stakeholder Education services. If the person in recovery is currently an employee or contractor of the organization, then a staff dyad may be utilized.</p>
<p>Staffing Requirements: Stakeholder Education must be delivered by an RSA, MHP, QMHP, or LPHA as defined by Rule 132.</p>	<p>Documentation notes must be signed and dated by the rendering provider.</p>
<p>Documentation Requirements: Stakeholder documentation notes must be complete and list the following:</p> <ol style="list-style-type: none"> 1. Date, 2. Start time and duration, 3. Location of meeting, 4. Description or name(s) of group addressed, including how the group is connected to the population and why Stakeholder Education is needed, 5. Sign-in sheet of attendees, 6. Topics addressed, 7. Name and credentials of staff (when a staff dyad has been utilized only one staff person is required to sign note), 8. Description of Stakeholder Education activity, and 9. Printed copy of handouts or overheads used during the event/activity (if any). <p>All stakeholder documentation must be maintained in a central location (i.e. aggregate file) and be available for review.</p>	