

**PROGRESS REPORT FOR HHSC 529-06-0409-00001A RELATING TO
"THE IMPLEMENTATION OF A PILOT PROGRAM TO ENHANCE THE
WELL BEING AND CARE OF DUALY DIAGNOSED INDIVIDUALS"**

PRESENTED BY PROJECT JANUS, INC.

Introduction

Pursuant to the goals and objectives outlined in Contract Amendment #1, HHSC 529-06-0409-00001A between the Health and Human Services Commission and Project Janus, Inc., 2824 Sherwood Way, San Angelo, Texas, 76901 for "The Implementation of a Pilot Program to Enhance the Well Being and Care of Dually Diagnosed Individuals," Project Janus, Inc. presents the following progress report for FY2008.

Contract Amendment #1 outlines five primary goals and objectives for the grant period. These include:

- 1) Project education regarding the pilot project's mission/purpose and expand awareness among related stakeholders.**
- 2) Investigate best practices of service providers for possible inclusion/refinement of current regional service delivery for the dually diagnosed.**
- 3) Dialogue with state coalitions to provide education, share information, and receive input regarding service delivery for the dually diagnosed.**
- 4) Investigate and compare delivery systems and operational methodologies for service delivery to the dually diagnosed.**
- 5) Actively seek supplemental funding sources.**

Each of these goals and objectives was addressed during FY2008. This report will outline how activities of the organization from September 2007 through August 2008 related to the progress of each individual goal/objective.

Progress On Goals/Objectives

Goal/Objective #1

Project education regarding the pilot project's mission/purpose expand awareness among related stakeholders.

Project Janus, Inc. is a community driven non-profit organization dedicated to finding the most effective/efficient methods for providing comprehensive services to individuals with a dual diagnosis of intellectual disability and mental illness (ID/MH). The organization was created

over five years ago by area representatives from health service providers (public and private), law enforcement, educational systems, and community leaders. These individuals recognized that persons with a dual diagnosis of ID/MH were the most difficult to effectively serve in this predominantly rural area. They also believed that through a unified effort, individuals with a dual diagnosis of ID/MH could receive all of the services to which they were entitled.

Since its inception, Project Janus has developed a training program for caregivers who work directly with individuals with a dual diagnosis of ID/MH, formulated an end-user model for day-habilitation which includes specialized services that best meet the needs of individuals with a dual diagnosis, and served as a liaison between state, regional and private providers throughout the area.

During FY2008, Project Janus, Inc. held meetings with a variety of individuals and organizations to introduce or re-introduce them to the mission and purpose of Project Janus. Meetings were scheduled with representatives from area provider organizations including the San Angelo State School, MHMR Services for the Concho Valley, Big Spring State Hospital, and local private providers.

Meetings were also held with federal and state elected officials and/or staff members to educate them as to the mission/purpose of Project Janus and the mission/purpose of the HHSC grant. Elected officials contacted for this purpose included Senator Kay Bailey Hutchison (TX), Congressman Mike Conaway (TX), State Senator Robert Duncan, State Representative Drew Darby, State Representative John Shields and State Representative Patrick Rose. Project Janus also met with staffers from the Interim House Select Committee on ICF/MR Services and was invited to present testimony regarding Project Janus to the committee during its May 2008 meeting.

Finally, the Executive Director has appeared on three local radio programs during the past year. All of these programs focused on educating the public on the purpose/mission of the organization.

Goal/Objective #2

Investigate best practices of service providers for possible inclusion/refinement of current regional service delivery for the dually diagnosed.

During the past year, Project Janus has conducted a review of the various programs currently available to individuals with a dual diagnosis of ID/MH in the Concho Valley Region to identify best practices available. The review included housing, day programs, transportation, county law enforcement, medical treatment (both outpatient and inpatient), family support services, and caregiver training to name a few. A comparison of programs was then made with the results of a similar review conducted by Project Janus during the FY06-07 to determine any "best practice" additions/changes from the previous period.

Project Janus found four notable changes. First, the Big Spring State Hospital has implemented the utilization of "Sensory Rooms" for treatment of individuals with a dual diagnosis of ID/MH and credits the idea to a program operating at the San Angelo State School.

The use of "Sensory Rooms" is a standard portion of the program at the San Angelo State School which specializes in providing services to individuals with a dual diagnosis of ID/MH (90% of all SASS residents). Officials at the Big Spring State Hospital site this change as one that has improved its ability to provide effective treatment to individuals with a dual diagnosis who are admitted to its facility.

The second change noted was the reduction in admissions of individuals with a dual diagnosis of ID/MH to the Big Spring State Hospital from the San Angelo State School. During FY2006, only one transfer was made. This translates to a 75% reduction from the previous year. This reduction was directly related to the San Angelo State School's refinement of its specialized program for providing services to individuals with a dual diagnosis of ID/MH. Over the past 10 years, the same data shows a more than 90% reduction in transfers.

The third change noted was the reduction in re-admissions of individuals with a dual diagnosis of ID/MH to the San Angelo State School following their transition their transition from a medium-sized ICF/MR facility to community-based living. This reduction was directly related to caregiver abilities to identify crisis situations for individuals with ID/MH earlier, due to the specialized training they had received through Project Janus. This early identification, combined with a willingness by State School employees to volunteer their time to provide early intervention assistance to private providers, has resulted in fewer re-admissions than have been previously recorded. Both private providers and state school officials believe that the number of re-admissions could be greatly reduced if crisis intervention services were readily available in the community, but until such time, the availability of some volunteer services to address crisis situations is a best practice created for an ongoing problem experienced by individuals with a dual diagnosis of ID/MH.

The final change noted in this review was the increased coordination of regional services provided to individuals with a dual diagnosis of ID/MH based on the implementation of Project Janus. A more open dialogue now exists between the region's state, county and private providers, as well as an easy flow of information between them. Service providers recognize their own strengths and weaknesses and look for those with strengths to lead and teach. All recognize the existing weaknesses in the current Texas system of providing services and are unified in their desire to break down the barriers in the current system and build bridges where necessary. This increased openness and coordination among service providers is essential to meeting the needs of individuals with a dual diagnosis of ID/MH both now and in the future.

Goal/Objective #3

Dialogue with state coalitions to provide education, share information, and receive input regarding service delivery for the dually diagnosed.

In October 2007, the Executive Director of Project Janus was invited to serve on an advisory committee on restraint and seclusion in the treatment of individuals with a diagnosis of MH and/or ID. The committee is facilitated by the Hogg Foundation and serves as the advisory group to the DSHS federal grant project titled "State of Texas Alternatives to Restraint and Seclusion" (STARS). The STARS project is targeted to four state hospitals and seeks to reduce the incidence of restraint and seclusion in those facilities. This committee includes

representatives from several state agencies including HHSC, DSHS, DADS, TEA, TDCJ, and DFPS, as well as representatives from private providers, advocacy groups, parent groups and consumers from across the state. Meetings are held quarterly and each meeting provides all members the opportunity to present information related to their representative organizations. The Executive Director also serves as a member of the Speakers Bureau and the Policy/Data Sub-Committee for this group.

The Executive Director has also become a member of the National Association for the Dually Diagnosed (NADD) and attended its annual conference in Atlanta in October 2007. At that event, networking opportunities with other attendees representing Texas advocacy groups and private providers were useful in providing education, sharing information and receiving input regarding service delivery. Similar networking opportunities with representatives from state advocacy groups and private providers have occurred before and after meetings of the House Select Committee on ICF/MR Services. Project Janus has utilized those opportunities to collect information that could be incorporated into its recommendations regarding possible changes to the current Texas system for providing services to individuals with a dual diagnosis of ID/MH.

Finally, in addition to meetings held with federal and state elected officials and the invited testimony to the Interim House Select Committee on ICF/MR Services, printed informational materials regarding individuals with a dual diagnosis of ID/MH, Project Janus, Inc., and possible solutions to existing barriers in the Texas system were provided to elected officials including all members of the committee.

Goal/Objective #4

Investigate and compare delivery systems and operational methodologies for service delivery to the dually diagnosed.

During FY2008 Project Janus, Inc. used a systematic approach for investigating and comparing delivery systems and operational methodologies for service delivery to the dually diagnosed. Initial information about various systems and methods was gleaned from presentations at the NADD National Convention in Atlanta. The various systems and methods were then researched via the Internet to gain further background information.

In April 2008, the Executive Director for Project Janus made a trip to Washington, DC to meet with federal officials. The purpose of the trip was to gain information regarding Medicaid waivers in other states and information to help identify states with best practices for providing services to individuals with a dual diagnosis of ID/MH. A meeting was held with the policy director for Senator Robert Menendez and an informal discussion/update with Senator Kay Bailey Hutchison took place during the Business and Professional Women's Legislative Conference. A meeting was also held with health and human services policy specialists at the National Governors Association. Through these contacts several states including Alaska, Colorado, Connecticut, Iowa, Louisiana, Massachusetts, Maryland, New Jersey and Ohio were identified as having best practices related to waivers, programs, systems and/or methodologies which may be adaptable to the Texas system. This list was used by Project Janus as a starting point for investigating and comparing delivery systems and operational methodologies in other

states, with the understanding that additional states may emerge during the research which may require further investigation.

During FY2008, Project Janus made direct contacts either by phone or personal visit to officials in identified states and directors of identified programs in Connecticut, Massachusetts, Iowa, Louisiana and Ohio. Some of the best practices identified to date include state sponsored crisis intervention services, state sponsored step-up/step-down programs, program/code definitions which build bridges between state service providers and private providers, inclusion in Medicaid waivers of additional services for individuals with a dual diagnosis of ID/MH, and pilot projects which reach across long established boundaries of state provided services to improve service delivery to those with a dual diagnosis of ID/MH. This information was relayed to the Interim House Select Committee on ICF/MR Services and to state elected officials from the Concho Valley region. Additional contacts either by phone or personal visit will also be conducted in FY2009 to targeted states to gain additional information on these subjects. In addition, a presentation of findings to date will be presented at the NADD National Conference to be held in November 2008.

Goal/Objective #5

Actively seek supplemental funding sources.

Project Janus, Inc. has actively sought supplemental funding sources via three avenues during FY2008. These three include development of an online version of the ongoing Janus Training, marketing of Janus Training as a continuing education resource, and direct searches for available grants.

For the past two years, Project Janus has provided a training program designed specifically for individuals who provide care and/or services to individuals with a dual diagnosis of ID and MH (Janus Training). The training provides these individuals with information about dual diagnosis ID/MH and provides specific strategies for providing services to individuals with a dual diagnosis of ID/MH. Project Janus charges a nominal fee for the training and it is offered on a quarterly basis (or more often) if the need arises. The drawback of the current system for providing Janus Training is that caregivers are required to physically attend a scheduled training event which can take them away from their employment positions (primarily in group homes). This reduces the number of participants who can attend at any given time as group homes have small staffs and may not be able to allow employees to attend on a specific day. The problem is compounded due to the high turnover rate of employees in group homes. Many times, individual employees may be employed and subsequently leave their positions before a Janus Training class is offered. The result is that many employees who interact directly with individuals with a dual diagnosis of ID/MH may lack the knowledge and unique skills necessary for them to be successful in their jobs.

The Board of Directors of Project Janus believes that if Janus Training could be developed into an on-line program, annual subscriptions could be sold to service providers both in the local area and across the state. This would allow more first-line employees to receive training in a timely manner. These annual subscriptions would allow private providers to make the training immediately available to new employees. Employees would be freer to complete the

training in a variety of settings (at work, at home, etc.) by utilizing an access code. Both the Board of Directors and private providers agree that if employees received the training closer to their initial employment dates, staff retention would increase and care for individuals with a dual diagnosis of ID/MH would improve significantly. These would be positive impacts for both the providers and the clients they serve.

To address this need and to investigate a new funding source for the organization, Project Janus is in conversations with the local university as to the possibilities for developing such an online course. These discussions include both the estimation of costs related to course development and the best methods for presenting the information in an online format. If successfully developed, a new ongoing funding source for Project Janus will be established.

A second avenue for new funding sources being pursued by Project Janus is the marketing of the current format of Janus Training to local and area school districts as a continuing education program option for special education teachers. If accepted by school districts as a continuing education program option, a new source of funding for the organization will be created.

Finally, the Executive Director performs regular searches of the federal and state registers, as well as websites of private foundations to identify possible grant opportunities which may be available to the organization. Searches are made for funding development of the online course and for funding of other efforts. Once identified, applications for these funds are completed.

Conclusion

Project Janus made every effort in FY2008 to address at least a portion of each of the goals and objectives outlined in its contract amendment with HHSC and believes that by the end of the grant period (FY2009) all criteria for the goals and objectives will be appropriately and fully met to the satisfaction of the agency. At the end of FY2008, the Board of Directors of Project Janus believes that significant progress has been made toward fulfillment of the requirements and hopes the agency agrees.