

Welcoming Policy

I. Purpose

OMH/OAD Region VI and its contractors, herein referred to as service providers, welcome all persons seeking treatment for co-occurring addictive and mental health disorders, regardless of race, ethnicity, religion, gender, age, sexual orientation, or disability. This policy is adopted to ensure that treatment services and supports are delivered in a compassionate and continuous manner, thereby enhancing the client's treatment experience, treatment success, recovery, and maintenance of wellness.

II. Implementation

- A. Training- programs shall ensure that all employees receive initial and ongoing training on the nature and dynamics of co-occurring disorders and any special needs including issues related to culture, gender, age, sexual orientation, disability, medical conditions, trauma, and family. Employees shall also receive advanced training on relevant treatment approaches, resources, and referral protocols appropriate to their role within the agency.
- B. Program Compatibility – All service providers shall ensure that policies and procedures are consistent with the expectation that clients with co-occurring disorders are welcomed to treatment. Service providers, in a combined effort, shall continuously seek to eliminate any potential conflicts with this welcoming philosophy in all policies and procedures.

III. Policy

Service Providers recognize and acknowledge the needs of their clients with co-occurring addictive and mental health disorders. The “Three A’s- Access, Availability, and Attitude” form the basis of this welcoming policy, which promote a customer-focused culture in the system of care.

- A. Access: All clients are properly screened and further assessed as necessary, in order to determine appropriate treatment needs.
- B. Availability: Treatment shall be provided either directly or through further appropriate referral regardless of where the client enters the realm of services.
- C. Attitude: In an effort to enhance treatment outcomes, service providers shall treat clients in a welcoming manner and shall strive to understand and promptly address their specific needs.

VI. Welcoming Guidelines

- A. Welcoming attitude - Service providers shall demonstrate a friendly, courteous, welcoming attitude at every juncture and across all levels of interaction with clients and their families.

- B. No Wrong Door” – Service providers shall not deny services to any client solely on the basis of the client having a co-occurring mental health/addictive disorder. Therefore, there is “no wrong door” to access treatment services.
- C. No Barriers – clients shall not be denied access to services, including initial evaluation and treatment intervention. Service providers shall seek to avoid and eliminate any arbitrary barriers to treatment, for example, ensuring that services are offered at convenient times for clients. Service providers shall also take reasonable measures to facilitate and follow up on an appropriate referral for additional or alternative services.
- D. Respect – Service providers shall develop and maintain treatment relationships founded on empathy and respect. Service providers, treatment programs, clinical protocols, and standards shall demonstrate a “no shaming” approach, regardless of the client’s readiness to participate in treatment.
- E. Engagement – Service providers shall demonstrate an understanding that a client’s treatment adherence and overall success is dependent upon fostering a client’s engagement in services. Therefore, service providers shall use a variety of excellent customer service practices and clinical techniques including positive reinforcements and motivational interviewing to facilitate service connections and engagement. Service providers shall address non-adherence and relapse as a natural part of the overall treatment and recovery process, and shall maintain awareness of the client’s readiness to change.
- F. Continuous Relationships – Service providers shall utilize motivational techniques and take reasonable measures to ensure the treatment relationship with the client is maintained and enhanced, regardless of the client’s readiness for treatment.
- G. “Whole Person” - Service providers shall demonstrate an understanding that clients with co-occurring disorders often have an array of other short-term and long-term needs. In an effort to treat the “whole person”, service providers shall provide additional assistance and education to clients to meet their individual or family needs, linking client to resources that provide assistance with food, shelter, medical care, legal services, self-helping meetings, and mentor supports.

Notations:

A variety of departmental resources were used in the preparation of these guidelines, as well as outside resources, including wording and language from COCE resources, TIP 42, and “Tips and Topic” by David Mee-Lee, Vol. 2, No. 7, November 2004.