<u>**STATEMENT OF WORK**</u>

Clubhouse

Target Geographical Area for Implementation:

☒ Arenac County   ☒ Bay County   ☐ Other:

Consumer Populations to be Served:

☒ Adults with Serious Mental Illnesses   ☒ Adults and/or Children with Developmental Disabilities   ☒ Persons with Substance Use Disorders

☐ Children with Serious Emotional Disturbances   ☐ Other: ☐ Other:

Services to be Provided:

Provider is engaged to render the Services listed and defined below to the consumer populations in the geographic areas identified herein.

Service Definition Number	Service Title	HCPCS Code	Unit Type	Unit Rate
1	Clubhouse	H2030	15-min unit	

Service Definitions:

(Medicaid Provider Manual; Behavioral Health and Intellectual and Developmental Disability Supports and Services Chapter; Section 5 – Clubhouse Model Programs)

1 **A Clubhouse Program**
A Clubhouse is a community-based program organized to support individuals living with mental illness. Participants are known as Clubhouse members, and member choice is a key feature of the model. Clubhouses are vibrant, dynamic communities where meaningful work opportunities drive the need for member participation, thereby creating an environment where empowerment, relationship-building, skill development and related competencies are gained. Through what is referred to as the work-ordered day, the Clubhouse provides opportunities for member involvement and ownership in all areas of Clubhouse operation. Members and staff work side-by-side in the program as colleagues. Comprehensive opportunities are provided within the Clubhouse, including supports and services related to employment, education, housing, community inclusion, wellness, community resources, advocacy, and recovery. In addition, members participate in the day-to-day decision-making and governance of the program. Through Clubhouse involvement, members achieve or regain the confidence and skills necessary to lead satisfying, meaningful lives and successfully manage their mental illness.

2. **Target Population**: Clubhouse programs are appropriate for adults with a serious mental illness who wish to participate in a structured community with staff and peers and who desire to work on the goal areas reflected in the Core Psychiatric Rehabilitation Components subsection of this document. The beneficiary must be able to

participate in, and benefit from, the activities necessary to support the program and its members.

3. The Clubhouse will adhere to requirements associated with Clubhouse services as detailed in the Michigan Medicaid Provider Manual. The Medicaid Provider Manual may be accessed on the Michigan Department of Health and Human Services website or by using the link provided below.

https://www.michigan.gov/mdhhs/doing-business/providers/providers/medicaid/policyforms/medicaid-provider-manual

Essential Elements of the Clubhouse Model

Member Choice/ Involvement	Member choice and involvement are an ongoing essential process imbedded in all aspects of the Clubhouse model.
	▪ Membership is voluntary.
	▪ Clubhouse Membership is without time-limits; access to an intentional community supports the recovery process.
	▪ All members have access to the services/supports and resources with no differentiation based on diagnosis or level of functioning.
	▪ Members establish their own schedule of attendance and choose a work unit that they will regularly participate in during the work-ordered day.
	▪ Members are actively engaged and supported on a regular basis by Clubhouse staff in the activities and tasks that they have chosen.
	▪ Membership in the program and access to supportive services reflects the beneficiary's preferences and needs, building on the person-centered planning process.
	▪ Both formal and informal decision-making opportunities are part of the Clubhouse work units and program structures. Members can influence and shape program operations. Clubhouse decisions are generally made by consensus.
	▪ Staff and members work side-by-side to generate and accomplish individual/team tasks and activities necessary for the development, support, and maintenance of the program.
Work-Ordered Day	▪ The work-ordered day is a primary component of the program and provides an opportunity for members to regain self-worth, purpose, and confidence. It consists of tasks and activities necessary for the operation of the Clubhouse and typically occurs during normal business hours.
	▪ Although participation in the work-ordered day provides opportunities to develop a variety of interpersonal and vocationally related skills, it is not intended to be job-specific training.
	▪ Member participation in the work-ordered day provides experiences that will support members' recovery, and is designed to assist members to acquire personal, community and social competencies and to establish and navigate environmental support systems.
	▪ The program's structure and schedule identifies when the various program components occur (e.g., work-ordered day, vocational/educational). Other activities, such as self-help groups and social activities, are scheduled before or after the work-ordered day.
	▪ The work done in the Clubhouse is exclusively the work generated by the Clubhouse in the operation and enhancement of the Clubhouse community. No work for outside individuals or agencies, whether for pay or not, is acceptable work in the Clubhouse. Members are not paid for any Clubhouse work, nor are there any artificial reward systems.
	▪ The amount, scope, and variety of tasks are sufficient enough to engage the membership in meaningful activities throughout the work-ordered day.

	• All staff are Clubhouse generalists. Their responsibilities are housed in a unit and they routinely work side-by-side with members to complete unit work. • Staff help to identify meaningful work opportunities for members and are able to facilitate workgroups. • Staff are dynamic and skilled at developing relationships with members. Staff utilizes a strengths-based approach and promotes an equal culture with members, thereby allowing members to experience themselves as valued colleagues in the Clubhouse community.
Employment Services	• The Clubhouse provides its own employment services, including Transitional Employment (TE), Supported Employment (SE), and Independent Employment (IE), consistent with Clubhouse International standards and guidelines, which are available on the ICCD website. (Refer to the Directory Appendix for website information.) • Additional resources for benefits planning are available.

Educational Services	• The Clubhouse provides resources and connections to assist members with goals to return to formal educational settings. This should include some of the following supports:
	
	  ➤ connections with local colleges and General Educational Development (GED) centers,
	
	  ➤ assistance with admission and financial aid applications,
	
	  ➤ tutoring assistance with fellow members when appropriate,
	
	  ➤ formal education groups, and
	
	  ➤ other activities that support member success.
	
	Educational programming should be individualized and should enhance the Clubhouse work-ordered day.

Community Supports	• Community support services are provided by members and staff of the Clubhouse. Community support activities are centered in the work unit structure of the Clubhouse and include outreach, entitlements, housing, advocacy, promoting wellness, as well as assistance in finding quality medical, psychological, pharmacological and substance use disorder treatment services in the community. • The Clubhouse has an advisory board that meets regularly to provide support. Advisory board composition includes individuals from the local community who are able to assist with connections and/or advice in areas such as employment, education, legal assistance, finances, and advocacy. The board also includes member leaders. • The Clubhouse must engage with the local community. Activities may include speaking engagements, connections with media outlets, awareness-raising, political advocacy, community service projects, open houses, participating with the statewide Clubhouse coalition, and relevant conferences. • The Clubhouse ensures that access to the building, Clubhouse-sponsored community activities, and employment sites are available through public transportation or other alternative modes of transportation. The Clubhouse provides or arranges for effective alternatives whenever access to public transportation is limited.

Social Supports	• Opportunities are available for members to develop a sense of a community through planning and organizing Clubhouse social activities. This may include opportunities to explore recreational resources and activities in the community. The interests and desires of the membership determine both spontaneous and planned activities. • Members may have access to the Clubhouse programming during times other than the work-ordered day, including evenings, weekends, and holidays (New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day). Access during these times should be based on the needs of the Clubhouse community and decided by members and staff.
Wellness Supports	• The Clubhouse supports and encourages physical wellness. This may include enhanced nutrition, weight loss, exercise, smoking cessation, and promoting wellness throughout the Clubhouse. Wellness opportunities occur both within the Clubhouse and through connections with community resources. • The voluntary nature of the Clubhouse is respected for all wellness activities. Wellness programming should enhance the Clubhouse work-ordered day rather than detract from it.
Community Setting	• The program is designed as an intentional community, rather than a clinical setting. The Clubhouse does not include clinical personnel such as psychiatrists, nurses, or therapists, nor does it include classes or groups that are of a clinical nature. • The Clubhouse is located in its own physical space. It is separate from any mental health center or institutional settings and is impermeable to other programs. The Clubhouse is designed to facilitate the work-ordered day and at the same time be attractive, adequate in size, and convey a sense of respect and dignity. • To promote pride and ownership, the Clubhouse has its own identity, including its own name, mailing address, fax, e-mail, and telephone number. • All Clubhouse space is member and staff accessible. There are no staff-only or members-only spaces. • There are no staff-only or members-only meetings where program decisions are made.

Documentation:
Documentation of members' progress in the Clubhouse modality differs from documentation requirements in individual treatment modalities and is demonstrated in the following process.

- Recovery progress can be documented in a variety of ways and, at a minimum, should be documented on at least a monthly basis.
- The documentation process, regardless of the established frequency or process, should be streamlined to minimally disrupt the work-ordered day.
- Progress note processing should be integrated into unit work.
- Members have the opportunity to write their own progress notes.
- Generally, all notes should be signed by both members and staff.

4. To ensure fidelity to the model of the evidence-based practice of Psychosocial Rehabilitation, Clubhouses must maintain Clubhouse International accreditation.

Exceptions: N/A

Other Conditions: N/A

A.1   Provider Specific Services Requirements.

In addition to the duties and obligations set forth in the Agreement, Provider shall comply with the following specific requirements:

A.1.1   **Staff Training:** All staff who work with individuals shall have, at a minimum, successfully completed the required training courses in **Exhibit C: Provider Training Requirements**.

   a) Training shall be arranged by the Provider and provided by BABHA (where available) or by training organizations or resources that follow a DHHS curriculum and are approved in writing by BABHA.
   b) Provider understands and agrees that any untrained staff shall only work with individuals under supervision within the individual's home until training has been completed. Any person engaged in direct care work shall successfully complete all required training within 90 days of hire, and complete all annual refreshers and updates.
   c) Training beyond what is required under contract is the financial responsibility of the Provider. Additional trainings secured through BABH will be based on a predetermined fee. Provider's internal training resources should be utilized whenever possible.
   d) A twenty-four (24) hour cancellation notice is required for all trainings conducted by the BABH Staff Development Center. The Provider will contact the Staff Development Center at (989) 895-2395, or via email to staffdevelopment@babha.org, immediately upon becoming aware of a cancellation, but no later than 24 hours in advance.

A.1.2   Service Delivery requirements:

   a) Referrals for services will be made formally by the Primary Case Holder (Case Manager, Supports Coordinator and/or Outpatient Therapist) through the Person-Centered Planning process. The referral will be reviewed by the Provider and a meeting will be set to allow the person requesting services to be informed of the program and services.

   b) The Provider shall designate a single point of entry for referrals and coordination of services.

   c) Hours of service provided will be based on the consumer's needs and Person-Centered Plan (PCP).

   d) Provider is required to utilize the Phoenix Electronic Medical Record (EMR) as dictated by BABHA guidelines.

A.2   Performance Requirements and Indicators.

Psychiatric Rehabilitation Components, Goals and Objectives	Clubhouse environments support recovery in a variety of ways. Generally, expected outcomes associated with accredited Clubhouse participation include greater personal and interpersonal competencies, links with community resources, access to social support networks, increased illness and symptom management, vocational and educational competencies and opportunities, and overall increased personal independence and psychosocial functioning.

- **Competency Building**

  Community living competencies (e.g., self-care, cooking, money management, personal grooming, maintenance of living environment) are built and include:

  ➤ Social and interpersonal competencies (e.g., conversational competency, developing and/or maintaining positive self-image, interpersonal problem-solving, regaining the ability to evaluate the motivation and feelings of others to establish and maintain positive relationships).

  ➤ Personal adjustment competencies (e.g., developing and enhancing intrapersonal abilities and problem-solving in everyday experiences, resolving crises, or managing stress with the goal of facilitating self-efficacy and personal independence).

  ➤ Vocational competencies (e.g., focused tasks that teach how to apply for jobs, conduct employment interviews, provide opportunities of graded steps to promote job entry or reentry, improve co-worker communication and relationships, and task focus and completion).

  ➤ Cognitive competency (e.g., task-oriented activities to develop and maintain cognitive abilities, maximize independent functioning such as increased attention, improved concentration, better memory, and enhanced empathy).

- **Community Support, Inclusion, and Participation**

  Identification of support, inclusion and participation through existing natural supports is necessary to:

  ➤ Achieve optimal levels of community membership.

  ➤ Increase satisfaction with living environment.

  ➤ Support community participation and integration/inclusion.

  ➤ Reduce stigma through education, community awareness, and community networking.

  ➤ Facilitate social capital via peer and social networks, both internal and external to Clubhouse.

  ➤ Promote utilization of organizational support, community resources, and other collateral support systems, as well as linking with community resources, supports, and services for continuity of care.

- **Illness Management and Recovery**

  The identification and management of situations and prodromal symptoms to reduce the frequency, duration, and severity of psychiatric relapses include the following:

  ➤ Gaining competence regarding how to respond to and manage a psychiatric crisis (includes working in partnership with members who express desire to develop a recovery plan and incorporate natural supports in crisis planning).

  ➤ Gaining competence in understanding the role psychotropic medication plays in the stabilization of the members' well-being or recovery.

  ➤ Working in partnership to increase confidence and personal self-efficacy through Clubhouse participation.

  ➤ Gaining access to holistic approaches to recovery that includes education, information and support for health and personal wellness.

  ➤ Gaining access to information to support decision making and increased empowerment through Clubhouse participation.

- **Recovery Enhancing Environment**

  An environment that fosters strength and resilience and practices the inclusion of the following:

  ➤ Is collaborative and non-hierarchical;

  ➤ Supports work and high levels of activity;

  ➤ Respects choice and control; and

  ➤ Provides access to social and peer support.