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Approved By: Mohamad Khraizat	Title: Manager of Health Operations
Signature: 	Date: 2-1-2024

I. POLICY

It is the policy of the ACCESS Community Health and Research Center (ACCESS) to provide an array of services of sufficient scope as to meet the needs of the community it serves. This includes, but is not limited to, Clubhouse Psychosocial Rehabilitation.

II. PURPOSE

The purpose of this policy is to define and detail the program standards maintained by the ACCESS Clubhouse Psychosocial Rehabilitation Program.

APPLICATIONS

This policy applies to all ACCESS Hope House employees, interns and volunteers who provide support and treatment on behalf of the ACCESS Community Health and Research Center.

III. DEFINITIONS

Clubhouse: A clubhouse program is a community-based psychosocial rehabilitation program in which the member, with staff assistance, is engaged in operating all aspects of the clubhouse, including food service, clerical, reception, janitorial and other member supports and services such as employment, housing and education. Through the activities of the work ordered day, clubhouse decision-making opportunities and social activities, individual members achieve or regain the confidence and skills necessary to lead vocationally productive and socially satisfying lives.

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 is made up of those tasks and activities necessary for the operation of the clubhouse and typically occurs during normal work hours. The ordered day is carried out in organizational teams, (Culinary and Administration), defined by the clubhouse that accomplish the work necessary to operate the clubhouse and meet the community living needs of the members, such as housing and transportation. Although participation in the 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 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.

IV. STANDARDS

- A. Clubhouse membership will be made available for persons 18 and over with a serious mental illness who wish to participate in a structured program with staff and peers and have identified psychosocial

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rehabilitative goals that can be achieved in a supportive and structured environment. The primary diagnosis should not be an intellectual disability.

- B. The person must be able to participate in, and benefit from, the activities necessary to support the program and its members and must not have behavioral/safety or health issues that cannot adequately be addressed in a program with a low staff-to member ratio.
- C. The members participating in the clubhouse will be learning to use their natural supports and rely on themselves for transportation, increased participation in community activities and employment. They will move towards greater self-sufficiency, choice and control of their own lives.
- D. The referral process is detailed in Exhibit A. Referrals to the Clubhouse will be received both internally and from external providers using form Exhibit B.
- E. The Clubhouse will ensure an organized, structured environment that provides members a work-ordered day. All members will have access to the services/supports and resources with no differentiation based on diagnosis or level of functioning. Members will establish their own schedule of attendance and choose a unit that they will regularly participate in during the ordered day.
- F. The Clubhouse will ensure that both formal and informal decision-making opportunities are a part of the work units and program structures so that members can influence and shape program operations. These opportunities will include, but not be limited to, morning meetings and activity planning meetings.
- G. Members will have access to the Clubhouse during times other than the ordered day, to include evenings, weekends, and actual holidays. These decisions will be made by the recorded vote of members.
- H. The Clubhouse staff will collaborate with the member and the clinical service provider in the person-centered planning process in the development of psychosocial rehabilitation goals and objectives. These may include, but not be limited to, symptom identification and care, competency building, and the identification and development of environmental supports.
- I. The Clubhouse will ensure the availability of the following work units.

Administration Team (Employment, Education, Maintenance, Outreach, Billing, Newsletter, Men and Woman's Boutique, Hope House Café, Locker Attendant, Dollar Store, Gym Attendant, Greeter, Appointment Setter, Receptionist, Computer Skills Building, ESL, GED, Tutoring Classes, Nutrition, Peer Support)

Culinary Team (Food Service, Outreach, Maintenance, Food Shop, Snack Shop, Cooking Classes, and Snack Cart)

The Clubhouse will maintain sufficient staff to ensure fully daily operation. This will include one full-time,

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on-site manager, with the minimum qualification of Qualified Mental Health Professional, who is responsible for all aspects of clubhouse operations, staff supervision and the coordination of clubhouse services with case management and therapy by providing offsite transportation. The Clubhouse will maintain no less than 2 additional staff. Staff will work side-by-side with the members to facilitate the informal setting and to assist members in reaching their psychosocial rehabilitation goals.

V. PROCEDURES

A. INTENT FOR PROGRAM

Through the psychosocial clubhouse, ACCESS demonstrates that a range of basic services is provided. These services consist of aiding with independent living skills and the other activities such as assisting the person served to develop the skills needed to live as independently as possible in the community.

B. ELIGIBILITY CRITERIA

1. The Members are referred by the primary provider therapist or case manager. The member must:
 - a. Have a Serious Mental Illness. Mild to moderate cases of depression, or anxiety would need to be evaluated in terms of their level of functioning.
 - b. An acceptable level of mental and emotional stability.
 - c. A desire to be involved in their own recovery, with participation in the work ordered day, social activities and a level of training in the Clubhouse model.
 - d. For some, a desire for employment. SSI recipients can earn money from community employment and keep their benefits. The Clubhouse will provide consultation and assist managing employment hours.
 - e. Current Medicaid benefits.
 - f. Age of 18 and up. No childcare is provided. No children are allowed on site.
 - g. Be able to cover cost of meals \$1.00 lunch / snacks per day; of 1-2 dollars minimum. If this is the only issue, please speak to Clubhouse Manager
 - h. Be physically independent for bathroom, meals, getting on/off the van; and any medication use such as insulin.
 - i. Axis I diagnosis. Primary diagnoses on Axis II or of a substance abuse disorder, Alzheimer's, Dementia, Down's syndrome or Autism is not appropriate. Borderline Personality d/o is not recommended.
2. The persons participating in the psychosocial clubhouse must have great interest in moving toward optimal use of natural supports, self-help, greater self-sufficiency, greater choice, and greater control of their lives with the goal of increased participation in the community.

C. DOCUMENTS NEEDED FOR REFERRAL

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1. Referral Form (Exhibit B)
2. Current psychiatric evaluation
3. Current IPOS that includes psychosocial clubhouse as an Objective
4. Ability to Pay Form

D. REFERRAL PROCESS

1. Case Manager assesses client for appropriateness to the Clubhouse
 - a. Medicaid active or Spenddown and General Fund Grant discussed.
 - b. DWMHA CMH Adult open
2. Potential Member tours the clubhouse with Case Manager.
 - a. If interested, attends 2 days the work ordered day to ensure it's an appropriate fit
3. Once client requests to attend Clubhouse
 - a. Case Manager revises the treatment plan to include clubhouse
 - b. Provides Clubhouse referral form to the Intake and Health Benefits Specialist (if referral comes from an outside agency, current psychiatric evaluation if applicable, current IPOS that includes psychosocial clubhouse as an objective and ability to pay must be submitted with referral)
4. Intake and Health Benefits Specialist
 - a. Verifies insurance
 - b. If Medicaid opens the Hope House Program and assigns Clubhouse manager as primary staff
 - c. Notifies Clubhouse Manager that client is ready to become member of clubhouse

E. SERVICES PROVIDED

1. General Information: The Hope House is located 6470 Williamson, Dearborn, MI 48126. Expected average daily attendance to the Clubhouse is a minimum of 17-30 members. The Clubhouse has 3 12-passenger van that is paid for; this van will be available for use in transporting Clubhouse members. Services are provided at times and locations that meet the needs of the persons served. Personnel are available to meet with persons served to discuss matters of mutual interest or concern.
2. The organization provides information or referral to assist the persons served in securing assistance to meet their basic needs, such as income maintenance benefits, food, clothing, and household goods, short-term or emergency shelter, housing subsidies, including long-term housing, medical and health care, information on the impact of employment on securing and accessing future benefits, transportation and other community supports.
3. Services/activities are organized around the goals of the members, their needs and improving the members' understanding of their needs. Generalists will be available to assist the members to achieve their goals of choice in the following areas:
 - a. Community living skill development
 - b. Interpersonal relations
 - c. Recreation or use of leisure time opportunities

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- d. Vocational development or employment
- e. Educational development
- f. Self-advocacy
- g. Access to community related social resources

F. DISCHARGE CRITERIA

1. The consumer is maintaining gainful competitive or supported employment and is no longer in need of MHS services.
2. The consumer is maintaining quality of life with effective natural supports.
3. The consumer/guardian chooses to terminate services.
4. The consumer has displayed behavior that is dangerous to self or others.
5. The MHS Program and PSR services no longer meet the needs of the individual.
6. The consumer is not benefiting from the program.

G. The program's outreach to and follow-up procedures for the persons served are directed to:

1. Those who drop out of services.
2. Those who have been admitted to a treatment, institutional, or other setting.

VI. COMPLIANCE WITH ALL APPLICABLE LAWS

ACCESS Employees, interns and volunteers are bound by all applicable local, state, and federal laws, rules, regulations, and policies, all federal waiver requirements, state, and county contractual requirements, policies, and administrative directives in effect and as amended.

VII. LEGAL AUTHORITY AND REFERENCES

Michigan Department of Community Health, Medicaid Provider Manual, Version October 1, 2014, Section 5.

Detroit Wayne Mental Health Authority, Peer Delivered and Operated Supports FY 13

VIII. EXHIBITS

1. Referral Process Exhibit A
2. Referral Form Exhibit B
3. Pandemic Reopening Policy Exhibit C