

SANILAC COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE POLICY

NUMBER: BA016

NAME: ACCESSIBILITY PLAN

INITIAL APPROVAL DATE:	08/28/1995	BY: Sanilac CMH Board
STAKEHOLDER REVIEW:	01/08/2025	BY: Consumer Advisory Board
(LAST) REVISION DATE:	11/12/2024	BY: CIO
(LAST) REVIEW DATE:	12/12/2024	BY: Policy Committee

I. **PURPOSE**

The purpose of the Sanilac County Community Mental Health Authority Accessibility Plan is to demonstrate our strong commitment to making services accessible geographically, architecturally, and psychologically in a cost effective, individual-friendly manner.

- A. Accessibility Plan: A plan that is created after the annual Accessibility to Services Survey is completed by the Chief Information Officer. The Plan is essentially the Plan of Correction if accessibility issues are identified after the survey.
- B. Accessibility Plan Review: The Administrative Committee will review this plan annually for approval. The Plan will also be reviewed by the Safety and Health Committee.
- C. Accessibility to Services Survey: A survey conducted annually, using focus groups, that asks for input on nine specific areas where obstacles are commonly found and an overall request for additional barrier concerns.
- D. Agency Policies: Agency policies and procedures will be reviewed and updated as required to ensure they meet their intended purpose. These documents will be assigned for review and updating and be submitted to the Administrative Committee and/or the Board as required.
- E. Self-Assessment: Assessments performed by outside resources will be sought when requested to resolve disputes over accessibility. Recommendations to improve accessibility will be made to the Administrative Committee.

Self-assessments or assessments by outside resources will be performed as part of the process for acquiring new facilities or modifying existing facilities through major renovation. Self-assessment of physical barriers will be reviewed by the Safety and Health Committee with recommendations submitted to the Administrative Committee.

- F. Other Reports of Accessibility Issues: Reports by anyone of accessibility issues should be made known to the appropriate program/facility supervisor and to the Safety and Health Committee. The program supervisor will develop a plan to resolve the reported issue, listing the barriers or concerns and timelines to resolve them. The Safety and Health Committee will track the initial report and its progress toward resolution.

If the presence of physical or other barriers in the community prevents or impedes the utilization of services by individuals, such impediments need to be considered in designing effective Individual Plans of Service. Such impediments should also be referred to the appropriate resources.

An annual report of identified barriers to accessibility will be prepared by the Chief Information Officer based on information from the accessibility surveys performed and other sources. This report will include information on plans of action to deal with identified barriers and other concerns about accessibility. Timelines to resolve identified barriers will be specified with updates provided to the Administrative Committee until barriers are considered resolved. This report will be reviewed by the Quality Improvement Committee as well as the Administrative Committee and the Board.

- G. *Affirmative Action:* The personnel policies contain the Agency's position on affirmative action.
- H. *Outreach Activities:* Outreach activities are accomplished through the dissemination of information regarding services offered. Specific outreach modes include radio, television, billboards, newspapers, social media, speakers' bureau, pamphlets, and personal staff contacts with members of the business/services community. The Agency has an ongoing anti-stigma campaign to increase public awareness of mental and physical disabilities and occasionally partners with the other members of the Region 10 PIHP.
- I. *Advocacy Activities:* The *Consumer Advisory Board* provides a significant opportunity for individual advocacy. Individuals are also encouraged to testify at state and local meetings including the CMH Public Hearings.

Individual advocacy activities are also accomplished through "*People First*", an individual run group designed to give individuals served a voice in the organization.
- J. *Individual Based Plans and Activities:* The requirements of person-centered planning and self-determination are the driving force behind activities offered to persons with disabilities. Refer to program descriptions, ongoing community-based lists of activities and presentation schedules, and Person-Centered Plans.
- K. *Services Referral System:* The Agency's referral system is implemented by way of participation in a three county Access Center, which makes appropriate referrals when individuals are determined not to qualify for Sanilac CMH services. Twenty-four-hour crisis service is available. This service is widely advertised in the community.

II. **APPLICATION**

Populations: ALL
Programs: All Direct

III. **REFERENCES**

Sanilac CMH QI Goals and Objectives
Personnel Policies