



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH SERVICES

Capital Center, 50 E. State Street
Post Office Box 727
Trenton, NJ 08625

JON S. CORZINE
Governor

KEVIN M. RYAN
Acting Commissioner

KEVIN MARTONE
Assistant Commissioner

February 10, 2006

Dear Mental Health Community:

New Jersey's mental health system is in the midst of an exciting transformation. Enclosed is a Wellness and Recovery Transformation Statement prepared by the Division of Mental Health Services, as well as a copy of Executive Order #78, signed by former Governor Codey on January 13, 2006. Since the release of the Governor's Task Force on Mental Health report in March 2005, the Division of Mental Health Services has been working diligently to implement the numerous recommendations that were made.

Among the Task Force recommendations is to move the system toward a recovery orientation that promotes wellness. Each day, I am reminded of the compelling reasons to move the system in this direction, from hearing consumers' experiences, to the growing body of supporting research, to a clear national agenda holding all state mental health authorities accountable for adopting principles of wellness and recovery in our state service delivery systems.

I am proud to say that we have been incorporating various wellness and recovery-oriented services in our system for several years now. However, in order to truly respect and be responsive to consumer preferences and their expressed needs, our entire system must embrace these principles. The Wellness and Recovery Transformation Statement is intended to serve as a basis for the activities of the entire mental health community.

On behalf of the Division of Mental Health Services, with your active participation, we look forward to making this transformation a reality.

Sincerely,

A handwritten signature in black ink, appearing to read "K Martone".

Kevin Martone
Assistant Commissioner



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NEW JERSEY DIVISION OF MENTAL HEALTH SERVICES

WELLNESS AND RECOVERY TRANSFORMATION STATEMENT

Purpose

The New Jersey Division of Mental Health Services is issuing this transformation statement in accordance with Executive Order #78, signed by former Governor Richard J. Codey on January 13, 2006. The purpose of this statement is twofold:

- ***To inform the mental health community, including consumers, families, providers and state, county, and local hospitals alike, of the Division's approach for moving services forward.***
- ***To welcome the mental health community as active participants in transforming New Jersey's mental health system.***

Background

The year 2005 was historic for New Jersey's mental health system. Former Governor Codey's political will to help create the state's next generation of mental health services spurred a renewed sense of hope and optimism for people with mental illness, their families and friends, and providers. With significant input from the mental health community at large, the work of the Governor's Task Force on Mental Health provides a clear roadmap to build upon the expansive work being done at the Division of Mental Health Services. Over the past several years, the mental health field has seen the emergence of scholarly research, of best practice, evidence-based models, and of a strong consumer voice that both supports and expects a recovery-oriented system that promotes wellness.

The New Jersey Mental Health Task Force followed a national effort to bring the recovery and wellness philosophy to the forefront. In 2003, the President's New Freedom

Commission on Mental Health acknowledged the unique personal process of recovery. “For some people it is the development of a definition of life beyond being a person with a mental illness. For some individuals, recovery is the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or complete remission of symptoms.” (New Freedom Commission, 2003)

Definitions

Recovery is defined as “a deeply personal, unique process of changing one’s attitudes, values, feelings, and goals, skills, or roles. It is a way of living a satisfying, hopeful, and contributing life even with the limitations caused by mental illness. Recovery involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness.” (Anthony, 1993)

Wellness is defined as an active process of becoming aware of and making choices toward a more successful existence. (National Wellness Institute) Wellness is the process in which a person in recovery is empowered to make purposeful choices that lead to a more satisfying and healthy lifestyle. It includes physical, emotional, intellectual, social, environmental, occupational-leisure and spiritual dimensions, and incorporates disease prevention and health promotion approaches. A wellness lifestyle leads to positive outcomes that can be measured in terms of improved health status, greater productivity, enhanced social relationships, and participation in purposeful activity – all of which provide meaningful opportunities for healing, personal growth, and an improved quality of life. (Swarbrick, 1997, 2005)

Transformation Statement

Based upon the growing body of research and knowledge in the recovery field, as well as first hand accounts from people recovering from mental illness, the Division of Mental Health Services believes that people with mental illness can achieve wellness and recovery. It is clear that consumers of mental health services are able to identify and articulate their individual service and support needs. A strong, responsive system can recognize and meet the varying needs of people as they experience the recovery process. To this end, it is the Division’s policy to ensure that consumers and families receive a system of recovery-oriented services and resources that promote wellness, an improved quality of life and true community inclusion.

This fundamental shift to a recovery orientation challenges our entire system to consider our role in assisting consumers in their transition to wellness. As a result, the landscape of our services will need to adjust accordingly. Our responsibilities as state officials, providers, consumers and family members will evolve as our system embraces evidenced-based and promising practices that promote recovery and wellness across our entire spectrum of hospital-based and community-based services.

Funding is crucial to the successful delivery of services both in our hospitals and in the community, but system resources are not unlimited. Even within those fiscal constraints, effective programs and services exist throughout New Jersey’s mental health system that are based upon principles of wellness and recovery. We intend to build upon this foundation and use available data to create and sustain an effective, outcome-oriented system.

During this transformation, we will respond to the needs of our provider community, including hospitals, community-based agencies, and self-help centers in such a manner

that they will operate as viable, effective organizations. Training and education about wellness and recovery principles must be provided consistently throughout the mental health community, inclusive of Division staff, providers, consumers and family members in order to ensure an understanding of what the expectations are for our entire system. Our system will promote culturally competent services and supports that are chosen by the person in recovery to meet his/her unique needs as well as those of his/her family.

The process for moving to a recovery-oriented system must be inclusive and collaborative. Each of the participants in the mental health system -- consumers, families, hospitals, and our community providers -- hold distinct and valuable knowledge and experience. The Division will incorporate the recovery model into every policy, regulation, contract and expectation, but the effort will only succeed if the entire mental health community helps to shape the system. Furthermore, the mental health system must embrace this transformation as an on-going, continuous process in which every person constantly strives to maintain and support an accessible, flexible, responsive system of care.

Transforming New Jersey's mental health system into a leader in the wellness and recovery movement will take time, as it is not simply a matter of employing specific interventions or practices. An enduring, dynamic recovery oriented system will require elemental changes in funding, accountability, education and service delivery. As we challenge our paradigms, we must acknowledge that recovery is as much about our system as it is for the consumer and their families. The hope, optimism, commitment and expertise of our mental health community will make this vision attainable.

Planning Approach

As we move forward, the Division of Mental Health Services will be reconvening, redefining and refocusing the work of our various advisory committees that meet locally throughout the state to advise us and to make recommendations. The Division will issue a separate communication in April 2006, outlining a planning and implementation process.

Communication

The Division of Mental Health Services will issue quarterly updates regarding the progress the mental health system is making. This will be done primarily on the Division's web-site and will periodically include other written and e-mail correspondence.

REFERENCES

Anthony, W.A. (1993) "Recovery from Mental Illness: The Guiding Vision of the Mental Health Services System in the 1990's."
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Swarbrick, M. (in press) "A Wellness Approach for Mental Health Practice."

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The National Wellness Institute (USA) World Wide Web, January 5, 2002.
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The Presidents New Freedom Commission on Mental Health (2003)
"Achieving the Promise: Transforming Mental Health Care in America"
Final Report: DHHS Pub No SMA-03-3838.

**State of New Jersey
Executive Order #78**

Acting Governor Richard J. Codey

WHEREAS, it has been the priority of my Administration to restore the traditional role of government by helping those citizens who need it the most; and

WHEREAS, throughout my years of public service and my tenure as Governor, I have strived to better the lives of those persons with mental illness and to improve New Jersey's mental health system; and

WHEREAS, consumers, family members, mental health providers and public health practitioners endorse a recovery-oriented mental health system which enables persons suffering from mental illness to live, work, learn and participate fully in their communities; and

WHEREAS, the recovery process enables a person to re-establish a sense of integrity and purpose and to live a satisfying, hopeful and contributory life, within the limitations of the illness; and

WHEREAS, the wellness process is a conscious, deliberate and ongoing process in which a person becomes aware of and makes choices towards a more satisfying lifestyle; and

WHEREAS, the public mental health system must continue to move from an institutional system of care to a community system of care based upon the principles of wellness and recovery;

NOW, THEREFORE, I, RICHARD J. CODEY, Governor of the State of New Jersey, by virtue of the authority vested in me by the Constitution and by the Statutes of this State, do hereby ORDER and DIRECT:

1. The financing of the State of New Jersey's mental health system should be changed to promote state-of-the-art treatment alternatives. These alternatives would include, but not be limited to, permanent supportive housing, supportive employment, in-home services and consumer self-help.
2. The Department of Human Services (the Department) shall commence an immediate review of currently licensed partial-care and partial-hospitalization programs to determine the appropriateness of utilizing and funding, where appropriate, recovery-based programming and services. The Department shall also commence an immediate review of its existing regulations dealing with mental health services and programs for adults and children, with an eye towards revising those rules to allow for the shift to a system based on wellness and recovery. This shift should include staff training, mission, vision, treatment and recovery modalities, contracting and funding.
3. The Department shall examine whether the State Medicaid Plan should adopt the Medicaid Rehabilitation Option, which would allow greater flexibility than currently exists to bill for non-facility-based services such as outreach, peer services, family education, supportive housing services, case management and social and recreational activities. This Option would provide more flexibility to meet consumers' needs by allowing services to be community-based rather than clinic-based, and would better maximize federal dollars, resulting in more financial resources.

4. The Department of Labor and the Department of Human Services shall develop a cooperative training series for individuals with mental illness, family members and providers, in order to increase awareness and utilization of the Ticket to Work Program, to ensure that New Jersey is maximizing the benefits of this federal program and resources for individuals with mental illness and other disabilities.
5. New Jersey should continue and expand its emphasis on evidence-based and/or promising practices, such as physical wellness and recovery programs now offered at the University of Medicine and Dentistry's Centers for Excellence.
6. Performance and outcome measures are essential to the evaluation of treatment and value. The Division of Mental Health Services should move away from its current funding paradigm, which is historical in nature, to one that pays for services based upon quality performance and measurable outcomes.
7. This Order shall take effect immediately.

GIVEN, under my hand and seal this 13th day of January, Two Thousand and Six, and of the Independence of the United States, the Two Hundred and Thirtieth.

/s/ Richard J. Codey

Governor