



CCBHC Innovations: Enhancing Community Collaboration with MOUs, DCOs and Informal Partnerships

NATIONAL
COUNCIL
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Wellbeing



Beacon Mental Health is a community mental health center providing mental health and substance use disorder services in the northern part of Missouri. In 2017, Beacon was certified by the State of Missouri as one of the first Certified Community Behavioral Health Clinics (CCBHCs) in the country. Building on natural community partnerships, Beacon collaborates with multiple community service connections to support the people they serve.

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Identifying natural partnerships

As part of its strategic plan, Beacon has always developed and maintained community partnerships based on reciprocal benefits for agencies and the community. Beacon seeks natural opportunities to meet and collaborate with other community agencies that share common concerns and provide support to similar populations within the communities they serve.

As a result of these natural partnerships, Beacon is a leader in many community initiatives, including the Crisis Intervention Team response model that supports positive interactions between the behavioral health and the criminal justice systems.



Outreach to partners identified by the community

When looking for community partners, Beacon has a natural source of information in its community-based workforce. Case managers and care coordinators have long been the conduit for warm handoffs and ease of referrals. The community-based workforce informally tracks what housing units have openings, what landlords are easier to work with, what medical clinics have same-day or faster access to services, and where there is a culture that supports integrated care.

The CCBHC planning process also requires a community needs assessment, which can identify community connections that will help address the presenting social determinants of the population to be served. The community needs assessment containing valuable information that can be used to drive outreach efforts to secure formal and informal partnerships.

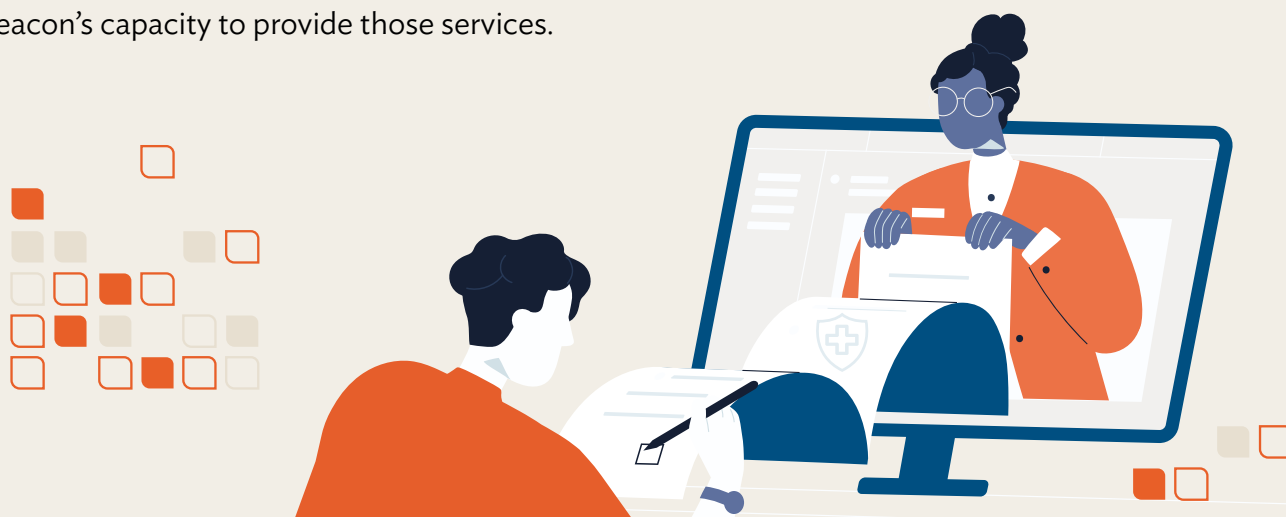
Formalizing partnerships through MOU documents

Memorandum of understanding (MOU) agreements that simply state that two entities exist and will work together are merely a means to comply with regulations and do not naturally result in collaboration of care. When partnering with community agencies, Beacon seeks MOUs that communicate referral protocols to support true collaboration and prevent people from falling through the cracks in a support network. It sees MOUs as agreements that need to be continually reviewed, amended and updated based on the changing needs of the community.



Contractual obligations through designated collaborating organizations

Beacon uses a formal contractual relationship with designated collaborating organizations (DCOs) to expand its ability to provide CCBHC required services. The contract outlines a purchase of services agreement, in which the DCO provides the required service and the CCBHC assumes clinical responsibility for the service. DCOs are a useful tool when the need for services exceeds Beacon's capacity to provide those services.



When formal agreements cannot be reached, focus on the needs of the people served

The most important aspect of the CCBHC model and excellent service provision is accessing the most clinically and socially supportive services to meet the needs of the community. This can happen even when MOUs or DCOs have not been (and sometimes cannot be) developed.

Since its initial CCBHC planning efforts, Beacon has encountered bureaucratic barriers to getting MOU agreements signed, despite significant efforts on the part of both parties. The challenging contractual processes of government or other complex entities can stifle the existence of a signed agreement, but lack of a signed agreement doesn't equate to lack of collaboration. Conversely, the existence of a signed working agreement doesn't always equate to good collaboration.

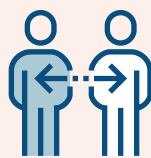
Beacon has formal and informal connections to resources and referral protocols with a variety of agencies across the community it serves. Beacon's clinical services workforce uses these connections daily to support the community and use informed consent documents to collaborate on a specific person's care needs. Informal connections, supported by the informed consent to share client information, are the most common form of collaboration within Beacon's services continuum.



Getting started



Use the **CCBHC's community needs assessment** to identify areas of unmet needs and opportunities for formal and informal partnerships.



Create **natural partnerships** that are supported by resource-sharing and referral protocols.



For agencies where there is frequent overlap, **create regularly scheduled opportunities** for cross-training and sharing resources.



When conflicts exist across agencies with formal or informal agreements, **assume positive intent and create opportunities** for discussion and resolution.



When an MOU or DCO is finalized, **keep the communication and collaboration active** through regular meetings and shared community initiatives.



As part of the agency's strategic plan, **ensure that outreach and collaboration** with formal and informal community.



When an agency in the community creates a new service or resources are created for the community, **be the first agency to reach out and understand how the new service and resource could be implemented** to benefit the population your agency serves.