

Section 2 Overview of the Program

2.1 Study Design

The COSP Multisite Research Initiative is designed as a multi-site study to compare the added benefits of participation in consumer operated research programs while using traditional mental health services to using traditional services alone. The Missouri Institute of Mental Health (MIMH) and R.O.W. Sciences have joined together to act as the COSP Coordinating Center. In addition, there are currently 7 study sites funded by the Center for Mental Health Services (CMHS). Federal Representatives from the CMHS round out the list of collaborators forming the COSP Multisite Research Initiative. The study sites, collaborating with the Coordinating Center and participating Federal representatives, have joined together to design a comprehensive multi-site protocol.

Grantee/Program	State	Principal Investigator
CMHS Federal Team		Elizabeth McDonel Herr, Ph.D. Crystal Blyler, Ph.D.
Coordinating Center		
Missouri Institute of Mental Health	MO	Jean Campbell, Ph.D.
Study Sites		
PEER Center FliCA	FL CA	Dianne Cote
Boston University	MA	E. Sally Rogers, Ph.D.
University of Chicago Center for Psychiatric Rehabilitation	IL	Patrick Corrigan, Ph.D.
Mt. Sinai School of Medicine	CT	Susan M. Essock, Ph.D.
Mental Health Association of Southeastern Pennsylvania	PA	Joseph Rogers Mark Saltzer, Ph.D.
University of Southern Maine	ME	Ruth Ralph, Ph.D.
Vanderbilt University Medical Center	TN	W. Thomas Summerfelt, Ph.D.

2.2 Administration of the COSP Multisite Research Initiative

2.2.1 Steering Committee

According to the GFA, the Steering Committee is composed of the study site principal investigators, one consumer from each of the study sites who is selected by the study site Consumer Advisory Panel (CAP), one CMHS staff collaborator, and the principal investigator of the Coordinating Center. Attendance of principal investigators at Steering Committee meetings is mandatory unless there are extreme extenuating circumstances.

To assure continuity, Consumer Steering Committee members serve terms of at least one-year, unless there are extenuating circumstances. If designated consumer Steering Committee member cannot attend Steering Committee meetings, the CAP at the COSP site selects an alternate member to attend the Steering Committee meeting. The COSP principal investigators are responsible for assuring that site Steering Committee members or alternates attend Steering Committee meetings.

Section 2: Overview of the Program

During Steering Committee meetings consensus is sought in the decision-making process, if timely, appropriate, or possible. At any point in a Steering Committee meeting, a Steering Committee member can call for a vote. Decisions that cannot be achieved through by consensus will be made by majority vote. Each Steering Committee member casts a single vote.

Face-to-face Steering Committee meetings are chaired by the Steering Committee co-chairs and the Coordinating Center Principal Investigator. The Steering Committee co-chairs facilitate meeting administration agenda items, keep the meeting on focus and on time, and other responsibilities as identified by the government project officer, the SC chairs, and the Coordinating Center principal investigator. Steering Committee teleconferences are moderated by the Coordinating Center Principal Investigator or the Steering Committee co-chair.

Leadership of the Steering Committee rotates annually. Ruth Ralph, Ph.D. and E. Sally Rogers, Ph.D. served as co-chairs during the first year. W. Thomas Summerfelt, Ph.D. serves as the chairperson during the second year.

2.2.2 Coordinating Center

The Missouri Institute of Mental Health (MIMH) serves as the COSP Coordinating Center. This effort is being led by Jean Campbell, Ph.D., a nationally recognized mental health consumer researcher at MIMH, and Matthew Johnsen, Ph.D., a research director at R. O.W. Sciences, Inc. and health services and disability researcher. Duties of the MIMH CC include: (1) providing technical assistance (TA) to study sites in areas such as evaluation research; (2) working collaboratively with sites to develop the Common Protocol (CP); (3) monitoring the implementation and fidelity of consumer-operated service programs; (4) maintaining a data repository; (5) utilizing the common database to conduct cross-site analyses of the impacts and cost of service delivery; and (6) disseminating knowledge gained through this project. Closely linked with these specific activities is the overall responsibility of the Coordinating Center to provide input and direction to ensure the scientific integrity of the multisite study.

There are four task forces of the CC: (1) The Cost Analysis Task Force, led by Brian Yates, Ph.D. and composed of experts in cost analysis; (2) the Methods and CP Task Force, led by Paul Binner, Ph.D., and composed of research design and survey protocol experts and consumer researchers; (3) the Cultural Diversity and Competency Task Force, led by Jaime Delgado, and composed of experts in integrating sensitivity to ethnic/race, gender, and disability issues into mental health programs and evaluations; and (4) the Consumer Research and Provider Task Force composed of consumer researchers and service providers with expertise in evaluation and service provision.

Since the collaborative nature of the CC necessitates a communication system that allows for a constant flow of information between participants in a variety of modalities, the CC has developed a web-site, a series of Internet mailing lists, and web-based chat room. MIMH believes that by developing meaningful roles for stakeholders throughout the critical knowledge exchange functions of the CC, a true partnership can be established and maintained among consumers, providers, and researchers based on equity and cooperation. By successfully fostering a learning community among all participants, the MIMH Coordinating Center can build an outreach infrastructure of multiple independent study sites dedicated to understanding consumer-operated services.

2.2.3 CMHS Federal Team

The federal Center for Mental Health Services is responsible for funding the Cooperative Agreements that form the basis of the COSP Multisite Research Study. Because of this, the CMHS Federal Team has a special relationship with the study.

First, as represented within the GFA, Federal representatives are participants on the Steering Committee and have, collectively, a single vote within Steering Committee votes. In this role, and in the deliberations of the Steering Committee, Federal representatives weigh in on matter of science, practicality, and multi-site experience to help shape the decisions of the Steering Committee.

Second, as Project Officers for both the individual study sites and for the multisite coordinating center, members of the Federal team provide input and guidance about operations and problems that may emerge, including providing problem solving assistance and input related to scientific matters.

Third, the Federal representatives are responsible for monitoring and addressing the boundary that is established by the GFA, the original notice that provided the working rules under which the COSP multisite research initiative would be conducted. As described at the first meeting of the Steering Committee, on issues taken by the Steering Committee which violate the original intent of the GFA, Federal representatives are responsible for interpreting and maintaining these boundaries.

2.2.4 Consumer Advisory Panel

A unique and particularly salient characteristic of the COSP multi-site study is the extensive involvement of consumers in every aspect of the initiative. As mentioned previously, in addition to the principal investigators, seven consumer representatives serve on the COSP national Steering Committee as voting members. Each study site is required to have a Consumer Advisory Panel (CAP) to serve as a mechanism to generate input from consumers at the individual study sites. Consumer representatives and alternates to the Steering Committee are elected by local CAPs.

In addition, the national Consumer Advisory Panel is made up of consumers and consumer researchers in the COSP Multisite Research Initiative. The national CAP consists of members who represent two levels of consumer representation: those who will be assessed and those who understand and represent the larger consumer viewpoint. The national CAP is charged with: training consumers involved in the multi-site study in the language of research, providing mutual support, advocating for the consumer point of view in the COSP subcommittees and work groups, and representing the viewpoint of the study participants. The national CAP convened initially at the 1st face-to-face SC meeting. Zahira DuVall, director of the Portland Coalition in Portland, Maine, was elected chair at the 2nd face-to-face SC meeting. The national CAP currently has 30 members who participate in face-to-face SC meetings, CAP listserv, and teleconferences.

Issues addressed by the CAP have included: (1) measurement of diagnoses, symptoms, and distress; (2) review of coercion scales and development of a new coercion scale; (3) review of

Section 2: Overview of the Program

demographic language and items regarding sexual orientation, religion/ spirituality, and finances and entitlements; (4) review of social support scale; (5) recommendation of recovery measures; (5) overall review and recommendations on revisions to the entire draft baseline CP; and (6) development and refinement of common ingredients of COSPs.

At the COSP MIMH Coordinating Center level, several consumer staff members have been hired. Further, the Coordinating Center has subcontracted with a number of consumers who consult to the project.

2.3 Study Population

Study participants are defined as persons age 18 and over who currently or at any time over the past year have had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the DSM-IV that has resulted in functional impairment which substantially interferes with or limits one or more major life activities.