

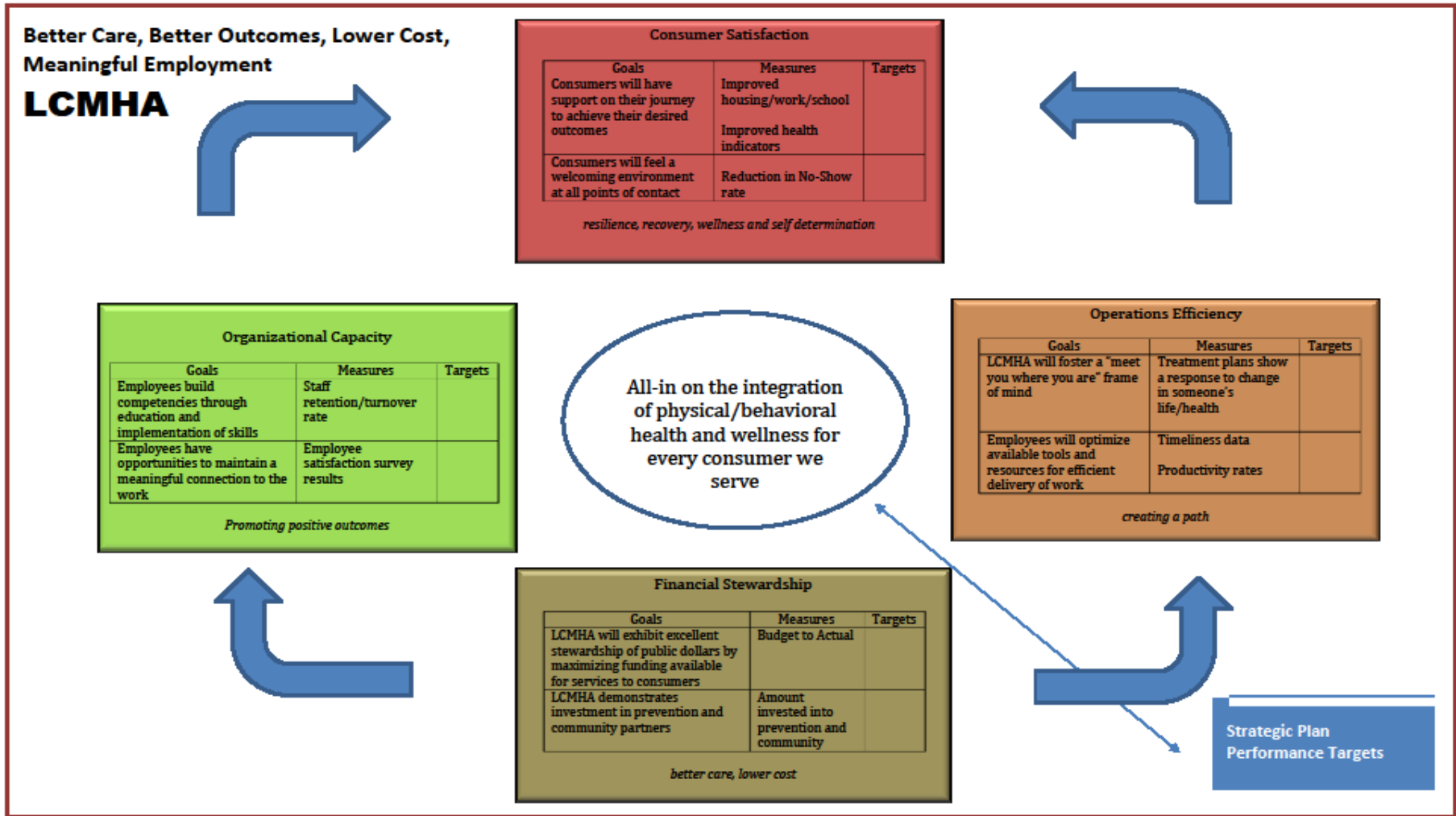
STRATEGIC PLAN

2018-2021

Kathryn Szewczuk, Executive Director

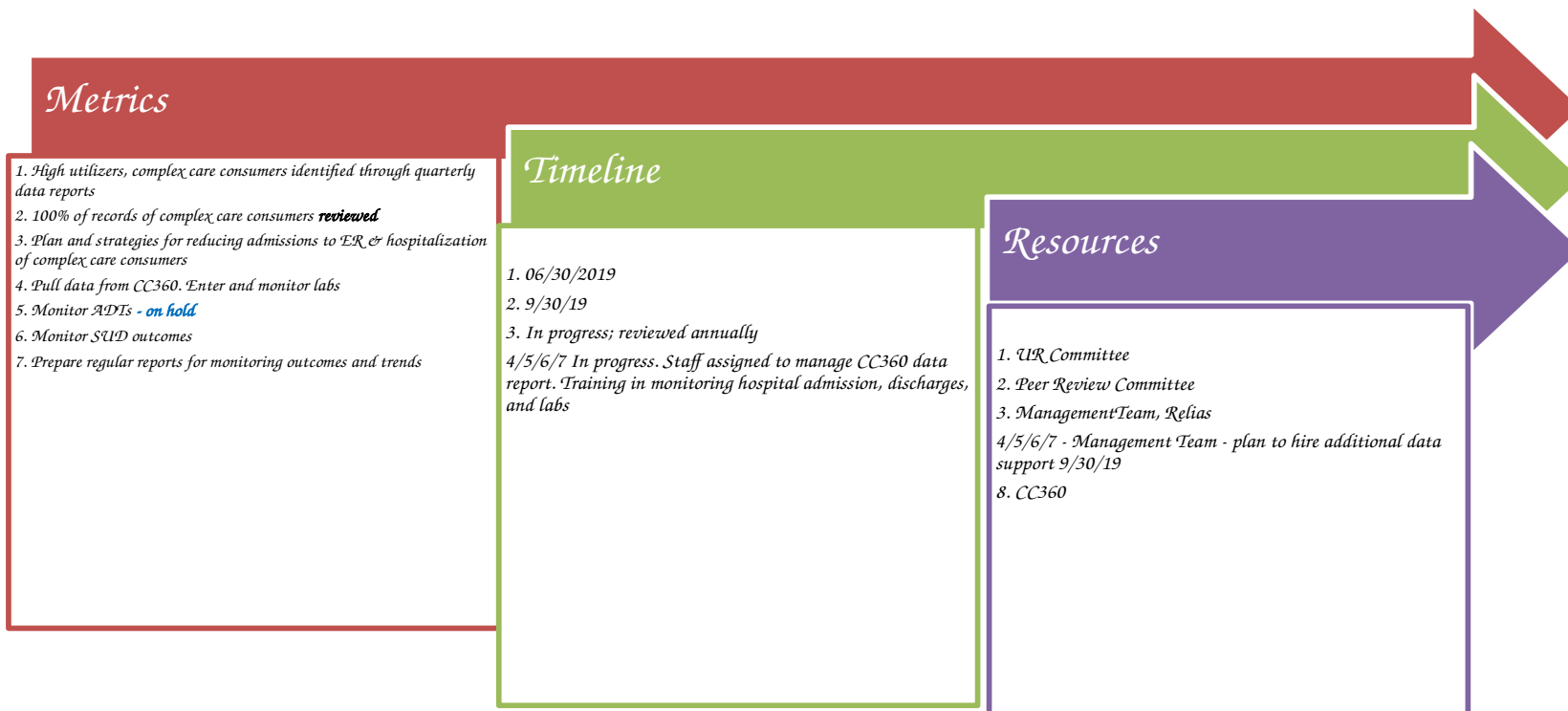
2018

MEASURES OF SUCCESS



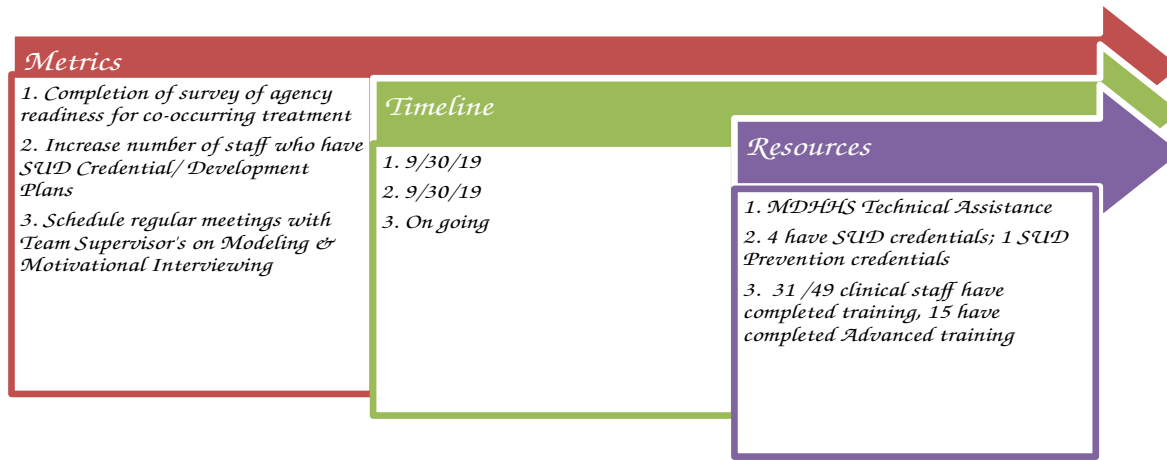
A. Build competencies in Integrated Care

- a. As best practice measure continue education of integrated care management
- b. Assign data management support for Integrated Health for agency staff – pull data from CC360, enter and monitor labs, monitor ADTs, monitor SUD outcomes, prepare regular reports for monitoring outcomes and trends
- c. Using Integrated Care Management competency will result in fewer ER visits
- d. Continue meetings with Medicaid Health Plans for complex care consumers



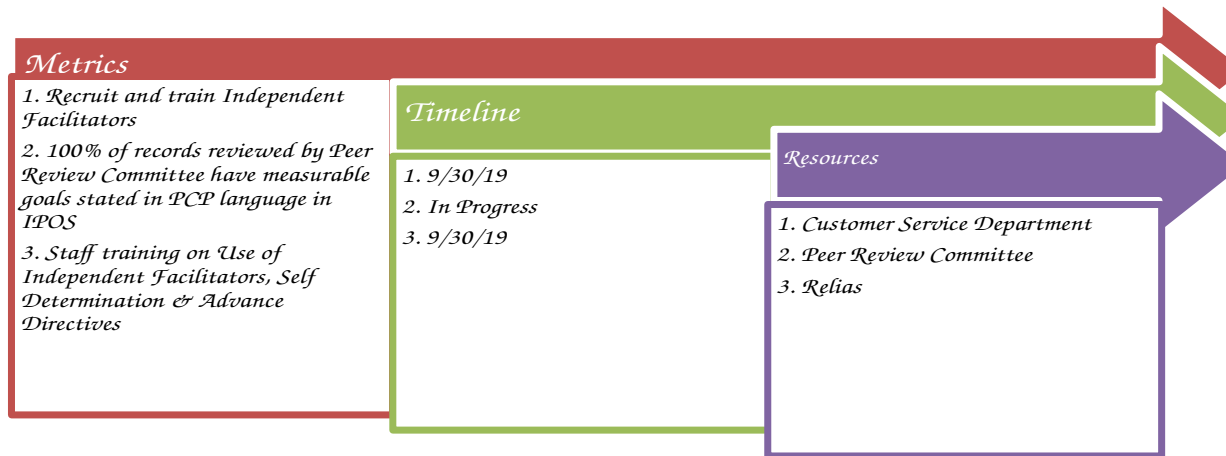
B. Build competencies in Co-occurring Treatment

- a. All Clinical staff demonstrate basic skills in motivational interviewing
- b. Competency to treat co-occurring as a target complex care population; engagement groups



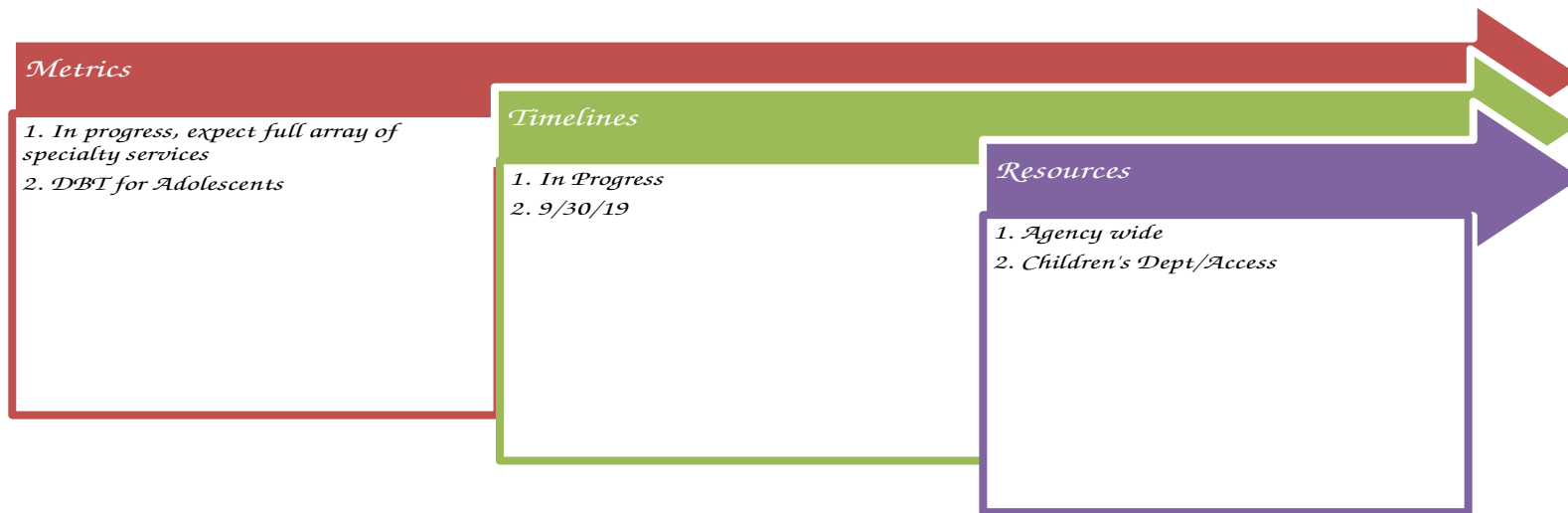
C. Providing Quality care and services within the Medicaid requirements and directives:

- a. Demonstrate expertise in Person Centered Planning, including use of psychiatric and advanced directives, self-determination
- b. Home and community based services rules



D. Develop Specialty Outpatient Services:

- a. Offer Autism Assessment, DBT, Co-occurring treatment, ES/OTP Dept.
- b. DBT for Adolescents



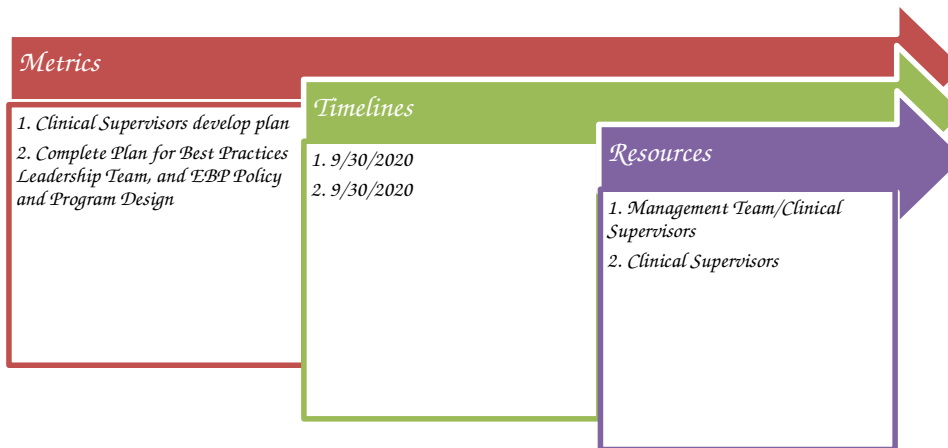
E. Continue to develop community partnerships that improve our position in a competitive environment:

- a. K-12 transition services and College partnerships, increase awareness of Mental Health, develop employment opportunities and continued trauma training
- b. DHHS – trauma training for foster care, adoptive family disruption prevention
- c. Courts, law enforcement, jail diversion, community wraparound for frequent offenders
- d. ProMedica – ER, SUD, Care Management for complex care consumers (ADT)
- e. Increase Psychiatric inpatient capacity
- f. Public Private partnerships; begin exploring partnerships with other payers to help address the states goal of healthcare transformation
- g. Community Crisis team and victim services unit
- h. Establish partnerships with local individual Primary Care Physician sites



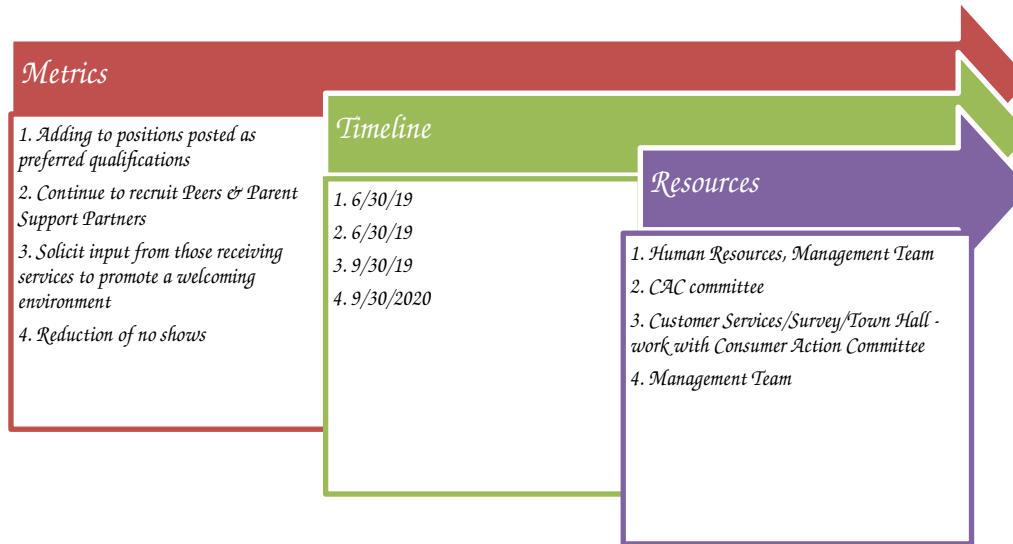
F. Develop Best Practices Leadership Team

- Composed of Master level Clinicians, Clinical Supervisors and Performance Improvement Coordinators who are trained trainers, mentors and coaches for EBP
- Provide incentives for certification and training certification
- Recommends EBP services, program design, eligibility, length of treatment, expected outcomes for marketing to payers



AS ONE WAY TO ADDRESS AND ERASE THE STIGMA OF MENTAL ILLNESS, THE BOARD WILL SET THE TONE TO EMPOWER INDIVIDUALS BY USING PERSON-FIRST LANGUAGE, INDIVIDUAL NAMES, AND PROVIDE MORE OPPORTUNITIES FOR DECISION-MAKING ROLES FOR INDIVIDUALS SERVED (AS PEERS, CASE MANAGERS, HELPERS, SPECIALISTS, AND BOARD MEMBERS)

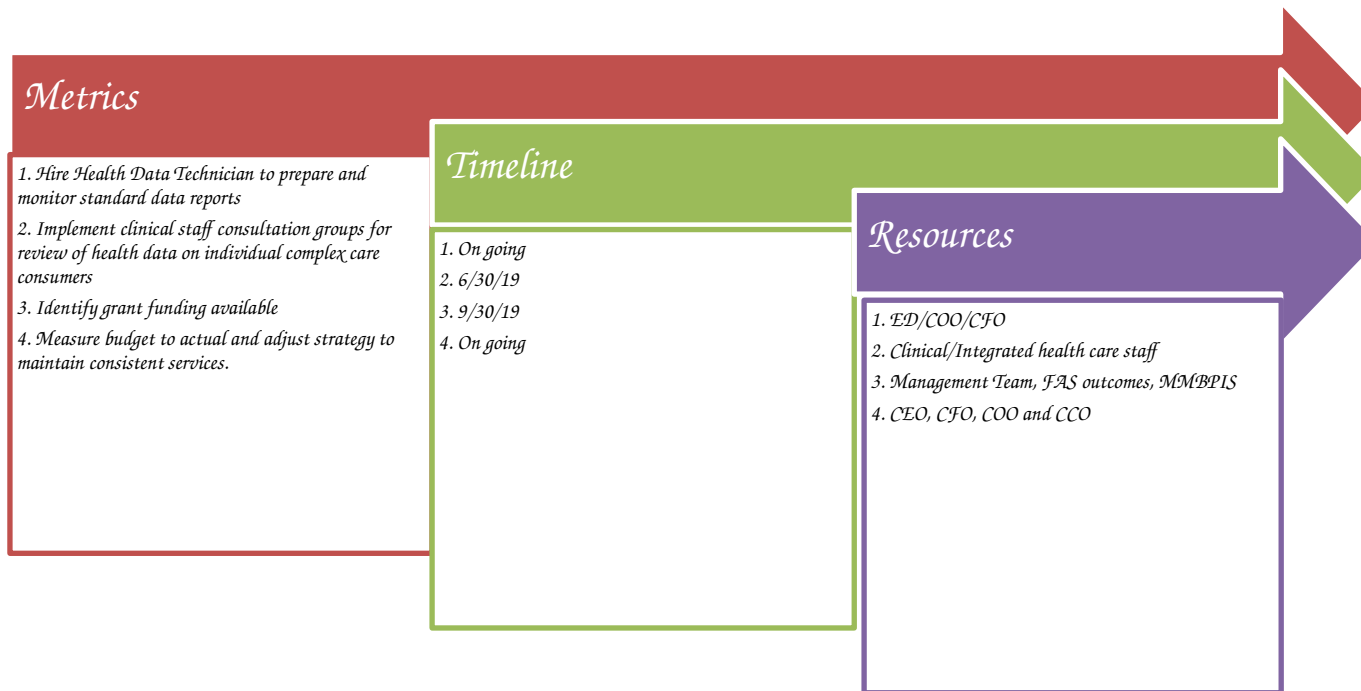
- a. Increasing employment of people with lived experience: Recovery Coaches, Peers and other positions throughout the agency
- b. Parent Support Partners to Children's Team, recruit/employ Youth Support Specialist and DD Peer Support Specialist
- c. Solicit input from those receiving services, family members and community partners to promote welcoming environment and optimize Customer Services



GOAL #3

ABILITY TO GENERATE DATA/INFO THAT WILL ALLOW CMH TO MAKE SOUND/EFFICIENT DECISIONS (ENHANCE/UPGRADE TECHNOLOGY)

- a. Define reports to use data for Performance Improvement, Utilization Management, Productivity, Outcome Measurement etc.
- b. Provide support for staff learning to use data for decisions, and integrated health outcomes
- c. Consider Grant Funded Innovative Consumer Support Technology (myStrength) to empower consumers
- d. Ensure excellent utilization of public dollars by maximizing funding available for services to consumers and demonstrate investment in prevention and community partners.



GOAL #4

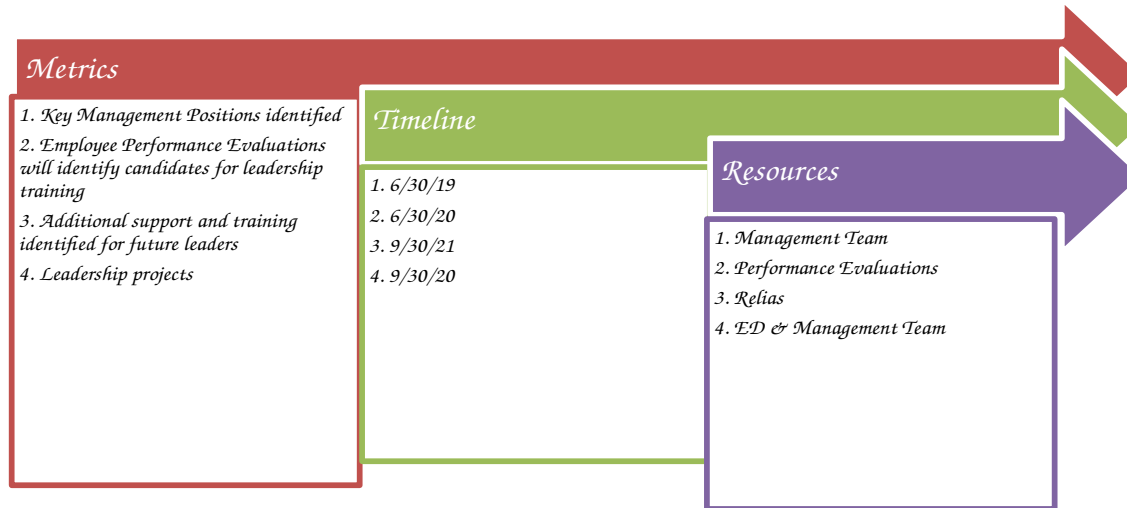
BOARD WILL PROVIDE ADEQUATE STAFFING WITH COMPETITIVE SALARIES/BENEFITS

- a. Executive Director recommend adjustments to LCMHA salary and benefits to support recruitment and retention of a workforce to provide excellent treatment and supports to Lenawee County residents
- b. Identify additional positions necessary to support full array of Specialty services: Fully integrated treatment

GOAL #5

BOARD WILL HAVE A SUCCESSION PLAN TO ADDRESS EXPECTED FUTURE RETIREMENTS

- a. Identify key staff positions and begin back up training and/or hiring for continuity of critical job functions
- b. Identify leadership candidates within LCMHA staff
- c. Provide additional support and training for those identified – select participants for completion of National Council Leadership Skill Training (Relias)
- d. Provide project leadership opportunities for identified staff

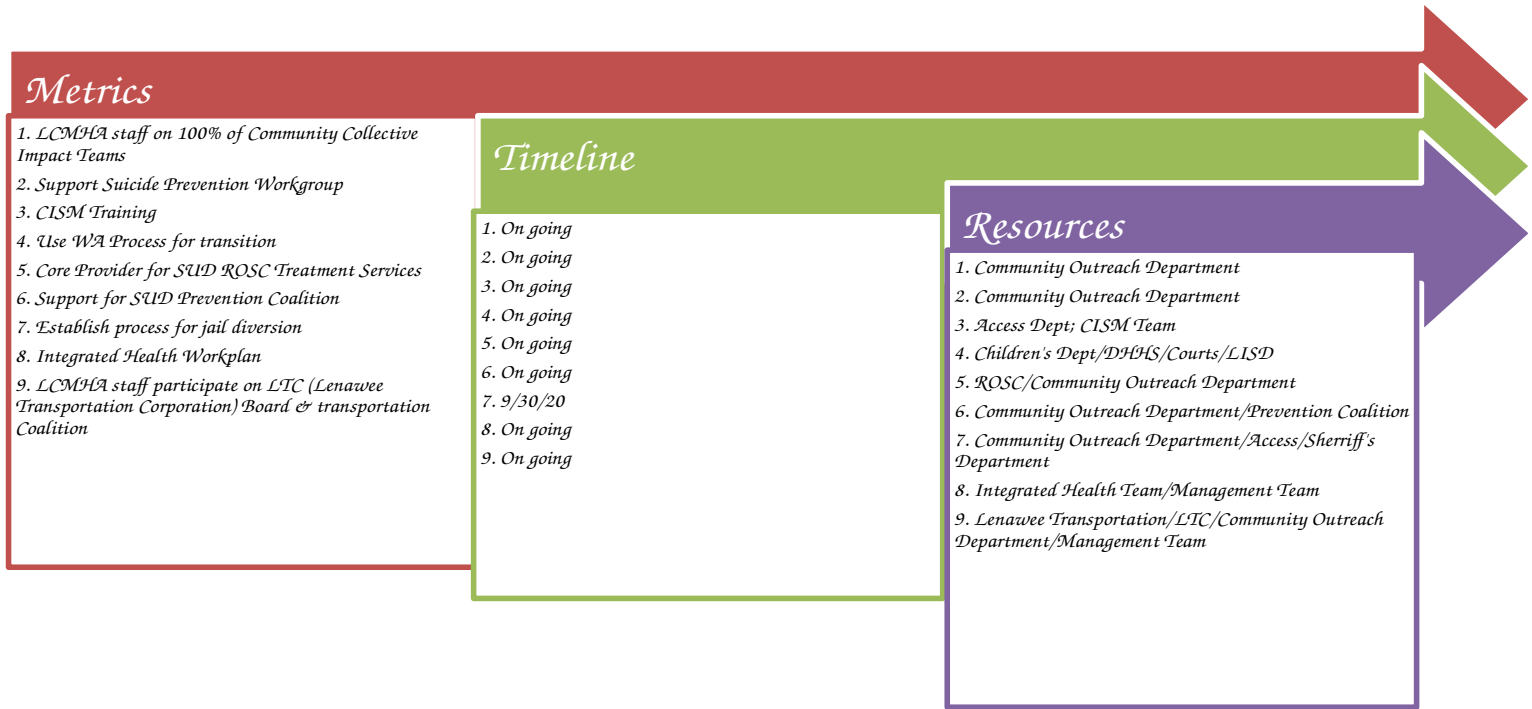


GOAL #6

USING A COLLECTIVE IMPACT MODEL, STRENGTHEN COMMUNITY PARTNERSHIPS TO ACHIEVE COMMON GOALS

- a. Create a Trauma Informed Community
- b. Reduce Risk of Suicide
- c. Provide crisis support and crisis stabilization
- d. Support transition for youth exiting Special Education, Corrections and Foster Care – implementing Wraparound Transition planning
- e. Continue to develop a Recovery Oriented System of Care

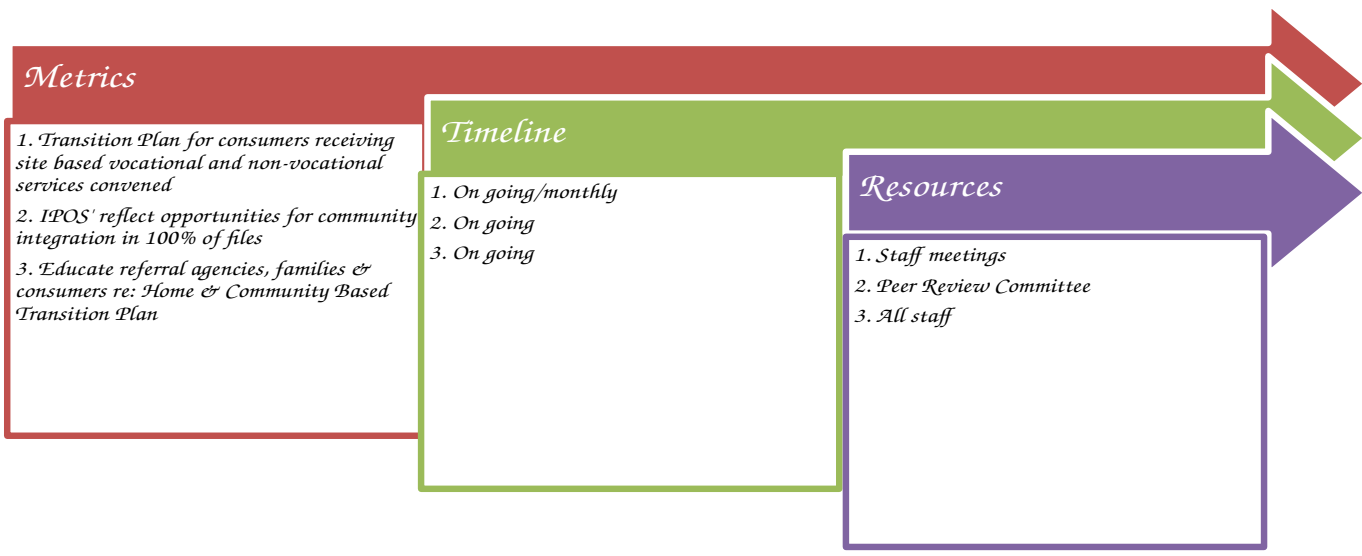
- f. Support Prevention Services for At Risk Populations
- g. Support jail diversion
- h. Support integration of health, behavioral health and substance use disorder services
- i. Improve access to transportation services for Lenawee County residents



GOAL #7

MAXIMIZE OPPORTUNITIES FOR INDIVIDUALS RECEIVING LCMHA SERVICES TO HAVE ACCESS TO THE BENEFITS OF COMMUNITY LIVING AND TO RECEIVE SERVICES IN THE MOST INTEGRATED COMMUNITY SETTINGS (CMS FINAL RULE FOR COMMUNITY INTEGRATION)

- a. Implement transition plan for site based pre-vocational and non-vocational services to community based services
- b. Use Person Centered Planning to help individuals, families and guardians identify opportunities for community integration and community inclusion
- c. Educate community referral agencies and community stakeholders about transition to community based services



GOAL #8
PLAN FOR BOARD DEVELOPMENT TO ADDRESS CHANGING RESOURCE NEEDS AND CURRENT ENVIRONMENT REQUIREMENTS

- a. Training – Understanding Federal, State and County funding (including Medicaid), Board Responsibilities in ensuring Best practices and services and CMHAM Board work series/attending CMHAM conference's
- b. Plan for Board Member Recruitment

Metrics

- 1. All Board member will complete the Boardworks series trainings*
- 2. Plan is created for recruitment*

Timeline

- 1. 9/30/2019*
- 2. 9/30/2019*

Resources

- 1. ED & Board*
- 2. ED & Board*