

Aiken Barnwell Mental Health Center Strategic Plan FY 2015-2019



**"Prevention Works, Treatment is Effective
and People Recover"**

Overview

According to SAMHSA (December 19, 2013), nearly one in five American Adults or 43.7 million people experienced a diagnosable mental illness in 2012. Only forty-one percent of these adults received mental health services in the last year. The top three reasons given for not receiving help were: unable to afford the cost, thought they could handle the problem without treatment, or did not know where to go for services. Mental illness impacts residents of all ages, races and economic backgrounds. Mental disorders are the leading cause of disability in the United States for ages 15-44 and the burden on health and productivity have long been underestimated.

From July 1, 2012-June 30, 2013 (FY 13), Aiken Barnwell MHC served a total of 4520 people with an average caseload of 2247 clients. Sixty-three percent were diagnosed with a major mental illness. Of those open cases approximately 55% were female; 57% were white; 33% were ages 0-17; 67% were ages 18 and older. From July 1, 2012-June 30, 2013, a total of 59, 602 clinical client contacts were provided in regards to the following clinical services: Crisis intervention services, Mental Health assessment, Psychiatric Medical Services, Case-Management, Individual Therapy, Peer Support Services, Psychosocial Rehabilitation Services, Group Therapy, Nursing Services, and Family Support. ABMHC (FY 13) had a total of 23 inpatient admissions (2947 bed days) to the following inpatient facilities: Bryan Psychiatric Hospital (BPH), William S Hall Psychiatric Institute Children and Adolescent Hospital (WSHPI-C&A), William S Hall Psychiatric Institute- Residential Treatment Facility (WSHPI-RTF), William S Hall Psychiatric Institute- Substance Abuse (WSHIP-SA) and Earl E Morris Jr Alcohol and Drug Addiction Treatment Center.

Based on ABMHC's statistics in comparison with national trends and population data, ABMHC would have only provided services to approximately 10% of such adults leaving 90% to be untreated and/or seeking treatment from another provider.

Defining the future of ABMHC requires careful thought and a clear understanding of how the delivery of behavioral healthcare is changing and a precise knowledge of the needs of our community. Layered into this context are the complexities of healthcare reform with a consistent theme of delivering higher quality of care and services effectively and efficiently at a lower cost. ABMHC must also address gaps and emerging needs. These include: the fragmentation of services, lack of consistent data and outcomes, insufficient funding and resources and workforce challenges.

Significant reductions in funding since 2008 significantly impacted mental health operations in Aiken and Barnwell counties. The South Carolina Department of Mental Health's budget was dramatically cut \$73.6 million dollars from Fiscal years 2009-2012. This resulted in a 39.3% budget cut which put SCDMH's funding at 1987 levels. ABMHC was forced to restrict eligibility for services during this time-frame.

Individuals seeking behavioral healthcare typically have multi-needs and co-morbid issues; henceforth, they must interact with a wide range of agencies to access services. This often results in fragmentation of services causing frustration, duplication of

services, increased costs and interruptions in care. Many agencies have neither the capacity nor the resources to implement a comprehensive electronic health record; henceforth, pertinent information is not shared amongst providers negatively impacting continuity of care and collaboration in treatment planning. ABMHC utilizes an electronic medical record in conjunction with SCDMH yet ABMHC is unable to share information electronically with its partners. Agencies have been unable to collect consistent data and outcomes thus impacting the ability to validate the need for treatment with managed care and insurance organizations. ABMHC has collected limited data based on SCDMH requirements; however, much work in this area needs to be done.

Workforce challenges exist as the workforce in behavioral healthcare ages and is insufficiently sized and trained to meet the growing need and demands in behavioral healthcare. ABMHC will lose approximately 38% of its current staff in the next 10 years due to retirement.

In addition to challenges and threats to the organization, ABMHC must explore opportunities for the organization to include: expansion of services to rural areas, various populations and ethnicities and schools; integration of its services with other state human service agencies and primary care facilities and expansion of technology. There will be an increased need and demand for meeting the holistic needs of clients with a “no wrong” door approach.

Despite the many challenges and opportunities, ABMHC has a strong foundation on which to create a premier behavioral healthcare system- one that is built on recovery and on the premise that mental health is essential to overall health. System strengths include: a person-centered recovery focus; collaboration and partnerships with stakeholders and community partners; utilization of evidenced based practices; identification of outcome measures and movement towards collecting and reporting; a focus on expanding technology thus making services more accessible via telepsychiatry and e-prescribing; a strong executive team, and a dedicated, professional and competent workforce.

ABMHC is accountable for the delivery of safe, effective and evidenced based behavioral healthcare to the community. ABMHC is challenged to develop and implement more effective and cost-efficient strategies to meet the needs of persons diagnosed with mental illness. In light of the changing landscape and many challenges, ABMHC identified strategic priorities, goals and objectives for improving and maintaining the quality, scope and access of public mental health services offered in Aiken and Barnwell counties. The priorities form the basis for ABMHC’s strategic plan described in this report. We believe this plan will allow ABMHC to flourish as an excellent behavioral healthcare provider. This plan is not meant to be static: the goals and objectives in this document will continue to be updated and modified based on the changing landscape of mental health, unanticipated challenges and opportunities, input received from stakeholders, as action steps are implemented and as specific data is collected to evaluate the effectiveness of our implementation. The Strategic plan is a roadmap for ABMHC’s future and we believe it includes essential elements that can guide our agency to greater excellence. Information about this strategic plan will be available at www.aikenbarnwellmhc.com.

Sources of Input and Information

In preparation for the creation of this strategic plan, ABMHC has been working with local stakeholders to identify:

- ✓ Unmet mental health needs
- ✓ Strengths and areas of improvement for ABMHC
- ✓ Opportunities for expansion
- ✓ Current and future threats that may impact ABMHC's ability to support individuals and families with mental health needs.
- ✓ Innovative and evidenced based approaches and models to providing and supporting mental health services.

Input and information came from a variety of sources:

- ✓ Mental Health Community Forum November 2012
- ✓ Community Needs Assessment 2013
- ✓ Stakeholder Satisfaction Survey 2013
- ✓ Strengths, Weaknesses, Opportunities & Threats Analyses 2013
- ✓ Employee Needs Assessment and Satisfaction Survey 2013
- ✓ Aiken Barnwell Mental Health Center Staff 2013-2014

Description of Agency (Mission, Values, Six Pillars of Excellence & Guiding Principles)

Aiken Barnwell Mental Health Center (ABMHC) is a community mental health center providing behavioral health services to families, adults and children who are diagnosed with a mental illness. Intervention, prevention and recovery services may include: Assessment, Therapy, Care-Coordination, Psychosocial Rehabilitation, Peer Support & Community Collaboration. ABMHC serves the residents of Aiken and Barnwell counties, South Carolina, rural communities. Aiken Barnwell Mental Health Center has provided essential behavioral services to the residents of Aiken & Barnwell counties since July 1, 1965.

Our Mission

Aiken Barnwell Mental Health Center (ABMHC) aspires to be the premier provider of behavioral services to support the recovery of families, adults and children living in Aiken and Barnwell counties.

Our Core Values

In order to best serve our clients and remain true to our employees, ABMHC embraces the following core values:

Celebrating Diversity - "Respecting the rights, differences, and dignity of others."

Recovery- "Achieving a high quality, self-directed, satisfying life integrated in the community."

Quality- "Commitment to Excellence."

Public Awareness- "Dedicated to increasing the understanding of mental illness and eliminating stigma."

Collaboration- "Partnering with clients and stakeholders to create healthy communities."

Technology- "Embracing Technology" to improve efficiency and quality of care."

The Six Pillars of Excellence

Aiken Barnwell chose a strong supporting structure for our strategic plan and to help move our agency towards a culture of excellence. ABMHC has adopted the Six Pillars of Excellence as identified by the Studer Group- Service, Quality, People, Finance, Growth, and Community- to demonstrate our commitment in making ABMHC the leader in behavioral care in Aiken and Barnwell Counties. The Six Pillars of Excellence are the foundation for our mission and provides the framework to help us align and prioritize operational goals, develop a strategic plan, and communicate our progress and outcomes to our stakeholders.

Quality- ABMHC provides safe, effective and evidenced based behavioral health care that can be defined, measured and published. ABMHC is committed to leading the community in improving health status and access to care. We take pride in what we do.

Service- Our job is to exceed customer (clients, families, stakeholders, employees) expectations at every turn thus establishing ABMHC as the preferred provider of choice in Aiken and Barnwell counties.

People- We recognize that being the behavioral health care provider and employer of choice means recruiting, developing and retaining a competent, culturally diverse, motivated and productive workforce. Every team member is selected for their leadership, professionalism, expertise, compassion and commitment to the values that set ABMHC apart.

Finance- It is our responsibility to provide cost-effective, compassionate care and excellent services to our payers and clients. We will demonstrate fiscal responsibility and accountability to advance our mission and values.

Growth- ABMHC is committed to the continual pursuit of new and better ways of serving our customers. We stay abreast of clinical practices and technological advances. We offer continuing education and training for all our team members. We are also a training resource for individuals pursuing mental health careers.

Community- ABMHC actively partners with local and regional organizations and service agencies to effectively meet the needs of the community and to increase the public's awareness of mental health issues, mental health treatment and access to treatment.

The Nine Guiding Principles

The Nine Guiding Principles serve as a roadmap for leadership to develop an excellence-based culture and promote the organization's successes. It's a step by step process that takes ABMHC where we are to where we want to be. The Studer approach generates passion thus helping employees to focus and engage in work that is purposeful, worthwhile and makes a difference in the lives of others. Studer's principles align the organization's leaders from top to bottom to focus on outcomes that really matter to long-term success creating a balance of goals and activities that address the holistic performance of the organization while minimizing distractions. The Studer principles help create better leaders by creating consistency across the organization and putting in systems of accountability to execute operational plans. Ultimately the Studer pillars and principles create a great place for clients to receive care by first creating a great place for employees to work.

Commit to Excellence

Excellence is when employees feel valued, staff feels their clients are getting great care and the clients feel the service and quality they receive are extraordinary. A commitment to excellence impacts the bottom line while living out the mission and values of the organization. It aligns staff and leaders and put the "why" back in health care. Commitment to excellence means setting measurable goals under each of the Six Pillars.

Measure the Important Things

In order to achieve excellence, ABMHC needs to be able to objectively assess its current status as well as progress. Principle 2 helps an organization define specific targets and measurable tools and align the necessary resources to hit those targets. What gets measured gets done.

Build a Culture around Service

All successful change requires well thought-out processes that must become the norm or be hardwired in the organization. This principle teaches how to connect services to organizational values- script behaviors, create employee-based service teams, teach service recovery, and develop standards of performance. There is no higher responsibility than to ensure high quality and a caring environment for our clients.

Create and Develop Leaders

In order for an organization to be great, it has to have great leaders. Leadership is crucial to sustaining a culture of excellence. This principle teaches how to identify current and future leaders and then how to develop, train, and equip those leaders in a cost-effective manner.

Focus on Employee Satisfaction

The saying, "A chain is only as strong as its weakest link," holds true within every organization. Every employee is critical to the success of the organization. Satisfied employees do a better job. It's that simple. This principle show how an organization, by focusing on employee satisfaction, can improve client satisfaction while decreasing costs.

Building Individual Accountability

Principle 6 teaches ABMHC how to create a self-motivated work-force by creating a sense of ownership in the organization.

Align Behaviors with Goals and Values

Through Principle 7, we are shown how to create and implement objective, measurable evaluation systems that are tied to the Six Pillars. The leader's evaluation must be aligned with the desired outcomes and behaviors via implementation of an objective, measurable leader evaluation tool.

Communicate at ALL Levels

Change occurs when all leaders are aligned and everyone understands what is important, and what they need to do to help accomplish organizational goals. This method speeds up the decision process, creates proactive behavior and improves working relationships. Organizations who apply this principle will find that "Administration" is often viewed in a more positive manner.

Recognize and Reward Success

Everyone makes a difference. Create win-wins for staff and never let great work go unnoticed! Establish real life examples for others to follow.

Organizational Priorities, Goals & Objectives

Priorities, goals and objectives are based upon the Six Pillars of Excellence. The plan addresses both short-term (ST) goals with a target date of 0-18 months and long-term (LT) goals with a target date of 19-60 months.

Quality

Priority # 1

To provide safe, effective and evidenced based mental health care that can be defined and measured.

Goals, Objectives, & Action Steps

1. Provide healthcare that is safe, holistic, recovery oriented and person centered.

- A. Offer Peer Support Services to all adult clients as eligible. (ST-LT)
 - 1. Provide all adult clients with brochure about PSS services upon intake.

Performance Measures

- ✓ Total # of WRAP plans completed annually.
- ✓ Total # of PSS contacts provided monthly.
- ✓ PSSAM outcome measures (SCDMH).

- B. Increase engagement in treatment planning process. (ST-LT)
 - 1. Increase percentage of IPOC's signed by client.

2. Encourage family and/or caregivers to be involved in treatment.
3. Provide semi-annual training for families and care-givers.
4. Utilize Family Support Service.
5. Utilize collaborative documentation.

Performance Measures

- ✓ Overall agency failed appointment rate will not exceed 20%.
- ✓ 90% of IPOC's will be signed by client.
- ✓ Total # of family members who participated in training.
- ✓ Total # of family support contacts annually.
- ✓ % of Clinical service notes completed in one day.

C. Offer all clients a comprehensive care-coordination assessment to identify needs, link with appropriate resources and monitor services to ensure continuity of care and promotion of holistic care. (ST)

Performance Measures

- ✓ Total # of contacts provided via care-coordination.

D. Identify and collect key recovery oriented mental health outcome measures. (ST-LT)

1. Identify and prioritize key leading performance indicators.
2. Establish data collection and reporting mechanisms for key indicators.
3. Collect, analyze and report data on key indicators using shared drive.

Performance Measures

- ✓ CARF Accreditation will be awarded for three years for the following programs: Adult Outpatient Services, CAF Services & Psychosocial Rehabilitation. Agency is accredited through 11/2015.
- ✓ Out of home placement rate will not exceed 2%.
- ✓ Overall agency audit score will equal to or be greater than 90%.
- ✓ Clients will be surveyed annually using MSHIP at a 90% confidence interval and 5% margin of error rate.
- ✓ At least 85% of clients will be surveyed using SCDMH outcome tools upon intake, during treatment and upon discharge.
- ✓ Emergency room and hospital admissions will be tracked and monitored.

E. Maximize safety of facility. (ST)

1. Perform Quarterly Safety Drills at each site.
2. Perform bi-annual inspection of all facilities and vehicles

Performance Measures

- ✓ Safety audit/inspections and building/grounds inspections will yield no more than two repeat findings per audit with a corrective action plan developed and implemented for each.
- ✓ Rate of consumer and staff injuries.

2. ABMHC will utilize the following evidenced based practices and best practices and explore utilization of others: Multi-Systemic Therapy (MST), Cognitive Behavioral Therapy (CBT), Cognitive Behavioral Therapy-Trauma Focused, Wellness Action Recovery Planning WRAP), Shared Decision Making, Double Trouble in Recovery (DTR), Dimensions Well Body Program and Dimensions Tobacco Free Program, Psychosocial Rehabilitation, Peer Support Services, Direct Skills Teaching, School Based Services, Motivational Interviewing, and Family Support.

- A. Train identified staff to utilize EBP's as noted above. (LT)
 - 1. Utilize supervisory tools for continuous assessment of clinician's skills and to identify gaps or opportunities for improvement to ensure clinicians are skilled in practice of EBP's.

Performance Measures

- ✓ Percentage of staff certified as competent in each of the EBP's as evidenced via credentialing folder.
- ✓ Client outcomes as evidenced by SCDMH Outcomes Tools.
- ✓ Length of treatment per diagnosis.

3. Support clients in housing, work, education and community.

- A. Utilize evidenced based and/or best practices that support individual client outcomes in the areas of independent living, meaningful work and/or education and connections to families and friends. (LT)
 - 1. Collaborate with Housing Resources (local/state) to expedite applications and identify opportunities for housing.
 - 2. Increase awareness of fair housing laws to providers and individuals.
 - 3. Link clients with employment resources.
 - 4. Link clients with educational resources.
 - 5. Link clients with community supports.

Performance Measures

- ✓ Total # of clients in supported or independent employment, independent living situations and school collected and updated in CIS.
- ✓ Outcome and satisfaction measures via MSHIP.
- ✓ Total # of clients assisted with/referred to housing
- ✓ Total # of clients referred to employment resources
- ✓ Total # of clients referred to educational resources

Service

Priority # 2:

To exceed customer expectations at every turn thus establishing ABMHC as the preferred provider of choice in Aiken and Barnwell counties.

Goals, Objectives, & Action Steps

1. Increase access to behavioral healthcare care

- A. Explore additional opportunities for transportation to/from mental health center
1. Provide limited transportation for indigent clients pending availability of funding most notably from Aiken County Council. (ST)
 2. Advocate with local provider of public transportation for increased public bus-stops specifically closer to Hartzog Center. (ST-LT)

Performance Measures

- ✓ Total # of clients provided transportation to agency

- B. Assess all clients on the same day they request services. (ST)

Performance Measures

- ✓ C-20 Screening Tool.
✓ Total Admissions monthly.

- C. Expand use of telepsychiatry within catchment area (LT)

Performance Measures

- ✓ # of additional sites using telepsychiatry

- D. Medication requests will be completed within 3 business days. (ST)

Performance Measures

- ✓ # of E-Scripts
✓ # of client complaints related to medication requests completed after 3 business days.

- E. Explore outreach opportunities to persons whom as homeless, of Latino ethnicity and/or residing in rural area (ST-LT).

1. Participate in homeless count.

Performance Measures

- ✓ # Served based on housing status, ethnicity, and/or geographical area.

2. Review intakes the next business day via multi-disciplinary team meetings to determine appropriateness for treatment and/or appropriate referral.

- A. Caseload sizes and frequency of contact will be within established guidelines. (ST-LT)

Performance Measures

- ✓ No more than 5% of agency's caseload will exceed 90 days w/o service.
✓ Caseloads will be based on SCDMH Levels of Care.

- ✓ After initial assessment, persons determined eligible for treatment will be scheduled with assigned therapist within 7-21 business days and a care-coordinator and psychiatrist within 30-90 business days of the intake.

3. Promote a culture of integrated and collaborative healthcare.

A. Continue collaboration between ABMHC and Federally Qualified Healthcare Clinic (FQHC). (ST)

Performance Measures

- ✓ Total # of contacts provided at FQHC.

B. Utilize disease management (Dimensions Well Body Program and Dimensions Tobacco Free Program) and care-coordination program for high risk and chronically ill clients. (ST-LT)

Performance Measures

- ✓ Total # of clients participating in programs.

C. Go Tobacco Free at ABMHC. (LT)

D. Enhance primary care provider's capacity to serve individuals with mental illness (ST-LT)

1. Survey PCP's to determine interest of serving individuals with MI
2. Provide primary providers with training to incorporate screening tools into practice and refer clients to MHC

Performance Measures

- ✓ Total # of providers trained.
- ✓ Total # of referrals from PCP

E. Continue partnership with Aiken Regional Hospital and Southern Palmetto Hospital to provide MH services to indigent. (ST-LT)

Performance Measures

- ✓ Total # of participants served via partnerships

F. Share treatment information with primary care treatment providers and other stakeholders. (ST-LT)

1. Respond to requests for records within 14 business days
2. Simplify requests for records
3. Explore utilization of electronic health sharing

Performance Measures

- ✓ Stakeholder Satisfaction will equal or exceed 70% in FY15. Scores will increase by 5% each fiscal year until maximum score of 85% is reached.

G. Develop the Co-Occurring workforce so there is a growing body of dedicated substance abuse professionals to better meet the demands of evidenced based practice in both prevention and treatment. (ST-LT)

Performance Measures

- ✓ Percentage of certified A/D clinicians in agency

4. To promote awareness, increase knowledge and skills, and understanding and respect for cultural diversity.

- A. Maintain Cultural Diversity Committee at agency. (ST)
1. Conduct Cultural Diversity Survey
 1. Provide at least 2 annual cultural diversity trainings at agency.
 2. Provide cultural diversity newsletter.

Performance Measures

- ✓ Pre/Post Cultural Diversity Assessment
- ✓ # of Training Hours offered

B. Ensure utilization of culturally diverse materials, forms and brochures. (ST-LT)

Performance Measures

- ✓ Client/Stakeholder Satisfaction Rate will equal or exceed 70% in FY15. Scores will increase 5% each FY each until maximum score of 85% is reached.

5. Build a culture around service.

- A. Create a positive customer experience (ST-LT)
1. Provide customer service training to staff. (AIDET approach/Key words at key times). Initial Training done 2/26 and 3/14
 2. Enhance front desk experience (privacy, updating of info, check in/check out).
 3. Conduct discharge surveys.
 4. Conduct client satisfaction surveys monthly.
 5. Create client advisory board.

Performance Measures

- ✓ Client satisfaction score will equal or exceed 70% in FY 15. Scores will increase by 5% each fiscal year until maximum score of 85% is reached.

People

Priority # 3

To recruit, develop, and retain a competent, professional, culturally diverse, motivated and productive workforce

Goals, Objectives & Action Steps

1. Utilize creative and competitive recruitment processes to ensure key positions are filled at all times.

- A. Utilize Employee Development Toolkit (ST-LT)
- B. Utilize Peer and Behavioral Interviewing (ST-LT)
- C. Provide prospective employees with agency information via web (ST-LT)
- D. Share Standards of Behavior with prospective employees (ST-LT)
- E. Offer at least 2 internships at agency annually. (ST-LT)

Performance Measures

- ✓ Key Positions filled at all times
- ✓ # of vacancies
- ✓ # of internships at agency annually (Master Level, Medical)

2. Utilize creative, informative and effective on-boarding processes to ensure employees have the knowledge and tools they need to perform job duties successfully and become an effective member of the organization.

- A. Utilize Employee Development Toolkit (ST-LT)
- B. Utilize On-Boarding checklist (ST-LT)
- C. Evaluate on-boarding program within 30-60 days of hire (ST-LT)
- D. Utilize orientation core-curriculum to provide new employees with critical information regarding agency operations and job duties (ST-LT)

Performance Measures

- ✓ On-Boarding Evaluation equals or exceeds 70%. Scores will increase by 5% each fiscal year until maximum score of 85% is reached.

3. Ensure performance management is fair, on-going and transparent.

- A. All employee performance evaluations will be based on the 6 pillars of excellence and defined agency benchmarks and key indicators to promote accountability and reward excellence. (ST-LT)
- B. Evaluations will have clearly defined success criteria based on agency benchmarks and key indicators. (ST-LT)
- C. Evaluations will be completed on time.

Performance Measures

- ✓ % of ratings (M, E and SE)
- ✓ % of EPMS completed on time

4. Provide for career development and succession.

- A. Utilize individual career development plan and core-competencies in conjunction with EPMS. (ST-LT)

Performance Measures

- ✓ Percentage of staff with clinical licensure and/or additional certifications.
- ✓ Retention rate equal to or exceed 75%.

- B. Provide Leadership training and development program. (ST-LT)

Performance Measures

- ✓ Percentage of staff completing the leadership development program.
- ✓ Percentage of staff moved into leadership positions.

5. Ensure employees understand their critical role in the mental health service delivery system and consider themselves valued partners.

- A. Establish communication pathways through which employees may access news. (ST-LT)

1. Emails
2. Monthly Management Meeting Minutes
3. Quarterly All Agency Employee Forum
4. Monthly Staff Meetings (programs/sites)
5. Monthly Board Meeting Minutes

- B. Develop Standards of Behavior with all employees input. (ST)

****Accomplished February 2014**

- C. Reward and Recognize employees at least quarterly. (ST-LT)

1. Reward and Recognition Committee
2. Employee of Year

- D. Provide training (clinical and administrative) in EBP's, core-competencies, and administrative skill sets. (ST-LT)

- E. Administer annual Employee Needs and Satisfaction Survey. (ST-LT)

- F. Educate employees as to what benefits are available (Loan Repayment, Tuition Assistance, Clinical Supervision for Licensure, etc). (ST-LT)

- G. Engage employees in planning processes via committees, SWOT, and Employee Forums (ST-LT)

1. Performance Improvement Team
2. Quarterly All Agency Employee Forum

Performance Measures

- ✓ Employee Satisfaction will equal or exceed 70% in FY 15 and increase by 5% thereafter until it reaches a max of 85%.
- ✓ Retention rate will equal to or exceed 75%.
- ✓ Total # of trainings offered annually.

Finance

Priority # 4

To demonstrate fiscal responsibility and accountability to advance our mission.

Goals, Objectives & Action Steps

1. Maximize center revenues and control expenses.

- A. Monitor monthly via financial statement. (ST-LT)
 1. Train staff how to read financial report
 2. Monitor finances via self-audit/inventory
- B. Seek new funding opportunities (partnerships, grants, RFP's, local mil tax, entitlement). (ST-LT)
 1. Support local mil tax with Aiken and Barnwell counties
 2. Educate counties regarding services provided to citizens
 3. Link clients with entitlement specialist as appropriate
- C. Meet individual and agency productivity standard. (ST-LT)
- D. Collect fees from clients. (ST-LT)
 1. Train staff how to collect fees assertively
- E. Decrease paybacks (ST-LT)
 1. Conduct Focus Audits
 2. Conduct Quarterly Audits
 3. Provide staff training re Clinical/Administrative Documentation Standards
- F. Review organizational structure, facilities, services and functions annually. (ST-LT)
 1. Update organizational chart annually.
- G. Review and monitor all contracts to ensure compliance. (ST-LT)
 1. Review all contracts with managed care organizations, Medicaid and insurance organizations to ensure that they specify services, workforce requirements, and desired mental health outcomes.

2. Monitor vendor/provider contracts regarding qualifications and credentials to ensure adequate competencies/skills to provide appropriate services.

Performance Measures

- ✓ Agency will end fiscal year with a positive fund balance.
- ✓ Amount of additional income from RFP's, grants, partnerships, county contributions).
- ✓ Agency production goal is 840 hours per month for FY15. Individual productivity goal is 55%.
- ✓ Self-pay collections will increase by 2% for agency.
- ✓ Total Amount of Paybacks.
- ✓ Total # of clients seen by entitlement specialist.
- ✓ Amount of revenue generated via entitlement specialist.
- ✓ No more than 2 repeat findings per audit (inventory and self-audit).

2. Ensure workforce is adequately compensated.

- A. Utilize available incentives to recruit mental health professionals and medical staff. (ST-LT)
- B. Utilize bonus policy to reward and recognize excellence for all staff. (ST-LT)
- C. Utilize Licensure Policy to provide clinical licensure to eligible staff to eliminate costs of staff having to pay for clinical supervision on their own. (ST-LT)

Performance Measures

- ✓ Retention Rate
- ✓ Total Amount Utilized for Bonuses
- ✓ # of Staff receiving clinical supervision within agency

Growth

Priority 5

To pursue new and better ways of serving our customers.

Goals, Objectives & Action Steps

1. Utilize data (outcome measures, key performance indicators) in decision making.

2. Identify ways to utilize technology to improve the efficiency and effectiveness of behavioral health services and implement them

- A. Conduct annual IT needs assessment (ST-LT)
- B. Ensure all staff have updated IT equipment and updates in a timely manner. (ST-LT)

3. Identify ways to utilize technology to improve communication and implement them.

A. Conduct annual IT needs assessment (ST-LT)

4. Research and implement new evidenced based practices and best practices.

5. Offer training to administrative and clinical staff.

Performance Measures

- ✓ Result of Annual IT Needs Assessment
- ✓ Total number of new EBP's implemented annually
- ✓ Total number of trainings offered annually

Community

Priority #6: To enhance partnerships with local and regional organizations and agencies to effectively meet the needs of the community and to increase the public's awareness of mental health issues, mental health treatment and access to treatment

Goals, Objectives & Action Steps

1. Educate the public about mental health issues, mental health treatment and access to treatment.

A. Coordinate/facilitate/participate in 12 events annually in the community (health fairs, school fairs, community events). (ST-LT)

B. Make mental health information available to the public through Various methods. (ST-LT)

1. Press Releases (# of press releases)
2. Presentations (# of presentations)
3. Mental Health Publications
4. Social Media (website, Facebook)

C. Participate in the local community networking meetings. (ST-LT)

D. Facilitate annual collaborative meetings with partners. (ST-LT)

2. Develop and enhance local support system

A. Provide decision makers with systematic data to increase understanding of its meaning, structure, and relationships to support decision and policy making. (ST/LT)

Performance Measures

- ✓ # of events/presentations/collaborative meetings held annually
- ✓ Annual Report
- ✓ Strategic Plan

✓ FIN Implementation GRID