SCCMHA Strategic Priorities 2019-2020

Strategic Priority 1:
Focus on Consumer Services and Outcomes

Rationale: Supporting consumers to achieve their stated outcomes is our top priority. We are committed to helping customers imagine a better life. Our behavior, actions and utilization of the benefit will demonstrate our belief in the potential for growth and achievement of outcomes.

Strategic Goal 1.1:
Increase the Numbers of Persons Served Across All Populations (and Improve Consumer Experience at all Access Points)

1.1.1   Improve internal and external messaging to communicate availability of service (access) & expanding referral base including MDHHS Entitlements portal

1.1.2   Implement / expand services for consumers with co-morbid chronic health conditions, hoarding disorders, transitional age youth, secondary trauma, LGBTQ, Hispanic outreach, veterans and their families.

1.1.3   Continue to develop school-based services for children

1.1.4   Developing Crisis Stabilization at Front Door

- Centralized Access & Intake (CAI)
- Mobile Urgent Treatment Team (MUTT) ✅
- Investigate potential for Crisis Stabilization after hours at Hancock to reduce Emergency Department (ED) utilization **NEW**

Strategic Goal 1.2:
Expand the Expectation and Use of the Service Array Across All Populations

1.2.1   Work to serve more consumers annually across all populations

1.2.2   Educate customers, family members & guardians about the service array and connecting services to person centered planning to achieve outcomes (benefit information)

1.2.3   Expand education about the specialty service array to professional staff (create a mandatory training for record holders on the service array

1.2.4   Improve adequacy of Service Array with special emphasis on Ancillary Health:

- Crisis Stabilization, MUTT, Speech, PT, OT

1.2.5   Improve adequacy of Service Array with new 1115 (c) & (i) Waiver requirements for FY 2020

- Add Overnight Health and Safety for 1915 HSW, CWP, SED enrolled populations and 1915(i) (former b3 recipients **NEW**
- Add Fiscal Intermediary Options for HSW and SED Waiver enrollees **NEW**
- Add Non-Family Training for HSW enrollees **NEW**

- Implement clarifications to benefit definitions and scope for Supported Employment and Housing Assistance services **NEW**
- Improve processing of Durable Medical Equipment (DME) and related commodities **NEW**

Strategic Goal 1.3:
Demonstrate Improved Consumer Outcomes Through the Continued Use of Technology & Population Health Management

1.3.1 Expand the use of stratified data from sources (i.e. ZENITH ICDP and other inputs to prioritize and inform clinical decision making and outcome strategies

1.3.2 Publish outcome data results for all stakeholders

1.3.3 Achieve full adoption of transition of care protocols (9 Touch) and implement a PDSA to measure effectiveness of interventions

1.3.4 Working collaboratively physical health care partners, monitor key performance indicators and continuous quality measures to determine impact on quality and overall health outcomes

1.3.5 Develop a strategy to compile and track prevalent Social Determinants of Health related to the SCCMHA consumer population that impact key health outcome indicators from stratified data.

Strategic Priority 2:
Enhancing Leadership and Succession Planning

Rationale: Recruit, mentor, and develop future leaders to ensure a trained, competent, and qualified workforce to become the future leaders of SCCMHA.

Strategic Goal 2.1:
Leadership CMH Training

2.1.3 Finalize and implement Succession Plan for Management Team

2.1.5 Continue leadership and sustainability strategies to support Multicultural Training across the network and with other Saginaw community groups

2.1.6 Develop and identify knowledge transfer opportunities / strategies

2.1.7 Develop strategies to reduce single person dependency across operations

Strategic Goal 2.2:
Institutionalize Relationships with Community Partners to Ensure They Are Not Personality Dependent (predictable environment)

2.2.1 Continue to institutionalize System of Care collaborative relationships through signed MOUs

2.2.2 Continue to develop MOUs with key community partners:

- Chippewa Tribe
- Aleda E. Lutz VA Medical Center Saginaw County - Consortium of Homeless Assistance Providers (SC-CHAP)
- Saginaw Public Housing Authority
- Juvenile Court **NEW**

✅ = Goal completed in 2019   **NEW** = New goal for 2020

09/05/2019

- Jail Diversion / Saginaw Intermediate School District (SISD) / Transition Planning / Great Start Collaborative **NEW**
- Central Michigan University (CMU) Medical School / Integrated Care efforts **NEW**
- Saginaw Public Schools / MH co-location and Transition Planning **NEW**

Strategic Goal 2.3:
Recruitment

2.3.2   Development of formal onboarding process for new staff

2.3.3   Explore the adequacy of Clinical / Administrative Supervision ✅

2.3.4   Continue to recruit for diversity **NEW**

- Recruit, credential and contract with practitioners (clinical staff) who speak a language that reflects members' linguistic needs
- Recruit, credential and contract with practitioners (clinical staff and administrative staff) whose cultural and ethnic backgrounds are similar to the underrepresented member population
- Require practitioners (clinical staff) to complete cultural competency training courses based on racial / ethnic composition of the member population
- Identify language spoken and ethnic backgrounds of practitioners (clinical staff) in the provider network to assess whether the meet members' language needs and cultural preferences

Strategic Goal 2.4:
Addressing and Enhancing Staff Safety

2.4.1   Develop policy to address staff safety in the community ✅

2.4.2   Provide Violence in the Workplace training for all staff ✅

2.4.3   Implement strategies / recommendations identified in site assessments to address staff safety concerns including sustainability training for new staff ✅

2.4.4   Continue to pursue technology tools for staff safety in the community

- Rework 8-1-1 system
- Evaluate personal protection device used by MUTT team

2.4.5   Provide protective equipment and clothing to staff entering toxic and hazardous environments ✅

2.4.6   Expansion of external security cameras at SCCMHA sites

2.4.7   Upgrade of WIFI locksets to hardwired badge readers at Hancock building

2.4.8   Expand Crisis Response Team for aggressive persons to Bay Road, Towerline & Maple **NEW**

Strategic Goal 2.5:
Transform Information Management to Inform Customer Quality, Decisions and Business Outcomes

2.5.1   Maximize Available Cross Functional Sources of Data into Formats that are User Friendly and Better Inform Decision Making **NEW**

- Develop standards to guide this work

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2.5.2   Teach and Expand Knowledge of Warehouse Architecture and Data Field Definitions to Drive Data Interpretation Integrity **NEW**

2.5.3   Pursue New Tools for Supervisors / Staff to Use in Order to Do their Jobs More Effectively

- Microsoft Business Intelligence (BI)

Strategic Goal 2.6:
Expanding Organization Mastery of Benefit Interpretation

2.6.1   Unpack and train staff in the new Medicaid Waiver Changes for FY 2020 **NEW**

2.6.2   Describe Baseline Service Delivery Workflows by Discipline **NEW**

- Then Assign Coding and Credentialing to the Workflows

Strategic Goal 2.7:
Knowledge Transfer to Emerging Leaders

2.7.1   Introduction of Public Reference Documents (Mental Health Code, Medicaid Manual, State Coding List, Etc.) **NEW**

2.7.2   Teach the regulatory / authority context of CMH Service Environment **NEW**

2.7.3   Teach the benefit boundaries and coordination of benefits context **NEW**

2.7.4   Identify other public services and programs and related eligibility criteria needed by customers we serve **NEW**

Strategic Priority 3:
Enhanced Electronic Business Environment to Meet Major Agency Priorities

Rationale: Unify data systems for the purpose of obtaining a cohesive business management data system. Utilize tools for staff to be more efficient.

Strategic Goal 3.1:
SCCMHA Transitions to Meaningful Use Version of Sentri Software

3.1.1   Continue surveillance of Meaningful Use version of Sentri software and create workflows to ensure compliance

- Adoption of Meaningful Use versions to support quality program ✅
- Maintain progress in meeting current Meaningful Use requirements in progress / pace in MU implementation ✅

3.1.2   Increase adoption of CEHR (Patient Portal) by Sentri users including consumers by use of Electronic Signatures into workflows **NEW**

Strategic Goal 3.2: Future Electronic Expansion

3.2.1   Health Information Exchanges – Continue to monitor with healthcare partners for expanded functionality and interoperability

3.2.2   Study / Plan Data Processing Capability to accept external data into our Warehouse – interoperability of information coming in from MDHHS or other partners

✅   = Goal completed in 2019   **NEW** = New goal for 2020

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3.2.3   Interfaces to other business partners (Great Lakes Bay Health Centers)

- Implementation of Great Lakes Health Connect (GLHC) Virtual Integrated Patient Record (VIPR) into Sentri II with single sign on ✅
- Promote SCCMHA capacity for interoperability with community partners **NEW**
- Communicate Continuity of Care Documents (CCDs) with local FQHC (GLBHC) and other health care partners (direct messaging)
- Maintain accuracy of provider registry in Sentri II to ensure the capacity for direct messaging **NEW**
- Investigate foreign key capability leading to read only pages in EHR (reciprocal arrangements) with the local FQHC (GLBHC)
- Review registries that are available through MSHN and/or Michigan Health Information Network (MiHIN) to provide a greater scope of consumer registry information specifically the Statewide Consumer Directory and Health Directory **NEW**

3.2.4   Interface with Mid-State Health Network, Medicaid Health Plans

3.2.5   Improve current 8-1-1 system technology ✅

3.2.6   Explore the feasibility / utility of providing access & reporting in Zenith and Care Connect 360

3.2.7   Integrate the MiPathways data base into SENTRI II with single sign on functionality **NEW**

3.2.8   Integration of MSHN's MCG (tool to determine parity in medical necessity) ✅

3.2.9   Support Integrity and future use of data warehouse (OASIS)

- Identify data assets and develop protocols for data governance for Data Warehouse
- Develop policies and guidance for users of data warehouse
- Refine and protect architecture of data warehouse (management, protection, training, access, tools)

3.2.10   Implement Electronic Visit Verification (EVV) system to interface as defined by the State of Michigan **NEW**

Strategic Goal 3.3: Addressing the Adequacy of the Current Phone System

3.3.1   Implement Zultys phone system agency wide ✅

Strategic Goal 3.4: Mobile Workforce

3.4.1   Assess the need of mobile or use of other technology capabilities within each business function.

- Clinical Staff & Supervisors
    - FSU, SCS, ASD, Self Determination, ORR ✅
    - MUTT, CSS, Nursing

Strategic Priority 4:
Diversifying and Expanding our Role in the Healthcare Landscape

Rationale: To maximize our partnerships in the Saginaw health care market implementing collaborative approaches to population health.

Strategic Goal 4.1:
Explore and Develop our Potential Roles in Healthcare

4.1.1   Continue to seek financial support for Community Care HUB

4.1.2   Community Health Improvement Plan (CHIP) – Continue Leadership Participation and cost sharing

4.1.3   Continue clinical health care integration efforts

4.1.4   Continue to evaluate expansion of Behavioral Health Consultation models in schools and primary care / pediatric practices

4.1.5   Continue to pursue strategic relationships with health care systems

4.1.6   Exploration of alternative / preferred payer models with MDHHS in 298 Pilot (withdrawal as 298 Pilot June 2019) ✅

4.1.7   SCCMHA Leadership will continue in key informant role with MDHHS regarding changes in system architecture and payment models

4.1.8   Implement and evaluate alternative payment model as demonstrated in the five (5) year Promoting Integrated Primary and Behavioral Health Care (PIPBHC) grant with SAMHSA.

4.1.9   Submit SCCMHA 298 Pilot Proposal ✅

4.1.10 As a selected 298 Pilot Site, actively work with MDHHS and Medicaid Health Plans (MHP) on implementation strategy for go live October 1, 2019 ✅

Strategic Goal 4.2:
Core Skills for Workforce on Physical Health

4.2.1   Continue to develop training on specific health conditions to promote workforce health care literacy

4.2.2   Formalize and expand medication training beyond the case management core training

4.2.3   Improve the care coordination efforts of staff to address whole person health care by including SUD and physical health care content into agency training curriculums.

4.2.4   Utilize agency health data to prioritize training topics that relate to prevalent chronic health conditions

Strategic Goal 4.3:
Achieved Certified Community Behavioral Health Clinic Status

4.3.1   Continue to Monitor CCBHC Cohorts in the State of Michigan for additional opportunities that would align with SCCMHA goals

4.3.2   Monitor FQHCs in the State of Michigan for additional opportunities that would align with SCCMHA goals

Strategic Goal 4.4:
Achieve Managed National Committee for Quality Assurance (NCQA) Behavioral Health Organization Accreditation

4.4.1   Complete Readiness Assessment and engage consultant to complete gap analysis

4.4.2   Make decision about level of accreditation to pursue including possible interim or initial survey and make application ✅

4.4.3   Continue to develop Work Plan

4.4.4   Implement immediately actionable steps ✅

4.4.5   Bring existing documents into MBHO compliance in next business cycle including Quality Plan, Annual Quality Report, UM Plan, UM Annual Report, Provider Directory, and all other related contracts and polices

4.4.6   Complete survey preparation on NCQA electronic tool

4.4.7   Work with NCQA to schedule a preliminary survey site visit in summer of 2020 and full survey in summer 2021

Strategic Priority 5:
Improved Health and Quality of Life

Rationale: To provide dedicated efforts to help consumers achieve their optimal health and well-being.

Strategic Goal 5.1:
Health and Wellness

5.1.1   Utilize the Eight Dimensions of Wellness to guide and inform the promotion of wellness to consumers, their families and caretakers.

- Expand access to consumer focused prevention / wellness activities by utilizing exising community resourses such as moble dental services and community events
- Symptom Management – expand access and of myStrenth mobil app
- Expand access to the CEHR portal for consumers

5.1.2   The Medical Record will Demonstrate Improved Integration with Primary Healthcare **ARCHIVED & CONTENT MOVED TO 5.1.8 BELOW**

5.1.3   Develop Tracking and Analyzing Key Health Indicators and Trends in Sentri II to Inform System Improvement **ARCHIVED & CONTENT MOVED TO 5.1.9 BELOW**

5.1.4   Develop Publications of Healthcare Data to Stakeholders (including consumers) **ARCHIVED & CONTENT MOVED TO 5.1.12 BELOW**

5.1.5   Workforce emphasis on the importance of wellness **ARCHIVED & CONTENT MOVED TO 5.1.7 BELOW**

5.1.6   Develop and Implement Strategies for Compliance with Home and Community Based Services (HCBS) Rule with active compliance plans for residential and nonresidential programs by March 2019

5.1.7   Contribute to the overall health of the Saginaw Community

- Provide visible leadership in local wellness initiatives
- Participate in planning on Neonatal Abstinence grant with Michigan Public Health Institute (MPHI)
- Continue the ongoing implementation of the Region 5 Perinatal Collaborative with MDHHS
- Continue to lead the collaboration of the Saginaw Hoarding Task Force

5.1.8 Work to reduce the disparities in access to quality health care

- Increase the capacity of the workforce to identify and address disparities
- Promote consumer care and coordination among service providers
- Work to eliminate the stigma associated with mental illness, intellectual / developmental disabilitiey and addiction

5.1.9 Integrate health criteria into decision making, where appropriate

- Increase the use of certified electronic health records and data platforms to identify populations at risk
- Develop policies and programs to identify at risk consumers and provide effective interventions
- Advance the recognition of the impact of SUD on the overal health and recovery of consumers and work to improve screening, intervention, treatment and referral when identified relies on the integration of SUD data into the EHR

5.1.10 Expand the use of integrated data systems to promote cross-sector information exchange

- Promote the use of interoperable systems to support data-driven prevention decisions and implement evidence-based prevention policies and programs

5.1.11 Develop a skilled, cross-trained and diverse prevention workforce

- Enhance the current continuing education and training content to include an emphasis on increasing the capacity of staff to address physical and behavioral health, focusing on prevention in all settings

5.1.12 Help consumers improve their mental and physical health through health promotion and disease & injury prevention

- Implement sustainable and meaningful health promotion activities, which are evidence-based and work to engage consumer participation

5.1.13 Ensure appropriate and responsible use of resources to meet the needs of consumers, through use of evidence-based decision making and practices, evaluation and reporting

- Monitor and report our performance through key performance indicators

5.1.14 Support the Saginaw community (health professionals, private sector health care providers, and community and non-government organizations) in population health improvement strategies

- Continue to Participate in Saginaw CHIP process
- Participate in MiHIA THRIVE Initiative
- Promote and implement the activities and strategies developed in the administration of the Promoting the Integration of Primary and Behavioral Health Care Integration (PIPBHC) SAMHSA grant in active partnership with GLBHC

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- Sponsor, expand and promote MyStrength app through MiHIA / THRIVE

5.1.15 Through a well-informed workforce, educate and support consumers and those they identify as family to engage in their own health and well-being

5.1.16 Create venues that require the inclusion of consumers and peers to inform and develop health initiatives

5.1.17 Collaborate with community stakeholders to address social determinants of health that impact all at risk populations within Saginaw County

5.1.18 Continue to adhere to State and SCCMHA monitoring and prescribing polices that are related to narcotics intended to reduce the harm and misuse associated with prescription drugs

5.1.19 Continue to provide leadership and workforce training to health care region in understanding stigma, access barriers and safe points of service for LGBTQ community with special emphasis on at risk youth and young adults

Strategic Priority 6:
Improved Financial Position and Long-Term Sustainability

Rationale: Improve the ability to manage the organization and service network through strategies which best meet the needs of Saginaw citizens that insures the organization manages within available resources while pursuing new funding opportunities.

Strategic Goal 6.1:
Implement Capital Bond Improvements as Financed by Saginaw County Bond Financing for Hancock and Albert & Woods Buildings

6.1.1 Implement capital improvement needs for next five (5) years as specified in Bond documents

6.1.2 Obtain updated costing for the projects identified and prioritize the needs to address the most pressing issues with the available funds **NEW**

Strategic Goal 6.2:
Monitor Continued Need for Operating Cash Loan

6.2.1 In conjunction with the annual budget preparation, prepare an 18-month cash flow to forecast the amount of any operating cash shortfall **NEW**

6.2.2 Negotiate the most efficient financing and repayment terms for any Operating Cash loan with PNC bank to minimize the cost of borrowing **NEW**

Strategic Goal 6.3:
Develop a Long-Term Financial Stability Plan

6.3.1 Pursue other funding sources including federal, state and local grants for expansion of programs

6.3.2 Identify and achieve administrative efficiencies to maximize program revenues

6.3.3 Fund succession costs associated with the retirements of key directors ✅

✅ = Goal completed in 2019 **NEW** = New goal for 2020

6.3.4 Perform costing investigations to compare operating costs to industry averages for the purpose of identifying outlier metrics to be considered for performance improvement

6.3.5 Inform state actuaries on unique costs to Specialty Benefit ✅

6.3.6 Participate in Value Based Purchasing Learning Community to drive new payment strategies with network and funding strategies with potential system changes **NEW**

6.3.7 Continue to explore drivers of Quality and Evidence-based Practices (EBP) outcomes to drive both payment and funding strategies **NEW**