

OVERALL STRATEGIC PLAN FOR REGION II HUMAN SERVICES

This document guides the ongoing strategic planning that is completed annually.

This plan and the ongoing planning takes into consideration the following:

- Expectations of persons served
Gathered through direct input and client surveys
- Expectations of other stakeholders
Gathered through surveys and community meetings
- Competitive environment
Information gathered through national organizations and statewide meetings
- Financial opportunities
State funding, federal funding, and other possibilities investigated annually
- Financial Threats
Reviewed monthly with Governing Board
- Organization's capabilities
Reviewed annually based on availability of qualified staff and funding
- Service area needs
Reviewed annually with advisory and governing board, persons served, referral agencies, and staff
- Demographics
Reviewed annually with Governing Board as match requirements are met
- Relationships with stakeholders and funders
Assessment of political situation is ongoing
- Regulatory environment
Current updates automatically available and utilized
- Legislative environment
Involvement with local state legislators and statewide efforts

Mission Statement and Goals

The key goal set out by the Board and Administration is to maintain an organizational structure that will assure the provision of quality cost effective mental health and alcohol and drug services within Region II. This is accomplished by maintaining an organization, under the authority of the Regional Governing Board that provides both mental health and substance abuse services and also contracts for particular services. To this end, the following mission statement has been adopted:

“To work toward the health, happiness, and well-being of every person who works within our organization and every person served by our organization.”

“To provide the highest quality Substance Abuse and Mental Health services to any person in need of those services.”

“To assure organizational survival and growth.”

From this statement of mission, the following goals have been established:

GOAL 1: Provide an array of quality services that meet the mental health and substance abuse needs of residents of Region II.

Needs are determined by direct interactions with the persons served, formal meetings with persons served, community meetings, client satisfaction surveys, participation in community teams, advisory committee meetings, and by surveying referral sources. The Regional Administrator and Program Directors meet with referring agencies in informal settings to assess needs and quality of services.

GOAL 2: To develop and maintain the best possible staff through selective recruiting and competitive salaries. Training and opportunity for professional growth will be provided. A work environment that is productive and comfortable will be maintained.

GOAL 3: To develop a program of individual and team incentives that reward performance, encourage program ownership and enhance the individual commitment to the internal and external mission of the organization.

GOAL 4: To orient each service to meet the needs of the client, rather than the organization; and to orient the organization to meet the needs of its members, which in turn will enhance the health, happiness and well being of the client.

GOAL 5: To develop an environment that is comfortable, accessible, confidential, and pleasant for employees and clients. To continually enhance the environment so that it is trauma informed, welcoming and conducive to positive growth and development for both clients and staff.

GOAL 6: To continue to respond to the needs of staff and clients as efficiently and effectively as possible. This response will help employees be as responsible as possible for their own position responsibilities and as responsible as possible for the team they work with to create a quality program. Trauma informed care training will include staff self care and staff surveys that indicate level of satisfaction with the job.

Programs will meet regularly with each other and with Program administration to assure the best possible delivery of services and to problem solve as needed.

GOAL 7: To develop an environment that encourages open communication between all staff, allowing for the expression of ideas, innovation, and the sharing of knowledge.

GOAL 8: To maintain and enhance contracted services through program evaluation and through Quality Improvement activities and meetings.

Administration will meet with each staff member at least yearly and more often if a need is determined by staff or administration. Staff are encouraged to be sensitive to the needs of clients in their area of the Region and to look at innovative ways to meet those needs

and to bring those needs forward to the administration so that they can be included in all planning. Initiate a survey monkey staff satisfaction survey. Analyze results and make changes as needed. Administration will meet with all contracted services quarterly to analyze quality improvement goals and to recognize and fill gaps in the system.

GOAL 8: To include in all our programs the 10 fundamental components of recovery: Self-direction, Individualized and Person-Centered Care, Empowerment, Non-Linear care, Strength Based Care, Peer Support, Respect, Responsibility, and Hope.

Goal 9: To utilize current technology to meet the operational efficiencies required in day to day operation. This will enhance effective, efficient and accessible services. Staff will have the ability to learn new technology and how to use it to better serve clients.

Goal 10: Data will be utilized to monitor, analyze and improve service delivery. Reports will be reviewed regularly and shared with appropriate staff. Reports will be used to enhance quality Improvement goals.

In order to fulfill Region II Human Services mission in the 17 counties served, an array of services is provided. The rural setting dictates the service needs and demands flexibility in service delivery.

By combining mental health and substance abuse administratively, Region II continues to increase the capacity for services, improve the quality of services, and reduce/maintain administrative cost.

On-going objectives include:

Prepare such plans as prescribed by state mental health and alcoholism and drug abuse authorities.

Recommend and implement policies for the Region II Human Services Board in the areas of mental health, and alcoholism and drug abuse.

Report at least annually to the Board regarding the evaluation of mental health, and alcoholism and drug abuse services provided.

Submit proposed budgets and plans for mental health and alcoholism and drug abuse services to be offered in the counties of the Region or to be purchased by funds under the control of the Board.

Monitor the financial affairs of the Region II Human Services Board including not only the contract with the Department of Health and Human Services but also Grants in Aid, local match funds, and income as may be generated; and report to the Board monthly the condition of such funds making recommendation for such distribution as may be appropriate to fulfill the condition of contracts, grants, or plans administered by the Board.

Provide administrative service to the Region II Human Services Board as may be required for the Board's effective and efficient management of mental health, and alcoholism and drug abuse programs, services and facilities in the Region.

Organize, hire and supervise such staff, contracts and consultants, as may be appropriate to aid in the duties of the Region II Human Services Board.

Region II Human Services has an ongoing planning process for all of its programs that includes input from persons served, advisory board, governing board, family members, staff, community team members, referral sources and funding sources.

An annual Regional Budget Plan/budget plan is prepared for the state. This plan includes data from all the groups, information on all programs, needs assessment data, and budget data. It is prepared by Regional Administration and is submitted for Advisory and Governing Board approval. This plan reflects the current and projected financial position of the organization.

Needs assessments are done annually in a variety of ways. Planning days are held with community teams. Surveys are sometimes mailed to all providers to identify unmet needs. Client Satisfaction Surveys are done for two weeks each year and are given to every client served. This information is used in all planning processes. Ongoing information is collected through informal procedures at all community meetings attended by staff. Community teams have ongoing planning days that the Region participates in. Staff meetings are used to identify unmet needs or services that are no longer needed. These reports are all available to the administration as planning for each fiscal year is done.

The goals and objectives for regional administration are the goals used to govern this planning effort and are measured annually by the board at the review of the Regional Budget Plan. The Administrative team will use the program evaluations to determine the need for changes based on the unmet needs and on the demands of the system. This information is put into an annual management report that is reviewed by the Advisory Committee, Staff, and Governing Board. Needed changes are noted and are part of the ongoing planning process. Annual goals are set out in each program evaluation and in the management report.

The outcomes management system is used to determine the quality and effectiveness, the efficiency and client satisfaction of all services and programs. This information is utilized in the management report.

Reviewed: 2010, 2011 Revisions 2012; 2014, revisions 2015 revisions 2016

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Strategic Quality Initiatives	Mission	Areas of Impact	Initiatives in Place	Initiatives in Progress/ Quality Improvement Plan
Safe	Quality	People	Standard process for verification of clinical licenses E prescribing QI process at all levels Training for new hires/including Trauma training Quality of life scale- admission/discharges Evidence Based Practices CPR/First Aid Training Clinical Supervision of unlicensed staff Staffing	Data analysis and evidence based practices Establish secure patient portal Signature pads-complete—Fall 2014 Update all systems--ongoing
Timely	Accessible	Service/People	Urgent Care/After Hours Crisis Line Website Team meetings Services that go to clients' home Varied level of services 24-hour Crisis Line Youth Care Staff – on call 24/7 Outcome measures throughout treatment Appt scheduled based on consumer's need/level of urgency Contact made within 7 days of referral (Com Sup) Outpatient efficiency reports Meet with consumers in out-of-region placement to maintain community connection and assist with discharge planning	Data analysis by system output for all programs Enhanced reports/charts
Effective	Demonstrated customer satisfaction	People/ Quality/ Services	Prevention System Surveys for all clients 2 weeks a year Discharge surveys Wraparound Fidelity Index Quality of Life Outcome Report	Continue analysis of data and base decisions on services for 2015-16 on the data. All programs above 80% in increase in quality of life for clients.
Efficient	That delivers value to clients	Finance/Access	Electronic Health Record Automated Audits 60%+ face-to-face Therapist productivity Team meetings as needed Meaningful use requirements met (partially)	Paperless outpatient records/Electronic Health Record (EHR) complete Paperless for all program--Complete Stage 2 meaningful use—in progress
Equitable	And the community	Service	Coalitions Convene community meetings for system coordination Systems of Care Meetings – all areas Drug Court Evening and weekend services as needed Website 24-hour mental health crisis line for law enforcement Living Sober	Data collection for System of Care Members
Client/Family	Accessible, cost	People/	Client-centered teamwork	TIP, Transition to Independence Process in

Centered	effective, quality care	Service/ Finance	Secured staff messaging Client Satisfaction Survey – after discharge Family and significant others invited to participate when appropriate. Natural supports included in client care as needed/desires Friends/Family events at Day Rehab Patient Assistance Program Utilization Sliding Scales	process Automation/calculation of sliding fees for all programs. Complete and ongoing each july 1

Strategic Plan 12 Dashboard
 2012 update 2014 updated 2015 updated 2016