

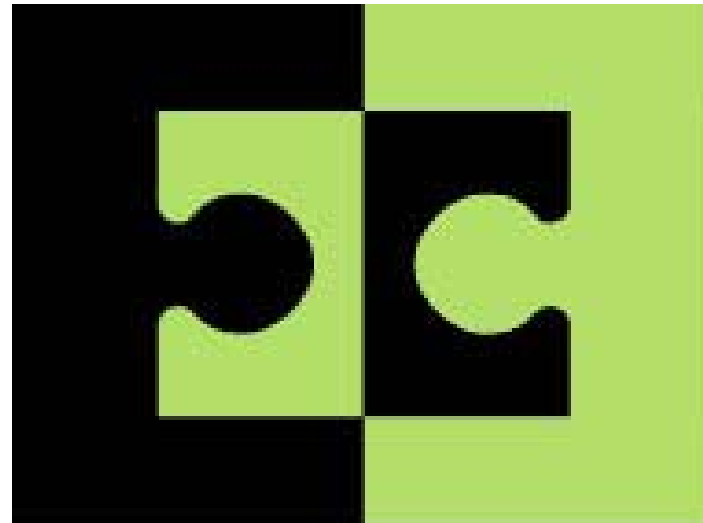
2004-2006 AFFILIATION STRATEGIC PLAN

VISION:

Recognition as a model of excellence for a system of care that is confirmed by our customers' successes.

MISSION:

To assure the delivery of quality services to consumers so as to achieve their desired outcomes.



Community Mental Health Partnership
of southeastern michigan

SERVING:

- Adults with a severe & persistent mental illness
- Children with severe emotional disturbances
- Persons with Developmental Disabilities
- Persons with addictive disorders

VALUES:

- Shared Vision/Mission
- Consumer involvement in all areas of the affiliation.
- Diversity
- Leadership across the community and the state.
- Continuous learning and improvement
- Meaningful outcomes

Community Mental Health Partnership of Southeastern Michigan 2004-2006 Strategic Plan

OVERVIEW of Strategic Plan

As this affiliation continues to grow and strengthen, it has become evident that in order to keep that momentum progressing, we need to document all of the work we intend to accomplish. The following points explain the process that will be taken to ensure this affiliation strategic plan connects to local strategic plans and how it will be monitored.

- The Affiliation Executive Committee along with input from affiliation staff identified six (6) outcome areas with several goals for each outcome.
- Regional subcommittee representatives from each county will disseminate the plan to each local board prior to approval. Once the input and feedback is given and changes made to the plan, it will be returned to the regional subcommittee for approval.
- Knowing that there are still local strategic plans, it is the intention that the affiliation strategic plan will align with local plans.
- Some counties are waiting for the affiliation strategic plan to be approved before implementing local strategic planning processes while others are cross walking their two plans to ensure alignment.
- The affiliation strategic plan will be implemented via various affiliation committees and workgroups.
- These committees and workgroups will have specific work plans that identify dates and deliverables that coincide with the affiliation strategic plan.
- The committees and workgroups report on a regular schedule to the affiliation executive committee with updates on progress.
- The Affiliation Executive Committee then provides updates of the affiliation strategic plan to the regional subcommittee on regular intervals to provide feedback and input for continued monitoring.

1. Outcome Area: Consumer Voice & Choice

Consumers will gain increased competence and increased autonomy through the services they receive.

GOAL AREAS	TEAM	TIMEFRAME
<ul style="list-style-type: none"> ▪ Full implementation of Self determination through the use of fiscal intermediaries, and fiduciaries. 	SDI/PCP Committee, RCAC, Network Mgm't, AEC	April 1, 2005
<ul style="list-style-type: none"> ▪ Increase the use of Independent Facilitators based on consumer needs. 	SDI/PCP Committee, Network Mgm't, RCAC, AEC	September 30, 2005

Organizational Performance Areas: Access to services, Direct Services, Integrated Care

Stakeholders: Consumers, Family Members, Advocacy Groups, Staff, Community Members

JCAHO Criteria (network & behavioral): Continuum of Care; Improving Network Performance: Health Promotion & Disease Prevention; Rights Responsibilities & Ethics: Education & Communication; Leadership

MDCH Policy Areas: Self Determination, Jail Diversion, Empowerment/Recovery/Inclusion

Baldrige Categories: Consumer & Customer Focus, Process Management

2. Outcome Area: Evidence Based Best Practices

Consumers will experience more immediate and more lasting benefits through research and evidence based methods of practice.

GOAL AREAS	TEAM	TIMEFRAME
<ul style="list-style-type: none"> ▪ Full system implementation of Co-occurring Disorders Evidenced Based Practice. 	Co-Occurring Workgroup , Clinical Care, AEC	September 30, 2006
<ul style="list-style-type: none"> ▪ Implementation of Jail Diversion programs based on MDCH Guidelines 	Jail Diversion Workgroup , Clinical Care, AEC	September 30, 2005
<ul style="list-style-type: none"> ▪ Implementation of Integrated Health Initiatives 	AEC , Clinical Care	September 30, 2006
Organizational Performance Areas: Access to services, Direct Services, Integrated Care		
Stakeholders: Consumers, Family Members, Staff, Community Members, State Rep's, Educators		
JCAHO Criteria: Continuum of Care; Utilization Mgm't; Improving Network Performance; Mgm't of Information; Rights, Responsibilities & Ethics; Leadership;		
MDCH Policy Areas: EBBP, Jail Diversion, Employment		
Baldrige Categories: Consumer & Customer Focus, Staff Focus, Process Management, Measurement & Knowledge Management		

3. Outcome Area: Community Involvement

A strong continuum of care will exist for consumers with collaboration and communication between the CMH system and community entities.

GOAL AREAS	TEAM	TIMEFRAME
<ul style="list-style-type: none"> ▪ Full Utilization of Community Collaborative Boards. 	AEC, local MPCB's.	September 30, 2005
<ul style="list-style-type: none"> ▪ Design and Implementation of regional public policy initiatives. 	AEC , local MPCB's,	September 30, 2005
<ul style="list-style-type: none"> ▪ Implementation of Legislative Meetings through the use of MH/SA related talking points. 	AEC , Affiliation Legislative Committee	September 30, 2005
<ul style="list-style-type: none"> ▪ Codify Business Model along with how it is used. 	AEC	March 31, 2005
<ul style="list-style-type: none"> ▪ Have positive links with community and county entities through identifying community benefits and educational needs. 	AEC, local MPCB's, Directors, organizational leaders, board of commissioners	September 30, 2005
Organizational Performance Areas: Integrated Care, Financial Operations, Access to services		
Stakeholders: Community Members, State Rep's, Legislators, Staff, Consumers, Family Members		
JCAHO Criteria: Continuum of Care; Education & Communication; Mgm't of Information; Mgm't of Human Resources; Improving Network Performance; Rights, Responsibility & Ethics; Leadership		
MDCH Policy Areas: Community Participation/Inclusion/Independence/ Productivity, Jail Diversion, EBBP; Housing Options		
Baldrige Categories: Leadership & Planning, Consumer & Customer Focus, Financial & Business Results, Process Management.		

4. Outcome Area: Operational Efficiencies & Effectiveness

To maximize resources through the effective and efficient stewardship of public funds.

GOAL AREAS	TEAM	TIMEFRAME
<ul style="list-style-type: none"> ▪ Develop an Integrated Information Management System (ENCOMPASS) 	AEC, EIC , Co-Occurring, Clinical Care	Implementation May, 2005 System Integration May 2006
<ul style="list-style-type: none"> ▪ Implementation of a fully integrated and regional performance improvement (PI) system. 	AEC, PI Redesign, Performance Improvement , EIC, Clinical Care, UR, Network Mgm't, Co-Occurring, Jail Diversion, Corporate Compliance, Recipient Rights, Professional Developm't	September 30, 2005
<ul style="list-style-type: none"> ▪ Implementation of a regional Network Management Process <ul style="list-style-type: none"> ○ Credentialing ○ Organizational RFP's ○ Consolidated Boilerplates 	Network Management , AEC,	September 30, 2005
<ul style="list-style-type: none"> ▪ Implementation of consistent clinical standards and criteria of service provision. 	AEC, Clinical Care , IS/Finance, UR,	September 30, 2006

Organizational Performance Areas: Financial Operations, Utilization, Access to Services

Stakeholders: State Rep's, Legislators, Consumers, Family Members,

JCAHO Criteria: Mgm't of Human Resources: Improving Network Performance; Mgm't of Information; Health Promotion & Disease Prevention; Utilization Mgm't; Continuum of Care; Leadership; Education & Communication; Leadership;

MDCH Policy Areas: None Identified

Baldrige Categories: Leadership & Planning, Consumer & Customer Focus, Process Management, Financial & Business Results

5. Outcome Area: Shared Governance

Will Develop an Integrated and Aligned System of care across the CMHPSM.

GOAL AREAS	TEAM	TIMEFRAME
<ul style="list-style-type: none"> ▪ Development and Monitoring of Strategic Plan 	<p style="text-align: center;">AEC</p>	<p style="text-align: center;">December 30, 2004 (all boards adopt)</p>
<ul style="list-style-type: none"> ▪ Provide Leadership through the use of Learning Organization Principles 	<p style="text-align: center;">AEC, Professional Developm't</p>	<p style="text-align: center;">September 30, 2006</p>
<ul style="list-style-type: none"> ▪ Provide Financial Management of the utilization of funds. 	<p style="text-align: center;">AEC, IS/Finance, UR</p>	<p style="text-align: center;">December 30, 2004 – Part I September 30, 2005 – Part II</p>

Organizational Performance Areas: Strategic Planning, Integrated Care, Financial Operations

Stakeholders: Board Members, State Rep's, Legislators, Consumers, Family Members, Staff

JCAHO Criteria: Leadership; Education and Communication; Improving Network Performance; Mgm't of Information;

MDCH Policy Areas: None Identified

Baldrige Categories: Leadership & Planning, Process Management, Financial & Business Results

6. Outcome Area: Customer Service

Customers (defined as consumers, providers, community entities, staff) will have the necessary access to people and information to navigate throughout the CMHPSM.

GOAL AREAS	TEAM	TIMEFRAME
<ul style="list-style-type: none"> ▪ Seamless consumer movement within the regional affiliation partnership. 	Clinical Care , Member Services AEC,	April, 30,2005
<ul style="list-style-type: none"> ▪ Implement consumer/family feedback from committees or focus groups. 	RCAC, Performance Improvement , AEC,	September 30, 2005
<ul style="list-style-type: none"> ▪ Provide consistent tools for the Consumer to access and navigate the regional CMH system that identifies and responds to grievances and appeals. 	Member Services, AEC	September 30, 2005
<ul style="list-style-type: none"> ▪ Provide consistent tools and information for staff to navigate their work environment. 	Professional Developm't , AEC	January 31, 2006
<ul style="list-style-type: none"> ▪ Provide consistent tools and information for Providers to access and navigate the CMH system they contract. 	Professional Developm't, Network Mgm't , IS/Finance, AEC,	December 30, 2005
Organizational Performance Areas: Direct Services, Access to Services, Integrated Care Utilization, Financial Operations		
Stakeholders: Consumers, Community Members, Staff, Providers		
JCAHO Criteria: Improving Network Performance; Mgm't of Human Resources; Education & Communication; Leadership		
MDCH Policy Areas: Empowerment/Recovery/Inclusion, Community Participation/Inclusion/Independency/Productivity		
Baldrige Categories: Leadership & Planning, Consumer & Customer Focus, Measurement & Knowledge Management, Process Management, Staff Focus & Human Resources		