

**BOARD OF MENTAL HEALTH
AND DEPARTMENT OF MENTAL HEALTH
STRATEGIC PLAN**



ANNUAL REPORT – FY 2012

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The Annual Report provides a summary of the completion status of FY 2012 Action Plans.

The Strategic Plan Coordinator was Lisa Romine and Wendy Bailey, and the Goal Team Leaders were:

- Goal 1 Kelly Breland, MSH and Trisha Hinson, DMH
- Goal 2 Sandra Parks and Veronica Vaughn, DMH
- Goal 3 Thaddeus Williams and Ashley Lacoste, DMH
- Goal 4 Mardi Allen, DMH
- Goal 5 James Dunaway, DMH and Sabrina Young, SMSH

Over 150 dedicated individuals worked to accomplish the FY 2012 Strategic Plan action plans. Team members represented a broad spectrum of stakeholders including advocacy groups, consumer groups, DMH professional staff, paraprofessionals, nonprofit providers, and family members. DMH appreciates the hard work of the Strategic Plan Goal Teams. Moving the mental health system forward is dependent on the dedication of individuals such as these. We value their input and efforts.

Following is a list of individuals who contributed to the successes in each goal.

Goal 1

Steven Allen
Kelly Breland
Dr. Craig Escude
Edie Hayles
Lisa Henick
Trisha Hinson
Dr. Kenneth O'Neal
Millicent Ledbetter
Lisa Romine
Penney Stokes
Cary Walt

Goal 2

Aurora Baugh
Andrew Day
Brent Hurley
Jake Hutchins
Kris Jones
Zandrea King
Joe Kinnan
Ashley Lacoste
Dr. Linda McDowell
Matt Nalker
Kimela Smith
Ginger Steadman
Mark Stovall
Scott Sumrall
Kathy VanCleave
Veronica Vaughn
Thad Williams

Goal 3

Joyce Adair
Jeri Avery
Wendy Bailey
Carol Brown
Andrew Day
Eileen Ewing
Jackie Fleming
Lisa Henick
Brent Hurley
Jake Hutchins
Kris Jones
Zandrea King
Ashley Lacoste
Shelia Lowe
Willie Mae Berry
Marlowe Middleton
Diana Mikula
Sandra Parks
Lisa Romine
Shannon Rushton
Thad Williams
Nena Williams
Debbie Wilson

Goal 4

Mardi Allen
Pam Jones
Cynthia Johnson
Kim Sallis
Jim Dickerson
Stacy Miller
Jeri Avery
Michael Jordan
Sandra Parks
Lisa Henick
Kathy VanCleave
Adam Moore
Lynda Stewart
Susan Hrostowski
Melody Winston
Kathy Denton
Ken Patterson
Lisa Romine
Steve Smith
Kelly Wilson
Mona Gauthier
LeeLee Marlow

Goal 5

Carol Armstrong
Tammie Avant
Lisa Bryant
Shannon Bush
James Dunaway
Debbie Ferguson
Tammy Foster
Melissa Hester
Phil Jenkins
Steven Johnson
Jeff Martin
Larry McKnight
Lee Middleton
Cyndi Nail
Janet Rascoe
Joe Rials
Sonia Scoggin
David Smith
Jan Smith
Molly Sprayberry
Bobby Sterling
Scotty Taylor
Renee Triplett
Sabrina Young

Goal 1 Maximize efficient and effective use of human, fiscal, and material resources

Objective 1.1 *Increase efficiency within DMH*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
1.1a Continue to implement proven cost reduction measures across DMH programs/services	Amounts and relative percentages realized from expenditure reductions projects	X			
1.1b Implement at least one new Expenditure Reduction Project each year	By 2016, five projects developed and implemented with projected cost reductions reported			X	A Pharmacy Services Workgroup has been established, and a Request for Proposals to provide administrative, logistical, and technical enhancements to reduce costs of pharmacy operations in DMH facilities will be released in July 2012.
1.1c Determine personnel needed to transform the service system	Increase in types and numbers of community-based support staff				During 2012, extensive information was gathered and reviewed specific to current and future DMH personnel needs. During 2013, this information will be used to help plan personnel needs for Mississippi's transition to a more community-based system.

Objective 1.2 *Maximize funding opportunities*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
1.2a Request and assist the Division of Medicaid with submission of at least one new community-based waiver option based on established priorities	Waiver request submission	X			
1.2b Apply for at least two new grants or additional funding in targeted areas: infrastructure and capacity building	Number of grants applied for and increase in the amount of grant dollars obtained	X			
1.2c Collaborate with Division of Medicaid to amend the Medicaid State Plan to provide an array of person centered services (crisis intervention, peer/caregiver support, respite services, Wraparound facilitation, MAP teams)	Medicaid State Plan amendments submitted	X			
1.2d Maximize use of Elderly Disabled Waiver to provide services/programs for individuals with Alzheimer's disease	Statewide availability of Alzheimer's day programs	X			

Objective 1.3 *Revise system-wide management and oversight practices to improve accountability and performance*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
1.3a Maximize stakeholder input by streamlining the number of required task forces and steering committees	One representative committee for stakeholder input that meets requirements of applicable statutes or policies			X	During 2012, a plan was developed in conjunction with the DMH Peer Review Committee to more effectively involve stakeholders in standing committees or councils that are under the purview of the DMH Planning Councils. This plan will be implemented in 2013.
1.3b Implement resource allocation strategy to support EBP/BPs and service outcome models	Funding amounts (dollars) reallocated, itemized by service, and number and type of EBPs in use	X			
1.3c Increase percentage of funding allocation to priority services (crisis services, housing, supported employment, case management, and early intervention/prevention)	Funding amounts (dollars) allocated to top three priorities	X			

Goal 2 Strengthen commitment to a person-driven, community-based system of care

Objective 2.1 *Expand meaningful interaction of self advocates and families in designing and planning at the system level*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.1a Provide opportunities for individuals and family members to participate in program development, service planning and recovery training	Active participation of peers and family members on Advisory Councils	X			
2.1b In collaboration with Division of Medicaid, develop an array of reimbursable peer and caregiver support services	Increased person-centered service options	X			
2.1c Provide statewide training to all service providers on the recovery model, person-centered planning, and System of Care principles/values	Increased knowledge of staff and increase in positive responses to the Council on Quality and Leadership's (CQL) 21 Personal Outcome Measures	X			

2.1d Determine system's responsiveness to individual needs and desired outcomes	100% of certified programs evaluated according to the CQL's 21 Personal Outcome Measures			X	Funding was not available for 100% of certified providers to be evaluated using personal outcome measures.
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Objective 2.2 *Develop a comprehensive crisis response system*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.2a Provide Crisis Stabilization Unit (CSU) services through each CMHC region	By end of FY16, a CSU in each CMHC region			X	Region 9 declined a CSU for financial reasons. DMH is attempting to locate funding and a provider.
2.2b Evaluate CMHC-operated crisis stabilization units based on defined performance indicators for diversion, length of stay, and recidivism	Report of increase in diversion rate and reduction in length of stay and recidivism rate			X	Barriers are continuing to be defined, and strategies will be developed in FY13.

Objective 2.3 *Increase statewide availability of safe, affordable and flexible housing options and other community supports for individuals*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.3a Acquire sufficient staff time, training and resources to continue the development of service linkages with multiple housing partners at the state	State Housing Coordinator hired or staff	X			

and regional levels	assigned				
2.3b Identify support services and funding to sustain individuals living in permanent housing	Funds secured or allocated for needed supports	X			
2.3c Provide an array of supported housing services	At least 500 persons received supported housing services/support across the state	X			
2.3d Provide a bridge funding for supported housing	At least 20 individuals received bridge funding to secure supported housing each year	X			

Objective 2.4 <i>Provide community supports for persons transitioning to the community through participation in Money Follows the Person project</i>					
Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.4a Expand funded Waiver Services to enable individuals with ID/DD residing in DMH facilities to transition into the community	Increased number served by a minimum of 20 persons per year	X			

2.4b Use ID/DD Waiver Services Reserve Capacity slots and Money Follows the Person services to transfer people from ICF/MRs to the community	By FY16, 138 people transitioned from ICF/MRs to community			X	This activity is ongoing. In FY12, 39 people were transitioned.
2.4c Increase number served in ID/DD Waiver each year from those on the waiting list	ID/DD Waiver enrollment increased by 5% each year	X			
2.4d Transfer people from nursing homes to community using Money Follows the Person services	By FY16, 240 people transitioned from nursing facilities to community			X	The number of individuals living in nursing homes who qualify for B2I (Money Follows the Person) has been requested. DMH has not received information to date.
2.4e Establish interagency, multidisciplinary transition teams at the state ICF/MRs to assist individuals in making a seamless transition to community-based services	Five Transition Teams	X			

Objective 2.5 *Provide long-term community supports*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.5a Expand Intensive Case Management services to enhance the diversion of persons in crisis away from inpatient treatment until less intensive services are needed	15 Intensive Case Management Teams across the state			X	Due to funding restraints, teams were not established. This initiative will be reevaluated in FY13.
2.5b Expand PACT teams to support the integration and inclusion of persons needing long-term psychiatric care	Funded five additional PACT teams across the state			X	Funding was not secured. DMH is considering the reallocation of funds. DMH is working with DOM to refine reimbursement.

2.5c Provide Community Support Teams to promote and support the independent living of individuals served					Due to funding restraints, teams were not established. This activity will be reevaluated in FY13.
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Objective 2.6 *Provide supported employment services*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.6a Increase number of individuals assisted with employment	At least 500 individuals with SMI/SED/A&D/ID/DD obtained jobs	X			
2.6b Assist in the reentry of individuals with mental illness back in the workplace	Employment Specialist employed by DMH certified providers	X			
2.6c Increase supported employment for individuals with ID/DD and decrease reliance on Work Activity Services	Number of people transitioned to supported employment from Work Activity	X			

Objective 2.7 *Expand specialized services*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
2.7a Increase and improve integrated treatment service options for co-occurring disorders in adults with SMI and children/youth with SED (SMI/A&D, SED/A&D, SMI/IDD, SED/IDD)	Number of co-occurring integrated treatment sites increased	X			
2.7b Provide additional services/programs to serve transition-aged youth and young adults with SED	Two additional MTOP sites	X			

***Goal 3* Improve access to care by providing services through a coordinated mental health system and in partnership with other community service providers**

Objective 3.1 *Establish equitable and timely access to services statewide*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
3.1a Design integrated planning lists procedures to better identify types and locations of needed services/supports in order to increase options for home and community-based service provision	Integrated planning lists for BIDD and BMH			X	The MH Workgroup has been selected, and the chairperson of the group has been established. The data elements for the ID/DD waiting list and process for data collection have been identified. This information will be shared with facility

					directors in FY13.
3.1b Develop strategies to address barriers to timely access	Strategies developed to reduce average length-of-wait times in community service programs	X			
3.1c Increase access to mental health care/services through expanded use of telemedicine	Increase access to mental health care/services through expanded use of telemedicine	X			Questions regarding the use of telemedicine were added to the Adult State Plan Survey. A total of six of the 15 CMHCs have telemedicine capacity.

Objective 3.2 *Expand and increase effectiveness of interagency and multidisciplinary approaches to service delivery*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
3.2a Increase participation of the MS Band of Choctaw Indians in assessment, planning, and service delivery process	Appointments made to state-level advisory councils	X			
3.2b Increase partnership activities between local entities and community providers such as hospitals, holding facilities, CSUs and CMHCs to establish triage, treatment, and diversion plans	MOUs and documentation of outreach and action accomplished through mutual efforts	X			

<p>3.2c Collaborate with the Veterans Administration (VA) to increase the provision of A&D services to veterans within the local community</p>	<p>Contracting of two or more regional CMHCs and free-standing programs with the VA for bed space for veterans in the community</p>			<p>X</p>	<p>Region 12 provides primary and transitional services for 64 homeless (males/females) veterans. Included are 12 apartments which house 24 male veterans. Region 12's goal is to follow the veterans from detox to permanent housing. At present, the program is providing services to 47 veterans, and 17 beds are available.</p> <p>Common Bond Recovery Center has established an annual collaborative partnership with the VA to provide alcohol and drug services for veterans statewide.</p>
<p>3.2d Expand MAP teams for children and youth with SED and IDD</p>	<p>MAP Teams available in all 82 counties</p>			<p>X</p>	<p>Although no additional funds were available, Region 2 began developing MAP Teams for Tate, Panola and Calhoun counties. The Region 6 MAP Team (Leflore County) also serves Sunflower, Grenada, Carroll, Holmes and Humphreys counties. Region 10 continues to operate Lauderdale and Newton County MAP Teams, and Region 11 continues to operate MAP Teams in Franklin, Lawrence, Walthall, Pike and Amite counties.</p>
<p>3.2e Increase the utilization and practice of Wraparound for children and youth with SED and/or IDD</p>	<p>Wraparound model utilized by each certified CMHC for those children/youth and their families deemed necessary</p>			<p>X</p>	<p>Introduction to Wraparound trainings were conducted. Fifteen Wraparound Coaches were identified through an application process and continue to be trained by the University of Maryland, Innovations Institutes via monthly phone calls and on-site technical assistance.</p>
<p>3.2f Expand adult MAP teams</p>	<p>Adult MAP Teams available</p>			<p>X</p>	<p>No additional funding was available for Adult MAP Teams. In FY13, strategies</p>

	in 15 counties				will be developed to attempt an implementation of the MAP team model without funding.
3.2g Facilitate work with state and local partnerships to increase jail diversion programs	Increased number of jail diversion programs, mental health courts, holding facilities, and CIT programs			X	Funding this project was not been located. This action plan will be carried over into FY13.
3.2h Continue participation with the Mississippi Transportation Initiative	Increased availability of transportation	X		X	
3.2i Adapt Operation Resiliency with the Veterans Administration care centers	Joint campaign to provide awareness and information on local behavioral health services	X			
3.2j Develop strategies to facilitate integration of mental illness, IDD, and addiction services with primary health care	Plan developed to increase use of integrated services	X			
3.2k Continue development of multi-agency comprehensive approach for substance abuse prevention among adolescents	Develop joint efforts with community partners	X			

Goal 4 Implement use of evidence-based or best practice models and service outcome measures

Objective 4.1 *Implement EBP/BP models in priority service areas as a community norm/standard to support positive outcomes for individuals*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
4.1a Select EBP/BP where identified models are available that meet state specific criteria for each of the required core services and DMH-identified priority services including crisis services, supported employment, and person-centered planning	Specific treatment models selected for required services	X			The committee identified specific models currently utilized throughout Mississippi. The committee needed to wait until the Strategic Planning and Best Practices Committee had identified the specific criteria for each performance measure that will be required of the certified programs. Each of the subcommittees of the Strategic Planning and Best Practices Committee has identified those EBP/BPs that purport to achieve outcomes consistent with the recommended performance measures.
4.1b Develop timelines for implementation of the selected models endorsed by DMH for core services and DMH priority services	Implementation plan			X	Several EBP/BP models are currently being implemented; however, there is no specific coordinated implementation plan, nor does such a plan appear feasible.

Objective 4.2 *Develop service outcomes in service areas as a community norm/standard of care to support positive outcomes for individuals*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
4.2a Provide opportunities for consultation, training and review of emerging or promising models found to be effective	<i>Innovations in Practice</i> published at least twice yearly highlighting effective treatment models promoting training opportunities on emerging or promising models			X	The Fall/Winter issue of <i>Innovations in Practice</i> was distributed. The Spring/Summer issue is near completion, and distribution will follow shortly thereafter. Most of DMH Central Office staff completed training in EBP/BP implementation during FY12.

Objective 4.3 *Evaluate and monitor outcomes of treatment models*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
4.3a Establish evaluation criteria for each of the core services and DMH priority services to address efficacy and effectiveness	By July 1, 2012, a set of criteria for each of the core services and DMH priority services will be implemented			X	This activity will be carried over into FY13 due to the timing of the Legislative Strategic Planning and Best Practices Committee development and will be contingent on this group's work products.

Goal 5 Utilize information/data management to enhance decision-making

Objective 5.1 Maximize reporting potential of collected data

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
5.1a Refine/evaluate reports on client-level data from CDR for appropriateness/clinical-programmatic	Reports reviewed for appropriateness			X	The IT department continues to develop reports as requested by executive staff.
5.1b Modify CDR to allow for capturing length-of-wait data	Include "waiting" as a service in order to track length of wait		X		The IT department recently filled a programming position. Activities will begin in FY13.
5.1c Disseminate monthly reports when/where necessary (admission, discharges, recidivism)	Reports produced and disseminated			X	The IT department continues to develop reports as requested by executive staff.
5.1d Generate other reports needed based on data elements currently collected for client tracking	Reports produced and disseminated			X	Activities to continue in FY13

Objective 5.2 Develop/expand an electronic collection and reporting system for new reports

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
5.2a Determine what software/program will be used across all	Report summarizing recommendations			X	Activities to continue in FY13
5.2b Determine what new reports are required (i.e., Annual Operational Plan, Certification Visit Reports, Provider Management System, Outcome, Managed Care, Disparity Data, etc.) and for whom (i.e. Central	Recommendation made on needed reports		X		Activities to begin after web design implementation

Office, C&Y Services, CMHCs, etc.)					
5.2c Define data for required report	Data elements identified		X		Activities to begin in FY13
5.2d Design standardized reports with timelines for implementation	Reports designed		X		Activities to begin in FY13
5.2e Implement collection and reporting	Reports designed		X		Activities to begin in FY13

Objective 5.3 <i>Establish an electronic exchange of health information between DMH facilities and programs, and MS Health Information Network (MSHIN)</i>					
Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
5.3a Determine DMH participation cost for MSHIN	Calculation of cost per facility to participate in MSHIN	X			
5.3b Determine DMH facilities for joining MSHIN	As approved by DMH, number of facilities which join MSHIN	X			
5.3c Report MSHIN Board actions quarterly	Information provided on how actions impact DMH	X			
5.3d Determine communication pathway among HIE and EHR	Post evaluation, provided recommendation of pathways	X			

Objective 5.4 *Establish an electronic health record (EHR) systems at DMH facilities and programs (as mandated and approved by DMH)*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
5.4a Provide education of federal and state policy on healthcare reform to DMH Electronic Health Record (EHR) committee members, facility directors and IT directors	Score on healthcare reform test	X			
5.4b Evaluate usefulness and feasibility of Medicaid Electronic Health Record (MEHR) database	Report on associated costs, incentives, and penalties for non-compliance of use EHR			X	Activities to continue in FY13

Objective 5.5 *Develop a Health Information Technology (HIT) strategy for DMH including policies, standards, and technical protocols while incorporating cost-saving measures*

Action Plan	Performance Indicator	Completed			Status Notes
		Yes	No	In Progress	
5.5a Perform Network Security Audit.	100% participation and remediation of network security of DMH Central Office and facilities	X			

