

# Mississippi Department of Mental Health

FY23 - FY27

## STRATEGIC PLAN



*Supporting a Better Tomorrow...One Person at a Time*

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# MESSAGE FROM THE CHAIR

Dear partners,

We are pleased to share with you the Mississippi Department of Mental Health's FY23 - FY27 Strategic Plan. It is a determined and ambitious plan that provides a framework for the agency to meet the needs of our state and serve as a roadmap into the future. Through the objectives, strategies, and measures in the Strategic Plan, we hope to provide inspiration, to assist people on the road to recovery, and to improve resiliency. We hope to help Mississippians succeed in their lives.

The mission of the Department of Mental Health is to support a better tomorrow by making a difference in the lives of Mississippians with a mental illness, substance use disorder and/or intellectual and developmental disability. This Plan outlines strategic goals that address the most relevant opportunities and challenges we foresee over the next five years to carry out our mission. The goals represent innovative, future-oriented, and statewide initiatives that will require partners throughout the state working jointly towards a common goal.

The FY23 - FY27 Strategic Plan is the result of much hard work, utilizing research and guidance from the National Association of State Mental Health Programs Directors Research Institute (NRI) and created with input received from stakeholders in the community.

The Strategic Plan is intended to be a living document, providing a continuing touchstone for staff, yet flexible enough to change as the state's needs evolve. It is a way to measure efficacy of our plan, provide the most current and empirically based strategies and a means to constantly self-evaluate. It guides decision-making on allocating resources and pursuing strategies and priorities. As this plan is measured during the coming years, we hope to see continued progress throughout the state even as needed changes come into sharper focus.

The Board Strategic Planning Subcommittee is extremely appreciative of the hard work of staff and partners who contribute to the Plan's success. We look forward to your continuing involvement as we strive to reach our mission and vision.

Sincerely,

Dr. James Herzog  
Chair, Strategic Planning Subcommittee  
Mississippi Board of Mental Health

# COMMON ACRONYMS

Below is a list of common acronyms you may encounter in the Department of Mental Health Strategic Plan or reports based on the plan.

<b>BRC</b>	Boswell Regional Center
<b>CHOICE</b>	Creating Housing Options in Communities for Everyone
<b>CIT</b>	Crisis Intervention Team
<b>CMHC</b>	Community Mental Health Center
<b>CMS</b>	Centers for Medicare and Medicaid Services
<b>CPSS</b>	Certified Peer Support Specialist
<b>CSU</b>	Crisis Stabilization Unit
<b>DMH</b>	Department of Mental Health
<b>EMSH</b>	East Mississippi State Hospital
<b>ESS</b>	Ellisville State School
<b>HRC</b>	Hudspeth Regional Center
<b>IFC/IID</b>	Intermediate Care Facility for Individuals with Intellectual or Developmental Disabilities
<b>IDD</b>	Intellectual or Developmental Disability
<b>ICORT</b>	Intensive Community Outreach and Recovery Team
<b>MAC</b>	Mississippi Adolescent Center
<b>MAP TEAM</b>	Making A Plan Team
<b>MDE</b>	Mississippi Department of Education
<b>MDRS</b>	Mississippi Department of Rehabilitation Services
<b>MSH</b>	Mississippi State Hospital
<b>MYPAC</b>	Mississippi Youth Programs Around the Clock
<b>NMRC</b>	North Mississippi Regional Center
<b>NMSH</b>	North Mississippi State Hospital
<b>PACT TEAM</b>	Program of Assertive Community Treatment Team
<b>SMI</b>	Serious Mental Illness
<b>SMRC</b>	South Mississippi Regional Center
<b>SMSH</b>	South Mississippi State Hospital
<b>SPOTT</b>	Specialized Planning Options to Transition Team
<b>STF</b>	Specialized Treatment Facility
<b>WRAP</b>	Wellness Recovery Action Plan

# EXECUTIVE SUMMARY

The Mississippi Department of Mental Health (DMH) Strategic Plan is a dynamic document intended to provide goals and objectives related to the inpatient and residential programs directly operated by the agency, the community services funded through the agency, and other partnerships or operational activities within the department. In previous years, the DMH Strategic Plan typically provided goals related to a three-year period. This most recent revision of the plan, the FY23 - FY27 DMH Strategic Plan, is intended to cover a five-year span, with no major revisions planned until the end of the five years.

In developing this revision of the Strategic Plan, DMH engaged with the National Association of State Mental Health Program Directors Research Institute (NRI) to help define performance measures for the state hospitals, as well as to conduct stakeholder outreach. NRI conducted stakeholder engagement research from 21 stakeholder groups and received feedback from interviews, focus groups, and surveys to understand their thoughts on the plan's format, length, general content and more. These groups represented DMH leadership, community partners, clinicians and therapists, regional mental health center staff and leadership, state agency partners, peer and recovery support specialists, and advisory council members.

In addition, NRI reviewed other state agencies' strategic plans for comparison to the DMH Strategic Plan. Recommendations included feedback on the plan's format and look, communication and feedback acknowledgement, and future stakeholder engagement. DMH has worked to incorporate feedback from the NRI report into this revision of the plan where possible.

# EXECUTIVE SUMMARY

This plan is made up of six goals, supported by objectives, which are in turn supported by strategies. The goals themselves are not hierarchical or related in nature; they are six distinct, broad areas on which DMH is focusing. Within each goal, the objectives describe what needs to be done to achieve the goal, which the strategies detail more specific methods or activities that are undertaken to implement the objective. Strategies are likewise supported by performance measures that provide data on the progress towards meeting the stated objectives and strategies.

## GOAL

What we want to achieve

## OBJECTIVE

How we want to achieve the goal

## STRATEGY

Ways we will work toward the objective

## MEASURES

Specific data about the strategy

# IMPLEMENTATION

Many of the objectives relate to programs or initiatives that are already under way; others may relate to new or upcoming services that will be implemented and measured as the new fiscal year begins on July 1, 2022. As previously stated, the goals are six broad areas on which DMH is focusing:

## **GOAL 1**

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To provide efficient and effective inpatient services for adolescents and adults with serious mental illness and/or substance use disorders.

## **GOAL 2**

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Maximize the efficiency and effectiveness of community services and supports that prevent unnecessary hospitalizations for children, youth and adults.

## **GOAL 3**

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To improve connections to care and the effectiveness of the crisis services continuum network of services statewide

## **GOAL 4**

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To increase access to community-based care and supports for people with intellectual and/or developmental disabilities through a network of service providers that are committed to a person-centered system of care

## **GOAL 5**

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To develop and build capacity of the behavioral health and IDD workforce

## **GOAL 6**

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To engage Mississippians and promote the development of effective educational resources and dissemination approaches to improve public understanding of behavioral health

# IMPLEMENTATION

The Department of Mental Health Central Office will coordinate reporting on this strategic plan, with information sourced from DMH programs, monthly grant reports, the WITS data and billing system maintained by DMH, Medicaid reports, or other sources. Reports will be made available on the DMH web site, in DMH publications, presented at Board of Mental Health meetings, and available upon request.

This plan is intended to serve as a guide for the Department of Mental Health regarding the inpatient and residential services it provides, the community-based services it funds and certifies, and for other operations of the agency. Ultimately, it is intended to aid in the implementation of a more community-based, person-centered, recovery-oriented system of care. However, we recognize it will take research, partnerships, advocacy, and the support of many different stakeholders to reach our goal of supporting a better tomorrow for all Mississippians.

Thank you for the efforts and continuing commitment of everyone who has contributed to not just the development of this plan, but the services and programs discussed within.



# GOAL 1

FY23 - 27 STRATEGIC PLAN

## To provide efficient and effective inpatient services for adolescents and adults with serious mental illness and/or substance use disorders

### OBJECTIVE 1.1

Maximize the efficiency and effectiveness of inpatient services at DMH's behavioral health programs serving adolescents and adults

#### STRATEGY 1.1.1

Monitor wait times and location of waiting for acute psychiatric services

##### MEASURES

- Average length of wait for acute psychiatric admissions
- Percentage of admissions to DMH acute psychiatric services from a jail setting
- Average length of time waiting in jail for acute psychiatric admission
- Percentage of admissions to DMH acute psychiatric services from same level of care setting

#### STRATEGY 1.1.2

Monitor wait times and location of waiting for substance use services at the two DMH substance use disorder units

##### MEASURES

- Average length of wait for substance use disorder admissions
- Percentage of admissions to a DMH substance use disorder unit from a jail setting
- Average length of time waiting in jail for SUD admission

#### STRATEGY 1.1.3

Monitor admissions, readmissions, and length of stay in state hospitals for acute psychiatric services

##### MEASURES

- 30 Day Readmission Rate
- 180 Day Readmission Rate
- 365 Day Readmission Rate
- Geometric average length of stay
- Number of admissions
- Total number served (acute psychiatric)

# GOAL 1

FY23 - 27 STRATEGIC PLAN

**To provide efficient and effective inpatient services for adolescents and adults with serious mental illness and/or substance use disorders**

## OBJECTIVE 1.2

Enhance the transition process for people discharged from a DMH behavioral health program to the community

### STRATEGY 1.2.1

Monitor discharge planning at DMH behavioral health programs

#### MEASURES

- Percent of audits conducted by the Office of Utilization Review that meet all requirements
- Percent of audits conducted by the Office of Utilization Review that meet all requirements and are sent to the next level of care in the established time frame
- Number of discharges from DMH behavioral health programs
- Number of discharges from DMH behavioral health programs to CMHCs

### STRATEGY 1.2.2

Begin the intake process or facilitate meetings for people connected with CMHCs prior to discharge from DMH behavioral health programs

#### MEASURES

- Percentage of audits with documentation of meetings or intakes with CMHCs prior to discharge
- Percentage of people who attend their first follow-up appointment with CMHCs within 14 days of discharge
- Percentage of people who began Wellness Recovery Action Plans or participated in Illness Management and Recovery prior to discharge

# GOAL 1

FY23 - 27 STRATEGIC PLAN

**To provide efficient and effective inpatient services for adolescents and adults with serious mental illness and/or substance use disorders**

**STRATEGY 1.2.3** Utilize the Peer Bridger program to connect people discharged from DMH behavioral health programs with their local Community Mental Health Centers

## MEASURES

- Percentage of people with bridging meetings
- Percentage of people with bridging meetings who attended the first post-discharge appointment at the CMHC
- Number of individuals with bridging meetings readmitted 0-30 days after discharge

## OBJECTIVE 1.3

Decrease the wait time for completed initial competency evaluations and admission for competency restoration services at MSH Forensic Services.

**STRATEGY 1.3.1** Monitor evaluation and restoration services provided through Forensic Services

## MEASURES

- Average time for completed initial competency evaluations
- Average length of wait for competency restoration admissions
- Average length of stay for competency restoration

# GOAL 2

FY23 - 27 STRATEGIC PLAN

## Maximize the efficiency and effectiveness of community services and supports that prevent unnecessary hospitalizations for children, youth and adults

### OBJECTIVE 2.1

Provide Programs of Assertive Community Treatment, Intensive Community Outreach and Recovery Teams, and Intensive Community Support Services as intensive community services that are designed to prevent the need for hospitalization

#### STRATEGY 2.1.1

Monitor the readmissions and fidelity of intensive community services of PACT, ICORT, and ICSS

#### MEASURES

- PACT number served
- PACT readmission rate
- PACT fidelity rate
- ICORT number served
- ICORT readmission rate
- ICORT fidelity rate
- ICSS number served
- ICSS readmission rate
- ICSS fidelity rate

### OBJECTIVE 2.2

Provide services that support a person's continued recovery in the community

#### STRATEGY 2.2.1

Monitor the fidelity of Supported Employment services

#### MEASURES

- IPS Supported Employment Fidelity Rate
- Number employed through IPS Supported Employment
- VR Supported Employment Fidelity Rate
- Number employed through VR Supported Employment

#### STRATEGY 2.2.2

Monitor the readmission rate to state hospitals of people served through CHOICE housing program, Supervised Living, and Supported Living

#### MEASURES

- CHOICE number served
- CHOICE housing program readmission rate
- Supervised and Supported Living number served
- Supervised and Supported Living readmission rate

# GOAL 2

FY23 - 27 STRATEGIC PLAN

## Maximize the efficiency and effectiveness of community services and supports that prevent unnecessary hospitalizations for children, youth and adults

**STRATEGY 2.2.3** Develop Peer Respite programs to provide short term, non-clinical respite support to help people find new understanding and ways to move forward

### MEASURES

- Number of new sites
- Number of people served
- Percentage of people requiring a more intensive service
- Percentage of people with a follow-up appointment scheduled at their local CMHC

### OBJECTIVE 2.3

Provide community supports for children and youth with serious emotional disturbance and prevent the need for out-of-home placements

**STRATEGY 2.3.1** Utilize MAP Teams to prevent unnecessary institutionalizations among children and youth

### MEASURES

- Number served by MAP Teams
- Number of cases referred by local partners attending MAP Team meetings
- Percentage of youth needing a higher level of care

**STRATEGY 2.3.2** Increase the utilization of Wraparound Facilitation/Supportive Aftercare with children and youth

### MEASURES

- Number served by Wraparound Facilitation/Supportive Aftercare
- Percentage of youth who received Wraparound Facilitation/Supportive Aftercare as an alternative to more restrictive placement
- Percentage of youth transitioned to Wraparound Facilitation/Supportive Aftercare from a more restrictive placement
- Percentage of youth needing a higher level of care

# GOAL 2

## FY23 - 27 STRATEGIC PLAN

### **Maximize the efficiency and effectiveness of community services and supports that prevent unnecessary hospitalizations for children, youth and adults**

**STRATEGY 2.3.3** Utilize the Navigate program to assist youth and young adults experiencing first episode psychosis

#### **MEASURES**

- Number served by Navigate
- Percentage maintained in their homes and communities
- Percentage who are employed or enrolled in school/educational courses

**STRATEGY 2.3.4** Provide services for juvenile offenders that aid in the successful transition from a detention center to their communities and in preventing recidivism in the juvenile justice system

#### **MEASURES**

- Percentage of youth in Juvenile Outreach Programs that continue treatment with CMHCs
- Percentage of youth in Juvenile Outreach Programs that re-enter the detention center following participation in the JOP
- Number referred to Adolescent Offender Programs as an alternative to incarceration
- Number completing the Adolescent Offender Programs with no reoffending behaviors
- Number completing the Adolescent Offender Programs with reoffending behaviors

**STRATEGY 2.3.5** Utilize Intensive Community Support Services to maintain children and youth in their communities without the need for inpatient hospitalization

#### **MEASURES**

- Number referred from acute and/or residential treatment
- Number maintained in the community with supports from the ICSS program
- Number readmitted to acute and/or residential treatment from the ICSS program

# GOAL 2

FY23 - 27 STRATEGIC PLAN

## Maximize the efficiency and effectiveness of community services and supports that prevent unnecessary hospitalizations for children, youth and adults

**OBJECTIVE 2.4** Provide an array of substance use disorder treatment, prevention, and recovery support services

**STRATEGY 2.4.1** Divert people who are court committed to DMH for substance use treatment to a community-based program

**MEASURES**

- Number of people diverted from inpatient treatment

**STRATEGY 2.4.2** Provide community residential services for people in need of substance use disorder treatment

**MEASURES**

- Number of people served in primary residential treatment
- Number of people served in transitional residential treatment
- Number of community-based beds available for residential treatment

**STRATEGY 2.4.3** Monitor utilization of community-based treatment services by high-risk populations

**MEASURES**

- Number of intravenous drug users served
- Number of pregnant women served
- Number of parenting women served
- Number of people served through Medication Assisted Treatment for opioid use disorder

# GOAL 3

## FY23 - 27 STRATEGIC PLAN

### To improve connections to care and the effectiveness of the crisis continuum network of services statewide

#### OBJECTIVE 3.1

Increase utilization of Crisis Stabilization Units (CSUs) to divert people from a higher level of care

#### STRATEGY 3.1.1

Increase utilization of Crisis Stabilization Units (CSUs) to divert people from a higher level of care

#### MEASURES

- Number of new CSU beds added
- Total number of CSU beds

#### STRATEGY 3.1.2

Monitor utilization of Crisis Stabilization Units

#### MEASURES

- Number served
- Percentage of people diverted from a state hospital
- Average length of stay

#### OBJECTIVE 3.2

Increase availability of community crisis homes for successful continuation in the community

#### STRATEGY 3.2.1

Maintain six crisis diversion homes throughout the state for people with intellectual/developmental disabilities and/or dual diagnoses, and develop an additional four, four-bed crisis diversion homes and one six-bed crisis diversion home throughout the state

#### MEASURES

- Number of new crisis diversion beds added since FY22
- Number of people served
- Percentage of people transitioned with appropriate supports
- Average length of stay

#### STRATEGY 3.2.2

Support people with intellectual/developmental disabilities or dual diagnoses through the use of emergency safe beds

#### MEASURES

- Number of people served



# GOAL 3

FY23 - 27 STRATEGIC PLAN

## To improve connections to care and the effectiveness of the crisis continuum network of services statewide

**OBJECTIVE 3.3** Expand capacity of 988 Lifeline Centers within the crisis continuum

**STRATEGY 3.3.1** Meet increased demand in crisis calls, texts, and chats at the state's two Lifeline Centers

### MEASURES

- Number of calls
- Number of texts and chats
- In-state answer rate
- Number of calls to 988 referred to Mobile Crisis Response Teams

**STRATEGY 3.3.2** Research and implement technology that provides quality coordination of crisis care in real-time to support the continuum of crisis services

### MEASURES

- Number of technology demos viewed

**OBJECTIVE 3.4** Increase effectiveness of Mobile Crisis Response Teams to divert people from a higher level of care

**STRATEGY 3.4.1** Monitor utilization and fidelity of Mobile Crisis Response Teams

### MEASURES

- Number of crisis calls/contacts
- Percentage of calls resulting in a MCERT face-to-face response
- Percentage of people receiving a face-to-face response who are in need a higher level of care
- Average response time for rural MCERT responses
- Average response time for urban MCERT responses
- MCERT fidelity rate

# GOAL 3

FY23 - 27 STRATEGIC PLAN

## To improve connections to care and the effectiveness of the crisis continuum network of services statewide

**STRATEGY 3.4.2** Initiate Memorandums of Understanding between 988 Lifeline Centers and Community Mental Health Centers to improve care coordination

### MEASURES

- Number of MOUs

### OBJECTIVE 3.5

Provide Mississippians with an objective avenue for accessing services and resolution of grievances related to services needed and/or provided

**STRATEGY 3.5.1** Utilize the Specialized Planning Options to Transition (SPOTT) to help people access services

### MEASURES

- Number of referrals to SPOTT
- Number of appropriate referrals to SPOTT
- Percentage of appropriate referrals connected to services/supports through SPOTT

**STRATEGY 3.5.2** Utilize the DMH Office of Consumer Supports to provide Mississippians referral services and as an outlet for filing grievances related to services or providers

### MEASURES

- Number of DMH Helpline Calls
- Number of grievances filed through the Office of Consumer Support

# GOAL 4

FY23 - 27 STRATEGIC PLAN

**To increase access to community-based care and supports for people with intellectual and/or developmental disabilities through a network of service providers that are committed to a person-centered system of care**

## OBJECTIVE 4.1

Provide community supports and services that allow people to transition from the ICF/IID regional program campus to appropriate community living options

### STRATEGY 4.1.1

Transition people from the ICF/IID regional program campus to the ICF/IID Community Homes and the ID/DD Home and Community Based Waiver

#### MEASURES

- Number of people transitioned from regional programs to ICF/IID Community Homes
- Number of people transitioned from regional programs to ID/DD Home and Community Based Waiver
- Number of people transitioned from the ICF/IID Community Homes to the community
- Number of people served in the ICF/IID Regional Programs
- Percent of people served in the community versus an institutional setting

## OBJECTIVE 4.2

Provide a comprehensive system of community programs and services for people with intellectual and developmental disabilities seeking community-based service options

### STRATEGY 4.2.1

Increase the number of people receiving ID/DD Home and Community Based Waiver services

#### MEASURES

- Number of people who received ID/DD Waiver services
- Number of people admitted to the ID/DD Waiver
- Number of people on the ID/DD Waiver census

# GOAL 4

FY23 - 27 STRATEGIC PLAN

**To increase access to community-based care and supports for people with intellectual and/or developmental disabilities through a network of service providers that are committed to a person-centered system of care**

**STRATEGY 4.2.2** Increase the number of people receiving services through the 1915(i) Community Support Program

## MEASURES

- Number of people who received 1915(i) Community Support Program services
- Number of people admitted to the 1915(i) Community Support Program
- Number of people on the 1915(i) Community Support Program Census
- Number of people receiving Targeted Case Management

## OBJECTIVE 4.3

Provide Supported Employment Services that lead to gainful community employment for people with IDD

**STRATEGY 4.3.1** Increase the number of people utilizing Supported Employment Services in ID/DD Home and Community Based Waiver and IDD Community Support Services

## MEASURES

- Number of people requesting Supported Employment Services
- Number of people employed

# GOAL 5

## FY23 - 27 STRATEGIC PLAN

### To develop and build capacity of the behavioral health and IDD workforce

#### OBJECTIVE 5.1

Identify and address DMH workforce shortages to maintain a diverse and engaged mental health workforce

#### STRATEGY 5.1.1

Monitor DMH workforce data and develop recruitment recommendations

#### MEASURES

- Turnover rate for Support Care Professionals
- Turnover rate for all DMH employees
- Vacancy Rate for Support Care Professionals
- Number of recruitment recommendations implemented

#### STRATEGY 5.1.2

Conduct stay interviews/surveys at DMH state-operated programs to assess job satisfaction and adjust retention efforts as needed

#### MEASURES

- Number of stay interview participants
- Number of retention strategies implemented

#### OBJECTIVE 5.2

Develop a comprehensive state mental health workforce prepared for the complex needs of children, youth and adults in need of services and supports

#### STRATEGY 5.2.1

Sustain the Mississippi State Hospital Psychiatry Residency Program to strengthen the psychiatry workforce in Mississippi

#### MEASURES

- Number of residents
- Number of psychiatrists in the Mississippi workforce

#### STRATEGY 5.2.2

Provide clinical experience to residents in the Mississippi State Hospital Psychiatry Residency Program through the use of an outpatient psychotherapy clinic

#### MEASURES

- Number of people served through the psychotherapy clinic
- Number of sessions conducted by residents

# GOAL 5

## FY23 - 27 STRATEGIC PLAN

### To develop and build capacity of the behavioral health and IDD workforce

**STRATEGY 5.2.3** Provide technical assistance designed to improve the delivery of mental health services to stakeholders in the state mental health system

#### MEASURES

- Number of TA provided to DMH Certified Providers
- Number of people reached through TA to DMH Certified Providers
- Number of TA provided to Judges/Chancery Clerks/Chancery Courts
- Number of people reached through TA to Judges/Chancery Clerks/Chancery Courts

**STRATEGY 5.2.4** Provide consultation and training to strengthen crisis services and supports for children, youth and adults with intellectual and developmental disabilities and dual-diagnosed needs

#### MEASURES

- Number of trainings conducted
- Number of people trained

**STRATEGY 5.2.5** Promote DMH licensure and certification programs for mental health professionals employed at programs that are operated, funded and/or certified by the agency

#### MEASURES

- Number of initial licenses or certifications obtained
- Number of renewed licenses or certifications

**STRATEGY 5.2.6** Monitor the use of evidence-based and best practices at DMH Programs and Certified Providers

#### MEASURES

- Number of evidence-based and best practices actively used by DMH Certified Providers
- Number of evidence-based and best practices actively used by DMH Programs

# GOAL 5

FY23 - 27 STRATEGIC PLAN

## To develop and build capacity of the behavioral health and IDD workforce

### OBJECTIVE 5.3

Provide initial and ongoing provider certification services to maintain a qualified and diverse mental health system to meet the needs of Mississippians

#### STRATEGY 5.3.1

Provide interested provider orientation to educate agencies seeking DMH certification

#### MEASURES

- Number of agencies participating in interested provider orientation
- Number of new provider agencies approved
- Number of new services approved for DMH certified providers
- Number of new programs approved for DMH certified provider

#### STRATEGY 5.3.2

Monitor the provision of services by conducting site visits with DMH Certified Providers

#### MEASURES

- Number of full agency site visits
- Number of new program site visits
- Number of provider assessments completed during non-full site visit years

# GOAL 6

FY23 - 27 STRATEGIC PLAN

**To engage Mississippians and promote the development of effective educational resources and dissemination approaches to improve public understanding of behavioral health**

## OBJECTIVE 6.1

Maintain an online presence that offers easily accessible information about behavioral health and suicide prevention

### STRATEGY 6.1.1

Utilize the DMH web site and Mental Health Mississippi web site to provide information to the public about how to access resources and overall mental health literacy

#### MEASURES

- DMH web site users
- DMH web site sessions
- Mental Health MS web site users
- Mental Health MS sessions

### STRATEGY 6.1.2

Utilize social media to provide information to the public

#### MEASURES

- Social media total reach

## OBJECTIVE 6.2

Educate Mississippians about suicide warning signs, risk factors, and available resources

### STRATEGY 6.2.1

Utilize the Shatter the Silence campaign and ASIST to provide Mississippians with warning signs and risk factors related to suicide

#### MEASURES

- Number of Shatter the Silence presentations
- Number of people trained in Shatter the Silence
- Number of Shatter the Silence app downloads
- Number of ASIST trainings
- Number of people trained in ASIST
- Number of organizations trained in ASIST



# GOAL 6

FY23 - 27 STRATEGIC PLAN

**To engage Mississippians and promote the development of effective educational resources and dissemination approaches to improve public understanding of behavioral health**

**OBJECTIVE 6.3** Provide evidence-based or best practice trainings to various stakeholder groups

**STRATEGY 6.3.1** Provide Mental Health First Aid training to teach Mississippians the skills to respond to the signs of mental illness and substance use

## MEASURES

- Number of trainings
- People trained
- Organizations trained

**STRATEGY 6.3.2** Provide online trainings through the Mississippi Behavioral Health Learning Network to increase knowledge of evidence-based practices and best practices

## MEASURES

- Number of trainings
- People trained
- Organizations trained

**STRATEGY 6.3.3** Partner with stakeholders to expand Crisis Intervention Team Training

## MEASURES

- Number trained in CIT
- Number of law enforcement entities trained
- Number of trainings
- Number of CIT Teams
- Number of partnerships working towards CIT Teams

# STRATEGIC PLAN REPORTS

As stated earlier in this document, the Department of Mental Health Central Office will coordinate reporting on this strategic plan from various data sources. At the time of this writing, the agency plans to provide reports twice a year following the state's fiscal year schedule of July 1 through June 30. The mid-year report will include data from the first half of the year, July 1 through December 31. The end-year report will compile the remaining information for the second half of the year, January 1 through June 30, and provide a comprehensive look at data for the entire state fiscal year.

Information is gathered in the weeks following the mid-year and end-year dates, then reviewed and verified by the DMH Central Office over the course of several more weeks. Typically, reports will be available approximately two months after the close of the mid-year and end-year reporting periods and following presentation of these reports to the Mississippi Board of Mental Health. They will be made available online at the DMH web site on the Strategic Plan page, which is available at [www.dmh.ms.gov/believe/strategic-plan](http://www.dmh.ms.gov/believe/strategic-plan). Multiple years' reports, plans, and documents are also available online through the DMH web site. Any future revisions to this plan will be made public online as well.

Future and past reports would not be possible without the support of the professionals throughout the state mental health system who provide services. The plan itself would not be possible without the input and feedback of not just DMH staff and other mental health professionals, but the advocates, families, and individuals receiving services in our state.

Thank you to everyone who has contributed to the DMH Strategic Plan. We look forward to sharing reports on this plan in the months and years ahead.



**DMH**  
Mississippi Department of Mental Health  
*Supporting a Better Tomorrow...One Person at a Time*

