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BY:

Cullman Area Mental Health Authority Inc.

dba Mental Healthcare of Cullman

5 Year Strategic Plan Update 2010

Vision Statement

Working Together For Healthy Tomorrows

Mission Statement

Providing quality community care to people with mental illness and addiction to promote recovery living with an emphasis on prevention

Core Values

Quality Caring Responsibility

County Served

Cullman County

Description of Population Served

Adults with mental illness or addictions and Children with serious emotional disturbances

Catchment Area Cullman County Population Estimate ***81,324***

Demographics of Population Served

Persons under 5 years old, percent, 2007 6.1%
Persons under 18 years old, percent, 2007 23.0%
Persons 65 years old and over, percent, 2007 15.3%
Female persons, percent, 2007 50.5%
White persons, percent, 2007 96.8%
Black persons, percent, 2007 1.6%
American Indian and Alaska Native persons, percent, 2007 0.5%
Asian persons, percent, 2007 0.3%
Persons reporting two or more races, percent, 2007 0.9%
Persons of Hispanic or Latino origin, percent, 2007 3.6%
White persons not Hispanic, percent, 2007 93.3%
Language other than English spoken at home, pct age 5+, 2000 3.4%
High school graduates, percent of persons age 25+, 2000 70.4%
Bachelor's degree or higher, pct of persons age 25+, 2000 11.9%
Persons with a disability, age 5+, 2000 16,422

Description of the Planning Cycle

1. Information is compiled internally from:
    - The PI QA committee
    - SWOT evaluations completed by program, management, and board members.
2. Feedback from external sources (stakeholders) is collected from:
    - Yearly consumer satisfaction surveys
    - The Advisory Committee
    - Local DMH Planning Meetings
    - Cullman County Health Coalition Needs Assessment

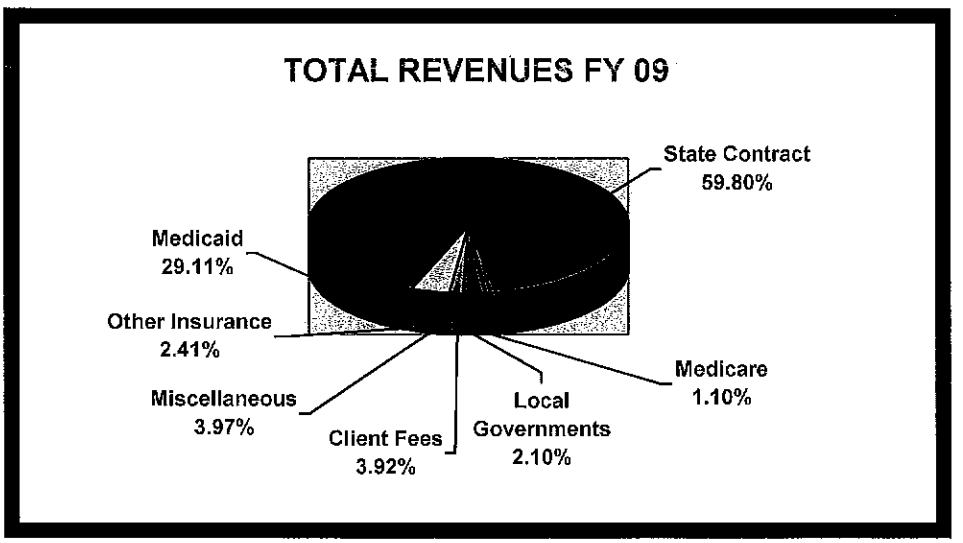
Method of Needs Assessment

The management team meets for strategic planning in August to compile information, evaluating the current environment, strengths, weaknesses, opportunities, and threats. A strategic plan is developed. (Since 2005 this plan has contained 1 year goals and objectives. In 2009, this plan established 5 year goals with both short and long term objectives.) The strategic plan is then reviewed with and approved by the Advisory Committee and the Board of Directors.

Plan Monitoring and Evaluation

Progress will be monitored and evaluated with the Management Team, Advisory Committee, and Board of Directors at least once during the year if not more often. In the following year's strategic planning cycle, each goal is monitored and evaluated for completion, revision, or removal, before new goals are established. All yearly strategic goals and objectives are informed by the 5 year plan. Each 5 years a new 5 year long range strategic plan will be developed as a component of the planning cycle.

Current Funding Resources



Future Funding Resources

In the next two fiscal years, state funds are expected to be reduced. National Healthcare reform will create increased demand and increased competitive forces beginning in 2014. It is unclear at this time how healthcare reform will affect or be limited by the availability of state matching funds.

5 Year Strategic Plan Goals and Objectives (Established 9/2009)

1. **Explore, define, and implement non-traditional strategies in new environments and with new populations.**
    a. Develop and implement therapy for adults using online options - (Timeline Check 9/2010)
    b. Explore collaboration with community partners. - (Timeline Check 9/2010)
        i. Co-location (DHR, Primary Care, Etc.)
        ii. Act in the role of a mental health specialist for primary care
    c. Implement Anger Management Classes
        i. Internal - (Timeline Check 11/2009)
        ii. External - (Timeline Check 11/2009)
    d. Explore the development of substance abuse adolescent services- (Timeline Check 9/2010)
    e. Expand prevention services to school age population and environment - (Timeline Check 9/2010)
    f. Develop re-entry program if grant is awarded - (Timeline Check 10/2009)
    g. Utilize telemedicine technology to expand services- (Timeline Check 9/2010)

2. **Explore expansion of residential resources**
    a. Explore conversion of Perkins Place to a MOMS (meals, observation, medication) program.
    b. Collaborate with other catchment areas to develop new resources

3. **Expand Service and Maximize Opportunities to Grow Revenue**
    a. Add Child and Adolescent therapist
    b. Add Child and Adolescent Summer Day Program
    c. Add Adult Case Manager
    d. Maximize use of interns
    e. Complete implementation of Electronic Medical Record - (Timeline Check 12/2009)

1 yr Strategic Plan Goals and Objectives 2010-2011

1. Improve access, availability, and coverage.
    a. Improve quality of access
    b. Achieve full-time psychiatrist coverage
    c. Explore expansion of case management coverage
    d. Expand Services
        i. Child Day Treatment (Jan 2011)
            1. Expand office space
        ii. Geriatric Services (ongoing)

2. Explore partnerships and expand collaboration
    a. Identify partnerships that promote financial and organizational stability
    b. Expand collaboration with DHR and medical family practice offices.

3. Develop Specific Clinical Certifications within MHC
    a. Identify certification resources available
    b. Develop Certification Plan (Dec 2010)

4. Explore National Accreditation
    a. Decide on feasibility and accrediting body (July 2011)

5. Improve staff development
    a. Promote direct communication between staff
    b. Validate staff for good work
    c. Improve utilization of Sharepoint
    d. Complete incentive program (Dec 2010)
        i. Refine QA process
    e. Regular computer refresher training
    f. Create task based cross-organizational teams (October 2010)
        i. Establish needed areas of attention
        (ex. Consumer satisfaction, facility appearance, newsletter, website, marketing etc.) identify strengths, reinforce teamwork, accomplish goals, monitor progress/effect, keep minutes on Sharepoint,
        ii. Identify one year teams
        iii. Establish facilitators, parameters, goals, and timelines

6. Refine Computer System Contingency Plan

7. Marketing
    a. Improved newsletter and website
    b. Create marketing plan for local physicians offices

How do I start?

- Call 734-4688 then Extension 125
- You will talk with a staff person who will take information the problem
- If you qualify for services, you will be assigned to a therapist for an assessment
- Other services such as psychiatry or case management will be assigned as needed.

Payment

We accept Medicaid, Medicare, PEEHIP, SEIB, and All Kids insurance.

Children without insurance are seen on a sliding scale.

Adults that meet the state criteria for Serious Mental Illness are charged on a sliding scale.

Services Provided

- Assessment of mental health needs
- Outpatient counseling
- Case management
- Rehabilitative day program
- Therapeutic Preschool
- In-home intervention teams
- Crisis Intervention Hotline 24 hours a day
- Senior adult outreach
- Substance abuse assessment
- Outpatient substance abuse treatment
- Referral to inpatient substance abuse rehabilitation
- Drug testing
- Community prevention program
- Psychiatric treatment and medication assistance
- Community training and education
- Supportive Housing

mentalhealthcareofcullman.org

Quotes from our clients

"Education about my mental condition enabled me to express my feelings."

"Before I came to the mental health center, I felt depressed all the time, suicidal, and anxious…"

"My life started to come together, I learned to deal with people again, I began to come to life and not want to die anymore."

"The medicine helped a great deal with the symptoms. Then therapy helped me learn to deal with my panic symptoms and depression."

"I feel like I can maybe go back to school and learn again, and maybe do some work in the future."

MENTAL HEALTHCARE OF CULLMAN

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Mailing address: PO Box 2186
Cullman, AL 35056

Phone: 256-734-4688

Vilamaa, Michelle

From: Chris VanDyke [chrisv@camha.com]
Sent: Monday, March 28, 2011 3:27 PM
To: Vilamaa, Michelle
Subject: RE: Plan

Here was the info from the 2009 5 Year Planning Day. The goals on the plan reflect the areas of greatest unmet need that can be impacted with available resources.

Entire Organizational View SWOT 2009 5 year

Strengths

Strong Management team
Getting EMR Electronic records being established
Telemedicine being established
Recoups down 65% from last year 90% from '07
Statements possible
Co-occurring expanded
Strong Staff Added
Probate involvement expanded
    Commitment rate controlled
Improved maintenance
Peer Support Added
RDP improved

Weaknesses

Size of staff
No office space
Time devoted to chart review
Decreasing Medicaid Revenue
    (*need better therapist incentives*)
Limited Residential Resources
Electronic Records transition processes
Injection volume – New Nurse
SA needs to be budget balanced

Opportunities

Residential expansion
    MOMS program
Internet interventions
    (connect to EAP, FQHC, Specialty consultation)
Expansion of Child/Adolescent Services
    Summer Day Program

Children's Day Treatment
Telemedicine
EAP
Expand Specialty consultation
FQHC Collaboration
DHR Collaboration
Medicare advantage plans
New Child Therapist
New CM
Establish staff responsibility areas – education(Jessie) , fundraisers,
Marketing by Department
SA – Adolescent services
Nursing Home expansion
Jail Transition Grant
BLS at Perkins Place

Threats

Decreasing Government Funding
Competition
Decreasing Medicaid income
Doctor coverage
Not having a hospital
Hours of work - Schedules
4 day work weeks
State budgets possibly cut in 2nd quarter (January), possible 10 to 20% additional in 2011

FROM THE 2010 UPDATE

Unmet Needs Themes from the 2010 planning session

Lack of Psychiatric Time
Financial Stability of center services in light of funding cuts
Outcome Measures
Improving Access to Care
Staff Development
Specialized Training

Chris Van Dyke
Executive Director
Mental Healthcare of Cullman

From: Vilamaa, Michelle [mailto:Michelle.Vilamaa@mh.alabama.gov]
Sent: Mon 3/28/2011 12:48 PM
To: Chris VanDyke
Subject: RE: Plan