

Strategic plan

Introduction:

Barry County Community Mental Health Authority (BCCMHA) provides behavioral health and substance use disorder services to approximately 1,700 individuals annually. Services provided include: outpatient therapy, intensive outpatient therapy, case management, psychiatric, autism, community living support, Supported Employment, care management, Assertive Community Treatment (ACT), mobile crisis, prevention, and peer support, etc. Each service is provided to assist individuals to further their path of recovery and achieve their highest level of independence.

Over the years BCCMHA funding has grown from a beginning budget of \$47,000 to a current budget of more than \$12 million. BCCMHA staffing has grown from a startup of 4 staff to a staff of more than 85. This growth has allowed us to assist many more individuals.

Barry County Community Mental Health Authority is pleased to share our Strategic Plan for FY 23 -25. This plan identifies priorities and focus areas for the upcoming years. BCCMHA leadership shall monitor federal, state and local priorities and adjust the plan as needed.

Plan:

Strategic planning is the systematic and organized process that organizations use to establish a road map to get from the current reality to the envisioned future. The strategic plan establishes operationally how the organization will achieve their goals, while maintaining the values of the organization.

This plan is based on current Federal and State priorities. In 2022, the Centers for Medicare and Medicaid Services (CMS) listed “Improve access to substance use disorders prevention, treatment, and recovery services, utilization of data for effective actions, and strengthen equity and quality in Behavioral Health Care” as top goals. The State of Michigan’s Behavioral and Physical Health and Aging Services Administration also has indicated a prioritization on improving behavioral and physical health services access and quality.

In addition, this strategic plan is written with an awareness of individuals’ needs to access services more readily and to have said services in an integrated/holistic manner. Therefore, BCCMHA will continue to focus on Care Coordination, Care Management and access models that increase access and integration.

All services will be provided in a welcoming, trauma-informed and person-centered manner. Addressing health care in a holistic manner is vital for positive health outcomes and cost-effective care. In the next few years, BCCMHA must create path(s) to assist individual's access to their recovery through a holistic, person-centered approach.

BCCMHA understands that an individual's quality of health (physical and mental) is determined in part by Social Determinants of Health (SDoH). Factors such as one's economic stability, access to health care, education, environmental conditions, and social/community context affect one's health. For individuals we support, their health may be influenced by the quality of the school they are attending, the safety of their workplace or the opportunity to work; the cleanliness of their water, food, and air; and the nature of their social interactions and relationships. BCCMHA assesses one's SDoH via an in-depth intake process. The person-centered planning process is then used to bring awareness and improvement to ones SDoH, thus improving one's health outcome.

BCCMHA shall utilize nurse care managers to help individuals identify and work toward health goals, assist with coordination with other involved health providers, reconcile medications, and complete primary care screenings. Care management activities include identifying ways to monitor and manage chronic health conditions such as diabetes, hypertension, obesity, and chronic pain. Nurse care managers can provide education on medications and health conditions and also assist individuals receiving care from multiple doctors to coordinate care for the best possible outcomes. All new clients to the agency receive a primary care screening as part of the intake process.

BCCMHA shall utilize a same day access model that fits for Barry County that not only increases direct access to BCCMHA but also increases retention of individual to services.

BCCMHA shall also use care coordinators to assist in referrals to other providers/service organizations, appointment scheduling and follow-up, program eligibility and enrollment assistance, self-management support, assistance with navigation of resources and benefits, and support with transitions of care. In addition to coordinating services, they also aid in advocating and supporting clients in achieving goals to address social determinants of health (SDoH).

There continue to be numerous proposals to change how behavioral health is delivered in the state of Michigan. While different proposals have had different focus on how and what they would change, two concepts (increased access to care and providing services in an integrated manner) continue to be themes in all proposals. To that end, BCCMHA is continuing to focus on the best ways to integrate behavioral health services with physical health services. As such, BCCMHA is entering its fifth year of a Primary and Behavioral Health Care Integration grant,

working closely with the Cherry Street Health Clinic (local Federally Qualified Health Center, FQHC). BCCMHA also applied for, and was awarded, a Certified Community Behavioral Health Clinic expansion (CCBHC-e) grant in FY21.

One way BCCMHA is increasing access and integration to services is via outreach. In FY22, BCCMHA established an Assertive Community Treatment (ACT) team. ACT is designed to assist those who have severe and persistent mental illness and who would otherwise struggle to remain independent in the community. As such, the majority of ACT services are conducted in the community or in an individual's home. The current ACT team consists of four staff including the team leader/therapist, a case manager, a community living supports expert, and a registered nurse. Each of the team members take turns working with each individual, using their own specialty areas to meet the individual's needs. In addition to the team members on the ground, the ACT team has a dedicated psychiatrist on staff to help with routine and emergent needs.

BCCMHA shall develop and monitor metrics related to its financial and operational functions through increased Quality Improvements and Utilization Management activities. Agency metrics shall be reviewed on a regular basis to ensure services being provided are efficient and effective. BCCMHA shall use standard tools to assess an individual's needs and to help provide the right service, in the right amount, to the right individual based on medical necessity.

BCCMHA values the voices of individual's and their families who have received or are receiving services. This shall be evident by individuals participating in the strategic planning process, the consumer advisory committee, feedback surveys and BCCMHA's commitment to promoting and hiring peer support and recovery coaches.

Focus areas

- A. Integration - Barry County Community Mental Health Authority (BCCMHA) shall continue to ensure there is a high level of coordination with primary care physicians and behavioral health care providers. Person centered planning shall be conducted in a holistic manner to capture both behavioral and physical health needs of an individual. BCCMHA shall continue to partner with Cherry Health Services in the implementation of the Promoting Integration of Primary and Behavioral Health Care grant. BCCMHA shall also continue its implementation of the Certified Community Behavioral Health Clinics expansion (CCBHC-e) grant.
- B. Access – BCCMHA shall increase access to BCCMHA system/services via use/promotion of Tele-Health as appropriate, expanded eligibility to include mild/moderate diagnoses, and community outreach through the newly established Assertive Community Treatment(ACT) Team.

- C. Establish quality improvement metrics – BCCMHA shall develop and monitor metrics related to its financial and operational functions through increased Quality Improvement and Utilization Management activities. BCCMHA leadership shall establish programmatic goals that are reported and reviewed by the Quality Improvement Committee. Performance improvement plans shall be created for areas not achieving established benchmarks. BCCMHA shall collect, analyze, and disseminate data to improve policies, programs, and practices.
- D. Engage in effective community outreach – BCCMHA shall increase the awareness of services and accessibility/access points through community engagement/presentations.
- E. Social Determinants of Health (SDoH) - SDoH are the non-medical factors that influence individual health outcomes. These are conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes. BCCMHA shall establish goals within the realm of SDoH to increase the community's overall health.
- F. Enhanced working environment – BCCMHA shall continue to create a positive working environment through promoting effective communication, creating mutual understanding, alignment and accountability, motivating staff to perform at their best, conducting effective meetings, efficient time management, and successfully navigating change together.