

GOALS AND OBJECTIVES

2008 - 2009 - 2010

- I. **Mental Health Related Goal: Provide effective, efficient community oriented, evidence based mental health services to Schuyler County residents.**

Objectives:

1. Expand vocational services for the mentally ill.
 - a) Assess vocational services provided to the mentally ill in Schuyler County
 - * Involve consumers in the assessment.
 - * Involve the Arc of Schuyler County in the assessment.
 - * Involve the Elmira Psychiatric Center in the assessment.
 - b) Review the job training program for the mentally ill peer workers - Ongoing.
 - c) Explore the development of a peer specialist position in the County.
 - d) Explore use of consumer volunteers for transport from home to clinic or home to bus pick up sites.
 - e) Identify people who need transport and for which reasons. We can defend a specific population who would not get services if we didn't provide transportation.

2. Support the Families First program
 - a) Increase needed referrals to Families First from the Mental Health Clinic and FLACRA.
 - b) Recruit additional active partners to Families First.
 - c) Increase the links with SPOA efforts.

3. Maintain Certification of the Mental Health Clinic and satellites in 2008 and beyond.
 - a) Implement a quality improvement program for the Mental Health Clinic.
 - c) Review and revise the intake, screening and clinic admission process for clinic services.

4. Consider a Certificate of Need (CON process) application with Hillside for one additional satellite approval in 2008 for Dundee.

5. Enhance direct, on site Mental Health services to Schuyler County school districts.
 - a) Continue to meet annually with Superintendents and other school leadership in the School Districts.
 - b) Explore the response to mutual crises in the school and elsewhere, i.e. what the school and clinic roles are during a student's crisis and the inclusion of parents, as well as the clarification of a mental health crisis and what the school is responsible for.

6. Initiate new best practices in mental health services in the MH Clinic services.
 - a) Review the NTTP best practices modules and implement two.
 - b) Identify additional best practices for the mentally ill / chemical abuse population and implement.
 - c) Work with FLACRA to treat the dually diagnosed population.
 - d) Implement tool for Best Practices

7. Explore suicide prevention efforts in Schuyler County, current risks and future preventive efforts with the following special populations:
 - a) Elderly
 - b) Poor, isolated adults
 - c) Children
 - d) Youth
 - e) Mentally ill
 - f) Mentally ill / Chemically dependent
 - g) Teen Screen
 - h) Incarcerated Population

8. Maximize use of the Mid Lake ACT (Assertive Community Treatment) in Schuyler County and the current Elmira Psychiatric Center operated program.
 - a) Referrals / admissions / discharges
 - b) Average case load

9. Computerize all Mental Health forms for all Mental Health staff - Ongoing
 - a) Increase access to forms
 - b) Eliminate out of date forms

10. Increase Mental Health screenings in the community - Ongoing with Public Health
 - a) Increase Mental Health staff involvement with community information and educational screenings.
 - b) Establish Mental Health liaisons with each town in Schuyler County.

11. Identify and train Mental Health Disaster Response Team for Schuyler County - Ongoing
 - a) Train more staff and professionals on the Disaster Response Plan
 - b) Train community members on the Plan
 - c) Continue use of identification of high risk population who may need special help during a power outage, etc.
 - d) Provide mental health first aid in shelters, for example.

12. Establish a Mental Health liaison with the Office of the Aging - Ongoing
 - a) Establish regular depression screenings through OFA
 - b) Increase numbers of 65+ population served through the Clinic
 - c) Explore grants to expand services for the mentally ill over age 65.
 - d) Plan to meet with OFA Director and spend some time at their site to be available as a resource.

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II. Community Services Board Related Goal: Provide a community based planning and monitoring process to oversee Community Services in Schuyler County.

Objectives:

1. Maintain Community Services Board and Subcommittee memberships - Ongoing.
 - a) Recruitment, training and orientation of members.
 - b) Ascendancy plans for officers.
 - c) Supportive efforts.
 - d) Committee functions.

2. Provide required annual reports and budget submissions for OMH, OMRDD and OASAS - Ongoing

3. Participate in OMH standards and compliance monitoring of agencies, which serve Schuyler County residents - Ongoing.
 - a) Review the annual reports and inspection reports for agencies that serve Schuyler County residents.

5. Participate in OASAS inspection / certifications and monitoring of programs which serve Schuyler County residents - Ongoing.
 - a) Review annual reports and inspection reports for agencies that serve Schuyler County residents.

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III. Public Health / Home Health Related Goal: Provide effective, efficient community based Public Health, Home Health and Watershed services to Schuyler County residents.

Objectives:

1. Update the Community Health Assessment for 2008 - Ongoing. A full assessment is not due until 2009, but until that time, updates are done every year, which should include information from the community.
 - a) Appropriate community agencies and departments will be included in community planning to help resolve problems in the county.

2. Public Health Emergency Planning - Ongoing
 - a) Hold 2 drills (PODs - Point of Distribution) in 2008. The Regional FLPHA (Finger Lakes Public Health Agency) will also be holding a drill in which we will be involved.
 - b) Staff trainings
 - c) Pandemic Flu response planning to be finalized, trained and drilled.
 - d) Strategic Stockpile Plan finalized and drills will be done in 2008.
 - e) Education of the community and business and special needs populations (Mennonites, mental health, MRDD populations, etc., whose needs are substantially different and participate with county for mass care. Alternate care is ongoing and Public Health assists Emergency Management in this area.
 - f) SCART (Schuyler County Animal Response Team) will be dovetailed with isolation and quarantine procedures. Plan completed with continuous revisions, and a drill is planned for the future.
 - g) Include ethics for prioritization with Emergency Management on who would receive a limited amount of anti virals, etc. Discussion postponed as National Guidelines are being developed before we do our priority plan. Committee member representation has already been established.

3. Increase efforts at community education and screenings in 2008 - ongoing.
 - a) Local businesses
 - b) County
 - c) Elderly, blood pressure screenings at OFA
 - d) Schools
 - e) Dental Screenings provided through the S²AY Rural Health Network in schools.
 - f) Screenings in the Schuyler County Jail

- g) Screenings at Head Start - vision, lead, etc., plus staff screenings
 - h) Child Care Council day care education
 - i) Community Outreach - Concerts in the Park, Italian / American Festival, Earth Day, etc.
 - j) Worksite Wellness program
 - k) Professional education by taking out current and updated information to physicians.
 - l) Low literacy health information to be made available.
4. Outcome Quality Initiation (Home Health) is ongoing - currently concentrating on Improvement in Ambulation / Locomotion and Acute Care Hospitalization.
5. OASIS updates are ongoing whenever they send more to us.
- a) Maintain software and staff training for all updates
 - b) Training for billing staff
 - c) QI for changes
7. Update the Municipal Public Health Services Plan every year - Ongoing
8. Finish immunization registry to include all physicians. Use NYSIIS Program and assist local physicians with the program. As of January 1, 2008 all physicians are legally obliged to enter all immunization information. PH staff need to be trained on the program. Use new system as soon as State let s us know a start date.
9. Continue to improve efficacy and efficiency of 3M computer system for Home Health care by taking laptops to patient homes and use to input all the information.
10. Maximize reimbursement with the aim of being self sufficient, by bringing in an expert to study the cost of home health care. Pursue increasing CHHA billing and funding competency - process started in 2008.
11. *(Marcia to rewrite) Children's services - Early Intervention services, 3-5 population, CSHCN, links with schools, LMSW as liaison with the CSP in schools, establish and oversee the process of providing therapies for children in schools and in homes before they start school. Earlier identification of children through Infant Registry grant with CIDS for developmental screenings for all babies.*
12. Disease Surveillance for community health risks, infectious disease contagion, rabies, etc., including monitoring, intervention and follow up - ongoing.
13. Watershed - increase the user friendly aspect of services.

14. Community web page for access to:
 - a) Rabies and flu clinic calendars
 - b) Public Health and Mental Health forms

15. Increase availability of Speech Therapy and Occupational Therapy - Ongoing

16. Improve adult immunization rate in home care population - Ongoing

17. Reduce paperwork time to equal patient time.

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IV. Consolidated Goals of Community Services and Public Health: Provide opportunities for the consolidation, coordination and integration of Public Health and Community Services through specific projects and activities aimed at improving overall service to the community.

Objectives:

1. Maintain and upgrade, as necessary, the network capacity and electronic reporting process. Use multiple computer back up systems, county wide. Pay for additional help in IT to support us. Use portable computers for school sites, and keep one laptop to use if one goes down in either Home Health or Mental Health. The electronic medical record and new PCs, with the same operating system and software package are being worked on currently. Reviewing electronic signature pads, which must be HIPAA compliant.
2. Maintain and improve, where possible, user access to Mill Creek site. We will be doing office changes to maximize the space in the building. There are multiple ways for computers to be connected to the network. Phone will also be using the same data lines as the computer system.
3. Update computer training needs assessment of staff in 2008 / 2009.
4. Assess professional training needs of staff for 2008 / 2009.
 - a) Initiate formal annual training needs process for assessment of staff, including mandatory training and / or annual staff meetings in June and December. Partial process is in place but an assessment needs to be done, e.g. ICS trainings and updates.
5. Review vehicle inventory and monitor related costs.
 - a) Develop replacement plan. A new process is in place through the County Highway Department.
6. Develop a staff retention plan in 2007 / 2008 - Ongoing
Note: A set of values for Caring Respect, Trust, Excellence, Teamwork and Change has already been developed.
7. Develop contract management process; identify and implement improvements in the existing process. We are currently waiting on a vendor so this is in process for 2008.
 - a) Research an automated process for managing contracts
 - b) Update specific deliverables and timetables for each contract

8. Continue with, and improve, efforts to increase employee productivity. This is being kept track of through the Performance Measurement Plan. Note: State Aid will be reduced by 2% in 2008.
 - a) Develop mechanism to monitor productivity of all employees
 - b) Review current benchmarks
 - c) Review individual performance against benchmarks
 - d) Link productivity to supervision and performance evaluations.
 - e) Work with staff to understand connections between quality and quantity and each individual employee's responsibility for performance.

9. Improve quality of care mechanisms for both Community Services and Public Health, utilizing the Community Home Care Professional Advisory Committee, the Community Services Board and the Subcommittees - Ongoing

10. Maintain performance budget.
 - a) Implement performance management plan - In process for 2008.

11. Maintain and improve, where possible, reporting and accounting processes.
 - a) Fiscal
 - b) Program
 - c) Client Centered
 - d) Administrative

12. Identify, obtain and implement an automated medical record database / reporting system for Mental Health services - Waiting for report from consultant in 2008.
 - a) Retain hard copy records
 - b) Use electronic records

13. Integration of Community Education and Prevention Activities - Ongoing
 - a) Linkage of MH staff with PH educators for screenings and education to the public. MH staff attend worksite wellness, Italian / American Festival parade and attendance at town meetings is being planned for 2008.

14. Treatment connection of MH services to clients in their homes - Ongoing.
 - a) Through Home Health, provide the chronically mentally ill or elderly with services to increase prevention or relapse.

15. Change department name to Schuyler County Health Services to promote integration of services - Ongoing

16. Promote growth of the Mental Health Association in Schuyler County.

- a) Increase membership
 - b) Provide information to families and consumers
17. Make improvements in HVAC system in Mill Creek Center.
- a) Eliminate hot / cold workspaces.
18. Patient / Client satisfaction surveys in 2008.
- a) Develop survey tools.
 - b) Implement survey tools.
 - c) Evaluate survey information
 - d) Provide survey results to management committee, staff and advisory boards.
19. Volunteer / Student involvement. Ad additional paid intern through APC for psychology for both children & adults is being planned for 2008.
- a) Implement student site connection with Keuka College.
 - b) Maintain / increase relationship with Marywood College.
 - c) Implement relationship with Elmira College.
 - d) Develop volunteer placements for Mill Creek through RSVP, Corning Community College, Arnot Medical Center, Medical Reserve Corps and Schuyler County Health Check.
20. Increase efforts to link all clients to insurance options - federal or state programs - to increase benefits available to cover the cost of care - Ongoing.
- a) Evaluate the cost of unreimbursed care
 - b) Evaluate the cost of waived care.
 - c) Identify the number of individuals in care without insurance.
 - d) Use the Sliding Fee Scale, depending on the program and insurance rates.
 - e) Include staff inservice on the Sliding Fee Scale to ensure they know how to maximize reimbursement.
 - f) Educate the clients on the Sliding Fee Scale and any other options available, e.g. facilitated enroller, Families First, etc.
21. Maintain HIPAA and record confidentiality requirements - Ongoing.
- a) Provide oversight
 - b) Regular training for new employees
 - c) Ongoing compliance reviews
 - d) Coordinate with partners
22. Continuity of day to day services planning. COOP (Continuity of Operations Plan) drill will be held in 2008.

23. Continuing physical plant upgrades to ensure continuity of service in times of disaster - Ongoing
 - a) Continuity of government - off site access has been asked for by the State
 - b) Wireless communication and a back up generator for the building, when guidelines from the State are received.
 - c) Research putting a generator in for our building to back up our services.
24. Maintain HIPAA requirements - Ongoing, as part of the Mandatory Inservice, done annually.
25. Maintain support for Families First and continue referrals - Ongoing. OFA to join Families First as of February 19, 2007. Point of Entry (POE) to provide guidance and support for long term care populations. Use Families First to do some of the work that is currently done by PH & MH in order to not duplicate or waste current staff time.
26. Explore GIS Applications.
27. Develop and implement a Plan to recruit and retain nursing staff.
28. Sliding Fee Scale plan for all consumers.
29. Identify, initiate and proceed with a project using the CDC's method of social marketing, e.g. SCCUD.
30. Use student internships and practice opportunities.
31. Role with Emergency Management for overall County Plan.
32. Head Start population screenings
33. Satisfaction surveys - maintain commitment to populations we serve and monitor customer satisfaction.

Completed Objectives in 2007

Goal 1: Mental Health Related Goals: Provide effective, efficient community orientated, evidence based mental health services to Schuyler County residents.

1. Support the Families First Program
 - a) Increase the links with SPOA.
2. Increase efforts to link Mental Health clients to insurance options - federal or state programs - to increase benefits available to cover the cost of care.
 - a) Identify the number of individuals inc are without insurance.
3. Maintain Certification of the Mental Health Clinic and satellites in 2008 and beyond.
 - a) Implement a quality improvement program for the Mental Health Clinic
 - b) Review and revise the intake, screening and clinic admission process for clinic services.
4. Review ACT (Assertive Community Treatment) efforts in Schuyler County and the current Elmire Psychiatric Center operated program.
 - a) Statistics reviewed and referrals for 2007 made to Mid Lakes ACT Team.
5. Maintain HIPAA and record confidentiality requirements
 - a) Provided oversight
 - b) Regular training provided for new employees.
6. Increase Mental Health screenings in the community.
 - a) The number of PH work sites increased in 2007.
7. Establish a Mental Health liaison with the Office of the Aging.
 - a) Met with the OFA Director and spent some time at their site to be available as a resource.

Goal II: Community Services Board Related Goal: Provide a community based planning and monitoring process to oversee Community Services in Schuyler County.

1. Maintain Community Services Board and Subcommittee memberships
 - a) Recruitment, training and orientation of members
 - b) By Laws updated
2. Provided required annual reports and budget submissions for OMH, OMRDD and OASAS
3. Participated in OMH Standards and compliance monitoring of agencies that serve Schuyler County residents
 - a) Reviewed the annual reports and inspection reports for agencies that serve Schuyler County residents.
4. Participate in OASAS inspection / certifications and monitoring of programs that serve Schuyler County residents

a) Reviewed the annual reports and inspection reports for agencies that serve Schuyler County residents.

Goal III: Public Health / Home Health Related Goal: Provide effective, efficient community based Public Health, Home Health and Watershed services to Schuyler County residents.

1. Public Health Emergency Planning
 - a) Drills
 - b) Staff Trainings
 - c) Pandemic Flu response planning, training and drill
 - d) New Strategic National Stockpile planning, training and drill
 - e) Education of the community, business and special needs populations, whose needs are substantially different and participate with the County for mass care.
 - f) SCART (Schuyler County Animal Response Team) was dovetailed with isolation and quarantine procedures
 - g) Include ethics for prioritization with Emergency management on who would receive a limited amount of antivirals, etc.
2. Continuing physical plant upgrades to ensure continuity of service in times of disaster
 - a) Continuity of government - off site access has been asked for by the State.
3. Increase efforts at community education and screenings in 2007
 - a) 2 additional Worksites were seen in 2007 with twice as many people seen.
 - b) Screenings at Schuyler County Jail - TwinRix and TB only done.
 - c) Screenings at Headstart - education only done
 - d) Child Care Council day care education
 - e) Community Outreach - 2 Concerts in the Park, Italian / American Festival Parade, Earth Day
 - f) Professional education by taking out current and updated information to physicians done through Provider Breakfast.
4. Continue with Town Board liaison
 - a) Mental Health invited to participate
5. Outcome Quality Initiation (Home Health) - acute care rehospitalization, improvement in mobility to reduce falls and medication reconciliation.
6. OASIS (Outcome & Assessment Information Set) updated.
7. Municipal Public Health Services Plan for 2007 updated
8. Change of practice by taking laptops to patient homes and use to input information.
9. Explore GIS applications through Watershed - initiated, but not completed in 2007.
10. Develop and implement a plan to recruit and retain nursing staff.
11. Continue active relationship with S²AY Rural Health Network.
12. Identify, initiate and proceed with a project using the CDC's method of social marketing, e.g. SCCUD.

13. Use student internships and practice opportunities
14. Role with Emergency management for overall County Plan.
15. Headstart population screenings for lead done.
16. Disease Surveillance for community health risks, infections disease contagion, rabies, etc., including monitoring, intervention and follow up.
17. Satisfaction surveys - maintain commitment to populations we serve and monitor customer satisfaction
18. Watershed to increase the user friendly aspect of their services - webpage established including forms on line.
19. Improve adult immunization rate in home care population.

Goal IV: Consolidated Objectives of Community Services & Public Health: Provide opportunities for the consolidation, coordination and integration of Public Health and Community Services through specific projects and activities aimed at improving overall service to the community.

1. Review vehicle inventory and monitor related costs
 - a) Develop replacement plan - County plan initialized
2. Develop a staff retention plan
 - a) Review of reasons people leave jobs - transportation & housing identified as key areas.
3. Develop contract management process; identify and implement improvements in the existing process
 - a) Research an automated process for managing contracts
4. Patient / Client satisfaction surveys
 - a) Develop survey tools
5. Volunteer / Student involvement
 - a) Implement student site connection with Keuka College