



FY10 ANNUAL PLAN
MID YEAR UPDATE

May 3, 2010

I. Consumer Empowerment

Consumer Empowerment: OCCMHA requires the involvement of consumers in the development, implementation, monitoring and evaluation of the supports and services that they receive.

Objective A: Develop and implement Quality of Life outcomes and measurements. Quality of Life outcomes are in the following areas: housing, education, employment, relationships, community participation, health, transportation, hospitalization, and criminal justice.

Task 1:	By Date	Lead
Develop a Quality of Life Position Statement, which 'defines' the Quality of Life outcomes.	12/31/2009	Kathleen Kovach
Status: Completed		

A Quality of Life Position Statement was completed by 12/31/09. It contains the following Life Domains: Housing, Education / School Transition, Income / Employment / Career, Health, Family / Relationships, Community Membership, Transportation, Community & State Hospitalizations, and Criminal / Juvenile Justice.

Defining and determining whether outcomes are realized is evaluated at a personal level, as part of the Person-Centered or Family-Centered Planning process. The success or effectiveness of OCCMHA's supports and services is, therefore, tied to people achieving their personal outcomes. Measurements and process are being developed to evaluate Quality of Life Outcomes at both the personal and system levels. Outcome measures will be included in the Provider Report Card.

Task 2:	By Date	Lead
Establish measurements for Quality of Life outcomes, including methods for measuring the outcomes.	5/31/2010	Kathleen Kovach
Status: In Process		

Outcome measures and data collection processes are being finalized. The Case Management Assessment / Life Domain Assessment will serve as the basis for consistent measurement. Life Domain areas identified as a priority by consumers will be tracked to the Person-Centered Planning Pre-Plan meeting for discussion, as well as the Support and Services Plan (Person Centered Plan), if formally identified as a goal. The due date of 4/30/10 has been revised to 5/31/10. The task is about 90% completed.

Task 3:	By Date	Lead
Implement Quality of Life measurements when the Central Computer System / is implemented.	7/31/2010	Kathleen Kovach
Status: Choose an item.		

Task 4:	By Date	Lead
Evaluate initial data collection and begin baseline data.	9/30/2010	Kathleen Kovach
Status: Choose an item.		

Objective B: Develop and implement a “Relational Framework” between consumers, OCCMHA, and Core Provider Agencies. The Relational Framework is a set of statements and principles that address how people work with each other to achieve the best results.

Task 1:	By Date	Lead
Determine the method to develop the “Relational Framework”.	4/30/2010	Jack Donaldson
Status: Completed		

OCCMHA's Consumer Empowerment Workgroup is involved in the development of the "Relational Framework." A draft "Relational Framework" has been developed for preliminary review by the Consumer Strategic Planning Workgroup.

Task 2:	By Date	Lead
Develop a draft “Relational Framework”.	7/30/2010	Jack Donaldson
Status: Choose an item.		

Task 3:	By Date	Lead
Review draft “Relational Framework” with partners, such as advocacy groups, providers, OCCMHA.	8/31/2010	Jack Donaldson
Status: Choose an item.		

Task 4:	By Date	Lead
Complete final “Relational Framework”.	9/30/2010	Jack Donaldson
Status: Choose an item.		

II. Focus on Children

Children and Families: OCCMHA continues to expand Family-Centered supports and services to children and families through choice and collaboration with public and private agencies.

Objective A: Issue a Request for Proposals (RFP) to rebid and expand the Core Provider Agency network for children with Serious Emotional Disturbance, so that families have a choice of agencies for services and supports.

Task 1:	By Date	Lead
Issue a RFP.	10/1/2009	Jennifer Muller
Status: Completed		

The Request for Proposals was issued as planned on October 1, 2009. Six (6) vendors responded. The proposals were reviewed and four (4) agencies were subsequently interviewed. It was recommended to OCCMHA's Board that they approve contract negotiations with Easter Seals - Michigan and Oakland Family Services. The Board approved the recommendation on March 16th.

Task 2:	By Date	Lead
Contract with two agencies.	7/1/2010	Jennifer Muller
Status: In Process		

Contract negotiations with OFS began on April 23rd. Negotiations with Easter Seals are being scheduled. It is expected that the contracts will be presented to the OCCMHA Board for approval in June. The due date for contracting was revised from 4/1/10 to 7/1/10. The task is about 50% completed.

Task 3:	By Date	Lead
Implement and monitor transition of consumers.	9/1/2010	Jennifer Muller
Status: In Process		

Informational materials were mailed to all families currently receiving services from Easter Seals, notifying them of a choice of Core Provider Agencies and an opportunity to learn more about Easter Seals - Michigan and Oakland Family Services at scheduled informational meetings. Those meetings were held on April 14th and 15th. Youth and families were asked to respond with a choice of Provider by May 1st. Customer Services will begin contacting those who have not responded, to ensure that all are aware of the choice options and have made their choices known. Following Board contract approval, transition plans will begin for those youth and families who have chosen to transfer from Easter Seals. The 6/1/10 task due date was revised to 8/1/10. The task is 0% completed.

Objective B: Further develop a community-based System of Care by participating in the Michigan Department of Community Health's waiver for children with Serious Emotional Disturbance.

Task 1:	By Date	Lead
Complete initial review of Department of Human Services' "backlog cohort" of children / youth and continue on-going review, as needed, when new children are identified.	10/30/2009	Amy Heincelman
Status: Completed		

The review of Department of Human Services (DHS) children / youth who had been part of the DHS "backlog" has been completed as planned.

Task 2:	By Date	Lead
Identify children/youth with priority mental health needs that have Oakland county placement options.	10/30/2009	Amy Heincelman
Status: Completed		
<i>An initial identification of children / youth has been completed. This task is ongoing and SED-Waiver DHS eligibility recently expanded to include all open foster care cases.</i>		

Task 3:	By Date	Lead
Process priority children / youth through the Mental Health Assessment process - on-going, as needed.	10/30/2009	Amy Heincelman
Status: Completed		
<i>The process for assessments, including making changes and updates to the tracking spreadsheet, was developed and recently fine tuned. Each month, the DHS and CMH liaisons meet to discuss new children, as well as review current children and where they are in the process. The MDCH monitoring form is completed monthly.</i>		

Task 4:	By Date	Lead
Identify and enroll children / youth that meet SED-W Pilot criteria - on-going, as needed.	10/30/2009	Amy Heincelman
Status: In Process		
<i>Three children supported by OCCMHA have been enrolled / found eligible through MDCH as of 3/30/10. Three more have been submitted in April for eligibility determination through MDCH. This is an on-going task.</i>		

Task 5:	By Date	Lead
Continue and refine process SED review and support process, as needed.	9/30/2010	Amy Heincelman
Status: In Process		
<i>A Workgroup has been developed to review and refine the SED process. The Workgoup includes: Kim DoBiesz- DHS Oakland; Susan Hull- DHS Oakland; Kristin Ryeson-Easter Seals; Susan Styf-Easter Seals; Holly Holloway-Wraparound; Paul Ulewisz-Wraparound; Jennifer Muller-OCCMHA; and Amy Heincelman-OCCMHA. Refinements hve been made as experience in the SED Waiver collaborative is gained. This is an on-going task.</i>		

III. Strengthening Foundations – Programs

Case Management / Supports Coordination: OCCMHA continues to ensure that Case Managers / Supports Coordinators have the knowledge and skills to support people to achieve their life outcomes.

Objective A: Develop a Project Plan and begin implementing goals and objectives identified from in-depth, Case Management / Supports Coordination discussions with people served, families, advocates, providers, and other stakeholders.

Task 1:	By Date	Lead
Complete in-depth Environmental Scan to determine priority directions for the Project Plan.	1/31/2010	Sue Pelkey
Status: Completed		

An Environmental Scan was completed to determine the Case Management / Supports Coordination Project Plan priorities.

Task 2:	By Date	Lead
Present Environmental Scan findings to various groups, including the Consumer Advisory Committee, Operations Management Team, Board Committee, etc.	3/31/2010	Sue Pelkey
Status: Completed		

The Environmental Scan results were presented to the Policy Committee of the Board on 2/8/10 and to the Consumer Advisory Council on 2/17/10.

Task 3:	By Date	Lead
Develop and implement Initial Project Plan	5/31/2010	Sue Pelkey
Status: In Process		

Seven Goals have been identified:

- 1) *To establish and Oakland County philosophy for the provision of Case Management / Supports Coordination services.*
- 2) *To have a competent Case Management / Support Coordination workforce.*
- 3) *To have a supervision strategy that will support effective Case Management / Support Coordination.*
- 4) *To maintain a manageable effective Case Management / Support Coordination caseload.*
- 5) *To increase the competencies of Peer Support Specialist to assist with Case Management / Support Coordination functions.*
- 6) *Develop strategies to streamline Case Management / Support Coordination paperwork duties.*
- 7) *To identify and implement a uniform definition of productivity.*

The Project Plan is about 65% completed. The due date of 3/31/10 has been revised to 5/31/10.

Task 4:	By Date	Lead
Finalize and implement Project Plan, based on evaluation of Initial Project Plan.	9/30/2010	Sue Pelkey
Status: Choose an item.		

Transportation: OCCMHA has a transportation work plan to expand transportation resources.

Objective A: Continue involvement in the West Oakland Transportation Advisory Committee (WOTA), a community collaborative of cities and townships along M59 that is addressing the unmet transportation needs of seniors and people with disabilities. The purpose is to combine resources in order to develop comprehensive, transportation services for residents along M59 and the western portion of Oakland County.

Task 1:	By Date	Lead
Sign Intergovernmental Agreement by the members of the collaboration to establish a "door to door" transportation service in the region.	11/30/2009	Mike Daley
Status: Deferred		

Due to recent budget and revenue reductions experienced in all 5 communities, the Intergovernmental Agreement was not signed in November/December 2009. At that time, the Advisory Committee voted to disband the Committee. No further meetings have been scheduled at this time.

Objective B: Continue planning to support a small business that recruits volunteers to provide transportation for individuals to and from employment and for social and recreational activities.

Task 1:	By Date	Lead
Develop a Business Plan, along with a 'Gantt chart', which lists / outlines 'deliverables'.	6/30/2010	Mike Daley
Status: In Process		

The Transportation Work Group continues to design a program (small business or micro-enterprise) that will recruit, train and retain a group of volunteer drivers to provide transportation to older adults, people with disabilities and people with a low income. The Work Group is in the process of finalizing a Business Plan which incorporates information and data gathered by surveying similar programs in Michigan and around the nation. The group expects to begin providing the transportation service by October. The 4/30/10 due date has been extended to 6/30/10. The task is about 75% completed.

Task 2:	By Date	Lead
Implement the Business Plan and have the first 'rider' linked with a 'volunteer driver'.	9/30/2010	Mike Daley
Status: Choose an item.		

Objective C: Legislation to provide immunity from liability for individuals providing volunteer services on behalf of non-profit organizations.

Task 1:	By Date	Lead
Have legislation introduced in the Michigan House of Representatives.	7/1/2010	Mike Daley
Status: In Process		

Legislation was not introduced in the House of Representatives before the Legislature left for a two week break beginning on April 2nd. No update on a proposed introduction date is available at this time. If Legislation is not introduced by midsummer, it is unlikely it will be introduced until Legislators begin the new term in January 2011. The target due date has been revised from 2/28/10 to 7/1/10.

Coordination of Mental Health and Physical Health Care: OCCMHA continues to improve health and wellness outcomes for people, including those who do not have medical coverage or a primary care physician.

Objective A: Co-locate and integrate services with the Federally Qualified Health Center (FQHC).

Task 1:	By Date	Lead
Integrate a fully operational FQHC Look Alike - Health Centers Detroit - satellite clinic services into the Easter Seals Southfield campus site.	7/31/2010	Mary Griffiths
Status: In Process		

The Easter Seals campus has been renovated to provide a medical clinic designed to meet federal requirements. The legal documents are expected to be completed by June 1st. Easter Seals and Health Centers Detroit, Inc. are in the process of interviewing physicians and medical assistants.

Task 2:	By Date	Lead
Continue development of a FQHC clinic for integration into the CNS Summit Place campus.	9/30/2010	Mary Griffiths
Status: In Process		

OCCMHA continues to work with its community partners to achieve integration of primary healthcare services into the CNS service site.

Coordination of Mental Health and Substance Use: OCCMHA is committed to integrating substance use treatment and support within the Core Provider Agencies rather than referring people elsewhere.

Objective A: Collaboratively develop and implement a comprehensive community Plan to address the co-occurring issues of people served by OCCMHA and the Oakland County Health Division, Office of Substance Abuse Services (OSAS).

Task 1:	By Date	Lead
Develop a transition / coordination of care protocol between substance abuse and mental health providers.	6/30/2010	Dawn Jones
Status: In Process		

A meeting with OSAS, SA Residential Providers and Mental Health providers is scheduled for May 4, 2010 to work on the transition / coordination of care protocol between Substance Use residential providers and outpatient mental health providers. The 4/30/10 due date has been revised to 6/30/10. The task is about 40% completed.

Task 2:	By Date	Lead
Complete approval and signing of the statewide Consensus Document by OCCMHA / OSAS leadership and change agents.	4/30/2010	Dawn Jones
Status: Completed		

The Consensus Document was completed and forwarded to MDCH on April 8, 2010. It sets forth the principles of coordinated care, as well as the roles and responsibilities of the parties involved.

Task 3:	By Date	Lead
Develop a co-occurring scope of practice, with the identification of fundamental core competencies for all mental health staff. Status: Choose an item.	7/31/2010	Dawn Jones

Task 4:	By Date	Lead
Develop of co-occurring standards and benchmarks for system improvement. Status: Choose an item.	9/30/2010	Dawn Jones

Criminal and Juvenile Justice: OCCMHA partners with the Oakland County jail, police departments, courts, and Core Provider Agencies to meet the mental health needs of people involved with the criminal and juvenile justice systems.

Objective A: Continue the development of Mental Health Courts, which offer opportunities for people to receive mental health supports, services and treatment rather than going to jail.

Task 1:	By Date	Lead
Develop a pilot Mental Health Liaison project with 51 st District Court and in conjunction with the Bureau of Justice Assistance – Justice and Mental Health Collaboration Project Status: Completed	4/1/2010	Mary Griffiths

An interim, part-time Mental Health Liaison, funded by CMH is working at the 51st District Court. The Mental Health Court and Substance Use Initiative work group has been working on expanding this function and structuring it as a pilot for future roll-out county-wide. It has received a planning grant from the Bureau of Justice Assistance for this fiscal year and is in the process of completing an environmental scan and providing training opportunities for law-enforcement.

The group is working on another Bureau of Justice grant application, which will include additional law-enforcement training, treatment for those who do not meet the CMH severity criteria and additional funding for the Mental Health Liaison position.

Task 2:	By Date	Lead
Evaluate project success, with the purpose of expanding the Liaison role to the rest of the County in FY11. Status: Choose an item.	9/30/2010	Mary Griffiths

III. Strengthening Foundations – Administration & Operations

Central Computer System: OCCMHA continues its Central Computer System development, and expects that the following priority projects associated with the centralization be completed within FY10.

Objective A: Implement the Electronic Medical Record / Individual Service and Support Plan.

Task 1:	By Date	Lead
Complete project design and implementation of Electronic Medical Record.	11/30/2009	Bill Riley
Status: Completed		

The Electronic Medical Healthcare Record was completed in mid-November. The Central System is currently scheduled for implementation at the end of this fiscal year - 9/30/10.

Task 2:	By Date	Lead
Complete project design and implementation of Individual Support and Service Plan.	7/31/2010	Bill Riley
Status: Choose an item.		

Objective B: Improve electronic screening form for Access and Eligibility for OCCMHA services.

Task 1:	By Date	Lead
Review current processes and design and implement changes.	7/31/2010	Bill Riley
Status: Choose an item.		

Objective C: Incorporate Utilization Management processes for persons with developmental disabilities into the Centralized System.

Task 1:	By Date	Lead
Decide whether the Supports Intensity Scale (SIS) is the Utilization Management tool used by OCCMHA for individuals with developmental disabilities.	3/31/2010	Janice Short
Status: Completed		

On April 20, 1010, the Executive Leadership Team (ELT) approved the development of a plan to use the Supports Intensity Scale. It will be used initially as a tool to support Person-Centered Planning. In the future, OCCMHA will consider adopting the SIS as a basis for developing and implementing Authorization Decision Guidelines. These Guidelines are part of Utilization Management, which strives for the consistent and equitable use of services and supports. The initial due date for this task was extended from 3/31/10 to 4/30/10.

Task 2:	By Date	Lead
Develop a SIS Implementation Plan, if it is the agreed upon Utilization Management tool.	9/30/2010	Janice Short
Status: Choose an item.		

Resource and Project Management: OCCMHA recognizes that there is a need to better organize project planning along a more disciplined approach to resource management. This impacts both OCCMHA and its Core Provider Agencies in their abilities to effectively manage and complete projects.

Objective A: Review all projects, committees, and meetings to determine whether they will be continued, ended, or deferred.

Task 1:	By Date	Lead
Evaluate existing projects and develop an updated list of those that have been continued, ended, or deferred.	10/31/2009	Bill Riley
Status: Completed		

The previous Project List was updated to determine which projects would be continued, ended, or deferred.

Task 2:	By Date	Lead
Evaluate committees and workgroups and develop an updated list of those that have been continued, ended, or deferred.	6/30/2010	Bill Riley
Status: In Process		

The Executive Leadership Team (ELT) reviewed and approved the process for requesting projects and resources for projects. The discussion of committee structures is currently in process. The 3/31/10 due date has been revised to 6/30/10 to accommodate the organizational restructure. The task is about 40% completed.

OCCMHA Organizational Structure: OCCMHA is evaluating its organizational structure to determine whether its committees, departments, and management are aligned to efficiently and effectively support the Strategic Priorities.

Objective B: Implement any organizational changes that are needed to effectively implement the Strategic Plan.

Task 1:	By Date	Lead
Restructure and align OCCMHA in support of population groups, centralized audits, and increased consumer empowerment.	3/31/2010	Jeff Brown
Status: Completed		

OCCMHA's organizational restructuring was 'rolled out' on 2/1/10. Service Network Teams have been established for each population group – Adults with Mental Illness, Children and Adults with Developmental Disabilities, and Children with Serious Emotional Disturbance and Families. A Service Network Team was also identified to focus on Access and Utilization.

Within the Quality Management Team, an Audit Team has been identified, with a sole purpose of organizing and completing the various external and internal audits. Additionally, the Audit Team will work with the Core Provider Agencies (CPA) to streamline audits for sub-contractors who often have similar and multiple audits by the different CPAs with whom they contract.

Consumer empowerment is coordinated by staff from the newly developed Community Planning and

Development Team. Enhancing consumer run organizations and increasing peer supports for all populations are priority goals, along with ensuring that the 'voice' of people served is heard.

A Cost-Utilization Work Group has been developed to establish to increase analytical and organizational reporting within OCCMHA. It recognizes the work of both the Cost Integrity Work Group and the Utilization Management Committee by combining their clinical and operational experience. Managers of the Service Network Teams are integral members of the Cost-Utilization Work Group, and will lead the implementation of OCCMHA strategic directions that arise from the Work Group's analysis and recommendations.

IV. Managing in the Face of Fiscal Adversity

Budget Workgroup Outcomes: Budget workgroups, made up of consumers, advocates, Core Provider Agency staff, and OCCMHA staff, were convened to make recommendations for cost reductions.

Objective A: Decide on and implement the cost reduction recommendations, and monitor the impact they have on reducing the deficit created by the revenue losses. Budget amendments and other cost reduction strategies will be developed and implemented by OCCMH during FY10, as needed.

Task 1:	By Date	Lead
Complete cost reduction discussions and compile workgroup recommendations.	10/31/2009	Rick Grove
Status: Completed		

A Cost Reduction Workgroup was established, discussions and recommendations were made by the task due date. Phase 1 & 2 of the reduction plan are being implemented. The Workgroup is working on Phase 3 (Recovery Supports Model). Phase 4 will be additional cost reduction discussion and efforts to bring General Fund revenues and expenses in line for FY 10 after evaluating the effect of Phases 1 & 2.

Task 2:	By Date	Lead
Determine the amount of funding (Medicaid, General Fund, ABW, and State Facilities) available to OCCMHA, so that the initial budget reduction target can be established.	5/31/2010	Rick Grove
Status: In Process		

Budget amendment #2 was presented to OCCMHA's Board in April. It included all of the adjusted funding, except for ABW, which will not be known until May 2010. Because the funding amounts weren't known prior to the 10/31/ task due date, the revised due of 5/31/10 has been established. The task is about 98% completed.

Task 3:	By Date	Lead
Monitor changes and amendments to the revenue sources as they occur.	9/30/2010	Rick Grove
Status: Choose an item.		

Task 4:	By Date	Lead
Develop an initial Cost Reduction Plan to reduce General Fund costs.	12/31/2009	Rick Grove
Status: Completed		

A Cost Reduction Workgroup was established, with discussions and recommendations regarding General Funds made by the task due date. Phase 1 & 2 of the reduction plan are being implemented. The Workgroup is working on Phase 3 (Recovery Supports Model). Phase 4 will be an additional cost reduction discussion including efforts to bring General Fund revenues and expenses in line for FY 10, after evaluating the effect of Phases 1 & 2.

Task 5:	By Date	Lead
Complete initial Cost Reduction Plan.	5/31/2010	Rick Grove
Status: Completed		

The initial Cost Reduction Plan has been developed. Further discussion regarding Phase 4 will occur following evaluation of the effects of Phases 1 & 2. The task is about 90% completed.

Task 6:	By Date	Lead
Develop the second part of the Cost Reduction Plan, related to long term system changes, to address decreased General Funds and an expected reduction in FY11 Medicaid funds.	6/30/2010	Rick Grove
Status: In Process		

The initial Cost Reduction Plan has been developed. Further discussion regarding Phase 4 and long term system changes to address decreased General Funds and Medicaid Funds in FY11 will occur following evaluation of the effects of Phases 1 & 2. The 4/30/10 task due date has been extended to 6/30/10. The task is about 50% completed.

Task 7:	By Date	Lead
Monitor the progress of the Cost Reductions Plans and reevaluate OCCMHA positions, quarterly and more frequently, as information becomes available or is required.	9/30/2010	Rick Grove
Status: Choose an item.		

Task 8:	By Date	Lead
Amend OCCMHA budget, as necessary, to reflect significant changes in revenues or expenses.	9/30/2010	Rick Grove
Status: Choose an item.		

Cost and Utilization Workgroup: OCCMHA’s Cost Integrity Group (CIG) currently reviews service costs at a procedure code level in order to establish uniform coding and cost allocations. The Utilization Management Committee (UMC) reviews service protocols and authorization decisions to ensure a consistency in service practice across the Core Provider Agency network.

Objective A: Combine the expertise of the Cost Integrity Group and the Utilization Management Committee, so that the most efficient and cost beneficial practices are established to meet the needs of people served by OCCMHA.

Task 1:	By Date	Lead
Further develop tools and processes necessary to support the development, implementation and monitoring of the FY10 Cost Reduction Plan.	4/30/2010	Ron Hocking
Status: Completed		

OCCMHA staff has used Targeted Analysis of General Fund costs and utilization via cube technology to isolate areas of potential savings or cost shift. Level of care analysis and scenarios with cost implications have been completed in support of the Recovery Model and Brief Intense service arrays. A slimmed down version of Year End process developed to provide monthly results and projections of the Fiscal Year End results for major fund sources, such as Medicaid and General Fund. Reports have been established, using cubes to monitor and analyze results of implemented targeted changes over time. This was designed through the collaboration of various departments / teams, including Information Systems, Service Network Teams, Improving Practice Leadership Team and Budget & Finance Team.

Task 2:	By Date	Lead
Provide the projections, analyses of operating results and the decision criteria needed to effectively manage by fund source on a monthly and quarterly basis.	4/30/2010	Ron Hocking
Status: Completed		

A condensed version of the Year End process has been developed to provide monthly results and projections of the Fiscal Year End results for major fund sources such as Medicaid and General Fund. It incorporates financial system and encounter system based costs.