**Scioto Paint Valley Mental Health Center Strategic Plan 2018-2019**

**Introduction**

The Scioto Paint Valley Mental Health Center (SPVMHC) is a private nonprofit community mental health center that services clients from a five-county catchment area in Ohio: Ross, Pike, Pickaway, Fayette, and Highland counties. The Scioto Paint Valley currently consists of 5 outpatient counseling clinics, two residential facilities, a transportation company, an associated Primary Care in the Ross County clinic named the Martha Cottrill Clinic, and is co-located with a pharmacy owned by the Genoa Company in the Martha Cottrill Clinic.

The initial center was named The Paint Valley Guidance Center and opened in downtown Chillicothe in 1965. The SPVMHC began its greatest expansion in 1978 due to the de-institutionalization movement generated by a federal government mandate to move people from inpatient treatment facilities back into communities. A Crisis Center to cover client and community calls was initiated in 1975 and has been continuously offering Crisis Services 24/7 for people calling in or walking in since then. After moving to two locations from the late 1960s until 1982 (TB Sanitarium and the 425 Chestnut Street former hospital location), the SPVMHC management planned the building of 5 outpatient clinics, first starting with the Martha Cottrill Clinic. There is a leadership team known as the “Central Administration” that has offices located on the upper floor of the Martha Cottrill Clinic.

**Mission Statement**

***The mission of the Center is to provide leadership and services in a community-wide effort to foster positive, optimal mental health and to assist the community to find ways to prevent, reduce, and minimize the residual effects of mental health problems.***

The Mission of the SPVMHC is to provide best practice mental health counseling and psychiatric services to the community to meet its needs for mental health services. The needs have changed to include residential and supportive housing needs since its inception that focused on solely the outpatient counseling. During the previous fiscal year, to augment that mission the leadership team began planning a new residential male bed facility targeting client care for men who are diagnosed with alcohol and other drug recovery issues. That facility is due to open by March 2019. Further, because the SPVMHC has undergone challenges due to multiple revenue stream and market changes in the past two years, the organization and its management team has been exploring various means to stabilize its revenue stream, reinstitute ways to promote a positive image, develop new counseling opportunities for treatments, strengthen its existing programs, collect outcome data to inform treatment growth, and offer best practices wrap around mental health care services.

**Executive Summary**

 The SPVMHC leadership and staff is undergoing changes during the 2018-2019 year. The former Executive Director left the agency after 9 years in March 2018. An interim director was named and then a new Executive Director was hired in late November 2018. Due to retirements, resignations, and promotions, four of the seven Clinic Directors changed at SPVMHC during 2016-2018. The SPVMHC is in financial distress due to the changes in revenue streams, changes in legislation and insurers covering the Medicaid clientele (60% of the revenue stream), the challenges that occurred due to a cumbersome computer software system that did not meet the needs of the clinicians nor the AR billing processes, and the loss of clients after losses of treatment personnel such as in person psychiatrists and clinicians who held independent licenses. Due to reimbursement rules, a transportation company that brought clients in for treatment continued to lose money. Due to a grant application issue, a projected project was stalled due to lack of funding (the McArthur School acquisition). The strengths that continued throughout the fist six months of the fiscal year were: the Board of Trustees chose to seek a new Executive Director and approve expenditures to maintain services and the purchases needed to complete the new facility. Some long-term employees also supported the newly hired staff.

**Goals**

The SPVMHC has been challenged by moving target funding and revenue streams, outside competition, and an unprecedented number of employee turnover in the past year. The agency management staff is focusing on 5 new major goals for the 2018-2019 fiscal year: 1. sustaining growth by developing additional wrap around services to meet the treatment needs of the clients and the community, 2. survey staff to ascertain growth opportunities for training and sustainability, 3. provide best practices in all aspects of the system (connect Primary Care, Integrated Care, Pharmacy, and Outpatient and Residential facilities), 4. work collaboratively with social service agencies, stakeholders, and gatekeepers while instituting a new public relations and marketing plan, and 5. explore and facilitate existing funding streams while upgrading the documentation systems which in turn can assist in the stabilization of the revenue streams.

**Tasks**

 The SPVMHC plans to support the goals with the following activities:

To facilitate the sustaining growth and facilitate the client and community treatment needs:

* Hire highly trained, licensed, quality staff to support the outpatient counseling services with a focus on hiring of social workers, counselors, and psychiatrists.
* Hire a new Executive Director.
* Work to hire staff, train, and facilitate the opening of a new male bed residential facility.

To institute employee satisfaction:

* Complete a pre and posttest of staff to ascertain work environment, training, and other needs and ideas for an improved work environment.
* Advocate for training opportunities to provide education to bolster best practices.
* Disseminate training information via an employee newsletter and leadership team personal contacts.

To provide best practices in all aspects of the system:

* Educate the community about all aspects of the counseling and support services by instituting a facebook page, engaging social media, and public service announcements.
* Oversee the scheduling of outside training sessions from the grant funding obtained by the Paint Valley ADAMH Board.
* Continue leadership meetings with all facets of the treatment services to ascertain integration needs (ie. work with the pharmacy to promote the integration for the residential facilities).
* Support existing staff with additional license and study guide and Relias trainings as available grant funding provided by the PVADAMH Board and other funding sources become available.

To work collaboratively with social service agencies, stakeholders, and gatekeepers while instituting a new public relations and marketing plan.

* Discuss ways the Clinic Directors and key staff can meet with the PV ADAMH Board, the social service councils, the Child and Family First Councils, and other related mental health collaborative meetings to network and provide best practice information and referral about our agency services.

To explore and facilitate existing funding streams while upgrading the documentation systems which in turn can assist in the stabilization of the revenue streams.

* Educate the Board of Trustees about the failing software program and ask for the initiation of a new software system to streamline billing and documentation.
* Discuss the funding needs with the PV ADAMH Board staff and their Board of Trustees.