



St. Clair County Community Mental Health

**Three Year Strategic Plan
(December 12, 2023)**

ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH



Background

St. Clair County Community Mental Health (SCCCMH), under the direction of the St. Clair County Community Mental Health Board of Directors, determined the need to update our strategic plan to guide the organization's activities for the next three years. The agency's leadership team coordinated the planning process and hired a consultant to facilitate meetings and assist with the development of the plan. The agency's staff along with the SCCCMMH Advisory Council, participated in the planning process through their participation in the initial strategic planning survey as well as the prioritization survey. Community members were also surveyed as an element of the process.

SCCCMH internal participants included representation from the agency's leadership team.

The Strategic Planning Process

In preparation for the strategic planning process, SCCCMH conducted two surveys. Community members were offered the opportunity to participate in an electronic survey that was designed to obtain feedback on the level of community awareness of SCCCMH services. The twenty-six survey respondents also provided information related to how they received community services, access to youth mental health, and accessed substance use disorder services.

A survey was also sent to the SCCCMH staff and board members. This survey garnered 131 responses. Respondents provided input into the organization's mission, vision, values, and trends impacting mental health services. They also provided feedback on the organization's internal strengths and weaknesses as well as external opportunities and challenges.

During the initial planning session, the team received an overview of the strategic planning process and reviewed the proposed plan development timeline. Department documents reviewed in preparation for the initial meeting included the current strategic plan, the past plan's objectives, quality improvement initiatives, and the St. Clair County Community Health Improvement Plan.

During the first meeting, the team reviewed the survey responses received. After much discussion, the team developed a proposed new mission statement for the agency. The team then created a proposed new vision statement. After the mission and vision statements were identified, the team turned its attention to the agency's values. Though SCCCMH had a strong set of established values, the team opted to continue to work on potential revisions between the first and second meetings.

By the end of the first meeting, the team developed a draft of the agency's Strengths, Weaknesses, Opportunities, and Challenges (SWOC) and identified a set of strategic directions to be further discussed and refined at the team's second meeting. The strategic directions included:

- Education
- Organizational Efficiency
- Workforce
- Program Excellence

On August 21, 2023, the team met and reviewed the information and draft materials developed at the first meeting. The session generated refinements to the strategic directions and created objectives and strategies for each. The team also identified the person or group responsible for each of the identified strategies. The updated version of the vision statement was, and the values were confirmed.

The consultant was then tasked with refining the objectives and strategies that would be incorporated into the draft plan for team member review and comment. To obtain feedback from internal stakeholders, the consultant was also tasked with creating a second survey for staff and board members based on the refined mission statement, vision statement, values, and strategic directions.

A SurveyMonkey survey was disseminated to staff and board members where they were asked to prioritize the list of the strategic directions and corresponding objectives. The consultant and leadership team used the results of the survey to set timelines and deadlines for the objectives and determine which areas to focus on in the first year of the plan. The survey also asked staff and board members to indicate their level of support for the proposed mission statement, vision statement, and agency values. A total of 136 responses were received from this survey.

In communication with the Chief Executive Officer (CEO), the consultant provided the survey results and draft plan. The leadership team members developed time-framed targets for the objectives and strategies included in the plan and fine-tuned the narrative. The final draft was sent to SCCCMH on October 30, 2023.

Throughout the entire strategic planning process, the SCCCMH Board of Directors' meetings included discussions related to the development of the new plan with the notes and provided input to the CEO for inclusion into the plan.

Staff Involvement

The SCCCMHA workforce was provided the opportunity to participate in a strategic planning survey that was conducted prior to the first planning session. Staff were asked to provide feedback regarding the internal strengths and weaknesses of the agency as well as the external opportunities and challenges. The information gathered was used to develop the agency's vision statement and was instrumental in the SWOC analysis. (See Table 1) From this data, the leadership team identified the strategic directions and objectives for the agency. The workforce was surveyed a second time to prioritize the proposed goals and strategies for the agency. This survey resulted in the prioritization of the agency's goals with time-framed targets for each objective. The first staff and community stakeholder surveys garnered a total of 157 responses; the second survey, which was sent to the SCCCMH workforce, received 130 responses. Both the survey instruments and results are available upon request.

Table 1: SWOC WORKSHEET

St. Clair County Community Mental Health

INTERNAL	<p>STRENGTHS</p> <ul style="list-style-type: none"> • Commitment to serve • Opportunities for education • Upper-level management support • Striving for continuous improvement • Adequate compensation • Sound financial resources • Positive and supportive work environment • Compassionate staff – to those served and to each other • Training for staff in Evidence Based Practices (28 EBP or promising practices) • Commitment to highly trained workforce • Technology – strong attention to technology • Pace of Agency Growth 	<p>WEAKNESSES</p> <ul style="list-style-type: none"> • Communication between units • Limited office space • High caseloads • Staff burn out • We are expected to operate like a PCP, but cannot charge no-show fees or close people out for lack of follow through • Psych Meds. <ul style="list-style-type: none"> • Minimal consequence for missed med. Review. • Many Primary Care Physicians will not prescribe psychotropic meds • Communication and / or hand off to Primary Care Physician • Communication with the court and local police • Pace of agency growth
	<p>EXTERNAL</p>	<p>OPPORTUNITIES</p> <ul style="list-style-type: none"> • Social media • More involvement with community by reaching out to all areas • Positive collaboration with community agencies • Collaboration with local physicians to provide education and referrals • Community education and advocacy • Lead the change to create opportunities to support youth mental health • Additional satellite buildings

Stakeholder Engagement

The final document of the strategic plan was shared with the SCCCMH Board of Directors on December 12, 2023, for approval.

After Board approval, the plan will be distributed via e-mail to the agency's community partners and stakeholders within the county.

Alignment with SCCCMH Organizational Plans

St. Clair County Community Health Improvement Plan

In 2022, SCCCMH participated in the St. Clair County health improvement planning process. The plan was finalized and implemented in the spring of 2023. SCCCMH included action items designated to the organization from this plan, into our strategic plan and in coordination with community partners. SCCCMH will work to improve the health outcome of all citizens in the county.

It is anticipated the strategic plan will be updated on an ongoing basis to include those areas (services, policy development, interventions, etc.) where SCCCMH will serve in a leadership capacity during the health improvement plan implementation.

Quality Improvement and Professional Development Plans

SCCCMH has identified and implemented Quality Improvement (QI) projects over the course of the past few years to assist in the development of a culture of quality. The strategic plan includes a focus on organizational efficiency which will support quality outcomes.






The strategic planning process has identified the need to prioritize our workforce. One of the strategic directions is dedicated to the development and implementation of the SCCCMH professional development plan, succession plan, recruitment and retention plan, and internal communication plan.



Strategic Plan Outline

The plan outlined on the following pages is displayed in a table format to improve readability. The tables indicate each Strategic Direction highlighted in blue, Objectives highlighted in gray, and Strategies highlighted in yellow. Each priority area includes the identified champion(s), and each strategy includes the metric/measure to be used to monitor progress.

Annual action plans will be developed and utilized to stay on track to be able to analyze the work accomplished each year as well as to identify if and when adjustments to timelines and activities need to be modified.

	<p>Port Huron</p> <p>3111 Electric Ave. Port Huron, MI 48060</p> <p>(810) 985-8900</p>		<p>Port Huron Child & Family Services</p> <p>2415 24th St. Port Huron, MI 48060</p> <p>(810) 488-8840</p>
	<p>Marine City</p> <p>6221 King Rd. Marine City, MI 48039</p> <p>(810) 765-5010</p>		<p>Marine City</p> <p>135 Broadway St. Marine City, MI 48039</p> <p>(810) 765-5010</p>
	<p>Capac</p> <p>14675 Downey Road Capac, MI 48014</p> <p>(810) 395-4343</p>		

Strategic Priority Area 1: Organizational Efficiency			
Goal: Improve agency workflow processes to maximize our performance			
Champion(s): Primary: Supervisors Secondary: Leadership			
Objective 1: SCCCMH will streamline processes to save time and resources			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Identify a list of workflows to prioritize (minimum of 3)	List created by department supervisors, reviewed by Quality Department and Clinical Leadership	Program Director, Support Services Director, Assistant Division Directors	2/5/2024
B. Identify key staff that complete work timely / accurately. Key staff identify action items.	Key staff identified by supervisors	Program Director, Assistant Division Directors (x3)	2/5/2024
C. Hire a consultant to review workflows and recommend process improvements	Consultant to be hired; process improvement recommendations received and reviewed	Leadership	6/3/2024
D. Educate staff on new workflows	Staff education completed	Training Supervisor / Training Department	9/30/2024
Objective 2: SCCCMH will implement an efficient Access workflow process			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Expedite processes and reduce barriers while still following contract requirements	Barriers to expediency have been reduced	Program Director, Support Services Director, Assistant Division Director (J.M.)	9/30/2024
B. Automate intake process with new software	Intake process automated	Program Director, IT Director, Support Services Director	9/30/2024
C. Reduce paperwork and forms with electronic health record	Reduction in paperwork and forms	Program Director, Support Services Director, Assistant Division Directors (x3)	Ongoing

D. Work more closely with R10 Access to streamline the intake process including looking at redundancy between MIX//OASIS	Redundancy issues resolved - new process created for streamlined/delegation Access	CEO, Program Director, Support Services Director, Assistant Divisions Directors (x3)	Ongoing
Objective 3: SCCCMH will establish department specific goals that support the agency goals			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Every supervisor will review strategic plan with their team	Every supervisor has reviewed plan with their team by the established deadline	All Department Supervisors	3/30/2024
B. Every department will develop program goals consistent with the agency strategic plan	Every department has developed program goals by the established deadline	All Department Supervisors	6/30/2024
C. Each staff person will have at least one goal on their personal development plan that supports the agency strategic plan	Every employee's personal development plan has at least one goal that supports the agency strategic plan by the established deadline	All Department Supervisors	2/28/2024
D. Ensure the goals are not duplicative of Performance Indicator or done without purpose that improves the experience for persons served or CMH employees. Outcomes of goals are measurable and determined if effective.	Goals are reviewed for duplicity by the established deadline	Leadership Team	7/31/2024

Objective 4: SCCCMH will continue to review more efficient and effective ways to use technology by December 2024			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Check with current software vendors to see if updated or better versions of products are available	Vendors contacted; new versions considered	Leadership Team	Initiate: 6/30/2024
B. Review trade information and trends to find better solutions and improved processes	Trade information reviewed and considered for implementation	Leadership Team/IT Team	6/30/2024 for current year
C. Eleos pilot process	Testing and training for new EMR tool	Program Director / Support Services Director / IT Team	Stage 1: 2/28/2024 Stage 2: 6/30/2024
D. Assess capabilities of ADP to streamline HR functions	ADP capabilities assessed; recommendations developed	HR Director / HR Team	HR Assess: 2/28/2024 Benefits: 4/30/2024
E. Assess new financial solutions to manage GL and purchasing process	Financial solutions assessed; recommendations developed	CFO / Finance Team	Finance Assess: FY2024 Implement: 10/1/2024
F. Assess if deployment of agency cell phones will reduce need for desk phones and improve communication with individuals served	Assessment completed; recommendations developed	IT Director / IT Team	Stage 1: 75 Staff: 1/1/2024 Stage 2: Full Rollout: 6/1/2024
G. Implement upgrades to electronic medical records to create improvements in workflow, clinical documentation, finance, etc. using	Upgrades implemented	Program Director / Support Services Director	9/30/2024

best practices and improvements in technology			
--	--	--	--

Strategic Priority Area 2: Education

Goal: Provide educational opportunities for staff and the community

Champion(s):

Primary: CRT

Secondary: Leadership

Objective 1: SCCCMH will support the goals and objectives of the St. Clair County Community Health Improvement Plan and will work to improve the mental and behavioral health of St. Clair County residents.

Strategies	Metric/Measure	Lead Staff	Completed by
A. Increase awareness of services available in the county.	Number of awareness campaigns initiated by CRT.	Community Relations	9/30/2024 Ongoing
B. Promote use of the National Suicide Prevention Hotline 988.	Number of awareness messages created by CRT.	Community Relations	Ongoing / Follow State of MI Timeline
C. Reduce stigma of mental health and substance use disorder services, with focus on BIPOC population.	Percentage increase from baseline of BIPOC men seeking services.	Community Relations	Ongoing
D. Continue to assess creative ways to help individuals access mental health and substance use disorder services (i.e., talkspace)	Assessment completed and recommendations provided.		9/30/2024 Ongoing

Objective 2: SCCCMH will collaborate with primary care physicians and health systems in St. Clair County to improve health outcomes starting in 2024 and continuing on an ongoing basis

Strategies	Metric/Measure	Lead Staff	Completed by
A. Identify primary care physicians (PCP) and	PCPs and healthcare systems identified by Contract Management.	Support Services Director	6/1/2024

health systems in St. Clair County			
B. Establish a PCP liaison position with a clinical background.	<ul style="list-style-type: none"> • PCP liaison position hired by Kathleen. • Offer to attend health system meetings and share service information. • Identify the office managers at each PCP. 	Program Director, Assistant Division Director (J.M.)	6/4/2024
C. Launch in-office educational opportunities with PCPs to encourage acceptance of Medicaid (will get CMH support, guaranteed payment, etc.)	Number of educational opportunities conducted by the PCP Liaison.		9/30/2024
D. Build upon the MC3 Model with pediatricians to increase buy in and collaboration.	Increased collaboration with pediatricians through the CRT and PCP / MC3 Liaison.		9/30/2024
Objective 3: SCCMH will continue to strengthen collaborative opportunities with community partners (criminal justice system, court system, local schools, DHHS, etc.)			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Identify and outreach to the law enforcement agencies in the county to share program information.	Number of outreach opportunities conducted by Court Liaison.	Program Director / Court Liaison	As requested, PHPD New Hire Training every 3 months.
B. Continue to provide support to law enforcement agencies	Number of police trainings where CMH staff are present by Program Director and Mobile Crisis Unit. Track Attendees.	Program Director, Training	Ongoing

to generate trust between our agencies (embed CMH staff in trainings of police staff)			
C. Provide education regarding Mental Health Services to law enforcement	Number of educational sessions held by Training Dept. Track attendees.	Training	Ongoing PHPD New Hire Training every 3 months.
D. Coordinate our efforts with law enforcement to avoid unnecessary incarceration or hospitalization of someone experiencing a mental health issue	Percentage reduction in unnecessary incarcerations/hospitalizations due to coordinated efforts as determined by Program Director and Mobile Crisis Unit.		Ongoing
E. Establish strategies to create stronger partnerships with key community leaders that impact children.	Collaborate and coordinate with community on new initiatives to address the needs of the community and families.	Program Director, Assistant Division Director (HF)	9/30/2024
Objective 4: SCCCMH will continue to foster relationships with legislators to support our mission on an ongoing basis.			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Identify and establish open lines of communication with legislators.	Legislators at local, state, and federal levels identified by CRT.	CRT	9/30/2024
B. Recruit legislative support by explaining CMH issues and topics in plain language and	Number of topics which received legislative support reported by CEO.	CRT	Ongoing

how they impact their constituents			
C. Host meet and greet opportunities for legislators, our staff and community partners.	Number of meet and greet opportunities held by, or attended by CEO/Staff. Track attendees.	CRT / Training	9/30/2024
D. Continue to align ourselves with advocacy agencies who support CMH issues and topics such as CMHAM, National Council etc.	Number of alignments created by CEO/Staff.	Leadership	Ongoing
Objective 5: SCCCMH will expand our community engagement with the public and key stakeholders beginning in 2024 and continuing on an ongoing basis			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Identify funding partnerships	Increase number of funding partnerships identified by Leadership.		9/30/2024
B. Develop community external communication plan and ensure adequate staff capacity to implement.	Staff capacity assessed; recommendations provided.	HR Director	Y1 – 3/31/2024
C. Identify return on investment of our	Return on investment determined; results provided by CRT <ul style="list-style-type: none"> Increased penetration rates. 	Support Services	9/30/2024

marketing and outreach initiatives.	<ul style="list-style-type: none"> Refined data report. 		
D. Provide presentations on all SCCCMH services and community benefits we provide.	Number of presentations given by agency staff. Track attendees.	Training Supervisor	Ongoing
E. Provide education on Mental Health and substance use disorder topics to the community at large	Number of educational sessions held in community by Training Dept. / Agency Staff. Track attendees.	Training Supervisor	Ongoing

Strategic Priority Area 3: Workforce			
Goal: Enhance organizational culture and employee engagement to sustain a competitive advantage			
Champion(s): Primary: Human Resources Secondary: Leadership			
Objective 1: SCCCMH will develop effective retention plans beginning January 1, 2024			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Survey staff to assess needs and motivators for employment with an emphasis on seeking honest feedback with transparency.	Employee survey conducted; feedback received and evaluated by HR and Leadership.	Leadership	3/31/2024
B. Assess budget capacity to provide staff incentives and retention / recruitment incentives.	Assessment completed by Finance; results shared	CFO	6/30/2024
C. Implement strategies to remain the employer of choice and continuously reevaluate our workforce.	Number of strategies implemented by HR and Leadership.	Leadership	9/30/2024
D. Continually review on-boarding process to ensure new staff believe they are adequately trained and supported.	On-boarding process reviewed on an annual, or more frequent basis as necessary by HR.	Human Resources Director	3/31/2024
E. Conduct Wage / Benefit Assessment.	Completed assessment with recommendations.	Human Resources Director	3/31/2024
Objective 2: SCCCMH will assess internal staff communications that addresses pertinent agency information.			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Assess efficiency of current modes of staff	Assessment completed; results shared by Leadership. Staff survey will be completed.	Leadership	02/01/2024

communication (CMH Pop up, In the Know, etc.)			
B. Research effective modes to promote staff communication and implement the most efficient and effective modes.	Research completed; results shared by CRT	HR Director	9/30/2024
Objective 3: SCCCMH will create a succession plan process which identifies leadership potential at all levels in the organization.			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Create the process to identify future leaders.	Process created by HR.	Human Resources	6/30/2024
B. Identify areas of need (future needs/retirements).	Needs identified by HR	Human Resources	4/1/2024
C. Continue offering leadership training to all identified employees.	Trainings offered by HR and Training Dept.	Human Resources / Training	Ongoing
D. Create a realistic description (tasks, roles, responsibilities) of leadership roles.	Leadership roles and responsibilities defined by current leadership.		3/31/2024
E. Create Leadership trainings and experiences to prepare future leaders for transition to any position of leadership.	Leadership Training facilitated by Training Dept. and leadership; number of sessions offered.	Leadership / Human Resources / Training	12/31/2024
F. Evaluate positions and create a timely and detailed succession plan.	Each department leader creates succession plan strategies for their department.	Leadership Team	Finance: Ongoing Finance Implement: 2026

Objective 4: SCCCMH will develop a comprehensive professional development plan for all staff of the agency.			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Establish training relevant to position in daily activities for individual positions.	Training opportunities identified by supervisors; trainings offered by HR and Training Dept.	HR Director	9/30/2024
B. Research, implement and evaluate best practices curriculum or training modules and provide opportunities to educate in best practices.	<ol style="list-style-type: none"> 1. Opportunities identified; number provided offered by HR and Training Dept. 2. Annual monitoring conducted by Leadership; results reported, and updates implemented. 	HR Director	04/01/2024
Objective 5: SCCCMH will develop effective recruitment plans			
Strategies	Metric/Measure		
A. Enhance relationships with school districts and colleges to promote job opportunities with the Public Behavioral Health System.	<p>New and enhanced relationships formed through HR with schools and colleges.</p> <ul style="list-style-type: none"> • Number of acquired. 	Human Resources Director	6/30/2024
B. Develop additional formal relationships with colleges that offer internships for positions within our organization.	<p>Internship opportunities identified; outreach to colleges and universities for students by HR.</p> <ul style="list-style-type: none"> • Number of acquired. 	Human Resources Director	6/30/2024
C. Monitor efforts of others who are also recruiting behavioral health employees.	Monitoring efforts ongoing by HR; recommendations for implementation presented for consideration.	Human Resources Director	6/30/2024
D. Develop outreach (letters, postcards, etc.) to recruit employees.	Recruiting materials developed by HR; effectiveness and penetration rate reports provided by HR.	Human Resources Director	3/31/2024

Strategic Priority Area 4: Program Excellence			
Goal: Provide a high-quality effective system of care.			
Champion(s): Primary: Program Director Secondary: Leadership			
Objective 1: SCCCMH will expand Community Based Crisis Services.			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Develop and implement a comprehensive plan for the establishment of a psychiatric urgent care center.	This includes conducting a needs assessment, securing funding, identifying a suitable location, and developing protocols and procedures for the center. The objective is to provide immediate psychiatric care and support to individuals in crisis, reducing the burden on emergency departments and ensuring timely access to appropriate care. Review our current model of crisis service implementation.	Medical Director / Program Director / Assistant Division Directors (x3)	12/31/2025
B. Conduct a feasibility study for a crisis stabilization unit (CSU)	Assess the need for a CSU in your community, evaluate potential funding sources, and determine the resources and infrastructure required to operate a CSU. The objective is to determine the viability of establishing a CSU and develop a plan for its implementation if feasible. Review our current model of crisis service implementation.	Medical Director / Program Director / Assistant Division Directors (x3)	12/31/2024
C. Explore options for a children’s crisis residential group home.	Research and assess options for a children's crisis residential group home in your community. Identify potential partners, funding sources, and suitable locations for the facility. The objective is to provide a safe and supportive environment for children in crisis, ensuring they receive the necessary care and support. Review best practices for children’s crisis resolution.	Medical Director / Program Director / Heidi	12/31/2024

Objective 2: SCCCMH will maintain a focus on program excellence.			
Strategies	Metric/Measure	Lead Staff	Completed by
A. Continuously evaluate and improve program effectiveness.	Regularly assess the effectiveness of implementing the psychiatric urgent care center, crisis stabilization unit, and children's crisis residential group home. Collect data on patient outcomes, satisfaction, and access to care, and use this information to identify areas for improvement and implement necessary changes.	Program Director / Support Services Director	9/30/2024
B. Ensure a trauma-informed and person-centered approach.	Continue to embed trauma-informed care principles and a person-centered approach in all aspects of program development and delivery. This includes creating a safe and supportive environment, involving individuals and their families in decision-making, and providing culturally sensitive and individualized care. We will measure by CMH trainings and participation in Trauma Focused CBT, cohort, EMDR and PE completed by CMH Staff.	Program Director / Assistant Division Directors (x3)	9/30/2024
C. Foster a culture of continuous learning and improvement.	Encourage staff to engage in ongoing professional development and stay updated on best practices in crisis intervention and management. Provide opportunities for staff to share their experiences and insights and use this feedback to drive continuous improvement in program excellence.	Leadership / Human Resources	9/30/2024