

Attachment III

PHASE 2 TASK FORCE REPORT - OVERVIEW OF RECOMMENDATIONS - (WORK IN PROGRESS)

STRATEGY	1.0 Increase productivity through revenue enhancement, staff development, technical support, resource sharing and cost containment. Direct a greater percentage of available dollars to “face to face” care.				2.0 Establish an integrated system of services that emphasizes prevention, early intervention, clinical best practices and recovery.		3.0 Enhance leadership, advocacy and community outreach to increase understanding and support for effective behavioral health care services at the local, state and national level.			
	GOALS	.1 Enhance Revenue	.2 Recruit, Retain and Develop Qualified Staff	.3 Use Technology as an Accelerator to Streamline Work	.4 Reduce Operational Costs	.1 Embrace Integrated Services as the Operational Standard of Excellence	.2 Implement the Recovery Model Across the System of Care	.1 Improve Information and Education	.2 Address Needs & Funding	.3 Enhance Leadership
OBJECTIVES	1.0	Maximize 3 rd party payer sources and alternative funding. This includes: a) Maximizing % of eligible consumers to Medicaid or other insurance and off ADAMHS funds b) Pursuing Medicaid waivers for alternative services (e.g. rehab, housing, case management services) c) Expanding the agencies' capabilities to secure grants and donations	3.0 Provide competitive wages with greater benefits, quality of worklife / wellness programs and career path planning for greater productivity and professional growth. This includes expansion of “pay for performance” and positive “reward & recognition systems” to reinforce desired results from employees	5.0 Increase productivity via paperless transactions, in real time, at service point, for administrative and clinical applications. Step #1 is to commission an IT advisory group for all agencies to integrate & standardize IT systems. The advisory group will: <ul style="list-style-type: none">Develop protocols, best practices and staff training strategiesShare technical expertise among all agenciesImplement an enterprise mgmt software to streamline records, claims, scheduling and other processes	7.0 Minimize infrastructure and indirect costs by expanding shared support services across agencies. Opportunities include: <ul style="list-style-type: none">information technologygrant writingfinancial (billing / audits)payroll servicesHR / legaladministrative / clericalconsultingmaintenancedelivery of trainingtransportationpooled purchasing,lease and rental agreements.	9.0 Develop the culture across the ADAMHS system by communicating intent and establishing a sense of urgency. Create “buy-in” by facilitating input and participation from internal and external stakeholders (including provider agencies’ board and staff) in designing / implementing change. This involves: <ul style="list-style-type: none">Policy adoption by Lake ADAMHS Board in 2003 to move forward with integrated / coordinated service delivery, to fund programs and agencies that incorporate this principle in an effective and measurable manner.Policy adoption by Lake ADAMHS Board in 2003 to embrace and fund recovery model implementation and its 11 essential concepts	13.0 Develop a speaker's bureau and key messages: <ul style="list-style-type: none">Includes carve out piece for consumer's own messageIdentify target groups for delivery Develop a model presentation: <ul style="list-style-type: none">What is ADAMHS BdWhat service agency doesWhat programs existHow consumer moves through system	15.0 Establish / build stronger working relationships and coalitions with community partners; extends well beyond ADAMHS Board and contracting agencies: Includes courts, schools, public entities, political leaders, police and sheriff departments, county commissioners, clergy, news media, social and civic groups Secure support and endorsements from key stakeholders	17.0 Achieve greater alignment among ADAMHS Board, contract agency boards and community partners regarding strategic plans, funding priorities, accountability and deliverables Facilitate yearly workshop among agency Boards/staff & ADAMHS Board / staff and consumers to develop system-wide priorities, integrated service strategies and performance targets linked to fund allocation. Advance key values (e.g., consumer driven, trust, honest, open communications, fiscal responsibility, responsive to diverse (cultural) needs, quality & outcome based, etc...)	19.0 Become more politically astute & advocates for effective public policy (e.g., focused emphasis on both Medicaid and Medicare reform and waivers. Emphasize role of advocacy vs lobbying. Reform includes the promoting of support services for return to work to facilitate both recovery and reduced disability payments Utilize NAMI advocacy network and other venues to strengthen working relationships with local, state and national political leaders
	2.0	Address non-billable service hours. If these add little value, reduce or eliminate. If these add value to the consumer, pursue new ways to receive compensation from those who benefit.	4.0 Provide intra-agency cross training & networking among staff, especially at clinical & direct service level, to enhance professional relationships & inter-personal networks.	6.0 ADAMHS Board to partner with United Way and other applicable organizations to spearhead 211 technology and 24/7 hotline	8.0 Design greater accountability for data-based outcomes into allocation process. This includes validating assumptions & return on investments to increase the impact of Board allocated funds.	10.0 Clarify and prioritize: <ul style="list-style-type: none">the level of service integration that is desirable / achievable over next 5 years, with emphasis on high risk populations and mandated services.the 11 essential concepts of recovery model implementation strategies, with emphasis on priority populations / mandated services.	14.0 Implement marketing plan. Deliver consistent message across general community and within ADAMHS system. Take advantage of the Ohio Bicentennial to deliver message	16.0 Discuss strategy early and then initiate planful approach to next levy; form a pre-campaign advisory group of business, union, civic, political, religious, social service leaders & media.	18.0 Develop a targeted recruitment and new board member training & orientation program to gain in-depth knowledge for roles of ADAMHS agencies and issues impacting system.	20.0 Enhance image, profile and credibility of boards, agencies and staff – become more visible and involved in community.
						11.0 Create a milestone plan to systematically fund and integrate the eight ODMH Coordinating Centers of Excellence clinical / psychiatry best practices across the system of care, including SAMI, OMAP, C-POM and other evidence-based treatment methodologies				
						12.0 Move to a more centralized recovery campus to improve access, intake, coordinate care for adult and child services, beginning with agencies whose lease arrangements expire in near term (next 3-5 years)				