



Southwest Alabama Behavioral Healthcare Systems Strategic Plan 2018-2020

Introduction

Southwest Alabama Behavioral Healthcare Systems is a rural four county community mental health center providing a comprehensive array of mental illness, intellectually disabled and substance abuse services. Southwest was originally incorporated as the Escambia, Clarke, Monroe and Conecuh Counties Mental Health and Retardation Board, Inc. in January 1972. In November 1974 the corporation's name was changed to the Southwest Alabama Mental Health/Mental Retardation Board, Inc. and in 2011 the name was changed to Southwest Alabama Behavioral Healthcare Systems. Southwest serves four rural counties, Clarke, Conecuh, Escambia and Monroe.

Strategic Plan Development

Southwest's strategic planning is an integral and on-going function of the center's operation. The strategic planning process is designed to clearly define the purpose of the organization and establish realistic goals consistent with the center's mission and within our capacity for implementation. Strategic planning will help to ensure the most effective use of our resources by focusing the resources on our key priorities. Further it will provide a base from which to measure our progress and establish an informed mechanism for initiating change. Strategic planning will be conducted by the Management Team annually in order to prepare for the up-coming fiscal year budget plan. Community stakeholder, consumer surveys, and other community needs assessments will provide an information base for community needs and service priorities to consider during the planning process. Progress towards implementation will be reviewed annually by the Management Team and the Board of Directors. The plan will be presented to the Board of Directors and revisions made as recommended and approved by the Board. The approved plan will be communicated to all staff.

The methodology for strategic plan development includes an internal assessment of the organization in terms of strengths and weaknesses and an evaluation of external opportunities and threats that may affect the organization in the future and an assessment of consumer, family and other community agency needs. Agency assessment in on-going process of review.



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Vision

Southwest Alabama Behavioral Healthcare Systems will be the consumer and community choice for behavioral health care services.

Mission

The mission of Southwest Alabama Behavioral Healthcare Systems is to promote and provide through respectful, ethical and resourceful actions...

Quality behavioral health care that is responsive, accessible and supports and encourages independence and recovery.

A fulfilling work environment for employees.

A spirit of shared responsibility with our community.

Organizational Values

Services will be provided in a way that is respectful of the rights, responsibilities and feelings of each consumer and promote recovery and independence to the greatest extent possible.

The rights, wishes and needs of consumers, families and the community we serve are principal in planning and providing services.

Consumer's needs are best met through the cooperative efforts of all center programs and staff.

Employees who work effectively with consumers and are committed to individual consumer goals are highly regarded and valued resources of the organization.

Employees who work as teams toward shared organizational goals are highly regarded and valued resources of the organization.



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Organizational Overview

Established in 1972 as a public non-profit corporation in accordance with Act 310 of the Alabama Legislature, Southwest is governed by a 19 member Board of Directors appointed by Clarke, Conecuh, Escambia and Monroe counties and the cities of Monroeville, Jackson, Thomasville, Evergreen, Brewton, East Brewton and Atmore. Southwest's annual budget is \$7.7 million with a staff of 115 full and part-time employees. Funding sources includes state and local governments, Medicaid, Medicare, patient fees, insurance, other local agency contracts. State contracts and Medicaid account for 85% of the center's revenues. Annual budgets for Southwest's three major divisions include \$6.9 M for Mental Illness services, \$553,000 for Intellectual Disability services and \$251,000 for Substance Abuse services. Since 2008 the budgets for Intellectual Disability services has been reduced by approximately 50% from \$1.3M to today's budget of \$553,000 due to the state's ID waiting list process. In addition, the SA Division of DMH re-directed all Special Women's program funding from our area reducing our budget for SA services by approximately 50%. With the exception of the funding provided for new programs during the Searcy Closure Project, state funding for MI services has remained at the same level since 2008.

Southwest employs a professional staff that includes psychiatrists, clinical psychologists, licensed professional counselors, nurses and support care staff. The center's services include: outpatient counseling, case management, rehabilitative day services, physician assessment, crisis outpatient, residential services, supported housing, adult in home intervention, children's outpatient and school based services, intellectual disability day habilitation and case management and substance abuse intensive outpatient services. In addition to these services Southwest operates Pineview Apartments a MOMs program (Meals, Observation and Medications) apartment complex with supportive services available on-site, 24/7.

Southwest has experienced growth in its 46-year history; however the center historically lacked the infrastructure to support efficient and effective service delivery systems and a sound financial position for the organization. Since fiscal year 2000, the center's leadership has focused on building the infrastructure necessary to support and expand services and employ staff to provide quality services.

Streamlining processes, improving communication, administrative functions that support service delivery and a commitment to teamwork are key to Southwest's pursuit for financial and service capacity stability and most importantly to providing quality care for consumers in Southwest Alabama. Although great strides have been made in organizational and service delivery improvements many goals are yet to be reached in our effort to provide services and supports. Southwest's board and staff are committed to creating ready access to quality care through an efficient and accountable system that supports and encourages independence and recovery.



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County/Catchment Area Data	Clarke	Conecuh	Escambia	Monroe	Catchment Area Total	Alabama
Population	24392	12395	37728	21530	96045	4,863,300
Population Change from 2010	-5.60%	-6.30%	-1.50%	-6.70%	-20.10%	2.00%
Persons under 18 years old	21.90%	21.10%	22.20%	22.70%	21.98%	22.60%
Persons 65 years and older	15.90%	17.80%	15.20%	15.30%	16.05%	16.10%
Median Household Income	\$34,101	\$27,068	\$32,009	\$34,072	\$31,813	\$44,758
Persons below poverty level	20.60%	24.90%	24.10%	21.80%	22.85%	17.10%
Persons with a Disability	9.80%	14.70%	14.40%	9.10%	12.00%	11.80%
Persons without Health Insurance	12.60%	14.70%	15.50%	14.20%	14.25%	10.70%
Unemployment Rate	8.10%	5.40%	4.70%	7%	6.25%	3.70%
Land Area	1238	851	948	1026	4063	50645
Persons per square mile	20.9	15.6	40.5	22.5	24.88	94.4

Medical Facilities

6 Community Hospitals	414 beds
1 Geriatric Psychiatric Unit	9 beds
7 Nursing Home	632 beds

Education

47 Public Schools in 6 School Systems
2 Community Colleges
1 Technical College



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6 Assisted Living Facilities 90 beds

Area Served- Health Assessment Overview

Southwest serves Clarke, Conecuh, Escambia and Monroe counties. Data from the University of Wisconsin Population Health Institute's 2018 county Health Rankings Report indicate that two of Southwest's counties rank in the lowest of four quartiles for health outcomes in Alabama. Health outcomes are measured by premature death and the % of people reporting poor or fair health and the number of physically and mentally unhealthy days within the last 30 days. The report further indicates that all four counties rank in the lowest quartile of health factors. Health factors represent the focus areas that drive how long and how well we live, including health behaviors (tobacco use, diet and exercise, alcohol or drug abuse, sexual activity), clinical care (access to care, quality of care), social and economic factors(education, employment, income, family and social support, community safety), and physical environment (air and water quality, housing and transit).ⁱ

Ranking for Southwest Counties of 67 Alabama Counties

Health Outcomes		Health Factors
Clarke	45	53
Conecuh	60	65
Escambia	40	57
Monroe	56	60



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Organizational Assessment

Strengths

- Dedicated, Caring, Qualified/Credentialed Staff
- Consumer and Family Satisfaction
- Crisis Response
- Continuum of Care
- Improved Financial Condition
- Improved Technology/Infrastructure
- Improved Facilities
- Expanded Services
 - MI-Adult Case Management all counties
 - Children's CM-1 per county
 - Adult In-Home Intervention Services all counties
 - Compass School
 - Escambia Drug Court
 - Telemedicine Psychiatric Services all counties
 - Increased Child Psychiatry Services
 - Increased Nursing Services
 - School-based Children's Services
 - Children's In-Home Services
 - Peer Support Staff
 - Inpatient Care-Crenshaw Community Hospital
- Direct Care Staff
- Web Based Training and Tracking Program
- Improved Medical Record Documentation/Audit
- National Health Service Corp Site
- Staff Involved in Community/Professional/Support Programs and Organizations
 - Multi-Needs Committee- Clarke, Conecuh, Escambia, Monroe
 - Children's Policy Council-Clarke, Conecuh, Escambia, Monroe
 - Child Advocacy Centers
 - DHR Quality Assurance
 - SHRM-Society for HR Managers
 - Provide Internship/Educational opportunities
 - LPC/LMFT/SW Supervision Site
 - RTAP Committee Member-Rural Transportation

Weaknesses

- Financial Resources
- Transportation
- Large Rural Catchment Area
- Large number of uninsured
- Community Education
- Access to SA Residential Services and Funding for SA services
- Consumer employment opportunities all counties



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Organizational Assessment

External Threats/Trends

- State Funding.
- Federal Medicaid Funding.
- Intellectual Disability Waiting List
- Lack of Funding for Residential- ID/MI Residential Resources.
- Lack of Public Transportation.
- State Standards Mandates-Un-funded.
 - Training Requirements
 - Information Management/Technology
 - Conflicting DMH/Medicaid or Funding Source Requirements
 - Incident Reporting Requirements
- Stigma
- Stakeholder Perception/Satisfaction.
- Changing Technology.
- Federal/State Mandated Requirements
- Liability/Work Comp/Health Insurance Costs.
- Political Changes.
- Consumer Access to Medications.
- Uninsured and/or underinsured consumers.
- Lack of employment opportunities.
- Lack of flexibility/communication/coordination between divisions at state level MI/ID/SA.
- Shortage of trained MH, ID and SA professionals.
- Medicare-lack of coverage for services and providers in community mental health.

External Opportunities

- Collaboration with other mental health centers to seek efficiencies and opportunities to partner.
- Primary Care/FQHC Collaboration
- Expansion of Children's Services/Collaboration with Schools and Juvenile Courts.
- Federal Grant Opportunities.
- Transportation Grant/Partnership w Local Public Transportation.
- Community Outreach and Education /Awareness-Reduce Stigma.
- Use of technology and telehealth to improve access and coordination of care.
- Collaboration with Community College system to develop trained workforce for direct care staff through Federal workforce enhancement programs.
- Collaboration with Thomasville hallmark, LLC for affordable housing through the Alabama Housing Finance Authority.



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Two-Year Goals

- Implement Customer Service Training center wide, to improve and enhance delivering healthy patient outcomes and cost-effective healthcare.
- Develop a strong community outreach program.
- Fully implement Carelogic Impact Modules for reporting patient outcomes.
- Intellectual Disability service documentation fully implemented in Carelogic EHR.
- Implement Pre-Employment Testing/Application System.
- Enhanced training on medication side effects and complications for case managers, new therapists and direct care staff.
- Explore options and opportunities for Primary Care Integration.

ⁱ University of Wisconsin Population Health Institute. County Health Rankings 2018.