



Southwest Alabama Behavioral Health Care Systems Strategic Plan 2024-2026

Introduction

Southwest Alabama Behavioral Health Care Systems is a rural four county community mental health center providing a comprehensive array of mental illness and substance use 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 Health Care Systems. Southwest serves four rural counties, Clarke, Conecuh, Escambia and Monroe. This year we have implemented a new feature to our services and have already realized expanded access to crisis care, increased staff productivity and the ability to offer same day access for any individual that calls or walks-in needing a service. The new technology, MyCare has been deployed in all emergency departments and detention facilities in our area. We also have plans to offer this technology to sheriff departments for officers on duty, major business and industry and schools in our area. For our large rural community, this is a game-changer providing services where and when they are needed for individuals, families and our community partners.

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. 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. Strategic planning will be conducted by the Management Team and Board of Directors and 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 is an 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 \$9.3 million with a full-time staff of 115. Funding sources includes state and local governments, Medicaid, Medicare, patient fees, commercial insurance, and other local agency contracts. State contracts and Medicaid account for 92% of the center's revenues.

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, mobile crisis, crisis outpatient, residential services, supported housing, adult in home intervention, children's outpatient, children's in-home, school based services, therapeutic mentoring, youth peer support, high intensity care coordination, low intensity care coordination, substance use recovery support, outreach, early intervention, outpatient and 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 52-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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Health Outcomes	Clarke	Conecuh	Escambia	Monroe	Alabama
Length of Life					
Life Expectancy	71.0	69.5	70.8	71.5	73.7
Child Mortality	120	140	100	80	70
Infant Mortality	10				8
Quality of Life					
Physical Distress	14%	15%	16%	15%	12%
Mental Distress	20%	20%	21%	21%	20%
Diabetes Prevalence	14%	15%	14%	15%	13%
HIV Prevalence	202	299	230	208	340
Health Factors					
Food Insecurity	16%	13%	17%	16%	15%
Drug Overdose Deaths	45				22
Clinical Care					
Uninsured Adults	15%	14%	17%	16%	15%
Uninsured Children	5%	4%	5%	4%	4%
Other Primary Care Providers	1130:1	2240:1	1410:1	1490:1	870:1
Social & Economic Factors	Clarke	Conecuh	Escambia	Monroe	Alabama
HS Graduation	93%	93%	89%	93%	91%
Disconnected Youth	23%		26%		8%
Reading Scores	3.0	2.3	2.9	2.5	2.9
Math Scores	2.8	2.3	2.7	2.5	2.7
Median Household Income	\$44,900	\$36,100	\$47,800	\$47,500	\$59,700
Living Wage	\$38.74	\$39.11	\$38.02	\$38.06	\$41.11
Free or Reduced Lunch	70%	71%	65%	63%	49%
Homicides	11	19	14	16	12
Suicides	18		24	15	16
Firearm Fatalities	22	33	22	21	23
Juvenile Arrests	14			18	12
Physical Environment					
Traffic Volume	13	11	25	9	67
Homeownership	72%	75%	67%	72%	70%
Housing Cost Burden	10%	10%	11%	10%	12%



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Broadband Access	71%	67%	71%	61%	84%
Demographics	Clarke	Conecuh	Escambia	Monroe	Alabama
Population	22,515	11,206	36,666	19,404	5,074,296
% below 18 Years	21.6%	20.2%	22.6%	20.9%	21.9%
% 65 and Older	21.0%	24.7%	18.8%	21.9%	18.0%
% Black	44.9%	44.5%	30.4%	41.2%	26.4%
% American Indian or Alaska Native	.6%	.7%	3.8%	1.4%	.7%
% Asian	.5%	.4%	.4%	.5%	1.6%
% Native Hawaiian or Other Pacific Islander	0%	0%	.1%	0%	.1%
% Hispanic	1.6%	3.3%	2.7%	1.8%	4.9%
% White	51.5%	49.4%	60.5%	53.4%	64.7%
% Female	52.4%	51.8%	49.9%	52.1%	51.4%
% Rural	100%	100%	65.3%	78.3%	42.3%

Area Served- Health Assessment Overview

Southwest serves Clarke, Conecuh, Escambia and Monroe counties. Data from the University of Wisconsin Population Health Institute’s 2022 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).¹

Ranking for Southwest Counties of 67 Alabama Counties

Health Outcomes		Health Factors
Clarke	60	59
Conecuh	63	54
Escambia	50	56
Monroe	54	55



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Organizational Assessment

Strengths

- Dedicated, Caring, Qualified/Credentialed Staff
- Consumer and Family Satisfaction
- Crisis Response/Mobile Crisis/MyCare Crisis Response Jails/Hospitals/Law Enforcement
- Continuum of Care
- Improved Technology/Infrastructure
- Improved Facilities
- Expanded Services
 - Same Day Access
 - School-based Children's Services
 - Children's In-Home Services
 - Peer Support Staff- SA/Child/MI
 - Detention Programs-Escambia and Clarke Counties
 - Stepping Up Programs- Monroe and Conecuh Counties
- 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/SW Supervision Site

Weaknesses

- Financial resources for Rural Crisis Continuum
- Lack of inpatient psychiatric beds
- Transportation
- Large rural catchment area
- Large number of uninsured
- Community education and engagement
- Access to SA residential services and funding for SA services
- No service availability for individuals with intellectual disabilities
- Medicaid expansion unlikely directly impacting CCBHC sustainability



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Organizational Assessment

External Threats/Trends

- Increasing operational costs without increased funding.
- Ability to maintain competitive salaries and wages
- Changes to overtime laws
- State and local funding.
- Federal Medicaid Funding.
- Lack of public transportation.
- 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.
- Shortage of trained MH and SA professionals.
- Medicare and Commercial Insurance -lack of coverage for services and providers in community mental health.
- Increased presence of private web based/online therapy services as a direct competitor

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.
- 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 ADMH for-affordable housing opportunities.



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Two-Year Goals

- Fully develop a Rural Crisis System of Care that is responsive and accessible to the needs of our four-county rural community. 16 bed Crisis Residential Program co-located with a Rural Access Center.
 - Train and implement evidenced based practices- Cognitive Behavioral Therapy, Motivational Interviewing and Solution Focused Therapy.
 - Implement Customer Service Training center wide, to improve and enhance delivering healthy patient outcomes and cost-effective healthcare.
 - Continue to develop resources to achieve CCBHC certification.
 - Trauma Informed Care Training center-wide.
 - Develop a strong community outreach/marketing plan utilizing a professional marketing /advertising firm. Currently engaged with marketing firm developing plans for outreach and engagement.
 - Hire a Community Engagement Specialist to build and maintain relationships with community members, organizations, other stakeholders and business and industry.
 - Engage business and industry utilizing the MyCare technology to connect employees in need of services with a therapist same day.
 - Explore options and opportunities for Primary Care Integration.
 - Develop a redundant resource to reduce system down-time.
 - Continue to seek state funding to continue to adjust pay-scales to provide competitive wages.
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