2017-2020
STRATEGIC PLAN

Chief Executive Officer
William M. Denihan

ADAMHS Board Chair
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ADAMHS
BOARD OF CUYAHOGA COUNTY
ALCOHOL, DRUG ADDICTION & MENTAL HEALTH SERVICES
MISSION STATEMENT

Enhance the quality of life for our community through a commitment to excellence in mental health and addiction prevention, treatment, and recovery services coordinated through a person-centered network of community supports.

VISION

Mental health, addiction, prevention, treatment, and recovery services will be available and accessible for every county resident in need and the ADAMHS Board will provide a preeminent, seamless and integrated system of care.
STAKEHOLDER SUMMIT

The ADAMHS Board of Cuyahoga County hosted a stakeholder summit from December 8 – 9, 2016. The goal of the summit was to engage a large variety of stakeholders who have a deep understanding of the needs of the community to provide input for the development of the strategic plan. Over 125 individuals registered to take part in the summit, which included representation from a broad range of organizations, professionals, consumer groups, staff, and members of the community. During the summit, facilitated breakout sessions took place based on areas of organizational focus developed by ADAMHS Board leadership team to be included in the plan. The breakout sessions were designed to foster rich and interactive discussions that would allow all participants to have their voice heard. Session notes and comments were used to produce a summary of emerging themes for use in the writing of the strategic plan.

LEADERSHIP PLANNING SESSION

On January 9, 2017, ADAMHS Board leadership team and board members convened to develop goals and strategies to serve as key inputs into the strategic plan. The planning session was designed to determine broad topic areas and high-level objectives of the plan. During the session the group engaged in facilitated discussions around the current needs of the community the organization serves and what can be done to better meet these needs. The group also reviewed internal operational needs in addition to its external capacity and completed a SWOT analysis to develop a list of organizational priorities.

EXECUTIVE TEAM PRIORITY SETTING

On February 23, 2017, members of ADAMHS Board leadership team took part in a facilitated work session to revisit the Mission and Vision of the organization as well as to develop objectives for each goal area of the strategic plan. This session looked to determine the tactical steps necessary for board members and staff to take in order to reach each goal. Next, the leadership team formed internal workgroups to develop action steps, timelines, and assign departments responsible for each objective.
GOAL #1

STRATEGIC GOAL AREA

PROGRAMS & SERVICE DELIVERY

1.0 - ENSURE CONTRACTED SERVICES ALIGN WITH COMMUNITY NEEDS AND THE BOARD’S STRATEGIC DIRECTION

1.1 - Invest in more programs that meet the Board’s standards for accountability and strong program monitoring

Action Steps:

1. Develop priority funded areas for Information (RFIs) for needed services
2. Promote diversity and cultural competence among Staff
3. Establish performance based contract reporting requirements
4. Provide technical assistance to Providers Agencies
5. Utilize Evaluation and Program data to evaluate all programs at 6 and 12 month intervals
6. Implement outcome measurement tools that indicate programming success
7. Monitor Provider compliance with contracts
8. Add new contract language to describe: program reviews; PIP

1.2 - Re-evaluate the current funding portfolio and ensure alignment with the Board’s strategic direction

Action Steps:

1. Review current service and program continuum with Planning Division for both children’s and adult systems
2. Identify service, program gaps and barriers in the children’s & adult system
3. Provide an analysis of each program funded via the Board to identify service/program deficits in effort to make informed program recommendations for funding consideration
4. Monitor Impact of Affordable Care Act and Behavioral Health Redesign changes
5. Establish criteria for which an agency would be placed on a Performance Improvement Plan, (PIP) “Watch”
2.0 - MAKE STRATEGIC INVESTMENTS IN EVIDENCED BASED AS WELL AS INNOVATIVE PROGRAM MODELS

2.1 - Prioritize the needs of the community that would warrant strategic investment

Action Steps:

1. Utilize Needs Assessment findings, ROSC survey and focus groups, as well as Town Hall meetings to gain community input
2. Identify the most current evidenced based practice models to incorporate in specialized projects and programs based on SAMHSA National EBP Registry
3. Assess the provider network projects and programs regarding the utilization and need for evidenced based programming
4. Determine the feasibility, cost, and sustainability plan to incorporate evidenced programming as part of a contractual requirement for ADAMHS Board
5. Create RFIs for targeted EBPs such as Integrated Dual Disorder Treatment (IDDT) for co-occurring mental illness and substance abuse, and Dialectical Behavioral Therapy (DBT) for Borderline Personality Disorder

2.2 – Develop & implement a comprehensive behavioral health prevention continuum, throughout the lifespan, to compliment the current behavioral health service system.

Action Steps:

1. Identify best-practice strategies for service inclusion to enhance current prevention programs for consideration and implementation
2. Identify best practices in prevention services and programs to expand and enhance service delivery
3. Survey contract agencies regarding the provision of prevention services, to include but not limited to, evidenced-based and/or local curriculums to identify gaps and barriers throughout the system
4. Identify programs that promote social-emotional competencies and resilience throughout the lifespan to prevent “gate-way” and illicit drug use, suicide prevention, in addition to tolerance and stigma reduction re: mental health care/management
5. Develop strategies to educate the community regarding abstinence, gateway/illicit drug use, and suicide prevention to address the community at large
6. Convene community meetings to identify prevention efforts, programming, and community strategies within the ADAMHS Board’s purview

RESPONSIBILITY TO ACCOMPLISH OBJECTIVE

- Evaluation
- Fiscal
- CEO
- Programming
- RFI Team

- Prevention
- External Affairs
- Training
- ADAMHS Stakeholders
2.3 - Incentivize programs that use recovery support specialists in the provision of services

Action Steps:

1. Determine feasibility of ADAMHS Board or other governmental entities for financial incentives related to peer recovery support/specialists
2. Survey contract agencies to better understand current vacancy data and perceived value of peer recovery support specialists
3. Engage peer recovery support specialists in identifying barriers and strategies to increase employment opportunities
4. Use Board funds for peer support for services that are not Medicaid reimbursable

3.0 - CONTINUALLY ASSESS THE NEEDS AND STRENGTHEN THE CAPACITY OF THE CURRENT AND FUTURE BEHAVIORAL HEALTHCARE WORKFORCE

3.1 - Assist providers to strengthen their workforce and meet the challenges of the changing Behavioral Health system.

Action Steps:

1. Sponsor/ Coordinate Career Fair
2. ADAMHS Board Job Board to include Agency Positions
3. Increase trainings offered to provider workforce based on their need
4. Work collaboratively with colleges/universities to incorporate paid internships within field placements to build specialized expertise and the workforce in both children's and adult systems
5. Encourage colleges/universities to incorporate training within their learning curriculums with regard to the behavioral health system to prepare students for behavioral redesign and inclusion
6. Lend the expertise of the Planning Division staff to assist colleges/universities in gaining a general understanding of the behavioral health system at large inclusive of Medicaid redesign for career planning
7. Establish a partnership with Ohio Mental Health & Addiction Services to ensure the local behavioral health system is in alignment with the state's mandate
8. Establish a partnership with Health Management Organizations (HMO’s) to avoid duplication of services and realign Board resources away from such activities to fill other gaps in the community

PERFORMANCE INDICATORS

- 25% of programs will be reviewed annually
- Increase models of MH and AOD integration in prevention and residential programs
### GOAL #2

**STRATEGIC GOAL AREA**  
**QUALITY IMPROVEMENT & PROGRAM MONITORING**

Our programs and services will deliver quality results through consistent and standardized data collection, monitoring and outcomes measurement practices.

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<td><strong>QUALITY IMPROVEMENT &amp; PROGRAM MONITORING</strong></td>
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#### 1.0 – INCREASE THE BOARD’S ABILITY TO PROACTIVELY MONITOR PROGRAMS SUCCESS

1.1 - Improve technical assistance of funded programs and partners

**Action Steps:**

1. Hold quarterly meetings and trainings with Providers on evaluation methods, relevant program topics and Board expectations
2. Expand Board Training Institute topics
3. Utilize Recovery Conference as technical assistance venue

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1.2 - Evaluate the effectiveness of broader use of pro-active program audits in monitoring efforts

**Action Steps:**

1. Pilot on-site annual performance improvement reviews of contract agencies

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#### 2.0 - ENSURE AGENCY CONTRACTS EMPHASIS ACCOUNTABILITY AND HIGH QUALITY CLIENT OUTCOMES

2.1 - Align contract language with ROSC principles

**Action Steps:**

1. Revise service contracts to reflect increased recovery-oriented language, as well as program and evaluation goals

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# Strategic Plan

## 2.2 - Financially incentivize agencies to produce high quality client outcomes

**Action Steps:**

1. Include discussion of Board outcomes in all service funding consideration
2. Award RFI contracts in consideration of prior agency success
3. Establish outcomes targets and reward agencies for achieving them

## 3.0 – INTEGRATE THE USE OF “SHARES” INTO THE DAILY OPERATIONS AND REPORTING OF THE BOARD’S OPERATIONS

### 3.1 - Improve the board’s decision making through better and more timely data availability

**Action Steps:**

1. Continually provide training and technical assistance on SHARes
2. Monitor Provider compliance in SHARes
3. Collect pre, post, and ongoing standardized clinical outcomes on all clients who receive Board-funded services
4. Analyze, monitor, and distribute analysis of SHARes outcomes and other data on a quarterly basis.
5. Establish an on-line satisfaction survey

### 3.2 - Benchmark Board’s success in collaboration with boards of similar size and scope

**Action Steps:**

1. Establish outcomes benchmarks with SHARes COG (Cuyahoga, Hamilton, and Franklin County ADAMHS Boards)

### 3.3 - Successful transition to SHARes platform for ensuring prompt enrollments and accurate process of claims

**Action Steps:**

1. Analyze, monitor, and distribute analysis of SHARes enrollment and claims data on monthly basis

## PERFORMANCE INDICATORS

- Improvement in provider agency contract deliverables
- Number of agencies on target with budget
- Percent of improvement of services to our client
- Percent of increase in engagement of clients
- Percent reduction of crisis and recidivism among clients
- Number of contracts with updated language
GOAL #3

Our programs, services, and mission are supported by increased and consistent public and private funding.”

1.0 – DEVELOP A CONCISE AND COMPELLING BUSINESS CASE FOR INCREASED AND SUSTAINABLE FUNDING TO SUPPORT THE BOARD’S MISSION

1.1 - Identify the desired portfolio of services from the Board that align with community needs

Action Steps:

1. Examine current contracts to identify possible areas of duplication
2. Utilize Needs Assessment Findings, ROSC Survey and focus groups, and Town Hall meetings to determine community need
3. Monitor impact of BH Re-Design and revised Affordable Care Act
4. Produce appropriate collateral materials to articulate the business case
5. Build a broader understanding among stakeholders of the gap between existing and necessary funding

2.0 - CONDUCT FEASIBILITY STUDY AND DEVELOP PLAN TO SUPPORT THE ESTABLISHMENT OF A DEDICATED MENTAL HEALTH LEVY IN CUYAHOGA COUNTY

2.1 - Assess the level of support for the dedicated levy among key local decision makers and community stakeholders.

Action Steps:

1. Contract with independent consultant to assess support
2. Determine appropriate budget to support dedicated levy campaign

RESPONSIBILITY TO ACCOMPLISH OBJECTIVE

- Programming
- Evaluation
- Fiscal
- External Affairs

- External Affairs
3.0 – DEVELOP A COMPREHENSIVE RESOURCE DEVELOPMENT PLAN INCLUSIVE OF CURRENT AND POTENTIAL FUNDING OPPORTUNITIES

3.1 – Advocate for an increase in the State’s financial support for the Board’s programs and operations

Action Steps:

1. Advocate through the Ohio Association of County Behavioral Health Authorities (OACBHA) for increased Behavioral Health Funding for Boards
2. Advocate through urban board Association for increased Behavioral Health Funding for urban boards
3. Cultivate positive relationship with State legislature and leaders for increased funding for Cuyahoga County
4. Evaluate the effectiveness of existing governmental relations contracts and services

3.2 - Diversify board funding beyond county and state sources

Action Steps:

1. Explore non-traditional fundraising such as Stakeholder Breakfast and Contribution Campaign
2. Inventory potential funding opportunities among corporate, foundation and federal sources including grants and foundations
3. Advocate to consolidate all BH funding now disbursed across County agencies under the central administration of the ADAMHS Board

PERFORMANCE INDICATORS

- Business Case document
- Increase in additional revenue
- Increase in levy funding
- Increase in community support
- Execution of resource development plan

RESPONSIBILITY TO ACCOMPLISH OBJECTIVE

- CEO
- External Affairs
- Executive Team
1.0 – DEVELOP ANNUAL ADVOCACY ACTION AGENDA TO GUIDE THE BOARD’S COMMUNITY ENGAGEMENT EFFORTS

1.1 - Ensure broad distribution and understanding of the Board’s advocacy agenda and strategy

Action Steps:

1. Maximize the Board’s digital social media platforms as key communication tools
2. Educate State Legislature, County Council, and County Executive’s Office on issues to influence mental health and addiction legislation

RESPONSIBILITY TO ACCOMPLISH OBJECTIVE

• External Affairs

2.0 - ENGAGE KEY COMMUNITY STAKEHOLDERS IN ADVOCACY EFFORTS TO SHAPE AND SUPPORT THE BOARDS STRATEGIC PRIORITIES

2.1 - Identify key community stakeholders and align with the appropriate advocacy agenda item

Action Steps:

1. Utilize the Youth Advocacy Council to offer advice on messaging to reach youth and cultivate future community leaders with an interest in mental health and addiction issues
2. Utilize the Adult Action Committee Advocating Change (ACAC) to advise the Board on issues, policy changes, and future funding
3. Utilize the Addiction Recovery Advocacy Group to motivate individuals affected by addiction to eliminate stigma and help reduce the number of lives lost
4. Expand the membership and use of the Speaker’s Bureau to support community understanding of the ADAMHS Board and mental health and recovery in general
5. Establish a community council of business leaders.

RESPONSIBILITY TO ACCOMPLISH OBJECTIVE

• External Affairs
### 3.0 – PROMOTE INCLUSIVE KEY MESSAGES AND MARKETING THAT EMPHASIZES THE ELIMINATION OF STIGMA, THE NECESSITY OF A STRONG CONTINUUM OF CARE, AND THE IMPACT OF SERVICES ON THE LIVES OF COMMUNITY MEMBERS

#### 3.1 – Increase use of client recovery success stories in communication efforts

**Action Steps:**

1. Invite individuals and family members to share recovery stories to eliminate stigma
2. Develop advertising campaigns featuring positive and inclusive recovery stories to eliminate stigma and educate the community about mental illness and addiction
3. Develop marketing campaigns that promote the ADAMHS Board of Cuyahoga County, its provider network, and available recovery services

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### PERFORMANCE INDICATORS

- Achievement of advocacy agenda goals
- Increase in digital metrics and engagement on digital platforms
- Number of Media Hits
- Number and effectiveness of advocacy activities
## 1.0 - Develop a Comprehensive Training and Development Program to Ensure That Staff Knowledge and Skills Support Organizational Priorities

### 1.1 - Improve the alignment between current staff development needs and training resources offered

**Action Steps:**

1. Provide training around SHARES system
2. Board staff trained in BH Redesign
3. Survey Staff on other training topics of interest
4. Align board staff with ROSC model
5. Provide staff training on ROSC

## 2.0 - Promote a Culture Within the Board That Emphasizes Teamwork, Collaboration, and a High Sense of Professional Fulfillment

### 2.1 - Promote a culture of high employee engagement and improve teamwork and collaboration

**Action Steps:**

1. Establish quarterly Managers Meeting across units
2. Establish new ways to increase communication across departments
3. Recognize employee achievement
4. Pilot co-facilitation of All-Staff meetings
5. Establish and promote new opportunities for the employee team’s participation in civic and volunteer activities

### Performance Indicators

- Increased knowledge among staff
- Increased attendance in training opportunities
- Increased staff engagement

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**STRATEGIC GOAL AREA**

**ORGANIZATIONAL DEVELOPMENT**

### GOAL #5

*Our Board is properly aligned with adequate internal capacity to meet the goals of a Recovery Oriented System of Care and a fully integrated Behavioral Healthcare System*

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**Responsibility to Accomplish Objective**

- Evaluation
- HR
- External Affairs
- Training Institute

- CEO
- Executive Team
ACKNOWLEDGEMENTS

RAMA Consulting wishes to thank all of these individuals for their support and participation in the ADAMHS Board of Cuyahoga County’s Strategic Planning Project. Your work has assisted us in better understanding the challenges before us and more effectively addressing these issues through this comprehensive plan. ADAMHS Board is grateful to its Board, Staff, and the many of other community leaders and stakeholders who helped to shape this important document.

ADAMHS BOARD CHAIR

Eugenia Cash, LSW, MSSA, CDCA

ADAMHS BOARD LEADERSHIP TEAM

William M. Denihan, Chief Executive Officer
Valeria A. Harper, MA, CDCA, Vice President of Operations
Tami A. Fischer, Director of Human Resources
John F. Garrity, Ph.D., Chief Quality Officer
Scott S. Osiecki, Chief of External Affairs
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David G. Lambert, Esq., Director of Risk Management
Starlette Sizemore-Rice, Public Benefits Administrator
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Linda Torbert, MSSA, LISW-S, Children’s Projects Administrator