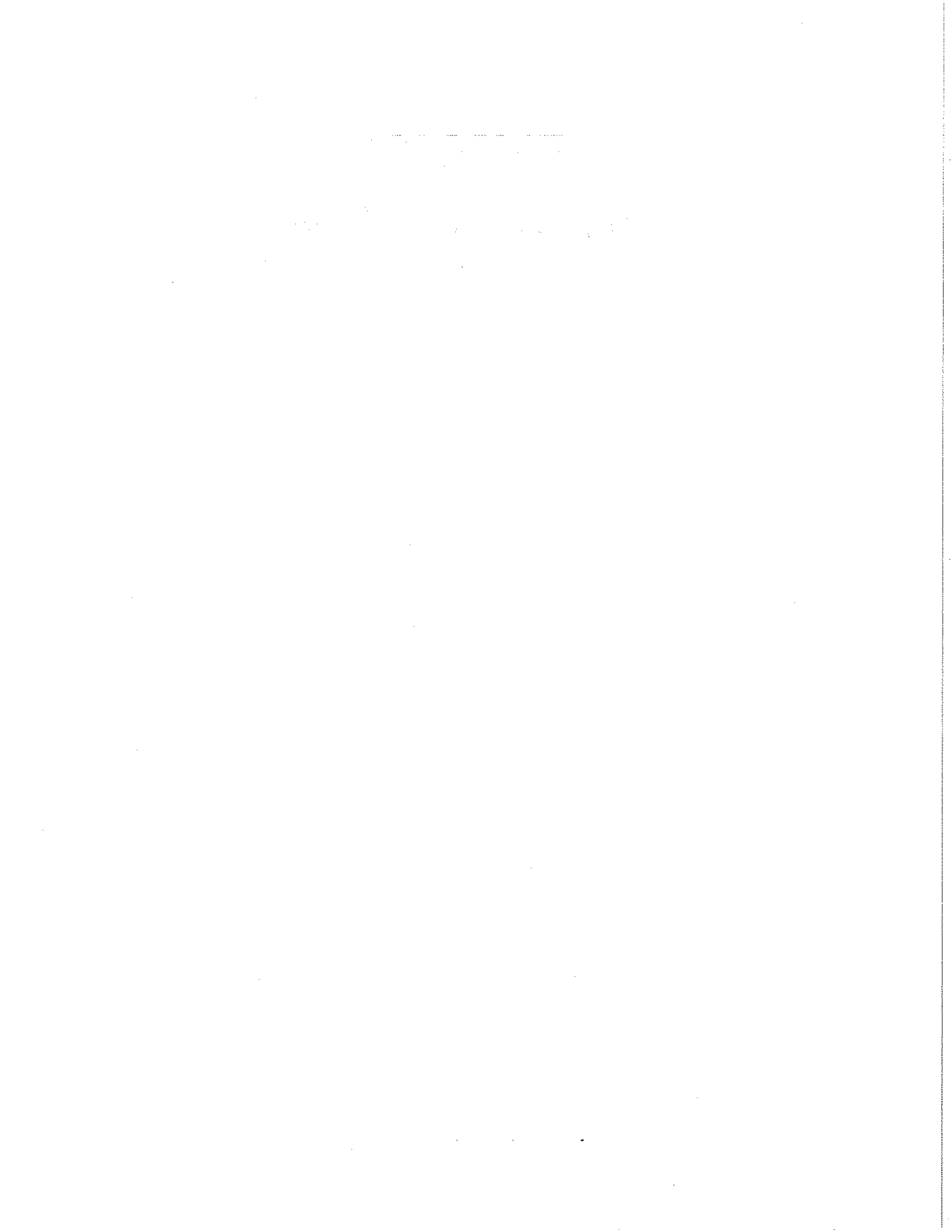


FY2012 Operational Plan



MIDDLE FLINT BEHAVIORAL HEALTHCARE

FY 2012 OPERATIONAL PLAN

The agency FY 2012 Operational Plan is based upon the most current agency Strategic Plan (July 2011). Based on the long-term strategic goals established in the strategic plan, FY 2012 objectives, strategies, and outcomes/outputs have been established in each of the focus areas established by the agency's governing Board. More detailed service goals and outcomes can be found in the FY 2012 Outcome Management Plan, as referenced below.

The operational plan will be reviewed at the end of the fiscal year, along with the results of the Outcome Management Plan and other performance indicators; e.g., client and staff satisfaction surveys. These findings will be reported to the Board and utilized to develop the FY 2013 operational plan. The plan is also available for review on the agency's website, and feedback is welcome from clients, staff, and community stakeholders.

LONG-TERM STRATEGIC GOALS:

- Enhance Board knowledge and leadership capabilities. (Effectiveness)
- Achieve and maintain full Board membership. (Efficiency)
- Establish greater continuity in organizational leadership. (Effectiveness & Efficiency)

FY 2012 OBJECTIVES, STRATEGIES, AND OUTCOMES/OUTPUTS:

- Enhance Board knowledge and leadership capabilities.
 - Provide Board leadership training opportunities.
 - By end of FY 2012, Board will have completed orientation and training retreat.
- Achieve and maintain full Board membership.
 - Develop and implement Board recruitment and retention plan.
 - By January 2012, will have completed and implemented Board recruitment and retention plan.
 - By end of FY 2012, Board will have achieved full membership roster.
 - By end of FY 2012, Board member attendance at meetings will be at least 75%.
- Establish greater continuity in organizational leadership.

- Develop organization-wide succession plan.
 - By end of FY 2012, will have completed and implemented staff succession plan.

LONG-TERM STRATEGIC GOALS:

Agency-wide –

- Fully utilize organizational capacity to serve clients. (Efficiency)
- Improve integration of clients in their communities. (Effectiveness)
- Enhance community outreach service options for clients. (Service Access)

Service Units, by Recommended Disability Focus Areas --

- Mental Health --Local integration of behavioral and primary healthcare services; decreased hospitalizations; increased in-home therapeutic services; decreased “no-show” rates.
- Addictive Diseases – Improved communications with referral sources and law enforcement; increased public awareness regarding addiction and available services; development of recovery center program.
- Developmental Disabilities –Improved safety standards for vehicles and facilities; facilitating of client moves to less restrictive levels of care.

FY 2012 OBJECTIVES, STRATEGIES, AND OUTCOMES/OUTPUTS:

Agency-wide:

- Increase organizational capacity to serve clients. (Efficiency)
 - Improve clinic and service unit efficiencies; e.g., no-show rates, turn-around times, better scheduling, through training and monitoring procedures
 - By the end of FY 2012, no-show or no-attend rates at clinics and service units will be reduced by at least 10%.
- Utilize clinical best practices to develop better community integration of clients served by agency. (Effectiveness)
 - All service units will utilize best practices in the areas of client employment, community living, and recovery.
 - By the end of FY 2012, all service units that provide community integration activities will have the use of at least one documented best practice in which employees have received training.
- Develop new or alternative services for delivery outside of traditional service settings.
 - Service units will develop or expand outreach capability in local communities.

- By the end of FY 2012, each direct service units will have documented the development or expansion of at least one service to be delivered outside of the unit; e.g., home- or employment-based services.

Service Units --

Each service unit will establish at least one efficiency goal, one effectiveness goal, and one service access goal. Individual unit planning will be based upon the recommended disability focus areas and agency-wide objectives above. Unit goals, performance indicators, and findings will be documented in the FY 2012 Outcome Management Plan.

LONG-TERM STRATEGIC GOALS:

- Achieve greater financial solvency. (Efficiency)
- Achieve greater revenue diversification. (Efficiency)

FY 2012 OBJECTIVES, STRATEGIES, AND OUTCOMES/OUTPUTS:

- Achieve greater financial solvency.
 - Ensure an annual 4% agency margin through monthly monitoring of revenues and expenses.
 - By January 2012, all service units will have achieved the revenue margin, and will maintain it through the end of the fiscal year.
- Achieve greater revenue diversification.
 - Increase insurance and self-pay collections through staff instruction and monitoring.
 - By end of FY 2012, insurance and self-pay collections will each have increased by 5%.
 - Develop additional sources of revenue, such as providing EAP services, drug screening, and training to general public.
 - By end of FY 2012, other sources of agency revenue will have increased from 0% to .25%.

LONG-TERM STRATEGIC GOALS:

- Enhance information technology proficiencies. (Effectiveness & Efficiency)
- Ensure regulatory and accreditation compliance. (Effectiveness)
- Improve transportation capabilities. (Efficiency)

FY 2012 OBJECTIVES, STRATEGIES, AND OUTCOMES/OUTPUTS:

- Enhance information technology proficiencies.
 - Complete full implementation of electronic health record.
 - By July 1, 2011, all service staff will be fully utilizing electronic health records for client services.
- Ensure regulatory and accreditation compliance.
 - Pursue CARF three-year reaccreditation.
 - By end of FY 2012, agency will have successfully achieved full three-year reaccreditation.
 - Enhance internal auditing and monitoring procedures by CQI/compliance office.
 - By end of FY 2012, agency will be in compliance/receiving acceptable scores from all regulatory groups, including APS, ORS, DCH, and CARF.
- Improve transportation capabilities.
 - Pursue funding for replacement vehicles.
 - By end of FY 2012, agency will have replaced at least 3 unsatisfactory vehicles with new or low-mileage used vehicles.

LONG-TERM STRATEGIC GOALS:

- Decrease staff turnover and absenteeism.
- Decrease staff absenteeism. (Efficiency)
- Enhance staff development opportunities. (Effectiveness)

FY 2012 OBJECTIVES, STRATEGIES, AND OUTCOMES/OUTPUTS:

- Improve staff retention.
 - Develop a precise measurement tool to measure staff turnover and develop a retention plan with performance indicators for years 2-3 of plan.
 - By July 1, 2012, staff retention measurement tool and retention plan will have been developed and implemented.
- Decrease staff absenteeism.
 - Develop a precise measurement tool to measure absenteeism and develop a reduction plan with performance indicators for years 2-3 of plan.
 - By July 1, 2012, staff absenteeism measurement tool and absenteeism reduction plan will have been developed and implemented.
- Increase staff opportunities in the work environment.
 - Convene and develop new EEO Committee.
 - By September 1, 2012, EEO Handbook will be completed and committee members will have received orientation/training.

- By July 1, 2012, EEO Committee will have completed at least 6 focus groups and one staff satisfaction survey.



LONG-TERM STRATEGIC GOALS:

- Increase community awareness. (Effectiveness)
- Increase involvement in non-mission activities that benefit community and increase agency revenues. (Effectiveness & Efficiency)

FY 2012 OBJECTIVES, STRATEGIES, AND OUTCOMES/OUTPUTS:

- Increase community awareness through public relations and community awareness activities.
 - Agency will develop regular activities to highlight services and community needs; e.g., newspaper articles, public service announcements, etc.
 - At least one public relations/community awareness activity will occur each month.
 - By end of FY 2012, agency referrals will have increased by at least 10%.
 - Increase involvement in non-mission activities that benefit community
 - Establish strategic partnerships with other providers and businesses.
 - By end of FY 2012, agency will have established MOUs with at least 3 additional strategic partners.
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