

## PBH Local Business Plan Goals 2007 - 2010

|    | Performance Goal  | Due Date   | Department or Cross Functional Team                   |
|----|---|--|---|
| 1. | <b>Major Initiative: Standardization of PBH Operations with Managed Care Entities</b><br><u>Objective:</u> Attain NCQA accreditation  | 1-1-09   | PBH Executive Cabinet                                 |
| 2. | <b>Major Initiative: Implement Provider Performance Profile System</b>  | Ongoing  | Quality Management Department                         |
| 3. | <b>Major Initiative: Develop and implement system to measure individual consumer outcomes</b>   | 1-1-08 Plan developed, begin to implement<br>6-30-10 Measure results   | Quality Management Department                         |
| 4. | <b>Major Initiative: implement the CMS Quality Framework for the Innovations Waiver</b>   | 7-1-07 Begin gap analysis; develop plan to address   | Waiver Oversight<br>Quality Management                |
| 5. | <b>Major Initiative: Develop an Education and Outreach plan that engages schools and other public service agencies to address the special needs of children with behavioral-emotional-developmental problems.</b><br><br><u>Objective:</u> Engage stakeholders and develop a three year plan of outreach and education. | 6-30-08 Plan Completed<br>6-30-09 Plan implemented<br>6-30-10 Evaluation of the plan   | Community Relations Department                        |
| 6. | <b>Major Initiative: Strengthen Consumer Empowerment</b><br><br><u>Objective:</u> Develop plan to increase engagement in activities and initiatives that promote recovery and empowerment including educational activities, recovery awareness training, crisis plans and advance directives, etc.                      | 7-1-07 Evaluation of goals and objectives is completed<br><br>1-1-08 Plan developed, begin implementation<br><br>1-1-10 Implementation completed | Office of Consumer Affairs<br><br>Community Relations |
| 7. | <b>Major Initiative: Increase education and informal supports for families and caregivers of people with mental illness.</b><br><br><u>Objective:</u> Develop plan to increase  | 1-1-08 Plan Completed, begin implementation<br><br>6-30-09 Implementation completed; identified unmet needs and revise                           | Community Relations<br><br>Office of Consumer Affairs |

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|     | education, outreach and support for families and caregivers.   | plan as needed   |  |
| 8.  | <b>Management Improvement: Efficiency of Operations</b><br><u>Objective:</u> Complete development of process maps for all agency functions; identify areas for improvement and develop maps and document processes that support the identified efficiencies.                                     | 9-1-07   | PBH Executive Cabinet  |
| 9.  | <b>Management Improvement: Board Composition</b><br>Achieve compliance with new statutes specifying Board Member composition as new members are appointed.   | 6-30-09  | PBH Board of Directors<br><br>County Commissioners                       |
| 10. | <b>Management Improvement: PBH to become fully operational as a data driven organization.</b><br><br><u>Objective:</u> PBH will utilize a real time (current information) data driven process for monitoring performance and making strategic adjustments in operational strategies.             | 07-08: Risk Management Indicators are supported by reports and risk thresholds<br><br>08-09: Aggregate data is available for system quality indicators that can be used for both PBH Internal Improvement Measurements and Provider Performance Measurements<br><br>09-10: Individual Consumer Outcomes data is available as information that can be used to assess system and individual provider abilities to improve life for consumers | Data Management and Decision Support Team                                |
| 11. | <b>Management Improvement: Develop parameters for the evaluation of provider payment rates and establish process to revise rates when indicated.</b><br><u>Objective:</u> PBH will identify methodology for rate evaluation such as benchmarking, cost modeling, or retrospective cost analysis. | 07-08 Develop Process and adjust rates for key services including Psychiatry<br><br>08-09 Develop process for systematic review of rates   | PBH Finance Department<br><br>Financial Operations Cross Functional Team |
| 12. | <b>Management Improvement: Evaluate web based billing system to identify provider friendly improvements.</b>   | 07-08<br>Develop Business Operations Subcommittee of the Provider  | PBH Business Process Cross Functional Team                               |

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|     | <p><u>Objective:</u> Identify provider priorities, evaluate feasibility of changes, and implement strategies to enhance billing process.</p>   | <p>Council.</p> <p>Identify priorities, evaluate and develop work plan with timeframes.</p>                                    |   |
| 13. | <p><b>Management Improvement: Improve HIPAA billing process and performance of the 837-I transaction.</b></p> <p><u>Objective:</u> Identify performance problems and develop plan to address.</p>  | 07-08 or sooner  | PBH Business Process Cross Functional Team                            |
| 14. | <p><b>Management Improvement: Streamline contracting process and develop contracts customized for type of service.</b></p> <p><u>Objective:</u> Develop contract prototypes and obtain DHHS approval. NOTE: Individual customization will be limited by state statutes requiring DHHS approval of contract formats. This goal may not be fully attainable.</p> | <p>Obtain DHHS approval prior to May 1, 2007.</p> <p>07-08</p> <p>Implement more customized contracts for type of service.</p> | Network Department  |
| 15. | <p><b>Management Improvement: Improve reporting outcomes to DMH; work with DMA to provide encounter data when they are able to receive this information.</b></p> <p><u>Objective:</u> Continue collaborative activities to resolve differences between PBH reporting and DMH system expectations.</p>  | 07-08 or sooner  | Information Systems Department  |
| 16. | <p><b>Management Improvement: DD waiting list management.</b></p> <p><u>Objective:</u> Improve capacity to collect and expeditiously provide information on people waiting for services by service type, age, disability, and other key factors.</p>   | 9-1-07   | PBH Access Unit of the Utilization and Clinical Management Department |
| 17. | <p><b>Management Improvement: Develop "clearinghouse" capacity for tracking and management of program openings in provider services and key generic services such as housing.</b></p>  | <p>6-30-08 design system</p> <p>6-30-09 System implemented</p>   | PBH Access Unit of the Utilization and Clinical Management Department |

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|     | <p><u>Objective:</u> Design system for reporting and disseminating information to consumers, providers and others about specific program capacity (such as bed availability).</p>   | 6-30-10 Evaluate system adequacy  |                                     |
| 18. | <p><b>Management Improvement: Improve standard authorization process; make this more efficient and provider friendly.</b></p> <p><u>Objective:</u> Work with Business Operations Sub-Committee of the Provider Council to evaluate problems and identify mutually agreeable solutions.</p>                              | 1-1-08 Complete   | Utilization Management Department   |
| 19. | <p><b>Management Improvement: Authorization of long term care has followed a short term care model and is not efficient; burdensome for providers.</b></p> <p><u>Objective:</u> Work with Business Operations Sub-Committee of the Provider Council to evaluate problems and identify mutually agreeable solutions.</p> | 1-1-08 complete   | Utilization Management Department   |
| 20. | <p><b>Management Improvement: Focus of UM activities should be on utilization review (concurrent and retrospective).</b></p> <p><u>Objective:</u> Improve capacity to effectively manage care for more efficient use of management resources. Develop Care Management per Barbara Mauer Care Coordination model.</p>    | <p>7-1-07 UM plan reflects changes</p> <p>6-30-08 Evaluate progress; revise plan as needed</p> <p>6-30-09 Evaluate progress; revise plan as needed.</p> | Utilization Management Department   |
| 21. | <p><b>Area of Improvement: The PBH Quality Management Department should monitor both internal and external quality.</b></p> <p><u>Objective:</u> The Quality Management Department will assume monitoring of internal</p>   | 1-1-07 begin  | Quality Management Department       |

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|     | quality indicators.  |   |   |
| 22. | <p><b>System Improvement: Improve clinical competency of providers in provision of community services.</b></p> <p><u>Objective:</u> Develop strategies in collaboration with providers to improve clinical oversight of community service provision.</p>   | <p>6-30-08 Plan for Improvement; identify outcomes</p> <p>6-30-09 Plan implemented</p> <p>6-30-10 Measure outcomes</p>  | Network Operations Department   |
| 23. | <p><b>System Improvement: Increase quality of Person Centered Plans.</b></p> <p><u>Objective:</u> Person Centered Plans reflect the unique needs and preferences of the person as well as disability related treatment and habilitation goals.</p>   | <p>6-30-08 Process to measure quality of person centered plans is developed</p> <p>6-30-09 Training completed, sampling of plans for improved quality</p> <p>6-30-10 Evaluate effectiveness of training in terms of improved quality of plans</p>   | <p>Network Operations Department</p> <p>Quality Management Department</p> |
| 24. | <p><b>System Improvement: reduce provider staff turnover rates.</b></p> <p><u>Objective:</u> Work with the PBH Provider Council to identify strategies to reduce staff turnover rates.</p>   | <p>6-30-08 Plan developed</p> <p>6-30-09 Plan fully implemented</p> <p>6-30-10 Measure for improvements</p>   | <p>Network Operations Department</p> <p>Quality Management Department</p> |
| 25. | <p><b>System Improvement: Increase access to psychiatric services: adult and child</b></p> <p><u>Objective:</u> Develop and implement the revised model of the Comprehensive Community Providers to improve choice and access to psychiatric care.</p> <p>Implement telemedicine to increase access to psychiatric care.</p> | <p>6-30-08 Initial implementation of new CCP model; baseline measurement of capacity. Implement tele-psychiatry in CCP providers.</p> <p>6-30-09 Measure utilization of psychiatry by provider; evaluate satisfaction</p> <p>6-30-10 Continue to measure utilization and satisfaction</p> | <p>Network Operations Department</p> <p>Quality Management Department</p> |
| 26. | <p><b>System Improvement: the rate of out of home placement for children is decreased; community and home based options are increased especially response to crisis.</b></p> <p><u>Objective:</u> Continue efforts to develop a</p>  | <p>6-30-07 Crisis respite services have been implemented. Children have increased access to child psychiatry.</p> <p>6-30-10 Rates of residential placement for children have</p>   | <p>Network Operations</p> <p>Care Management Team</p>                     |

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|     | community based system of care for children, including crisis response services in order to decrease out of home placement for children.   | decreased by at least 10%.   |  |
| 27. | <p><b>System Improvement: reduce utilization of state facilities including Psychiatric Hospitals and Developmental Centers.</b></p> <p>Objective: Develop Olmstead plans for MH and DD consumers to ensure movement of consumers to the community and adequacy of community system of care to meet their needs.</p>  | <p>1-1-08 Updated Olmstead Plan</p> <p>1-1-10 Evaluate whether goals have been met</p>   | Waiver Management Cross Functional Team  |
| 28. | <p><b>System Improvement: Enhance viability of Comprehensive Community Providers, including DAYMARK Recovery Services; ensure ongoing viability and financial stability; thus improving their ability to function as clinical homes for consumers with MH-SA disabilities.</b></p> <p>Objective: Implementation of CCP Model as redesigned: expand roles and responsibilities of CCPs as the Clinical Home for consumers in their care.</p>                | <p>6-30-08 Implementation of new CCP model is completed.</p> <p>6-30-09 Monitor performance, billing, and financial viability of providers. Measure identified consumer outcomes.</p> <p>6-30-10 Evaluate model against identified goals and desired outcomes.</p> | <p>Network Operations Department</p> <p>Care Management Team</p> <p>Financial Operations Team</p> <p>Quality Management Department</p> |
| 29. | <p><b>System Improvement: Improve access and quality of crisis intervention services</b></p> <p>Objective: Develop a Crisis Continuum as per the PBH Crisis System Development Plan. The plan will address:</p> <ul style="list-style-type: none"> <li>• DD crisis response and alternative to hospitalization</li> <li>• Child crisis continuum including crisis respite</li> <li>• Substance abusers in crisis and dually diagnosed consumers</li> </ul> | 6-30-07 Plan has been fully implemented and evaluation of identified objectives and desired outcomes has been completed.   | <p>Network Operations Department</p> <p>Care Management Team</p>   |

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|     | <ul style="list-style-type: none"> <li>Determine community hospital capacity needed</li> <li>Increase facility based crisis capacity for adults</li> <li>Monitor outcomes and efficiency of mobile crisis program</li> <li>CIT training available for local law enforcement agencies.</li> </ul>   |  |  |
| 30. | <p><b>System Improvement: PBH does not have an adequate array of services for substance abuse treatment; develop and implement a plan to improve services.</b></p> <p><u>Objective:</u> develop and implement plan that addresses</p> <ul style="list-style-type: none"> <li>Resources for detoxification</li> <li>Dually diagnosed</li> <li>Continuum of treatment options as per ASAM levels</li> <li>Specific services for adolescents</li> </ul> <p>The plan will specify priorities for service development and a timeline for implementation. Goals and desired outcomes will be delineated.</p> | 6-30-10 Plan has been implemented and goals and outcomes measured.   | Network Operations                                   |
| 31. | <p><b>System Improvement: PBH has not engaged in focused activities to meet the MH-SA treatment needs of the criminal justice population; there is a need for increased collaboration with agencies serving these populations.</b></p> <p><u>Objective:</u> Develop and implement a Criminal Justice/Juvenile Justice outreach plan</p> <ul style="list-style-type: none"> <li>Address sub-population of sex offenders and needed services</li> <li>Collaboration with the courts, Department of Social Services and other coordinating agencies</li> </ul>  | <p>6-30-08 Plan is developed</p> <p>6-30-09 Plan has been implemented</p> <p>6-30-10 Evaluation of goals and outcomes.</p> | <p>Network Operations</p> <p>Community Relations</p> |

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| 32. | <p><b>System Improvement: Affordable housing for people with disabilities is essential for recovery and independence; there is not adequate housing for people with disabilities in the PBH counties.</b></p> <p><u>Objective:</u> Continue efforts to develop housing resources through the Piedmont Regional Continuum of Care. Implement PBH Housing Plan.</p> | 6-30-09 Housing Plan fully implemented  | <p>Community Relations</p> <p>Network Operations</p> |
| 33. | <p><b>System Improvement: Increase cultural competency across the PBH network, including activities inclusive of the Hispanic Population.</b></p> <p><u>Objective:</u> Over the next three years, fully implement the PBH Cultural Competency Plans, the Latino Outreach Plan, and Title VI compliance plan.</p>  | 6-30-10 Implementation is completed as well as follow up evaluation of progress and changes to the system as a result of these initiatives. | Community Relations Department                       |
| 34. | <p><b>Improvement Area: Increase collaboration with Community Care Network of NC</b></p> <p><u>Objective:</u> Achieve structured and regular collaboration in Care Management Activities between PBH Care/Case Managers and CCNC RN Case Managers for all five PBH counties (and three CCNC local networks)</p>   | 6-30-09   | Office of the CEO (lead responsibility)              |