Milwaukee County Behavioral Health Division

EXECUTIVE SUMMARY

STRATEGIC PLAN

2002 – 2004

November, 2001
Executive Summary

In 1993 the Milwaukee County Mental Health Division developed a Master Plan for the design, operation and resource management of the public mental health system in Milwaukee County. The strategies outlined in that Master Plan have been implemented over the past six years, resulting in significant changes and improvements in the Milwaukee County public mental health system. The most notable of these improvements have been:

1. Unification of mental health inpatient and facility operations with community-based mental health service operations.
2. Reduction in the size of the County operated inpatient service from 774 to 334 beds.
3. Development of extensive new community-based case management, supported housing, and psychosocial rehabilitation resources for adults with serious mental illness substance abuse disorders. Increase in persons served in long-term community support programs from 700 to 2,400.

Having completed many of the strategies contained in the original Master Plan, the Milwaukee County Mental Health Division decided to embark on a new strategic planning process in 1999. The Strategic Plan 2002 – 2004 that follows is a result of that planning process. The Technical Assistance Collaborative, Inc., a non-profit organization that works extensively with state and county mental health authorities, has assisted the Mental Health Division in the development of the strategic plan.

The strategic planning process included the collection and analysis of a considerable amount of information, including (a) interviews with over 100 individuals, including consumers, family members, community leaders, providers, and direct care staff; (b) reviews of numerous documents and statistical and financial reports; and (c) reviews of relevant State of Wisconsin and Federal documents to identify trends and initiatives that could affect the strategic options of the Milwaukee County Mental Health Division. The planning process has been supported by a Steering Committee comprised of over 62 stakeholders representing consumers, family members, providers, Division staff, elected officials, organized labor, and other County departments. This Steering Committee will have met nine times in the course of the planning project, and has provided valuable insight and recommendations in support of the process. A list of the Steering Committee members is included in Appendix A.
The new Strategic Plan 2002 – 2004 builds on the progress made under the Master Plan, both in terms of continued development and enhancement of the governance and operations for the Mental Health Division, and in terms of continued development of best practice community service models. In addition, the new strategic plan addresses child and adolescent mental health services, and services to persons with developmental disabilities, mental illness, and substance abuse disorders that were not included in the Master Plan.

Most importantly, this is a balanced strategic plan: it works toward the best use of both County-operated and contracted services; it makes the best of being part of County government while at the same time taking advantage of some of the advantages of working in the private sector; and it maintains County-operated safety net services while at the same time reaching out to the community to provide integrated and coordinated community-based services. The plan confronts, in a reasonable and balanced way, the inherent tensions between a County-operated facility-based service system and a non-profit community-based system, and takes advantage of the best of both of those approaches.

The first step in strategic planning was the review and adoption of a new mission and vision. The new mission statement is:

The Milwaukee County Behavioral Health Division:
For the empowerment and recovery of all with behavioral health and substance abuse treatment needs in our community

The revised vision statement is included in Section II of the Strategic Plan.

The priority strategies selected for the Strategic Plan 2002 – 2004 are summarized below:

Strategy #1: Develop the structure and functions of the Milwaukee County Behavioral Health Division to facilitate attainment of the Division’s mission and vision

Objective 1.1 Maintain and strengthen the behavioral health authority as part of County government.

Objective 1.2 An effective and functioning system that appropriately diverts people with mental illness and substance abuse issues from the criminal justice system is implemented.
Objective 1.3 Proper coordination and integration of all County services and other services in the community are assured. These include primary health care, prevention and early intervention services, substance abuse services, aging, housing, education, vocational services, child welfare, and adult and youth criminal justice services, and faith based community services.

Objective 1.4 A clear and distinct set of behavioral health gate-keeping and authority functions that are separate from the Division’s functions as a direct provider of services is developed.

Objective 1.5 The involvement of consumers and families in all aspects of Behavioral Health Division operations, including planning, policy development, quality improvement, service system evaluation, leadership and employment is expanded.

Objective 1.6 Housing issues for people with mental illness and substance abuse disorders are addressed effectively and are consistent with the principles of recovery.

Strategy #2: Continue to improve the Milwaukee County public behavioral health system consistent with evidence-based best practices and the Division’s mission and vision

Objective 2.1 Best practices related to recovery and state-of-the-art clinical care are implemented throughout the system and disseminated to all partner agencies.

Objective 2.2 Maintain and enhance the Behavioral Health Division’s role as a provider of crisis services and as gatekeeper to inpatient and community-based services.

Objective 2.3 Wraparound Milwaukee continues to develop and expand its program for youth with serious emotional disturbances not in the juvenile justice system. Continue to manage and reduce as much as possible the use of inpatient hospital and intensive residential services for youth in Milwaukee County.

Objective 2.4 In partnership with the Adult Services Division and Department on Aging develop effective planning and services for youth transitioning to the adult behavioral health system and adults transferring to the aging system. Partnerships created with other community organizations enhance outreach, prevention, and education activities.
Objective 2.5: Community-based (i.e. non-institutional) services for adults with serious mental illness and substance abuse disorders are maintained and developed with an emphasis on recovery-oriented services such as supported employment, supported housing, and peer-to-peer supports.

Objective 2.6: Community options that best meet the needs of the current residents of Hilltop, their families and guardians, are developed and implemented.

Objective 2.7: County operations of the inpatient psychiatric rehabilitation program (the IMD) with the number of beds necessary for this level of care for adults residing in Milwaukee County are maintained.

Objective 2.8: The delivery of acute psychiatric inpatient treatment for both adults and children currently served at the Behavioral Health Division’s inpatient facility is cost-effective and of high quality.

Objective 2.9: Cultural competence is evident at all levels of the Milwaukee County public mental health system.

Strategy #3: Implement improved management strategies and capacities to support authority and service management functions, and to assure stewardship of public resources

Objective 3.1: Care coordination, financial management, and information technology necessary to implement the State’s managed behavioral health care initiative and to manage in a risk environment are developed and implemented.

Objective 3.2: A human resources development plan that addresses the training needs of all County and contracted vendor employees is developed and implemented.

Objective 3.3: Business processes that reflect a rapidly changing healthcare environment are implemented.

Strategy #4: Adequate funding to provide high quality services with competent and well-trained staff is assured

Objective 4.1: Advocate with the State for improved State/Federal funding.

Objective 4.2: Additional sources of funding are aggressively sought.