AOPMHC Performance Improvement Plan 2016

COMMUNITY PARTNERSHIPS

COLLABORATION WITH SCHOOL DISTRICTS
AOPMHC recognizes the importance of children’s/adolescent’s access to services in the context of their educational environments. Access to these services subsequently influences their behavior patterns and relationships. AOPMHC has expanded our School-Based program to include an additional clinician in both Pickens and Anderson Counties. AOPMHC will continue working with Anderson and Pickens County School Districts to expand School-Based Services in those areas. We will be working with private partners to expand services in Oconee County. Coordination continues with Pickens, Oconee and Anderson County school districts to ensure that RBHS services provided by these districts compliment the services provided by AOPMHC, ensuring continuity of care.

COMMUNITY ADVOCACY GROUPS
AOPMHC recognizes the need for community partners in addressing the needs of persons served without creating a hardship on another agency or division of services. AOPMHC will continue hosting the Probate Judges Forum to further develop working relationships with law enforcement, local hospitals and other community stakeholders. The Center will monitor Emergency Room waiting days for involuntary commitment as well as State Hospital admissions for our catchment area. AOPMHC will identify other agencies and faith communities for development of ongoing community partnerships.

LOCAL HOSPITALS
AOPMHC acknowledges the need for mental health services within local hospitals. We currently have one clinician based in a hospital in each of the three counties. We will continue to develop our relationships with local hospitals and provide treatment recommendations to patients waiting for inpatient hospitalization. The assistant director participates in the Healthy Outcomes Plan (HOP) by coordinating care in support of our local hospitals. This model focuses on discussing admissions and readmissions while addressing physical and mental health needs of patients. AOPMHC will continue striving to combine efforts toward meeting those needs.

LOCAL JAILS
AOPMHC is aware of the need for mental health services within local detention centers. We currently have staff responding to detention centers in all three counties. AOPMHC aims to improve patient stabilization in these facilities by improving their access to care.

COLLABORATION WITH LOCAL GOVERNMENT
AOPMHC participates in the Economic Development Board in an effort to eradicate barriers to accessing mental health and community needs. In conjunction with other local agencies, we plan to continue to conduct community job fairs to promote development of competitive...
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employment opportunities. AOPMHC’s participation in this board will also provide possible solutions to identified barriers to assist in meeting patient needs.

**ACCESS TO SERVICES**

**SERVICE ACCESSIBILITY**

In partnership with SCDMH Central Office, AOPMHC recognizes the need for quick access to services for persons in the community. We will continue to actively pursue ways to improve in this area. AOPMHC will assess the viability of instant access protocols. AOPMHC is working in collaboration with SCDMH central office to streamline the intake documentation requirements. We will continue to run monthly reports on access to services and present the results to the management team. This will allow for identification of trends and issues centers may be having. To improve clinician availability to active patients, AOPMHC is working to reduce clinician caseloads. All clinics have recently acquired an administrative assistant to assist the clinic in meeting patient scheduling needs. AOPMHC plans to assess the scheduling process to better define schedulers’ roles and responsibilities. In addition, we plan to develop a position in each county to increasingly engage patients in treatment.

**OUTSTATION MENTAL HEALTH SERVICES**

AOPMHC recognizes the transportation difficulties that become more pronounced in rural areas. These can potentially result in barriers to treatment access. AOPMHC is continuously open to opportunities to partner with churches and government agencies to utilize space for out-stationed Mental Health Services that are more accessible to rural communities. We plan to continue out-stationed clinicians at DSS in two counties and DJJ in one to provide ease of access with sister agencies. School Based services are available in all three counties in schools selected by the Districts. These services provide counselors directly where the students are located to minimize disruption in the students learning environment. AOPMHC plans to continue targeting rural or high need areas for SBS expansion.

**RECRUITMENT OF MEDICAL STAFF**

**PSYCHIATRISTS**

AOPMHC continues to recruit psychiatrists and currently is seeking to fill 2 staff vacancies. AOPMHC is still hiring as Locum tenens and telepsychiatry physicians fill the gap of employment needs. In addition, we will continue to rotate medical students from MUSC and Via College of Medicine through the center, which may lead to resident rotations and recruitment opportunities in the future.

**ADDITIONAL MEDICAL STAFF**
AOPMHC recognizes the impact of medical conditions on mental health treatment. In order to provide our patients with holistic care, AOPMHC has created a variety of additional medical staff positions. We plan to fill new nursing positions and explore APRN options. We plan to hire LPNs to assist patients in obtaining medications through the patient assistance program across all counties.

**SERVICE MIX DIVERSITY**

**EMPLOYMENT SERVICES (IPS)**

AOPMHC acknowledges the positive impact employment can have on a patients’ quality of life. The positive results of this program encourage community integration, recovery and personal success for the patient. AOPMHC plans to expand the IPS program to include Pickens and Oconee Counties.

**PEER SUPPORT SERVICES (PSS)**

AOPMHC recognizes the importance of peer support in the development of hope and maintenance of therapeutic gains. AOPMHC has developed a peer support program with two part-time peer support specialists currently providing services in Anderson, Pickens and Oconee Counties. Due to the success of this program, AOPMHC plans to explore a possibility of full-time staff to expand the reach of peer support services.

**STAFF DEVELOPMENT**

**EMPLOYEE RELATIONS COMMITTEE**

AOPMHC recognizes the influence of positive morale on the health of the organization through employee incentives and staff development. AOPMHC will continue to partner with staff members from all departments of the Center in order to develop motivational events and incentive ideas. The employee incentive committee will review information from suggestion boxes and staff surveys for input/feedback from all staff members. Additionally, AOPMHC will continue to have an annual all-staff meeting where employees from all departments and areas can network and build relationships. An employee of the quarter is selected by all staff and presented with a plaque by the executive director. We will continue this practice in an effort to support and encourage hard work within the agency.

**CLINICAL SUPERVISION**

AOPMHC acknowledges the need to improve the efficiency of service delivery while maximizing the quality of care received by persons served. AOPMHC tasks supervisors to monitor and assist clinical staff members with maximizing their time management. Supervisors will work with staff members to identify inactive records in need of case closure, review cases appropriate for transition to Medication Management Program and identify/address any barriers to
productivity requirements. AOPMHC recognizes the impact of support within the workplace. We will continue to offer clinical supervision to clinicians seeking licensure.

QUALITY ASSURANCE

AOPMHC tasks Quality Assurance with the review of current service delivery methods to determine whether all billable services are captured by staff and are completed with appropriate documentation. Quarterly audits and peer audits will continue as scheduled with subsequent training based on the results. Focus audits will be conducted when warranted or requested by a supervisor and an appropriate corrective action plan will be developed. Communication with Central Office will assist in identifying areas in need of improvement. In addition, the Quality Assurance department will provide follow-up training for new employees. This will be a time to review documentation and address any issues identified early on. To further improve AOPMHC’s efficiency in service delivery, Quality Assurance will provide reports to clinical staff and management to assist in caseload management.