

"Tropical Texas Behavioral Health improves the lives of people with behavioral health needs through the efficient and effective provision of quality services delivered with respect, dignity, cultural sensitivity, and a focus on recovery."

STRATEGIC PLAN FY 2019 CONTENTS

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I. EXECUTIVE SUMMARY

The Fiscal Year (FY) 2019 Strategic Plan for Tropical Texas Behavioral Health (TTBH) anticipates the upcoming legislative session will be challenging for human service industries. Mid-year in 2018 TTBH was in receipt of additional funds for the Psychiatric Inpatient beds that greatly helped meet this local demand in the Rio Grande Valley. Supported housing funds remain tight and closely reviewed. TTBH continues to expand the dual diagnosis substance use disorder treatment and detoxification services. TTBH's leadership continues to proactively plan for possible funding opportunities. South Texas is an area of significant population growth with a matching demand for For the CMS/HHSC Healthcare Transformation and Quality TTBH services. Improvement waiver, TTBH leadership selected the set of measures and are in the process of capturing data for the baseline. TTBH continues working on sustainability of the innovative programs that have transformed the health care delivery system for low income Texans and increased access to quality preventative primary and behavioral health care services. It has been a process of clarifying expectations and shifting from performance management to an outcome-based methodology. It is anticipated that HHSC will make adjustments on an ongoing basis. As TTBH was about to open their third "reverse co-location" integrated care clinic, TTBH partnered with Methodist Healthcare Ministries and a local foundation to join in National research of this type of model. In FY2019 TTBH will publish the outcome of this cutting-edge research in numerous medical journals.

In FY2018 TTBH stayed the course as a designated Certified Community Behavioral Health Centers (CCBHC) and in FY 2019 will continue work with State leaders to develop tools to get all Community Centers in Texas on the path to become CCBHCs. Although funding hasn't reached TTBH, the State continues to support the movement to CCBHC models of care.

Tropical Texas Behavioral Health is a leader in the innovative management and provision of healthcare for our local communities. The Center follows its Mission Statement of "improving the lives of people with behavioral health needs through the efficient and effective provision of quality services delivered with respect, dignity, cultural sensitivity, and a focus on recovery." This mission is indicative of the Center's total commitment to providing healthcare services that will improve the quality of life for individuals served.

The Center has established goals and objectives to act as a guide in achieving our mission. Information is collected through the analysis of the internal/external environments and organizations, as well as consulting groups. This Strategic Plan provides guidance for promoting linkage and cohesion among the various functional components of outcome-based quality management, business and utilization management plans. TTBH is proud of the accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF) which commenced in August of 2008. As of the August 2014 CARF survey the following programs are accredited: Assertive Community Treatment-Mental Health Adults; Outpatient Treatment-Mental Health

Adults; Outpatient Treatment-Mental Health Children and Adolescents; Governance: Crisis Services; and MH Case Management. During the July 2017 CARF Survey TTBH added Integrated BH/Primary Care, Supported Living (Housing), Alcohol and Other Drugs (Substance Use Disorders), and Consumer-Run (Drop-In Centers). Tropical has more service lines accredited by CARF than any other Texas Community Behavioral Health Center.

The goals and objectives for the operational strategies fall under the following categories:

- □ Management of Human Resources
- Management of Fiscal Resources
- □ Management of Service Delivery
- Management of 1115 Waiver Projects
- Standards Compliance

These goals are continuously reassessed due to the constant change in the healthcare system throughout the state and across the nation. Progress on goals and objectives will be published for review by, and celebrated with, agency employees and stakeholders. Progress is presented and reviewed by the Board of Trustees on a regular and on-going basis. Many improvements have been realized by Tropical Texas Behavioral Health during the preceding twelve months, and many more opportunities for improvement exist. Undertaking the activities outlined in this strategic plan will result in the achievement and accomplishment of the goals/objectives and, ultimately, lead to fulfillment of the Center Vision Statement - "Tropical Texas Behavioral Health continues its commitment to excellence and will be an innovative provider of comprehensive and compassionate recovery-oriented services to individuals with behavioral health needs. We will treat all stakeholders with honesty, fairness and respect."

II. OVERVIEW

A. STRENGTHS, WEAKNESSES, OPPORTUNITIES, THREATS (SWOT analysis)

Strengths

- 1. Dedication to clients
- 2. Quality of service provision
- 3. Financial position
- 4. Solid relationships with local stakeholders
- 5. Lean organization administrative overhead costs low
- 6. Adaptable/flexible staff
- 7. Change oriented
- 8. High level of client satisfaction
- 9. Understanding numerous external requirements

- 10. Advocate on behalf of clients
- 11. Involvement in the Community Center system, viewed as leaders and a valuable resource, statewide.
- 12. Integrity
- 13. Strong productivity of staff
- 14. New/renovated facilities
- 15. CARF accreditation of key programs
- 16. Expanded crisis services
- 17. Expanded funding for local in-patient psychiatric care
- 18. Innovative use of technology
- 19. Fully electronic health record (EHR)
- 20. Involvement in State and National improvement projects (Wraparound, ASIST, COPSD, Recovery, AOT, EOT, CCBHC)
- 21. Certified ASIST training site
- 22. Continued improvement in compensation package
- 23. Commitment and hard work of our improvement teams
- 24.50 years of services to the Rio Grande Valley
- 25. Leader in Mental Health First Aid
- 26. Tenured Staff

Weaknesses/Barriers

- 1. Limited physical environment (Space, Parking)
- 2. Under served area/recruitment challenges for licensed master level staff and physicians
- 3. Bureaucracy (reporting requirements, external audits, etc.)
- 4. Border Issues/Poverty
- 5. Transportation
- 6. Continual increasing demand for services
- 7. Turnover
- 8. Development of technology and its usability
- 9. Complicated processes
- 10. Lack of clear, consistent directives from funding sources
- 11. Complex regulatory environment
- 12. Individualized requirements for a large number of grants

Opportunities

- 1. Strong financial position
- 2. Improvement in service delivery
- 3. Leadership development (Staff strengthening, mentorship)
- 4. Skill Building
- 5. Employee engagement
- 6. Improve use of information systems to support and track performance improvement (analyze data more effectively)
- 7. Improve employee satisfaction
- 8. Enhance/Maximize Human Resources and Payroll software.
- 9. Community partnerships and support of other local community providers in their development of behavioral health resources

- 10. Medical school expansion and psychiatric residency program
- 11. Strengthen supervisory training
- 12. Substance Use Disorder Services
- 13. Succession Planning/Building the Bench
- 14. MCOs funding what TTBH is doing

Threats

- 1. Medicaid reform-managed care
- 2. Unknown managed care contracting and payment models
- 3. Economy
- 4. Increased demands of regulatory environment/contracts (targets, PASRR, etc.)
- 5. Local political environment
- 6. State budget concerns
- 7. Statewide forensic bed demand/civil bed capacity
- 8. Challenge to identify funding sources to sustain innovative programs
- 9. Federal requirements for CCBHC

B. VISION STATEMENT

Tropical Texas Behavioral Health continues its commitment to excellence and will be an innovative provider of comprehensive and compassionate recovery-oriented services to individuals with behavioral health needs. We will treat all stakeholders with honesty, fairness and respect.

C. MISSION STATEMENT

Tropical Texas Behavioral Health improves the lives of people with behavioral health needs through the efficient and effective provision of quality services delivered with respect, dignity, cultural sensitivity, and a focus on recovery.

D. PHILOSOPHY/CORE VALUES:

Ethical Tropical Texas Behavioral Health (TTBH) is committed to abide by all

honest, legal and moral principles in its operations.

Competent TTBH is committed to providing efficient and quality services through

qualified, trained and credentialed professional staff.

Trustworthy TTBH is committed to responsibly provide an organized system of care through the careful and planned expenditure of all available resources.

Dedicated TTBH is committed to the caring support of the individuals it is privileged

to serve.

Quality TTBH is committed to the provision of excellent customer service driven

by the needs of all people it serves.

TTBH is committed to furthering the interests of those served and to help Advocate

them lead meaningful lives as members of the community. This includes helping them to achieve their right to belong, to be valued, to participate

and to make meaningful contributions.

Resiliency TTBH is committed to using evidence-based practices which ensures the & Recovery provision of interventions with empirical support to eliminate or manage

symptoms and promote recovery.

Tropical Texas Behavioral Health

Strategic Plan

*Board Approval 10/16/18

1. Function and Purpose:

Management of Human Resources

Evidenced by the development and maintenance of an effective management team; maintaining staffing levels that ensure appropriate quality of services and safety for consumers; providing an effective mechanism for staff orientation and ongoing training and development; and ensuring that a positive and growth-oriented system of employee performance and evaluation is developed and implemented.

	NOT MET (No	MEETS	score	EXCEEDS	score	COMMENDABLE	score
	score)		1		2		3
Staff satisfaction survey results are positive and compare							
to national benchmarks. (5pt scale, 5 is highest)							
A.1. Score on "Grand Mean"	< 3	3.0 - 3.24		3.25 - 3.59		3.6 +	
Employee turnover is minimized in:							
B.1. Employees overall	> 27%	27-24.01%	-	24-20.01%		< 20%	
B.2. Turnover amount comprising employees with less than 2 year's experience	> 80%	75.01 - 80%		65.01 - 75%		< 65%	
. Number of adverse HR related outcomes	> 2	2		1		О	
Supervisor Training: number of trainings	< 3	3		4		5+	
Hiring timeliness: ave # of days from posting to hiring authority selection	> 35	35-30	_	30-25		< 25	
Totals :			0		0		0
Total possible score for this section:		18					
Sum of scores for this section:		0					

0.0000

Score

Acceptable controls in place for management of Center funds with timely reporting of financial status to the Board: the development and implementation of a balanced operating budget. (Any major funding reductions outside the Center's control will be taken in to consideration if applicable).

		NOT MET (No score)	MEETS	score 1	EXCEEDS	score 2	COMMENDABLE	score 3
Α.	Identified financial indicators (across FY):	, ,						
	 Debt Service Coverage Ratio 	< 1	1.25 - 1.5		1.51 - 1.75		1.76+	
	Days of Operating Reserve	< 60	60 - 90		91 - 99		100 +	
	3. Acid Test Ratio	< .25	.25 - 2.0		2.1 - 2.74		2.75 +	
	4. Current Ratio	< 1.75	1.75 - 4.0		4.01 - 4.25		4.26 +	
В.	Medicaid and other 3rd party claims							
	 Average days A/R % of Medicaid/Medicare claims 	90.1 +	90 - 74.99		75 - 60.01		60 or less	
	billed in 30 days	< 80%	80 - 84.99%		85 - 89.99%		90% or more	
	3. Collections of Billed Claims	< 80%	80%-84.99%		85%-89.99%		90%+	
C.	Administrative/indirect cost control Consumer benefits -	> 11.51%	11.5 - 11.01	-	11 - 10.52		< 10.51%	
D.	average # of	< 35	35 - 39.99		40 - 44.99		45+	
	applications submitted/month E.H.R. system functional							
E.	(downtime in hours/year)	< 98%	98 - 98.49%		98.5 - 99.49%		99.5%+	
	-unscheduled, based on 2080 work h users	ours, all						
	Reduce energy consumption system							
F.	wide, calculated per square foot	< .25%	.2549%		.599%		1% +	
G.	Medicaid Managed Care	0	1	_	2		3 +	

Alternative Payment Model Contracts Executed

Totals: 0 0 0 0

Total possible score for this section: 36

Implementation of systems for short/long term; maintenance of svcs to meet needs of the consumers the system serves. All systems are effective, efficient and incorporates a QA & improvement plan

		NOT MET (No score)	MEETS	score	EXCEEDS	score 2	COMMENDABLE	score 3	Note <u>s</u>
	Program Services / Chief Operating Officer								
A.	Client Satisfaction (based on national benchmarks, 5 pt scale, 5 is highest).								
	1. MH services - Overall Outcome	≤ 2.9	3.0 - 3.5		3.51 - 3.99		4 +		
	2. IDD services - Overall Outcome	≤ 2.9	3.0 - 3.5		3.51 - 3.99		4 +		
	3. SUD services - Overall Outcome	≤ 2.9	3.0 - 3.5		3.51 - 3.99		4 +		
В.	Prim Care services - Overall Outcome Clinical Outcomes	≤ 2.9	3.0 - 3.5		3.51 - 3.99		4 +		
	1. % of adults with a jail booking match	> 10	10-9.51		9.5-8.25		< 8.25		
	Quarterly IDD Community Service Target met	< 156	156 - 165		165 - 175		176+		
	4. Adult Monthly Svc Provision	< 63%	63-63.9		64-65		> 65 %		
	5. Kids Monthly Svc Provision	< 64	64-64.9		65-66		> 66 %		
	6. % adults with reliable improvement	< 20%	20-25		25.1 - 30		> 30 %		
	7. % Kids with reliable improvement	< 32%	32- 32.49		32.5-35		> 35 %		

	8. % of adults with independent employment	< 9.8 %	9.8 - 10 %	10.01 - 10.2 %	> 10.2 %	
	 % of TTBH crisis patients who avoid in- patient treatment for at least 30 days. 	< 75%	75 - 77.5 %	77.51 - 79.99 %	80 % +	
	10. % adults admitted to in-patient care3+ times in 180 days	> 0.3 %	0.29 - 0.27 %	0.274 - 0.25 %	< 0.25 %	
c.	Prescribers (MDs and APNs) / UM / Chief Medical Officer					
	1. % of prescriptions transmitted electronically	< 75%	75 - 84.99%	85 - 89.99%	90%+	
	2. % of FTE prescribers reaching productivity goals	< 30 %	30 - 39.99%	40 - 54.99%	55%+	
	3. Prescribers average quality score	< 85%	85 - 86.99%	87 - 88.99%	89%+	
	4. Pharmacy - Average medication cost per client per visit	> \$145	\$145 - \$130.01	\$130 - \$115.01	< \$115	
	5. PESC Utilization target	< 750	750 - 774	775 - 799	800 +	
	6. SIC Utilization (utilization of available bed days)	>100% or <85%	85 - 89.99%	90 - 96.99%	97%+	
	7. Intakes assessments initiated prior to D/C from In-pt Care	< 60	60 - 79.99	80 - 99	100+	
	TOTALS:			 	=	

Total possible score for this section:

Includes the development, implementation, and management of program systems for the Medicaid 1115 Waiver projects categories:

	NOT MET (No score)	MEETS	scor e 1	EXCEED S	scor e 2	COMMENDA BLE	scor e 3	<u>Notes</u>
A. Reporting progress completion on core activities, alternative payment arrangements, costs, savings and collaborative	< 90% activities	90- 94.99%		95-99.9%		100%		
B. # of baseline and MLIU individuals served:(MLIU = Medicaid, Low Income/Uninsured).	< 85%	85- 90.99%		91- 94.99%		95%+		
D. HHSC selected performance measures Effective Crisis Response Crisis Follow-up Community Tenure for Adults Community Tenure for Children Juvenile Justice Avoidance	< 80%	80 - 84.99%		85 - 89.99%		90%+		
Jail Diversion	al					:		=

Total possible score for this section:

Standards

5. Task and Purpose:

se: Compliance

Demonstrated by ensuring all programs/services are operated in compliance with state contracts, applicable regulations, standards and laws, Texas Administrative Code, rules, public responsibility laws, Mental Health Code, etc; and by ensuring the Center performs acceptably on evaluations such as QA / Program / Fiscal Reviews, CARF surveys, etc.

3		, - ,				COMMENDABL	
	NOT MET	MEETS	score	EXCEEDS	score	E	score
	(No score)		1		2		3
A. External Reviews of TTBH Services				_		1	
A.1. Plans of Correction submitted on time	< 90%	90 - 95.99%		96 - 99.99%		100%	
A.2. # audits with significant deficiencies cited & confirmed (ex: repeat findings, imm jeopard	> 2	2		1		0	
B. Internal TTBH Service Reviews	< 3	3		4		5+	
C. Total annual valid/confirmed sanctions or penalties from DSHS/DADS are minimized unless resulting from Board directive	> \$25,000	\$15,001 - \$25,000		\$10,001 - \$15,000		\$0 - \$10,000	
D. QA audits of network/contracted services(inpatient and outpatient services)				_			
D.1. # of audits per year D.2. Indicated follow-up	< 2	2 - 4 70 -		5 - 7		7+	
completed w/in 90 days Totals:	< 70%	84.99%	0	85 - 99.99%	0	100%	0
Totals .				=		=	

Total possible score for this section:

18