

**Greene County Educational Service Center
Mental Health Services
Strategic Action Plan 2009**

Approved by the Greene ESC Governing Board: November 12, 2009

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Introduction & History

The Greene County Educational Service Center (ESC) was founded as the Greene County Board of Education in 1914 and operates as a tax-exempt educational facility. In August 1995, the agency was renamed the Greene County ESC as a part of the biennial state budget. The Greene County ESC contracts with city and county school districts to provide a variety of services including administrative, staff development, curriculum and assessment, pupil personnel, special education, therapy, alcohol/drug prevention and other special programming.

Dr. Doris Purdom founded the ESC Mental Health Program in 1976 as a component of the Greene County Learning Center, which serves the educational needs of children, youth, and their families with Severe Behavioral Handicaps (now Serious Emotional Disturbance). The multi-disciplinary education and mental health programs target school-aged youth from kindergarten through high school with behavioral and/or emotional problems that interfere with their educational progress. Dr. Purdom acquired certification for the mental health component in 1989-1990 by the Ohio Department of Mental Health. The Eastern Miami Valley Alcohol, Drug, and Mental Health Board (now Mental Health and Recovery Board of Clark, Greene, and Madison Counties) began providing a portion of funding for mental health programming, as did Medicaid, in 1990.

In 1995, Dr. Kent Youngman became the Mental Health Director and worked closely with ESC Administration to sustain, integrate, and expand alternative educational and mental health programming. Two of these initiatives were designed to (a) increase accessibility of mental health services in the regular school environment and (b) more effectively serve non-traditional high school youth who may be credit deficient, at-risk for drop out/truancy, and have other behavioral/emotional problems. Prior to his departure, Dr. Youngman worked closely with Anya Senetra to expand service delivery to school-aged youth and their families in Greene County school districts. The Mental Health and Recovery Board approved funding for the school-based initiative in July 1999. The alternative school initiative moved forward as the ESC negotiated with a Juvenile Court judge to house the program in the new Juvenile Justice Complex and the Academy was established by the fall of 2000.

During the fall of 1999, Dr. Pamela Gulley became Mental Health Director. Anya Senetra was named Program Supervisor to develop and lead the School-based Mental Health Program in 2000. The program serves children and youth in their natural environment, the regular school setting. In recognition of its quality service delivery, efforts to increase accessibility of mental health services and reduce stigma by meeting the needs of youth in their communities, the program received a *Best Practices Award* in 2001 by the Ohio Education Partnership Program. Dr. Gulley continued as Director of Mental Health, providing oversight for the Greene County Learning Center, the School-based Mental Health Program, and Mental Health Services at sites such as the Academy of Greene County (the alternative high school program for at-risk youth) beginning in 2000, Camp Jabez (an equestrian program for at-risk middle school youth) from 2003-2004, and

Camp Birch (an outdoor education program for at-risk middle school youth, renamed Outdoor Advantage in 2006) beginning in 2004.

Greta Hochstetler became Coordinator of Mental Health Programming in the fall of 2005. Under Ms. Hochstetler, GCESC-MHS achieved a three year accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF) in fall of 2007.

The coordinator position was re-configured in 2007, and Dr. Timothy J. Callahan assumed the role of Director of Mental Health Services in August 2007 after Ms. Hochstetler moved on to work with the Mental Health and Recovery Board of Clark, Greene, and Madison Counties.

Last year, GCESC-MHS served 420 children, teens, young adults, and their families:

- 66% served in School-based program
- 27% served in Learning Center
- 7% served in Alternative Education placements
- 43% of person's served were in age range 15-18, 37% are ages 11-14, and 20% are ages 5-10.
- 68% were males and 32% females.
- 80% are Caucasian, 10% are African American, 7% are biracial, 3% are other.
- 90% of referrals come from schools, 6% from parent, 4% from self and 1% from other agencies.
- The average Length of Stay (LOS) in the School-based program was 23 months, and the Learning Center average LOS was 16 months.
- Satisfaction surveys from parent, child, schools and other stakeholders averages 4.75 out of 5.

In 2009, the state of Ohio drastically cut funding for mental health and recovery services. The local county Mental Health Levy did not pass in 2009. The levy is running again in November 2009, and any future planning will be based on whether the levy passes. With such dire economic realities, the Greene ESC Mental Health Services is restructuring staff resources in order to maximize clinical impact and reduce using clinical staff for administrative activities, such as committee assignments. Leadership, made up of the Director of Mental Health Services and School-based Program Supervisor, will carry the administrative burden until the economic crisis subsides.

Priorities for the Greene ESC Mental Health Services are financial sustainability during the current national and state economic crisis, and providing quality services to as many youth and their families as is feasible. One of the Greene ESC Mental Health Services' greatest strength is being able to adapt effectively and promptly to ever-changing conditions without losing focus of our mission and vision.

Mental Health Services Vision

GCESC-MHS envisions a community in which the mental illnesses that impact our children, teens and families are prevented and cured.

Mental Health Services Mission

Our mission is to support youth and families in maximizing their potential and enhancing their wellness in the natural environments of school, family, and community through advocacy, mental health services, and education.

The Greene ESC Mission

The mission of the Greene County ESC is to provide and promote positive leadership, cost effective services to customers, and to foster the achievement of high quality education for all students through teamwork while striving to be the premier educational leadership organization in Greene County.

Core Values

- Dignity, Worth, and Respect for All Individuals and Cultures
- Freedom from Suffering
- Empowerment and Self Determination
- Child Centered, Family Driven, and Community Based
- Collaboration and Inclusion
- Early Intervention
- Excellence and Continuous Improvement
- Access
- Advocacy
- Scientifically Sound and Effective Clinical Practices
- Fiscally Accountable and Sustainable Business Practices

Strategic Planning

The Greene ESC Mental Health Services fulfills its mission through ongoing and dynamic strategic planning that is aimed at meeting the following goals:

1. Actively Promote Health, Well-being and Dignity in our Community
2. Enhance Clinical Effectiveness
3. Develop Sustainable Business Practices
4. Ensure a Healthy & Safe Environment for all Stakeholders

The Greene ESC Mental Health Services strategic planning process involves appraisal of the environment, goal setting, monitoring of goal achievement, recommending enhancements for each of the strategic issues, and implementing those enhancements on an annual basis. The leadership team, made up of the Director of Mental Health Services and Program Supervisor, will be responsible for overseeing the strategic planning process, and QA/PI committee will be the primary vehicle for implementation of the strategic initiatives. Due to current fiscal environment, the Greene ESC Mental Health Services will do everything in its power to allocate staff resources toward clinical care, and place the administrative burden related to strategic planning on the leadership team.

Methods

The Greene ESC Mental Health Services will meet each strategic goal through the following methods:

1. Assessment of Need & Agency Capabilities

The Greene ESC Mental Health Services' core purpose is developed through an ongoing assessment of the environment. Understanding the needs and preferences of all stakeholders, including persons served, their families, school districts, teachers, staff and other community providers, allows us to map the best direction to take. Assessing our agency capabilities in meeting the needs of the stakeholders provides leadership the data necessary for enhancing service delivery and business practices through the strategic planning process. QA/PI committee analyzes the data gathered from environmental assessments to make changes and enhancements to the agency's strategies for fulfilling its mission, minimally on annual basis. The input is used in program planning, performance improvement, strategic planning, organizational advocacy, financial planning, and resource planning.

- A. Current Methods for Assessing Stakeholder Needs and Preferences
 - Input from persons served
 - i. Parent Satisfaction Surveys

- ii. Children Satisfaction Surveys
 - iii. Suggestion box
 - iv. Complaint & grievance procedures
 - v. DA, ISP preferences
- Input from schools
 - i. Teacher Satisfaction surveys
 - ii. District Satisfaction surveys
- Input from staff
 - i. Surveys
 - ii. Staff meetings
 - iii. Supervision
- Input from other stakeholders
 - i. Surveys
 - ii. Suggestion box
- Demographic Assessment

To further enhance the feedback/input process, the Greene ESC Mental Health Services will develop an Advisory committee by fall 2009, and Website suggestion box by 3/2010.

B. Domains of Agency Capabilities

- Leadership & Governance
- Staff & Human Resources
- Services & Program Structure
- Continuum of Services
- Clinical Practice Guidelines
- Technologies
- Continued Quality Improvement
- Data Collection
- Outcome Performance
- Response to Customer Needs
- QA/PI
- Policy & Procedures
- Marketing
- Decision making

2. Meeting and Exceeding Regulatory Standards

The Greene ESC Mental Health Services fulfills its mission by meeting and exceeding the standards set forth by the Ohio Department of Mental Health (ODMH) and the Commission on Accreditation of Rehabilitation Facilities (CARF). Leadership is responsible for ensuring the agency maintains certification and accreditation. Strategic goals are directly tied to standards set by regulatory bodies.

3. Commitment to Risk Management

The Greene ESC Mental Health Services engages in a coordinated set of activities designed to control threats to persons served, staff members, property, income, goodwill, and ability to accomplish goals. The risk management activities are reflected in the Greene ESC Mental Health Services Risk Management Plan.

4. Continuous Performance Improvement

The Greene ESC Mental Health Services stays on target with strategic goals through ongoing assessment of performance. The agency's strategies for performance improvement are reflected in the Quality Assurance/Performance Improvement Plan. Measures of performance include, but are not limited to Ohio Scales-Youth Version, Stakeholder Satisfaction Surveys, and Individualized Service Plans.

5. Use of Technology to Further Goal Achievement

The Greene ESC Mental Health Services is committed to using technologies to support and advance its mission and purpose. The agency's strategies related to technology are outlined in the Greene ESC Technology Plan.

2009 STRATEGIC GOALS & OBJECTIVES

I. Actively Promote Health, Well-being and Dignity in our Community

Objective 1. Reduce Suffering & Stigma

Strategy A. Provide four anti-stigma trainings annually to schools

Staff Responsible: Leadership

Strategy B. Develop website-based information center.

Staff Responsible: Leadership, Technology Director

Strategy C. Provide treatment & consultation

Staff Responsible: MHS Staff

Objective 2. Advocate for Rights, Respect & Dignity

Strategy A. Provide annual trainings on client rights

Staff Responsible: Leadership

Strategy B. Develop website-based information center

Staff Responsible: Leadership, Technology Director

Strategy C. Provide treatment & consultation

Staff Responsible: MHS Staff

Objective 3. Increase Awareness

Strategy A. Provide four trainings annually to schools on youth mental health issues

Staff Responsible: Leadership

Strategy B. Develop website-based information center

Staff Responsible: Leadership, Technology Director

Strategy C. Provide treatment & consultation

Staff Responsible: MHS Staff

Objective 4. Increase Access (See Accessibility Plan)

Strategy A. Refine referral process

Staff Responsible: SMH Program Supervisor

Strategy B. Develop Needs Assessment Tools

Staff Responsible: Leadership

Strategy C. Refine outreach methods

Staff Responsible: Leadership

Strategy D. Create Drop-in Clinic at ESC building

Staff Responsible: Leadership

Objective 5. Ensure Client Rights

Strategy A. Provide annual Client Rights trainings to staff

Staff Responsible: Leadership

Strategy B. Develop website-based information center

Staff Responsible: Leadership, Technology Director

Strategy C. Provide treatment & consultation

Staff Responsible: MHS Staff

Objective 6. Increase Cultural Competency

Strategy A. Provide one annual cultural diversity training to staff

Staff Responsible: Leadership

Strategy B. Develop website-based information center

Staff Responsible: Leadership, Technology Director

Strategy C. Provide one annual training to schools

Staff Responsible: Leadership

II. Enhance Clinical Effectiveness

Objective 1. Employ Clinically Effective Interventions/Approaches

Strategy A. Provide annual clinical training to staff

Staff Responsible: Leadership

Strategy B. Focus supervision, team meetings & trainings toward enhancing clinically effective interventions

Staff Responsible: Leadership

Strategy C. Explore Best Practice options

Staff Responsible: Leadership & Staff

Objective 2. Advance the Self-Regulation Model

Strategy A. Provide annual clinical training to staff

Staff Responsible: Leadership

Strategy B. Increase focus of supervision toward Self-Regulation

Staff Responsible: Leadership

Strategy C. Explore Best Practice options

Staff Responsible: Leadership & Staff

Objective 3. Reduce Non-Academic Barriers to School Performance

Strategy A. Provide annual training to schools

Staff Responsible: Leadership

Strategy B. Develop outcome measures specific to performance

Staff Responsible: Leadership

Strategy C. Explore Best Practice options

Staff Responsible: Leadership & Staff

Objective 4. Improve Family Functioning

Strategy A. Provide annual Family Systems training to staff

Staff Responsible: Leadership

Strategy B. Employ a Family Therapy Best Practice Model

Staff Responsible: Leadership & Staff

Strategy C. Develop website-based information center

Staff Responsible: Leadership, Technology Director

Objective 5. Enhance Supervision

Strategy A. Refine supervision, team meetings & training

Staff Responsible: Leadership

Strategy B. Aim supervision toward clinical Work

Staff Responsible: Leadership

Strategy C. Explore supervision best practice options

Staff Responsible: Leadership & Staff

Objective 6. Require Positive Approaches to Behavioral Interventions

Strategy A. Write a policy and procedures for emphasizing:

- Building positive relationships with client & family
- Taking into account the client's environments/contexts
- Assessing the client's home environment
- Promotion of de-escalation approaches
- Empowering self management/regulation
- Development of personal safety plans when indicated

Staff Responsible: Leadership

III. Develop & Maintain Sustainable Business Practices

Objective 1. Commitment to Financial Planning & Management

Strategy A. Develop fiscal policy & procedures to supplement the general Greene ESC fiscal policy & procedure

Staff responsible: Leadership, Treasurer

Strategy B. Financial meetings held quarterly

Staff responsible: Leadership, Treasurer

Strategy C. Present annual financial reports to stakeholders

Staff responsible: Leadership, Treasurer

Objective 2. Maintain Financial Sustainability

Strategy A. Budget prepared annually and based on projections of revenue and expenditures and compared to history.

Staff responsible: Leadership, Treasurer

- Strategy B. Quarterly analysis of revenue/expenses, trends, challenges, and opportunities
Staff responsible: Leadership, Treasurer
- Strategy C. Present annual financial reports to stakeholders
Staff responsible: Leadership, Treasurer
- Strategy D. Develop policy identifying issues related to being a subsidiary of the Greene ESC.
Staff responsible: Leadership, Treasurer
- Strategy E. Quarterly review of billing statements & client records to ensure accuracy
Staff responsible: Leadership, Billing Manager
- Strategy F. Annual internal financial audit
Staff responsible: Leadership, Billing Manager, Treasurer, QA/PI committee
- Strategy G. Prepare for annual external audit
Staff responsible: Leadership, Billing Manager, Treasurer, QA/PI committee
- Strategy H. Provide annual financial training to staff
Staff responsible: Leadership
- Strategy I. Provide annual fiscal report to stakeholders
Staff responsible: Leadership

Objective 3. Avoid & Respond to Financial Threat

- Strategy A. Develop specific plans to adapt to 2010 state cuts
Staff Responsible: Leadership, QA/PI committee
- Strategy B. Develop plan for adapting to loss of levy dollars if 2009 levy does not pass
Staff Responsible: Leadership, Treasurer, QA/PI committee
- Strategy C. Formulate a staff reduction plan
Staff Responsible: Leadership

Objective 4. Actively Seek Financial Opportunities

- Strategy A. Develop plan for seeking more financial contribution from participating school districts
Staff Responsible: Leadership, Superintendent
- Strategy B. Explore and seek grants and endowments
Staff Responsible: Leadership
- Strategy C. Explore 3rd party payer options
Staff Responsible: Leadership, Billing Manager, Treasurer

Objective 5. Maintain Certification/Accreditation

- Strategy A. Quarterly review & enhancement of agency performance regarding ODMH standards
Staff responsible: Leadership, QA/PI committee
- Strategy B. Quarterly review & enhancement of agency performance regarding CARF standards

Staff responsible: Leadership, QA/PI committee
Strategy C. Annual report to stakeholders regarding performance on standards
Staff responsible: Leadership, QA/PI committee

Objective 6. Ensure Documentation Meets Standards

Strategy A. Quarterly review, analysis, reporting, and improvement of documentation in client records
Staff Responsible: QA/PI committee, Record Control Officer, Leadership
Strategy B. Implement FileMaker improvements to reduce documentation errors
Staff Responsible: Record Control Officer, Leadership
Strategy C. Provide trainings, supervision regarding documentation standards as needed, minimally quarterly
Staff Responsible: Leadership, QA/PI committee

Objective 7. Ensure Healthy Human Resources & Work Environment

Strategy A. Recruit, hire and retain an adequate number of staff
Staff Responsible: Leadership, ESC Personnel Officer
Strategy B. Verify degree, credentials, licensure, background checks
Staff Responsible: Leadership, ESC Personnel Officer
Strategy C. Ensure proper staff orientation, trainings & supervision
Staff Responsible: Leadership
Strategy D. Continue to refine job descriptions to reflect specific job duties.
Staff Responsible: Leadership
Strategy E. Refine competency-based performance evaluations
Staff Responsible: Leadership
Strategy F. Refine policy/procedure regarding requirements for student interns, including signed agreements, background checks, orientation, training, supervision, duties, restrictions, confidentiality, and policies for dismissal.
Staff Responsible: Leadership
Strategy G. Ensure personnel records are complete and proper through an annual review process; records must contain resume, verifications, evidence of orientation, job description, performance evaluations, any plans of corrections.
Staff Responsible: Leadership, ESC Personnel Officer
Strategy H. Provide annual trainings to staff regarding client rights, family-centered approaches, prevention of workplace violence, confidentiality, cultural competency, expectations for professional conduct.
Staff Responsible: Leadership, ESC Personnel Officer

Objective 8. Manage Change without Disruption of Service Delivery
Strategy A. Develop a vision, policy & procedure for managing change.

Staff Responsible: Leadership, QA/PI committee

Strategy B. Establish an advisory committee of stakeholders

Staff Responsible: Leadership

Strategy C. Develop procedures for communicating change

Staff Responsible: Leadership

Objective 9. Compete Effectively in the Business Environment

Strategy A. Develop procedures for ongoing assessment of the competitive environment

Staff Responsible: Leadership

Strategy B. Articulate mission & uniqueness of agency's role in the community through marketing efforts.

Staff Responsible: Leadership

Strategy C. Develop advisory committee, to include business leaders in community

Staff Responsible: Leadership

Objective 10. Develop Marketing Strategies

Strategy A. Develop a marketing plan

Staff Responsible: Leadership

Strategy B. Perform marketing research in the community

Staff Responsible: Leadership

Strategy C. Refine website

Staff Responsible: Leadership, ESC Technology Director

Strategy D. Improve/refine brochure

Staff Responsible: Leadership

IV. Ensure a Healthy & Safe Environment

Objective 1. Maintain a Healthy & Safe Environment

Strategy A. Refine Health & Safety Policy & Procedures

Staff Responsible: Leadership

Strategy B. Improve record keeping process that demonstrates ongoing evidence of attention to safety practices & risks, reduction of risks, and concern for health and safety of all stakeholders

Staff Responsible: Leadership

Strategy C. Improve competency-based training for staff

Staff Responsible: Leadership

Strategy D. Improve written emergency procedures

Staff Responsible: Leadership

Strategy E. Refine evacuation procedures, specifically regarding how ESC Safety Officer & School District Safety

Officers partner with Mental Health Services.
Staff Responsible: Leadership

Objective 2. Complete Background Checks

Strategy A. Refine process using state-of-the-art technologies
Staff Responsible: Leadership

Objective 3. Improve annual competency-based training process in the following areas:

- Health & Safety Practices
- Identification of Unsafe Environmental factors
- Emergency Procedures
- Evacuation Procedures
- Critical Incidents
- Reducing Physical Risks

Staff Responsible: Leadership

Objective 4. Improve review process for Critical Incidents

Strategy A. Revise policy & procedures

Staff Responsible: Leadership QA/PI committee

Strategy B. Develop method of communicating CR results to Stakeholders

Staff Responsible: Leadership, QA/PI committee

Strategy C. Refine technologies in order to improve communications with ODMH's WEIRS site.

Staff Responsible: Leadership, ESC Technology Director

Objective 5. Test Emergency Procedures

Strategy A. Refine testing procedures to be more efficient

Staff Responsible: Leadership

Strategy B. Develop policy & procedure to clarify how ESC Safety Officer and school districts' safety officers communicate with Mental Health Services Leadership

Staff Responsible: Leadership

Strategy C. Develop policy and procedures specific for the Alternative Educational Placements

Staff Responsible: Leadership, QA/PI committee

Objective 6. Maintain Safe Facilities

Strategy A. Develop procedures and agreements for working in Host facilities that the ESC & Mental Health Services have no control over, including school buildings

Staff Responsible: Leadership, ESC Safety Officer

Strategy B. Improve orientation/training process with staff

Staff Responsible: Leadership

Strategy C. Explore technologies that may improve the Health &

Safety process, reduce burden and increase safety
Staff Responsible: Leadership, ESC Safety Officer

Objective 7. Maintain Infection Control

Strategy A. Improve orientation & training process with staff

Staff Responsible: Leadership

Strategy B. Expand client orientation

Staff Responsible: Leadership

Objective 8. Protect Against Hazardous Material Exposure

Strategy A. Improve orientation & training process with staff

Staff Responsible: Leadership

Strategy B. Expand client orientation procedure to cover details of Hazardous material

Staff Responsible: Leadership

Strategy C. Develop procedures and agreements for working in host facilities that the ESC & Mental Health Services have no control over, including school buildings

Staff Responsible: Leadership, ESC Safety Officer

Objective 9. Maintain Safe Transportation Practices

Strategy A. Develop an advisory committee to specifically consider the merits and costs of transporting clients

Staff Responsible: Leadership, QA/PI committee

Strategy B. Form a subcommittee specifically designed to oversee the transportation process

Staff Responsible: Leadership, QA/PI committee

Strategy C. Improve the self-assessment tool

Staff Responsible: Leadership, QA/PI committee

Strategy D. Seek grants to help pay for safety equipment

Staff Responsible: Leadership

Objective 10. Train and Employ Nonviolent Practices

Strategy A. Revise policies and procedure to emphasize the Agency' position and commitment to nonviolent practices

Staff Responsible: Leadership

Strategy B. Include agency's position on nonviolent practices on website and in brochures

Staff Responsible: Leadership

Strategy C. Provide annual training and ongoing supervision specific to nonviolent practices and de-escalation methods

Staff Responsible: Leadership & Staff

Strategy D. Support/facilitate trainings to schools on best practices related to nonviolent de-escalation and crisis intervention

Staff Responsible: Leadership, ESC Safety Officer, School District Safety Officers

- Strategy E. Write a policy and procedures for emphasizing the following positive approaches to behavioral interventions:
- Building positive relationships with client & family
 - Taking into account the client's environments
 - Assessing the client's home environment
 - Promoting de-escalation approaches
 - Empowering self management/regulation
 - Development of personal safety plans when indicated

Staff Responsible: Leadership

The Greene ESC Mental Health Services Strategic Action Planning Team Members

2009 Leadership Team

Dr. Timothy J. Callahan, Director of Mental Health Services
Anya Senetra, Program Supervisor

2009 QA/PI Committee

Timothy J. Callahan
Anya Senetra
Laura Rozier
Bethany Finkbeiner
Teresa Arnett
Denise Runyon
Christine Kukla
Jennifer Mills
Julie Mitchell

2009 Record Control Officer

Teresa Arnett

2009 Billing Manager

Bethany Finkbeiner

2009 Greene ESC Superintendent

Terry Thomas

2009 Greene ESC Treasurer

Robert "Chip" Arledge

2009 Greene ESC Technology Team

Bob Bilbrey
Dr. Ron Anderson

2009 ESC Learning Center Safety Officer

Doug Andrus

2009 ESC Mental Health Services Health & Safety Officer and Client Rights Officer

Timothy J. Callahan

2009 Mental Health Services Staff: Teresa Arnett, Tim Callahan, Jeff Conrad, Bethany Finkbeiner, Dawn Gruber, Chris Knotts, Christine Kukla, Juli Mallow, Jennifer Mills, Julie Mitchell, Angela Moore, Steve Reffner, Peggy Roesser, Laura Rozier, Denise Runyon, Anya Senetra, Laura Taylor, Eliza Woodburn, Michelle Moore, Jamie Hilling

2009 ESC Personnel Officer: Mary Lou Shafer

2009 Strategic Action Plan Grid

Goal/Objective/Strategy	Staff Responsible	Timeline
I.1.A	Tim & Anya	1 year
I.1.B	Tim, Anya, Bob	2 years
I.1.C	MHS staff	ongoing
I.2.A	Tim & Anya	1 year
I.2.B	Tim, Anya, Bob	2 years
I.2.C	MHS staff	ongoing
I.3.A	Tim & Anya	1 year
I.3.B	Tim, Anya, Bob	2 years
I.3.C	MHS staff	ongoing
I.4.A	Anya	6 months
I.4.B	Tim & Anya	1 year
I.4.C	Tim & Anya	2 years
I.4.D	Tim & Anya	5 years
I.5.A	Tim & Anya	1 year
I.5.B	Tim, Anya, Bob	2 years
I.5.C	MHS staff	ongoing
I.6.A	Tim & Anya	1 year
I.6.B	Tim, Anya, Bob	2 years
I.6.C	Tim & Anya	1 year
II.1.A	Tim & Anya	1 year
II.1.B	Tim & Anya	ongoing
II.1.C	Tim & Anya & MHS staff	2 years
II.2.A	Tim & Anya	1 year
II.2.B	Tim & Anya	ongoing
II.2.C	Tim & Anya & MHS staff	2 years
II.3.A	Tim & Anya	1 year
II.3.B	Tim & Anya	1 year
II.3.C	Tim & Anya & MHS staff	2 years
II.4.A	Tim & Anya	1 year
II.4.B	Tim & Anya & MHS staff	2 years
II.4.C	Tim, Anya, Bob	2 years
II.5.A	Tim & Anya	1 year
II.5.B	Tim & Anya	ongoing
II.5.C	Tim & Anya & MHS staff	2 years

2009 Strategic Action Plan Grid

Goal/Objective/Strategy	Staff Responsible	Timeline
II.6.A	Tim & Anya	ongoing
III.1.A	Tim, Anya, Chip	1 year
III.1.B	Tim, Anya, Chip	quarterly
III.1.C	Tim, Anya, Chip	1 year
III.2.A	Tim, Anya, Chip	1 year
III.2.B	Tim, Anya, Chip	quarterly
III.2.C	Tim, Anya, Chip	1 year
III.2.D	Tim, Anya, Chip	6 months
III.2.E	Tim, Anya, Bethany	quarterly
III.2.F	Tim, Anya, Bethany, Chip	1 year
III.2.G	Tim, Anya, Bethany, Chip	ongoing
III.2.H	Tim & Anya	1 year
III.2.I	Tim & Anya	1 year
III.3.A	Tim, Anya, QA/PI	3 months
III.3.B	Tim, Anya, QA/PI, Chip	3 months
III.3.C	Tim & Anya	3 months
III.4.A	Tim, Anya, Terry	1 year
III.4.B	Tim & Anya	1 year
III.4.C	Tim, Anya, Bethany, Chip	2 years
III.5.A	Tim, Anya, QA/PI	quarterly
III.5.B	Tim, Anya, QA/PI	quarterly
III.5.C	Tim, Anya, QA/PI	1 year
III.6.A	Tim, Anya, QA/PI, Teresa	quarterly
III.6.B	Tim, Anya, Teresa, Ron	1 year
III.6.C	Tim, Anya, QA/PI	ongoing
III.7.A	Tim, Anya, Mary Lou	ongoing
III.7.B	Tim, Anya, Mary Lou	ongoing
III.7.C	Tim & Anya	ongoing
III.7.D	Tim & Anya	ongoing
III.7.E	Tim & Anya	1 year
III.7.F	Tim & Anya	1 year

2009 Strategic Action Plan Grid

Goal/Objective/Strategy	Staff Responsible	Timeline
III.7.G	Tim, Anya, Mary Lou	ongoing
III.7.H	Tim, Anya, Mary Lou	1 year
III.8.A	Tim, Anya, QA/PI	1 year
III.8.B	Tim & Anya	6 months
III.8.C	Tim & Anya	6 months
III.9.A	Tim & Anya	1 year
III.9.B	Tim & Anya	1 year
III.9.C	Tim & Anya	6 months
III.10.A	Tim & Anya	1 year
III.10.B	Tim & Anya	1 year
III.10.C	Tim, Anya, Bob	2 years
III.10.D	Tim & Anya	6 months
IV.1.A	Tim & Anya	ongoing
IV.1.B	Tim & Anya	1 year
IV.1.C	Tim & Anya	1 year
IV.1.D	Tim & Anya	1 year
IV.1.E	Tim & Anya	1 year
IV.2.A	Tim, Anya, Teresa	1 year
IV.3	Tim & Anya	1 year
IV.4.A	Tim, Anya, QA/PI	1 year
IV.4.B	Tim, Anya, QA/PI	1 year
IV.4.C	Tim, Anya, Bob	6 months
IV.5.A	Tim & Anya	1 year
IV.5.B	Tim & Anya	1 year
IV.5.C	Tim, Anya, QA/PI	1 year
IV.6.A	Tim, Anya, Doug	1 year
IV.6.B	Tim & Anya	1 year
IV.6.C	Tim, Anya, Doug	2 years
IV.7.A	Tim & Anya	1 year
IV.7.B	Tim & Anya	1 year
IV.8.A	Tim & Anya	1 year

2009 Strategic Action Plan Grid

Goal/Objective/Strategy	Staff Responsible	Timeline
IV.8.B	Tim & Anya	1 year
IV.8.C	Tim, Anya, Doug	1 year
IV.9.A	Tim, Anya, QA/PI	6 months
IV.9.B	Tim, Anya, QA/PI	6 months
IV.9.C	Tim, Anya, QA/PI	1 year
IV.9.D	Tim & Anya	1 year
IV.10.A	Tim & Anya	1 year
IV.10.B	Tim & Anya	1 year
IV.10.C	Tim, Anya, MHS staff	1 year
IV.10.D	Tim, Anya, Doug	1 year
IV.10.E	Tim & Anya	1 year