
Rolling Hills

*Regional Mental Health &
Disabilities Services*



REGIONAL SERVICE SYSTEM STRATEGIC PLAN FISCAL YEARS 2016-2019

MISSION STATEMENT

Rolling Hills Community Services Region is committed to ensuring access to high quality, value-added community-based services for all eligible citizens within our communities that encourage resiliency, stability and growth.

INTRODUCTION AND VISION

Rolling Hills Community Services Region (hereinafter referred to as "RHCS"). RHCS was formed under Iowa Code Chapter 28E to create a mental health and disability service region in compliance with Iowa Code 331.390. Within this region, RHCS has created a regional management plan designed to improve health, hope, and successful outcomes for the adults in our region who have mental health disabilities and intellectual/developmental disabilities, including those with multi-occurring substance use issues, health issues, physical disabilities, brain injuries and other complex human service needs.

In accordance with the principles enumerated in the legislative redesign, RHCS will work in a quality improvement partnership with stakeholders in the region (providers, families, consumers, and partner health and human service systems) to develop a system of care approach that is characterized by the following principles and values:

- Welcoming and customer-oriented
- Person and family driven
- Recovery/resiliency oriented
- Trauma-informed
- Culturally competent
- Multi-occurring capable

Strategic Planning Development Process

The Rolling Hills Regional Mental Health and Disability Services organization (Rolling Hills) requested the Institute of Public Affairs (IPA) to organize and facilitate a strategic planning session for the upcoming three-five year period.

Prior to the Strategic Planning Meeting, a questionnaire was sent out to all of the providers, board members and regional staff to gauge their perspective on regional progress and outcomes since the region became operational in July 2014. A strategic planning session was held on April 1, 2016, at the Sac County Law Enforcement Center in Sac City. Jeff Schott, Director of the Institute of Public Affairs of the University of Iowa, facilitated the meeting.

The following persons attended and participated in this session (organizations they represent are in parentheses):

Dennis Bush (Cherokee County Board of Supervisors)
Paul Merten (Buena Vista County Board of Supervisors)
Rick Hecht (Sac County Board of Supervisors)
Melissa Drey (Plains Area MHC)
Amy Hull (Plains Area MHC)
Kim Keleher (Plains Area MHC)
Ashley Miller (Plains Area MHC)
Nancy Seavert (Calhoun County Public Health)
Joleen Schmit (Calhoun County Public Health)
Terry L. Johnson (Genesis)
Sandra Pingel (Genesis)
Zacharina Winker (SMCH)
Ben Shuberg (CCWS)
Joyce Hinnert (New Hope)
Renae Blume (Regional Grant)
Diana Ossman (ISI)
Maggie Johnson (ISI)
Pam Haberl (parent)
Jim Coats (Counseling Services)
Cindy Wiemold (FHC)
Dawn Mentzer (Rolling Hills Region)
Leisa Mayer (Rolling Hills Region)
Louise Galbraith (Rolling Hills Region)
Lisa Bringle (Rolling Hills Region).

Summary of Major Accomplishments during the past two year as reported by participants via the questionnaires:

- Establishment of Turning Point Crisis Home.
- Solidification of collaborative spirit between all provider agencies involved in behavioral health and in serving those with disabilities
 - Establishing open lines of communication among providers
 - Collaboration of agencies in programs and cost sharing
 - Provider buy-in - amazing and positive response on outcomes from providers
 - Provider collaboration on SE grant
- Implementation of a jail diversion program
- Employment services:
 - Employment options for people with collaboration with various provider organizations
 - Supported Employment Initiative
 - Year two participant in IACP SME employment grant
 - Wrote and received a collaborative grant for ACE program and job developers. Met goals and proposed second grant with expansion of programs
- Reorganizing with Cherokee County in the RH region
- Opened Counseling Services office in Rockwell City
- Sharing after hours on-call service with Plains Area
- Provider presence at monthly governance board meetings.
- Participation in regional core service task forces
- Region participated in CSN outcomes project
- 100% participation of staff in 5 star integration training
- Sharing success stories
- ASIST training was started and three trainings have occurred
- Tele health was established in Calhoun County
- Quality and committed task forces
- Moving people out of RCFs – went down to 5
- ID Waiver Waiting list criteria developed by Task Force
- Legislative forum that resulted in MH/DS Funding bill being sponsored by Senator Mark Segebart from Crawford County

Issues, Concerns, Trends and Opportunities

The following were identified as issues, concerns, trends, and opportunities that may affect Rolling Hills' future services, policies, finances or operations:

- Long-term, stable funding.
- Impact of Managed Care on Regions - partnering with provider agencies?
- MCO transition- members losing services, non-payment of services, fall-back of funding to the Region
- Impact of proposed state legislation regarding residence-based funding requirements (SSB 3175)
- Potential state legislation regarding 1996 levy dollar limit

- The cost effectiveness and long term sustainability of trying to place ALL individuals who are currently in sheltered workshops out in the public sector.
- Day Habilitation as the ONLY alternative to placing the disabled in the public job market.
- The ability to attract and keep upper credentialed behavioral health professionals (LISW's, Psychologists, Psychiatrists) in rural areas.
- How the Region will interact with MCOs.
- Commitment of the counties to the Regional concept.
- Future role of the Region in service delivery.
- Waiting lists for HCBS waivers.
- Availability and affordability of high speed internet – Telemedicine, Electronic Health Records
- Strength of providers, provider stability (can't provide services if there are no provider agencies out there)
- CEO Succession planning – for RH Region and Providers (build capacity for leadership transition)
- Credentialing of staff
- Workforce
- Transportation
- Need more options for inpatient and outpatient services for individuals with dual diagnosis.
- Services for individuals who are homeless and suffer from MI
- Easier placement in the region for individuals with ID
- More services for individuals under 18
- Transition of regionally funded work activity
- Ability to meet demands of new DHS initiatives – cost, qualified staffing, time, rural, travel distance, etc.
- Limited opportunities/staff availability/limited information on support groups in the region
 - Support groups for; anger, depression, cancer, anxiety and suicide
 - Could only find support groups for NA and AA

Review of “Core” Services

The participants reviewed and discussed the status of Rolling Hills providing the required “core” services per below:

- Supported employment – being provided
- Family support – see On-Going Commitment/Obligation #1 below
- Peer support see On-Going Commitment/Obligation #1 below
- Crisis services see On-Going Commitment/Obligation #4 below
- Respite services - being provided
- Integrated health homes – being provided
- Other “core” services - all covered

On-Going Commitments/Obligations

The following were identified as on-going commitments/priorities for Rolling Hills for the upcoming planning period:

1. Establish Family Support/Peer Support programs
2. Establish Civil Commitment Pre-screening processes
3. Maintain Jail Diversion Program
 - a. Evaluate processes
 - b. Expand into Cherokee County
4. Maintain Crisis Stabilization Facility (Turning Point)
5. Continue implementation of services in Calhoun County
6. Continue to support regional providers with Supported Employment funding
7. Continue provider training
8. Continued support for training for provider organizations
9. On-going training for provider staff at all levels
10. Training opportunities for Provider Agency staff – (capacity-building within agencies)
11. Continue to consider initiatives that create, implement and strengthen partnership, collaboration, and capacity building for those agencies/entities providing services to the people
12. Continue to implement plan of engaging magistrates with offering alternatives to involuntary committals
13. Continue community education and outreach
14. Continue block granting to promote innovative programs that meet the needs of the regional members served
15. Continue CSN pilot promoting one statewide outcomes report for regions, MCOs, CARF, IME

New Priority Projects, Programs, and Initiatives

The participants reviewed potential projects, programs, policies and initiatives for consideration and selected the following as priorities for the upcoming planning period (listed in priority order):

Top Priority:

1. Transitional housing for MI, ID, and Dual Diagnosis individuals.
2. (Tie) Behavior Support Specialist to keep members in community as opposed to more restrictive environments.
3. (Tie) Implement Quality Improvement Processes with respect to regionally supported services.

Medium Priority:

4. A concerted effort to attract into the Region a significant provider specializing in addictions to augment treatment for those with dual diagnosis.
5. Transition funding for providers for staff training – costs, service gaps.

6. Crisis services for youth – could somehow springboard from crisis residential services for adults.

FUTURE CONSIDERATIONS:

A concerted effort to attract into the Region a significant provider specializing in addictions to augment treatment for those with dual diagnosis.

Transition funding for providers for staff training – costs, service gaps.

Crisis services for youth – could somehow springboard from crisis residential services for adults.

Exhibit A

**ROLLING HILLS REGIONAL MENTAL HEALTH AND DISABILITY SERVICES
STRATEGIC PLANNING SESSION
2016**

SIGNIFICANT INITIATIVES OR PROGRAMS CONSIDERED

- A concerted effort to attract a significant provider specializing in addictions into the Region to augment treatment for those with dual diagnosis
- Behavior Support Specialist – to keep members in community as opposed to more restrictive environments
- Crisis Services for youth – could that somehow springboard from the Crisis residential services for adults?
- Transition funding for providers for staff training costs, service gaps
- Transitional housing for MI, ID and Dual diagnosis individuals
- Implement 23-Hour Observation Program
- Implement Quality Improvement Processes with respect to regionally-supported services
- Develop/implement common functional assessment for all providers in Region

Strategic Plan Goal/Objectives:

Goal 1. Rolling Hills Community Services Region wants to ensure access to community-based services within our communities that maintain individuals in the highest level of independence and integration.

Objective 1: Rolling Hills Community Services Region will establish transitional housing for MI, ID, and Dual Diagnosis individuals.

Baseline: Over the past two years, Rolling Hills Regional Staff and providers have recognized a gap in services for individuals to acquire community housing, employment and resources to support themselves. Many of these individuals were deemed essentially homeless and lacked the supports to obtain these on their own. Hence, hospitals and Integrated Health Services Agencies were often times requesting congregate living in Residential Facilities as opposed to arranging supports within an individual's home community. In the spring of 2016, St. Anne's Catholic Church Council members contacted the Executive Director of Wesco Industries to determine if they would have use for their vacant rectory. Regional and Wesco staff toured the building and identified this as an opportunity to fill this gap. The Governance Board approved the financing of the Transitional Home at their April 2016 Board Meeting.

Action Steps	Responsible Party	Targeted Completion Date
Wesco completes renovation project of the rectory in Vail, IA.	Wesco, RHCS Region	7/31/16
Wesco will develop policies and procedures admission/discharge criteria.	Wesco, RHCS Region	7/31/16
Wesco will open the Transitional Home with referrals made in advance by Regional Staff and other entities.	Wesco, RHCS Region	8/1/16
Individuals admitted to the Transitional Home will be notified of the expectations regarding the limitation of length of stay to 90 days.	Task Force	Ongoing
Wesco will track referrals/admissions/discharges,	Wesco	Ongoing quarterly report to CEO/Governance Board

and outcomes with a quarterly report advanced to the region. Denial of service will be documented in this report.		
Wesco will provide transitional services to RHCS individuals only until a later date as determined by the Governance Board.	Wesco	
Research Evidenced Based Practice -Permanent Supportive Housing Model as a service option for individuals served by RHCS Region.	Regional Staff	6/30/17
Regional Governance Board and CEO will consider funding needs for the provider(s) to implement Permanent Supportive Housing.	Regional Governance Board; CEO	6/30/19

Objective 2: Rolling Hills Region will recruit a Behavior Support Specialist to keep members in the community as opposed to more restrictive environments.

Baseline: Providers have identified a need within the region for a Behavioral Support Specialist that can assess and implement interventions for individuals with behavioral needs that may jeopardize their current services or living arrangement. Through these interventions, the intention would be to maintain individuals where they are without needing a higher level of care.

Action Steps	Responsible Party	Targeted Completion Date
Task Force will be appointed to determine structure of such position.	Task Force	10/31/16
Task Force will complete a needs assessment among all providers within the region, identify financial costs and staffing needs to provide the service.	Task Force; Regional Staff	12/31/17
Task Force will research the I-Start program that is being implemented in other regions to determine if this would be feasible.	Task Force	3/31/18
Task Force will report to the full Advisory Board at least quarterly on their progress.	Task Force	ongoing
Regional Governance Board and CEO will consider funding needs for the provider(s).	Regional Governance Board; CEO	ongoing

Objective 3: Implement Quality Improvement Processes with respect to regionally supported services.

Baseline: The first two years of regional operations has been very positive overall with many collaborations formed and new initiatives put into motion and many that came to fruition. Reflecting on all of the accomplishments (as noted beginning on page two of this strategic plan) brings the realization that we as a region have rapidly progressed in the manner that the vision for the system re-design was intended. We believe that long-term sustainability will be crucial to our region’s success not only financially but systematically. In order to achieve this, we need to take some time to evaluate the programs that have been implemented for quality and outcomes. As one Strategic Planning participant stated, “You can implement Jail Diversion in a county within the region, but how do you know that it is a quality system of care?”

Action Steps	Responsible Party	Targeted Completion Date
Quality Assurance processes will be researched, developed and implemented.	Regional Staff	6/30/17
CEO will review QA tools with the RHCS Advisory Board for selection.	CEO; Advisory Board	6/30/17
CEO and Advisory Board will determine staffing needs to implement QA processes for regionally supported services.	CEO; Advisory Board	12/31/17
CEO will make a recommendation to the Governance Board regarding the staffing needs and QA processes for the region.	CEO	6/30/18
Regional Governance Board and CEO will consider funding needs for the provider(s).	Regional Governance Board; CEO	ongoing
Quality Assurance Process will be implemented with all RHCS providers with outcomes tracked and reported back to the CEO and Governance Board.	CEO	ongoing

