

Community Needs Assessment Implementation Plan/review of prior CHNA plan goals attainment.

## Introduction

Mental Health Services for Clark Co Inc., doing business as Mental Health Services for Clark and Madison Counties, Inc. is a private not for profit community mental health agency operating a full array of crisis and outpatient services as well as a 16 bed inpatient psychiatric unit for residents of Clark and Madison Counties regardless of their ability to pay. Management staff have participated in the Clark County Combined Health District Health Assessment and have used the data to coordinate our implementation plan/goals and objectives. We have also performed focus group studies to gather additional feedback concerning our services.

## Community Served

We provide services to residents of Clark and Madison counties as contracted through our funding agreement with the ADMH Board of Clark, Greene and Madison Counties.

Prior CHNA Plan goals and committed resources:

1. Enhance quality clinical care by matching treatment to needs. Timeframe: FY2015 Steps: Develop psycho-educational group for dual diagnosis, develop OP group for AOD and MH clients, Conduct PI projects to pursue AOD certification for Clark program. Resources committed: Staff hired that have AOD training, psychiatrist time for a dual diagnosis program. We have successfully hired staff and have established 8 hours of psychiatric time for Clark Adult outpatient program. We anticipate programming within the coming fiscal year. Anticipated Impacts/Plan to evaluate impact: Increased programming to dual diagnosis clients in the community. Plan to evaluate care is based on outcome measures set for the new program.

2. Mobilize a community coalition to address substance use issues in Clark County. Steps: Assess prevention needs and work toward a central clearinghouse of Substance abuse data. Form a committee to review mortality data and build prevention capacity by addressing the needs for more professionals, data capacity and effective interventions. Resources committed: Both CEO and quality coordinator are involved in the Group task force to review mortality data. MHS has hired staff and psychiatrist time to serve the dual diagnosis population in Clark County. Anticipated Impacts/Plan to evaluate impact: Identification of specific “hot spot” areas for substance abuse and development of capacity for prevention and treatment services with a goal to begin to reduce substance use.

2016 – 2019 Implementation Plan Goals and committed resources:

1. Depression Screening: To improve the awareness and use of a locally available on-line self-assessment for adolescents through adults to identify depression and risk of suicide. Use of the tools also connects the participation directly to information about local mental health services availability, location and service hours. Resources committed: VP of Operations currently serves on the task force and Mental Health Services has committed its Emergency Services program for individuals in crisis to determine suicide risk. Anticipated Impacts/Plan to evaluate impact: Increase in community awareness of local resources for treatment and linkage to the resources. Evaluation of impact will be the data gathered on the number of individuals served for Emergency Services.
2. Improve the efficacy of interventions available to EMS first responders for mental health related situations thereby reducing the frequency of service requests and the need for more expensive and less effective resources in those situations. Resources committed: VP of Operations currently serves on the task force and Mental Health Services has committed its Emergency Services program for individuals in crisis. Anticipated Impacts/Plan to evaluate impact: Increase in community awareness of local resources for

treatment and linkage to the resources. Evaluation of impact will be the data gathered on the number of individuals served for Emergency Services.

3. Improve coordination of efforts between individual treating physicians and the community of mental health services providers. The Clark County combined health district will be performing a survey of local physician to identify referral practices and local providers to identify contact information, types of services available and referral requirements.
4. Create a seamless continuum of care from the school through the various medical and social service agencies when dealing with school-age children in Clark County who present with suicidal ideation or other acute mental health issues. The Clark County MH Task Force will implement a Parental Consent to Treat and Release Information Form for use by all Springfield and Clark County School districts.
5. Improve the efficacy of the elementary educational experience by implementing the validated PAX GBC curriculum programming for elementary school programs throughout Springfield and Clark County and through training of elementary school teachers. The MH Task Force and MHRB will assist in the introduction of the program so that 50% of all elementary school programs will support PAX GBC in selected classrooms by the beginning of the 2017/2018 academic year.
6. Youth Suicidal Ideation: to reduce the incidence of reported suicidal ideation amount middle school-age children in Clark County. Implement evidence-based programs/interventions in Springfield and Clark County School districts for middle school age students. Resources committed: Mental Health counselors have been hired for city and county school positions. In addition, our Crisis Intervention staff will assist in placement of youth needing hospitalization services.