



# **FY24-26 Lewis and Clark County Behavioral Health Local Advisory Council – A Three-Year Strategic Planning Session Report Helena, MT**

## **SESSION OVERVIEW**

On February 6, 2024, a group of 25 active LAC members and community advocates, LCPH staff and newly engaged came together at the Intermountain Conference Center in Helena for a 3-hour Strategic Planning Session. This was an increased participation by 25% from FY21 and attendee participation was an amazing combination of existing and new community advocates!

This synergetic group arrived ready to engage and create which resulted in the development of the LAC five pillar topics , goals, objectives and some activities. The participants made great strides in storming and forming for LAC strategic plans for the next three years!.

Dan Clark, Director of MSU Local Government Center, was familiar with the Local Advisory Council and provided strategic planning consulting that included several contacts with the Local Advisory Council Steering Committee, LCPH Staff and Members and Advocates. This was a cumulative multi-prong process which entailed pre-planning, pre-surveys and day of event strategic engagement to reach our successful strategic planning outcome. Thanks to all!

The day's agenda included the LAC mission, community needs and past accomplishments, challenges and focus areas identified in the pre-survey to set the foundation for strategic themes/pillars, objectives and to begin the creative process of framing a 3-year strategic workplan for each of the five pillars identified by the end of the session.

This year, our strategic planning time was extended to allow more input from all and dive deeper into goals and objectives with all engaged. The five-behavioral health pillars identified for FY24-FY26 are:

### **FIVE BH STRATEGIC PILLARS:**

- 1. Community Engagement**
- 2. Behavioral Health Continuum of Care**
- 3. Lobbying and Advocacy**
- 4. Data Analysis & Sharing**
- 5. Prevention and Wellness**

**PRIORITY GOALS AND OBJECTIVES UNDER STRATEGIC PILLARS:**

<b>Community Engagement #1</b>	<b>Behavioral Health Continuum of Care#2</b>	<b>Lobbying and Advocacy #3</b>	<b>Data Analysis &amp; Sharing #4</b>	<b>Prevention and Wellness #5</b>
Increase individuals with lived experience and LAC discussions/consumer voice	Crisis Receiving & Stabilization Facility *Sustainable Funding *Investment in staff *Rural Services	Advocate for changes in MCA & ARM rules/law	Sharing data with government, legislators, etc.	Robust Peer Services in Community
Recruitment	Coordination of Care- reduce silos and transition to best level of care	Medicaid billing reimbursement	BH Crisis Dashboard- Promote	Wellness, skill building groups *WRAP: Wellness, Recovery, Action, Plans”
Marketing: Talking points, tabling and t-shirts *Educate communities about LAC	Crisis Facility step down care... *Transitional Housing	Consumer voice, training, forum	Quarterly and Annual Reporting	Specialty Interventionists
Educate. Communities on Crisis Response & Stabilization	Coordination of wrap-around services	Legislative Forum (LAC Biannual) Educate Legislature	Youth Mental Health	Community Education Effort
Member Spotlight	Co-Occurring Services Case Management	Visit Capitol -BH Lobby Day-Host?	Actionable Data	BH Prevention Courts
Government Agency engagement	SUD Detox/Treatment *Education on MAT Programs	Attend Legislative sessions	Substance and Opioid Use Data	Organizational Program Directories?
Integrate LAC with Leadership Team	Psychiatric Medication	DPHHS: State grants, quarterly presentations at LAC, funding delay notification	MH Screening Data (PHQ9, GHD7, CSSRS)	Trainings *Provider Education *School Health Education *Peer Support Services
Education & Stigma Reductions	Provider & Peer Support throughout process	County and City Commission Meetings-engage, attend	Forecasting	Behavioral Health 360
Simplify and familiarize MH language (DBT,CBTT, etc.)	Needed: *Doctor at Detention Center *Shelters *Drop-in Center	Identify whose missing at the table.?	Detention Center Data	*Early Intervention is Prevention- Early Needs Assessment. NARCAN Training *Opioid Education *Homelessness

**STRATEGIC WORKGROUP MEMBER COMMITMENT AT SESSION**

#	Strategic Workgroups Pillars	Interested Members Signed on at Strategic Planning Session
1	Community Engagement	Emily McVey, Ashley Moniz, Michael Ericson, Brian Coplin, Todd Tecca, Brandy Vail and Ali Mullen
2	Behavioral Health Continuum of Care	Ryan Leman, Jenn Preble, Jillian Danesi, Theresa Ortega, Brian Coplin, Berta Haverson, Drenda Niemann and Emily McVey and Dr. Elizabeth Cintron
3	Lobbying and Advocacy	Jeni Leary, Dr. Jen Preble, Gary Mihelish, Brian Coplin, Emily McVey, Todd Tecca, Brian Coplin
4	Data Analysis and Sharing	Emily McVey, Gary Mihelish, Theresa Ortega, Ben McGaugh, Brian Coplin
5	Prevention and Wellness	Sarah Graham, Kayleigh Brown, Todd Tecca, Jeni Leary, Emily McVey, Ben McGaugh, Gary Mihelish, Brandy Vail and Joel Peden

**NEXT STEPS -FORMING TEAMS**

**Connecting Pillar Team Members** and identifying lead or co-leads.

**Creating the three-year logic model**-which can be built using pillar goals/objectives list for an easy starting point.

**Solidify** strategy and yearly goals, collaborations and outcomes for each of the four pillars for next three years.

**A common thread** that ran thru the majority of workgroups was education, something to consider in all groups.

**Complete initial logic model planning by June1, 2024**-Logic Model is a living document and can be added on to for year 2/3 activities later along with updating progress as made.

**LAC participants select one or two maximum groups each to join.**

**Create logic model** for each strategic pillar workgroup-Enter goals, objectives and create action steps for each of the next 3 years as a guide and reportable measure of output/impact.

**Schedule monthly meeting for workgroup and provide 3-5minute update** at monthly general LAC meeting to include workplan progress and challenges.

***LCC BH Local Advisory Council Bylaws Reference to guide workgroup strategic pillar; goals, objectives and activities:***

**Mission**

The purpose of the LAC is to assist in the improvement of LCC County Public Health Behavioral Health (Mental Illness and Substance Use Disorders) services and to review and make recommendations about behavioral health services to LCC and Service Area Authorities (SAA).

**Guiding Principles–Key terms in our bylaws guiding principles are:**

- Examine gaps and recommend solutions.
- Identify potential additions to services and make recommendation.
- Analyze and discuss local problems experienced by service providers.
- Facilitate accurate and timely communications between/among partners.
- Assess the effectiveness of services and suggest ways of making services more effective.
- Serve as a catalyst and facilitator in solving service problems.
- Recommend strategies for organization and coordination of services.
- Work with providers to provide education on behavioral health issues.