

Legislative Oversight Committee

South Carolina House of Representatives

Post Office Box 11867

Columbia, South Carolina 29211

Telephone: (803) 212-6810 • Fax: (803) 212-6811



2016 Annual Restructuring Report Extension Request Guidelines

PLEASE NOTE:

The information included in the agency's report will appear online for all legislators and the public to view.

Agency Name:

South Carolina Department of Mental Health

Date Request Submitted:

January 8, 2016

Background

Committee Standard Practices 4.2.2 - 4.2.4

Extensions for Annual Restructuring Reports

4.2.2 The Chairman may, for reasons he determines as good cause, provide an agency an extension and new deadline to submit its Annual Restructuring Report ("New Deadline"). The Chairman will not provide more than two extensions without unanimous consent from the full committee.

4.2.3 Before the Chairman will consider a request from an agency for an extension, the agency must fully complete a Committee Extension Request form, as approved by the Committee Chairman, and provide it to the Chairman for consideration.

4.2.4 Until the agency receives a response, it should continue to complete the report to the best of its ability as if it is due on the original deadline.

Submission Process

Note this Extension Request Form will be published online.

Agency	South Carolina Department of Mental Health
Date of Submission	1/8/2016

Instructions : Please complete this Extension Request Form. The completed form should be submitted electronically to the House Legislative Oversight Committee (HCommLegOv@schouse.gov) in both the original format (Excel) and saved as a PDF for online reporting. Please direct any questions about this process to Jennifer Dobson (jenniferdobson@schouse.gov) or Charles Appleby (charlesappleby@schouse.gov).

I. Extension Request

1	State the date the agency originally received the report guidelines:	11/24/2015
2	State the date the agency submitted this request for an extension:	1/8/2016
3	State the original deadline for the report:	January 12, 2016, first day of session as provided by statute
4	State the number of additional days the agency is requesting:	14
5	State the new deadline if the additional days are granted:	1/20/2016

II. History of Extensions

1	List the years in which the agency previously requested an extension, putting the years the extension was granted in bold:	NA
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III. Good Cause

1	Please state good cause as to why the Committee should grant the extension requested by the agency. Please limit the response to 1,000 words or less.	<p>1. The Department of Mental Health wishes to reply with accurate, meaningful information. 2. The information requested involves key staff involved in legal affairs, strategic planning, and finance. Many of the key staff were on leave, at various times, during the period that collaboration and discussion of the request was required due to people taking end-of-year leave during traditional state holiday periods. 3. The person primarily responsible for accumulating this information and assuring it's accuracy through a careful review with appropriate senior level staff was unable to devote adequate time to this task. This person has been specifically trained by FEMA and the Substance Abuse and Mental Health Services Administration (SAMHSA) to author federal grants to provide behavior health services in response to federally declared disasters (Crisis Counseling Program grants). An initial grant is in place and this person needed to assist in implementing the services across twenty counties. A second grant for Crisis Counseling Services is being completed and will be turned into FEMA, SAMHSA, and the Disaster Technical Assistance Center before being forwarded to the US Congress for approval. The total funding (if the second grant is also approved) will be in excess of \$4.6 million dollars and serve all twenty-four counties under the presidential disaster declaration. After today, this person will largely return to normal duties and have adequate time to respond to your request effectively.</p>
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IV. Verification

1	Please state the name of the agency head, or person designated and authorized by the agency head to do so, that has approved and reviewed the information provided in this Extension Request form.	John H. Magill, Director, SCDMH
2	Does the agency head, or designated person by the agency head, affirm that the information contained in this form from the agency is complete and accurate to the extent of his or her knowledge.	Yes

V. Committee Response

Leave this section blank.		
1	Date extension was granted:	8-Jan-16
2	Number of additional days granted:	14 days

Submission Process

3

New deadline for agency response:

20-Jan-16

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2016 Annual Restructuring Report Guidelines

PLEASE NOTE:

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Agency Name:

Date Report Submitted:

Agency Head

First Name

Last Name:

Email Address:

Phone Number:

Department of Mental Health

January 26, 2016

John

Magill

John.Magill@SCDMH.ORG

803-898-8319

General Instructions

SUBMISSIONS	
What to submit?	Please submit this document in electronically only in both the original format (Excel) as well as in a PDF document. Save the document as "2016 - Agency ARR (<i>insert date agency submits report</i>)."
When to submit?	The deadline for submission is by the first day of session, January 12, 2016.
Where to submit?	Email all electronic copies to HCommLegOv@schouse.gov .

NOTE: If the agency enters its Name and the Date of Submission in the "Cover Page" tab, it should automatically populate at the top of each tab in this report.

WHERE INFORMATION WILL APPEAR	
Where will submissions appear?	The information included in the agency's report will appear online for all legislators and the public to view. On the South Carolina Statehouse Website it will appear on the Publications page as well as on the individual agency page, which can be accessed from the House Legislative Oversight Page.

QUESTIONS	
Who to contact?	House Legislative Oversight at 803-212-6810.

OTHER INFORMATION	
<i>House Legislative Oversight</i>	
Mailing	Post Office Box 11867
Phone	803-212-6810
Fax	803-212-6811
Email	HCommLegOv@schouse.gov
Web	The agency may visit the South Carolina General Assembly Home Page (http://www.scstatehouse.gov) and click on "Citizens' Interest" then click on "House Legislative Oversight Committee Postings and Reports."

Legal Standards

This is the first chart in the report because the legal standards which apply to the agency should serve as the basis for the agency's mission, vision and strategic plan.

Agency Responding	Department of Mental Health
Date of Submission	26-Jan-16

Instructions : List all state and federal statutes, regulations and provisos that apply to the agency (“Laws”) and a summary of the statutory requirement and/or authority granted in the particular Law listed. If the agency grouped Laws together last year, they can continue to do so this year. However, please be aware that when the agency goes under study, the House Legislative Oversight Committee will ask it to list each Law individually. The Committee makes this request so the agency can then analyze each of the Laws to determine which current Laws may need to be modified or eliminated, as well as any new Laws possibly needed, to allow the agency to be more effective and efficient or to ensure the Law matches current practices and systems. Included below is an example, with a partial list of Laws which apply to the Department of Juvenile Justice. Please delete the example information before submitting this chart in final form. NOTE: Responses are not limited to the number of rows below that have borders around them, please list all that are applicable.

Item #	Statute, Regulation, or Proviso Number	State or Federal	Summary of Statutory Requirement and/or Authority Granted	Is the law a Statute, Proviso or Regulation?
1	SECTION 44-9-10.	State	SCDMH creation and authority over State's mental hospitals, clinics (community mental health centers) for mental health and alcohol and drug treatment, including the authority to name each facility.	Statute
2	SECTION 44-9-30.	State	Creation of South Carolina Mental Health Commission and its authority	Statute
3	SECTION 44-9-40.	State	Appointment of the State Director of Mental Health and powers, duties and qualifications.	Statute
4	SECTION 44-9-50.	State	Divisions of SCDMH as authorized by State Director and Commission.	Statute
5	SECTION 44-9-60.	State	Appointment of directors of hospitals; employment of personnel.	Statute
6	SECTION 44-9-70.	State	Administration of Federal funds; development of mental health clinics.	Statute
7	SECTION 44-9-80.	State	Utilization of Federal funds provided to improve services to patients.	Statute

Legal Standards

8	SECTION 44-9-90 and 100.	State	Powers and duties of Mental Health Commission.	Statute
9	SECTION 44-9-110.	State	Authority of the Commission to accept gifts and grants on behalf of SCDMH	Statute
10	SECTION 44-9-120.	State	Annual report of Commission to Governor	Statute
11	SECTION 44-11-10.	State	SCDMH Inpatient and Outpatient Facilities to be maintained and purposes	Statute
12	SECTION 44-11-30.	State	Establishment, purpose and admission requirements of SCDMH South Carolina Veterans Homes.	Statute
13	SECTION 44-11-60.	State	Establishment of mental health clinics/centers	Statute
14	SECTION 44-11-70.	State	Appointment and powers of SCDMH inpatient facility marshals (Public Safety officers).	Statute
15	SECTION 44-11-75.	State	Entering or refusing to leave state mental health facility following warning or request; penalty.	Statute
16	SECTION 44-11-110.	State	Commission and Attorney General approval of easements and rights of way on SCDMH grounds	Statute
17	SECTION 44-13-05.	State	Crisis Stabilization Program procedures (for mental health centers having such capability)	Statute
18	SECTION 44-13-10.	State	Detention and care of individual by county pending removal to SCDMH inpatient facility.	Statute
19	SECTION 44-13-20.	State	Admission of resident ordered committed by foreign court.	Statute
20	SECTION 44-13-30.	State	Removal of patient who is not a citizen of this State.	Statute
21	SECTION 44-13-40.	State	Removal of alien patient.	Statute
22	SECTION 44-13-50.	State	Return of patient to out-of-State mental health facility.	Statute
23	SECTION 44-13-60.	State	Transfer of custody of infirm or harmless patient to custodian, guardian or county.	Statute
24	SECTION 44-15-10.	State	Establishment of local mental health programs and clinics/centers	Statute
25	SECTION 44-15-20.	State	Mental health center Services for which funds may be granted.	Statute
26	SECTION 44-15-30.	State	Applications for mental health center funds .	Statute
27	SECTION 44-15-40.	State	Allocation of mental health center funds and review of expenditures.	Statute
28	SECTION 44-15-50.	State	Grants for mental health center services.	Statute
29	SECTION 44-15-60.	State	Establishment and membership of community mental health center boards.	Statute
30	SECTION 44-15-70.	State	Powers and duties of community mental health center boards	Statute
31	SECTION 44-15-80.	State	Powers and duties of SCDMH related to mental health centers	Statute
32	SECTION 44-15-90.	State	Mental health center unexpended appropriations.	Statute

Legal Standards

33	Section 44-17-10, et. seq.	State	Care and Commitment of Mentally Ill Persons	Statute
34	SECTION 44-22-20.	State	Patients right to writ of habeas corpus.	Statute
35	SECTION 44-22-30.	State	Involuntary Patients right to counsel	Statute
36	SECTION 44-22-40.	State	Consent to treatment	Statute
37	SECTION 44-22-50.	State	Treatment suited to needs; least restrictive care and treatment.	Statute
38	SECTION 44-22-60.	State	Explanation of rights with regard to admission to inpatient facility; individualized treatment plan.	Statute
39	SECTION 44-22-70.	State	Assessment, individualized treatment plan; discharge plan; notice of discharge.	Statute
40	SECTION 44-22-80.	State	Patients' rights.	Statute
41	SECTION 44-22-90.	State	Communications with mental health professionals privileged; exceptions.	Statute
42	SECTION 44-22-100.	State	Confidentiality of records; exceptions; violations and penalties.	Statute
43	SECTION 44-22-110.	State	Access to medical records; appeal of denial of access.	Statute
44	SECTION 44-22-120.	State	Patients' rights communication, personal belongings and effects, clothing, religious practice etc.	Statute
45	SECTION 44-22-130.	State	Physical exam of involuntary inpatient to rule out physical conditions mimicking mental illness.	Statute
46	SECTION 44-22-140.	State	Authorization and responsibility for treatment, medication and qualified right to refuse.	Statute
47	SECTION 44-22-150.	State	Patient Restraint; seclusion; physical coercion.	Statute
48	SECTION 44-22-160.	State	Employment within inpatient facility; compensation; right to refuse nontherapeutic employment.	Statute
49	SECTION 44-22-170.	State	Education of school-aged patients .	Statute
50	SECTION 44-22-180.	State	Exercise and exercise facilities; patient right to go outdoors.	Statute
51	SECTION 44-22-190.	State	DEW and VR assist SCDMH to find employment for mentally disabled	Statute
52	SECTION 44-22-200.	State	Movement of patients; court approval required for move to more restrictive setting.	Statute

Legal Standards

53	SECTION 44-22-210.	State	Patient Temporary leaves of absence.	Statute
54	SECTION 44-22-220.	State	Grievances concerning patient rights; penalties for denial of patient rights.	Statute
55	SECTION 44-23-40.	State	Appeal to court from rules and regulations adopted by SCDMH	Statute
56	SECTION 44-23-210.	State	Transfer of confined persons to or between SCDMH and DDSN	Statute
57	SECTION 44-23-220.	State	Inpatient admission of persons in jail.	Statute
58	SECTION 44-23-240.	State	Criminal liability of anyone causing unwarranted confinement.	Statute
59	SECTION 44-23-410.	State	Determining fitness/capacity to stand trial	Statute
60	SECTION 44-23-420.	State	Fitness to stand trial examiner's report.	Statute
61	SECTION 44-23-430.	State	Hearing on fitness capacity to stand trial; effect of outcome.	Statute
62	SECTION 44-23-450.	State	Reexamination of finding of unfitness.	Statute
63	SECTION 44-23-460.	State	Procedure when SCDMH determines forensic patient no longer requires hospitalization.	Statute
64	SECTION 44-23-1080.	State	Patients or prisoner denied access to alcoholic, firearms, dangerous weapons and controlled substances.	Statute
65	SECTION 44-23-1100.	State	Confidentiality and disclosure of copies of probate judge forms/documents.	Statute
66	SECTION 44-23-1110.	State	Charges for patient/client maintenance, care and services.	Statute
67	SECTION 44-23-1120.	State	Liability of estate of deceased patient or client	Statute
68	SECTION 44-23-1130.	State	Payment contracts for care and treatment by persons legally responsible	Statute
69	SECTION 44-23-1140.	State	Lien for care and treatment; filing statement; limitation of action for enforcement.	Statute

Legal Standards

70	SECTION 44-23-1150.	State	Sexual misconduct with an inmate, patient, or offender.	Statute
71	SECTION 44- 24-10, et seq.	State	Commitment of Children in Need of Mental Health Treatment	Statute
72	SECTION 44-25-10, et. seq.	State	Interstate Compact on Mental Health	Statute
73	SECTION 44-48-10, et. seq.	State	Sexually Violent Predator commitment, detention, treatment and release	Statute
74	SECTION 44-52-5, et. seq.	State	Alcohol and Drug Abuse Commitment	Statute
75	SECTION 62-5-105.	State	SCDMH Director or designee may act as conservator for a patient in a SCDMH inpatient facility and funds used for patient's care and maintenance.	Statute
76	SECTION 17-24-40	State	Criminal procedure for defendants found Not Guilty by Reason of Insanity	Statute
77	SECTION 43-35-10 et. Seq.	State	Adult Protection Act	Statute

Mission, Vision and Goals

This is the second chart because the agency's mission and vision should have a basis in the legal standards, which the agency provided in the previous chart. After the agency knows the laws it must satisfy, along with its mission and vision, it can then set goals to satisfy those laws and achieve that vision (and the strategy and objectives to accomplish each goal - see next chart). To ensure accountability, one person below the head of the agency should be responsible for each goal. The same person is not required to be responsible for all of the goals.

Agency Responding	Department of Mental Health
Date of Submission	26-Jan-16
Fiscal Year for which information below pertains	2015-16

Instructions : Provide the agency's mission, vision and laws (i.e. state and/or federal statutes) which serve as the basis for the agency's mission and vision.

Mission	To support the recovery of people with mental illness.
Legal Basis for agency's mission	Stature 44-9-10 There is hereby created the State Department of Mental Health which shall have jurisdiction over all the State's mental hospitals, clinics, and centers, joint state and community sponsored mental health clinics and centers and facilities for the treatment and care of alcohol and drug addicts, including the authority to name each facility.
Vision	The South Carolina Department of Mental Health gives priority to adults, children, and their
Legal Basis for agency's vision	Title 44, Chapters 13, 15, and 17.

Instructions :

- 1) Under the "Legal Responsibilities Satisfied" column, enter the legal responsibilities (i.e. state and/or federal statutes and provisos) the goal is satisfying. All of the laws mentioned in the previous chart (i.e. Legal Standards Chart) should be included next to one of the agency's goals. When listing the Legal Responsibilities Satisfied, the agency can group the standards together when applicable (i.e. SC Code 63-19-320 thru 63-19-450). Make sure it is clear whether the agency is referencing state or federal laws and whether it is a proviso or statute.
- 2) Under the "Goals and Description" column, enter the number and description of the goal which will help the agency achieve its vision (i.e. Goal 1 - Increase the number of job opportunities available to juveniles to 20 per juvenile within the next 2 years). The agency should have 3-4 high level goals.
- 3) Under the "Describe how the Goal is SMART" column, enter the information which shows the goal is Specific, Measurable, Attainable, Relevant and Time-bound.
- 4) Under the "Public Benefit/Intended Outcome" column, enter the intended outcome of accomplishing the goal.
- 5) Under the "Responsible Person" columns, provide information about the individual who has primary responsibility/accountability for each goal. The Responsible Person has different teams of employees beneath him/her to help accomplish the goal. The Responsible Person is the person who, in conjunction with his/her team(s) and approval from higher level superiors, determines the strategy and objectives to accomplish the goal. In addition, this is the person who monitors the progress and makes any changes needed to the strategies and objectives to ensure the goal is accomplished. Under the "Position" column, enter the Responsible Person's position/title at the agency.

Legal Responsibilities Satisfied <small>(i.e. state and federal statutes or provisos the goal is satisfying)</small>	Goals & Description <small>(i.e. Goal 1 - insert description)</small>	Describe how the Goal is S.M.A.R.T. <small>Specific Measurable Attainable Relevant Time-bound</small>	Public Benefit/Intended Outcome	Responsible Person Name:	Number of months person has been responsible for the goal or objective:	Position:
Title 44, Chapter 17	Maintain Clinical Programs at Current Levels.	See objectives.	People in need of services will receive safe, efficient, and effective care.	Geoff Mason		
Title 44, Chapter 13	Capitalize on Current Technological Advances	See objectives.	Technology will reduce dependence upon scarce and expensive resources, increasing availability of services while reducing costs.	Robert Bank, M.D.		
Title 44, Chapter 15	SCDMH will be Positioned to Meet an Increased Demand for Services.	See objectives. Goals based upon guidelines for annual Accountability Report.	As the Affordable Health Care Act reduces concerns of cost for services, increasing volume may limit access. SCDMH will assure services are accessible .	Mark Binkley		

Strategy, Objectives and Responsibility

This is the next chart because once the agency determines its goals, and those responsible for each goal, it then needs to determine the strategy and objectives to accomplish each goal. To ensure accountability, one person should be responsible for each objective. This can be the same person responsible for the goal, if it is a small agency, or, for larger agencies, a person who reports to the person responsible for the goal. The same person is not required to be responsible for all of the objectives.

Agency Responding	Department of Mental Health
Date of Submission	1/26/2016
Fiscal Year for which	2015-16

Instructions:

- Under the "Legal Responsibilities Satisfied" column, enter the legal responsibilities (i.e. state and/or federal statutes and provisos) the goal or objective is satisfying. For each goal, the agency can copy and paste the information from the Mission, Vision and Goals Chart. All of the legal standards mentioned for a particular goal should be included next to one of the objectives under that goal. When listing the Legal Responsibilities Satisfied, the agency can group the standards together when applicable (i.e. 63-19-320 thru 63-19-370). Make sure it is clear whether the agency is referencing state or federal laws and whether it is a proviso or statute.
- Under the "Strategic Plan Part and Description" column, enter the strategic plan part number and description (i.e. Goal 1 - Increase the number of job opportunities available to juveniles to 20 per juvenile within the next 2 years). For each goal, the agency can copy and paste the information from the Mission, Vision and Goals Chart. If the agency is still utilizing the same strategies and objectives it submitted as part of the Accountability Report, it can copy and paste those into this chart, then fill in the remainder of the columns. However, if the agency has trouble explaining how each objective is SMART, it may need to revise its objectives. In addition, if the agency has revised its strategic plan since submitting its last Accountability Report, please provide information from the most current strategic plan.
- Under the "Describe how it is SMART" column, enter the information which shows how each goal and objective is Specific, Measurable, Attainable, Relevant and Time-bound.
- Under the "Public Benefit/Intended Outcome" column, enter the intended outcome of accomplishing each goal and objective.
- Under the "Responsible Person" columns, provide information about the individual who has primary responsibility/accountability for each goal and objective. The Responsible Person for a goal has different teams of employees beneath him/her to help accomplish the goal. The Responsible Person for an objective has employees and possibly different teams of employees beneath him/her to help accomplish the objective. The Responsible Person for a goal is the person who, in conjunction with his/her team(s) and approval from higher level superiors, determines the strategy and objectives needed to accomplish the goal. The Responsible Person for an objective is the person who, in conjunction with his/her employees and approval from higher level superiors, sets the performance measure targets and heads the game plan for how to accomplish the objective for which he/she is responsible. Under the "Position" column, enter the Responsible Person's position/title at the agency. Under "Office Address" column, enter the address for the office from which the Responsible Person works. Under the "Department/Division" column, enter the department or division at the agency in which the Responsible Person works. Under the "Department/Division Summary" column, enter a brief summary (no more than 1-2 sentences) of what that department or division does in the agency.

Legal Responsibilities Satisfied:	Goal	Strategy	Objective	Description	How it is S.M.A.R.T.:	Public Benefit/Intended Outcome:	Responsible Person Name:	Number of months person has been responsible for the goal or objective:	Position:	Office Address:	Department or Division:
Care and Commitment of Mentally Ill Persons	1			Maintain Clinical Programs at Current Levels.		The Department will be able to provide services to people in need.					
		1		Assure resources exist to serve people needing services.		People will have access to services.	John Magill	More than 7	State Director	2414 Bull Str. Columbia	State Director
The agency does not need to insert the information for the rest of the columns for any strategy, type "n/a"			1.1.1	Services will reach people in need.	This information has been copied and pasted from the Department's FY 2015 Accountability Report (per instructions). The Department has identified specific, measurable, performance measures with target dates for each but applying SMART terminology to Goals and Strategies will require the efforts of strategic planning by senior management and appropriate stakeholders.	Services will be available. Where and when needed.	Geoff Mason	More than 7	Deputy Director	2414 Bull Str. Columbia	Community Mental Health Service
			1.1.2	Patients and their families will be satisfied with services received.		People will receive meaningful services.	Sandy Hyre	More than 7	Program Director		Education, Training, and Research
			1.1.3	School based services will be available in more sites.		School-aged children will have services available in school settings.	Louise Johnson	More than 7	Program Director	2414 Bull Str. Columbia	Child and Adolescent Services
	2			Inpatient Care will be efficient, safe, and effective.		People requiring inpatient care will receive best care available in SC.	Versie Bellamy	More than 7	Deputy Director		Inpatient Services
			1.2.1	Department will demonstrate cost-efficiency in the delivery of services.		Cost per day will be competitive with facilities operating with similar services.	David Schaefer	More than 7	Program Director		Financial Services
			1.2.2	Standards of care will be competitive with facilities offering similar types of services.		Entering a state-run facility will mean receiving best services available in SC.	Versie Bellamy	More than 7	Deputy Director		Inpatient Services

Strategy, Objectives and Responsibility

		1.2.3	Upon discharge, patients will receive timely follow-up services.		Discharge appointments will be available within reasonable time following discharge.	Geoff Mason	More than 7	Deputy Director	2414 Bull Str. Columbia	Community Mental Health Service	
	3		People will demonstrate increased levels of competence and independence.		Demonstrated improvement assures insurance and other 3rd party payors will cover expense of services.	Geoff Mason	More than 7	Deputy Director	2414 Bull Str. Columbia	Community Mental Health Service	
		1.3.1	Department will focus services on target populations (severely persistently ill or emotionally disturbed).		Department will focus upon most needy of SC population.	Ligia Latif-Bolet	More than 7	Program Director	2414 Bull Str. Columbia	Quality Assurance	
		1.3.2	Increased percentage of adult patients being gainfully employed.		Gainful employment is both an indicator of treatment success and aid to achieving success.	Demetrius Henderson	More than 7	Program Director	2414 Bull Str. Columbia	Community Mental Health Service	
		1.3.3	Through TLC and housing programs, patients will find safe, affordable housing in communities.		Safe and affordable housing is necessary for community tenure.	Jeff Ham	More than 7	Program Director	2414 Bull Str. Columbia	Community Mental Health Service	
		1.3.4	Patients served will demonstrate improvements in psychiatric well-being.		Improved mental functioning is the overriding mission of the Department.	Jeff Ham	More than 7	Program Director	2414 Bull Str. Columbia	Community Mental Health Service	
Admission Detention and Removal of People at State Mental Health Facilities	2		Capitalize on Current Technological Advances								
		1	Decrease hospital Emergency Departments' (EDs) wait times and expenses using Telepsychiatry Services		Reduce costs to taxpayers while making best use of scarce resources.	Ed Spencer	More than 7	Program Director		Telepsychiatry	
			2.1.1	Demonstrate cost savings for ED patients when telepsychiatry services are available.		Assure cost to taxpayers is efficient.	Ed Spencer	More than 7	Program Director		Telepsychiatry
			2.1.2	Demonstrate decreased time patients spend in ED when telepsychiatry is available.		People will spend less time in emergency rooms and receive appropriate services in a more timely manner.	Ed Spencer	More than 7	Program Director		Telepsychiatry
			2.1.3	Increase the number of hospitals utilizing telepsychiatry annually.		Continue to improve utilization of scarce resources.	Ed Spencer	More than 7	Program Director		Telepsychiatry
		2		Increase physician coverage in rural areas.		People in need of services will spend less time in travel to receive those services.	Brenda Ratliff, M.D.	More than 7	Program Director		Telepsychiatry
			2.2.1	Demonstrate increased physician coverage in rural areas.		See above.	Brenda Ratliff, M.D.	More than 7	Program Director		Telepsychiatry
		3		Utilize online training to reduce staff time and travel related costs.		Reduce travel expenses and better utilize staff time.	Sandy Hyre	More than 7	Program Director		Education, Training, and Research
			2.3.1	Demonstrate effectiveness of online training.		Track costs and availability of telecommunication devices to assure efficiency targets are achieved.	Sandy Hyre	More than 7	Program Director		Education, Training, and Research
			2.3.2	Maximize use of videoconference equipment to decrease staff time and travel related costs for routine meetings.		Same as above.	Sandy Hyre	More than 7	Program Director		Education, Training, and Research
Local Mental Health Programs, Boards, and Centers	3		SCDMH will be Positioned to Meet an Increased Demand for Services.								
		1	SCDMH will explain its services to public and elected officials while learning of community needs.		People will understand benefits of available services and how to obtain those services.	Rochelle Caton	More than 7	Program Director	2414 Bull Str. Columbia	Legal Affairs	
			3.1.1	Stake holder meetings will continue across state.		Needs of stakeholders and Department can be better achieved through collaboration.	Stewart Cooner	More than 7	Program Director	2414 Bull Str. Columbia	Administrative Services
		2		Community Mental Health Centers will Increase Efficiency to Meet Demands for Outpatient Services		More services available while maintaining cost of services.	Geoff Mason	More than 7		2414 Bull Str. Columbia	Community Mental Health Services
			3.2.1	Increase number of people served in community settings.		People requiring services will have access.	Geoff Mason	More than 7	Deputy Director	2414 Bull Str. Columbia	Community Mental Health Services
			3.2.2	CMHCs will determine that people have opportunities for services within a reasonable time.		People will receive services where and when needed.	Geoff Mason	More than 7	Deputy Director	2414 Bull Str. Columbia	Community Mental Health Services

Strategy, Objectives and Responsibility

		3.2.3	Demonstrate increased efficiency by providing an increase of needed services.		People will receive the benefit of timely services.	Geoff Mason	More than 7	Deputy Director	2414 Bull Str. Columbia	Community Mental Health Services
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Associated Programs

This is the next chart because once the agency has determined its goals, strategies and objectives, the agency needs to determine which of its programs will help achieve those objectives and goals and which programs may need to be curtailed or eliminated. If one program is helping accomplish an objective that a lot of other programs are also helping accomplish, the agency should consider whether the resources needed for that program could be better utilized (i.e. so the agency can most effectively and efficiently accomplish all of its goals and objectives) if they were distributed among the other programs that are helping accomplish the same objective or among programs that are helping accomplish other objectives.

Agency Responding	Department of Mental Health	24-Jan-16
Date of Submission	1/26/2016	
Fiscal Year for which information below pertains	2015-16	

Instructions :

- 1) Under the "Name of Agency Program" column, enter the name of every program at the agency on a separate row.
- 2) Under the "Description of Program" column, enter a 1-3 sentence description of the agency program.
- 3) Under the "Legal Statute Requiring Program" column, enter the legal statute which requires (this is different than allows) the program, if the program is required by a state or federal statute or proviso. Make sure it is clear whether the agency is referencing state or federal laws and whether it is a proviso or statute. If the program is not required by a state or federal statute or proviso, enter "none."
- 3) Under the "Objective the Program Helps Accomplish" column, enter the strategic plan objective number and description. The agency can copy the Objective number and description from the first column of the Strategy, Objective and Responsibility Chart. Enter ONLY ONE objective per row. If an agency program helps accomplish multiple objectives, insert additional rows with that agency program information and enter each different objective it helps accomplish on a separate row.

Name of Agency Program	Description of Program	Legal Statute or Proviso Requiring the Program	Objective the Program Helps Accomplish (The agency can copy the Objective number and description from the first column of the Strategy, Objective and Responsibility Chart) List <u>ONLY ONE</u> strategic objective per row.
Assertive Community Treatment	The South Carolina Mental Health system has implemented ACT-like programs to serve clients that need intensive, comprehensive and well-coordinated services that will reduce the utilization of costly services such as psychiatric hospitalizations and emergency room visits. Because of the traditional ACT model's limited capacity to serve clients, limited research in rural areas, and expense, SCDMH is proposing to implement ACT-like programs in community mental health centers. These ACT-like teams may consist of four staff members including a nurse, Mental Health Professional (MHP) and two case managers or some combination of clinicians. ACT-like programs must be conducted in accordance with the following principles. Clients enrolled in the ACT-like programs should be at risk for hospitalization, have previous hospitalization(s), or be frequent users of emergency rooms and/or jails. ACT-like team members should be accessible 24 hours and seven days a week. ACT-like team members should be consulted on their clients' hospitalizations and discharges from hospitals. ACT-like programs should maintain a staff to client ratio small enough to provide intensive services. Intensity of contacts should be based on the clients' clinical needs. ACT-like programs should discharge clients from the program when clinically appropriate.		Department will focus services on target populations (severely persistently ill or emotionally disturbed).

Associated Programs

Child and Adolescent and Families	Responsible for the development and implementation of the department's state-wide system of care for the children, adolescents and families of South Carolina. This includes keeping abreast of "Best Practices" trends in Child Mental Health and ensuring the implementation of these programs in South Carolina when appropriate. The Division of CAF serves as the central hub of communication for local CAF Directors, providing consultation services, technical assistance as well as a monthly forum for the discussion of issues relative to Children's Services.		Services will reach people in need.
Child and Adolescent and Families			School based services will be available in more sites.
Client Affairs	The mission of the Office of Client Affairs is to support the SCDMH Recovery Initiative through steering, continually developing and supporting client leaders for persons served thru the South Carolina Department of Mental Health.		Stake holder meetings will continue across state.
Consumer Employment	Responsible for the development and implementation of quality consumer employment and psychosocial rehabilitation programs as an integrated part of the mental health system. Provides technical assistance to centers and other agency divisions around best practices in recovery and consumer employment.		Increased percentage of adult patients being gainfully employed.
Continuity of Care	Coordinates and consults on implementation and ongoing maintenance of identified TLC long-term and crisis stabilization/diversion programs to ensure program integrity and accountability through monthly meetings, site visits, program evaluation and outcome measurement, training, and consultations. Collaborates with SCDMH psychiatric facilities to identify patient needs, coordinate hospital liaison activities, develop resources, and assist with linkage to available community resources to aid in clients' return to community in agreement with the Olmstead ruling and the Continuity of Care policies of the agency.		Upon discharge, patients will receive timely follow-up services.
Continuity of Care			CMHCs will determine that people have opportunities for services within a reasonable time.
Crisis Stabilization	The Director of Crisis Stabilization Services oversees annual funding allocations to community mental health centers statewide for the purpose of implementing enhanced crisis stabilization programs based on the local treatment needs of each catchment area. These programs are designed primarily with the goal of providing timely and intensive community intervention and support to those who may be experiencing a mental health and/or a substance abuse related crisis in an effort to prevent a lengthy hospital ER visit.		Demonstrate decreased time patients spend in ED when telepsychiatry is available.
Deaf Services	Directs the planning, oversight and evaluation of a continuum of outpatient and inpatient behavioral health services to persons in South Carolina who are Deaf and Hard of Hearing. Administers the recruitment, hiring and ongoing support of a staff of 35 direct service providers, and assures their fluency in American Sign Language. Is responsible for assuring all DMH programs are accessible to persons who are not able to effectively hear and understand speech. Develops innovative technological and human service program initiatives to be certain that all services are delivered in a cost-effective and timely manner throughout the state.		Services will reach people in need.
Forensic Services	Serves as SCDMH liaison with other human services and law enforcement entities to promote continuity of services for persons with mental illness in the criminal justice system. Provides training and consultation for law enforcement and coordinates a Biennial Forensic Forum which promotes opportunities for interagency cross training and networking.		Department will focus services on target populations (severely persistently ill or emotionally disturbed).
Housing and Homeless	Provides technical and financial assistance to eligible organizations for the development of safe, quality, and affordable housing options with supportive services for persons with serious and persistent mental illnesses.		Through TLC and housing programs, patients will find safe, affordable housing in communities.
Housing and Homeless			Patients served will demonstrate improvements in psychiatric well-being.
Toward Local Care	Coordinates and consults on implementation and ongoing maintenance of identified TLC long-term and crisis stabilization/diversion programs to ensure program integrity and accountability through monthly meetings, site visits, program evaluation and outcome measurement, training, and consultations. Collaborates with SCDMH psychiatric facilities to identify patient needs, coordinate hospital liaison activities, develop resources, and assist with linkage to available community resources to aid in clients' return to community in agreement with the Olmstead ruling and the Continuity of Care policies of the agency.		Through TLC and housing programs, patients will find safe, affordable housing in communities.
Toward Local Care			Patients served will demonstrate improvements in psychiatric well-being.

Associated Programs

Psychiatric Inpatient Hospitals	Provides psychiatric inpatient services to people of all ages in SC.		Services will reach people in need.
Psychiatric Inpatient Hospitals			Standards of care will be competitive with facilities offering similar types of services.
Psychiatric Inpatient Hospitals			Department will demonstrate cost-efficiency in the delivery of services.
Sexually Violent Predators	This program was established by legislation to provide treatment for persons adjudicated as sexually violent predators and is located within the confines of facilities maintained by the South Carolina Department of Corrections.		Department will focus services on target populations (severely persistently ill or emotionally disturbed).
Inpatient Substance Abuse Treatment Center	This hospital is licensed by the state of South Carolina and is accredited by the Commission on Accreditation of Rehabilitation Facilities. It provides in-patient treatment for adults with alcoholism and drug abuse or addiction; and, when indicated, addiction accompanied by psychiatric illness.		Standards of care will be competitive with facilities offering similar types of services.
Long Term Nursing Facility (Psychiatric)	Tucker Center is the long-term nursing care facility of the DMH providing intermediate and skilled care.		Standards of care will be competitive with facilities offering similar types of services.
Long Term Nursing Facility (SC Veterans)	Receives veterans from all areas of S.C. who meet eligibility requirements and is operated under an independent health care contractor.		Standards of care will be competitive with facilities offering similar types of services.
Office of Quality Management	Establishes methods and procedures to assure that services provided are of the highest quality; Systematically monitors performance against established standards for practice and implements actions for improvements as needed to assure that service delivery is appropriate and meets the needs of the consumers. Assesses the appropriateness and efficacy of services in light of the client's medical necessity. Promotes and monitors SC DMH adherence to state/federal laws and regulations as well as to requirements of third party payors for the delivery and billing of quality services. Coordinates a comprehensive statewide program to improve the care provided to clients who live in CRCF's; Implements and coordinates a statewide program to administer Pre-Admission Screening and Annual Resident Reviews (PASARR). A new branch of service for the department as of Jan 1, 2013. Clients will be able to access care whether in the community or at the Mental Health Center or other DMH facilities, with the assistance of a Care Coordinator. The Care Coordinator identifies and arranges for all the needs of the client, e.g. transitioning from inpatient to outpatient care or from private to nursing home as well as finding a Family Physician or Specialist, etc.		Standards of care will be competitive with facilities offering similar types of services.
Office of Quality Management			Patients and their families will be satisfied with services received.
Evaluation, Training, and Research	Services provided by ETR include: Professional development for participants in the SCDMH Mentoring Program; Administers the Continuing Medical Education (CME), Nursing Continuing Education (NCE) and Continuing Education (CEU) programs for other licensed clinicians in SCDMH in accordance with accrediting standards; Approves and monitors training which is qualified for Peer Support training hours; Develops an annual Needs Assessment survey for physicians, nurses and other clinicians in SCDMH. Uses the findings to develop education and training programs for staff; Researches, develops and produces Computerized Learning Modules for the agency; Plans, organizes and coordinates statewide training programs and conferences; Provides consultation and assistance in the area of training for Centers and Facilities within SCDMH.		Demonstrate effectiveness of online training.
Evaluation, Training, and Research			Maximize use of videoconference equipment to decrease staff time and travel related costs for routine meetings.
Telepsychiatry	DMH with support from the SC Hospital Association received numerous grants since 2007 to design and implement, develop and sustain a statewide psychiatry consultation service to local hospital emergency department (ED) physicians 24/7/365. To accomplish this goal, DMH has acquired several full time Psychiatrists, a Program Director, and other IT and program staff. Combined with other grant awards, the amount of funding received totals more than \$10 million. The two way teleconference system is comprised of a network of participating local hospital emergency departments equipped with wireless HD video and duplex voice equipment mounted on a mobile pole to be easily moved from room to room. Consultations are requested and occur as needed. This video and voice network is supplemented with the provision of electronic health record information through a grant from the SC Department of Health and Human Services.		Demonstrate cost savings for ED patients when telepsychiatry services are available.
Telepsychiatry			Demonstrate decreased time patients spend in ED when telepsychiatry is available.

Associated Programs

Telepsychiatry			Increase the number of hospitals utilizing telepsychiatry annually.
Pharmacy Consultation	VISION STATEMENT: Mental Health Community Pharmacy Services will be integrated into the Department's continuum of care. This patient-focused initiative will facilitate the treatment process at the appropriate level of care. A pharmacist will be available to communicate with the health care team to establish the most effective, cost-efficient pharmacotherapy for achieving recovery for the consumer in the community. Networking through automation will improve the flow of information parallel to processes as the consumer moves through the system. A product of the networking will be the availability of a complete medication profile which will enable the pharmacist to counsel consumers, clinicians, and other caregivers for optimizing pharmacotherapy.		Department will demonstrate cost-efficiency in the delivery of services.
Community Mental Health	Responsible for the daily operations of the state mental health service delivery system of the comprehensive community mental health centers.		Increase number of people served in community settings.
Community Mental Health			CMHCs will determine that people have opportunities for services within a reasonable time.
Community Mental Health			Demonstrate increased efficiency by providing an increase of needed services.

Strategic Budgeting

This is the next chart because once the agency determines its goals, strategies and objectives, as well as the programs that will best allow the agency to accomplish its objectives, the agency needs to determine how to allocate its funds to most effectively and efficiently accomplish the objectives. After allocating the funds to the objectives, the agency may decide to go back and revise which associated programs it will continue, curtail or eliminate in order to most effectively and efficiently accomplish its goals and objectives.

Agency Responding	Department of Mental Health
Date of Submission	26-Jan-16
Fiscal Year for which information below pertains	2015-2016

IMPORTANT TIME SAVING NOTE: Please note that only one year of budgeted funds is requested. Once an agency is under study with the House Legislative Oversight Committee, the Committee may request information on how the agency budgeted and spent money for the previous five years. If an agency is chosen for study five years from now, the agency can quickly and easily combine the information from this chart for each of the last five years.

Part A Instructions : Estimated Funds Available this Fiscal Year (2015-16)

1) Please enter each source of funds for the agency in a separate column. Group the funding sources however is best for the agency (i.e. general appropriation programs, proviso 18.2, proviso 19.3, grant ABC, grant XYZ, Motor Vehicle User Fees, License Fines, etc.) to provide the information requested below each source (i.e. state, other or federal funding; recurring or one-time funding; etc.). The agency is not restricted by the number of columns below so please delete or add as many as needed. **However the agency chooses to group its funding sources, it should be clear through Part A and B, how much the agency estimates it has available to spend and where the agency has budgeted the funds it has available to spend.**

Part B Instructions : How Agency Budgeted Funds this Fiscal Year (2015-16)

1) Enter each agency objective and description (i.e. Objective 1.1.1 - insert description of objective). The agency can insert as many rows as necessary so that all objectives are included.
 2) After entering all of the objectives, enter each "unrelated purpose" for which money received by the agency will go (i.e. Unrelated Purpose #1 - insert description of unrelated purpose) on a separate row. An "unrelated purpose" is money the agency is legislatively directed to spend on something that is not related to an agency objective (i.e. pass through, carry forward, etc.).
 3) Enter how much money from each source of funds the agency budgets to spend on each objective and unrelated purpose. The "Total budgeted to spend on objectives and unrelated purposes" for each source of funds in Part B should equal the "Amount estimated to have available to spend this fiscal year" in Part A.

Explanations from the Agency regarding Part A:		Insert any additional					
Source of Funds:	Totals	State Appropriations	State Appropriations - Non-Recurring	Disproportionate Medicaid	Medicaid Reimbursement	Grants	All Other
Is the source state, other or federal funding:	Totals	State	State	Other Funds	Other Funds	Federal	Other Funds
Is funding recurring or one-time?	Totals	Recurring	One-time	Recurring	Recurring	Recurring	Recurring
\$ From Last Year Available to Spend this Year							
Amount available at end of previous fiscal year		\$0	\$0	\$7,660,752	\$15,470,279	\$0	\$9,587,903
Amount available at end of previous fiscal year that agency can actually use this fiscal year:		0	\$0	\$7,660,752	\$15,470,279	\$0	\$9,587,903
If the amounts in the two rows above are not the same, explain why:	Enter explanation for each fund to the right						
\$ Estimated to Receive this Year							
Amount budgeted/estimated to receive in this fiscal year:		204,398,033	8,215,359	35,275,995	75,350,398	11,929,532	57,962,173
Total Actually Available this Year							
Amount estimated to have available to spend this fiscal year (i.e. Amount available at end of previous fiscal year that agency can actually use in this fiscal year PLUS Amount budgeted/estimated to receive this fiscal year):		204,398,033	8,215,359	42,936,747	90,820,677	11,929,532	67,550,076

PART A
Estimated
Funds Available
this Fiscal Year
(2015-16)

Strategic Budgeting

Explanations from the Agency regarding Part B:

Insert any additional

**PART B
How Agency
Budgeted**

Source of Funds: (the rows to the left should populate automatically from what the agency entered in Part A)	Totals	State Appropriations	State Appropriations - Non-Recurring	Disproportionate Medicaid	Medicaid Reimbursement	Grants	All Other
Is source state, other or federal funding: (the rows to the left should populate automatically from what the agency entered in Part A)	Totals	State	State	Other Funds	Other Funds	Federal	Other Funds
Restrictions on how agency is able to spend the funds from this source:	n/a	No	Yes	Yes	No	Yes	No
Amount estimated to have available to spend this fiscal year: (the rows to the left should populate automatically from what the agency entered in Part A)	\$0	\$204,398,033	\$8,215,359	\$42,936,747	\$90,820,677	\$11,929,532	\$67,550,076
Are expenditure of funds tracked through SCEIS? (if no, state the system through which they are recorded so the total amount of expenditures could be verified, if needed)	n/a	Yes	Yes	Yes	Yes	Yes	Yes
Where Agency Budgeted to Spend Money this Year							
<i>Objective 1.1.1 - insert description of objective: **Remember to include a colon (:) at the end of each objective and unrelated purpose description**</i>							
<i>Objective 1.1.2 - insert description of objective:</i>							
<i>etc.</i>							
<i>Unrelated Purpose #1 - insert description:</i>							
<i>Unrelated Purpose #2 - insert description:</i>							
<i>etc.</i>							
Total Budgeted to Spend on Objectives and Unrelated Purposes: (this should be the same as Amount estimated to have available to spend this fiscal year)							

Objective Details

This is the next chart because once the agency determines the associated programs and amount of funds it is allocating to accomplish each objective, the agency needs to ensure it has proper performance measures established to track how effectively and efficiently it is utilizing the resources allocated. The agency also needs to consider potential negative impacts which may arise, and need to be addressed, if the objective is not accomplished; ensure the agency is addressing issues raised in previous audits or reviews; and continually consider which partners the agency could work with to more effectively and efficiently accomplish each objective.

Agency Responding	Department of Mental Health
Date of Submission	26-Jan-16
Fiscal Year for which information below pertains	2015-16

Instructions: Below is a template to **complete for each Objective** listed in the Strategy, Objectives and Responsibility Chart. It is recommended that the agency copy and paste the data in this tab into multiple other tabs, while it is still blank. The agency will then have a blank version to complete for each separate Objective. The agency needs to provide information in all the cells that are highlighted. Please save the information related to each Objective as a separate tab in the excel document. Label each Tab, "O_" and insert the applicable numbers in the blanks (For example "O1.1.1"). NOTE: Call House Staff if the agency has any questions or needs any assistance in completing the information below.

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) <i>Maintain Clinical Programs at Current Levels.</i>	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities satisfied by Goal:	<i>Title 44, Chapter 17</i>	Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	1) <i>Assure resources exist to serve people needing services.</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	1) <i>Services will reach people in need.</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities satisfied by Objective:	<i>Title 44, Chapter 17</i>	Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	<i>Services will be available. Where and when needed.</i>	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	<i>Child and Adolescent and Familie, Deaf Services,</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated Programs Chart by the "Objective the Program Helps Accomplish" column
Responsible Person		
Name:	<i>Geoff Mason</i>	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months Responsible:	12+	
Position:	<i>Deputy Director</i>	
Office Address:	<i>2414 Bull Stree, Columbia</i>	
Department or Division:	<i>Community Mental Health Services</i>	
Department or Division Summary:	<i>Community Mental Health Services</i>	
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this fiscal year:		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

PERFORMANCE MEASURES

Instructions: Please copy and paste the chart and questions below as many times as needed so the agency can provide this information for each Performance Measure that applies to this objective.

- 1) In the cell next to, "Performance Measure," enter the performance measure just like the agency did in the accountability report.
- 2) In the cell next to, "Type of Measure," pick the type of measure that best fits the performance measure from the drop down box (see Types of Performance Measures explained below).
- 3) In the next set of cells enter the actual and target results for each year. Next to "Actual Results," enter the actual value the agency had for that performance measure at the end of that year. Next to "Target Results," enter the target value the agency wanted to reach for the performance measure for that year. Next to "Minimum acceptable level," enter the minimum level for this performance measure that the agency would find acceptable. Including a minimum acceptable level and target level will hopefully encourage the agency to continually set challenging targets each year. If the agency did not utilize a particular performance measure during certain years, then enter the following next to the applicable "Actual Results" and "Target Results," - "Agency did not use PM during this year."
- 4) In the last set of cells, answer the questions to provide Details about each measure. In the cell next to, "Is agency required to keep track of this by the state or federal government," pick State from the drop down menu if an entity in state government requires the agency to track this information, Federal if an entity in the federal government requires the agency to track this information, or Only Agency Selected if there is no state or federal entity that requires the agency to track this information and the agency selected it.

Objective Details

Types of Performance Measures:

Outcome Measure - A quantifiable indicator of the public and customer benefits from an agency's actions. Outcome measures are used to assess an agency's effectiveness in serving its key customers and in achieving its mission, goals and objectives. They are also used to direct resources to strategies with the greatest effect on the most valued outcomes. Outcome measures should be the first priority. Example - % of licensees with no violations.

Efficiency Measure - A quantifiable indicator of productivity expressed in unit costs, units of time, or other ratio-based units. Efficiency measures are used to assess the cost-efficiency, productivity, and timeliness of agency operations. Efficiency measures measure the efficient use of available resources and should be the second priority. Example - cost per inspection

Output Measure - A quantifiable indicator of the number of goods or services an agency produces. Output measures are used to assess workload and the agency's efforts to address demands. Output measures measure workload and efforts and should be the third priority. Example - # of business license applications processed.

Input/Explanatory/Activity Measure - Resources that contribute to the production and delivery of a service. Inputs are "what we use to do the work." They measure the factors or requests received that explain performance (i.e. explanatory). These measures should be the last priority. Example - # of license applications received

How the Agency is Measuring its Performance	
Objective Number and Description	1) Services will reach people in need.
Performance Measure:	SCDMH serves Children in need of services.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	26,408
2014-15 Target Results:	26,500
2014-15 Actual Results (as of 6/30/15):	27,016
2015-16 Minimum Acceptable Results:	27,000
2015-16 Target Results:	27,500
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation needed, two cells over)	No
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with Senior Management Approval
Why was this performance measure chosen?	Indicator of service capacity and need.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management Approval
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally made on setting it at the level at which it was set?	Establish community mental health dashboard indicators.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Not known
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is reached or what resources are being diverted to ensure performance measures more likely to be reached, are reached?	Issue is not whether the indicator may or may not be achieved but acquiring data.

POTENTIAL NEGATIVE IMPACT

Instructions: Please list what the agency considers the most potential negative impact to the public that may occur as a result of the agency not accomplishing this objective. Next to, "Most Potential Negative Impact," enter the most potential negative impact to the public that may occur as a result of the agency not accomplishing the objective. Next to, "Level Requires Outside Help," enter the level at which the agency believes it needs outside help. Next to, "Outside Help to Request," enter the entities to whom the agency would reach out if the potential negative impact rises to that level. Next to, "Level Requires Inform General Assembly," enter the level at which the agency thinks the General Assembly should be put on notice of the level at which the potential negative impact has risen. Next to, "3 General Assembly Options," enter three options for what the General Assembly could do to help resolve the issue before it became a crisis. The House Legislative Oversight Committee will provide this information to all other House standing committees, but will not address it itself until the agency is under study.

Most Potential Negative Impact	<i>This depends upon perceived reason for failing to meet goal. As SC population increases, it is expected the target will be achieved.</i>
Level Requires Outside Help	<i>Unknown</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

REVIEWS/AUDITS

Instructions: Below please list all external or internal reviews, audits, investigations or studies ("Reviews") of the agency which occurred during the past fiscal year that relates/impacts this objective. Please remember to maintain an electronic copy of each Review and any other information generated by the entity performing the Review as copies may be requested when the agency is under study. NOTE: Responses are not limited to the number of rows below that have borders around them, please insert as many rows as needed.

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Objective Details

PARTNERS

Instructions: Under the column labeled, "Current Partner Entities" list all entities the agency is currently working with that help the agency accomplish this objective. Under the "Ways Agency works with Current Partners," enter the ways the agency works with the entity (names of projects, initiatives, etc.) which helps the agency accomplish this objective. List only one partner per row and insert as many rows as necessary to list all of the partners. Note, if there is a large list of partners that all fit within a certain group, the agency can list the group instead of each partner individually. For example, if the agency works with every middle school in the state, the agency can list SC Middle Schools, instead of listing each middle school separately. As another example, if the agency works with every high school in Lexington county, the agency can list Lexington County High Schools, instead of listing each high school in the county separately.

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?
SC Schools - K-12	Allows school-based counselors on-site	State/Local Government Entity

Performance Measure:		Number of people served in outpatient settings.
Type of Measure:		Outcome
Results		
2013-14 Actual Results (as of 6/30/14):	78,825	
2014-15 Target Results:	Method of calculating total number of patients changed - not applicable.	
2014-15 Actual Results (as of 6/30/15):	80,792	
2015-16 Minimum Acceptable Results:	79,000	
2015-16 Target Results:	81,000	
Details		
Does the state or federal government require the agency to track this? (provide any additional explanation needed,	Only Agency Selected	
What are the names and titles of the individuals who chose this as a performance measure?	Geoff Mason, Deputy Director	
Why was this performance measure chosen?	To develop Community dashboard indicators.	
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	NA	
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.	
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally	Modest increase in people receiving services.	
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Unknown	
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is	Data not yet available.	

Most Potential Negative Impact	No potential negative impact.
Level Requires Outside Help	Not known
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Number and Description		1)
Performance Measure:		Number of new cases (during FY2015) in community mental health centers.
Type of Measure:		Outcome
Results		
2013-14 Actual Results (as of 6/30/14):	40,508	
2014-15 Target Results:	NA - New Goal	
2014-15 Actual Results (as of 6/30/15):	41,791	
2015-16 Minimum Acceptable Results:	40,500	
2015-16 Target Results:	42,000	

Objective Details

Details	
Does the state or federal government require the agency to track this? (provide any additional explanation needed,	Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?	Geoff Mason, Deputy Director
Why was this performance measure chosen?	Determine standardized dashboard indicators to determine allocation of resources.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	NA - New Goal
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally	Modest increase to reflect increased population.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Unknown
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is	Data not yet available.

Most Potential Negative Impact	<i>No known impact.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

	Performance Measure: Schools offering SCDMH counseling services.
	Type of Measure: Outcome
Results	
	2013-14 Actual Results (as of 6/30/14): 460
	2014-15 Target Results: 480
	2014-15 Actual Results (as of 6/30/15): 480
	2015-16 Minimum Acceptable Results: 480
	2015-16 Target Results: 490
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation needed,	Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?	School-based counseling services assumes better compliance with appointments and allows for onsite staff to see students if appointment is urgent.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Department will "drill down" to determine source of dissatisfaction.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally	Historically, satisfaction rates range from 85-89%.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Yes
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is	

Most Potential Negative Impact	<i>Lack of compliance with appointments, difficulty for families to keep appointments, SCDMH staff not readily available in schools for urgent situations.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

School districts across state	Cost share positions where possible.	State/Local government
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Performance Measure:		Division of inpatient services bed days
Type of Measure:		Outcome
Results		
	2013-14 Actual Results (as of 6/30/14):	518,219
	2014-15 Target Results:	520,000
	2014-15 Actual Results (as of 6/30/15):	528,504
	2015-16 Minimum Acceptable Results:	520,000
	2015-16 Target Results:	525,000
Details		
Does the state or federal government require the agency to track this? (provide any additional explanation needed,		Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?		William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?		Cost efficeint to keep inpatient census near capacity.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?		
What are the names and titles of the individuals who chose the target value for 2015-16?		William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally made on setting it at the level at which it was set?		Wish to maintain capacity but recognize census may decrease due to alternate use for some lodges at Bryan Hospital.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?		Yes
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is		

Most Potential Negative Impact	Patient bed day costs may reach level of private sector.
Level Requires Outside Help	Not known
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context	
# and description of Goal the Objective is helping accomplish:	1) <i>Maintain Clinical Programs at Current Levels.</i>
Legal responsibilities satisfied by	<i>Title 44, Chapter 17</i>
# and description of Strategy the Objective is under:	1) <i>Assure resources exist to serve people needing services.</i>
Objective	
Objective # and Description:	<i>Patients and their families will be satisfied with services received.</i>
Legal responsibilities satisfied by	
Public Benefit/Intended Outcome:	<i>People will receive excellent service from state-run agency.</i>
Agency Programs Associated with Objective	
Program Names:	<i>Community Mental Health Services</i>
Responsible Person	
Name:	<i>Geoff Mason</i>
Number of Months Responsible:	<i>12+</i>
Position:	<i>Deputy Director</i>
Office Address:	<i>2414 Bull Str.</i>
Department or Division:	<i>Community Mental Health Services</i>
Department or Division Summary:	
Amount Budgeted and Spent To Accomplish Objective	
Total Budgeted for this fiscal year:	
Total Actually Spent:	<i>Agency will provide next year</i>

Copy and paste this from the second column of the Mission, Vision and Goals Chart

Copy and paste this from the first column of the Mission, Vision and Goals Chart

Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart

Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart

Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart

Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart

Enter all the agency programs which are helping accomplish this objective. The agency can

Copy and paste this information from the fifth column of the Strategy, Objectives and

Copy and paste this information from the Strategic Budgeting Chart

How the Agency is Measuring its Performance	
Objective Number and Description	2) <i>Paatients and their families will be satisfied with services received.</i>
Performance Measure:	<i>Percentage of adults expressing satisfaction with services received. (US average 88%).</i>
Type of Measure:	<i>Outcome</i>
Results	
2013-14 Actual Results (as of 6/30/14):	<i>88%</i>
2014-15 Target Results:	<i>88%</i>
2014-15 Actual Results (as of 6/30/15):	<i>89%</i>
2015-16 Minimum Acceptable Results:	<i>85%</i>
2015-16 Target Results:	<i>88%</i>
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation	<i>Only Agency Selected</i>
What are the names and titles of the individuals who chose this as a performance measure?	<i>William Wells, Program Director with Senior Management approval.</i>
Why was this performance measure chosen?	<i>Department wants maority of people served, satisfied with services.</i>

Objective Details

If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Department will "drill down" to determine source of dissatisfaction.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the	Historically, satisfaction rates range from 85-89%.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-	Unknown
If the answer to the question above is "questionable" or "no," what changes are being made to try and	Satisfaction surveys not yet tabulated.

Most Potential Negative Impact	<i>People may tend to not utilize needed services.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Number and Description	2) Patients and their families will be satisfied with services received.
Performance Measure:	Percentage of youths expressing satisfaction with services received. (No US average available).
Type of Measure:	
Results	Outcome measure.
2013-14 Actual Results (as of 6/30/14):	86%
2014-15 Target Results:	85%
2014-15 Actual Results (as of 6/30/15):	84%
2015-16 Minimum Acceptable Results:	80%
2015-16 Target Results:	85%

Objective Details

Details	
Does the state or federal government require the agency to track this? (provide any additional explanation	Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?	Department wants majority of people served, satisfied with services.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Department will "drill down" to determine source of dissatisfaction.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the	Historically, satisfaction rates range from 85-89%.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-	Unknown
If the answer to the question above is "questionable" or "no," what changes are being made to try and	Satisfaction surveys not yet tabulated.

Most Potential Negative Impact	<i>People may tend to not utilize needed services.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Number and Description	2) Patients and their families will be satisfied with services received.
Performance Measure:	Families of Youths satisfied with services (US average 86%).
Type of Measure:	
Results	Outcome measure.
2013-14 Actual Results (as of 6/30/14):	85%
2014-15 Target Results:	85%
2014-15 Actual Results (as of 6/30/15):	85%
2015-16 Minimum Acceptable Results:	80%
2015-16 Target Results:	86%
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation	Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with Senior Management approval.

Objective Details

Why was this performance measure chosen?	Department wants majority of people served, satisfied with services.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Department will "drill down" to determine source of dissatisfaction.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the	Historically, satisfaction rates range from 85-89%.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-	Unknown
If the answer to the question above is "questionable" or "no," what changes are being made to try and	Satisfaction surveys not yet tabulated.

Most Potential Negative Impact	<i>People may tend to not utilize needed services.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Performance Measure: Schools offering SCDMH counseling Services	
Type of Measure: Outcome	
Results	
2013-14 Actual Results (as of 6/30/14):	460
2014-15 Target Results:	480
2014-15 Actual Results (as of 6/30/15):	480
2015-16 Minimum Acceptable Results:	480
2015-16 Target Results:	490
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation	Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?	Families and patients prefer anonymity of in-school services and not needing to attend appointments at clinics.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the	Maintain growth within program.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-	Yes

Objective Details

If the answer to the question above is "questionable" or "no," what changes are being made to try and

Most Potential Negative Impact	<i>Decreased patient and family satisfaction.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) <i>Maintain Clinical Programs at Current Level.</i>	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities satisfied by Goal:		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	1) <i>Assure resources exist to serve people needing services</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	3) <i>School based services will be available in more sites</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities satisfied by Objective:		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	<i>Increased availability and convenience of services.</i>	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	<i>Community Mental Health Services; School Based Services</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated Programs Chart by the "Objective the Program Helps Accomplish" column
Responsible Person		
Name:		Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months Responsible:	<i>Louise Johnson</i>	
Position:	<i>Program Director</i>	
Office Address:	<i>2414 Bull Street</i>	
Department or Division:	<i>Community Mental Health Services; Child, Adolescent, and Family Services.</i>	
Department or Division Summary:	<i>Community Services to peoplw under age 18 and their families.</i>	
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this fiscal year:		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

How the Agency is Measuring its Performance	
Objective Number and Description	3) School based services will be available in more sites
Performance Measure:	Schools offering SCDMH Counseling services.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	460
2014-15 Target Results:	480
2014-15 Actual Results (as of 6/30/15):	480
2015-16 Minimum Acceptable Results:	480
2015-16 Target Results:	490
Details	
Does the state or federal government require the agency to track this? (provide any additional	Only Agency Selected
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?	Schools allowing SCDMH staff onsite allows for early intervention and continuity of services.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was	
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the	Significant goal to reach for additional sites for this very efficeint and beneficial program
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for	Yes

Objective Details

If the answer to the question above is "questionable" or "no," what changes are being made to try and

Most Potential Negative Impact	
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) Maintain Clinical Programs at Current Levels.	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities satisfied by Goal:		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	2) Inpatient care will be efficeint, safe, and effctive..	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	1) Department will demonstrate cost efficeincy in delivery of services.	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities satisfied by Objective:		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	Reduce cost of services to South Carolina.	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	Inpatient Services, Psychiatric Hspitals, Substance Abuse Treatment Center, Long-Term Nursing Facilities.	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated Programs Chart by the "Objective the Program Helps Accomplish" column
Responsible Person		
Name:	Versie Bellamy	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months Responsible:	12+	
Position:	Deputy Director	
Office Address:	220 Faison Drive, Columbia, 29202	
Department or Division:	Inpatient Services	
Department or Division Summary:		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this fiscal year:		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	Agency will provide next year	

How the Agency is Measuring its Performance		
Objective Number and Description	1) Department will demonstrate cost efficeincy in delivery of services.	
Performance Measure:	At this time, there is no preformance measure associated with this objective.	
Type of Measure:		
Results		
2013-14 Actual Results (as of 6/30/14):		
2014-15 Target Results:		
2014-15 Actual Results (as of 6/30/15):		
2015-16 Minimum Acceptable Results:		
2015-16 Target Results:		
Details		
Does the state or federal government require the agency to track this? (provide any additional explanation		
What are the names and titles of the individuals who chose this as a performance measure?		
Why was this performance measure chosen?		
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?		
What are the names and titles of the individuals who chose the target value for 2015-16?		
What was considered when determining the level to set the target value in 2015-16 and why was the		
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-		

Objective Details

If the answer to the question above is "questionable" or "no," what changes are being made to try and

Most Potential Negative Impact	
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) Maintain Clinical Programs at Current Levels.	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities satisfied by Goal:		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	2) <i>Inpatient care will be efficeint, safe, and effctive..</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	2) <i>Standards of Care will be Competitive with Facilities Offering Similar Services.</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities satisfied by Objective:		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	<i>People will receive excellent care.</i>	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	<i>Inpatient Services, Psychiatric Hspitals, Substance Abuse Treatment Center, Long-Term Nursing Facilities.</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated Programs Chart by the "Objective the Program Helps Accomplish" column
Responsible Person		
Name:	<i>Versie Bellamy</i>	Copy and paste this information from the fifth column of the Strategy, Objectives and
Number of Months Responsible:	<i>12+</i>	
Position:	<i>Deputy Director</i>	
Office Address:	<i>220 Faison Drive, Columbia, 29202</i>	
Department or Division:	<i>Inpatient Services</i>	
Department or Division Summary:		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this fiscal year:		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

Objective Details

How the Agency is Measuring its Performance	
Objective Number and Description	2) Standards of Care will be Competitive with Facilities Offering Similar Services.
Performance Measure:	Life Expectancy in skilled nursing facilities.
Type of Measure:	
Results	
2013-14 Actual Results (as of 6/30/14):	5.7 years.
2014-15 Target Results:	5.0 years
2014-15 Actual Results (as of 6/30/15):	3.8 years
2015-16 Minimum Acceptable Results:	less than 2.3 (National Benchmark)
2015-16 Target Results:	5
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation)	State
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with approval of Senior Management.
Why was this performance measure chosen?	Nationally recognized benchmark signifying level of health care provided.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Review of factors related to decrease of value. Average Range is between 3.7 and 5.0.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with approval of Senior Management.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally made on setting it at the level at which it was set?	Specifically chose high target to strive for excellence.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Probable
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure	

Most Potential Negative Impact	People are dying.	W
Level Requires Outside Help	If average approaches national benchmark of 2.3 years.	
Outside Help to Request	Medical Community, DHEC	
Level Requires Inform General Assembly		
3 General Assembly Options		

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?
Health and Environmental Control	Licenses Facility	State/Local Government Entity

Objective Details

Performance Measure: Hospital Restrain Rate based upon 1,000 patient hours.	
Type of Measure: Outcome	
Results	
2013-14 Actual Results (as of 6/30/14):	0.12
2014-15 Target Results:	0.12
2014-15 Actual Results (as of 6/30/15):	0.17
2015-16 Minimum Acceptable Results:	less than .62 (National Benchmark)
2015-16 Target Results:	0.15
Details	
Does the state or federal government require the agency to track this? (provide any additional explanation)	State
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with approval of Senior Management.
Why was this performance measure chosen?	Nationally recognized benchmark signifying level of health care provided.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Review of factors related to increased rate of restraints. Targets are often selected as goals to be strived for, not to be easily obtained.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with approval of Senior Management.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally made on setting it at the level at which it was set?	Specifically chose low rate to strive for excellence.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Probable
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure	

Most Potential Negative Impact	People are experiencing symptoms requiring restraint to avoid injury to self or others.	W
Level Requires Outside Help		
Outside Help to Request		
Level Requires Inform General Assembly		
3 General Assembly Options		

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Performance Measure: Hospital seclusion rate based upon 1,000 inpatient hours	
Type of Measure:	
Results	
2013-14 Actual Results (as of 6/30/14):	0.23
2014-15 Target Results:	0.23
2014-15 Actual Results (as of 6/30/15):	0.29
2015-16 Minimum Acceptable Results:	less than .49 (National Benchmark)

Objective Details

	2015-16 Target Results: 0.25
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Objective Details

Details	
Does the state or federal government require the agency to track this? (provide any additional explanation	State
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with approval of Senior Management.
Why was this performance measure chosen?	Nationally recognized benchmark signifying level of health care provided.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Assess factors resulting in need for increased use of seclusion.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with approval of Senior Management.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally made on setting it at the level at which it was set?	Specifically chose difficult target to strive for excellence.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Probable
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure	

Most Potential Negative Impact	People are experiencing psychiatric distress.	W
Level Requires Outside Help		
Outside Help to Request		
Level Requires Inform General Assembly		
3 General Assembly Options		

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) Maintain Clinical Programs at Current Levels.	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities satisfied by Goal:		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	2) Inpatient care will be efficeint, safe, and effctive..	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	3) Upon discharge (from inpatient settings) , patients will rev=ceive timely follow-up services.	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities satisfied by Objective:		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:		Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	Community Mental Health Services	Enter all the agency programs which are helping accomplish this objective. The agency can
Responsible Person		
Name:	Geoff Mason	Copy and paste this information from the fifth column of the Strategy, Objectives and
Number of Months Responsible:	12+	
Position:	Deputy Director	
Office Address:	2414 Bull Street, Columbia	
Department or Division:	Community Mental Health Services	
Department or Division Summary:		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this fiscal year:		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	Agency will provide next year	

How the Agency is Measuring its Performance		
Objective Number and Description	3) Upon discharge (from inpatient settings) , patients will rev=ceive timely follow-up services.	
Performance Measure:	Number of days between discharge and outpatient appointment.	
Type of Measure:	Outcome	
Results		
2013-14 Actual Results (as of 6/30/14):	5.6	
2014-15 Target Results:	less than 7	
2014-15 Actual Results (as of 6/30/15):	6.8	
2015-16 Minimum Acceptable Results:	10	
2015-16 Target Results:	less than 7.	
Details		
Does the state or federal government require the agency to track this? (provide any additional explanation	State	
What are the names and titles of the individuals who chose this as a performance measure?	William Wells, Program Director with approval of Senior Management.	

Objective Details

Why was this performance measure chosen?	Nationally recognized benchmark signifying level of health care provided.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Assess factors resulting in need for increased use of seclusion.
What are the names and titles of the individuals who chose the target value for 2015-16?	William Wells, Program Director with approval of Senior Management.
What was considered when determining the level to set the target value in 2015-16 and why was the decision	Continuity of Care Goal.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-	Yes
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure	

Most Potential Negative Impact	<i>People may not keep appointments or experience needs requiring intervention.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Performance Measure:		Percentage of readmissions within thirty days of discharge.
Type of Measure:		Outcome
Results		
2013-14 Actual Results (as of 6/30/14):		5.29
2014-15 Target Results:		5
2014-15 Actual Results (as of 6/30/15):		5.29
2015-16 Minimum Acceptable Results:		7 (maximum - national average is 7.5)
2015-16 Target Results:		less than 6.
Details		
Does the state or federal government require the agency to track this? (provide any additional explanation)		State
What are the names and titles of the individuals who chose this as a performance measure?		William Wells, Program Director with approval of Senior Management.
Why was this performance measure chosen?		Nationally recognized benchmark signifying level of health care provided.
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?		Assess factors resulting in need for increased use of seclusion.
What are the names and titles of the individuals who chose the target value for 2015-16?		William Wells, Program Director with approval of Senior Management.
What was considered when determining the level to set the target value in 2015-16 and why was the decision		Setting standard well below national average.

Objective Details

Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-	Yes
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure	

Most Potential Negative Impact	<i>Quick linkage to community services improves likelihood community placement will be successful. Failure to do so increases likelihood of readmission to hospital setting.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) <i>Maintain Clinical Programs at Current Levels</i>	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	3) <i>People will demonstrate increased levels of competence and independence</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	1) <i>Department will focus services on target populations (severely, persistently ill or emotionally disturbed)</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	<i>The Department of Mental Health will focus resources on those most in need of its services.</i>	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	<i>All programs within the Department.</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by
Responsible Person		
Name:	<i>John Magill</i>	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	<i>12+</i>	
Position:		
Office Address:	<i>State Director</i>	
Department or Division:	<i>SCDMH</i>	
Department or Division		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

How the Agency is Measuring its Performance	
Objective Number and Description	3) People will demonstrate increased levels of competence and independence
Performance Measure:	SCDMH serves Children in need of services.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	26,408
2014-15 Target Results:	26,500
2014-15 Actual Results (as of 6/30/15):	27,016

Objective Details

2015-16 Minimum Acceptable Results:	27,000
2015-16 Target Results:	27,500
Details	
Does the state or federal government require the agency to track this? (provide	No
What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management Approval
Why was this performance measure chosen?	Demonstrates availability to emotionally disturbed children and adolescents where they may be most needed.
If the target value was not reached in 2014-15, what changes were made to try	
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management Approval
What was considered when determining the level to set the target value in	Establish community mental health dashboard indicators.
Based on the performance so far in 2015-16, does it appear the agency is going	Not known
If the answer to the question above is "questionable" or "no," what changes are	Issue is not whether the indicator may or may not be achieved but acquiring data.

Most Potential Negative Impact	<i>Fewer services available to people who may require them the most.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?
School Districts - state-wide	<i>Place SCDMH staff at school.</i>	<i>State/Local Government Entity</i>

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	1) <i>Maintain Clinical Programs at Current Levels</i>	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	3) <i>People will demonstrate increased levels of competence and independence</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and	2) <i>Increase percentage of adults gainfully employed</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended		Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	<i>Consumer Employment</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated
Responsible Person		
Name:	<i>Demetrius Henderson</i>	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	12+	
Position:	<i>Program Director</i>	
Office Address:	<i>2414 Bull Str., Columbia</i>	
Department or Division:	<i>Community Mental Health Services</i>	
Department or Division		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

How the Agency is Measuring its Performance		
Objective Number and Description	3) People will demonstrate increased levels of competence and independence	
Performance Measure:	Percentage of SCDMH Patients in Consumer Employment Program being competitively employed.	
Type of Measure:	Outcome	
Results		
2013-14 Actual Results (as of 6/30/14):	48%	
2014-15 Target Results:	45%	
2014-15 Actual Results (as of 6/30/15):	51%	
2015-16 Minimum Acceptable Results:	45%	
2015-16 Target Results:	48%	
Details		
Does the state or federal government require the agency to track this? (provide	Only Agency Selected	
What are the names and titles of the individuals who chose this as a	Demetrius Henderson and William Wells with Senior Management approval.	
Why was this performance measure chosen?	Measure success of this Best Practices program.	
If the target value was not reached in 2014-15, what changes were made to try		
What are the names and titles of the individuals who chose the target value for	Demetrius Henderson and William Wells with Senior Management approval.	
What was considered when determining the level to set the target value in 2015-	National Benchmark is 45% for similar programs	
Based on the performance so far in 2015-16, does it appear the agency is going	Yes	

Objective Details

If the answer to the question above is "questionable" or "no," what changes are

Most Potential Negative Impact	<i>Employment is an indicator of personal satisfaction and of one's psychiatric functioning.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context

# and description of Goal the Objective is helping accomplish:	<i>1) Maintain Clinical Programs at Current Levels</i>	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	<i>3) People will demonstrate increased levels of competence and independence</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart

Objective

Objective # and Description:	<i>4) Patients served will will demonstrate improvements in psychiatric well-being.</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended	<i>Patients and families will see benefit from state</i>	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart

Agency Programs Associated with Objective

Program Names:	<i>Education, Training, and Researc, Community Mental Health Services, Division of Inpatient Services</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated Programs Chart by the "Objective the Program Helps Accomplish" column
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Responsible Person

Name:	<i>Sandy Hyre</i>	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	<i>12+</i>	
Position:	<i>Program Director</i>	
Office Address:	<i>2414 Bull Street, Columbia</i>	
Department or Division:	<i>Education, Training, and Research</i>	
Department or Division		

Amount Budgeted and Spent To Accomplish Objective

Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

How the Agency is Measuring its Performance

Objective Number and Description	<i>3) People will demonstrate increased levels of competence and independence</i>	
Performance Measure:	<i>Percentage of Adults expressing satisfaction with services.</i>	
Type of Measure:	<i>Outcome</i>	
Results		
2013-14 Actual Results (as of 6/30/14):	<i>88</i>	
2014-15 Target Results:	<i>88</i>	
2014-15 Actual Results (as of 6/30/15):	<i>89</i>	
2015-16 Minimum Acceptable Results:	<i>85</i>	
2015-16 Target Results:	<i>90</i>	
Details		
Does the state or federal government require the agency to track this? (provide	<i>Only Agency Selected</i>	

Objective Details

What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management approval
Why was this performance measure chosen?	Indicator of how people receiving services view services.
If the target value was not reached in 2014-15, what changes were made to try	
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval
What was considered when determining the level to set the target value in 2015-	Set higher goal than current value
Based on the performance so far in 2015-16, does it appear the agency is going	Information will not be tabulated until end of FY.
If the answer to the question above is "questionable" or "no," what changes are	

Most Potential Negative Impact	<i>A larger percentage of people would not be satisfied with services rendered.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

How the Agency is Measuring its Performance	
Objective Number and Description	
3)	People will demonstrate increased levels of competence and independence

Objective Details

Performance Measure:	Percentage of youths expressing satisfaction with services.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	86
2014-15 Target Results:	85
2014-15 Actual Results (as of 6/30/15):	84
2015-16 Minimum Acceptable Results:	80
2015-16 Target Results:	85
Details	
Does the state or federal government require the agency to track this? (provide	Only Agency Selected
What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management approval
Why was this performance measure chosen?	Indicator of how people receiving services view services.
If the target value was not reached in 2014-15, what changes were made to try	
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval
What was considered when determining the level to set the target value in 2015-	Set higher goal than current value
Based on the performance so far in 2015-16, does it appear the agency is going	Information will not be tabulated until end of FY.
If the answer to the question above is "questionable" or "no," what changes are	

Most Potential Negative Impact	<i>A larger percentage of people would not be satisfied with services rendered.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

How the Agency is Measuring its Performance	
Objective Number and Description	3) People will demonstrate increased levels of competence and independence
Performance Measure:	Percentage of Adults expressing satisfaction with services.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	85%
2014-15 Target Results:	85%
2014-15 Actual Results (as of 6/30/15):	86%
2015-16 Minimum Acceptable Results:	80%

Objective Details

2015-16 Target Results:	88%
Details	
Does the state or federal government require the agency to track this? (provide	Only Agency Selected
What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management approval
Why was this performance measure chosen?	Indicator of how people receiving services view services.
If the target value was not reached in 2014-15, what changes were made to try	
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval
What was considered when determining the level to set the target value in 2015-	Set higher goal than current value
Based on the performance so far in 2015-16, does it appear the agency is going	Information will not be tabulated until end of FY.
If the answer to the question above is "questionable" or "no," what changes are	

Most Potential Negative Impact	<i>A larger percentage of people would not be satisfied with services rendered.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping	<i>Capitalize on Current Technological Advancements</i>	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is	<i>1) Decrease the hospital emergency department wait times and expenses by utilizing telepsychiatry.</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	<i>3) Increase the number of hospitals utilizing telepsychiatry.</i>	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended		Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	<i>Telepsychiatry</i>	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated
Responsible Person		
Name:	<i>Ed Spencer</i>	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	<i>12+</i>	
Position:	<i>Program Director</i>	
Office Address:	<i>2414 Bull Str. Columbia</i>	
Department or Division:	<i>Medical Director's Office</i>	
Department or Division		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	<i>Agency will provide next year</i>	

How the Agency is Measuring its Performance		
Objective Number and Description	<i>1) Decrease the hospital emergency department wait times and expenses by utilizing telepsychiatry.</i>	
Performance Measure:	<i>Number of hospitals participating in telepsychiatric services.</i>	
Type of Measure:	<i>Outcome</i>	
Results		
2013-14 Actual Results (as of 6/30/14):	<i>18</i>	
2014-15 Target Results:	<i>19</i>	
2014-15 Actual Results (as of 6/30/15):	<i>21</i>	
2015-16 Minimum Acceptable Results:	<i>20</i>	
2015-16 Target Results:	<i>22</i>	
Details		
Does the state or federal government require the agency to track this? (provide	<i>Only Agency Selected</i>	
What are the names and titles of the individuals who chose this as a	<i>Ed Spencer and William Wells (Program Directors) with Senior Management approval.</i>	
Why was this performance measure chosen?	<i>Both as an indicator of program success (more facilities wishing to purchase equipment indicates desire to include this service) and indicates need for additional psychiatric staff and hours of coverage.</i>	
If the target value was not reached in 2014-15, what changes were made to try		
What are the names and titles of the individuals who chose the target value for	<i>Ed Spencer and William Wells (Program Directors) with Senior Management approval.</i>	
What was considered when determining the level to set the target value in 2015-	<i>A higher target than current value.</i>	

Objective Details

Based on the performance so far in 2015-16, does it appear the agency is going	Yes
If the answer to the question above is "questionable" or "no," what changes are	

Most Potential Negative Impact	<i>This program allows for psychiatric consultation where none may otherwise be available. Decreased numbers of participating emergency departments could indicate less psychiatric consultation and greater tendency to hospitalize patients (malpractice concerns for less qualified physicians).</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	2) Capitalize on Current Technological Advances	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	3) Utilize online training to reduce staff time and travel related costs.	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and	1) Demonstrate effectiveness of online training.	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended	Reduce cost to state for employee travel and lost	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	Education, Training, and Research	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated
Responsible Person		
Name:	Sandy Hyre	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	12+	
Position:	Program Director	
Office Address:	2414 Bull Street, Columbia	
Department or Division:	Education, Training, and Research	
Department or Division		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	Agency will provide next year	
How the Agency is Measuring its Performance		
Objective Number and Description	3) Utilize online training to reduce staff time and travel related costs.	
Performance Measure:	Number of SCDMH programs available online	
Type of Measure:	Outcome	
Results		
2013-14 Actual Results (as of 6/30/14):	132	
2014-15 Target Results:	132	
2014-15 Actual Results (as of 6/30/15):	132	
2015-16 Minimum Acceptable Results:	130	
2015-16 Target Results:	132	
Details		
Does the state or federal government require the agency to track this? (provide	Only Agency Selected	
What are the names and titles of the individuals who chose this as a	Sandy Hyre and Willaim Wells (Prgram Directors) with Senior Management approval.	
Why was this performance measure chosen?	Indicates number of programs available online that otherwise would require group settings, often requiring travel to regional sites.	
If the target value was not reached in 2014-15, what changes were made to try		
What are the names and titles of the individuals who chose the target value for	Sandy Hyre and Willaim Wells (Prgram Directors) with Senior Management approval.	

Objective Details

What was considered when determining the level to set the target value in 2015-	Maintaining the number of programs available
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Yes
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is reached or what resources are being diverted	

Most Potential Negative Impact	<i>Increased travel costs, decreased productivity.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context	
# and description of Goal the Objective is helping accomplish:	3) SCDMH will be Positioned to Meet Increased Demand for Services Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities	Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	2) Community Mental Health Centers will Increase Efficiency to Meet Demands for Outpatient Services Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective	
Objective # and Description:	1) Increase number of people served in community settings. Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities	Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	Greater access at times of need and continued assessments of patients' functioning and maintaining community tenure. Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective	
Program Names:	Community Mental Health Services Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated
Responsible Person	
Name:	Geoff Mason Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	12+
Position:	Deputy Director
Office Address:	2414 Bull Street, Columbia
Department or Division:	Community Mental Health Services
Department or Division	
Amount Budgeted and Spent To Accomplish Objective	
Total Budgeted for this	
Total Actually Spent:	Agency will provide next year Copy and paste this information from the Strategic Budgeting Chart

How the Agency is Measuring its Performance	
Objective Number and Description	2) Community Mental Health Centers will Increase Efficiency to Meet Demands for Outpatient Services
Performance Measure:	Number of people served in outpatient settings.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	78,825
2014-15 Target Results:	Method of calculating total number of patients changed - not applicable.
2014-15 Actual Results (as of 6/30/15):	80,792
2015-16 Minimum Acceptable Results:	79,000
2015-16 Target Results:	81,000
Details	
Does the state or federal government require the agency to track this? (provide	Only Agency Selected
What are the names and titles of the individuals who chose this as a	Geoff Mason, Deputy Director

Objective Details

Why was this performance measure chosen?	To develop Community dashboard indicators. This indicator suggests not only availability of services but cautions when additional professionals may be needed to maintain availability.
If the target value was not reached in 2014-15, what changes were made to try	NA
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-	Modest increase in people receiving services.
Based on the performance so far in 2015-16, does it appear the agency is going	Unknown
If the answer to the question above is "questionable" or "no," what changes are	Data not yet available.

Most Potential Negative Impact	<i>No potential negative impact.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Number and Description	1)
Performance Measure:	Number of new cases (during FY2015) in community mental health centers.
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	40,508
2014-15 Target Results:	NA - New Goal
2014-15 Actual Results (as of 6/30/15):	41,791
2015-16 Minimum Acceptable Results:	40,500
2015-16 Target Results:	42,000
Details	
Does the state or federal government require the agency to track this? (provide	Only Agency Selected

Objective Details

What are the names and titles of the individuals who chose this as a	Geoff Mason, Deputy Director
Why was this performance measure chosen?	Determine standardized dashboard indicators to determine allocation of resources.
If the target value was not reached in 2014-15, what changes were made to try	NA - New Goal
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-	Modest increase to reflect increased population.
Based on the performance so far in 2015-16, does it appear the agency is going	Unknown
If the answer to the question above is "questionable" or "no," what changes are	Data not yet available.

Most Potential Negative Impact	<i>No known impact.</i>
Level Requires Outside Help	<i>Not known</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	3) SCDMH will be Positioned to Meet Increased Demand for Services	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	2) Community Mental Health Centers will Increase Efficiency to Meet Demands for Outpatient Services	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	2) Community Mental Health Centers will demonstrate that that people can access services within reasonable amounts of time.	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	People in need of mental health services can access serices within a reasonable time.	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	Community Mental Health Services	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated
Responsible Person		
Name:	Geoff Mason	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	12+	
Position:	Deputy Director	
Office Address:	2414 Bull Str., Columbia	
Department or Division:	Community Mental Health Services	
Department or Division		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	Agency will provide next year	

How the Agency is Measuring its Performance		
Objective Number and Description	2) Community Mental Health Centers will demonstrate that that people can access services within reasonable amounts of time.	
Performance Measure:	Clients seen at each center will meet the appointment timeframes as determined by need (emergency, urgent, or routine)	
Type of Measure:	Outcome	
Results		
2013-14 Actual Results (as of 6/30/14):	New indicator for 2015	
2014-15 Target Results:	NA	
2014-15 Actual Results (as of 6/30/15):	84%	
2015-16 Minimum Acceptable Results:	82%	
2015-16 Target Results:	90%	

Objective Details

Details	
Does the state or federal government require the agency to track this? (provide	Only Agency Selected
What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?	
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Assuring people make contact with community services following hospital discharge decreases risk of reinstitutionalization. Likewise, the sooner a person requesting services can be seen, the more likely the appointment will be kept an needed services may begin.
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-	Decreasing wait times is a Department-wide goal. The target was intentionally set high.
Based on the performance so far in 2015-16, does it appear the agency is going	No.
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is reached or what resources are being diverted	Target is intentionally high as a goal to reach for. Should wait time increase, adjustments within admission protocols may need to be examined.

Most Potential Negative Impact	<i>People will not receive needed mental health assessments and services resulting in hospitalization or other negative outcomes.</i>
Level Requires Outside Help	<i>Not clear. Issue will not be percentage of appointments not being met according to targets but also the length of time represented by those waits.</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Objective Details

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?
<i>Law enforcement agencies</i>	Screens people suspected of having mental health concerns in a timely fashion.	Local Government

Performance Measure:	Clients seen at each center will meet the appointment timeframes as determined by need (emergency, urgent, or routine)
Type of Measure:	Outcome
Results	
2013-14 Actual Results (as of 6/30/14):	New indicator for 2015
2014-15 Target Results:	NA
2014-15 Actual Results (as of 6/30/15):	84%
2015-16 Minimum Acceptable Results:	82%
2015-16 Target Results:	90%
Details	
Does the state or federal government require the agency to track this? (provide)	Only Agency Selected
What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management approval.
Why was this performance measure chosen?	
If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	Assuring people make contact with community services following hospital discharge decreases risk of reinstitutionalization. Likewise, the sooner a person requesting services can be seen, the more likely the appointment will be kept and needed services may begin.
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-	Decreasing wait times is a Department-wide goal. The target was intentionally set high.
Based on the performance so far in 2015-16, does it appear the agency is going	No.
If the answer to the question above is "questionable" or "no," what changes are being made to try and ensure it is reached or what resources are being diverted	Target is intentionally high as a goal to reach for. Should wait time increase, adjustments within admission protocols may need to be examined.

Most Potential Negative Impact	<i>People will not receive needed mental health assessments and services resulting in hospitalization or other negative outcomes.</i>
Level Requires Outside Help	<i>Not clear. Issue will not be percentage of appointments not being met according to targets but also the length of time represented by those waits.</i>
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Objective Details

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?
<i>Law enforcement agencies</i>	Screens people suspected of having mental health concerns in a timely fashion.	Local Government

Objective Details

Strategic Plan Context		
# and description of Goal the Objective is helping accomplish:	3) SCDMH will be Positioned to Meet Increased Demand for Services	Copy and paste this from the second column of the Mission, Vision and Goals Chart
Legal responsibilities satisfied by Goal:		Copy and paste this from the first column of the Mission, Vision and Goals Chart
# and description of Strategy the Objective is under:	2) Community Mental Health Centers will Increase Efficiency to Meet Demands for Outpatient Services	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Objective		
Objective # and Description:	Demonstrate increased efficiency by providing an increase of needed services	Copy and paste this from the second column of the Strategy, Objectives and Responsibility Chart
Legal responsibilities		Copy and paste this from the first column of the Strategy, Objectives and Responsibility Chart
Public Benefit/Intended Outcome:	Billing for services rendered reduces state cost.	Copy and paste this from the fourth column of the Strategy, Objectives and Responsibility Chart
Agency Programs Associated with Objective		
Program Names:	Community Mental Health Services	Enter all the agency programs which are helping accomplish this objective. The agency can determine this by sorting the Associated
Responsible Person		
Name:	Geoff Mason	Copy and paste this information from the fifth column of the Strategy, Objectives and Responsibility Chart
Number of Months	12+	
Position:	Deputy Director	
Office Address:	2414 Bull Str., Columbia	
Department or Division:	Community Mental Health Services	
Department or Division		
Amount Budgeted and Spent To Accomplish Objective		
Total Budgeted for this		Copy and paste this information from the Strategic Budgeting Chart
Total Actually Spent:	Agency will provide next year	
How the Agency is Measuring its Performance		
Objective Number and Description	2) Community Mental Health Centers will Increase Efficiency to Meet Demands for Outpatient Services	
Performance Measure:	Hours of billed services in outpatient settings.	
Type of Measure:	Outcome	
Results		
2013-14 Actual Results (as of 6/30/14):	935,631	
2014-15 Target Results:	975,000	
2014-15 Actual Results (as of 6/30/15):	971,916	
2015-16 Minimum Acceptable Results:	970,000	
2015-16 Target Results:	975,000	
Details		
Does the state or federal government require the agency to track this? (provide	Only Agency Selected	
What are the names and titles of the individuals who chose this as a	William Wells, Program Director with Senior Management approval.	
Why was this performance measure chosen?	Indicates amount of services in community settings	

Objective Details

If the target value was not reached in 2014-15, what changes were made to try and ensure it was reached?	None. There was a significant increase in services but did not reach the target which was intentionally set as a goal more than an expectation.
What are the names and titles of the individuals who chose the target value for	William Wells, Program Director with Senior Management approval.
What was considered when determining the level to set the target value in 2015-16 and why was the decision finally made on setting it at the level at which it was set?	A significant increase beyond previous year.
Based on the performance so far in 2015-16, does it appear the agency is going to reach the target for 2015-16?	Yes. However the Department did divert services during two crises (AME Church massacre and Historic Flooding). These conceivably could reduce billing that is not yet fully appreciated as billing is influenced by month/seasons.
If the answer to the question above is "questionable" or "no," what changes are	

Most Potential Negative Impact	<i>Failure to bill for services rendered could result in need for reduction in services or request for additional state funding.</i>
Level Requires Outside Help	
Outside Help to Request	
Level Requires Inform General Assembly	
3 General Assembly Options	

Matter(s) or Issue(s) Under Review	Reason Review was Initiated (outside request, internal policy, etc.)	Entity Performing the Review and Whether Reviewing Entity External or Internal	Date Review Began (MM/DD/YYYY) and Date Review Ended (MM/DD/YYYY)

Current Partner Entity	Ways Agency Works with Current Partner	Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

Reporting Requirements

Agency Responding	Department of Mental Health
Date of Submission	1/26/2016
Fiscal Year for which information below pertains	2015-16

Instructions :

List all reports, if any, the agency is required to submit to a state, federal or outside entity on a regular basis. Insert the name of each report in a separate column and answer the questions below it. Add as many columns as needed.

PLEASE NOTE: All information the agency provides in the rows below the row labeled, "Date the Report was last submitted," should apply to when the agency most recently submitted the report (i.e. date report was last submitted).

Agency Responding		
Report #	1	2
Report Name:	Restructuring Report	Accountability Report
Why Report is Required		
Legislative entity requesting the agency complete the report:	House Legislative Oversight Committee	Executive Budget Office
Law which requires the report:		
Agency's understanding of the intent of the report:	Provide information to state concerning the Department's activities and use of public funds.	Provide information to state concerning the Department's activities and use of public funds.
Year agency was first required to complete the report:	2015	
Reporting frequency (i.e. annually, quarterly, monthly):	Not known	Annual
Information on Most Recently Submitted Report		
Date Report was last submitted:	May, 2015	September, 2015
Timing of the Report		
Month Report Template is Received by Agency:	April, 2015	August, 2015
Month Agency is Required to Submit the Report:	May, 2015	September, 2015

Information in all these

Reporting Requirements

rows should be for when the agency completed the report most recently	Where Report is Available & Positive Results		
	To whom the agency provides the completed report:	House Legislative Oversight Committee	Executive Budget Office
	Website on which the report is available:	www.sc.gov	www.scdmh.org
	If it is not online, how can someone obtain a copy of it:		
	Positive results agency has seen from completing the report:	Alternative methods for developing strategic plan.	Assure Department is meeting goals and has resources available to meet demand for increased services.

Restructuring Recommendations and Feedback

Agency Responding	Department of Mental Health
Date of Submission	26-Jan-16
Fiscal Year for which information below pertains	2015-16

RESTRUCTURING RECOMMENDATIONS

Instructions: Please answer the questions below and add as many rows as needed.

Does the agency have any recommendations, minor or major, for restructuring?

If the agency has recommendations for restructuring, list each one on a separate row in the chart below. Add as many rows as needed.

Does the agency recommendation require legislative action?	Recommendation for restructuring

FEEDBACK (Optional)

Instructions: Please answer the questions below to provide feedback on this Annual Restructuring Report ("Report").

Please list 1-3 benefits the agency sees in the public having access to the information requested in the Report, in the format it was requested.	Please list 1-3 benefits to agency management and employees in having all of this information available in one document.	Now that the agency has completed the Report, please list 1-3 things the agency could do differently next year (or it could advise other agencies to do) to complete the Report in less time and at a lower cost to the agency.
Public becomes aware of some of the basic activities of the Department and how it plans to provide those services.	Provides substantial information about the agency in a single document.	More importantly, this process assists the Department in determining which performance indicators may need to be considered in future to better demonstrate showing effectiveness of obtaining objective.
2	In many ways, this document is more akin to the Annual Accountability Report than the report sent to the House Legislative Oversight Committee in May, 2015. However the Accountability Report organizes the data into a few pages while this is spread over many.	2
3	3	3

Does the agency believe this year's Restructuring Report was less burdensome than last year's?	Please list 1-3 changes to the Report questions, format, etc. the agency recommends to ensure the Report provides the best information to the public and General Assembly, in the least burdensome way to the agency.	Please add any other feedback the agency would like to provide (add as many additional rows as necessary)
	Follows the same format as the annual Accountability Report, which organizes most of the same information into fewer pages.	
Why or why not?	2	

Restructuring Recommendations and Feedback

<p>More burdensome. Made assumptions as to the process of strategic planning for Department that are not entirely accurate. While we could adopt this exact process in the future (pending Senior Management approval), this exercise has been akin to fitting a round peg into a square hole.</p>	<p>3</p>	
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Agencies are not required to do anything in this worksheet. This worksheet is part of the document so the proper drop down menus can be available in the other tabs.

Is Performance Measure Required?

State
Federal
Only Agency Selected

Type of Performance Measure

Outcome
Efficiency
Output
Input/Explanatory/Activity

Is the Partner a State/Local Government Entity; College, University; or Other Business, Association, or Individual?

State/Local Government Entity
College/University
Business, Association or Individual

Does the Agency have any restructuring recommendations

Yes
No

Does the agency believe this year's Restructuring Report was less burdensome than last year's?

Yes
No