

DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES
Strategic Plan 2014-2016

MISSION

DMHAS, in partnership with consumers, family members, providers and other stakeholders, promotes wellness and recovery for individuals managing a mental illness, substance use disorder or co-occurring disorder through a continuum of prevention, early intervention, treatment and recovery services delivered by a culturally competent and well trained workforce.

VISION

- DMHAS envisions an integrated mental health and substance abuse service system that provides a continuum of prevention, treatment and recovery supports to residents of New Jersey who have, or are at risk of, mental health, addictions or co—occurring disorders.
- At any point of entry the service system will provide access to appropriate and effective person-centered, culturally-competent services delivered by a welcoming and well trained work force.
- Consumers will be given the tools to achieve wellness and recovery, a sense of personal responsibility and a meaningful role in the community.

STRATEGIC AREA

Community Integration

STRATEGIC GOAL

A mental health and substance abuse system of care which ensures a consumer’s recovery and ability to lead a meaningful life, in an integrated community of his or her choice.

STRATEGIC PRIORITIES FOR 2014-2016

Centralized Housing Authority (as of 1/30/15)	In Progress	Completed	Community Support Services (CSS) (as of 1/30/15)	In Progress	Completed	Standard Level of Care Determination	In Progress	Completed	Community Re-Integration (as of 2/18/15)	In Progress	Completed	Community/Clinical Services and Processes (as of 9/15/14)	In Progress	Completed
Have increased choice on the part of consumers in terms of where they live.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Service is focused on individuals taking more responsibility and having meaningful choice in the services they receive, such as who will provide the service.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Identify a standardized tool that is appropriate for use in the hospitals and community to determine a consumer’s level of care needs.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Increase the role of the community providers in the treatment and discharge planning process in the state hospitals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Explore strategies applicable to the system of care A. Prevention strategies for mental health B. Early Intervention for mental health C. Co-occurring capabilities throughout the behavioral health system of care	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Develop a centralized process of identification and notification of DMHAS vacant supportive housing units.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Modify existing contracts to reflect separation of housing and services.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Implement the standardized tool in the State hospitals.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Develop a systematic way to know bed utilization in real time.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All community-based providers across the behavioral health system of care utilize evidence based practices, ensuring that agency’s apply the principles of the EBP(s) consistently.	<input type="checkbox"/>	<input type="checkbox"/>
Develop and implement a centralization of the handling of grievances between landlords and tenants.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Promulgate CSS regulations resulting in a new rehabilitation service being available in NJ.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Individuals receive the supports and services based on their assessed needs and personal goals in the most integrated least restrictive setting possible.	<input type="checkbox"/>	<input type="checkbox"/>	Apply for HUD (Housing and Urban Development) Section 811 PRA (Project Rental Assistance) NOFA (Notice of Funding Availability) subsidies to help facilitate discharge of CEPP designees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Promote the systematic integration of: A. Advanced Directives with an electronic registry that will provide full access when receiving emergency services or hospital care B. Wellness and Recovery Action Plans (WRAP) C. Shared Decision Making model	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Centralize housing inspections.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Implement CSS and enable federal dollars to support this initiative by billing Medicaid for these services.	<input type="checkbox"/>	<input type="checkbox"/>	Implement the standardized tool in the community.	<input type="checkbox"/>	<input type="checkbox"/>				Increase the number of agencies that are capable of serving individuals who are dually diagnosed (whether MI/SA, DD/MI, or DD/SA)	<input type="checkbox"/>	<input type="checkbox"/>
												Explore the expansion of peer delivered services throughout the behavioral health system of care.	<input type="checkbox"/>	<input type="checkbox"/>
												Integrate physical and behavioral health in all treatment plans; specifically metabolic syndrome, smoking, diabetes.	<input type="checkbox"/>	<input type="checkbox"/>

