

**STRATEGIC PLAN  
OF THE  
MENTAL HEALTH ASSOCIATION OF ESSEX AND MORRIS, INC.**

**I. Values**

Any long-term plan must be consistent with the values of the organization. Those values determine the philosophy and guiding principles by which the organization operates. These are the core values to which MHAEM is committed:

- Promoting mental and physical health and the treatment of emotional and mental disorders.
- Treating individuals with mental illness with respect and dignity.
- Fighting the corrosive effects of stigma associated with emotional and mental disorders.
- Understanding and supporting the important role that families and loved ones play in promoting wellness and recovery.
- Recognizing that the organization's strength rests in its staff, and thus always striving to (A) hire superior quality staff; (B) provide high quality professional development and training; (C) encourage continuing education; and (D) demonstrate to staff that they are valued by including them in appropriate decision making.
- Operating MHAEM in a fiscally and strategically sound manner.
- Removing barriers to treatment wherever they appear.
- Supporting other providers in the interest of consumers and families.
- Providing advocacy and services without regard to ethnicity, race, age, sexual orientation or ability to pay.

**II. Mission**

***THE MISSION OF THE MENTAL HEALTH ASSOCIATION OF ESSEX AND MORRIS, INC.  
IS TO PROMOTE MENTAL HEALTH, WITH THE INTEGRATION OF PHYSICAL  
HEALTHCARE,  
TO IMPROVE THE CARE AND TREATMENT  
OF INDIVIDUALS WITH MENTAL ILLNESS, AND TO REMOVE THE STIGMA  
ASSOCIATED WITH EMOTIONAL AND MENTAL DISORDERS.  
AS A COMMUNITY ORGANIZATION, WE ACCOMPLISH OUR MISSION THROUGH  
ADVOCACY, EDUCATION, PREVENTION, EARLY INTERVENTION, TREATMENT AND  
SERVICE.***

### **III. Vision**

1. To become a leader in advocating for individuals with mental illness as well as for the general mental health needs of the community.
2. To become a premier provider of quality mental health services throughout the Greater North Jersey community.
3. In providing services, whether independently or through partnerships, doing so in a manner that addresses a wide continuum of services which may be beneficial to children, adults, seniors and families, including anti-anxiety and depression services, addiction relief, and the integration of physical healthcare.
4. To provide safe and affordable housing for individuals with mental illness.
5. With regard to funding, (A) procuring and maintaining diverse and stable sources of funding, so that the MHAEM will always be there for its clients and the broader community; (B) thriving in a fee-for-service and managed care environment while still maintaining the mission of the organization; and (C) only seeking public funding for activities for which MHAEM is the best provider to do so.

### **IV. Organizational Strengths, Weaknesses and Threats**

#### **Organizational Strengths:**

- MHAEM is a market leader in its primary service area for high quality, community-based services to individuals with severe and persistent mental illness.
- Established history and reputation as an ethical provider and strong advocate within the mental health community.
- Strength through its team members: MHAEM has effective, experienced administrators; excellent clinical leadership; quality staff throughout the entire organization; and a committed, active Board of Directors.
- A positive working environment: MHAEM's highly-qualified, culturally-diverse staff operate across a well-coordinated interdepartmental team approach to providing services, and are provided opportunities for significant career and clinical development.
- Prepared for the future: MHAEM has a strong information technology (IT) infrastructure, and is well-prepared for the fee-for-service environment, *e.g.*, electronic clinical records, sound financial and clinical management.

- MHAEM has experienced a stable demand for services, which it continues to provide without regard for ability to pay.

### **Organizational Weaknesses**

- Scope of services provided not yet sufficient to cover fuller range of services which may be beneficial to children, adults, seniors and families, including anti-anxiety and depression services, and addiction relief.
- With regard to addiction relief, the lack of substance abuse licensure is a limiting factor.
- Competition for staff with governmental and private sectors.
- Limited Board diversity.

### **Organizational Threats**

- Dependence on limited state and federal funding sources.
- Stagnant reimbursements rates.
- Change in the funding environment from a contract-based system to a fee-for-service model followed by a case/capitation rate model.
- Competition from entrepreneurial for-profit entities, *e.g.*, outpatient therapists, private therapists, *etc.*
- Uncertain political and economic climate.

## **V. Opportunities**

- Paradoxically, while moving to a fee-for-service system remains a concern, it is also an opportunity to increase productivity, and in turn, grow revenues.
- Expanding focus on arguably less severe, but statistically more pervasive mental health concerns such as depression and anxiety, with emphasis in the following demographics:
  - Among young people in secondary education through immediate post-college years who are struggling with depression and social anxiety.
  - Among seniors who often suffer from social detachment and loneliness.
- Mental Health services in the criminal justice system (education and services) with an emphasis on recently available federal funding.
- Substance abuse services.

- Expansion of existing services to individuals with severe mental illness, and continued efforts to raise awareness and tolerance through community education and programs such as Mental Health First Aid.
- In seeking to aid the mental health of seniors, will develop collaborations with senior community centers and senior housing providers.
- In seeking to address mental health concerns within the criminal justice system while also remaining financially responsible, will seek to identify potential state and federal resources for the provision of mental health services within the criminal justice sector.

## **VI. Three-Year Plan**

1. Continue to expand advocacy for individuals with mental illness within the vision and mission of the MHAEM.
2. In seeking to expand the focus on broader societal mental health issues of depression and anxiety, engaging in a campaign to frame mental health as a public health concern, with an emphasis on the prevalence of depression and anxiety in children, young adults, and seniors.
3. In tandem with expanding MHAEM's focus on statistically more pervasive mental health concerns such as depression and anxiety, working to broaden MHAEM's name recognition while concurrently seeking new funding sources as a result of heightened visibility.
4. In seeking to enhance the mental health of children and young adults with particular attention to suicide prevention, will develop collaborations with high schools, colleges and universities.
5. In seeking to address the scourge of addiction, will obtain appropriate licenses and/or approvals to provide substance abuse counseling and services.
6. Improve consumers' long-term prospects and personal independence by emphasizing overall wellness through the integration of physical health and social interaction, in conjunction with traditional mental health services, in all MHAEM services.
7. Enhance the financial strength of the agency by (A) procuring major gifts and planned giving; and (B) continuing to diversify and increase fundraising resources through external relationships and partnerships with foundations, agencies, corporations and individuals.
8. Develop a Board of Directors and Committees that are more representative of the communities which MHAEM serves.

In all aspects of this Three-Year Plan, proceeding in ways and through means that acknowledge (A) the capabilities of the MHAEM (must have or be able to acquire the appropriate knowledge base and expertise to perform the work); (B) agency infrastructure (must be able to operate the program without undue burden to its personnel); and which are (C) financially responsible and supportable in both the short- and long-term

This Strategic Plan was formulated with the input of internal and external stakeholders, including but not limited to; our consumers, their families, the Strategic Planning Committee, the Board of Directors, Staff, Public funding sources, Private funding sources, Public oversight entities and Community partners.

Reviewed and Adopted by  
MHAEM Board of Directors  
April 15, 2019