

SAMPLE PROGRAM ACTION PLAN

Courtesy of Dr. Ken Minkoff (December 2008)

PROGRAM: MH Outpatient Agency/Program		Fiscal Year: 2008	
CONTACT PERSON: Program Manager/Change Agent		PHONE:	
GOALS AND OBJECTIVES: ACTION ITEMS	WHAT DO WE DO? MEASURABLE STEPS AND INDICATORS OF PROGRESS	RESPONSIBLE PERSONS	TARGET DATE FOR COMPLETION
<p>Taken from the COMPASS, write broad goals, and specific objectives and activity that will be taken; e.g. , write a policy, put up a poster, collect certain data, conduct a training.</p>	<p>(Something that can be quantified; e.g., the policy is written, the poster is in place, the data is collected, the training was held.)</p>	<p>(The single individual OR individuals that are responsible for completing the action item; e.g., Jonnie Jones, the chairs of the Fun Committee.)</p>	<p>(The date by which the action item is to be completed; e.g., April 27, 2009, NOT Spring, 2009.)</p>
<ol style="list-style-type: none"> 1. Program leadership announces official commitment to cod capability for the agency 2. Program leadership announces that all staff will be developing core competency in cod 3. Program leadership organizes a CQI team to cover the whole orgn, including front line staff 4. Program leadership and CQI team create a message that welcoming is a starting place. 	<p>Announcement is issued on letterhead and disseminated to all staff</p> <p>CQI team meets regularly, keeps and disseminates minutes, and communicates that all programs in the agency will be participating in their own CQI process.</p> <p>Write welcoming, recovery, cod capability into the “charter” of the CQI process. Identify a committee to create a formal welcoming policy</p>	<p>The Boss</p> <p>Boss to empower the team</p> <p>CQI leadership to provide support</p> <p>Program managers to own the CQI process inside each program in the agency.</p> <p>Initial work team that makes recommendations to the Boss for what to sign</p>	<p>Initial draft by when?</p> <p>Reviewed and revised by? Issued by?</p> <p>Formal charter of the process by the boss, by when? Set up composition and schedule of meetings by CQI team leaders, by when? Direct memos</p>

<p>5. Program leadership and CQI team indicate that screening and counting are another starting place</p>		<p>CQI team creates the working group, and identifies a chair.</p>	<p>from program managers to their staff, by when?</p>
<p>6. To promote welcoming engagement, increase staff knowledge about Stages-of-Change and Motivational Interviewing., as a first step to having staff engage with consumers in a welcoming, empathic, stage matched motivational framework</p>	<p>To be accomplished using recommended reading materials, in-service and outside training. Indicator: staff reports that they have heard of stages of change and MI, and wish that they knew how to do it better to produce better outcomes</p>	<p>Change agents and all team leaders, plus feedback loop for staff to provide us.</p>	<p>Already done</p>
<p>7. Expanded #6 above: Improve the application of stage matched motivational strategies in actual clinical care 6a. CQI team identifies indicators and discusses with staff 6b. CQI team works with medical records to develop a place where we can put a box for checking stage of change 6c. Form a committee or work group to develop samples of stage matched plans</p>	<p>Indicators Step 1: We discuss stages of change in the case reviews and document in the chart in a box for stage of change for each problem We practice welcoming individuals in early stages of change. Step 2: We develop sample stage matched treatment plans Step 3 We practice using the sample plans in real treatment Step 4 We look for areas of improvement in stages as we move through treatment</p>	<p>Who is going to oversee this? CQI team to identify indicators\ Medical records to create the box Program leaders and team leaders to identify stages of change Change agents to model welcoming discussions with early stage clients and to lead the committee on sample treatment plan development. Etc.</p>	
<p>8. To begin improving screening and counting:</p>	<p>Form screening and counting committee. Collect baseline info from each program</p>	<p>CQI team creates the group and identifies a chair. Committee chair</p>	

	<p>Develop a plan to improve, not fix, the baseline. Plan Do</p> <p>Check Act Cycle is documented.</p>	<p>helps committee to develop a survey for each program</p> <p>Define what we count, find a place to report (yes, no, maybe), etc.</p>	
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COMMENTS BY: Program Manager () Agency Staff () Other ()

Program Director Signature

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