# **Exceptional Behavioral Health Services**

2021-2024 Strategic Plan

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## **Executive Summary**

It is a great honor to present the updated strategic plan to our employees, clients, stakeholders and CARF. This plan represents the collective thinking of Exceptional Behavioral Health Services with input from our staff, clients, and stakeholder (satisfaction and outcome surveys and quarterly Management Team Meetings) and is designed to carry us through the next three fiscal years, which ends in 2024. Employees, clients, and stakeholders will have the ability to review this annually at the Annual Forum. The plan is also disseminated in the form of a flyer and will be posted on our agency's website. In this plan, the organization has identified three strategies that form the foundation for the agency's work:

- Grow Exceptional Behavioral Health Services;
- ❖ Manage Exceptional Behavioral Health Services with fiscal responsibility to ensure efficiency, impact, and sustainability; and
- Expand Exceptional Behavioral Health Services to meet future mental health care needs

The strategic direction and goals included in this plan are our response to understanding what client's, employees, and stakeholders value most about the organization, and current opportunities and challenges for offering a high quality system of support in the community for people with disabilities. The three year period of this strategic plan will be a time of assessing and deepening our approaches to our work. We will take more of a leadership role in working with a broader array of community resources. With a fresh perspective on the mission, understanding what works well, and the environment in which the organization operates, Exceptional Behavioral Health Services, will pursue the following strategic direction:

**Exceptional Behavioral Health Services** will review and deepen its existing direct supports and services over time to ensure that they are state-of-the art for working effectively with the mental health population.

**Exceptional Behavioral Health Services** will further assess client and community needs to identify gaps or needed shifts in service delivery. This assessment will serve as the basis for expanding or adding new services.

**Exceptional Behavioral Health Services** will take a leadership role in working with a range of providers to identify and meet the needs of children and adults with co-occurring disorders.

**Exceptional Behavioral Health Services** will explore the feasibility of expanding the organization's visibility in the community.

**Exceptional Behavioral Health Services** will emphasize building its discretionary financial resources to invest in providing quality services.

#### MISSION STATEMENT

At Exceptional Behavioral Health Services, our mission is to support individuals living with any Substance Abuse and/or Mental Illnesses. We want to help them lead exceptional lives by developing their minds to perform on an exceptional level. In doing so, the transition back to normalcy will be an exceptional experience for both the client and the agency.

#### GOAL

Our goal is to focus on promoting the development of a comprehensive, coordinated system of services that will enable those with mental illnesses or substance abuse issues to maximize their functionality to live safely and successfully in the community.

#### PROGRAM PHILOSOPHY

Exceptional Behavioral Health Services is a private agency offering comprehensive services to individuals and families regardless of race, age, gender, handicap, creed, sexual orientation or national origin. This agency strives to provide quality care to all social and economic sectors of the population by developing specific programs to meet the specific needs of its recipients. Furthermore, this agency is governed by the CEO whose primary responsibility is to ensure that recipients receive an exceptional level of services by emphasizing recipient's strengths and competencies and to build on them.

At Exceptional Behavioral Health Services, we observe a person-centered philosophy and practice. A plan of service for persons receiving services is developed through a person-centered planning process. Each plan is based on the expressed strengths, needs, abilities, and preferences/desires of the persons served and the supports necessary to reach their goals.

#### **SERVICES**

We provide services to children, adolescents and adults. Face-to-face and telehealth services are provided to clients allowing them the opportunity to look beyond their challenges and work towards achieving goals and independence by providing valuable behavioral health treatments in a respectful, responsive and efficient manner through:

- (1) Community Psychiatric Support and Treatment (CPST)
- (2) Psychosocial Rehabilitation (PSR)
- (3) Crisis Intervention
- (4) Individual Therapy and Family Therapy
- (5) Addictions Treatment
- (6) Medication Management
- (7) Assessments/Reassessments

#### **CURRENT & FUTURE FINANCIAL POSITION**

The financial resources of Exceptional Behavioral Health Services are evaluated monthly to assess the outcome of achieving organizational goals. Current financial trends indicate the agency is in a good financial position. The CEO meets with an accountant to help organize the financial details of the business and to ensure the company continues to head in the right direction. The CEO is responsible for reviewing financial and operational benchmarks to ensure financial solvency. The current financial position of the agency is stable. The agency has the capability of receiving additional income during the course of this plan. Due to COVID-19, there was a decrease in revenue, as services declined. However, the use of telehealth services allowed continuation of services. Telehealth services allowed the agency to quickly get back on track with limited financial setbacks. The table below shows the agency's financial position at the time this plan was updated and projected future financial positions:

Fiscal Year	2021	2022	2023
Revenue	\$600,000	\$807,500	\$910,000
# of Clients	60	75	90

<sup>\*</sup>See actual financial reports

#### **SWOT ANALYSIS**

## STRENGTHS, WEAKNESSES, THREATS & OPPORTUNITIES

This strategic plan addresses the following key strengths, weaknesses, threats and opportunities which apply to Exceptional Behavioral Health Services. now and in the foreseeable future:

#### **STRENGTHS**

CARF ACCREDITED
EXPERIENCED LEADERSHIP
DEDICATED STAFF
MANAGEMENT HAS DRIVE TO SUCCEED
GOOD LOCATION
PROVIDE QUALITY SERVICE TO FAMILIES 8
CLIENTS

#### WEAKNESSES

FINDING QUALITY EMPLOYEES

NEED MORE OPERATING CASH FLOW

LIMITATIONS ON REVENUE IMPOSED BY
NON-NEGOTIABLE (FIXED) FEE
STRUCTURES

DEVELOPING PROCESSES TO ENSURE

# SWOT ANALYSIS

#### **THREATS**

FAILURE TO MEET REGULATORY
DEADLINES, EXTERNAL AUDITS
POTENTIAL PAYBACKS BY AGENCY
LOSS OF ENDORSEMENT
LAWSUITS BY CLIENT/GENERAL LIABILITY
CONSUMER VIOLENCE AND SAFETY (HIGHRISK CLIENT)
HURRICANES

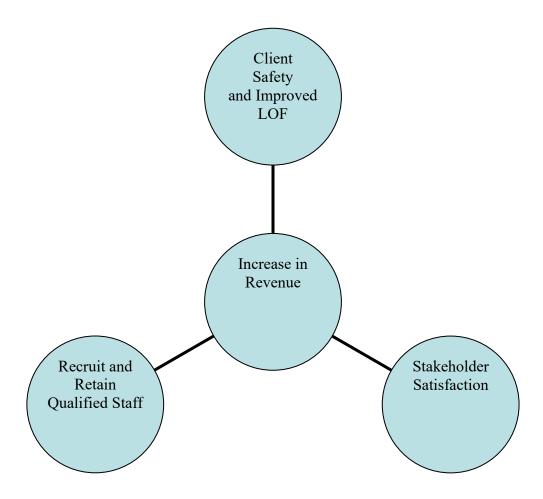
#### **OPPORTUNITIES**

INCREASE NUMBER OF CLIENTS/FAMILIES SERVED
INCREASE CASH FLOW
EXPANSION OF SERVICES
ADDITIONAL LOCATIONS
EXPANDING TO OTHER PARISHES

# **PRIORITIES**

This Strategic Plan was developed from key priorities identified by the CEO, Management Team, feedback from clients and other key stakeholders during the analysis process. The Strategic Plan priorities are:

- Ensure the safety, quality and effectiveness of services resulting in increased level of functioning for clients.
- Ensure the future financial viability of services resulting in increased revenue.
- Recruit and retain culturally competent and professional clinical staff.



# **AGENCY SHORT-TERM GOALS**

- Maintain a healthy and safe environment
- Improved client level of functioning
- Provide satisfactory services to both internal and external stakeholders
- Increase revenue and program expansion
- Provide quick access to services
- Recruit and retain qualified staff
- Maintain 3-year CARF accreditation

#### **AGENCY LONG-TERM GOALS**

- Exploring other needed services in the area
- Expanding to other parishes
- Obtain other funding sources

# **OBJECTIVES**

#1 - Clients will demonstrate improved outcomes/well-being/increased level of functioning.

#### **Performance Indicators:**

- > Decrease in symptomatic behavior
- > Increase in compliance with medications, if applicable
- > Decrease in hospitalization
- > Maintain sobriety, if appropriate
- > Establishment of family and support relationships within their community
- > Engagement in community and leisure activities
- > Obtaining gainful employment, if applicable.
- > Decrease in legal involvement
- > Increase in reported emotional well-being
- > Decrease in crisis episodes and the ability to cope with crisis episodes
- > Decrease in Suicidal Behaviors

- 1. We will hire and retain qualified, capable, and caring professionals to provide the best service to our clients. (Review staffing needs monthly; provide monthly supervision).
- 2. We will conduct client satisfaction surveys at least twice annually to assess how well we are providing services and adhering to our mission and values.
- 3. We will conduct employee satisfaction surveys at twice annually to assess how well we are providing staff support.
- 4. Clients will receive wellness exams at monthly doctor visits.
- 5. Include client and community representatives in our quality assurance and client rights initiatives.

## **Expectation of the Persons Served**

- Is clear that client expect the agency to provide sound, quality services to help them address their specific goals towards recovery, independence, and wellness. In review of the agency's mission and values, it is evident that our mission is to provide this care. Clients will be informed of their rights annually.
- 2. Client expect personnel to be consistent, honest, and professional. We in no way should market the program in a manner that does not reflect the services we provide. Also, we should not make any promises to client that we could not keep. This includes staff being knowledgeable about our code of ethics, potential conflicts of interest, and fully understanding the rights of client served.

# **Expectations of Other Stakeholders**

- Referral sources expects the agency to abide by service definitions, government regulations, personnel and supervision requirements, and documentation requirements. The endorsement process, as well as the lengthy self-study required for endorsement reflects these high expectations. The agency will be required to demonstrate adherence to all local, State, and internal policies. Failure to meet the standards will result in corrective action or loss of endorsement.
- 2. Given the highly publicized abuse of mental health services in the community, we are obligated to provide services with the highest integrity. This includes careful scrutiny and all recruiting and hiring decisions, careful training that reflects state standards, and close oversight of services. Special attention will need to be paid to documentation of services that accurately reflect services rendered.

# **Strategies**

- 1. We will conduct external stakeholder satisfaction surveys at least annually to gather direct feedback from referral sources and other stakeholders.
- 2. We will conduct quarterly audits of all personnel files to ensure personnel meets the qualifications for assigned duties, appropriate credentialing has been conducted, professionals have required trainings, and supervision is appropriate to duties.
- 3. All documentation of new personnel will be reviewed by the CEO or Human Resource designee during the first 30 days of providing services.
- 4. The role and responsibilities of personnel will be reviewed and reconfigured to maintain competent leaders.
- 5. The job descriptions of staff will be reviewed annually and updated to include any new roles.
- 6. An ongoing, professional development program will be developed and integrated for all staff.

### **Competitive Environment**

1. Given the dire need to receive referrals for program sustainability, the agency has to maintain a good reputation. The area is flooded with MHR providers, making the field extremely competitive. There are so many agencies to choose from; the competition is high. Referrals will need to know what makes us the agency of choice through the use a professional marketing tools and program outreach. Although the environment is competitive, we will build healthy relationships within the

community. We will develop strong competitive positioning strategies with a good understanding of the environment and our competitors.

# **Strategies**

- 1. We will update the website no later than December 2021.
- 2. Meetings will be set up with community leaders on an ongoing basis to review services we are endorsed to provide.
- 3. The CEO is responsible for all marketing activities.
- 4. A marketing plan will be developed to strengthen the agency's position in the community.

## #2 - Increase in financial viability of the agency.

# **Performance Indicators:**

- > Increase in annual revenue
- > Decrease in expenses
- > Increase in referrals
- > Improved trends in accuracy of billing
- > Decrease billing errors
- > Increase time spent on billable versus non-billable activities
- > Incorporation of private pay
- > Incorporation of Medicare
- > Ability to meet financial obligations and expenses
- > Accomplishment of long-term expansion and growth

- 1. The agency will actively market services with integrity through community outreach initiatives to include meetings with community leaders and active participation in provider meetings. Necessary marketing materials will be updated annually.
- 2. The CEO or designated staff will review all updates as listed on the state's website regarding changes in service definitions and rate cuts.
- 3. The agency will review its self-study that was submitted for endorsement prior to the post endorsement review to ensure adherence to all regulations and the provision of services.
- 4. The CEO or designee is responsible for the review of all documentation of new personnel to ensure standards are met and documentation reflects services provided. No billing will be submitted prior to review of records.

# #3 – Obtain one additional funding source.

#### **Performance Indicators:**

- > The capital of the agency is stable
- > Referrals are continuous
- > Maintaining all overhead expenses
- > Increased revenue

# **Strategies**

- 1. Annual budgets will be balanced.
- 2. Provide a census of 75 or more clients by December 2022.
- 3. The three-year financial projection will be reviewed each year.

# #4 -Stakeholders will be satisfied with services provided.

#### **Performance Indicators:**

- > Decrease in complaints/grievances reported
- > Results of satisfaction survey
- > Employee turnover percentage

>

## **Strategies**

- 1. Completion of client surveys annually
- 2. Completion of surveys with referral sources annually
- 3. Completion of surveys with staff annually
- 4. Employee incentives
- 5. Increase client participation

# #5 - Identify one additional service need areas prior to expansion to other parishes

#### Indicators:

- > High level of intensity of services.
- > Coordination of services

- 1. Conduct analysis of services that are less likely to be cut by the state.
- 2. Focus specifically on program development of all services we provide and preparation for reaccreditation. This includes close attention to quality services, maintaining a sound reputation in the community, and ensuring adequate preparation for CARF re-accreditation.
- 3. The agency will contract with a consultant for ongoing review for CARF preparation and compliance.

4. If the program can maintain 75 clients by the end 2022, the program can review possible expansion of services based on the demographics and service needs.

# #6 – Maintain a healthy and safe environment.

#### Performance Indicators:

- > Decrease in critical incidents reported
- > Decrease in Suicidal Behaviors
- > Decrease of workplace violence
- > Increase testing of emergency procedures

# **Strategies**

- 1. Annual testing of emergency procedures
- 2. Completion of external safety inspections annually
- 3. Completion of internal self-inspection semi-annually
- 4. Training of staff upon hire and annually in required health and safety practices
- 5. Educate clients on health and safety practices
- 6. Annual analysis of critical incidents

#### Social Determinants of Health

- 1. The agency is confident in its internal ability to provide services to help support clients in their need to improve their mental health status, education, physical environment, employment, social support networks, as well as access to health care. First, the CEO participates in events and promotes health and health equity. The agency provides Medicaid-specific initiatives focused on addressing Social Determinants of Health. Staff who complete assessments and treatment plans also are engaged in activities to identify and address availability of resources to meet the daily needs of clients.
- 2. The agency will continue to provide external resources, referral, support services, and case management services that help connect and retain clients to address social determinants of health. Resources are also posted on the agency's website and a resource binder is located in the office.

# #7 – Collaborate with community stakeholders and provide resources to clients.

- 1. Ensure social determinants of health are identified during assessments to improve and/or reduce health disparities.
- 2. The agency will reduce achievement gaps in goals, improve the health of clients, and promote equity in community-based programs.
- 3. Availability of opportunities for recreational and community activities, transportation services, public safety, social support, social norms and attitudes.
- 4. The agency will conduct annual surveys to obtain feedback

#### Service Need Areas

- 1. The agency is confident in its choice of services it is currently providing. These services are highly intensive and are less likely to be cut or revised in dramatic ways by the state. The agency's commitment to provide the more intense services and recruit high-qualified personnel reflects well on the agency and its commitment to provide services.
- 2. There are concerns given the high level of intensity of services. There will need to be close observation of safety issues and coordination of services.

#### #8 - Explore other needed services

# **Strategies**

- 1. Focus specifically on program development of all services we provide and preparation for reaccreditation. This includes close attention to quality services, maintaining a sound reputation in the community, and ensuring adequate preparation for CARF.
- 2. If the program can maintain 75 clients by the end of 2022, the program can review possible expansion of services.

# **Demographics of the Service Area**

- 1. Louisiana has one of the highest growth rates for the Hispanic American / Spanish speaking population. Immigrants from Mexico or their descendants comprise the largest part of the Hispanic population in Louisiana, which continues to grow. In 2019, Jefferson Parish, LA had a population of 432k people with a median age of 39.9 and a median household income of \$56,069. Between 2018 and 2019 the population of Jefferson Parish, LA declined from 434,051 to 432,493, a -0.359% decrease and its median household income grew from \$50,766 to \$56,069, a 10.4% increase.
- 2. The 5 largest ethnic groups in Jefferson Parish, LA are White (Non-Hispanic) (51.8%), Black or African American (Non-Hispanic) (26.8%), White (Hispanic) (11.2%), Asian (Non-Hispanic) (4.48%), and Other (Hispanic) (2.44%). 0% of the households in Jefferson Parish, LA speak a non-English language at home as their primary language.
- 3. 92.7% of the residents in Jefferson Parish, LA are U.S. citizens.

#### **Legislative Environment**

Currently, it is very difficult to assess specific changes in programs by the State. It is anticipated that due to the economy, there will be rate changes in Medicaid funding and possible program cuts. However, the agency is prepared for possible rate cuts, increased admission criteria for programs, and possible new requirements for assessments of clients to establish medical necessity.

- 1. It is imperative that we establish capital to prepare for an emergency fund to anticipate rate changes services to provide medical necessity.
- 2. The agency will participate in the Mental Health Provider Council meetings and stay abreast of changes.

# The Use of Technology

The agency would like to incorporate the use of technology to support efficient operations of the program and improve the quality of our service delivery. Technology will also assist the agency in performance improvement. The website will be updated to provide information on services and allow clients to schedule services. As we consider the current and future technology needs of our clients and employees, additional technology goals will be implemented.

## **Strategies**

- 1. There will be technologies to allow clients access to information and schedule appointments.
- 2. Identify the resources needed to advance our use of technology to support operations, effective service delivery, and performance improvement.

#### **ANALYSIS OF PERFORMANCE**

During the developmental stages of the plan, each goal was discussed by the Management Team. An indepth analysis of the agency identified the Strengths and Weaknesses. Additionally, possible Opportunities and Threats to the agency were also identified. An important component of the analysis was management and staff input, client input, and input from external key stakeholders including funders, referral sources and licensing/accrediting bodies. This input has been received through surveys, staff meetings and discussions as they relate to the current and future needs of MHR services. The performance of internal actives in specific areas are identified in the Performance Analysis plan, which is still under development. Human resource, health and safety, risk management, corporate compliance, cultural diversity, all other business functions and service delivery goals will be analyzed by the Management Team throughout the years of this plan.

The CEO will meet with the Management Team to gather, identify, review, and analyze the required information from the analysis of performance indicators. It will be charted on spreadsheets and other data collection tools. To ensure consistency in maintaining the achievement of performance targets, the team will participate in ongoing planning through meetings to review the collected data. A performance grid will be developed and updated annually to ensure target goals are achieved.

This written plan is reviewed at least annually for relevance and update it as needed. The CEO acknowledges the review by signing a signature page. The plan will be shared with stakeholders verbally, through posting on the agency's website and/or by written material. Aperformance analysis will be completed annually and shared with the Management Team.