

Adolescent and Family Counseling Services



2014-2017 Strategic Plan

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EXECUTIVE SUMMARY

Adolescent and Family Counseling Services has established a foundation for success through strategic planning focused on taking advantage of strengths and opportunities and addressing weaknesses and threats. The Management Team is the core for developing systems through on-going environmental assessments. Several strategies are used to understand the environment and organizational competencies, identify opportunities and threats, and articulate a high-level map of the direction to take in order to achieve, sustain, and advance organizational purpose in a competitive environment. These strategies will translate environmental factors within the agency into tangible planning meetings, setting of goals and priorities, and allocation of resources to achieve performance targets. This ongoing strategic planning process will consider:

- a. Expectations of persons served.
- b. Expectations of other stakeholders.
- c. The competitive environment.
- d. Financial opportunities.
- e. Financial threats.
- f. The organization's capabilities.
- g. Service area needs.
- h. Demographics of the service area.
- i. The organization's relationships with external stakeholders.
- j. The regulatory environment.
- k. The legislative environment.
- l. The use of technology to support:
 - (1) Efficient operations.
 - (2) Effective service delivery.
 - (3) Performance improvement.
- m. Information from the analysis of performance

MISSION

To assist individuals with mental health challenges achieve their hopes, dreams and the opportunity to maximize independent living by providing valuable behavioral health treatments in a respectful, responsive and efficient manner through:

- (1) Community Psychiatric Support and Treatment
- (2) Crisis Intervention
- (3) Outpatient Therapy
- (4) Treatment Planning
- (5) Psychosocial Rehabilitation (Youth)
- (6) Group Counseling

Adolescent and Family Counseling Services strives to promote a humane and healthy society in which all people are accorded respect, dignity and opportunity to achieve their full potential through meaningful social inclusion free from discrimination.

PROGRAM PHILOSOPHY

This agency 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 recipient population. Furthermore, this agency is governed by the CEO whose primary responsibility is to ensure that recipients receive an optimal level of services by emphasizing recipient's strengths and competencies and to build on them.

CURRENT & FUTURE FINANCIAL POSITION

The financial resources of Adolescent and Family Counseling Services assesses the achievement of its goals. The current financial position of the agency is stable. Adolescent and Family Counseling Services objectively evaluates its financial position by gathering and organizing the necessary financial information. The CEO is responsible with the basic financial record keeping and has maintained accurate records of the company's cash flow and other day-to-day issues. A detailed financial analysis is completed to look for additional capital, as the agency is currently in the process of obtaining more capital from various funding streams. The accountant provided the 2014 annual financial statements, which provided the financial facts about the agency, so aid the CEO in making sound decisions about future actions (see financial reports).

SWOT ANALYSIS

Strengths, Weaknesses, Opportunities and Threats

Strengths:

- Highly dedicated and committed CEO and staff who are focused on person-centered care
- Client accessibility (hours & days)
- Timely problem solving and crisis management
- High satisfaction with consumers and other stakeholders
- Highly experienced Management Team
- Positive experiences with personnel to date
- Trusted referral sources
- Strong teamwork and a spirit of collaboration among staff members
- Use of management team
- Leadership is respected and trusted by staff and the community

Weaknesses:

- Public awareness of services
- Market concentration - Lack of variety in revenue sources and vendor base
- Limitations on revenue imposed by non-negotiable (fixed) fee structures
- Inconsistent inclusion in stakeholder meetings limits community participation
- Developing processes to ensure completion of mandatory tasks

Threats:

- Workforce demographics – rural area presents recruitment challenges when hiring licensed clinicians
- Possible State changes
- Missing mandatory deadlines: Failure to meet regulatory deadlines, external audits; and incident reporting
- Progress notes not justifying services rendered; potential paybacks by agency
- Loss of endorsement
- Lawsuits by client and general liability
- Consumer violence and staff/client safety (high-risk client)
- Natural disasters (Hurricane Season)

Opportunities

- To serve the community with helpful events
- To develop a reputation for providing quality mental health services
- Exploring other needed services in the area to include Psychosocial Rehab, Substance Abuse and Intensive In-Home Services
- Expanding to other parishes
- Obtain other funding sources
- Obtain CARF national accreditation

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 developed from these priorities, mission, and goals:

- Ensure the quality and effectiveness of services resulting in positive client outcomes.
- Ensure the future financial viability of services.
- Recruit and retain culturally competent and professional clinical staff.

ANALYSIS OF PERFORMANCE

Each year, the plan was reviewed. During implementation of the previous plan, the progress of each goal was discussed by the Management Team. An in-depth analysis of the agency identified new Strengths and Weaknesses of services. 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 new plan was developed and approved in 2014.

AGENCY GOALS

Improved client outcomes as indicated in treatment plans.

Provide satisfactory services to both internal and external stakeholders.

2015 Goals

Goal 1: Ensure the quality and effectiveness of services results in positive client outcomes.

Objective: Through the provision of services, 80% of clients will report experiencing a decrease in hospital admissions by 12/2015.

Objective 2: Through the provision of services, school suspensions will decrease from 40% to 25% by 12/2015.

Performance Indicators:

- > Decrease in symptomatic behavior
- > Increase in compliance with medications, if applicable
- > Number of hospitalizations
- > 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

Strategies

1. We will hire and retain qualified, capable, and caring professionals to provide the best service to our client. (Review staffing needs monthly; provide monthly supervision).
2. We will conduct consumer satisfaction surveys at least twice annually to assess how well we are providing services and adhering to our mission and values. (Summer/Fall; Winter/Spring).
3. We will conduct stakeholder satisfaction surveys twice annually to assess how well we are providing support to people referred for services. (Summer/Fall; Winter/Spring)
4. Clients will receive medication education at monthly doctor visits with psychiatrist.
5. We will review treatment plans and service logs to ensure goals are being implemented.

Expectation of the Persons Served

1. 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.
2. Clients will be informed of their rights annually.
3. 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

1. 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 to ensure competency.
6. An ongoing, professional development program will be developed and integrated for all staff.
7. Competency-based trainings will be conducted with direct support staff.

Competitive Environment

1. Given the dire need to receive referrals for program sustainability, we are committed to following our code of ethics. This code prevents any inappropriate recruitment of client and false marketing of the program. Referrals will need to be based on integrity, use a professional marketing tools, and program outreach.

Strategies

1. We will update the website no later than December 2015.
2. Meetings will be set up with community providers on an annual basis to review services we are endorsed to provide.
3. The CEO is responsible for all marketing activities. We will consider hiring an external marketing liaison to review all marketing plans and materials.
4. A marketing plan will be developed to strengthen the agency's position in the community.

Goal: Ensure the future financial viability of the agency.

Objective: Secure 1 additional funding source or additional program by 12/2015.

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

Strategies

1. The agency will actively market services with integrity through community outreach initiatives to include meetings with other providers and active participation in provider meetings. Necessary marketing materials will be updated no later than December 2014.
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 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.

Financial Opportunities

1. The capital of the agency is stable, but referrals are critical for continued program success. Additionally, the agency anticipates expenditures during the first five year to include: maintaining national accreditation, increased IT capacity and all overhead expenses.

Strategies

1. Annual budgets will be balanced.
2. Provided a census of 150 or more clients by December 2015.
3. The five-year financial projection will be updated each year.

Financial Threats

1. There are multiple financial threats to the agency. The two main threats include lack of referrals and client for program sustainability and potential rate cuts/changes in service definitions by the Louisiana Department of Health and Hospitals. As noted above, it is imperative that the agency maintain at least 150 actively enrolled client in services to support administrative personnel, as well as to pay basic expenses. Ideally the program,

by the end of the year will have between 150 enrolled clients. This would allow for development of capital/savings, as well as provide relative security to promote program expansion of other services.

2. Other financial threats include: loss of endorsement, paybacks due to failed regulatory audits, fraud committed by personnel, and misappropriation of funds by personnel.

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Organization's Capabilities

1. The agency has recruited quality personnel who meet the requirements for the provision of enhanced services. Staff has experience providing community-based services for adults. Additionally, staff has extensive experience providing case coordination for individuals with mental health disorders and has a good sense of existing community resources based on previous professional experiences. We carefully selected personnel in the development of the agency. Also, given the professional background of the owner, there is little room for miscommunication of the agency's purpose and mission in the delivery of quality mental health services.
2. There is an opportunity to work with seasoned consultants to assist with compliance to DHH/Magellan regulations.

Strategies

1. Plans are to continue expansion through recruitment of qualified clinical staff.
2. Contract with external consultants for guidance in our ongoing compliance to regulations, preparation and maintaining national accreditation, ensuring policies, plans, practices, and performance adhere to regulatory entity standards.
3. If the program can sustain 150 or more clients, the CEO can explore the addition of services and/or expansion to other parishes.

Service Need Areas

1. The agency is confident in its choice of services to open the agency for several reasons. First, the growing field for social workers allows the agency to provide the services without a waiting list. Also, the need for services in the Baton Rouge area based on Medicaid approval allows individuals with mental health diagnosis to receive quick access to services. Additionally, individuals served found ineligible for, or excluded from, services are transferred to other qualifying agencies.

2. The agency's commitment to provide quality services and recruit highly qualified personnel will be promoted in the community to stakeholders.
3. There will need to be close observation of safety issues and coordination of services, as well as sound on-call policies.
4. .

Strategies

1. Focus specifically on program development of all services we provide and preparation for re-accreditation. This includes close attention to quality services, maintaining a sound reputation in the community, and ensuring adequate preparation for CARF.
2. The agency will need to contract with external consultant for ongoing review for CARF preparation.
If the program can maintain 150 client by the end of the third or fourth quarter, the program can review possible expansion of services.

Demographics of the Service Area

1. Louisiana State 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.

Strategies

1. Plans are to recruit bi-lingual professionals to serve this population in the services areas we provide.
2. Ensure agency is culturally competent and materials are updated to meet the need of the changing demographics.

Relationships with External Stakeholders

1. One of the most critical relationships during the early stages of program development was the relationship with external agencies. We had a very successful endorsement process and believe we demonstrated our commitment to provide sound services.
2. As a new agency, it is important to participate in community events at local universities, hospitals, and other neighboring business.

Strategies

1. Continue our collaborative relationships with Magellan.
2. Establish collaborative relationships with Bayou Health liaisons.
3. Conduct outreach activities with universities and educational institutions to market the program and build collaborative relationships.
4. Invite speakers to staff meetings
5. Conduct and analyze stakeholder surveys

Regulatory Environment

Given the climate of mental health reform and abuse of Medicaid funds in the State during the last two years, mental health agencies are highly scrutinized. In addition to a grueling audit of the Magellan system, the State is conducting random post endorsement reviews, requiring reports of QA/QI activities, and requesting files for chart audits. Magellan has been the subject of two

scathing legislative audit reports for its failure to meet some contract requirements. Regulatory officials came under intense questioning by legislators that led to reduced services and budget problems at five state entities serving behavioral health clients. It is imperative that we continue to adherence to regulatory service definitions.

Strategies

1. The CEO will ensure standards are being met by meeting with the Management Team.
2. The CEO will provide written and/or verbal reports (upon request) to the regulatory entities.
3. Demonstrate adherence to policies and procedures, service definitions, accurate documentation of services, and State statues during contract transition period.

Legislative Environment

It is anticipated that the changes with the Magellan contract will take effect in December 2015. There may be rate changes in Medicaid funding and possible program cuts. However, the agency should prepare for possible rate cuts, increased admission criteria for programs, and possible requirement for face-to-face assessment of client to establish medical necessity.

Strategies

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 provider meetings to stay abreast of Magellan changes.
3. Stay current on the changes with Bayou Health liaisons.

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. We have found that requiring field staff to use laptop computers and/or tablets increases the amount of time they can spend in services and relieves the travel-time associated with having to come into the office to complete notes and reports. Also, the website provides some services to clients, such as setting appointments, providing feedback, understanding the services provided and the agency's goals/mission.

Strategies

1. Increase technology to allow clients maximum access to information and management services.
2. These would include, access to a CCD (continuity of care document), on-line learning, mobile response, electronic individual support plans, and comprehensive on-line access to support services.
3. Identify the resources needed to advance our use of technology to support operations, effective service delivery, and performance improvement

Information from the analysis of performance

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 the performance grid annually. To ensure consistency in maintaining the achievement of performance targets, the plan will be reviewed at least annually for relevance and update it as needed. Once the Bayou Health changes are finalized, the plan will be updated to maintain the relevance of the plan to current conditions. The CEO will acknowledge the review by signing a signature page.

The plan was shared with staff during our regular staff meetings. Stakeholders and clients received a flyer of the agency goals. A link will also be added to the agency's website by the end of 2015. Information considered confidential and critical to the agency's positioning will not be posted or shared.

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