

Overview of Strategic Plan 2023-2026

The strategic plan of Focus Behavioral Health Services, LLC is centered on the care and support of the client and is treatment and recovery oriented. The plan provides a framework for action and a basis for measuring outcomes. Objectives include benchmarks for accountability and evidence of progress. Improving communication by giving those served and other stakeholders' opportunities for input and response is a priority. The plan will be reviewed annually by all Directors responsible for facilitating change and will be updated a minimum of every two years as goals are achieved and new goals needed.

Purpose of the Plan

The organization's strategic plan is designed to identify the needs of the person served, needs of all stakeholders involved and to provide the framework for action and define the achievable goals for services in the years ahead. The plan outlines and details strategies which will be used to achieve objectives and evaluate results. Attention is given to the input of those served and other stakeholders. The views and observations obtained from stakeholders through surveys, suggestion boxes, interviews and other methods will be given top priority in planning and management decisions.

Strategic Objectives

To maintain programs founded on the principles of best practice and focused on the individuals served, their families, employees, and other stakeholders within the community. This plan outlines opportunities for improvement while maintaining efficiency and financial viability. The plan is developed in order to establish additional clinical best practice models and programs within the state and to achieve excellence in clinical integrity and outcomes.

Mission Statement

FOCUS Behavioral Health Services, LLC in close collaboration with families and communities, will provide effective prevention, treatment and support by empowering children and their families to achieve optimum health.

Core Values

- ← To assure continuous quality improvement
- ← To promote creativity, adaptability and challenges
- ← To constantly strive to build a strong, confident, ethical and healthy workforce
- ← To promote a sense of community and family within the work culture
- ← To utilize community partnerships and natural supports for all clients and families
- ← To empower and involve consumers and families served
- ← To promote healthy relationships through honesty, openness, respectfulness and fairness
- ← To exercise personal, programmatic and fiscal responsibility
- ← To promote awareness of cultural diversity

Clinical Philosophy

- ❖ To place consumers and family at the center of all we do and recognize the treatment of the individual is most effective when we include the family/support network
- ❖ To base services in the community, available in non-traditional sites, least restrictive and at convenient locations and times
- ❖ To be visible in the community and form partnerships, which promote the achievement of service delivery
- ❖ To promote the cross-training of staff in order to provide services across an array of age, disability and culturally diverse categories
- ❖ To insure services are delivered in an integrated manner that does not dwell on disability categories or cultural differences but on individual client and family needs and strengths
- ❖ To promote freedom of choice for clients and families
- ❖ To serve individuals who have the fewest available resources and the greatest need
- ❖ To utilize "best clinical practices" in the delivery of services
- ❖ To promote utilization of natural supports in the community.

2023-2026 SWOT ANALYSIS (Strengths, Weaknesses, Opportunities, Threats)

2023 Agency Strengths per biannual satisfaction survey reports

Employee

- Employees supervision and support is focused upon and guidance provided by leadership; this is evident by an 89.33% overall yearly satisfaction rate
- Employees are trained to complete their job responsibilities in a thorough manner; this is evident by an 90.7% overall yearly satisfaction rate. As well as the lack of on the job injuries that occurred. Three on the job injuries occurred during 2023, the company's goal was less than four injuries occurring. This goal was met with a 100% compliance rate via our key performance indicators report.

Stakeholders

- Focus staff maintain a positive and professional demeanor while collaborating with stakeholders; this is evident by an 100% overall yearly satisfaction rate
- Focus staff demonstrate knowledge of the consumer's mental health needs; this is evident by an 95.5% overall yearly satisfaction rate
- Focus staff appear well trained and suited for the job; this is evident by an 90.9% overall yearly satisfaction rate
- Focus staff respond to crisis in a timely manner; this is evident by an 97.23% overall yearly satisfaction rate
- Stakeholders feel that pertinent client issues are brought forward at Child and Family Team meetings and resolved; this is evident by an 100% overall yearly satisfaction rate
- Focus staff make sure that the client is a part of each CFT meeting; this is evident by an 97.23% overall yearly satisfaction rate
- Stakeholders believe that overall, Focus Behavioral Health Services have been effective; this is evident by an 100% overall yearly satisfaction rate
- Stakeholders stated they would recommend Focus Behavioral Health Services to others; this is evident by an 97.23% overall yearly satisfaction rate

Parents/Guardians across all services

- Focus BHS Residential Staff are accepting and responsive to my feedback about my child's treatment; this is evident by an 89.33% overall yearly satisfaction rate

- Focus BHS Residential Staff respond to phone calls in a timely manner; this is evident by an 93.33% overall yearly satisfaction rate
- Focus BHS Residential Staff maintain a positive and professional demeanor; this is evident by an 87% overall yearly satisfaction rate
- Focus BHS Residential staff are sensitive to my child's ethnic/cultural background; this is evident by an 93.33% overall yearly satisfaction rate
- Parents and or guardians would recommend Focus BHS Residential services to others; this is evident by an 93% overall yearly satisfaction rate

Clients across all services

- Clients feel that they have input into their Person Centered Plan (PCP)/ Treatment Plan and the goals that are created; this is evident by an 92% overall yearly satisfaction rate
- Clients feel that they get the individual attention that they need; this is evident by an 97.3% overall yearly satisfaction rate
- Clients feel that the facility they receive services in is nice and clean; this is evident by an 95.2% overall yearly satisfaction rate
- Clients feel that the treatment they are receiving is helping them make overall improvements; this is evident by an 91% overall yearly satisfaction rate

Managed Care Organization- Post Payment Review

-On October 9 through October 31,2023 the agency participated in a post payment review. POC was required but once it was completed and presented to Sandhills no deficiencies were cited. "Sandhills Center has determined that the deficiencies noted in the original Report of Findings have been minimized or eliminated."

General Strengths

- Monthly service specific Local Leadership Team's that analyze and address issues regularly.
- Employee Benefits – 401K, obtained new UnitedHealthCare Insurance with lower premiums and a richer healthcare plan, merit based raises and bonuses were given across the agency based on employee annual evaluations, RAA's (random acts of appreciation), added met life, Aflac.
- Culturally Diverse Workforce
- Accomplished Encryption and Firewall protection for continued confidentiality and HIPAA compliance through g-suite business

2023-2024 - Agency Weaknesses

- Staff turnover- During the 2023 year there were a total of 15 staff terminations and 35 staff resignations.
- Staff Satisfaction- The average Employee Satisfaction was 68.72 % in 2023. This average has decreased approximately 4.93% from the previous year, this could be due to the number of participating employees also decreasing. In 2022, an average of 55 employees, per survey term, participated in the satisfaction survey that was provided twice in 2022- whereas an average of 32 employees, per survey term, participated in the satisfaction survey that was provided twice in 2023.
- Cost of ongoing training and support to increase staff clinical knowledge – need more in-house trainers for EPBI, PCT, SOC, Drivers Safety, Cyber Security and Medication Administration. – During 2023 two in-house trainers were present for EPBI in 2024 Focus would like to increase this by 1-2 more staff to provide increased support to staff. It was noted during 2023 that cyber security and drivers safety training was not being provided per standards- this will be corrected in 2024. Person Centered Thinking and System of Care is typically provided by MCOS- there has been a lack of these trainings provided and when they are provided there is a lack of seat availability- in 2024 Focus would like to have a rostered in house trainer for these trainings. Medication administration has been provided per standards, focus would like to have 1-2 more contacts that are readily available to conduct these trainings for additional support and availability for staff.
- Lack of Rate increases to support services –2023 there were no rate increases provided - At the end of 2023 an announcement was made that the MCOs would be providing rate increases. 2024 rate increases appear as follows per service, per MCO above the standard medicaid rate:

Day Treatment

- Sandhills- 31.5%
- Alliance- 40.1%
- Trillium- 17.3%
- Vaya- 37.7%
- Partners- no rate increase advised yet

Residential Level 3-four beds or less

- Sandhills- 20.3% No change from previous year
- Alliance- 16.8%
- Trillium- 65.6% (specialized rates)
- Vaya- 16.8%
- Partners- no rate increase advised yet

Residential Level 3- five beds or more

- Sandhills- 20.2% No change from previous year
- Alliance- 14.6%
- Trillium- 99.5% (specialized rates)
- Vaya- 14.6%
- Partners- no rate increase advised yet

- Some facilities are still outdated and need cosmetic repairs to improve safety and our appearance in the community – During 2023 a safe space was completed in our Mull DTx elementary facility to ensure safety to clients in crisis. Also at this location designated offices were constructed for optimal privacy for the therapist and lead. During 2024, at the Burke DTx, the safe space needs to be revamped to ensure safety for clients.
- Constant change with State and Federal regulation
- Higher acuity level in clients we serve
- Lack of consistency across the agency with forms, policies, procedures, e-mails, etc. and to aid in more effective communication
- Becoming more strict on training and supervision requirements – stress importance of staff having mandatory trainings and/ or supervisions and not being allowed to continue working

2023-2026- Opportunities

- Due to the waiting list – there is a potential for growth within our day treatment facilities into neighboring counties where no day treatment services are currently being provided. Also, within Caldwell County, there has been a discussion with the education board to open a day treatment classroom within their high school.
- Teaching and raising community awareness pertaining to the treatment and rehabilitation of sexually reactive and offense-specific youth. Marketing our current services more in the community while at the same time providing information and insight.
- Need more education on financial opportunities in order to take advantage of other funding streams through the MCO's, grants, federal government – such as RFP's and Title 1 Funding through DPI and DJJ funding.
- Agency fortification –reducing staff turnover rates which, in hopes, will increase consumer success rates due to maintaining consistency throughout the programs.
- Cross training of all staff throughout all programming and in administration (i.e. Residential staff can work in Day Treatment, Receptionist can cover for Reimbursement staff, etc.)
- Continue to develop supervisory training for all leaders within each program area. Develop modules on all aspects of supervision duties to include:
 - ✓ Clinical Supervision Requirements
 - ✓ Begin a mandatory Supervisory Learning Forum a minimum of quarterly - topics to include:
 - What is it to be a new leader?
 - Leadership Essentials
 - Conflict Resolution
 - Setting Expectations for Employees
 - Communication
 - Coaching Staff to Improve
 - Working with Constant Change

2023-2024- External Threats/Challenges

- Constant changes in state and federal regulation makes the agency oftentimes reactive instead of proactive.
- Economic challenges relating to public funding both in County, State and Federal funding.
- More children and families in need and therefore needing more financial resources by agency, county, State and Federal funding.
- Constant monitoring by numerous entities - much duplication of efforts – takes a great deal of staff time and resources
- Medicaid Changes consistently occurring – NCTRACKS, MCO's, NCHC, Rules/regulations, Compliance in Tracking, etc.
- Residential authorizations – Pass-through which grants 120 access to residential facilities without requiring medical necessity.
- Lack of community awareness and teaching around adolescent/child mental health and/or sexually reactive or offense specific populations. The general community (neighborhoods, schools, legal systems, etc.) often seem very intolerant to this population and very reactive if children are placed inside their communities.
- Constant changes in technology create struggles for small organizations to keep up with LME's and other public entities that have the resources to continually upgrade their systems.
- MCO's recruit highly qualified staff. Private providers cannot compete with their benefits and wages; thus the qualifications in staff are not the same between agencies. -The turnover rate for management and floor staff has increased from 2022 due to wage differences or unmet performance needs.
- MCOs transitioning to Tailored Care Plans-LME-MCOs currently only manage behavioral health services. Once Tailored Plans launch, they will manage all Medicaid services for their members, including physical health services. In most cases, physical health providers must be in the Tailored Plan's network. If they are not, clients will likely have to change to a different physical health provider.
- MCOs continue to be absorbed by other MCOs, which affects client care and affects the continuity of care.

2023-2024– Fiscal Threats:

- Inability to complete therapeutic service notes, which does not allow for billing to the ESB
- Managers have ownership and control of a budget for their specific facility – learning the importance of staying within the confines of their individual budgets.
- Develop preventive maintenance schedules for buildings and vehicles – Streamline communication and resources for maintenance personnel functions.
- Obtain a new Administrative/Outpatient/IIH building for Burke County – current building is in a high crime area and is outdated.
- Replacement of equipment due to staff negligence or theft. Cost of updating equipment due to wear and tear/age of equipment. Cost of scanners and copiers that are utilized in every facility.
- Repairs needing to be completed at facilities due to higher acuity of care consumers.
- Staff turnover rates due to training overhead costs and extra wages to current staff in order to maintain ratios.

Goals for Focus Behavioral Health Services, LLC 2023-2026

1. Achieve 3 year CARF National Accreditation during next review period 2024
2. Outcomes reports shared a minimum of biannually with Leaders who in turn will share with their programs.
3. Video and audio enhancements in the already existing Residential Program camera systems
4. Get multiple therapists fully licensed and rostered in Trauma Focused CBT
5. Purchase a building in Morganton to house all outpatient, community services and administration
6. Market in another county for Day Treatment services – either Alexander or Catawba County
7. Ensure Peer Reviews/CLFs are occurring quarterly per standards
8. Reduce staff turnover rates and improve staff satisfaction
9. Managers have ownership and control of a budget for their specific facility
10. Build consistency across the agency with forms, policies, and procedures to aid in more effective communication

Quality Improvement Director

NC Clinical Director

Agency President

