



Strategic Plan 2022

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.

Mission Statement

The overall mission of Focus Behavioral Health Services, LLC is to provide appropriate prevention, treatment, and support for individuals and families impacted by mental health disorders, substance abuse and/or developmental disabilities, while working in collaboration with the community, empowering clients to experience personal satisfaction and to live with dignity in their own communities.

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.

STRATEGIC GOALS 2022

Goal #1	The agency will strive continuously to hire and retain qualified professional staff for all positions within the agency – for administrative and clinical integrity throughout the program.	
Target Objective #1 Develop recruitment opportunities to target highly qualified individuals	Target Objective #2 continuously review employee incentives for hiring and retention for the FOCUS BHS workforce	
Action Plan <ol style="list-style-type: none"> 1) Schedule 3 recruitment fairs annually – working with organizations that this is their primary function and objective (i.e. Goodwill, Employment Security Commission, Personnel Staffing Industry, etc.) 2) Advocate for higher Service Rates in order to pay higher qualified staff within Residential & Outpatient programming. 3) Update website personnel functions for recruitment opportunities 4) Have individual assigned to social media to keep regularly updated job postings, agency growth and development updates and community education for social posts on mental health information relevant to the era 5) Teach employee self-help/health and caring for self so as not to burn out in highly stressful services 6) Team Building 	Action Plan <ol style="list-style-type: none"> 1) Annually review employee benefits packages – vacation, sick, insurance, personal days, retirement, life insurance, reward systems, merit systems, etc. 2) Review pay scale and attempt to stay with fair market values of pay and equity to employees 3) Advocate for higher Service Rates in order to pay higher qualified staff within Residential & Outpatient programming – and to keep up with fair market value; 4) Mainstream trainings – research by employee survey if required trainings are: adequate, helpful, overdo, helping them grow as professionals. Also, survey employees for suggested topics. 5) Review Training budgets and develop based on employee responses to surveys 6) Develop a position for recruitment, marketing and public awareness of Focus BHS 	
Responsible Individuals <ol style="list-style-type: none"> 1) Human Resource Staff (1, 3, 5) 2) Program Leads (1, 3, 5, 6) 3) Quality Improvement Director (1, 3, 4) 4) Public Relations/Human Resource Position (?) 5) Program Director (2) 	Responsible Individuals <ol style="list-style-type: none"> 1) Human Resource Staff (1, 2, 2) Program Leads (1, 4) 3) Quality Improvement Director (4, 5, 6) 4) Training Coordinator (4, 5) 5) Program Director (3) 	
SWOT Analysis Strengths: Very ethical and outcomes oriented program for child mental health services, flexible work requirements, very relaxed environment, family oriented programs Weaknesses: Pay inequities compared to other MH agencies, rates for some services do not support the programs, lack of rate increases in 8+ years, only received rates when Covid 19 hit, applicant pool are not as qualified as needed, Opportunities: New types of services like Youth	SWOT Analysis Strengths: Many staff report FOCUS BHS having a very employee friendly and family like environment, benefits are competitive, Weaknesses: Rates too low for some services, Targeted trainings, volatile population serve leads to high burn out rate Opportunities: More emphasis on employee self care, agency research company based wellness program with incentives Threats: Turnover leads to unqualified staff and	

<p>Adults in Transition, Tele therapy opportunities for staff, Threats: Retention of staff due to populations we serve.</p>	<p>could lead to potentially dangerous situations in r/t the populations served – lack of experience of new staff could make situations volatile.</p>
<p>Resources Needed Dedicated Management and buy in from staff across all programs</p>	<p>Resources Needed Dedicated Management and buy in from staff across all programs</p>
<p>Evaluation or Metrics Staff retention for > 5 years – in 75% of the workforce Surveys that show employee satisfaction at 85%+ Revenue to support a position for PR Should agency hire a full-time HR Director that could also do PR?</p>	<p>Evaluation or Metrics 15% rate increases in residential, Surveys that show employee satisfaction at 85%+ r/t benefits and environment/morale</p>
<p>Scheduled Review June/July, December/January – after bi-annual satisfaction surveys HR will give quarterly report on turnover within the agency – to be shared at Business Management Team</p>	<p>Scheduled Review June/July, December/January – after bi-annual satisfaction surveys HR will give quarterly report on turnover within the agency – to be shared at Business Management Team</p>
<p>Goal #2</p>	<p>Update clinical materials and research best practice models – prove fidelity to the model – HAVE EXCEPTIONAL OUTCOMES AND PROOF THAT OUR CLIENTS ARE DOING WELL/BETTER</p>
<p>Target Objective #1 Continuously review program models</p>	<p>Target Objective #2 Review client incidents monthly per program and determine trends, high risk issues, reputation of program, employee interaction with clients</p>
<p>Action Plan</p> <ol style="list-style-type: none"> 1) Develop a curriculum committee within the agency/ per service – for review of clinical models and programming 2) Oversight by the Clinical Director and designees to update materials as needed annually 3) Develop monies devoted to update of clinical materials for all services (IIH, OP, DTX, Res Level III, Res Level II) 4) Input from Colleges, MCO's, Experts in the field 	<p>Action Plan</p> <ol style="list-style-type: none"> 1) review client incident reports monthly – ID Trends and problematic areas needing improvement 2) Hold staff responsible from Directors, Leads, Staf in ensuring programs are clinically ethical, safe and therapeutic vs. punitive 3) Collaborate with MCO's, contract with experts in the field if needed
<p>Responsible Individuals</p> <ol style="list-style-type: none"> 1) BMT, LLT, Clinical Director 2) Established Committees per program/service 	<p>Responsible Individuals</p> <ol style="list-style-type: none"> 1) QI/LLT/BMT Committees 2) QI Director or designee from QI Department 3) Individuals Lead QP's conducting PIP, disciplinary action
<p>SWOT Analysis Strengths: Very ethical and outcomes oriented program for child mental health services, Strengths based approach, strong CBT model</p>	<p>SWOT Analysis Strengths: Many staff report FOCUS BHS having a very employee friendly and family like environment, benefits are competitive,</p>

<p>Weaknesses: Model must be reviewed and updated with materials and more visual and experiential activities –keep materials updated</p> <p>Opportunities: New types of services like Youth Adults in Transition, Tele therapy opportunities for staff,</p> <p>Threats: Retention of staff due to populations we serve – results in loss of program knowledge and experience. Lack of knowledgeable mental health professionals experienced in program and model development. Lack of funding to support these functions.</p>	<p>Weaknesses: Rates too low for some services, Targeted trainings, volatile population serve leads to high burn out rate</p> <p>Opportunities: More emphasis on employee self care, agency research company based wellness program with incentives</p> <p>Threats: Turnover leads to unqualified staff and could lead to potentially dangerous situations in r/t the populations served – lack of experience of new staff could make situations volatile. Training is paramount for de-escalation</p>
<p>Resources Needed</p> <p>Dedicated Management and buy in from staff across all programs.</p> <p>Staff that are driven and motivated to better program outcomes</p> <p>Communication across all areas of the agency</p> <p>Training on new models</p>	<p>Resources Needed</p> <p>Dedicated Management and buy in from staff across all programs</p> <p>Staff cooperation and training</p> <p>Identifying staff early on that are not able to implement de-escalation and UNWILLING to adhere to agency expectations when dealing with client populations.</p>
<p>Evaluation or Metrics</p> <p>Client and Family Satisfaction at 95%</p> <p>Outcome scores at 90% Satisfaction – (J-SOAP, ACORN, UCLA, etc.)</p> <p>Continuous referrals from the MCO and community – monitor when there is a lull in referrals and if related to reputation</p> <p>Ensure – CCA and Admissions are accepting appropriate referrals that can benefit from the types of programs the agency offers</p>	<p>Evaluation or Metrics</p> <p>Decrease in restrictive interventions at least by 10% to 20% annually</p> <p>Absence of serious Level III incidents – that results in physical, psychological long term effects</p> <p>Absence of DHSR “cause” reviews</p> <p>Absence of MCO “cause” reviews</p>
<p>Scheduled Review</p> <p>During development – meet monthly – Model updated by July 2021</p> <p>Training – All training completed by October 31, 2021</p> <p>After implementation – Committee evaluates outcomes quarterly and then going to bi-annually.</p> <p>Program models updated by end of July - 2021</p>	<p>Scheduled Review</p> <p>Monthly and as serious incidents arise</p>
<p>Goal #3</p>	<p>Expand services: Program Implementation and Development of Young Adults in Transition, Development of additional Day Treatment programming in Burke and Watauga counties, Develop School Based Therapy Programs,</p>
<p>Target Objective #1</p> <p>Open New k-5 Day Treatment in Burke County</p> <p>Open Middle School Day Treatment in Watauga County</p>	<p>Target Objective #2</p> <p>Begin implementation of Youth Adults in Transition</p>

<p>Action Plan</p> <ol style="list-style-type: none"> 1) Begin conversations with the public school systems in Watauga and Burke County to assist them in identifying need for these DTX services in their schools. 2) Locate appropriate locations 3) Licensure 4) Identify qualified staff to run the programs 5) Program Implementation 	<p>Action Plan</p> <ol style="list-style-type: none"> 1) Recruit Staff to begin implementing and researching the service 2) Train staff on how the service is to be carried out according to statutes 3) Program Implementation 4) Evaluate Program effectiveness and financial viability after serving up to 6 consumers 5) Evaluate benefit of the service to consumers and present to payer entities
<p>Responsible Individuals</p> <ol style="list-style-type: none"> 1) Program Director and designees 2) Day Treatment Program Director 3) School Personnel in designated school systems 4) DHR 5) Establish a lead and they will recruit 	<p>Responsible Individuals</p> <ol style="list-style-type: none"> 1) Establish a lead and they will recruit their staff as the service further develops 2) Program Director to determine cost/revenue viability after the 1 year mark 3) QI Director and Billing
<p>SWOT Analysis</p> <p>Strengths: Very ethical and outcomes oriented program for child mental health services, Strengths based approach, strong CBT model</p> <p>Weaknesses: Model must be reviewed and updated with materials and more visual and experiential activities –keep materials updated</p> <p>Opportunities: New types of services like Youth Adults in Transition, Tele therapy opportunities for staff,</p> <p>Threats: Retention of staff due to populations we serve – results in loss of program knowledge and experience.</p>	<p>SWOT Analysis</p> <p>Strengths: Many staff report FOCUS BHS having a very employee friendly and family like environment, benefits are competitive,</p> <p>Weaknesses: Rates too low for some services, Targeted trainings, volatile population serve leads to high burn out rate</p> <p>Opportunities: More emphasis on employee self care, agency research company based wellness program with incentives</p> <p>Threats: Turnover leads to unqualified staff and could lead to potentially dangerous situations</p>
<p>Resources Needed</p> <p>Support from staff, school and MCO systems Staff that are driven and motivated to expanding services for FOCUS BHS Communication and effective teamwork across all areas of the agency</p>	<p>Resources Needed</p> <p>Dedicated and motivated staff to begin start up resourceful staff to learn and implement program Cooperation and guidance from the MCO Review other YAIT programs and get feedback and education from them.</p>
<p>Evaluation or Metrics</p> <p>Stakeholder Satisfaction regarding services provided 90% (school satisfaction, client satisfaction, parent satisfaction)</p> <p>Programs opening up within 12 weeks from start of licensure</p> <p>Outcomes are showing clinical improvement</p>	<p>Evaluation or Metrics</p> <p>Client Satisfaction at 95%</p> <p>job placement, housing, driver’s license, education</p> <p>Outcome scores at 90% Satisfaction– Life skills</p> <p>Continuous referrals from the MCO and community – monitor when there is a lull in referrals and if related to reputation</p>
<p>Scheduled Review</p> <p>During development – opened by July 2021</p> <p>Evaluate monthly</p>	<p>Scheduled Review</p> <p>During development – opened by July 2021</p> <p>Evaluate monthly</p>

Goal #4	Property Management – More professional location in Morganton NC – to house Outpatient, IAH and Administrative Services	
Target Objective #1 Purchase of Queen Street Property in Morganton or another comparable location	Target Objective #2 After securing property, determine renovation / update needs	
Action Plan <ol style="list-style-type: none"> 1) Meeting with landlords 2) Meeting with realtor to continue looking for alternate location 3) Saving monies for 20% down of approximately \$400,000 building – (\$80,000 down payment) 	Action Plan <ol style="list-style-type: none"> 1) Meeting with building inspectors 2) Development of renovation plans 3) Determine renovation budget – up to \$100,000 4) What can Focus Maintenance do vs. contractors 	
Responsible Individuals Program Director, Focus BHS President, Owner	Responsible Individuals Program Director, Focus BHS President, Owner, Focus BHS Maintenance personnel, Building Inspectors	
SWOT Analysis Strengths: Current building is safe and adequate Weaknesses: Current building is dated cosmetically, plumbing. Morganton OP is quickly running out of space/capacity for staff and programmatic growth. Confidentiality in the therapists’ offices. Opportunities: New location and increase morale with updated building. Building relationships with Burke County in new building. Threats: Stagnation in growth due to lack of space to house programs. Poor looks in the community might send the idea that Focus BHS does not care about our appearance in the neighborhood/community. Buildings looking like public Iscor’s	SWOT Analysis Strengths: Many staff report FOCUS BHS having a very employee friendly and family like environment, benefits are competitive, Weaknesses: Rates too low for some services, Targeted trainings, volatile population serve leads to high burn out rate Opportunities: More emphasis on employee self care, agency research company based wellness program with incentives Threats: Turnover leads to unqualified staff and could lead to potentially dangerous situations in r/t the populations served – lack of experience of new staff could make situations volatile. Training is paramount for de-escalation	
Resources Needed Commitment from Program Manager and FOCUS BHS President Realtor to assist in finding location Cooperation from current landlord	Resources Needed Commitment from Program Manager and FOCUS BHS President Realtor to assist in finding location Cooperation from current landlord Qualified staff to do renovations – by building codes and inspectors	
Evaluation or Metrics Purchase of building and having a plan for renovations	Evaluation or Metrics Purchase of building and having a plan for renovations	
Scheduled Review End of 2021 or no later than June 2022	Scheduled Review End of 2021 or no later than June 2022	

2021 SWOT ANALYSIS

(Strengths, Weaknesses, Opportunities, Threats)

2022 Agency Wide Strengths

- Staff flexibility and dedication around needed changes with State and Federal regulation and around agency needs in order to remain a viable company
- Professional, ethical and therapeutically trained and “minded” staff
- Personnel processes that screen all potential employees (fingerprinting, sex offender registry, Health Care Registry, criminal background, drivers license, infection control, drug testing)
- High standards of practice both in clinical and administrative work
- Strong Corporate Compliance and Quality Improvement oversight
- Health and Safety conscious program staff and facilities
- Structurally sound, clean community based facilities
- Facilities located in the community
- Partnerships with the public school systems to serve clients in day treatments and in public school – with safety of the child and the public in mind
- Opened level II facility in 2016
- Strong referral base for Burke and Caldwell counties
- Strong reputation in the community for helping Children/Adolescents with mental health and sexualized behaviors
- Progressive agency with vision of future growth and development.
- Working with Duke University collaborative for Trauma Focused Cognitive Behavioral Therapy (TFCBT)
- Community Partnerships with other public entities, MCO’s, DSS, DJJ
- Authorization processes mainstreamed with constant and thorough monitoring to decrease loss of potential revenues.
- Quality control of person centered plans for Intensive In-Home, Day Treatment, and Residential Services leading to more individualized plans that focus on strength based interventions, empower clients and their families to increase self-advocacy, ensure involvement of clients in creation of plans, and promote inclusion of all stakeholders involved with client.
- Quality Control of documentation for clinical and medical services across the agency and monthly paperwork audits to ensure compliance
- Dedicated Management across all programming and services
- CARF accredited through February 2024

2022 – Agency Wide Weaknesses

- Staff longevity –Average is 3.3 years
- Cost of ongoing training and support to increase staff clinical knowledge – need more in-house trainers for CBT, TF-CBT, EBPI, Mind Set, etc. Need survey from staff to determine their training desires.
- More marketing of program and clinical strengths
- Medicaid and Health Choice rates not keeping up with the cost of treatment -
- Effective communication among all enhanced services and all aspects of the agency.
- Higher acuity level in clients we serve
- Integrated Health Care Implementation – the unknown

2022 – Agency Wide External Opportunities

- Teaching and raising community awareness pertaining to the treatment and rehabilitation of sexually reactive and offense specific youth.
- Potential for Focus Behavioral Health Services, LLC to develop further services that will provide a fuller continuum of care such as Young Adults In Transition – getting a contract for these services with the local MCO’s. Hope to accomplish this in 2020.
- Need more education on financial opportunities in order to take advantage of other funding streams through the LME’s, grants, federal government – such as RFP’s and Title 1 Funding through DPI and DJJ funding.
- Marketing our current services more in the community – getting model recognized as a best practice model.

2022 – Agency Wide External Threats/Challenges

- Constant changes in state and federal regulation makes the agency often times 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.
- Development of a not for profit agency in order to get grant funding
- Constant monitoring by numerous entities - much duplication of efforts – takes a great deal of staff time and resources
- 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 times seem very intolerant to this population and very reactive if children are placed inside their communities.
- Community opinions and prejudices toward sexually reactive youth – the community forgets their victimization issues – they often were victims first before becoming perpetrators
- Private Providers do not have all the infrastructure and fiscal support the LME's and other public entities have
- Lack of equality when small agencies are providing the services and lack of adequate funding from DHHS. LME's receive all the funding.
- Funding Options and Integrated Care Billing – State is pushing for this model – however, current regulations and rules and state billing software does not support this model. State needs to make appropriate changes before mandating Integrated Care to the private providers.
- Many providers that market the provision of offense specific treatment while their model does not reflect the appropriate course of treatment or client supervision – this makes it difficult for providers that do specialize in this type of treatment.

CRITICAL ISSUES TO THE SUCCESS OF OUR AGENCY

2022 – Critical Personnel Issues:

- Continue to look at turnover rates – analyze with data from exit interviews and employee satisfaction surveys.
- Continue to build a culturally diverse workforce that is and sensitive to the needs of all populations served.
- During 2021 start a Cultural Diversity and Community Inclusion committee to promote and discuss
- More 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:

2022 – Critical Fiscal Issues:

- Develop and support a comprehensive ACCESS to care unit for all enhanced services
- Managers having ownership and control with a budget for their specific facility – learning the importance of staying within the confines of their individual budgets.
- Local input and management of budgets for cost finding and evidence of local fiscal responsibility
- Develop preventive maintenance schedule for buildings and vehicles – work on better communication and resources for maintenance personnel functions
- Obtain a new Administrative/Outpatient/IIH building for Burke County – current building is not spacious enough and is very outdated.

2022 - Critical IS issues:

- Further refine job duties of the IT staff
- Website – update and enhancements
- Social Media Advertisement for Focus BHS

2022 - Critical Purchases:

- Purchase a building in Morganton to house all outpatient, community services and administration

2022 Critical need for training of personnel to implement the following:

- Training for personnel relating to agency changes with policy and procedures and Quality Improvement incentives across the agency
- Training to raise staff awareness of state and federal requirements in operations of residential and day treatment programs

- Consistency in the program models and tools used between all the different sites in day treatment
- 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
- Training to all supervisors during 2021 on the core Supervisor requirements
- Set up basic computer skills class for all identified staff

2022 Critical Service Needs within the community served:

- Develop Young Adults in Transition for Adolescent populations – to include housing, jobs, finances, outpatient and medication management, healthcare, etc.
- Further develop program models to keep up with evidence based practices
- Continually Train new (all) clinicians on Trauma Focused Cognitive Behavioral Therapies
- Staffing high risk clients with medical and clinical directors in CLF
- More capacity to serve more consumers within Residential and Day Treatment to meet community needs
- No waiting lists
- Build stronger referral network for services that our agency does not provide – i.e. adult MH/DD/SA services and child DD services.



Completion date of February 18, 2021

NC Program Director

Quality Improvement Director

NC Clinical Director

Day Treatment Coordinator

Intensive In-Home Coordinator

Residential Services Coordinator

Outpatient Coordinator