

Community Care Solutions, Inc. under the direction of Executive Director Anice Butler, LCSW-BACS prepared the 2019 Plan. This document was presented and approved by the CCS Leadership on January 2, 2019, and the CCS Performance Improvement Committee on January 2, 2019. The CCS Client Rights Committee reviewed and approved January 2, 2019. The plan is reviewed at least annually and is updated as needed.

Note: Due to the COVID-19 Pandemic some of the goals and target dates have been revised.

Sources of Input and Information

In preparation for the creation of this strategic plan, CCS has been working with local stakeholders to identify:

- Unmet mental health needs
- Strengths and areas of improvement for CCS
- Opportunities for expansion
- Current and future threats that may impact CCS's ability to support individuals and families with mental health needs.
- Innovative and evidenced based approaches and models to providing and supporting mental health services.

Input and information came from a variety of sources:

- Mental Health Community Forum November 2018-2021
- Community Needs Assessment/Demographics 2018-2021
- Stakeholder Satisfaction Survey 2018-2021
- Strengths, Weaknesses, Opportunities & Threats Analyses 2018-2021
- Employee Satisfaction Survey 2018-2021
- Committees Reports 2018-2021

Description of Agency

Community Care Solutions. Inc. Behavioral Health Agency (CCS) is a community mental health center providing behavioral health services to families, adults and children who are diagnosed with a mental illness. Intervention, prevention, and recovery services may include Assessment, Therapy, Community Psychiatric Support, Psychosocial Rehabilitation, & Community Collaboration. CCS serves the residents of Orleans, Jefferson, St. Bernard, St. Tammany, Tangipahoa, and Washington parishes (Greater New Orleans area). Community Care Solutions. Inc. has provided essential behavioral services to the residents of the Greater New Orleans area since October 1,2013.

Mission-The mission of Community Care Solutions, Inc. is to participate and ensure the creation of healthier lives within a broad spectrum of communities while delivering quality behavioral health services in a safe environment that provides the support and skills needed to assist individuals to achieve their highest potential.

Vision-To be recognized as a behavioral health leader characterized by a commitment to promote and improve the mental health/well-being of our community.

Values-Celebrate Diversity- Respecting the rights, differences, and dignity of others. Recovery- Achieving a high quality, self-directed, satisfying life integrated in the community. Quality- Commitment to Excellence. Public Awareness- Dedicated to increasing the understanding of mental illness and eliminating stigma. Collaboration- Partnering with clients and stakeholders to create healthy communities. Technology- Embracing technology to improve efficiency and quality of care.

Philosophy-Community Care Solutions, Inc. (CCS) philosophical approach is that all individuals have the potential for growth. and change. Individuals can improve their health and wellness, live a self-directed life, and strive to reach their full potential.

CCS's Strategic Plan was created to provide the organization a guide to continuous improvement as we strive toward the completion of our mission and vision. We recognize that this accomplishment cannot be achieved with the completion of a single goal. Rather, the focus on taking advantage of strengths and opportunities while addressing weaknesses and threats in the following areas are needed to move towards the overall fulfillment of the mission and vision:

A. Expectations of persons served.

Based on consumer satisfaction data, our consumers and their families desire locally based, accessible, and small to medium sized agencies to provide evidenced-based treatment. CCS will meet these criteria and desire to maintain a 85%+ satisfaction rate. CCS offices are easily accessible by automobile or public transportation and is geographically and directly on the bus line.

B. Expectations of other stakeholders

Our stakeholders include Managed Care Organizations, schools, social service agencies and local clinicians. CCS stakeholders desire agencies having an array of services who are responsive to their regulatory requirements and provide measurable, quality, and cost-

effective services.

C. The competitive environment

When marketing our services to managed-care companies and preferred provider organizations, we offer and cover comprehensive needs. For example: group vs. individual treatment, family vs. individual treatment, after-hours accessibility, access on weekends, use and tracking of outcome measures, and customer satisfaction. In the age of health care reform and increased use of contracts with managed care organizations (MCOs), and other groups, the demand for behavior health care providers continues to decline. This phenomenon, being driven by behavioral health “carve outs,” has created a competitive clinical market, resulting in customer service being a critical factor. From this perspective, the customer identified as payor is managed care companies. They clearly drive the large percentage of referrals within the industry.

D. Financial Opportunities

CCS has sufficient cash flow and reserves to operate in 2022. A goal for this year will be to develop an additional line of credit to fund expansion, if needed. CCS must become considerably more sophisticated than our competitors to remain competitive. The likely future of agencies that are like CCS is that they will go out of business or be acquired in 2021-23, thus increasing CCS’s market share. In 2023, CCS will apply to provide 3rd party insurance services in network. If successfully implemented, this will increase the revenue and profitability of the agency significantly.

E. Financial Threats

Insurance companies denying payments if the agency expands to include private insurance payors. CCS must look contractual requirements on an ongoing basis. [Updated 3/1/21] In light of the COVID-19 pandemic, CCS must develop service lines that will be sustainable in the likelihood that the pandemic will continue. Our research indicates the most viable sustainable services will continue to be substance abuse focused. CCS will expand its current service line to Permanent Supportive Housing.

F. Organization’s Capabilities

CCS must ensure that we can provide enhanced support to the needs of the individuals we serve as well as other stakeholders through development/implementation of specialized plans.

Risk Management: CCS will implement/revise Risk Management functions on an annual or as needed basis with a goal to create an awareness of possible risks that could be potentially harmful to individuals, staff, families, guardians, and the organization. It is essential that the Risk Management functions be integrated with the Performance Improvement functions, which will be the primary responsibility of the Performance Improvement Committee.

Performance Improvement (PI): CCS will implement revise CCS. PI planning on an annual or as needed basis to ensure quality care and services to our individuals. Performance Improvement is a component of and is governed by the CCS. Performance Improvement Plan. The responsibility of the PI Committee is to ensure that services provided are of the highest quality and effectiveness and to provide a means for identifying problems and recommendations for their resolution with goals set forth in the PI Plan.

Emergency / Catastrophic Event: CCS will implement/revise CCS. Emergency/Catastrophic planning on an annual or as needed basis to protect the individuals we serve and staff from physical and psychological harm as immediately and effectively as possible, in the

event of natural or man-made emergency/disaster. It is the responsibility of the Director of Operations to ensure CCS's emergency readiness.

Cultural Competency: CCS will implement/revise Cultural Competency planning on an annual or as needed basis to ensure that Cultural Competence is an integral part of developing a system of care. It is the responsibility of the Director of Programming to monitor implementation of CCS's Cultural Competency Plan.

Accessibility: CCS will implement/revise accessibility planning on an annual or as needed basis so that all people should have access to services, programs, and activities in which they have an interest. It is the responsibility of the Safety Committee to monitor implementation of CCS's Accessibility Plan.

Employee Safety: CCS will implement/revise safety planning on an annual or as needed basis to communicate CCS's ongoing commitment to provide a safe working environment. It is the responsibility of the Safety Committee for the overall management and monitoring of the safe work practices and rules.

Health Insurance Portability and Accountability Act of 1996 (HIPAA): CCS implement HIPAA planning to ensure privacy of the individuals we serve. It is the responsibility of the Compliance Officer and the Operation Director to ensure HIPAA compliance.

Infection Control: CCS implement/monitor Infections Control planning to ensure best practice for prevention and control of infectious diseases. It is the responsibility of the Infection Control Committee to prevent the spread of communicable diseases and ensure a healthy and sanitary environment.

Exposure Control: We will CCS will implement/monitor Exposure Control planning to promote safe work practices to minimize the incidence of illness and injury experienced by employees. To assure effective implementation of our Exposure Control Plan four categories of responsibilities will be utilized: 1) Committee; 2) Department Heads; 3) Educational and Training; and 4) Employees.

G. **Social determinants of health**

We strive to offer services that best meet the needs of our surrounding community. It is prudent to recognize social detriments of health by considering the demographics of our service area to assess the conditions where people are born, grow, live, work, and age to identify community service gaps and to assess our ability to assist with bridging such gaps. CCS will conduct an annual service needs assessment with the intent to identify community service gaps for the population served and to determine if we can assist with bridging the gap. It is the responsibility of the Director of Programming to develop the service needs assessment.

H. **Demographics of the service area.**

It is important to know the demographics of the surrounding area to ensure CCS is equipped to meet any specialized needs associated with a particular demographic. CCS will conduct an annual demographics assessment comparing the population we serve with the service area target population to identify potential barriers from the provision of services as appropriate to meet the needs of the community. It is the responsibility of the Director of Human Resources to develop the demographics assessment and use the results in strategic planning.

I. **The organizations relationships with external stakeholders.**

The owner, officers, and directors are knowledgeable. The agency has contracted with an experienced consultant. Staff are satisfied with CCS and dedicated to our clients. One difficulty that CCS must overcome is getting paid by insurance companies. CCS must look

at developing expertise navigating contractual requirements on an ongoing basis. The organization's relationships with external stakeholders. Our stakeholders include state MCO and local clinicians. In general, the agency has excellent relationship with our referral sources and regulators.

J. The regulatory environment.

It is likely that in the next 2 years, the state of LA will reduce or eliminate service lines in LA. Considering this, CCS must develop service lines that will be sustainable in the likelihood that the pandemic will continue. Our research indicates the most viable sustainable services will continue to be substance abuse focused. CCS will expand its current service line to include substance abuse, Permanent Supportive Housing, and expand to other states.

K. The legislative environment.

[Updated 3/1/2021] It is likely Congress will take some action about the Affordable Care Act that may affect CCS. CCS must be abreast of congressional developments in this arena.

L. The use of technology to support efficient/effective operations and performance improvement.

CCS must place an emphasis on developing its Information Technology in 2021. Specifically, the agency should focus on the following:

- Technology acquisition – The agency will update a user-friendly website, purchase SEO management, and invest in tele-med equipment and software.
- Technology maintenance – The agency will have sufficient knowledge and resources to maintain existing technology.
- Technology replacement – The agency will replace 2 desktop computers with new models.
- Develop HIPAA compliant company intranet including online training for staff.

M. Information from the analysis of performance.

CCS will utilize information from its annual performance analysis to drive overall strategic planning.

Environmental Scan/ SWOT Analysis (*strengths, weaknesses, opportunities, and threat*)

<p><u><i>Strengths</i></u></p> <ul style="list-style-type: none"> • Committed and experienced management team, clinical, administrative, and supervisory staff. • Strong financial position • Program services are client and family driven. • Excellent reputation within the communities we serve and with stakeholders. • Excellent training and on-boarding programs for new staff. • Services provided as needed, 24/7. • CARF Accredited in Louisiana since 2015. • CCS has expanded its services to include addiction within the last four years. • Above average starting salaries for entry-level human service workers in comparison to other human service providers. 	<p><u><i>Weaknesses/Challenges</i></u></p> <ul style="list-style-type: none"> • Increasingly difficult to hire direct care employees. • Number of executive management staff positions filled. • Additional markets/opportunities may have to be explored for Agency expansion or to replace some existing programs that are not well funded. • Only funder is Medicaid.
<p><u><i>Opportunities/Growth</i></u></p> <ul style="list-style-type: none"> • Continue CARF Accreditation in Louisiana to maintain quality services and a high level of professional standards. • Achieve CARF Accreditation in all programs in compliance with Louisiana Department of Health regulations. • Improve use of technology to improve client care and increase efficiency by expanding clinic's medical records system in non-clinic program models. • With succession plans, there is an expectation that new executive leadership will bring new ideas, new energy, and new opportunities for CCS to pursue soon. • CCS will seek opportunities to expand non-residential, community-based services. • Explore restructuring job descriptions and staff responsibilities for increased efficiency. 	<p><u><i>Threats</i></u></p> <ul style="list-style-type: none"> • Reduction in state funding for behavioral health services. • Continued difficulty recruiting and retaining direct care staff in this full employment economy. • Inability to attract and retain direct care staff. • Larger agencies with more internal diversified capabilities and service model alternatives.

Priority	Goal	Measure
High	<p align="center">FINANCE</p> <p>Priority # 1 To demonstrate fiscal responsibility and accountability to advance our mission.</p>	<ul style="list-style-type: none"> • Agency will end fiscal year with a positive fund balance. • Amount of additional income from RFP's, grants, and partnerships. • No more than 2 repeat findings per audit (inventory and self-audit). • Implement ways to establish. • Branding possibilities, monitor legislative environment, gaps in the market, new products, and services to develop, market trends, etc. • Agency service production goal is 85 per year. • Individual productivity goal is 85%.
High	<p align="center">WORKFORCE</p> <p>Priority # 2 To recruit, develop, and retain a competent, professional, culturally diverse, motivated, and productive workforce.</p>	<ul style="list-style-type: none"> • Annual workforce analysis • Percentage of staff with clinical licensure and/or additional certifications. • Retention rate equal to or exceed 75%. • Employee Satisfaction will equal or exceed 70% in FY19 and increase by 5% thereafter until it reaches a max of 85%. • Total # of trainings offered annually. • Key positions always filled
High	<p align="center">GROWTH</p> <p>Priority #3 To pursue new and better ways to serve clients and other stakeholders.</p>	<ul style="list-style-type: none"> • Technology kept current and meets the needs of personnel, clients served, and other stakeholders. • Annual Needs Assessment • Monthly Management to analyze data drive overall strategic planning., • Ongoing training and education for clients, personnel, and community members/stakeholders. • Collaborate with external programs to offer clients service integration. • Client and Stakeholder Satisfaction will equal or exceed 70% in FY19 and increase by 5% thereafter until it reaches a max of 85%.
High	<p align="center">QUALITY</p> <p>Priority # 4 To provide safe, effective, and evidenced based mental health and substance abuse care that can be defined and means.</p>	<ul style="list-style-type: none"> • CARF accreditation will be awarded for all programs offered for 3 three years. • Overall agency audit score by MCO's will equal to or be greater than 90%.