



COUNSELING ASSOCIATES

FY 2019
July 1, 2018 – June 30, 2019

The Annual Strategic Plan is developed by the Counseling Associates Executive Team and is ultimately approved by the Board of Directors based on survey input from employees, clients, and key stakeholders. Progress towards meeting the established goals and objectives in the priority areas is assessed on a quarterly basis with modifications to the plan as needed.

PRIORITY 1: CLINICAL SERVICES

GOALS & OBJECTIVES	
I.	Expand Open Access System of Care
A.	Monitor wait time to meet OBHS/PASSE requirements for initial assessment.
B.	Monitor follow-up appointment availability within 5 business days of assessment.
C.	Monitor 2 hour response time & declinations for emergency screening requests.
D.	Implement Just-In-Time scheduling protocol with psychiatrists and APRNs.
II.	Expand Substance Abuse Services
A.	Develop and implement protocols and processes for accessing substance abuse services.
B.	Develop and implement substance abuse services as needed across entire service area.
III.	Explore Development of New Services
A.	Enhanced collaboration with Care Coordinators and integration with selected Primary Care Providers.
B.	Develop Peer Support Services for Youth & Adults in both Mental Health & Substance Abuse.
C.	Explore development of Therapeutic Communities (TC) for Adults.

D.	Explore development of Supported Housing & Supported Employment for Adults.
E.	Explore transition to Community Reintegration at Haven.

PRIORITY 2: FINANCE/INFRASTRUCTURE

GOALS & OBJECTIVES	
IV.	Meet/Exceed Approved FY 19 Organizational Budget
A.	Monitor monthly financial statements to maximize revenues, minimize expenses, & improve net margin.
B.	Monitor bi-annual unit cost reports to improve financial performance by position, service, and program.
V.	Upgrade Facilities Based on FY 19 Capital Plan
A.	Complete the remodel of the Clarksville clinic by the end of the 1 st Qtr.
B.	Complete the remodel of the new Morrilton building by the end of the 2 nd Qtr.
C.	Relocate the Conway CSP/Pathways program and sell the Donaghey building by the end of the 3 rd Qtr.
D.	Complete the construction of the new Haven building by the end of the 4 th Qtr.
VI.	Enhance Technology Solutions to Promote Efficiency
A.	Implement use of the Life 360 app to promote staff safety while in the community.
B.	Explore the potential use of the updated treatment plan available through Credible.
C.	Meet the established criteria for Stage 2 of Meaningful Use.
D.	Implement telehealth at selected locations for daytime clinics and after-hours emergency screenings.

PRIORITY 3: QUALITY/COMPLIANCE/ACCREDITATION

GOALS & OBJECTIVES

VII.	Monitor/Meet All Clinical & Business Standards
A.	Related to Outpatient Behavioral Health (OBH).
B.	Related to PASSE (Provider-led Arkansas Shared Savings Entity) implementation.
VIII.	Achieve 3 Year CARF Accreditation in All Areas
A.	Prepare during 1 st and 2 nd Quarters.
B.	Host a successful site visit by the end of the 3rd Quarter.

**PRIORITY 4: WORKFORCE DEVELOPMENT
/SATISFACTION/RETENTION**

GOALS & OBJECTIVES

IX.	Enhance Staff Development Activities
A.	Provide trainings in evidence-based approaches for clinicians and customer service for all staff.
B.	Develop and implement curriculum to strengthen the technical and people skills of supervisors.
X.	Enhance Communication Across Organization
A.	Establish quarterly supervisors meetings to promote cascading info to frontline employees.
B.	Establish regular presence of CEO/Exec Team designees at staff meetings across the agency.

PRIORITY 5: COMMUNITY RELATIONS/MARKETING

GOALS & OBJECTIVES

XI.	Complete the Public Transition to the New Logo
A.	Develop and introduce building signage at all locations that is consistent with new logo.
B.	Completely eliminate use of old logo both internally and externally.

XII.	Enhance the CA Brand in the Community
A.	Develop and distribute new strategically targeted outreach materials as needed.
B.	Develop and introduce redesign of organizational website.