

Johnston Counseling Services 2012-2015 Strategic Plan

Date: January 1, 2012 Updated January 3, 2013

Purpose of Plan: To provide focus regarding the organization's capacity to reach its goals.

Introduction:

Johnston Counseling Services, Inc. (the Agency) is a community based organization dedicated to filling gaps in services to North Carolinian's with substance abuse and dependence. Johnston Counseling Services has been serving people in North Carolina since 1997.

Our intent is to engage in a strategic planning process every 3 years in which a variety of input and information is analyzed. This information comes from consumers of our services, referral sources, community groups, funders, and also aggregate demographic data. The process also includes an analysis of the organization's strengths, and weaknesses and emerging opportunities and potential threats. Out of this process a strategic plan is formulated and the "critical issues" for the agency are developed and measurable goals are developed to address them. We also welcome your ideas and input as to improvements in services that we currently provide and new services that you think we should develop! Please email your suggestions to our CEO: Anthony (Tony) Woodall at tonywoodall@earthlink.net.

Key Strategic Points:

Johnson Counseling Services will:

1. Develop a comprehensive strategy to improve name recognition, branding and community support for its mission and vision.
2. Increase services to the area's citizens with substance abuse and dependence through intervention and treatment services.
3. Develop prevention services to increase the synergy and points of contact between prevention and treatment, particularly in respect to services adults and families.
4. Continue to upgrade the existing technology (hardware and software) utilized to provide direct and indirect services, including data management and clinical services.
5. Fully implement electronic medical records system
6. Aggressively address our financial stability relative to reducing overhead, being more focused on niche areas and expansion of service delivery.
7. Gain the ability to bill Medicaid for Substance Abuse Intensive Outpatient Program (SAIOP)
8. Become nationally accredited to provide SAIOP.

Our Mission

To provide culturally competent, professionally sound clinical practices, youth development and family preservation support services to empower our community one child and one family at a time.

Vision and Guiding Principles

The following vision and guiding principles were developed in the fall of 2011 by a representative group of public and private stakeholders, convened by the organization. We envision adults with substance abuse needs as an integral part of our community with access to a coordinated system of support and treatment that promotes mental wellness and recovery.

Vision Statement

Using cultural competence, professional skills, and unconditional care, Johnson Counseling Services will strive to enhance our community by empowering the people within it.

Employee Vision Statement

We inspire integrity, pride, trust and respect within our organization. We encourage employee involvement and creativity as a source of new ideas to continuously improve services. As stewards of community resources, we embrace the opportunities and challenges of being change agents in the lives of those we serve.

GUIDING PRINCIPLES

We commit ourselves to these Guiding Principles:

1. **Principle of Excellence:** we shall always strive to excel in our compliance with rules, regulations, and expected outcomes
2. **Principle of Professionalism:** we shall be professional in our interactions, in our appearance, and in our work ethic
3. **Principle of Beneficial Reciprocity:** we shall keep in mind the direct relationship between individual productivity and organizational productivity
4. **Principle of Order:** we shall always respect our policies, our leaders/supervisors, and each other
5. **Principle of Unrelenting Faith:** we shall not allow trials and tribulations to undermine the power of our beliefs
6. **Principle of Focus:** we shall always remember why we are here, who we serve, and what we are expected to accomplish
7. **Principle of Effectiveness:** we shall strive to deliver meaningful and measurable benefits to our persons served
8. **Principle of Awareness:** we shall treat our persons served in the manner that our doctors treat us
9. **Principle of Clinical Protocol:** we shall keep in mind the clinical nature of our work and perform at or above industry standards

Services

Johnson Counseling Services provides an array of quality substance abuse services to individuals and their families. The service population includes people of all age ranges. Specifically, services include assessment, DWI programs, and counseling. A large percentage the people we serve have a dual diagnosis of substance abuse and mental illness.

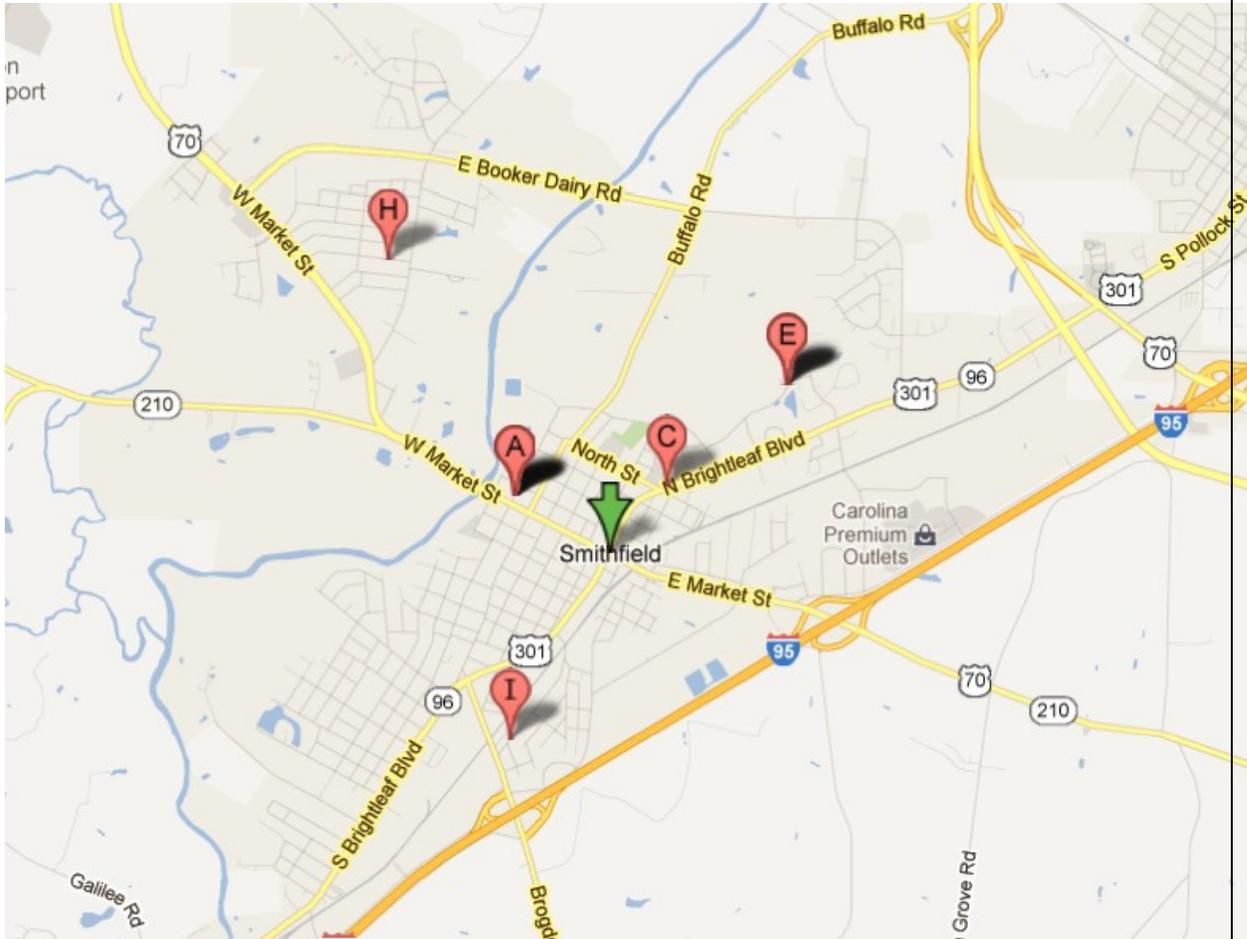
Expectations of persons served.

Based on consumer satisfaction data, our consumers and their families desire locally based, accessible, small to medium sized agencies that provide evidenced based treatment. Johnson Counseling Services meets these criteria and has a 90%+ satisfaction rate. Johnson Counseling Services is located in Smithfield North Carolina. The location is excellent because the Agency is easily accessible by automobile or public transportation. Adequate parking is an issue but has not impeded people getting services.

Expectations of other stakeholders. Our stakeholders include the Department of Social Services, the Local Management Entity (Mental Health Authority), the court system and local clinicians. Stakeholder desire agencies that have an array of services are responsive to their regulatory requirements and provide measurable, quality, cost effective services.

Johnson Counseling Services meets these criteria and has a 90%+ satisfaction rate with our stakeholders.

The competitive environment. Johnson Counseling Services primary competitors are other substance abuse agencies within 30 miles of Smithfield. An analysis of local competitors shows that while there are 5 competitive agencies in Smithfield the majority of them are single therapists that do not provide an array of services. The other competitors in the area are small SAIOPs run by CABHAs simply to have token array of services. This gives Johnson Counseling Services a highly competitive edge in the market place.



Retrieved from https://maps.google.com/maps?oe=utf-8&client=firefox-a&q=smithfield+nc&ie=UTF-8&ei=jEscUcebOoa09gSjpIGgDA&ved=0CAsQ_AUoAg
12/11/11

When marketing our services to managed-care companies and preferred provider organizations, we take into consideration their 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 this age of health care reform and increased use of contracts with health maintenance organizations (HMOs), preferred provider organizations (PPOs), 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 particular perspective, the customer identified as payor is: self-payor, medicaid, and managed care companies. They clearly drive the large percentage of referrals within the industry.

The Agency has four primary customers, each with their own specific needs. These include:

1. Referral Source	Customer Needs
Physicians	Professionalism
Hospitals	Consultation
Courts	Correspondence
Agencies	
2. Individuals and Families	
Individuals	Accessibility
Couples	Respect
Families	Compassion
Groups	Empathy
3. Managed Care Companies and Other Mayors	
MCO's	Clear communication
Self-pay	Cost-effective care
Agencies	Easy access for clients
PPOs	Shared treatment philosophy
Indemnity Program	Responsiveness and cooperation
4. Vendors	
Billing/Collectable	Cooperative working relationship
Legal	Timely payment facility owner
Human Resource	Respect
Insurance	

Financial Opportunities

Johnson Counseling Services has sufficient cash flow and reserves to operate in 2012. A goal for this year will be to develop a line of credit to fund expansion, if needed. As the state mental health system moves towards a managed care environment the local LME/MCO's will demand more and more sophistication particularly around quality management and clinical performance analysis. Johnson Counseling Services is considerably more sophisticated than our competitors. The likely future of agencies that like the capacity of Johnson Counseling Services is that they will go out of business thus increasing Johnson Counseling Services' market share.

Financial Threats

Public Consulting Group, Program Integrity, and other governmental auditing functions have identified NC as "low hanging fruit" in the Medicaid Over Payments auditing. Johnston Counseling Services must have a clear, aggressive corporate compliance program in place to meet this threat. The US Supreme Court ruled in June 2012 that while the "mandated insurance coverage" is legal as a tax it also stated that CMS could not take away funding from states that did not wish to join the Medicaid expansion. NC was one of the states that filed suit. It is possible that NC will not join the expansion and while the state will not lose Medicaid dollars it will not get any more including cost of living increases. The net sum of this would be a 3-5% erosion of Medicaid dollars due to inflations per year. Johnson Counseling Services must close watch these dynamics.

The organizations capacities

Johnson Counseling Services has excellent senior management. The owner and Program Director are knowledgeable. The agency has contracted with an experienced consultant. Staff are satisfied with Johnson Counseling Services and dedicated to clients. One difficulty that Johnson Counseling Services has to overcome is recruiting and hiring licensed staff in a rural. Johnson Counseling Services must look at recruiting and retention strategies.

Service Area Needs and Demographics of the service area.

Johnson Counseling Services primary clientele are non-Hispanic whites with substance abuse. The US Census data shows the following demographics for Smithfield.

People QuickFacts	Smithfield	North Carolina
i Population, 2011 estimate	11,194	9,651,103
i Population, 2010 (April 1) estimates base	10,966	9,535,471
i Population, percent change, April 1, 2010 to July 1, 2011	2.1%	1.2%
i Population, 2010	10,966	9,535,483
i Persons under 5 years, percent, 2010	7.2%	6.6%
i Persons under 18 years, percent, 2010	22.5%	23.9%
i Persons 65 years and over, percent, 2010	20.8%	12.9%

Female persons, percent, 2010	53.7%	51.3%
White persons, percent, 2010 (a)	56.9%	68.5%
Black persons, percent, 2010 (a)	27.2%	21.5%
American Indian and Alaska Native persons, percent, 2010 (a)	0.5%	1.3%
Asian persons, percent, 2010 (a)	0.8%	2.2%
Native Hawaiian and Other Pacific Islander, percent, 2010 (a)	0.1%	0.1%
Persons reporting two or more races, percent, 2010	1.9%	2.2%
Persons of Hispanic or Latino origin, percent, 2010 (b)	19.3%	8.4%
White persons not Hispanic, percent, 2010	51.6%	65.3%
Living in same house 1 year & over, percent, 2007-2011	86.9%	83.9%
Foreign born persons, percent, 2007-2011	8.9%	7.4%
Language other than English spoken at home, percent age 5+, 2007-2011	15.2%	10.6%
High school graduate or higher, percent of persons age 25+, 2007-2011	77.8%	84.1%
Bachelor's degree or higher, percent of persons age 25+, 2007-2011	20.9%	26.5%
Veterans, 2007-2011	753	743,377
Mean travel time to work (minutes), workers age 16+, 2007-2011	20.9	23.4
Housing units, 2010	4,834	4,327,528
Homeownership rate, 2007-2011	58.5%	67.8%
Housing units in multi-unit structures, percent, 2007-2011	20.6%	17.0%
Median value of owner-occupied housing units, 2007-2011	\$128,700	\$152,700
Households, 2007-2011	4,479	3,664,119
Persons per household, 2007-2011	2.31	2.50
Per capita money income in the past 12 months (2011 dollars), 2007-2011	\$20,963	\$25,256
Median household income, 2007-2011	\$34,781	\$46,291
Persons below poverty level, percent, 2007-2011	22.9%	16.1%

❶ Total number of firms, 2007	1,397	798,791
❷ Black-owned firms, percent, 2007	6.8%	10.5%
❸ American Indian- and Alaska Native-owned firms, percent, 2007	F	1.0%
❹ Asian-owned firms, percent, 2007	S	2.5%
❺ Native Hawaiian and Other Pacific Islander-owned firms, percent, 2007	F	0.1%
❻ Hispanic-owned firms, percent, 2007	S	2.7%
❼ Women-owned firms, percent, 2007	21.7%	28.2%
❶ Manufacturers shipments, 2007 (\$1000)	D	205,867,299
❷ Merchant wholesaler sales, 2007 (\$1000)	115,607	88,795,885
❸ Retail sales, 2007 (\$1000)	672,474	114,578,173
❹ Retail sales per capita, 2007	\$53,648	\$12,641
❺ Accommodation and food services sales, 2007 (\$1000)	55,984	16,126,939

Geography QuickFacts

	Smithfield	North Carolina
❶ Land area in square miles, 2010	12.12	48,617.91
❷ Persons per square mile, 2010	904.7	196.1
❸ FIPS Code	62520	37

The US Census data retrieved on 12/11/11

<http://quickfacts.census.gov/qfd/states/37/37085.html>

Analysis of Census data

Residents of Johnston Co. continue to be relatively poor and exhibit the need for mental health services because of generational poverty, high fatherlessness, and breakdown of the family structure. Johnson Counseling Services has launched an aggressive effort to reach and address the critical needs of this population.

Demographic Breakdown of Consumers and Families Served by Johnson Counseling Services include the following:

The typical consumer of Johnson Counseling Services is a 35-55 non-Hispanic white from a low to lower middle class family. Men and women are equally represented.

Johnson Counseling Services array of service match the demographic needs of its community.

The organization's relationships with external stakeholders.

Our stakeholders include the Department of Social Services, the Local Management Entity (Mental Health Authority), the courts and local clinicians. Johnson Counseling Services meets these criteria and has a 90%+ satisfaction rate with our stakeholders.

The regulatory environment.

In 2012 20 LME's are changing into 8 MCO or managed care organizations. The merger and change of roles for LME's will be chaotic. The likely result will be increased demands for reporting, compliance and increased monitoring. CMS and the state will like promulgate rule to meet Affordable Care Act demands. Johnson Counseling Services will need to close watch these dynamics.

The legislative environment.

The NC Legislature is dominated by the Republican party. One of its main planks is cost containment. This coupled with the recent US Supreme Court decisions about Affordable and the state like reaction may cause a decrease in state and federal dollars. Johnson Counseling Services needs to carefully watch this dynamic.

The use of technology to support efficient and effective operations.

Johnson Counseling Services is well postured in this area. Johnson Counseling Services has an electronic medical record that meets Stage 1 Meaningful Use criteria and will continue to upgrade its EHR capacity to meet Stage 2 requirements in the near future.

SWOT Analysis

Purpose: Organizations establish a foundation for success through strategic planning focused on taking advantage of strengths, weaknesses, opportunities, and threats.

The agency has identified the following during its SWOT exercise:

<u>Strengths</u>	<u>Weaknesses</u>
Client Focused	Managing Care
Resilient	Fear of Reform
Location	Leadership responsibility
Philosophical Framework	Unity of Leadership
Full service Agency	Growing Pains
Care for Staff	Recruiting qualified clinicians
Full Continuum	
Promotes Personal Growth	
Community Involvement	
Outcome managed	
Consulting physician in addictions	
EHR	

<p>Other Threats LME State of NC Community Perception Succession Plan for Key Persons Competition</p>	<p><u>Opportunities</u> <u>Other Agencies going out of business</u></p>
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Strategic Plan for 2012 – 2015

Six strategic issues are addressed in this plan. Each is essential to achieving the vision noted above, and to addressing the recommendations. The strategic issues are:

1. Clarify whom the system will serve, what services will be provided, and who will pay for what.

Johnson Counseling Services will closely monitor the regulatory and legislative environments at the state and federal level and should provide a basic set of substance abuse and safety net services to all County residents regardless of ability to pay or access to insurance. These include:

- Assessment services.
- Entitlement support to ensure that all residents have maximum access to funding.
- Criminal justice diversion programs (as appropriate).
- Correction System mental health programs.
- Education, information and referral (based on appropriate screening).

The goal of all interventions is to maximize the prospects of health, well-being and successful inclusion in society. As such, the primary focus of our services will be on:

- Promoting wellness.
- Prevention of substance abuse problems.
- Promoting individual, family and community safety.
- Stabilizing and treating mental health disorders.
- Fostering the process of recovery.
- Facilitating access to support services that will foster independence and successful Integration/transition into the community.
- Helping to reduce stigma and other barriers to care.

2. Streamline the functioning of the system so that access and quality are improved.

We will ensure the following central processes are in place. They are as follows .

- Well-understood and easy to use access points to the system.
- Effective and standardized screening of referrals.
- Effective assessment of those who need substance abuse and related support services.
- Effective care management to facilitate access and to integrate needed treatment and support services.
- Delivery of prevention, early intervention, treatment and support services based upon evidence based practices.
- Processes that promote a process of recovery, minimize the intensity of need for treatment and support services, and foster inclusion and (re)integration/transition into the community.
- Data collection and data sharing to support the delivery of effective care, to assess outcomes and to help to plan, monitor and manage the system.
- Effective inclusion of the consumer and (as appropriate) family in the design, implementation and evaluation of their care and of the system.
- Implement an agency training program on evidenced based practices.

3. Alter the management structure of the system to ensure accountability and consumer focus.

- Develop and aggressively implement a corporate compliance plan.
- Contact with external compliance firm to conduct routine self-audits.

4. Improve data collection and sharing to facilitate coordination of care and management of the system.

- Continue to upgrade the EHR to meet meaning full requirements to a access to accurate, complete and timely data is essential to make the system reliable, manageable and integrated for consumers.
- Automated tools are the most cost-effective means of addressing the need for data collection and sharing.

5. Increase the system's capacity to serve – expand the number, range and quality of services available.

- Encouraging existing staff to expand their capacity to serve.
- Attracting additional staff thru recruiting and retention efforts.
- Working to reduce barriers to a provider's success such a high administrative costs and burdens.
- Identifying additional available revenue streams or opportunities to combine revenue streams to make expansion economically viable.

➤ Allocate existing capacity based upon:

- Acuity of need.
- Need/ability to transition from other systems (e.g. jail diversion programs, release from hospitals, etc.).
- Length of time on a waiting list.

- Provide stabilization services to the individual until appropriate treatment and services resources become available.

6. Services

- Substance Abuse Services with a focused on addressing the needs of the community.
- Services for the court system
- Services for Military Personnel and Their Families
- Gender Specific Services
- Greater emphasis on training, development and retention of staff
- Anti-Stigma/Wellness Campaign through aggressive education of the consumer
- Increased Consumer Role in Local Collaborative Planning
- Services to Hard to Reach Population.

Managing our Growth

Problem	Action Taken	Persons Responsible
Lack of Vision for The New Direction Of Medicaid	Leadership and clinical staff will be trained and understand our clinical service delivery process	CEO and Consultant
Out dated billing Processes	Update all billing processes and ensure that they are compatible with electronic medical records	CEO
Lack of Employer Health Benefits	Will offer health benefits to its employees in order to remain competitive with similar markets.	CEO
Constant changes/Never Perfected Processes/	It was critically important for us to identify the threats to the organization, and to identify what works for us.	CEO
Dependent upon People versus systems	Staff will be steered away from the many processes that were in place. It was important for us to address the effectiveness of systems and the need for technology	CEO
Clinical Services Budgetary Goals Not evaluated	Staff will become outcome driven. We want to assure that we are working towards a goal	CEO

Specific strategic initiatives to to continuously develop, strengthen, and improve services offered by Johnson Counseling Services

For 2012

- Goal : The Agency will become endorsed and be accepted in the MCO network to provide SAIOP services.
 - Responsible Party: CEO/Consultant
 - Measurement: Endorsement by Johnston. Co. Mental Health.
 - Goal: Endorsement by Johnston. Co. Mental Health.
 - History: The Agency has determined that it should SAIOP services to its array of services to meet the needs of the Johnston Co. community. In order to do so an exhaustive application process must be followed. The agency will contract with a consultant to assist with this project.

- Goal : Develop standardized training curricula for SAIOP
 - Responsible Party: CEO/Consultant
 - Measurement: Internal self-audits of personnel records will show compliance with medical records and training requirements
 - Goal: 100% compliance with standards
 - History: SAIOP is a new service for the Agency. It also a new experience to have to meet all the training requirements for Medicaid enhanced services. It was determined the development of standardized curricula was essential. The agency will contract with a consultant to assist with this project

- Goal: Establish clinical, programmatic and perception of care measures that conform to LME/Managed Care Organizations (MCO) standards.
 - Responsible Party: CEO/Consultant
 - Measurement: Completion of task
 - Goal: All measures will conform to MCO standards
 - History: The NC Mental Health System is moving to a managed care/Medicaid waiver environment. The MCO will be evaluating provider agencies efficiency, effectiveness and efficacy by yet unknown metrics. It is imperative the agency collect and use data that the MCOs value. The agency will contract with a consultant to assist with this project

- Goal : The Agency will improve its budgeting practices
 - Responsible Party: CEO

- Measurement: Development of more comprehensive monthly financial statements that correspond with line items in the annual budget.
- Goal: Line items in the monthly financial statements lineup with the annual budget.
- History: Although financial statements are being done the Agency does not have this practice in place. This impacts the financial security of the agency.

For 2013

- Goal: Establish clinical, programmatic and perception of care measures that conform to LME/Managed Care Organizations (MCO) standards.
 - Responsible Party: CEO/Consultant
 - Measurement: Completion of task
 - Goal: All measures will conform to MCO standards
 - History: The NC Mental Health System is moving to a managed care/Medicaid waiver environment. The MCO will be evaluating provider agencies efficiency, effectiveness and efficacy by yet unknown metrics. It is imperative the agency collect and use data that the MCOs value. The agency will contract with a consultant to assist with this project. This goals was carried over from last year.

- Goal : The Agency will improve its hiring and training practices
 - Responsible Party: CEO
 - Measurement: Human Resource/Training File Self Audits
 - Goal: 100% Compliance to Standards.
 - History: The agency is now providing Medicaid funder SAIOP services. This requires additional HR and training requirements for staff providing these services. It is imperative that standard hiring/training processes be followed.

- Goal : The Agency will improve its record management system.
 - Responsible Party: CEO

- Measurement: Medical Record Self Audits
- Goal: 100% Compliance to Standards.
- History: The agency is now providing Medicaid funder SAIOP services. This requires additional record keeping requirements for staff providing these services. It is imperative that effective and efficient record management practices are followed.

Quality Management Committee Signature

Member Signature: _____ Date: 1/1/12

Member Signature: _____ Date: 1/1/12

Member Signature: _____ Date: 1/3/13

Member Signature: _____ Date: 1/3/13

Member Signature: _____ Date: _____

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