

**Darke County Recovery Services  
Agency Strategic Plan  
August 2013 Review  
FY 14 Plans**

**I. INTRODUCTION**

The first step in the development of this strategic plan was an in-depth analysis of Darke County Recovery Services structure and practices. This analysis identified the Strengths, Weaknesses, Opportunities and Threats. An important component of the analysis was input from board members, employees, individuals receiving services, families of individuals receiving services, referral sources, payor sources and licensing/accrediting bodies. This input has been obtained from surveys, focus groups and discussions as they relate to the current and future needs of the organization

**II. MISSION**

The Mission of Darke County Recovery Services is to save lives. Employees are expected to be dedicated to fulfilling this mission, even at personal sacrifice. At the same time, to accomplish our mission, DCRS recognizes the importance of maintaining a friendly work environment, where employee family responsibilities, career ambitions and personal aspirations are encouraged and supported. It is the goal of DCRS to provide working conditions that are conducive to reducing the stress and conflict inherent in providing counseling and recovery services, so as to maximize our effectiveness toward accomplishing our mission.

**III. VISION**

Darke County Recovery Services will provide specialized, state-of-the-art, scientifically based behavioral health treatment, which is continuously responsive to the needs of the clients and their families.

**IV. VALUES**

The agency's values are reflected in the day-to-day activities as an organization that focuses on providing quality services to all customers. The values we cherish most include the following:

- I. Respect will be offered to all clients, colleagues, stakeholders and the community at large.
- II. Integrity, the professional and personal conduct of all employees, will consistently reflect our code of business and professional ethics. Violators will be reported without fear of reprisal, thereby not participating in a "code of silence."
- III. Appreciation of Diversity: We appreciate the value of cultural diversity and further the understanding of cultural differences through education, communication and sharing of culture-specific celebrations and recognitions.
- IV. Excellence: We will take individual responsibility for our performance and constantly strive for excellence by seeking opportunities to learn and improve our competency, making our organization strong and better as a provider of care and a place to work.

## **V. INDUSTRY TRENDS**

### **A. State and Federal Mandates**

- I. Priorities established in our strategic plan continue to be influenced by the state and federal government. Ohio's current administration has pledged to reduce redundant paperwork, develop a state outcomes system that is less intrusive while providing measures that are valid and reliable. Ohio's public mental health system has experienced funding reduction and cost containment measures in the past 3 years. Ohio is moving in the direction of Medicaid managed care.
- II. On July 1, 2013, the Ohio Department of Mental Health and the Ohio Department of Alcohol and Drug Addiction Services were consolidated into one department identified as the Ohio Department of Mental Health and Addiction Services (ODMHAS).

### **B. Funding Sources**

- I. In July, 2012 Ohio moved the Medicaid reimbursement process from the local Recovery and Mental Health Boards to Ohio Department of Job and Family Services. In subsequent years the Medicaid reimbursement system in Ohio will be shifted to managed care provider contracts. Ohio's community mental health system has experienced significant funding reductions, while still remaining under a 12-13 year cap on Medicaid rates. Many administrative barriers interfere with real competition among providers in the public health system or private practice. Funding reductions in the system at large have reduced in-patient options for individuals with more acute needs. The traditional expectation that community mental health centers have a no-reject policy no longer applies in statute. This agency is the last link in the safety net of services for individuals with acute and persistent mental health needs.

### **C. Human Resources / Personnel**

- I. The agency will require high quality productive performance with a focus on customer satisfaction. Staff resources will continue to be limited. Agencies will experience an increasing need to recruit and retain competent staff. In the past, productivity and compliance may have been tacitly excused in context of compensation, etc. During the past fiscal year, with the acquisition of a new executive director, the expectation to meet as assigned productivity standard has been reinforced consistently. The agency continues to require high quality productive performance with a focus on customer satisfaction. Productive, high quality performance must be the priority so more balanced levels of compensation can be implemented.

### **D. Quality and Effectiveness of Care**

- I. Positive relationships with community partners will be fostered. All employees will focus on customer satisfaction strategies that demonstrate ongoing professional respect to individuals receiving services, families, referral sources, payor sources and other community citizens. Client Satisfaction Surveys continue to identify positive outcomes from individuals receiving services

### **E. Coordination / Collaboration**

- I. Our collaboration and coordination with other service providers will be a focus of this agency. Outcomes of the most recent Referral Source Survey indicated the agency needs to demonstrate more effective and efficient service responses to

other community referral sources. Ongoing coordination and collaboration efforts with other community providers of treatment services are necessary to foster efficient use of local resources in a responsible manner.

## **V. Analysis Strengths / Weaknesses / Opportunities / Threats**

### **A. Strengths**

- Organization of the agency leadership structure to clearly identify leadership responsibilities at each level.
- Excellent Clinical Team
- Agency organizational flexibility that allows employees to control their own schedules to balance work with home life.
- Employees value the autonomy and respect for their work;
- Dedicated work force;
- Improved relationship with the Tri-County Board of Recovery and Mental Health Services;
- Central location in Darke and Miami Counties;
- Psychiatric/Medical Coverage is available to address the need of priority populations.
- Implementation of a new Electronic Health Record operating system to enhance agency efficiency, accuracy and compliance with licensure, accreditation, certification and billing standards.

### **B. WEAKNESSES**

- Reduced community awareness/understanding about the mission and scope of service of the agency.
- Reduced employee benefits.
- Staff overextended at times.
- Increased number of clients lack ability to pay for needed services.
- Clinical staff Underpaid.
- Waiting area layout.
- Building, furniture, carpet, heating and cooling systems, elevator, and grounds in need of major repairs.
- Reduced revenue environment.

### **C. OPPORTUNITIES**

- The leadership change implemented in July 2012 has served to enhance confidence and sustained focus for all agency employees.
- Focus on customer satisfaction continues to be demonstrated by all employees.
- All individuals, referral sources, payor sources, families and external stakeholders will be treated with respect and dignity.
- Continuing education/training opportunities for all employees will be promoted;
- Improved Reimbursement for employees as efficiency improves.
- Implementation of the recently purchased Electronic Health Record operating system. This will enable the agency to complete the billing process upgrade initiated in July 2012.
- Maintain hardware and software equipment upgrades to facilitate efficiency in support of the new Electronic Health Record operating system.
- Re-Submit application for ODMH Capital Improvement grants.

- Continue focus on quality afforded by pursuit of national accreditation.
- Explore expansion of service area to get service capacity more consistent with fixed Administrative resources.

#### **D. Threats**

- Continued funding reductions to public health care systems.
- External Entities dictating treatment.
- Inappropriate admissions.
- Staff recruitment.
- Aging Work force.
- Health benefit costs.
- Aging building and limited modification potential.
- Overly dependent on one funding/managed care provider.

### **VI. STRATEGIC INITIATIVES**

Seven (7) Strategic initiatives were identified by the strategic planning groups as a result of the complete SWOT Analysis. Strategic Initiatives guide the development of strategic goals/objectives and of Industry Funds.

Leadership  
 Fiscal Responsibility  
 Human Resources  
 Image  
 Performance Improvement  
 Programmatic  
 Physical plant

### **VII. PRIORITIES**

This Strategic Plan is developed from key priorities identified by board, staff, clients and other key stakeholders during the analysis process. The Strategic Plan developed from these priorities, mission, and values aims to insure the quality and effectiveness of services resulting in positive client outcomes and insure the future financial viability of Darke County Recovery Services.