

# STRATEGIC PLAN

**CARROLL COUNTY YOUTH SERVICE BUREAU, INC.**

59 KATE WAGNER ROAD – WESTMINSTER, MD 21157

**July 2022 to June 2025**

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## **MISSION**

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We, Carroll County Youth Service Bureau, commit ourselves to provide a continuum of community based mental health and substance use services for children, adults, and families in Carroll County. We use a multi-disciplinary approach to deliver prevention, intervention, and treatment services in the least restrictive and most cost-effective manner. We will continue to be the foremost mental health provider for the families of Carroll County. In the true spirit of the helping profession, we are dedicated to excellence in service, innovation in programming, and responsiveness to our community.

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## **VISION**

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We will offer state-of-the-art treatment, while increasing the population we serve.

We will create innovative programs to serve the community and encourage diversification of job roles and promotion for our staff.

We will share our expertise through training, research, and continuing education.

We will be financially sound.

We will maintain a joyous work environment through our respect and caring for each other.

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## VALUES

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### **Strengths based:**

- Client focused
- Staff focused
- Solution focused

### **Prevention, intervention, and treatment services through:**

- Education
- Modeling to emphasize parenting skills
- Clinical intervention

### **Commitment to clients, family, and community:**

- Provision of service regardless of financial resources
- Commitment to serve a diverse population
- Maintain sensitivity and continued growth in all fields: cultural, sexual orientation, spiritual beliefs etc.
- Consumer-focused while demonstrating respect, courtesy, promptness, and accountability

### **Professionalism:**

- Maintain a level of professional expertise through ongoing staff development, training opportunities and supervision
- Accountability of staff, including service delivery, reliability and follow through
- Strong work ethic
- Positive agency image
- Teamwork
- Stability of staff

**Multi-disciplinary input:**

Integration of treatment models (systems, modality, etc.)

Integration of disciplines (psychiatry, social work, mental health counseling, and nursing)

**Fiscally sound**

Savings for unexpected emergency

Reserve fund for building repairs and attrition

Ability to be competitive with salary and benefits

**Excellence in work environment:**

Healthy work environment

Happy and satisfied employees, valuing humor and fun

**Linkage to community resources:**

Partnership with schools and other agencies

Identification of ongoing needs or gaps in services

Innovation in programming

**Value all roles and departments within agency:**

Open discussion of policy changes within the agency

Team approach

Administrative communication that is transparent, honest, and up-front

Board input, knowledge, direction, and approval

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## EXECUTIVE SUMMARY

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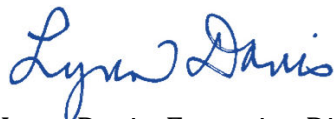
This 2022-2025 strategic plan serves as our guide in expanding and improving the scope, impact, quality, and efficacy of our work in the mental health and substance-use treatment field. We created this plan by responding to current and anticipated community needs, changes in industry regulations, new treatment modalities, and by clearly defining our agency's financial goals, both by current metrics, but also by our future needs and aspirations.

CCYSB prepared the plan with broad involvement and approval from our community partners, funders, board of directors, administrative team, committee chairs, staff members, and clients. This document provides a three-year working plan for our agency, guiding the growth and development of all aspects of the operation.

Our strategic planning concentrated on the organization's internal and external challenges and threats and opportunities, to guide our strategic direction. We then focused on our mission, vision, core operating values, industry challenges and changes, and financial considerations to arrive at our five main goals:

- ~ Facility Addition
- ~ Client Services
- ~ Performance Measurement and Monitoring
- ~ Organizational Culture
- ~ Diversity, Equity, and Inclusion.

Our sincere desire is that the plan we have created will guide us in providing excellent behavioral health care, the sensitivity to meet the needs of all clients, the care and keeping of our staff, responsiveness to our community, and the ability to maintain a fiscally sound and well-respected organization.



Lynn Davis, Executive Director

## I. GOAL: Priority Area: Facility Addition

*To build an addition to the current facility to provide expanded OMHC, ACT, Mobile Treatment, and Community-Based Services.*

Objective	Projected Completion	Key Strategies	Responsible Entities
1. Create sustainability in current and new facility	07/2023	1. Follow guidelines from Mason and Mason report and replenish current and future facility in physical assets as needed.	- Administrative Team - Financial Committee - Board of Directors
	09/2022	2. Produce a three-year pro forma statement and re-evaluate annually.	- Finance Committee
3. Increase fee and grants-based revenue to support new facility.	03/2023	Work with appropriate staff and board members to increase funding for operating budget.	- Board of Directors - Executive Director - Director of Advancement - Grants Manager
4. Reinstate the Philanthropy Committee	10/2022	Re-engage and recruit new members for Philanthropy Committee.	- Director of Advancement
5. Conduct pre-campaign planning	04/2023	1. Create campaign budget. 2. Establish a campaign theme. 3. Write case for support. 4. Conduct feasibility study. 5. Developing building renderings and other visuals (campaign thermometers, naming opportunities, campaign prospect packets). 6. Determine campaign timelines and goals. 7. Draft donor recognition plan.	- Development Team Members
6. Obtain funding to support the opening of a new addition.	06/2025	1. Research, write, and submit public and private grants to support campaign. 2. Allocate CCYSB savings for required matching funds. Request funds, as needed, from CCYSB Board of Directors.	- Grants Manager - Development Team Members - Executive Director

**I. GOAL: Priority Area: Facility Addition** *(continued)*

*To build an addition to the current facility to provide expanded OMHC, ACT, Mobile Treatment, and Community-Based Services.*

Objective	Projected Completion	Key Strategies	Responsible Entities
7. Prepare and initiate capital campaign	07/2023	<ol style="list-style-type: none"> <li>1. Set capital campaign goals, deadlines &amp; timelines.</li> <li>2. Write, design &amp; print effective campaign materials. Develop a campaign landing page within the website.</li> </ol>	<ul style="list-style-type: none"> <li>- Development Team Members</li> </ul>
8. Market campaign, solicit gifts, and recognize donors	01/2025	<ol style="list-style-type: none"> <li>1. Solicit leadership pledges and gifts in preparation for the campaign kick-off.</li> <li>2. Initiate the public phase of the campaign, including an event with press and media coverage.</li> <li>3. Solicit gifts to reach goal and follow-through with donor recognition such and naming opportunities, plaques, or donor wall.</li> <li>4. Set up live cam of the site – pre-groundbreaking throughout the construction</li> <li>5. Celebrate the grand opening of the new facility (ribbon cutting &amp; donor recognition event).</li> </ol>	<ul style="list-style-type: none"> <li>- Development Team Members</li> <li>- Executive Director</li> </ul>
9. Determine specific services offered in facility addition	02/2023	Activate facility addition committee to determine all aspects of facility planning.	<ul style="list-style-type: none"> <li>- Architect</li> <li>- Executive Director</li> <li>- Director of Operations,</li> <li>- Clinical Director</li> <li>- ACT, Mobile</li> <li>- Program Directors</li> <li>- Facility Manager</li> <li>- Board of Directors</li> <li>- Professional Development &amp; Continuing Education Committee</li> </ul>



## II. GOAL: Priority Area: Client Services

*To demonstrate continued improvement in meeting CARF standards for access, quality, efficiency, and effectiveness of services.*

Objective	Projected Completion	Key Strategies	Responsible Entities
1. Establish measurement standards for client services	09/2022	1. The Quality Assurance Committee will establish, approve, and fully implement a Performance Measurement, Management, and Analysis Plan.	<ul style="list-style-type: none"> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> </ul>
2. Demonstrate client satisfaction and outcomes.	09/2023	<ol style="list-style-type: none"> <li>1. Incorporate satisfaction survey into the Greenspace model and train staff.</li> <li>2. Administer to all clients or their representatives 6 months after starting treatment and every 6 months thereafter for the first two years, then annually and at discharge.</li> <li>3. Review survey responses on a quarterly basis.</li> <li>4. Actions by Administrative Team will follow to improve the priority area(s).</li> <li>5. Actions will result in measurable improvement.</li> </ol>	<ul style="list-style-type: none"> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> <li>- Administrative Team</li> <li>- Clinical Staff</li> </ul>
3. Expand programs and modalities to meet clinical needs of current clients and the community-at-large.	03/2023  01/2023	<ol style="list-style-type: none"> <li>1. Accomplish all clinical requirements of program initiatives (i.e., Open Access, Mobile Treatment, increased Group Services, grants).</li> <li>2. Increase Group Services to LGBTQ+ community.</li> </ol>	<ul style="list-style-type: none"> <li>- Clinical Director</li> <li>- Program Directors</li> <li>- Professional Development &amp; Continuing Education Committee</li> <li>- Director of Operations</li> <li>- Grants Manager</li> </ul>

### III. GOAL: Priority Area: Organizational Culture

*To establish a culture where CCYSB is the behavioral health services provider of choice for clients, staff, volunteers, and community partners.*

Objective	Projected Completion	Key Strategies	Responsible Entities
<p>1. 80% of staff, clients, volunteers, and community partners surveyed indicate CCYSB is the behavioral health services provider of choice.</p>	<p>06/2023</p>	<ol style="list-style-type: none"> <li>1. Distribute newsletters and educational videos to clients regularly.</li> <li>2. Establish specific diversity-based services</li> <li>3. Participate in community wellness fairs and other community activities.</li> <li>4. Maintain an up-to-date website where prospective staff, volunteers, and community partners may learn about current programs and services.</li> </ol>	<ul style="list-style-type: none"> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> <li>- Clinical Director</li> <li>- Director of Development, Marketing, Events, and Community Outreach</li> </ul>
<p>2. 80% of staff surveyed report satisfactory morale and satisfaction with workplace.</p>	<p>06/2023</p>	<ol style="list-style-type: none"> <li>1. Implement opportunities (i.e., annual staff survey, suggestion box, town hall meetings) for staff to safely share concerns and ideas.</li> <li>2. Assess all departments and teams for staffing deficiencies that may lead to burnout and stressful working conditions.</li> <li>3. Provide acknowledgements of staff’s individual and professional accomplishments (birthdays and staff anniversaries).</li> <li>4. Provide and implement a bi-annual staff retreat (Spring 2024)</li> <li>5. Plan and implement social events throughout the year to promote staff moral (retirements, socials, holiday party, and other themed activities) (ongoing)</li> </ol>	<ul style="list-style-type: none"> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> <li>- Executive Director</li> <li>- Administrative Team</li> <li>- Compliance Officer</li> <li>- SSARC Committee</li> </ul>

#### IV. GOAL: Priority Area: Measurement and Monitoring

*To demonstrate efficacy of services, programs, and overall client and stakeholder satisfaction by the measurement, monitoring and analyzation of data collected through various methods of data-gathering.*

Objective	Projected Completion	Key Strategies	Responsible Entities
1. Establish an organization-wide monitoring and evaluation infrastructure to effectively gather, analyze, and report data on CCYSB operations, programs, and services.	09/2023	<ol style="list-style-type: none"> <li>1. Implement an organization-wide quality assurance dashboard that includes at least one indicator for each of the domains (access, efficiency, effectiveness, experience of services, and priority business functions).</li> <li>2. Develop a data-gathering system to assist in reporting program activities.</li> <li>3. Select and prioritize at least one indicator from each of the CARF-required areas of measurement.</li> <li>4. Establish within each department an agreed upon process for capturing and analyzing data.</li> <li>5. Evaluate needs, under representation, and disparities in care and outcomes.</li> <li>6. Create a data collection plan, establish a target, and identify the responsible party for data collection, aggregation, analysis, action planning and reporting.</li> <li>7. Establish a reporting schedule for each indicator.</li> <li>8. Review quarterly reports and populate the data from the indicators on the quality dashboard and evaluate the overall effectiveness of the plan.</li> </ol>	<ul style="list-style-type: none"> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> </ul>
2. Demonstrate client satisfaction and outcomes.	06/2023	<ol style="list-style-type: none"> <li>1. Develop a client satisfaction measurement tool; measurable improvement will be demonstrated in at least one area of client satisfaction.</li> <li>2. Develop and implement surveys, suggestion boxes, etc. for clients and community partners to provide regular feedback to guide CCYSB's continuous improvement.</li> </ol>	<ul style="list-style-type: none"> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> </ul>

## V. GOAL: Priority Area: Diversity, Equity, and Inclusion

*To foster a cultural competency standard that promotes diversity, equity, and inclusion across the organization.*

Objective	Projected Completion	Key Strategies	Responsible Entities
1. CCYSB will increase the diversity of its board and staff, and interns, and consistently provide information to clients and community members.	06/2023  06/2025	<ol style="list-style-type: none"> <li>1. Develop a strategic diversity, equity, and inclusion (DE&amp;I) management plan.</li> <li>2. Update building décor, website, and marketing materials to promote diversity.</li> <li>3. Recruit and maintain a Board of diverse backgrounds.</li> <li>4. Recruit interns from Black Colleges and Universities.</li> </ol>	<ul style="list-style-type: none"> <li>- Cultural Inclusion &amp; Health Equity Comm.</li> <li>- Director of Development, Marketing, Events, and Community Outreach</li> <li>- Administrative Team</li> <li>- Program Directors</li> <li>- Human Resources</li> <li>- Clinical Services</li> </ul>
2. Provide a richer diversity, equity, and inclusion learning opportunity for all employees.	06/2025	<ol style="list-style-type: none"> <li>1. Provide training and workshops to staff, clients, and community.</li> <li>2. Provide in-house required training + 2 additional trainings related to diversity, equity, and inclusion.</li> <li>3. Provide CEU accredited training for staff to meet diversity/equity licensure requirements.</li> </ol>	<ul style="list-style-type: none"> <li>- Cultural Inclusion &amp; Health Equity Comm.</li> <li>- Professional Development &amp; Continuing Education Committee</li> </ul>
3. To effectively incorporate a client's culture within their treatment plan and on-going treatment, as to best serve the client.	06/2023  06/2025	<ol style="list-style-type: none"> <li>1. Include cultural/ethnic/sexual orientation/religious etc. in the initial assessment for the purpose of influencing care.</li> <li>2. Provide easily accessible areas for client's chosen name and pronouns within in the E.H.R system.</li> <li>3. Translate all clinical documents and waiting room signage into Spanish.</li> </ol>	<ul style="list-style-type: none"> <li>- Clinical Services</li> <li>- Cultural Inclusion &amp; Health Equity Comm.</li> <li>- E.H.R Application Specialists</li> </ul>

**VI. GOAL: Priority Area: Diversity, Equity, and Inclusion (continued)**

*To foster a cultural competency standard that promotes diversity, equity, and inclusion across the organization.*

Objective	Projected Completion	Key Strategies	Responsible Entities
4. Eliminate any barriers to treatment due to culture, sexual orientation, spirituality, and income disparities etc.	02/2023	Assess through discussion with staff members, suggestion boxes, and grievances.	<ul style="list-style-type: none"> <li>- Front Office Staff</li> <li>- Clinicians</li> <li>- Compliance Officer</li> <li>- Quality Assurance Committee</li> </ul>

*Last Revision Date: August 3, 2022*