

Strategic Plan 2016-2019



Family
Services

Promoting family-centered mental health and wellness

Executive Summary

With the publication of its new **Strategic Plan**, TriCity Family Services articulates its preferred future and charts its course leading to our vision of what we desire to be as an organization by the year 2019.

Significant changes have taken place in the landscape of mental health care across our country over the course of our previous four-year planning cycle. With the passage of the final rule of the Mental Health Parity and Addiction Equity Act (Parity Act) in 2013, 30.4 million Americans who currently had some insurance coverage for mental health and substance use disorder benefits gained federal parity protections. In 2014, as a result of the historic Patient Protection and Affordable Care Act (ACA), an additional 32.1 million Americans were provided access to coverage that included these benefits. Together, these two Acts extended federal parity protections to more than 62 million children and families in need, major victories in the long fight to end discriminatory practices in health insurance coverage for mental illness and substance use disorders.

In Illinois, the passage of the Medicaid Reform Law in 2013 promised affordable mental health care to 342,000 newly eligible Medicaid recipients. However, on the heels of what has been referred to as The Great Recession, during which time (2009-2011) state funding for mental health services was cut \$113.7 million, the depth of the state's financial crisis continues to further shred the already fragile safety net of affordable community-based services for the mentally ill. As of the publication of this Strategic Plan, the passage of a state budget remains deadlocked, resulting in the elimination of numerous state funded programs and services and, sadly, a growing number of agency closures. For TriCity Services, the current state budget crisis will likely result in the loss of state funding for psychiatric services and could translate to a cuts in reimbursements for services to our Medicaid eligible clients. Considering the fact Medicaid reimbursement rates for providers have not been increased since 2008, the latter scenario is particularly discouraging. Locally, agencies faced with the elimination of state grant support and frequent delays in reimbursements for Medicaid mental health services, must shift their dependence to the communities they serve for their survival and compete more aggressively for local public and private financial support. To compound the fundraising challenge, the resources of area United Ways continue to shrink while mental health tax dollars distributed through local mental health ("708") boards hold little promise of growth in the foreseeable future. Adding to the complexity of this changing landscape is the fact that traditional service boundaries for state-funded agencies have, in practice, disappeared, opening the door to increased "competition" for Medicaid and insured clients. Reflecting a "leveling of the playing field," not-for-profits compelled to increase their fee-for service income now compete not only with one another for Medicaid-eligible and insured clients, but also with for-profit private practices for their piece of the privately insured market.

Within this changing environment, our clear resolve is to not simply survive current conditions, but to emerge in 2019 as a stronger, more effective, and more vital organization. In this regard, it is significant to note that the planning process culminating in the creation of our **Strategic Plan for FY 2016 - 2019**, clearly affirmed our **Vision** and **Mission** and laid out a four year plan that builds upon our organization's skills, strengths and distinctive competencies.

Executive Summary (Continued)

Our success in realizing our vision and continuing to fulfill our mission of service to the community will be measured by the extent to which we achieve the following five **Strategic Initiatives** :

- I. **PROGRAMS & SERVICE** - Enhancing creating and delivering family-centered mental health programs and services across the *family life cycle* to meet the current and growing needs of our community.
- II. **AWARENESS** - Being recognized not only as a leader and advocate for *family* mental health and wellness, but also as the provider of choice for individuals, couples and families seeking high quality, affordable, out-patient mental health services, as well as for businesses and corporations in need of employee assistance services.
- III. **FINANCIAL STABILITY** - Achieving *long-term financial stability* by: increasing the depth and scope of the Agency's donor base; achieving and maintaining memberships on private insurance panels and within Medicaid Managed Care and Accountable Care provider networks; growing the Agency's endowment funds, and continuous evaluation of program impact and sustainability.
- IV. **PARTNERSHIPS** - Continuing to develop long-term *strategic partnerships* with key local community partners for the purpose of leveraging and optimizing the use of existing resources and improving access to care for local consumers of mental health services.
- V. **SPACE & BUSINESS INFRASTRUCTURE** - Providing for the agency's needed human and physical resources, as well as its fundamental plans, policies and procedures



James R. Otepka
Executive Director

Appendix A: Mission and Vision

OUR MISSION

TriCity Family Services (TCFS) is a private, not-for-profit human service agency serving the community members and organizations of central Kane County. The agency is dedicated to strengthening people and building community through the provision of quality, affordable counseling, youth crisis intervention, prevention and early intervention services that promote sound mental health and effective family functioning. As a community based agency, TCFS promotes service excellence, honesty, hopefulness, personal responsibility, and respect for others.

OUR VISION

Building upon our distinctive competency as a provider of **family-centered mental health treatment and wellness services**, we envision a future in which TriCity Family Services will:

- Be recognized as the provider of choice for individuals, couples and families at all income levels seeking high quality, affordable, out-patient mental health services delivered **across the family life cycle**;
- Continue to assume a leadership role in treating **children's mental health disorders**;
- Continue to partner with schools, law enforcement and other local providers, maximizing the use of existing resources and **collaborating** in the design and delivery of needed mental health services;
- Continue its traditions of creating and delivering programs designed to **prevent** the occurrence of substance abuse and mental health problems and **promote individual and family wellness**;
- Partner with the local medical community in **integrating the delivery of physical and mental health care**; and,
- Assume a primary role in working with local employers to create and maintain healthy work forces through the delivery of innovative **employee assistance services**.

Appendix B: SWOT Analysis

Strengths

- Central and accessible location
- Near 50 year history serving the Community
- Family-centered approach to mental health treatment
- Expertise in the provision of family and couples therapy
- Expertise in Family Based Treatment for Eating Disorders
- Committed, skilled and engaged Board of Directors
- Long-term supporters
- Dedicated fundraising and direct service volunteers
- Close working relationships with schools, law enforcement and local network of mental health service providers
- Affordable sliding scale
- Variety of Emotional Wellness programs
- Medicare certified therapists
- Certified Employee Assistance Professional
- Ability to serve Spanish-speaking clients
- Experienced supervisors and managers
- Comprehensive employee assistance services through Occupational Services
- Diverse funding base
- Expanded Development Department
- Highly respected graduate intern training program
- Programs accredited by a national accrediting body
- High level of knowledge & experience in providing Medicaid Mental Health Services
- Broad representation by agency therapists among health insurance provider networks

Weaknesses

- Insufficient capacity results in wait list which delays services to those in need and discourages referrals
- Perceived as an organization primarily for low-income clients
- Perceived as an Agency that provides only counseling and serves only children, adolescents and their families
- Limited opportunities for staff advancement
- Limited awareness of TCFS by area primary care physicians
- Limited representation of wealthy community donors among agency supporters
- Aging donor base
- Limited reserves available to cover cash flow shortages
- High percentage of professional staff working fixed and /or part-time schedules limits availability of staff time for “extra-curricular” PR/marketing & networking activities

Appendix B: SWOT Analysis

Opportunities

- Unfulfilled demand for services
- Developing fundraising infrastructure
- Re-building of TCFS volunteer organization
- Advances in technology creating new awareness-building, marketing and service delivery vehicles
- Arrival to the community via anticipated merger of area health care provider with in-patient and out-patient behavioral health services
- Affordable Care Act promises expanded mental health coverage for previously un-insured and under-insured
- Population growth in greater Elburn service area
- Advances in brain science contributing markedly to the assessment and treatment of mental disorders
- New and renewed relationships with school districts and area physicians
- The 2011 Illinois Medicaid Reform Law allows for partnerships with Managed Care Organizations and Accountable Care Entities
- Expansion of Medicaid Mental Health Services to adult population
- Elimination of traditional service boundaries by Illinois Department of Human Services/ Division of Mental Health allows for increased referrals of Medicaid adults and children

Threats

- Continuing erosion of federal and state funding
- Increasing poverty rates swelling the ranks of potential Medicaid-eligible clients
- State of Illinois' budgetary crisis threatening loss of psychiatric services funding and reduction in Medicaid reimbursements
- Medicaid managed care requirements place increasing demands on clinical and administrative staff time
- Tight municipal budgets risk reallocation of local mental health tax dollars
- Increased competition for area employee assistance business from regional & national EAP providers
- Emergence of inexpensive or free "1-800 EAP Services" in a tight economy further diminishes market for traditional face-to face EAP products
- Agency wait list translates into a direct loss of revenue and referral and creates negative perceptions about its ability to effectively respond to the needs of the community
- Increased competition from local for-profit behavioral health group practices and hospital-based out-patient programs
- Heightened awareness of Medicaid Supplementation by "708" funding boards likely to require major changes to how funded agencies apply and account for funding

Appendix C: Critical Issues

MISSION/SERVICE DELIVERY

- Perennial question – How do we meet the community’s growing need for sliding scale services?
- How do we increase the availability of psychiatric services for children and adolescents?
- Should TCFS develop psychiatric services as a stand-alone service?
- What does TCFS need to do to maintain its quality of client care while adhering to increasing managed care requirements, i.e., Medicaid managed care?

SOCIO-CULTURAL/DEMOGRAPHIC

- How do we more effectively serve the needs of a growing aging population?
- How do we more effectively serve the needs of growing minority populations in our area, particularly Spanish-speaking?

FUNDING/FINANCING

- How do we compensate for the anticipated discontinuation of state funding for non-Medicaid eligible individuals?
- How do we compensate for declining United Way/Community Chest funding?
- Are we adequately prepared to deal with the cash flow problems associated with proposed state funding cuts?
- Does our planning adequately address debt reduction and re-building of cash reserves?

HUMAN RESOURCES

- Do we need to do anything different to continue to recruit & maintain qualified staff, especially part-time hourly licensed clinicians and bi-lingual (Spanish-speaking) staff?
- What do we need to do to accommodate the millennials who will comprise an increasing portion of our work force?
- What do we need to do to sustain our recruiting of volunteer board members who have a passion for the agency’s mission and are able to commit to the work of the board?
- How do we restore and maintain the strength and vitality of the Friends of TCFS?

MARKET CHALLENGES

- Need we do more to compete effectively within the local psychotherapy market place?
- What more must we do to compete effectively within the EAP (Employee Assistance Program) market place (e.g., promote outcomes)?
- What more must we do to Increase utilization of agency Emotional Wellness Programs?
- Given limited resources, how can we more effectively market TCFS?

Appendix C: Critical Issues

CHARITABLE SUPPORT

- Can we increase private charitable support enough to offset lost/reduced public funding?
- Will private charitable support increase enough to provide for the growth needs of the agency?
- How do we cultivate new major donors in order to compensate for the “aging-out” of our current pool of major donors?

HEALTH CARE DELIVERY

- What are the potential ramifications for TCFS of the merger between Cadence Health & Northwestern Medicine?
- What role should the agency take in promoting/practicing integrated healthcare delivery in this community?
- To what extent should collaboration with other behavioral health providers continue to be a priority for this agency?
- How will advances in brain science impact the way we deliver behavioral health services?

TECHNOLOGY

- Is the agency’s MIS able to meet demands of Medicaid managed care and the evolution of electronic medical records?
- How must service delivery adapt to the evolution of technology and its impact on the mental health of individuals and families?
- What steps must be taken so that our financial software generates the reports needed to adequately manage the agency’s finances?

FACILITY

- Is our current space able to accommodate any additional growth in size or scope of services (e.g., psychiatric, group services)?
- What is our vision for TCFS in the year 2019 and how will that vision drive our long-term space planning?

COMMUNITY/COMMUNITY OUTREACH & PUBLIC RELATIONS

- What action do we need to take to increase the awareness and profile of TCFS within the community?
- How do we leverage existing relationships to increase awareness and promote our mission?
- How do we engage village/community leaders in support of TCFS?

Appendix D:

Strategic Plan with Tactic Detail

FY 2016-2019 STRATEGIC PLAN GOALS

STRATEGIC INITIATIVE I: PROGRAMS SERVICE

The Agency will enhance, create and deliver family-centered mental health programs and services across the *family life cycle* to meet the current and growing needs of our community.

Goal 1: Through 6/30/19, TCFS will continue to solidify its niche in the local out-patient psychotherapy marketplace as the primary provider of family-centered counseling services for individuals, couples and families across all income levels.

Tactics:

- Achieve membership in Accountable Care Entity Networks
- Expand the pool of part-time Hourly Therapists and optimize the use of new satellite office space
- Increase availability of Saturday office hours
- Continue to recruit, hire, retain and support clinical staff committed to systemically-informed clinical practice
- Make off-site counseling services available at St. Charles satellite office

Goal 2: Outreach efforts will result in Latinos representing at least 20% of the agency's total counseling caseload by 6/30/19

Goal 3: By 6/30/19, the agency's Family Based Treatment Program (FBT) for eating disorders will be serving at least 35 cases per year

Goal 4: Through 6/30/19, maintain the availability of Psychiatric Evaluation and Medication Management services

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STRATEGIC INITIATIVE I: PROGRAMS & SERVICES (Continued)

Goal 5: Through 6/30/17, the agency's clinical services will be supported and enhanced through the expansion of *Emotional Wellness* groups.

Tactics:

- By 6/15/15 implement a Parenting Support Group for Spanish speaking parents which will run two 12 week sessions per year and serve at least 10 families per year.
- By 12/31/15, implement an open ended Latina Women's Group at least two times per month.
- By 12/31/15 implement an open-ended, psychoeducational FBT Parent Support Group, which will serve at least 20 parents per year and be offered at least two times per month.
- By 12/31/15, implement project self-compassion, a Mindfulness Group for Teen Girls which will run three 8 week sessions per year, serving at least 25 teen girls.

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STRATEGIC INITIATIVE II: AWARENESS

TriCity Family Services will be recognized not only as a leader and advocate for *family* mental health and wellness, but also as the provider of choice for individuals, couples and families seeking high quality, affordable, out-patient mental health services, as well as for businesses and corporations seeking employee assistance services.

Goal 1: Allocate the resources necessary to implement a defined Marketing Plan to drive the growth of Agency programs and services while actively promoting their value

Tactics:

- Develop an Annual Marketing Plan and obtain Marketing Committee approval no later than 7/31 of each year.
- Expand use of Digital and Social Media
- Continue to enhance the relevancy of the agency website

Goal 2: The Agency will strengthen the measurement and reporting of its treatment impact to demonstrate the Agency's effectiveness to the community.

Tactics:

- By 12/31/15, the agency's Utilization Review Team will prepare and present semi-annual treatment outcome reports to the clinical staff and Management Team
- Develop a client feedback page on the Agency website to inform the community of the effectiveness of Agency services

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STRATEGIC INITIATIVE III: FINANCIAL STABILITY

TriCity Family Services will achieve long-term sustainability in order to provide for the growing need for family-centered mental health treatment and wellness services within our community.

Goal 1: Establish and achieve annual fundraising goals to support planned growth and maintain the quality of agency services

Tactics:

- Through FY 2019, implement detailed annual Development Plans to meet increased fundraising goals
- Establish performance-based compensation plan for key Development Team positions
- Employ cost/benefit analyses for all events to optimize fundraising effectiveness
- By 12/31/15, implement a Major Donor Moves Management Plan for 100 donors
- Donor cultivation and solicitation efforts will result in the advancement of at least 5 mid-range donors (\$250 - \$500) to major donor status (\$1,000 +) each year
- Renew Golf Outing as a major fundraising event in FY 2016

Goal 2: Complete an annual Planned Giving Marketing Plan by 12/31/15 and renew annually.

Goal 3: Maximize client fee revenue through timely and accurate billing and client record-keeping practices and increased sales of employee assistance services

Tactics:

- Make at least 5 contacts yearly for new potential EAP contracts.
- Implement EAP marketing strategies and enter into contracts for at least 3 “Employer Assist” services

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STRATEGIC INITIATIVE IV: PARTNERSHIPS

TCFS will build long-term strategic partnerships and collaboration with key local community partners (e.g. schools, law enforcement, medical community) for the purpose of: increasing the overall awareness of TriCity Family Services and its mission; leveraging and optimizing the use of existing resources; and improving access to care for local consumers of mental health services.

Goal: With the dual purpose of expanding the scope and availability of needed services while maximizing the use of local resources, TCFS will continue its collaborative efforts with other providers in planning and offering programs and services to our mutual constituencies.

Tactics:

- Continue to invest staff resources in networking activities that improve access to care and optimize the use of local resources devoted to the delivery of mental health services: St. Charles Youth Commission, Geneva Coalition for Youth, West Towns Community Resource Team, Fox Valley Mental Health Advocacy Council, and Kane County Mental Health Council.
- Continue to cultivate collaboration with Northwestern Medicine
- Increase Chick Chat By HGNA participation by at least 10% each year through 6/30/19
- Partner with Changing Children's Worlds Foundation to offer an International Child Development Program at a St. Charles Park District facility by 6/30/16
- Continue to partner with schools in offering Family Connections Programs to school families

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SPACE AND BUSINESS INFRASTRUCTURE

TriCity Family Service will provide for the agency's needed human and physical resources, as well as its fundamental plans, policies and procedures

Goal 1: Increase office space to accommodate service growth

Tactics:

- By 9/1/15, launch the initial phase of the Short Term Plan for Growth and Space Needs
- By 7/1/17, launch second phase of Long-term Space Planning project
- Complete Business Case and feasibility study as part of Long Term Plan by 6/30/19

Goal 2: By 12/30/15, work with the agency's MIS vendor to optimize the reporting capacities of the agency's Electronic Medical Records (Clinic Tracker) and billing/financial software (Billing Tracker and Blackbaud) to increase administrative efficiency and to meet the data management and reporting, as well as the electronic billing and record-keeping needs of the Agency into the future.

Tactics:

- Customize MIS clinical module ("Clinic Tracker") to generate the client data necessary to meet Medicaid Managed Care service delivery and reporting requirements through 6/30/2019
- Adapt service codes to accommodate transition to DSMV & ICD 10 by 10/1/15
- Customize MIS billing module ("Billing Tracker") to achieve timely and accurate client billing and supporting financial reports, e.g., Client Fee Receivables Aging Report.

Appendix D:

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SPACE AND BUSINESS INFRASTRUCTURE (Continued)

Goal 3: Expand and re-structure the TCFS Development Team

Tactics:

Define staffing plan and create/revise job descriptions accordingly by 7/1/15

- Fill Director of Development position by 7/15/15
- Fill Manager of Community Giving position by 7/15/15
- Fill Volunteer and Special Event Coordinator position by 7/31/15

Goal 4: Optimize the use of the donor database (Results Plus) to guide fundraising strategies and track performance

Tactics:

- By 3/31/15, at least one Development Team staff member will receive advanced training in Results Plus
- By 12/31/15, develop simple sustainable measures/metrics for main areas of private support (Major Individual Donors, Annual Fund, Corporate, Foundation, Community Groups, Churches) and provide semi-annual reports on these to RD Committee

Goal 5: Continue ongoing evaluation of agency programs to ensure optimal impact and use of resources

Tactics:

- Implement Program Cost Analysis by 9/30 of each year in conjunction with agency audit
- Implement annual Matrix Map Analysis each year by 12/31 in collaboration with Board Programs & Services Committee

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SPACE AND BUSINESS INFRASTRUCTURE (Continued)

Goal 6: Continue to provide for the human resources needed to achieve the long-term goals set forth in this Strategic Plan

Tactics:

- The Board Human Resources Committee will orchestrate a customized salary survey of area mental health organizations, analyze the data and submit recommendations to the Board of Directors by 12/31/15
- The Executive Committee will continue to work with the Board Human Resources Committee and Executive Director in new board member recruiting and in board leadership succession planning to ensure the continuity of board leadership
- The Executive Committee will work with the Executive Director to ensure effective succession planning for key management-level staff