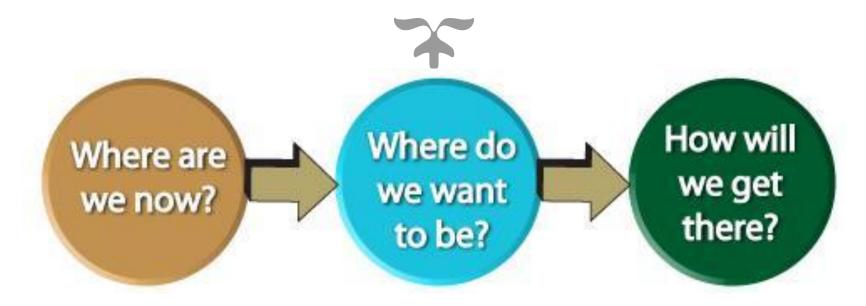


STRATEGIC PLAN (JAN. 2023 TO DEC. 2025)

Quality Care Solutions, Inc.



Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Continue meeting at least an 85% treatment fidelity analysis based on all client cases treated with ESFT.	IIH team members participates on the monthly web conferences to discuss ESFT case consultations. In addition, team/survey documents (SupF and DocF) are reviewed and scored by a designated external faculty member. Surveys are submitted to the contracted fidelity contractor for scoring.	Clinical Program Manager IIH Team members	Quarterly	Data is derived from the fidelity measures completed in each client case, then input in Center for Family Based Training online database.	Ongoing
Increase the number of clients with I/DD receiving high-quality services in their homes and communities.	 Promote referral acquisition through social media and website notifications with clients' testimonials. Hold a public event to connect with interested individuals. Cultivate new referral sources 	Clinical Director Program Managers CEO	August 2025	Increase in service participation of I/DD clients before the end of 2025 calendar year.	Incomplete

Strengthen Peer Workforce	Enhance a well-trained and well-utilized workforce whose work leverages are lived experiences through an additional training conducted by Carolina Complete Heath Network posted live webinar. The registered training shall cover the following: Clinical Coverage Policy 8G (including service requirements, covered and non- covered criteria, as well as key areas such as discharge planning, person-centered plans, crisis plans and care coordination).	Peer Support Specialists and Peer Support Specialists QPs (new and existing) Human Resources Director	Ongoing	Evidence of webinar training participation through registration and training certificate.	Ongoing
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Continue to improve the health of the clients by supporting evidence-based interventions and other innovations to address behavioral, social and determinants of health (SDOH).	Social determinants of health (SDOH) questionaries will be conducted at baseline (at the beginning of service), every 90 days, and at discharge to assess their health needs and to create a plan of action to address their needs as appropriate.	Program Qualified Professionals	Ongoing	The evidence of complete questionnaires is in service records representing time intervals; the data is used to help identify clients who may benefit from greater support in one or more areas, while promoting whole-person care.	Ongoing
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Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Implement a strong and well-defined recruitment and selection hiring process to maintain an adequate pool of skilled and versatile fully licensed outpatient therapists.	Continuously revise pre-screening questions and post onto selective job websites and job search engines. Source, market and promote open positions to streamline selection. Utilize another recruiting resource other than Indeed Job Search database to attract efficient and highly qualified licensed professionals. Develop incentive strategies to retain therapists and minimize staff turnovers.	Human Resources Director Clinical Director Clinical Program Manager	Ongoing	Maintaining a sufficient pool of available fully licensed outpatient therapists. Having an adequate pool of outpatient therapists who are readily accessible and available to take a caseload with minimum stipulations of preferable target populations.	Ongoing

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Lessen employee turnover and increase retention rate.	Determine strategies to improve retention and longevity of staff by launching various incentive schemes and benefits to motivate job satisfaction and professional growth. Annually revise an action plan to track retention rate that will specify the root cause of dissatisfaction	Human Resources Director Clinical Director Compliance Officer	Ongoing	Evidence of improvement in retention rate annually. Feedback from exit interviews, employee satisfaction surveys, performance evaluations, etc. shall be utilized to evaluate this goal.	Ongoing
Continue to build a culturally diverse workforce that is bilingual and sensitive to the needs of all populations served.	Develop hiring strategies to increase workforce diversity; advertise job positions in locations, forums and cultural institutions with widely diverse audience and leadership. In addition, conduct an assessment.	Human Resources Director Compliance Officer	Ongoing	Evidence that the organization has employed a reasonable proportionate of Hispanic/Latino direct care professionals in the workforce to serve their target population.	Ongoing

Educate, promote, and establish a self-care program for staff to reduce stress, maintain /enhance short and longer-term health and well-being.	Generate a proposal to incorporate steps of initiating self-care strategies, tools, exercises and practices for stress reduction (i.e. proper nutrition, physical exercises, relaxing techniques, maintaining social support, etc.)	Human Resources Committee	1-2025	Proposal approval by leadership and implementation of the self- care program	Incomplete
Maintain a positive work culture and high employee morale.	Continue to conduct an annual review of job descriptions to ensure they reflect the essential job functions of each position and are aligned with the current organizational structure. Establish a new mentoring program for the purpose of adding structure and consistency necessary for long-lasting and positive outcomes.	Human Resources Director Compliance Officer	9-2024	Job descriptions accurately coincide with service definitions and requirements for all organizational positions. The Mentoring Program has been implemented and supports the workforce in a challenging, changing and stressful environment.	Partially completed (annual review) Mentoring Program is pending

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Increase unannounced physical inspections and walkthroughs by the organization to all licensed facilities to assess health and safety measures employed and compliance.	Generate a schedule to travel to licensed facilities without providing notice to the Program Managers (Facility Directors) as an additional mechanism to verify health and safety policies and procedures are being followed.	Compliance Officer	Ongoing	Schedule is developed and unannounced inspections are conducted according to specified calendar dates. An evaluation of the visit is completed with any identified deficiencies and an action plan (when applicable)	Ongoing
Expand providing services and supports by periodically navigating the Managed Care Organizations' website to identify whether open enrollment exist for specific services.	When open enrollment is available, submit credentialing and contract request form to the applicable MCO on or before specified timelines, adding sites and services.	Clinical Director	3-2024	Provider Enrollment Notice has been received from the MCO. Vaya Health Provider Network Operations' notice dated 4-12-24 authorized requested services by the organization for multiple service sites.	Complete

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Research available benefits and resource advantages that are offered by Health Resources and Services Administration (HRSA) that will enhance organization's clinical and administrative operations.	Spearhead making initial contact with the appropriate unit/department to assist identifying the resources and programs for application and implementation	Clinical Director Compliance Officer	7-2025	The most effective resources and/or program have been selected and utilized as an enhancement to the behavioral health delivery system within the organization.	Incomplete
Continue to monitor the quality of care and different work-related issues to allow Leadership better insight into how systems and processes can be improved.	Continue to issue satisfaction surveys to clients in all programs, their legally responsible persons, employees, and stakeholders that will capture individualized treatment experience.	Direct Care Staff Program Managers Clinical Director Compliance Officer Human Resources Director	Annually / Ongoing	Survey collection has been reviewed and analyzed showing the overall evaluation of views, attitudes, and perceptions of care.	Ongoing

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Provide clients & legally responsible persons with welcoming, engaging and culturally & linguistically appropriate client- centered care in an environment that promotes wellness, recovery, and resiliency.	Continue to update the organization's informational materials that are usable and easy to understand (i.e. surveys, brochures, client handbook, intake documents, clients' recommendations, requests for reasonable accommodation, participation in treatment plan development/revisions, & discharges, website accessibility, etc.)	Medical Records Clerk Clinical Director Compliance Officer QA Committee	Ongoing	Publication of clients' and legally responsible persons' experiences and success stories in organization's newsletter and website. Evidence of service performance measurement data and results.	Ongoing
Explore opportunities to serve Traumatic Brain Injury (TBI) clients within the approved catchment areas that will enhance service delivery experience and referrals.	Spearhead notifying the MCOs to inquire about the process in requesting to become a TBI service provider. Obtain all relevant information, literature, and instructions of application submission.	CEO	11-2024	All protocols and requirements to become a TBI service provider have been met and the approval to render these services and supports are authorized.	Incomplete

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Maximize revenue by providing training to Program Managers on the AmeriHealth Caritas NC value- based program that provides incentives for high-quality and cost- effective client services.	Education is rendered on how the organization meets eligibility to receive compensation based upon achieving or exceeding the established service delivery targets with overall performance in reporting period in specific quality measures.	Clinical Director Program Managers	6-2025	The 2025 PerformPlus – True Care Behavioral Health Providers (Improving Quality Care & Health Outcomes Manual) is thoroughly reviewed and understood to effectively utilize the value-based program that disburses incentive payments.	Incomplete
Continuously promote a data-driven performance management system to measure and analyze organization's operational status.	Consistently assess current performance management system; develop/revise performance indicators, planning activities, processes, tools to track progress and convey findings on regular intervals.	Leadership QA Committee	Ongoing	Review and test whether data is effectively collected to exhibit meaningful results and outcomes.	Ongoing
Prepare for CARF survey to maintain reaccreditation, which was extended to April 2025.	Demonstrate ongoing efforts to meet stringent standards clinically and administratively.	Leadership	4-2025	Receipt of an official correspondence from CARF confirming a 3-year reaccreditation.	Incomplete

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Produce accurate and informative annual financial statements in accordance with Generally Accepted Accounting Principles (GAAP).	Annually, issue clear year-end financial information to CPA as instructed for completion and distribution to leadership.	CEO Leadership team Accounting Firm	Ongoing	Financial statements are appropriately evaluated and show financial sustainability for the organization's operations.	Incomplete
Continue to enter and maintain a contractual agreement & partnership (effective July 1, 2025) with Wake County Health & Human Services for the Youth Awaiting Placement (YAP) Program.	Uphold contractual obligations and requirements to recruit and hire individuals in providing direct support and supervision for youth while they wait for residence placement.	Compliance Officer YAP Human Resources Manager YAP Qualified Professional	2023 & Ongoing	Reissuance of contract renewal and execution, which signify the fiscal year contractual stipulations have been satisfied.	Pending for July 1, 2025

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Upgrade the organization's website to enhance functionality and display the strategic plan for review by clients, employees and stakeholders.	Create a checklist of necessary changes for the website and discuss with our IT Consultant the visionary proposal for design.	IT Committee Human Resources Director	12-2024	Website upgrade proposal and request has submitted to the IT Consultant for approval and implementation. Evidence of all upgrades are finalized.	Partially Complete Strategic Plan posted
Expand the established internal compliance processes that are recurring, consistent and measurable and aimed at preventing, detecting, and deterring fraud, waste and abuse.	Insert a compliance section on the website providing current information on behavioral healthcare rules and regulations, education on current trends of non- compliance & significant risks in North Carolina that will drive greater accountability, operational transparency & integrity.	QA/QI Committee	12-2025	The compliance section of our website has been successfully completed with actionable policies, requirements that is educational and resourceful. and resources that support align with valuable insights and proactive approaches.	Incomplete

Goal/Objective	Specific Activities	Responsible Staff	Timeframe	Measurement System	Status
Continuously obtain a rating of 85% or higher in all scheduled clinical chart reviews, evaluation of medical record practices, NC Division of Health Services Regulation Licensed Facilities' audits, etc.	Conduct regular internal audits as proactive preparation and to help ensure ongoing compliance, maintain accurate documentation records,	Compliance Officer Program Managers Clinical Director	Ongoing	The regulatory oversight entities' audit results and findings show a documented score of 85% or higher.	Ongoing
Apply for commercial & state health contracts/plans as another payment source from persons served and organizational revenue.	Submission of the application to applicable Insurance Network Managements with required credentialing information.	Admin. Assistant	9-2023	Receipt of an executed state health plan contract and commercial contract. Successfully received BCBSNC commercial (private) and state health plan (Medicare) contracts.	Complete 10-2023
Participate in at least one community event to represent community integration and partnership with stakeholders.	Sign up and register for events in nearby locations that promote awareness and area resources related to behavioral health.	Admin. Assistant	Before end of the calendar year 2 024.	Participated in a Wake County Fall Festival as a community partner by providing knowledge how to access and address needs that support mental and physical health.	Complete 10-2024

				Participated in a Community Fellowship Day on May 18, 2024, in Wilson, NC to share the accessibility of behavioral health services offered by the organization.	Complete
Expand services for individuals in the criminal justice system through Forensic Peer Specialists.	Research the stipulations and requirements on how to initiate this delivery service that will be advantageous to this specific incarcerated or recently incarcerated population.	Program Manager Clinical Director	11-2025	Knowledge of training, appropriate settings, and other protocols that will qualify the organization to render services affiliated in the justice system. In addition, an agreement or contract has been authorized and issued by the applicable entity.	Incomplete