Amethyst House
Strategic Plan

Mission

Amethyst House provides a foundation for recovery by partnering with individuals, families and communities impacted by addictions and substance-abuse issues, offering high-quality residential and outpatient treatment services and guidance for healthy living.

Brand Statement

Building foundations for recovery.

Vision

Amethyst House will promote a world where:

Recovery services are accessible to all,
The stigma of addiction is eliminated, and
Life-long recovery is a reality.

Values

Amethyst House conducts its business in a way that reflects:

- A client focused and evidence-based approach;
- An inclusive atmosphere;
- Utilize a trauma informed approach;
- Respect in all interpersonal interactions;
- The concept that addiction is a disease;
- Full accessibility to recovery services;
- Acceptance of the most challenging cases within our scope of practice;
- The importance of personal accountability and integrity;
- Continuous improvement in our process;
- That hope and compassion are paramount in our efforts.

Preface

This plan was originally developed in 2010-11 by the Strategic Planning Committee (SPC) and updated annually by the agency directors and the following board committees: Finance, Fundraising, Governance, and Program. The Plan is presented at the Board and Staff Retreat.

The purpose is to understand the agency's needs in a rapidly changing environment and to make recommendations for Board approval in a way that: Spans a 2 – 3 year time frame, provides direction and monitoring for Board and Staff efforts and is inclusive of all ideas, concepts, and notions and exclusive of none. In our 45th year of operation we are an institution that is essential for our community's health and growth. Our organizational infrastructure and financial plan will allow us to continue that role in this rapidly changing environment. The agency will continue to grow vertically, not horizontally, but open to opportunities.

Strategic Goal Areas

Program
Organizational
Financial
Fundraising / Media
Board Development
Collaboration

A) Program

Goal: Maintain high standards for program operations
Objectives:

1) Utilize best practices:
   - Utilize evidence based practices in services.
   - Employ staff with credentials that meet funding requirements (i.e. DMHA, Medicaid, private insurance) and assure ongoing trainings on current evidence based practices
2) Maintain high quality clinical documentation
3) Maintain high level program outcomes
4) Improve client satisfaction

B) Organizational

Goal: Improve service quality by increasing efficiency
Objectives:

1) Hire quality, and qualified staff
2) Support staff in continuing education and credentialing
3) Strive for staff diversity
4) Maintain staff professionalism and accountability
5) Protect the equity and value of physical assets by regular maintenance
6) Utilize new technologies as they become available

C) Financial

Goal: Ensure fiscal responsibility
Objectives:

1) Utilize best practices according to Federal and State accounting guidelines.
2) Keep a balanced budget
3) Be transparent
4) Maintain a reserve fund
5) Identify & pursue new revenue sources

D) Fundraising / PR

Goal: Raise funds and awareness
Objectives:

1) Cultivate relationships with stakeholders/funders & expand donor database
2) Fundraising Events / Income
3) Maintain Media plan
4) Cultivate Board/Client and Board/Staff involvement

E) Board Development

Goal: Maintain a strong and effective Board of Directors to lead the organization
Objectives:

1) Recruit passionate board members with Time, Talent, and Treasury
2) Strive for diversity among board members
3) Maintain a full board of directors
4) Assist the organization into the future
5) Maintain board involvement

F) Collaboration

Goal: Work with other agencies and stakeholders to assist in providing quality programming.
Objectives:

1) Provide support to clients in all areas needed through collaborations with community agencies.
2) Strengthen existing and build new relationships with stakeholders.
3) Collect alumni feedback regarding programming.

Operational Plan

Purpose: To outline short term annual goals that support the long term Strategic Plan.

A) Program

Goal: Maintain high standards for program operations

Objectives (numbered) & Metrics (lettered):

1) Utilize best practices:
   a) Evidence based practices will be utilized in services and measured. (e.g.Motivational Interviewing techniques; Cognitive Behavioral Therapy; Stages of Change model; ASAM criteria.) Documentation of the practices used in programming throughout the year will be reviewed by the Committee annually.
   b) Staff will participate in available training on evidence based practices and obtain CEUs in order to meet License and credentialing requirements as specified by DMHA and the Indiana Licencing Board.
2) Maintain high quality clinical documentation
   a) Chart Reviews will be conducted by Quality Assurance reviewers (both AH and Evansville subcontractor); reviewing a minimum of 16 charts per quarter. Goal of 90% compliance with documentation standards. Results will be reviewed with DMHA clinical reviewers when requested.
3) Maintain a high level program outcomes
   a) The Executive Director will review quarterly DMHA outcomes to assure that standards set by DMHA are met.
   b) The Executive Director will review the grant outcomes reports to assure that goals are met as set for compliance with the grant. (CARES grant will be reviewed March & September of each year)
4) Improve client satisfaction
   a) Distribute Program Evaluation questionnaires to a minimum of 80% of clients completing the program as assigned to them with a goal of receiving 85% positive responses (i.e. “Agree” or “Strongly Agree”). Committee will review findings at Feb meeting in order to suggest any changes to improve client satisfaction.

B) Organizational

Goal: Improve service quality by increasing efficiency

Objectives (numbered) & Metrics (lettered):

1) Hire quality, and qualified staff
   a) Outpatient Therapists must have a Master’s Degree , and have obtained or are working toward at least one of the following licenses-LMFT, LCSW, LCAC, LMHC.
   b) Case Managers are encouraged to work toward ICAADA substance abuse certification.
2) Support staff in continuing education and credentialing.
   a) Outpatient Counselors are encouraged to pursue clinical training.
   b) Continue paying for staff training and a portion of the cost to obtain credentials.
3) Strive for staff diversity

a) Demonstrate an awareness of, respect for, and attention to diversity by striving to hire diverse staff.
b) Provide cultural diversity training for staff minimum of 2-3 times per year.

4) Maintain staff professionalism and accountability
    a) Emphasize staff professionalism.
    b) Supervisors must complete annual staff evaluations on a timely basis.
    c) Staff required to obtain ratings of 3.5 or higher on annual performance evaluations, aiming for a rating of 4 or above on quality and quantity of work.
5) Protect the equity and value of physical assets by regular maintenance
    a) Develop a maintenance schedule for repairs and a system for reporting repair requests. (monthly walk thru, report to Safety Committee).
    b) Address maintenance issues in a timely manner.
6) Utilize new technologies as they become available
    a) Develop and adhere to a technology replacement schedule and adjust yearly budget accordingly.
    b) Continue to explore new technologies and pay for training opportunities.

C) Financial

Goal: Ensure fiscal responsibility

Objectives (numbered) & Metrics (lettered):

1) Utilize best practices according to Federal and State accounting guidelines.
    a) All annual audits without any adverse findings
    b) Adhere to the Line of Credit Policy guidelines
    c) Maintain 80% capacity at the houses and outpatient groups
    d) Review the net benefit of our Evansville sub-contract annually
2) Keep a balanced budget
    a) Yearly positive cash flow
3) Be transparent
    a) Make financial statements available for review for public by request
    b) Finance Committee meet a min of 10 months out of the year to review finances
    c) Finance Committee will include a min of 2 board members
4) Maintain a reserve fund
    a) Maintain cash reserve of 3 months' worth of expenses $375,000.
    b) Continue to add funds into the investment account as funds are available.
    c) Add budgeted depreciation minus any capital outlays into our depreciation savings account with a cap of $50,000.
5) Identify & pursue new revenue sources
    a) Continue to watch for and review new revenue opportunities

D) Fundraising / PR

Goal: Raise funds and awareness

Objectives (numbered) & Metrics (lettered):

1) Cultivate relationships with stakeholders/funders & expand donor database
    a) Talk to members of the community regarding AH on a monthly basis
2) Fundraising Events / Income
    a) Set a fundraising goal annually

b) Host minimum of 1-2 events annually that focus on fundraising

3) Maintain Social Media plan
    a) Utilize e-Newsletters, Facebook, Instagram, Twitter, and our website.
4) Cultivate Board/Client and Board/Staff involvement
    a) Board members attend annual *Celebration of Recovery* event
    b) Board members attend house meetings and annual Holiday dinner
    c) Encourage all staff and board members to attend Annual Board / Staff Retreat and all fundraising events.
    d) Goal is 80% attendance. We will track attendance at above events and report to the board.

E) Board Development

Goal: Maintain a strong and effective Board of Directors to lead the organization

Objectives (numbered) & Metrics (lettered):

1) Recruit passionate board members with Time, Talent, and Treasury
    a) Recruit members that are able to committee time to attend meetings and functions.
    b) Utilize board member's talents to support the agency.
    c) Increase financial support from board members yearly. All board members make at least one contribution annually. Promote the use of NAP credit purchases by board members.
2) Strive for diversity among board members
    a) Diversify board composition
3) Maintain a full board of directors
    a) Strive for 10 active board members
4) Assist the organization into the future
    a) Continue to complete orientation for new board members including facility tours and providing board binders.
    b) Increase board member knowledge, awareness, and appreciation of our organizational mission by requiring board members to attend at least one house meeting per year, the annual board retreat, and attend special events.
5) Maintain board involvement
    a) Promote ongoing participation with fundraising events.
    b) Promote ongoing participation with assigned committee(s).
    c) Stress importance of attending board meetings and getting a proxy if needed.

F) Collaboration

Goal: Work with other agencies and stakeholders to assist in providing quality programming.

Objectives (numbered) & Metrics (lettered):

1) Provide support to clients in all areas needed through collaborations with community agencies.
    a) Network with local agencies for resources to serve our clients' needs, by maintaining a list of identified client needs and the agencies with which AH has collaborated to address clients' needs.
2) Strengthen existing and build new relationships with stakeholders.

a) Communicate program successes and needs of agency with stakeholders through social media and community events,
b) Create and distribute an annual executive summary to community contacts.
c) Continue to sponsor community events; maintain a list of events held throughout the year and approximate number of attendants and/or attendance of important stakeholders.
e) Amethyst HouseAdmissions Coordinator will provide outreach to treatment programs and criminal justice facilities throughout the State of Indiana.

3) Collect alumni feedback regarding programming.
   a) Collect feedback from AH alumni through Program Evaluation forms and exit interviews. Goal: 95% of clients completing the program will have an exit interview and 80% will complete a Program Evaluation (it is voluntary participation). Results of these evaluations will be reviewed by Program Committee annually in order to monitor quality of services and assess if any changes are needed.