

# **Rappahannock Area Community Services Board**



## **Strategic Plan**

**July 2025 - June 30, 2028**

## Introduction

The Rappahannock Area Community Services Board (RACSB) is one of 39 community services boards and one behavioral health authority throughout the Commonwealth of Virginia.

Community Services Boards (CSB) are established by local governments and are responsible for delivering community-based mental health, developmental disability, substance use, and prevention services either directly or through contracts with private providers.

CSBs are the single points of entry into publicly funded mental health, developmental disability, and substance use services, with responsibility and authority for assessing individual needs, accessing a strategic array of services and supports, and managing state-controlled funds for community-based services. CSBs focus on providing individualized, effective, and flexible treatment, habilitation, and prevention services in the most accessible and integrated setting possible. CSBs draw upon available community resources along with individuals' natural support systems to decrease the impacts of mental health disabilities, substance use disorders, developmental disabilities; to encourage growth and development; to support recovery and self-determination; and to help individuals reach their fullest potential.

As a partner with the Virginia Department of Behavioral Health and Developmental Services (DBHDS) and other stakeholders, RACSB shares a desire for the system of care to excel in the delivery and continuity of services for individuals and their families. A collaborative strategic planning process helps identify the needs of individuals and guides operational decisions that contribute to effective care.

Mission, vision, and values are essential components of a strategic plan because they provide a clear foundation and direction for an organization's goals and actions. The **mission** defines the organization's purpose and reason for existence, guiding day-to-day operations. The **vision** includes clear and concise guiding principles reflecting a culture applicable to employees, stakeholders, community partners, and individuals served. The **values** represent the core principles and beliefs that shape the organization's culture and decision-making. Together, these elements ensure that strategic initiatives are consistent, focused, and reflective of the organization's identity.

## Mission

RACSB is dedicated to education, recovery, treatment, and wellness of Planning District 16 residents affected by mental health, substance use disorders, and developmental disabilities.

## Vision

Spark Hope. Support Hope. Spread Hope.

## Values

Inclusion. Collaboration. Integrity. Resilience. Excellence and Innovation

## Accreditation and Compliance

RACSB behavioral health programs and services have received international accreditation by CARF (Commission on Accreditation of Rehabilitation Facilities) for the past 27 years. The following programs have received three-year accreditations on recognized standards of quality in the provision of outcomes driven programs and services:

- Case Management/Services Coordination: Integrated Alcohol and Other Drug (AOD)/Mental Health (MH) (Adults);
- Case Management/Services Coordination: Integrated Alcohol and Other Drug (AOD)/Mental Health (MH) (Children and Adolescents);
- Community Housing Mental Health (Adults);
- Community Integration: Psychosocial Rehabilitation (Adults);
- Drug Court Treatment: Integrated: Alcohol and Other Drug (AOD)/Mental Health (MH)(Adults);
- Drug Court Treatment: Integrated: Alcohol and Other Drug (AOD)/Mental Health (MH) (Children and Adolescents);
- Outpatient Treatment: Integrated Alcohol and Other Drug (AOD)/Mental Health (MH) (Adults);
- Outpatient Treatment: Integrated Alcohol and Other Drug (AOD)/Mental Health (MH) (Children and Adolescents);
- Supported Living: Mental Health (Adults); and
- Crisis Stabilization Program

In addition to achieving compliance with international standards developed by CARF, RACSB consistently maintains compliance with the Virginia Department of Behavioral Health and Developmental Services licensure standards.

## Input to Strategic Plan

Cooperation with other service providers, community agencies, and statewide organizations ensures a comprehensive response to the community's behavioral health and developmental disability needs. Therefore, RACSB sought input through a variety of methods, including an online survey which was posted on the agency website, promoted via social media, and sent by email to community partners and leaders. This survey garnered 162 responses.

Additionally, the strategic plan workgroup reviewed survey responses from the H-3 Employee Survey which identified areas of strengths and weakness in the area of employee engagement. Finally, the workgroup reviewed the responses to the most recent point-in-time survey, which provides individuals served an opportunity to provide feedback on the services they have received.

In addition to survey responses, the workgroup reviewed the Rappahannock Area Health District (RAHD) and Mary Washington Healthcare's Community Health Assessment and Community Health Improvement Plan (CHIP) which identifies mental health and access to healthcare as two of top three priorities for the region. This assessment occurred from 2024 to 2025 and a plan was developed to last from July 2025 through June 2028. The workgroup also reviewed DBHDS' strategic plan and key performance initiatives as well as KFF's Mental Health and Substance Use State Fact sheet for Virginia.

## Community

Based on the estimated 2024 data from the Weldon Cooper Center (WCC), the population for the areas served by RACSB is 407,412. This is a 6.5% total increase from 2020, compared to a 1.9% increase for Virginia. Caroline County had the highest percentage of growth with 9.3%, followed by Spotsylvania County with 7.1%. The WCC projects that the population for areas served by RACSB will grow to 431,060 by 2030. During FY24, RACSB provided 14,672 individuals with mental health services, 1,193 individuals with substance use services, and 3,828 individuals with developmental disability services. Additionally, the agency reached more than 36,096 community members through prevention trainings.

## Strategic Plan Priorities, Goals, and Key Performance Initiatives

RACSB has identified four priority areas to address during the next three years. These ambitious goals indicate organizational priorities and directly support the agency's mission. Each respective goal includes strategies to support successful implementation.

### Priority 1: Access to Services

#### Vision and Mission Alignment:

- To ensure equitable, timely, and comprehensive access to services for all individuals in our community.
- To reduce wait times and increase the capacity to serve more clients across programs.
- To simplify and streamline access to services.
- To increase awareness and reduce stigma around behavioral health and remove barriers that prevent clients from engaging in services.

Strengths/Weaknesses/Opportunities/Threats:

Strengths	Weaknesses	Opportunities	Threats
Serving populations not served elsewhere (SMI, underinsured, financially disadvantaged); going beyond code-mandated services to intentionally address gaps in our community; having facilities in each locality of PD16	Silos—demographic, financial, and bureaucratic; community presence, education, partnership, and awareness; knowledge of services; community engagement; need for more efficiency of processes; services aligned to need; lack of crisis services across continuum; dual-diagnosis; child-specific services; feedback from individuals/identification of support needs; lack of access to services; lack of appointment times; long waits for services; transportation barriers; plethora of programs and services and not having the resources for all of them	CRC funding; OAA (Opioid Abatement Authority) funding; new programs coming; additional waivers for individuals in our community; MH employment services funding through DMAS/DARS; community outreach, (schools, counselors, church groups, elders); innovative/non-traditional collaborations (higher learning institutes; private partners; high schools; SDOH Partners); communication (internal and external); Increasing need for our services; future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	DBHDS/DMAS-data, reporting, administrative, documentation requirements; transportation; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; rising need for services due to population increase, waiver population, economic impacts on behavioral health, and increased prevalence of behavioral health needs; political and regulatory issues and hurdles at the federal, state, and local levels; economic uncertainty at the federal, state, and local levels.

Strategic Goals:

By FY28, increase the total number of individuals served by 5%. Percentage of increase will be reviewed and adjusted annually to reflect the met/unmet need.

By the end of FY26, 100% of programs will establish a metric to measure access to services using the model below, establishes a benchmark, and a percentage for improvement.

By FY28, 100% of programs will demonstrate improvement on their specific access measure.  
By the end of FY28, increase individuals' access to services as measured by \_\_\_\_\_ by \_\_\_\_% from baseline established during FY26.

Key Performance Initiatives by Fiscal Year:

<b>Priority 1: Access To Services</b>
<b>Year 1: July 2025-June 2026</b>
Strategy 1: By June 2026, 50% of individuals receive first service within 10 days of request for service and receive their next two services within 30 days.

Strategy 2: By June 2026, RACSB will secure a facility and begin construction/renovation for re-located Adult CSU, new Adult CRC, Child CSU, and Child CRC. Staffing plan, operational budget, and draft policies and procedures manual will be developed for each of the three new services.

Strategy 3: By June 2026, 80% of individuals assigned a waiver will have a service plan developed and active within 90 days of waiver allocation.

Strategy 4: By June 2026, a plan will be developed to expand access to I/DD Community Engagement day support services. A metric and a benchmark will be developed to measure progress for the next two years of the plan.

Strategy 5: By June 2026, RACSB will partner with four additional middle schools to provide substance use prevention education.

#### **Year 2: July 2026-June 2027**

Strategy 1: By FY2028, 60% of individuals receive first service within 10 days of request for service and receive their next two services within 30 days.

Strategy 2: By June 2027, construction/renovation will be completed for Adult CSU, Adult CRC, Child CSU, and Child CRC. Hiring processes will start. Adult CSU services and CRC services will be provided by August 2027 and Child CSU and CRC services by March 2028. A benchmark of individuals to be served will be established during the final year of the plan.

Strategy 3: By June 2027, 80% of individuals assigned a waiver will have a service plan developed and active within 60 days of waiver allocation.

Strategy 4: The plan to expand access to I/DD Community Engagement day support services will be monitored using the metric and benchmark established in Year 1.

Strategy 5: By June 30, 2027, RACSB will partner with six additional middle schools to provide substance use prevention education.

#### **Year 3: July 2027-June 2028**

Strategy 1: By June FY2028, 70% of individuals receive 1st service within 10 days of request for service and receive their next two services within 30 days.

Strategy 2: By June 2028, a minimum number of individuals will be served in each of the four crisis services as established in Year 2.

Strategy 3: By June 2028, 90% of individuals assigned a waiver will have a service plan developed and active within 60 days of waiver allocation.

Strategy 4: The plan to expand access to I/DD Community Engagement day support services will be monitored using the metric and benchmark established in Year 1.

By June 30, 2028, 15% of middle school students within Planning District 16 will receive prevention education on the topics of alcohol, tobacco/vaping, and other drugs.

## Priority 2: Effective and Quality Services

### Vision and Mission Alignment:

- To be a trusted leader in delivering accessible, person-centered, and evidence-based care that improves the lives of individuals and strengthens communities.
- To provide high-quality, inclusive, and culturally responsive programs and services that empower individuals and families to achieve emotional wellness and recovery.
- To empower individuals to live fulfilling, inclusive lives through access to high-quality, person-centered programs and services in a supportive community.
- To deliver and advocate for comprehensive, individualized, and community-integrated supports that enhance the well-being, independence, and inclusion of individuals served.

### Strengths/Weaknesses/Opportunities/Threats:

Strengths	Weaknesses	Opportunities	Threats
Best practices/compliance; RACSB goes beyond code-mandated services to intentionally address gaps in our community; community-based training	Plethora of programs and services and not having the resources for all of them; need for more efficiency of processes; Services aligned to need; lack of crisis services across continuum; dual-diagnosis; children-specific services; feedback from individuals/Identification of support needs; insufficient technology.	CRC funding; OAA (Opioid Abatement Authority) funding; new programs coming; additional waivers for individuals in our community; MH Employment services funding through DMAS/DARS; innovative/non-traditional collaborations (higher learning institutes; private partners; high schools; SDOH Partners); communications (internal and external); future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	DBHDS/DMAS-data, reporting, administrative, documentation requirements; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; increased need for services due to population increase, waiver population, economic impacts on behavioral health, higher levels of the prevalence of behavioral health needs; political and regulatory issues and hurdles at the federal, state, and local levels; economic uncertainty at the federal, state, and local levels

### Strategic Goals:

By the end of FY2026, 100% of programs will establish a metric to measure effectiveness using the model below, establishes a benchmark, and a percentage for improvement. By FY2028, 100% of programs will demonstrate improvement on their specific access measure.

By the end of FY2028, increase the percent of individuals demonstrating improvement and sustainability as measured by \_\_\_\_\_ by \_\_\_\_% from baseline established during FY\_\_\_\_.

Key Performance Initiatives by Fiscal Year:

Priority 2: Effective and Quality Services
Year 1: July 2025-June 2026
Strategy 1: By June 2026, RACSB will complete a gap assessment to identify actions needed to move towards CCBHC.
Strategy 2: By June 2026, RACSB will establish a consumer-based net promoter score process and set performance benchmarks for the next two years.
Strategy 3: By June 2026, RACSB will identify collaborative partnerships and begin to formalize with MOUs. RACSB will identify community engagement events and track attendance. Benchmarks will be set for next two year to increase formalized MOUs for partnerships and to monitor community engagement events attended by RACSB.
Strategy 4: By June 2026, RACSB will complete a gap assessment to identify actions needed to move towards offering primary care services.
Year 2: July 2026-June 2027
Strategy 1: By August 2026, RACSB will create and start the implementation of a work plan to address CCBHC gaps and move the agency towards meeting required criteria.
Strategy 2: By June 2027, net consumer promoter score will meet the benchmark established in year one as measured quarterly.
Strategy 3: By June 2027, RACSB will meet the benchmarks to increase formalized MOUs for partnerships and meet benchmarks for community engagement events attended by RACSB as defined in Year 1.
Strategy 4: By June 2027, complete construction/renovation for co-located primary care services and finalize staffing model and program policies/procedures.
Year 3: July 2027-June 2028
Strategy 1: By June 2028, RACSB will meet all criteria in the CCBHC certification checklist and obtain CARF CCBHC accreditation during the next survey Fall 2028.
Strategy 2: By June 2028, net consumer promoter score will meet the benchmark established in year one as measured quarterly.
Strategy 3: By June 2028, RACSB will meet the benchmarks to increase formalized MOUs for partnerships and meet benchmarks for community engagement events attended by RACSB as defined in Year 1.
Strategy 4: By December 2027, RACSB will begin to deliver co-located primary care services.

### Priority 3: Staff Retention, Workforce Support, and Talent Development

Vision and Mission Alignment:

- To enhance employee retention and engagement to support a resilient and high-performing workforce aligned with RACSB's mission that delivers equitable and high-quality care to the community.



- To recruit, develop, and retain a competent and compassionate workforce through training, leadership development, and employee well-being initiatives while building a positive culture of service.

Strengths/Weaknesses/Opportunities/Threats:

Strengths	Opportunities	Weaknesses	Threats
Quality and competent staff; resilience during uncertain times; Board of Directors; recruiting and training; access to training and resources; competitive benefits to include strong compensation package	Professional and personal growth with educational reimbursement; innovative/non-traditional collaborations (higher learning institutes; private partners; high schools; SDOH partners); communications (internal and external); future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	Gap in decision making and communication (staff survey); lack of recognition and praise of staff, lack of flexible work schedule/work life balance; staff burnout/workload maintenance; feedback from staff/identification of employees' support needs; silos—demographic, financial, and bureaucratic; need for middle management training; cross-training overall; need for more efficiency of processes	DBHDS/DMAS-data, reporting, administrative, documentation requirements; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; political and regulatory issues and hurdles at the federal, state, and local levels; economic uncertainty at the federal, state, and local levels

Strategic Goals:

By the end of FY2028, increase employee retention as demonstrated by annual turnover rate of 15% or less and achieve a staff engagement score of at least 80% on the annual engagement survey.

Key Performance Initiatives by Fiscal Year:

Priority 3: Staff retention, workforce support, and talent development
Year 1: July 2025-June 2026
Strategy 1: By December 2025, RACSB will design and implement an employee engagement survey and use results to establish a benchmark for measuring key engagement areas for the next two years.

Strategy 2: By June 2026, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB will develop a structured stay interview process and survey and conduct them with 50% of staff with the goal of 100% of staff within the three-year period.

Strategy 3: By June 2026, RACSB will conduct a needs analysis around employee leadership development needs and create a curriculum and a plan to define and grow leadership program.

#### **Year 2: July 2026-June 2027**

Strategy 1: By October 2026, RACSB will meet the established benchmarks for key engagement areas on the employee engagement survey.

Strategy 2: By June 2027, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB conduct stay interview process with 75% of staff with the goal of 100% of staff within the three-year period.

Strategy 3: By June 2027, \_\_\_\_ number of employees will engage in the leadership program, per the benchmark established in Year 1.

#### **Year 3: July 2027-June 2028**

Strategy 1: By October 2027, RACSB will meet the established benchmarks for key engagement areas on the employee engagement survey.

Strategy 2: By June 2028, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB conduct stay interview process with 100% of staff within the three-year period.

Strategy 3: By June 2028, \_\_\_\_ number of employees will engage in the leadership program, per benchmark established in Year 1.

## **Priority 4: Fiscal and Operational Excellence**

### *Vision and Mission Alignment:*

- To optimize resource use, streamline processes, and embrace data-driven decision-making to ensure that services remain sustainable, responsive, and high quality.
- To enable RACSB to extend its reach, reduce barriers to care, and invest more deeply in innovative, evidence-based practices—advancing both the impact in the communities served and financial stewardship.
- To provide timely, effective, and accessible service provision by streamlining operations and maximizing resources.

Strategic Goals:

By the end of FY2028, increase year-end positive variance to 1%.

Create a sustainability plan to reaching towards a balance budget within 3 years for each program within X time frame

Strengths/Weaknesses/Opportunities/Threats:

Strengths	Opportunities	Weaknesses	Threats
Robust reserve funds	CRC funding; OAA (Opioid Abatement Authority) funding; new programs coming; additional waivers; MH Employment services funding through DMAS/DARS; increasing need for services; future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	Silos—demographic, financial, and bureaucratic; need for more efficiency of processes; lack of consistency in funding resources; Insufficient technology; plethora of programs and services without having the resources for all of them	DBHDS/DMAS-data, reporting, administrative, documentation requirements; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; political and regulatory issues and hurdles at the federal, state, and local levels, economic uncertainty at the federal, state, and local levels

Strategic Goals:

By the end of FY2028, increase year-end positive variance to 1%.

Create a sustainability plan to reaching towards a balance budget within three years for each program.

Key Performance Initiatives by Fiscal Year:

Priority 4: Fiscal and Operational
Year 1: July 2025-June 2026
Strategy 1: By June 2026, each program will develop a sustainability, staffing, and succession plan.
Strategy 2: By June 2026, RACSB will collect data, establish consistent measurement metrics, and establish benchmarks to monitor time from service to documentation completion.

Strategy 3: By June 2026, 100% of programs audited will have a minimum comparative score of 75 on audits.
Strategy 4: By June 2026, RACSB will complete costing engagement through MTM Consulting and present results to Board of Directors.
Strategy 5: By June 2026, RACSB staff will complete a workflow and documentation map process for five programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.

<b>Year 2: July 2026-June 2027</b>
Strategy 1: By June 2027, RACSB will complete RFP and procurement process to update financial systems, to include at minimum the general ledger system.
Strategy 2: By June 2027, RACSB will meet the Year 1 benchmarks on established performance metrics for time from service to documentation completion.
Strategy 3: By June 2027, 100% of programs audited will have a minimum comparative score of 80 on audits.
Strategy 4: By June 2027, RACSB will develop cost reporting dashboard using the information from the MTM engagement.
Strategy 5: By June 2027, RACSB staff will complete a workflow and documentation map process for five additional programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.

<b>Year 3: July 2027-June 2028</b>
Strategy 1: By June 2028, RACSB will have applied for a minimum of 15 grant opportunities during the three-year plan period.
Strategy 2: By June 2028, RACSB will meet the Year 2 benchmarks on established performance metrics for time from service to documentation completion.
Strategy 3: By June 2028, 100% of programs audited will have a minimum comparative score of 90 on audits.
Strategy 4: By June 2028, RACSB staff will complete a workflow and documentation map process for five additional programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.

## **Evaluation and Continuous Quality Improvement**

RACSB Executive Leadership Team in partnership with the Board of Directors will be responsible for consistent evaluation and continuous quality improvement of this strategic plan. In quarterly reviews held during Board of Directors' meetings, the group will monitor progress on goals and adjust strategies as needed. The RACSB strategic plan is intended to be a living document and will be adjusted based on performance feedback no less than annually. The plan establishes consistent staff, community and stakeholder feedback loops which will be used to guide improvement.

## **Governance and Accountability**

RACSB Executive Leadership Team in partnership with the Board of Directors will be responsible for the governance of the plan. A workgroup of executive leadership and Board of Directors, or the Strategic

Plan Steering Committee, was created to guide the development and implement the plan. This group will meet as needed to refine and update the plan. Project leads have been established for each strategic goal and initiative. The position identified as project lead will be accountable for implementing and reporting progress for each of the assigned goals/initiatives.

## Priority 1: Access to Services

### Vision and Mission Alignment:

- To ensure equitable, timely, and comprehensive access to services for all individuals in our community.
- Reduce wait times and increase the capacity to serve more clients across programs.
- Simplify and streamline access points to services.
- Increase awareness and reduce stigma around behavioral health. Remove barriers that prevent clients from engaging in services.

### Strategic Goals:

- By FY2028, increase the total number of individuals served by 5%. Percentage of increase will be reviewed and adjusted annually to reflect the met/unmet need.
- By the end of FY2026, 100% of programs will establish a metric to measure access to services using the model below, establishes a benchmark, and a percentage for improvement.
- By FY2028, 100% of programs will demonstrate improvement on their specific access measure.
- By the end of FY2028, increase individuals' access to services as measured by \_\_\_\_\_ by \_\_\_\_% from baseline established during FY\_\_\_\_\_.

### Strengths/Weaknesses/Opportunities/Threats:

Strengths	Weaknesses	Opportunities	Threats
Serving populations not served elsewhere (SMI, underinsured, financially disadvantaged); RACSB goes beyond code mandated services to intentionally address gaps in our community; having facilities in each locality of PD16	Silos—demographic, financial, bureaucratic; community presence, education, partnerships, and awareness; knowledge of services; community engagement; need for more efficiency of processes; services aligned to need; lack of crisis services across continuum; dual-diagnosis; child-specific services; feedback from individuals/identification of support needs; lack of access to services; lack of appointment times; long waits for services; transportation barriers; plethora of programs and services and not having the resources for all of them	CRC funding; OAA (Opioid Abatement Authority) funding; new programs coming; additional waivers for individuals in our community; MH Employment services funding through DMAS/DARS; community outreach (schools, counselors, church groups, elders); innovative/non-traditional collaborations higher learning institutes, private partners, high schools, SDOH partners); communications (internal and external); increasing need for our services; future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	DBHDS/DMAS-data, reporting, administrative, documentation requirements; transportation; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; increased need for services due to population increase, waiver population, economic impacts on behavioral health, higher levels of the prevalence of behavioral health needs; political and regulatory issues and hurdles at the federal, state, and local levels; economic uncertainty at the federal, state, and local levels

<b>Priority 1: Access To Services</b>
<b>Year 1: July 2025-June 2026</b>
Strategy 1: By June 2026 50% of individuals receive first service within 10 days of request for service and receive their next two services within 30 days.
Strategy 2: By June 2026, RACSB will secure a facility and begin construction/renovation for re-located Adult CSU, new Adult CRC, Child CSU, and Child CRC. Staffing plan, operational budget, and draft policies and procedures manual will be developed for each of the three new services.
Strategy 3: By June 2026, 80% of individuals assigned a waiver will have a service plan developed and active within 90 days of waiver allocation.
Strategy 4: By June 2026, a plan will be developed to expand access to I/DD Community Engagement day support services. A metric and benchmark will be established to measure progress for final two years of the plan.
Strategy 5: By June 2026, RACSB will partner with four additional middle schools to provide substance use prevention education.
<b>Year 2: July 2026-June 2027</b>
Strategy 1: By FY2028, 60% of individuals will receive first service within 10 days of request for service and receive their next two services within 30 days.
Strategy 2: By June 2027, construction/renovation will be completed for re-located Adult CSU, new Adult CRC, Child CSU, and Child CRC. Hiring processes will start. Adult CSU services and CRC services will be provided by August 2027. Child CSU and CRC services will be provided by March 2028. A benchmark number of individuals to be served will be established during the final year of the plan.
Strategy 3: By June 2027, 80% of individuals assigned a waiver will have a service plan developed and active within 60 days of waiver allocation.
Strategy 4: The plan to expand access to I/DD Community Engagement day support services will be monitored using the metric and benchmark established in Year 1.
Strategy 5: By June 30, 2027, RACSB partner with six additional middle schools to provide substance use prevention education.
<b>Year 3: July 2027-June 2028</b>
Strategy 1: By June FY2028, 70% of individuals receive 1st service within 10 days of request for service and receive their next two services within 30 days.
Strategy 2: By June 2028, a minimum number of individuals will be served in each of the four crisis services as established in Year 2.
Strategy 3: By June 2028, 90% of individuals assigned a waiver will have a service plan developed and active within 60 days of waiver allocation.
Strategy 4: The plan to expand access to I/DD Community Engagement day support services will be monitored using the metric and benchmark established in Year 1.
Strategy 5: By June 2028, 15% of middle school students within Planning District 16 will receive prevention education on the topics of alcohol, tobacco/vaping, and other drugs.

## Priority 2: Effective and Quality Services

### Vision and Mission Alignment:

- To be a trusted leader in delivering accessible, person-centered, and evidence-based care that improves the lives of individuals and strengthens communities.
- To provide high-quality, inclusive, and culturally responsive programs and services that empower individuals and families to achieve emotional wellness and recovery.
- To empower individuals to live fulfilling, inclusive lives through access to high-quality, person-centered programs and services in a supportive community.
- To deliver and advocate for comprehensive, individualized, and community-integrated supports that enhance the well-being, independence, and inclusion of individuals served.

### Strengths/Weaknesses/Opportunities/Threats:

Strengths	Weaknesses	Opportunities	Threats
Best practices/compliance; RACSB goes beyond code-mandated services to intentionally address gaps in our community; community-based training	Plethora of programs and services and not having the resources for all of them; need for more efficiency of processes; services aligned to need; lack of crisis services across continuum; dual-diagnosis; child-specific services; feedback from individuals/Identification of support needs; insufficient technology.	CRC funding; OAA (Opioid Abatement Authority) funding; new programs coming; additional waivers for individuals in our community; MH Employment services funding through DMAS/DARS; innovative/non-traditional collaborations (Higher learning institutes, private partners, high schools; SDOH Partners); communications (internal and external); future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	DBHDS/DMAS-data, reporting, administrative, documentation requirements; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; increased need for services due to population increase, waiver increase, economic impacts on behavioral health, higher levels of the prevalence of behavioral health needs; political and regulatory issues and hurdles at the federal, state, and local levels; economic uncertainty at the federal, state, and local levels

### Strategic Goals:

By the end of FY2026, 100% of programs will establish a metric to measure effectiveness using the model below and will establish a benchmark and a target percentage for improvement. By FY2028, 100% of programs will demonstrate improvement on their specific access measure.

By the end of FY2028, increase the percent of individuals demonstrating improvement and sustainability as measured by \_\_\_\_\_ by \_\_\_\_% from baseline established during FY\_\_\_\_.



Key Performance Initiatives by Fiscal Year:

Priority 2: Effective and Quality Services
Year 1: July 2025-June 2026
Strategy 1: By June 2026, RACSB will complete a gap assessment to identify actions needed to move toward CCBHC.
Strategy 2: By June 2026, RACSB will establish a consumer-based net promoter score process and set performance benchmarks for the next two years.
Strategy 3: By June 2026, RACSB will identify collaborative partnerships and begin to formalize with MOUs. RACSB will identify community engagement events and track attendance. Benchmarks and metrics will be set for next two year to increase formalized MOUs for partnerships and to monitor community engagement events attended by RACSB.
Strategy 4: By June 2026, RACSB will complete a gap assessment to identify actions needed to move toward offering primary care services.
Year 2: July 2026-June 2027
Strategy 1: By August 2026, RACSB will create and start the implementation of a work plan to address CCBHC gaps and move the agency towards meeting all required criteria.
Strategy 2: By June 2027, the net consumer promoter score will meet the benchmark established in year one as measured quarterly.
Strategy 3: By June 2027, RACSB will meet the benchmarks to increase formalized MOUs for partnerships and meet benchmarks for community engagement events attended by RACSB as defined in Year 1.
Strategy 4: By June 2027, construction/renovation will be completed for co-located primary care services and finalize staffing model and program policies/procedures.
Year 3: July 2027-June 2028
Strategy 1: By June 2028, RACSB will meet all criteria in the CCBHC certification checklist and obtain CARF CCBHC accreditation during the next survey in 2028.
Strategy 2: By June 2028, the net consumer promoter score will meet the benchmark established in year one as measured quarterly.
Strategy 3: By June 2028, RACSB will meet the benchmarks to increase formalized MOUs for partnerships and meet benchmarks for community engagement events attended by RACSB as defined in Year 1.
Strategy 4: By December 2027, RACSB will begin to deliver co-located primary care services.

Priority 3: Staff retention, workforce support, and talent development

Vision and Mission Alignment:

- To enhance employee retention and engagement to support a resilient and high-performing workforce aligned with RACSB's mission that delivers equitable and high-quality care to the community.
- To recruit, develop, and retain a competent and compassionate workforce through training, leadership development, and employee well-being initiatives while building a positive culture of service.

Strategic Goals:

By the end of FY2028, increase employee retention as demonstrated by annual turnover rate of 15% or less and achieve a staff engagement score of at least 80% on the annual engagement survey.

Strengths/Weaknesses/Opportunities/Threats:

Strengths	Opportunities	Weaknesses	Threats
Quality and competent staff; resilience during uncertain times; Board of Directors; recruiting and training; access to training and resources; competitive benefits package to include strong compensation package	Professional and personal growth with educational reimbursement; innovative/non-traditional collaborations (higher learning institutes, private partners, high schools, SDOH partners); communications (internal and external); future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	Gap in decision making and communication (staff survey); lack of recognition and praise of staff; lack of flexible work schedule/work life balance; staff burnout/workload maintenance, feedback from staff/identification of support needs; silos—demographic, financial, bureaucratic; need for middle management training; cross-training overall; need for more efficiency of processes	DBHDS/DMAS-data, reporting, administrative, documentation requirements; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased cost of living; political and regulatory issues and hurdles at the federal, state, and local levels; economic uncertainty at the federal, state, and local levels

**Priority 3: Staff retention, workforce support, and talent development****Year 1: July 2025-June 2026**

Strategy 1: By December 2025, RACSB will design and implement an employee engagement survey and use results to establish a benchmark for measuring key engagement areas for the next two years.

Strategy 2: By June 2026, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB will develop a structured stay interview process and survey and conduct them with 50% of staff with the goal of 100% of staff within the three-year period.

Strategy 3: By June 2026, RACSB will conduct a needs analysis around employee leadership development needs and develop a curriculum and plan to define and increase development of leadership program.

**Year 2: July 2026-June 2027**

Strategy 1: By October 2026, RACSB will meet the established benchmarks for key engagement areas on the employee engagement survey.

Strategy 2: By June 2027, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB conduct stay interview process with 75% of staff with the goal of 100% of staff within the three-year period.

Strategy 3: By June 2027, \_\_\_\_ number of employees will engage in the leadership program, per benchmark established in Year 1.

**Year 3: July 2027-June 2028**

Strategy 1: By October 2027, RACSB will meet the established benchmarks measured key engagement areas on the employee engagement survey.

Strategy 2: By June 2028, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB conduct stay interview process with 100% of staff within the three-year period.

Strategy 3: By June 2028, \_\_\_\_ number of employees will engage in the leadership program, per benchmark established in Year 1.

#### Priority 4: Fiscal and Operational

##### Vision and Mission Alignment:

- To optimize resource use, streamline processes, and embrace data-driven decision-making to ensure that services remain sustainable, responsive, and high quality.
- To enable RACSB to extend its reach, reduce barriers to care, and invest more deeply in innovative, evidence-based practices—advancing both the impact in the communities served and financial stewardship.
- To provide timely, effective, and accessible service provision by streamlining operations and maximizing resources.

##### Strengths/Weaknesses/Opportunities/Threats:

Strengths	Opportunities	Weaknesses	Threats
Robust reserve funds	CRC funding; OAA (Opioid Abatement Authority) funding, new programs coming; additional waivers; MH Employment services funding through DMAS/DARS; increasing need for services; future data gathering and analysis; re-evaluation of organizational structure and maximizing organizational efficiencies	Silos—demographic, financial, bureaucratic; need for more efficiency of processes; lack of consistency in funding resources; insufficient technology; plethora of programs and services and not having the resources for all of them	DBHDS/DMAS-data, reporting, administrative, documentation requirements; inconsistent and insufficient funding that does not cover and/or match rates of inflation, unanticipated future expenses, or increased costs of living; political and regulatory issues and hurdles at the federal, state, and local levels, economic uncertainty at the federal, state, and local levels

##### Strategic Goals:

By the end of FY2028, increase year-end positive variance to 1%.

A sustainability plan will be created to move toward a balance budget within three years for each program within X time frame

<b>Priority 4: Fiscal and Operational</b>
<b>Year 1: July 2025-June 2026</b>
Strategy 1: By June 2026, each program will develop a sustainability, staffing, and succession plan.
Strategy 2: By June 2026, RACSB will collect data, establish consistent measurement, and establish benchmarks to monitor time from service to documentation completion.
Strategy 3: By June 2026, 100% of programs audited will have a minimum comparative score of 75 on audits.
Strategy 4: By June 2026, RACSB will complete costing engagement through MTM Consulting and present results to Board of Directors.
Strategy 5: By June 2026, RACSB staff will complete a workflow and documentation map process for five programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.
<b>Year 2: July 2026-June 2027</b>
Strategy 1: By June 2027, RACSB will complete RFP and procurement process to update financial systems, to include at minimum the general ledger system.
Strategy 2: By June 2027, RACSB will meet the Year 1 benchmarks on established performance metrics for time from service to documentation completion.
Strategy 3: By June 2027, 100% of programs audited will have a minimum comparative score of 80 on audits.
Strategy 4: By June 2027, RACSB will develop cost reporting dashboard using the information from the MTM engagement.
Strategy 5: By June 2027, RACSB staff will complete a workflow and documentation map process for five additional programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.
<b>Year 3: July 2027-June 2028</b>
Strategy 1: By June 2028, RACSB will have applied for a minimum of 15 grant opportunities during the three-year plan period.
Strategy 2: By June 2028, RACSB will meet the Year 2 benchmarks established on performance metrics for time from service to documentation completion.
Strategy 3: By June 2028, 100% of programs audited will have a minimum comparative score of 90 on audits.
Strategy 4: By June 2028, RACSB staff will complete a workflow and documentation map process for five additional programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.

# Rappahannock Area Community Services Board Strategic Plan

## Year-One Profile

**Mission:** RACSB is dedicated to education, recovery, treatment, and wellness of Planning District 16 residents affected by mental health, substance use disorders and developmental disabilities.

### Vision

Spark Hope. Support Hope. Spread Hope.

### Values

Inclusion. Collaboration. Integrity. Resilience. Excellence and Innovation

Priority 1: Access To Services	Q1	Q2	Q3	Q4
By FY2028, increase total number of individuals served by 5%				
By June 2026, 100% of programs will develop a metric to measure access to services, establish a benchmark, and adopt a target percentage.				
Strategy 1: By June 2026, 50% of individuals receive first service within 10 days of initial request and receive their next two services within 30 days.				
Strategy 2: By June 2026, RACSB will secure a facility and begin construction/renovation for Adult CSU, Adult CRC, Child CSU, and Child CRC. Staffing plan, operational budget, and draft policies and procedures manual will be developed for each of the three new services.				
Strategy 3: By June 2026, 80% of individuals assigned a waiver will have a service plan developed and active within 90 days of waiver allocation.				
Strategy 4: By June 2026, a plan will be developed to expand access to I/DD Community Engagement day support services. A metric and benchmark will be established to measure progress for the next two years of the plan.				
Strategy 5: By June 2026, RACSB will partner with four additional middle schools to provide substance use prevention education.				
Priority 2: Effective and Quality Services	Q1	Q2	Q3	Q4
By June 2026, 100% of programs will develop a metric to measure effectiveness, establish a benchmark, and adopt a target percentage for improvement.				
Strategy 1: By June 2026, RACSB will complete a gap assessment to identify actions needed to move toward CCBHC.				
Strategy 2: By June 2026, RACSB will establish a consumer-based net promoter score process and set performance benchmarks for the next two years.				
Strategy 3: By June 2026, RACSB will identify collaborative partnerships and begin to formalize with MOUs. RACSB will identify community engagement events and track attendance. Benchmarks and metrics will be set for two years to increase formalized MOUs for partnerships and to monitor community engagement events attended by RACSB.				
Strategy 4: By June 2026, RACSB will complete a gap assessment to identify actions needed to move toward offering Primary Care Services.				
Priority 3: Staff retention, workforce support, and talent development	Q1	Q2	Q3	Q4
By the end of FY2028, increased employee retention will be demonstrated by annual turnover rate of 15% or less and achieve a staff engagement score of at least 80% on the annual engagement survey.				
Strategy 1: By December 2025, RACSB will design and implement an employee engagement survey and use results to establish a benchmark for measuring key engagement areas for the next two years.				
Strategy 2: By June 2026, RACSB will offer exit interviews and surveys to 100% of employees who voluntarily resign. RACSB will develop a structured stay interview process and survey and conduct them with 50% of staff with the goal of 100% of staff within the three-year period.				
Strategy 3: By June 2026, RACSB will conduct a needs analysis around employee leadership development and create a curriculum and a plan to define and grow leadership program.				
Priority 4: Fiscal and Operational	Q1	Q2	Q3	Q4
By the end of FY2028, increase year-end positive variance to 1%.				
Create a sustainability, staffing, and succession plan aiming for a balanced budget within three years for each program				
Strategy 1: By June 2026, each program will develop a sustainability, staffing, and succession plan.				
Strategy 2: By June 2026, RACSB will collect data, establish consistent measurement metrics, and establish benchmarks to monitor time from service to documentation completion.				
Strategy 3: By June 2026, 100% of programs audited will have a minimum comparative score of 85 on audits.				
Strategy 4: By June 2026, RACSB will complete costing engagement through MTM Consulting and present results to Board of Directors.				
Strategy 5: By June 2026, RACSB staff will complete a workflow and documentation map process for five programs. Any data element or documentation not currently required will be removed and data entry fields will be reduced.				