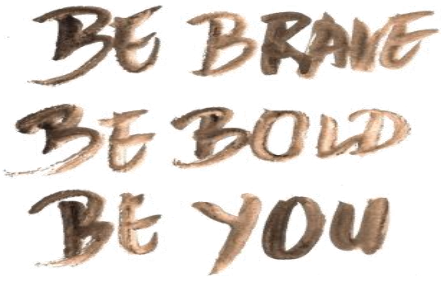
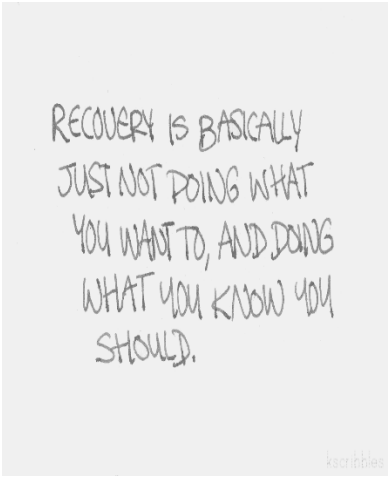




MEN AND WOMEN FOR HUMAN EXCELLENCE, INC (MWFHE)

STRATEGIC PLAN

FY2025-2027

PROMOTING HEALING, RESILIENCY, AND EMPOWERMENT THROUGH A HOLISTIC SYSTEM OF CARE.

- The Men and Women for Human Excellence, Inc. (MWFHE) is committed to providing compassionate, evidence-based care to those struggling with drugs and alcohol, mental health. medicated assisted treatment and stimulant abuse disorders.

Our FY2025-27 strategic plan focuses on five key areas:

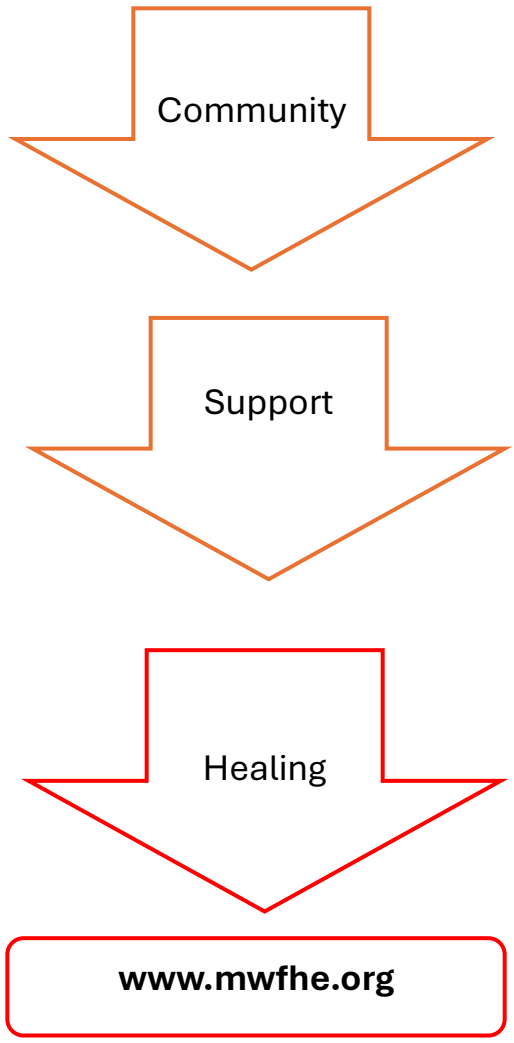
(I)	(II)	(III)	(IV)	(V)
Expanding access to care	Improve Client Engagement	Strengthen Recovery support system	Support Systems Outcomes	Grant Management

The MWFHE's modified **2025-27** Strategic Plan constitutes a dynamic, living document depicting the vision and guiding principles that govern this Agency's business practices. Our passionate dedication shines through as we pave the way for a comprehensive continuum of care that empowers individuals to overcome Meditated Assisted Treatment, Stimulate Use Disorder and Mental Health challenges. Building a strong support system for our clients.

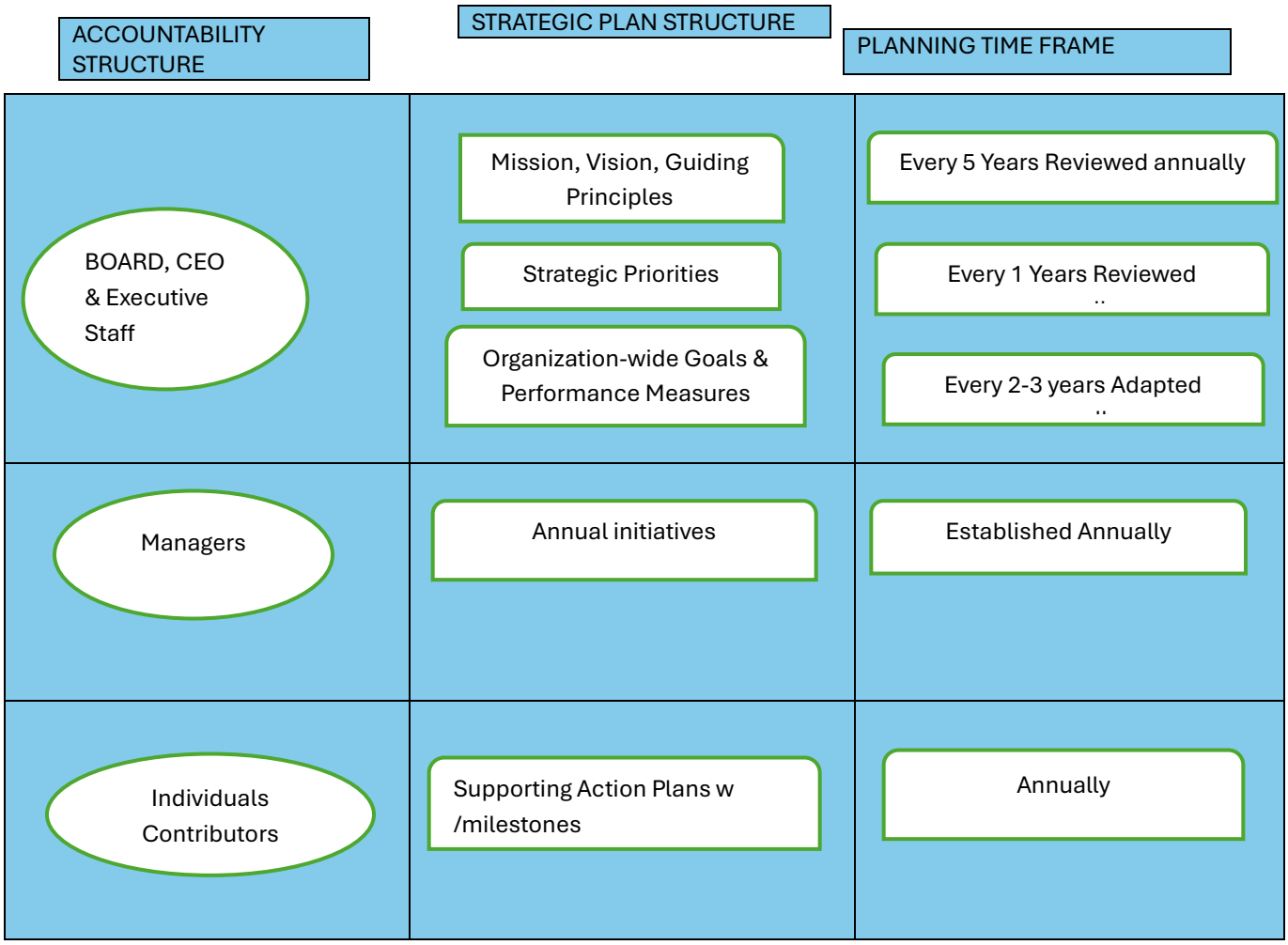
We fervently believe that every individual deserves the highest standard of individualized care. The MWFHE is unwavering in its commitment to delivering comprehensive, responsive services that meet the developmental, educational, and emotional needs of our valued consumers.

Join us in our quest for transformation, as we expand our reach and amplify our impact in 2025-27. In 2025-27, we're excited to announce our expansion into Decatur Ga, where we will continue to encourage change and transformation through the application of evidence-based treatment modalities from a person-centered perspective.

At the heart of our mission, we harness the potency of evidence-based, person-centered approaches to enable our clients to realize their goals. As a CARF® Accredited organization, we remain dedicated in delivering top-tier service and care that instills hope and bolsters resilience in those embarking on their recovery path.



MEN AND WOMEN FOR HUMAN EXCELLENCE INC. (MWFHE)
PLAN STRUCTURE AND ACCOUNTABILITY



Board, CEO and Executive Team

The Board, CEO and executive team play a big role in setting the foundation of a strategic plan by creating guiding organizational principles, articulating the strategic areas of focus, and creating the long-term goals that guide the organization to create aligned goals and actions to achieve its vision of success. The executive team is responsible for:

Mission, Vision, & Guiding Principles – These are the core foundational elements to MWFHE plan that tell our organization who we are, where we're going, and how we're going to operate. These principles encompass our organization's ethos and help serve as the foundation to our long-term strategy to achieve our vision of success. **These are updated every 2 years and reviewed by the executive team annually.**

Strategic Priorities – These are the long-term areas of strategic focus that are designed to achieve our vision of long-term success. These create the different pillars of our plan

and articulate the focus for each area. **These are updated every 2-3 years and reviewed by the executive team annually.**

Organization-Wide Goals and Performance Indicators – These are the long-term goals and performance indicators that begin to put action to paper to help achieve our strategic priorities. These goals and actions have a lifespan of 2-3 years **but are reviewed and adapted annually.**

Managers/Department Leaders

Managers and department leaders don't have as much responsibility during the plan creation process but drive our organization to create the annual department goals that support the organization's goals and performance indicators. Managers and department leaders are responsible for:

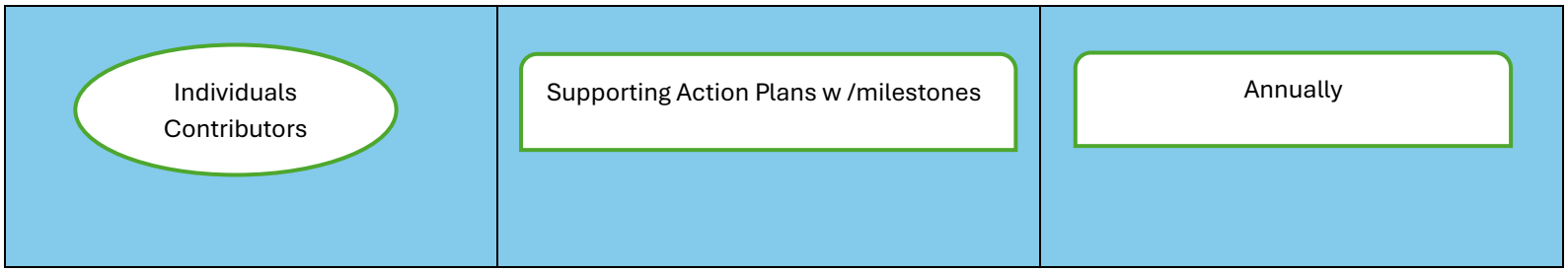
Annual Goals – Department leaders and managers create and execute the annual department goals that align and support the organization-wide goals and performance indicators. **These goals are established annually.**

Individual Contributors

Individual contributors are our soldiers on the ground tasked with helping drive our strategy from the ground up. They play an essential role in your day-to-day operations,

but also in the creation and execution of our strategy. Individual contributors are responsible for:

Supporting Action Items with Milestones – Individual contributors create the supporting action plans with milestones that drive the day-to-day focus on strategy. Each of these action plan milestones tally up to achieve our annual goals. **These action plans are completed annually.**



MEN AND WOMEN FOR HUMAN EXCELLENCE, INC. (MWFHE)

PHILOSPHY STATEMENT

Men and Women for Human Excellence is committed to client care assuming good intentions, and transparent, respectful communication. Our treatment model is evidence-based, person-centered, gender-responsive, trauma-informed, and cultural-informed. Our philosophy emphasizes mutual concern and responsibility in providing comprehensive addiction treatment and prevention services

MISSION STATEMENT

Men and Women for Human Excellence's mission is to promote long-term recovery by providing comprehensive treatment and support to people with substance use disorder, stimulate disorders, opioid disorders, co-occurring mental health disorders, and related conditions, regardless of individual circumstances.

VISION STATEMENT

Men and Women for Humna Excellence's vision is a future where all individuals confronting addictions and challenges find the assistance, they need to lead healthier, more fulfilling lives.

CORE VALUES

These are the Core Values of the Men and Women for Human Excellence, Inc. (MWFHE) Organization:

I. Commitment
II. Person-Centered Focus
III. Growth
IV. Integrity
V. Cultural Centered
VI. Leadership

Guiding Principles

The Men and Women for Humna Excellence, Inc. utilizes the following Guiding Principles in pursuit of accomplishing our mission.

■WE WILL continue to develop culturally competent continua of care that are responsive to the changing needs of our clients.

■WE WILL provide services with empathy, compassion, and at-attentiveness while being cognizant of the fact that each person is a unique individual with their own desires, strengths, and goals.

■WE WILL recruit, train, and maintain a highly qualified team of staff that demonstrates the highest degree of professionalism and are proactive in anticipating the needs of the organization as we grow.

SUMMARY

MWFHE organization has been a mainstay in Philadelphia, PA for more than 27 years. During this time, we have earned a reputation for being one of Philly's leading providers of adults' substance use treatment, mental health treatment, HIV and HCV testing and prevention education, recovery housing, and peer-led recovery support services, for inner-city substance users. The treatment services are geared primarily, but not exclusively, toward heroin and crack-cocaine users.

MWFHE's founder's Kenny Ali (RIP) and Keith Johnson sustained long-term recovery with more than 30 years of sustained recovery. Together they and other MWFHE leadership orchestrated the creation of a treatment center in late 2000 that would replicate, throughout metro-Atlanta, Georgia the awesome services MWFHE is known for in Philly. They started this process by using their own financial resources to rent and build out an office suite in a rough Decatur, Ga neighborhood where drug use, drug sales, and sex trafficking is prevalent; a community in desperate need for substance use treatment. Shortly thereafter, in January 2015, this office suite was licensed by the State of Georgia as a Drug Abuse Treatment and Education Program (DATEP). Since our inception, we have provided more than hundreds of substance users, mental health, stimulant use, and medicated assisted treatment with outpatient treatment, HIV/HCV testing and education, peer-support services, and transitional housing between both locations. MWFHE continues to embrace a holistic person-centered approach to treatment care and strives to create high quality, equitable, and innovative models of treatment care delivery systems.

MWFHE ANALYSIS

Strengths	Opportunities
Good leadership	If there are changes in the policy or regulations of the government
Knowledge expertise of the product	Events for the organization both locally and state
Employee dedication	
Ability to adapt to changes	
Technically-inclined organization	

ASSESSMENT OF GOALS 2025-27

- Financial Strength
- Improve the Quality of Training
- Clinical
- Strategic
- Community
- Staff Development

IMPROVING THE FINANCIAL STRENGHT

Financial Strengths drive sustainability economic performance to support the capital needs of the organization system. MWFHE defines financial sustainability as having dedicated, long-term funding to support MWFHE staff and sufficient consistent funding (such as Federal/State funding) that allows us to provide existing services, as well as pivot and expand services based on the needs of clients. Our financial sustainability goals include securing Georgia State funding for all staff positions.

Important considerations as MWFHE seek funding include the length and stability of the funding source, the reporting and other requirements involved with the funding, and that the funding aligns with MWFHE's priorities and programming. We would like to prioritize funding opportunities that offer long-term stable funding, that do not have too

cumbersome reporting requirements and that are aligned with our priorities and programming to allow us to grow in sustainable ways. We would also like to prioritize partnerships that lead to in-kind support such as partnering with the Food and Clothing Bank as well as opportunities for funding that allow innovative ways of addressing client needs. Risks/threats to revenue include client enrollment as well as changing leadership at the organization levels which can lead to shifting political landscapes and funding resources.

DBHDD funding at the state level offers support for basic needs services. There are also state funds that can be leveraged for benefits services. There are also opportunities to partner with programs that receive funding from the State such as Veterans Services, Workforce Development and Health Services. MWFHE will review potential grant and revenue opportunities on a quarterly basis and compare current sources to our ideal revenue model. MWFHE will meet annually to evaluate progress on and update this Financial Sustainability Plan. We will also review revenue and spending on a monthly basis to identify trends, gaps and needs.

IMPROVING THE QUALITY TRAINING

The Men and Women for Human Excellence, Inc. is committed to the continuous utilization of our Strategic Integrated Planning Process for the purpose of organizational responsiveness to the changing needs and expectations of the people we serve and our stakeholders, in conjunction with the changing business needs of our organization. Following this process ensures that our leadership maintains a viable planning structure, focused on our philosophy, mission, core values, vision and guiding principles, that guides the organization's business practices. The creation and implementation of our Training Plan form an essential foundation to ensure that our staff, people served, and other stakeholders develop awareness, and overall skill sets specific to the needs of our diverse service delivery areas. Training in the areas of workplace violence, reducing physical risks, reporting and identification of critical incidents, evacuation and emergency procedures, identification of unsafe environmental factors, and health and safety practices are addressed in this plan. We eagerly anticipate integrating ongoing professional development opportunities for our staff members into this comprehensive approach. The framework for our Training Plan is based on the State's licensures, accreditation and local regulatory agency model and uses the regulatory standards as a guide to ensure an ongoing process

of continuous quality improvement. Our commitment extends to integrating ongoing professional development opportunities to enhance the skills and knowledge of our dedicated staff members.

MWFHE has proactively implemented employee training in Community Behavioral Health (CBH) Training Network, Behavioral Health Training & education Network (BHTEN), and Department of Behavioral Health and Developmental Disabilities (DBHDD-GA) Learning Hub to ensure that all MWFHE staff adhere to the licensures and accreditation standards while providing quality person-centered care.

MWFHE FY2025-2027 Strategic Plan Goals

In September 2025 the MWFHE revised the MWFHE Strategic Plan FY 2024-2025. The modified strategic goals, strategic objectives, indicators include**:**

The Five MWFHE FY2025-27 Strategic Goals, Objectives and Indicators:

Goal 1. Expanding Access to Care: The organization continues to increase service accessibility through expanded program options.

Goal Statement:
Increase timely and equitable access to behavioral health services across all programs.

Objective 1.1: Increase Service Capacity

Indicators:

- Total individuals served (year-over-year growth)
- % increase in program enrollment
- Average time from referral to admission

Targets:

- ≥ 10–15% annual growth in individuals served
- ≤ 5 days average wait time
- ≥ 65% of referrals converted to admissions

Objective 1.2: Reduce Barriers to Entry

Indicators: Targets:

- % of same-day or next-day assessments
- % of clients served from underserved populations
- No-show rate for intake appointments

Targets:

- ≥ 65% same/next-day access
- Annual increase in underserved population reach
- ≤ 20% intake no-show rate

Objective 1.3: Expand Outreach & Referral Sources

Indicators:

- Number of referral sources (hospitals, courts, community agencies)
- Number of outreach events conducted

- % of new clients from community partnerships

Targets:

- Year-over-year increase in referral sources
- Monthly outreach activities
- ≥ 50% of admissions from external partnerships

Goal 2. Improve Client Engagement: Efforts are focused on enhancing client participation through individualized treatment planning, motivational interventions, and consistent follow-up. Engagement strategies support retention and active involvement in services.

Goal Statement:

Enhance client participation through individualized care, motivational interventions, and consistent follow-up.

Objective 2.1: Increase Treatment Participation

Indicators:

- Session attendance rate
- % of clients actively participating in treatment planning
- % of missed appointments followed up within 7 days

Targets:

- ≥ 75% attendance rate
- ≥ 75% participation in treatment planning
- ≥ 75% follow-up on missed appointments

Objective 2.2: Strengthen Motivational Practices

Indicators:

- % of staff trained in Motivational Interviewing
- % of clients receiving monthly engagement interventions
- Client-reported motivation/engagement scores

Targets:

- ≥ 75% staff trained
- ≥ 75% of clients receive interventions
- ≥ 75% positive engagement scores

Objective 2.3: Improve Retention

Indicators:

- 30/60/90-day retention rates
- Dropout rate 30 days before
- Average length of stay

Targets:

- ≥ 70% retention at 90 days
- ≤ 25% early dropout rate
- Increasing average length of stay

Goal 3. Strengthen Recovery Outcomes: Clinical services are continuously evaluated and improved to promote sustained recovery, reduce relapse rates, and increase successful program completion. Evidence-based practices and integrated care models are prioritized.

Goal Statement:

Improve long-term recovery success through completion, stability, and continuity of care.

Objective 3.1: Increase in Successful Discharges

Indicators:

- % of clients completing treatment
- % achieving treatment goals at discharge

Targets:

- ≥ 75% completion rate
- ≥ 85% goal attainment

Objective 3.2: Reduce Relapse & Readmission

Indicators:

- % of readmissions within 90 days
- % of clients maintaining abstinence at follow-up

Targets:

- ≤ 20% readmission rate
- ≥ 70% sustained recovery

Objective 3.3: Improve Functioning & Stability

Indicators:

- % of clients with improved mental health scores
- % gaining/maintaining housing or employment

Targets:

- ≥ 85% improved functioning
- ≥ 66% improved life stability

Objective 3.4: Strengthen Aftercare

Indicators:

- % with aftercare plan at discharge
- % attending first follow-up appointment

Targets:

- ≥ 65% aftercare plans completed
- ≥ 75% follow-up attendance

Goal 4. Support Systems

The organization recognizes the importance of family, peer, and community supports. Strengthening recovery-oriented systems include case management, referrals, and coordination with external resources to address housing, employment, and social stability.

Goal Statement:

Enhance recovery through family involvement, peer support, and coordinated community resources.

Objective 4.1: Increase Family Engagement

Indicators:

- % of clients with family involvement documented
- % of treatment plans including support systems

Targets:

- ≥ 70% family engagement
- ≥ 65% plans include support

Objective 4.2: Expand Peer Support

Indicators:

- % of clients connected to peer services
- Peer group participation rate

Targets:

- ≥ 75% connected to peer support
- ≥ 60% participation rate

Objective 4.3: Strengthen Case Management

Indicators:

- % of clients assigned case managers
- % receiving coordinated services (housing, employment)

Targets:

- ≥ 65% assigned case management
- ≥ 65% receive coordinated services

Objective 4.4: Improve Community Linkages

Indicators:

- % of successful referrals to external services
- Number of active community partnerships

Targets:

- ≥ 75% successful referral linkage
- Annual increase in partnerships

Goal 5: Strengthen Financial & Grant Management

Goal Statement:
Ensure effective stewardship of financial and grant resources through compliance, transparency, sustainability, and data-driven decision-making.

Objective 1: Ensure Grant Compliance & Accountability

Objective:
Maintain full compliance with all grant requirements, reporting standards, and regulatory guidelines.

Key Indicators:

- % of grant reports submitted on time
- % of grants with zero compliance findings or audit issues

- Number of corrective action plans required

Performance Targets:

- ≥ 100% on-time grant reporting
- ≥ 95% compliance rate (no findings)
- 0 major audit findings

THE MEN AND WOMEN FOR HUMAN EXCELLENCE INC. (MWFHE)

STRATEGIC PRIORITIES

At **The Men and Women for Human Excellence, Inc.** We recognize the paramount importance of understanding the outcomes and unique needs of the individuals under our care. Our commitment goes beyond viewing them as clients; each person is an individual, not just a number.

Taking a person-centered approach lies at the core of our philosophy. We pride ourselves on fostering a symbiotic relationship with those in our program. By actively engaging with our participants, we not only provide high-quality treatment but also gain valuable insights from their experiences. This reciprocal learning process allows us to continually refine our approach, ensuring that those who come after receiving exceptional guidance.

In our pursuit of holistic care and healing, we are eager to collaborate with community stakeholders. Together, we can create a supportive environment that understands and meets the diverse needs of our program members. Through these collaborative efforts, we aim to promote comprehensive well-being and recovery for individuals in our care.

The Men and Women for Human Excellence, Inc.
Strategic Plan comprises seven priorities including
critical areas of focus for our success and sustainability.

THE MWFHE PERFORMANCE IMPROVEMENT ANALYSIS FOR 2025-27: ORGANIZATION FUNCTION

The organization has updated its Performance Measurement Plan for the years 2025-2026 to outline in further detail how to update our training time frame and has updated its Quality Assurance Department to include oversight of the training and educational needs of our staff. An integral part of the QA Program at MWFHE is the continuing Staff Development Program. This consists of the following components:

■ **Quarterly All-Staff meetings** These intensive training days are devoted to training staff on clinical and operational issues that are identified as relevant to MWFHE Programs.

■ **Specialized Trainings** MWFHE provides ongoing training to the staff that are involved in specialized services such as medicated assisted treatment (MAT) program, DLA-20* Functional Assessment, and MAT Assessment Tools, and the Promoting Awareness of Motivational Incentives (PAMI) training series.

■ **Weekly Staff Meetings for Clinical Staff-** The MWFHE QA Committee identifies training topics for the clinical staff in its monthly QA meetings. The Clinical Director and/or Lead Counselor provide training on these topics in the weekly staff meetings held in each office. In addition, our organization has started the process of moving to an online training platform to a more user-friendly platform that offers board approved CEUs.

ORGANIZATION BUSINESS FUNCTION PERFORMANCE ANALYSIS

Extenuating / Influencing Factors: With the increased need for services related to medicated assisted treatment and stimulate abuse, the organization identified a need to expand its locations to serve more consumers in need of such services. The organization opened 1 new office in the states of Decatur, Ga, offering services to male and female adults clients, that includes intensive outpatient/outpatient (MAT, STIMULANT).

Data Used Comparative Analysis:

■ New hire records

■ Employee training reports

■ Satisfaction Surveys – Stakeholders

■ Leadership reports / minutes

■ Quality records reviews

■ Annual plan and procedure reviews

■ Annual reports Trends:

MWFHE continues to work towards its mission and vision and is demonstrated by our growth, our clients, and our stakeholders.

Causes: With the great expansion of our organization, we will continue to increase our staff by creating new positions/roles to grow our ecosystem and provide premiere services to our consumer population and the communities which they are a part of.

ANALYSIS: TO ACCOMPLISH THE GOAL?

GOAL: Will increase the retention of qualified staff by 25% over the reporting year.

ANALYSIS: The organization will retain 72% of its staff for the current reporting years, in addition to hiring 4-5 new qualified staff in various positions from leadership, clinical, and administrative. While the organization was successful in achieving its goal, we will continue to strive to increase/retain our personnel by 40% over the next 2 years.

GOAL: Will increase the number of services offered by the Medicated Assisted Treatment addition of Withdrawal Management Services.

ANALYSIS: For the years 2025-2027, we would like to increase our client population by 25% with a focus on Medicated Assisted Treatment- Withdrawal Management Services.

■ While the organization has begun providing services, its goal is to offer services for all levels of care.

GOAL: Satisfaction - 90% of stakeholders will express overall satisfaction with MWFHE services.

ANALYSIS: The organization will obtain its data through paper and emailed surveys. Surveys are emailed/mail to referral sources, community partners, and other service providers in the area. While the organization was successful in achieving its goal, it will continue throughout the next 2 years. The organization plans within the 2025-27 planning years to update its way of obtaining data to be more accessible and to obtain more stakeholders within the community.

GOAL: Increase community partnerships. Increase Outreach / Networking Meetings.

ANALYSIS: The organization will employ a Outreach Specialist/Workers who will be is responsible for marketing operations, event management, vendor communications, brand optimization, and team management.

GOAL: Increase community partnerships. The organization will connect with The Georgia Opioid Crisis Abatement Trust campaign, Door Program and become a listed provider/ partner in the network of service providers.

ANALYSIS: MWFHE will become a stakeholder with The Georgia Opioid Crisis Abatement Trust campaign and become listed as such on their website. https://www.gaopioidtrust.org/partner).

THE RECOVERY CENTER PERFORMANCE IMPROVEMENT ANALYSIS PLAN FOR FY2025-27

SERVICE DELIVERY PERFORMANCE ANALYSIS

Extenuating / Influencing Factors:

The organization has experienced a shortage in its workforce thus limiting the ability to offer **Medicated Assisted Treatment -Withdrawal Management Services. The** organization will be working to locate qualified medical and counseling staff and will implement the plans to begin offering this level of care in addition to residential and community housing services within the strategic plan FY 2025-27.

Strategic Plan goal is to increase our client population in both programs level of care by 25%.

Data will be used for Comparative Analysis:

■ Satisfaction Surveys

■ Intake Assessments

■ DLA-20

■ Entrance/ Exit Surveys

■ COWS Assessment-

■ Monthly nurse assessments

■ Admission Records

■ Quality Improvement and Research Trends: The organization's performance is similar compared to other agencies in the surrounding areas, results are favorable.

Causes: Increased efficiency with the turnaround time from first contact to admission. Increased effectiveness as clients is screened and assessed within 24 hours of coming into treatment thus limiting the time between screening and the start of services.

GOALS & ANALYSIS:

GOAL: Will increase the satisfaction of services delivered. The organization would like to maintain a 75% overall satisfaction rate among its consumers.

ANALYSIS: Questions considered in data analysis included:

■ My life has improved since entering this program.

■ The counseling I receive is helpful to my recovery.

■ I get a lot out of the groups here and I find them interesting.

GOAL: 65% of consumers will report that they were satisfied with orientation to treatment and education of expectations.

ANALYSIS: Based on results from the client survey, data will indicate the agency has a positive rating.

GOAL: 65% of clients who seek services will report it was easy to locate the facility.

ANALYSIS: 65% of clients will report our facilities are accessible and easy to locate.

GOAL: 65% of clients will report being treated with dignity and respect when seeking services.

ANALYSIS: 65% of clients reported being treated respectfully.

GOAL: 65% of clients who seek services will report they felt all of their questions were answered.

ANALYSIS: 67% of client report favorably.

GOAL: 70% of clients will report receiving feedback about services quickly.

ANALYSIS: 74% report quick feedback regarding services.

GOAL: 75% of clients will report feeling safe at the facilities.

ANALYSIS: 65% of clients report feeling safe

THE MEN AND WOMEN FOR HUMAN EXCELLENCE, INC, (MWFHE) STRATEGIC PLAN PERFORMANCE IMPROVEMENT ANALYSIS

GOAL: UPDATED TREATMENT PLAN. Effectiveness of services provided. 84% of all clients will be reviewed every 60 days to assess the appropriate character and intensity of services and resources to meet the needs of the clients.

ANALYSIS: Per chart audit reports the updated treatment plan assessment will be completed every 30 days as required by organizational procedures.

■ **Data to be captured every 60 days per assessment guidelines.**

GOAL: Decreased emergency room visits related to mental health/medicated assisted treatment and stimulate clients' crises during enrollment. Measured by monthly MWFHE reporting with DBHDD.

ANALYSIS: Emergency room visits will be decreased as evident by client census data, the organization monthly of reporting its critical incident data to the DBHDD.

■ **Area for improvement:** The organization will promote the Lead counselor for its MAT/STIM program. This individual will ensure this data is completed monthly. Data will be reviewed quarterly by the QA committee for completion in addition to annual analysis.

GOAL: Increase the overall DLA-20 score by 5 points or higher within 90 days.

ANALYSIS: DLA-20 MAT/STIM will be completed every 90 days as required.

GOAL: (1) decrease the average COWs scores of (MAT), for consumers to 12.

■ decrease the average COWs scores of (MAT) for consumers to 12

■ Increase the average DLS scores of (MAT/STIM) consumers to "within normal limits"

ANALYSIS:

(1) Results from COWs scores of report show that on day 90 Protective Factors (PF) increase to 12.

(2) Risk Factors (RF) decreased to 6.

(3) Use was 0 on day 90.

■ Results indicate the organization did reach its goal with increasing protective factors on day 90, however it's only 1 point. The organization has room for improvement in this area and recognizing such we have dedicated more resources to our clients' programming in an attempt to provide our clients with more structured programming.

■ Our organization plans to increase its 3.7 program by 25% over the next 2 years.

GOAL: The organization will implement a call log for follow up calls after clients MAT discharge for treatment.

ANALYSIS: Call log has been implemented in Philadelphia, Pa program. The counselor staff is responsible for completing outreach calls for clients which are documented daily in the

medical record. The Clinical Director of the QA department is responsible for reviewing complete notes in the chart. The clinical director is responsible for daily call logs completed by the Counselor. Client follows up calls are completed by the Therapist and are documented to the medical record client chart.

GOAL: Increase the average COWS scores for consumers to mild 5-12 score ranges.

ANALYSIS: COWs assessments have not been completed every 90 days as required in Decatur, ga program. Due to Medical shortage and training barriers, the number of qualified medical staff to complete this assessment was 1 during this reporting period. It should be noted, 1 staff member who is nurse practitioner certified to complete COWs assessment does not function in the role of client care. Assessments were completed but late per the medical records**.**

■ Goal has been deferred as the organization does not offer ASAM 3.7 withdrawal management at this time due to staffing. (Goal has been deferred due to staffing)

Form(s) that apply:

■ Performance Improvement Analysis / Comparative Data Reports

■ Performance Measurements 2024-2025

■ Performance Measurements 2024-2025 Corrective Action Plans (CAPs) Implementation:
■ Business: None

■ Service: Decatur Ga: Facility wide corrective action plans: Corrective Action focusing on screening/ assessments, person-centered planning, and discharging. Corrective Action focusing on charts.

Notes:

This plan is reviewed and updated yearly in September by the Chief Compliance Officer/CEO for the agency. After the plan has been updated, it is presented back to the Director of Programs Operation for input and collaboration and finally presented to the Executive Leadership Team for final thoughts and updates. This plan is available for review during QTR 3 annually. Performance measures and goals are updated or changed at the revision of this document yearly but sometimes the form may be edited for relevance.

This document also includes the organization's performance analysis for the past year to include gaps and opportunities observed during data reviews for the previous year. Previous year's performance measurement and management plans, linked reports, data discussed, and conformance please request by emailing if necessary, the compliance department at: dsimpson@mwfhe.org.

NARRATIVE Strengths:

1. Strengthening community presence:

Collaborating with radio stations interested in hosting panel discussions that spread awareness to the importance of asking for help when battling Stimulant and Opioid Abuse and chronic mental illness. Collaborating with treatment centers, local government officials, community resource centers to host a Public Health Resource Expo to increase collaboration and partnership efforts in each operating state.

2. **Frequent Feedback:**

Measuring the Voice of our Program Members via ranking percentage scale to ensure we have consistent numerical data across all respondents to identify areas of improvement. Surveys being conducted every three (3) times annually. Using more precise language helps us gauge the consumers' wants to identify the consumers requirements/ metrics needed for implementation.

3. **Dignity, Respect, and Humanism**:

Shifting verbiage from patient/client to Program Member/ Recovery Program member to reinforce our notions of the program member being valued by MWFHE and letting members know we appreciate them choosing our team to help them recover.

4. **Encouraging Sustainable Recovery:** Connecting with Families Interventions for Stimulant/Opioid abuse for free provider training and family support opportunities to help our Programs members understand how their Families may be impacted by Stimulant/Opioid abuse/ how they can prevent the generational curse from continuing.

a. National Center on Substance Abuse and Child Welfare (NCSACW)

b. Georgia HOPE – Offer Support Services to individuals and families

c. Resources for families and significant others affected by opioid addiction

5. Having a Community Liaison (to foster a more collaborative with the Decatur, Ga Programs)

Gaps:

The organization has experienced a shortage in its workforce thus limiting the ability to offer ASAM level 3.7 withdrawal management services. The organization is working to locate qualified medical and counseling staff and has plans to begin offering this level of care in addition to residential and community housing services within the next year, 2025-27. We have goals to increase our client population in this level of care by 25%.

Opportunities: During 2025-27 the organization had plans to incorporate the DLA-20 form into an electronic form that can be completed/ scored from the Document management system (DMS). We figured by doing so, it would allow our QA committee to run real-time reports to better obtain the needed information for measurement. Making the form electronic also decreased the amount of paper and toner used to print the form. This is an opportunity to decrease the time spent obtaining data, less strain on office equipment and supplies, to become more efficient and environmentally friendly, and make tasks more accessible for field work. In addition, we have implemented this outcome tool for our program for the state of Pennsylvania.

This FY2025-27 Strategic plan is reviewed and updated yearly in April by the Chief Compliance Officer for the agency. Performance measures and goals are updated or changed at the revision of this document yearly but sometimes the form may be edited for relevance. Previous year's strategic plan, annual performance plan & report , leadership code of conduct, compliance plan, and accessibility are assessable on MWFHE.org. Other linked reports, data discussed, and conformance reports (assessable to MWFHE Leadership only) request by emailing the compliance department at: dsimpson@mwfhe.org.

Performance Improvement Plan: 2025-2026 - Reviewed / Updated 4.15.2026 by Director of Programs Operation & Compliance.

■Strategic Plan Next review: 9.2026 FY 2025-2027

Approved: *Keith Johnson, MSW, CEO* : *Date: September 15, 2025,*
Keith Johnson, MSW, CEO (Signature on File)