

The Freedom Center of Knox County

STRATEGIC PLAN 2023 – 2026

(one year extension of 2023-2025 plan approved 8/29/2025)

Four Objectives to achieve the North Star:

Objective 1: Develop a Marketing and Communications Plan that drives strategy, branding and awareness.

- *This objective is primarily driven by the need to become better known, trusted and recognized for both the current functions of the organization, as well as the innovative capabilities to solve complex problem and adapt during periods of extreme circumstance. Also noteworthy is the need to explore the viability and benefits of a name change, such as: “The Freedom Center for Recovery and Mental Health Solutions” or “The Family Freedom Center for Mental Health and Recovery.”*

Objective 2: Cultivate environmental partnerships that facilitate continued growth and increase community support.

- *Beyond general funding and community support, key ideas include broadening connections with local healthcare partners and exploring shared resources (i.e., specialized staff) with existing partners.*

Objective 3: Develop a plan for evaluation that includes impact metrics, client outcomes and qualitative measures to tell a comprehensive story.

- *Technology emerged as a theme, however, of greater impact will be an internal cultural shift toward a methodology that is disciplined in the prioritization of “what, who and how” for outcome indicators and the resulting analysis.*
- *Technology upgrades to improve ease in gathering of metrics, client outcomes and qualitative measures*

Objective 4: Recruit & retain staff that allow the organization to provide solutions that are trusted and recognized.

- *Within the broader climate of the behavioral health workforce shortage, additional efforts to improve HR tools and employee support will help ensure that the quality remains high while capacity is expanded.*

Objective 5: (added 8/29/2025): Improve financial stability of the organization.

The Freedom Center will maintain an operating reserve equivalent to a minimum of three months and a maximum of six months of average operating expenses.

Increase amount of time staff provides reimbursable direct care

Control costs not covered reimbursed by grants

Improve billing operations to maximize revenue through timely claims submissions while reducing errors and denials

IMPLEMENTATION OF THE STRATEGIC PLAN

Strategic Plan Status Updates

Goal: Solutions that are Trusted And Recognized			Steps Taken/Progress Made – FY 2024 & FY 2025
OBJECTIVE 1: Develop a Marketing and Communications Plan that drives strategy, branding and awareness.			
Strategy A: Explore name change/rebranding	Timeline	Lead	
Associated Tasks:			
a. Create a branding committee or working group to assess viability and impact	7/1/2024	Bd Chair	FY 2024 Scheduled to begin 7/1/2024 after the completion of the new site renovation and move FY 2025 – Placed on hold this year
b. Build budget and timeline for associated launch/re-launch	7/1/2024	Exec Dir	FY 2024 Building is not yet ready to be opened; Plan is for later in the Fall. FY 2025 Launch/ Ribbon Cutting, Grand Opening held .
c. Manage delivery of work created/approved by the committee/working group	7/1/2024-6/30/2025	Exec Dir	FY 2024 – Nothing completed. FY 2025 – Name Change put on hold. Opening of new site and recognition in the community of current Freedom Center locations and services were targeted instead.
Strategy B: Get the word out	Timeline	Lead	Steps Taken/Progress Made – FY 2024 & FY 2025
Associated Tasks:			
a. Move beyond the foundations in place, expanding investment of time and focus with outward focused, community-targeted communications	8/1/2024	Admin Dir	FY 2024: Community Event sponsored by Freedom Center , Addicts Comedy Tour held on 8/5/2023, open to the entire community. 9/1/2023 Facebook reactivated and responsibilities assigned to Prevention Educator and Intern – at least weekly postings started by 1/1/2024; also Instagram Posts activated; new brochures for SUD Community Nurse and F.C. MAT program designed and disseminated during community meetings and other public events Received grant for SUD Rural Homeless Outreach in Knox County and began implementation in January 2024 FY 2025: Received MHR funding for Licking County SUD Community Nurse and SUD Homeless Outreach in Licking County – expanded services into Licking County; SUD Community Nurses presented at state-wide conference; Facebook posts continued by Prevention Staff with partial time commitment to marketing and contract staff – at least one weekly but generally 2 weekly postings – all wellness activities, announcements, recovery focused information
b. Devise method to measure and track community awareness over the next 2-3 years.		QI Director	FY 2024 1. Identify # of “friends” on Facebook at beginning and annually in June – 688 (as of 11/6/2024) 2. Review # of referral sources annually to monitor increase, including increase in self and family/friends referrals FY 2025: 1. # of Friends on Facebook page 2. Referral sources

Strategy C: Support marketing and communications capacity		Timeline	Lead	Steps Taken/Progress Made – FY 2024 & FY 2025
Associated Tasks:				
a. Determine if an internal staff position should be created to support this effort.			Exec Dir	FY 2024: Modified position of Prevention Educator to include additional responsibilities of marketing (8/1/2023) to include social media postings, designing flyers for events, Kenyon intern used for marketing activities and later hired as contact staff FY 2025: Continued use of internal staff from Prevention and occasional use of contract staff, no funds for marketing available at this time.
b. Explore the viability and impact of an external marketing service			Exec Dir	FY23 no funds. FY 24: Approx. \$500 per month authorized to utilize-in house staff hours and part-time marketing person. FY2025: Continued use of internal staff, no funding available for external marketing service and not planned for FY 2026.

	<i>Environmental Support</i>		<i>Funding Stability</i>		<i>Partnerships</i>	<i>X</i>	<i>Organizational Capacity</i>
<i>X</i>	<i>Program Evaluation</i>	<i>X</i>	<i>Program Adaptation</i>	<i>X</i>	<i>Communications</i>		<i>Strategic Planning</i>

Goal: Solutions that are Trusted And Recognized							
OBJECTIVE 2: Develop a plan for evaluation that includes impact metrics, client outcomes and qualitative measures to tell a comprehensive story			Steps Taken, Progress Made FY 2024 and FY 2025				
Strategy A: Establish and track targets for Strategic Plan outcomes	Timeline	Lead					
Associated Tasks:							
a. Identify additional information/metrics necessary that define “Solutions that are Trusted And Recognized (See Appendix B, Question 3 “How will we know”)		Annually 8/30/2024 report for prior FY	QI Director	FY 2024: Continued refining Performance Management and Measurement metrics and ability to utilize CareLogic Reports -See Performance Measurement and Management Analysis Report – FY 2024 FY2025: QI Director reported on some of the metrics during Board Clinical Committees to demonstrate this is already being done.			
Strategy B: Revise process for evaluating Client outcomes			Timeline	Lead	Steps Taken/Progress Made – FY 2024 & FY 2025		
Associated Tasks:							
a. Review and update CareLogic		Annually by 6/30	Admin Dir	FY23: Updated CareLogic with Child and Adolescent assessment and additional MAT forms. FY24: Updated CareLogic with Contingency Management Agreement. Lost availability of some demographic reports when HPS stopped being vendor due to loss of Potentia software. New Path is just now developing some additional reports needed for grant reporting – demographics, clients by diagnosis, productivity report that does not exactly meet our need for physical year reporting against expectation. FY 24: requested CCBHC Grant from SAMHSA that would have paid for upgrades, not funded. 3/18/2024 Clinical Services Committee of Board recommends pricing of alternate electronic health records systems – timeline not established and no funds available at this time for purchase and transition to new software. FY25: reports developed by New Path are available in early fall for demographics and clients by diagnosis and age; used for FY 25 reporting to the MHR Board and in grant writing. A number of new/revised forms are on hold for uploading to CareLogic by New Path when funding is available-ROIs updated with revocation language and current PO names; new Safety Plan to meet CARF requirements; new Medication Consent form to meet CARF requirements – staff are advised to use paper forms until they are available in CareLogic and scan in the forms. End of FY 2025 we are exploring use of AI to address quality, accuracy and time needed to complete progress notes			
b. Document “What, Who and How” for each desired indicator, entry method and reporting process		Ongoing	QI Director	FY 2023- See Annual Performance Measurement and Management Plan. FY 2024 – See Performance Measurement and Management Plan Analysis. FY 2025: Performance Measurement and Management Plan to be completed by 8/30/2025. Most measures collected and reported on in annual report to MHR submitted 8/8/2025.			

Goal: Solutions that Are Trusted and Recognized			Steps Taken/Progress Made FY 2024 and FY 2025		
<i>OBJECTIVE 3: Cultivate environmental support and develop partnerships that facilitate continued growth and increase community support.</i>					
Strategy A: Strengthen and target partnerships and programs that impact the community	Timeline	Lead			
Associated Tasks:					
a. Include Community Outreach scope in potential new role/solution for marketing capacity	7/1/2024	Exec Dir	FY 24: as of 1/1/2024 added Rural Street Outreach position-full-time who conducts community education in outreach, continued use of HRSA grant-funded nurse for community outreach; will add additional nurse to Licking County in FY 25. Result: Rural Outreach person was appointed to Winter Sanctuary Board. FY 2025: Expanded SUD Homeless Outreach and SUD Community Nurse into Licking County. All outreach staff carry flyers and introduce Freedom Center services to individuals they come in contact with, attend community meetings, obtained feedback on Community Satisfaction Survey for FY 2025.		
b. EAP/Drug free workplace programs	7/1/2025	Exec Dir	FY 24: nothing done on this plan. FY 25: nothing done towards this task. Turnover of staff continues to be a factor as staff are focused on meeting current needs of community without creating a waiting list.		
c. Enhance partnerships	Ongoing	Exec Dir	FY23: continued work with MHR for additional funding – MAT, Jail programs, additional prevention to be done in FY 24. FY24: continued work with MHR for MAT, Jail, partnered with BHP to provide temporary space for their program meeting weekly, plans for FY 24 to add Licking County Outreach Nurse through MHR, host United Way meetings at Freedom Center. FY25: continued obtaining new funding through MHR for MAT, Licking County homeless outreach, SUD Community Nurse, jail programs; obtained additional capital funding; obtained administrative intern for the summer through the Knox Foundation, working with Georgia's House to serve their residential clients;		
d. Help other agencies and articulate ways that other agencies can help The Freedom Center	7/1/2025	Exec Dir	FY 23: n/a FY 24: Continued in coalition for HRSA SOS grants through MHR; provided peer-to-peer consultation to other grant recipients outside the immediate area (twice) re Contingency Management. Worked with Knox County Drug Court (felony) to submit a SAMHSA Drug Court grant-not funded. Submitted Collaboration through letter of intent to OHMHAS for grant for rural homeless youth. FY25: Continue collaborative partnerships with probation officers, other providers in the community: BHP, Knox Recovery, Quest, ANEW, Health Department BH Services		
e. Develop specific approach for reaching the farming community	7/1/2025	Exec Dir	FY23: n/a FY 24: n/a FY 2025: not achieved.		

Strategy B: Conduct a Community Scan			Timeline	Lead	Steps Taken/Progress Made FY 2024 and FY 2025
Associated Tasks:					
a. Discover what may be lacking in the community	12/31/2024	Exec Dir	FY23: Executive Director, Women's Program Manager, HR Generalist and Rural Outreach Specialist attend monthly community meetings, in person or via video link to explore needs FY 24: Identified need for additional services to women and requested grant from OHMAS for child care during women's retreats, women's retreats, family friendly furnishings for new space on Main street – not funded. Identified need for housing – and outreach services and wrote grant to OHMHAS and received funding for the approved SOS SUD Rural Outreach Grant to provide case management and funding for homeless individuals with substance use issues. Identified need for Harm Reduction supplies and grant written to One Ohio for this purpose-not funded. Identified supplies needed by homeless and received grant from OHMHAS June 2024 for use by 8/31/2024. FY 25: Participation in the CHP 9/17/2024 QI Director – identification of the top priorities for Knox County Community Assessment Plan by Knox County Health Dept: BH, Access to Care and Housing/Homelessness; Discussion with MHR regarding funding for certified recovery housing with plan to begin implementation with grant writing during FY 2026.		
b. Add programs that create partnerships	7/1/2024	Exec Dir	FY 23: attempted to obtain CCBHC – not funded; expanded prevention during summer FY24: Added SOS Rural Street Outreach Grant 1/1/2024 which works with community resources, the Main Place, Winter Sanctuary and the Licking County Coalition for the Homeless Requested funding for Homeless grant extension in Licking County Requested funding for additional prevention. Requested funding for Harmless Prevention Program (One Ohio) FY25: MHR Nurse hired for Licking County Outreach, sited with Licking County Health Dept. – hired 7/7/2024 .		

X	<i>Environmental Support</i>	X	<i>Funding Stability</i>	X	<i>Partnerships</i>	X	<i>Organizational Capacity</i>
	<i>Program Evaluation</i>		<i>Program Adaptation</i>	X	<i>Communications</i>		<i>Strategic Planning</i>

Goal: Solutions that Are Trusted and Recognized			
<i>OBJECTIVE 4: Recruit & retain staff that allow the organization to provide solutions that are trusted and recognized.</i>			Actions Taken/Progress Made FY 2024-FY 2025
Strategy A: Expand capacity by filling roles that complete the organization's capacity commitment	Timeline	Lead	
Associated Tasks:			
a. Aloha: Continue to fill open positions	Ongoing	HR Generalist	FY 23: Ongoing through Ahola throughout the year FY 24: By 6/30/2024 had all but one clinical position filled (CM) FY 25: Continued to have issues with turnover.
b. Hire a P/T HR Generalist	12/31/2023	Exec Dir	FY 23: hired but did not work out FY 24: Hired Theodore Hahn 20 hrs/week as of 11/29/2023 FY 25: TH – HR reduced hours to 16 hrs/wk
c. Utilize HR Generalist to work w/Aloha and onboard new employees	12/31/2023	Exec Dir	FY 23: not completed due to lack of HR Gen FY 24: HR Generalist began doing since 12/31/2023 FY 25: HR did all onboarding
d. Evaluate and review job descriptions	Ongoing at time of performance evaluations	HR Generalist	FY 23: Ongoing with each performance evaluation or posting FY 24: Continued with performance evaluations and job postings. FY 25: Developed and posted Peer Recovery Supporter position for HRSA grant. Hired Peer Recovery Supporter position. Continued annual review of job descriptions during annual performance evaluations.
Strategy B: Retain and support existing team	Timeline	Lead	Actions Taken/Progress Made FY 2024-FY 2025
Associated Tasks:			
a. Ongoing Staff training, including paid training	Ongoing	Exec Dir	FY 23: QI Director reviewed required Relias Trainings for duplications, to reduce staff complaints of too many trainings. FY 24: QI Director implemented schedule of no more than 2 hours of mandatory training per month with all other Relias classes being available to self-enroll. Paid training included: . (Women's Program Dir). Rural Outreach/Homeless Systems (QI Director, Rural Outreach Worker), CDCA trainings (Case Manager) and KSAT Conference – all clinical staff; PMN/OHMHAS Medicaid Training – Admin Director FY 25: Statewide Homeless Training – both Housing Outreach Specialists; Jail Clinician – Drug Court Training (Florida), and required jail staff training; Ohio BH Conference – SUD Community Nurses did presentation; HRSA stimulant grant – Pam and Afet did presentation in webinar; All Relias trainings completed by all staff as of 8/8/2025;
b. Social opportunities (Christmas party, etc.)	Thanksgiving, Christmas	Admin Dir/HR Generalist	FY 23: Thanksgiving and Christmas parties for staff FY 24: Thanksgiving and Christmas parties for staff; HR Generalist working with staff teams for Spring Summer and Fall events; planning for upcoming Open House for new site. FY 25: Donor Recognition (9/6), Ribbon Cutting (10/10/24) Implemented Spring Summer Fall Staff Team building activities; continued Christmas party for staff; First Friday participation

c. Competitive pay + benefits (revisiting pay scale & insurance)	7/1/2023 7/1/2024 8/1/2025	Exec Dir- HR Generalist	FY23: completed by Exec Dir; received MHR funds to offset health insurance costs to employees FY 24: HR Generalist and Exec Director completed scan of local pay for similar positions; again was able to use MHR grant to some of health insurance costs instead of pass through to employees (90:10 breakdown for FY24), EAP implemented as of 7/1/2023 FY 25: continued review of benefits to fall within competitive range and agency finances; continued use of MHR funds to offset cost of health insurance premium increase
d. Retention bonuses	12/31/2024	Exec Dir	FY23: holiday bonuses FY 24: 12/20/2023 Holiday bonus given to full and part-time staff FY25: Holiday bonuses given to all part and full time staff

<i>Environmental Support</i>		<i>Funding Stability</i>		<i>Partnerships</i>	<i>X</i>	<i>Organizational Capacity</i>
<i>Program Evaluation</i>	<i>X</i>	<i>Program Adaptation</i>	<i>X</i>	<i>Communications</i>	<i>X</i>	<i>Strategic Planning</i>

Addendum – Effective August 28, 2025 through June 30, 2026

Goal: Solutions that Are Trusted and Recognized			
OBJECTIVE 5: Strengthen Financial Stability and Sustainability by maintaining an operating reserve equivalent to a minimum of three months of average operating expenses.			Actions Taken/Progress Made FY 2024 - FY 2026
Strategy A: Expand Direct Care Service Delivery to Increase Billable Hours and Earned Revenue	Timeline	Lead	
Associated Tasks:			
a. Utilize iQ system to reduce clinical documentation time	9/1/2025	Exec/Clin	Accomplished 9/2/2025
b. Maintain full staffing levels	11/30/2025	HR Gen	Filled two vacant counselor positions by 10/27/2025.
Strategy B: Streamline Billing and Collection Processes to Improve Timeliness and Reduce Denied or Delayed Claims			Actions Taken/Progress Made FY 2024 -FY 2026
Associated Tasks:			
a. Utilize Specialized Behavioral Health Billing Services	Ongoing	Executive Director	Accomplished 7/1/2025
Strategy C: Monitor and Manage Program Administrative Costs for Efficient Use of Resources			Actions Taken/Progress Made FY 2024-FY 2025
Associated Tasks:			
a. Monthly review of financial performance to assess progress towards reserve goal of three months of operating expenses.	Monthly	Board Treas. & Accounting Team	In process.

