

Denton County MHMR Center Strategic Plan for FY 2026						
Key Focus Areas: #1 Access to Quality Care, #2 Financial Health, #3 Partnership & Community Integration, #4 Development, Innovation, & Accountability						
Status Key: X - To Be Done; I/P - In Progress; O - Ongoing C - Completed						

Key Focus Area #1						
Access to Quality Care						
Priority	Area	Goals/Objectives	Status	Formal Action Taken	Progress/To-Do	Assigned To
1.1	Expansion of Services within Denton County	(1.1.a) Expand Service Hours.	I/P	(1.1.a.1) Expand Behavioral Health (BH) Services to include access to non-traditional business hours.	Center leadership will review the feasibility of offering evening hours for outpatient services to one evening a week. Expected completion - January 2026.	Executive Director; Chief Officers
		(1.1.b) Expand Service Locations.	X	(1.1.b.1) Expand in-house pharmacy to Flower Mound Outpatient Clinic (FMO).	Continue to explore feasibility of project. Expected completion - 2028	Chief Medical Officer; Clinical Operations Director
			X	(1.1.b.2) Work towards a shared Extended Observation Unit (EOU), Psych Triage, and Crisis Residential Unit (CRU) location.	Working with Legislator's and Denton County Behavioral Health Leadership Team (BHLT). Expected completion - 2030	Executive Director; Chief Operations Officer; Senior Directors; Directors
			I/P	(1.1.b.3) Center Staffing at Our Daily Bread (ODB) - Currently the Center has Case Management (CM), Intake, Substance Use Services (SUD), and Crisis Prevention Liaisons at Our Daily Bread (ODB). The Center is exploring the addition of virtual psychiatric services and Peer services at Our Daily Bread (ODB).	Substance Use Services (SUD) and Intake Staff go to Our Daily Bread (ODB) 1 day a week. Case Management (CM) staff go to Our Daily Bread (ODB). Crisis Prevention Liaison goes to Our Daily Bread (ODB) in an attempt to engage individuals and provide support 1 day a week (not the whole day).	Chief Operations Officer; Chief Medical Officer; Chief Clinical Officer; Chief Technology Officer; Senior Director of Behavioral Health
			X	(1.1.b.4) Explore/identify additional services at Our Daily Bread (ODB) - Psychiatry services, Peer services, Consumer Benefits services; designate a set day/time at Our Daily Bread (ODB).	The Chief Officers will coordinate these services by October 1, 2025.	Executive Director; Chief Technology Officer; Chief Financial Officer; Chief Clinical Officer; Chief Medical Officer.
			X	(1.1.b.5) Explore Center location near Little Elm/Oak Point/The Colony or co-locate with another agency.	The Executive Director and Chief Officer Team to explore possible opportunities based on funding. Expected completion - 2030.	Executive Director; Chief Officers
		(1.1.c.) Expand Services Provided.	I/P	(1.1.c.1) Increase evidence-based therapies offered beyond the Texas Resilience and Recovery (TRR) Assessment.	Send at least 1 licensed therapist to Play Therapy training in order to offer intervention within our Child & Adolescent (CMH) Department.	Chief Clinical Officer; Senior Director of Clinical Services
1.2	Access to Care	(1.2.a) Implement a Registration/Check-In System.	I/P	(1.2.a.1) Front Desk/Entry Points to Create a process/workflow for check-ins at all entry points.	Interdepartment Task Force created to help create and improve workflows and improve efficiency. Pilot complete and in process of being finalized. Expected completion - March 2026.	Chief Operations Officer; Senior Director of Behavioral Health; Interdepartment Task Force;
			I/P	(1.2.a.2) Create a check-in system in SmartCare.	Create a workflow and checklist for SmartCare check-in system. Expected completion - November 1, 2025.	Chief Operations Officer; Senior Director of Behavioral Health; Interdepartment Task Force;
			I/P	(1.2.a.3) Create a process to register walk-in individuals in SmartCare.	Create a workflow and checklist to register walk-in individuals in SmartCare. Expected completion - November 1, 2025.	Chief Operations Officer; Senior Director of Behavioral Health; Interdepartment Task Force;
			X	(1.2.a.4) Add a kiosk to Center lobbies.	Determine what hardware Medical City Denton and additional Local Mental Health Authorities (LMHA) use and obtain quote. Expected completion - November 1, 2025.	Chief Technology Officer
		(1.2.b) Decrease Wait Times/Wait Lists for Individuals Served.	I/P	(1.2.b.1) Keep time frame from the date of the counseling referral to the initial counseling appointment to within 1 month to reduce wait times.	*August 2025 - addition of 2 part time counselors to FY 2026 budget. *Current half -time supervisor to become full-time in FY 2026. *Chief will continue to monitor efficiencies of Counseling program and implement changes, as necessary.	Chief Clinical Officer; Senior Director of Clinical Services

			I/P	(1.2.b.2) Run continuous counseling groups to decrease waitlist and eventually not have a counseling waitlist.	Counselors will continue providing groups with focus on marketing to gain individuals interest and educate staff on the benefits of group therapy.	Chief Clinical Officer; Senior Director of Clinical Services
1.3	Individuals Served Experience	(1.3.a) Decrease No Call No Shows for scheduled appointments for Individuals Served.	O	(1.3.a.1) Implemented automated appointment reminders - phone and text.	Ongoing review and changes to system, as necessary.	Chief Medical Officer; Chief Operations Officer; Chief Technology Officer; Senior Director of Behavioral Health; Director of Nursing; Clinical Operations Director
			I/P	(1.3.a.2) Clinic brochure for clinic appointments for individuals served.	Expected completion - October 1, 2025.	Chief Medical Officer; Director of Nursing; Clinical Operations Director
			O	(1.3.a.3) Monitoring of failed automated call system.	Current system is under review for better efficiency and workflow. Expected completion - November 1, 2025.	Chief Technology Officer; Chief Medical Officer; Chief Operations Officer, Interdepartmental Task Force
		(1.3.b.) Create an Interdepartmental Workflow to improve the overall experience for individuals.	O	(1.3.b.1) Increase consistency in how departments utilize streamline. Streamline workflow and entry paperwork from Intake, Crisis Residential Unit (CRU), Crisis, and Aftercare.	A sub-committee was created to create this process and workflow. Expected completion- November 1, 2025. Interdepartmental Taskforce to provide monthly updates.	Chief Operations Officer; Chief Technology Officer; Senior Director of Behavioral Health; Interdepartmental Task Force
			O	(1.3.b.2) Re-examine workflows to decrease the wait times for individuals and move Individuals more efficiently through the center for services and assessments.	Continue Identifying barriers and developing solutions to measure wait times in lobby.	Chief Clinical Officer; Chief Technology Officer; MIS Data Specialist
			X		*Obtain report of individuals actual check in time to the time their service begins. Expected completion- October 1, 2025.	
		(1.3.c) Improve Quality of Services Provided.	O	(1.3.c.1) Decreasing complaints and number of incidents.	The Center will continue monitoring responses from individuals served.	Chief Clinical Officer; Senior Director of Quality Management/Utilization Management
			O	(1.3.c.2) Improving quality of services as evidenced by performance measures and program measures.	Quality Management (QM) Committee meets monthly to review performance measures and advises Directors, Senior Directors, and Chief Officers of Performance Measures met. *Improvement plan (from each program) for the at risk measures identified from the performance contract (State and Federal measures).	Chief Clinical Officer; Chief Financial Officer; Senior Director of Quality Management/Utilization Management

Key Focus Area #2						
Financial Health						
Priority	Area	Goals/Objectives	Status	Formal Action Taken	Progress	Assigned to
2.1	Practice Fiscal Responsibility and Good Steward Practices	(2.1.a) Center Based Financial Literacy Training.	O	(2.1.a.1) Create mandatory Financial Literacy Training Program for front line management and above.	Continue to provide mandatory Financial Literacy Training Program for front line management and above.	Chief Financial Officer; Controller
			X	(2.1.a.2) Add Financial Literacy Training to New Employee Orientation (NEO).	The Financial Literacy Training for New Employee Orientation (NEO) will be achieved by February 2026.	Chief Financial Officer; Controller
			O	(2.1.a.3) Train Board or Trustess - Annual Board of Trustees Training and New Board of Trustee Orientation.	Training to be provided, as needed.	Chief Financial Officer
			X	(2.1.a.4) Train new leadership staff.	The Financial Literacy Training for new leadership staff will be provided by September 30, 2025, and ongoing.	Chief Financial Officer
		(2.1.b) Performance Contract Measures expertise.	X	(2.1.b.1) Implement performance contract training for Intellectual and Developmental Disabilities (IDD). Performance Contract training will provide additional information and resources.	Expected completion - October 1, 2025,	Chief Integration Officer; Chief Clinical Officer

		(2.1.c) Texas Administrative Code (TAC) expertise.	O	(2.1.c.1) Improve working knowledge of Texas Administrative Code (TAC) for front line management and above, where applicable.	As needed.	Executive Director; Chief Officers
		(2.1.d) Recovery Plan expertise.	X	(2.1.d.1) Develop trainings to create working knowledge of the requirements of how to build a person-centered, comprehensive, and quality recovery plan.	Expected completion - November 1, 2025.	Executive Director; Chief Operations Officer; Chief Technology Officer, Chief Clinical Officer; Senior Director of Behavioral Health
		(2.1.e) Center Based Grant Requirements expertise.	O	(2.1.e.1) Improve working knowledge of Grant Requirements for front line management and above.	Ongoing training of grant requirements and inclusion as necessary from frontline staff.	Executive Director; Chief Financial Officer; Grant Development Specialist
			O	(2.1.e.2) Increase applications for State and Federal Grants for programs that support current or future Certified Community Behavioral Health Clinic (CCBHC) initiatives.	Grant cycle process for applications includes Federal agencies such as Housing and Urban Development (HUD), Substance Abuse and Mental Health Services Administration (SAMHSA), and the Department of Justice (DOJ). The Center also reviews State of Texas Health and Human Services (HHSC) contract procurement sites weekly.	Executive Director, Chief Financial Officer; Controller; Grant Development Specialist
			O	(2.1.e.3) Increase applications for private and additional grants that the Center qualifies for.	Continue to identify private and additional grants.	Executive Director; Chief Financial Officer; Controller; Grant Development Specialist
2.2	Improve Reporting and Analytics for all Stakeholders	(2.2.a) Implement new Enterprise Resource Planning System.	I/P	(2.2.a.1) Implement new Enterprise Resource Planning system with go-live for all modules no later than 11/1/2025.	Finalize customizations: 1) Accounts Payable (AP) and Accounting - Expected completion - September 2025. 2) Develop financial reports - Expected completion - October 2025.	Chief Financial Officer; Controller
2.3	Identify/Maximize Funding Streams - Revenue Analytic Cycles	(2.3.a) Internal compliance and education on No Surprises Act SB1264.	O	(2.3.a.1) Educate individuals served on "No Surprise Act", on their financial rights and responsibilities.	Provided by Consumer Benefits during assessments.	Consumer Benefits; Director of Revenue Cycle Reimbursement
		(2.3.b) Internal training on Texas Administrative Code (TAC) financial responsibilities.	O	(2.3.b.1) Educate staff on Monthly Maximum Fees (MMF), insurance, co-pays, and deductibles.	Education on Monthly Maximum Fees (MMF), insurance co-pays, and deductibles will be included in Charity Care Assessment (CCA) training that is completed annually.	Director of Revenue Cycle Reimbursement
		(2.3.c) Increase Center Wide productivity.	O	(2.3.c.1) Increase accountability for concurrent documentation.	Add concurrent documentation to job descriptions, if applicable.	Executive Director; Chief Officers
			O	(2.3.c.2) Increase individual hours served per staff by 25%.	Mandate 70% productivity for individual served facing positions and staff be held accountable, to be implemented in phases by responsible staff. In addition, staff are implementing procedural changes for individuals served responsibilities and accountability. Expected completion - February 2026.	Executive Director; Chief Officers
					Create productivity measures for each department. Expected completion - December 2025.	Executive Director; Chief Officers
2.4	Center Foundation	(2.4.a) Create a Foundation.	I/P	(2.4.a.1) Create Foundation Board of Trustees Bylaws.	Preliminary research on foundation structure and creation of Bylaws is in process. Expected completion - 2030	Chief Financial Officer; Director of Procurement Services; Grant Development Specialist
			I/P	(2.4.a.2) Appointment of Board of Trustees and Executive Leadership.	Expected completion - 2030	

Key Focus Area #3						
Partnership & Community Integration						
Priority	Area	Goals/Objectives	Status	Formal Action Taken	Progress	Assigned to
3.1	Business Continuity Plan, Emergency Plan	(3.1.a) Develop a Business Continuity and Emergency Management Plan, Development will include: a Risk Assessment; Impact Analysis; critical business processes and workflows; critical staff planning. * Prevention Strategies * Response Strategies * Recovery Strategies Once developed all key leadership, staff will be exposed to the plan.	O	(3.1.a.1) Active Shooter Drills.	Active Shooter Drills to be completed annually, or as needed, at each Center location.	Senior Director of Quality Management/Utilization Management; Program Manager of Quality Management
			O	(3.1.a.2) Key leaders attend Health and Human Services (HHSC) and County sponsored disaster trainings.	Staff will continue to attend Health and Human Services (HHSC) and County sponsored disaster trainings, as offered.	Disaster Team
3.2	Increase Community Knowledge of Services and Improve Community Partnerships	(3.2.a) Improve directory of services and program brochures.	O	(3.2.a.1) Create brochures in English and Spanish.	Translate directory to Spanish. Deadline to revise directory. Expected completion - 10/1/2025.	Executive Director; Chief Officers; Senior Directors
			O	(3.2.a.2) Uniformity in brochures, templates, letterhead, and documents.	Update brochures, templates, letterhead, and documents with new Center logo and any necessary changes. Expected completion - October 1, 2025.	Executive Director; Chief Officers; Senior Directors
			X	(3.2.a.3) Update Center Business Card with Quick Response (QR) Code.	Expected completion - October 1, 2025.	Executive Director; Chief Officers; Senior Directors
		(3.2.b) Marketing the Center to expand Community Knowledge by providing Community trainings and presentations.	I/P	(3.2.b.1) Chiefs will outline which Center Staff to attend Rotary Club meetings to provide a presentation on Center services.	Expected completion - October 1, 2025.	Executive Director; Chief Officers
			I/P	(3.2.b.2) Create a survey for participants to complete after the presentation or training.	Create a survey for staff that provide community presentations or trainings in order for participants to be provided a survey to complete after presentation or training. Expected completion - October 1, 2025	Executive Director; Chief Officers; Chief of Human Resources; Program Assistant to Procurement
			I/P	(3.2.b.3) Track the number of presentations and participation for Rotary Club and Chamber of Commerce presentations.	Presentations will be provided on a monthly basis to Rotary Club's and Chambers of Commerce's.	Executive Director; Chief Officers; Senior Directors; Executive Assistant
			O	(3.2.b.4) Ensure standardized PowerPoint template is used for each Rotary Club and Chamber of Commerce presentation or training.	Expected completion - October 15, 2025	Executive Director; Chief Officers
3.3	Building rapport and relationships with our municipalities to improve funding and positive images	(3.3.a) Expand Political Advocacy - Build collaborative relationships with local municipalities and community leaders.	O	(3.3.a.1) Information sharing with local municipalities and community leaders such as presentations and provision of data relating to all services provided to individuals.	Requests will be made on an annual basis.	Executive Director

	in the community	(3.3.b) Build and improve relationships with community stakeholders and municipalities.	O	(3.3.b.1) Continue to provide grant opportunities and assistance to local community stakeholders and municipalities.	<ul style="list-style-type: none"> • Behavioral Health Leadership Team (BHLT) – Executive Director (ED) & Chief Operations Office (COO) • Law Enforcement Summit – Executive Director (ED) • Judges Forum for Mayors – Executive Director (ED) • Suicide Task Force – Chief Operations Office (COO) • Association of Retarded Citizens of the United States (ARC) – Intellectual and Developmental Disabilities (IDD) Rights Protection Officer (RPO) • Our Daily Bread – Executive Director (ED), Chief Operations Office (COO), and Senior Director of Behavioral Health (BH) • Watch/Cooks Children – Program Manager of Child & Adolescent Services (CMH) *CRCG - Program Manager of Child & Adolescent Services (CMH) & Program Manager of Liaison Services *United Way Data Committee - Executive Director (ED) , Chief Operations Office (COO), & Senior Director of Quality Management (QM)/Utilization Management (UM) *Denton County Office of Emergency Management - Senior Director of Quality Management (QM)/Utilization Management (UM), and others as needed. *National Alliance on Mental Health (NAMI) - Community Outreach Coordinator *Metrocare Transition Support Team - Chief Integration Officer (CIO) and Intellectual and Developmental Disabilities (IDD) Crisis Intervention Supervisor <ul style="list-style-type: none"> *Texas Homeless Network - Program Manager of Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI), Connections, and Supported Housing. *Communities in Schools Initiatives - Training Expansion Project Director & Community Outreach Coordinator (4 Mental Health First Aid (MHFA) Courses and 5 Ask About Suicide to Save a Life (AS+K) Courses). 	Executive Director, Chief Officers, Senior Directors, Directors
3.4	Referrals	(3.4.a) Increase the number of resources for referring individuals to.	O	(3.4.a.1) Obtain Memorandum of Understanding's (MOU) in order to provide continued resources for individuals served.	<ul style="list-style-type: none"> *Current MOUs are: AppleGate Health Services, Collin County, Community Council of Greater Dallas, CRCG Resource, Cumberland Youth & Family, Denton Affordable Housing Corporation, Denton City Police, Denton County Adult Probation, Denton County Commissioners' Court, Denton County Drug Court, Denton County Juvenile Court, Denton County Mental Health Court, Denton County Recovery Resource, Denton County Sheriff's Department, Denton County Social Services, Department of Family & Protective Services, DWI Court, Flower Mound PD, Friends of the Family, Giving Grace, Health Family Services of Texas, Health Services of North Texas, Military Veteran Peer Network, Nexus, North Central Texas College, Olive Branch, Our Daily Bread, Pecan Valley Healthcare, Ranch Hands Rescue, Recovery Resource Council, Refuge for Women North Texas, School Districts – Northwest ISD / Aubrey ISD / Denton ISD / Krum ISD, Texas Health Resources, Texas Native Health, Texas Woman's University, Texoma Community Center, The Colony Police Department, United Way of Denton County, University of Pennsylvania, Veterans Court, XFERALL. 	Chief Financial Officer; Director of Procurement Services; Service Contracts Administrator

					*Assisted Outpatient Treatment (AOT) MOU's: Denton Community Food Center, Denton County Friends of the Family, Denton PD, Flower Mound PD, Health Services of North Texas, Hickory Creek PD, Highland Village PD, Lake Dallas PD, Military Veteran Peer Support Network, Millwood Hospital, Our Daily Bread, Ranch Hand Rescue / Bobs House of Hope, The Colony PD, United Way.	
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Key Focus Area #4						
Development, Innovation, & Accountability						
Priority	Area	Goals/Objectives	Status	Formal Action Taken	Progress	Assigned to
4.1	Obtain Accreditations/ Certifications	(4.1.a) Obtain Certified Community Behavioral Health Clinic (CCBHC) Re-Certification.	O	(4.1.a.1) Policies and procedures are reviewed on a regular basis to ensure they align with our current processes and Certified Community Behavioral Health Clinic (CCBHC) standards.	Policies and procedures will be reviewed, as needed and on an annual basis.	Executive Director; Chief Officers; Senior Director of Quality Management/Utilization Management; Quality Management Department
		(4.1.b) Commission on Accreditation of Rehabilitation Facilities (CARF) Accreditation.	X	(4.1.b.1) Research requirements of Commission on Accreditation of Rehabilitation Facilities (CARF) Accreditation.	Expected completion - 2030	Executive Director; Chief Officers; Chief of Human Resources; Chief Operations Officer; Chief Medical Officer; Chief Clinical Officer; Senior Director of Quality Management/Utilization Management
4.2	Employee Benefits & Overall Wellness	(4.2.a) Enhance Employee Benefits Package Medical, Retirement.	X	(4.2.a.1) Increase employee participation in retirement plans by 10%.	Implement educational information on specific Center scheduled days to enhance employee participation and to promote plans.	Chief of Human Resources; Benefits Specialist
		(4.2.b) Improve Work-Life Balance & Flexibility.	X	(4.2.b.1) Develop a time off procedure that supports the employee while maintaining accountability and ensuring organizational success.	Recognized federal observed holidays to assist in supporting employees in their work/life balance. Expected completion - September 1, 2025.	Executive Director; Chief Officers; Chief of Human Resources
		(4.2.c) Prioritize Employee Wellness & Mental Health.	I/P	(4.2.c.1) Continue to promote and engage employees and their overall health and wellness.	The Respect, Integrity, Support, & Empowerment (RISE) Collaborative and committee has been created; this committee will support the wellness and belonging of employees through education on cultural competency, health and wellness, with an intent to ensure employees feel as though they belong. Expected completion - October 1, 2025.	Chief of Human Resources; Benefits Specialist; Intellectual & Developmental Disabilities Rights Protection Officer
			O	(4.2.c.2) Re-establish the Center's Wellness Committee to enhance the wellness and engagement of employees.	*The Center's Employee Benefit Specialist is working to coordinate re-establishing the Center's Wellness Committee. Expected completion - October 1, 2025. *The first task assigned to the Wellness Committee is to start planning a health fair for employees. Expected completion - April 2026/May 2026	Chief of Human Resources; Benefits Specialist; Intellectual & Developmental Disabilities Rights Protection Officer
			O	(4.2.c.3) Host an internal health fair for employees.	Expected completion - April 2026/May 2026.	Chief of Human Resources; Benefits Specialist; Intellectual & Developmental Disabilities Rights Protection Officer
4.3	Recruitment & Retention	(4.3.a) Increase Employee Recognition & Engagement.	O	(4.3.a.1) Revisit the Center's Employee Recognition Program and assess awards and nomination processes.	The Center's Events Committee will review current practices and provide feedback for improvement and expansion of employee recognition. Expected completion - April 2026/May 2026.	Chief of Human Resources
			O	(4.3.a.2) Conduct annual employee surveys to assess overall engagement of employees.	Annual employee engagement survey will be provided to employees to assess overall engagement. Expected completion - September 2025.	Chief of Human Resources

		(4.3.b) Training & Professional Development.	O	(4.3.b.1) Develop a training program that invests in current supervisors and potential supervisors within the Center.	Continue review of training checklist for each program to ensure competency and overall job knowledge in all areas for each employees respective position. Expected completion - October 2025.	Chief of Human Resources
			O		Leadership trainings are scheduled with and provided by Texas Council Risk Management Fund (TCRMF) twice a year for supervisors.	Executive Director; Chief of Human Resources; Chief Officers
		(4.3.c) Strengthen Compensation.	O	(4.3.c.1) Continue to review the Human Resources (HR) Consortiums salary survey to ensure the Center's pay is competitive.	Human Resources (HR) Consortiums salary survey will be reviewed annually.	Chief of Human Resources
		(4.3.d) Recruitment.	O	(4.3.d.1) Develop a staffing plan to ensure the Center is targeting high need areas and positions.	Revise staffing plan, as needed, to ensure the Center is targeting high need areas and positions.	Chief of Human Resources
			O		Align recruitment, retention, and workforce planning with identified community behavioral health, and Intellectual and Developmental Disabilities (IDD) needs identified in the annual Community Needs Assessment.	
			O	(4.3.d.2) Identify and invest in best practices for recruitment and retention to assist in the professional development of the Center's workforce.	Continue regular benefit and salary benchmarking in comparison to other community Centers, local healthcare agencies, and non-profit markets.	Chief of Human Resources; Chief Clinical Officer; Senior Director of Clinical Services
					Continue to showcase employee testimonials and stories on social media to highlight community impact. Engage external candidates on "why working here <i>matters</i> ."	
					Develop career ladders for direct support, clinical, and administrative staff to assist in retention and strengthen succession planning within the Center. - March 2026.	
					Improve the Center's internship program to pipeline individuals into future roles.	
			O	(4.3.d.3) Expand recruitment efforts to areas outside of Denton and surrounding cities.	Began attending career fairs at University of Texas Arlington (UTA), Southern Methodist University (SMU), North Central Texas College (NCTC) Gainesville, University of Texas (UT) Dallas.	Chief Human Resources Officer; Human Resources Department; Executive Leadership Team
4.4	Communication	(4.4.a) Improve Overall Communication & Inclusion.	O	(4.4.a.1) Implement regular communication channels to update all staff on organizational goals, progress and objectives.	Executive Leadership Team (ELT) monthly meetings.	Executive Director; Chief Officers; Executive Leadership Team
					Center Town Hall quarterly meetings.	
					Other Departments provide training or attend staff meetings.	
					Weekly staff meetings per each department to disseminate center information.	
			O	(4.4.a.2) Provide cross training for departments for a better understanding of the total center operation.	Spotlight program during quarterly town hall.	Chief Human Resources Officer; Chief Integration Officer
			O	(4.4.a.3) Develop a Mentorship Program to assist in adequately equipping staff for professional growth.	Expected completion - 2028	Chief Human Resources Officer; HR Director; Training and Development Manager
			O	(4.4.a.4) Establish a system for sharing relevant information across departments and teams to improve collaboration and decision making.	Interdepartmental Task Force will continue to meet once a week to share relevant information across departments.	Executive Director; Chief Officers; Interdepartmental Taskforce
			O	(4.4.a.5) Conduct opportunities for regular feedback from all staff.	Good Ideas email and Good Ideas boxes are at each Center location. The Good Ideas e-mail is accessible year round.	Executive Director; Chief Officers; Executive Leadership Team
4.5	Office Space	(4.5.a) Remodel and restructure center buildings to create more specialized service per building.	I/P	(4.5.a.1) Remodel Administration building and create a community training room for educational purposes (Mental Health First Aid (MHFA), and additional community trainings.)	Expected completion - March 2026	Chief Financial Officer; Director of Procurement Services

4.6	Leadership Development	(4.6.a.) Invest in Center Organizational development.	O	(4.6.a.1) Provide ongoing trainings to Leadership and include alternate dates. Training includes 8 courses.	Ongoing trainings will be provided to Leadership, as needed.	Chief Human Resources Officer; Chief Financial Officer
			O	(4.6.a.2) Create additional resources to assist in Leadership development.	Additional resources will be added to Supervisor Team and SharePoint in Microsoft Teams, as needed, to assist Leadership in development.	Chief Human Resources Officer
			X	(4.6.a.3) Schedule a mandatory Chief Leadership Retreat.	Expected completion- November 2025	Executive Director; Chief Human Resources Officer
		(4.6.b.) Invest in Board of Trustees development.	X	(4.6.b.1) Schedule a mandatory Board Retreat.	Expected completion - Fall 2025	Executive Director
4.7	Marketing	(4.7.a) Enhance Reputation through Branding, Marketing, and Public Relations (PR) - Enhanced marketing and public relations will allow those we serve to know the center.	O	(4.7.a.1) Expand Community events into all markets served by Denton County My Health My Resources and those underserved. Outcome: Contribute to the social development of the community through expanded services & community engagement in all markets served by Denton County My Health My Resources.	Continue to increase engagement on all social media platforms (e.g., LinkedIn, Instagram, Facebook).	Chief Human Resources Officer; Executive Director; Chief Officers; Executive Leadership Team; Human Resources Department
			O		Center staff will increase active participation in community resource fairs to expand outreach efforts to strengthen partnerships, increase visibility of services, and connect the community with needed supports.	Chief Human Resources Officer; Executive Director; Chief Officers; Executive Leadership Team; Human Resources Department
4.8	Technology	(4.8.a) Improved Wi-Fi Access and Speed at Various Locations.	X	(4.8.a.1) To improve the overall network performance, by adding more Access Points for Wi-Fi. *Redesign the network for more efficient data transporting. Replace the SDWAN device to increase network speeds, and provide the opportunity to increase center bandwidth.	Moving VLANs to a new IP Schema 10.125.0.0/16 for better separation of subnets in TXACE. Expected completion - 2026	Chief Technology Officer; Information Technology Department
			X		Add multiple SQL Servers to the TXACE setup-propose 2 additional - Expected completion-2028	
		(4.8.b) Cybersecurity Concerns, Needs and Training.	I/P	(4.8.b.1)Improve Cyber Security for the Center's Staff and Infrastructure.	Information Technology (IT) is in the process of re-architecting the network to provide the Center with a more efficient protection from cyber-attacks ongoing. Expected completion - February 1, 2026.	Chief Technology Officer; Information Technology Department
			X		Through the addition of CrowdStrike SEIM, the Center will be provided safeguards in the Center's logs in the instance of a breach. Expected completion - 2026.	
			X		Renew or Replace NetApp SANS - Expected completion: 2030	
			X		Replace the Cisco Blade server -4 blades. Expected completion: 2030	
		(4.8.c) Accessibility to Information Technology (IT) Equipment for New and Existing Teammates.	O	(4.8.c.1) Improve clinical access to individuals served through the use of Tele-Psych video carts to be utilized throughout the center buildings.	Tele-psych units to be reviewed, as needed.	Chief Technology Officer; Information Technology Department
			X		Upgrading Windows 10 OS to Windows 11 OS when the Center is in a financial position to allow for upgrade. Extend support for Windows 10 or replace with new laptops and/or desktops. Expected completion - February 1, 2026.	
		(4.8.d) To bring better conductivity and Security to each technology hub.	X	(4.8.d.1) Add FirstNet - Cellphones and Hotspots for Premiere Cell service.	Expected completion - January 1, 2026	Chief Technology Officer; Information Technology Department
			X	(4.8.d.2) Re-configure all Center wi-fi accounts - for more efficiency and security.	Expected completion - January 1, 2026	Chief Technology Officer; Information Technology Department

			X	(4.8.d.3) Update UPS in IPF2/Admin/ -No Cost	Expected completion - January 1, 2026	Chief Technology Officer; Information Technology Department
			X	(4.8.d.4) Setup KIOSK's in Denton Outpatient Clinic (DOPC), Morse Outpatient Clinic (MOPC), and Flower Mount Outpatient Clinic (FMOC) lobby.	Expected completion - January 1, 2026	Chief Technology Officer; Information Technology Department
			X	(4.8.d.5) Implement Nutenix to replace VMWARE.	Expected completion - January 1, 2026, if finances are available.	Chief Technology Officer; Information Technology Department