



Mainstream Living, Inc Strategic Plan 2017- 2021

**Board Approved - January 2016
(Year 2017 of the 2016-2021 plan)**

The Board of Directors of Mainstream Living Inc., recognizes the need for a long range strategic planning process that is flexible and has a comprehensive vision. As demand for service increases and the service environment continually changes, it becomes vitally important that the Board and staff focus on a common direction, which will place Mainstream Living on the leading edge of services. With these thoughts in mind, the Board of Directors streamlined our mission statement. The new mission:

The Mission of Mainstream Living is to enhance opportunities, create success and fulfill dreams.

State of our State and Medicaid Expansion: There have been a number of changes since our original 2016-2021 Strategic Plan. The Iowa Health and Wellness Plan (IHAWP) expanded comprehensive health care coverage to about 145,000 Iowans. This expansion primarily benefited single adult low income males and is of particular assistance for those needing behavioral health services. In addition, some of these newly covered individuals that have a serious mental health or disability condition can now be eligible for the more comprehensive Medicaid program coverage. IHAWP was expending about \$67 million per year on behavioral health services (i.e., mental health and substance use disorder services) and served about 35,360 individuals whose services were previously the responsibility of the MHDS Regions. As a result, the number of Iowans receiving services funded by the MHDS Regions has declined significantly in recent years.

Managed Care Implementation: In April 2016 Iowa implemented the IA Health Link, a comprehensive managed care program for Medicaid managed by three MCOs under contract with the Department. Iowa's transition to managed care marks a major change in the management approach to Medicaid. The three Managed Care Organizations (MCOs) are expected to be more than payers of service. They are required to improve member outcomes through increased and improved care management and coordination, and the use of health care transformation practices that result in more effective and efficient service delivery. MCOs operate within highly comprehensive contracts that include extensive Departmental oversight. This new approach is expected to significantly improve the health and wellbeing of MCO members including those with mental illness or disabilities

Health Care Transformation: Health care management is moving beyond the principles of MHDS Redesign – regional management, local service delivery, and statewide standards – to new health care transformation practices with greater promise of progress and success. Health care transformation is the trend to move away from the traditional patient/provider/payer model to a model that uses proven practices to improve patient outcomes including: population management, social determinants of health, and value based purchasing. The MCOs are required to use value based purchasing and are being encouraged to use the other practices to improve member outcomes and achieve greater efficiency. MHDS Regions are not required to use these practices. This means providers must operate in two different worlds: one world that is moving forward with payment for outcomes and incentives for performance, and the other world that operates using older, less efficient payment for volume of service. If MHDS Regions do not use these new practices they will be left behind and they will not be equipped to operate in the new, emerging managed health environment.

Program Initiatives: Iowa has adopted several key program initiatives designed to increase and improve MHDS program policy approaches such as: The Home and Community Based Services (HCBS) settings rules required by the Centers for Medicare and Medicaid Services to ensure individuals are living community integrated lives; Increased reimbursement for supported employment to encourage individuals with mental illness or other disabilities to gain and keep integrated employment; Integrated Health Homes to improve care coordination for individuals with serious mental illness and improve healthcare outcomes; Systems of Care to improve the mental health and wellbeing of children with a serious emotional disturbance and their families; Certified Community Behavioral Health Clinics to develop community mental health provider capacity to better serve individuals with a serious mental illness; Hospital inpatient bed tracking system to improve the efficiency of locating available inpatient psychiatric hospital beds for individuals that need them; Autism Support Program to provide proven and effective services for children with autism for families that cannot afford to pay for them.

Challenges to the Mental Health System: The system needs to Increase and Improve Service Capability and Capacity Less than 1 percent of Iowans have a serious mental illness, severe intellectual disability, or co-occurring substance use disorder and serious multiple complex needs. These include, but are not limited to, individuals that can be aggressive, have a serious mental illness and a serious substance use disorder, and/or a serious criminal offense. Across the nation these individuals are often safely, appropriately, and successfully served in intensive integrated service settings that have a combination of 24 hour, seven day a week staffing supervision and guidance, and extensive professional treatment and oversight. Iowa needs to increase the number of and statewide access to effective and efficient services such as these: 1. High intensity, flexible and responsive services should be available for those individuals with the most complex needs. 2. Housing assistance should be made available to support individuals with serious mental illness in integrated housing. 3. Mental health services should be easily accessible and the system should be easy to navigate. 4. Authorization and reimbursement for services should be person-centered, based on best practices and outcomes, and should reasonably meet provider costs of doing business. 5. Providers should have the capacity to meet the co-occurring and multi-occurring

needs of individuals with serious mental illness.

Workforce Challenges: Iowa has a serious MHDS workforce shortage and does not have a comprehensive plan to address it. Iowa ranks 47th in the nation in the per capita number of psychiatrists. Limits exist for what trained mid-level practitioners can do, especially in hospitals. In addition the governor has announced the establishment of three new psychiatric residency programs in Iowa. Similar challenges are faced with behavioral health and disability professionals. Direct care professionals are difficult to find, turnover is high, and adequate training is insufficient. Additionally, Iowa has very few training sites for Board Certified Behavior Analysts.

Long-Term Vision for Mainstream Living, Inc.

In the future there will be greater acceptance and full inclusion by the community for persons with a disability. Improved services and support and more prevalent and helpful technology will add to the quality of life for members with disabilities served by Mainstream Living Inc. At the same time, because of population growth an aging populus and higher incidences of multiple diagnoses, the needs of members and their families will remain extensive and varied. New services and supports will be needed to address the needs of members with co-occurring disorders. While significant strides will have been made in the public acceptance of members, there will still be an ongoing push for community inclusion and participation. Money will be much tighter, and working with new Managed Care Organizations (MCO)s will be challenging. Finally, member and their families will control more of the resources and decisions about who provides them with help and support. They will have many options from which to choose, within the new Regional Mental Health re-design initiatives.

Mainstream's Role

Mainstream Living will work in coordination with Managed Care Organizations (MCO)s for each member to identify needs and bring together resources and services for all members and their families to support full long-term community inclusion and participation. The health of the member will be a priority under the new Medicaid Modernization initiative supporting the Iowa High Quality Health Care Initiative announced by Governor Branstad on February 16, 2015. The initiative aims to improve access and care coordination, promote accountability and outcomes and provide a predictable and sustainable Medicaid budget. Through this initiative, the Iowa Department of Human Services will contract with managed care organizations for the delivery of health care services for most Medicaid members.

Mainstream living will strive to provide a service delivery system that provides better care, with value-based services that keep people healthier. This is in alignment with the new MCOs in Iowa and their goals to shift from volume-based to value-based care, and better organization and use of data and health information, including the use of electronic health records and other health IT resources.

Specifically Mainstream Living:

1. Contracts with Managed Care Organizations to act as a provider for the following services:
Supported Community Living (SCL) in group homes, apartments, and community settings;
Day-Habilitation; individual and group Counseling and Therapy and assessment services;

Permanent Support Housing; Substance Abuse assessment, evaluation and treatment; Permanent Supported Housing with SCL in a Licensed Residential Care Facility for Person with mental illness (RCF-PMI); and a provider within enclave settings where we provide Employment Supports.

2. Leads a collaboration of providers and community organizations and programs (including non-disability resources) within the new regional structure, as appropriate, in identifying needs and gaps in services.
3. Develops new and creative programs, or expands services in response to the needs of our partners the Managed Care Organizations, and the new State Regions, to fulfill requirements to meet accessibility standards for “core services” within geographic areas.
4. Directly provides cutting-edge, evidence-based practices and models of services that meet identified gaps. While Mainstream may not provide comprehensive services itself—what direct services it does provide are of the highest quality.
5. Collaborates with and makes referrals to other high-quality service providers, and leads many advocacy efforts to ensure services are provided either by Mainstream Living Inc. or other providers.
6. Develops long-term housing options to help create long-term housing security for the member supported by Mainstream Living.
7. Plays a leadership role in advocating at all levels of government, and with the private sector and the public at large for full inclusion and participation in the community. Mainstream Living Inc., encourages and supports individuals and families with disabilities in pursuing this advocacy agenda.
8. Works in conjunction with new MCOs and the Iowa Association of Community Providers (IACP) to lobby for needed changes and legislation for members with disabilities in Iowa.
9. Develops Mainstream Living Foundation’s capacity to build resources and supports for ongoing efforts and long-term sustainability of Mainstream Living services and supports.

Funding Sources

While government contracts are still a significant source of funding, Mainstream Living Inc, has a robust and innovative fundraising program earning resources from private sources including individuals and businesses. Mainstream has established an endowment to help provide for the long-term needs of Mainstream Living. Signature fundraising events are conducted as needed to raise funds and promote our brand.

System Resources and Significant Infrastructure Issues

1. The mental health system is in a multi-year process of re-design. We cannot control funding availability because of state and federal priorities and uncertainties. We must continue to adapt and resolve funding changes to ensure that the greatest numbers of

people are able to receive quality supports. Our services and supports are under constant review to ensure cost effective services to meet the essential needs of members. This may require significant changes in our residential services model to make the services more consistent with new Federal guidelines and expectations.

2. All providers are challenged with recruiting and retaining qualified staff. Providers are being held to higher level of accountability with heightened audits and an increase in the amount of detail needed to meet minimum Medicaid documentation standards.
3. Federal and State policy and rule “over- interpretation” has resulted in a redirection of resources from direct services to paperwork and technology. Providers are additionally challenged by state caps on reimbursements, changing requirements for establishing and approving budgets and service authorizations, and continual services and cost-report reviews.
4. Iowa Medicaid Enterprise is reviewing requirements for cost reporting and is likely to implement new process, procedures, forms, etc. Mainstream Living will monitor this situation to ensure compliance with new requirements.

SWOT: The following is a brief summary of strengths, weaknesses, opportunities, and threats highlighted by the members, staff and other stakeholders of Mainstream Living.

Strengths: The greatest strengths identified include:

Mainstream Living’s key strengths include its demonstrated ability to provide high quality, necessary services, which help member live a fuller life in the community. Staff is committed, and the services and programs offered are monitored for quality. Mainstream is mission driven and constantly seeks to improve services through data collection and evaluation. When there is a challenge, Mainstream Living meets it through collaboration with our funders, stakeholders, and members. We are known for our innovation and creativity, our dedication to the members, and our long-term commitment to our hard working and dedicated staff. Mainstream has an excellent reputation and is perceived by other service providers, and our funders as a leader in the disability community. Finally, Mainstream Living staff are very dedicated and committed to Mainstreams mission, vision and values. We are proud that we have the highest staff longevity in the state.

Weaknesses: The potential weaknesses identified include:

Some believe that Mainstream’s significant growth has led to challenges with human resources, difficulty with supervision, lack of structure for coordination among departments, and inconsistent administrative and clerical support. There is a perceived need for improved management practices, use of technology, and increased use of volunteers. There was a call for additional social and recreational services and for greater visibility in the community. Communication may not consistently take place with family members, case managers, and other stakeholders.

Overall Gaps in the Human Services Industry: In the United States, a majority of people

with intellectual disabilities (71.5%) or roughly 3,500,000 people are still living at home with family caregivers and receiving minimal or no supports. Roughly 850,000 of these individuals live with caregivers over the age of 60, and will need support from siblings or other providers in the near future. The overall U.S. workforce is projected to grow by 6.8% in the next 10 years, yet the number of all direct care jobs is projected to grow by just over 40%. Within the total of direct care jobs, the growth in direct care workers needed to provide services for the elderly and members with disabilities is projected to be 100% over the next ten years. Nationwide the human service workers average wage is less than half of the average wage of all workers. A significant cause of this issue is due to rates of service that are holding steady, or declining under the new managed care models. At Mainstream Living we see this is a fundamental issue that could impact services in all areas and we are taking measures within this strategic plan to address this crisis.

Opportunities: The opportunities considered most important include:

1. Increased visibility, which could lead to greater access to volunteers and other resources. The county has a range of resources including potential volunteers, community colleges for courses, and universities with students interested in working with member—all of which could be better utilized. Mainstream Living Inc., could develop a program to support volunteers through screening, training and ongoing supervision. The program should also celebrate and recognize volunteer efforts. Having more volunteers can help increase fundraising. At the same time, others may look more closely at the quality of services provided by volunteers.
2. Improvements in services for members with complex medical needs. Mainstream Living is working in conjunction with other providers to meet the needs of members who have medically complex disorders. This includes modifying existing homes when possible to provide needed services.
3. Improvements in services for people with IDD/MI have been achieved by many states during the past decade by expanding supports furnished under the Center for Medicare & Medicaid Services, including Home & Community-Based Medicaid Waiver programs and state funding of improved crisis services and increased access to mental health services. While advances have been made in many areas, state DD and MH authorities and service systems continue to struggle in their attempts to provide effective and appropriate treatments and supports on a consistent and comprehensive basis. State efforts to establish and maintain coordinated systems of care for people with these co-occurring conditions have been significantly hampered by administrative and funding barriers that diffuse responsibilities and by the limited use of best practice models. Furthermore, dramatic declines in state revenues resulting from the Great Recession of 2008, coupled with personnel reductions and a faltering economic recovery, have eroded the capacity of state agencies to maintain services. In many areas across the country, waiting lists have grown and access to needed supports has been delayed, deferred, or even discontinued.
4. Aging population and an increased occurrence of members diagnosed with autism. Our members are aging and require different service settings to meet their needs. The

increasing number of members with autism may be a new consumer population for Mainstream Living Inc. We would require different skill sets, information, and facilities to serve these population groups. There is a different approach and need for different types of communication with families and members, so there would be a learning curve for building trust. Establishing relationships with the Autism Society, and elder service groups should be considered. There is also a question about who will pay for these new services.

5. Mental Health program services have expansion opportunities. Our program has been developing leadership capacity of our direct care and mid-level staff. Additionally, the Mental Health re-design holds potential opportunities for us to redesign our residential care facility and provide comprehensive services to members with multiple occurring disorders, including individuals with substance use issues. Generally speaking, our program meets the existing needs as witnessed by feedback from stakeholders, consistent referrals and our ability to serve challenging individuals.
6. Home and Community Based Services (HCBS) program services have expansion opportunities. We have a number of referrals who are in need of residential services, particularly those that can accommodate wheelchairs. We have been making necessary changes to existing properties to improve the accessibility. The program has been developing leadership capacity of our direct care and mid-level Team Leaders. Additionally, the Mental Health re-design holds potential opportunities for us to serve some individuals previously only served 100% with county funds. Generally speaking, our program meets the existing needs as witnessed by feedback from stakeholders, consistent referrals and our ability to serve challenging individuals.
7. Mainstream currently provides services in four counties in central Iowa, (Polk, Story, Boone and Dallas counties). There is an opportunity to expand services into surrounding areas with the new statewide Mental Health Re-design. Specifically, Hamilton, Hardin, Franklin, Marshall, Jasper, Warren and Madison counties. We will be working with each of these counties through their new regional advisory group to see if there is a role for Mainstream Living to provide services within their re-design plans and within our mission, vision and values. We will also be working closely with MCOs to help them implement services in needed areas, if those requests for expansion are in alignment with our mission, vision, and values and within capacity of the organization.

Threats: The threats considered most probable included:

1. Dependence on government funding. Funding, particularly the residential funding stream, has not kept up with needs. Mainstream Living Inc., needs to assess the real demand for its services, increase private pay options, and be prepared to explore other opportunities for generating revenue. The question of what happens when private money is gone needs to be addressed.
2. Staffing challenges and the cost of providing good care. It is hard to maintain a competent staffing pool. Nursing staff in particular are difficult to recruit and retain. Although increased efficiency and technology may help, high turnover, especially among direct support staff, leads to increased administrative costs. To respond, Mainstream Living Inc.,

needs to increase fundraising, empower employees and increase their opportunity for growth, and develop a pay structure for different services. We must also look at expanding recruitment activities.

3. Our aging population, of both aging caregivers and aging member, who are living longer by virtue of improvements in the medical and pharmaceutical industry, and health and diet advancements.
4. The rising housing prices make affordable housing increasingly difficult to find and maintain.
5. New federal legislation “Home and Community-Based Settings Requirements” redefines “community integration” and this definition may impact the living situations for members. Review of every living situation for compliance to these new rules is critical and will be ongoing. The rule’s impact is broad, affecting all HCBS waivers, state plans, and demonstrations across the country. **State reviews and timelines for corrective action plans may be necessary as there is a deadline of March 17, 2019 to come into compliance.** The services provided at our apartment program are the most likely to be impacted by this change, including the possibility of selling the apartments and moving members to more integrated community settings by the implementation date.
6. The MCOs rate methodology is unproven and will be closely monitored throughout the coming years to ensure adequate reimbursement for services provided. Billing and service documentation procedures are being reviewed and may be changed over the course of this strategic plan.
7. The new Mental Health redesign efforts and the Polk County plan may not have a continuing role for our apartment program as it is currently designed. Everyone agrees that low-income housing is needed, but large congregate living situations for members with mental illness are no longer state of the art practice. We will have to look at options for relocation of the members and redefining the role of the apartments or selling them to community partners interested in providing low-income housing.

Strategic Direction from the Board of Directors:

Based on our mission, the needs of the members, our core values, and the opportunities and threats in the current environment, the next three to five years will be a time of assessing and deepening our approaches to providing for the needs of members. Concurrently, Mainstream Living Inc., will take more of a leadership role in working with a broader array of community resources, and it will explore the feasibility of actively engaging volunteers.

1. Mainstream Living Inc., will review and deepen its existing direct supports and services over time to ensure that they are they are state-of-the art for working effectively with members with disabilities. The model emphasizes consumer decision-making and community participation and integration. Mainstream is committed to ensuring that all of its programs are exemplary.
2. Mainstream Living Inc., will continuously assess consumer and community needs to identify gaps or opportunities for the provision of appropriate services and supports. This assessment will serve as the basis for expanding or adding new services and responding to the opportunities available in the new state mental health re-design.
3. Mainstream Living Inc., will take a leadership role in working with a range of providers to identify and meet the needs of member. Mainstream Living Inc., will serve as a service “broker” when necessary. The focus will be to ensure quality across services and eliminate duplication and inefficiencies.
4. Mainstream Living Inc., will explore the feasibility of expanding services and supports and the agency’s visibility in the community and making greater use of volunteers. Mainstream Living will explore being more active and visible in a wide range of community initiatives, highlighting the positive role that member are playing in the community, and creating strong supporters for community participation throughout the broader community.
5. Mainstream Living Inc., will emphasize building its discretionary financial resources to invest in developing quality services. This includes building the foundation and endowment and establishing a maintenance fund to take care of our property assets.

This plan is organized by the key initiatives and accompanying goals approved by the Board of Directors. The objectives and activities outlined in this plan were developed by Mainstream Living work groups for every department, who worked with representatives from the Executive Management Team. They are approved and refined by the Board of Directors and will be carried out by the Board and staff actively working together. This Strategic Plan is the Mainstream Living blueprint for the future. It clarifies future directions for the Board of Directors and staff as they continue to meet the needs of members. Progress toward the accomplishments of stated goals and objectives must occur as the Board and staff work as a team.

A plan is only good if people are knowledgeable and informed. We will work to assist the Board of Directors and staff in obtaining knowledge of changes in the field. We will also maintain membership and participation in local, state and national associations that relate to programs and services. We will attend local, state and national conferences that present information related to developments in the field. And, encourage use of Board members’ business and social networks

to promote the mission of Mainstream Living. This plan will be reviewed annually and updated and changed as the needs of the people we serve change. Finally, our vision of the future will also be reconsidered with the changing times, available resources and changing needs of the the members and the organization.

Successful implementation of this strategic plan will result in more quality supports and services delivered to consumers, more consumers welcomed in the community and actively involved in community life, and a broader array of community resources valuing and supporting members with disabilities. The ultimate result that Mainstream Living Inc. aspires to achieve is far beyond high quality supports and services for member. It is about changing community conditions that make full community life possible for every person. It is about meeting our mission, it is about enhancing opportunities, creating success and fulfilling dreams.

William Vaughn, MSW, LISW
President & CEO

Mainstream Living, Inc Strategic Plan 2017 - 2021

Governance (Accountability, Board Of Directors Composition/Structure, Legal Requirements)

Goal	Objective	Metrics	Responsible Party	Due Date
A. Mainstream Living consistently demonstrate and inculcate the best ethical business practices.	1. Board reviews and completes conflict of interest and ethics statements, reviews bylaws and articles of incorporation.	1.a. Signed and dated documentation on file, notations made in Board Minutes.	Chief Executive Officer (CEO)	Annually: March 1, 2017
	2. Leadership reviews the conflict of interest and ethics statements with all management staff at least annually.	2.a. Management meeting notes reflect the review of conflict of interest and ethics statements and any discussion.	Vice Presidents, Program Coordinators.	Annually: March 1, 2017
B. The Board of Directors for Mainstream Living has adequate representation for members within our catchment area.	1. Conduct annual recruitment efforts as needed to ensure board numbers and representation.	1.a. Membership needs identified and new members recruitment is conducted as needed.	CEO and Board	Annually: November 1, 2017.
	2. Board composition will include members with direct experience with the needs of the various disability populations served by Mainstream Living.	2.a. Review membership and make recruitments as needed to have representation for each population group served..	Vice President (VP) Mental Health, Board, CEO	October 1, 2017
C. The Board of Directors follows an annual work plan to clarify board expectations for the year. Board members are actively engaged.	1. Each Board member supports the Annual Campaign.	1.a. by supplying at least one venue for the CEO to speak about the importance of the organization's work.	CEO and Board Director of Development	Annually: December 1, 2017.
	2. Each Board member supports development activities/goals.	2.a. by making an annual donation and /or participating in development activities. 2.b. The Program Development Committee responsibilities are expanded. The committee will work more closely with the Director of Development to organize and implement fundraising activities.	CEO and Board	Annually: December 1, 2017. Annually: January 2018
	3. Each Board member serves actively on at least one committee .	3.a. by attending >= 75% of the committee meetings.	CEO and Board	Annually: December 1, 2017.
	4. Board members support advocacy efforts as requested by the CEO.	4.a. by writing a letter to the editor, visiting a legislator, writing a letter to a legislator, etc.	CEO and Board	Annually: December 1, 2017.
	5. Each Board Member takes an active role in supporting and building the Board.	5.a. by suggesting new potential Board member to the Nominating Committee for consideration at least once during each three year term.		Annually: December 1, 2017.

	6. Board members conduct Full Board, and self-evaluation	5.b. by participation in Board Self-Evaluation process. 6.a. Signed and dated evaluations on file	CEO and Board	Annually: March 1, 2017.
D. Elect and orient board members who will effectively oversee the implementation of the mission, vision and core values of Mainstream Living	1. To assure continuing leadership from the board of directors and to assure smooth transition and continued compliance with CARF	1.a. New board members elections and orientation completed/scheduled. 1.b..conduct continuing education as an ongoing process of board meetings with publications from Board and Administrator, CARF and other relevant resources, and materials at least quarterly.	CEO and Board	Annually: December 1, 2017.

Leadership (Structure, Guidance, Responsibility, Recruitment)

Goal	Objective	Metrics	Responsible Party	Due Date
A. Mainstream Living is guided by a strategic plan which is relevant to our mission, comprehensive for the needs of members served and visionary for our future.	1. Conduct Annual Review to assure that the Strategic Plan remains relevant to the needs of members, operations, and resources available.	1.a. Reviews noted in EMT schedule/minutes	CEO and Executive Management Team (EMT)	Annually, August 1, 2017.
	2. Update the Strategic Planning window and goals as needed to include a five year vision, goals and objectives	2.a. Review noted in EMT schedule/minutes	CEO and EMT	Annually, January 1, 2018.
B. Mainstream Living has the capacity to meet its mission and to provide a broad array of services within each program area.	1. Seek qualified credentialed candidates for service expansion/improvement needs as identified in this plan.	1.a. Review leadership structure, organizational chart and strategic goals and objectives at least annually. To assess the needs of the organization and the capacity for improvement and growth during budgeting process.	CEO and EMT	July 1, 2017
	2. Develop internal staff capacity and credentialing where possible.	2.a. Staff development plans are in place.	CEO and EMT	March 1, 2017
C. Mainstream Living will Maintain the highest levels of accreditation and/or licensed status.	1. Programs shall be consistently operated in compliance with applicable license and/or accreditation standards.	1.a. Work with licensing/accreditation personnel and maintain necessary information, applications/documents. 1.b. Quarterly conduct file audits for programs so that consumer and employee files are accurate and complete.	CEO and EMT Corporate Compliance Officer, VPs of Services	CARF Accreditation application prior to November 2018. February 1, 2017. May 1, 2017 August 1, 2017 November 1, 2017
D. Review with each MCO their needs for new or expanded services to fulfill requirements to meet accessibility standards for “core services” within geographic	1. Research our capacity to provide new services and supports. 2. Communicate need to Board for consideration. 3. If in alignment with our mission, vision, and values	1.a. Develop budgets 1.b. Assess staffing needs 1.c. Set time-lines to acquire resources, and initiate services 2.a. Communicate new needs and plans to board and staff.. 3.a. Develop time-lines and tasks necessary for follow through.	CEO and EMT	February 1, 2017. May 1, 2017 August 1, 2017 November 1, 2017

areas.	then establish time lines			
E. Consider issues relevant to Mainstream living's needs with respect to potential mergers, acquisitions, and affiliations.	<p>1. Attend presentation offered by IACP entitled, "Mergers, Acquisitions, Affiliations & Beyond" presented by Tom Schramski, Vertess Advisors, LLC.</p> <p>2. Research our needs and capacity to expand through any merger, acquisitions or affiliations.</p> <p>3. Research specific opportunities as they present and communicate same to the Board of Directors.</p>	<p>1.a. Develop budgets</p> <p>1.b. Assess staffing needs</p> <p>1.c. Set time-lines to acquire resources, and initiate services</p> <p>2.a. Communicate new needs and plans to board and staff..</p> <p>3.a. develop time-lines and tasks necessary for follow through.</p>	CEO and EMT	<p>February 1, 2017.</p> <p>May 1, 2017</p> <p>August 1, 2017</p> <p>November 1, 2017</p>

Financial Planning And Management (Budgets, Fiscal Policies, Audits, Corporate Compliance)

Goal	Objective	Metrics	Responsible Party	Due Date
A. Mainstream Living has an annual audit conducted by an independent Certified Public Accountant (CPA)	1. To assure an outside, objective and unqualified opinion on the financial condition of Mainstream Living	1.a. Audit report	Chief Financial Officer	Annually: October, 2017
B. Mainstream Living is in full compliance with all Sarbanes-Oxley voluntary recommendations for not for profit organizations	1. Board Members review the completed audit report. The finance committee meets with no staff present, prior to being reviewed by the full board of directors.	1.a. Board Minutes	Chief Financial Officer	Annually: October, 2017
C. Mainstream Living strives to be financially responsible and solvent, conducting fiscal management in a manner that supports our mission, vision and values.	<p>1. An annual budget is prepared and approved by the board of directors prior to the beginning of each fiscal year.</p> <p>2. Financial results are compared to budget and reported to the Board of Directors, Personnel and other stakeholders at least quarterly.</p> <p>3. Maximize bottom line within cost reporting guidelines to prioritize reducing debt and build cash reserves.</p>	<p>1.a. Board Minutes</p> <p>2.a. Board Minutes, EMT minutes</p> <p>3.a. Statement of financial position</p>	<p>Chief Financial Officer</p> <p>Chief Financial Officer</p> <p>Chief Financial Officer</p>	<p>Annually: July 1, 2017</p> <p>At least Quarterly, February 1, 2017. May 1, 2017 August 1, 2017 November 1, 2017</p> <p>End of fiscal year June 30, 2018</p>
D. Mainstream Living strives for the highest level of quality assurance and corporate compliance	<p>1. The Quality Assurance and Corporate Compliance Committee (QA-CC) meets at least quarterly.</p> <p>2. There is an annual Performance Measurement and Management plan, consistent with CARF guidelines.</p> <p>3. There is an annual review of the organization's policy on corporate compliance.</p> <p>4. The QA-CC monitors and reports key "Dashboard" data of organizational goals</p>	<p>1.a. QA-CC meeting notes.</p> <p>2.a. Annual Plan.</p> <p>3.a. QA-CC meetings notes.</p> <p>4.a. QA-CC Dashboard report is</p>	Vice President of Operations, Corporate Compliance Officer	<p>February 1, 2017.</p> <p>May 1, 2017</p> <p>August 1, 2017</p> <p>November 1, 2017</p> <p>Annually: December 1, 2017</p> <p>Annually: December 1, 2017.</p> <p>February 1, 2017.</p>

	and outcomes to the board at least quarterly.	completed at least quarterly and made available to board members.		May 1, 2017 August 1, 2017 November 1, 2017
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Risk Management (Planning, Insurance, Identification of Loss Exposures)

Goal	Objective	Metrics	Responsible Party	Due Date
A. Mainstream Living acts to manage risk and reduce the severity of any potential threats to its people, property, income, goodwill, and ability to accomplish goals.	1. Conduct and review agency-wide risk management assessment to determine areas of risk and plan for adequate protection	1.a. Written assessment on file	Safety Committee and EMT	Annually: May 1 2017.
B. Mainstream Living assure that insurance is in place to adequately protect the assets of the corporation	1. To protect the financial viability of the corporation in case of catastrophic occurrence	1.a. Insurance policies are in force and reviewed annually. 1.b. The Directors and Officers (D/O) insurance policy is reviewed with the Board of Directors at least annually.	CEO and V.P. of Operations	Annually: July 1, 2017. Annually: December 1, 2017.
C. Consistently utilize Universal Enhancements and provide Positive Behavior Supports (PBS) to prevent and/or mitigate risks identified for member.	1. To provide personalized risk identification and mitigation for any member by Mainstream Living.	1.a. Positive Behavior Support Committee meets at least quarterly. Plans are generated as needed for member.	P.B.S. Committee	At least Quarterly, January 31, 2017 April 30, 2017 July 31, 2017 October 31, 2017

Health And Safety (Inspections, Emergency Procedures, Accessibility Reporting)

Goal	Objective	Metrics	Responsible Party	Due Date
A. All facilities owned or leased shall have routine annual inspections by an outside authority.	1. To assure that places of business are safe for members, employees and general public	1.a. Reports on file with Safety Committee	Property Manager / Maintenance Supervisor	Annually: by November 1,2017
B. All facilities owned or leased shall have routine semi-annual internal inspections.	1. To assure that places of business are safe for members, employees and general public	1.a. Reports on file with Safety Committee	Property Manager/Maintenance Supervisor	Semi- Annually: April 1 and November 1, 2017
C. Mainstream Living will act to Improve Access and Accessibility of Services for members.	1. Assess the accessibility needs of person's served, personnel, and other stakeholders. 2. Implement an annual accessibility improvement plan to identify and address barriers in architecture, environment, attitudes, finances, employment, communication, technology, transportation, community integration and other other identified barriers.	1.a. Conduct agency wide accessibility survey including employees, members and other stakeholders as needed to update accessibility plan.. 2.a. Develop and update accessibility improvement plan	Chair of the Safety Committee	Annually: by January 31, 2017 Annually: by April 1, 2017

D. Mainstream Living will provide services in environments that are safe for members, employees and the general public	1. All safety policies and procedures shall be reviewed for continuing appropriateness and relevance to operations 2. Provide information from the National Safety Council to staff annually	1.a. Documented review	Safety committee	Annually: October 1, 2017
		2.a. E-mails directed to staff throughout the month of November	Property Manager / Maintenance Supervisor	Annually: December 1, 2017

Support Services

Goal	Objective	Metrics	Responsible Party	Due Date
A. Implement electronic tracking/record keeping system for payroll timekeeping	1. To assure accurate records are maintained for all payroll timekeeping	1.a. ADP Time and Attendance model fully implemented	V.P. of Operations & Director of Information Technology	June 1, 2017
B. Assess agency capability to increase wages and review benefits packages to assure continued longevity and quality work force	1. To assure wage and benefits remain competitive in field.	1.a. Support Services generates written analysis of wage and benefit assessment	Vice President of Operations	Annually: June 1, 2017
C. Create an environment where staff understand their importance and role in maintaining the vision of being the "Premier Employer"	1. Identify all "customers" of the Support Service Department and improve the satisfaction of those whom are impacted by our supports	1.a. Customer Satisfaction surveys	V.P. of Operations, and Designated Support Services Staff	Oct 1, 2017
D. Ensure appropriate transportation resources to meet the needs of members.	1. Replace two lift vans. 2. Establish plan for replacing four vehicles annually	1.a Vans are replaced 2.a Plan is developed and implemented.	VP of Operations and Director of Maintenance	July 1, 2018 July 1, 2020 June 1, 2018
E. Mainstream Living will promote a Healthy Workforce	1. Utilize available resources to provide educational materials for major metabolic disorders.	1.a. Wellness Information provided at least quarterly	Wellness Committee, Benefits Coordinator	June 30, 2017
F. Promote accessibility and the removal of barriers for the members and other stakeholders.	1. Assess the accessibility needs of the member's, personnel, and other stakeholders. 2. Implement an annual accessibility improvement plan to identify and address barriers in: architecture, environment, attitudes, finances, employment, communication, technology, transportation, community integration and any other identified barriers.	1.a. Conduct agency wide accessibility surveys, and surveys of members and other stakeholders as needed to update the accessibility plan. 2.a. Develop and update annual accessibility improvement plan.	EMT, Benefits Coordinator, Wellness Committee, H.R. members and other stakeholders.	Reviewed at least annually by November 1, 2017 Annually: November 1, 2017.

Human Resources

Goal	Objective	Metrics	Responsible Party	Due Date
A. Internship program	1. Develop a formal internship program.	1.Application process for interns 2. Objectives for unpaid and paid internships.	Recruiter, Coordinator	June 2017
B. Paperless HR	1. Leverage ADP system to set up supervisor emails online 2.. Company homepage for internal staff. Use as a communication portal. 3. Begin process to transition employees files to online. (2018 goal)	1. Finalize salaried eval forms by program & pull all evals online 2. MSL employees have access to ADP homepage and push communication. 3. Set up and scan all employee files into ADP cloud storage	HR Generalist, HR Director	March 1, 2017 March 1, 2017 April 1, 2017
C. Talent Development Program	1. Continue MEL- Mainstream Emerging Leaders program which includes mentor/mentees 2. Create MEL2-leadership program 3. Broaden leadership training opportunities 4. Implement quarterly Talent Reviews which includes Succession Planning	1.Runs May-October 2017 2.Only MEL grads can participate-company goal focus vs. individual goals. 3. Offer Monthly Lunch & Learn topics/training for Support Services, Center, MH & HCBS leaders) kick off in January 2017 4. Rolled up by HCBS, MH, SS & Center staff	HR Director	May 1, 2017 May 1, 2017 December 31, 2017 March 1, 2017
D. Compliance and Regulation Education	1. Provide PC's and TL's with education surrounding HR rules that will assist and inform them in HR related tasks.	1. Review effectiveness with PC's, TL's and VP's	HR Director and HR Manager	Annually
E. Mainstream Living supports and respects the diversity of the member's, personnel, families/caregivers and other stakeholders.	1. Implement comprehensive cultural competency and diversity plan. 2. Update/Monitor and revise cultural competency and diversity plan as needed.	1.a. Review attitudes, organizational structure, policies, and services annually. 2.a. Monitor awareness and sensitivity, and develop training specific to the diversity of the members, and local community as needed.	CEO, EMT, Human Resources (H.R.) Director	Annually, February 1, 2017. Annually, April 1, 2017.
F. Increase employee recruitment and retention	1. Develop a Recruitment and Retention Advisory Committee	1.More efficient results with ideas. 2. Will include individuals pertinent to making decisions and that can offer decision making information.	Recruiter	January 2017

Technology

Goal	Objective	Metrics	Responsible Party	Due Date
A. Update HIPAA policies and procedures	1. To achieve conformance with federal regulations	1.a. Policies updated	Compliance Officer and Security Officers	July, 2017

B. Transition to Therap for documentation and billing.	1. Research QA needs with respect to changing documentation 2. Establish a timeline for transition from existing system and billing requirements. 3. Complete transition.	1.a. QA needs list created. 2.a. Written transition plan created. 3.a. Inter data (3 months to complete). 3.b. Train management level staff. 3.c. Implement in small groups, training staff as we go.	Information Systems Manager	January, 2018
C. Upgrade Ames and Des Moines office phone systems.	1. Complete infrastructure upgrades. 2. Phones systems replaced.	1.a. All internal and external work is completed. 1.b. All equipment purchased. 2.a. Equipment replaced. 2.b. Phone systems configured and installed.	Information Systems Manager	February, 2017
D. Upgrade aging equipment.	1. Replace equipment based on the annual refresh plan.	1.a. Replace an average of 50 pieces of equipment per year.	IT	Annually Through January, 2022

Communications, Marketing and Fundraising:

Goal	Objective	Metrics	Responsible Party	Due Date
A. Increase awareness of the Mainstream Living brand.	1. Develop and share organization communications plan 2. Develop brand standards and editorial content guidelines. Ensure that all program material, images, logos, etc., are consistent with Mainstream Living brand.	1.a. annual communications plan is developed, approved by EMT 1.b. determine strategic goals for communication plan, including target audience and cost-effective methods 1.c. review current advertising strategies for recruitment and utilize evidence-based marketing practices to achieve goals (i.e. digital marketing) 2.a. incorporate brand standards and guidelines into orientation 2.b. Programs are reviewed annually for brand messaging consistency.	Communications Director, and EMT Communications Director, and EMT Communications Director, and EMT	July 1, 2017 annually. January 1, 2018, annually. January 1, 2018
B. Increase awareness of programs and services through publications and technology	1. Produce quarterly newsletter and annual report for supporters of MSL 2. Website homepage is updated at least six times per year, Facebook page is updated several times per month	1.a. Newsletter/annual report is mailed quarterly 2.a. Calendar is created designating parties responsible for submitting content to be used on website and social media. Reports pulled to ensure that number of site visitors is maintained or increased.	CEO, Director of Development, designated Program Staff	January 1, 2017. April 1, 2017 August 1, 2017 Oct/Nov 1, 2017 Calendar and website training completed by February 1, 2017 then updates occur monthly, ongoing.
C. Ensure seamless coordination and communication	1. Review and revise policies and procedures related to communications, development and marketing activities.	1.a. Review and update gift acceptance policy annually as needed. 1.b. Develop procedures for recording, tracking, and thanking donors.	Director of Development	July 1, 2017

practices.	<p>2. Ensure consistent attendance of internal and external meetings and committee participation as needed to promote good communications practices.</p> <p>3. Develop system to consistently inform members, family members, outside stakeholders and potential funders of the organizational needs, goals and performance outcomes.</p>	<p>2.a. Serve on QACC, attend MH Leadership meetings and HCBS meetings as appropriate</p> <p>2.b. Represent Mainstream Living in external efforts to build Inclusive Playground and Miracle Field in Ames.</p> <p>2.c. Represent Mainstream Living in other external efforts which further the goals of members and mission of the organization (i.e., affordable housing, volunteer programs, human services collaboration, Chamber, etc.)</p> <p>3a. Develop materials for Managed Care Organizations which highlight service statistics and outcomes</p> <p>3c. Develop materials which promote workplace culture at Mainstream Living (i.e. videos, digital marketing content)</p>	<p>Communications Director</p> <p>Communications Director</p>	<p>July 1, 2018</p> <p>Monthly</p> <p>As needed, complete by July 31, 2018</p> <p>Ongoing</p> <p>July 31, 2017</p>
D. Ensure long-term financial success of the organization	1. Cultivate donor relationships	<p>1.a. Implement a stewardship plan and calendar to be used by Board, CEO and Communications Director</p> <p>1.a. Implement donor recognition program that includes systems and materials for memorial and honor gifts.</p>	CEO, Board, Communications Director	<p>Jan. 1, 2018</p> <p>Jan. 2020</p>
E. Conduct one direct mail campaign and at least one annual fundraising event	1. To supplement the financial needs of Mainstream Living programs	1.a. End of year fundraising campaign	Communications Director	<p>Event conducted by December 1, 2017.</p> <p>Direct Mailing completed in December 2017.</p>

Quality Service Indicators: Mainstream Living will be the “Agency of Choice” for members.

Goal	Objective	Metrics	Responsible Party	Due Date
A. Families, guardians and members are involved in program services and supports to enhance understanding and engagement	1. Develop/enhance a family/guardian orientation program and on-going forums.	1.a. Family/guardian forums have been completed for 3 months.	MH Program Director: Transition Age Youth (TAY) program Administrator, VP of Mental Health Services	May 31, 2017
B. Expand in areas of strength so that Mainstream Living services are preferred more than other agencies	<p>1. Maintain regular and reasonable contact with Regional and County planning groups, the Department of Human Services (DHS), Managed Care Organizations (MCO) and other appropriate entities.</p> <p>2. Actively market to consumers, families, and case managers</p>	<p>1.a. Designated staff will attend meetings and report to the Executive Management Team at least quarterly.</p> <p>2.a. Designated staff will attend meetings and provide information to</p>	V.P.s of Mental Health and Waiver Services.	<p>Quarterly: Ongoing</p> <p>Quarterly: Ongoing</p>

	Mainstream Living services and supports.	potential stakeholders at least quarterly.		
C. Explore and develop permission marketing opportunities.	1. Keep in contact with information seekers in a way that they feel valued and important. 2. Involve members and staff in the selling/promoting of Mainstream Living services. By developing a "speaker's bureau".	1.a. Monitor all referrals for service and follow up with all referral requests within 1 week. 2.a. Invite and pay members and selected staff to participate in at least one Job Fair with HR dept..	V.P.s of Mental Health and Waiver Services. Director of Human Resources.	August 1, 2017 August 1, 2019
D. Reward and recognize Mainstream's Mission Makers. Promote accountability at all levels throughout the organization by helping staff understand that their behavior has a direct impact on meeting the mission.	1. To recognize the efforts of all Mainstream Living Employee to help meet our mission. To create organizational clarity and focus on the Mission, Vision and Values.	1.a. Recognize the top performers of each program monthly. 1.b. Share the efforts of all mission makers as part of our office and newsletter publications.	V.P.s of Mental Health and Waiver Services. and Supervisors in all programs	Monthly and ongoing Quarterly. On-going

Waiver Services

Goal	Objective	Metrics	Responsible Party	Due D
A. Increase program capacity to meet the needs of special population groups	1. Enhance our ability to serve individuals with special aging needs.	1.a. Develop/implement a program to serve elderly individuals with Intellectual Disabilities (ID) under the HCBS program.	VP of Waiver Services, Program Coordinators, Team Leaders, Registered Nurse Coordinators	July 1, 2019
	2. Enhance our ability to serve individuals that are younger through the transition age 17-22 approximately. By working in collaboration with the school system.	2.a. Develop/implement and market a program to serve younger adults who are transitioning from high school and other specialized service providers.	VP of Waiver Services, Program Coordinators	June 30, 2021
B. Develop the skills and knowledge of Team Leaders and Program Coordinators.	1. HCBS staff will become knowledgeable of the requirements, systems, expectations of the four MCO companies.	1.a. Create a matrix of information for identifying requirements, systems and expectations of the MCO companies that can be used as a resource guide.	VP of Waiver Services, Program Coordinators,	January 1, 2017.
	2. Develop strong working relationships with the four MCO companies.	2.a. Determine key positions and personnel at each of the four MCO companies. 2.b. Invite MCO personnel identified to meet and tour HCBS services 2.c. Provide response to MCO inquires within 2 business days		January 1, 2017 - March 31, 2017 on-going
C. Build program capacity to serve more members with needs in catchment area of Story, Polk, Dallas, and Boone	1. Explore expansion opportunities which may become available within our catchment area.	1.a. Review needs and plan for expansion annually.	VP of Waiver Services, Program Coordinators, Registered Nurse Coordinators, Team	October 1, 2017.

counties.			Leaders	
D. Improve continuity between HCBS residential and vocational/day habilitation programs	<p>1. To align all HCBS programs to increase productivity, communication and relations with guardians, members and stakeholders from program to program</p> <p>2. To operate under similar systems, policies, trainings, etc to ensure continuity between programs</p>	<p>1. Streamline systems such as but not limited to:</p> <ul style="list-style-type: none"> - Update current HCBS Orientation Manual to include Center information - Merge residential and Center's policies to be a combined HCBS set of policies - add a side note for any differences 	VP of Waiver Services and Program Director	December 31, 2017

The Center

Goal	Objective	Metrics	Responsible Party	Due Date
A. Assess program capacity by determining feasibility of starting and operating an after school program in the day hab/ACE and Snoezelen program.	1. To determine need and feasibility of expansion and further development of services.	1.a. Feasibility study is presented to EMT for review and consideration.	VP of Waiver Services and Program Director	June 30, 2018
B. Increase program capacity to meet the needs of special population - Elderly members.	<p>1. Develop retirement type day program within the Center building on McCormick Ave</p> <p>2. Also consider options of an additional location to include potential partnerships with Heartland Senior Services, local churches</p>	<p>1.a. Physical structure of building is able to meet need of this population.</p> <p>1.b. Retirement program is developed and implemented.</p> <p>2. Develop partnership with other senior services in Ames community</p> <p>3. Develop and implement program</p>	VP of Waiver Services and Program Director	<p>March 31, 2020</p> <p>June 30, 2020</p>
C. Increase program capacity to meet the vocational needs of members.	1. Develop additional enclave to serve individuals capable of working off site	1.a. New enclave site is opened to serve Center consumers.	VP of Waiver Services, Program Director, and Director of Communication	December 31, 2018.
D. Integrate volunteers, practicum students and community members into program	<p>1. Work with local colleges and develop intern/practicum opportunities at the Center</p> <p>2. Work with the Volunteer Center and other similar programs to develop volunteer base</p> <p>3. Work with Ames community to build more community integration in the program</p>	<p>1. Continue to make contact with advisors/professors</p> <p>2. Reach out to community through articles in the agency newsletter, Facebook and other social media to spread interest in community involvement/volunteer opportunities</p>	Program Director	June 30, 2018
E. Improve continuity between HCBS	1. To align all HCBS programs to increase productivity,	1. Streamline systems such as but not limited to:	VP of Waiver Services and	December 31, 2017

residential and vocational/day habilitation programs	<p>communication and relations with guardians, members and stakeholders from program to program</p> <p>2. To operate under similar systems, policies, trainings, etc to ensure continuity between programs</p>	<ul style="list-style-type: none"> - Update current HCBS Orientation Manual to include Center information - Merge residential and Center's policies to be a combined HCBS set of policies - add a side note for any differences 	Program Director	
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Mental Health Services

Goal	Objective	Metrics	Responsible Party	Due Date
A, Create programs and supports that align with MCO expectations	<p>1. Identify MCO, County and agency outcomes develop data collection, monitor benchmarks and realign services.</p> <p>2. Review staff orientation and training programs</p> <p>3. Identify and integrate evidence based practices (EBP) into program services.</p>	<p>1a. Develop data collection methods 1b Monitor benchmarks 1c Examine and realign services</p> <p>2a complete annual reviews of new staff orientation 2b Develop and manage staff training needs 2c provide lunch and learn opportunities</p> <p>3a identify EBP 3b provide training 3c integration of EBP into work environment</p>	<p>VP of Mental Health services/QA</p> <p>MH leadership team</p> <p>VP/therapist</p>	<p>1a April 2017 1b Quarterly monitoring 1c As needed</p> <p>2a FEB 28, 2017 2b through 12/31/2017 2c on going</p> <p>3 12/31/2018</p>
B. Enhance current services	<p>1. Explore developing a peer run club house.</p> <p>2. Create a plan for use of three apartment buildings on DSM Southside.</p> <p>3. Explore expansion of SA/Therapy Services</p>	<p>1. Models will be defined and integrated.</p> <p>2. research use options for apartment buildings 40 E McKinley and 4711 South Union.</p> <p>3. develop plan that includes specific activities, timelines and areas of responsibility</p>	<p>1. Therapist/VP</p> <p>2. EMT, MH Leadership</p> <p>3. CADC, VP, Therapist, EMT</p>	<p>12/31/2018</p> <p>3/17/2020</p> <p>12/31/2017</p>
C Treatment services will incorporate recovery concepts and principles and people will receive the service that best fits their diagnosis and treatment goals.	<p>1. Identify qualities of excellent staff</p> <p>2. Review and integrate member on-boarding activities</p>	<p>1a communicate with HR 1b clarify roles and responsibilities 1c Identify team expectations</p> <p>2a assess current process 2b make recommendations for change 2c implement changes</p>	<p>HR and Team Leaders</p> <p>Referral Coordinator/ MH leadership team</p>	<p>January 1, 2019</p> <p>January 1 2020</p>

REVIEW Timelines.....

QUARTERLY UPDATES

March 31, 2017

June 30, 2017

September 30, 2017

December 31, 2017