

NORTHEAST INDEPENDENT LIVING PROGRAM INC.

NILP Strategic Plan

2018-2023

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NILP Strategic Plan Introduction

NILP HISTORY

NILP has a long and productive history of serving people with disabilities in the Merrimack Valley and its greater service area. Founded in 1980, by a small group of advocates: Ellen Gilbert, Susan Halloran, Charles Carr and Bill Martin; the Center opened its doors to people with disabilities in November. Through the leadership of its co –founding Directors, Susan Halloran and Charles Carr, the Center became recognized nationally as a place of innovation and cross disability service. Here are some highlights of NILP's history and leadership in the Independent Living Movement:

- In 1980, NILP was one of the first IL Centers to be funded by the newly created federal funding for Centers for Independent Living. Charlie Carr, a NILP Cofounder and Executive Director, led the organization until 2007, as a recognized advocate and leader in the Commonwealth and on the national stage.
- NILP was also one of the best examples of consumer control. From the beginning, the commitment to a majority of the Board and Staff representative of people living with disabilities was consistent.
- In 2008, NILP Board of Directors completed a national executive search and June Cowen Sauvageau was unanimously selected by the Board to lead NILP.
- In a very dynamic and changing human services environment; NILP continues to develop new funding sources to assist people with disabilities to live and work in communities of their choice.
- In 2010- 2012, NILP embarked on an extensive Strategic Planning process. The process included several Consumer focus groups, Community and Business focus groups, Staff and Board input.
- In 2012, NILP published its five year Strategic Plan- 2012-2017.
- In the early 90's, NILP was the first IL Center in the Commonwealth to receive funds from DMH to provide IL Services to Psychiatric Survivors. In 2017, NILP is the <u>only ILC</u> In the Commonwealth to apply and be granted as one of five Recovery Learning Communities serving the needs of individuals with lived experience in recovery funded through DMH.
- In 2016, NILP Board, Staff and Community Participants completed an extensive community wide Rebranding Initiative to develop a new logo and tagline that best represents our organization and its mission.
- In 2016- 2017, NILP embarked on the next five year Strategic Planning Process to steer the organization from 2018- 2023.

EXECUTIVE SUMMARY

On behalf of the Board of Directors and Staff, thank you for being a part of NILP's northeast community of individuals who wish to ensure the goals of "Community First" and the Olmstead Act. The Olmstead Act " ... a ruling that requires states to eliminate unnecessary segregation of persons with disabilities and to ensure that persons with disabilities receive services in the most integrated setting appropriate to their needs."

NILP proudly celebrated its 35 year milestone anniversary in 2015. We observed our accomplishments in our October 2015 Luncheon and celebrated with a GALA in April 2015 at Blue Ocean, Salisbury MA.

Some Highlights Include:

- Personal Care Attendant (PCA) services provided to almost 1500 persons living with a disability in the greater Merrimack Valley.
- Nursing Home Transition Services have supported almost 200 successful community transitions for person wishing to live back into the community during the past 5 years.
- NILP's Northeast Recovery Learning Community reaches almost 400 individuals in Recovery, on a monthly basis, who participate in peer run groups.
- Youth Services Program supports Transition Age Youth ages 14- 22 to live full and independent lives in their community. Pre- employment Readiness and Youth Summer Career Exploration Program and Internships are just a few of the services.
- Launched an Education Division in 2013, whose purpose is to educate community and businesses about the ADA and Disability Awareness and Cultural Competence.
- Technical Assistance ADA Consulting services to cities and towns who wish to conduct ADA Self-Evaluation and Transition Plans for their community. Such recent projects completed include: Town of Groton, Town of Boxford, City of Lawrence, Lowell, and City of Haverhill to name a few.

It is with great sense of community pride, the NILP shares the 2018 – 2023 Strategic Plan.

The purpose of this Plan is to highlight the goals we strive to meet to best serve the diverse needs of our community. NILP stakeholders continue to influence our advocacy issues and strategies; while, our Leadership Team and Board continue to monitor the trends in the human services and health care fields to seek new funding opportunities that may arise to better serve our consumers.

Industry Trends and Data Background

Looking back 2012 Data /Trends

In June 2011, the Providers' Council asked Public Consulting Group (PCG) to examine national trends in the purchase and provision of services across the human service sector. PCG is a privately held consulting firm serving state and local health and human services programs. The goal of the research was to help agencies achieve their performance goals and better serve populations in need.

The objectives of this report were to provide Human Service Sector Executives:

- A concise overview of the major growth areas for human service provision and procurement at the Commonwealth level.
- A review of ground-breaking strategies and significant trends elsewhere in the country to address the emerging issues in this area.

Synopsis

This report addresses three major issues facing human service providers and public agencies today:

1) The growing emphasis on customer-centric care

The culture change in human services towards person centered care and consumer self direction. A shift in serving consumers in locally based services programs to meeting the needs of individuals in ways that are based upon the least restrictive community environments and providing the consumer with individualized options with enhanced control over the services they receive.

2) The decentralization of services and associated rise of coordinating bodies

This trend relates to a model of coordination of services across the health care and community based organizations. The care of people with multiple health and social needs depending on cross collaboration among vendors.

3) The changing face of payment models in the field.

There is an increased emphasis on payment models that are based on outcomes and cost containment. Examples of a trend towards **Fee For Service**, **Capitation Models of Reimbursement**, **Managed Care and Pay for Performance**.

Citation-

Trends in the Human Service Landscape, Massachusetts Council of Human Service Providers Prepared by Public Consulting Group, Inc. Commissioned by the Massachusetts Council of Human Service Providers, Inc. March 2012

Moving Forward 2017..... Trends and Data

The 2012 data and trends listed above have all become solidly part of the Human Services Sector landscape in 2017. Over the past several years, Massachusetts has embarked on its MassHealth Care Reforms and initiatives aimed at Person Centered Planning and Consumer Self Direction, Healthcare Providers and Community based organizations coordinating care, and Payment Reform.

The MassHealth Reform initiatives include:

- A managed care plan option for Masshealth enrollees through a One Care Model for Medicare and Medicaid covered persons. 2013
- 2) A MassHealth initiative for the formation of Accountable Care Organizations (ACOs) and Long Term Services and Support (LTSS) with community based organizations coordinating the care with ACOs. 2016, 2017
- 3) New multiple Managed Care Services models in MA
- 4) New payment for performance initiatives tied to quality benchmarking MFP 2014-2017
- 5) Long Term Services and Supports models requiring cross collaboration with health care providers as LTSS Community Partners. LTSS Community Partners must apply to be certified through MassHealth.

In 2017...

The Providers' Council Research and Policy efforts were teamed with the UMASS Donahue Institute, and the Public Policy Center of UMASS Dartmouth to address the exponential growth in the size of the human service industry workforce and the significant trend and concerns with the labor market forecasts. The report published in 2017 "Who Will Care? The Workforce Crisis in Human Services," is a deep dive into the human services sector workforce crisis with data and potential State implications.

Success of the human services industry is measured by the quality of services delivered to the most vulnerable residents of the Commonwealth. Critical to the industry's success is a skilled, motivated workforce equipped to provide a wide array of services in every one of the Commonwealth's 351 cities and towns. As such, the Massachusetts Council of Human Service Providers (Providers' Council) and its members across Massachusetts have focused their attention on workforce issues for more than a decade.

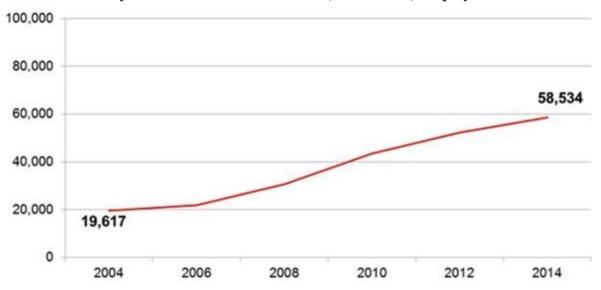
As early as 2005, the Council and its members were concerned with recruiting and retaining a strong workforce. At the time, human services employers were faced with high rates of turnover and prolonged job vacancies. In *Help Wanted* and *Help Wanted* 2, the University of Massachusetts Donahue Institute documented both the lack of workers to fill job openings and the factors driving workforce shortages, including workers being overwhelmed and overburdened, low wages, and a lack of applicants to fill vacant positions. However, workforce shortages were somewhat ameliorated during the economic downturn when unemployment rates

were high and many Massachusetts residents were in need of work. In today's economy, significant numbers of unfilled job openings are once again an issue of grave concern.

Growth over the past decade

The health care and social assistance sector accounts for nearly 20 percent of all Massachusetts employment. Within health care and social assistance: the human services industry accounts for 27 % of the overall sector, (an estimated 163,496 jobs in 2014). The human services industry therefore represented 4.4% of the Commonwealth's total employment in 2014. Over the past decade, despite the worst economic downturn since the Great Depression, health care and social assistance employment has grown by over 25 percent compared to overall MA employment growth of 3.6 percent during the same period. Nearly one-half of the employment growth in health care and social assistance (48%) occurred in the human services industry.

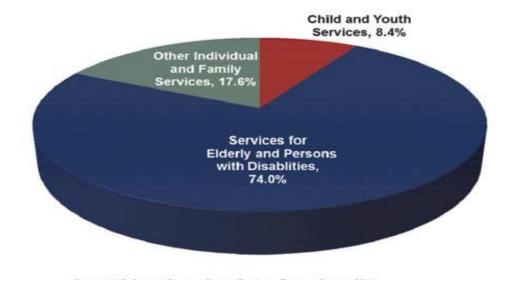
Services for Elderly and Persons with Disabilities, 2004-2014, Employment Growth 198%



Source: US Census Bureau, County Business Patterns Survey, 2004-2014

In addition to serving the growing elderly population of Massachusetts, these providers will also address the needs of the growing number of individuals with physical, intellectual, and developmental disabilities, including children and adults on the autism spectrum and individuals with acquired brain injury.

Individual And Family Services Sub Sector, 2014



Source: US Census Bureau, County Business Patterns Survey, 2014

Human Services Growth in the Coming Decade

Nationally, the health care and social assistance sector is projected to increase its employment of wage and salary workers by 21 percent over the next decade. (The largest expected growth of all sectors.)

Subsectors within health care and social assistance with significant growth include:

- Home health care services: 60.2 percent
- Residential mental health and substance abuse facilities: 39.5 percent
- Outpatient mental health and substance abuse centers: 32.0 percent
- Residential intellectual and developmental disability facilities: 23.2 percent
- ■Services for the elderly and persons with disabilities: 18.3 percent

Notably, four of the five subsectors with significant projected growth over the coming decade include establishments providing services within the human services industry.

Ten-year industry and occupational projections from the Massachusetts Department of Labor and Workforce Development mirror national projections.

PLAN STRATEGY AND DEVELOPMENT

The Strategic Plan Process included the following:

- Invite and select John Chappell, as the NILP Consultant, to help guide the process.
- Conduct a number of Focus Groups with a wide variety of Center constituencies including consumers, staff, business and community leaders, and Board Members.
- Compile the Focus Group data results and compare and contrast the feedback and input from 2012 2017 results.
- Host a Board Retreat in August (same step as previous plan process) to review the draft plan and provide input into the development of the final plan.
- Executive Committee meeting to discuss Final Draft of the Strategic Plan.
- Executive Committee submit to the full Board for acceptance at September Board Meeting.
- October 2017, the 2018- 2023 Strategic Plan is made available to the NILP Community at the Annual Meeting.

ANALYSIS OF 2012 AND 2016 FOCUS GROUPS RESULTS

Data Gathering

The comparison of the sets of focus groups demonstrates the progress made by NILP in implementing its original 5 Year Strategic Plan initiated in 2012. There are some differences; however, in the makeup of the two sets of focus groups and the total number of each is different.

This difference however does not make a comparison unusable. The results must be viewed with this filter in mind. Here are the results from the two sets of focus groups with the 2012 results recaptured from the original 2012 Strategic Plan.

2012 Combined Staff Focus Group Results

- Peer Support is key to Center success
- Housing and transportation are still issues that impede Independent Living significantly
- Better communication between Center programs
- Remove "silo" effect of Center staffing and design
- Center needs to have more capacity to serve un-served/underserved constituencies

2017 Staff Focus Group Results

- > Peer Support is one of our major services
- We provide all types of training programs
- We work with students with disabilities
- Staff support each other through team building
- Funding and access for community services is a major issue More innovation is needed in the way services are provided

The differences between the results are subtle. There is still a focus on Peer Support which is a key component of the IL philosophy and NILP. The discussion of the silo effect was never mentioned and in its place the continued emphasis on team building and staff support and training. In 2017, there is also a significant emphasis on working together through collaboration and better training. This is a key change from 2012 and demonstrates how much progress the Center has made.

2012 "LOVE" ("Psychiatric Disability Survivors") Focus Group Results

- Skills Training Workshops that focused on specific issues such as money management, better health management, alternative medicine, using computers
- More access to Peer Counseling or Peer Support
- More Support Groups for different issues

2017 RLC Focus Group Results

- NILP provides major support and services to persons with mental health needs
- NILP is a peer run agency
- Staff are diversified and a major asset to NILP
- NILP has a strong presence in the community
- Community services need to be improved
- Work with DMH to improve the RLC Network

First, it should be noted that the 2012 focus group for the RLC was the Love Group which started as a an advocacy group, (Lawrence Organizing Voices for Empowerment) group but became something more of a social group for a period of time. The 2017 focus group was composed of a group that meets monthly and was a more diversified and larger group. Again, however, the outcome of the focus group is more positive in a number respects as compared to 2012. The 2017 group focused positively on peer support and the broad, diverse peer support of the RLC. There are still needs suggested including better collaboration with DMH on the RLC network and the need to improve community supports in a variety of ways.

2017 Management Focus Group Results

- We offer a wide array of services to individuals of all ages and all types of disabilities
- ➤ We use a flexible approach when working with our consumers
- Our emphasis on management support creates an environment of Team Building and creativity
- More emphasis on employment with consumers
- Outreach should have more focus

The rest of the focus groups have no direct comparison but it's Important to highlight the results and to glean some of the differences. Looking at the **M**anagement **F**ocus **G**roup it is clear there is a much greater focus on Team Building and a more unified approach to service delivery. Where the discussion of the "silo" affect was a prominent point of

discussion in 2012 the focus on Team Building and a cross agency focus has emerged. This theme emerges through the staff and management focus groups and is a clear shift from 2012.

Another theme that emerges is training and how important it has become. While this issue was discussed in 2012 it is now a major focus from the staff and management. The outcome is two-fold; both the need for more training and the success of the training going on now.

Outreach emerges across a number of focus groups. This theme was apparent in 2012 and demonstrates the need to do more in this area. However, the success of the recent Rebranding strategy has not had time to take full effect. It would be expected that this strategy, if fully implemented, would address this to some extent.

It is clear the issues identified in 2012 have been more fully addressed by the responses in 2017. The themes identified in this series of focus groups should provide a set of guideposts to continue the progress seen to date. The NILP has experienced significant growth since 2012 and has attempted to deal with its space needs. Developing a plan with the Board for continued expansion is important; and yet, given the external variables in funding and broader national Medicaid changes on the front line, it is clear that this approach will continue to play a major role in its next strategic plan.

NILP STRATEGIC PLAN DOCUMENT 2018-2023

MISSION STATEMENT

The Northeast Independent Living Program, Inc. is a consumer controlled Independent Living Center providing advocacy and services to people with all disabilities who wish to live independently in the community.

VISION STATEMENT

Northeast Independent Living Program is known throughout the state for helping individuals regain and retain their independence and equality in the community through Information & Referral, Advocacy, Skills Training, Peer Counseling and Transitions. We are a community of people who open doors to create an all-inclusive community free of communication, attitudinal, economic and architectural barriers for all people with disabilities

PHILOSOPHY

Independent Living philosophy states that individuals with disabilities are the best determinants of their own needs and service choices. Through role modeling and peer counseling, with other individuals with disabilities, they become empowered to make changes in their lives and become more self-sufficient and self-reliant.

Goals 2018-2023

1ST GOAL—ENHANCE AND MAINTAIN A FUNDRAISING STRATEGY

Objectives:

- 1. Create programs that generate private funding or unrestricted revenues to enhance NILP's development strategies. The initiatives will have a goal of increasing development funds by 10% annually.
- 2. A) Evaluate our current major fundraising initiatives (Golf and Music Event) in 2018
 - B) Determine the interest or need to enhance the current events or to develop alternative fundraising events with size, scale and timelines adjusted to increase returns by 10% annually.
- 3. Conduct Board Member Survey re: Board Members' role in Fund Development in 2018
- 4. The Board Fundraising Committee will lead <u>one</u> major agency fundraising event on an annual basis.
- 5. Conduct survey of other local Development Officer best practices and fundraising strategies.

2ND GOAL AREA-DEVELOP AND MAINTAIN QUALIFIED STAFF

- 1. Ensure a diverse, well-qualified staff committed to continuous learning and continuous improved job performance with the clarity of the NILP Mission through recruitment with local colleges to attract millennials, targeting veterans and racial / ethnic minorities.
- A) Attract and retain staff through creating career paths for direct staff to move within the
 organization and to promote advanced educational opportunities through credentialing
 opportunities offered and tuition remission programs offered at community colleges and
 state colleges.
 - B) To provide and distribute an annual Total Compensation analysis for employee's
- 3. Maintain professional Association memberships and participate in survey compilation data gathering and reporting to stay current with workforce trends and compensation strategies across the human services sector on an annual basis.
- 4. A) Conduct Staff Training Needs Assessment in 2018.
 - B) Provide timely professional development and training programs based upon assessment. Trainings will be offered at least 4 times per year with a staff attendance of 90% participation. 2019-2023
- 5. To attain staff credentialing requirements for all staff that are assigned to work on State Medicaid Contracts or meet other defined Masshealth contractual requirements by the end of FY'21.
- Develop a Program Management Team comprised of Program Managers and Directors to work across the agency to represent NILP programs for at least two community outreach events annually.

3rd Goal area - Maintain well qualified and diversified board of Directors

Objectives

- 1. A.) The Board Development Committee will recruit and manage Board Member terms.
 - B.)The Board Development Committee and NILP Agency Representative will monitor and report the over 51% Board Member representation of individuals who self-ldentify with a disability on an annual basis.
- 2. A.) Board Members shall conduct outreach and recruitment to the Town and City Commissions on Disability in NILP's service area.
 - B.) Board Development Committee will engage Board Members and Commissions with developing relationships with Commission Members and City/ Town officials to ensure ADA Compliance and assist with advocacy issues and concerns. The objective is defined by contacting at least 5 Commissions annually on a rotating basis to reach all of the Commissions in our Service Area by 2023.
 - Board Development Committee will coordinate monthly ongoing Board training segments into the Board Meetings schedule and conduct new Board Member Orientation and Training regarding Board functions and the development of succession plans with Board Officer roles.
 - 4. Board Development will conduct, on an annual basis, a Board Self-Evaluation for reporting and assessment of Board recruitment and training needs.

4TH GOAL AREA—DEVELOP AND IMPLEMENT A MARKETING ANDOUTREACH STRATEGY

Objectives

- 1. Maintain and update our social media presence and NILP Website content with fully accessible content on a monthly basis.
- 2. Manage Constant Contact email newsletters and NILP event and agency electronic communications on a monthly basis.
- Marketing and Program Staff will conduct community presentations highlighting NILP programs at local civic associations such as Rotary, Kiwanis, and college and local community fairs.
- 4. Marketing and Program Staff manage an expo table at state wide agency events, Provider Fairs, and Chamber Meeting as part of expanding NILP's visibility in the community through collaboration and networking.
- 5. Marketing Dept. will coordinate with Program Managers and Directors to produce creative promotional materials that represent updated program content in Visual Aids, Marketing Brochures, Merchandise Items, and Annual Reports that provide promotional information.
- 6. Marketing and Program Departments will ensure that materials are available in accessible formats and in translated language materials.
- 7. NILP Marketing Team will produce press releases, PSAs, and event promotional advertising in local cable access formats, newspapers and specialized media outlets.
- 8. The NILP Marketing Department will promote and coordinate highly visible special events / fundraising events.
- 9. NILP Marketing Department will coordinate with the RLC Department and Youth Program Employers and PCA Program Providers to expand its messaging and reach through those program contacts. For example: The RLC Calendar that is published each month.
- 10. NILP Marketing Department will produce a monthly Staff newsletter and a monthly consumer and community partner newsletter.

5TH **GOAL AREA**—**EXPAND PHYSICAL PRESENCE IN OUR SERVICE AREA**

The demographics data from our 704 Report demonstrates that the City of Lowell and its surrounding communities in Middlesex County is our second most concentrated cohort of persons receiving services from NILP.

Objectives:

- To establish a Senior Leadership Lowell project team to lead the marketing research and competitive analysis that will develop feasibility study re: opening a full service NILP Satellite office in Lowell in 2018.
- The Lowell Project team will send out outreach letters to community partners and set up
 visits with key Lowell community partner agencies, Lowell Commission on Disability,
 Middlesex Community College, Lowell Chamber (We are already a member) and
 business and State representatives in 2018
- 3. NILP Lowell Project Team will meet with Lowell MRC and Lowell DMH representatives, Health care providers, and Lowell Internship employers to learn the interest and conduct needs assessment for their participants, members, or clients in 2018
- 4. Based upon the positive results of the Marketing Research, which is anticipated; then the building /space and negotiated costs will be determined in 2019.
- 5. By FY'19, NILP will have a fully operational satellite site in Lowell.

6TH GOAL AREA—EXPAND SERVICES TO UN-SERVED/UNDERSERVED CONSTITUENCIES

Objectives:

- 1. Review NILP's Data Management System to identify possible areas of improvement for outreach and increased emphasis on identifying underserved consumers in 2018.
- 2. Establish a Program Management Project Team to develop a sustainable outreach plan to address service needs in the populations identified in previous objective in the service area in 2019.
- **3.** Continue to maintain our multicultural, bi- lingual, Latino staff representation and to increase our Staff representation in other cultures and languages such as Khmer, ASL and others identified by our service area underserved demographics.
- 4. To improve upon and increase access to our services to homeless individuals, veterans, LGBTQ **through** outreach to homeless shelters, food pantries and non- traditional employment sites.

7TH GOAL AREA— IMPROVE AND MAINTAIN FACILITY AND OPERATIONAL INFRASTRUCTURE (I.E. TECHNOLOGY PLANNING, VEHICLES, AND CAPITAL IMPROVEMENTS) SEE 5 YEAR IMPROVEMENT PLAN

Objectives

- 1. To continue to maintain and update our Technology resources both on the hardware and software level.
- 2. To transition to electronic Payroll system with 100% employee direct deposit and online employee resources and payroll and benefit access in 2018
- 3. To complete the conversion of the NILP Mail Server to an Office 365 Platform by 2018.
- To develop technology solutions to manage seamless communications among our 6 different Hub Site locations in Lowell, Malden, Lynn, Gloucester, and greater Acton area.
- 5. To research and support staff with the technology solutions to enter consumer data timely and in a secure environment while out in the field. i.e. tablets, web based records
- 6. To create portable workstations and remote capability for staff that spends most of their time out in the field visiting with consumers.
- 7. To manage the transportation logistics for our consumers, advocacy events, and staff/consumer requests in a timely and cost effective manner.
- 8. To maintain and monitor vehicle preventative maintenance and to prepare a purchasing schedule with the vehicle lifespan.
- 9. To maintain and monitor building HVAC, Sprinkler, and facility infrastructure needs and perform preventative maintenance.
- 10. To evaluate an employee access and identification card system and safety emergency preparedness plan and building "shelter in place" plan.
- 11. To review IT & data security policies and protocols
- 12. To review NILP's Emergency Preparedness and Business Continuity Plan

8th Goal Area— Create New and Innovative Initiatives THAT GENERATE NEW FUNDING SOURCES THAT SERVE OUR MISSION

Objectives:

- 1) To Create and sustain an Education and Consulting Division of NILP as an operational cost center.
 - A) To merge the ADA Consulting Services into the Education and Consulting Division
 - B) Develop a 3 year marketing strategy, staffing plan and customer sales projections. 2018-2021
 - C) Create a capital fund in 2018 to underwrite the Education Division for 18 month period.
 - D) Create and monitor a cost center budget in 2020 2023

2) To Develop a Long Term Services and Supports (LTSS) Division of NILP

- A) To establish a marketing outreach plan to promote NILP to the health care industry with providing a portfolio of LTSS services to be paid on a fee for service or value based performance payment. 2018- 2019
- B) To increase LTSS services to members of Senior Care Organizations, PACE and One Care Insurers with billing and program coordination that ensures prompt and reliable payments. 2018-2023
- C) To manage a strong partnership with Elder Services of the Merrimack Valley as the Disability Expert partner to the private home care providers, medical supply companies and other private medical systems. 2018-2023
- D) To research innovative LTSS bid opportunities and grants to better serve our consumers with integrated health care. 2019-2023
- 3) To create new services and responses to our underserved populations; for example: Blind, and Deaf consumers through innovative foundation or grant opportunities.
 - A) To conduct research and outreach to the community and identify gaps in services and funding. 2018-2019
 - B) Apply to private funding sources for pilot initiatives. 2019

Attachments

- 1----5 Year Improvement Plan
- 2----Results from stakeholder Focus Groups
- **3----SWOT Analysis Results**
- 4----NILP Demographics Comparison Data 2012- 2017

Attachment 1

Northeast Independent Living Program, Inc.

Five-year Improvement Plan (2018-2023)

2018-2019: ADP Payroll company selected and transition to electronic payroll information system.

2018-2019: Replace sign at front of building with Re-Branding logo.

- 1. Cost out a new sign including design, installation and painting, etc.
- 2. Also cost out necessary landscaping associated with this project including. Three bids for design and construction of sign. Prepare funding options.

2019-2020: Building exterior repair, painting and landscaping.

- 1. Removing all the stains from the exterior, investigate the question about asbestos exterior and paint the building.
- 2. Landscape the backyard and outdoor area for staff and consumers

2019-2020: Research the need for electronic employee pass card and Alarm System

- 1. Research costs and vendors for employee ID systems and entry system.
- 2. Research costs of an Alarm system and implementation

2023: Transition to electronic records system and electronic storage of files

- 1. Research costs and vendors
- 2. Develop Transition Plan
- 3. Conduct Training

2020-2023 To Establish and sustain a physical presence in Lowell with a full Satellite office

Improvement Projects Completed:

- ✓ 2011-2012: Replaced sign at front of building.
- ✓ 2011-2012: Improved ADA Accessibility of Building
- ✓ 2011-2012: Repaved, sealed and relined the parking lot and driveways.
- ✓ 2012-2013: Enhanced building exterior and landscaping.
- ✓ 2012-2013: Upgraded the agency's alarm system
- ✓ 2016-2018 Capital Building Expansion Project completed

Attachment 2

Results from Stakeholder Focus Groups

Marketing:

- Marketing and communication materials for consumers, outside agency partners and businesses
- Marketing and Communication materials in both English and Spanish
- Greater visibility in Lawrence and Lowell as well as across the Merrimack Valley
- More Program Outreach and Volunteering
- Agency Provider Fair
- More agency specific marketing on website and social media

Unmet Needs for consumers:

- Lack of resources for students in HS over age 22 that have accepted their diploma
- PCA Overtime needs and concerns
- Housing needs and supports
- Transportation needs
- Meals Programs for consumers
- Services for children with disabilities 3-12

Agency Staff Opportunities: Increase Training Opportunities:

- CPR, First Aid, AED and emergency on call training for direct care staff
- Wellness programs
- Access to language line and interpreting services

Attachment 3

Board Strategic Planning Team SWOT Analysis Response

SWOT (Strengths, Weaknesses, Opportunities and Threats) Analysis

A Board Strategic Planning Team completed several SWOT Analyses on identified key areas that were identified through our Focus Groups and Stakeholders. The specific areas targeted for SWOT Analysis were: Youth Services, Aging and Disability coordinated services through Long Term Services and Supports, Training and Education Services, and Building Expansion.

LTSS-CP (Aging and Disability Long Term Services and Supports) SWOT Analysis

Internal			
Strengths	Weaknesses		
 Allow us the possibility for growth and change Promotes Person Centered Awareness Increase cultural competency with health care providers and community partners Strengthen our relationship with Elder Services of the Merrimack Valley (ESMV) 	Lack of IT support NILP currently does not have relationships with ACO's (Hospitals and Health care networks) Effects on our NILP core activities		
Exte	ernal		
Opportunities	Threats		
 Gain visibility with healthcare providers Serve more consumers Some financial growth Business development Under serving MCB and MCDHHH consumers National Federation of the Blind – State Chapter Contact (Amy Ruell) Lowell Association for the Blind, Carroll School 	 Sharing of information with ESMV Sharing of program and agency information Loss of resourcess 		

Youth Services SWOT Analysis

Internal			
Strengths	Weaknesses		
 Long history with school systems New federal dollars- WIOA (Workforce Innovation Opportunity Act) Federal Act Allows youth to learn real life skills Greater visibility in the community More focused approach and curriculum 	 Governed by MRC which is restricting the youth eligibility Referral process is limiting to families and potential students Funding limited Under-served populations: Blind consumers, rural, Deaf Transportation 		
Exte	ernal		
Opportunities	Threats		
 Expand to additional schools in our area Continue to work with You're with Us, New non-profit organization Collaborate with Mass School of the Blind, Mellmark, DDS Possible TLC/Youth Curriculum 	5. Lack of funding 6. Competition from other summer youth programs and school based programs.		

TLC (Education and Training) SWOT Analysis

Internal			
Strengths	Weaknesses		
 Excellent Curriculum Additional funding CEU's Provided cultural competence training to over 1200 people across Massachusetts Open Enrolment provides visibility to community partners/agencies and businesses Airports and TSA training 	 Under capitalized Too thin depth of trainers Training materials in Braille and Spanish or other languages, closed captioning 		
External			
Opportunities	Threats		
 Requiring pressure to cultural competence Re-certification of past participants New business development Training Teachers- professional development in schools 	4. Competition 5. Online marketplace		

Business Expansion (Lowell) SWOT Analysis

Internal			
Strengths	Weaknesses		
 Consumer base is large Gain visibility with business and community partners PCA program and RLC growing in Lowell Increase consumer access to NILP services as it is difficult to get to Lawrence with Public Transpo. 	1. Parking 2. Public transportation Access 3. Have to replicate full range of Services in the location 4. Supervision and management on-site		
Exte	ernal		
Opportunities	Threats		
(Accountable Care Organizations) Lowell Hospitals, (Saints, Circle Health) Lowell Community Health Center and Element Care 2. New Business Development Opportunities with TLC and growth of RLC	 Ongoing Development in Lowell can make access difficult Employee Dissatisfaction with relocating from Lawrence Office. 		

ATTACHMENTS 4

NILP DEMOGRAPHICS FY'12

	AGE		
Under 5	3		
Ages 5- 19	110	DISABILITY	CATEGORY
Ages 20-24	139	Cognitive	188
60 and Over	240	Mental/ Emotional	220
Unknown	79	Physical	747
Total	1639	Hearing	126
		Vision	9
		Unknown	14
(GENDER	Multiple	335
Female or Unkr	iown 906	Total	1639
Male	733		
Total	1639		

ETHNICITY			GEOGRAPHICS
African American	42	Unknown	3
Asian	34	Hampshire	2
White/Caucasian	899	Hampden	4
Hispanic/Latino	592	Berkshire	1
Native American/Alaskan Native	7	Essex	1074
Other	17	Barnstable	1
Native Hawaiian/Other	3	Worcester	10
Pacific Islander		Middlesex	527
Consumer chooses not to provide	1	Suffolk	12
No Ethnicity Recorded	37	Plymouth	1
Multiple	7	Bristol	4
Total	1639	Total	1639

ATTACHMENTS 4

NILP DEMOGRAPHICS FY'17

Under 5 Ages 5-19 Ages 20-24 Ages 25-59	AGE 40 426 227 2315		Total	4055
60 and Over	952			
Unknown	95			05000 4011100
Total	4055		Unknown	GEOGRAPHICS 155
	GENDER		Hampshire	3
Female or Unkno			Hamden	1
Male	1766		Berkshire	2
Total	4055		Essex	2560
			Barnstable	2
			Worcester	11
	THNICITY		Middlesex	1289
African American		86	Norfolk	3
Asian		48	Suffolk	23
White/Caucasian		1339	Plymouth	1
Hispanic/Latino		944	Nantucket	1
Native American/	Alaskan Native	10	Bristol	4
Other	_	32	Total	4055
Native Hawaiian/ Consumer choos Multiple	es not to provide	2 1		
No Ethnicity Reco	order	1564		
Multiple		27		
Total		4055		

DISABILITY CATEGORY

Cognitive	452
Mental/Emotional	282
Physical	1580
Hearing	148
Vision	38
Unknown	1046
Multiple	509