



**REVIEWED and APPROVED by BOARD OF TRUSTEES: July 8, 2013**

## **STRATEGIC PLAN 2013-2016**

### **INTRODUCTION**

This 2013-2016 Strategic Plan is essentially an extension of strategic positioning work that Cedarcrest Center undertook in early 2009 as part of its periodic strategic planning process. The outcome of that process had been the Center's **Strategic Plan 2009-2012**, which put forward twelve strategic initiatives in three key areas to frame the Center's long-term direction and management work plan.

In the fall of 2012, as it began to consider a new planning cycle, the governance committee of the Board of Trustees and senior managers concurred that strategic position statements from the 2009-2012 plan were still valid, and that a plan for the next several years should update the key initiatives based on recent internal services data and information collected through our periodic community needs assessment (early 2013). That data was summarized and presented to trustees and managers in advance of their participation in an all-day strategic planning retreat on April 17, 2013.

During the retreat, participants reviewed strategic initiatives in each key area along with internal and needs assessment data through the lens of some key positioning questions. Participants also reviewed and reaffirmed the continuing validity of the 2009-2012 statements of mission and vision.

The document that follows summarizes the key themes and critical needs that emerged from the discussion and concludes with recommendations for additions in each of the key initiative areas.

### **PARTICIPANTS**

#### **Trustees**

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Bruce Chamberlin, *Chair*  
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Roger Hansen  
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#### **Cedarcrest Staff**

Scott Adams, *CFO*  
Jeff Fuller, *Director of Development and Community Relations*  
Cathy Gray, *President & CEO*  
Cheryl Jessie, *Director of Rehabilitation Services*  
Lori Myers, *Evening Nurse Manager*  
Mike O'Hara, *Director of Special Education*  
Kristin Targett, *Social Worker*  
Becky Trudelle, *Director of Nursing Services*

#### **Consultant**

Anne Peyton, *Principal, Yellow Brick Road Consulting*

## KEY AREA 1: EXTENDING THE CONTINUUM OF CARE

### Background

**Continuum of Care** was a major focus of our 2009-2012 Strategic Plan. In particular, two initiatives that significantly expanded the range and depth of Cedarcrest Center's services were fully realized and integrated into ongoing operations.

- The Center now serves children with high-tech support needs (children on ventilators or on IVs).
- Cedarcrest Center now offers comprehensive physical, occupational, and speech-language therapies as **outpatient** services, and also as supplemental services to area providers and schools.

While the Center certainly moved forward to increase short-term stay options and increase capacity for hospital transition care and post-acute care for very young children with traumatic brain injuries, high-tech care and outpatient services were monumental efforts that required collaboration among many agencies and providers, staff training or re-training, licensing, cost-benefit analysis, rate negotiations, equipment acquisition, marketing, fundraising and more. Both initiatives resulted in an unduplicated expansion of care and service options for children with complex medical and developmental needs.

In the context of current Cedarcrest service statistics and community needs assessment data, participants at the 2013 strategic planning retreat were charged with updating or modifying the 2009-2012 Strategic Initiatives for 2013-2017, using three strategic positioning questions to guide their responses.

#### **2009 Strategic Initiatives: Continuum of Care**

- Increase services available for children requiring high-tech support (vents, IVs, central lines)
- Respond to changes in family circumstances and needs (increase short-term stays)
- Increase capacity for post-acute care due to increased survivability of premature infants, children with non-accidental traumatic brain injury, and other medical needs
- Increase community-based services based on demand, including outpatient therapies/training
- Collaborate with other organizations to address increased need for a range of care options and transition planning for older teens

#### **Positioning Questions: Continuum of Care**

- Are we responding to the greatest needs with the right continuum of care?
- Are there infrastructure and resource considerations we need to be mindful of?
- Are there risk factors we need to be mindful of?

### Summary of Findings

Cedarcrest Center continues to offer a range of inpatient services including post-acute, long- and short-term care, and care for children requiring ventilator support or IVs. Short stays are an important "feeder" for long-term care with close to half of the current residents initially having come to the Center for short term care. Such short term admissions represent 5-6% of patient days. Families identify respite care as a primary need.

Families of children transitioning from the hospital are increasingly seeking the opportunity to have accommodations close to their child.

Providing high-tech support, post-acute care in all its variations, and outpatient therapy services all remain critically important.

The Center's capacity to care for children who require high-tech support is not limitless. At current staffing levels, the Center can accommodate 2-3 children (within a maximum census of 26). It will be important to determine the financial and social impact of expanding the number of children with high-tech needs beyond two or three at one time.

Outpatient and supplemental services to providers and schools are an ongoing part of operations at this point in time. Area medical providers and school districts have welcomed the availability of these resources.

Addressing the range of transition planning issues for older teens and young adults is too complex for a single provider (such as Cedarcrest Center) to handle in isolation. An initiative relating to transition planning was shifted to Key Area 2: Collaborations

The following are updated/modified initiatives relating to **Continuum of Care**.

### **2013 Strategic Initiatives: Extending the Continuum of Care**

- Refine range of services for children requiring high-tech support
- Increase marketing for and number of short-term stays on a space available basis
- Provide a range of family support services, including offering accommodations on site or nearby
- Assess the cost-benefit of increasing the census of children with high-tech support needs
- Offer and market a range of community-based therapy services

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## **KEY AREA 2: BROADENING COLLABORATIONS**

### **Background**

Action on **collaboration** initiatives was significant, but much less dramatic than on **continuum of care** initiatives. The Center offered several trainings for caregivers, educators and therapists, enhanced support for families, and increased targeted marketing programs for physicians and care managers.

In response to emerging service needs in the community, and in collaboration with Special Medical Services, the Center hosts several developmental clinics annually. The Center has increased its capacity for day education students, and is now licensed to provide educational services through age 21 (increased from 17), expanding the opportunities for older teens during the difficult transition planning process.

As in the area of **Continuum of Care**, strategic planning retreat participants considered modifications and updates to the 2009 strategic initiatives in the area of **Collaborations**, again using three positioning questions to guide their answers.

### **2009 Strategic Initiatives: Collaborations**

- Increase the range of family support services
- Provide training for families and caregivers (including support for those providing in-home care)
- Assume a stronger role as a community resource (professional training, workshops and collaborations; market our services more deliberately to providers and service coordinators)
- Respond to emerging service needs (especially where combined expertise or connections are needed)

### **Positioning Questions: Collaborations**

- Are we working with the right community partners to grow the network of services for children and families?
- Are there infrastructure and resource considerations we need to be mindful of?
- Are there risk factors we need to be mindful of?

### **Summary of Current Situation**

Cedarcrest works closely with many community partners. The potential for collaboration to address family needs is significant.

In-home care remains the priority for children with complex medical and developmental needs. With a growing number of children requiring in-home nursing support, families often find themselves unable to identify sufficient nursing staff to meet their child's needs, even at levels for which they have funding.

As the medical complexity of children cared for at home increases, training in practical "at-home" strategies for positioning, feeding, and transfers are an important aspect of supporting families and caregivers.

The need for and use of technology in medical care and education for children with complex medical and developmental needs continues to increase. Access to information about the technology in general is sufficient, but there is need for information and training related specifically to how switches, iPads and related devices can be used in communication with children with more complex medical needs.

As they "age out" of pediatric services, families of young people with complex medical and developmental needs find themselves facing inadequate, underfunded, and fragmented services and limited housing and care options. Providers consistently identify long-term placement options, community support and integration, and family support and guidance as critical transition issues for older teens and their families.

The following are the update/modified initiatives relating to **Collaborations**.

### **2013 Strategic Initiatives: Broadening Collaborations**

- Explore options for collaboration with other providers to build in-home nursing capacity in the region, including a nursing collaborative and/or expanding services to include support staffing for in-home care
- Explore feasibility of and develop plan for other respite options, including a "respite house"
- Explore options to increase the range of training services offered, including those with a greater reach and use of technology

- Advocate to and collaborate with other agencies in order to develop and promote a range of options for young adults over 21 years of age
- Identify need for trainings for providers in other settings in order to improve the quality of care throughout the region and state, and develop library of related training materials

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## KEY AREA 3: MAINTAINING STABILITY AND ENSURING SUSTAINABILITY

### Background

Inpatient care is funded by Medicaid on a cost-reimbursement basis. That income source represents more than 70% of Cedarcrest Center’s annual operating revenue. **Stability** is largely a matter of maintaining a stable census. **Sustainability** is a matter of ensuring additional sources of income that enable the Center to weather changes or interruptions in Medicaid funding, enable the Center to address emerging capital needs, and provide a safety net when unforeseen circumstances arise.

Activity in response to the 2009 strategic initiatives included some important marketing efforts: launching an E-newsletter, a Facebook page, and a new website, as well as marketing specifically to key providers and referral sources.

In addition the Center’s gift policies were re-written with particular attention to endowment development. A newly created Knox Endowed Scholarship Fund provided first steps toward implementation of a long-term endowment strategy approved by the Center’s trustees.

Despite the challenges of the potential (and unknowable at this point) impact of monumental changes underway in healthcare funding and management, retreat participants considered modifications and updates to the 2009 strategic initiatives in the area of **Sustainability and Stability**, again using three positioning questions to guide their answers.

### 2009 Initiatives: Sustainability and Stability

- Diversify funding sources (as hedge against Medicaid changes, or school tuition interruptions, as well as continued pursuit of appropriate additional income sources)
- Develop a long-term endowment strategy
- Increase targeted marketing efforts (reinforce Cedarcrest Center brand as a collaborative center of excellence and ensure meaningful market penetration)

### Positioning Questions: Sustainability and Stability

- How best can we position ourselves to ride out the emerging changes in the political and regulatory environment?
- Are there infrastructure and resource considerations we need to be mindful of?
- Are there risk factors we need to be mindful of?

### Summary of Current Situation

Cedarcrest Center investments include a “board-designated” fund of approximately \$8 million, and about \$65,000 in endowment funds (permanently restricted additions to the fund come from occasional

large bequests and investment earnings for the most part). The board-designated fund made feasible a recent capital improvement—replacement of the HVAC system in the residential wing.

The creation of the Knox Endowed Scholarship Fund (which has added approximately \$35,000 to existing endowment funds to date) will underwrite an annual award in perpetuity – but in the short-term the investment earnings will be insufficient to fund the award fully. There is a need to define the relationship between endowment and board-designated funds, and to clarify the role of the board-designated fund.

The federal Provider Tax is a significant vulnerability if it is reduced or eliminated.

Some identified community needs, e.g, in-home care, offer potential for diversifying funding sources.

The retirement of the director of nursing after 43 years of service put the spotlight on the challenges of leadership succession, and on the reality that three of four senior managers are at or within 5 years of Social Security retirement age.

### **2013 Initiatives: Maintaining Stability and Ensuring Sustainability**

- Diversify funding sources, including programs and fundraising sources
- Refine and implement long-term endowment strategy
- Increase targeted marketing efforts and develop an admission marketing plan tied to census
- Develop a plan for leadership succession

## **MISSION, VISION and VALUES**

### **Our Mission**

Cedarcrest Center enriches the lives of children with complex medical and developmental needs, supports their families, and collaborates with other community providers to build a continuum of care.

### **Our Vision**

Cedarcrest Center will be the model for best practices in the care and education of children with complex medical and developmental needs.

### **Our Guiding Values**

- *We Provide Exceptional Care.* We strive to exceed expectations in the quality of our medical, therapeutic and educational programming and do so with warmth and caring in an effort to create a home-like setting for each and every child.
- *We Nurture Each Child.* We nurture children with complex medical and developmental needs and are passionate about providing all of our children the highest quality of life possible.
- *We Are a Valuable Community Resource.* We strive to be an important resource for children and their families, as well as members of our community, by offering resource information, training, support and services. We help families identify, choose, and sustain the best care option for their family at any given time.

- *We Value Relationships.* We value collaboration and partnerships. We are a voice for families with children with disabilities both at Cedarcrest Center and in the community.
- *We Act With Dignity, Respect and Compassion.* We are respectful of the privacy of each child and family, treating them with dignity and respect and, above all else, compassion.
- *We Foster Trust.* We recognize the awesome responsibility we have in serving children and families. We commit ourselves to continuous quality improvement and serving with integrity. We encourage families to be active partners in their children's care.
- *We Are Fiscally Responsible.* We are committed to assuring the financial support necessary to provide optimal care for the children and to invest in our staff, programs and facility for current and future needs.
- *We Are Resourceful.* We make every effort to remain a cost-effective option for children and families.
- *We Support and Encourage Our Staff.* We actively promote mutual consideration of each other's views, opinions, and ideas ... listening to both hear and understand. We strive to provide fair and equitable wages and benefits to all Cedarcrest Center employees. We encourage employee growth through educational programs offered at Cedarcrest Center and in the community.

## **SUMMARY OF STRATEGIC INITIATIVES 2013-2016**

### **Extending the Continuum of Care**

- Refine range of services for children requiring high-tech support
- Increase marketing for and number of short-term stays on a space available basis
- Provide a range of family support services, including offering accommodations on site or nearby
- Assess the cost-benefit of increasing the census of children with high-tech support needs
- Offer and market a range of community-based therapy services

### **Broadening Collaborations**

- Explore options for collaboration with other providers to build in-home nursing capacity in the region, including a nursing collaborative and/or expanding services to include support staffing for in-home care
- Explore feasibility of and develop plan for other respite options, including a "respite house"
- Explore options to increase the range of training services offered, including those with a greater reach and use of technology
- Advocate to and collaborate with other agencies in order to develop and promote a range of options for young adults over 21 years of age
- Identify need for trainings for providers in other settings in order to improve the quality of care throughout the region and state, and develop library of related training materials

### **Maintaining Stability and Ensuring Sustainability**

- Diversify funding sources, including programs and fundraising sources
- Refine and implement long-term endowment strategy
- Increase targeted marketing efforts and develop an admission marketing plan tied to census
- Develop a plan for leadership succession