

STRATEGIC PLAN

Mercer County Board of Developmental Disabilities

2019 ◦ 2020 ◦ 2021

VISION:

The vision of the Mercer County Board of Developmental Disabilities is to coordinate and ensure quality services are being provided to the residents of Mercer County with developmental disabilities throughout their lifespan, while being good stewards of public funds. Board services often begin by providing excellent Early Intervention Services to children and their families. The Mercer County Board of DD continues its services to eligible individuals by developing person-centered plans, and then working with providers of educational, residential, vocational, and recreational opportunities to assist those we serve in pursuing their dreams, goals, and desires in their home and community.

MISSION:

Our Mission at the Mercer County Board of Developmental Disabilities (Cheryl Ann Programs) is to partner with and support individuals and their families to discover, pursue, and achieve maximum independence in their community.

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EARLY CHILDHOOD SERVICES

“The Board of DD is committed to acting as the single point of contact that promotes family-centered programs for expectant parents, newborns, infants and toddlers, including those with disabilities, and their families. This includes providing centralized intake and referral services for the ODH funded Home Visiting program and the DODD Ohio Early Intervention program as well as the provision of Home Visiting services, Service Coordination, and a core Early Intervention team. Staff and the Board of DD feel strongly that identifying and addressing developmental delays in children from birth through age three are vital. Of the same vital importance is supporting and educating parents and families so that infants and toddlers throughout the community are able to learn and thrive to their fullest potential in a safe, supportive environment.”

Ohio Early Intervention:

2019 Benchmarks

1. Services will be provided in natural settings.
2. Children will exit Early Intervention with improved social-emotional skills, use of knowledge and skills, and use of appropriate behaviors. Program will use the State Fiscal Year 2017 state targets as county targets.
3. Maintain a minimum of 130 children served annually through a combination of evaluation, assessment and intervention. Should the program serve 170 children or more annually through a combination of evaluation, assessment, and intervention, needs will be examined for consideration of additional staff.
4. Maintain a minimum of 150 children served annually through service coordination. Should the program serve more than 220 annually through service coordination, needs will be examined for consideration of additional staff.

5. Maintain 100% compliance annually with state compliance indicators for timely receipt of services, IFSP completion, and transition.
6. Develop annual satisfaction survey to be completed by families.
7. Develop local Help Me Grow Facebook page. Update Board of DD Early Intervention website and/or Help Me Grow Facebook page to include links on various developmental support strategies, educational materials and resources for families whose child has a developmental delay or disability.
8. Continue to build relationships with potential referral sources and other community stakeholders by facilitating and/or participating in public awareness or outreach activities, such as Healthy Kids Day events, health fairs, and the county fair.
9. Maintain at least quarterly connections with community stakeholders through various outreach activities, such as mailings or face-to-face meetings as requested.
10. Request face-to-face meetings with local daycares/preschools to educate them and build relationships as a location for services to take place for families and children served through Early Intervention. These will take place throughout the year.

2020 Benchmarks

1. Services will be provided in natural settings.
2. Children will exit Early Intervention with improved social-emotional skills, use of knowledge and skills, and use of appropriate behaviors. Program will use the State Fiscal Year 2018 state targets as county targets.
3. Maintain a minimum of 130 children served annually through a combination of evaluation, assessment, and intervention. Should the program serve 170 children or more annually through a combination of evaluation, assessment and intervention, needs will be examined for consideration of additional staff.
4. Maintain a minimum of 150 children served annually through service coordination. Should the program serve more than 220 annually through

service coordination, needs will be examined for consideration of additional staff.

5. Maintain 100% compliance annually with state compliance indicators for timely receipt of services, IFSP completion, and transition.
6. Assess programming needs based upon family input received from annual satisfaction and exit surveys. Implement any changes as determined necessary based upon these results.
7. Update Board of DD Early Intervention website and/or Help Me Grow Facebook page to include links on various developmental support strategies, educational materials and resources for families whose child has a developmental delay or disability.
8. Continue to build relationships with potential referral sources and other community stakeholders by facilitating and/or participating in public awareness or outreach activities, such as Healthy Kids Day events, health fairs, and the county fair.
9. Maintain at least quarterly connections with community stakeholders through various outreach activities, such as mailings or face-to-face meetings as requested.
10. Request face-to-face meetings with local daycares/preschools to educate them and build relationships as a location for services to take place for families and children served through Early Intervention. These will take place throughout the year.

2021 Benchmarks

1. Services will be provided in natural settings.
2. Children will exit Early Intervention with improved social-emotional skills, use of knowledge and skills, and use of appropriate behaviors. Program will use the State Fiscal Year 2020 state targets as county targets.
3. Maintain a minimum of 130 children served annually through a combination of evaluation, assessment, and intervention. Should the program serve 170 children or more annually through a combination of evaluation, assessment

and intervention, needs will be examined for consideration of additional staff.

4. Maintain a minimum of 150 children served annually through service coordination. Should the program serve more than 220 annually through service coordination, needs will be examined for consideration of additional staff.
5. Maintain 100% compliance annually with state compliance indicators for timely receipt of services, IFSP completion, and transition.
6. Develop annual satisfaction survey to be completed by families.
7. Assess programming needs based upon family input received from annual satisfaction and exit surveys. Implement any changes as determined necessary based upon these results.
8. Update Board of DD Early Intervention website and/or Help Me Grow Facebook page to include links on various developmental support strategies, educational materials and resources for families whose child has a developmental delay.
9. Continue to build relationships with potential referral sources and other community stakeholders by facilitating and/or participating in public awareness or outreach activities, such as Healthy Kids Day events, health fairs, and the county fair.
10. Maintain at least quarterly connections with community stakeholders through various outreach activities, such as mailings or face-to-face meetings as requested.

Central Intake and Referral:

Beginning August 1, 2017, the Ohio Department of Health selected one statewide Central Intake and Referral system. That system was operated out of Cleveland, Ohio. Therefore, the Mercer County Board of Developmental Disabilities ceased to be a Central Intake and Referral site agent. Staff have worked diligently with local referral sources in order to help ensure families throughout Mercer County continue to be appropriately referred to the local Help Me Grow Home Visiting and Early Intervention programs.

Help Me Grow Home Visiting:

2019 Benchmarks

1. Provide Home Visiting program supports to up to 26 families with a weighted intensity of no more than 30 at one given time. Once a weighted caseload intensity of 30 is reached, additional families will be placed on the wait list. Should the wait list reach 15 families, needs will be examined for consideration of additional staff.
2. Attain a minimum number of 4,300 billable units (15 minute increments) annually.
3. Develop local Help Me Grow Facebook page. Update with information that can be a guide for local families on general parenting needs (i.e., home safety, play, general child development) and links for community resources and supports.
4. Assess programming needs based upon family input received from annual satisfaction and exit surveys. Implement any changes as determined necessary based upon these results.
5. Attain affiliation with Healthy Families America (HFA) as the Board of DD's Evidence-Based Home Visiting model and fidelity to that program's model and the required timelines.
6. Maintain parenting education curriculum with Growing Great Kids (GGK) and fidelity to that program's model and required timelines.
7. Work with HFA, GGK, and Ohio Department of Health (ODH) consultants to ensure fidelity to programs and their required timelines.
8. Continue to build relationships with potential referral sources and other community stakeholders by facilitating and/or participating in public awareness or outreach activities, such as Healthy Kids Day events, health fairs, and the county fair.
9. Maintain at least quarterly connections with community stakeholders through various outreach activities, such as mailings or face-to-face meetings as requested.

10. Request face-to-face meetings with local agencies/physicians working with expectant mothers to build relationships and educate them on the benefits of Home Visiting. These will take place throughout the year.

2020 Benchmarks

1. Provide Home Visiting program supports to up to 26 families with a weighted intensity of no more than 30 at one given time. Once a weighted caseload intensity of 30 is reached, additional families will be placed on the wait list. Should the wait list reach 15 families, needs will be examined for consideration of additional staff.
2. Based upon billable units and families served for 2019, assess and determine a feasible and attainable minimum amount of billable units for 2020.
3. Update Help Me Grow Facebook page with information that can be a guide for local families on general parenting needs (i.e., home safety, play, general child development) and links for community resources and supports.
4. Assess programming needs based upon family input received from annual satisfaction and exit surveys. Implement any changes as determined necessary based upon these results.
5. Maintain affiliation with HFA as the Board of DD's Evidence-Based Home Visiting model and fidelity to that program's model and the required timelines.
6. Maintain parenting education curriculum with GGK and fidelity to that program's model and required timelines.
7. Work with HFA, GGK, and Ohio Department of Health (ODH) consultants to ensure fidelity to programs and their required timelines.
8. Continue to build relationships with potential referral sources and other community stakeholders by facilitating and/or participating in public awareness or outreach activities, such as Healthy Kids Day events, health fairs, and the county fair.
9. Maintain at least quarterly connections with community stakeholders through various outreach activities, such as mailings or face-to-face meetings as requested.

10. Request face-to-face meetings with local agencies/physicians working with expectant mothers to build relationships and educate them on the benefits of Home Visiting. These will take place throughout the year.

2021 Benchmarks

1. Provide Home Visiting program supports to up to 26 families with a weighted intensity of no more than 30 at one given time. Once a caseload intensity of 30 is reached, additional families will be placed on the wait list. Should the wait list reach 15 families, needs will be examined for consideration of additional staff.
2. Based upon billable units and families served for 2020, assess and determine a feasible and attainable minimum amount of billable units for 2021.
3. Update Help Me Grow Facebook page with information that can be a guide for local families on general parenting needs (i.e., home safety, play, general child development) and links for community resources and supports.
4. Assess programming needs based upon family input received from annual satisfaction and exit surveys. Implement any changes as determined necessary based upon these results.
5. Maintain affiliation with HFA as the Board of DD's Evidence-Based Home Visiting model and fidelity to that program's model and the required timelines.
6. Maintain parenting education curriculum with GGK and fidelity to that program's model and required timelines.
7. Work with HFA, GGK, and Ohio Department of Health (ODH) consultants to ensure fidelity to programs and their required timelines.
8. Continue to build relationships with potential referral sources and other community stakeholders by facilitating and/or participating in public awareness or outreach activities, such as Healthy Kids Day events, health fairs, and the county fair.
9. Maintain at least quarterly connections with community stakeholders through various outreach activities, such as mailings or face-to-face meetings as requested.

SCHOOL-AGED / TRANSITION

“The Board of DD acts as a partner with the ESC and all county schools. The Board is committed to preparing students for life after school and accomplishes this with specialized staff that attend IEP Meetings, educate school faculty, and empower students to make life choices that best serve them.”

2019 Benchmarks

1. Work in concert with school staff and supervisors to identify areas of needed education and exposure for educational staff to better assist children with developmental disabilities.
2. Strengthen relationships with parents and children 3-14. Set up a method of on-going communication, blog, etc. to follow up to the SALT meetings.
3. Increase availability of transition age SSA services by designated.
4. Determine feasibility of providing summer community exposure to youth ages 14-16 and provide such opportunities.
5. Determine feasibility of providing work exposure program for youth ages 16-18 and provide such opportunities.
6. Determine feasibility of providing summer work opportunities for young adults ages 18-22 and provide such opportunities.
7. Explore Agency collaboration when possible (behavior support services for school aged children, IDT team).

2020 Benchmarks

1. Work in concert with school staff and supervisors to identify areas of needed education and exposure for educational staff to better assist children with developmental disabilities.
2. Strengthen relationships with parents and children 3-14.
3. Determine feasibility of providing summer community exposure to youth ages 14-16 and provide available opportunities.

4. Determine feasibility of providing work exposure program for youth ages 16-18 and provide available opportunities.
5. Determine feasibility of providing summer work opportunities for young adults ages 18-22 and provide available opportunities.
6. Explore Agency collaboration when possible (behavior support services for school aged children, IDT team).
7. Sponsor parent meetings/trainings similar to “The Incredible Years”.

2021 Benchmarks

1. Work in concert with school staff and supervisors to identify areas of needed education and exposure for educational staff to better assist children with developmental disabilities.
2. Determine feasibility of providing summer community exposure to youth ages 14-16 and provide available opportunities.
3. Determine feasibility of providing summer opportunities to those younger than age 14 (ESC partnership).
4. Determine feasibility of providing work exposure program for youth ages 16-18 and provide available opportunities.
5. Determine feasibility of providing summer work opportunities for young adults ages 18-22 and provide available opportunities.
6. Explore Agency collaboration when possible (behavior support services for school aged children, IDT team).
7. Sponsor parent meetings/trainings similar to “The Incredible Years”.

COMMUNITY INCLUSION / INTEGRATION

“The Board values every opportunity for community inclusion. We feel our clients and the community are enriched by everyone’s involvement in their community, to the extent they desire.”

2019 Benchmarks

1. Continue to expand the social media footprint.
2. Participate in community speaking engagements.
3. Increase visibility of the Arc of Ohio in Mercer County.
4. Increase availability of Special Olympics in Mercer County.
5. Continue to support families of those served by MCBDD.

2020 Benchmarks

1. Continue to support families of those served by MCBDD by expanding the social media footprint.
2. Participate in community speaking engagements.
3. Increase visibility of the Arc of Ohio in Mercer County.
4. Increase availability of Special Olympics in Mercer County.
5. Hold a Special Olympics event in Mercer County (Mercer County track meet).

2021 Benchmarks

1. Continue to support families of those served by MCBDD by expanding the social media footprint.
2. Participate in community speaking engagements.
3. Increase visibility of the Arc of Ohio in Mercer County.
4. Increase visibility of Special Olympics in Mercer County.
5. Hold a Special Olympics event in Mercer County (Mercer County track meet).

EMPLOYMENT

“Mercer County has a culture that places a high value on employment. The board values this culture and has relationships with providers that create opportunities for individuals to be successful at working within the community.”

2019 Benchmarks

1. Assist individuals to advance in their Path to Community Employment.
2. Maintain at least three employment providers in Mercer County.
3. Provide annual education on benefits/financial/special needs trust for parents and those interested in competitive employment.
4. Complete administrative review of those receiving vocational services for potential referral to the employment first partnership.

2020 Benchmarks

1. Assist individuals to advance in their Path to Community Employment.
2. Maintain at least three employment providers in Mercer County.
3. Board will provide incentives to provider agencies to identify new job opportunities and have successful partnerships with those employers.
4. Increase variety of jobs available by educating employers to the benefits of employing people with disabilities.
5. Provide annual education for families on benefits of work.

2021 Benchmarks

1. Assist individuals to advance in their Path to Community Employment.
2. Maintain at least three employment providers in Mercer County.
3. Provide annual education for families on the benefit of work.

4. Increase variety of jobs available by educating employers to the benefits of employing people with disabilities.
5. Provide recognition for employers of people with disabilities.

TRANSPORTATION

“Transportation services are vital for community integration and integrated employment. It can also be the largest barrier to overcome for individuals with disabilities. It is the Board’s intent to provide multiple options for transportation.”

2019 Benchmarks

1. Maintain or increase the transportation provider pool total to four (4).
2. In order to remain good stewards of county dollars the board will continue to encourage natural supports of individuals we serve to provide the transportation services to and from employment by providing a mileage reimbursement. This is the most cost effective way of service delivery.
3. Explore if community is able to help meet any transportation needs.

2020 Benchmarks

1. Determine impact of transportation redesign and support providers through transition.
2. Maintain or increase the transportation provider pool total to four (4).
3. In order to remain good stewards of county dollars the board will continue to encourage natural supports of individuals we serve to provide the transportation services to and from employment by providing a mileage reimbursement. This is the most cost effective way of service delivery.

2021 Benchmarks

1. Maintain or increase the transportation provider pool total to five (5).
2. Expand network of non-Medicaid dependent transportation providers.

ADVOCACY / EDUCATION

“The Board values and encourages self-advocacy and believes each person is the author of their own destiny. Staff work with every individual we serve to find their voices and express their wants and desires.”

2019 Benchmarks

1. Continue to support the efforts of the Aktion Club and provide notification of meetings through social media.
2. Continue to support the efforts of People First of Auglaize, Mercer, and Allen counties.
3. Continue to support the efforts of the Arc of Ohio in Mercer County.
4. Sponsor a “Speak Up ~ Stay Safe” event.
5. Support the efforts of “Park 4 All Abilities” to bring a completely accessible park to Mercer County.
6. Explore self advocacy conference opportunities.

2020 Benchmarks

1. Continue to support the efforts of the Aktion Club and provide notification of meetings through social media.
2. Continue to support the efforts of People First of Auglaize, Mercer, and Allen counties.
3. Continue to support the efforts of the Arc of Ohio in Mercer County.
4. Sponsor a “Speak Up ~ Stay Safe” event.
5. Support the efforts of “Park 4 All Abilities” to bring a completely accessible park to Mercer County.
6. Explore offering scholarships for expenses related to attend education self advocacy events – sibling conference, etc.

2021 Benchmarks

1. Continue to support the efforts of the Aktion Club and provide notification of meetings through social media.
2. Continue to support the efforts of People First of Auglaize, Mercer, and Allen counties.
3. Continue to support the efforts of the Arc of Ohio in Mercer County.
4. Support the efforts of “Play For All Abilities” to bring a completely accessible park to Mercer County.

PERSON CENTERED PLANNING

“Writing a person centered plan is paramount to identifying and ensuring people are receiving the services they want to assist in achieving their lives’ goals. The Board values quality relationships between individuals, their loved ones, and their SSAs.”

2019 Benchmarks

1. As a team, the department will review annually the currently used ISP template and assessments to move more toward a person centered plan.
2. SSAs will continue to receive training on person centered planning.
3. SSAs will meet requirements of rule and keep on top of changes in rules.
4. SSAs will be working in a completely virtualized work environment and have flexible schedules to meet client’s needs.
5. Caseloads and weighting will be monitored on a semi-annual basis to keep track of rise/fall of caseload intensities.

2020 Benchmarks

1. SSAs will continue to participate in person centered training at state level.
2. SSAs will meet as a team to discuss ISP template and assessments and make appropriate changes.
3. SSAs will meet requirements of rule and keep on top of changes in rules.
4. Caseloads and weighting will be monitored on a quarterly basis to keep track of rise/fall of caseload intensities.

2021 Benchmarks

1. SSAs will continue to participate in person centered training at state level.
2. SSAs will meet as a team to discuss ISP template and assessments and make appropriate changes.

3. SSAs will meet requirements of rule and keep on top of changes in rules.
4. Caseloads and weighting will be monitored on a semi-annual basis to keep track of rise/fall of caseload intensities.

PROVIDER RELATIONS

“As we move forward from being a provider of services we will need to find best ways possible to support our providers in delivering quality and consistent services to our clients.”

2019 Benchmarks

1. Explore providing education opportunities for provider staff to be kept abreast of rule changes, etc.
2. Through provider round tables discuss needed training, education, and opportunities; explore ability to meet these needs.
3. Meet with provider agencies to understand gaps in service/service delivery within the provider community.
4. Continue to support staff of provider agencies by honoring all direct care staff.
5. Educate independent and agency staff as to their trade associations (OPRA, etc.).
6. Increase Independent provider pool to address assessed gaps in service/service delivery.
7. Continue to support DSP Ohio efforts.

2020 Benchmarks

1. Explore providing education opportunities for provider staff to be kept abreast of rule changes, etc.
2. Through provider round tables discuss needed training, education, and opportunities; explore ability to meet these needs.
3. Continue to support staff of provider agencies by honoring all direct care staff.

2021 Benchmarks

1. Explore providing education opportunities for provider staff to be kept abreast of rule changes, etc.
2. Through provider round tables discuss needed training, education, and opportunities; explore ability to meet these needs.
3. Continue to support staff of provider agencies by honoring all direct care staff.

FISCAL MANAGEMENT

“The Board of DD receives the majority of its funding from local taxpayers. The Board takes this responsibility very seriously.”

2019 Benchmarks

1. The Board will annually complete a thorough review of its Medicaid Match responsibility and develop a direction of future budgetary needs.
2. Continue to invest money into capital projects for aging facilities.
3. Maintain a carryover balance equivalent to at least four months of ongoing expenses.
4. Maintain at least 10 provider agencies of Medicaid services with \$100,000 in allocated costs in Mercer County.
5. Increase the amount of independent providers of Medicaid services.
6. Maintain a five (5) year cash forecast for all funds.

2020 Benchmarks

1. The Board will annually complete a thorough review of its Medicaid Match responsibility and develop a direction of future budgetary needs.
2. Continue to invest money into capital projects for aging facilities.
3. Maintain a carryover balance equivalent to at least four months of ongoing expenses.
4. Maintain at least 10 providers of Medicaid services with \$100,000 in allocated costs in Mercer County.
5. Increase the amount of independent providers of Medicaid services.
6. Maintain a five (5) year cash forecast for all funds.

2021 Benchmarks

1. The Board will annually complete a thorough review of its Medicaid Match responsibility and develop a direction of future budgetary needs.
2. Continue to invest money into capital projects for aging facilities.
3. Maintain a carryover balance equivalent to at least four months of ongoing expenses.
4. Maintain at least 10 providers of Medicaid services with \$100,000 in allocated costs in Mercer County.
5. Increase the amount of independent providers of Medicaid services.
6. Maintain a five (5) year cash forecast for all funds.

WAIVER PREVALENCE

“The Board of DD provides the funding for services from local funds and/or Medicaid. All DD eligible individuals have access to SSA services and varying levels of local services.”

2019 Benchmarks

1. Enroll IO and SELF waivers as financially available per fiscal plan.
2. Evaluate a waiting list to determine what services clients are truly waiting for.
3. Receive approval from DODD for new waiting list assessment and implement the assessment process when training is received.
4. Every eligible individual who is 20 years old or older will be offered the minimum of a Level One waiver if they are eligible for Medicaid.

2020 Benchmarks

1. Enroll IO and SELF waivers as financially available per fiscal plan.
2. Implement a new waiting list rule as prescribed by DODD.
3. Respond to the needs as identified by the new waiting list assessment.
4. Every eligible individual who is 18 years old or older will be offered the minimum of a Level One waiver if they are eligible for Medicaid.

2021 Benchmarks

1. Enroll IO and SELF waivers as financially available per fiscal plan.
2. Complete annual waiver planning to match needs vs. financial resources.