

**FY 2017 Agency Goals**

<b>A.</b>	<b>GOAL: ENHANCE BOARD GOVERNANCE</b>								
	<b>OBJECTIVE; TO EDUCATE AND TRAIN BOARD/ADVISORY COUNCIL MEMBERS</b>						<b>IMPLEMENTATION YEAR</b>		
	<b>ACTION STEPS</b>	<b>PERSON RESPONSIBLE</b>	<b>PLANNED OUTCOME</b>	<b>ACTUAL OUTCOME</b>	<b>PROJECTED EXPENSE</b>	<b>COMPLETION DATE</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
1.	To arrange quarterly presentations of services offered by and/or funded by VAAA.	KB	To educate Board/Advisory members regarding services available and provided by VAAA.		\$0		x	x	x
2.	<p>To invite a member of the Region 5 Senior Advocates Committee to Attend the N4a Legislative Briefing.</p> <p>To invite 2 members of the Board to attend the N4a Conference.</p> <p>To invite 2 Advisory Council and 2 Board members to attend the 4AM Conference</p>	KB	Both invitees will gain a greater understanding of the political/funding aspect of aging and have exposure to a broader sense of aging from a national perspective.		<p>Legislative Briefing - \$2,000</p> <p>N4A Conference - \$4,000</p> <p>4AM Conference - \$1,000</p>		x	x	x

<b>B. GOAL; IDENTIFY AND EVALUATE RISKS AND DEVELOP APPROPRIATE MITIGATION PLANS</b>									
<b>OBJECTIVE; TO ENSURE THAT THE AGENCY IS HIPAA COMPLIANT</b>							<b>IMPLEMENTATION YEAR</b>		
	<b>ACTION STEPS</b>	<b>PERSON RESPONSIBLE</b>	<b>PLANNED OUTCOME</b>	<b>ACTUAL OUTCOME</b>	<b>PROJECTED EXPENSE</b>	<b>COMPLETION DATE</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
1.	To develop HIPAA policies and procedures per the HIPAA audit	KB, YB DM, LQ, PK, JC, KR,	The agency will improve at least one HIPAA exposure area under security and area under privacy of identified as high-risk in the audit report.		Approx. \$8,000 which includes: construction of permanent walls, secure doors, camera surveillance		HIPPA P&P to be developed. Compliance officer named, Departmental assignments given by Compliance Officer	Physical structures completed, such as wall structures, cameras installed, offices have appropriate locks, etc	Review completed, comparison to areas identified in initial audit. Goal: 95% compliance rate.

<b>C. GOAL; TO DEVELOP OUR EXISTING HUMAN RESOURCES DEPARTMENT</b>									
<b>OBJECTIVE; TO DECREASE STAFF TURNOVER, PROVIDE ADEQUATE TRAINING AND IMPROVE THE HR FUNCTION OF THE AGENCY</b>							<b>IMPLEMENTATION YEAR</b>		
	<b>ACTION STEPS</b>	<b>PERSON RESPONSIBLE</b>	<b>PLANNED OUTCOME</b>	<b>ACTUAL OUTCOME</b>	<b>PROJECTED EXPENSE</b>	<b>COMPLETION DATE</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
1.	Identify an HRIS system in 2016.	KR	1. Begin the implementation of an HRIS system by February 2017.	1.	Estimated costs-\$5500 annually		X		
2.	Prepare an Emergency/Disaster Action Plan for the agency. - Attend monthly emergency meetings for Genesee County - Establish emergency contacts in Lapeer and Shiawassee County	KR	2. Implement VAAA Emergency Plan Manual and train staff by February 2017.	2.			X		
3.	Prepare a New Hire process including orientation of new hires.	KR	3. Implement New Hire/Orientation process	3.			09/19/2016		
4.	Conduct an employee personnel file audit to ensure files are complete per	KR	4. All personnel files completed per	4.			12/31/2016		

	VAAA policies.		VAAA policies by December 2016.						
5.	Create VAAA a calendar that shows monthly trainings and events.	KR	5. VAAA calendar will be prepared for CEO/President review/approval by December 31, 2016	5.		12/31/2016			
6.	Administer the Emergency succession plan for Executive staff. <ul style="list-style-type: none"> <li>- Each department head will conduct a risk analysis for their position</li> <li>- Executive staff will review/approve the short-term placements and next steps</li> <li>- Create a departure defined succession plan</li> </ul>	KR	6. Each department head will have identified staff to assume a greater role by January 2017.  Process will begin by July of 2017 for anticipated key position(s)' departure	6.			X		
7.	Introduce the Procedural Manual process to VAAA leadership staff.	KR	7. VAAA will implement a procedural manual for each department in the agency.	7.			Process begins Summer of 2017	X	
8.	Prepare and implement HIPAA guidelines <ul style="list-style-type: none"> <li>- HIPAA audits conducted twice a year</li> </ul>	KR	8. All employees will receive training and sign a HIPAA acknowledgment by March 2017.	8.			X		
9.	Identify agency wide mandatory training for VAAA employees and individual department training using the Relias Learning program.	KR	9. VAAA employees would have received trainings to complete agency wide in	9.			X		

10.	Conduct a salary study of key positions in order to attract talented candidates and retain current staff	KR	addition to the assigned trainings per their Supervisor  10. A salary study will be conducted twice a year and as needed from time to time	10.			X		
11.	Streamline IT processes for all systems used by staff, ensure IT helpdesk support for staff and keep an accurate inventory of computer equipment.	KR	11. VAAA information technology will be handled solely through the IT department and all unused equipment will be stored by IT	11.			X		

D.	GOAL; TO IDENTIFY AND DEVELOP NEW AND DIVERSE REVENUE STREAMS								
OBJECTIVE; TO MAKE THE AGENCY LESS DEPENDENT ON STATE/FEDERAL FUNDING							IMPLEMENTATION YEAR		
	ACTION STEPS	PERSON RESPONSIBLE	PLANNED OUTCOME	ACTUAL OUTCOME	PROJECTED EXPENSE	COMPLETION DATE	2017	2018	2019
1.	To increase Cost Sharing for services	YB, DM, LQ, JC, PK	To increase cost sharing revenue by 10% annually. Each Department will contribute to ensure cost sharing will be implemented.				Increase by 10% from 2016	Increase by 10% from 2017	Increase by 10% from 2018
2.	To begin the Targeted Care Management Program	YB DM, LQ, PK,	To begin implementation of TCM to assist in providing Medicaid for clients and generate additional revenue. In 2017 baseline, data will be collected based on revenue collected.				Program implementation begins. Baseline data collected	Increase revenue obtained in 2017 by 10%. Utilize revenue to decrease CM waitlist (number will	Increase revenue obtained in 2018 by 10%. Utilize revenue to decrease CM waitlist (number will

			Program will grow in revenue by 10% annually thereafter.					depend on revenue collected)	depend on revenue collected)
3.	Implementation of reduction of paper usage by 80% within 2 departments	KB, YB, DM, LQ, PK, JC, KR	To save resources by initiating the paperless process by department.				Planning and Contract Management	Human Resources	To be determined

<b>E.</b>	<b>GOAL; TO BE THE TRUSTED RESOURCE FOR ALL THINGS AGING IN THE REGION</b>								
	<b>OBJECTIVE; INCREASE AWARENESS OF VAAA IN THE COMMUNITY.</b>						<b>IMPLEMENTATION YEAR</b>		
	<b>ACTION STEPS</b>	<b>PERSON RESPONSIBLE</b>	<b>PLANNED OUTCOME</b>	<b>ACTUAL OUTCOME</b>	<b>PROJECTED EXPENSE</b>	<b>COMPLETION DATE</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
1.	To implement marketing, branding and communications plan per department	KB, YB, DM, LQ, PK, JC, KR	To ensure every department is utilizing consistent VAAA branding for public resources to assist in increasing overall I & A contacts at or above 28,597 (10% above FY 2016)		\$40, 649		X	X	Branding fully integrated throughout agency
2.	To increase I & A calls by 10% annually (excluding MMAP) and Valley employees)	KB, YB DM, LQ, PK, JC, KR	See above				X	X	X
3.	Increase internal communications within the entire organization	KB, YB DM, LQ, PK, JC, KR	To obtain an 80% satisfactory communication rate agency wide. Effective communications improve employee engagement.				X	X	X
4	To begin the Commission on Accreditation of Rehabilitation Facilities (CARF) process	KB, YB DM, LQ, PK, JC, KR	To obtain CARF Accreditation by year end of FY 2018 to show monitoring, quality and accountability ii preparation to do business with Managed	Cost of CARF consultant	Consultant – \$50.hour  CARF Accreditation process \$17,000		Order updated manual and determine area to begin process, Begin looking	CARF process should be 75% complete by FY 2018 year end	CARF process completed. Begin review of National Committee for Quality

			Care Organizations (MCOs).				for consultant to facilitate the CARF Process Begin the CARF Accreditation process		Assurance (NCQA) Process
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## Valley Area Agency on Aging

<b>GOAL; TO IDENTIFY AND DEVELOP NEW AND DIVERSE REVENUE STREAMS</b>									
<b>OBJECTIVE; TO MAKE THE AGENCY LESS DEPENDENT ON STATE/FEDERAL FUNDING</b>							<b>IMPLEMENTATION YEAR</b>		
	<b>ACTION STEPS</b>	<b>PERSON RESPONSIBLE</b>	<b>PLANNED OUTCOME</b>	<b>ACTUAL OUTCOME</b>	<b>PROJECTED EXPENSE</b>	<b>COMPLETION DATE</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>
1.	To bill for Medicare services and other billable services	KB, YB	To increase Medicare revenue by 10% from FY 2016				To increase Medicare revenue by 10% from FY 2016	To increase Medicare revenue by 10% from FY 2017	To increase Medicare revenue by 10% from FY 2018
2.	To research the need for senior housing.	KB	To identify innovative ways that housing could generate revenue for the agency and meet the housing need in the community.				X	X	X
3.	To begin the CareNect Program.	PK, YB, DM	To begin collecting revenue to assist in sustaining/supplementing I & A and Volunteer Operations				Program implementation begins. Baseline data collected	Increase revenue obtained in 2017 by 10%	Increase revenue obtained in 2018 by 10%
4.	To create a separate Business Plan for the agency	KB, YB, LQ, DM, KR, PK, JC	To develop a long term business plan in order to impact overall sustainability and meet the needs of the community		Legal Fees - \$5,000				