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NOKOMIS HEALTHY SENIORS

Strategic Plan

Strategic Plan 2010- 2015

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Strategic Plan 2010-2015

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Updated 1/2/2011

Strategic Planning Process

The Nokomis Healthy Seniors Program (NHS) has a strong following among area elders. Those elders that participate in social programming and request basic needs transportation assistance do so on a fairly regular basis and give NHS credit for being able to stay in their home, and have opportunities for socialization. NHS provides in home nursing to low income seniors who really have no other option for those services.

Strategic planning exercises and interviews have revealed opportunities for NHS to strengthen parts of the program, and opportunities for growth. The current economic environment in conjunction with the growing number of seniors in the NHS service area are putting increased pressure on NHS to provide more services to a larger service area with less funding.

In response to this pressure, strategic planning conversations have focused on:

- ❖ the need to improve and stream line business processes;
- ❖ increase fundraising;
- ❖ increase outreach;
- ❖ increase number of volunteers; and
- ❖ focus on creative new ways to utilize existing area resources to meet the needs of area elders.
- ❖ Outreach/connection to children/adult caregivers
- ❖ Increase in volunteer involvement both with the agency and the agencies involvement with the volunteer
- ❖ Increase health promotion activities
- ❖ Increase activities tailored to “younger” seniors
- ❖ Financial investments/support by outside agencies, supporters, etc.

Mission, Vision and Values Statements

Mission Statement

CURRENT: The mission of The Nokomis Healthy Seniors Program is to enhance the lives of our community's elders by helping them continue to live at home. We achieve this by coordinating volunteer assistance, affordable health services, and community resources.

Vision Statement

CURRENT: Nokomis Healthy Seniors will be the community's premier senior citizen resource and a recognized leader in promoting the value of supporting our senior citizens in their goal to live independently within the neighborhood and with an enhanced quality of life.

Overarching Goals

CURRENT:

- ❖ Elders live in their own homes
- ❖ Elders are socially connected
- ❖ Elders experience maximized health and well-being
- ❖ The Nokomis Healthy Seniors Program is an accessible, affordable resource

RECOMMEND ADDING:

- ❖ The Nokomis Healthy Seniors Program operates as a resource information center for services available to seniors.
- ❖ The Nokomis Healthy Seniors Program is known by other service organizations that serve seniors.

Goals and Strategies

2011 will be a year of redesign and refocus, gearing up for NHS to reposition itself as the leader in partnering with other service organizations to increase the service we provide to area seniors.

Focus and prioritize. Recognize we can't answer all elders needs in our community. We have an opportunity to look forward, identify where we can make a significant contribution, and with prioritization excel at what we do. Because of shrinking funding from state and city, Nokomis Healthy Seniors has to set a priority to ensure the funds will be available for us to continue to carry out our mission to serve seniors.

Review all current programming. Determine the return on investment in terms of staff and volunteer hours to dollars raised or community awareness or number of elders served.

Recruit volunteers and increase our skill set. From strategic plan and operating plan goals, examine the number of staff and volunteers needed, as well as the required skill sets to obtain NHS goals. Develop a robust volunteer program to ensure we have the resources needed to serve area seniors.

Efficient and Effective. Take advantage of this review process to streamline business processes and ensure policies, procedures and job descriptions are well documented, and there is a process and responsible person to keep them updated.

For now, keep doing what works. NHS has it's roots in the block nurse program. We provide an invaluable service to low income seniors who need at home nursing care. We provide a preventative nurse is in program that benefits area seniors and plan to continue.

Look forward/Re-position. Nokomis Healthy Seniors will partner with state/county/government agencies (such as government appointed committees on aging issues, local police and fire departments), community associations, area businesses and our neighbors to educate, increase awareness, and serve our area elders. Nokomis Healthy Seniors strives to increase the responsibility of our area elders to the community at large. NHS hopes that all residents of our service area will recognize we all benefit with healthy, engaged seniors as part of our neighborhoods. We strive to make our communities "Communities for life". This will require a new kind of thinking and a new kind of effort for Nokomis Healthy Seniors. NHS holds the vision of becoming a leader in serving seniors in Minneapolis through engaging other service organizations.

STRENGTHS

The Nokomis Healthy Seniors Program (NHS) despite growing environmental pressures, is flourishing. It has a strong board of directors that have fostered an atmosphere of open communication, as well as organized committees that form the backbone of the organization. The program has also developed a core of regular volunteers, which include a few regular volunteers to help with administrative work, which assists the staff with ever increasing demands.

The space at Bethel Lutheran Church is adequate for a variety of programming from exercise, to support groups, to card games; and has ample parking, including handicap accessible spaces. Seniors appreciate the Thursday morning activities which have had regular attendance. It's a way for seniors who know about the program to socially connect and participate in preventative health programs such as The Nurse Is In and Exercise Programs.

The elders served by NHS also benefit by regular programming. They know to expect the Thursday morning programs at Bethel church, and also expect other yearly programs such as Hot Dog Sales and the Fall Frolic.

Rides by NHS volunteers have steadily increased over the last two years and have become a very popular request by area elders. This is a powerful service offered to help keep seniors in their homes. There is a strong retention of volunteers who offer rides, which is why NHS has been able to keep up with the demand.

When a senior calls the helpline and requests a referral or has an unusual request, NHS staff are very good at finding a referral source for the caller.

NHS has developed a strong working relationship with neighborhood associations as well as other businesses in the Nokomis Area. Bergman's SUPERVALU, Fat Lorenzo's, and Parkway Hardware have become regular supporters of the program.

NHS has produced a newsletter 4 times per year which is a source of information of upcoming events, safety tips, and other NHS information and is mailed to current clients, and Nokomis area supporters.

NHS recently received a grant to upgrade computer systems which has helped the office staff perform more efficiently.

WEAKNESS

The following is a list of challenges NHS faces. Some of these items are listed as strengths above. They are listed again here because the interviewees recognized no matter how well something is done, it can always be done better.

VOLUNTEERS

- ❖ There is a shortage of volunteers, particularly in the summer. It would be helpful to have a broader base of volunteers to draw from.
- ❖ Recruiting new volunteers
- ❖ During events, ensure volunteers signing up for the positions are ready willing and able to perform the responsibilities of that position. NHS cannot assume a volunteer will take a leadership role if not previously agreed upon.
- ❖ There are not enough volunteers on the committees. There isn't currently a process or communication plan to recruit new volunteers or tap into existing volunteer base to encourage committee involvement.
- ❖ Tracking and reporting of volunteer hours is sporadic.

GRANTS

- ❖ There isn't a regular yearly process that ensures all grants are re-applied for.
- ❖ Finding available grants and phrasing the ask is an ongoing challenge.

BOARD OF DIRECTORS

- ❖ The board takes too long to make decisions.

LOCATION

- ❖ The community may not know NHS is located in a church.
- ❖ Being located in a church vs. having a building like the Southwest Senior Center means we lose an opportunity to build recognition.
- ❖ Location may provide a barrier to serving a diversity of seniors

BUSINESS PROCESSES

- ❖ NHS lacks a comprehensive database that identifies seniors served, referral resources, volunteers, etc. There is a lot of duplication of effort due to the lack of this valuable resource.
- ❖ While there are policy and procedure manuals, they aren't kept up to date.
- ❖ In the interest of succession planning, up to date policy and procedure manuals are highly suggested.

- ❖ NHS relies on the expertise of one person for IT support. Thorough documentation of the network, disaster recovery plans, and database development are indicated.

OUTREACH/MARKETING/COMMUNICATION

- ❖ NHS does not communicate with the families of the seniors we serve on a regular basis.

FORMAL PLAN

- ❖ Staff and the Board of Directors have both indicated they have feel spread too thin. Proud of the work they do, everything has the same level of importance, and there is a lack of prioritization.

HELP LINE

- ❖ When a request is made for help outside of the scope of NHS, NHS staff move mountains to find a referral. There are no background checks or a formal process in place for these referrals. Based on staff's current workload follow up calls for those referrals may or may not be made.

SERVICE AREA

- ❖ NHS does not serve many seniors on the west side of the defined service area.

BUDGET

- ❖ In 2010 NHS had to cut the Executive Director and staff hours due to budget shortfall.

OPPORTUNITIES

Opportunities are those areas NHS has an opportunity to fix a weakness through the strategic planning process, or provide a new service that has been identified as a need to elders in the service area.

THE NHS FACTOR

- ❖ When seniors call the hotline, they call because they know us. NHS has an “in” with Nokomis area elders because of our history with the client. Seniors avoid calling agencies they don't have a history with, or haven't been referred to.

NEW PROGRAMS

- ❖ Seniors have been requesting part-time companion care when calling the office. They would prefer to have one person come and make a meal, have dinner with them, spend an afternoon, etc.

- ❖ Increase the transportation program. Consider purchasing a bus so NHS can hold group field trips for entertainment or for shopping, rides to Trinity for meals.
- ❖ NHS could offer OK checks. A program where we offer regular phone calls to elders in our community to make sure they are OK.
- ❖ Intergenerational programming
- ❖ Grab bar assessments
- ❖ Partner with local grocery stores to deliver groceries.
- ❖ Nutrition Program.
- ❖ Offer Programming to younger, active seniors. This may help capture volunteers, as well as help NHS to be proactive and help seniors before a crisis situation.
- ❖ Find a way to connect seniors who need chores done with people in the community who are looking for work.

REDUCE SPENDING

- ❖ Capture more email addresses so newsletter can be emailed.

FIND MONEY

- ❖ Deliver a directory that charges small business to be listed. This may dovetail to thoughts about referral sources and conducting background checks.
- ❖ Improve online giving
- ❖ Hire a consultant to research and write grants
- ❖ Email newsletters
- ❖ Increase Medicare dollars captured.

FIND VOLUNTEERS

- ❖ Better utilize boy scouts, girl scouts, and corporate volunteer days. This should be included in yearly plan so when they call to volunteer, we aren't using them for the highest and best use of their time.

FIND CLIENTS

- ❖ Market to MVNA clients

- ❖ Use Nurse is In to capture more clients

IMPROVE OUTREACH

- ❖ Bring in general public to events
- ❖ Email newsletters
- ❖ Increase number of strategic partnerships with Nokomis area businesses
- ❖ Network with other professionals specializing in working with seniors.
- ❖ Network with church parish programs
- ❖ Expand newsletter mailing list.
- ❖ Leverage newsletter articles, put them in the paper, start a blog.
- ❖ Increase NHS's partnership with the VA.

RE-TOOL

- ❖ As NHS undertakes the strategic planning process, it is necessary to prioritize. This will help with the feeling many have of being spread too thin. As part of the goal setting process, NHS staff and board of directors will have the opportunity to review the existing skill sets available, and determine what new skill sets are needed. The right people will need to be in the right positions for the new goals to be met.
- ❖ An opportunity for everyone to improve skill sets, knowledge of technology, services available for seniors, networking and marketing skills, etc.
- ❖ The Board of Directors has an opportunity to ensure decision making processes are as streamlined as possible.

THREATS

- ❖ The three things Nokomis Healthy Seniors MUST have to continue to exist are (i) funding, (ii) volunteers, and (iii) staff members. Funding from state, federal and private sources are becoming more difficult to secure given the current economic environment. At times, there are not enough volunteers to provide requested rides by our seniors. There have been opportunities to increase office efficiencies

On January 1, 2011 the first baby boomer will turn 65. Through 2030 the number of Minnesotans over age 65 will double, rising to 1.3 million. During this same time period the population of 85+ will early double, rising to 163,000. By 2050 this number will double again, increasing to 324,000 people. The Nokomis Healthy Seniors Program has an opportunity to define what role it will play with the aging population.

In The Blueprint for 2010 a study done by the Minnesota Department of Human services, Minnesota Department of health and the Minnesota Board on Aging 5 themes were identified for Minnesota government residents, communities and agencies to address to prepare for the aging population.

1. Redefining work and retirement

- a. Retirement no longer means withdrawing from work and other engagements in favor of leisure. The Baby boom generation represents a tremendous human capital resource and surveys indicate they want to stay engaged, either in paid or non paid roles.
- b. If baby boomers do retire, Minnesota will be facing a labor shortage.
- c. This represents an opportunity for NHS to tap into the baby boom generation either as volunteers or as paid employees.
- d. Organizations such as SHIFT with their volunteer bank or Senior mentorship programs may serve as a model to keep older seniors engaged and viable while mentoring or helping younger service area residents. NHS may start a similar program, or make better utilization of these existing programs.
- e. NHS may also have an opportunity to utilize retirement programs to tap into new retirees.

2. Supporting caregivers of all ages

- a. The vast majority of long-term care services provided to frail elderly is provided by family members and other informal sources such as friends and neighbors. For every 1 percent decline in the percent of eldercare provided by families and friends in Minnesota, it costs the public sector an additional \$30 million per year.

- b. The Transform 2010 report suggests the development of one-stop resource centers for caregivers in local communities and use the developing aging and disability resource centers through out the Minnesota Board on Aging for the effort.
 - c. NHS has the opportunity to consider professionals trained as navigators or coaches who can provide 24/7 advice and counsel to caregivers
 - d. NHS has the opportunity to expand community awareness of caregivers and what they do that the type of help they may need from NHS.
 - e. NHS has the opportunity to encourage faith communities to support models that offer connections between individuals living alone and the community.
3. Fostering communities for a lifetime
- a. Minnesota's communities should be good places to grow up and grow old, offer physical social and service features for their residents of all ages.
 - b. Social infrastructures or the opportunities for social connections. These options foster a sense of responsibility across groups and generations. They include programs that connect generations; volunteer and civic engagement options, block clubs and community-wide events that build friendships and trust based upon shared experiences.
 - c. Communities are an important source of affordable support for persons as they age.
 - d. Just as important as a walkable community is a community with viable transportation. NHS has already begun to address the need for transportation, this need will continue to become more critical as our population ages.
4. Improving health and long-term care
- a. The Transform 2010 project projects that there will continue to be dramatic change in how long-term care is provided. There may be an opportunity for NHS to provide a new model of for delivery of home and community services to the next generation of elders e.g.

membership-based concierge models, fee-for-service or sliding fee scale model.

5. Maximizing the use of technology

METRO AREA WORK GROUPS

There are work groups throughout the metro that are tackling the “communities for a lifetime” issue. They are attempting to find the shortcomings in products or services or infrastructure in their communities, and tackle them, one issue at a time. There is a work group addressing Golden Valley and Plymouth, and another addressing St. Louis Park and Hopkins. St. Louis Park and Hopkins have a fairly mature program called Nurturing our Retired Citizens (NORC). They provide ongoing education, and have partnered with city and county government and agencies. They are very well known in the city.

Park Nicollet also initiated a work group through their foundation and invited senior service providers to identify needs of area St. Louis Park seniors. NORC attended those meetings.

There is a NW Senior Leadership group that represents Brooklyn Park, Brooklyn Center, Maple Grove, New Hope, and Champlin. These cities pay a membership fee to belong to the group, meet monthly and share what is happening in each of their cities. Their membership fee pays the salary of a staff person who does research and grant writing to help fund some of the events.

PROFESSIONAL NETWORKING GROUPS

Social Workers in Marketing (SWIM)

Care Options Network

Minneapolis Area Senior Workers Association (MASWA)

St. Paul Area Senior Workers Association (SPASWA)

Strategic Issues Identified

BUSINESS PROCESSES

With a growing demand from area seniors, NHS will need to do more with less to meet the demand. It will be more important than ever that the staff members have the

skills, knowledge, business processes, and empowerment to meet the needs of area seniors.

Recommendations:

- Review of strategic plan and goals for the next 5 years may reveal new job duties for the NHS staff. These new job duties may require more time or more skills to do the job than previously required. It is necessary to systematically review these needs to ensure the success of the NHS Staff and to meet the goals set by the strategic plan.
- Systematic review of business processes. For each review, determine if there are opportunities for automation, delegation to a volunteer, who is responsible for the process, and who has the authority to make decisions about the process. The responsibility and authority should then be included in the job description of the staff member, and measured at least yearly.
- Processes should be documented in a manual and reviewed and updated on a regular basis.
- Job descriptions reviewed and updated to reflect any new organizational needs. Job descriptions should include skills needed, business process responsibility and decision making level authority to maximize staff empowerment.
- Business processes should also be reviewed for emergency planning and disaster recovery.
- Implement an electronic database that contains seniors and referral sources and senior services as soon as possible. Document backups for systems and IT support.

VOLUNTEERS

Volunteers are the backbone of NHS. As the need for services for area elders increases, so will the demand for volunteers. NHS will need a broad base of volunteers from office work, to drivers, to volunteers in leadership positions in addition to the Board of Directors. Currently NHS is not fully utilizing it's volunteer base, and will need to increase recruitment efforts.

Recommendation: Implement a comprehensive volunteer program to achieve the following goals:

- First, skill sets for each of the goals of the strategic plan must be identified. From there, the people and skill sets should be identified,

and recruitment of those skill sets that are not present in existing volunteers.

- Identify goals for number of volunteers needed and retention needed and include in operating goals for the year.
- A review of the recruitment, intake and retention program.
- Recruit more volunteers for committee and event work. These volunteers may include seniors we serve. Recruitment goals should be set ABOVE predicted need, and include a timeline.
- Review the skill set and time requirements needed to run the new comprehensive volunteer program and compare with the time currently allowed.
- Improve communication of NHS policies to volunteers about rules and processes so they may accurately represent NHS when they are with clients.
- Improve education of NHS volunteers so they may be a resource to senior clients.

MONEY

The theme continues to be the need to do more with less. With the anticipated increased need for services from area elders, with the current economy there are fewer grant opportunities. NHS will need to review priorities; programs and budget limitations will simultaneously increasing fund raising and finding new grant opportunities. In addition, NHS is required to continually review where dollars are being spent to ensure it is minimizing costs.

Recommendations:

- For the Board of Directors/Executive Director to review the NHS grant research and writing process. The goal being to understand: how many asks each year, how much funding of NHS is due to grants, risk of losing programming if grants are lost.
- Implement a yearly process of grant writing and the need for a yearly grant calendar that includes date of ask and date of disbursements. Identify other elements needed for a grant writing program such as follow up calls and thank you notes.

- Complete feasibility study of hiring research/grant writer.
- Review programs NHS holds each year with the goal of maximizing fundraising dollars and number of seniors served. Review each program to determine volunteer and staff hours required for each event, and ROI in terms of dollars raised, number of seniors served from event, amount of community awareness received from the event.
- Review each program and determine if there is a partnership with another organization that might be leveraged.
- Consider new money making ideas such as monetizing the NHS website, or delivering a directory of service providers.
- Consider a charge such as membership fee or sliding fee scale for seniors that gives them access to services.
- Increase marketing to current clients about nursing program.
- Increase website giving.
- Increase email distribution of newsletter.
- Review business processes for improvement of effectiveness and efficiencies.

OUTREACH

The Board of Directors has identified an interest in becoming a leader in the Nokomis area in engaging other business and agencies in talking about transforming the Nokomis area into what the Transform 2010 project calls “Communities for a lifetime”. In the past, the outreach/technology committee has focused the majority of it’s work on the implementation of a new database, and the newsletter. Due to ongoing pressure to do more with less, the Board of Directors sees a benefit to partnering with other service organizations to increase services available to NHS clients by utilizing services already available, expand the NHS volunteer base, increase awareness of aging issues to Nokomis residents, and be the referral source for senior clients, their families, caregivers and neighbors.

Recommendations:

- There are numerous opportunities for outreach including outreach to find more seniors/caregivers in need, outreach to area businesses to provide new services, outreach to professionals who work with seniors, outreach to find new volunteers, outreach to

educate on aging issues, etc. The board may consider implementing a new committee to address one or more of these needs. More volunteers will be needed for this effort.

- Consider appointing a spokesperson for NHS to attend networking groups to reach out to senior professionals.

THE BOARD OF DIRECTORS

Recommendations:

- With the new focus on providing more referral sources, the board may consider recruiting an active licensed social worker to the board. This social worker should have a strong working knowledge of Medical Assistance, Elderly Waver, and Hennepin County programs available to low income seniors.

NEW PROGRAMS

NHS has an opportunity to become a leader in Minneapolis and their defined service area. Minnesota is gearing up to address “communities for a lifetime” and there isn’t anyone directly addressing issues facing elders in a comprehensive way in the NHS service area. The programs that provide fundraising dollars, or programs that form strategic partnerships with other businesses will maximize the number of elders served and should be given priority.

Recommendations:

- Implement a formal referral service program to compliment the work already being done on the Hotline. Provide a directory of senior service providers that have had references and background checks. Service providers must pay for inclusion. Cost should be determined by printing costs as well as a profit for NHS to be used for services. Documentation from the Hotline should track requests not in the directory. Referral program should integrate with Development and Program Committee goals. Consider inclusion of service providers on the NHS Website. With enough distribution, directory could be a yearly publication. A new committee may be required.
- NHS has the opportunity to foster social connections for area seniors. There is a need for public education and awareness about the important role of community and to create a greater sense of

responsibility among concerned neighbors and friends of vulnerable adults in local communities.

- NHS could partner with businesses to offer products and services seniors need (grocery home delivery, small packages, etc)
- NHS could educate local public service staff i.e., fire, police, post office, on ways to support older people in their homes and communities.
- NHS could create or designate one-stop resource center for information and access to aging and disability services in the community.
- NHS could ensure the service area has the four core support services needed: nutrition services, affordable chore and home maintenance services, transportation, and caregiver respite services.
- NHS could identify programming and include youth groups, churches, area businesses.
- NHS could conduct Occupational Therapy Assessments e.g. grab bar assessments to area elders to support caregivers and elders in their homes
- NHS could build on it's already successful ride program. Subsidies would be needed, but NHS may consider purchasing a bus for group field trips or rides to Trinity for meals.
- NHS could engage other service providers in the area to conduct a focus group on the most pressing need for area seniors and put together a task force to address the need. Partnering with a large corporation with a foundation to address funding issues would be helpful.

Proposed Goals for 2011

The Nokomis Healthy Senior Program will spend the majority of 2011 preparing a strong foundation for 2012 and beyond. In 2010 the board expressed the desire to become a leader with local authorities, local businesses and other senior service providers to better serve our local seniors. To take on this challenge the recommendation is for the Nokomis Healthy Seniors Program to prioritize fundraising efforts and increasing and retaining it's volunteer base. The other recommendation is for the board to take action to engage local authorities and civic organizations in conversations about ways they can partner to serve local seniors. The recommendation for the board is to focus the first six months of 2011 on fundraising, minimizing costs and improving recruiting and retention of volunteers. Unless tied to one of these overarching goals, no other new program changes should be implemented until the last half of 2011.

1. GOAL: The Nokomis Healthy Senior Program Board of Directors will conduct a comprehensive review of current programming, development, and the grant writing process to look for ways to increase the results of fundraising efforts.
 - a. Review NHS Programs with the goal of maximizing fundraising dollars and number of seniors served. Review each event to determine ROI in terms of dollars raised, number of seniors served and amount of community awareness received. Each committee will review current activities and report back to the board on ways they can i) reduce spending, ii) increase fundraising iii) or implement new ways to increase fundraising. Each committee will set goals to implement these improvements. These new goals will be set by 1st quarter of 2011, with one new goal to be implemented before the end of the year, 2011.
 - b. The executive committee and executive director will review the current grant writing process and develop a comprehensive program that includes grant research, follow up calls, thank you notes, and presentations, or, the executive committee will conduct a feasibility study to determine if NHS should hire a research/grant writer. This decision will be made by the end of the first quarter, 2011
 - c. Implement a membership fee or sliding fee scale for services that gives them access to services. Research to be completed by development committee and a presentation made at the May board meeting with a decision to be made by the July board meeting, 2011.
 - d. Implement endowment program to be documented and ready to market by July board meeting, 2011.
 - e. Increase web giving. Evaluate ease of use of website, improve where necessary, and identify opportunities to drive people to the website (families of seniors served) to give. Identify goals by July 2011.

- f. Increase email distribution of newsletter and post archived newsletters on website. Identify steps to digitize newsletter and set goals by July 2011.
 - g. Development committee will consider new money making ideas such as monetizing the NHS website, or delivering a directory of service providers to area seniors. These new projects may require a new committee to drive the new initiative. Develop goals and have them approved by July 2011. New initiatives should be recorded into the strategic plan with dates set for milestones.
2. GOAL: The Nokomis Healthy Senior Program has a formalized, robust volunteer program effective in both recruiting and retention.
- a. Identify a committee (new?) or person responsible for driving this initiative. The responsible party will deliver a project plan complete with goals and objectives to the Board by the July 2011 board meeting. Milestone dates should be included into the strategic plan and reviewed at future board meetings.
3. GOAL: The Nokomis Healthy Senior Program will engage conversations with Minneapolis fire and police departments to survey they're perceived need for area seniors. Investigate the possibility of forming a partnership to serve area seniors. Investigate implementation of handing out magnetic emergency call cards or other solutions for seniors who are making frequent 911 calls. Report findings and recommendations to the board by September 2011 board meeting.
- a. Board will identify a person or committee responsible. New initiatives will have milestone dates included on the strategic plan.
4. GOAL: To review Hotline process and determine improvements and how this hotline might be folded into Nokomis Healthy Seniors and the new idea that NHS may become more of an information and referral source.
- a. Board will identify a person or committee responsible. A SWOT analysis will be completed, and recommendations made to the board for 2012.
5. GOAL: Nokomis Healthy Seniors Program has a process for setting yearly goals.
- a. Goals are set by each committee as well as by the board. Each goal is measurable, obtainable, has a board member identified as the responsible person, and a deadline.

- b. Every board meeting has time allocated on the agenda to review goals that are due in the next 3 months. The Board Chair is responsible to make sure the goals are reviewed.
 - c. Every September goal setting for the upcoming year is begun, and completed by December, and included in the strategic plan for the following year.
6. GOAL: Determine who will be responsible to kick off the suggested conversations (below) and goal planning for 2012.
7. GOAL: A new mission/value statement. The recommendation at this time is to limit large program changes in 2011 unless they have to do with improving the financial stability of the program. As NHS builds a strong foundation the first six months of the year, the second half of the year will lead to exciting conversations about how to position the program in the future. These conversations and goals set for 2012 will be the time to review the vision and mission for NHS.

Suggested conversations for second half of 2011. *These conversations should lead to new goals for NHS in 2012 to continue the process of repositioning itself as a leader in the Nokomis Community, Senior Industry, and Civic groups.*

Review other opportunities for Nokomis Healthy Seniors to begin to position itself as a “hub” of information for local seniors. These conversations should include increased outreach in the form of networking with professional senior-serving organizations, as well as resource information for local seniors. The Hotline review above, should be the kick start of these conversations.

Authorization

Board of Director Review and Approval of the Strategic Plan. To be signed at the time of approval and adoption.

Sharon Rodi, Chair	
Colleen Connolly-Swope, Vice-Chair	
Julie Toth, Secretary	
Robert Baas, Treasurer	
Jean Gotfredson	
Josephine Jacobs	
Herb Nelson	
Lynn Radecki	
John Rives	
Lisa Dunn	
Kristen Whittenbaugh, Executive Director	