



Lucas DD Strategic Plan 2024 – 2027 Year 2, Q2 Report

Submitted: Jan. 21, 2026

2024–2027 Lucas DD Strategic Plan Executive Summary

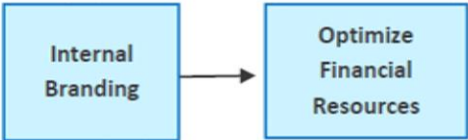

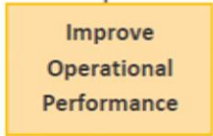

Vision: *One Board. One Community. All in.*

Mission: *Improving LIFE so that individuals with developmental disabilities reach their full potential.*

Values: *Excellence. Innovation. Respect. Always Improving*

For over 80 years, Lucas County has been a leader in innovative programs that help individuals with developmental disabilities reach their full potential. Building on that proud history, Lucas DD has developed a new strategic plan shaped by input from more than 40 stakeholders—staff, leadership, individuals served, families, providers—and hundreds of community survey responses. The plan focuses on four key goals: Fostering growth and learning, improving internal processes, exceeding expectations in every interaction, and promoting responsible stewardship. Guided by a clear roadmap of nearly 130 initiatives, this plan aims to strengthen organizational culture, elevate service quality, and further empower individuals and staff to achieve their best.

2024–2027 Strategic Plan Road Map

Goals	Objectives	Initiatives	Measures	Targets
Financial Responsible Stewardship	 <pre> graph LR A[Internal Branding] --> B[Optimize Financial Resources] </pre>	<ul style="list-style-type: none"> • Waiver and waitlist • Explore alternate funding streams • Brand expansion 	<ul style="list-style-type: none"> • # of waivers annually • New funding streams • Updated branding 	<ul style="list-style-type: none"> • Determine annual amounts needed • Increase in potential revenue • Complete brand updates by end of 2025
Customer Exceed Customer Expectations	 <pre> graph LR C[Improve Customer Experience] --> B[Optimize Financial Resources] </pre>	<ul style="list-style-type: none"> • Community employment • Provider support • Listening to customers • Increase customer engagement • Innovative projects 	<ul style="list-style-type: none"> • Individuals employed in the community • Customer satisfaction • # of new projects 	<ul style="list-style-type: none"> • Increase # of individuals in competitive employment • Increase customer satisfaction • Determine baseline projects annually
Internal Process Increase Efficiency and Effectiveness	 <pre> graph LR D[Improve Operational Performance] --> C[Improve Customer Experience] </pre>	<ul style="list-style-type: none"> • Improve communication • Process improvement system 	<ul style="list-style-type: none"> • Employee engagement survey trust and communication questions • Project completion rate 	<ul style="list-style-type: none"> • Increase score performance • Determine services
Learning and Growth Improve Employee Engagement	 <pre> graph LR E[Improve Infrastructure] --> D[Improve Operational Performance] F[Workforce Development] --> D </pre>	<ul style="list-style-type: none"> • Improve organizational culture • Improve HR processes • Improve technology • Improve facility effectiveness 	<ul style="list-style-type: none"> • Employee engagement results • Key HR metrics • IT plan • Project upgrades 	<ul style="list-style-type: none"> • Increase employment • Increase performance of HR metrics • Implement IT plan by 2025 • Project completions annually

Initiative: Improve facility effectiveness - Lead: Nick Bruno, Capital Projects Manager

Measure: Project upgrades Target: Project completions annually

Metrics – Action Plans Completed each year			Survey Question: My organization has a safe work environment.				
2025	2026	2027	Benchmark	2024	2025	2026	2027
2			83%	74%	81%		

Action Plan	Description	Status
Optimizing Office Space for Full Staffing Capacity	Develop an office plan to accommodate full staffing levels using existing building space, ensuring efficient use of resources without requiring new construction. The plan will identify potential locations for new employees while maintaining a functional and collaborative work environment.	In Progress: Checker Room conference room has been modified to fit cubicles that will house SSAs and new SSA Coordinator in the near future.
New Admin Entrance	The project involves redesigning the Admin Entrance at Lucas DD by removing the existing canopy over the walkway and replacing it with a new entry structure. The goal is to identify a suitable design that meets the approval of leadership and oversee its construction, ensuring functionality, accessibility, and aesthetic appeal.	In Progress: Canopy design and review meeting took place on 1/22/26.
Admin Outer Entry Improvements	Upgrade the main entrance to enhance accessibility and aesthetics, providing a welcoming first impression for visitors and staff.	Not Started
LLC Outer Entry Improvements	Enhance the outer entryway at LLC to ensure safety, accessibility, and improved visual appeal for clients and employees alike.	Not Started
Mini-Split (HVAC) - Legal	Install a mini-split HVAC system in the Legal department to improve climate control and ensure a comfortable working environment.	Completed As of completion of installation in January, Legal Department now climate controlled and vastly improved comfort across the department.
Carpeting - Community Inclusion Offices	Replace the carpeting in the Community Inclusion offices to improve aesthetics and create a more inviting atmosphere for staff and clients.	Completed
Dehumidifier - Children's/CI	Install dehumidifiers in the Children's and Community Inclusion areas to improve air quality and comfort for all occupants.	Completed – Issue was resolved without needing a de-humidifier
Utility Sink - Children's	Install a utility sink in the Children's area to enhance functionality and support various activities and maintenance needs.	Completed
Parking Lot Resurface - LLC	Resurface the parking lot at the LLC to improve safety and accessibility for staff and visitors.	Not Started – Starting in 2026
Changing Table - Admin	Install a changing table in the Admin area to accommodate the needs of families visiting the facility.	Not Started
Changing Table - LLC	Install a changing table at the LLC to enhance family-friendly facilities for clients and visitors.	Completed Construction completed in December and new restroom and changing table are ready for use!
Windows Doors Ceiling Replacement- Admin	Replace outdated windows, doors, and ceilings in the Admin building to improve energy efficiency and create a modern work environment.	In Progress: Doors are almost completed; window and ceiling work continues.

Windows Doors Ceiling Replacement- LLC	Upgrade windows, doors, and ceilings at the LLC to enhance aesthetics and energy efficiency.	Not Started
Admin Parking Lot - Reseal/Stripe	Reseal and restripe the Admin parking lot to ensure clear markings and improved safety for vehicles and pedestrians.	Completed! On Oct. 3-4, 2025, this was done for the entire Admin parking lot and the entrance in front of Children's (Door L).
Admin-Update Equipment-Toilets and Vanities	Upgrade toilets and vanities in the Admin building to enhance functionality and ensure a pleasant experience for all users.	Not Started
LLC-Update Equipment-Toilets and Vanities	Update the toilets and vanities in the LLC to improve functionality and accessibility for staff and visitors.	Not Started
LL-Flat Roof Replacement NE/Section	Replace the flat roof on the northeast section of the LLC to ensure structural integrity and prevent water damage.	Not Started – will be started in 2026
White noise machine (Provider Support)	Install a white noise machine in the Provider Support area to enhance privacy and reduce distractions in the workspace.	Not Started
Storage Shed for EI playground -	<ul style="list-style-type: none"> - Playhouse(s): We're looking at a budget around \$2,000. This may change slightly based on final selection. - Storage Shed: We are more confident in budgeting \$2,000 here. - Year-End Timeline: EI would like to spend these funds this year. 	Completed!

Initiative: Improve technology - Lead: Andrew Bahnsen, IT and Records Coordinator

Measure: IT plan Target: Implement IT plan by 2025

Metrics – Action Plans Completed each year			CSAT – Internal IT Department (Very Satisfied or Satisfied)			
2025	2026	2027	2025	2026	2027	
1			80.1%			

Action Plan	Description	Status
Cost Savings	Considering canceling Zoom and Smartsheet services after Microsoft 365 Implementation. This could remove over \$17,000 in costs that are being paid at this time.	<p>1yr Completed: Zoom licenses will be ending October 2025 saving an additional \$3,700 in expenses for 2025</p> <p>2nd Year In progress:</p> <ul style="list-style-type: none"> Implementation of the new IT Managed Service Provider is expected to save an estimated \$140,000 per year from the previous provider. Cancellation of the Smartsheet cloud service could save an estimated \$9,000 Move groups and file storage to lower-cost cloud storage environment
Digital Records	Review the system to manage records digitally, study workflows for better processes, and identify records that cannot be digitized. This will make record-keeping more efficient and accessible.	<p>Completed:</p> <p>MUI has started uploading MUI packets to Intellinetics. Intake documents are now being stored in Intellinetics.</p> <p>2nd Year In progress:</p> <p>Continue the upload of digital records to the Intellinetics environment</p> <p>Move digital records to new digital records service</p> <p>Onboard more departments to the digital records service</p>
Cybersecurity	Implement key cybersecurity measures, including multi-factor authentication, single sign-on, and password managers. Conduct regular security awareness training for staff, apply security patches, perform penetration testing, and utilize auditing tools to ensure data safety and system integrity.	<p>Completed: Multi-Factor authentication has been implemented for all Board staff providing an extra layer of sign-in protection. Single-sign on feature is now available for some of our cloud-based IT services.</p> <p>Quarterly email phishing campaigns are training staff to recognize email scams and annual cybersecurity training for awareness of threats and how to deal with those threats.</p> <p>2nd Year In progress:</p> <p>Development of the cybersecurity program, per ORC 9.64 of September 2025, will begin in February 2026 with development completed by June 2026 at the latest.</p>

		Research and implementation of DUO passwordless feature (fingerprint and face sign-in)
Technology Improvements	Implement Microsoft 365, upgrade outdated IT equipment, and complete the Smartphone Project to improve efficiency and connectivity. Explore artificial intelligence solutions and establish an effective asset tracking system to enhance operational performance and innovation.	<p>Completed: Microsoft 365 has been implemented for Board staff. First order of new computers has been distributed with another order of laptops being placed. Board supplied iPhones have been distributed to 94 staff. Internal IT ticketing system has been implemented. Upgrade sound and video in the Larc Lane Training Center.</p> <p>2nd Year In progress: Upgrade speed of the Board internet connection Continue the distribution of Board phones to staff that are approved to receive it Annual replacement of old computers Replacement of old computer monitors. The purchase of new computers for staff will be delayed until the move to our new managed service provider has been completed. Implementation of new workflow and electronic signature system Installation of mobile TV for meetings at the Larc Lane Training Center Purchase of a new service called Jotform which will allow the Board to develop electronic forms with digital workflows and electronic signatures. Development of the new service has begun and will be managed by the Project Management Office.</p>
Education	Develop tailored training programs, analyze external education providers for additional learning opportunities, and conduct a training needs survey to identify and address staff development requirements effectively.	<p>Completed: An external trainer trained staff on Microsoft Teams, Microsoft Outlook, Microsoft PowerBI, Microsoft Power Automate HIPAA Officers are conducting HIPAA audits providing recommendations to secure physical and digital PHI. Training on how to set up and use the new Board iPhones</p> <p>In Progress: Exit meeting from the operational assessment held on January 16, 2026 with recommendations to be reviewed and discussed for the development of IT training for Board staff.</p>

Initiative: Improve organizational culture - Lead: Michele Myerholtz, Superintendent

Measure: Employee engagement results Target: Increase employment

Metrics - Workplace Culture Health Index				
2024 Health Score	2025 Health Score	2026 Health Score	2027 Health Score	
46.95	56.68			

Action Plan	Description	Status
Suggestion Box	To improve our culture, we intend to build a system that promotes feedback and ideas.	Completed: Suggestion Box form is live on SharePoint as well as physical suggestion boxes in both buildings. A separate section has been created on SharePoint to provide responses from Leadership to those suggestions.
Define Org Culture	To define what we stand for.	Completed: Culture has been outlined and defined in a working document. Slowly being introduced to staff with plans to eventually make it part of orientation.
In house food pantry		In Progress: The Program was launched and utilized by staff.
Emergency Planning for team members		
Customer Service (Internal) - Communication	Improve IT Systems and address how they can be used to support LCDD and SSA Communication. - Development of improved processes and expectations for communication with supervisor / management. Morning Announcement/Video Stream with Updates. Measured by process and Announcement/Stream	In Progress: Continue to do cascading message
Customer Service (internal) - Interdepartmental Relationships	1. Development of organization charts with roles and pictures. Post in accessible place. 2. Increase information regarding roles and information sharing (Specialty SSA, Provider Support, HR, CI, etc.) 3. Development and planning of more all-staff events.	In Progress: We continue to meet monthly with all departments. Departmental information on Sharepoint has vastly improved. Fun all staff events continue to be planned by HR and Project Happiness. SSA Dept. Meets with a majority of departments monthly.
Customer Service (internal) - New staff training/orientation/re-vamp program	1. Hire training and development facilitator to revamp trainings 2. Develop structured system for shadowing SSA's and other department staff 3. Development of written and video user guides for SSA forms, processes and tasks	In Progress: Training Facilitator has started in a new role. Work on revamping orientation and training continues. New orientation has been implemented. There is a new structured system for shadowing. The development of Written user guides have been completed. This will be ongoing as new rules come out.
Customer Service (Internal) - Professional Etiquette	1. Address cubicle issues (zoom, phone ringers, loud talking, meetings in cubes, cubicle screens). 2. Address non-cubicle issues (lunchrooms, foyer, common areas) 3. "Kindness" training / customer service to co-workers (be nice, smile, say hello/good morning) 4. "Self-Focus" Training (work ethics, responsibility, conflict management, minimize gossip) 5. Training on microaggressions	In Progress: Reviewed cubicle awareness issues with SSA staff. More cubicles being added in purple and checker room.

Trauma Informed Care - Policies/Procedures	1. Policy of Death of Clients will be relooked at to reflect trauma informed practices.	In Progress
Trauma Informed Care - Staff	Develop a designated space for staff to assist with de-escalation, break, etc.	In Progress
Trauma Informed Care - Trainings	<p>1. Keeping families together Crisis Intervention Grant - Train the trainers on debriefing skills for SSA, Providers, etc.</p> <p>2. Training for management on how to be trauma informed leaders and SSA training on trauma informed approaches to share with Families and model.</p>	In Progress: Psych asst. attended the Training for the Keeping families together grant. She is currently working on developing a training from that for staff.

Initiative: Improve HR processes - Lead: Shelly Potridge, Director of Human Resources

Measure: Key HR metrics Target: Increase performance of HR metrics

Metrics - Employee Engagement Survey (Total Avg)				
Benchmark	2024	2025	2026	2027
71	60	65		

Action Plan	Description	Status & Metrics
Professional Development	Develop a comprehensive strategy for employee growth and leadership development, including succession planning, career ladders, CEU expansions, a new learning management system, and internal leadership training.	Completed: Implementation of new LMS is complete. Framework for succession planning has been developed. Development programs and CEU expansion are complete.
Performance Management	Equip leadership skills in creating standardized SMART goals and utilize 360 feedback to enhance leadership and supervisory effectiveness.	Completed: SMART goals and 360 went live in Q4 of 2025.
Staffing and Retention	Enhance recruitment, onboarding, and retention efforts by streamlining processes, fostering diversity through partnerships and events, upgrading tools, and implementing surveys and resources to improve employee satisfaction.	Completed: Onboarding survey is complete. Systems have been updated to streamline the applicant's experience. Posting to start time has improved. Orientation efficiency is complete.

Initiative: Process improvement system - Lead: Craig Meyer, Project Manager

Measure: Project completion rate Target: Determine services

Metrics - Action Plans Completed				
2025	2026	2027		
8				

Action Plan	Description	Status & Metrics
Streamlining the Individual Budget Process for Timely Approvals	Review the Individual Budget process for both children and adults to identify the root causes of delays. Develop and implement strategies to improve efficiency, reduce processing times, and ensure timely approvals, benefiting individuals and their families.	Completed 2025: Both the EI and SSA Individual Budget processes have been updated and completed, transforming what once took weeks or even months into a process now completed in days. The EI process has significantly reduced wait times for financial assistance, and the SSA process has also shown significant improvement in speed and efficiency.
Legal Contract Process	Work with MEORC to conduct review of our Legal Contract Process. The goal is to improve the way contracts are managed.	In Progress: Kaizen event resulted in improved contract workflow. System automation in testing face with group of internal users on Sharepoint.
Payroll Process	Work with MEORC to conduct a review of our payroll process. The goal is to improve the way payroll is conducted.	In Progress: Scope meeting conducted March 19 th , 2025. Improvement ongoing
Promote 365 tools to TEAM	Train the team on Microsoft 365 tools such as Power Automate, Power Apps and Teams. The goal will be to have the team identify processes that can be automated and improved.	In Progress: Software update completed by VC3. Training is ongoing for the entire board.
ISP Inspections reduced to 30%	see email RE: SSA Work Study MEORC Strategy Action Plan - Innovation - Process Improvement	In Progress: Due to the large nature of this action plan, we will break this action plan down into further steps. Currently working on implementation of the SSA Trainer program.
Determine Data Discrepancy	There is a huge difference between Brittco & DoDD. We need to determine why and how to fix it	In Progress: Data Team working with Service19 to define data sets.
Developing Brittco User Guides and Support Resources	Document step-by-step instructions and processes for using the Brittco software and database system. Create comprehensive training materials and resources to support users, with the goal of establishing a dedicated point of contact for all Brittco-related inquiries and assistance.	In Progress: Currently working on this with the Data Team.
SharePoint Update	Update SharePoint so that it is more user friendly for the team. This will be in prep for 365. Create a method of organizing documents for the team. Currently, out of date W-9s are in use. How do we prevent that?	In Progress: A survey is in place to get feedback from the team about the current SharePoint system. Various departments have already begun updating their SharePoint pages.

Action Plan - SSA	Description	Status & Metrics
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Streamline Processes - Brittco - Forms/ Referrals/ Ohio ISP	<ol style="list-style-type: none"> 1. All SSA's to be transitioned to the final OISP module. 2. Work with SSA's, SSA Tech, and Data Analyst to ensure that client demographics are updated and correct and kept updated and correct. 3. Ensure all needed forms are built in Brittco, prefill where possible. 4. Ongoing follow up with Brittco for system development of ISP training guides and example of OISP's. 5. Implementation of new OISP process and consistent review of process. 	In Progress: Everything is in the final OISP module. We continue to work on cleaning up demographics in Brittco. New OISP process has been implemented and will now reviewed at least twice annually.
Streamline Processes - Case Conference	<ol style="list-style-type: none"> 1. Evaluate needs of internal support for teaming on challenging cases. 2. Re-evaluate the purpose of case conference. 3. Develop updated procedures and processes for presenting cases. 4. SSA and Management training. 	In Progress: This is ongoing.
Streamline Processes - Safety	<ol style="list-style-type: none"> 1. Explore technology options for community safety guidelines - GPS tracker, Emergency response system. 2. Set procedure for SSA community safety guidelines. 3. Training on personal safety (use of SSC, self-defense blocking techniques, CPI Training, etc.) 	In Progress: 2 and 3 are completed. TPD completed safety training for SSA's and secretaries that work at the front desk. Community safety guidelines were updated and reviewed with staff.
Streamline Processes - SSA Job Expectations, SSA Training, on-boarding/"Live Binder" for processes, quick reference guides, SSA resignation, mileage	<ol style="list-style-type: none"> 1. Hiring and Development and Training Manger to assess/address needs of department for training (new and existing staff) 2. Ongoing review and update of current procedures and processes according to review schedule. 3. Development of organizational system to connect applicable forms, processes, and training guides in one place. 4. Update forms, provide example forms, development of training videos and quick guides. 5. Review new SharePoint - organize items according to updated systems and categorization above. 	In Progress: Work is ongoing for this initiative. Streamline Processes – SSA job expectations – Training Facilitator was hired and working on the rest of the goal. Updated procedures and processes in No. 2; No. 3 is now done, all forms SSAs need are now in Brittco. Training guides are on Sharepoint; No. 4 Quick guides have been made for new rules and started working on videos to complement those guides. No. 5, progress continues on one-stop shop Sharepoint page.
Review Intake Process Forms	Review with Intake Team the forms used in the Intake Process. The goal is to improve the intake forms.	In Progress: Database is being built in SharePoint. We are currently testing the Microsoft Power Platform.

Action Plan – Finance	Description	Status & Metrics
Cross-training of Finance Department staff so there is a constant flow of work regardless of staff time off.	Cross-training of Finance Department staff so there is a constant flow of work regardless of staff time off.	
Generate new data collection reports	Generate new reports to help with data collection and accuracy of our data, such as number of people served, etc.	
Goal #1 - Support the Agency and its Departments	Support the Agency and its Departments	
Goal #2 - Increase Efficiency Within the Department of Business Operations	Increase Efficiency Within the Department of Business Operations	

Action Plan - CI	Description	Status & Metrics
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Create a script of areas of the Community Inclusion department	Create a script to handout with information of who contact in CI as well as what each area does so that the staff can take with them to meetings and use as a resource. We can also use this information during the SSA orientation.	Completed 2025: Script made, and SharePoint landing page was created to complement that.
Enhancing CI SharePoint for Cross-Training	Update the CI SharePoint pages with comprehensive instructional materials and detailed information on various programs and their operations. This initiative aims to facilitate cross-training within the department, ensuring staff are well-equipped to support multiple programs effectively.	Completed 2025: Flyers were made, and SharePoint was updated
Increase CI staff's understanding of the department's various programs through cross-training staff in each area of the department in order to break down silos.	4a Crosstrain all areas of Community Inclusion: SALUTE, FANS, Special Olympics, Travel Training, & Employment	Completed 2025: August 2024 was when CI leadership began discussing how to cross train Community Connections Trainers. Meet to go over each area's procedures, as well as a problem map of how to cross train our staff. We pulled in our professional staff, the specs, to go over a problem map to discuss how to continue quality of programs while staff begin to retire. We also completed this with the CCTs during a department meeting.
Special Olympics Data Processing	The goal of this action plan is to automate the Special Olympics registration process, reducing manual effort and errors while improving overall efficiency. End Goal: Automate the registration process to save time and reduce errors.	In progress: Currently building a database on SharePoint. Moved all information out of the old system, stored on SharePoint and are currently updating information onto SharePoint. Working on a system to compare registrants' physicals and ensure updated physicals.
TARTA Ticket Ordering and Delivery Process Improvement	Develop a more efficient and reliable system for ordering and delivering TARTA bus passes and tickets. The goal is to reduce delays, streamline internal procedures, and ensure timely access for individuals who rely on public transportation to participate in programs, employment, and community activities.	In progress: Current ticket ordering and delivery process under review to identify gaps and potential improvements.

Action Plan - EI	Description	Status & Metrics
EI Loan Closet Inventory	Online system for all of our loan items and equipment. Process in place for maintenance of system and of items/equipment	Completed 2025
Tech Solutions for Families	Making sure we are utilizing our tech tools with families and loaning out as needed.	In Progress: continue and add that we are looking into using devices for Therapeutic Listening for kids, devices for families to complete child assessment checklists for an Eval/Assessment.
Playground	Finish the full creation – install shed, identify items still needed and obtain	Completed 2025: The shed is installed, and the playground items have been relocated into the shed.
Better tracking	3-6 system, PLAY project, Brittco, Eval/Assessment needs, funding	In Progress: continue - getting used to MS forms and associated spreadsheets
Social media improvements	SharePoint and Website section for Children's	In Progress: continue - Started already on Sharepoint pages as well as specific forms/processed.
Quality Assurance - Role expectations	Clarify expectations per role – for onboarding and for consistent Supervision	Completed 2025: Updated onboarding process for new staff; Also updated mentor process to match consistent supervision.
Increase Therapists on staff	Continue providing Evidence-based EI – increase therapists on staff and implement a community contract: Hire PT and SLP and implement community contract for SLP	Completed: Fully staffed on therapist.

FSS Process Improvement Review	Conduct a Lean Six Sigma review of the Family Support Services (FSS) process to identify inefficiencies, reduce waste, and implement improvements that enhance system performance and service delivery.	In Progress: continue; Kaizen done, In progress for policy and procedure changes as well as overall change proposal
Expand Family Participation Locations	Community Playgroups; Community events; Young Athlete sessions	Completed 2025: We have restarted at Sylvania Rec and formed new playgroup sessions at Birmingham Library in East Toledo
Professional Development focus	NEW. Provide Trainings and resources for staff in 6 identified topic areas. Will use a variety of methods.	

Initiative: Improve communication - Nabil Shaheen, Community Outreach and Communications Manager

Measure: Employee engagement survey trust and communication questions Target: Increase score performance

Metrics – Avg of “Senior management and employees trust each other” and “Communication between senior leaders and employees is good in my organization”				
Benchmark	2024	2025	2026	2027
62%	25%	33%		

Action Plan	Description	Status & Metrics
Better Education for Lucas Co. Residents	Developing material and seeking opportunities where we can increase brand awareness in the community. Utilizing tech and ai for improving communication.	In Progress: We’ve added a chatbot and a new accessibility widget on our website. Very impactful presentation at Rotary Club of Toledo in March. Appearances by different staff on different podcasts this year. Continue to push media relations for increased footprint with different audiences with 29 different feature stories on local TV and local newspaper.
Explore new social media platforms for the Board.	Exploring what other social media platforms make sense for us to join based on feedback from individuals served and community members.	In Progress: Our new TikTok channel has grown to 234 followers, 330 likes and 21,012 views of our videos.
Reaching One Lucas DD	Breaking down internal/ external silos and filling any communication gaps, which prevent us from optimal execution of our mission.	In Progress: “The Almost Monthly” Podcast has 6 episodes, featuring conversations with one staff member per episode so that we can get to know each other beyond our job titles. Comms Specialist involved earlier in conversations for bigger events like Inclusion Fair, Snowy Social, etc. Uniform email signature created and shared with all staff including directions on how to upload it to Outlook.
Create Communication Plan	Develop a system to ensure communication throughout the entire organization is accurate and relevant.	In Progress: Almost Weekly email being delivered, Sharepoint site regularly updated with news, events, and photos. Purchased software that provides regular messaging updates on the TV in the Admin, Children’s, and LLC lobbies. Cascading message being created and shared monthly by Leadership to respective departments.
Customer Service (External) - Community Agencies	<ol style="list-style-type: none"> 1. Consistent presentations for community agencies, schools, etc. to educate on DD services. 2. Provide information for agencies to provide to families about DD services. 3. Continue to develop monthly check in meetings with agencies that work directly with individuals (LCCS, Ohio Rise, Mental Health, etc.) 	In Progress: Kristin Aemisegger presented on SSA services and eligibility on July 28 during AOoA Kinship symposium. Debi Tyree presented to Harbor caseworkers in regard to intake/ eligibility / funding. Created and printed a new brochure that agencies can give to families. Check ins happen with the 4 major mental health agencies and Lucas County Children services. Ongoing to set up with other community agencies. SSA Kaylee Hall spoke at a local elementary school, and Kristin also spoke to a BGSU class in both fall and spring semesters.
Customer Service (External) - Persons Served / Guardians / Families	<ol style="list-style-type: none"> 1. Explore different ways to disseminate important information (videos, pamphlets, etc.) 2. In person training series for individuals' guardians and families 3. Continue supporting and developing more events (Transition fair, Inclusion fair, ice cream social, support groups, etc.) 	In Progress: Continuing creation of brochure of services. Work continues to create cheat sheets for transitions. Will be adding customer experience survey to each employee’s email signature.

	<ul style="list-style-type: none"> 4. Develop a "cheat sheet" for important things and transitions in someone's life. 5. Consistent check in's, monitoring and updating of information (SSA change, surveys, vacations, FMLA leaves, etc.) 	
Customer Service (External) - Providers	<ul style="list-style-type: none"> 1. Dual training with providers and SSA department on important topics that affect the individual and services. 2. OISP language to be clear and understandable for all. 3. Understanding each other's roles (DSP, SSA, etc.) 4. Q&A sessions 5. Partner with provider liaisons for meetings, etc. 	<p>In Progress: Still working on the idea of dual training with providers and SSA's. Provider liaisons have been attending more meetings and more involved with case specific things to keep a positive relationship with providers.</p>

Initiative: Innovative projects - Lead: Craig Meyer, Project Manager

Measure: # of new projects Target: Determine baseline projects annually

Metrics - Action Plans Completed				
2025	2026	2027		
3				

Action Plan	Description	Status & Metrics
Board Policy 2-4.3 on the use of AI	Writing new policy on AI & LLM use	Completed: The new policy on AI and LLM use has established clear guidelines for responsible implementation, ensuring data security, compliance, and efficiency while maximizing the benefits of emerging technology for Lucas DD.
Developing a 24/7 Chatbot for Enhanced Website Support	Design and implement a chatbot for the Lucas DD website to provide 24/7 assistance by answering questions about the Board and its services. This initiative aims to improve accessibility, streamline information delivery, and enhance user experience for individuals seeking information at any time.	Completed: Alex the Advocate is now live at LucasDD.org and has improved accessibility, streamlined information delivery, and enhanced the user experience for all visitors of our website.
Seating Chart Application	Create a way to show, update and share a seating chart for the SSA department. The goal is to replace software currently in use.	Completed: The new system for displaying, updating, and sharing the SSA department seating chart has successfully replaced the previously used software, resulting in cost savings. This improvement has streamlined updates, enhanced accessibility, and ensured more efficient space management.
Multi-System Youth and Adults - Build Connections with community agencies (hospitals, Ohio Rise, Children Mental health, schools, courts, etc.)	<ol style="list-style-type: none"> 1. Find SSA department liaisons to connect with community entities. 2. Determine outside partners and set up meetings to learn about that agency and provide education on LCDD. 3. Develop informational page and keep updated. 4. Offer for partners to do a lunch n learn to introduce self and agency to SSA department. 	In Progress: We continue to build community connections with community agencies. There are SSA department liaisons for the 4 major mental health agencies. Most recently, we presented to Harbor caseworkers in regard to intake/ eligibility / funding.
Multi-System Youth and Adults - Law Enforcement	<ol style="list-style-type: none"> 1. Explore the Noris system: training, screenshots/videos. 2. Offer education about DD services, TIC. 3. Develop "Cops and Coffee" with LCDD staff. 4. Collaborate with providers to develop training for law enforcement. 5. Explore having an SSA at CIT training. 	In Progress:
Multi-System Youth and Adults - Youth respite home	<ol style="list-style-type: none"> 1. Complete RFP and choose provider to staff and run Vosper home for children's respite home. 2. Explore housing and develop RFP for multi -system adult home. 	In Progress: RFP was completed and awarded to ViaQuest as the provider. Home construction has been completed, and it is fully furnished. Last quarter two youth moved in, in December and one youth began using the home and planned respite once a month. Consistently have children in MSY home to meet needs and move back into family home.
Exploring Audio Recording Solutions for Improved Efficiency	Evaluate the feasibility of implementing audio recording tools for meetings, case notes, and investigations to enhance efficiency and accuracy across departments, including MUI and SSA. This initiative	In Progress: Microsoft Dictation & Transcription tools are currently being reviewed by Legal and the Privacy Team for approval. We also continue to explore other tools.

	aims to streamline documentation processes, reduce errors, and support more effective communication and record-keeping.	
Build Data Team	The goal of building a Data Team at Lucas DD is to bring together Data Analysts and Business Analysts for regular training and collaboration. Through ongoing meetings, team members will share best practices, discuss data challenges, and improve the use of various data applications and resources. This initiative aims to enhance data accuracy, consistency, and efficiency across departments while fostering a more cohesive approach to data management.	In progress: Complete training classes on Microsoft Power BI for the team. With this training, the Data Team will improve the flow of data to leadership.
Strategic Plan Process Creation	The Strategic Plan Process Creation aims to implement the new Strategic Plan process across leadership and the entire organization. This initiative will establish structured methods for tracking tasks, goals, and action plans while ensuring clear communication of progress. All efforts will align with Ohio Rule 5123-4-01 (C) , ensuring compliance and transparency in strategic decision-making and execution.	In Progress: Partnered with leadership to better define and chose metrics that reflect progress made in the Strategic 3 Year plan.
Technology First Program Improvement Project	The Technology First Program Improvement Project aims to strengthen the Lucas County Board of Developmental Disabilities' commitment to Technology First by improving internal processes, expanding available offerings, and building partnerships with other organizations. Through this effort, we hope to increase access to meaningful technology solutions and create a more connected, resource-rich environment for the individuals and families we serve.	In Progress: The Technology First Program Improvement Project is actively moving forward. Lucas DD has partnered with Sunshine Community to develop a Technology Demonstration Home. This project was also awarded funding and officially kicked off this quarter, marking another major milestone in our innovation efforts. Begin work on a Tech First page on the Lucas DD website as well as other opportunities to broaden reach and conversation on adaptive tech for our individuals.

Initiative: Increase customer engagement - Lead: Organizational Culture & Inclusion Manager

Measure: Customer satisfaction Target: Increase customer satisfaction

Kevin Hofmann, Organizational Culture and Inclusion Manager, recently brought onboard. We are looking to review and update these projects by Q3

Metrics - Action Plans Completed				
2025	2026	2027		
1				

Action Plan	Description	Status & Metrics
Collaborate with provider agencies on DEI initiatives that promote an inclusive work environment and improve communication between Lucas DD and providers.	During the first year, create 4 opportunities to collaborate with provider agency administrators within the DD system. Collaboration will include: <ul style="list-style-type: none"> • Education and Development (Training) • Conflict Resolution • Mutual Support (Shared Learning, DEI Consultation, Active Allyship) • Feedback Loop 	In Progress: Organizational Culture & Inclusion Manager started on June 28!
Attract and retain a diverse talent pool to create an inclusive workplace.	<ul style="list-style-type: none"> • Create and review semi-annual DEI Data Reports to monitor the success of recruitment and retention initiatives • Increase the number of employees who identify as a minority from 22% June 30, 2024, to 25% by December 31, 2025 	In Progress:
Utilize strategies to build a DEI culture that extends across the organization, including individuals served, providers, and community stakeholders.	<ul style="list-style-type: none"> • During the first year, attend 4 community events organized by Lucas DD to provide individuals, families, and providers the opportunity to learn about Lucas DD's DEI initiatives • Enhance DEI SharePoint site and collaborate with communication department on a social media campaign • During the first year, include a minimum of 1 DEI related question on internal and external surveys • During the first year, offer 6 platforms for open, safe, respectful DEI dialogue • Offer 1 training session, workshop, on online training 	In Progress: Organizational Culture & Inclusion Manager started on June 28!
Robust Unified Sports Program	Grow participation in unified sports by 10% annually.	In Progress: Partnership with Lourdes has been a success so far.
Grow Little Lighting Teams	Meet with schools quarterly to go over options through 2027. CI Coordinator Sherrie Hathaway to meet with 5 schools per quarter through the 3-year strategic plan	In Progress: Team has already met with 7 schools in the first quarter of 2025.
Continue FIT games with current provider and add 2 more providers 2027	increase FIT games (for individuals who cannot participate in skilled Special Olympics programs) to 2 more providers	In Progress: Already underway with FIT games at Anne Grady Services, 2 more locations to be determined.
Engaging SALUTE Members in Community Resource Events	Involve SALUTE members in opportunities to assist at resource events for education of programs and services	In Progress: SALUTE members are well represented at an increased number of events where they are talking about Lucas DD programs and services.
Assist schools with IEP goals of advocacy	Currently we work with 3 high schools and would like to add 3 more High schools through. One in 2025, one in 2026, one in 2027	In Progress: The team has met with representatives from Anthony Wayne High School.
Continue with Community Safety Programs	– bike safety, stranger awareness, travel training, and pedestrian safety. Increase participation in safety programs by 10% each year until 2027, recreate	In Progress: Completed consumer scams education at Triad in February 2025. Travel training is currently being conducted with 3

	safety programs back into providers – 20 Day Habs by 2027 having safety programs discussed. Recreate loose the training wheels program by Summer of 2025(maybe 2026)	area high schools, Northview, Southview, and Whitmer, which includes mock trips to the Franklin Park Mall on an actual TARTA bus. Safety Town with TF&RD at Lucas DD exceeded all expectations.
Maumee Valley Country Day School	We are meeting with Maumee Valley Country Day School as a panel with 2 individuals about their disability, advocacy, and inclusion. The date is 2/11/25.	Completed: 3 members of SALUTE participated in a panel discussion on Feb. 11, 2025 led by upperclassmen at Maumee Valley Country Day School. Individuals served by the Board discussed the importance of advocacy and inclusion through their own personal stories.
Community Inclusion Events and Leadership Programs	Plan and host new community engagement opportunities through the Community Inclusion Department, including a Fishing Derby, Molly's Day of Friends at the Splash Pad, the Rolling at the Ribbon Inclusive event, and a Trivia Game Night. In addition, launch leadership development opportunities such as a Leadership Academy and Project STIR to strengthen advocacy, self-determination, and community presence for individuals served.	In progress: Event concepts identified; scheduling and planning underway.

Initiative: Listening to customers - Lead: Julie Esparza, Director of Children's Department

Measure: Customer satisfaction Target: Increase customer satisfaction

Metrics – Action Plans Completed each year			CSAT –			
2025	2026	2027	2025	2026	2027	
1						

Action Plan	Description	Status & Metrics
Feedback Program Set up - Complete	We are implementing a program to collect feedback both internally and externally. To achieve this, we will set up physical and electronic suggestion boxes. Additionally, multiple surveys will be distributed to gather customer satisfaction scores across all areas of the organization.	Completed: Survey Monkey has been set up as our HIPAA compliant survey tool. 3 Surveys have been completed. 2 Surveys are currently being used for client feedback. 2 Surveys are being built for future release.
Parent Cafe	In partnership with The Ohio Children's Trust Fund, we will help facilitate a Parent Café. A Parent Café is a welcoming space where parents from all walks of life can come together to share their stories, experiences, worries, fears, and wisdom, while building community and strength.	In Progress: this will be continue with a tweak - instead of the formal one with Children's Trust fund, I will be teaming with Lori B and CI Dept to host some more diverse parent cafes that incorporate parent networking/learning as well as play for the children. This is when we can elicit feedback and suggestions from parents/caregivers. Nov. 17 "Lucas DD Cafe Connect" at Lattes and Littles a success with nearly 15 people in attendance.
Create Listening Program for Parents of Children Ages 3 -6	Support families of children served age 3-6 for needs in development, medical issues and family/community needs: Establish procedures and protocols for all tiers of support and implement	In Progress: We are supporting about 50 and have developed processes/procedures. We continue to ask those families what they are hoping for so we can determine any trends/patterns and/or gaps.
Create Listening Program for Young Athletes interested in Special Olympics	Young Athletes – promote with the support of Special Olympics as they provide curriculum for us to facilitate group activities: Variety of locations and groups for families to attend	In Progress: We continually ask those families who participate and they love it - we keep looking for new locations if needed and continue with current ones as long as we have families participating!
Provider Support Survey	To gather feedback from providers on the quality and effectiveness of support services offered by our organization. This helps identify areas for improvement, enhance collaboration, and ensure we are meeting the needs of providers to ultimately benefit individuals with developmental disabilities.	In progress: Survey is in draft form with members of PS Leadership.
SSA Survey	To evaluate the performance and effectiveness of our Service and Support Administrators (SSAs) in meeting the needs of individuals and families. This feedback	In Progress: Revamped SSA survey has been built. Needs further editing before being sent.

	allows us to identify strengths, address challenges, and improve overall service delivery.	
Community Inclusion Operational Surveys	To assess the performance and effectiveness of our Community Inclusion team in supporting individuals to engage meaningfully in their communities. This feedback helps us identify strengths, address challenges, and enhance the quality of our programs. Some surveys will specifically focus on areas such as Special Olympics and travel training to ensure these initiatives are meeting the needs and goals of the individuals we serve.	In progress: 3 Surveys have been built. 1 Survey is already being utilized in the field.
Community Inclusion Program Surveys	Develop and implement targeted surveys within the Community Inclusion Department to measure program effectiveness and gather participant feedback. This includes creating a PRE-ETS survey in 2026 to evaluate transition services, developing an end-of-year SALUTE survey by December 2025 to assess program impact, and introducing written surveys after Safety Classes in 2026 to capture participant experiences and outcomes.	In progress: Survey development timelines identified; survey tools not yet created.

Initiative: Provider support - Lead: Sarah Diesch, Director of Provider Support

Measure: Customer satisfaction Target: Increase customer satisfaction

Metrics – Action Plans Completed each year			CSAT (Provider Support Survey – 5 pt scale)			
2025	2026	2027	2025	2026	2027	
2			3.7			

Action Plan	Description	Status
Department Operational Assessment	The Provider Support department is currently working with MEORC on departmental operational assessment. The department will implement the assessment's recommended actions over the next year to address identified opportunities and better align with organizational goals. Progress will be monitored to ensure these changes lead to measurable results.	In progress
Explore & Expand Service	Hold discussions with providers and internal staff that have an interest in serving youth. Continue Providers serving youth collaborative. Determine barriers and find solutions to those barriers Work together to define best practices for service delivery Develop action plans	In progress: The measurable metric for this goal will be to increase the number of providers serving youth by 3 providers. Two youth community of practice meetings have been held. 1 afterschool program meeting was also held. This meeting resulted in an option for parents to have access to additional programs for after school care. These are from a Medicaid provider, not a DD certified one.
Provider Support Survey	<ul style="list-style-type: none"> Implement annual PS survey 	<p>Completed 1st Year: The survey was completed in June 2025. While there was not an overwhelming response to the survey, responses did include topics providers would like to have. This will be included in our department's planning. Goal for 2025: Receive satisfaction level of 3 and survey results showed a satisfaction rating of 3.5!</p> <p>Year 2 in progress: Survey will be sent in April 2026.</p>
Provider Support Professional Development	<ul style="list-style-type: none"> Identify committee members Determine topics of need/interest Identify trainers Meet monthly to determine next month's training 	Completed 1st Year: Started in January with monthly training of 1-2 hours dedicated to professional development for various topics. All meetings are already scheduled for the entire department every other month.
Communication with internal and external customers	<ul style="list-style-type: none"> Determine methods to communicate with internal and external customers. 	Completed 1 Year: There have been 4 podcasts completed for Larc Lane conversations. Each included a Lucas DD staff member, provider, and an individual that is served by the the Board.
Enhance staff knowledge - Provider Support	<p>Hands on practical learning</p> <p>Review and discuss active rules</p> <p>Consult/Case discussion</p>	<p>Metric: Provide 2 opportunities per month of targeted learning</p> <p>In progress: Each month a topic has been discussed at each unit meeting. Professional development occurred in August on delegated nursing, waiver delegation, and state plan.</p>
Enhance staff knowledge - MUI	Consult/Case discussion	Metric: Provide 1 opportunity per month of targeted learning

	Attend DoDD informational webinars	In progress: Each month a topic has been discussed at each unit meeting. Professional development occurred in August on delegated nursing, waiver delegation, and state plan.
Increase staff efficiencies – MUI	<p>Review all templates to include updated rule language.</p> <p>Review current processes to ensure they support new rule.</p> <p>Explore technology to include time savings.</p>	<p>Metric: To Develop and utilize tracking system to provide data results.</p> <p>In progress: All templates were revised to include new rule language. The team has started utilizing dictation for investigative reports, and uploading MUI files into Intellivue. Team is also exploring recording their interviews.</p>
Increase staff efficiencies – Provider Support	<p>Review the operational assessment report.</p> <p>Determine which recommendations to implement.</p> <p>Develop action steps for the recommendations.</p> <p>Implement</p>	<p>The metric of this goal will be development and utilization of a tracking system to provide data results.</p> <p>In progress: Operational assessment completed; waiting for the report from the assessor.</p>

Initiative: Community employment - Lead: Lori Balogh, Community Inclusion and Employment Manager

Measure: Individuals employed in the community Target: Increase # of individuals in competitive employment

Metrics – Action Plans Completed each year			# of Individuals served by Employment Navigator - 2025			
2025	2026	2027	1 st QTR	2 nd QTR	3 Rd QTR	4 th QTR
2			453			
			New Referrals by QTR			
			68			

Action Plan	Description	Status & Metrics
Building Team for Successful Employment Planning	Confirm the successful transfer of the employment navigators to the SSA department.	Completed: ENs now under SSA and reporting to a new SSA Coordinator.
Group Goal: 4a - Cross Train all areas of the Community Inclusion department	Cross train all CCT staff on all areas of Community Inclusion - this includes SALUTE, FANS, Special Olympics, and Employment	Completed: All CCT staff are now knowledgeable and cross-trained to be able to assist in any area of Community Inclusion.
Develop Client Employment Tracking System	The goal is to record numbers for reporting purposes.	Completed: The new SSA coordinator overlooking ENs has developed systems in Brittco to track the employment paths, number of individuals hired, EN caseloads, and OOD cases.
Employment Data Analysis and Reporting	Establish a baseline of employment numbers for individuals served and implement a process for ongoing quarterly analysis. Ensure the data is consistently tracked, reviewed, and reported to leadership to monitor trends and support strategic decision-making around community employment initiatives.	In Progress: Baseline employment numbers are being collected, but the process for quarterly reporting is not yet finalized.

Initiative: Brand expansion - Lead: Nabil Shaheen, Community Outreach and Communications Manager

Measure: Updated branding Target: Complete brand updates by end of 2025

Metrics – Action Plans Completed each year						
2025	2026	2027				
0						

Action Plan	Description	Status & Metrics
Create Weekly Publication Program	Create weekly publication program for internal and external communication	In Progress: "The Almost Weekly" internal email and "Friday Update" external email has been consistently delivered. Still need to work on comms for niche audiences: i.e. Providers, families, etc.
Redesigned Email Newsletters and Deployment Schedule	Redesign look and lock in consistent delivery schedule of email newsletters to providers, community, etc.	In Progress: Friday Update redesign is complete. Need to refresh look and delivery of provider newsletter.
Redesigning Board Brochures	Assess the current stock of brochures by department and build a generic overall brochure for the Board as a whole.	In Progress: 9 brochures have been identified as needing to be created and/or redone. 1 has already been printed, 2 are awaiting final approval, and 6 are in progress.

Initiative: Explore alternate funding streams - Lead: Stephen Tucker, Director of Finance

Measure: New funding streams Target: Increase in potential revenue

Metrics – Action Plans Completed each year			New Funding Streams			
2025	2026	2027	2025	2026	2027	
0	1		0	1		

Action Plan	Description	Status & Metrics
Grant Research	Research how to obtain more grant money for programs.	In Progress: Currently looking into grant money from Ohio DD Council to fund innovation projects.
Review current process for Max ROI	Review all programs and processes to ensure they are running smoothly and fiscally sound	In Progress: Work with County & Oracle.
Executive Committee Discretionary Fund – Website Funding	The goal of this project is to secure funding from the Ohio Developmental Disabilities Council (ODDC) to support website updates that promote innovation in technology for individuals with developmental disabilities. These updates will enhance access to information, highlight success stories, and provide tools and resources that encourage the use of technology to improve independence, inclusion, and quality of life.	In Progress: We were awarded a \$5,000 grant from the Ohio Developmental Disabilities Council (ODDC) to support improvements to a website that promotes technology for individuals with developmental disabilities. The funding will be used to enhance content, accessibility, and visibility of innovative tech solutions. We aim to collaborate with other agencies on this effort, creating synergy around our shared goal of increasing access to technology that supports independence and quality of life.
Implement the Internet Assistance Program.	The Lucas County Board of Developmental Disabilities has partnered with the Ohio Department of Developmental Disabilities (DODD) to implement the Internet Assistance Program (IAP). This program is designed to help individuals with developmental disabilities cover the cost of internet service when it is needed to access remote services or use technology that supports their independence and well-being.	In Progress: The Internet Assistance Program (IAP) project is underway following a successful kickoff. We are currently in the planning phase, working on the details of implementation. Several departments, including Finance and SSA, are actively involved. This project will also directly support our broader Technology First efforts by helping individuals access the internet for remote services and technology use.

Initiative: Waiver and waitlist - Kristin Aemisegger, Director of Service and Support Administration

Measure: # of waivers annually Target: Determine annual amounts needed

Metrics – Action Plans Completed each year			Average # of Waivers by Year			
2025	2026	2027	2024	2025	2026	2027
2			1869	1880		

Action Plan	Description	Status & Metrics
Policy WLA		Completed! This was updated and staff were trained in October 2024 to align with the new WLA rule.
Waitlist Assessment Action Plan	Implement new waitlist rule and train staff.	Completed! The new rule training was completed in October 2024. New rule timelines have also been implemented. Staff have embraced new rule and abiding by the timelines. <ul style="list-style-type: none">• Waitlist assessments completed: 92• Met 15-day timeline to complete WLA: 63• Family re-scheduled putting outside 15-day timeline: 14• Met 45-day timeline for submission: 92
Policy 1-5.1 & 4-10 WAITING LIST FOR SERVICES	Policies 1-5.1 and 4-10, regarding the Waiting List for Services, will be reviewed and updated to align with the goals outlined in the strategic plan and to ensure compliance with Rule 5123-4-01.	Completed!

Rule 5123-4-01 - Ohio Administrative Code | Ohio Laws

(C) Strategic plan

(1) A county board will develop and adopt by resolution a strategic plan that meets the requirements of sections [5126.04](#) and [5126.054](#) of the Revised Code, includes the county board's mission and vision, and addresses the county board's strategy for:

- (a) Promoting advocacy for and by individuals served by the county board through the person-centered planning process, activities, and community connections;*
- (b) Ensuring that individuals receive services in the most integrated setting appropriate to their needs;*
- (c) Reducing the number of individuals in the county waiting for services;*
- (d) Planning and setting priorities based on available resources to meet the needs of children and adults residing in the county who are individuals with developmental disabilities;*
- (e) Increasing the number of individuals of working age engaged in competitive integrated employment;*
- (f) Taking measures to recruit sufficient providers of services to meet the needs of individuals receiving services in the county; and*
- (g) Identifying and addressing gaps noted in services.*

(2) The strategic plan will be made readily available to individuals and families who receive services, employees of the county board, citizens of the county, and any other interested persons.

(3) A county board will prepare a strategic plan progress report at least once per year. The strategic plan progress report will be made readily available to individuals and families who receive services, employees of the county board, citizens of the county, and any other interested persons.

(4) A county board will have a mechanism for accepting public feedback regarding the strategic plan and strategic plan progress reports.