

# Western Michigan University

## CENTER FOR DISABILITY SERVICES

### STRATEGIC PLANNING

Calendar Year 2017 - 2019



WESTERN MICHIGAN UNIVERSITY

College of Health and Human Services

### MISSION

Our mission is to **help people** who because of age, illness or disability need assistance to **live life fully**.

Through our community living, care coordination, skill building and aging services, our goal is to support a person's intellectual and physical functioning and independence by minimizing the negative impact of age or disability on their life, and assisting them to remain living at home and participating in their community.

### VISION

Our vision is to provide high quality supports and services and to help all people be active members of their community and achieve the highest quality of life possible.

**Western Michigan University (WMU)** is ranked among the top 100 national universities by *Washington Monthly*, a respected Washington, DC, magazine. The list is based on three factors the publication characterizes as college qualities that are good for the nation: producing cutting-edge research and new PhDs; **encouraging students to give back to the nation through service**; and promoting social mobility by recruiting and graduating low-income students.

**The College of Health and Human Services (CHHS)** has a mission to **educate professionals to provide exemplary health care, rehabilitation, and social services**; promote innovation in advancing knowledge; and build mutually enriching local and global partnerships – all **focused on enhancing human health and well-being**.

## LINKS TO WMU AND COLLEGE OF HEALTH & HUMAN SERVICES STRATEGIC PLANS

This strategic plan for the CDS and CHHS is built upon the WMU strategic plan, approved by the Board of Trustees, March 23, 2016. This plan focuses on the three pillars of the University; **Learner Centered, Discovery Driven, and Globally Engaged**.

The CHHS plan addresses the University goals with strategic actions and outcome measures specific to the College.

The CDS plan builds on the direction outlined by both plans.

## DEVELOPMENT OF THE PLAN

### INFORMATION REVIEWED

Sources of information used during the development of the plan included the results of the Employee Satisfaction Surveys, Participant Satisfaction Surveys, the WMU and CHHS strategic plans, as well as national and statewide trends in services and funding.

A number of key employees also participate regularly in community forums on a monthly basis where they gather critical information about the future of service provision. These meetings include Mental Health Director's

## VALUES

All people are valued members of society.

All people have the right to make choices affecting their lives.

People who receive our services are unique individuals who should be cherished, treated with sincere understanding and respect, and provided with lifelong learning opportunities.

Council, Developmental Disability Director’s Council, Kalamazoo Community Mental Health Provider meeting, Elder Abuse Prevention Coalition, Kalamazoo County Advocates for Seniors, and others.

We view strategic planning as a continual process, and value “thinking strategically” at all times. We continually review information together that impacts our strategic direction on a monthly basis at our management team meetings. Senior administrators and managers are all of long tenure as well, and attend conferences and workshops to bring back valuable information to set our future direction.

Our history has been transformative and our services have expanded from primarily center based day services to what is now a multi-service agency with community living services, skill building, senior day services and support coordination. In 2015 we introduced our WMU Aging Services division.

### PLAN AS A LIVING DOCUMENT

Finally, this plan is a dynamic and living document; with room for further review and modification of details (timelines, persons/groups responsible, etc.) as those responsible begin to implement it.

## WE WILL ACHIEVE THIS MISSION BY:

Empowering people to control their lives.

Providing ongoing learning and positive growth experiences

Changing community attitudes.

Removing barriers to community participation and social isolation.

Listening to stakeholders and offering relief to caregivers.

Increasing our understanding of the desires and wants of people who cannot communicate conventionally.

## CDS SERVICE IMPACT

A total of 12.4% of all non-institutionalized Americans have disabilities.<sup>1</sup> In Michigan a total of 13.4% of community-resident citizens have a disability. Of adults between 18 and 64 years of age, one in every six has a disability.<sup>2</sup> In Kalamazoo County, 32,833 people or 12.9% have a disability or limitation that makes them unable to perform everyday activities; the majority of these individuals are over 65.<sup>3</sup> Of the total residents in Kalamazoo County with a disability, approximately 6,051 people have a severe disability that **affects their self-care, learning, mobility, self-direction, and capacity for independent living**. Provision of needed supports and accommodations can mean the difference in a person's level of independence by minimizing the impact of the disability.

Persons with severe disabilities are in a unique position because the environment and society does not typically accommodate their need for support. Persons with severe disabilities want to pursue the same interests as their non-disabled peers and want to achieve similar roles in society. However, persons with disabilities experience inferior health and are much poorer than the general population, have diminished access to important services like transportation, and routinely **face major obstacles in community life activities** such as going to the movies, crossing streets, using the restroom, using other community resources and even having friends. Persons with severe disabilities are often **isolated or segregated** in areas away from others, and have little control over their lives. The CDS services are intended to impact the lives of persons with severe disabilities to minimize their isolation and segregation and help them gain skills in community life activities.

Typically, adults and children who receive our services have intellectual disabilities and other disabling conditions such that they require assistance with all self-care routines (such as feeding and toileting), require mobility assistance, and most have limited communication skills. Our programs focus on improving functioning and participation – the domains identified as primarily impacted by disability<sup>4</sup>: understanding and communicating with the world (**cognition**) moving and getting around (**mobility**) self care (**attending to one's hygiene, dressing, eating and staying alone**) getting along with people (**interpersonal interactions**) life activities (**domestic responsibilities, leisure, and work**) and participation in society (**joining in community activities**). **Our programs are designed to meet our mission “to help people live life fully” by providing the extensive, daily ongoing training and support required for community living.**

Our programs focus on minimizing the impact of disability on the lives of our consumers, and consequently reducing the burden of care and preventing further deterioration in their condition. Our consumers are usually not eligible for other programs that may require advanced skills. **Our programs are designed to help consumers in the long term maintain or improve the quality of their lives. Persons served participate in their own development** by deciding what goals and activities they want in their plan of service, then choosing their own staff whenever feasible, and by making daily choices about how the program supports them toward their individual goals.

---

<sup>1</sup> U.S. Census Bureau, Census 2015

<sup>2</sup> U.S. Census Bureau, Data Set: 2015 American Community Survey 1-Year Estimates

<sup>3</sup> U.S. Census Bureau, Data Set: 2015 American Community Survey 1-Year Estimates

<sup>4</sup> World Health Organization, International Classification of Functioning, Disability and Health (ICF), 2001

## PLAN FOR 2017–2019

### GOALS HAVE BEEN ESTABLISHED IN THE FOLLOWING AREAS

#### WHAT ARE THE PRIMARY GOALS OF CDS

1. Student learning
2. Community services for people with an intellectual disability and other developmental disabilities
3. Community services for elderly people with Alzheimer's and other dementias
4. Services to WMU community, Kalamazoo community
5. Research incubator for faculty

#### STUDENTS AND LEARNING

##### Student Learning

1. Become the prime service learning site for specific partner departments

##### Student/Employee Training and Engagement

1. Maintain a high quality, well-trained staff pool
2. Develop more trainings for WMU Aging staff
3. Workforce stability
4. Increase workforce diversity
5. Increase wages for direct support staff

#### PROGRAM EXCELLENCE

##### Research/Service

1. Expand our services in the aging market by offering evidence based services for healthy seniors without cognitive impairment

2. Participate in research agenda for Mind Aerobics with Department of Psychology and New England Cognitive Center
3. Expand WMU Aging Services to include “A La Carte” services at 110 Cork Street by partnering with other WMU departments

#### Marketing

1. Bi-annual newsletter
2. Maintain a market presence through the WMU Healthcare Footprint project

#### Business Expansion

1. Renovate 110 Cork Street WMU Aging Services
2. Expand CLS with the aging population through in home services

#### Operational Support

2. Move Senior Day to 110 Cork Street closer to the University to better utilize University students and faculty