

STRATEGIC PLAN
MARC Therapies of Novi
2020-2022

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THE MISSION OF MARC THERAPIES OF NOVI (MARC)

Our mission at MARC is to use actual work activities as therapy in the belief that having an occupation is a basic human activity essential for health and the healing process and that therapeutic work activity must embody the characteristics of purposefulness, challenge, accomplishment, and the satisfaction that make up every occupation.

VALUES

MARC holds the following values:

- We believe in person centered individualized programming which embodies and supports a team approach to success in the therapeutic vocational setting. Each person's entire team must be actively engaged to obtain purposeful outcomes on a continuing basis.
- We believe in the power of individual choice. Persons served have both the right and the obligation to be active in the process of choosing their vocational activities and developing personal goals.
- We believe that partnerships produce effective and substantive outcomes for the individuals we serve. Our relationships, with individuals, their families, our employees, the organizations, and the communities in which we work, are based on shared esteem and a focus on innovation, excellence, and personal choice.
- We believe in promoting the physical well-being of the persons we serve through physical activity. The ability to be as fit and functional as possible builds greater quality of life and will minimize the risks associated with sedentary lifestyles such as muscle atrophy, deteriorating health, and loss of function.
- We believe prescribed physical therapy programs improve mobility and help manage pain. Physical Therapy is an important part of rehabilitation, treatment, and prevention of chronic conditions, illnesses, and injuries.
- We believe in providing a creative outlet to the individuals we serve. Giving them the opportunity to express themselves through different artistic mediums.
- We believe in providing a robust schedule of educational in-services for those that serve to promote healthier hygiene habits and training necessary to increase independence with ADLs.
- We believe in giving back to the community in which we live and work. Our goal as we continue to grow is to develop community volunteering and outreach.
- We believe in upholding the fundamental rights of our person served and the other stakeholders ensuring that our organization is continuously working to understand the diverse needs that may be faced daily with the population we serve.

MARC BACKGROUND

In 2014, sister company Medical Alternatives Rehabilitation Centers (MARC) was created to expand services to include Physical Therapy and Occupational Therapy. Gary Greenberg is the owner, Adam Greenberg is CFO, and Dan Eaton is ED.

In 2018 Therapeutic Vocational Day Treatment was added to MARC as a further expansion of services.

MARC Strategic Objectives

MARC vocational is heavily reliant on Michigan Auto No Fault as the primary funding source, lacking diversification in this manner.

Financial Overview MARC Vocational

	2018	2019	2020	2021	2022	2023	2024	2025
<i>Average Census</i>	5	18	25	32	42			

MARC Therapies was created in 2014 set up to provide facility based and in-home physical therapy. MARC Therapeutic Vocational Day Treatment was added in November of 2018. Administrative employees are shared with MA. This includes ED, QIM, HR, and CFO.

With the imminent changes of Public Act 21 (SB 1) in regarding to ANF funding changes in 2021 additional changes will be necessarily implemented to sustain financial viability (More in Goals and Objectives Section).

GOALS IDENTIFIED

- MARC will achieve FY 2021 census targets as projected.
 - **Goal Met: 2021 Census exceeded target of 30-9.21**
- MARC will achieve FY 2021 revenue targets.
 - **Goal Met: MARC continues to meet revenue goals and maintain financial stability-9.20, 9.21, 6.22**
- MARC will determine a viable business plan as the effects of Public Act 21 are identified.
 - **Goal Met: MARC is financially stable-9.21,9.22, 6.22**
- MARC will maintain a stakeholder satisfaction of greater than 85%.
 - **Goal Met: Satisfaction Surveys remain positive-6.22**
- MARC will continue to support Brain Injury community in advocating for funding and services to survivor through volunteer work, placement on various boards, and financial contributions.
 - **Goal Met: MBIA has toured 3 times in over 2020-2022-6.22**
- MARC will achieve 3-year CARF accreditation in FY 2020.
 - **Goal Pending: Survey expected Fall of 2022**
- MARC will add a Medical Director by 2022
 - **Goal Met: Dr. Kovan added as consulting Medical Director in 2021**
- MARC will diversify associate work activities by 2021
 - **Goal Met/Ongoing: Work is frequently changed out depending on availability and vendor interaction-6.22**

- MA will meet all CDC and MDHHS requirements related to protecting persons served and staff from COVID-19.
 - **Goal Met: QIM worked with local agencies and implemented continued review and guidelines of infection precaution, regular training, tracking of infection or exposures, working with logistics to manage staffing.**
 - **Goal Met: ED and leadership worked to provide staff wages to those affected by exposure (FFCRA) even though MA was exempt due to business size and definition.**
 - **Goal Met: QIM and ED worked with leadership, staff, vocational associates, and external stakeholders regarding necessary infection precaution, spacing, mask use, and necessary changes to daily operations. This included creating, documenting, and managing home based day treatment vocational activities during time frames of building closure.**
 - **Goal Met: QIM and ED worked to provide ongoing information sources to person served, external stakeholders, and staff related to COVID-19 information and infection precaution material and training-6.22**
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- MARC will add 1-2 Occupational Therapists to staff by fall 2022.
 - **Goal Met: 2 OT's currently on staff, added in 2020 and 2021-6.22**
- MARC will add either a Speech Language Pathologist or a Behaviorist by 2025
- MARC will expand space to accommodate increased census by 2025

MARC MARKET ANALYSIS

Despite the advancement of managing ABI trauma in the United States over the last 30 years, funding remains limited. Few states recognize ABI treatment on regular insurance plans, Texas is an exception and only because a prominent Texas legislator was personally affected by such a loss. Additional attention has occasionally been focused on ABI through the Veterans Association and the NFL. (1 of every 10 returning soldiers will experience some form of TBI) (CTE awareness has led to increased research dollars, improvement in equipment, and concussion awareness with all contact sports). Despite this attention most men and women affected by ABI are left uncared for. In MI a system still exists, though change is imminent, that addresses those affected with ABI. The population able to receive existing benefits is narrow, only applying to those who have suffered an ABI due to an automobile accident and fit within definitions of the Auto No Fault Act.

General Auto No Fault (ANF) Facts:

- Adopted by MI Legislature in 1972, Effective October 1973
- To help injured person achieve maximum recovery after accidents
- To ensure auto accident victims were reimbursed promptly for cost related to their accident
- To reduce legal and administrative costs by avoiding time-consuming and unnecessary lawsuits
- Reinsurance fund for costs >\$550,000
- Lifetime medical coverage for injuries sustained to auto accident
- "Reasonable care for reasonable cost"
- Non contractual Agreements with Payer Sources
- Individual Adjuster Relationships
- Accreditation Mandatory as of July 2021
- Total Persons Served in 2012; 57, 113

The BIA Directory lists approximately 300-400 programs. Of those only a small number of post-acute, private, for-profit providers in ABI offer a wide variety of services. The breadth of services obtainable by the partnership between MA and MARC are distinctive in the marketplace. This is accomplished by some of the larger providers; however, they lack key aspects. Some of these

providers may have a wide variety of services however they may have a corporate influence from out of state that does not understand the market and are unable to coordinate their in-house programs effectively to provide adequate continuity of care. Others lack the resources or attention to detail to make multiple service delivery successful, or due to size have moved away from person centered programming. We feel the combination of a wide service delivery while retaining a small family-owned setting separates MARC from the rest of the market.

The MARC business plan currently is aimed at providing the highest quality service with documented outcomes at a reasonable price. Market share is expected to sustain steady growth. MARC Therapeutic Vocational Day Treatment is expected to sustain significant growth.

MARC Organizational Structure Integral to Obtaining Objectives:

Ownership was transferred in 2021 to Adam Greenberg. Mr. Greenberg is also acting CFO. Dan Eaton is Executive Director (See attached Org. Structure Charts). Acting QIM is Sherry Navarro. Human resources are handled by ED, QIM, and admin staff. Legal issues are contracted as needed from the private sector.

Marketing has, to date, been accomplished by 'job well done' and contacts held in the industry by program leadership. As MARC continues in the CARF process, internal program evaluation systems will be in place by the end of 2020 to include frequent Risk and Safety, QI, Program, and Leadership meetings.

Currently a daily stand up is performed in program, in depth program meetings already occur once weekly, with leadership meetings averaging once per month. Additionally, Program Directors meet with ED as needed or bi-weekly, schedule dependent. Financial reviews are held as needed with ownership and CFO. Attendees include, Owners, CFO, ED, Care Managers, and QIM. Staff meetings are held monthly, which included additional training required for AFC licensure and CARF standards. Additional educational material is also presented, which may include a speaker from the ABI community. Agendas and minutes are maintained outside of ownership discussion.

MARC participates in several conferences:

- Brain Injury Association of America (BIAA)
- Brain Injury Association of Michigan (BIAMI)
- Michigan Brain Injury Providers Council (MBIPC)
 - MBIPC Board Membership

SUMMARY

MARC has analyzed its internal strengths and weaknesses and those external threats and opportunities which are likely to affect its ability to satisfy its mission. In this process, it has become apparent that some strengths may also be weaknesses and that some opportunities may also be threats. This analysis follows:

MARC has identified the following as its internal strengths and weaknesses:

MARC Strengths:

- ✓ New Program Lead by Experienced Team
- ✓ Variety of Vocational Activities
- ✓ Large Ergonomic Space
- ✓ Special Expertise: RN as ED, SLP, PD with vocational experience, 2 OTs on staff
- ✓ Located in safe nice area
- ✓ Family Owned and Operated

- ✓ Flexible, Quick Acting Leadership team
- ✓ Structured Regular meetings and planning sessions leading to productive outcomes for vocational associates and job coaches
- ✓ Structured Regular Staff Meetings to meet training, licensing, and morale needs of staff
- ✓ Competitively Priced, offering additional benefits to vocational associates
- ✓ Integrated therapies provide convenient low stress ability to meet person served appointment schedule.

Notes: Since opening in Dec of 2018 MARC has grown consistently, adopted ongoing structure and policy and procedures, increased, and retained quality staff, and offered consistent vocational activities for those we serve. To support and increase overall program content and depth. A web based daily documentation system was added in 2022 to facilitate efficient paperless documentation in real time and assist in speeding up generating reports.

MARC Weaknesses:

- ✓ Changes to Funding
 - **Currently managing this well**
- ✓ Coordination of Leadership and Consistency
 - **Resolved with frequency of interaction, open door policy, and consistent meeting schedules**
- ✓ Effective Cross Function Communication
 - **Resolved with consistent meeting schedules**
- ✓ Referral Network/Focused Marketing/Improving External Awareness
 - **Resolved as demonstrated by increased census and consistent new VA tours**
- ✓ Competition with market for top quality staff (lack of some benefits)
 - **Currently resolved, not seeing same staffing challenges as MA for example**
- ✓ Development of Specific Website
 - **Resolved, Ongoing: Website redone and slated for improvement in 2022**
- ✓ Lack of OT, Behaviorist
 - **Resolved, 2 OTs added through 2022**
- ✓ Communication between therapies needs improvement
 - **Resolved, PT eliminated. Psychotherapy outsourced. OT's attend regular meetings as indicated above**
- ✓ Technology limitations
 - **Resolved currently with addition of web based daily documentation system**
- ✓ Incomplete/Outdated aspects of Policies and Procedures, Hierarchy, and Reporting Structure
 - **Resolved in CARF process, review of P&P, etc.**
- ✓ Administrative Mentorship/Succession Planning
- ✓ Functional Regular Assessments
 - **Resolved with OTs regularly performing FIM/FAM on admission, every 6 months, and upon DC**
- ✓ Ongoing Training Calendar
 - **Resolved with monthly staff meetings and provided trainings**
- ✓ Space limitations with increased census
- ✓ Managerial training required as number of staff increase in conjunction with growth
- ✓ Building limitations in opposition to growth goals

MARC, Inc. has identified the following as external opportunities for and/or threats to the organization:

MARC Opportunities:

- ✓ Capitalize on Competitors weakening reputation/performance

- ✓ Development of therapeutic day program for aging TBI population-on hold
- ✓ Capitalize on Competitors unable to overcome challenges of new legislation affecting funding.
- ✓ Add Additional Integrated Therapies (RT, OT, etc.)
 - OTs added, will look to future SLP or Behaviorist
- ✓ Development of Enclaves in community and through MA/MARC (Thrift Shop) that will increase community integration, build vocational skills, and provide meaningful long-term sustainable employment skills.

NOTES: Substantial effort should be placed on increasing the variety of vocational therapeutic activities and enclaves, thus providing a variety of tasks appropriate to different levels of cognitive or supervision levels. This will increase the potential vocational associate admission base. Additionally, internal enclaves, Thrift Shop, will provide advantages beyond just those found in the day program, such a program may provide a low-cost way to obtain items and food stuffs necessary yet unattainable to this primarily low-income population.

MARC Threats:

- ✓ SB 1 (Sweeping Legislative changes to funding and scope of business, CARF, etc.)
- ✓ Potential market repetition of the few successful business models (i.e., Copycat competitors)
- ✓ Medical Transportation availability

NOTES: Senate Bill 1 is the single biggest threat to fiscal stability, it not only will affect the amount of funding available but also additional operational changes and billing challenges will arise (CARF, Case Reviews, etc.) It is imperative that we remain at the forefront of treatment modalities in the most efficient model possible.