

Thank you for joining us for today's webinar. We will get started in just a minute or so. Copy of the slides are available in a tab on left. Today's webinar as part of the aging and disability business Institute series in collaboration with for a and essay. We're up to about 13 or 14 of these. The next event called new Medicare enrollees opportunities for partnerships. That will be Monday May 8 10 AM Pacific. We hope you'll join us for that. You receive a follow-up email by the end of business that would direct you to the online application. That will also contain a link to the slides just mentioned. All that will be sent by the end of business today. If you. Dissipating in this event as part of a group that did not log in directly to the session, we will not be eligible for CEU because we cannot track your attendance. Ever needs to login directly to the confirmation email they received. There's still plenty of time in which to do so. The last 15 minutes of the hour will be dedicated to Q&A. Send in your questions at any time waiting to last 15 minutes of the hour at the same time. We are two presenters today. Susan Burke, past president of the Ohio Association on aging. With that, I'll turn the event over to our presenter's.

Share nine show the presentation, I will begin by covering more global concept so we input and Sharon will go into detail about how we lies that approach at our organization. We have three objectives for today. The first to articulate on how market analysis can better positioning for future success. Give you some specific strategy about how to analyze your services. Back I would like to recommend this is a very good book. Going to give you the synopsis today. The first thing you need to do in developing a competitive strategy is answer three questions. What is the business doing now which is really asking yourself what business are you in? What's happening in our environment and looking forward, what should the business be doing. I'm going to talk about those specifically. In terms of looking at what is the business we are in now, that entails identifying what we call core function and products. Is not a simple answer is getting fed into specificity about what it is you're providing function and product wise. Also, to look at what our assumptions about position in that market, what are the strengths and weaknesses? What competitors and trends need to be evaluated to stay in the business currently in. You also need to look at what is happening in the environment? For us, there are a lot of things happening. That includes looking at broad categories like customer analysis. Who are your customers? What are the motivations for purchasing things for you providing services for them and what are unmet needs. For example, we do care management coordination, and unmet need might be private pay in with your customers. Is that a potential customer analysis? Competitor analysis is looking at to your competitors are.

Identify strengths and weaknesses. How check to visit for people to come into that industry, is a difficult to come in, etc. Finally, environmental analysis. When you think about the governmental piece, there's a lot happening. Government strategies are willing to reduce risks at the government level that has a tremendous impact. Potentially what we are doing.

When you complete the external analysis, it leads to the edification of opportunities and hopefully strategic questions for your organization that you need to answer. He also need to do an extensive internal analysis of your organization. By saying that, leaving several different types of things. Is not enough to focus on the good stuff, we all tended to want to talk about what we are good at. What are you not so good at? And what are you better? Also looking at what is your past and current strategy? Your level of innovation, our organization, that's one of the things we promote is innovation. When we look at our past and current strategy and fewer -- future strategy, also your construct or. We'll talk about that in more detail. When you in in a government funded environment for your been given an allocation you had to stay within its, you may not necessarily have symptoms in place to identify at the detail level what costs you to provide a service to potential pain parties. How diverse is our revenue stream? And denies Asian strengths and weaknesses? A continuing along internal analysis is, what's our organizational structure? We changed our organizational structure several times. We do this type of analysis we will talk about on a frequent basis. We change our structure. Part of it is how double can be -- can we be? We've made changes to allows us to be faster. What are important organizational systems? What task do we perform? Who are our people and their expertise? What is our organizational culture. We do these in our analysis as a team, we all come together and has requested like this. We see where everyone thinks we are. Our organizational culture is a culture of innovation.

When you go through yourself analysis, you identify where strategic tanks -- strengths and weaknesses are. Gone are the days where we are a monopoly. Those are gone. We have to be able to compete. If we can compete, can we win? That's our initial question. What business and doing the review. The next question, what should we be doing as a business? How does our current strategy fit with external and internal analyses we just did? Sharon will talk about what our product and core functions were. We utilized strategic alternatives, categorized by product or market, whether what we offer fell in certain categories. We also looked at what are the different strategies we can pursue. We selected and implemented one and finally review it to save it's working. When I talk about implanting a strategy, our nature as a AAA committee based organization we may be marketing this healthcare part there's -- partners and we may be doing less sharing codes there are competitors who at one point a lot of our meetings are public and there's competitor sitting those meetings

trying to ascertain what we were up to. So we changed that, portions of our meeting are no longer public. Those tend to be related to strategy development. You can see there's a market share and the other side is market growth. A cash cow is in the high market share below market growth. Each of these are in detail on the slides. That would be something you're doing that provides a good funding base for you but probably isn't a high-growth opportunity. We will cover each of these. A star is something that has high relative share and high-growth market, produces good cash flow you can find other core functions. In your strategy with identifying things you do is to maintain its and expanded. A? Is something with low market share in a rapidly growing market requiring cash investments. Intensity week cash generators because of their poor competitive initially.

We categorize care transitions in the question Mark category because it was taking money that started up. We weren't sure what it would yield at the end of the day. A cash cow, you want to protect your products on functions that are cash cows. And finally, there's a dog. The dog is low market share and low growth market, things taking your resources. It's really important to go through these and look at everything because frankly, you need to get rid of the dog. That can be hard as an organization because you doing it as long time.

We have to be willing to say it is or is not and we have to be willing to get rid of it. As we go through all our products and corporation, we have the external focus in mind which I want to cover more with questions you need to be able to answer. To -- who are the current buyers? We looked at who pays us to do something for them? Our state aging department may have been we consider a buyer of our product. Are they satisfied with what we're doing? Are there other people like them that we could be approaching to provide our services to? What is changing and their motivation that may be occurring. An example for us, there was a new governor that came in a few years ago and their motivation started changing. That had an impact in terms of our monopoly status.

Jumping or to competitor analysis, we historically had a network that providers, we looked at who are our competitors? What are their strengths and weaknesses and what is their cost structure like. If you cannot because competitive going forward, you will be successful.

Industry analysis, what's happening in our industry and how attractive is it? We across the country have a growing, aging population, Ohio in particular. How attractive is that to others? Here, it's very attractive. What are the areas to entry? How easy is it to come in and compete against that? We looked at all those things to determine what's the likelihood more people will be entering our market? What are the key success factors and what is the cost structure and how the changing?

The environmental analysis is broader, with demographic changes are occurring? What government or Pluto factors will present opportunities or threats? For us, it's both. There are threats but they have also turned into opportunities. What societal factors present opportunities? User all questions we recommend you go through a detailed analysis an answer.

It took several days of dedicated time to go through these questions and discuss them with the goal of ultimate coming up with where we are headed. For our purposes today, we think one of the most important things you can do is identify what is your competitive advantage? What distinctions you from your competitor?

In order to determine your competitive advantage you have to define three thanks. What is your product? You need to have that clearly defines. Who's your customer? And Hoosier competition? This includes other companies, products, any other place a buyer could go to get what you provide. To get a sustainable competitive advantage you have to have an advantage the market is as important and key to success. It has to be substantial enough to set you apart. It needs to be sustainable in order for you to be able to manage changes in your environment and competitors.

Another way to say that, these questions like why are you special? Why should they come to you versus other organizations? What is it about you? That leads to three generic strategies. Is different general strategies you can take.

The overall cost leader, can you do it cheaper than anyone else? The challenge for many community-based organizations, you cannot get economies of scale. In our organization, managed care can get economies of scale. We may look at that essay that may not be the best strategy for us. What else can we look at? Another would be differentiation. Critic something perceived to be unique in the industry. At something that stands out is not typically low-cost. Leslie would be focus strategy, focusing on a specific part of the industry or geographic market, maybe your focus is serving an multiple chronic conditions. Or you could pick something different and say you're focusing on all Medicaid, home and can see based consumers. And be able to deliver services to older adults, even on Medicaid getting home and community-based services. You arrive at what your approach will be after you go through all of those previous discussions about strengths, weaknesses, what's happening in the competition, how can you, where to follow and what is the best strategy?

I'm going to hand it over to Sharon and she's going to go through how are analysis how we did it and ended up with what we came up with.

I want to boil down all of what Suzanne said into things you could -- steps you can follow and give you framework and tools to be able to do your market analysis. Going to walk through about seven steps. We'll end up with lessons learned that we will go through with you.

The first thing we did, we identified our products, we try to do this by setting up product lines, not unlike Dr. Gamble who has laundry soap line and juice bar line, etc. We tried to do the same thing and categorize services. You can see the grid we used. We had the function of program management which was everything around planning and forecasting and you can see care coordination with in-home and telephonic. You can see all the different product lines we had in the specific services underneath them.

The next thing we did, we created a very large spreadsheet such that for every product we went through an extensive definition process. What I have shown here is one product assessment which is telephonic and home-based. That's the product. What are some of the some products that come off of that?

Then we defined, who are our customers? Here we wanted to clearly differentiate between the client is receiving the assessment from actual customer, Ohio Department of decayed, etc. as people pay for us to do the assessment. We listed those you are paying for the service. Waited to find who might be in competition with us then we finished this section with who is receiving the service? This is where we got into this is an older adult. Specifically defining them. The second section of the spreadsheet when into the market analysis. This is where we try to get a handle on that question. If we're looking at in-home assessment, what makes us different knowledge of the geriatric care was a big strength we had in-home assessment. We had to divide the things that were weakness. What wasn't working, our IT system was somewhat limited for those services. We also looked at can this generate revenue? You might have a competitive advantage in something that might not give you any revenue. In which case you have to make a decision, is it worth pursuing? If the answer is no, you can't generate a lot of revenue, it's something you're looking at strategically exiting.

Step four, go through the process of taking all that information you just created for each product and plugging them into the charts that Suzanne went over earlier. That helps you determine will be my strategy for each product? Here, the biggest advice is to be really honest. If something is a dog, it's a.. Press, AAA services fell into that category. It's very little I could share. It's falls into that category. We have made the decision to minimize its impact on the organization. Similarly, we have?'s, care transition and a teacher is questionable. A year ago, it would have been in our star category but now it's in the? Where we had to figure out what to do about that. We have some products in our cash cow category but those we are maintaining, typically care management services. When I look at this chart, the one scares me is I don't have

any current stars. Nothing with a huge market potential or revenue generation potential. Those are things we are working on. We're trying to figure out what is our next are going to be and how to best for the future in that way to create those stars.

Then we broke it down further. We took and realized there are things you might want to do in the short term, things you might do in the midterm and things we would want to do in four more years. This is still looking at that in-home assessment line off of our very large grid. You can see we came up with things we wanted to do in year one like prayer ties and address the gaps we already saw. Develop around bidding upcoming opportunities and so forth. We --

We looked at everything what is the value of the product from our customers perspective. This model is borrowed from a book called value proposition design, how to create parks and services, this model walks you to the process of identifying what does your product look like from the same point of the customer? You start on that right-hand side, you look at what is our customer tried to do? What do they want to achieve? If we look at managed-care company, what do they have to get done every day? And we look at what is it they consider a when? What are their problems and challenges? After we've done that we go to the other side and look at, what products and services to we have or can we create and what would be a game creator Orry wind maker for our clients based on what we know about their game and what would the a gamer lever? -- Reliever?

I did this from the perspective of managed-care. I think our managed-care companies are executive. There interested in the bottom line, we tend to be dealing with leaders whether they be directors or vice presidents, when we are trying to sell our products, this is who we are talking too. Were also talking to people who are very busy, getting their attention is very difficult. We have to be able to articulate quickly what it is we have to offer.

The jobs they have to do, they have a stakeholder the was there shareholder for whom their job is to make money. They are beholden to firms and entities like centers for Medicaid and Medicare tons of relations. They may have to be conscious about customers being satisfied.. There's a lot of rules. They don't necessarily know our work very well. They don't necessarily understand long-term care services and support and they don't necessarily understand community-based services. They may have a very good handle on medical care but they have less of a handle on what our world is about. The way forward to them is very using and full of twists and turns. A their gains, if they can improve health for lower cost and provide better care, that is a gain for them as is there bottom line revenue.

We have to think about what can we do to alleviate that's. The gains that we create, we can help them create better care and get better, lower costs. We know the way through the complexity along care services, we are expert in that could help them navigate those waters.

I gave T will be of value proposition. That's Council on aging care management services, to manage the population of the highest risk patients while reducing cost and improving patient experience. I have highlighted in red what we are alleviating.

After we created that value proposition, we have to validate it and extent to look at here's this product, here's we think it does for you. We have found people in the industries we are targeting to help us make sure our value proposition make sense. I will tell you it takes a while to hit on it. We have been out to numerous hospitals, hospital systems before we felt like we hit on the value propositions that are resonating with those individuals. After we've done that, we circle back to this competitive strategy. Once we know what our value proposition is, we have to come up with energy and that has two sides. There's internal focus, based on what we know about what the customer wants and what we are willing to provide, what changes do we need to make internally to make sure we can deliver on that promise? Do we need to train up our people, what system structures do we need to make? How do we need to change our culture? We can share a number of stories where culture got underway we had thought about it quickly enough. We are playing by different rules. The day of being a cost reimbursements where we could just do what we've always done are long gone. Now it matters how many visits you get done in a week and heavy clients you see in assessments you can complete because now your paying on per assessments or purpose of basis. We have to think about how does that impact our organization? We have to look at those four domains. We have to tie those back to our strategic plan and connect that internal strategy with external market focus.

This is another model generation, it's from the same people who built the value proposition model. You can see that in the center of the diagram. This helps you think about it going to bring a product market, what is my business model for that? Is a lot of really good information on how to complete all this but running through it quickly, you have to define what kind of relationship will I have with my customer and to are they? You've already defined your customer, you just need to define the relationship. If I'm going to bring this to market, what are those key activities and who are the key resources needed to be involved in this. Had divest to markets and who are those key partners and what is that relationship is quite? You have to look at the bottom line. You have to look at cost and revenues. We done extensive work in this area, really building revenue which is beyond the scope of this discussion today. It's something you have to get your hands around and make sure you have good financial analysis so you can really make sure at the end of the day you will have enough left over for your

mission. With that, we went to run through lessons learned. The good, bad and the ugly.

First one, we can't move fast enough. I don't know houses and feels about the slide but for me, their days when I think, I can't keep one step ahead. I see was happening, all go to a conference and realize what's happening in the environment and the good then, I know it's going on out there. the bad income I a 10 steps behind. You have to have systems and processes in place to give opportunity to move faster there. the best things we did here is we dedicate Tuesday's to forward thinking activities only. Were Concetta G, work on product to finish and so forth.

Probably seven years ago we changed our structure here in anticipation of what Sharon referenced earlier, having to be in a more competitive environments or we can know exactly what someone -- something is costing us. Even with those changes being in place, we see more investment needed in those areas to be doing the continued analysis you have to be doing to look at new opportunities. We have dedicated staff sussing out future products. He can't make people buy things even though you know they need it. When you get to the point they want to buy it, they want it yesterday. It's not as simple as saying I'm out there and I will deliver, these are often new interventions, things you have to step up and what they decide they wanted, they say they want it's in a week.

When you're planning what those opportunities you're trying to get people to buy you have to lay out all your systems with the thought in mind, if they say yes to this, are we ready?

We talked quickly about this one. Devoting dedicated time to the activities. When we first did our product analysis, that is a huge left. Required everyone agrees to dedicating time to getting it done. I don't you can we in the strategy business without having time on your personal calendar just to think, time as a team to discuss and interact. It's a necessary function.

Our Thursday session are the whole senior leadership teams going through what's working with current strategy, what's not, who are we pursuing, etc..

We learned it's really helpful to look outside our industry for opportunities. It may look different but there are lessons we can learn from that industry. Making sure we are keeping an eye on trends and not being afraid to go to a conference on issue you're dealing with, even if it's not within your industry kids you can pull from that, things that you can use. Next is what the customer wants. I think we've touched on that. Are there any other thoughts?

Huge lessons around data. We have built our data system over nine years ago. What was interesting to me, dealing specifically with managed care companies with our experience has been, we anticipated they would have robust systems. I believe they have those but they are built for medical care and insurance. They are not necessarily built for long-term care services and support. The problem with this was we weren't able to get, we're used to getting a lot of data because we had built into systems for ourselves to collect what we needed. Now we had to be reliant on somebody else to give us that eighth and they did not have the reporting capabilities we needed. Systems also drive workflow and they are necessarily driving it in the most efficient way. -- That's huge time and resources. It takes 15 minutes extra per person and you take that times 2000 clients per month, you get the idea of how much additional work that is on your staff.

The difference between profit and loss.

In terms of data reporting, I've always likened it to my board and others, a sickly flying in the dark. We used to getting very specific data about your performance and knowing where proactively when visits are DOC don't miss them, going to retrospective management report that's maybe year in the making, it's hard to manage an organization that way. From those experiences, we learned we should've started earlier, building our own system to capture that even if it meant our own manual data entry which it did. As we got to that point with the best information was significant time and litigation -- duplication. We learned we had to start right away not assume we would get reports.

Would like to say you can contract to use your own. We have not had success for that but they'll be my utopia dream.

Creating a culture to compete is another area where we feel like, I wish we had realized how much culture would impact us from the get go. It's true the culture can eat up your strategy in a heartbeat. Making sure you have data-driven decision-making in place, you're focusing on outcome quality and results, not just how many process measures.

We started the culture change we came in 2005. With me back then saying we are going to have to compete in the future, we are on exclusive monopoly, we had tenured staff, they said no, what is she talking, here we are today competing, many of the same people are here and are still believers

Are now believers because it's come to fruition. That can take a while. It takes a constant messaging around that. I confident you have to go out in many instances and recruits a different type of staff person. If you're selling something and it may be a

social work function but it has to be that social worker whose also comfortable with the sales approach. We've always done this. We have a performance management system here historically, pay for performance. We have tightened up how long we give people to succeed and shorten that time, much more aggressive about you have the skill set to keep up or not, if not, we are moving you out quicker. A

The struggle Israel. Is not necessarily easy to convince customers this is what they need. It's not always going to be a build it and they will come scenario. You may be building a lot of things, testing a lot of products before you hit the wine they are interested in and it may not be the one you thought they'd be adjusted and. Even if you Inc. they needed, and they say they want it's, it may take tenacity we may have to abandon its.. We've done some abandoning and through the process of listening to what's their pains are, we recently created a new intervention a large insurance company had purchased from us. It wasn't what we would have sought out, set out to utilize our expertise but through the process of learning what they want, we developed what they want and gave it to him.

This is a marathon, not a sprint. It takes a long time to go through the analysis and get your strategy set. To identify your value proposition, identified target markets for new revenues, products and opportunities and have your targeted customer purchasing from you. A is a lot of starts and stops. We are developing a we think is a good intervention sometimes you have systems, we do that well. They don't, but they think they do. We'll come back around with data and if we did I game sharing approach, that type of approach gets their attention because at the end of the day, for many it's all about the bottom line if you can help them improve that's, they're more likely to listen to what you have to say. A it takes a lot. A my final thoughts is around the fact that this is all about the planning, not the plan. Don't focus on the plan and walking away in three months. Were you will find value is in the planning process. I will tell you the end stages is a constant shifting target. I love this story about wanting to build a bridge and them agreeing, that's a long way away. We'll just build it to November and they miss the mark. Taking the time is worth it where you will find the investment is in going through the process. Doesn't have to be pretty at the ends, it can be a mind map on a cocktail map and -- cartel map and you'll get the results you are looking for.

I think that takes us to a question slide.

Thank you very much. I want to thank you for a great presentation, it's time for Q&A portion. You can see a slide up there if you want to send in questions for our presenters, please do so at this time. Use the questions box you can see, presenters, we'll go to that here. The first question for you is, what makes your offering distinctive? Can provide an example? A the weather comes immediately to mind for me is in our care management program, we have subcontracted with local health

information exchange to provide real-time alerts when our clients go to the hospital. That's unique and something that catches people's attention can stabilize how proactive we can be.

From a community services standpoints, if we are managing services and their to the hospital, that enables us to stop services, we can send a care manager daily to them, we can modify their care plan immediately when they come out. The same applies for ER visit. That's real-time information. That we get through our program. I would also say, in terms of the whole home visiting, we own the home. Many of the program to be administer have clients that have been on the program to to three years. They often have the same care manager and people know we are coordinating with coming in and outs of that home.

I would to say thank you for being so honest and chest with the revelation your organization has no stars. I think many are in the spout and it's great to openly support one another.

Can you talk more about how, this camaraderie, how to set it into what you're doing, how do Compass that when it can be difficult sometimes. We try to promote, we do a lot of different workshops trying to promote business approaches to some of these product lines and getting people thinking that way. As a states, we do a lot of collaborating around different ideas, there's a willingness if one gets a contract, there could be a statewide contract. Is willingness to be a subcontractor. We have done that supporting our network. A couple years ago we decided we needed to get into the under 60 care management business. We responded to an RFP that extended beyond our region. We subcontract with one of my colleagues from another region to provide services. We worked a lot to collaborate opportunities like that with one another. We go to our colleagues in business first as potential partners in those types of efforts. That would be one response to that.

Next question. Do you have any examples of value proposition that was needed?

Yes. In our past, we openly share what an intervention would look like but now, we have one at one of the things we just had a big managed-care organization and one of the opportunities we are looking at is paying for the research to make that evidence to base intervention. We hope that will be successful. That reason, not a position strategically could I don't know who is all on the call to tell you what that is.

It's a competitive market we are in. We had to scale back our typical open vacations about those things, least issue newsletters and promotes our successes. We don't do that now. We put certain things out, and not others.

Next question. Do you offer balance or other fall prevention program and is so, who purchases those from you?

We have a contract with the state to provide balance. It's difference, this one, we do train the trainer things. I'm stumbling over that because it's not a moneymaker so to speak. It doesn't make its way onto my radar. I know we are doing it but hasn't materialized to any big funds, we are doing our parts working with the states to do what we need to do because it's a program of importance to them but it's not where our strategic importance is.

@Be a great example of a product we looked at when we did strategic planning. We wanted to determine if there is a market and through our analysis, it's twofold, they're not moneymakers because people don't want to pay for them. The second, the people who would be participating in them, there's mixed feelings about whether or not they would participate. There has been a difficult product to sell and make money. At the end of the day, we have to have some sort of margin for to be beneficial.

How much of your time and effort is spent towards networking and trying to get new partners together, what does that look like? Do social media, network events, walk us through how you handle all that? A our networking efforts are targeted at potential purchasers of things we are trying to sell. In the past, we man spent a lot of time networking within the aging arena and nonprofit arena, our time is spent more towards events for we will see healthcare leaders where we can collaborate and be a part of committee health initiatives to building those relationships. We have other relationships and greats nonprofit partnerships. We target our time towards getting on board, going to events that have clientele we are attempting to build a better relationship with for the purposes of integrating home equity ace services with healthcare.

I would add to that. The simple answer, when we sit down and were thinking about where we go, we're looking at are never sent saying who has a relationship with somebody who can get us to the CEO of whatever health system. That is our target. That's figure out who has the ship opened the door or is directly related to that person. That's like your LinkedIn network, your for network can help you but it's more about finding the right person and getting somebody to open the door for you. It's influencers and things like that. We are fortunate here, Suzanne knows just about

everybody. When we need to find somebody, she either knows somebody or find somebody. You can share and makes an important point. Over the years we have transitioned to this is where our strategy is. We specifically targets board members and healthcare fields of notoriety. We're going to ask physicians on our board that are affiliated with big health systems, public health Commissioner, difference, in the past we may have been set aside with a cast of business people, we say no, we need a physician, ideally a former internal medicine are primary care leading good reputation in the QT, all of that is strategically driven to include, when we make decisions now about what events we are sponsoring, it's a change from the past. I will look at that and say what events will we give money to? And tied to the strategy of where we are going. The same holds true about who we agreed to do outreach and as for. How are we spending our outreach resources?, Who are the audiences we went to target and are we being strategic about that? Is not that any company can call and say we want a speaker. We will agree to that if it fits in with where we are going.

How do you effectively build up capacity to deliver more expensive the more financially warning programs. Such as care transitions?

This goes back to early analysis of what the future looks like and making decisions to invest resources, what we need to do early. One of our first restructurings, we used to have line supervisor in our organizations. When we restructured we limited everyone of those. We took that money because we don't have a limited resources invested it's in staff and I did ever structure that would allow us to collect it and make it available at the staff level to see the performance. It's those types of things we made investments repairing for the future based on what's our predictions of the future would require. So that when transitions came along, we had prior to that funding of fertility being available we had done a pilot with a local hospital because we were hoping at some point in the future, there be an interest in reducing readmission. That helped us, we made at our strategy. We want to demonstrate we can do this and we think the future will bring that so let's put money in a pilot and hope funding opportunity will come and it did. I think you get the money a voice. Understanding your costs by program product is essential to that. If you don't know what things cost you it's hard to figure out where to get efficiencies, right now we are going through a process in preparation for our budgets of understanding all of our contractual requirements, what does it take to do that and is there a better more efficient way to get it done. In program that are not high revenue generators, I want to get as much efficiency into the system and reduce my costs as much as possible. In areas where have some wiggle room, I may have more. How can he get more out of this program? Getting into that is so essential so you can grow discretionary funding gives you something you can put into a pilot and it doesn't have to be huge. Reference was only

hundred clients. We were able to leverage that so well because we had its we had data on it said it's effective.

One other comments. This requires resources and tough decisions. The iteration of the grid with the dogs you saw was the second of the time we got to this but their previous ones will we got rid of programs that were drawing demonstrated resources, they been here forever, people cried when we cut them but we cut them. We took that money and invested it elsewhere. Places we thought would be the future for our organization to grow.

We are just about out of time. I want to thank you for joining us for today. And thank you for being here.

Thank you.

Thanks for joining us. We appreciate your support. If you have any questions you see the email on the screen. Joonas for the next event coming up Monday, May 8. If you want to claim CEU's for today, you'll receive a follow-up email. That will direct you to the online education. Will contain a link to the slides as well as eight webinar. Thank you for joining us, have a great day.

[Event concluded]