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Lions Vision Services Strategic Plan

2023 - 2026



Strategic questions we evaluated

Programs

- What is our vision for the LVS eye surgery program
- What additional complementary health programs should we add
- Do we continue the hearing aid program?
- How much additional funding is needed to fully meet the annual need? To double our # surgeries?
- Do we need to expand our partner program for eye surgeries? If so, what counties/regions? How many partners and what type of partners?

Relationships

How to leverage our SC Lions relationship (leaders, clubs, members)

Organization

- Should we consider strategic partnership opportunities? Which ones?
- What to do with current physical location?
- What is our long-term desired board size, board composition (e.g. skills, demographics)

Fundraising

Should we do a more comprehensive major/planned giving program with Lions members? How do go about it?

Brand

What would it cost to increase our brand awareness from X to Y (for program recipients, potential donors)



LVS SWOT

INTERNAL

EXTERNAL

Strengths

- Most comprehensive eye surgery services of SC nonprofits – types of surgery, ages covered
- Endowment of \$1.5m
- Partner network (ophthalmologists, anesthesiologists, surgery centers) that enables
 4:1 impact on dollars raised
- Staff experience and longevity 10 years vision health programs (Winn); 7.5 years of SC fundraising (Daniel)

Opportunities

- Need exceeds ability to deliver opportunity to expand # surgeries
- Aging Lions could be major/planned givers
- No clear SC leader for vision health; potential to merge with organizations with overlapping programs
- Fundraising from state funding, government grants, DHEC
- Opportunity to expand/reduce programs to align to core mission

Weaknesses

- Reaching rural areas of SC for people in need (brand awareness)
- Small staff; limited staff time and bandwidth
- Brand not well known outside of Lions Clubs/ confusion with Lions brand – affects both donors and program recipients
- Board needs to continue to grow in skills and size
- Org skills marketing/digital marketing, IT, data management

Threats

- Large hospitals and hospital systems buying practices and they become harder to work with (discounts, etc.)
- Attrition risk no backup to key skills/staff
- Location of office getting cut off from rest of Columbia
- Declining Lions support grants and individual fundraising programs not yet mature
- Government, large philanthropist funds someone else



LVS unique differentiation

[why are we different (and better) from other vision health providers in SC]

- Scope of eye surgery program types of surgery, ages we cover
- Financial model middle ground of providing doctors with some funding; 4:1 impact model for funds raised
- Responsiveness to needs
 - Partnerships with other orgs
 - Program recipients
- No other nonprofit has the SC Lions access (e.g. to leadership, brand affiliation with Lions name, SC Lions membership)



Summary of decisions made from 2022 strategic planning

- Strive to become the largest eye surgery program serving low income families in SC delivering >250 eye surgeries annually. Take actions to make this a reality including partnerships, new funding programs.
- Expand services offered that are complementary to our vision programs and enable serving an additional 100 people in need of assistance.
- Wind down Hearing Aid Program. Create a process to refer those in need to a program that will assist them.
- Create an "LVS Ambassador" position at each SC Lions Club with the assistance of SC Lions Leadership.
- Take steps to significantly increase LVS brand awareness throughout SC.



Vision for LVS eye surgery program

Vision Statement	Requirements to meet vision statement
LVS is the recognized provider of the preeminent and largest eye surgery program serving low income families of South Carolina.	 250 surgeries/150 individuals annually \$225k additional funds raised annually (cash; not gifts-in-kind) Significant brand recognition with potential program recipients resulting in ~250 applications annually 2 additional LVS staff plus ~\$150k annual funding to pay them (fully loaded)



Strategies to achieve eye surgery program vision

LVS is recogni<mark>zed as t</mark>he provider of the preeminent eye surgery program serving the low-income community in South Carolina. The program serves the largest number of people and has best-in-class operating efficiency in terms of staff, funds and partners required to deliver surgeries.

Strategies to achieve vision		3 year metrics to measure progress	5-7 year metrics to achieve vision	
	Develop a full-time major giving, planned giving, and mid-level giving program	 \$150k of funds raised from major gifts (>\$5k) from current ~\$25k annual avg \$2.5m of planned gifts pledged 	 \$375k annual funds raised from major and planned gifts for funds needed to execute eye surgery program vision \$5m of planned gifts pledged 	
	 Increase brand recognition to recipients (to drive increased # applications) and potential donors and partners Increase # impressions of LVS brand through additional digital marketing. Target impressions based on key words to find recipients, donors, and partner entities likely to be interested Be part of X partner newsletters, online directory, social media posts Other examples: Partnership with SC United Way, hospital/surgery systems and associations, social work orgs, senior groups, free clinics, ongoing stewardship with our current partners) 	 Applications for eye surgeries increase by 33% from ~150 to >200 Add 10 new partners that give LVS significant new brand exposure 	 600 applications (from current 150); assume current conversion rate of 33% 	
	• Identify potential areas of state funding and create plan to tap into this program funding source.	 Research and evaluate with 5 state agencies 	 State funding of >\$100k/year 	
	• Identify and execute on 2-3 strategic partnerships that result in additional 50-75 annual eye surgeries	 Discuss and evaluate with 5. Ideally, execute partnership with 2+ 	 Complete partnerships to enable scale of 250 surgeries/yr 	
	 Improve "real-time" communications ability with SC Lions Clubs Each SC Lions Club has an appointed LVS ambassador Create mechanism to inform Lions Clubs about "real time" local surgery needs (Lions Community Care Network) 	 All district constitutions have an LVS ambassador position Increase % of SC Lions that personally donate from 15% to 30% 	 All district constitutions have an LVS ambassador position Increase % of SC Lions that personally donate to 50% 	

Vision for expanding LVS programs

Vision Statement	Requirements to meet vision statement
 LVS will opportunistically expand programs that complement our core eye surgery program for low income SC families. Criteria for a new program includes Is consistent with LVS mission and niche Removes barriers for clients to receiving eye surgery Completes the life cycle eye care from prevention to intervention Shows LVS is an innovative leader in vision health Expands funding sources and brand awareness with potential donors Has measurable impact 	 Expand # people served by >100 Expand # of LVS programs by ~3 over 7 years Increase the improvement in client quality of life by 25% (as measured by client rating before and after service) # SC counties with clients served increases from 27 (59%) to 46 (100%)



Strategies to achieve vision for programs expansion

LVS will opportunistically expand programs that complement our core eye surgery program for low income SC families

St	rategies to achieve vision	3 year metrics to measure progress	5-7 year metrics to achieve vision
•	Identify the programs that are most needed by the communities we serve and not provided by other organizations	 Program expansion options were reviewed for budget inclusion annually One new program added serving 50 people 	 Program expansion options were reviewed for budget inclusion annually 2-3 new programs added serving >100 people
•	Determine sources of funding to enable program expansion and timing of adding program into our budget	Same as above	Same as above
•	Determine metrics for success of programs we plan to add	Same as above	Same as above

Note: Annually, LVS will review program expansion priorities as part of the Annual Operating Plan process. Staff will prioritize program expansion opportunities with other budget needs and identify funding opportunities as part of the annual budget



Strategic questions – SC Lions relationship

How should we leverage our SC Lions relationship in the future? (leaders, clubs, members)

SC Lions Clubs

- Each SC Lions Club has an appointed "LVS Ambassador"
- Create mechanism to inform Lions Clubs about "real time" local surgery needs (Lions Community Care Network)
- More defined partnership between LVS and local Lions Clubs to deliver statewide vision screenings leveraging club volunteers to augment limited LVS staff capacity for screenings
- Utilize to increase LVS brand awareness to club members and their community

SC Lions members

- Higher % are individual donors increase from 15% to 30% in 3 years with ultimate goal of >50%
- >75% are subscribed to LVS email
- We aspire for >25% of SC Lions actively work to increase awareness of LVS outside of SC Lions Clubs

SC Lions leaders

- Annual training for District Governors, Vice District Governors, Council Chairs, Vice Council Chairs on LVS
- Past board member engagement program (e.g. speakers bureau)



Program & Events Committee Program SWOT Analysis

HEARING AIDS



- •Clients in need
- •Restoring hearing/quality of life
- •
- •
- .



- Expensive \$1500 per hearing aid/\$3K per perso could provide twice as many eye surgeries
- Not complementary to eye surgery program
- •Does not fit LVS name/brand
- Clients need them again in 3 years keep coming back. Not as "permanent" of a fix as eye surgery
- •Lions Clubs not aware LVS provides them

OPPORTUNITIES

- •Partner with Miracle Ear or similar agency/business
- •Utilize Unite Us as a referral source to provide annual average # of clients with services
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THREATS

- Funding
- ·Becoming too expensive
- •Taking from funding for eye surgeries LVS is known for
- •Does LVS have staff to deal with vision and he⊕ng cd-cerns?



Programs – strategic questions

What do we do with the hearing aid program?

Pros for continuing the program	Cons for continuing the program	Options moving forward
 Important program to some donor clubs, a handful of individual donors (including a planned gift donor) Could cause short term reduction in funds raised from some clubs; may want to donate to the new org picking up the program Need is still large with few orgs providing this program/service (one organization stopped their program recently). Some of our current clients might not have access to a hearing device (most are retired) 	 \$25k ~16 eye surgeries that funds could be used for Potentially confusing to the brand (vision health), donors. Not part of our stated mission No overlap with vision health clients Miracle Ear is an option for some clients. 	 Find a partner organization to pick up the program in FY2022 and/or create a list of referral resources Reduce budget (not eliminate); find partner for overflow applications (e.g. Miracle Ear)

Other facts/points

- In FY2022, we will spend \$25k (equivalent to 16 eye surgeries)
- Small # of referrals from Lions Clubs; used to get a number from Aiken club but now reduced

Conclusion

- Hearing Aid program is non-strategic, not complementary to core mission and should wind down over time. People in need will be directed to a comparable service to assist them.
- In FY2023, program budget will be reduced while we evaluate the success of our referral partner(s)/system.
- A clear message will be created to explain why we are doing this.



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Next steps to put the strategic plan into action

- Create a 2023FY annual plan
 - What components of the strategic plan will be part of 2023FY goals (e.g. partnerships)?
 - What components of the strategic plan will be part of 2023FY budget (e.g. marketing to increase brand recognition)
- Create scorecard to measure progress on strategic plan
 - Quarterly
 - Annual
- Review and communicate the strategic plan
 - With staff
 - With Board (part of orientation on May 18, 2022)
 - With major donors



Appendix

- SWOT Analysis
- Examples of Services We Will Consider Adding
- Strategic Questions Programs
- Strategic Questions LVS Office/Physical Location





Strengths

Programs

- Most comprehensive vision services of SC nonprofits (primarily eye surgery program) – types of surgery, age restrictions
- Ability to show outcomes
- Client service ability

 attention to detail,
 empathy with clients

Organizational Capabilities and Financials



- Endowment of \$1.5m
- Ability to show better stewardship – document program results and ROI
- Staff experience 10 years of programs experience with vision health and 7.5 years of SC fundraising experience
- Staff longevity

Relationships



- Partner network

 (ophthalmologists, anesthesiologists, surgery centers)
 that enables 4:1
 impact on dollars raised
- SC Lions
 leadership, SC
 Lions Clubs and SC
 Lions Club
 members natural
 market for
 volunteers and
 fundraising

Brand

Well known in many SC Lions clubs, especially SC Lions leadership

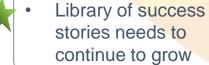




Weaknesses

Programs

- Need exceed capacity
- Reaching rural areas of SC for people in need (brand awareness)
- Hearing Aid
 Program awkward add-on/diverts
 resources? Is it consistent with mission?



Organizational Capabilities and Financials



- Small staff; staff time and bandwidth
- Board needs to continue to grow in skills and size
- IT capabilities are adequate but could improve (case management)



Org skills –
 marketing/digital marketing,
 IT, data management

Relationships

- Lions membership – aging, shrinking
- Reliance on Lions Clubs for fundraising
- Reliance on grants for fundraising
- Hard to reach rural Lions Clubs

Brand



 Confusion with Lions Club – grants and events confusion, program delivery confusion



 Brand not well known outside of Lions Clubs – both donors and program recipients







Opportunities

Programs



 Need exceeds ability to deliver – opportunity to expand # surgeries



- Opportunity to expand to other vision health programs
- Is there a partner to take over our hearing aid program

Organizational Capabilities and Financials



 Advocacy work could increase awareness with SC public and SC legislators



 How many SC/County/City politicians do we have relationships with that we are under-leveraging



- Fundraising from state funding, government grants, DHEC
- Fundraising from individuals (growth)

Relationships



 Identifying and cultivating major donors



Aging Lions could be major/planned givers



 Potential to merge with organizations with overlapping programs

Brand



- No clear SC leader for vision health
- Leverage partner network to improve LVS brand recognition





Threats

Programs

- Large hospitals and hospital systems buying practices and they become harder to work with (discounts, etc.)
- For profit eye banks could impact ability to deliver surgeries

Organizational Capabilities and Financials

- Attrition risk no backup to key skills/staff
- Location of office getting cut off from rest of Columbia

Relationships

- Declining Lions support – grants and individual fundraising programs not yet mature
- Could get negative reaction from Lions if we push too hard with major/planned giving, club fundraising
- Government, large philanthropist funds someone else

Brand

- Confusion with Lions Club brand continues to minimize fundraising and recognition
- Will need exceeding capacity hurt brand



Examples of services we will consider adding (pg 1 of 2)

Potential New Services	Rationale	Impact	Priority
Injections (wet Age Related Macular Edema and Diabetic Retinopathy)	These injections are important in slowing the progression of vision loss. Additionally, SC Commission for the Blind and Voc Rehab have stopped providing financial resources for these treatments.	Slow vision loss and in some cases improve vision.	Med
Vision Therapy (children)	Eye coordination is the ability of both eyes to work together as a team. Each eye receives an image of an object at a slightly different angle. When these two images are fused in the brain, it gives us three-dimensional vision. When this is off, it can cause double vision, blurred vision, tired eyes, and headaches. Poor eye coordination can cause vision-related learning problems. Vision therapy is expensive and often insurance does not cover it. There are no other known resources for this service.	Increase reading skills and overall success in the classroom.	Low
Guide Dog Ongoing Support	Losing your vision later in life has many mental health implications. In addition, annual food and vet costs can be a financial burden on low income individuals causing more stress.	Relieve the financial burden/barrier and allow individuals to focus on adapting to their new way of life.	Low
School Age Education Program	Research shows most habits are formed by age 9. The earlier we introduce healthy habits, the more likely these habits will stick for years to come.	Delay or prevent vision loss. Reduce the number of vision impaired individuals that is currently expected to double by 2050. Reduce the economic burden of eye condition treatments on the healthcare system.	High
Diabetes Prevention	1 in 3 individuals with diabetes will develop diabetes related retinopathy or macular edema, the leading causes of severe vision loss and blindness among working-age adults.	Delay or prevent vision loss and job loss.	High
Advocacy	Promote vision health in SC. Increase visibility and brand awareness.	Give a collective voice to the vision impaired community. Bring awareness and education to SC policy makers. Potential brand awareness.	Med



Examples of services we will consider adding (pg 2 of 2)

Potential New Services	Rationale	Impact	Priority
Transitions (COMS)	Preparing for life from a child into adulthood for anyone is a continuous process, particularly for the blind and vision impaired. They should be provided every opportunity and resource that a sighted child has to gain independence as an adult.	Blind and vision impaired children will have the skills necessary to continue their education, attain desired careers and fulfill their dreams.	
	Many surgeries are time sensitive. We sometimes have a waiting list that hinders immediate services.	Clients needing emergent surgery will	
Emergency Fund		receive the services they need without delay. We will remedy the chance of someone potentially losing their sight permanently.	High
Expansion of Eye Surgery			
Ophthalmic Drops for Cataract Surgery		Ease the financial burden for clients and family.	High
Pre-op/Post-Ops	The cost of initial exams and scans prior to surgery can cause a barrier for some clients. Ultimately, they may never have the surgery they need.	Remove the financial barrier and ensure no one goes blind because they never received the services they needed.	High
Vision Screenings		Clients who fail the vision tests will received the follow up care needed to ensure eyeglasses and or treatments needed will be received. The final result is that we save and/or improve the individuals vision.	High
		Offset the burden of service costs allowing	
Tiered Financial Assistance	Individuals can fall outside of the 200% poverty line guideline, but still do not have the financial resources to pay 100% of a self pay rate.	more individuals the ability to receive the	Low

Programs – strategic questions

Do we need to expand our partner program to meet the eye surgery vision?

Yes, but it is not at a critical level that warrants being an explicit strategy in our strategic plan. We will opportunistically add partners over time as we increase funds raised.

Can current program handle the volume of our vision (250/year)?

- Yes in terms of # of surgeries (42 partners can handle 6-7 each per year)
- The reasons for more partners are
 - Geographic proximity to client
 - Need more referrals to get to 250/year surgeries

Do we need additional reach in certain counties/regions?

- Northern SC (e.g. Richmond, Scotland counties in NC could serve)
- Increased partner density in Summerville/Dorchester/Charleston, Hartsville/Darlington (gaining population)
- Colleton County (population is moving there; likely to have potential partners now or in future)
- McLeod Health (?) Chesterfield, Marlboro counties
- Potential for Savannah area to serve southern SC
- Note: Hard to find ophthalmologists and surgery centers in some regions; they often refer to Columbia or other locations

What type of additional partners do we need and how many?

Ophthalmologists and surgery centers



Strategic questions – physical location

Issues with current location

- New construction has made it more difficult to get to office
- Not proximate to public transportation or downtown
- Safety area is less safe than it used to be

Why do we need a physical location?

- Marketing aspect to having a physical location? (not much that we found)
- Some employees may need a physical space to work
- Where to send physical mail?

Other comments/questions

- Do we have an out on our 3 year lease (1 year in) 120 day out for a 'justifiable reason.' Conclusion: We would need a lawyer to look at the lease to see what would constitute a "justifiable reason."
- Cost savings would be moderate to small (\$25-30k savings but would have to spend additional ~\$10-15k)

Conclusion

- Long term, we do not want to be at this physical location
- We will continue to evaluate based on our evolving workforce strategy, operational needs, potential desire to be proximate to state
 government officials and service partners, and budget impact

