



A Child's Haven (ACH) Strategic Plan (2019 to 2023)

Overarching strategies/themes:

- Strengthen our program model
- Create a desirable workplace
- Transform the building & grounds to maximize enrollment and delivery of core services

Current Mission

A Child's Haven treats children with developmental delays as a result of limited resources, abuse, or neglect and provides support and education for their families.

Proposed Vision

Children in our community are thriving with families that nurture their success.

Values

- **Mission First** – Dedication to the growth and success of the children and families we serve.
- **Community Relationships** – Enhancing our work through meaningful partnership and collaboration.
- **A Positive Work Environment** – Supporting employees in an environment of teamwork, commitment and passion
- **Measurable Outcomes** – Utilizing ongoing assessment to improve the effectiveness of our services.
- **Integrity** – Building trusting and respectful relationships with the children, families and community we serve
- **Stewardship** – Ensuring good governance, ethical management, transparency and accountability to our investors.

Introduction

A Child's Haven has a 27-year legacy of improving the lives of young children who have experienced severe developmental delays that have occurred through environmental means, due to abuse, neglect or limited resources. 2019 presents opportunities for us, as the community has become more aware of mental health issues and our state has begun significant work on the impact of Adverse Childhood Experiences (ACEs) on adults. Today, we are seeing unprecedented actions, such as the 2019 Congressional Hearing on "Identifying, Preventing, and Treating Childhood Trauma: A Pervasive Public Health Issue that Needs Greater Federal Attention." Also, in June 2019, Children's Trust of SC released a new study that examines lawmaker perspectives on adverse childhood experiences. People are beginning to recognize the importance of shifting our approach in public health to understand why behaviors occur in the first place. Hence, the focus is 'What happened to you,' instead of 'What's wrong with you.'

At A Child's Haven, many of our children reside in households with an adult caregiver with multiple ACEs when they were children. Having done this work for many years we find ourselves upstream to the challenges faced by adults. Unique to our work has been the consistent multi-generational parent/caregiver support that is focused, intentional and offered in the home to optimize success.

A Child's Haven is one of two Therapeutic Child Care (TCC) service delivery programs in South Carolina. TCC is a child-focused, family-centered intervention which targets the relationship between the child and the parent. Services are relationship-based, developmentally appropriate and trauma informed. We have increased our attention on strategies to improve infant early childhood mental health. At A Child's Haven, we are exploring strategies for mental health treatment to be effectively incorporated into child care programs.

Along with this opportunity comes challenges:

- high rates of staff turnover
- lack of clinicians trained in trauma-focused therapies
- insufficient state and federal funding to support trauma initiatives

Based on this knowledge, the Board embarked on a three-year strategic plan, creating a clear vision, identifying operational opportunities and agreeing on priorities in six areas:

1. Program excellence
2. Quality workforce
3. Organizational Infrastructure
4. Community Awareness
5. Financial Sustainability
6. Board Governance

The Strategic Plan will drive transformation as our mission work is increasingly grounded in data driven outcomes.

Strategic Priority: Program Excellence

Goal: Ensure excellence in delivery of effective and sustainable therapeutic services to families and their young children affected by developmental, social and emotional delays.

Objective A. Establish a model of Therapeutic Child Care (TCC) ready for evaluation of effectiveness by 2021

Baseline: 2018 Low Core Capacity Assessment Tool (CCAT) score in Service Delivery.

Responsibility: Senior Director of Program & Strategy; Clinical Director

Activities:

1. Assess elements of current model of therapeutic child care service.
2. Incorporate evidence-based models to treat the developmental and social/emotional needs of A Child's Haven's children and their families by December 2019.
3. Research potential streamlined, evidence-based parenting models that integrate parent education into home visitation family therapy, replacing Parents as Teachers.

Objective B. Support a qualified and stable workforce that ensures maximum enrollment of children while maintaining excellent treatment.

Baseline: Training by various staff members based on requirements of CARF, DSS, LogistiCare & Medicaid.

Responsibility: Senior Director of Program & Strategy; HR Manager

Activities:

1. Ensure quality onboarding & initial training of new employees.
2. Improve behavioral health training for new hires by identifying the best content and delivery method using adult learning principles.
3. Integrate a system with accountability for tracking and managing staff training and application of learning.
4. Enroll up to four employees in the SC Infant Early Childhood Mental Health Endorsement program annually.

5. Minimum of one team member become rostered annually in Trauma Focused Cognitive Behavioral Therapy (TF-CBT).

Objective C. Aggregate and share meaningful program data for quality improvement, decision-making, and demonstrating impact.

Baseline: Monthly program dashboard and fiscal year performance metrics is in place

Responsibility: Senior Director of Program & Strategy; Program Committee

Activities:

1. Review and enhance Key Performance Indicator dashboards (Board & Program Teams) to align with new service delivery expectations.
2. Streamline process of preparing and reviewing monthly dashboards with Finance Director.
3. Train Quality Assurance Associate on compilation of new monthly program team dashboards.
4. Emphasize outcome measures (changes in behavior, condition, knowledge, skills) rather than process measures (number of children served, racial/ethnic make-up of children) as much as possible.
5. Continue to track percent of monthly budgeted child enrollment capacity, percentage of planned discharges, percent of planned discharges where parent has completed education curriculum, average number of days on waiting list.
6. Develop quality-improvement strategies based on data trends.

Objective D. Establish discharge criteria based on child and family readiness.

Baseline: Individual plan of care- 85-100% goals met.

Responsibility: Senior Director of Program & Strategy; Clinical Director

Activities

1. Assess and document both the numbers and percentages of children and families we believe are discharged 'too soon' based on existing Medicaid standards.
2. Conduct a formal analysis and recommend the measures we believe should be used to determine 'readiness' for discharge.
3. Increase months at full capacity by decreasing waiting times and unplanned discharges, maximizing Medicaid reimbursement.
4. Determine financial impact for retaining (x#) children/families beyond Medicaid standards (per week, per month).
5. Develop a philanthropic strategy to support this commitment to meeting a higher standard.
6. Test recommendations/models that would meet 'our' threshold and be sustainable.
7. Develop procedures and process to guide staff in applying new criteria.

Objective E. Develop a mechanism to track and evaluate long-term outcomes of child and family.

Baseline: Inconsistent 3, 6, 12-month post-discharge follow-up. No mechanism to track past 12 – 18 months.

Responsibility: Program Case Coordinator

Activities:

1. Re-visit current follow-up questionnaire & align with desired and meaningful measures.
2. Build partnerships with School District and Health System to track children based on identifiers vs. child name.
3. Identify mechanism to compile and analyze data that is compatible with current data management system.
4. Identify appropriate time intervals for follow-up.

5. Develop a notification (reminder) system for follow-up.
6. Develop a plan to utilize data to improve program quality.

Objective F. Explore benefit and cost of establishing a Transition Room model (Charter Education Classroom) to benefit children prior to TCC discharge by January 2022.

Baseline: No Transition Room, hence, unable to assess how a child while do in an educational classroom.

Responsibility: Senior Director of Program & Strategy; Program Committee; Finance Committee

Activities

1. Identify the purpose and intended outcomes of the Transition Room.
2. Plan structure of room to meet purpose in terms of class size, square footage, staffing, and therapeutic needs.
3. Identify a sustainable funding source.
4. Create Transition Room with trained staff, curriculum, & outcome tracking in place.

Strategic Priority: Financial Sustainability

Goal: Ensure financial sustainability through prudent management of current funding, data analysis, and diversification of funding sources.

Objective A. Improve revenue diversity/resilience by strengthening program income, fee for service options, grants, special events, building use options, and operating reserves

Baseline: Fiscal 2019 budget includes 28% from Medicaid, 21% from grants, 11% from special events, 6% from United Way, 14% from gov. transportation meal revenue. There are two months of operating reserves which is not consistent with the agency's operating reserve policy, which is three to six months.

Responsibility: Finance; Development & Communications Directors; Executive Director; Finance Committee; Fund Development Committee

Activities:

1. Ensure ACH is maximizing available revenue funding streams to include additional Medicaid revenue options, fee for service and private health insurance.
2. Gradually increase operating reserves to withstand Medicaid fluctuations by budgeting for an operating cash surplus each year.
3. Develop annual fund-raising plan based on historical trends, the acceptable Medicaid proportion of revenue, and reserve goals.
4. Identify and pursue additional private/public sources of revenue (to include federal funding streams such as, Families First, SAMHSA, ACF-TANF).
5. Identify revenue generating uses for building and grounds.

Objective B. Increase efficiency of managing growth of operational expenses

Baseline: Monthly Finance Committee meetings.

Responsibility: Finance Director

Activities:

1. Calculate actual cost per day per child/family compared to Medicaid and other government reimbursements to increase awareness of funds needed to make up for the shortfall and communicate accurately to donors/partners/stakeholders.

2. Determine the ratios of employees/dollars we need to fill the building and maximize income.
3. Project need for 'scholarship' funds and financial impact, and budget to meet as much of this need as possible without jeopardizing financial health.

Objective C. Maintain transparency and good stewardship to attract and retain individual donors

Baseline: Individual donors contribute 11% of revenue with an additional 15% from attending special events.

Responsibility: Senior Director Development & Communications

Activities:

1. Create a donor dashboard to track average donor gift and donor retention rates.
2. Keep GuideStar and Charity Navigator profiles updated and maximized.
3. Promote Life Lifter option for monthly giving and provide special recognition of those donors.
4. Create a Scholarship Fund that is restricted to extending services for children not ready for discharge and no longer being paid for by Medicaid and promote as an option for restricted gifts.
5. Maximize strategies, such as Havens Heroes, to attract and grow a younger generation of donors.
6. Engage Board in thanking donors.

Strategic Priority: Quality Workforce

Goal: Support a qualified and stable workforce that ensures maximum enrollment of children while maintaining excellent treatment.

Objective A. Improve workforce recruitment, orientation, and retention as well as staff morale, unifying culture and sense of appreciation by July 2020.

Baseline: Monthly PULSE staff surveys indicate positive and negative staff perceptions of their work environment and the agency. CCAT indicated low scores in staff feeling unified, managing performance expectations, conveying unique value of staff.

Responsibility: Human Resources Manager; Executive Director; Organizational Culture Committee

Activities:

1. Identify crucial job satisfaction factors for A Child's Haven workforce and integrate those factors as much as possible into the employee experience.
2. Upgrade and refine exit interviews for different staff levels.
3. Apply PULSE survey results and exit interviews to improve employee experience.
4. Ensure that recruitment, hiring and orientation activities are repeatable and unambiguous.
5. 'Right size' employee workloads and explore 'floater' pool for vacancies.
6. Increase opportunities for the Board to demonstrate appreciation of staff.
7. Continue current efforts to boost staff morale.
8. Track staff turnover & retention.
9. Complete a salary survey to ensure A Child's Haven is competitive.
10. Identify 'competing' nonprofits and compare employee total compensation package.
11. Standardize job descriptions and tie in mission/vision/values.
12. Track changes in organizational culture on the CCAT – look for increased score in "unifying".
13. Commit to regular staff supervision & professional development for staff.
14. Assess staff training needs regularly based on observation, parent input, program results, and feedback from certification and funding organizations.
15. Explore community-based partnerships that can provide training opportunities.

Strategic Priority: Organizational Infrastructure

Goal: Maximize facility utilization and plan for future growth.

Objective A. Identify strategies to maximize efficiency of current building & grounds and plan for future growth.

Baseline: Insufficient space for individual play therapy or individual family meetings. Rough plans for expansion have been drafted

Responsibility: Executive Director; Building & Grounds Committee

Activities:

1. Prepare a current facility utilization report that reflects number of hours, time of use, and purpose for each room to include details as to how additional space would be used.
2. Share maximum enrollment potential now (with staff vacancies) and at full staffing level and compare to actual enrollment over the previous 6 months.
3. Work with DP3 Architects to identify enhancements needed to current facility to accommodate 93 children and growing mental health needs.
4. Explore creative repurposing of current space to accommodate additional children and staff, including scheduling changes, room reconfigurations, and room switching.
5. Document definitions for each additional type of space needed (e.g. de-escalation room) including purpose, square footage, windows, mirrors, lighting, camera, how many children for how long, how many staff, what type of staff.
6. Develop a business plan that compares revenue.

Objective B. Ensure strong and beneficial partnerships that are structured correctly and well managed.

Baseline: SC Department of Social Services; SC Department of Health & Human Resources; The Duke Endowment; Children's Trust of South Carolina; PRISMA Center for Pediatric Medicine; Help Me Grow SC; First Steps; Child and Adult Food Program; Live Well Greenville; SYNEX; United Way of Greenville County; ECPI University; Greenville Behavioral Health Coalition

Responsibility: Senior Director Program and Strategy

Activities:

1. Develop listing of current partnerships that includes investment, impact, management, and payoff and share with staff leadership and Board annually.
2. Eliminate wasteful partnerships and set criteria going forward for current and potential partners.
3. Increase specific 'inter-partner' communications that can result in increased referrals.
4. Ensure that each partnership has a designated staff liaison.

Objective C. Explore after hours uses of the building to generate revenue

Baseline: Building is not used for any other purpose than Child's Haven business.

Responsibility: Building and Grounds Committee Executive Director

Activities:

1. Explore insurance, security, legal, and tax implications of space/kitchen rentals.
2. Assess if there is community demand from private sector infant early childhood mental health providers for group and individual therapy space.

3. Determine if the building has suitable space for those services, and/or if modifications would be needed.
4. Determine market rental and timeframes for rentals, if feasible
5. Explore community demand for kitchen rentals
6. If the rental option seems viable, factor it into building modification plans over time.
7. Appoint or hire staff member to track rental and assure spaces aren't overbooked.

Objective D. Explore opportunities to become a training site for local, state & national partners.

Baseline: Currently not a training site, desire to be a 'replicable' program. Held one regional PAT training on campus.

Responsibility: Senior Director of Program; Clinical Director & Strategy; Program Committee

Activities

1. Identify areas of expertise for ACH. Set criteria for when A Child's Haven is 'ready' to train other partners and the staffing structure needed to support 'students'.
2. Set standards to ensure that training programs will not impact current operations, programs/services.
3. Develop a fee structure for providing training and assess whether the market is willing to pay for this service.
4. Develop a range of training programs with associated fees and promote within target customer pool.
5. Engage funding partners in discussions about building a 'replicable' model of Therapeutic Child Care and the pros and cons of that concept.

Strategic Priority: Community Awareness

Goal: Increase community awareness of A Child's Haven through targeted communications and marketing.

Objective A. Develop a marketing and communications plan with potential to increase referrals, employees, volunteers, and younger donors by December 2020.

Baseline: There is a website and social media presence & staff assigned to communications and community engagement. Remote location is a disadvantage. Low CCAT scores in marketing skills. Annual Impact Report created in 2017. Poor messaging.

Responsibility: Senior Director Development and Communications

Activities:

- Identify skilled Board members or volunteers to help with this project.
- Allocate funds towards messaging, marketing and communications in annual budget.
- Create informative messaging to include stories and education of A Child's Haven impact.
- Keep website fresh and updated as well as social media and track number of followers, postings of interest, etc.
- Develop promotion strategies that reach younger groups interested in community service/support.
- Track conversion of social media followers to donors.

Strategic Priority: Governance

Goal: Adopt best practices of governance and nurture full board member engagement.

Objective A. Assess, enhance and maintain board engagement and performance using measurable tools.

Baseline: Low CCAT score on leadership sustainability; require more follow-through on Board engagement. CARF 2019 Gov recommendations.

Responsibility: Board Governance Committee

Activities:

1. Evaluate Board members annually with broad criteria (a scorecard) that includes attendance, financial contributions, creating valuable connections, in-kind contributions, door opening, technical advice, Committee time investments, etc.
2. Evaluate Committees annually starting with their strategic planning commitments.
3. Develop a process for Board input around the schedule for Board meetings to ensure maximum participation of members.
4. Review and update Board bylaws and processes starting with recommendations in the Organizational Assessment and CARF 2019 Reaccreditation Report.
5. Develop a Board expectations document with a “sign-off” element that confirms the commitment for each individual Board member as they begin service.
6. Develop and/or strengthen the focus and effectiveness of Board Committees.
7. Develop a long-term succession plan for the Executive Director and key leadership staff.

Objective B. Create and implement a structured approach to Board orientation and education that clarifies and fosters member engagement by June 2020.

Baseline: Annual Board Orientation (January).

Responsibility: Executive Director; Board President

Activities:

1. Share current ‘hot button’ topics with new Board members.
2. Provide an experienced ‘Board buddy’ for new Board members.
3. Continually assess Board succession, diversity, and skills and follow a consistent process for vetting and integrating new members.
4. Provide Board education at least annually.

Objective C. Enhance communications of Board and committee work between Board meetings.

Baseline: No Board portal.

Responsibility: Governance Committee; Executive Director

Activities:

1. Develop a method for easy access to Board related documents, reports, minutes, etc. such as a Board portal.
2. Update Board between meetings about pressing issues/projects.