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**OLH MISSION**

**Mission Statement**
Our Little Haven is relentlessly committed to providing early intervention services for children and families. Our community of professional caregivers creates a safe, secure and healing environment for those impacted by abuse, neglect and mental or behavioral health needs. We make the hurting stop, the healing begin and the love last, one family at a time.

**Statement of Who We Are**

**Vision Statement**
Creating a Community Where Children Are Cherished

**Our Values**
Guided by our belief in a loving God:
- We place the well-being of the child as our first and most important priority
- We value the people who care for the children
- We serve our families with love, care and compassion
- We are dedicated to the highest quality of service and professional expertise
- We provide a loving, caring and nurturing environment
- We embody a passion for our purpose
PICTURE OF THE FUTURE - 2018

Financial
- We have a strong balance sheet with net assets between $5MM - $7MM.
- We have grown slightly by expanding our locations and services to a presence in the greater metro area and revenue now consistently exceeds $3MM/year.
- We continue to operate at break-even or better to insure long-term stability.

Customer
- We consistently serve in excess of 650 children and now have a location in the greater metro area for all three of our programs
- Our programs are recognized as “best in class” in the region:
  - Pre-school (OLA)
    - We have established a specific / standard curriculum that serves as the core approach with modifications to meet individual needs.
    - We have created multiple opportunities for parent involvement and periodic parent get-togethers to share experiences.
    - We have appropriate admin support to allow staff to focus the majority of their time on therapeutic activities.
  - Keystone
    - We have become a more familiar name in the community with increased awareness of the services that we offer.
    - We have marketed ourselves in a way that lessens the stigma with receiving mental health services.
    - We have become a respected and high-quality training site for graduate level social workers and psychologists.
    - There is recognition and understanding within the agency of the expertise we hold and the professional services that we provide.
  - Taylor Family Care Center
    - We have improved our case management by reducing the caseload to 10-11 per manager.
    - We have implemented services to become more of a “one-stop-shop” (Therapeutic / Educational / Medical support / Permanency driven)
    - Our rate of achieving permanency (reunification, adoption, guardianship) for the children we serve exceeds 35%.
    - We have established a strong presence as resource provider for the foster parenting community.
Operational
- We have an excellent system for cross referrals and integration across programs and we track our results at providing the full range of service that our clients need.
- The agency has become a one-stop location for foster care needs, mental health care, educational and medical case management to meet all of our families' needs.
- We provide necessary attorney support for our staff to guide them through unusual legal issues.
- We have significantly increased our brand awareness among our consumers, professionals and donors.

Organizational
- We have developed the critical staff necessary to support the growth and we have reduced the multiple roles that some of our key people hold by developing and delegating to others in the organization.
- We are rigorous in our approach to professional growth and our efforts to stay abreast of new models and innovation.
- We have embraced the management principles of ARC to improve dialogue and problem solving within the agency.
- We continuously review intra-program functioning for opportunities to improve.
- There is a clear and solid succession plan for senior leadership and other key positions.
MEASURES OF SUCCESS

Financial
• Assets
• Revenue
• Excess funding

Programming
• Children served
• Program metrics
  o OLA
    ▪ Symptom reduction / increase in functioning (target > 70%)
    ▪ % stable home placement post-OLA
  o Keystone
    ▪ Symptom reduction / increase in functioning (target > 70%)
    ▪ Days on wait list
    ▪ Client satisfaction feedback (target >90% satisfied or very satisfied)
  o Taylor
    ▪ Permanency rate (target > 31%)
    ▪ Placement moves (2 or less)
    ▪ Client satisfaction (target > ??)
    ▪ Re-entry within a year (target = 0)

Operational
• Cross referrals and consultation
• Brand awareness??
  o Percentage of clients that found us through referral
• Donor $
• Trustee contribution $

Organization
• Staff retention
• Professional development training hours / employee
1. **Further strengthen our program effectiveness for our clients**

   A. Improve our programs to best in class
      
      I. **Taylor**
         
         i. Expand programming for permanency and overall child well-being.
         
         RESP: Tiffiany, Mike Fitzgerald, Nicole,
      
      II. **Keystone**
         
         i. Continue to enhance implementation of leading edge assessment and treatment methods.
         
         RESP: Lizette, Christi, Shana, Jennifer
      
      III. **OLA**
         
         i. Expand the educational curriculum.
         
         RESP: Susan, Sarah, Kari, Leisha

   B. Identify and pursue opportunities to provide training for graduate level and professional consultation.
      
      RESP: Lizette, Christi, Shana, Susan

   C. Continue to add services to move toward a one-stop location for clients’ needs:
      
      I. Enhance our ability to advocate (Family Support Team) for OLA and supporting families in the permanency process.
         
         RESP: Susan, Mike
      
      II. Improving community and interagency understanding of the Keystone continuum of care.
         
         RESP: Christi, Shana, Jennifer, Colleen, Ebony

   D. Investigate the feasibility of a location in St. Louis County.
      
      RESP: Mike, Scott

   E. Improve the system of cross-referrals and integration.
      
      I. Consider creating a role for a “coordinator” to facilitate cross-referrals and integration.
         
         RESP: Scott, Mike
      
      II. Implement a process for improving internal and external referrals and service partners.
         
         RESP: TBD (Coordinator) or (Lizette, Susan, Tiffiany, Mike)
2. **Improve our internal operations and management effectiveness**

A. Reinvigorate the ARC process across all programs:
   
   I. Determine how to enhance / expand the OAT process.
      RESP: Ann, Maggie, OAT
   
   II. Explore how to integrate and align PQI (Performance and Quality Improvement) to the strategic implementation process.
      RESP: OAT
   
   III. Implement ARC training for new employees.
      RESP: Ebony, Jennifer, Lizette

3. **Develop the organizational capacity and capability**

A. Assure that we have the critical staff to support growth (hiring and developing):
   
   I. Define the role and responsibility of an associate manager for each program and develop / hire for the position.
      RESP: Mike, Susan, Tiffiany, Lizette
   
   II. Fill key, vacated positions in the organization.
      RESP: Mike, Susan, Tiffiany, Lizette
   
   III. Reduce the caseload of Case Managers to 11:1.
      RESP: Tiffiany, Mike

B. Continue to invest in education, training and development of staff:
   
   I. Ensure that staff employees have an individual training and development plan.
      RESP: Nicole (Taylor), Lizette (Keystone), Susan (OLA)

C. Improve the onboarding process
   
   I. Reinvigorate the orientation committee with this assignment.
      RESP: Scott, Chris Munoz, Mary

4. **Enhance the market awareness of OLH**

A. Brand awareness
   
   I. Assure community awareness of the full range of services we offer:
      
      i. Support opportunities for public communication and presentations.
         RESP: Chris Munoz
      
      ii. Develop the marketing collateral.
         RESP: Chris Munoz
      
      iii. Develop our story telling capabilities to build the communication skills of all employees within the agency:
         
         i. Foster closer collaboration between marketing and programming staff.
         RESP: Christi, Chris Munoz
IMPLEMENTATION MANAGEMENT

Meeting Schedule
• OAT / PQI combined monthly meeting (2 hours)
• 3rd Wednesday of the month 9:30 – 11:30
• Administrative person to keep notes

Agenda
• Scorecard review
• OAT
  o Review actions from prior meetings
  o Program review – news and updates
  o Proposal reviews / approvals
  o Help needed
  o Determine follow-up action on areas of poor performance or great performance on the scorecard

• Strategic
  o Review one priority each month (invite team leaders to review their initiatives)
    ▪ What has been accomplished in the past 4 months?
    ▪ What is planned for the next 4 months?
    ▪ What help is needed?

• Meeting review
  o Decisions and action steps from the meeting.
  o What did we like and not like about this meeting. How can we improve for next time?