



griffin centre
EVERYBODY COUNTS

GRIFFIN CENTRE STRATEGIC FRAMEWORK: 2016 - 2017

KEY AREA

TOWARDS CAPABILITY & CAPACITY

TOWARDS VISIBILITY

TOWARDS TRANSFORMATION

STRATEGIC THRUSTS

1 **Support Innovation**
Support Outside-the-Box Opportunity-Seeking initiatives.

2 **Build Sustainability**
Create Leading-Edge Opportunities to Profile the Agency.

3 **Manage Our Risk**
Evaluate Risks in the Agency at All Levels.

4 **A Compelling Profile**
Attract New & Existing Funders / Donors.

5 **Board Direction**
Ensure Capacity, Skills & Resources to Implement Strategies.

STRATEGIC OBJECTIVES

Partner to Improve Community Care
Impact through Innovation

Optimize Our Resources
Build on Our Strengths

Continuously Improve
Attract, Retain & Develop Talent

Enhanced Client Lives
Lead in Our Community

Build a Sustainable Resource Base
Sustained Giving

OPERATIONAL OBJECTIVES

A Enhance the Continuum of Supports and Services for Clients
B Assess Service Outcomes & Profile Innovations

C Continue to Identify Efficiencies in Operations
D Demonstrate Staff Commitment to Mission/Vision/Values

E Improve Agency Core Processes & Systems
F Improve Compensation & Clarify Roles

A Review Service Feedback & Implement Recommendations
B Develop Research, EBP & Quality Assurance Capacity

A Increase Agency Revenues to Support Service Delivery
B Develop Plans to Stabilize Physical Services & Operations

2016-2017 ANNUAL INITIATIVES

A Secure additional "Walk In" partners
B Implement PBIS in Intensive Youth Services

C Review Strategic Alliance opportunities
D AO training plan focuses on allyship and work with clients

E Develop tracking mechanisms for recording & file audits
F Review staff compensation

A Complete satisfaction surveys for all services
B Develop a framework for program evaluation

A Implement FR plan to increase revenues
B Secure annualized funding re: Ministry Business Cases

2016-2017 SUCCESS INDICATORS

A 2 new partnerships secured
B EBP Implemented in Intensive Youth Programs

C Report to BOD. Decisions made
D Training provided. Staff engaged in work

E Tracking system implemented
F Orientation system and jobs reviewed and aligned

A 85% Satisfaction Achieved
B Plan implemented

A Fundraising revenues increased per FR plan
B Business Cases addressed

Year End Review

KEY
AREA

TOWARDS CAPABILITY & CAPACITY

TOWARDS VISIBILITY

TOWARDS TRANSFORMATION

2016 - 2017
ACHIEVEMENTS

A The Centre has secured 2 partnerships, in addition to an earlier partnership. The Centre was successfully chosen to host the Urban Tele-Link Mental Health project and has recently partnered with a number of other CMH agencies on the Big White Wall project, an on line peer support program that will enhance services offered to our walk in clients.

ACHIEVED

C The CEO, on behalf of the Board and Centre, continues to explore the feasibility of a Strategic Alliance. The Board of Directors approved a 4 point plan to identify “deal breakers and accelerators” to facilitate decision-making with respect to this matter which will commence as soon as the other agency addresses some physical plant planning issues.

ONGOING

E With the Centre’s Director of QA and Program Evaluation on leave this past year, the work on the Centre’s quality improvement plan has been put on hold. The Director of QA and Program Evaluation is scheduled to return in the fall of 2017 and this will be an immediate area of focus.

ON HOLD and ONGOING

A The “Client Voice” pilot that was scheduled for roll out in January 2017 was delayed as a result of challenges with the software. The online client satisfaction will be offered to clients who have completed service beginning in May 2017. With the absence of the Director of QA and Program Evaluation, the Centre has delayed the roll out of a referral source/partner survey until fall 2017.

ON HOLD and ONGOING

A The Centre’s Director of FR and Development with support from the Board FR Cabinet launched 2 successful fundraising events during this past year, EMBODY Yoga and the Holiday Giving Campaign. In the coming year, the Board FR Cabinet will update the Centre’s Fundraising plan with a focus on increasing revenues and securing grants from foundations.

ACHIEVED and ONGOING

B The PBIS Working Group continues to develop the implementation framework for the PBIS model and is finalizing the mapping process of PBIS against current processes. KoNote continues to be implemented in our intensive programs and work is underway in finalizing the Goals and Indicators library. One residential program has trained staff on the KoNote E-logs and will be piloting the system. The focus on implementation of PBIS will continue in 2017/2018.

PARTIALLY ACHIEVED and ONGOING

D The A/O training plan has been re-established. The 2 day “Everybody Counts” training, with updated curriculum is being offered to newly hired staff twice per year. The Centre’s Diversity Equity and Inclusion Committee has approved the new work plan and have begun to implement key activities on the plan. The DEIC celebrated successful agency wide activities acknowledging Black History month. The management staff have begun training on AOP relationship practices and principles and will continue this training into late 2017.

PARTIALLY ACHIEVED

F As a result of the Centre’s commitment in offering competitive salaries as well as the commitment and support of the Board, the Centre was able to provide all staff with a 2% salary increase in April 2017. In addition, the Centre was able to provide a one time recognition payment to staff. The Centre will continue to advocate to the Ministry re: the need for fair and equitable salaries and will continue to closely monitor its expenditures in the coming year.

ACHIEVED

B The Centre’s Director of QA and Program Evaluation is scheduled to return in the fall of 2017. Development of a program evaluation framework will be a key deliverable for 2017-2018.

ON HOLD and ONGOING

B The Centre received additional fiscal funding to assist the Centre in addressing client needs (i.e., flex funds) and in agency pressures (i.e., training, residential repairs). The bulk of the funds transferred related to the development of individualized support plans for clients via flexible funding associated with the operation of the GCSN and Urgent Response. Both the GCSN and WIT received increases in annualized funding. Rent issues are being addressed fiscally.

PARTIALLY ACHIEVED