

Strategic Impact Plan (SIP) Executive Summary January 2023

Childhaven started our last strategic impact planning process by asking ourselves an important question:

What would we do differently if we made strategic decisions based on what advanced our purpose, vision, mission, goals, and impact, as opposed to what simply advanced our organization?

The answer to that question was... We would do A LOT differently!

This Strategic Impact Plan (SIP) was born out of a Strategic Plan that was originally drafted in 2015 after over 12 months or research and community listening. In 2017-2018 we took a fresh look at the plan, did more research and community listening, and updated the strategies within the original *Strengthen, Expand, and Lead* framework. Then, in FY21 and FY22, we repeated an even more robust version of this process.

For the current version of the SIP, we spent well over a year analyzing dozens of community-based need assessments, listening to stakeholders, and debating what is Childhaven's highest and best use in the community. What follows is the Executive Summary of a comprehensive Strategic Impact Plan that is over 150 pages long. While we are proud of our bold new plan, Strategic Impact Planning at Childhaven must continue to be a perpetual process of continuous improvement in which we commit to challenging the status quo through strategic thinking and decision making, taking calculated risks, and rapid cycle experimentation. We must remain adaptive, agile, innovative, entrepreneurial, and opportunistic as we seek to have the greatest positive impact possible given the resources at our disposal. We fully expect, and even hope, that some of the strategies articulated in this plan will evolve and change as new threats and opportunities emerge.

A Quick Look Back

Over the past five years, due to the combined commitment and effort of leadership, staff, board, volunteers, and financial supporters, Childhaven has transformed nearly every aspect of our organization.

2016 Childhaven	2023 Childhaven
One service line in one program area	14 service lines in 5 program areas
Serving about 300 children per year	Serving over 1,500 families per year

A program service delivery model that was based on old science and outdated white savior philosophies	Building today's best science in the areas of Early Childhood Mental Health, healing-centered care, anti-racist practices, and the strengthening families framework into all services
Focused almost exclusively on children	Focus on children, families, and communities
No organization recognition of secondary trauma and the link between the well-being of our workforce and the success of our services	A growing analysis and action plan to invest in and care for Childhaven's workforce
Absence of a logical or equitable compensation structure	A comprehensive market-based, fair, and equitable compensation structure that was developed by an outside comp specialist
Nearly 100% center based	Largely home- and community-based in most programs and service lines
65% philanthropy funded, 35% one state contract	65% of funding derived from multiple federal, state, county, and city contracts, 35% from philanthropy, and growth in insurance revenue
Over the previous 10 years Childhaven had lost over \$7,000,000	Consistent break-even budgets and moving towards consistent retained earnings of at least 5% per year
No partnerships with other community-based organizations or	A wide variety of in sector and cross sector partnerships, including two
healthcare enterprises	mergers
External communication that was based on a white savior mentality that	Communication that centers on the strengths, assets, and potential of those
often unintentionally stigmatized those we existed to serve	we serve recognizing they are the experts on the needs of their children and family
Very few referral sources	A growing cross-disciplinary referral network
No explicit anti-racism strategies	Intentional focus on anti-racist organizational development, with a plan that embeds these strategies throughout the organization
No policy and advocacy agenda beyond "don't lose ECLIPSE funding"	A much more robust, growing, and evolving policy and government relations agenda
Insufficient infrastructure in nearly every area	Improving infrastructure in nearly every area including HR, IT, Program Operations, Finance, Philanthropy, Communication, data, etc.
Poor workforce moral and a culture that was siloed and very reactive, often bordering on toxic	Moving towards a values-driven culture that is reflective, curious, and collaborative
A belief that Childhaven could 'end the cycle of abuse and neglect'	A recognition that society will never improve outcomes for kids and families
through our relatively small program	unless we address the systems that caused and perpetuate the problems

2022-2025 Organizational OKRA (Objectives, Key Results, Actions)

Current State
For the past 4 to 5 years, Childhaven has largely been focused on adding essential evidence-based services to our continuum of care and
transforming our culture, program, and business model. While we have made great progress, and that work is ongoing and critical to helping us
advance our mission and vision, it is insufficient. We recognized that one of two things needed to happen We either had to:
1. Reduce the size of our goals and vision to something that might be achievable with the strategies we had been employing

2. Scale up the size of our strategies to those that might have the potential to enable us to achieve our goals and advance our vision

Children and families both contribute to and rely on a broad network of support to thrive. Some of these networks are grounded in direct services like those Childhaven provides, but much of the community and systems level influences on children and families extend well beyond our direct service reach—or the direct service reach of any direct social service provider. Most children in Puget Sound will never receive direct support from Childhaven. Therefore, a strategy predominately focused on growing services is misaligned with our vision.

We have come to recognize that if we are going to make strides towards realizing our <u>Theory of Change</u> (copied below) and our vision that *ALL* children are safe and healthy; Thriving physically, socially, emotionally, and educationally; and Well-nurtured by family and the community, we must develop and execute strategies that are commensurate with the size and scope of our vision. That's what this Impact Plan is attempting to do.

We believe, and the research supports, that the best way to maximize our impact and advance this vision is to work at multiple levels within the systems of care that support children, families, and communities, including: 1) Direct child and family level, 2) Community and provider level, 3) Systems and population level. Collectively, we are calling this strategy our three tiered **"ecosystem approach"**.

This approach and our current strategies are backed by research and many thought leaders:

- <u>Numerous research studies</u> indicate that the most significant factors in developing a strong foundation for social and emotional competence are "children's relationships, the activities they have opportunities to engage in, and the places in which they live, learn, and play" (Center on the Developing Child at Harvard University).
- Every year we spend billions of dollars to address complex challenges, however, we fail to achieve the desired results, whereby, the work we are doing on the ground isn't adding up to the impact we want to see in our community. Most solutions have historically focused on applying programmatic fixes to the symptoms of these failing systems, *rather than transforming the systems themselves to catalyze enduring change*. Living Cities
- Individuals, organizations, and even sectors can no longer work in isolation and expect to move the needle or create lasting impact on increasingly interrelated systems-level problems. As a society, we aren't facing new problems so much as wrestling with systems that no longer serve us. In other words, in this era of constant and rapid disruption, **social change is systems change.** Leading Systems Change
- There are systemic root causes of health inequities in this country that can be overwhelming and that will take considerable time to address. It will require system-level changes to eliminate structural racism, reduce poverty, improve income equality, increase educational opportunity, and fix the laws and policies that perpetuate structural inequities. Until these root causes are addressed, health equity will not be fully realized. <u>Community Based Solutions to Promote Health Equity</u>

- The striking challenges of our time such as health care, the environment, education, and poverty are complex, whether on a local, national, or international scale. Yet all too often we approach these issues with piecemeal and siloed solutions, and with efforts that aren't sufficient to address the problems at the scale at which they exist. <u>Stanford Social Innovation Review</u>
- Ecosystem building efforts engage social entrepreneurs, policymakers, philanthropists, and other national and local stakeholders to transform how government, nonprofits, and philanthropy think about how to collectively pursue social change and allocate resources. Through this work, we leverage deep insights of social innovators in our community to influence how policies are shaped and how resources flow in the sector to help remove barriers to sustained social progress. <u>New Profit</u>

Driving big, equitable change requires more than backing individual programs and organizations because we know that even the most high-impact organizations working in isolation cannot address the challenges we face at the scale in which they exist. **Sustained, large-scale change demands addressing systems through collaboration across organizations and sectors!**

We believe that Childhaven's 110+ year history, resources, brand, and leadership make us uniquely situated to take on this challenge in Washington state, and beyond. In short, we:

- Are one of a small handful of direct service providers in the state with a truly transdisciplinary early childhood-focused continuum of care that includes expertise in developmental supports, Early Childhood Mental Health, early learning, and home visiting.
- Have both the brand recognition and the relationships at the policy and community level to influence early childhood systems of care.
- Have a leadership team and board who are committed to challenging the status quo, paired with the vision and experience to imagine the path towards a better future, and the expertise across critical areas necessary to execute this plan.
- Through the sale of our Seattle building and a \$20,000,000 philanthropy campaign over the next three years, we have a once in a lifetime opportunity to invest in bold new strategies and scale our impact to previously unimagined levels.

Importantly, our three tiered eco-system approach is also what is being recommended by leading bodies in this work. In June of 2022, six federal agencies put out a joint paper on how to best address the children's mental health crisis in America. The recommendations were 100% aligned with the strategies we had identified back in 2019.

- 1. Implement evidence-based practices that support positive social-emotional development and mental health for all children and wellness for every caregiver. (Strengthen Direct Services Strategy 1a.)
- 2. Prioritize workforce wellness and enhance workforce capacity to identify and respond to children's and families' social-emotional and mental health needs. (Expand Indirect Services / Center for Excellence in IECMH Strategy 2a. and 2b.)
- 3. Leverage policy and funding to increase access to social-emotional and mental health support and reduce barriers to access. (Lead Systems Change and Public Policy Strategy 3b.)
- 4. Use data to promote equitable implementation and outcomes. (Investment within Infrastructure Strategy 2a.)
- 5. Raise awareness of the importance of social-emotional development and mental health for young children (Public Will Campaign Strategy 3a.)

- 6. Encourage early childhood programs and other services and systems that interact with young children and their families and caregivers to prioritize access to the full continuum of social-emotional and mental health supports and services (Embed Services & Expand Reach Strategy 2b.)
- 7. Set a vision for stronger collaboration and coordination across early childhood systems and programs (Partnership Strategy embedded throughout all of our strategies)

Optimal Future State (Our Purpose and Vision for a Better Future)

ALL children are safe and healthy;

Thriving physically, socially, emotionally, and educationally;

Well-nurtured by family and the community.

Questions to Ask and Challenges to Overcome

For over a century Childhaven has been a direct service provider. Will funders, board, and leadership have the sustained fortitude to move us to becoming much more of a change agent, even if that means limiting the growth of direct services so we can invest more into tier two and tier three strategies?

At a population level, outcomes for kids and families are not improving. In fact, by most indicators, child and family well-being is getting worse, especially for children of color and children living in poverty.

With the rise in complex, interdependent, and emergent challenges, effective change to secure a brighter and more equitable future for all will require transformative organizations, communities, and systems that are constructively dissatisfied with the status quo and actively embracing multi-sector approaches to improving outcomes. Will others be willing to make this shift, or will they prefer to stay within the comfort of today's reality?

The research is clear: health, education, and other systems must be fundamentally aligned around Early Childhood Mental Health to prevent and mitigate the impact of early adversity and navigate towards a world in which all children and families thrive. To make progress at a population level, we will need to invest more into prevention and early intervention strategies – will taxpayers be willing to do that?

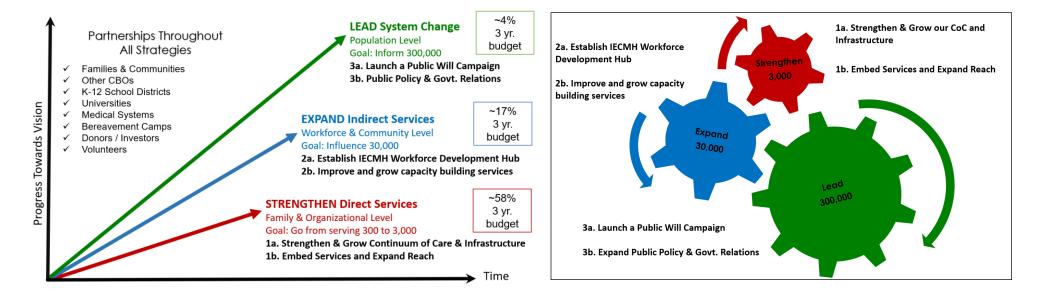
	Childhaven is widely recognized in Washington State and beyond as the leader in addressing childhood trauma and
	adversity through early childhood mental health and the three-tiered ecosystem approach as detailed in our Strategic
	Impact Plan. We are transforming how we, as a community, provide care to young children and families both within
	our own continuum of care and through workforce and system investments.
Three-Year OBJECTIVE	
	We are making continuous improvements in all aspects of programs, operations, and philanthropy; workforce and partnership development; and systems-level change. In all three tiers (Direct Service, Indirect Service, and System/Population) we are experiencing year over year growth, advancing racial equity, and beginning to consistently add to our cash reserves, which will enable us to make greater impact and better withstand future adverse trends and headwinds.

Targeted Outcomes	 Families and other caregivers have the skills, support, and resources necessary to strengthen their relationships, increase protective factors, and meet their children's needs across their development. All child and family serving systems implement infant/early childhood mental health models, and as a result, the early relational health needs of children are met. The well-being of children and their caregivers is enhanced as evidenced by measurable improvements in resilience, health, and early learning. 		
KEY RESULTS (3 Year Goals)	KR #1	KR #2	KR #3
The 3 metrics that will lead	STRENGTHEN Direct Services	EXPAND Indirect Services	LEAD System Change
to the realization of the	Family & Organizational Level	Provider & Community Level	Population Level
objective	Goal: 3,000 Served	Goal: 30,000 Impacted	Goal: 300,000 Informed
	Become one of the most comprehensive, innovative, and highest quality providers of <i>community-based</i> transdisciplinary early childhood services.	Expand workforce development and capacity building services, trainings, and products.	Reinforce policy and systems change initiatives with investments and actions designed to inform as many people as possible about the impact of childhood trauma, early relational health, and healing centered care.
ACTIONS	Actions for KR #1	Actions for KR #2	Actions for KR #3
(Core Strategies)			
The 2 or 3 major strategies	1a. Strengthen & Grow our	2a. Establish Center for Excellence in	3a. Launch a Public Will Campaign:
or initiatives that will lead	Continuum of Care and	IECMH: Be the catalyst for workforce	Conduct a comprehensive
to the realization of each	Infrastructure: Develop, hire, and/or	development and transforming early	campaign to build population-level
Key Result	acquire the people and resources	childhood systems of care based on the	awareness and drive change
	necessary to strengthen and grow our	science of Early Childhood Mental	around the science of childhood
	continuum of care and infrastructure in a way that is values driven,	Health.	trauma and Early Childhood Mental Health.
	sustainable, and consistent best	2b. Improve and grow capacity	ficaliti.
	practices of Infant and Early Childhood	building services:	3b. Expand Public Policy & Govt.
	Mental Health (IECMH).		Relations: Develop and execute a
			robust policy agenda and

	1b. Embed Services & Expand Reach:	Expand our Therapeutic Early Learning	advocacy campaign to advance
	Improve and expand our geographic	Capacity Building Program (TELCAP)	systemic changes that promote
	footprint to better serve children and	and Healthcare Integration.	early childhood relational health.
	families within the communities in		
	which they live, learn, and play.		
Intended Impact	Intended Impact for 1a:	Intended Impact for 2a:	Intended Impact for 3a:
of Strategies			
	Community: Serve more families (Ave	Community: We will have directly or	Community: 13% ROI – Emulate the
For the community	10% yoy growth) with a robust, high-	indirectly trained and/or supported	Heckman Equation for proven
For Childhaven	quality, and family-centered	over 1,000 professionals / caregivers.	impact through early childhood
Financially	continuum of care that improves	Thousands more will have accessed the	policy/system change
	outcomes in targeted areas.	educational materials on our website.	Organizational: Achieve paid media
		With more professionals / caregivers	campaign reach at a "tipping point"
	Organization: Increase number of	better trained and supported children	of 1.6M people in the Puget Sound
	multi-disciplinary professionals (Ave.	and families will achieve better	3 or more times; and be generally
	10% yoy growth) on staff who are well	outcomes.	recognized as a "thought leader" by
	trained and supported in evidence-		securing 3-5 print/broadcast
	informed services and guided by the	Organization: We will improve our	features.
	principles and practices of IECMH.	brand recognition and a reputation for	
		having the highest quality IECMH	Financial: Drive \$20MM
	Financial: Organizationally we are	resources and providers which will	Philanthropy goal & Expand 65%
	cash-flow positive with no direct	improve our ability to attract and retain	Gov't contract revenue mix; and
	service requiring more than 25%	top talent while also generating more	attract top-tier talent, drive Center
	subsidy after the first year of launch.	referrals. We will have integrated AwH	for Excellence in IECMH
		as a Center for Excellence training	registrations, and increase referrals
	Intended Impact for 1b:	module and added at least one new	enabling us to hit program growth
		title.	goal
	Community: Services will become		
	more deeply embedded within the	Financial: We will generate at least	
	communities that need and want us	\$1.5M in additional funds through	Intended Impact for 3b:
	most, making access more convenient	philanthropy and government	
	for families, which will result in better	contracts. Sales and revenue from Art	Community: Preservation or
	attendance and better outcomes.	with Heart / Creative Expression will	expansion of public policies and
	Initial focus in direct services will	grow by at least 15% per year.	investments that promote early
	remain in King Co while slowly adding		relational health for communities
	services in Pierce and Snohomish Co.		most negatively impacted by

	Organization: We will add and enhance partnership opportunities, and community access to services, by co-locating with other CBOs, Schools, Hospitals, etc. to the greatest degree possible. This will happen in sites owned and not owned by Childhaven. Financial: By co-locating we will reduce our rent and overhead while generating rental income. As a result, we will be able to retain more of our savings and/or invest more in other strategies.	Intended Impact for 2b: Community: By growing the capacity of providers locally, across the state, and beyond, we will have an exponential positive impact on the workforce, and ultimately, on community well-being and the advancement of our vision. Organization: TELCAP will be in over 12 Early Learning Centers and will have supported over 200 EL teachers/staff. Our healthcare integration services will be in and/or supporting at least 6 primary healthcare entities. Financial: Through the expansion of TELCAP and HCI we will generate increasing revenue from government contracts, grants, and philanthropy.	trauma and adversity, leading to better community outcomes for children and families. Organization: Increase in organizational capacity and brand raising that Childhaven is a contributor to systemic change. Over time this will positively impact referrals, staffing, philanthropy, and government contracts. Financial: Increase in Childhaven's ability to attract philanthropic contributions and government contracts from funders interested in our vision and three-tiered eco-system approach to achieving it.
PREMORTEM Plausible reasons for failure to achieve the Objective & Key Results	 Not able to adequately replace We are unable to secure the from We have higher than normal ture We fail to raise 20M over next to We continue to under invest in Insufficient traction with merge We bite off more than we can control to the childhood Trauma "Public Normal ture We lack the staff expertise, part We lack the IECMH subject mate We fail to break down our inter 	ont-line staff we need to adequately serve r rnover due to increased accountability hree years infrastructure rs, partnerships, and alliances hew at one time Will" campaign doesn't get momentum ticularly in KR 2 and KR 3 ter expertise to perform at the highest qua	referrals coming in lity

KEY	Broadway will sell for at least \$23M
ASSUMPTIONS	 Most senior leaders will remain in their current roles and/or we will be able to find equally qualified new leaders should there be turnover
	We will increase pay in key front-line positions to attract and retain the talent we need
	 External Relations will raise \$20M over the next three years
	We will have invested wisely in the infrastructure we need to execute this plan
	There will be at least one additional merger within next 3 years
	 Core service lines will average 0%-10% growth year over year (YOY)
	ECLIPSE / Therapeutic Early Learning Capacity Building (TELCAP) will continue to be funded at current levels
	ECEAP and/or Head Start will expand by at least 4 classrooms
	• WA-AIMH, UW Barnard Center for Infant Mental Health, Perigee and others will be interested in partnering on
	an Center for Excellence in IECMH
	• The Public Will campaign will help propel all strategies forward and give rise to greater investments in the
	ecosystem approach



Theory of Change

necessary to strengthen relationships, increase protective factors, infant/e		infant/early childhoc	nd family-serving providers and systems incorporate early childhood mental health models and practices, leadin ovements in the early relational health of young children.	
STRENGTHEN Direct Services Goal: Serve 3,000		irect Services ence 30,000	LEAD System Change <i>Goal:</i> Inform 300,000	
<i>Objective:</i> Grow our continuum of care to become one of the most comprehensive, innovative, and highest quality providers of transdisciplinary early childhood services.	<i>Objective:</i> Expand wo and capacity building and products.		<i>Objective:</i> Reinforce policy and systems change initiatives, with investments and actions designed to inform the population the Puget Sound region about the impact childhood trauma, early relational health, and healing centered care.	
1a. Strengthen & Grow CoC &			-	
Infrastructure	2a. IECMH Workforce	Development Hub	3a. Launch Public Will Campaign	
1b. Embed within Community & Expand Reach	2b. Grow Capacity Bu	ilding Services	3b. Public Policy & Govt. Relations	

Values, partnership, equity and social justice are foundational and integrated into everything we do

Problem Statement: Children's mental health is in crisis. Young children and their families predominately interact with providers, programs, and systems that are: under-prepared, under-resourced, and not incorporating the science of early relational health. As a result, outcomes for children and families are getting worse.

Identity Statement

	Children's mental health is in crisis. Young children and their families predominately interact with
Problem Statement	providers, programs, and systems that are: under-prepared, under-resourced, and not incorporating the
	science of early relational health. As a result, outcomes for children and families are getting worse.
	To positively impact population level health and well-being by ensuring that ALL children are safe and
Purpose (Why we exist)	healthy,
Pulpose (why we exist)	Thriving physically, socially, emotionally, and educationally,
	Well-nurtured by their family and community
Vision for Childhaven	Childhaven is a recognized leader in 1) comprehensive wraparound services based on IECMH principles, 2)
vision for childhaven	workforce development, 3) system change and advocacy.
Mission (How we approach	Partnering with parents and community to strengthen families, prevent childhood trauma and its
our work)	damaging effects, and prepare children for a lifetime of well-being
	Children and families throughout the Puget Sound, with prioritization given to children pre-natal to age 8
Primary Population Served	
	Children, families, caregivers, and providers throughout the United States
	A strong and well-known brand
	Comprehensive continuum of care
	A diversified funding base; strong net assets
	Commitment to anti-racism, science, responsiveness
Competitive Advantages	Multi-Sector partnerships
	Visionary & experienced leadership
	Highly committed board members
	• Willingness to challenge the status quo, take calculated risks and remain agile, entrepreneurial, and
	opportunistic
	Federal, state, county and city contracts
Primary sources of Funding	Public and private insurance
	Individual, foundation, and corporate philanthropy
Core Values	Teamwork, Equity, Excellence, Dedication, Respect, Reflection

	Families and providers have the skills, supports, and resources necessary to strengthen relationships,
	increase protective factors, and meet the needs of the children in their care.
Targeted Outcomes	
	Child and family-serving providers and systems incorporate infant/early childhood mental health models
	and practices, leading to improvements in the early relational health of young children.
	STRENGTHEN Direct Services
	Goal: Serve 3,000
	Objective: Grow our continuum of care to become one of the most comprehensive, innovative, and
	highest quality providers of transdisciplinary early childhood services.
	1a. Strengthen & Grow CoC & Infrastructure
	1b. Embed within Community & Expand Reach
	EXPAND Indirect Services
	Goal: Influence 30,000
Strategic Impact Plan (SIP)	Objective: Expand workforce development and capacity building services, trainings, and products.
Goals, Objectives, And	2a. IECMH Workforce Development Hub
Strategies	2b. Grow Capacity Building Services
	LEAD System Change
	Goal: Inform 300,000
	Objective: Reinforce policy and systems change initiatives, with investments and actions designed to
	inform the population of the Puget Sound region about the impact of childhood trauma, early relational
	health, and healing centered care.
	3a. Launch Public Will Campaign
	3b. Public Policy & Govt. Relations
	✓ Parents and caregivers will create and sustain nurturing relationships with the young children in
	their care
Target Markets and	
Indicators of Long-Term	✓ Early childhood workforce (current and prospective) will know how to access IECMH professional
Success as a result of this SIP	development opportunities and communities of practice

 Opinion shapers and policy makers will propose, adopt, and implement policies that make sustained investments that result in healthier babies, toddlers and families
 Child and family serving CBOs recognize the need for greater investment in early childhood mental health professional development and incorporate best practices into their programs
 ✓ Employers implement more family friendly policies and practices, especially for caregivers of young children
 Philanthropists and Foundations will make larger and most sustained investments in IECMH and giving young children the best possible start
✓ Childhaven will ultimately get more contracts, more staff, more referrals, more partnerships, more donors, and generally more opportunities to advance our vision, goals, and strategies