

Enhancing Capacity, Advancing the Mission Safe Shores – The DC Children's Advocacy Center

Strategic Plan Executive Summary Fiscal Years 2015-2017





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Table of Contents

Introduction	. 7
Overview of Services	10
Unmet Need	12
Organizational Theory of Change	15
FY 2015-2017 Strategic Goals and Expected Outcomes	16
Conclusion	20



Introduction

afe Shores - The DC Children's Advocacy Center is dedicated to providing intervention, hope and healing for children and families who have been affected by abuse, trauma or violence in the District of Columbia (DC), and preventing child abuse through education and training.

Safe Shores is the Children's Advocacy Center for the District of Columbia, and is central to child abuse investigations and the provision of coordinated and vital resources for over 900 child victims and their families every year. Working in partnership with DC's Multidisciplinary Team on Child Abuse Investigations and Prosecution, the organization is aligned with first-responders and therefore is committed to being available to provide services around the clock, 24-hours a day.

ORGANIZATIONAL VALUES

The Board of Directors and staff of Safe Shores are committed to ensuring the following core values are demonstrated through every encounter that impacts the needs of clients, the multidisciplinary team (MDT) working on their behalf, and the overall mission and vision of the organization

Excellence – carrying out Safe Shores' mission with the highest standards of professional, ethical, and personal conduct

Taking Care to Give Care – providing empathy and compassion, fostering hope and healing, and promoting mental and emotional health among those served and the professionals committed to serving

Teamwork and Collaboration – strengthening the MDT relationship to effectively handle each client's case; seeking additional partners to meet client needs and target prevention; fostering a culture in which every professional's expertise is respected and which builds on the skills and talents of each team member to maximize impact

Mutual Respect – ensuring that every person who encounters Safe Shores feels valued regardless of race, class, creed, language, sexual orientation, or ability

Safety – promoting the security, comfort, and empowerment of every client served and the professionals and volunteers working on their behalf

Growth and Innovation – focusing on ongoing organization and individual development to support continuous improvement and seeking ever better approaches to expand organizational reach and impact

The organization traces its history to District of Columbia Mayoral Executive Order 93-4 of 1994, which established a public-private working group to initiate a multidisciplinary team approach to addressing child sexual abuse. Based on the nationally and internationally replicated Children's Advocacy Center (CAC) model, developed in Huntsville, Alabama in the mid-1980's, Safe Shores was founded in 1995 as an independent, nonprofit organization serving child victims of sexual abuse. In addition to Safe Shores, DC's Multidisciplinary Team on Child Abuse Investigations and Prosecution (MDT) is comprised of the Metropolitan Police Department, Child and Family Services Agency, Office of the Attorney General for the District of Columbia (Child Abuse and Neglect and Juvenile Justice sections), the United States Attorney's Office for the District of Columbia and Children's National Medical Center.

In 2002, as a testament to the demonstrated value and effectiveness of the CAC model, DC enacted legislation codifying the requirement of MDT review of child abuse cases and expanding the MDT's scope to include not just sexual abuse but physical abuse cases as well (DC Code §4-1301.5).

Today, Safe Shores serves children and youth up to age eighteen who have been affected by sexual or physical abuse and/or have witnessed extreme violence, as well as their siblings and non-offending caregivers. The organization's overarching goals are to:

- 1. Minimize the trauma experienced by children and adolescents who have been identified as victims of sexual or physical abuse;
- 2. Improve the investigation and prosecution of sexual and physical abuse cases from the point of intervention through to treatment and healing;
- Promote interagency collaboration for effective decision making and management of sexual and physical abuse cases;
- 4. Prevent further and/or future abuse of child victims; and,
- Provide training to professionals in the field of investigation, prosecution and provision of services for sexually and physically abused children and adolescents and their non-offending caretakers.

During the summer and fall of 2014, the Board of Directors and staff of Safe Shores participated in a rigorous strategic planning process to review and build upon the strengths of the organization, address challenges, and ensure sustainability in support of future goals. Activities included internal and external stakeholder assessments of organizational functioning and impact; articulation of the organization's theory of change—the guiding logic model for future planning; and, development of strategic goals and outcome measures focused on the next three years of service and growth.



The resulting strategic plan aligns Safe Shores' internal capacity to support the mission, vision, and, related priorities: intervene and promote healing where abuse has occurred and prevent future cases through outreach and education.



This Executive Summary contains a current organizational profile and description of service needs, a pictorial representation of the organization's theory of change, and presentation of the three-year goals and related activities that will lead to the outcomes proposed.

For more information about Safe Shores and the full strategic plan, contact:

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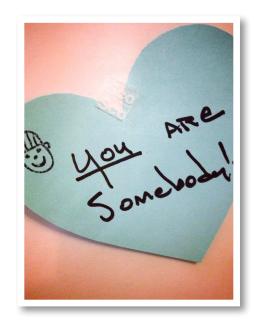
Overview of Services

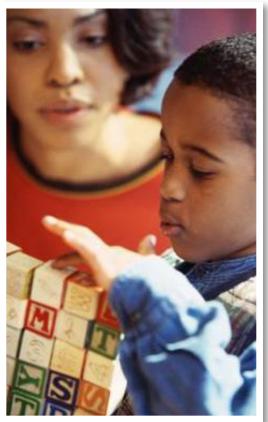
n accordance with the nationally replicated Children's Advocacy Center (CAC) model and the accreditation standards promulgated by the National Children's Alliance, Safe Shores employs a holistic approach to meeting the myriad needs of child victims and their families. The CAC model is based on the premise that the abuse allegation that brings a child to Safe Shores while critical, is but one aspect of the child's life, and support may be needed in other areas as well. The work is accomplished through five programs: Victim Services, Forensic Services, Clinical Services, Multidisciplinary Team (MDT) Advancement and Support, and Prevention Education.

Family Advocacy Services (formerly known as Victim Services): Safe Shores provides supervision for children awaiting interviews, therapy, or court appearances, Victim Services staff work with children and their caregivers to ensure barrier-free access to clothing, emergency financial assistance, meals, books, and other age-appropriate items, all while fostering a welcoming atmosphere and giving respite from their trauma.

Forensic Services: Safe Shores coordinates and conducts forensic interviews (i.e., neutral, fact-finding, developmentally appropriate, legally admissible conversations) with child victims and witnesses on behalf of the other MDT agencies. Safe Shores also conducts forensic interviews with developmentally delayed adults as a courtesy, upon special request by law enforcement.

Clinical Services: Safe Shores' Clinical Services program provides short- and long-term, trauma-focused mental health therapy services, free of charge, to young victims of abuse and witnesses to violence, as well as support for the children's non-offending caregivers and siblings. Treatment modalities include but are not limited to trauma-focused cognitive behavioral therapy art therapy, sand tray and play therapy.







Multidisciplinary Team Advancement and Support: Safe Shores leads the city's MDT by coordinating and hosting joint case reviews with MDT member agencies regarding cases of alleged sexual and physical abuse and regularly convening agency supervisors to address system issues. Safe Shores also strengthens the MDT by planning and sponsoring joint trainings, conferences, and offering scholarship opportunities for MDT members to further their professional development.

Prevention Education: Safe Shores' prevention efforts are rooted in raising the awareness and protective skills of adults through the Stewards of Children™ curriculum, which teaches adults how to recognize, respond to and prevent child sexual abuse. Stewards of Children™ is the only evidence-supported, nationally evaluated child sexual abuse prevention training for adults in the United States.

Unmet Need

hild abuse is a pervasive and insidious crime. Despite tremendous efforts to mitigate the impact of child sexual abuse and prevent future cases, child sexual abuse continues to occur at an alarming rate. In the United States (U.S.), an estimated 1 in 10 children are sexually abused before their 18th birthday. Often,

parents and caregivers inadvertently put their children at risk of abuse by thinking it could not happen to their family or by not being intentional about discussing prevention strategies and warning signs with other adults in their child's life. Social stigma, secrecy, and lack of understanding surrounding child sexual abuse result in the victimization of thousands of children every year.

Although child-serving agencies and individuals, including teachers, clergy, child care providers, health care providers, coaches, and others are federally mandated to report reasonable suspicion of child abuse, as many as 25% of the incidents of victimized children that are identified by

professionals outside of government agencies are not reported.² Often this is because adults do not feel sufficiently empowered, educated or comfortable making a report, or worse, because the child is not believed.



ENDING

SEXUAL

ABUSE

Children in the District of Columbia (DC) are victimized by physical and sexual

abuse at grossly disproportionate rates when compared to children in all other state jurisdictions. Recent statistics show that DC still has the highest rate of child victimization in the U.S. at 19.6 per 1,000 children, compared to 9.2 per 1,000 children in the greater U.S.³

Early identification of child maltreatment and timely, effective intervention offer the best hope for protection and justice for children and for the prevention of many ensuing social and criminal problems. In light of this, parents, educators and community members in DC have a significant responsibility to protect the region's children, yet many are ill–equipped to do so. According to one study, fewer than 30 percent of parents discuss sexual abuse with their children.⁴

¹ Snyder, Howard N. (2000). Sexual Assault of Young Children as Reported to Law Enforcement: Victim Incident and Offender Characteristics. A NIBRS Statistical Report. Bureau of Justice Statistics.

² U.S. Department of Health and Human Services, Administration on Children, Youth, and Families, (2012). *Child Maltreatment*. ³ Ibid.

⁴ Darkness to Light. (2007). Stewards of Children™: 7 Steps to Protecting Our Children.

Safe Shores estimates that roughly 75% of the MDT-eligible abuse cases in DC are seen at Safe Shores every year. That 25% gap between the number of eligible cases and those seen is due to a number of factors that the organization seeks to address:

- Differences in various agency priorities, protocols, and response time mandates;
- High levels of turnover in agency personnel, which challenges consistency in the types of cases reported and subsequent responses;
- A lack of widespread knowledge about the CAC/MDT model generally and within DC Government, in particular; and,
- Budgetary constraints, which impact the ability to provide needed services.

The majority of Safe Shores' clients come from families with incomes that fall below the federal poverty line and/or from under-resourced neighborhoods, frequently making them unable to access specialized intervention, emergency, and long-term services. Safe Shores offers these services at no cost to clients.

The issues seen at Safe Shores require a level of expertise and focus that few other providers in our region can offer. DC law requires a multi-agency response to certain cases of child victimization, and Safe Shores coordinates that collaboration.

There is a need to expand services, thereby providing additional support resources for children, youth and families that typically have not been identified previously by MDT partners [e.g., commercial sex exploitation (including trafficking) victims, older adolescents, sexually reactive youth, non-offending caregivers]. Significant outreach and education are needed to increase awareness and ensure appropriate and consistent use of Safe Shores' services.

Safe Shores seeks to increase knowledge, improve attitudes, and change child-protective behaviors; promote awareness among adults of the prevalence, consequences, and circumstances of child sexual abuse; and provide skills for adults to prevent, recognize, and react responsibly to child sexual abuse. The Stewards of Children™ training is an effective, evidence-based tool for accomplishing these critical goals⁵.

Looking to the future, Safe Shores seeks to address these areas of need—intervention and prevention—by increasing the percentage of eligible cases that are seen; expanding the services that are provided to support those cases; and expanding community outreach and education about Safe Shores' services and child abuse prevention. Additionally, the organization seeks to serve as a collaborative thought-leader with federal and local policymakers and agency leaders to institutionalize strategies that will significantly mitigate the impact and reduce future rates of child sexual abuse within DC.

⁵ Darkness to Light. Stewards of Children™: Child Sexual Abuse Prevention Training www.d2l.org/site retrieved September 2014.

Safe Shores – The DC Children's Advocacy Center

hildren's Advocacy Centers (CACs) are recognized by the U.S. Department of Justice and the American Bar Association as best practice in responding to child victimization. Informed by and committed to research-supported practice, they facilitate the investigate process and help child victims and their families heal. Child Advocacy Centers incorporate many best-practice elements, with procedures that are endorsed by both policymakers and professionals. These best practices include trained forensic interviewers, videotaping child interviews, forensic medical exams, victim advocacy and support services, and access to mental health treatment.⁶

Outcome measurement surveys recently implemented in over 500 CACs across the country indicate high levels of caregiver satisfaction. In fact, 94% of caregivers felt that because of their interaction with the Center, they better understood how to best keep children safe in the future.⁷

In addition to intervention and healing, Safe Shores is committed to increasing efforts to educate adults around the signs and prevention of child sexual and physical abuse. The power of prevention cannot be overstated. Imagine if all DC residents had access to information that led to a significant shift in adult reporting and community vigilance in preventing future cases of abuse. Collective knowledge is power, and by keeping prevention at the forefront of the mission, Safe Shores can change the way the Nation's Capital thinks about and responds to child abuse.

As part of the strategic planning process, Safe Shores' staff and Board have articulated the organization's theory of the change—the progression of investments (inputs), activities, and progress indicators (outputs) that will lead to increased intervention, healing, and prevention for vulnerable children and families in the years ahead (outcomes and impact). This logic model will serve as the overarching guide to the next iteration of the organization's work. The following pictorial representation serves as the guiding schematic from which the Strategic Goals and Expected Outcomes emerge.

⁶ Jones, Cross, Walsh and Simone. (2005). Criminal Investigations of Child Abuse: The Research Behind Best Practices (2005). Trauma Violence Abuse 6:254.

http://www.nationalchildrensalliance.org/proven-results. Retrieved September 23, 2014.

INPUTS



Activities

OUTPUTS

Benchmarks

Short (1-2 years)

Medium (3-5 years) OUTCOMES

Long (7-10+ years)

CAC Model

Accreditation (every 5 years)

DC Code 4-1350 MDT and MOAs Enabling Statute

Culture/Values Organizational

Volunteers, Interns Board, Staff,

Stakeholders

assets **Dedicated building/** Depreciating

(public, private) Funding Sources

Relationships Communications internal) (external and

NCAtrak, OMS Systems **Customer Mgmt.,** Resources, Financial, Human Technology

> Pursuit of continuous and operations practices and learning, best innovation in programs

and Clinical Services: Family Advocay, Forensic,

Staff retention, Annual SOP update

satisfaction, positive exits

 MDT Advancement and Support

Public Engagement

- Policy and community partnerships participation/thought
- and Outreach Prevention Education

Communications

 Media, social media, etc.

Development

Fund and resource-raising

Administration

Name recognition in CAC/

Known to policymakers Child Welfare field collaboration provide expert opinion,

Invited to speak/ present Hosting guests/tours coalitions, work groups, Involvement in meetings

policy discussions

HR, facilities, vendors

Board Governance

Strategic, generative fiduciary

ASSUMPTIONS

Safe Shores (DCCAC) will continue to play DC law will continue to require and enforce Child sexual abuse (CSA) will likely continue

a unique and necessary role in convening

the MDT/MOA

Individual prof. dev. Plans In-service trainings trainings, and networking Attendance at conferences children and caregivers as shown by: ongoing healing for Safe Shores promotes

 Children's decreased symptoms related to checklist/UCLA PTSD (trauma symptoms

Designated time for

research, reflection,

- Caregivers understand MDT process and are services (OMS Surveys) satisfied with CAC
- 3) Caregivers report impact of violence on children and understand promote future safety of increased knowledge to

Satisfaction surveys % Services delivered Clients served

Cases reviewed by MDT

 Families are connected (OMS Surveys) with needed resources children (OMS Surveys)

Continued MDT

collaboration around system

MDT Satisfaction Surveys

improvements

Number of MDT participants

- MDT approach and efficiency in case enhanced collaboration consistently yields
- Ongoing compliance standards with accreditation investigations
- Organization infrastructure implemented
- Reported increased awareness/ evaluations) understanding of CSA (Stewards of Children™

shown by increased number of: more protective and proactive as behaviors regarding child abuse are community attitudes, skills and Children are safer because Institutions with abuse and

- 2) Requests to conduct trainings trauma prevention policies and
- 3) Trainings for child-serving professionals to enhance/expand and presentations the community's intervention

capacity

- (OMS Survey) awareness/understanding of Reported increased Impact of violence on children
- Accreditation renewal with ease maintained and best practices because CAC standards are
- governance) communications, technology, resource development, (i.e., administration, finance, reflects best practices in all areas

- Children in DC are declining local data and in comparison sexual abuse as safer from child to national rates indicated by
- children is Protection of of adults education and institutionalized in "tipping point" training of a DC through the
- and embraced in The CAC Model is political, financial, DC, as reflected institutionalized and community by ongoing
- Safe Shores serves and is recognized child sexual as the premiere leadership education and treatment, intervention, abuse through for addressing local organization

Number of SS guests/

and participants Number of SOC facilitators Number of media

CSA and Safe Shores awareness/understanding of

opportunities/placements

Raise/increase public

Number of followers

(social media)

Ambassadors

Increase in dollars raised

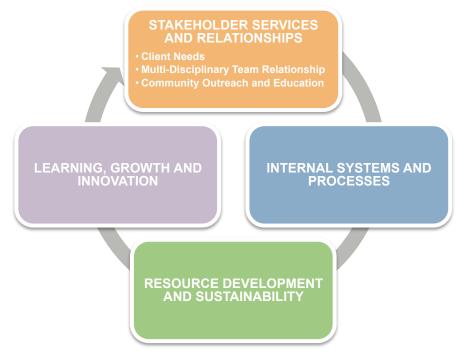
INFLUENTIAL FACTORS

- Political will
- MDT leadership/support or the lack thereof

FY 2015-2017 Strategic Goals and Expected Outcomes

resented here are the goal statements and related outcome measures that will strengthen the capacity of Safe Shores – The DC Children's Advocacy Center to support its mission and vision over the next three years. The strategic goals build upon each of the gains made to date and address those areas needed to strengthen practice and promote growth. A full presentation of the goal statements, outcome measures, related action plans, progress indicators, persons responsible, and timelines are included in the Action Planning Guides located in Appendix A.

Based on the results of all stakeholder feedback, development of the organization's logic model, and internal planning, the Board of Directors and, staff have prioritized the strategic goals using the Balanced ScoreCard Approach.⁸ The Approach targets four thematic areas of organizational functioning: Stakeholder Services and Relationships; Internal Systems and Processes; Resource Development and Sustainability; and, Learning, Growth and Innovation.



The areas identified do not represent all organizational functions, but rather target specifically those areas in need of additional planning and/or investment to ensure organizational success and long-term sustainability. Safe Shores' Board of Directors and staff remain committed to maximizing the organization's strengths and addressing those areas in need of change.

⁸ Kaplan, R. and Norton, D. (1992). *The Balanced ScoreCard: Measures that Drive Performance*. Harvard Business Review. Cambridge, MA: Harvard Business Press. The Approach serves as both a process to strategically plan and measure success, and a management method to monitor the plan over time.

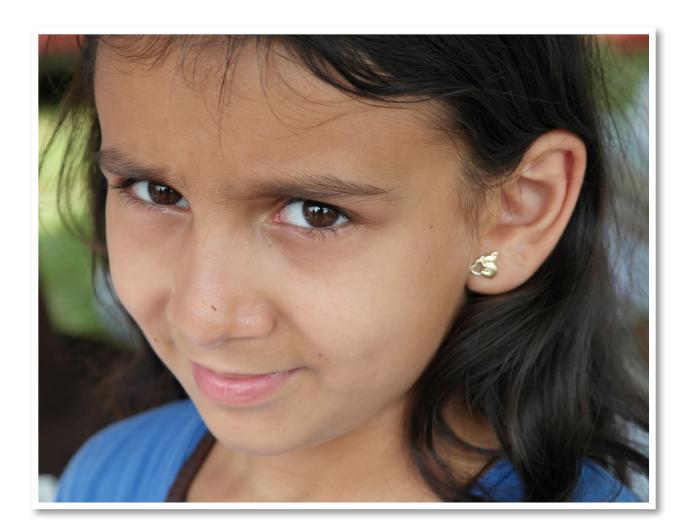
FY 2015-2017 Strategic Goals and Expected Outcomes

1.0 STAKEHOLDER SERVICES AND RELATIONSHIPS – CLIENT NEEDS							
Strategic Goal	Outcome Measure(s)						
1.1 Increase the percentage of Memorandum of Agreement (MOA) eligible children and families served	 At least 75% of MOA cases are seen at Safe Shores for forensic interviews Increased number of referrals to Clinical Services (CS) by MDT partners 						
1.2 Strengthen program delivery	 Outcomes Measurement System (OMS) Initial and follow-up Family Advocacy Services surveys Increased quality of clinical services provided as noted by fidelity checking; assessment scores; self-reporting National Children's Alliance standards consistently followed by forensic interviewers 						
1.3 Expand Forensic Services to serve all child victims (e.g., child witnesses to violence and commercially sexually-exploited children)	At least 10% increase in non-MOA cases for forensic interviews (i.e., annually, over three years)						
1.0 STAKEHOLDER SERVICES AND RELATIONSHIPS – MULTIDISCIPLINARY TEAM (MDT) RELATIONSHIP							
Strategic Goal	Outcome Measure(s)						
1.4 Strengthen the MDT partnership by defining and prioritizing the function of the MDT and enhancing the collaborative, professional relationship	 OMS Measures – MDT Survey At least 75% satisfaction reported regarding trainings, professional development opportunities 						
1.5 Institutionalize the Children's Advocacy Center (CAC) Model and MDT partnership by educating and advocating for the Model, Model adherence, and strengthened public policy to protect children	 Strengthened policies at the agency levels regarding MOA compliance MDT leadership articulates/advocates as appropriate the value of the relationship with DCCAC and the MDT Local government officials are familiar with and knowledgeable about the CAC Model 						
1.0 STAKEHOLDER SERVICES AND RELATION	SHIPS - COMMUNITY OUTREACH AND EDUCATION						
Strategic Goal	Outcome Measure(s)						
1.6 Increase community awareness around the MDT and CAC as best practice models for child abuse investigations	At least 10% increase in volunteers/supporters annually						
1.7 Increase community awareness around the prevention and reporting of child abuse and neglect	 Demonstrable annual progress toward the "tipping point" of adults trained in child sexual abuse prevention (minimum of 1,000 adults per year) Increase between pre- and post-test skills and of 						

⁹ Author/journalist Malcolm Gladwell defines a tipping point as "the moment of critical mass, the threshold, the boiling point." His book, (2000), *The Tipping Point: How Little Things Can Make a Big Difference*, seeks to explain and describe the "mysterious" sociological changes that mark everyday life. The estimated calculation is 5% of a given population. In DC, that would be 30,000 adults.

2.0 INTERNAL SYSTEMS AND PROCESSES							
Strategic Goal	Outcome Measure(s)						
2.1 Continue to actively foster values/mission-driven organization characterized by a culture of respect, inclusion, integrity and excellence	Reported satisfaction by employees, clients, volunteers/interns and board members						
2.2 Strengthen Information Technology (IT) infrastructure to support programs/staff	 IT systems reflect industry standards for effectiveness Enhanced ease of accessibility and staff productivity 						
2.3 Strengthen and coordinate internal and external communications strategies and tools to advance program activities, organizational sustainability, and relationships among staff, volunteers, and stakeholders	 Communications tools are current and used regularly by staff, volunteers, stakeholders, media, and general public Number of external contacts is increased through different media annually by 10% 						
2.4 Attract, retain, and support excellent staff	 At least 90% report satisfaction with employment Improved staff performance At least 50% maximum tenure by position 						
2.5 Strengthen the capacity of the Board of Directors to fulfill its roles and responsibilities	 Alignment and maximization of all board member skills and relationships in support of the work of Safe Shores Robust board member recruitment pipeline Annual self-assessment One to two team building activities held each year with at least 75% participation 						
2.6 Strengthen and add needed policies that meet or exceed industry standards and support risk management needs	Up-to-date policies that are reviewed biannually to ensure they reflect/incorporate best practices						
3.0 RESOURCE DEVELOPMENT AND SUSTAINABILITY							
Strategic Goal	Outcome Measure(s)						
3.1 Continue to expand and maintain a portfolio of sustainable, diverse, financial and in-kind resources consistent with the organization's philosophy of resource growth and management	 Continued funding diversification with a goal of maintaining at least 50% from public revenue sources, and achieving 50% from private sources Increased financial donations from individuals by 10% annually Increased number, scope, \$ value of in-kind donations Maintained a LifeSavers' pledge fulfillment rate of 90% At least 50% of Lifesavers renew their gift at the same or a higher level before the end of the 5th year 						
3.2 Explore the feasibility of a fixed financial endowment/foundation with the goal of ensuring a long-term funding mechanism	Decision regarding direction and next steps						
3.3 Enhanced development and utilization of human capital	Structured time and resources allocated to recruitment, training, and retention of an active volunteer pool						

4.0 LEARNING, GROWTH AND INNOVATION					
Strategic Goal	Outcome Measure(s)				
4.1 Continue to align the work of Safe Shores with CAC best practice standards to improve client services and MDT functioning	 Continued adherence with National Children's Alliance Accreditation Standards for CACs Client satisfaction of at least 80% (OMS) 				
4.2 Explore community needs and best practices in the field to determine potential growth areas aligned with mission	 Quarterly updates by/for staff and MDT (existing meetings) Program updates, refinement utilization Client, staff, and MDT feedback 				
4.3 Establish Learning, Growth and Innovation (LGI) Group to focus on community needs, best practices–program and administration—and organizational culture	 Yearly written tracking/compilation of LGI recommendations Annual adoption (as appropriate) of LGI recommendations for policy, program, and/or practice improvements 				



Conclusion

he strategic plan lays out clear priorities and measurable outcomes that strengthen the organization's effectiveness and increased targeted outcomes over the next three years. Increased capacity and relationships, expanded programs, and ongoing resource development for a secure future are overarching goals. Continued progress toward becoming a recognized partner and leader of excellence is among the value-driven principles for guiding action. Working in partnership to maximize the effectiveness of the MDT will promote healing and hope for the children and families served. Safe Shores' well-qualified staff and Board of Directors will implement and monitor all plan activities, making modifications as needed along the way.

The strategic plan builds on the successes of Safe Shores and propels forward movement toward greater impact. It also targets a future focused on expanded organizational reach in reducing the trauma of child sexual abuse, educating adults around prevention, and fostering a community in which **protecting children is everybody's business**.



