



STRATEGIC PLANNING REPORT

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1. Introduction

Aurora Family Therapy Centre is committed to reviewing its strategic plan every five years as a pertinent exercise in ensuring the organization's continued relevance and ability to respond to the community's needs while remaining true to its mandate. Having completed its last review in 2017, AFTC engaged in a new strategic planning process in the spring of 2022.

Nina Condo Consulting is privileged to be invited to assist the AFTC in this important endeavor along with AFTC Board, key stakeholders, Community-based agency partners as well as AFTC staff.

The purpose of the strategic planning is for AFTC to gain insights from community's feedback and perspective as well as stakeholder's expectations of AFTC work in the community. By gaining a deeper understanding of the community it serves, AFTC will be in a stronger position to fulfil its mandate while remaining true to its mission statement.

Over the years, AFTC has grown and evolved in its roles and activities. It is therefore appropriate that periodically, AFTC takes the time to reassess its objectives and recalibrate as needed. It is in that spirit that these multidisciplinary consultations are undertaken to review the organization's activities and the strategies to reach its defined goals in a dynamic landscape with changing demographics.

This report will help guide AFTC to execute its 5 years strategic planning by the Board and Management that will help steer the organization towards its next phase and years of work, impact and growth.

To that end, this report is a culmination of a staged and participatory process that involved facilitated consultations, interviews and surveys. They include:

- A survey that sought to understand community awareness of AFTC's services; barriers to accessibility of AFTC's services; general needs and

gaps; areas of priority; as well as any changes identified by stakeholders as needing a heightened focus.

- Focus groups with staff, board, former executives, MMFT graduates, partner organizations, community agencies, and funder institutions.
- Strategic Planning Sessions with staff and board to discuss stakeholder's reports as well as facilitated brainstorming sessions on mission, vision and priorities.

2. Mission and Vision

AFTC work and services in the community are well received and valued. Stakeholders feedback show that the services are critical to the emerging needs of the community, especially during the pandemic. Nonetheless, it appears there is ambiguity about who exactly AFTC is in terms of its role in the community and the extent of the services offered.

From the facilitated focus groups, it was shared that the rapid expansion of services may have in some ways led to this ambiguity. As the activities around the newcomer community programs grew, there was a marked decline in areas which in the recent past constituted the core of AFTC's services. Services on the decline include Mental health services in general and Family therapy in particular which AFTC has traditionally been known for. There is a clear perception that mental health services offered by AFTC need to be redefined and enhanced.

The importance of a clear mission statement for a core organization such as AFTC cannot be overstated. The mission statement guides internal team members in their everyday work, it charters the course for the board of directors and management as they mobilize, organize and raise funds. Additionally, it provides the service recipients and partners clarity in knowing what to expect and what not to expect from the organization.

The Strategic Planning process aims to help bring about this clarity through restating AFTC Vision and Mission as well as facilitating organizational adjustments around newly defined priority areas.

2.1. Mission Statement

Participants of the Strategic Planning session made the following suggestions for the revision of the Mission Statement to better reflect AFTC purpose:

'AFTC is committed to increasing the overall mental health and wellbeing of individuals, couples, families and communities through culturally-conscious, trauma-informed therapeutic and community-based services.'

2.2. Vision Statement

Participants of the Strategic Planning session voted on suggested revisions to AFTC's Vision Statement, with the following version coming out on top:

'A thriving and empowered community where the use of mental health care is accessible to all.'

3. AFTC's Mandate

Aurora has traditionally been an organization known for providing family therapy services. Over the years, this mandate has expanded as more diverse partners and service users came in and new needs were identified.

Current AFTC services include:

- Therapy for Individual, couple and family,
- Homicide Bereavement and Unresolved loss therapy,
- Newcomer Community Development Program,
- Newcomer Collaborative Community Mental Health program,
- Psycho-Social Settlement Needs Assessment of newly arrived Government Sponsored Refugees,
- Vicarious Trauma & Resilience Initiative (training program for service providers working with refugees),
- Youth program for those who are new to Canada in building positive connections in their schools and community,

4. Summary of Strengths, Challenges and Opportunities

4.1. Strengths

Feedback from the survey and the different interviews held showed that Aurora is an organization that is very well regarded and highly viewed by service users and various stakeholders

Aurora's diverse and dedicated staff has helped the organization build capacity in cross-cultural and interfaith relations. In this regard, Aurora has developed partnerships with ethno-cultural communities and faith groups. This has enabled the organization to seamlessly implement programs in the community.

More recently, Aurora has been able to respond to emerging needs around newcomer programs and has quickly emerged as a leader in cross-cultural mental health services, as well as in peer-consulting with other agencies serving newcomer communities.

Aurora's strength also lies with its long history of offering successful therapy and mental health services. This has led emerging strong partnerships with mainstream mental health service agencies including those in the newcomer settlement sector.

4.2. Challenges

There are challenges that AFTC faces which were raised during this strategic planning process.

Key among them is what may be referred to as "Aurora's identity crisis". Overtime the AFTC pillar services including Family therapy and mental health services have lost their prominence.

The feedback also suggested a lack of clarity as to where the lines are drawn regarding the extent of services AFTC offers and is competent to offer, especially bridging the gap between the general therapy services and the immigrants and refugee's mental health services. The stakeholder feedback shared concern in duplication of services with respect to summer programs and afterschool youth programming.

The staff identified long working-hours as an area of concern for them. Many on staff make a direct link between the increase with a rapid expansion which puts

strain on the resources in general and human resources in particular. An increase in clients with complex needs further stretches those same resources.

In light of AFTC transitioning out of the University of Winnipeg, concerns were raised on whether the organization will manage to be self-sustaining given the rising overhead costs.

Finally, an issue was raised regarding the lack of training in trauma case management and settlement services for MFT students practicum placement at AFTC which pose a challenge in distribution practicum placement case assignment.

4.3. Opportunities

We recommend that Aurora's vision, mission and focus areas be revisited and clearly worded to capture the organization's identity and vision for the future. We are of the opinion that this will help highlight Aurora's unique value for the community. The enhanced clarity will provide a renewed focus, more cohesion for Aurora's core services as well as improved resource management.

Aurora's visibility can be improved through communication and marketing strategies that highlight Aurora's work in the community and the services offered. This has the potential to increase the organization's clientele and potential partnerships.

Aurora's work and services can be streamlined to develop clear expertise in a niche area. This would give Aurora the opportunity to be known in the community as the leading partner in specific targeted areas.

5. Strategic Priorities and Outcomes

The Strategic Planning Exercise was able to highlight key strengths and weaknesses at AFTC.

The strengths highlighted were in the organization's ability to respond to the community's emerging needs, and there is a need to build interventions quickly and creatively with its diverse staff team. Furthermore, its ability to maintain strong partnerships with ethno-cultural communities and faith groups has been well received. It is an asset which will facilitate delivering programs with strong partners in the community.

The weaknesses identified were in Aurora's shortfall in establishing clear boundaries of its services to avoid an identity. From a strategic standpoint, there is sentiment that AFTC needs to define its geographical reach, explore use of virtual services under proper guidelines, incorporate robust policies that include staff compensation and professional development (especially in light of complex client's needs/cases), and incorporate more creativity in family therapy among others.

Five Priority Areas and their Objectives and Desired Outcomes tabulated below were identified by staff and board during this exercise to facilitate AFTC in delivering its services for the 3 to 5 years:

PRIORITY 1: ORGANIZATIONAL INFRASTRUCTURE

1.1	OBJECTIVES	
	I. Create linkages between the different programs of Aurora	
	II. Strengthen organizational infrastructure post-separation from the University of Winnipeg	
	III. Develop strong Post-COVID-19 Operations	
1.2	ACTIONS AND OUTCOME INDICATORS	
	A. SHORT-TERM OUTCOMES (3 years)	B. LONG-TERM OUTCOMES (5 years)
	I. A plan in place for developing the assessment of programs. Staff are engaged in needs assessments.	I. All organizational programs are comprehensively assessed, with a focus on creating connections between Family Therapy programs and with Newcomer programming.
	II. Financial autonomy achieved with enhanced Board oversight and staff satisfaction in regard to financial management, benefits and IT support.	II. Develop Board financial oversight practices that complement existing financial management policies. Maintain a strong IT infrastructure and security system.
	III. A clear strategy on the provision of blended services (virtual and in-person) developed	III. Clear and refined policies and procedures in place around blended services.
	IV. Policies regarding work-from-home/abroad developed.	Adapt and refine work from home/abroad policies after implementation.
	V. Establish geographical boundaries in working with clients in AFTC	Set out parameters for service limitation to prevent AFTC to overstretch itself and working outside mandate
	ESTIMATED RESOURCES (IMPLEMENTERS)	
	Executive Director with senior management and board of directors	

PRIORITY 2: FINANCIAL STABILITY

2.1 OBJECTIVES

- I. Generate sustainable and diverse funding to maintain existing programs at current programming
- II. Generate new funding sources to enhance the existing programs to respond to the community needs and expectations
- III. Develop a salary compensation strategy/package to recognize the diverse qualifications and experiences of staff

2.2 ACTIONS AND OUTCOME INDICATORS

A. SHORT-TERM OUTCOMES (3 years)

B. LONG-TERM OUTCOMES (5 years)

Regarding fundraising:

- I. A longer-term fundraising strategy in place
- II. A Board Fundraising Sub-committee established
- III. Potential new funding sources identified

- I. Continual development of the fundraising strategy and implementation
- II. Potential fundraising sources developed
- III. 1-3 new private funding sources obtained

Regarding Staff Compensation:

- IV. Existing staff compensation models compiled and evaluated
- V. Several models of compensation developed and priced out

- IV. A staff compensation model selected, and an implementation strategy developed (if feasible)
- v. A timeframe of delivery established (dependent on the availability of financial resources)

	VI. Strategy clearly communicated to staff	VI. Develop yearly/bi-annually compensation plan based on funding
	VII. Non-financial ways to recognize/appreciate staff identified	VII. Create regular practices for staff appreciation. Example: staff shout out, days with pay for birthday/anniversary, time off with pay during holiday seasons
ESTIMATED RESOURCES (IMPLEMENTERS)		
Resources: Board, ED, Senior Management Team		

PRIORITY 3: BRANDING

3.1 OBJECTIVES

I. Strengthen Organization Identity

3.2 ACTIONS AND OUTCOME INDICATORS

A. SHORT-TERM OUTCOMES (3 years) **B. LONG-TERM OUTCOMES (5 years)**

I.	Organization name changed to one that adds clarity to what the organization does and allows for greater reach and encompasses the true meaning of family	I.	A funded communications position in the organization
II.	A new catchphrase that is succinct in explaining what the organization does developed	II.	Refocused services: all programs are aligned to the therapeutic services, family therapy and newcomer services
III.	A new logo that captures what the organization does developed	III.	Branding/PR consultant is hired to enhance AFTC Identity

	<p>IV. Increased Web and Digital presence including an updated website and social media accounts for the organization and the specific programs, highlighting events and program activities. A Communication Coordinator position is established.</p>	<p>IV. An educational process in place to move towards cross-cultural approach to therapy (informed by ethnocultural communities, knowledge, practice etc)</p> <p>Implement communication plans with stakeholders, community-based agencies to coordinate programs that will complement service delivery.</p>
ESTIMATED RESOURCES (IMPLEMENTERS)		
Resources: Board, ED, Senior Management Team		

PRIORITY 4: COLLABORATION

4.1 OBJECTIVES

	I. Strengthen partnerships with Indigenous communities
	II. Acknowledging and enhancing communities healing

4.2 ACTIONS AND OUTCOME INDICATORS

	A. SHORT-TERM OUTCOMES (3 years)	B. LONG-TERM OUTCOMES (5 years)
	I. 3 strong contacts in place from Indigenous communities to develop mutually beneficial programs	I. An Indigenous therapy program established
	II. Strengthened relationship with aboriginal student services	II. Joint programs in place with the Aboriginal Student Services and learning opportunities for Aurora and Aboriginal Student Services
	III. Training developed for external partners on mental health and psychological first aid	III. Regular training programs for external partners established

	IV. Structures for internal collaboration between programs and referral, process put in place	IV. Increased collaboration with ethnocultural communities and faith groups
		V. Have an elder in-residence on staff
ESTIMATED RESOURCES (IMPLEMENTERS)		
Resources: ED, Senior Management Team		

PRIORITY 5: ENHANCING CULTURAL COMPETENCY

5.1	OBJECTIVES	
	I. Enhance cultural competence in the connections with the MFT program	
	II. Enhance cultural competence in students (practice)	
	III. Enhance cultural competence in governance	
5.2	ACTIONS AND OUTCOME INDICATORS	
	A. SHORT-TERM OUTCOMES (3 years)	B. LONG-TERM OUTCOMES (5 years)
	In 1 year: I. Committee to provide oversight and support created	I. Mandatory, ongoing and clear organization-wide cross-cultural training and professional development opportunities instituted (including during onboarding of new staff)
	II. Literature review done and/or consultant on cultural competency hired to highlight skill gaps and how to fill them	II. MFT Practicum Therapists trained to provide culturally competent therapy to individuals/families from diverse cultural, socio-economic and faith backgrounds

		<i>(Example measure: Requiring all to provide therapy to I&R clients as part of larger Aurora practicum, instead of it being for students who want to)</i>
III.	A hiring matrix that recognizes cultural competency skills and diverse cultural perspectives created	III. Diversity in the AFTC staff, volunteers, clinical supervisors and board members that evidently represents the diversity of the clients that AFTC serves
In 3 years:		IV. Traditional ways of healing are a valued and integral part of service delivery (via connections and guidance from ethno-cultural communities). Competent well-trained interpreters
I.	Develop and deliver cultural-competency knowledge sharing (including working with interpreters) for MFT students completing their practicum at Aurora (ongoing and included in orientation)	
II.	Secure funding to resume I&R therapy program	V. Revenue is being generated by offering training/speakers for culturally competent therapeutic services
III.	Opportunities for engagement of MFT students in Newcomer programs enhanced (<i>E.g. Making 50 SSCE hours mandatory</i>)	III. Develop field/practicum guidelines and practical competencies for MFT students. Example: teaching MFT students how to use Cross-cultural counseling,
ESTIMATED RESOURCES (IMPLEMENTERS)		
Resources: ED, Senior Management Team		

6. Timeline for Reviewing the Plan

Task	Mo. 6	Mo. 12	Mo. 18	Mo. 24	Mo. 30	Mo. 36
Review AFTC Vision and Mission						
• Sub-Task 1						
• Sub-Task 2						
Program Assessment and Rationalization						
• Sub-Task 1						
• Sub-Task 2						
Develop Funding Goals and Strategies						
• Sub-Task 1						
• Sub-Task 2						
Develop Staff Compensation Plan						
• Sub-Task 1						
• Sub-Task 2						
Organizational Rebranding						
• Sub-Task 1						
• Sub-Task 2						