

Strategic Planning

Strategic planning is an essential element of any quality not for profit organization!

It is particularly important as clinics address their position in the changing health environment. While it is always important to have the sort of roadmap that a strategic plan may produce, during times of substantial shifts in the environment a thoughtful plan that leaves room for flexibility in the event of unanticipated change, can be invaluable.

Strategic planning is typically conducted at regular intervals.

The recommended timeframe today is 24–36 months. Given that strategic planning requires that a clinic make calculated estimates of the future and that change is the order of the day, a rather short interval for strategic planning is required.

Strategic planning is one of the major responsibilities of a Board.

The process is typically implemented by the Board and is joined by the senior administrative staff of the clinic. Other participants may be invited to contribute input to this process, but the decisions made within the strategic planning process are governance responsibilities, thus the Board appropriately carries this responsibility.

Bringing in outside resources

Church Health recommends that an outside consultant be retained to work with a clinic through the strategic planning process. Additional support is available for contract with John Mills (jmills@echoclinics.org) and Marty Hiller (martyhiller@mac.com).

Since there is no universal model of strategic planning, it is best to select a model that seems right for your organization and community as well as a facilitator who meshes well with your clinic Board. When you are ready to proceed, solicit proposals in the same sort of manner that a funder might for a prospective grant. Costs may vary, sometimes significantly, between proposals, but the cheapest is not always the best for you. It is ideal if you can interview the candidates, perhaps even in person, and most certainly check references from past clients. Local

resources may be available that have worked with other nonprofit colleagues, yet there may be an advantage to seeking a consultant who is familiar with the charitable clinic sector. Given that inevitably a clinic will be undertaking strategic planning, it may pay to meet prospective providers at state or national conferences even prior to the time that you are seeking to conduct strategic planning for future reference.

Does this reflect current approach?

Common Pitfall

Where a clinic elects to use a member of the Board to facilitate the process or even the Executive Director in this role, inevitably you create a conflict of interest between the neutral facilitator and the vested Board member or Executive Director. While there are instances where such a relationship has worked, the cost of the subjective input of typically a key member of your Board team may be too steep a price to pay for a facilitator you know.

A note on cost

While costs of this service may vary and sometimes range widely to accommodate travel expenses for candidates outside of the area, experience says that outside funding to support such planning activities is generally available. Clinics that are well established generally have a core of significant funders (foundations or individuals) that have supported their work for some time. These are excellent prospects for support of a strategic planning endeavor. These longtime supporters will view the planning activities as an investment in your future and will typically fund such activities over and above their normal range of support. This is certainly one of those areas where it never hurts to ask.

Several common elements of strategic planning include:

- Include an environmental scan.
 - This process provides a clinic the chance to re-establish connection with important stakeholders and to gain their input and perspective on questions of the day.
- Actively engage Board Members in the strategic planning process.

- Information gathering for the environmental scan provides an excellent role for these individuals.
- Inform the planning process by involving stakeholders.
 - Stakeholders may include:
 - staff
 - patients
 - volunteers
 - key individual donors
 - foundations
 - faith communities
 - etc.
 - Different strategies may be designed to best secure appropriate input from all.
- Review and reaffirm the clinic Mission and Vision.
 - This may especially be true if a service delivery model change is to be considered.
- Design the process to allow the Board to define the strategic goals for the future as well as the defined outcomes that would indicate success.
 - The staff will supply the strategies to accomplish the goals.
 - While suggested strategies may come from the planning process itself, it is the responsibility of the ED/Staff to adopt and recommend strategies that will meet the outcomes of the stated goals.
 - These strategic elements will combine to make up the strategic plan.

While these may not be universally part of every model, they are pretty typical.

Strategic plans are not an event but a process!

An active vital plan will provide a roadmap for the clinic through this strategic period as well as benchmarks of achievement along the way. The plan itself may be adjusted should unanticipated change occur in your setting; however, ideally it will become an active part of the Board process and serve as a connecting thread for their work through the period.

