

2022 Strategic Plan Dashboard

Ronald McDonald House Charities of Madison, Inc.

UPDATED: February 2, 2022

| I. Elevate awareness and understanding of the mission, brand and services | OWNER | COMPLETE BY | PROGRESS |
|---|--------------------------|-------------|-------------|
| Update brand and marketing materials "Toolkit" differentiated for stakeholders and translated for multiple users | | | |
| a. Update existing collateral materials for the Family Room | Shauna | Q2 | NOT STARTED |
| b. Update existing collateral materials for the House | Shauna | Q2 | NOT STARTED |
| c. Update existing collateral material for the organizational level: mission, core values, program and impact | Shauna | Q2 | NOT STARTED |
| d. Create Marketing "Toolkit" for the following stakeholders (families, hospitals, corporate partners, individual/foundation donors) | Shauna, DS & MR | Q2 | NOT STARTED |
| e. Update website and social media to align to the new "Toolkit" | Shauna | Q3 | NOT STARTED |
| Identify new and strengthen current communication channels with hospital, community and funding partners | | | |
| a. Complete a network map of key hospital employees and lead relationship owners by hospital system | Kelly & Michael | Q2 | ON TIME |
| - Explore Mercy partnership for 2023 Care Mobile replacement planning | Kelly & Deborah | Q2 | NOT STARTED |
| b. Complete a network map of corporate partners (current and prospects) and corporate partnership program | Deborah | Q3 | ON TIME |
| c. Complete a network map of local community organizations, foundations, individuals and lead relationship owners | Kelly & Deborah | Q2 | NOT STARTED |
| d. Lead relationship owners begin to create/deepen relationships (tours of House, invites to events, etc.) | Kelly, Michael & Deborah | Q3 | NOT STARTED |
| Define roles for all members of the organization in awareness and understanding of mission, brand, and services | | | |
| a. Develop and approve "Board Standards & Expectations" document | Kelly | Q1 | COMPLETED |
| b. Develop and implement Leadership Team and/or All Staff Strategic Expectations document | Kelly | Q2 | NOT STARTED |
| c. Build accountability system (self-evaluation, pledge, etc.) for Board of Directors | Board | Q2 | ON TIME |
| d. Build evaluation system (self-evaluation, evaluation, etc.) for staff | Kelly | Q2 | ON TIME |
| e. Elevate media relations and public speaking opportunities for Executive Director, Leadership Team and Board Directors | Shauna & Deborah | Ongoing | ON TIME |
| Align department and program performance goals to mission, brand and strategy alignment (aligned to II. Build Capacity: Culture) | | | |
| a. Create employee self evaluation and goal setting documents and procedures aligned to the goals | Kelly | Q2 | ON TIME |
| b. Create employee evaluation system to include professional development and performance reward tied to accomplishment of individual and organizational goals | Kelly | Q4 | NOT STARTED |
| II. Build Capacity | | | |
| Infrastructure: Evaluate and invest in long-term infrastructure looking at staffing, training, technology and process improvement | | | |
| a. Implement RMHC GRMHS front desk software for guest families | Michael | Q1 | ON TIME |
| b. Evaluate and potentially purchase CMMS facility maintenance planning software | Michael | Q3 | NOT STARTED |
| c. Pilot RMHC marketing content management software | Shauna | Q1 | ON TIME |
| d. Research and potentially purchase volunteer management system | Michael | Q3 | ON TIME |
| e. Implement already created volunteer dinner online reservation system | Michael | Q2 | ON TIME |
| Infrastructure: Deepen connection with current donors/partners and expand to new and diverse sources | | | |
| a. Hire Development Officer & Gift Processor | Deborah | Q2 | ON TIME |
| b. Capture and boost accurate constituent information and email addresses | Shauna | Ongoing | ON TIME |
| c. Finalize procedural manual for consistent data entry, gift processing, donor acknowledgement, and performance measurement/reporting | Deborah | Q3 | ON TIME |
| d. Gather impact stories and refine messaging by audience | Shauna | Ongoing | ON TIME |
| e. Build strategy for third-party fundraisers and re-launch/begin at least one new effort | Deborah | Q3 | ON TIME |
| f. Build strategy for donor retention and lapsed donor engagement, including BOH donors | Deborah | Q3 | ON TIME |
| Operations: Recruit and retrain expanded volunteer base in House and Family Room | | | |
| a. Evaluate need for, and write job description for, Volunteer Coordinator | Michael & Teresa | Q1 | ON TIME |
| b. If determined to move forward, hire Volunteer Coordinator | Michael & Teresa | Q2 | ON TIME |
| c. Identify and recruit new volunteers, with a focus on creating a diverse volunteer population | Michael & Teresa | Q2 | ON TIME |
| d. Produce monthly volunteer email to keep volunteers engaged and in the 'know' | Michael | Q1 | COMPLETED |
| Operations: Update Employee Handbook & Financial Accounting Policy | | | |
| a. Draft, vet, and approve Employee Handbook | Kelly | Q1 | COMPLETED |
| b. Draft, vet, and approve 2023 Financial Accounting Policy | Nan | Q4 | ON TIME |
| Culture: Strengthen Board Governance Systems | | | |
| a. Create and implement Committee Structures | Kelly/Board | Q1 | ON TIME |
| b. Strategic Board of Director process for recruiting, nomination, onboarding and expectations | Board | Q4 | ON TIME |
| c. Board annual self-evaluation of goals and Board of Director expectations (aligned to 1.3.c above) | Board | Q2 | ON TIME |
| III. Distinguish our Chapter as equitable and inclusive | | | |
| Deepen our understanding of the diverse community we serve through equity, diversity and inclusion conversations and training | | | |
| a. Identify and begin professional development series for full time and part time staff | Kelly | Q2 | NOT STARTED |
| b. Review family amenities room (and tote items) for inclusion and cultural awareness, update supplies as needed | Michael & Teresa | Q2 | ON TIME |
| Evaluate formal and informal ways of working to increase diversity at all levels, including the families we serve | | | |
| a. Formalize hiring and recruiting processes to emphasize welcoming and recognize diversity as a asset in hiring and volunteer on-boarding | Kelly | Q2 | ON TIME |
| b. Work with our hospital partners and Board Members to review guest/family information sharing and referral systems | Michael | Q4 | ON TIME |
| c. Translate all key materials in the House in Spanish | Dan | Q3 | ON TIME |
| c. Translate all key materials in the Family Room in Spanish | Teresa | Q3 | ON TIME |
| Complete House renovation art installation project with diversity and inclusion lens | | | |
| a. Document process for art selection, paying attention to who is represented | Michael | Q2 | NOT STARTED |
| b. Vet options for art installation with diversity and inclusion as rated items | Michael | Q3 | NOT STARTED |
| c. Select, purchase and implement art | Michael | Q4 | NOT STARTED |

2022 Strategic Plan Dashboard Metrics

Ronald McDonald House Charities of Madison, Inc.

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| I. Elevate awareness and understanding of the mission, brand and services | | 2021 Baseline | Q1 | 2022 Goal |
|---|---|---------------|----|----------------|
| Demographics | | | | |
| | a. Increase occupancy rate at Family Room | 59% | | 70% |
| | - BIPOC (black, indigenous, and communities of color) occupancy rate | N/A | | 30% |
| | - BIPOC % of all families | 27% | | 30% |
| | b. Increase occupancy rate at House | 73% | | 80% |
| | - BIPOC occupancy rate | N/A | | 30% |
| | - BIPOC % of all families | 25% | | 30% |
| | c. Increase # of total patient visits to Care Mobile | 281 | | 350 |
| | - Increase # of unique patient visits to Care Mobile | 270 | | 350 |
| | - Total # of vaccinations given | 216 | | 250 |
| | - Total # of ER visits avoided | 130 | | 150 |
| | - Medicaid eligible or uninsured % of all youth seen | 63% | | 65% |
| New Funding Partners & Donor Opportunities | | | | |
| | a. Identify at least 1 new partnership/donor opportunity per quarter | n/a | 3 | 4 new partners |
| | b. Meet Development/fundraising Scorecard goals | \$1.2M | | \$1.6M |
| | c. Increase active volunteer base in the Family Room | 39 | | 45 |
| | d. Increase active volunteer base in the House | 80 | | 90 |
| II. Build Capacity | | 2021 Baseline | Q1 | 2022 Goal |
| Infrastructure | | | | |
| | a. Decrease staff time spent on the current referral and check-in process | 16 hr/week | | 8 hr/week |
| | b. Create family stay satisfaction baseline in Family Room | N/A | | 25% |
| | c. Create family stay satisfaction baseline in House | N/A | | 25% |
| | d. Increase child/family satisfaction rate in Care Mobile | 99% | | 0.99 |
| | e. Increase active volunteer base in the Family Room | see above | | see above |
| | f. Increase active volunteer base in the House | see above | | see above |
| Culture | | | | |
| | a. Increase number of RMHC-Global governance targets met | 44% | | 67% |
| | b. Increase number RMHC-Global financial targets met | 71% | | 86% |
| | c. Create volunteer satisfaction % baseline in organization | N/A | | 85% |
| | d. Create staff satisfaction % baseline in organization | N/A | | 85% |
| III. Distinguish our Chapter as equitable and inclusive | | 2021 Baseline | Q1 | 2022 Goal |
| Demographics | | | | |
| | a. Increased utilization rate at Family Room | see above | | see above |
| | - BIPOC (black, indigenous, and communities of color) utilization rate | see above | | see above |
| | - BIPOC % of all families | see above | | see above |
| | b. Increased utilization rate at House | see above | | see above |
| | - BIPOC utilization rate | see above | | see above |
| | - BIPOC % of all families | see above | | see above |
| | c. Increased utilization rate at Care Mobile | see above | | see above |
| | - BIPOC utilization rate | see above | | see above |
| | - BIPOC % of all youth | see above | | see above |
| | d. Increase total percentage of BIPOC staff | 4% | | 8% |
| | e. Collect baseline percentage of BIPOC volunteers | N/A | | 5% |
| | f. Increase total percentage of BIPOC Board Members | 0% | | 13% |

RANK KEY

HIGH

MEDIUM

LOW

STATUS KEY

COMPLETED

ON TIME

BEHIND

NOT STARTED

COMPLETED BY

Q1

Q2

Q3

Q4

Ongoing

TBA