



One Journey 2020-22

**Community Action Partnership
of Hennepin County (CAP-HC)
STRATEGIC PLAN**

TABLE OF CONTENTS

Introduction	3
Results Oriented Management and Accountability.....	3
ROMA Next Generation	4
Mission, Vision, and Values	5
Hennepin County Community Profile.....	6
External Assessment: CAP-HC Community Strengths and Needs Assessment.....	8
Internal Assessments	10
SWOT Analysis	12
Strategic Goals and Objectives	13
Key Performance Indicators	14
Acknowledgments.....	17

INTRODUCTION

The strategic plan of the Community Action Partnership of Hennepin County (CAP-HC) is intended to provide a three-year roadmap for programming, civic leadership, emerging client needs, governance and operations, and data use. The plan was developed by the Strategic Plan Workgroup, which included four board members and eleven staff, and progress toward its goals will be reviewed semi-annually.

To produce this plan, the board held two half-day retreats and the workgroup met on seven occasions to reflect on the mission, vision, and core operating values and assumptions underlying the organization's approach to its work. These meetings set the stage for a work session of the full board to define the organization's strategic directions. The staff then helped coordinate the planning process and provided important support and analysis to complete the plan.

The strategic planning process, which was facilitated by GrayHall, was supplemented by the triannual Community Needs Assessment (CNA) conducted by the Improve Group and two internal assessments (IA) conducted by GrayHall and CAP-HC staff. The CNA included interviews with key experts; stakeholder surveys; community listening sessions in Hennepin County, including Minneapolis and suburban residents; and a review of demographic and market data. The IA gathered data from 17 staff interviews and a survey of 35 staff members across all CAP-HC departments.

Information from the CNA and IA helped CAP-HC assess both the challenges and opportunities it is likely to face over the next three years and set the context for the choices reflected in this strategic plan. The plan identifies poverty-related needs and resources in the community, establishes goals and priorities for

delivering those services to individuals and families most affected by poverty, and complies with organizational standards and state and federal laws. CAP-HC supports activities that assist low-income families and individuals, homeless families and individuals, new immigrant populations, and elderly low-income individuals and families by removing obstacles and solving problems that block their achievement of self-sufficiency.

CAP-HC is a private 501(c)(3), non-profit organization established in 1986 to offer programs and services that provide opportunities to community members to help identify and overcome economic barriers. CAP-HC works across all of Hennepin County to improve the lives of low-income people. It was formerly known as the Community Action Partnership of Suburban Hennepin (CAPSH).

In August of 2016, CAP-HC received an Assurance Statement from Governor Dayton officially recognizing it as the community action agency for the City of Minneapolis. This designation, which was the result of hard work by CAP-HC's staff and Board of Directors, was a recognition of CAP-HC's positive impact in the community it has served since 1986.

CAP-HC offers services to individuals and families through outreach, energy and water assistance programs, car repair, homeownership services, food support, health insurance navigation, homeless assistance, leadership development programs, and financial literacy.

CAP-HC embodies the spirit of hope, improves communities, and is dedicated to helping people help themselves and each other. CAP-HC is part of a national network of more than 1,000 authorized community action agencies, state associations, state offices, and federal partners across the nation supported

by the Community Services Block Grant (CSBG) to mobilize communities to fight poverty. Community action agencies have been operating in the United States since 1964, when they were created through economic opportunity legislation designed to fight the war on poverty.

CSBG organizational standards require a new strategic plan every five years, but CAP-HC plans every three years so that its strategic plans align with the three-year CNA cycle required by organizational standards. The CAP-HC strategic plan is also aligned with ROMA and ROMA Next Generation goals as described below.

Results Oriented Management and Accountability (ROMA)

Results Oriented Management and Accountability (ROMA) provides a framework for continuous growth and improvement among hundreds of community action agencies and are the basis for state leadership and assistance toward those ends. It contains six anti-poverty performance indicators:

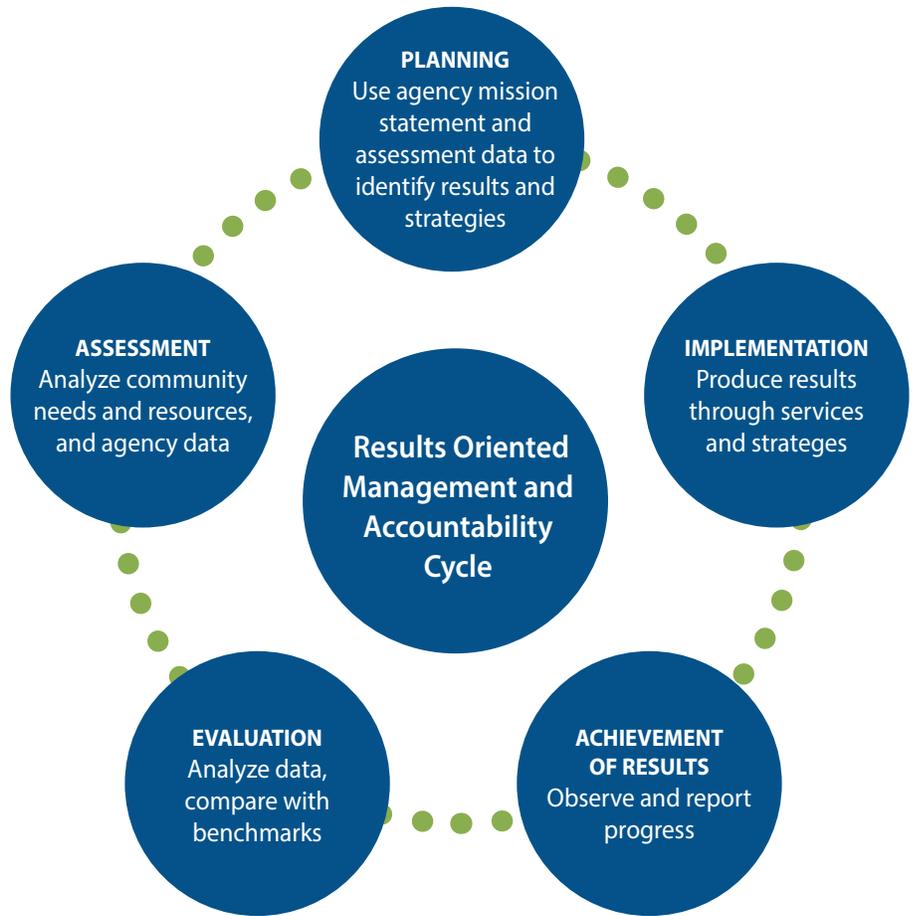
- Low-income people become more self-sufficient.
- The conditions in which low-income people live are improved.
- Low-income people own a stake in their community.
- Partnerships among supporters and providers of service to low-income people are achieved.
- Agencies increase their capacity to achieve results.
- Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems.

Tangible, realistic, specific, and measurable goals integrating the ROMA performance indicators have been developed in this CAP-HC Strategic Plan, which offers strategic objectives, timelines, and an accountability framework.

ROMA Next Generation (ROMA NG)

In addition to the ROMA anti-poverty performance indicators, this strategic plan was informed by the ROMA Next Generation (ROMA NG), a supplemental system for continuous quality improvement established in 2018 that enables the network of community action agencies to measure, analyze, and communicate performance. As a continuous learning and improvement agency, CAP-HC has aligned this plan's strategic goals with the proposed ROMA NG framework, which identifies three performance indicators:

- Individuals and families with low incomes are stable and achieve economic security.
- Communities where people with low incomes live are healthy and offer economic opportunity.
- People with low incomes are engaged and active in building opportunities in their communities.





MISSION

Partner with community to provide effective and responsive services to reduce the impact of poverty in Hennepin County.

VISION

Hennepin County without poverty.

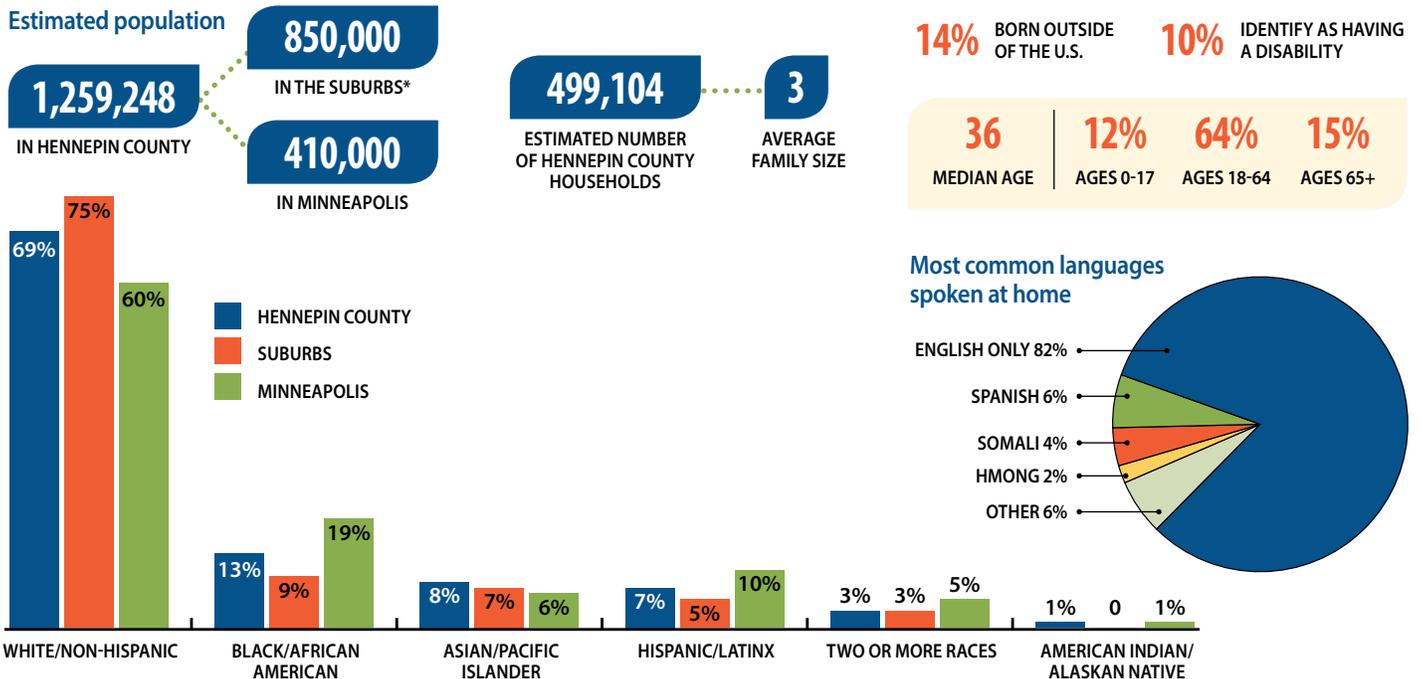
VALUES

Strengthening Community
Eliminating Barriers
Creating Opportunities
Building Relationships
Responsible Stewardship
Equity and Inclusion

HENNEPIN COUNTY COMMUNITY PROFILE

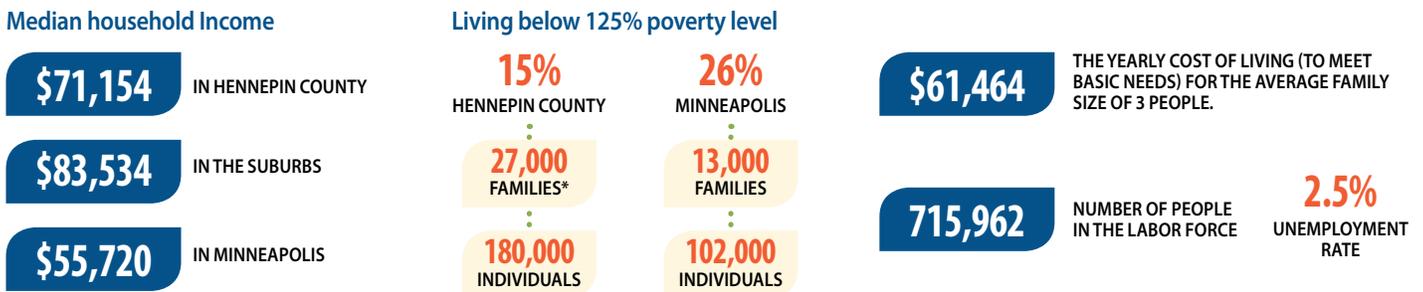
This community profile provides an overview of data regarding Hennepin County, Hennepin County Suburbs, and Minneapolis. The main purpose of this profile is to inform our background knowledge of the community and our data collection methods.

Population Characteristics

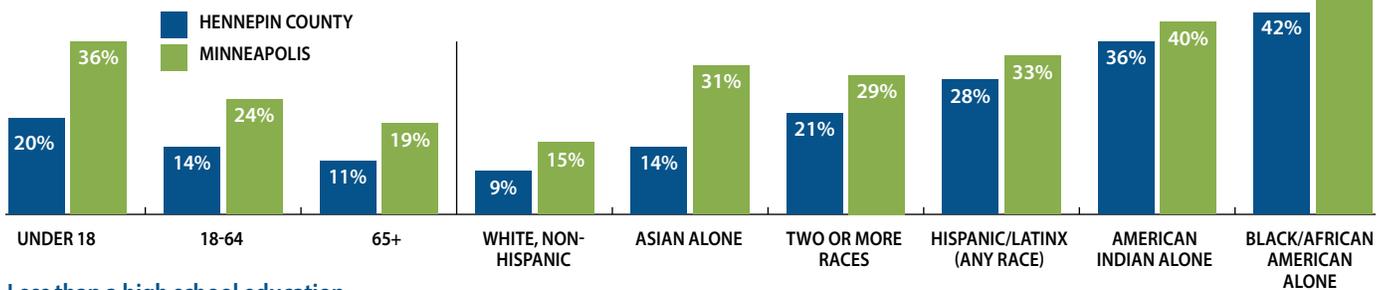


SOURCE: Population estimate based on 2018 ACS 1-year estimate, U.S. Census Bureau; race/ethnicity data compiled by MN Compass based on 1-year ACS data population estimate of 1.252.024; language data sourced directly from 2017 ACS 5-year estimates, U.S. Census Bureau

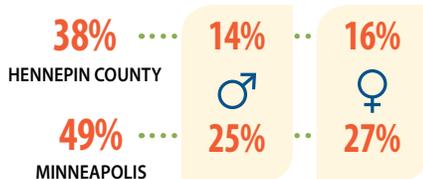
Income & Poverty



Percent of the following population groups living under 125% of the poverty level



Less than a high school education



Living with a disability



Born outside of the U.S.



SOURCE: 2017 ACS 5-year estimates, U.S. Census Bureau; MN DEED, LAUS for October 2019

* Hennepin County Suburbs consist of 44 cities in Hennepin County, aggregated by MN Compass. "Families" as defined by the Census Bureau are two or more people who live in the same household and are related by birth, marriage, or adoption. For households living under 125% poverty, the threshold for a family of four is \$32,188.

Housing & Transportation

Homeownership

39% POBI **22%** BLACK **75%** WHITE

\$245,000 MEDIAN HOUSING VALUE

\$1,031 MEDIAN GROSS RENT



1 in 3

HOUSEHOLDS THAT ARE COST-BURDENED, OR SPEND MORE THAN 30% OF THEIR HOUSEHOLD INCOME ON HOUSING

47% COST-BURDENED RENTERS

21% COST-BURDENED HOMEOWNERS

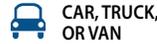
Number of people experiencing homelessness

~4,100

3,300 IN SHELTERS

800 NOT IN SHELTERS

Transportation to work—ages 16+



81% HENNEPIN COUNTY

69% MINNEAPOLIS

87% SUBURBS



4% HENNEPIN COUNTY

13% MINNEAPOLIS

7% SUBURBS



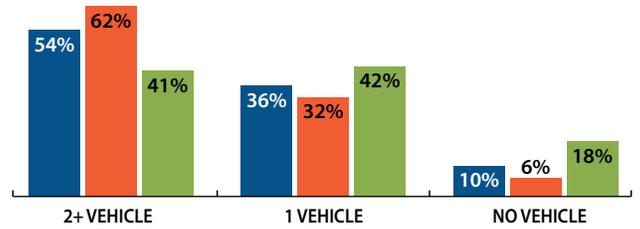
12% HENNEPIN COUNTY

18% MINNEAPOLIS

9% SUBURBS

Vehicles available per household

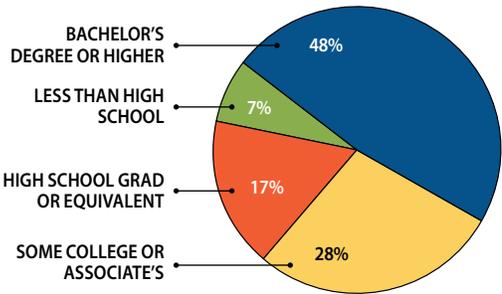
■ HENNEPIN COUNTY
■ SUBURBS
■ MINNEAPOLIS



SOURCE: MN Compass, 2017 ACS 5-Year Estimates, U.S. Census Bureau

Education

Educational attainment for those age 25+, Hennepin County



3 in 10 HENNEPIN COUNTY RESIDENTS AGE 25+ WITH LESS THAN A HIGH SCHOOL DEGREE EXPERIENCE POVERTY



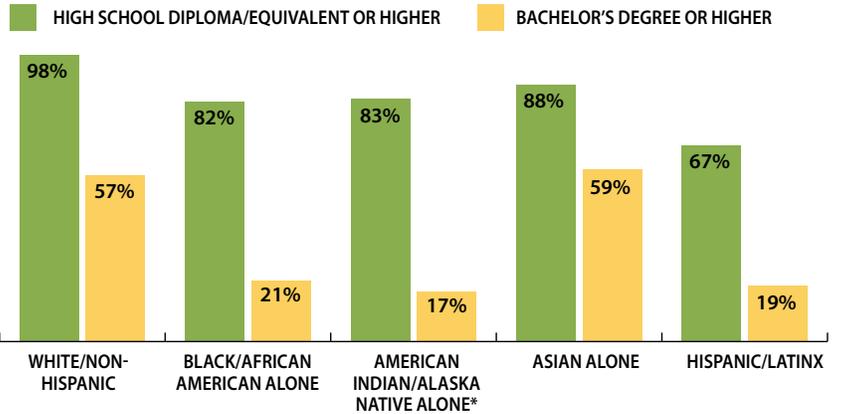
Academic performance

55% PROFICIENT IN READING BY 3RD GRADE

56% PROFICIENT IN MATH BY 8TH GRADE

78% GRADUATED HIGH SCHOOL ON TIME

Educational attainment—age 25+, by race/ethnicity



* Margin of error is at least 10% of the total value. Be cautious with this estimate.

SOURCE: 2017 MCA, MN Dept of Education, compiled by MN Compass; 2018 ACS 1-Year Estimates, U.S. Census Bureau

Health



U.S. HEALTH RESOURCES AND SERVICE ADMINISTRATION IDENTIFIED THESE AREAS IN HENNEPIN COUNTY AS BEING MEDICALLY UNDERSERVED—HAVING TOO FEW PRIMARY CARE PROVIDERS, HIGH INFANT MORTALITY, HIGH POVERTY OR A HIGH ELDERLY POPULATION.

- 6%** UNINSURED
- 13%** MEDICAID/MEANS TEST COVERAGE ALONE
- 3%** MEDICAID COVERAGE ALONE
- 23%** SAY IT IS VERY OR SOMEWHAT DIFFICULT TO PAY FOR HEALTH INSURANCE, CO-PAYS, AND DEDUCTIBLES



47,000

HOUSEHOLDS RECEIVE SNAP BENEFITS

SOURCE: 2018 Metro Shape Survey

EXTERNAL ASSESSMENT

CAP-HC Community Strengths and Needs Assessment

CAP-HC's strategic planning processes are informed by the ROMA cycle every three years, starting with the Community Strengths and Needs Assessment, a major data collection project that assesses the needs of Hennepin County's low-income community and incorporates community voices into CAP-HC's work. As a result of a competitive bid process, The Improve Group evaluation firm was selected to conduct the 2020 assessment.

The primary purpose of this assessment is to ensure that CAP-HC provides responsive services that meet community needs. To this end, the results from this assessment were incorporated into CAP-HC's 2020-22 strategic plan.

The data collection process consisted of four parts: a community profile, a survey of low-income individuals, interviews with community experts and service providers, and feedback from community workshops.

The community profile used publicly available data to outline the realities of poverty in Hennepin County. Paper and electronic surveys offered in English, Somali, and Spanish asked 697 low-income Hennepin County residents to reflect upon their experiences with poverty and unmet service needs. Phone interviews containing questions regarding the community's needs, service gaps, and potential opportunities for action were conducted with fifteen community experts and service provider employees, including representatives from the private, public, community, educational, and faith-based sectors. Finally, three community workshops were held at public libraries in Edina, Minnetonka, and North Minneapolis. These group discussions of the community's strengths and needs, which were conducted in English, Spanish, and

Somali by community leaders recruited by the Improve Group, included 74 community members.

The gathered quantitative and qualitative data were analyzed by The Improve Group and reported in the 2020 CAP-HC Community Strengths and Needs Assessment and accompanying appendices, which was approved by the CAP-HC Board of Directors on March 26, 2020 and can be found on the CAP-HC website. The following section highlights the main findings from the report.

Key Findings

The results of the 2020 CAP-HC Community Strengths and Needs Assessment were divided into five topics, which are discussed below: Most Frequent Unmet Needs, Barriers to Access, Factors that Reinforce Barriers, Community Strengths, and Opportunities for Action.

Most Frequent Unmet Needs: As part of the survey, respondents were asked to review a list of potential services and asked which of these services they need but were currently not receiving. The most frequent unmet services needs were in the areas of transportation, financial wellness, and housing. In the area of transportation, the primary unmet need was financial help with car repairs, with 45% of respondents stating that they needed but were not receiving this service. For financial wellness, the top unmet needs were savings and/or tax support (36%) and financial literacy and/or planning support (30%). In the area of housing, help with home maintenance and repair (35%) and assistance with utility payments (30%) were the top unmet needs.

Barriers to Access: Through interviews, surveys, and workshops, community members were asked to identify barriers in a variety of service areas. The results presented a complex picture of

interconnected barriers to Hennepin County's low-income community's access to economic opportunities. Poverty hinders access to many services, which in turn hinders the receipt of other services and further reinforces poverty. For instance, the high cost of car ownership (repair and insurance) was identified as a financial burden but also seen as a major barrier to accessing higher wages, employment opportunities, education and training, and health care, all of which mire low-income individuals deeper into poverty.

Factors that Reinforce Barriers: The community needs assessment also asked community members what they viewed as causes of poverty, i.e. factors that reinforce barriers to economic opportunity and improved quality of life. Two major themes emerged from these discussions: the impact of systemic oppression and white supremacy and the interconnectedness of health, housing, and low wages. Community members indicated that historical and systemic oppression sustained by white supremacy contributed to intergenerational poverty. Participants particularly indicated that criminal records prevented citizens from accessing employment, housing, and other key services, thereby reinforcing the cycle of poverty.

Community members also pointed to the interconnectedness of low wages, lack of affordable housing, and health conditions as reinforcing barriers. Several respondents indicated that wages that meet only basic needs force community members into the few affordable housing options, which tend to be of poorer quality and less safe. Moreover, an inability to save money results in families having no safety net when physical or mental health crises and household emergencies occur.

Community Strengths: Asked to identify community strengths, community members identified two main strengths: resilience and resource/service availability. Approximately 30% of survey respondents believed that community members try to help each other. Participants attributed this resiliency to community pride and a desire to take care of one's neighborhood. This sense of community also led half of respondents to state that their neighborhood felt "relatively safe."

Community members also noted resource availability and sharing as a community strength. One-third of survey respondents noted that the availability of community or government programs and public transit were community strengths.

Opportunities for Action: Asked for suggestions for improving the community, community members stated a desire to see more community-created solutions, particularly solutions that leverage the community's strengths. They also wished for further development of self-advocacy, entrepreneurship, and more opportunities for community members to connect with each other in meaningful ways.

General suggestions they offered for service providers were to collect community input more often, phase out services and supports more slowly, increase community outreach, improve navigation of services, provide outreach, resources and materials in multiple

languages, and increase collaboration between service providers. Specific suggestions for CAP-HC included sharing more data, providing greater transparency, and creating a greater number of more varied partnerships.

Incorporation into the Strategic Plan

To incorporate community input from the 2020 CAP-HC Community Strengths and Needs Assessment (CNA) into the strategic planning process, CAP-HC scheduled the data collection for the CNA to take place before the strategic planning process and the analysis of that data to take place simultaneously with its early phases.

Starting in October 2020, CAP-HC, The Improve Group and GrayHall held joint planning meetings to facilitate the incorporation of the community assessment into the strategic planning process conducted by the Strategic Planning Workgroup, whose members included the entire CAP-HC executive leadership team, GrayHall, four board members, and two staff representatives. The Improve Group also regularly attended these meetings and provided the workgroup with frequent data and reporting updates.

The CNA was also used as the external assessment for the Strengths, Weaknesses, Opportunities, and Threats (SWOT) analysis conducted by the workgroup and discussed in a later section. Additionally, thirty-five CAP-HC staff members were asked to take an agency needs survey to reflect on CAP-HC's ability to respond to unmet service

needs identified by the community assessment, information that was also used by the strategic planning workgroup during the development of strategic planning goals and objectives.

The Improve Group presented the results of the 2020 CAP-HC Community Strengths and Needs Assessment to the CAP-HC Board of Directors during a four-hour strategic planning retreat on February 22, 2020. The board analyzed this data, asked questions, and formulated four strategic directions (now the plan goals) in response to its findings: stable and responsive programming, community engagement and advocacy, organizational excellence, and strategic and data-driven decision making. Following the March 26, 2020 board meeting discussion about the impact of COVID-19 on Minnesota communities, a fifth goal (community crisis management) was added. The Strategic Planning Workgroup developed objectives for meeting each of these five goals, keeping in mind the unmet service needs, critical barriers, and community-suggested opportunities identified in the community assessment.

INTERNAL ASSESSMENTS

Two internal assessments were also conducted during the 2019-2020 strategic planning process: a strategic plan assessment conducted by GrayHall and an agency needs assessment conducted by CAP-HC staff. The findings from these assessments, discussed below, complemented each other and created a strong foundation for developing CAP-HC's strategic goals and objectives and refining the organization's mission.

Strategic Plan Internal Assessment

The internal assessment conducted by GrayHall from November through December 2019 employed one-on-one telephone interviews to gather information from seventeen CAP-HC staff (85% of planned interviews) who were directly involved in program and administrative work. The interviews contained eleven questions addressing CAP-HC's mission, issues that it works to solve, how it knows it is getting results, the most pressing issues it is trying to solve, what it should focus more or less on, what it does well and how it can improve, its hoped-for impacts over the next three years, how it could be truly innovative, and environmental trends that may affect its mission in the future.

CAP-HC's Mission: More than half of those interviewed agreed that the organization has a clear mission. Of the others, five said the mission could improve and two that the mission is not clear.

Issues CAP-HC Works to Solve:

The respondents identified nine problems for individuals, families and communities that CAP-HC is trying to solve with its programming and services: childcare, housing and homeownership, financial literacy and money management, car repair and transportation, energy assistance, self-sufficiency, and tax assistance.

How CAP-HC Knows it is Getting

Results: The largest number of respondents indicated that CAP-HC will know it is getting the results it seeks by developing a strong narrative about its work using the evaluations for each program. Other respondents identified ROMA Goals (national performance indicators); periodic follow-ups with individuals, families and community partners; and reports of activities that would establish impact (currently not required) as forms of knowledge that help CAP-HC determine whether it is making a difference for individuals and families.

The Most Pressing Issues CAP-HC is

Trying to Solve: The greatest number of respondents named limited staff capacity as the most pressing issue facing CAP-HC. More than half of the respondents identified staff morale as the most pressing issue facing CAP-HC and more than a quarter identified CAP-HC's reputation with funders and the community. Four respondents named CAP-HC's need to rebuild internally and externally as its most pressing issue, and two respondents said the same about the limited number of active CAP-HC programs.

What CAP-HC Should Focus More

or Less on: The top three issues that respondents felt CAP-HC should focus more on were housing, staff and internal culture, and the organization's mission. One or two respondents each stated they would like CAP-HC to focus more on programming for seniors, the findings of the 2020 Community Needs Assessment, gaps in services, such as basic personal needs as food and shelter, and sharing messages with CAP-HC partners and the community regarding CAP-HC's programming and services. In terms of issues that CAP-HC should focus on less, one or two each identified external factors, performance management, programs that are doing well, direct services, and community collaboratives.

What CAP-HC Does Well and What it Can Improve:

A majority of the respondents selected Energy Assistance as a program that CAP-HC does well. The water program was chosen by a third of the respondents as something else that CAP-HC does well. Two respondents identified financial management (e.g., clean audits), and one each mentioned meeting the needs of the clients and providing services; making alliances, partnering, reaching out to others, outreach, lots of events; working with community; sincerely caring about people; and housing.

Most of the respondents identified teamwork as the top issue that CAP-HC can improve. A related area identified by two of the respondents was being at full staff capacity. Other issues raised by one respondent each were focusing on technology, creating a one-stop-shop for CAP-HC clients, providing better employee benefits and compensation, and creating a better balance of services.

Hoped for Impacts Over the Next

Three Years: More than half of the respondents hoped that over the next three years CAP-HC will increase the visibility and community awareness about its programs and services. Eight respondents hoped that none of CAP-HC's programs will be on hold and five that CAP-HC will be offering housing services by that time. Three hoped for increased stability for CAP-HC, and two would like people in Minneapolis to know CAP-HC is available to help them. One each hoped that the CAP-HC's impact over the next three years will include services that are most needed by the citizens of Hennepin County; successful new hires; and a high-functioning tripartite Board of Directors, including a third each of elected officials, people who represent low income residents, and private sector representatives.

How CAP-HC Could be Truly

Innovative: More than a third of the respondents believed it would be innovative for CAP-HC to increase its use of social media and create a more visible online presence. The remaining respondents identified seven innovations that CAP-HC might engage in: developing real estate, creating a social enterprise, continuing to hire clients who qualify for CAP-HC positions, serving different clients, obtaining greater name recognition, new programming, and building a virtual work environment.

Environmental Trends That May Affect CAP-HC in the Future:

Four environmental trends that impact programming and/or funding were identified by three to seven respondents: the U.S. political climate, federal policy changes, lack of affordable housing, and increased competition for employees. Two respondents each noted the potential effect of the 2020 United States Census, particularly if it results in a low count of immigrants; a potential recession creating greater poverty; and people retiring on fixed incomes that they are unprepared to live on. One respondent

each discussed employment bias based on race and age, the need for more organizational partnerships and shared projects, the impact of gentrification, and the increasing number of people using food shelves.

Agency Strengths and Needs Assessment

On February 27, 2020, CAP-HP sent a survey to forty full-time, permanent CAP-HC employees. Thirty-five staff members responded, resulting in an 88% response rate. The purpose of the survey was to collect staff feedback on the agency's needs and the organization's ability to respond to the individual and community needs identified by the 2020 CAP-HC Community Strengths and Needs Assessment. A majority (60%) of the respondents worked within the Energy Services program (60%), and most (77%) had been with the agency five years or less.

CAP-HC Strengths and Weaknesses:

The most prominent strengths identified by respondents were staff diversity (71%), high-quality staff (50%), and the high quality of current programming and agency locations (47%). The most commonly mentioned agency weaknesses were related to the staffing and agency environment, primarily the training of staff (56%), the number of staff (53%), and agency culture and morale (47%).

Agency Capacity to Respond: Asked to rate CAP-HC's ability to respond to specific individual and community needs on a 1-5 scale (1=Very Difficult, 5=Very Easy), the vast majority (88%) of respondents felt that CAP-HC could easily respond to utility payment needs. A majority of respondents also felt that CAP-HC could aptly respond to needs related to health insurance, public transit fares, food support, financial literacy, homebuyer counseling and education, renter's education, saving assistance, and tax assistance needs. The need areas identified as most challenging for CAP-HC to address were childcare, substance abuse, and mental health.

SWOT ANALYSIS

Review and discussion of the external and internal assessments allowed the Strategic Planning Workgroup to develop a SWOT analysis (strengths, weaknesses, opportunities and threats analysis) which summarized key findings from all assessments into a usable framework for

identifying and analyzing the internal and external factors that impact on CAP-HC. The SWOT analysis, displayed below, served as a foundational planning tool in creating the strategic plan's goals and objectives.

STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
<p>Strong Energy Assistance program for utility shut offs, including heat and water</p> <p>Community Input</p> <p>Stable, flexible funding</p> <p>Stabilizing staffing</p> <p>Increasing stewardship</p>	<p>Limited name recognition/visibility</p> <p>Limited number of active CAP-HC programs (e.g., gaps in services, unmet needs)</p> <p>Staff capacity (e.g., successful hires; increased competition for employees)</p> <p>Staff morale (e.g., lack of stability, loss of confidence, high level of uncertainty and change, inconsistent leadership, internal climate, teamwork)</p> <p>Space (potential location)</p> <p>Staff training/professional development</p> <p>Weaknesses identified by the CNA</p> <p>Programming for client services</p> <p>Programming for adolescents and youth</p>	<p>Name recognition</p> <p>Rebranding (promote the values)</p> <p>Expanding funding/diversifying</p> <p>Relaunch more effective programs</p> <p>Strengthen infrastructure</p> <p>Strengthen partnerships</p> <p>Resiliency for funding increases</p> <p>Using community-driven solutions</p> <p>Mental health resources (more partnerships for referrals)</p> <p>Getting counted (U.S. Census)</p> <p>Hiring a new executive director</p> <p>Hiring qualified staff</p> <p>Policy/advocacy</p>	<p>A potential recession (e.g., much harder for people living in poverty)</p> <p>Federal and state policy changes (e.g., undocumented fear deportation; new requirements)</p> <p>Without verifiable social security numbers or valid immigration documentation Minnesota Energy Programs' applications cannot be processed (impacts undocumented)</p> <p>The 2020 United States Census (e.g., low counts related to immigration policies impact funding)</p> <p>The United States political climate (e.g., political support in 2020 and beyond; possible funding cuts)</p> <p>COVID-19</p> <p>Impacts of poverty</p> <p>Housing crisis creating homelessness</p> <p>External climate (funders, policy, politics)</p> <p>DOC and OEO QIPs (Quality Improvement Plans)</p>

STRATEGIC GOALS AND OBJECTIVES

Community Action Partnership-Hennepin County’s highest standards for excellence in programming, civic leadership, addressing emerging needs, governance and operations, and data use will be sought through close attention to the following strategic goals:

GOAL 1	Stable and Responsive Programming	
	OBJECTIVES	1.1: Deliver high-quality services that meet family and individual needs as identified by the Community Needs Assessment.
		1.2: Strengthen CAP-HC’s network of community partners.
		1.3: Expand resources to increase CAP-HC’s capacity to serve the community (e.g., space, vehicle repair).
GOAL 2	Community Engagement and Advocacy	
	OBJECTIVES	2.1: Engage low-income communities in developing solutions to address poverty.
		2.2: Establish CAP-HC legislative agenda and priorities and work in partnership with advocacy organizations.
		2.3: Support civic engagement efforts within the community.
GOAL 3	Community Crisis Management	
	OBJECTIVES	3.1: CAP-HC is a nimble organization, able to quickly respond to the changing needs of staff, agency, and the community we serve.
		3.2: Monitor the impact of the COVID-19 public health crisis and respond in a manner that addresses client and community needs while acting within program and funding guidelines.
GOAL 4	Organizational Excellence	
	OBJECTIVES	4.1: Create client growth and agency visibility.
		4.2: Continue giving ongoing priority to maintaining a strong, positive CAP-HC culture.
		4.3: Integrate “industry” best practices into CAP-HC’s daily operations.
		4.4: Maintain financial stability and accountability.
		4.5: Maintain effective governance and organizational compliance.
GOAL 5	Strategic and Data-Driven Decision Making	
	OBJECTIVES	5.1: Refine policies and procedures for data collection, reporting, and management.
		5.2: Regularly assess community and agency-level data to identify trends and inform programming decisions.
		5.3: Systematically align grants, client needs, and staff capacity.

KEY PERFORMANCE INDICATORS

Programming	
1. Stable and Responsive Programming	
<p>1.1: Deliver high-quality services that meet family and individual needs as identified by the Community Needs Assessment.</p>	<ul style="list-style-type: none"> • Program monitoring reports reflect achievement of program objectives. • All programs maintain a low-risk status with funders. • Fiscal systems are in place to accept funds and deliver services such as water and vehicle repairs to customers immediately. • CAP-HC services are culturally informed. • All programs are operated and managed in alignment with authorized revenues and expenses. • Staff capacity is maximized to ensure high-quality program delivery. • CAP-HC is able to examine, refine, and create programming that serves individual and family needs. • CAP-HC clients in the designated areas increase by targeted percent.
<p>1.2: Strengthen CAP-HC's network of community partners.</p>	<ul style="list-style-type: none"> • A field scan of existing partnerships is completed (e.g., inventory of partnership expertise). • Community outreach is expanded and family and individual program participants served by CAP-HC increases by targeted percentage (e.g., Hennepin County Library system partnership).
<p>1.3: Expand resources to increase CAP-HC's capacity to serve the community (e.g., space, vehicle repair).</p>	<ul style="list-style-type: none"> • A facilities plan is developed and cost effective space opportunities, including building ownership versus rental, are identified. • Funding for program expansion is acquired.
Civic Leadership	
2. Community Engagement and Advocacy	
<p>2.1: Engage low income communities in developing solutions to address poverty.</p>	<ul style="list-style-type: none"> • Leadership development and advocacy tools for community members are available. • A leadership development and personal empowerment program is launched. • Community members continue to inform the Community Needs Assessment. • Community members take actions to improve their lives. • Listening sessions with community members are regularly convened. • Satisfaction reports indicate that community members trust CAP-HC. • Community members are engaged in CAP-HC activities.
<p>2.2: Establish CAP-HC legislative agenda and priorities and work in partnership with advocacy organizations.</p>	<ul style="list-style-type: none"> • CAP-HC's board sets its legislative agenda/priorities. • Potential new partners are researched and strategically enlisted. • CAP-HC joins with partners to support opportunities for low income Minnesotans to build wealth and climb the economic ladder.
<p>2.3: Support civic engagement efforts within the community.</p>	<ul style="list-style-type: none"> • Voter education and registration services are provided. • The U.S. Census efforts to effectively count all Hennepin County community members are supported. • Community leadership development opportunities at CAP-HC are established. • Individuals and families have a sense of influence over events that affect them and can take action.

Emerging Needs

3. Community Crisis Management

<p>3.1: CAP-HC is a nimble organization, able to quickly respond to the changing needs of staff, agency and the community we serve.</p>	<ul style="list-style-type: none"> • CAP-HC staff monitor the impact of emerging economic emergencies on clients and act within program and funding guidelines. • Individuals and families have assets necessary to weather financial crises. • The impacts of crises on staff morale and organizational performance are closely monitored.
<p>3.2: Monitor the impact of the COVID-19 public health crisis and respond in a manner that addresses client and community needs while acting within program and funding guidelines.</p>	<ul style="list-style-type: none"> • Effective responses to COVID-19 are developed.

Governance and Operations

4. Organizational Excellence

<p>4.1: Create client growth and agency visibility.</p>	<ul style="list-style-type: none"> • A comprehensive marketing strategy is created and implemented, including a social media campaign that guides clients to CAP-HC. • Marketing objectives address client access, relevance, customization and collaboration. • CAP-HC’s website is optimized and heavily used by clients and others. • CAP-HC influences the perception of poverty through its leadership and history of supporting low-income people (e.g., board members, executive director, and staff share beliefs, ways of thinking, and data about poverty with partners and the community).
<p>4.2: Continue giving ongoing priority to maintaining a strong, positive CAP-HC culture.</p>	<ul style="list-style-type: none"> • CAP-HC’s leadership team and staff have created and implemented specific strategies that address workplace culture improvements. • Work of the Community Staff Committee is supported. • A diversity, equity, and inclusion (DEI) plan is developed, implemented, and monitored. • New recruitment and retention strategies are developed and qualified staff are recruited and retained. • New staff are onboarded and existing employees are offboarded in a manner that ensures high-quality program operations. • Succession plans are in place to maintain the strength of CAP-HC and ensure its long-term health, growth, and stability. • Quarterly leadership and/or annual awards/ recognition celebration meetings boost staff morale. • All CAP-HC employees feel valued and appreciated and perform their best at work.
<p>4.3: Integrate “industry” best practices into CAP-HC’s daily operations.</p>	<ul style="list-style-type: none"> • Three best practices trainings for supervisors are designed and offered. • All staff are trained in performance management system processes. • Stable and updated technology that meets service needs is sustained.
<p>4.4: Maintain financial stability and accountability.</p>	<ul style="list-style-type: none"> • Flexible, sustainable finances are in place. • Each completed fiscal year meets the approved budget projections (e.g., every department has a balanced budget). • Fiscal systems are in place to write checks, process payroll, and get reports into DHS and DOC to timely process all payments to vendors and payroll. • Fiscal accountability and clean audits are ensured. • Funding sources are diversified as appropriate.

<p>4.5: Maintain effective governance and organizational compliance.</p>	<ul style="list-style-type: none"> • CAP-HC’s Board of Directors has and uses the necessary recruitment tools to maintain a tripartite board. • The board sustains full membership and regular attendance at board meetings. • The board provides staff with clear direction on key organizational issues. • A systematic process of evaluating the risks that may be involved in conducting agency operations and programs is adopted. • 100% of the actions identified by the risk assessment are complete. • Organizational standards compliance meets the threshold defined by the Office of Economic Opportunity.
---	--

Data Use

5. Strategic and Data-Driven Decision Making

<p>5.1: Refine policies and procedures for data collection, reporting, and management.</p>	<ul style="list-style-type: none"> • A data management handbook outlining procedures for data reports, entry protocols, and quality checks is created, distributed, and widely used. • Effective data training for all data entry staff is implemented semi-annually. • Data analysis procedures are created.
<p>5.2: Regularly assess community and agency-level data to identify trends and inform programming decisions.</p>	<ul style="list-style-type: none"> • Data collection is ongoing and effective. • Data trends are continually monitored to inform programming. • Programs’ effectiveness is regularly evaluated, data are used to maintain and improve quality, and program duplication is avoided. • Data are used to identify clients served under multiple programs. • A market study focused on two communities that have a high concentration of poverty and underutilization of CAP-HC services is designed and implemented and findings are used to improve services. • CAP-HC makes efforts to assess the community impact of its programming and services.
<p>5.3: Systematically align grants, client needs, and staff capacity.</p>	<ul style="list-style-type: none"> • CAP-HC is able to fully profile clients, integrate and align program needs with available grants, and better choose program partners.

The Community Action Partnership of Hennepin County (CAP-HC) 2020–2022 Strategic Plan was adopted by the CAP-HC Board of Directors on May 28, 2020.

CAP-HC Board of Directors

Michael Vekich, **Chair**
David Asp, **Vice Chair**, *representing Hennepin County Commissioner Jeff Johnson*
Karin Keitel, **Secretary**, *representing Hennepin County Commissioner Jan Callison*
Kevin Myren, **Treasurer**
Alysen Nesse, *representing Minneapolis Councilmember Jeremiah Ellison*
Josh Schaffer, *representing Minneapolis Councilmember Jeremy Schroeder*
Allen Rezac, *representing Hennepin County Commissioner Marion Greene*
Tyanna Bryant
Nelson Morocho Cuvi
Justin Gillette
Chloe Jackson
Solomon Ogunyemi
Sherrie Pugh
Mercedes Thomas
Eric Totten
Angela Williams
Tonja West-Hafner

CAP-HC Strategic Planning Workgroup

LEADERSHIP TEAM

Dr. Clarence Hightower, Executive Director
Feleshia Edwards, Senior Director of Energy Services
Brooke Walker, Interim Director of Client Services
Jennifer Horton, Associate Director of Client Services
Sam Miller, Director of Human Resources
Todd Blooflat, Director of Finance
Mitch Radtke, Data Analyst and Strategic Planning
Jane Cummiskey, Senior Accountant
Al Brown, Marketing and Communications Strategist
Dee Yang, Executive Assistant

BOARD MEMBERS

Alysen Nesse
Tyanna Bryant
Justin Gillette
Angela Williams

STAFF

Theresa Leonard, Grants Manager
Paul Duncan, IT Manager

CONSULTANTS

 GrayHall LLP
WEB: www.grayhall.com
EMAIL: info@grayhall.com

Offices

ST. LOUIS PARK OFFICE (MAIN OFFICE)

Community Action Partnership of Hennepin County
8800 Highway 7, Ste. 401
St. Louis Park, Minnesota 55426
PHONE: 952-933-9639

MINNEAPOLIS URBAN LEAGUE

2100 Plymouth Ave N., Suite 112
Minneapolis, MN 55411
PHONE: 952-930-3541

SABATHANI COMMUNITY CENTER

310 E 38th St., Suite 211
Minneapolis, MN 55409
PHONE: 952-930-3541

EAP OFFICE AT LUTHERAN SOCIAL SERVICES

2400 Park Avenue South, Second Floor
Minneapolis, MN 55404
PHONE: (952) 210-9327

WEB: www.caphennepin.org



Follow us on Facebook and Twitter at @caphennepin



Contact CAP-HC to learn more about energy, water, homebuyers, renters, MNsure applications, community development or crisis assistance; car program; food support; homelessness or financial services; or how to apply for assistance, or how to participate in CAP-HC programs as a client or partner.