



Strategic Plan for 2017 to 2020 Financial Years for CCCWHC

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1 Context

Period of Strategic Plan: This Strategic Plan relates to the period 1 July 2017 to 30 June 2020.

Central Coast Community Women's Health Centre (CCCWHC) was established in 1976 to provide an alternative model of health care. The vision was for a holistic women's health service that would address the variant of women's health needs, not just the physical, but also emotional, social, psychological, cultural and environmental health needs.

CCCWHC is a not for profit community-based organisation. We are an incorporated company with limited guarantee. We are a registered charity, therefore we are able to raise funds and request donations, as long as it is in accordance with our philosophy and the ideology of our Membership.

We are one of many generalist and specialist women's health centres in NSW with Women's Health NSW as our peak body. Women's Health NSW provides training, database management, advocacy support and representation to government on women's health issues.

2 Objectives

- Provide women in the community with a holistic health service which includes a women's health clinic, generalist counselling, therapeutic groups, educational groups and workshops, social groups, information and referral and complementary therapies.
- Educate and empower women by the provision of preventive health services, self-development and empowerment programs.
- Encourage Aboriginal and Torres Strait Islander women, women from diverse cultural backgrounds, women with disabilities, women with diverse sexuality and women from low income groups to achieve full access to the services provided.
- Provide a safe space for women in a supportive environment.
- Advocate for women on a range of issues from a feminist perspective.
- Identify the health needs of women in the community and develop services and programs to meet these needs.
- Partner with other services to address the needs of women in our community.
- Provide information and referral services to women.



3 Service opportunity

Below is a map of the geographical area serviced by CCCWHC.



With approximately 8000 occasions of service per year, below is a representation of our geographical reach for the year 2015/16 and the percentage of clients accessing our range of services.



POSTCODE



| | | | |
|---------|-----|-----------|-----|
| ● 2250 | 33% | LGA | |
| ● 2251 | 9% | ● Wyong | 40% |
| ● 2256 | 6% | ● Gosford | 60% |
| ● 2257 | 10% | | |
| ● 2259 | 19% | | |
| ● 2260 | 5% | | |
| ● 2261 | 11% | | |
| ● 2263 | 4% | | |
| ● Other | 2% | | |

SERVICES PROVIDED IN 2015/16



| | | |
|----------------------------|------|-------|
| ● Pelvic Floor Chair | 1066 | 7.5% |
| ● Complementary Therapies | 485 | 3.4% |
| ● Doctor appointments | 4017 | 28.3% |
| ● Counselling | 1150 | 8.1% |
| ● Advocacy | 251 | 1.8% |
| ● Childcare | 290 | 2.0% |
| ● Community engagement | 3000 | 21.1% |
| ● Information/referral | 1020 | 7.2% |
| ● Groups | 2924 | 20.6% |
| Group statistics | | |
| ● Physical activity groups | 1208 | 8.5% |
| ● Social groups | 474 | 11.8% |
| ● Therapeutic groups | 1242 | 8.7% |



4 Vision

To be the feminist health centre of choice for Central Coast women to access best practice holistic health care.

5 Mission

To be known and trusted as the best provider of holistic health care services for Central Coast women of all ages, backgrounds and cultures. To provide our services in a consultative, collaborative, respectful, friendly and effective way that enriches women's lives and improves their personal wellbeing. To be a respected organisation that women want to join.

6 Values

All services provided by CCCWHC are based on feminist principles. The principles uphold the conviction that every woman has the right to make informed decisions regarding all aspects of her physical, mental, emotional and spiritual health. We provide a safe environment where women are given the opportunity to gain information and learn skills to enable them to make healthy life choices. We work to fulfil the right of women to health services of high quality that are provided in an empowering manner that values women's own knowledge and skills.

Feminist Principles

The following principles come from a feminist analysis of society, and provide a basis for our work to promote women's health. We keep them in mind when we are developing our own health promotion strategies and programs:

- Increase women's self-esteem.
- Ensure that available services are relevant to women's needs.
- Ensure access to all women.
- Raise women's awareness of health issues.
- Ensure that services and resources are culturally appropriate.
- Encourage mutual support.
- Encourage women to make choices and increase their awareness of choices.
- Encourage women's participation at all levels of the health system.
- Change inappropriate attitudes towards women at all levels of society.
- Increase political awareness as it relates to women's health.
- Involve consumers through consultation.
- Encourage community control.
- Increase awareness of the effects of the environment on health.
- Encourage accountability of the health system to consumers.
- Encourage co-operation.

These principles inform all our actions and decisions.

All members of the association are required to sign our Statement of Feminist Ideology.



7 Arenas

Geography – CCCWHC provides services spanning the whole of the Central Coast, with centres situated in key strategic locations relevant to socio economic need.

Clients – women of all ages, backgrounds and cultures living on the Central Coast.

Members – women from all ages, backgrounds and cultures who are supportive of the services CCCWHC provides and are looking to socially connect and engage with other like-minded women in the interest of improving access to information about women's health and personal wellbeing.

Services – Women's Health GP clinic, counselling, therapeutic, psychoeducational and social groups, allied health, complementary therapies, information and referral, advocacy, safe space for women.

Partnerships

In 2015/16 our partnerships included:

- Counselling for Adult Survivors of Childhood Sexual Assault provided by Rape and Domestic Violence Services Australia at Wyoming centre
- Legal Advice Service provided by the Early Intervention Family Law Legal Advice Service of Legal Aid NSW at Northern Women's Health Centre
- Women's Health Clinic provided by the Central Coast Local Health District Women's Health Service at Peninsula Women's Health Centre
- Family Planning NSW for Mirena insertion clinics at Wyoming centre
- Low cost counselling service provided by CoastCare Counselling at Peninsula Women's Health Centre
- Supported Playgroup provided by Uniting at Northern Women's Health Centre
- Aboriginal antenatal group and clinic provided by Yerin Aboriginal Health Service at Peninsula Women's Health Centre
- MOU with CatholicCare's Staying Home Leaving Violence service to run domestic violence groups at Northern Women's Health Centre.
- Partner agreement with various services including BaptistCare, Central Coast Local Health District, Benevolent Society and Central Coast Family Support service to run domestic violence group 'Breaking Free' at our three centres
- Partnership with Hunter Women's Centre to provide the mentoring program on the Central Coast
- Partnership with a number of women's organisations on the Central Coast to coordinate the 2016 International Women's Day Expo and other related activities
- Formalised referrals from State Debt Recovery Office
- Informal partnership with Wyoming Community Centre working with and supporting CCCWHC on a variety of issues

8 Value proposition

Value proposition for clients

Central Coast Community Women's Health Centre is a safe space for women, a place where women of all ages and backgrounds can access holistic health services that address the



physical, mental, emotional and social needs of a woman across her life span. Our health services are provided by highly skilled and professional staff who are committed to enhancing every woman's wellbeing.

Value proposition for members

Central Coast Community Women's Health Centre is a professional organisation with a strong community profile that provides essential health services to women within a feminist framework and in a holistic way. We also engage in advocacy on issues relevant to feminism and gender and see our membership as integral to promoting issues of feminism and gender and the work of our organisation.

Through membership with CCCWHC, like-minded women in our community can engage and advocate on feminist and gender issues that concern women of all ages and, support the provision of essential health services within a feminist framework, in a holistic way, for all women on the Central Coast of NSW.

Value proposition for staff

Central Coast Community Women's Health Centre is an organisation that is at the forefront of women's health on the Central Coast, that has a strong community profile and is well engaged with other organisations in the local area who are also meeting the needs of women. This is a learning organisation that values the skills and experience of its workers, invests in professional development and considers its workers to be key to effective service delivery to clients. CCCWHC provides a flexible, family friendly work environment with award salary levels and additional beneficial employment conditions.

9 Goals & strategic themes

The Board has adopted the following long-term key strategic goals:

1. Growth
2. Quality assurance
3. Sustainable business practice
4. Community engagement

The following key strategic themes were identified for 2017/20 based on the SWOT and general operating environment

- Growth
 - Services
 - Membership
 - Clients
- Quality assurance
 - Services
 - Client satisfaction & advocacy
 - Regulatory compliance (e.g. accreditation)
- Sustainable business practice



- Financial management
- Funding
- Revenue
- Human resource management
- Facilities and asset management
- Board governance
- Operational risk management
- Community engagement
 - Advocacy
 - Collaboration and partnerships



10 Key Risks

| Key Risks to Achieving Objectives | Objective | Key Risks |
|-----------------------------------|-----------|--|
| | Finance | <ul style="list-style-type: none"> Inability to attract or generate funds |
| | Finance | <ul style="list-style-type: none"> High reliance on government funding |
| | Services | <ul style="list-style-type: none"> Key Person Risk |
| | Services | <ul style="list-style-type: none"> Childcare service at Wyoming |
| | | <ul style="list-style-type: none"> |
| | | <ul style="list-style-type: none"> |

11 Strengths, Weaknesses, Opportunities and Threats

The Board has identified the following key strengths, weaknesses, opportunities and threats in relation to CCCWHC. The strengths and weaknesses relate to the internal environment while opportunities and threats relate to the external environment.



Strengths and Weaknesses

| Focus Area | Strengths | Weaknesses | Strategic themes |
|--------------------|--|--|--|
| Our Service | <ul style="list-style-type: none"> • Longevity • Safe place for women • Multi-disciplinary • Good reputation • Good infrastructure • Good geographical reach – three locations • Good compliance • Accreditation • Partnerships • Childcare | <ul style="list-style-type: none"> • Limited access to centre – days open and clinic reach • Limited transport north of Wyong for clients to get to Northern WHC • Higher demand than supply of some services – waiting lists • Client demographics don't reflect demographics of area • Capacity to take on crisis • Childcare, while available, is limited | <p>Growth – Clients, services</p> <p>Quality Assurance – services, regulatory compliance</p> |
| Our people | <ul style="list-style-type: none"> • Good Board culture and diverse range of expertise • Workers – low turnover, skilled and committed workers, workers engaged in other skill areas/external connections • Committed and reliable volunteers • Good governance • Ongoing training for workers • Teamwork • Workers have a voice and are involved in key processes such as planning • Good supervision processes | <ul style="list-style-type: none"> • Difficult to recruit GPs • Key person risk with Senior Doctor, Manager and accounting staff • Reliant on external resources to construct, report and measure our financial performance • Lack of succession planning • In some cases limited skill base of volunteers | <p>Human resource management</p> |



| Focus Area | Strengths | Weaknesses | Strategic themes |
|------------------------------|---|---|--|
| Community | <ul style="list-style-type: none"> Strengthening and expanding networks/collaborations DV Committee and Expo Committee Good opportunities for student placements and volunteer involvement | <ul style="list-style-type: none"> Awareness of the sophistication of our centre and quality of our services Awareness of all that we do | Services Membership Client satisfaction and advocacy |
| Technology | <ul style="list-style-type: none"> Supportive IT systems in place | <ul style="list-style-type: none"> No system availability to self-serve for appointments etc. Slow server IT system needs upgrading | Facilities and asset management |
| Operational Processes | <ul style="list-style-type: none"> Strong and accountable operational procedures in place | <ul style="list-style-type: none"> Some operational processes only known to key people | Services Facilities and asset management Human resource management |
| Regulatory | <ul style="list-style-type: none"> Regulatory systems strong and compliant | <ul style="list-style-type: none"> Cost of ongoing accreditation | Accreditation |
| Financial | <ul style="list-style-type: none"> Strong reserves and operating in surplus | <ul style="list-style-type: none"> Too highly reliant on grants to fund operations Outreach reliant on donations Inadequate core funding Frozen Medicare rebate | Financial management Community (engagement) |



| Focus Area | Strengths | Weaknesses | Strategic themes |
|---|---|--|-----------------------|
| Marketing & Client/member Engagement | <ul style="list-style-type: none"> • Former strong membership base that can be accessed/called upon • Wide distribution of WOTS ON – community outlets and email list | <ul style="list-style-type: none"> • Lack of memberships and under-engaged members • WOTS ON comes out too late • Two different WOTS ON documents is confusing • Expense of printing the WOTS ON • Expand social media reach – new platforms and more people on existing platforms • Engage more in GoFundraise and Workplace Giving schemes | Membership Clients |



11.1 Opportunities and Threats

| Focus Area | Opportunities | Threats | Strategic themes |
|---------------------------|--|---|---|
| Economic | <ul style="list-style-type: none"> Increasing cost of private insurance may increase demand for our diverse services Increasing income through room rentals Opportunity of paid advertising in WOTS ON Becoming a registered provider through the NDIS Further, broader fundraising | <ul style="list-style-type: none"> Increasing costs to operate driven by mounting wage pressures Change in perception of our service could change demographic of client base and push out more vulnerable clients Discontinuation of funding | Services Revenue |
| Consumer Sentiment | <ul style="list-style-type: none"> Awareness of our holistic health feminist-focused services could be attractive to higher fee paying clients which will help us fund more services for our core client base. Attract new/young women, new ideas | <ul style="list-style-type: none"> Anti-feminist sentiment Change of political representatives could affect politicians' continuity of support | Services Revenue |
| Political | <ul style="list-style-type: none"> Medicare rebate freeze may be lifted Our relationship with MPs/patrons – relationship building and continued involvement with centre events Council wards being reintroduced – potential opportunity for more specific feedback and promotion/support avenues | <ul style="list-style-type: none"> New council structure could undervalue our service and withdraw support Government grants are reduced or cease | Services Revenue Client satisfaction and advocacy Community engagement |



| Focus Area | Opportunities | Threats | Strategic themes |
|-------------------|---|--|---|
| Our people | <ul style="list-style-type: none"> • Build a transition to retirement and flexible family-friendly contract value propositions to attract skilled, experienced and diverse general practitioners, counsellors and other workers to support our growth aspiration. • Further training and opportunities for growth and career development • The contribution that students and volunteers make to the service | <ul style="list-style-type: none"> • Lack of GPs on the Central Coast • 12 month funding rounds can make it difficult to recruit, as people see lack of job security (this could also be an opportunity as the regular labour market moves to shorter and shorter contracts) | Human resource management Board governance |
| Community | <ul style="list-style-type: none"> • Opportunity to be the beneficiary of charitable drives • Engagement of students/mentoring – TAFE, University, High Schools • More community events – building on our profile in the community | <ul style="list-style-type: none"> • Backlash against feminism in society • Lack of resources to cope with additional demand | Services Revenue Financial management Community engagement |
| Technology | <ul style="list-style-type: none"> • Ability to promote gender equality, feminism and our service through our social media channels • Ability to reach broader audiences at less cost through social media | <ul style="list-style-type: none"> • Health in an app or online providers of our services • Effect of technology on gender equity e.g. accessibility of pornography to young boys and men | Revenue Risk management |



| Focus Area | Opportunities | Threats | Strategic themes |
|----------------|---|--|---|
| Service | <ul style="list-style-type: none"> Seek alternative income streams through growth and diversification of our clinic services | <ul style="list-style-type: none"> Rented accommodation in Wyong and Woy Woy vulnerable to council withdrawal of support or increased rents that we cannot sustain Change to cervical screening program could lead to reduced number of patients. Could also be a potential opportunity i.e. able to get patients in for other reasons Demand exceeding supply if the service is promoted | Services Revenue Financial management Funding Facilities and asset management Community engagement |



12 Key Strategic Initiatives

| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|--------|------------|-------------------|---|--|---------|----------------|---|
| Growth | Clients | Diversity | Develop a strategy to increase the diversity of our clients to better serve our community | Diversity of clients is in proportion to diversity of residents of the Central Coast according to available data | Manager | December 2017 | |
| Growth | Membership | Membership growth | Engage existing members and clients to develop a member value proposition | Value proposition developed by September 2017 | Board | September 2017 | |
| Growth | Membership | Membership growth | Based on the member value proposition, develop a strategy to grow and nurture membership | Strategy developed by December 2017 | Board | December 2017 | |
| Growth | Membership | Membership growth | Implement strategy to grow membership | Strategy implemented by February 2018 Membership increased by 100 by June 2018 | Manager | June 2018 | Additional income through membership payments |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|-------------------|-----------------------|-------------------|--|--|---------------|----------------|---------------------------------|
| Growth | Services | Clinic | Draw up a development operational plan for the clinic including key person risk management, supply and demand strategy, increased services and financial contribution to organisational surplus. | Plan developed by December 2017 | Manager | December 2017 | Increased income |
| Growth | Services | Childcare | Increase child care availability at outreach centres | Child care availability increases to an extra half day per week at Northern and Peninsula by June 2018 | Manager Board | June 2018 | \$8000 per year additional cost |
| Quality Assurance | Services | Data systems | Review evaluation data collection system for counselling and groups to support service quality. | All data requirements are serviced by June 2018 | Manager | June 2018 | Cost of review |
| Quality Assurance | Regulatory Compliance | Accreditation | Subscribe to SPP online and develop a quality improvement schedule for key quality areas | Subscribe by 31 July 2017 Schedule developed by 1 September 2017 | Manager | September 2017 | \$3200 |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|-------------------------------|---------|-------------------|---|--|---------|-----------------|---|
| Sustainable business practice | Funding | NSW Health Grant | Prepare tender for NSW Health Funding | Quality tender prepared, reviewed and submitted on time and funding continues | Manager | To be confirmed | Possible Consultant review |
| Sustainable business practice | Funding | Childcare grant | Develop alternative funding plan for childcare | Childcare service is fully funded independent of the grant | Manager | July 2018 | \$27,000 full cost of current childcare service |
| Sustainable business practice | Funding | Fundraising | Develop a proposal and pitch to Myer for CCCWHC to be a 2018 beneficial charity in their spare change fundraising drive | CCCWHC is a 2018 beneficiary with a fundraising goal of \$5,000 | Manager | July 2017 | \$5,000 increased income |
| Sustainable business practice | Funding | Donations | Develop a proposal and pitch to become the beneficiary of workplace giving for the employees of local businesses | CCCWHC is a beneficiary of workplace giving in two large local enterprises by June 2018 with a donations goal of \$20,000 pa | Board | June 2018 | \$20,000 increased income |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|-------------------------------|----------------------|--------------------------|--|--|-------------------|----------------|------------------------------------|
| Sustainable business practice | Financial management | Accounting and reporting | Find new provider of accounting services and monthly reporting of organisational financial performance. | New provider engaged by September 2017 | Finance Committee | September 2017 | Possible increased cost |
| Sustainable business practice | Revenue | Clinic | Increase income generated by clinic services | Provide one new service through clinic that increases revenue by June 2018 and increase income by \$10,000 per annum | Manager | June 2018 | Potential of extra \$10 000 income |
| Sustainable business practice | Board governance | Succession planning | Develop a succession plan for the four board executive positions of Chair, Deputy Chair, Secretary and Treasurer by June 2017 | Succession documented | Board | July 2017 | |
| Sustainable business practice | Board governance | Succession planning | Develop a succession plan for key management positions i.e. manager, counselling coordinator, clinic coordinator, Admin/Finance Worker | Succession documented | Board | July 2017 | |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|-------------------------------|-----------------|-------------------------|---|---|---------|------------------|--------------------|
| Sustainable business practice | Risk Management | Government consultation | Develop a government consultation and stakeholder engagement plan to ensure the centre is across relevant government issues that impact our operation. | Plan developed and implemented by June 2018. | Manager | June 2018 | |
| Community Engagement | Advocacy | Public relations | Develop a multi-channel PR plan with reach and engagement measures for 2017/2018 that promotes our services and tells our stories to the broader community. See also Advocacy Strategy | Plan implemented Engagement measures of fb likes and website unique visits increased according to the plan | Manager | December 2017 | |
| Community Engagement | Advocacy | Events | International Women's Day and Day of Action Against Sexual Assault See also Advocacy Strategy | Activity is implemented for each of these events | Manager | March and August | |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|----------------------|------------|-------------------|--|--|---------|--|--|
| Community Engagement | Engagement | CALD | See Community Engagement Strategy and Accessibility Plan | See Community Engagement Strategy and Accessibility Plan | Manager | See Community Engagement Strategy and Accessibility Plan | Potential - See Community Engagement Strategy and Accessibility Plan |
| Community Engagement | Engagement | ATSI | See Community Engagement Strategy and Accessibility Plan | See Community Engagement Strategy and Accessibility Plan | Manager | See Community Engagement Strategy and Accessibility Plan | Potential - See Community Engagement Strategy and Accessibility Plan |
| Community Engagement | Engagement | LGBTIQ | See Community Engagement Strategy and Accessibility Plan | See Community Engagement Strategy and Accessibility Plan | Manager | See Community Engagement Strategy and Accessibility Plan | Potential - See Community Engagement Strategy and Accessibility Plan |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|----------------------|------------|-------------------|--|--|---------|--|--|
| Community Engagement | Engagement | Disability | See Community Engagement Strategy and Accessibility Plan | See Community Engagement Strategy and Accessibility Plan | Manager | See Community Engagement Strategy and Accessibility Plan | Potential - See Community Engagement Strategy and Accessibility Plan |
| Community Engagement | Engagement | Carers | See Community Engagement Strategy and Accessibility Plan | See Community Engagement Strategy and Accessibility Plan | Manager | See Community Engagement Strategy and Accessibility Plan | Potential - See Community Engagement Strategy and Accessibility Plan |
| Community Engagement | Engagement | Young women | See Community Engagement Strategy and Accessibility Plan | See Community Engagement Strategy and Accessibility Plan | Manager | See Community Engagement Strategy and Accessibility Plan | Potential - See Community Engagement Strategy and Accessibility Plan |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|----------------------|--------------------------------|-------------------------|--|---|---------------|--------------------|--------------------|
| Community Engagement | Collaboration and partnerships | Politicians | Plan six monthly meetings with local politicians to brief them of the centre's work, discuss issues of mutual interest and gain political insight. | Politicians are aware of the value of our services and supportive when we need them. | Manager Board | Ongoing | |
| Community Engagement | Collaboration and partnerships | Patrons | Plan an annual meeting with Patrons to brief them of the centre's work and provide public relations material for them. | Patrons are engaged and their association is promoted. | Manager | Ongoing | |
| Community Engagement | Collaboration and partnerships | Other stakeholders/orgs | Identify priority relationships to consolidate and develop e.g. existing partnerships new partnerships | CCCWHC remains engaged with other community stakeholders and we are therefore considered of value to the community sector | Manager Board | Annual and ongoing | |



| Goal | Theme | Key Area of Focus | Initiative | Success measure | Owner | Due date | Budget Implication |
|----------------------|--------------------------------|----------------------------------|---|--|---------|----------------------|--------------------|
| Community Engagement | Collaboration and partnerships | CC Health Primary Health Network | Specifically focus on these entities through quarterly touch base meetings with health and an annual meeting with the PHN | CCCWHC stays engaged and connected with important government entities CCCWHC ensures improved referral processes from CCLHD | Manager | Quarterly and annual | |



13 Key Performance Indicators

| Operational | KPI |
|--|--|
| Staff satisfaction | 90% staff satisfaction |
| Staff engagement | 90% staff engagement |
| WHS measure | 100% compliance with WHS requirements |
| Service availability | 80% service availability |
| Service quality | 95% service quality |
| Financial | |
| Surplus percentage | 10% surplus |
| Current ratio | 2.5 |
| Expense to income ratio | ? |
| Reserves | 1 year operational |
| Funding diversity | No more than 50% from any one funding source |
| Strategic | |
| Growth in Clients | 10% growth each year |
| Growth in Membership | 20% growth each year |
| Growth in Services | 10% growth each year |
| Risk Management | |
| Accreditation compliance | 100% compliant |
| Complaints and dispute resolution management | 100% of complaints resolved |



| | |
|---------------------------|---|
| WHS measures | New WHS requirements implemented 100% of the time |
| Systems and data security | Systems implemented with 100% effectiveness 90% of the time |
| Grant compliance | 100% compliance |

14 Business as Usual

The Board has outlined its 'business as usual', in accordance with its key strategic themes and then developed strategic action programs to achieve its business as usual goals.

| Strategic Action Programs | Sustainable Financial Performance | Growth of CCCWHC | Trusted Client Relationships | Comprehensive Risk Management | High Staff Engagement |
|---------------------------|-----------------------------------|------------------|------------------------------|-------------------------------|-----------------------|
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15 Document Control

| Authorisation | |
|-----------------------------|-------|
| Approval Authority: | Board |
| Maintenance Responsibility: | |

| Version number | Review date | Authorised by | Date authorised |
|----------------|-------------|---------------|-----------------|
| | | | |

| Review Cycle | |
|-----------------|----------|
| Minimum Review: | Annually |
| | |



16 Appendix 1