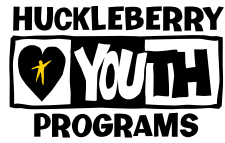




Venture Leadership
COLLECTIVE



JUNE 2024

HUCKLEBERRY YOUTH PROGRAMS

Theory of Change





THEORY OF CHANGE HYPOTHESIS

If Huckleberry Youth Programs offers **holistic care to meet basic needs** and provides **consistent, youth-centered opportunities** for personal growth in a **welcoming, safe space**, youth will experience **accelerated outcomes** in the Social Determinants of Health resulting in **increased social equity**.



MISSION

Huckleberry Youth Programs works in solidarity with young people and their families to **advance their personal growth and social equity**.

CORE PROGRAM COMPONENTS



HOLISTIC CARE

- Meet basic needs & resources
- See youth authentically
- Culturally responsive, trauma-informed services, harm reduction & safety



YOUTH-CENTERED

- Create a welcoming joyous space, celebrate youth & let them be young
- Celebrate their accomplishments
- Youth voice informs responsive programs & advocacy



PERSONAL GROWTH

- Trauma-informed services focusing on identifying strengths
- Youth-led: goal setting & planning, barrier identification & skill elevation
- Behavioral health supports



COMMUNITY COLLABORATION

- Authentic partnerships with youth, families, community, funders & government partners
- Advocate for systems change for youth
- Coordinate & bridge systems

EXPECTED OUTCOMES

Short-Term Outcomes

STABILIZATION

- Access to & awareness of available resources
- Improved ability to build relationships & trust
- Support network identified & engaged

Intermediate-Term Outcomes

PERSONAL GROWTH

- Basic needs met
- Improved mental health, well-being & healing
- Application of safe & healthy coping skills
- Improved familial relationships/support

Long-Term Outcomes

SOCIAL EQUITY

- Social emotional skills developed
- Leaders in the home & within the community
- Established, sustainable peer network
- Stabilization in key health outcomes
- Reduced justice system involvement

TARGET AUDIENCE

- Ages 11 - 25
- Low Income
- Experienced trauma/ACES
- Needs system navigation support
- Needing help to develop strong family connections and/or support network
- Motivated to participate



Introduction

Huckleberry Youth Programs (Huckleberry) believes that all people are entitled to the fundamental rights of safety, health, justice, and education. For more than fifty years Huckleberry has remained true to its roots of being innovative and responsive to the dynamic needs of Bay Area young people and their families. From founding the first runaway youth shelter in the United States, to providing young people with comprehensive, age-appropriate, and culturally-sensitive adolescent health services, Huckleberry has been a leader in restorative youth development work. Every day, staff collaborate with young people and their families to provide them with information and tools to develop, self-advocate, and create boundless futures. Huckleberry believes that its work with individual young people and their families will have a transformative impact in the community, and advance social justice and equity for all.

Rooted in innovation, Huckleberry continues to enhance its restorative youth development services using a trauma-informed framework to partner with each client to cultivate healthier relationships for themselves and with their communities. Huckleberry's programming takes a holistic approach to health, which encompasses healthy minds, healthy relationships, healthy bodies and healthy environments for young people and their families to thrive. Huckleberry's work is centered around a strengths-based approach and believes clients are remarkable and talented individuals who have not yet been afforded the opportunities or resources to fully identify their needs and realize their goals.

Mission

Huckleberry Youth Programs works in solidarity with young people and their families to advance their personal growth and social equity.

An organization's mission is a statement on why it exists. It is a clear and concise declaration on the impact an organization is trying to have in society and the community it serves. Most importantly, a clear mission aligns board and staff, and creates intentionality in how an organization deploys and stewards resources. With this in mind, Huckleberry reviewed its mission statement with the goal of elevating a message that highlights partnering with young people, activating their unique skills and abilities and prioritizing personal growth.

Huckleberry's new mission statement underscores the importance of working in partnership with the families and support networks on which young people rely. As well, by including personal growth, Huckleberry is centering that each young person the organization serves has both unique and similar experiences that

will shape their time with Huckleberry and guide them towards a vibrant future. Explicitly naming social equity as the organization's intended impact recognizes that current planning practices and structural systems have a disparate effect on marginalized communities and specifically the young people that Huckleberry serves. Huckleberry's new mission acknowledges that the organization is on the front lines of creating social equity for young people, meeting their basic needs, providing resources, addressing root causes of trauma and supporting their social emotional development to ensure every young person that partners with Huckleberry has access to opportunities and resources that allow them to thrive.

Target Audience

Overview

People in a target audience meet certain general demographic considerations (e.g., age, geography, living situation), and in addition have specific characteristics that suggest they can be effectively engaged and positively impacted by the service design and delivery within the core components of a unified program model. Core components are tailored to meet the unique needs of the target audience, supporting achievement in desired outcomes while in programming and specific long-term impact after programming is complete.

Huckleberry's holistic, youth-centered program model focuses on working directly with young people, while also engaging their families and communities to ensure a comprehensive approach to meeting a full spectrum of needs ranging from the immediate to the long-term. To the right are the defining characteristics of the Huckleberry target audience.

Core Characteristics of Huckleberry's Target Audience

- Ages 11 - 25
- Low Income/Financially unstable
- Needing help to develop strong family connections and/or support network
- Experienced trauma/ ACES
- Requiring assistance with system navigation
- Motivated to participate in programming

Theory of Change

Huckleberry's Hypothesis

If Huckleberry Youth Programs offers holistic care to meet basic needs and provides consistent, youth-centered opportunities for personal growth in a welcoming, safe space, young people will experience accelerated outcomes in the Social Determinants of Health resulting in increased social equity.

Core Components

Huckleberry's Theory of Change is anchored by four core components that inform how the organization is accountable to its mission, delivers effective services and has a direct impact when working with young people. The four components are foundational to the various programs that Huckleberry delivers, ranging from adolescent health and education (including bodily autonomy and sexual reproductive health and rights), counseling services, support for sexually exploited youth, career training and college access, juvenile justice diversion and emergency shelter. As well, the components serve as a guide in helping Huckleberry prioritize new opportunities, refine current programs and steward resources in support of young people.

The four components work in complement to meet basic needs, support personal growth and deliver long-term impact in three areas of the Social Determinants of Health (SDOH): **1) Social Community and Context, 2) Healthcare Access and Quality** and **3) Neighborhood and Built Environment.**¹

While specific programs within the suite of Huckleberry services may have unique deliverables and outcomes, such as graduating from high school and preparing young people to enter into post-secondary education, the delivery of these programs (and all programs) is grounded in the **four core components of the Huckleberry program model** (listed below).

When these components are delivered with fidelity across all programs, Huckleberry believes that young people will achieve outcomes in personal growth and social equity.



1. Holistic Care



2. Youth-Centered



3. Personal Growth



4. Community Collaboration

¹ [Social Determinants of Health](#)



Holistic Care

Building meaningful connections with young people begins with seeing youth authentically and being a witness to their resilience, abilities and aspirations. From the first moment Huckleberry connects with a young person, efforts are intentionally made to ensure that an environment of physical and emotional safety is established. A safe space is vitally important in meeting young people where they are, beginning the work of building healthy relationships and allowing Huckleberry to meet the basic needs of young people accessing services.

Basic needs are both immediate and what young people need to thrive in the long-term. Huckleberry strives to meet these needs through staff support, offering supplies and connecting young people to external resources.

Immediate needs are things such as but not limited to:

- Housing
- Food
- Physical/Safety Plan
- Clothing
- Transportation
- Hygiene supplies (e.g., deodorant, soap, oral hygiene, hand sanitizer, menstrual supplies)
- Harm reduction supplies (e.g., health education, safer sex, overdose prevention supplies)²
- Clean facilities and access to restrooms
- Crisis counseling
- Emotional safety

Huckleberry views basic needs as a right of all young people. Needs such as free and confidential services are delivered real time while needs such as healthcare are addressed over a longer horizon while partnering with young people in the delivery of our four core program model components.

Theory of Change Strategy #1

Another essential element to Huckleberry's holistic care approach is providing culturally responsive, trauma-informed services and interventions (i.e., developing an in-depth understanding of the nature, timing, and severity of traumatic events and the effects of those events). Huckleberry strives to offer services that are designed to respect the importance and relevance of the beliefs, practices, cultures and linguistic needs of the young people and families it serves and supports. Specifically, the young people Huckleberry partners with are predominantly BIPOC, and historically have been underserved by myriad systems, including mental health, education, foster care and human services due to the stigma and racism that exists within these systems. At the core of Huckleberry's work is understanding these inequities and the trauma they cause to ensure the organization can best develop and offer the services and support required to navigate the unique needs of young people.³

Understanding the life experiences of the young people Huckleberry serves is at the center of its trauma-informed efforts. Witnessing young people for their full selves at the very start and throughout their time with Huckleberry is foundational to not only recognizing young people for who they are, but also realizing the prevalence of trauma in BIPOC communities and the role that trauma has played in their lives. In all interactions with young people and their families, staff focus on partnership and collaboration, strive to create a safe environment and stand in solidarity to help young people exercise their voices in designing a Plan of Care that is driven by their choices.

²For example, Narcan, fentanyl testing strips, safe sniff kits.

³During the Theory of Change workshops the team identified there is work to be done to bring Huckleberry into alignment with best practices for serving BIPOC youth. As Huckleberry implements its Theory of Change, creating an intentional approach to ensure new ways of collaborating with young people, communicating amongst staff, and delivering services to best support BIPOC clients will be necessary.



Youth-Centered

Theory of Change Strategy #2

At Huckleberry, intentionally engaging young people means creating a path forward that is relevant and important to them. This translates into young people being fully included in decision making, having ownership over the actions and steps that lead to achieving self-identified goals and being able to identify and utilize their innate skills and abilities to self-advocate. This work is possible when staff create a safe environment and welcoming space that supports and validates the identities of young people, and focuses on celebrating and witnessing the accomplishments, both large and small, of all young people who collaborate with Huckleberry.

Elevating youth voice in the creation, delivery and refinement of programming is another way Huckleberry centers young people and their needs. For services to be responsive and effective, Huckleberry needs to understand the experiences of young people as well as what those experiences mean to them. In doing this, Huckleberry creates the space for young people to define who they are, what they need, and how programs that are informed by individual and collective youth voices can be delivered. The more that is known about the young people Huckleberry serves the stronger the relationships between staff and clients. Equally, the more Huckleberry witnesses and sees young people the better staff can advocate for them in myriad settings ranging from systems such as healthcare and juvenile justice to school and even in the home.





Personal Growth

Once Huckleberry has created a physically and emotionally safe space, addressed basic needs and centered young people and their voices, the more prepared staff are to support the personal growth and development of young people. This work begins with a trauma-informed assessment that focuses on identifying strengths that inform youth-driven goals. During this assessment staff are looking to understand how a young person has been affected by trauma and adverse childhood experiences (ACEs), or the physical, emotional and socioeconomic challenges experienced by a young person and how these factors can impact functioning and the ability to respond to stressful situations.

Assessments, and the organization's work in general, focuses on identifying barriers and how Huckleberry can partner with young people to elevate their skills and knowledge to address and remove those barriers. Specifically, Huckleberry employs a harm reduction approach to identify potentially risky behaviors and ways in which young people can reduce their risk by leveraging their innate abilities. Staff partner with youth to identify areas of learning in sexual health education, involvement in school and the community, family support communication and relationships, mental and emotional health, and substance misuse, among other areas.

The Stages of Change framework is another way in which Huckleberry uses a harm reduction approach, allowing staff to meet young people where they are without judgment. The Stages of Change account

Theory of Change Strategy #3

for, and expect, that young people will make positive changes and progress while also simultaneously experiencing setbacks. Relapse is expected and can happen during any one of the five stages in the framework:

1) pre-contemplation

2) contemplation

3) preparation

4) action

5) maintenance⁴

Young people can move in and out of these stages, beginning with total resistance to change (pre-contemplation) to exhibiting new behaviors that reduce risk and promote self-identified areas of growth (maintenance).⁵

⁴ Adopting the Stages of Change framework across all of Huckleberry services is a growth opportunity, and will need to be a distinct workstream in Theory of Change implementation. More on Stages of Change can be found [here](#).

⁵ Huckleberry is encouraged to develop an engagement scale based on the Stages of Change to determine readiness to engage in services, and to subsequently track the behavioral progress of young people in tandem with the achievement of key performance indicators (KPIs) that lead to outcomes in the Social Determinants of Health. As well, the Stages of Change can be thought of as a useful tool to develop a common language across programs on how young people are progressing, achieving and relapsing while engaged with Huckleberry's services.



Community Collaboration

Huckleberry operates in a larger ecosystem of services and supports, and strong collaborations with external partners are essential to the organization's work. In the course of partnering with young people, staff work with a variety of stakeholders ranging from families and community members to funders and government agencies. In all these relationships, Huckleberry centers the needs of young people and leverages their voices and input, allowing Huckleberry to serve as a strong advocate for the rights of young people.

This is especially true when collaborating within systems. Huckleberry plays a role in infiltrating and occupying the structures and systems that perpetuate racism, inequality and lead to trauma. Huckleberry coordinates communication between these system partners, acting as a bridge between the systems, educating its partners about the needs and rights of young people and elevating ways in which the systems can better support and serve.

Theory of Change Strategy #4



Program Model Supports

Intake & Assessment

To ensure assessments are youth-centered and judgment-free Huckleberry starts with creating a safe and confidential space for youth to connect with staff and feel comfortable responding to questions. Staff strive to make the assessment process welcoming, conversational and tailored where possible depending on a young person's response.⁶ As mentioned earlier, Huckleberry uses a harm reduction approach when conducting holistic assessments with the goal of identifying barriers and opportunities to partner with young people to elevate their skills and knowledge in addressing and removing those barriers. As well, Huckleberry's assessments are designed to be youth-driven, gender inclusive and trauma-informed. All assessments are confidential, excluding instances requiring mandated reporting (e.g., revealed issues of child abuse), and Huckleberry works to have the assessment be as minimally paperwork intensive as possible (e.g., limiting the number of questions on the assessment, not asking the same question in new ways). During the assessment process staff share with young people the scope of relevant services while collecting information in areas such as but not limited to: demographics, basic needs identification, physical, mental and behavioral health screenings, relationship history, social-emotional development and current living and/or family situation. Huckleberry also collects data in areas such as the status and history of housing, school, employment, physical health, involvement in the juvenile justice system and substance use.

⁶Huckleberry also works with young people to conduct assessments in the language they are most comfortable with to support safety and build rapport.

Care Planning

Upon completion of a holistic assessment, program staff (most often a Case Manager or Therapist) create a youth-driven roadmap, or Plan of Care, that details action steps and goals. The Plan of Care is maintained in Huckleberry's database and is an essential tool when partnering with a young person during their time at Huckleberry. As with the assessment, the development of the Plan of Care is conversational, and young people have ownership of what goes in the Plan including key milestones and outcomes.

Program staff use the Plan of Care to build rapport with young people, ensuring the content of the Plan is transparent and clear, tracks progress, identifies barriers and action steps to address those barriers. As mentioned earlier, Huckleberry leverages the Stages of Change framework to help determine where a young person is with regards to being contemplative and ready for change, engaged with staff and program and exhibiting a willingness to develop new, less risky behaviors on the path to achieving goals laid out in the Plan of Care.

Plans of Care also offer an opportunity to improve Manager and staff member one-on-one supervision. The content of the Plan can help elevate successes to celebrate while also identifying the acuity of higher need clients. Specifically, Managers and staff can discuss various supports and interventions to better support high need clients and/or determine if case conferencing is appropriate for helping these individual young people.

Dosage & Frequency

Clarifying requisite levels of dosage and frequency creates a baseline expectation for how much and how often a young person is seen while in programming. Dosage and frequency are also essential in helping codify the program model, building equitable accountability into service delivery for front line staff and ensuring that young people are being seen, witnessed and supported with intentionality.

Dosage refers to how much of a service is provided to a young person (e.g., thirty minutes, one hour)

Frequency refers to how often a service is provided to a young person (e.g., once a week, twice a month)

Case Managers and Therapists often see every young person on their caseload for at least one hour every week. Caseloads differ by program depending on the characteristics and needs of the individual young person, but range between 1:7 and 1:20.⁷

⁷It is recommended that Huckleberry set minimum caseload targets based on high, moderate and low acuity of the target audience across programs. Huckleberry can assess the amount of time a Case Manager and Therapist spend with a client each week across programs to help set the spectrum of caseload expectations. Caseloads and dosage and frequency are important elements in creating equitable job descriptions, expectations and workloads.

Communication & Staff Supervision

Huckleberry believes that investments in staff personal and professional development, health and wellness equates to investments in young people and their futures. Team members need to be resilient, refreshed and informed to be at their best when supporting clients. When Directors and Managers are meeting with their respective staff, Huckleberry expects that team members will be seen and witnessed much in the same way staff see and witness young people.

Individual check-ins between Managers and front line staff are an important way for the team to stay connected, focus on the personal growth of young people and center the intended impact of social equity. One-on-one meetings occur weekly with transparent agendas, two-way feedback and time spent discussing both personal and professional goals. Data should be reviewed at least once a month, and caseloads are reviewed with an eye towards deciphering trends, elevating insights and clarifying necessary interventions and supports for the full spectrum of young people on a caseload - ranging from clients with high needs to those who are activating on steps and goals in their Plans of Care.

One-on-one meetings between a Director and a Manager also occur weekly, and follow the same guidelines regarding quality time for personal and professional goals, transparency, accountability and data utilization. These check-ins also include discussions on higher level program performance (e.g., full program performance versus caseload performance) and support with supervision challenges a Manager might be experiencing. All altitudes of one-on-one meetings support a quarterly review cycle of staff Growth Plans, a process driven by Huckleberry's Human Resources department.

Outcomes

Overview

Outcomes occur on three levels: short-term, intermediate, and long-term. Outcomes are measurable changes in the target audience. Outcomes are used to proactively track participant milestones while also managing the performance of programs and team members. Clarity on outcomes helps refine service delivery to optimize achievement.

Short-Term Outcomes

Short-term outcomes allow Huckleberry to understand whether the program model is effectively supporting young people in identifying and meeting immediate needs and setting and achieving goals that help clients stabilize.

Intermediate Outcomes

Intermediate outcomes help Huckleberry understand if young people are not only stabilizing, but also progressing in their own personal growth. Attaining intermediate outcomes suggests that Huckleberry is effectively partnering with young people, and supporting them in achieving self-identified goals. Achieving intermediate outcomes suggest that young people are on-track to achieve long-term impact.

Long-Term Outcomes

Long-term outcomes are the most vibrant expression of an organization's impact. They are tracked for a specified period of time after a participant transitions from the program, and speak to the efficacy of Huckleberry's program model advancing social equity for young people.

Outcomes Snapshot

Huckleberry plans to intentionally align its outcomes for young people with the Social Determinants of Health, or the conditions in which people are born, grow, live, work, and age. Specifically, young people served by Huckleberry will experience greater social equity as measured by improvements in three domains of the Social Determinants of Health: 1) Social Community and Context, 2) Healthcare Access and Quality and 3) Neighborhood and Built Environment.

The following milestones serve as a high level snapshot of target audience outcomes.⁶

Focus	Outcome Type	Outcome	Associated Social Determinant of Health
Client Stabilization	Short	Informed of and increased access to available resources	Social Community and Context Healthcare Access and Quality
		Improved ability to connect, build relationships and trust	Social Community and Context
		Identified and increasingly involved support network	Social Community and Context
Personal Growth	Intermediate	Basic needs met	Social Community and Context Healthcare Access and Quality
		Improved mental health, well-being and emotional healing	Healthcare Access and Quality
		Application of safe and healthy coping skills	Healthcare Access and Quality
		Improved familial relationships and support	Social Community and Context
Social Equity	Long	Social emotional skill development	Healthcare Access and Quality
		Leaders in the home and within the community	Social Community and Context
		Established sustainable peer network	Social Community and Context
		Increased stabilization in key health outcomes (e.g. health insurance, immunizations)	Healthcare Access and Quality
		Reduced justice system involvement ⁷	Neighborhood and Built Environment

⁸ A more detailed view of outcomes can be found in the [Evaluation and Report Matrix](#).

⁹ Emphasis placed in the short and intermediate term on a holistic approach, including connections to individuals and other supports, known to support Huckleberry's longer-term, social equity goal of reduced justice system involvement. These *Protective Factors* related to one's experiences, relationships and environment play a crucial role in promoting mental health and well-being by suggesting that, among other factors, access to strong social support systems and improved familial relationships and support (short and intermediate-term outcome targets for Huckleberry) will be more likely to result, longer term, in reduced justice system involvement.

Performance Management

Overview

Performance management is central to an organization achieving its mission and intended impact. It allows an organization to adhere to its target audience, understand what supports and interventions correlate to outcomes, and effectively refine the program model as needed.

Performance management drives an organization toward explicit, clear, measurable outcomes, ensures data is used to inform decision making, and helps build a culture of learning and accountability. Developing a culture of learning and accountability includes structuring systems and communication that allow the Huckleberry team to learn from experience, clarify what the organization is doing and achieving, and adjust personnel competencies and/or activities as indicated.

People are at the center of a highly effective performance management structure. Their efforts, dosage of engagement, and interventions should be captured in a well-designed, and highly utilitarian performance management database to help inform and improve the quality of service delivery and track desired outcomes.

There are several key aspects of performance management, which work in tight unison to help an organization implement strong organizational and staff accountability outlined on the right side of this page.

Performance Framework: A Theory of Change that outlines the level and quality of services needed to achieve key outcomes for the target audience.

High Quality Data: Data must be captured consistently, completely, accurately, and in a timely manner. At a minimum, performance data should be tracked and monitored in these areas:

- **Target audience:** To ensure that the identified participants are reached in the numbers and proportions intended.
- **Staff activities and program quality:** To ensure that programs and services are implemented at the level of quality and codification necessary to achieve outcomes.
- **Outcomes:** To ensure members of the target audience are progressing toward the achievement of short-term, intermediate, and long-term outcomes.

Data-Informed Decision Making: Clear, consistent data are critical to inform key decisions about target audience, dosage, program model changes, and strategic direction.

Data-Informed Accountability: It is essential that as part of an organization's culture there is an expectation that the performance of all team members be assessed using data. This means setting clear benchmarks, establishing core competencies, and reviewing staff at least annually on their performance as it relates to achieving milestones that support an organization's mission and intended impact.

Culture of Learning and Accountability: Data is not meant to catch staff making mistakes; it is meant to drive learning and highlight areas of success, growth, and opportunity. Analyzing performance data to best determine if the organization is delivering the program model with fidelity, and therefore fulfilling the organization's mission, is critical.



Reports

Reporting falls into two main categories:

1. Outcome (reports that show impact) and
2. Process (reports that inform program model fidelity and codification).

They are both essential to the delivery of effective services, assessing Theory of Change fidelity, and correlating the program model to intended impact.¹⁰ Process reports track data that highlight if staff are performing against the responsibilities of their respective jobs as well as delivering on specific time-bound deliverables within the program. Examples of process reports are: **dosage and frequency**, **completed assessments**, and **on-time data entry**. Outcome reports track specific time-bound milestones that must be reached to support long-term impact.

When thinking of these reports as they relate to staff performance, it is critical that an organization marries both process and outcome milestones in individual staff work plans. In turn, leadership should also have these same goals tied to their annual reviews, creating an interdependent set of program milestones that the entire organization understands, discusses regularly, and intentionally fosters a culture of learning and accountability.

¹⁰ [Program Model Framework](#)

Appendix

Overview

The following key activities, action steps and timelines provide Huckleberry an outline of suggested next steps to activate Theory of Change implementation over the next six to nine months. VLC has offered timelines to support the prioritization of the work, and Huckleberry should adjust and edit the content and timelines to align with other key work streams and initiatives within the organization (e.g., Strategic Plan implementation).

Key Activity	Action Steps	Goal Timeline
Theory of Change Rollout	<ul style="list-style-type: none"> Develop a communication plan to share Theory of Change with staff and board Share of the Theory of Change and key concepts with board and staff (e.g., new mission statement, four core components of the program model, Social Determinants of Health, Stages of Change) 	<ul style="list-style-type: none"> Staff Overview + Training (Sept '24) Board Overview + Training (Sept '24)
Data Collection and Utilization	<p>Collection</p> <ul style="list-style-type: none"> Align and incorporate Theory of Change data tracking into existing data collection protocols (e.g., build out any new business processes to support TOC integration such as assessments, growth planning, Stages of Change) Incorporate new data tracking elements (e.g., updated assessment questions, Stages of Change engagement scale) Review and refine existing data collection tools Train staff on new data capture instruments and their use <p>Utilization</p> <ul style="list-style-type: none"> Incorporate Theory of Change reports into current reporting structure (e.g., outcomes tracking, program model fidelity goals such as on-time assessments and dosage and frequency) Rollout Stages of Change engagement scales Rollout processes to capture key performance indicators (KPIs) that track to Social Determinant of Health outcomes 	<p>Collection</p> <ul style="list-style-type: none"> Finalize Evaluation and Report Matrix (Sept '24) Codify client intake and assessment process (Nov '24) Codify the Plan of Care process (Nov '24) Stages of Change engagement scale built in Salesforce (Dec '24) Train program staff on updated assessment and care planning processes, Stages of Change engagement scale (Feb '25) <p>Utilization</p> <ul style="list-style-type: none"> Develop outcome & program model fidelity reports/dashboards (Jan '25) Train supervisors on new reports, how to use/read the reports and how to support supervisees with data (Feb '25) Train staff on how to use the Stages of Change engagement scale (e.g., data capture and utilization to track client progress) (Feb '25) Train staff on data capture that supports tracking towards Social Determinants of Health (Feb '25)
Program Delivery	<ul style="list-style-type: none"> Convene a cross-program team to clarify caseload ratio expectations¹¹ Align program delivery with target audience characteristics, including services designed to support BIPOC clients Rollout out Stages of Change framework across programs 	<ul style="list-style-type: none"> Caseload ratios determined (Nov '24) Develop intentionally focused BIPOC programming and service delivery (Jan '25) Staff trained on Stages of Change framework (Feb '25)
Staff Support and Communications	<ul style="list-style-type: none"> Convene a cross-program team to codify program staff supervision (e.g., cadence, investment in staff, data utilization) 	<ul style="list-style-type: none"> Train staff on program supervision expectations (Nov '24) Align program supervision structure with staff Growth Plan review process (Nov '24)

¹¹ Given the different scope of work across the sites, Huckleberry will review, among other options, developing a percentage of expected staff hours dedicated to client work per week to help address differences in client acuity. The main consideration in developing caseload ratios is to ensure that like positions have codified caseloads to ensure equitable job expectations and support codified job descriptions.