



Harbor & Table

COLLECTIVE

Building bridges to wellness, one neighbor at a time

Harbor & Table Collective

Strategic Plan | FY2025–FY2027

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1 Executive Summary

Over the next three years, Harbor & Table Collective will solidify its position as a comprehensive human services organization serving the interconnected needs of our community. Building on FY2024's reach — **142,500 individuals served across five service lines, 28,400 behavioral health sessions, 3,850 housing placements, and 89,200 transportation trips** — the organization will focus on integrated care delivery, clinical excellence, and measurable community impact.

Strategic Direction: To evolve from service provider to community wellness partner through integrated behavioral health, housing stability, nutrition security, reliable transportation, and person-centered care coordination — while maintaining clinical quality and fiscal efficiency (program spending $\geq 70\%$ of total expenses, client satisfaction $\geq 85\%$).

2 Mission, Vision & Values

Mission: Harbor & Table Collective provides comprehensive, compassionate care that meets neighbors where they are. Through integrated behavioral health, housing support, nutrition programs, transportation, and care coordination services, we build pathways to stability and wellness—empowering individuals and families to thrive in every season of life.

Vision: A community where every individual has seamless access to coordinated, compassionate care that addresses the whole person—ensuring no one faces barriers to mental wellness, safe housing, nutritious food, reliable transportation, or supportive services.

Values:

- **Equity:** Everyone deserves access to comprehensive care and dignity, regardless of circumstances.
- **Integration:** Wellness requires coordinated support across multiple dimensions of life.



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- **Person-Centered Care:** Services are tailored to individual needs, strengths, and goals.
- **Stewardship:** Transparency, clinical excellence, and sustainability guide every action.

3 Strategic Priorities (FY2025–2027)

Priority	Objective	Key Impact Ties
1. Advance Clinical Excellence & Integration	Strengthen evidence-based practices, integrated care coordination, and client outcomes measurement across all service lines.	Builds on FY2024: 28,400 behavioral health sessions, 85% client satisfaction. Target: 40,000 sessions, 90% satisfaction by 2027.
2. Expand Service Capacity & Access	Increase reach across all five service lines while maintaining quality and reducing wait times by 30%.	Builds on 142,500 individuals served. Target: 200,000 by 2027 with enhanced transportation access (89,200 → 135,000 trips).
3. Strengthen Housing Stability & Homelessness Prevention	Expand permanent supportive housing placements and reduce returns to homelessness through wraparound services.	Builds on 3,850 housing placements (78% stability at 12 months). Target: 5,500 placements, 85% stability by 2027.
4. Build Workforce Capacity & Sustainable Systems	Recruit and retain qualified clinical staff, implement data-driven decision-making, and ensure financial sustainability.	Reinforce FY2024 financial efficiency (program ratio 71%, 6-month reserves). Target: 73% program ratio, 8-month reserves by 2027.

4 Goals, Metrics & Initiatives



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Priority 1: Advance Clinical Excellence & Integration

Goal 1.1 — Increase behavioral health service delivery to 40,000 sessions annually by FY2027.

- *Tied to:* FY2024 impact metric (28,400 sessions, 85% client satisfaction).
- *Key Initiatives:*
 - Recruit 6 additional licensed clinicians (LCSWs, LPCs) by Q2 2026.
 - Expand crisis intervention services with 24/7 mobile crisis team by Q4 2025.
 - Launch evidence-based SUD treatment program (MAT integration) by Q3 2026.
 - Achieve client satisfaction $\geq 90\%$ through standardized outcome measurement.

Goal 1.2 — Implement integrated care protocols across 80% of active cases by FY2027.

- Launch care coordination software platform with shared case notes (Q1 2026).
- Train all service line managers in trauma-informed, integrated care models.
- Conduct bi-weekly interdisciplinary care team meetings.

Priority 2: Expand Service Capacity & Access

Goal 2.1 — Serve 200,000 individuals annually across all service lines by FY2027.

- *Tied to:* FY2024 baseline of 142,500 individuals served.
- *Key Initiatives:*
 - Expand food & nutrition programs: 1,020,000 meals \rightarrow 1,400,000 meals annually.
 - Increase transportation fleet from 18 \rightarrow 28 vehicles to serve 135,000 annual trips.
 - Launch 3 new service sites in underserved communities by Q4 2026.
 - Reduce average service wait times from 14 days \rightarrow 10 days.

Goal 2.2 — Expand care coordination services for IDD and seniors to 4,200 active clients.

- Hire 8 additional care coordinators with specialized certifications.
- Partner with 15 regional service providers for seamless referrals.
- Implement person-centered planning for 100% of IDD/senior clients.



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Priority 3: Strengthen Housing Stability & Homelessness Prevention

Goal 3.1 — Increase annual housing placements from 3,850 → 5,500 by FY2027.

- *Tied to:* FY2024 housing placement data (78% stability at 12 months).
- *Key Initiatives:*
 - Develop 250 units of permanent supportive housing through partnerships.
 - Expand emergency shelter capacity by 40 beds by Q2 2026.
 - Launch rental assistance program serving 600 households annually.
 - Achieve 85% housing stability rate at 12-month follow-up through wraparound services.

Goal 3.2 — Reduce returns to homelessness within 24 months from 22% → 15%.

- Provide 12-month intensive case management for all housing placements.
- Integrate behavioral health and employment support into housing services.
- Track housing stability outcomes through standardized assessments.

Priority 4: Build Workforce Capacity & Sustainable Systems

Goal 4.1 — Strengthen financial resilience and operational efficiency.

- *Tied to:* FY2024 financial summary (\$10.12M revenue; \$9.0M expenses; 71% program ratio).
- *Key Initiatives:*
 - Achieve 8-month operating reserve (\$6M) by FY2027.
 - Maintain program spending ratio $\geq 73\%$ annually.
 - Diversify revenue: reduce top-donor concentration from 71% → 55%.
 - Grow Medicaid reimbursements from 18% → 28% of total revenue.

Goal 4.2 — Build clinical workforce capacity and staff retention.

- Recruit 25 clinical FTEs across behavioral health and care coordination.
- Implement comprehensive staff development program (40 hours/year per clinician).
- Increase staff retention rate from 82% → 90% through competitive compensation.
- Provide clinical supervision for licensure candidates (10 supervision slots/year).

Goal 4.3 — Implement integrated data systems for outcomes measurement.

- Launch EHR system integrated across all service lines by Q2 2026.



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- Establish real-time impact dashboard for leadership and board review.
- Publish annual Impact Report with client outcome data and program effectiveness metrics.

5 Implementation & Governance

Leadership Oversight:

- Board of Directors will review strategic progress quarterly using the integrated scorecard.
- Clinical Quality & Service Integration Committee will monitor clinical outcomes and service coordination metrics.
- Executive Director, Chief Clinical Officer, and Director of Programs jointly own KPIs tied to client outcomes and operational efficiency.
- Annual Community Impact Forum hosted each October to share results with stakeholders and community members.

Monitoring Tools:

- *Quarterly Integrated Dashboard:* Behavioral health sessions, housing placements, meals served, transportation trips, care coordination active cases, client satisfaction scores.
- *Clinical Quality Metrics:* Evidence-based practice fidelity, client outcome measures, service integration rates, wait time trends.
- *Financial Sustainability Tracker:* Program expense ratio, revenue diversification, operating reserves, cost per service benchmarks.
- *Workforce Metrics:* Staff retention rates, clinical FTE ratios, training completion, staff satisfaction surveys.

Reporting Cadence:

- **Board & Staff:** Quarterly strategic progress review with service line dashboards.
- **Funders & Partners:** Semi-annual program updates and annual Impact Report with outcomes data.
- **Community:** Annual Community Impact Forum and public impact snapshot.

6 Key Performance Indicators (FY2027 Targets)



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Service Line / Metric	FY2024 Baseline → FY2027 Target
Behavioral Health Sessions	28,400 → 40,000 (+41%)
Housing Placements	3,850 → 5,500 (+43%)
Housing Stability Rate (12 months)	78% → 85%
Meals Served	1,020,000 → 1,400,000 (+37%)
Transportation Trips	89,200 → 135,000 (+51%)
Care Coordination Active Clients	2,800 → 4,200 (+50%)
Total Individuals Served	142,500 → 200,000 (+40%)
Client Satisfaction Rate	85% → 90%
Program Spending Ratio	71% → 73%
Operating Reserves	6 months → 8 months

7 Disclaimer

This Strategic Plan is a fictional narrative created for storytelling and marketing purposes for the Harbor & Table Collective campaign. It does not represent a real nonprofit organization or actual data. Any resemblance to real entities, programs, or outcomes is coincidental. This document is not intended for use as an official strategic plan, operational guide, or legal document.