

mission and guideposts

BSCF's mission and guideposts provide the backdrop and direction for our strategy work

Our Mission

To improve the lives of all Californians, particularly underserved populations, by making health care accessible, effective, and affordable, and by ending domestic violence

Our Guideposts

- Define our values and culture in grantmaking
- Provide a lens to focus strategic choices in a landscape where there is a range of possible approaches
- Serve as a tool for Board and staff to assess alignment of strategies and investment proposals on an ongoing basis

Our work:

- **catalyzes change** at the systems level
- takes **risks** necessary to advance **innovations and solutions**
- seeks to achieve **measurable results**
- is informed **by the fields and leaders** that are our partners
- focuses on issues where we can play a **leadership role**
- employs a **comprehensive tool kit** that includes grantmaking, convening, research, learning and public policy

* Our guideposts build off of the BSC values and culture work

overarching logic model for bscf: from mission to outcomes

Needs and Opportunities

Population Environment

- Growing and diverse population in California
- Significant challenges understanding and navigating the changing safety net system
- Significant unmet healthcare and DV service needs among vulnerable populations
- Millions of Californians will be left outside the ACA reforms and remain uninsured

Institutional Environment

- DV and healthcare safety net providers face increasingly competitive environments
- Innovation among DV and healthcare safety net providers is constrained by competing priorities and limited resources
- DV and healthcare safety net providers have few opportunities or incentives to collaborate or coordinate services
- Limited use of data by DV and safety net providers serving vulnerable populations
- Many DV and safety net providers operate with unstable funding streams
- Expected demand for DV and healthcare services exceeds safety net capacity

Policy Environment

- Ongoing government budget challenges affecting provision of DV and healthcare services at federal and state level
- Implementation of the ACA is driving a fluid health policy environment
- Limited fiscal incentives for integrated approaches that address DV and physical health needs of vulnerable populations

Strategies

Foster innovations in domestic violence (DV) and healthcare service delivery

Cultivate adaptive leadership within California's healthcare safety net and DV fields

Promote policies and practices that further our ultimate impact

Build the capacity of California safety net and DV service providers

Long-Term Outcomes

Greater access to healthcare and DV services:

- Strong, sustainable provider organizations led by skilled leaders
- Consumer-informed services
- More service options for the most vulnerable

Improved systems of care in the safety net:

- Performance measurement and improvement
- Broad collaboration and integration among safety net providers
- Organizational and system-wide delivery innovations

Ultimate Impact: All Californians, particularly vulnerable populations, have access to integrated systems of care that are high-quality and promote optimum health and well-being

health care and coverage logic model

Needs and Opportunities

Population Environment

- Growing and diverse population in California
- Significant challenges accessing and navigating a changing safety net delivery system
- Significant unmet healthcare needs among vulnerable populations and increased demand from newly insured
- Millions of Californians will remain uninsured after ACA implementation

Institutional Environment

- Healthcare safety net providers face increasingly competitive environments
- Innovation among healthcare safety net providers is constrained by competing priorities and limited resources
- Healthcare safety net providers have few opportunities or incentives to collaborate or coordinate services
- Limited use of data by healthcare safety net providers to demonstrate and improve value
- Safety net providers operate with unstable funding streams
- Expected demand for healthcare services exceeds safety net capacity

Policy Environment

- Ongoing government budget challenges affecting provision of healthcare services at federal, state and local levels
- Implementation of the ACA is driving a fluid health policy environment
- Limited fiscal incentives for integrated approaches that address health needs of vulnerable populations

Strategies

Foster innovations in safety net healthcare service delivery

- Invest in provider performance measurement and improvement
- Facilitate integration and coordination among providers
- Cultivate models for more efficient, high quality and cost effective primary care
- Advance new models for meeting a growing demand for services

Cultivate adaptive leadership within California's healthcare safety net

- Broad-based leadership education for emerging leaders and clinic executive teams
- Targeted technical assistance to help leaders implement a performance improvement culture

Promote policies and practices that further our ultimate impact

- Support state and local government efforts to maximize coverage expansion and system performance under ACA
- Identify and inform discussion on options for addressing the needs of populations not covered by the ACA
- Encourage a focus on delivery system integration for the next Medi-Cal waiver
- Promote value-based healthcare purchasing by public payers that ensures a stronger safety net

Build the capacity of California safety net providers

- Provide general operating support to community health centers
- Incentivize high performance (better health outcomes, better patient experience, & lower cost of care)
- Invest in technology infrastructure enhancements
- Build a learning network for safety-net providers

Long-Term Outcomes

Greater access to healthcare services:

- Strong, sustainable provider organizations led by skilled leaders
- Consumer-informed care and services
- More service options for the most vulnerable

Improved systems of care in the safety net:

- Data-driven management and performance improvement
- Broad collaboration and integration among safety net providers
- Organizational and system-wide delivery innovations

Ultimate Impact: All Californians, particularly vulnerable populations, have access to integrated systems of care that are high-quality and promote optimum health and well-being

blue shield against violence logic model

Needs and Opportunities

Population Environment

- Growing and diverse population in California
- Significant challenges accessing and navigating the safety net system
- Significant unmet needs for DV services especially among vulnerable populations
- Complexity of DV: rarely a “standalone” issue: impact differs based on cultural factors

Institutional Environment

- DV service providers compete for ever scarcer resources
- Innovation among DV providers is constrained by competing priorities and limited resources
- DV providers have few opportunities or incentives to collaborate or coordinate services
- Many DV providers operate with unstable funding streams
- Expected demand for DV services exceeds safety net capacity

Policy Environment

- Implementation of the ACA is driving a fluid health policy environment
- Limited fiscal incentives for integrated approaches that address DV and physical health needs of vulnerable populations

Strategies

Foster innovations in DV services

- Expand and diversify entry points to DV services
- Strengthen cultural competence in DV service provision
- Promote collaboration among health care and DV service providers
- Invest in potential “game changers” for DV prevention

Cultivate adaptive leadership within California’s DV fields

- Support DV leaders to be collaborative, innovative, strategic & systemic thinkers
- Facilitate connections and “networked leadership” within the field and extending to health care providers

Promote policies and practices that further our ultimate impact

- Engage new funding partners on an integrated, cross-field approach to DV
- Invest in efforts to make DV service integration and prevention part of state and national healthcare policy discussions
- Strengthen intersections between DV, violence prevention, and women’s health systems.
- Shape policy dialogue and implementation on critical topics for DV prevention and services

Build the capacity of California DV service providers

- Sustain DV services through general operating support
- Invest in promising organizational practices
- Strengthen regional and state DV networks.
- Support coordinated community responses to DV

Long-Term Outcomes

Greater access to DV services:

- Strong, sustainable provider organizations led by skilled leaders
- Consumer-informed services
- New service options for the most vulnerable

Improved systems of DV care in the safety net:

- Stakeholder consensus on definitions and measures of success
- Broad collaboration and integration among safety net providers
- Organizational and system-wide delivery innovations

Ultimate Impact: All Californians, particularly vulnerable populations, have access to integrated systems of care that are high-quality and promote optimum health and well-being

bscf public affairs logic model

Needs and Audiences

External Environment:

- Communication now requires 2-way exchange with audience (engaging, not telling);
- Field values foundations that are transparent and accessible;
- Experiencing shift from traditional to digital media outlets; and
- Challenge to differentiate identity from Blue Shield of California and other health funders.

Internal Environment:

- Telling our stories of impact on people and communities in California requires integrated program and public affairs activities;
- Untapped stories and content from grantees and program outcomes;
- Opportunity to leverage existing brand identity and positive reputation; and
- Continued involvement with politically sensitive and contentious issues.

Audiences:

- Leadership and staff of grantee organizations;
- Influencers identified on priority issues;
- State policymakers and targeted local and federal officials;
- Other major funders and philanthropic affinity groups in our program and geographic areas; and
- Blue Shield of California staff and Board.

Strategies

Enhance **integrated marketing and dissemination** efforts to promote program impact.

- Engage audiences in program goals through email, website, and social media channels
- Expand relationships with and influence within the fields we fund
- Showcase program imagery through video and photography
- Promote visual identity with branding and design

Promote **compelling and consistent communication** to reinforce positive reputation.

- Develop effective messages for program priorities;
- Encourage storytelling to convey impact;
- Use media relations to expand influence
- Diversify content of publications and blogs
- Support and align executive communications
- Create opportunities for engagement between BSCF staff and targeted leaders
- Continue to develop and strengthen relationships with Foundation grantees

Engage in **strategic policy activities** to leverage program investments.

- Develop relationships through in-person meetings
- Elevate priorities through legislative and policy briefings
- Increase visibility with informational mailers
- Develop and advance original research

Implement **media and journalism grant making** to build capacity in the field.

- Expand health journalism in non-profit news outlets
- Educate reporters on DV and health topics
- Advance key issues through strategic partnerships

Long-Term Outcomes

BSCF is recognized as a **respected leader and innovator** in the health care, domestic violence, and philanthropy fields

Target audiences are **activated and mobilized** on key issues

Ultimate Impact: All Californians, particularly vulnerable populations, have access to integrated systems of care that are high-quality and promote optimum health and well-being

bscf operations logic model

Needs and Opportunities

Organizational Environment

- New strategic plan
- Newly formed HR Committee of Board of Trustees
- Growing, evolving organization (new leadership, larger staff, large budget, etc.)
- Renewed focus on organizational integration
- New BSC core values

Business Systems Environment

- Lack of system integration
- Combination of enterprise systems (e.g. Cybergrants) and cloud-based systems (e.g. Salesforce)
- Intersections of systems managed by BSCF and managed by Blue Shield IT
- Inconsistent utilization of existing systems (e.g. Salesforce)
- Weak reporting / analytics capabilities
- System maintenance and improvement distributed among many staff

Business Process Environment

- Many existing processes still heavily paper based (e.g. expenses / invoicing)
- Poor documentation / codification of business practices / policies / procedures
- Legacy processes in need of evaluation and improvement
- Clarify roles and responsibilities

Strategies

Strengthen and integrate organizational business systems and processes

- Integrate grants management, financial and other key systems
- Build effective data reporting / analytics tools
- Optimize organizational workflows and processes
- Automate paper-based business processes

Foster and cultivate a culture of continuous improvement and learning

- Embed learning and evaluation into everything we do across the organization
- Make time to reflect, share and learn
- Build culture of trust that encourages questioning and smart risk-taking

Design and implement effective policies and procedures

- Develop comprehensive set of programmatic and administrative policies
- Design effective business and operating procedures
- Provide regular trainings and information to staff on policies and procedures

Maintain sustainable staffing structures and healthy organizational culture

- Design effective organizational structure, roles and responsibilities
- Support growth and development of staff
- Ensure adequate staffing capacity
- Enhance employee engagement and satisfaction

Long-Term Outcomes

Effective, efficient stewardship of organizational resources

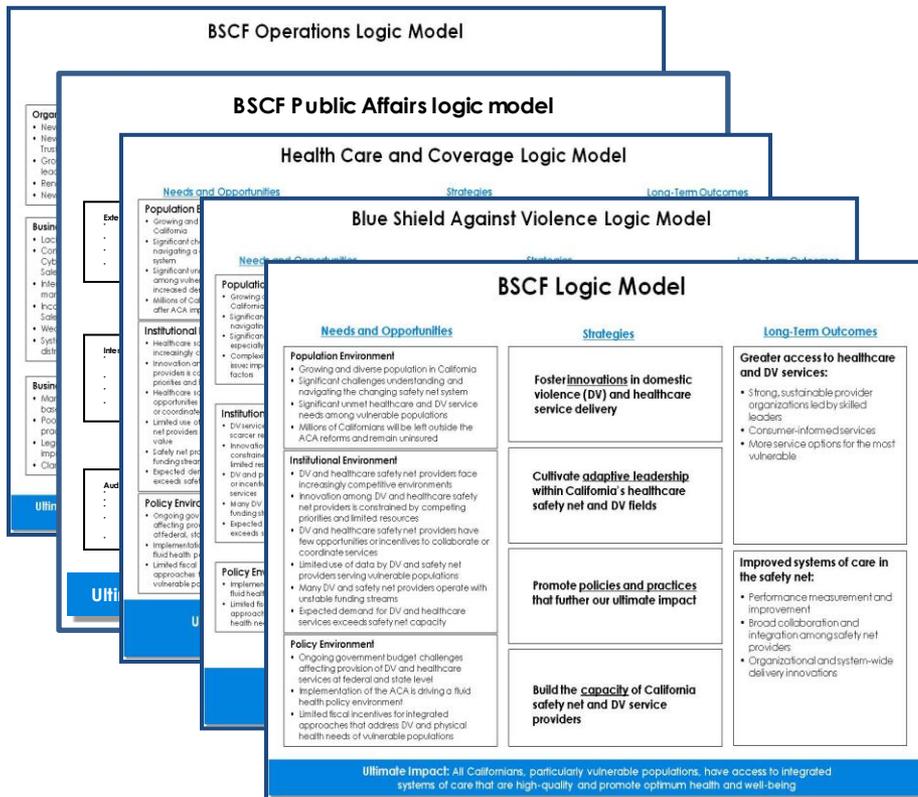
- Safeguarding financial assets
- Effective business policies and procedures
- Efficient business processes
- Supporting and cultivating our human resources

Organizational health and sustainability

- Financial health
- Engaged, productive workforce
- Healthy organizational culture
- Appropriate staffing capacity
- High performing business systems
- Flexible business operations

Ultimate Impact: The Blue Shield of California Foundation has business systems, processes and procedures that are effective, efficient, and responsive to the needs of our internal and external stakeholders

logic models have been developed for all Foundation functions, these models guide our efforts to deliver on specific long-term outcomes



Programmatic Outcomes

1. Greater access to healthcare and DV services
2. Improved systems of care in the safety net

Operational Outcomes

3. Effective, efficient stewardship of organizational resources
4. Organizational health and sustainability

Reputational Outcomes

5. BSCF recognized as a respected leader and innovator in the health care, domestic violence and philanthropy fields
6. Target audiences are activated mobilized on key issues

performance measures:

focus on a **few, select** areas, that are **high-level** and **meaningful**

What we will measure

1

Our Ultimate Impact:

Are we improving:

- i. Access to healthcare and DV services?
- ii. Systems of care in the safety net?

2

Our Approach:

Are we:

- i. Fostering innovation in healthcare and DV service delivery?
- ii. Identifying and spreading policies and practices that work?
- iii. Enhancing capacity of CA safety net providers, and positioning them for future success?
- iv. Maximizing the impact of our resources, while maintaining sustainable structures and a healthy organizational culture?