

## Strategic Planning Procedure

Application	The Board and all VAC employees
Exceptions	-
Legal and regulatory framework	-
Standards	QIC Standard 1.1 Governance QIC Standard 1.2 Management systems QIC Standard 1.6 Knowledge management
Associated policy	Code of Conduct and Board Responsibilities Policy BPM-001
Associated templates or forms	-
Other Associated policies and procedures <sup>1</sup>	Performance Development & Review Procedure  Board and CEO relationship policy BPM-003

### 1. PURPOSE AND SCOPE

The Victorian AIDS Council (VAC) Strategic Plan articulates the organisation's vision, mission and strategic objectives. The Strategic Plan is complemented by Operational Plans which seek to action work towards the Strategic Plan.

1.2 The purpose of strategic planning is to maintain focus on the vision, mission and strategic priorities of the organisation. It aims to:

- communicate a clear, shared direction to members, community and VAC staff with agreed priorities for the future;
- enable VAC to respond to key policy directions;
- foster innovation in support of the vision, mission and strategic priorities of the organisation; and
- establish a process by which performance can be monitored in order to learn from past performance.

1.3 This procedure outlines the strategic planning procedure for developing and reviewing the VAC Strategic Plan and the Operational Plans. It also outlines the relationship between the different plans.

1.4 This procedure seeks to ensure that planning procedures across the organisation are integrated, consistent and timely. It is important that the vision, mission and strategic objectives outlined in the Strategic Plan flow through to Operational Plans and to staff Performance Development and Review Plans (PDRP).

1.5 The Board sets the Strategic direction of VAC through the Strategic Plan and it is the responsibility of the CEO and staff to action the Strategic Plan through Operational Plans

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## 2. DEFINITIONS

- 2.1 Strategic Planning is “a systematic method of identifying and addressing the half dozen most important things that an organisation must get right if it is to prosper over the next few years” (Argenti).
- 2.2 A **vision statement** is a description of a desired outcome that inspires and energises staff. Visioning is the first step of the strategic planning process; it should answer the question “What is our preferred future?”
- 2.3 A **mission statement** is a broad statement about the organisation’s fundamental purpose, scope and reason for existence and provides agreement on what the organisation is about.

## 3. PROCEDURE

This section outlines the different planning processes and how they relate to each other.

### 3.1 STRATEGIC PLAN

3.1.1 The VAC board sets a Strategic Plan on a chosen (year planning cycle across a selected number of years (e.g. five). Development of the Strategic Plan involves the collection and analysis of a range of inputs, including:

- a review of our strategic relationships/partnerships and their outcomes;
- an evaluation of our core program areas (to ensure mission alignment, sustainability and the achievement of objectives);
- an analysis of the policy environment and our ability to respond;
- consultation with staff, members, volunteers, clients and key stakeholders;
- an assessment of our progress against the previous or year to date (YTD) Strategic Plan; and,

3.1.2 Performance against the Strategic Plan is reported to the Board of Directors via the CEO, through regular CEO Reports and the Board CEO Work plan.

### 3.2 OPERATIONAL PLANNING

3.2.1 An Operational Plan for each program is developed annually. Operational Plans should directly relate the goals, objectives and activities of the program to those outlined for the organisation in the Strategic Plan. These Plans are monitored via SMT and Director’s and staff’s Performance Development & Review Plans.

### 3.3 STAFF PERFORMANCE DEVELOPMENT & REVIEW PLANS (PDRP)

3.3.1 The PDRP process commences subsequent to the strategic and program planning processes to ensure that the VAC goals and objectives are linked to individual performance.

3.3.2 The planning process requires that in conjunction with their line manager, staff plan their forthcoming year’s activities, ensuring basic job requirements are met as well as other

strategic initiatives are reflected. Professional development goals are also set and this information is collated and analysed to inform VAC training priorities

### **3.3 OTHER PLANS AND INPUTS**

**3.3.1** The following plans and/or planning processes occur in conjunction with, and are key inputs to, the strategic and program planning processes.

**3.3.2 Budget development:** An annual budget and forward budget forecasting occurs in conjunction with, and is a key input to, the strategic and program planning processes.

**3.3.3 Risk Management:** The Risk Management Plan facilitates the development, implementation and improvement of systems for the identification, assessment and management of risks to the organisation. Throughout the planning cycle the Risk Management Plan is regularly reviewed as per the Risk Management Policy..

**3.3.4 Quality Planning:** The Quality Plan is set on a three yearly basis following the Quality and Improvement Program (QIP) audit. A mid-cycle review with QIP occurs 18 months into the plan. The Quality Plan is another key input to the strategic and program planning processes.

**3.3.5 Services/Facilities Planning:** Facilities planning process involve periodic review of assets and asset requirements. Facilities' planning is aligned to meet current and planned operational requirements.

**3.3.6 Information Communication Technology (ICT) Planning:** ICT Planning is aligned with Operational Plans to ensure that the organisation's ICT capabilities allow it to meet its goals and objectives.

## **4. COMMUNICATION**

Relevant VAC employees will be informed about the development and any future changes to this policy and procedure.

Members, clients and other key stakeholders will be provided with a copy of this Policy and Procedure on request.

## **5. REVIEW**

This Policy and Procedure will be reviewed at three year intervals from the date approved or earlier if there is a change in context (legislative change, funding agreement change, or an emerging issue) or a problem with the existing procedure is otherwise identified. Review dates are recorded in the Policy and Procedure Register.

## **6. ACKNOWLEDGEMENTS**

Inner South Community Health Service