Mendicity Institution
since 1818

Strategic Plan 2026 to 2029

People — Possibility — Progression



WELCOME | ENGAGE | CONNECT | PROGRESS | PARTICIPATE

"I am the friend of liberty in every clime, class and color. My sympathy with distress is not confined within the narrow bounds of my own green island. No — it extends itself to every corner of the earth."



Daniel O'Connell, The Liberator
President Mendicity 1842–1847

About this document

This strategic plan has been developed under Mendicity's executive leadership, with input from staff, service users and the Board. It draws on operational experience, service-user feedback and lived experience to set a direction for 2026–2029: meeting immediate needs with dignity while opening pathways towards wellbeing, opportunity, participation and greater independence.

Mendicity's distinctive strength lies in its trusted relationships with people who often face barriers to accessing or remaining engaged with services. Its role is to bridge gaps between services, helping people navigate support, advocating on their behalf and coordinating practical follow-through. This connects existing provision around each person, strengthening access and continuity while avoiding competition or duplication of services.

With this strategy established, we welcome opportunities to strengthen relationships across the community, with partner organisations, statutory services, funders and community representatives. We invite their experience and insight to inform our implementation planning, identify opportunities for collaboration and develop effective pathways between services.

Service users' lived experience will shape service design, delivery and review, with supported opportunities to influence organisational direction and governance. Feedback, casework outcomes and partnership experience will inform regular improvements. Baselines, annual milestones and accountable leads will be confirmed through implementation planning and budgeting.

Contents

Executive summary	3
Our story and the changing context	4
Purpose vision and values	5
Our strategic framework	7
Strategic Priorities	8
Outcomes and performance framework	16
Delivering the strategy	18
Appendix Draft implementation framework	20

Strategic Plan 2026 to 2029

People — Possibility — Progression

Mendicity welcomes people experiencing homelessness and exclusion. We meet immediate needs with dignity and open personalised pathways towards greater security, opportunity, participation and independence.

Our Purpose

Meet immediate needs with dignity and open personalised pathways towards greater security, opportunity, participation and independence.

Our Vision

A Dublin in which people experiencing homelessness and exclusion are welcomed with dignity, connected to support and opportunity and enabled to pursue their own potential.

Our Values

- Welcome without judgement
- Support with dignity
- Protect human rights and promote equality
- Build trust
- Enable agency
- Open pathways
- Work in partnership
- Learn and account

Executive summary

Mendicity enters this strategic period with a renewed Board, strengthened governance and a clear opportunity to build on the qualities that have sustained the organisation for more than two centuries: practical compassion, an open door and respect for the dignity of every person.

Homelessness, social exclusion, poverty, migration, trauma, health and mental health inequalities shape demand for Mendicity. Many people face barriers to accessing support, learning and employment. Funders increasingly expect clear outcomes, evidence, partnership working and robust governance.

Our response connects a dependable, low-threshold day service with skilled personalised casework and practical pathways towards wellbeing, housing, education, employment training and work. Mendicity's distinctive role is to engage people who face barriers to accessing services, agree goals with them and help coordinate support around their needs. Staff will advocate, support attendance and follow through with partners to maximise the practical help offered to service users. Progress is defined with each person and is never a condition of welcome.

Strategic priority	What we intend to achieve
1. **A welcoming and dependable service**	Meet immediate needs safely, consistently and with dignity, welcoming diverse languages and cultures and improving service-user experience while building trust.
2. **Personalised pathways**	Translate each person's chosen goals into an agreed case plan, practical action and regular review through skilled personalised casework, advocacy and coordinated follow-through with partners.
3. **Mental health, physical health and wellbeing**	Improve engagement with and access to mental health, wellbeing and healthcare support through casework and partnerships, with proportionate on-site provision where need, professional oversight and sustainable funding are established.
4. **Opportunity participation and independence**	Create routes into education, employment training and work, community participation and greater independence; involve service users in service design, organisational direction and governance.
5. **Partnership and influence**	Build partnerships that improve access to support and use evidence and lived experience to inform service and pathway design, without duplicating effort.
6. **A strong and sustainable organisation**	Strengthen organisational, financial and clinical governance; develop staff and volunteers; improve systems and premises; and secure sustainable funding through statutory core support, fundraising and philanthropy.

By 2029

By 2029, Mendicity will demonstrate improvements in service-user experience, wellbeing, progress towards individual goals, participation in employment training and work, and greater independence where possible and desired. People choosing ongoing casework will have agreed case plans, named workers and regular reviews. Supported connections will result in successful access to appropriate services. Annual plans will set measurable milestones against agreed baselines and available resources. Delivery requires dependable statutory core funding, with fundraising and philanthropy supporting buildings, amenities and innovation.

Our story and the changing context

Our enduring role

Mendicity has a long history of responding to poverty, homelessness and exclusion in Dublin. Its enduring value lies in being present for people who may struggle to access or remain engaged with more formal systems. The organisation combines practical assistance with human connection: people are welcomed, known and supported without judgement.

What we are learning

Planning discussions, service-user feedback and surveys have highlighted the importance of welcome, practical help and community, alongside demand for mental health support and opportunities for employment training and work. Service users' lived experience, casework outcomes and partners' feedback will guide ongoing improvements to how support is designed and delivered.

The external context

- Demand is shaped by housing scarcity, poverty, migration, health inequalities, trauma and gaps between services.
- Mendicity serves people across the whole of Dublin with diverse languages, cultures and circumstances, requiring accessible communication and culturally responsive practice.
- Many needs are interconnected and cannot be addressed effectively by any one organisation.
- Public and philanthropic funders increasingly expect evidence of need, measurable outcomes, safeguarding, financial control and collaboration.
- Mendicity has opportunities to deepen relationships with health, housing, integration, employment, education and community partners.

Strategic choices

Mendicity will build on its trusted day service, sustained relationships and pathways into employment by developing excellence in engagement and personalised casework. It will help people navigate fragmented services, advocate for appropriate support and maintain continuity across referrals and transitions. Partnerships will connect people with specialist expertise; proportionate on-site wellbeing support will be developed where need, professional oversight and sustainable funding are established. New projects will be tested for mission alignment, need, capacity, risk, funding and their impact on the core service.

Purpose vision and values

Core purpose

Mendicity welcomes and supports people experiencing homelessness and exclusion. We meet immediate needs with dignity and open personalised pathways towards greater security, opportunity, participation and independence.

Vision for 2029

A Dublin in which people experiencing homelessness and exclusion are welcomed with dignity, connected to the support and opportunities they need, and enabled to pursue their own potential.

Mission

We provide a welcoming and dependable day service, build trusted relationships and offer personalised casework. With partners, we open pathways to mental health and wellbeing support, housing, learning, employment training and work, enabling participation and greater independence.

Values and commitments

Commitment	What it means in practice
We welcome without judgement	Our service is inclusive, respectful and accessible. Support is not conditional on achieving a prescribed outcome.
We support with dignity	We meet immediate needs safely and reliably, respect choice and privacy, and uphold safeguarding and equality.
We protect human rights and promote equality	Respect the rights of service users, employees and volunteers; prevent discrimination and promote equality of access and opportunity in services and employment.
We build trust	We listen, are consistent, do what we say and recognise that meaningful engagement takes time.
We enable agency	People define their own goals. We build on strengths and support informed choice rather than doing things to or for people. Service users' lived experience shapes service design, delivery and review, with supported opportunities to influence direction and governance.
We open pathways	We provide casework, create opportunities and actively connect people to support, resources and relationships that can help them move forward.
We work in partnership	We collaborate because no single organisation can meet every need and simple signposting is often insufficient.
We learn and account	We use evidence, lived experience and honest reflection to improve, and we are accountable for resources and results.

Our Strategic Framework

Welcome — Engage — Connect — Progress — Participate

People may enter, pause, return or move between stages.
Progress is personal and never a condition of welcome



Welcome

Meet immediate needs in a safe, inclusive and dignified low-threshold service.



Engage

Build trust, listen and understand each person's circumstances, strengths and goals.



Connect

Provide personalised casework, an agreed case plan and practical help to access support and opportunity.



Progress

Support progress in wellbeing, education, employment training and work, housing and financial stability.



Participate

Towards greater independence.

Support community participation and greater choice and control in daily life, with continuing support where needed.

Our strategic framework

The framework **Welcome Engage Connect Progress Participate** describes how Mendicity creates value. It is not a fixed or linear journey: people may enter, pause, return to or move between stages. Participating towards independence means greater choice and control over daily life and can include ongoing support. Progress is personal and may include improved health and wellbeing, stronger social connection, access to support or opportunity, learning, employment, housing, greater stability or renewed confidence.

Stage	Meaning for Mendicity	Illustrative evidence
Welcome	Meet immediate needs in a safe, inclusive and dignified low-threshold service.	Access, safety, dignity, reliability and service-user experience.
Engage	Build trust, listen and understand each person's circumstances, strengths and priorities.	Repeat engagement; completed assessments with consent; needs and goals identified.
Connect	Provide personalised casework with a named worker, an agreed case plan and practical help to access support and opportunity.	Case plans in place; actions undertaken; supported referrals; successful access; coordinated follow-up and reviews.
Progress	Support progress in wellbeing, education, employment training and work, housing and financial stability.	Progress towards individual goals; training completion; sustained participation in the community and work; positive changes maintained.
Participate and build independence	Support community participation, social connection and contribution, and greater choice and control in daily life, with continuing support where needed.	Self-reported agency and independence; participation; greater housing or financial stability; involvement in service design and governance.

The framework links the experience of each person with the capabilities Mendicity must build. The six strategic priorities, on the pages which follow, turn it into an organisational programme for 2026 to 2029.

Our Six Strategic Priorities 2026-2029

The organisational commitments that support each person's progress

Mendicity welcomes people experiencing homelessness and exclusion.
We meet immediate needs with dignity and open personalised pathways towards greater security, opportunity, participation and independence.

1 A welcoming and dependable service

Meet immediate needs with dignity. Welcome diverse languages and cultures, provide safe access and improve service user experience.

2 Personalised pathways

Turn chosen goals into assessments and agreed case plans, practical coaching, action and regular review.

3 Mental health, physical health and wellbeing

Improve engagement and access to mental health, wellbeing and healthcare, through casework and partnerships.

4 Opportunity participation and independence

Open routes into education, employment training and work. Involve service users in shaping services, direction and governance.

5 Partnership and influence

Build rooted community connections and partnerships that improve support and inform wider responses without duplicating effort.

6 A strong and sustainable organisation

Strengthen governance, people, systems and sustainable funding. Improve premises to support dignity and wider community involvement.

1 A welcoming and dependable service

We will protect and strengthen Mendicity's core role as a safe, welcoming and low-threshold day service.



Area	Strategic action
Consistent core service	Define and maintain clear standards for food, showers, laundry, warmth, safety, information and access to healthcare.
Dignity and inclusion	Embed trauma-informed, culturally responsive and equality-based practice. Accommodate diversity of language and culture through multilingual welcome signs, accessible information and appropriate communication support.
Safe service delivery	Maintain safeguarding, health and safety, incident management and referral protocols. Enhance entrance arrangements to balance accessible welcome with staff and service-user safety.
Planned capacity	Use demand and service data to align opening arrangements, staffing and resources with need, including the ambition for a dependable seven-day service where sustainably funded.
Service-user experience	Establish a baseline of welcome, dignity, safety, accessibility and usefulness; repeat assessments and act on feedback, including differences between demographic groups over time.

By 2029 we expect to see

- People report that they are welcomed, safe, treated with dignity and provided with individualised supports.
- Service-user experience measures improve from the baseline in each area.
- Core services are reliable and accessible.
- Complaints, incidents and safeguarding concerns are recorded, reviewed and used to improve practice.

2 Personalised pathways

We will develop skilled, consistent casework that turns each person's chosen goals into an agreed case plan, practical support and regular review. Named workers will advocate, coordinate with partners and follow through to help people access and remain engaged with support.

Area	Strategic action
Casework model	Provide assessment, an agreed case plan and a named worker for people choosing ongoing casework. Agree actions, coordinate support, review progress and adapt plans; retain access to basic support regardless of participation.
Skilled team	Clarify roles and caseloads and equip staff and volunteers with training, supervision and reflective practice.
Warm connections	Build named referral routes and help people engage, attend and follow through with specialist support, employment training and work, with consent. Agree responsibilities for follow-up and record whether support is received and sustained.
Continuity	Use the CRM to record assessments, case plans, actions and reviews alongside proportionate records of walk-ins and informal support; maintain confidentiality and continuity.
Practical coaching	Help people build routines, confidence and attendance, take manageable steps and sustain participation in training or work; reconnect when engagement is interrupted.

By 2029 we expect to see

- People who choose assessment and ongoing casework have an agreed case plan, a named worker and support to put the plan into practice.
- Warm connections to support and specialist services result in meaningful engagement and successful access.
- People report greater agency, confidence and progress towards their own goals.

3 Mental health, physical health and wellbeing

We will improve engagement with and access to appropriate mental health, wellbeing and healthcare support through personalised casework, advocacy and partnerships. Initial support, counselling partnerships and supported referrals will address barriers to engagement and progression. Proportionate on-site provision will be developed where need is evidenced, suitable partners and professional oversight are available, and funding is sustainable. Unmet specialist needs and access barriers will be recorded to inform service development and funding discussions.

Area	Strategic action
Access to care	Strengthen practical access to primary care and relevant health services through on-site, outreach and referral partnerships, building on existing provision including Safetynet. Identify barriers, agree follow-up responsibilities and record successful access and unmet need.
Whole-person support	Recognise the interaction between physical health, mental health, trauma, addiction, loneliness and homelessness.
Prevention and promotion	Provide accessible health information, screening or wellbeing activity where evidence, partnership and capacity support it.
Accessible mental health support	Explore low-threshold initial support and on-site counselling alongside supported specialist referrals. Evaluate provider partnerships and supervised placements for suitability, continuity, safeguarding, professional governance and service-user choice.
Service development	Develop proportionate on-site wellbeing supports where needs are evidenced, suitable delivery arrangements and professional oversight are in place, and provision is safe, sustainably funded and within appropriate professional boundaries.
Boundaries and escalation	Clarify which supports Mendicity delivers itself and which are delivered by partners or specialist services, with clear arrangements for professional responsibility, consent, supervision, safeguarding and escalation.

By 2029 we expect to see

- People can engage with appropriate mental health and healthcare support through accessible provision and supported referrals.
- People report improved wellbeing or better ability to manage health needs.
- Health partnerships and Mendicity service developments have clear roles, pathways, boundaries and review arrangements.

4 Opportunity, participation and independence



We will create practical opportunities for people to build confidence and capability, participate in community life and develop greater independence through education, employment training, work and involvement in shaping Mendicity.

Area	Strategic action
Learning and skills	Develop accessible education, employment training, digital inclusion and life-skills opportunities linked to individual goals and readiness.
Social enterprise	Develop the social enterprise as a supported environment for participation, learning, work experience and employment, with a sound business and governance model.
Employment pathways	Build partnerships with employment services, community development organisations, employers and training providers. Provide practical support to enter and sustain training and work, and follow up employment outcomes over time.
Service-user voice and governance	Involve service users and former service users in service design and organisational direction. Offer supported participation in Mendicity's working groups, with routes into committees and, where appropriate, Board involvement.

By 2029 we expect to see

- Participation in education, employment training, volunteering, social enterprise and work increases, with support to sustain engagement.
- People gain skills, confidence and greater choice and control over their lives, recognising that independence can include ongoing support.
- The Liberator meets agreed social outcomes and financial disciplines.
- Service users and former service users influence service design, organisational direction and governance through supported opportunities to participate.

5 Partnership and influence

We will strengthen relationships across health, housing, integration, education, employment and community services to improve access and continuity. Service mapping and an engagement plan with a clear offer and ask of each partner will guide collaboration, informed by evidence and lived experience and avoiding duplication.

Area	Strategic action
Strategic mapping	Map relevant services, eligibility, access barriers, named contacts and referral routes alongside priority statutory, community, philanthropic and business relationships. Maintain an engagement plan with clear offers and asks, relationship owners and agreed next steps for each priority partner.
Working pathways	Agree practical referral and collaboration arrangements in housing, mental health, welfare, integration, education, employment training and work across Dublin, including responsibilities for follow-up, continuity and review of unresolved access barriers.
Consortium working	Lead or join collaborative bids only where the purpose, roles, resources, risk and benefit to service users are clear.
Evidence and voice	Use service data and lived experience to shape service improvements and pathway design with partners.
Visibility and engagement	Communicate Mendicity's connected model, service-user experience and outcomes to funders, donors and the public; use community relationships and social enterprise to build understanding and involvement.

By 2029 we expect to see

- Priority partnerships have named owners, agreed objectives and regular review.
- Agreed referral routes and follow-up arrangements help people receive appropriate support and remain engaged; unresolved access barriers are identified and reviewed with partners.
- Collaborative initiatives demonstrate added value without weakening the core service.
- Service data and lived experience inform service improvements and pathway design with partners.

6 A strong and sustainable organisation

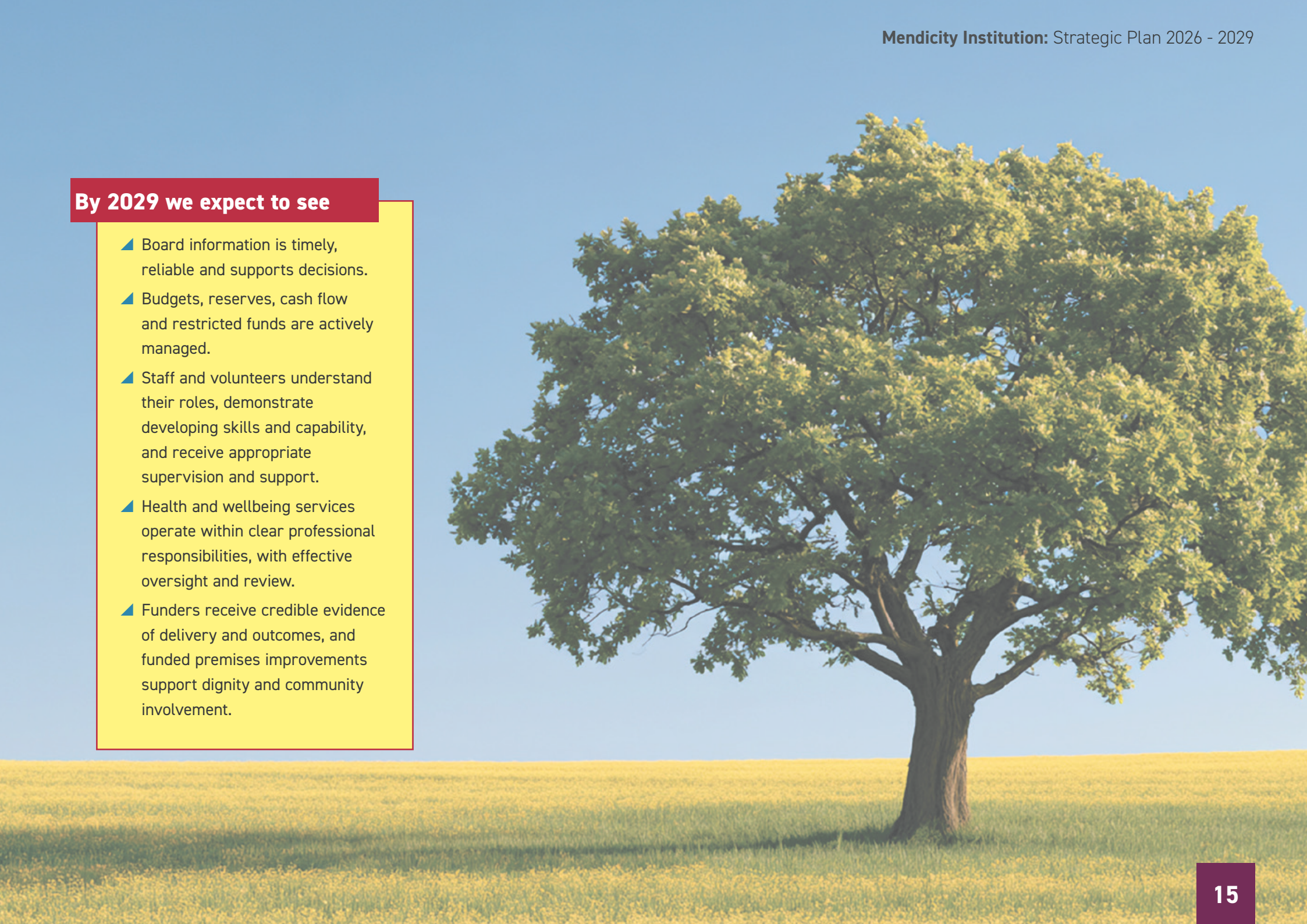


We will strengthen governance, develop our people and improve systems and premises so that Mendicity can deliver safe, effective and sustainably funded services.

Area	Strategic action
Governance	Complete the governance reset and confirm the operating structure. Maintain regulatory compliance and effective Board and committee oversight, with clear clinical governance arrangements for health and wellbeing services delivered by Mendicity or its partners.
People and culture	Develop a staffing and volunteer model aligned with the strategy, with clear roles, induction, training, supervision, reflective practice and opportunities for development.
Finance and funding	Maintain management accounts, cash-flow and budget control; cost core services fully and seek core statutory funding. Align fundraising and philanthropy with premises, amenities and innovation.
Evidence and learning	Implement outcome measurement, a service-user experience baseline, data quality standards and regular review. Bring together service-user feedback, casework outcomes and partner experience to agree improvements, record changes and review their effects; use demographic analysis over time to improve inclusion and access.
Premises and community access	Develop a phased, costed programme to enhance premises, accessibility and amenities, creating a dignified environment for service users and inviting broader public and community involvement, with appropriate privacy and safety.
Systems and resilience	Maintain suitable technology, data protection, risk management and business continuity arrangements.

By 2029 we expect to see

- Board information is timely, reliable and supports decisions.
- Budgets, reserves, cash flow and restricted funds are actively managed.
- Staff and volunteers understand their roles, demonstrate developing skills and capability, and receive appropriate supervision and support.
- Health and wellbeing services operate within clear professional responsibilities, with effective oversight and review.
- Funders receive credible evidence of delivery and outcomes, and funded premises improvements support dignity and community involvement.



Outcomes and performance framework

We will combine activity, quality and outcome measures, informed by service users' own views. A baseline survey will assess welcome, dignity, safety, accessibility and usefulness; repeat assessments will measure change. Over time, findings will be disaggregated by relevant demographic characteristics where possible. Regular review with service users, staff and partners will identify what is working, where access is failing and which changes should be made.

Domain	Core question	Possible measures
Reach and access	Who uses Mendicity and can people access help when needed?	New and returning service users; demographic, language and needs profile; scheduled and informal contacts; unmet demand; opening and waiting times.
Quality and dignity	Is support safe, inclusive, reliable and respectful?	Baseline and repeat service-user experience assessments; change over time and demographic differences where meaningful; complaints, incidents, safeguarding and service standards.
Connection	Are people reaching the support, relationships and opportunities that can help them move forward?	Assessments completed; agreed case plans and named workers; actions implemented; reviews; supported referrals; support actually received; sustained engagement; unresolved barriers and unmet specialist need.
Personal outcomes	Are people progressing towards goals that matter to them?	Goal attainment; self-reported wellbeing, agency and independence; access to mental health support; housing and financial stability; sustained positive changes.
Opportunity participation and independence	Are people developing skills, participating and gaining greater choice and control?	Education and employment training participation and completion; skills gained; entry into and sustained work; volunteering; service-user involvement and influence in service design and governance.
Organisational strength	Can Mendicity deliver safely and sustainably?	Core funding coverage and continuity; cash flow and reserves; staff and volunteer capability, development and supervision; organisational and clinical governance; compliance; premises improvement milestones; data quality and partner confidence.

Headline indicators

The Board will review a concise dashboard covering changes in service-user experience; assessments and active case plans with reviews; successful access to mental health and other supports; participation and sustained engagement in employment training and work; progress towards personal goals and greater independence; service-user influence; and core funding and financial sustainability. Annual plans will set definitions, baselines and milestones.

Measurement principles

- Agree definitions and baselines before setting numerical targets.
- Disaggregate service experience and outcomes over time by relevant characteristics such as age, gender, nationality, ethnicity, language and accommodation status, where lawful, meaningful and safe. Use voluntary self-identification and proportionate collection.
- Use qualitative evidence and lived experience alongside quantitative measures.
- Collect only information that has a clear purpose and can be protected and used responsibly.
- Review performance for learning and service improvement, not simply for reporting.

Delivering the strategy

Phasing

Phase	Primary focus
2026 Foundation	Approve the strategy; complete governance transition, confirm service and casework models; establish the budget, funding plan and baseline measures; configure CRM reporting and plan service-user feedback.
2027 Build	Implement casework and practical coaching; establish service-user experience baselines; complete service mapping and a partner engagement plan; develop mental health partnerships, employment training and Social enterprise; assess and cost premises improvements and seek funding.
2028 Scale and deepen	Expand proven approaches where sustainably funded; deepen training and employment pathways; strengthen service-user involvement and demographic analysis; progress funded premises improvements and community engagement.
2029 Review and renew	Evaluate delivery and impact; identify gaps and lessons; consult stakeholders; agree the next strategic direction.

Annual implementation planning

Each year the Board will approve an implementation plan that identifies the actions, accountable lead, timetable, resources, risks and measures for each priority. The annual budget and fundraising plan will be explicitly aligned with it. Activities that cannot be resourced safely should not be taken as commitments.

Resourcing the strategy

Mendicity will build on its established premises, committed staff and volunteers, distinctive heritage and strong community relationships. Investment since early 2026 in the strategic reset, systems, facilities, pilot programmes and social enterprises has strengthened these foundations. A strategic implementation plan will detail the staffing and financial resources required to deliver each priority and will be aligned with the annual operating budget. We will seek dependable, multi-annual statutory funding to meet the full costs of core services, including staffing, casework, supervision and essential systems. Fundraising and philanthropy will support building improvements, amenities and innovation. Each proposed development will have a costed plan covering capital requirements, ongoing operating costs and how it will be sustained. Any use of reserves will require Board approval in accordance with an agreed reserves policy.

Governance and accountability

- The Board owns the strategy, approves annual plans and budgets, and reviews progress and risk at least quarterly.
- The Strategy and Delivery Committee will oversee implementation, partnerships and funding alignment, and the Governance, Audit and Risk Committee will oversee finance, risk, people and compliance.
- Management is accountable for delivery, performance information, operational risk and escalation.
- Committees will establish and conclude working groups with clear tasks, leads, reporting and timescales. Staff and service-user involvement will inform delivery and provide supported routes into committee and, where appropriate, Board participation. The structure will be reviewed to keep demands on a small organisation proportionate.
- A concise annual strategy report will describe progress, outcomes, learning, financial position and priorities for the following year.

Decision criteria for new opportunities

Before committing to a material new project, tender, consortium or service, Mendicity will test it against the following criteria:

Test	Key question
Mission	Does it advance the purpose and strategic priorities?
Need	Is there credible evidence of need and service-user benefit?
Role	Is Mendicity well placed to lead, partner or refer?
Capacity	Can it be delivered without undermining the core service?
Capability	Are the required skills, systems, governance and partners in place?
Finance	Are full costs, cash flow, liabilities and sustainability understood and funded?
Risk	Are safeguarding, clinical, legal, reputational and delivery risks acceptable?
Evidence	Can outcomes be measured and learning used?

Appendix Draft implementation framework

This framework links the strategy to annual operating plans. The strategic implementation plan will specify named leads, dates, staffing, costs, dependencies and measures for each priority, aligned with the annual operating budget. The deliverables below guide that planning.

Priority	First year deliverables	Proposed oversight
1. Welcoming service	Core standards; safe access and capacity review; multilingual welcome and accessible information; service-user experience baseline; safeguarding and incident review.	Management with Strategy and Delivery oversight
2. Personalised pathways	Assessment and case-plan model; named workers; advocacy and coordinated follow-up; practical coaching; referral map and partner responsibilities; CRM recording of successful access and unmet need; supervision and training.	Management with Strategy and Delivery oversight
3. Mental health, physical health and wellbeing	Needs and partnership map; evaluate accessible on-site support and referral options; professional governance and escalation protocols; link to casework; initial measures.	Management and relevant partners with Strategy and Delivery oversight
4. Opportunity participation and independence	Education and employment training map; employer links; The Liberator Café social enterprise business and social impact plan; supported service-user involvement in direction and governance.	Management with Strategy and Delivery oversight
5. Partnership and influence	Service and stakeholder map including eligibility and access barriers; engagement plan with clear asks, relationship owners and next steps; partnership criteria; service data and lived experience informing service and pathway design; communications and evidence plan.	Strategy and Delivery Committee and management
6. Strong organisation	Governance transition and clinical oversight arrangements; full core-service costing and statutory funding plan; capital and innovation fundraising; workforce and volunteer development plan; KPI dashboard; premises assessment and costed priorities; risk register.	Board, Governance, Audit and Risk Committee and management

How we will measure progress

- Service-user experience from a baseline
- Assessments and case plans put into action
- Access to wellbeing support
- Training and work
- Personal goals and independence

Review change over time and demographic differences where meaningful, lawful and confidential.

Resourcing the strategy

Statutory core funding for dependable services. Fundraising and philanthropy for buildings, amenities and innovation.

By 2029 Mendicity will demonstrate

- Better service-user experience
- Improved wellbeing
- Progress towards personal goals
- Participation in training and work
- Greater choice and independence

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For more information on Mendicity's services, or to donate, visit **www.mendicity.org**

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