



LCDHD Strategic Plan 2013-2018 Conclusive Report

Developing an organizational strategic plan is a prerequisite to applying for voluntary national accreditation through the Public Health Accreditation Board and therefore began the journey to PHAB Accreditation for LCDHD. This plan was focused mainly on internal growth and development, helping us develop and maintain the necessary skills and elements to achieve this and many other goals for the organization. The plan also created a basis for all other plans to be built from and started an alignment of plans.

Regular review and revision of strategic plan and the documents used in its development are a vital component of the strategic planning process, so as we started to renew our strategic plan in 2018, we realized that the health department has evolved. Meaning that programs and funding are becoming more community focused instead of patient centered, so to, then must our strategic plan evolve. As new programs and initiatives are implemented in response to emerging health issues, our focus changes and we now need to move toward community health and become innovative in our approach to the emerging threats.

In doing so, the need to analyze and sum our current strategic plan was identified. A summation of each of our strategic initiatives and how each goal was met (and continues being met) is discussed below in this conclusive report.

Strategic Initiative 1: Develop, maintain and enhance collaboration with partners, stakeholders and the community to identify and respond to health problems and threats.

- ***Goal 1: Support relationship with district and/or local Boards of Health***
 - All of the action steps listed for this goal have taken place. A page with all the Board of Health resources and orientation materials has been created and that link is shared at board meetings and via email with all new and existing board members on a routine bases. A new orientation video was also created and all new members are required to view it as part of the orientation process. Face-to-face orientation with the Executive Director is also available, if requested.
 - Financial and Program updates are shared quarterly at district BOH meetings by the Executive Team. Many items such as QI & research projects have been added as standing items on the agenda. Monthly email updates are also sent out by the Executive Director.
 - BOH surveys are completed annually by the QI Department and results are shared via email and at the next board meeting. This is also tracked in the PM database.
- ***Goal 2: Support collaboration with community partners***
 - All programs continue to network, outreach and educate current and potential community partners, especially as new health issues emerge. This will also be a part of the next strategic plan as we move toward finding community partners to help absorb our lost capacity with the future

funding cuts. Meetings and collaborations are tracked through annual plans and the PM tracking tool.

- **Goal 3: Conduct assessments**
 - Community health assessments are now conducted on an ongoing basis and community health improvement plans are developed or revised every three years.
- **Goal 4: Disseminate assessments**
 - Information is shared through many outlets now (CHA's, CHIPs, annual report, district report card via website, Facebook, BOH meetings, newspapers, interagency, fiscal courts, city council, school boards, health boards/councils, etc). This can be seen on our website, through meeting minutes and media outlets.

Strategic Initiative 2: Build and maintain a competent LHD public health workforce.

- **Goal 1: Recruit**
 - Steps have been taken to recruit qualified individuals, even to the point of raising entry level salaries for nurses
- **Goal 2: Train**
 - Staff training is continual with trainings offered off-site, on-site and online. All required staff training is now tracked through the Workforce Development Plan
- **Goal 3: Retain**
 - Staff are informed when opportunities for advancement are available with ads for these vacancies being posted in-house before they are posted publicly.
 - Employee of the month and employee of the year, as well as employee reward for adopted suggestions remains in place and can be evidenced by agency newsletters, meeting minutes, etc.
- **Goal 4: Evaluate**
 - Employee satisfaction survey is conducted annually and regularly scheduled employee evaluations are completed for all staff. These activities are tracked in the PM database.

Strategic Initiative 3: Identify and respond to current public health threats and prevent emerging public health threats.

- **Goal 1: Prevent recurring/emerging PH issues**
 - Disease surveillance and investigations are ongoing in correlation with guidance in the Communicable Disease Plan.
 - Environmental service continue inspections, boil water advisories, etc.
- **Goal 2: Identify current/emerging PH issues**
 - Continuous surveillance takes place through the National Electronic Disease Surveillance System, reportable disease form submissions, and environmental inspections
 - A data analysis committee has also been formed to analyze collected data and address identified or emerging issues where opportunity exists
- **Goal 3: Respond to current/emerging PH issues**
 - Plans (Preparedness Plan and Disease Outbreak Support Plan) have been developed that can be implemented as needed.
 - The environmental division also continues to respond to issues (e.g. mosquito-borne illness, boil water plan, major rodent infestations, bird roost, etc.) as they arise.

Strategic Initiative 4: Continually develop stakeholder awareness/support of health initiatives and policies.

- **Goal 1: Gain support for health initiatives/policies from Boards of Health**
 - Presentation are made to the boards of health during regular board meetings on health initiative or needed policies. Executive Director also sends our email update monthly.
- **Goal 2: Gain support for health initiatives/policies from community**
 - Community presentations, social media, television, radio communications are all utilized by all programs to educate the community stakeholders regarding health initiatives and policies.
 - Community Health Improvement Plans are completed every 5 years.

- *Goal 3: Gain support for health initiatives/policies from staff*
 - Staff are continually educated regarding health initiatives/policies via newsletters, social media, LCDHD server, LCDHD Wiki, staff meetings, webpage, email, etc.)

Strategic Initiative 5: Improve the health status of the community through provision of, or assurance through linkages to needed public health services.

- *Goal 1: Identify needed PH services.*
 - Ongoing community health assessments and CHIP every 5 years to identify needed services
 - Reportable disease and health report card data collected and analyzed
- *Goal 2: Identify and implement strategies to improve access to health services.*
 - Continue to encourage participation in health departments programs as staffing and funding will allow
 - Referrals are made to community partners, FQHCs, contracted providers and private physicians as needed
 - Grants are sought to help procure needed services
- *Goal 3: Improve health statistics in areas identified by key indicators*
 - Collect data, both primary and secondary (from various sources – reportable disease, census data, vital statistics, BRFSD, CHA's, county health rankings, etc.)
 - A data analysis committee has been formed to analyze collected data and address identified or emerging issues where opportunity exists
 - Data is reported through the annual report, health report card, CHAs, CHIPs, website, BOH meetings, etc.

Strategic Initiative 6: LCDHD will continuously evaluate and improve programs and services to ensure internal and external excellence.

- *Goal 1: Establish optimal standards for LCDHD*
 - A QI program was implemented with the Executive Team also becoming the QI team to review and analyze the need for formal projects throughout the organization and lead staff through those projects
- *Goal 2: Utilize feedback from internal and external QA reviews to improve LCDHD programs*
 - Program QAs are conducted at designated intervals, this is tracked and reported through the PM database
 - Internal and external reviews and surveys are utilized to identify trends or improvement efforts that might need to be addressed. This is also tracked through the performance management database.
- *Goal 3: Achieve voluntary national accreditation*
 - LCDHD was awarded national voluntary accreditation status in March 2017.

Strategic Initiative 7: LCDHD will continuously seek to acquire new funds and utilize existing funds to be proactive and innovative in improving the communities' health.

- *Goal 1: Actively seek new funding sources.*
 - Grant sites are continually monitored by our grant coordinator and appropriate programs apply for grants as appropriate
 - Many employees and board members have contacted legislators repeatedly over the last 5 years due public health funding cuts and increasing employee costs
 - This will also continue to be part of the next strategic plan since funding is one of our biggest threats at this time.
- *Goal 2: Seek creative new ways to utilize existing funds.*
 - Websites are monitored for best practices. The KHDA is also looking into the PH best practices across the nation for programs that we provide.
 - Continue to attend conferences and network with other state organizations and health departments to see new ideas and innovative approaches to public health issues.

The challenge from here on will be to keep the momentum going to ensure continuous improvement both internally and externally as our new strategic plan will guide us in different directions!

*LCDHD Conclusion of Strategic Plan Report
Written by Strategic Planning Committee
April 9, 2018*