

Strategic Planning Process

DATE: October 23-24, 2008

Vision: Optimal health, well-being, and safety for all.

Mission: To promote and protect the health, safety, and well-being of the community through leadership and service.

Focus Question: What can the Columbia/Boone County Dept. of Public Health & Human Services in the next 3-5 years to accomplish our mission of optimal health, safety, and well-being for all?

ENVIRONMENTAL ASSESSMENT

Basic Data	Accomplishments	Challenges	Trends	Benefits and Advantages to Developing a Plan
<ul style="list-style-type: none"> • City/county funding dependent • Local funding is decreasing • Others want us to expand • Times are hard (economy) • Increase in rabies • Large number of uninsured • Increased impact of unhealthy lifestyle • Decreased smoking rates • Increased teen pregnancy, obesity, HS dropout rate. • Few dental resources for adults • Poverty rate rising • Workforce nearing retirement age • New MPH program • Increase WIC participation /Show-me healthy women • Good community infrastructure to support healthy lifestyles • Increased calls for animal services • Complicated emergency prep issues. • Catchment area for health / human services. • Increased people needing utility and medication assistance. • Increased in calls for services for environmental health specialist. 	<ul style="list-style-type: none"> • Major grants: RWJF, Missouri Foundation for Health related to healthy behaviors, getting national attention from the RWJ • New smoke-free ordinance • Smoking cessation program, decreased smoking rate. (from 24% to 18%) • Revamped training / evaluation related to social service funding • Award-winning employees • National award for diversity celebration • Helped facilitate a new free clinic being established • Creative solutions saved family planning. • Increased WIC services with no additional staff. • Increased breast feeding through program implementation • Increased TV visibility for health issues • Becoming more evidence-based • Facilitated the education of health professionals 	<ul style="list-style-type: none"> • Staffing issues: Increased demand for services, no new resources/staffing • Increasing need for our services • Working across divisions functioning in silos • Thinking big picture, not small picture • Concern about staff turn-over • Documentation • Training – recognizing need/availing, availability • Resistance to change • Historical inertia (how it’s always been done mentality) • Insufficient community resources for uninsured (health, social, dental, mental) • Tolerance for alcohol, substance abuse because of being a college town. 	<ul style="list-style-type: none"> • increased uninsured • increased poverty • Information technology is improving • Decreasing resources (us and community partners) • Increasing resources for active lifestyles • Increasing non-English speaking clients seeking services. • Increased negative feeling toward local government • Higher expectation for what should be done (entitlement). • Decreasing in smoking • Increased population • Decentralization of poverty • Negative climate 	<ul style="list-style-type: none"> • Focus/direction • ID outcomes • Better utilization of resources • Prioritizing efforts • Motivate/inspire staff • Guide staff development / training • Continuity-succession planning • Improved communication with elected officials and community partners • Improves communication of leadership

Practical Vision

What do we want to see in place in 3 – 5 years as a result of our actions?

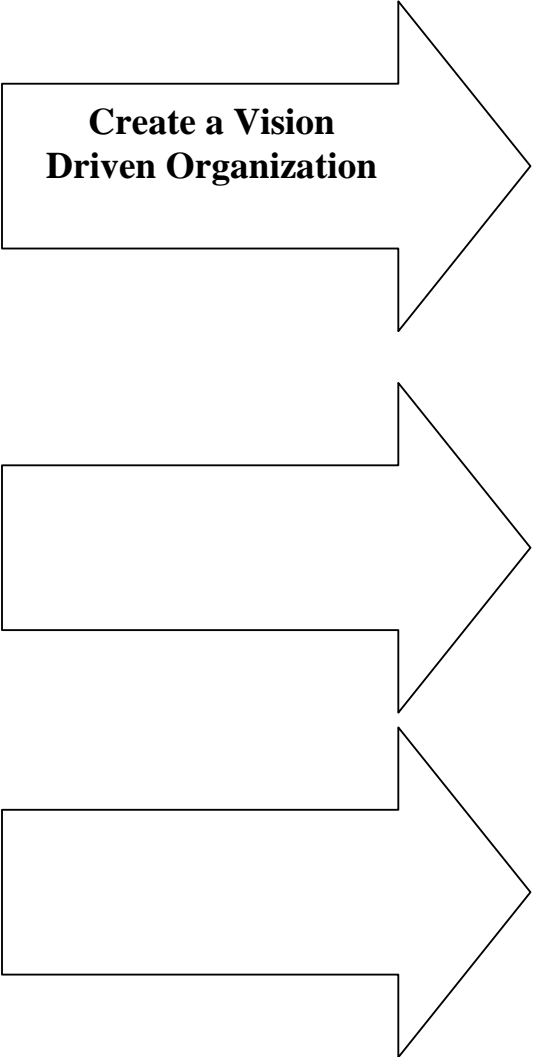
<ul style="list-style-type: none"> • Improved efficiency and decision-making <ul style="list-style-type: none"> ○ All decisions prioritized by data ○ Decentralized documentation ○ Upgrade IT services 	<ul style="list-style-type: none"> • Integrated services across divisions <ul style="list-style-type: none"> ○ Multidisciplinary programs to increase depth ○ Communicate and work between divisions ○ Comprehensive material. child health services 	<ul style="list-style-type: none"> • Engaged empowered community partners <ul style="list-style-type: none"> ○ Place based services ○ Coalitions include non-traditional partners ○ Increase community development around populations & issues ○ Dept. involvement with active community coalitions ○ Assist others to establish priorities ○ Increase in child safety program 	<ul style="list-style-type: none"> • Improved public health outcomes <ul style="list-style-type: none"> ○ Smoking rate 10% ○ Decrease obesity rate by 5% • Improved public health and human services policies <ul style="list-style-type: none"> ○ New school activity and food standards ○ Increase capacity for adult dental services 	<ul style="list-style-type: none"> • Invested and effective staff <ul style="list-style-type: none"> ○ Staff have opportunities to advance ○ Staff enjoy work ○ Vacant positions filled with public health / human services trained staff ○ Expand visibility of expertise • Facilities keep pace with community growth <ul style="list-style-type: none"> ○ Upgrade animal control facility

Underlying Contradictions

What is blocking us from moving toward our vision?

<p><u>Integrated services across divisions</u></p> <ul style="list-style-type: none"> •Turf wars •Communication •Environmental Health is not connected to what social services or clinic does •Staff not seeing opportunities for integration •Integration might not make sense in some cases or doesn't fit. •Regulatory driven functions and number driven outcomes can be a barrier. •Collaboration takes more time. 	<p><u>Technology and skills limit capacity for evidence-based decision-making</u></p> <ul style="list-style-type: none"> •Training in technology applications •People don't know what outcomes are •Limited skill sets •No IT training •Training in data collection •Technology limitations •Technology skill set limited internally 	<p><u>Leadership's commitment to mission and change</u> (Internal organizational behavior)</p> <ul style="list-style-type: none"> •Cliques •Professional chauvinism •Trust •Staff resistance to change •Staff reluctance to across dept services •HD follow-through •Perceived value of outcomes philosophy •Internal agendas •Control issues •Limited view of mission •Individual personalities over mission 	<p><u>System affords limited opportunity for personal growth and development</u> (Staff development)</p> <ul style="list-style-type: none"> • Incentives/rewards • Job classification levels • No career Ladders 	<p><u>Resources drive priorities instead of priorities driving resources</u> (Agendas external)</p> <ul style="list-style-type: none"> •Management priorities •Competing priorities/ interests •Political climate shapes agenda •Trust •Multiple governing agencies •internal control •Reluctance to partner "we can take care of our own" •Competing philosophies •Perceived value of outcomes philosophy •Dependent on external IT resources •Competition for resources •Lack of awareness of value 	<p><u>Conflict between community well-being and individual rights</u> (Community perception)</p> <ul style="list-style-type: none"> • Blog/Trib talk fodder • Not sexy (healthy lifestyles) • Population may not want to change • Animal Control has low community profile • Understanding by policymakers • Community resistant to increased spending on govt buildings • Public resistance • Resistance to HD involvement (external)

STRATEGIC DIRECTIONS	QTR I Nov 08 – Jan 09	QTR II Feb 09 – Apr 09	QTR III May 09 – Jul 09	QTR IV Aug 09 – Oct 09
<p>Determine Priorities and Allocate Resources</p>	<ul style="list-style-type: none"> Review updated needs assessment and data Gap analysis 	<ul style="list-style-type: none"> Cost-Benefit analysis 	<ul style="list-style-type: none"> Budget begins to reflect priorities 	<ul style="list-style-type: none"> Reassign program staff according to priorities
<p>Build Internal Capacity</p>	<ul style="list-style-type: none"> Management team and interested staff complete evidence based decision making course (develop training plan in first quarter) Internal bulletin board 	<ul style="list-style-type: none"> All staff will be trained on outcomes based performance measures Staff determines training needs 		<ul style="list-style-type: none"> New employee training package
<p>Engage Stakeholders</p>	<ul style="list-style-type: none"> Stakeholders know our mission and vision – prepare game plan, include name change 	<ul style="list-style-type: none"> New, stronger animal control policies 	<ul style="list-style-type: none"> PIO to create more strategic messages to develop a communications plan 	<ul style="list-style-type: none"> Increase community events

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 <p data-bbox="145 444 483 526">Create a Vision Driven Organization</p>	<ul data-bbox="666 342 1110 483" style="list-style-type: none"> • Staff will know the vision • Management team meets regularly, focused on strategic direction 	<ul data-bbox="1150 342 1593 375" style="list-style-type: none"> • Develop core values statement 		<ul data-bbox="1999 342 2335 483" style="list-style-type: none"> • Staff have ownership in strategic plan & helping implement the plan

Success Indicator:

Current Reality	1 st Year Accomplishments	Success Indicators
<ul style="list-style-type: none">••	<ul style="list-style-type: none">••	<ul style="list-style-type: none">•

