

Workforce Development Plan Dickey County Health District

Purpose & Introduction

Introduction

Training and development of the workforce is one part of a comprehensive strategy toward agency quality improvement. Fundamental to this work is identifying gaps in knowledge, skills, and abilities through the assessment of both organizational and individual needs, and addressing those gaps through targeted training and development opportunities.

This plan serves as the foundation of Dickey County Health District's (DCHD) ongoing commitment to the training and development of its workforce.

In this plan

This workforce development plan contains the following topics:

Topic	See Page
Agency Profile	2
Workforce Profile	3-4
Competencies & Education Requirements	5
Training Needs	6
Goals, Objectives, & Implementation Plan	7
Curricula & Training Schedule	8-9
Evaluation & Tracking	10
Conclusion/Other Considerations	11
Appendices	
A: DCHD 2017 Budget	
B: DCHD Strategic Plan	
C: DCHD 2018 Core Competency Survey	
D: DCHD HIPPA Compliance Policy and Competency	
E: DCHD New Employee Orientation Checklist	
F: DCHD Training Sign-In Sheet	
G: DCHD Training Evaluation Sheet	

Questions

For questions about this plan, please contact:

Roxanne Holm
Dickey County Health District Administrator
Phone: 701-349-438
Email: rholm@nd.gov

Agency Profile

Mission & vision

Mission Statement

Building healthy communities by protecting the people and promoting healthy lifestyles.

Vision

Working together to live healthier lives.

Values

Accountability-We hold ourselves accountable and encourage the same of our partners.

Collaboration-We value our partners and recognize our independence and interconnectedness.

Compassion-We treat everyone with dignity and respect.

Competence-We strive for excellence in all that we do.

Integrity-We adhere to high ethical and professional standards.

Location & population served

- City of Ellendale, located in Dickey County, North Dakota
- Population 5064
- Racial/ethnic composition: White 95.8%; Black 1.2%; American Indian/Alaska Native 1.0%; Two or more races 1.50%; Hispanic or Latino 3.8%; White alone, not Hispanic or Latino 92.8%
- Persons under 18: 23.9%
- Persons 65 and over: 21.4%
- Language other than English spoken at home: 6%
- High school graduates or higher 87.7%
- Homeownership rate: 72.2%
- Population in poverty: 10.9%

Data from 2010 US Census

Governance

The Dickey County Health District provides services and programs under the direction of the Board of Health. The board is comprised of 7 members. The Board of Health meets quarterly and as needed.

Organizational structure

The Dickey County Health District staff consists of a team of trained health and administrative professionals. There are 4 full-time staff.

Learning culture

DCHD understands the importance of continuous learning and for our staff to be knowledgeable about general public health and program-specific information. An educated workforce will successfully provide services that enhance the health of Dickey County residents. This plan will provide a consistent and coordinated approach to ensuring that all staff are receiving training/education to assist them in their daily work and professional careers.

Funding

DCHD operating budget is \$446,769.07. The budget is comprised of local mill levy dollars, grant funding, limited federal funding, and service-generated revenue. (See Appendix A).

Workforce policies

The policies guiding workforce training and development are included in the agency's policies and procedures. The workforce development plan directly supports strategies and objectives within the strategic plan (see Appendix B). As other plans are developed (i.e. CHA/CHIP, and QI), the workforce development plan will be updated. Training needed to support implementation of these plans will be incorporated.

Workforce Profile

Introduction

This section provides a description of the DCHD’s current and anticipated future workforce needs.

Current workforce demographics

The table below summarizes the demographics of the agency’s current workforce as of May 31, 2018

Category	# or %
Total # of Employees:	4
# of FTE:	4
% Paid by Grants/Contracts:	47
Gender:	Female: 4 Male: 0
Race:	Hispanic: 0 Non-Hispanic: 4 American Indian / Alaska Native: 0 Asian: 0 African American: 0 Hawaiian: 0 Caucasian: 4 More than One Race: 0 Other: 0
Age:	< 20: 0 20 – 29: 1 30 – 39: 1 40 – 49: 0 50 – 59: 2 >60: 0
Primary Professional Disciplines/Credentials:	Leadership/Administration: 2 Nurse: 2 Registered Sanitarian/EH Specialist: # Epidemiologist: 0 Health Educator: 0 Dietician: 0 Social Workers: 0 Medical Directors: 1 Other: 0 Other: 0
Retention Rate per 5 or 10 Years; by discipline if applicable	50%
Employees < 5 Years from Retirement:	Management: 0 Non-Management: 0
Other	0
Other	0

Workforce Profile, *continued*

Future workforce Public health is an ever-changing environment, so it is difficult to accurately determine the future workforce needs for DCHD. A significant portion of the workforce will continue to be grant-dependent. In addition to maintaining currently funded programs, an effort will be made to continue to seek additional funding from local resource and grant sources to address newly identified public health issues. We do not have any current staff that are eligible for retirement. Targeted training and staff development opportunities will be implemented for agency quality improvement.

Competencies & Education Requirements

Core competencies for agency

The Health Department will utilize the Core Competencies for Public Health Professionals from the Council of Linkages to guide department-wide professional development. Annual workforce assessments will determine the priority core public health competencies to develop within the staff. Staff will assess how relevant each competency is for the entire department, the current capacity level the staff exhibit for each competency, and the value and benefit they place on the competency.

Other competencies (if needed)

Licensures and certifications held by staff are shown in the table.

CE required by discipline

Multiple public health-related disciplines require continuing education for ongoing licensing/practice. Licensures held by staff, and their associated CE requirements, are shown in the table below.

Discipline	North Dakota CE Requirements (as of 5-2018)
Nursing	12 contact hours every 2 years
Car Seat Technician	6 contact hours every 2 years

Training Needs

Introduction

This section describes both identified and mandatory training needs within the agency.

Training needs assessment results

Core Competency surveys are completed by all employees to determine the areas of strengths and weaknesses (see Appendix C).

Staff were confident in the following areas:

- Cultural Competency
- Analytical/Assessment Skills
- Financial Planning and Management Skills

Staff agreed there was room for improvement in the following areas:

- Public Health Sciences
 - Leadership and System Thinking Skills
 - Communication Skills
 - Policy Development/Program Planning Skills
 - Community Dimensions of Practice Skills
-

Agency-specific needs

Employee orientation is a requirement for all new employees of DCHD, as well as a Public Health 101 course (addressing core competencies 5A7, 6A1, 6A2, and 6A3). High importance is placed on confidentiality and performance management. See Appendix E for the New Employee Orientation Checklist.

Mandatory training

The table below lists training required by the agency and/or by state or federal mandate:

Training	Who	Frequency
New Employee Orientation	New hires	Upon hire
Public Health 101	New hires	Upon hire
HIPPA course	All staff	Annually
Independent Study (IS-100), Introduction to the Incident Command System (ICS)	All staff	Upon hire
IS-200, ICS for Single Resources and Initial Action	All staff	Upon hire
IS-700, National Incident Management System (NIMS)	All staff	Upon hire
IS-800 National Response Plan (NRP), An Introduction	All staff	Upon hire

Goals, Objectives, & Implementation Plan

Introduction This section provides information regarding training goals and objectives of the agency, as well as resources, roles, and responsibilities related to the implementation of the plan.

Roles & responsibilities The table below lists individuals responsible for the implementation of this plan as well as the associated roles and responsibilities.

Who	Roles & Responsibilities
Board of Health	Ultimately responsible for ensuring resource availability to implement the workforce development plan.
Administrator	Responsible to the Board of Health for workforce strategy, priority setting, establishment of goals and objectives, and establishing an environment that is conducive and supportive of learning. Identifies high potential employees as part of agency succession plan. Works with staff to find appropriate training/development opportunities for staff. Provides guidance to staff with coaching, mentoring and succession planning. Responsible for informing staff of workforce development needs, plans, and issues.
All Employees	Ultimately responsible for their own learning and development. Work with administration to identify and engage in training and development opportunities that meet their individual and agency-based needs. Identify opportunities to apply new learning on the job.

Goal	Objectives	Target Audience	Responsible Party
Enhance staff promotion of DCHD programs to the community.	Identify training that will enhance promotion of public health to the community. Complete identified trainings.	All Staff	Administrator Employee
Develop training programs to improve staff communication with community partners.	Identify trainings available. Complete identified trainings.	All Staff	Administrator Employee
Enhance department quality improvement.	Attend 2018 Open Forum for Quality Improvement and Innovation in Public Health. Identify additional trainings available. Complete identified trainings.	All Staff	Administrator Employee

Communication plan A hard copy will be distributed to all Board of Health members. The plan is stored in a file on the department server and accessible by all staff members. Staff will be notified of any updates to the plan through written correspondence and at staff meetings.

Dickey County Health District Curricula & Training Schedule 2018 - 2020

Introduction

This section describes the curricula and training schedule for Dickey County Health District.

Topic	Description	Target Audience	Competencies Addressed	Schedule	Resources
Continuous Quality Improvement	Three module, online introduction to CQI basics	All Staff	COL Core: 8A7, 8B7, 8C7	Complete by August 2018	https://osupublichealth.catalog.instructure.com/courses/phqi-0001
Marketing Public Health	Online training to enhance public health marketing.	All Staff	COL Core: 3A4, 3A8, 5A6, 5A9	Complete by December 2018	https://www.train.org/main/course/1067518/
Coalitions	Online training to help build effective coalitions.	All Staff	COL Core: 2A8, 5A5, 8B4, 3C3, 5C7	Complete by December 2018	https://www.train.org/main/course/1045486/
Social Media in Public Health	Seven module, online course discussing social media.	All Staff	COL Core: 3A4, 3A8, 5A6, 5A9	Complete by December 2018	https://osupublichealth.catalog.instructure.com/courses/dcph-0001
HIPPA Compliance	Mandatory training on patient confidentiality.	All Staff	Mandate COL Core: 7A3	Annually	DCHD HIPPA Compliance policy and competency (Appendix D)
Orientation	New Employee Orientation	New employees	COL Core: 7A3	Upon hire	DCHD New Employee Orientation Checklist (Appendix E)
Public Health 101	An introduction to public health and the sciences essential to public health practice.	All Staff	COL Core: 5A7, 6A1, 6A2, and 6A3	Initially/Upon hire	https://www.cdc.gov/publichealth101/public-health.html
Independent Study (IS-100)	Introduction to the Incident Command System (ICS)	All Staff	PHAB 2.3.3.4A and Mandate	Initially/Upon hire	https://training.fema.gov/is/crslist.aspx
IS-200	ICS for Single Resources and Initial Action	All Staff	PHAB 2.3.3.4A and Mandate	Initially/Upon hire	https://training.fema.gov/is/crslist.aspx

Dickey County Health District Curricula & Training Schedule 2018 - 2020

IS-700	National Incident Management System (NIMS)	All Staff	PHAB 2.3.3.4A and Mandate	Initially/Upon hire	https://training.fema.gov/is/crslist.aspx
IS-800	National Response Plan (NRP), An Introduction	All Staff	Mandate	Initially/Upon hire	https://training.fema.gov/is/crslist.aspx

Evaluation and Tracking

Introduction

Evaluation of training will provide Dickey County Health District with useful feedback regarding its efforts, including content, delivery, and training effectiveness. Accurate evaluation tracking is necessary, particularly for professional continuing education documentation and quality improvement purposes. This section describes how evaluation and tracking of training will be conducted.

Evaluation

Internal and external trainings will be evaluated using several different methods depending upon the type of training and the training provider. Surveys, evaluations, and feedback regarding the trainings will be used to measure success of the trainings. Processes will be put into place to replace ineffective trainings with sound and valid training. See Appendix F.

Tracking

The following information will be tracked for each training as appropriate:

- Meeting Title
- Date of training
- Location of training
- Training content, which could include agendas, curriculum objectives, power point presentation and training materials
- Participant name and title

See Appendix G.

Conclusion / Other Considerations

Other agency documents and plans

The workforce development plan aligns with the strategic plan in areas of improvement deemed necessary.

Review of plan

This plan will be reviewed and updated annually, with input from all DCHD staff. The administrator will maintain the plan.

Authorship

This plan was developed by the following individuals, and finalized on 5-14-18.

Printed Name & Title	Signature	Date
Roxanne Holm, Administrator		5-31-2018
Laurie Wang, Director of Nursing		5-31-2018
Amber Miller, Staff Nurse		5-31-2018
Addie Thompson, Program Project Manager		5-31-2018

Appendix A

Dickey County Health District 2017 Budget

DICKEY COUNTY
Annual Budget For The Year Ended December 31, 2018
SPECIAL REVENUE FUND

2300 HEALTH DISTRICT

3000	Revenues	2016 Actual Revenue	2017 Estimated Revenue	2018 Estimated Revenue	2018 Final Appropriation	
3110	GENERAL PROPERTY TAXES	97,752.34	98171.00			1
3120	PROPERTY TAXES-PRIOR YR	1,237.41	848.00			2
3320	TELECOMMUNICATIONS					3
3351	BANK TAX					4
3362	HOMESTEAD CREDIT	641.73	776.00	650.00		5
3364	STATE REIMBURSEMENT	22,590.00	16548.00	16,548.00		6
3370	DISABLED VETERANS	131.69	143.00	100.00		7
3371	INSURANCE REFUNDS	-	416.00			
3381	FLU IMMUNIZATIONS	95,359.76	41000.00	41,000.00		8
3383	CAR SEAT SALES	348.00	900.00	900.00		9
3385	RN SERVICES	33,787.09	32000.00	32,000.00		10
3388	IMMUNIZATIONS	69,000.00	70000.00	65,000.00		11
3389	HEALTH TRACKS	11,436.16	9500.00	7,500.00		12
3420	WIC	28,895.42	34000.00	34,000.00		13
3620	RENT		990.00	1,320.00		
3651	REFUNDS	84.00	18408.00			14
3652	GRANTS	3,176.18	31000.00	1,000.00		15
3657	TOBACCO GRANT	55,762.38	69000.00	51,000.00		16
3658	BIOTERRORISM		2283.00	2,200.00		17
3690	OTHER	1,137.17	150.00	-		18
	TOTAL REVENUES	421,339.33	426,133.00	253,218.00		19

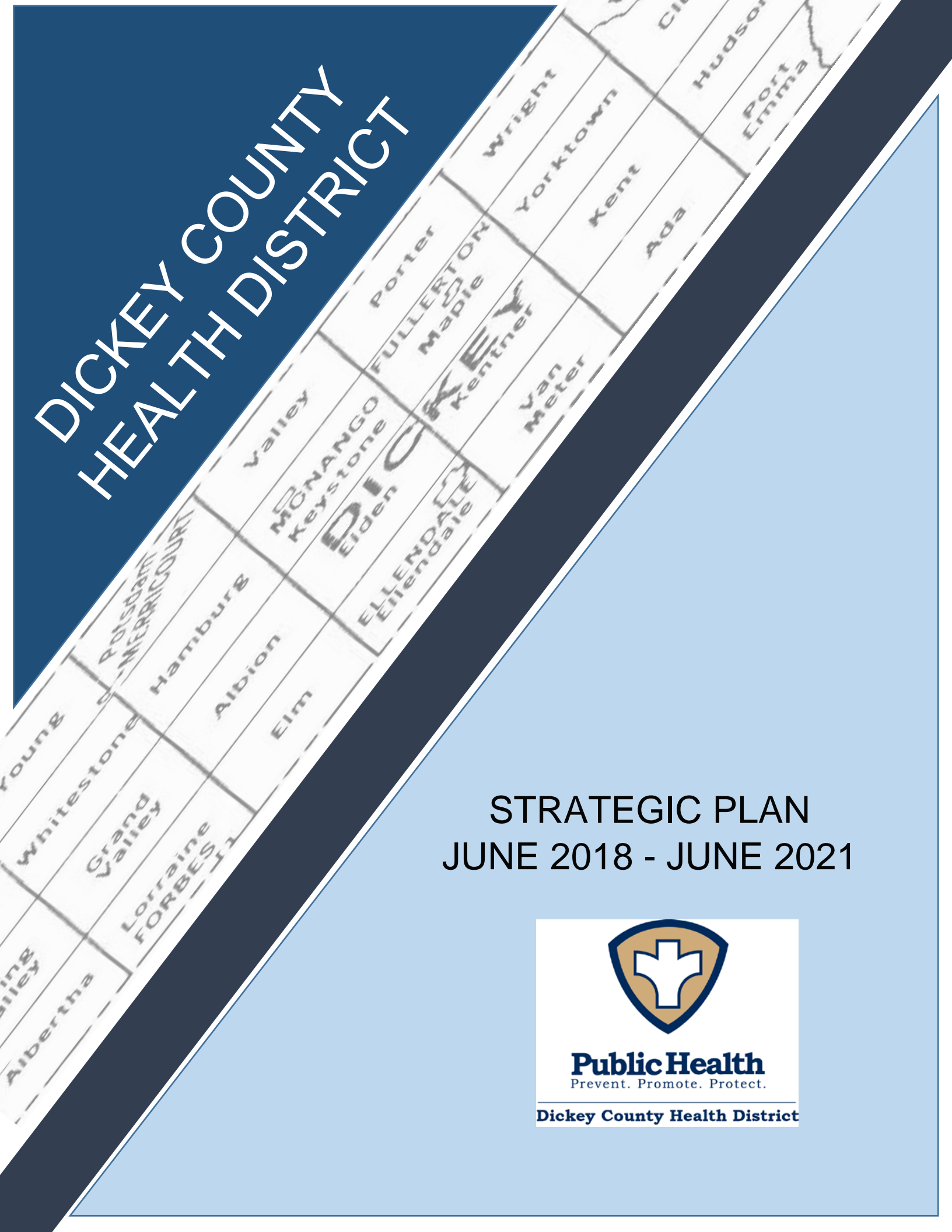
4000	Expenditures	2016 Actual Expend.	2017 Estimated Expend.	2018 Requested	2018 Final Appropriation (# To Big Sheet)	
4191-210	Group Health Insurance	46,983.64	56,979.00	59,634.00	-	20
4191-220	Matching FICA	9,915.36	11,990.00	13,039.00	-	21
4191-221	Matching Medicare	2,318.70	2,805.00	3,050.00	-	22
4191-230	Retirement	21,119.40	27,577.00	29,887.00	-	23
4191-240	Workmans Comp	1,556.21	692.00	800.00	-	24
4191-260	Life Insurance	11.76	14.00	14.00	-	25
4191-270	Flex	204.56	120.00	120.00	-	26
4191-320	Prof. Liability Insurance	665.00	665.00	700.00	-	27
4490-111	Administrative Salary	49,968.72	50,469.00	56,575.00	-	28
4490-112	(Deputy) Salary	122,489.40	142,317.00	153,009.00	-	29
4490-120	(Part-Time Sal) Board Members	660.00	600.00	720.00	-	30
4490-125	Extra Duty	-	-	-	-	31
4490-250	Unemployment	-	-	-	-	32
4490-340	Travel	11,096.57	12,000.00	14,000.00	-	33
4490-311	Audit Fees	1,000.00	650.00	650.00	-	34
4490-314	Bank Fees	32.04	-	-	-	34
4490-356	Utilities	2,377.89	3,600.00	2,800.00	-	35
4490-360	Printing & Publishing	824.80	1,000.00	1,000.00	-	36
4490-370	Dues & Memberships	395.00	650.00	650.00	-	37
4490-380	Service Contracts	3,364.50	3,365.00	3,365.00	-	38
4490-410	Office Supplies	1,938.59	2,200.00	2,200.00	-	39
4490-415	Postage	211.44	700.00	700.00	-	40
4490-418	Programs	4,410.88	5,000.00	5,000.00	-	41
4490-421	Janitor Supplies	-	-	-	-	42
4490-426	Machinery & Equipment	-	-	-	-	43
4490-430	Contract Labor	-	-	-	-	44
4490-470	Car Seats	140.00	900.00	900.00	-	45
4490-475	Nursing Supplies	3,574.84	4,000.00	5,000.00	-	46
4490-476	Vaccine	95,906.25	60,200.00	55,500.00	-	47
4490-477	Tobacco	11,595.07	8,000.00	8,000.00	-	48
4490-490	Miscellaneous	-	837.00	-	-	49
4490-621	Remodeling	115,995.18	-	-	-	50
4490-630	Improvements, No Bldg	140.00	1,000.00	1,000.00	-	51
4490-640	Office Equipment	2,040.63	2,000.00	2,000.00	-	52
4490-645	Computer	1,098.00	3,000.00	3,000.00	-	53
4490-842	Bioterrorism	895.19	1,000.00	1,000.00	-	54
4490-910	Grants	6,255.00	1,000.00	1,000.00	-	55
4493-830	WIC	27,988.96	34,000.00	34,000.00	-	56
	Total Expenditures & Appropriations	547,173.58	439,330.00	459,313.00		57
5 MILLS						58
	Revenues Over (Under) Expenditure	(125,834.25)	(13,197.00)	(206,095.00)	-	59
	Balance December 31, 2015	255,958.71	130,124.46	116,927.46	116,927.46	60
	Transfers In					61
	Transfers Out					62
	Balance December 31, 2016	130,124.46	116,927.46	(89,167.54)	116,927.46	63

THIS AMOUNT DOES NOT INCLUDE THE REQUESTED TAX LEVY

Appendix B

Dickey County Health District Strategic Plan

DICKEY COUNTY HEALTH DISTRICT



STRATEGIC PLAN JUNE 2018 - JUNE 2021



Public Health
Prevent. Promote. Protect.

Dickey County Health District

Mission Statement

Building healthy communities by protecting the people and promoting healthy lifestyles.

Vision

Working together to live healthier lives.

Values

Accountability-We hold ourselves accountable and encourage the same of our partners.

Collaboration-We value our partners and recognize our independence and interconnectedness.

Compassion-We treat everyone with dignity and respect.

Competence-We strive for excellence in all that we do.

Integrity-We adhere to high ethical and professional standards.

10 Essential Public Health Services

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

Key Stakeholders

- Board of Health
- Clients
- Clinics
- Coalition Members
- Community Members
- Elected Officials
- Emergency Management
- Employees
- Hospital
- Long Term Care Facilities
- Media
- ND Public Health Departments
- Parents of Local School-Aged Children
- Pharmacies
- Schools
- Social Services

CONTENTS

Letter from the Board of Health Chairman..... 1

Board of Health.....2

Organizational Chart.....3

Agency Overview.....4

Strategic Priorities.....5

The Strategic Planning Process.....6

SWOT Analysis.....7

Tracking our Progress.....8

Goal 1 Maintain and Explore Revenue Sources.....9

Goal 2 Increase Health Department Visibility.....10

Goal 3 Increase Collaborative Partnerships.....11

Goal 4 Promote Viable Health Programs12

Letter from Board of Health Chairman

It is my pleasure to provide you with the Dickey County Health District's Strategic Plan 2018-2020. This in-depth plan outlines the priorities that were determined in the planning process. The two-year plan provides specific goals, objectives and actions that are essential in reaching the desired outcomes for our communities.

It also includes new strategies around collaboration, communication, and community awareness. The strategic planning process helped provide a roadmap of the current issues facing the department and the communities. The plan prioritizes the efforts and aids bringing the vision to life.



Sincerely,

Joel Hamar
5-30-18

Joel Hamar

Dickey County Health District
Board of Health Chairman

The Dickey County Health District Board of Health commits itself, staff and fundamental resources to implement and accomplish the goals in the 2018-2020 Dickey County Health District Strategic Plan.

Board of Health

Joel Hamar
Chairman

Jim Billey
Vice Chairman

John Hokana
County Commissioner

Marke Roberts
County Commissioner

Thor Sand
County Commissioner

Jean Schmaltz
County Representative

Dean Simek
County Commissioner

Dr. Rup Nagala
Medical Director

Strategic Planning Members

Joel Hamar
Board of Health Chairman

Roxanne Holm
Administrator

Laurie Wang
Director of Nursing

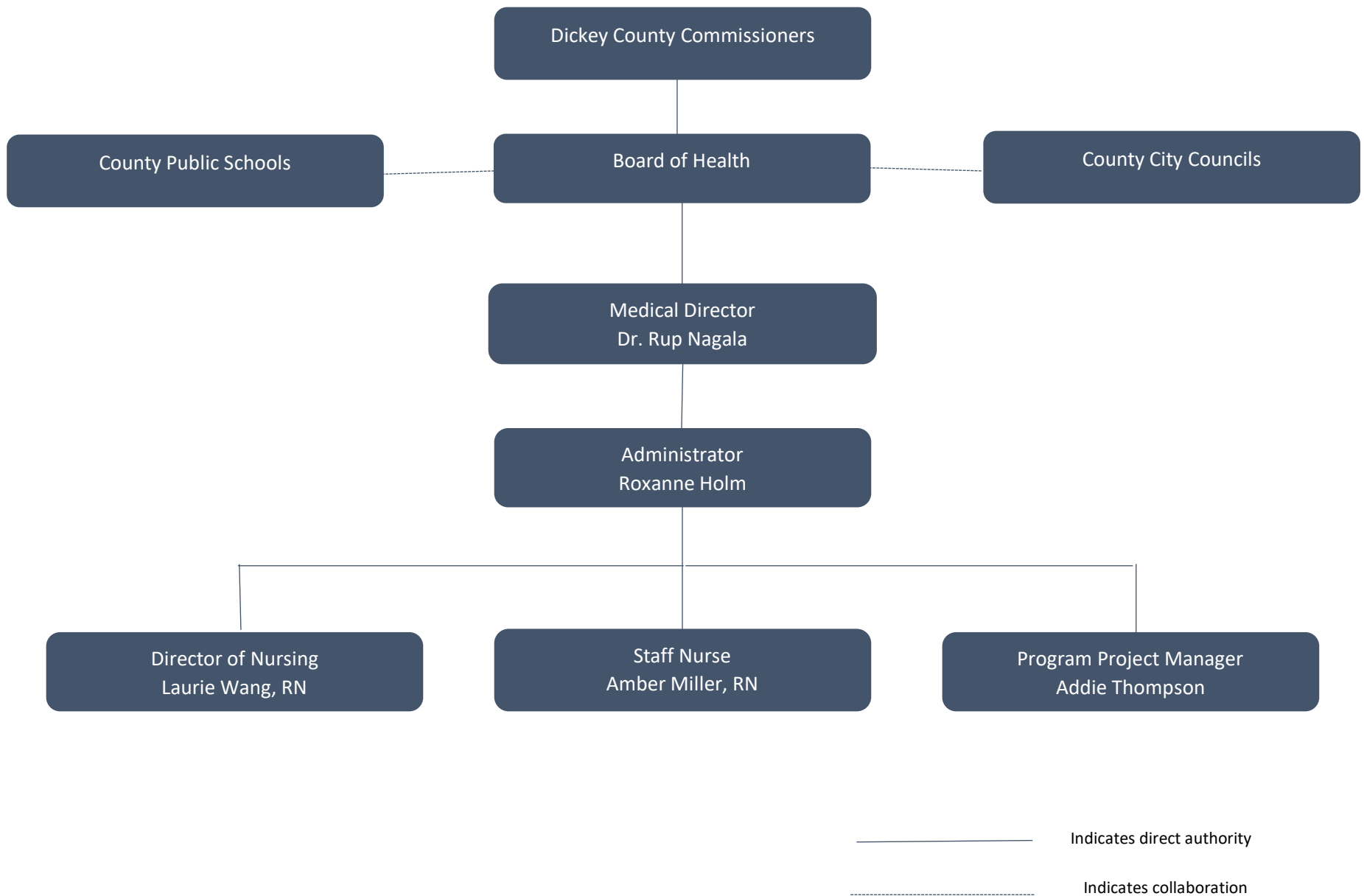
Amber Miller
Staff Nurse

Autum Thompson
Program Project Manager

Logan Wang
2018 Graduate BSN Nursing

Charles Russell
DC Emergency Management Director

Deb Tank
Aging Services Social Worker-Dickey County



Agency Overview

On September 1, 1999, Dickey County Health District (DCHD) began serving the people of Dickey County. The health unit was complete with a staff of 2, a part-time administrator and a part-time registered nurse. Dickey County was one of the last 4 counties in North Dakota that did not have a public health unit. The ND Legislature mandated that the all counties in North Dakota would have public health by 2001. The county government leaders were very pro-active and formed the health two years prior to the deadline. DCHD is located in Ellendale, North Dakota, the county seat of Dickey County. Situated in rural Southeast North Dakota, Dickey County is the home to 5064 people.

Dickey County Health District currently employs 4 full-time staff. Programs offered by DCHD include:

- Nursing Services
 - Immunizations
 - In-Home visits, medication set-up
 - Foot Care
 - Health Education Presentations
 - Health Tracks
 - Maternal/Child Visits
- School Health
- Tobacco Prevention
- Child Passenger Safety, Car Seat Safety
- Emergency Planning, in conjunction with Dickey County Emergency Management
- Community Services/Outreach (Stepping on, Diabetes Prevention Program, and Teen Impact driving)
- Women Infant & Children (WIC) supplemental nutrition, in partnership with Dickey-LaMoure WIC program
- Environmental Health, in partnership with Central Valley Health District
- Workplace Wellness

Dickey County Health District also has representation on the Dickey County Child Protection Team, Dickey-Sargent Housing Authority Board, Behavioral Health Task Force, and the Patient and Family Advocacy Council.

A Board of Health and a Medical Director govern the Dickey County Health District. The Board of Health meets quarterly and as needed.

Strategic Priorities

Our strategic priorities and goals reinforce our mission and are conducive in providing the best public health services in the Dickey County communities.

Financial Stability: In order to continue doing quality work efficiently, Dickey County Health District needs to be fiscally solvent. We rely on current mill levy, federal funding, and grants. We will capitalize on the services currently provided and on our competent staff. All staff will be aware of our financial status.

Increase Knowledge of Public Health in Our Communities: An educated, well-informed community is essential to a successful health department. We will use our communication outreach efforts and branding strategy to increase the knowledge of public health in our communities.

Practice Collaborative Partnerships: Collaboration allows us to strengthen our involvement in local partnerships and expand our individual and collective knowledge of current issues within our community. We can work together to find solutions to these issues.

Promote Viable Health Programs: By collaboration with key stakeholders, Dickey County Health District will raise awareness of programs offered to address and evaluate the current and future needs of our communities.

The Strategic Planning Process

Laying the Groundwork for Strategic Planning:

A decision to go ahead with the strategic plan was made when Dickey County Health District (DCHD) was notified of the health unit's selection of the ASI award on September 29, 2017. The DCHD administrator and program project manager established an overview of the strategic planning process and a timeline for the project.

A strategic planning committee was formed after careful consideration at an all staff meeting to determine key stakeholders. All staff completed training on MAPP, Strategic Planning and Opportunities for Hospital, and Local Health Department Collaboration for Community Health Assessment and Improvement Planning on the NACCHO website. Leadership also completed Conducting a Local Health Department Strategic Planning Process that was available on the NACCHO website.

The fiscal and administrative management collected available data. Data reviewed included detailed history of budgets, grants, funding, program participation numbers and census data.

A draft timeline was put into place to complete the strategic plan.

Monthly meetings were held over a period of 6 months.

Developing Mission, Vision and Values Statements:

The planning committee met several times to discuss mission, value, and vision statements. The statements were introduced and defined. The work that DCHD does and the programs that exist were analyzed. Extensive discussion was held on the future of the health unit and sustainability.

Compiling Relevant Information:

A SWOT Analysis was conducted and internal strengths and weaknesses were identified. External opportunities and threats were also identified during this process.

Analyzing Results and Selecting Strategic Priorities:

The data collected was reviewed and the top strategic issues were identified. These issues will be included in the strategic plan.

Developing the Strategic Plan:

Plans to address the priorities were developed and the strategies formed. General goals and SMART objectives defined and assigned to appropriate staff.

SWOT Analysis

Below is a detailed SWOT Analysis of the internal and external factors that affect Dickey County Health District.

Strengths	Weaknesses
Immunization practices Dedicated, competent, compassionate, and professional staff Communication efforts Collaborative efforts Community partnerships Partnership with Central Valley Health District Environmental Health Division Strong fiscal and administrative management Continuous quality improvement	Reliance on grant funding Revenue Money not always tied to outcomes Lack of CHA/CHIP Lack of time during peak times of the year Efficiency efforts
Opportunities	Threats
Partnership with local hospital for CHA/CHIP CHA/CHIP process could eliminate multiple providers offering same services Local partnership with key stakeholders to host educational community events: Bike Rodeo, Car Seat Check-up, Teen Impact Driving	Stigma that Public Health services are “free” Stigma that Public Health is “only for welfare” Public awareness of services provided Multiple providers offering same services Federal Funding-Medicaid, MCH

Tracking our Progress

The Strategic Plan will be reviewed annually by the strategic planning team and the Board of Health. All updates will be noted with reasons for any adjustments made.

Date of Review	Goal Change	Objective Changed	Reason for change

Financial Stability: In order to continue doing quality work efficiently, Dickey County Health District needs to be fiscally solvent. We rely on current mill levy, federal funding, and grants. We will capitalize on the services currently being provided and on our competent staff. All staff will be aware of our financial status. (Will link to CHA and QI Plans when complete)

Goal: Maintain and Explore Revenue Sources

Objectives	Measures	Action Steps	Time Frame	Person Responsible	Status
Objective 1: By December 31, 2020, increase Dickey County Health District revenue by 5%.	Baseline: 435,529.00 (2017) Target: 457,306.00 (2020)	<ul style="list-style-type: none"> Educate staff on billable services Educate staff on CPT coding Negotiate individual contracts with insurance companies Review current services offered to ensure maximum reimbursement Review and update fees annually 	Start: 7/1/2017 End: 12/31/2020	All staff	

Notes:

<p>Increase Knowledge of Public Health in our communities: An educated, well-informed community is essential to a successful health department. We will use our communication outreach efforts and branding strategy to increase the knowledge of public health in our communities.</p>					
<p>Goal: Increase Health Department Visibility</p>					
<p> </p>					
Objectives	Measures	Action Steps	Time Frame	Person Responsible	Status
<p>Objective 1: By December 31, 2020, DCHD will consistently post 10-12 times a month to Social Media.</p>	<p>Baseline: 3 posts per month Target: 10-12 posts per month</p>	<ul style="list-style-type: none"> Evaluate # reached Conduct staff education Collaborate with regional partners 	<p>Start: 7/1/2018 End: 12/31/2020</p>	<p>All Staff</p>	<p> </p>
<p>Objective 2: By December 31, 2020, DCHD will develop and distribute quarterly publications to county residents.</p>	<p>Baseline: 0 Target: 1000</p>	<ul style="list-style-type: none"> Develop newsletter template Conduct staff meetings to determine newsletter content Track number of newsletters distributed 	<p>Start: 7/1/2018 End:12/31/2018</p>	<p>All Staff</p>	<p> </p>

<p>Objective 3: By December 31, 2020, DCHD will create an organizational branding strategy.</p>	<p>Baseline: 0 Target: 1 Branding Strategy</p>	<ul style="list-style-type: none"> • Communicate DCHD brand to specific stakeholders • Review branding strategy annually • Enhance current website, traditional, and social media to include DCHD brand • All DCHD communications will include brand 	<p>Start:7/1/2018 End:12/31/2018</p>	<p>All Staff</p>	
<p>Notes:</p>					

<p>Practice Collaborative Partnerships: Collaboration allows us to strengthen our involvement in local partnerships and expand our individual and collective knowledge of current issues within our community. We can work together to find solutions to these issues.</p>																	
<p>Goal: Increase Collaborative Partnerships</p>																	
<table border="1"> <thead> <tr> <th>Objectives</th> <th>Measures</th> <th>Action Steps</th> <th>Time Frame</th> <th>Person Responsible</th> <th>Status</th> </tr> </thead> <tbody> <tr> <td> <p>Objective 1: By December 21, 2020, DCHD will increase participation in community activities by 75%.</p> </td> <td> <p>Baseline: 4 events Target: 7 events</p> </td> <td> <ul style="list-style-type: none"> • Host a car seat checkup with collaborative partners • Organize a bike rodeo in collaboration with local law enforcement • Present Health education at Senior Citizen Centers to community members • Collaborate with local schools & extension service(NDSU) to present Impact Teen Driving program </td> <td> <p>Start: 7/1/2018 End: 12/31/2018</p> </td> <td> <p>All Staff</p> </td> <td></td> </tr> </tbody> </table>						Objectives	Measures	Action Steps	Time Frame	Person Responsible	Status	<p>Objective 1: By December 21, 2020, DCHD will increase participation in community activities by 75%.</p>	<p>Baseline: 4 events Target: 7 events</p>	<ul style="list-style-type: none"> • Host a car seat checkup with collaborative partners • Organize a bike rodeo in collaboration with local law enforcement • Present Health education at Senior Citizen Centers to community members • Collaborate with local schools & extension service(NDSU) to present Impact Teen Driving program 	<p>Start: 7/1/2018 End: 12/31/2018</p>	<p>All Staff</p>	
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<p>Objective 2: By December 31, 2020, DCHD will increase collaboration partnerships by 50%.</p>	<p>Baseline: 2 Target: 3</p>	<ul style="list-style-type: none"> • Partner with local hospital to conduct CHA and CHIP • Team with regional partners to sustain an effective septic system installation program • Collaborate with local schools to increase health education & services • Partner with local medical clinics to increase patient referrals & services 	<p>Start: 7/1/2018 End: 12/31/2018</p>	<p>All Staff</p>	
<p>Notes:</p>					

<p>Promote viable public health programs: By collaboration with key stakeholders, DCHD will raise awareness of current programs offered to address the current and future needs of our communities.</p>					
<p>Goal: Increase Public Health Services provided.</p>					
Objectives	Measures	Action Steps	Time Frame	Person Responsible	Status
<p>Objective 1: By December 31, 2020, DCHD will increase communications with medical providers to promote and sustain programs.</p>	<p>Baseline: 10% Target: 100%</p>	<ul style="list-style-type: none"> • Provide materials • Partner with medical providers to increase patient referrals & services • Conduct meetings with appropriate key stakeholders. • Evaluate impact 	<p>Start: 7/1/2018 End: 12/31/2018</p>	<p>All Staff</p>	
<p>Objective 2: By December 31, 2020, DCHD will increase programs within local schools.</p>	<p>Baseline: 4 Target: 6</p>	<ul style="list-style-type: none"> • Provide educational materials • Develop new programs 	<p>Start: 7/1/2018 End: 12/31/2018</p>	<p>All Staff</p>	

<p>Objective 3: By December 31, 2020, DCHD will increase communication with the local business communities to promote programs.</p>	<p>Baseline: 5 Target: 8</p>	<ul style="list-style-type: none"> • Contact businesses • Conduct face-to-face meetings 	<p>Start: 7/1/2018 End: 12/31/2018</p>	<p>All Staff</p>	
<p>Notes:</p>					

Appendix C

Dickey County Health District Core Competency Survey

2018 DCHD Core Competency Survey

1=Strongly disagree; 2=Disagree; 3= Neutral; 4= Agree; 5= Strongly Agree

Analytical/Assessment Skills

1. I can collect valid and reliable quantitative and qualitative data and use appropriately in organizational plans and operations.
1 2 3 4 5
2. I can identify assets and resources that can be used to improve the health of the communities.
1 2 3 4 5

Policy Development/Program Planning Skills

1. I understand the importance of evaluations to improve policies, programs, and services.
1 2 3 4 5
2. I am confident in applying strategies for continuous quality improvement.
1 2 3 4 5

Communication Skills

1. I am satisfied with communication efforts among individuals, groups, and organizations.
1 2 3 4 5
2. I can select pertinent public health information and disseminate appropriately (social media, newspapers, newsletters).
1 2 3 4 5

Cultural Competency Skills

1. I can describe the concept of diversity as it applies to individuals and populations.
1 2 3 4 5
2. I can describe the diversity of individuals and populations in a community.
1 2 3 4 5

Community Dimensions of Practice Skills

1. The public is aware of the policies, programs, and resources that improve health in a community.

1 2 3 4 5

2. Community relationships are needed to improve health in a community.

1 2 3 4 5

Public Health Sciences Skills

1. I can describe prominent events in the history of public health.

1 2 3 4 5

2. Public health sciences are applied in the delivery of the 10 Essential Public Health Services.

1 2 3 4 5

Financial Planning and Management Skills

1. I am aware of the current financial situation of our organization.

1 2 3 4 5

2. I understand the management of programs to fit the organizational budget.

1 2 3 4 5

Leadership and System Thinking Skills

1. I understand organizations can work together or individually to impact the health of a community.

1 2 3 4 5

2. I can collaborate with others to develop a vision for a health community.

1 2 3 4 5

Appendix D

Dickey County Health District HIPPA Compliance Policy and Competency



Dickey County Health District

Ellendale, ND

POLICY: HIPAA Compliance for Professionals

Policy adopted from the US Department of Health and Human Services, HIPAA for Professionals (<https://www.hhs.gov/hipaa/for-professionals/index.html>).

Policy reviewed yearly.

All staff must complete yearly competency.

Dickey County Health District HIPAA Annual Competency

1. According to the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA), if a patient asks for a copy of laboratory test results, the healthcare provider must respond:
 - A. Without charging a fee
 - B. By asking how the patient intends to use it
 - C. Via unsecure email if asked to do so
 - D. Within 10 days

2. Under HIPAA, which one of the following types of information is excluded from the patient's right to access?
 - A. Records more than 2 years old
 - B. Payment records
 - C. Psychotherapy notes
 - D. X-rays

3. A patient has the right to direct a health care provider's office to send protected health information (PHI) to a third party, UNLESS:
 - A. The patient fails to give a signed written request
 - B. The patient has not paid their bill in full
 - C. The third party directly competes with the patient's current physician
 - D. The third party is a mobile health application of unproven efficacy

4. When a patient wants a copy of their PHI:
 - A. The patient must make their request by mail
 - B. The patient must make their request in person
 - C. The provider must verify their identity
 - D. The provider must provide an online request form

Appendix E

Dickey County Health District New Employee Orientation Checklist

DICKEY COUNTY HEALTH DISTRICT

Orientation Checklist

Name of Employee: _____ Date: _____

Employee Initials		Person Responsible	DCHD Documentation
Administration			
	County Employee Manual – Review and access	Administrator	
	Confidentiality Oath– Review and sign	Administrator	
	Emergency Protocols	Administrator	
	Employee Email Address	Administrator	
	Job Description – Review and Access	Administrator	
	Organization Structure	Administrator	
	Performance Review	Administrator	
	Probationary period	Administrator	
	Wage	Administrator	
	PH laws for North Dakota	Administrator	
Finance/Human Resources			
	Completed Employee Personnel File		
	<ul style="list-style-type: none"> • Employee Number Issued 	Auditor	
	<ul style="list-style-type: none"> • Driver's License and Social Security Card or Birth Certificate 	Auditor	
	<ul style="list-style-type: none"> • License Verification – if applicable 	Administrator	
	<ul style="list-style-type: none"> • Application 	Administrator	
	<ul style="list-style-type: none"> • Interview Forms 	Administrator	
	<ul style="list-style-type: none"> • Orientation Checklist 	Administrator	
	Form W-4	Auditor	
	Form I-9	Auditor	
	Payroll Direct Deposit Authorization Form & deposit ticket	Auditor	
	Wage Deduction Authorization Agreement	Auditor	
	Key Issued and Instructions Given	Administrator	
	Time Sheet/Pay Periods	Administrator	
	Benefits	Administrator/Auditor	
	Badge Issued to Employee	Administrator/Emergency Management	

DICKEY COUNTY HEALTH DISTRICT

	PERS Kit Completed	Administrator	
	Send information to PERS & Enter Employee in NDPERS ESS System	Auditor	
General Orientation			
	Employee Desk	Administrator	
	Introduction of Staff	Administrator	
	Office Hours/Employee Hours	Administrator	
	Office Machines: <ul style="list-style-type: none"> • Fax • Copier • Telephones • Computers 	Administrator	
	Tour of facility: general tour including back storage area, supply rooms, break room, exits, and lab areas	Administrator	
	Weekly Staff Meeting	Administrator	
Program Specific Orientation			
	Program Policies and Procedures	Administrator	
	Forms	Administrator	

Employee Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____

Administrator Signature: _____ Date: _____

Appendix F

Dickey County Health District Training Evaluation Sheet

Training Evaluation Form

OBJECTIVES: (will be specific to each course within the program) As a result of this course I am able to:

CHOOSE AN ITEM

Instructions: Circle the number that best reflects each evaluation statement and whether the objective was met.	1 – strongly disagree	2- disagree	3 - neutral	4- agree	5- strongly agree
1.	1	2	3	4	5
2. _____	1	2	3	4	5
3.	1	2	3	4	6
4.	1	2	3	4	5
5. _____	1	2	3	4	5
6. The course is relevant to my work.			<input type="checkbox"/> <input type="checkbox"/>		
7. I am committed to applying what I have learned to my job.					
8. The level of the course met my needs.					
9. The supplemental materials/resources were appropriate.					
10. My questions were adequately resolved.					

11. The overall quality of the course was very high.					
12. How did you hear about this course?					

Additional Comments:

INSTRUCTOR(S):

TECHNOLOGY:

FACILITY:

Appendix G

Dickey County Health District Training Sign-In Sheet

Appendix E: Training Sign In



Meeting Sign-In Sheet

Meeting Title: _____

Instructor: _____

Time: _____

Meeting Location: _____

Email: _____

Print Name	Organization	Title	Phone	Email
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				