



Northeast Colorado Health Department Strategic Plan 2017-2021

Serving the counties of
Logan, Morgan, Phillips, Sedgwick, Washington and Yuma

www.NCHD.org

November 2016

*Prepared by Silver Street Consulting, LLC
Edwards, CO*



700 Columbine St., Sterling, CO 80751 - (970) 522-3741 – (877) 795-0646 - www.nchd.org

November 2016

Dear Reader:

The Northeast Colorado Health Department (NCHD) is proud to present a five-year (2017-2021) strategic plan for the organization. This plan was formulated by taking an introspective look at our public health agency, with input from employees, community partners and the local board of health. We examined the current state of affairs, and envisioned future opportunities in the context of the agency's vision: Protecting health; inspiring prevention.

We believe the organization is positioned for continued success, and this plan focuses on preparation for national accreditation from the Public Health Accreditation Board. Going through the accreditation process helps organizations implement best practices in the public health field, and ultimately increases quality and performance. Important aspects of accreditation included in this strategic plan are: 1) performing our routine community health assessment, then developing a public health improvement plan, 2) creating systems for ongoing workforce development, and 3) developing and implementing a formal quality improvement plan.

In addition, the strategic plan includes new strategies around communication and community outreach, particularly focusing on outlying rural areas. Progress on the plan will be reported to the community in the health department's annual report.

Thank you for taking a look at this strategic plan. The plan will contribute to our larger mission of promoting healthy communities and protecting the environment, through leadership, expertise and collaboration.

Sincerely,

A handwritten signature in blue ink, appearing to read "Tony Cappello".

Tony Cappello, PhD, MPH

Table of Contents

Strategic Plan 2017-2021: At A Glance	4
Overview of the Northeast Colorado Health Department and District	5
Health Department Organization and Services	
Strategic Planning Process	8
Assessment	8
Vision, Mission, and Values Review	9
Strategic Priority and Goal Setting	9
Action Planning	10
Monitoring and Reporting	10
Action Plans	11
Strategic Priorities:	
Create Targeted Communication and Outreach Strategies	11
Complete and Implement a Five-year Public Health Improvement Plan ...	13
Create and Implement a Quality Improvement Plan	14
Create and Implement a Workforce Development Plan	15
Attachments	
A. Strategic Planning Participant List	16
B. PHAB Requirements Check List	18



NCHD main office in Sterling: Photo courtesy of the Northeast Colorado Health Department



Strategic Plan 2017-2021: At A Glance

The Northeast Colorado Health Department (NCHD) serves six rural and frontier counties in the northeast corner of the state, on the Kansas/Nebraska border, including: Logan, Morgan, Phillips, Sedgwick, Washington, and Yuma. An eight-member board of health and executive director govern the department. Staffing includes 45 employees, housed in six offices, with headquarters located in the town of Sterling. Main industries of the area include: agriculture, energy, corrections and local government.

The **Vision** of the department is "Protecting health; inspiring prevention." The **Mission Statement** reads: "We are a rural public health department promoting healthy communities and protecting the environment through leadership, expertise and collaboration."

The **Core Values** of the organization include: Professionalism • Leadership • Integrity • Dedication • Accountability • Compassion

The department also follows a **Statement of Values Underlying Public Health Practice**:

"As members of the public health community -administrative, nursing and environmental staff- we recognize the unique responsibilities associated with this role. We commit ourselves to the high standards of professionalism and expertise required to achieve community health and to ensure that the basic resources and conditions necessary for health are accessible to all members of the community.

We recognize that the effective promotion of the public's health depends heavily on the public's trust. Integrity, ethics, accountability and compassion are essential to building and maintaining this trust.

As public health professionals, we value leadership, dedication, collaboration and respect for the contributions of individual members and community partnerships.

Health is a fundamental right of every human being. We pledge to improve and protect the health of all populations through prevention and education to empower individuals to make sound health decisions."

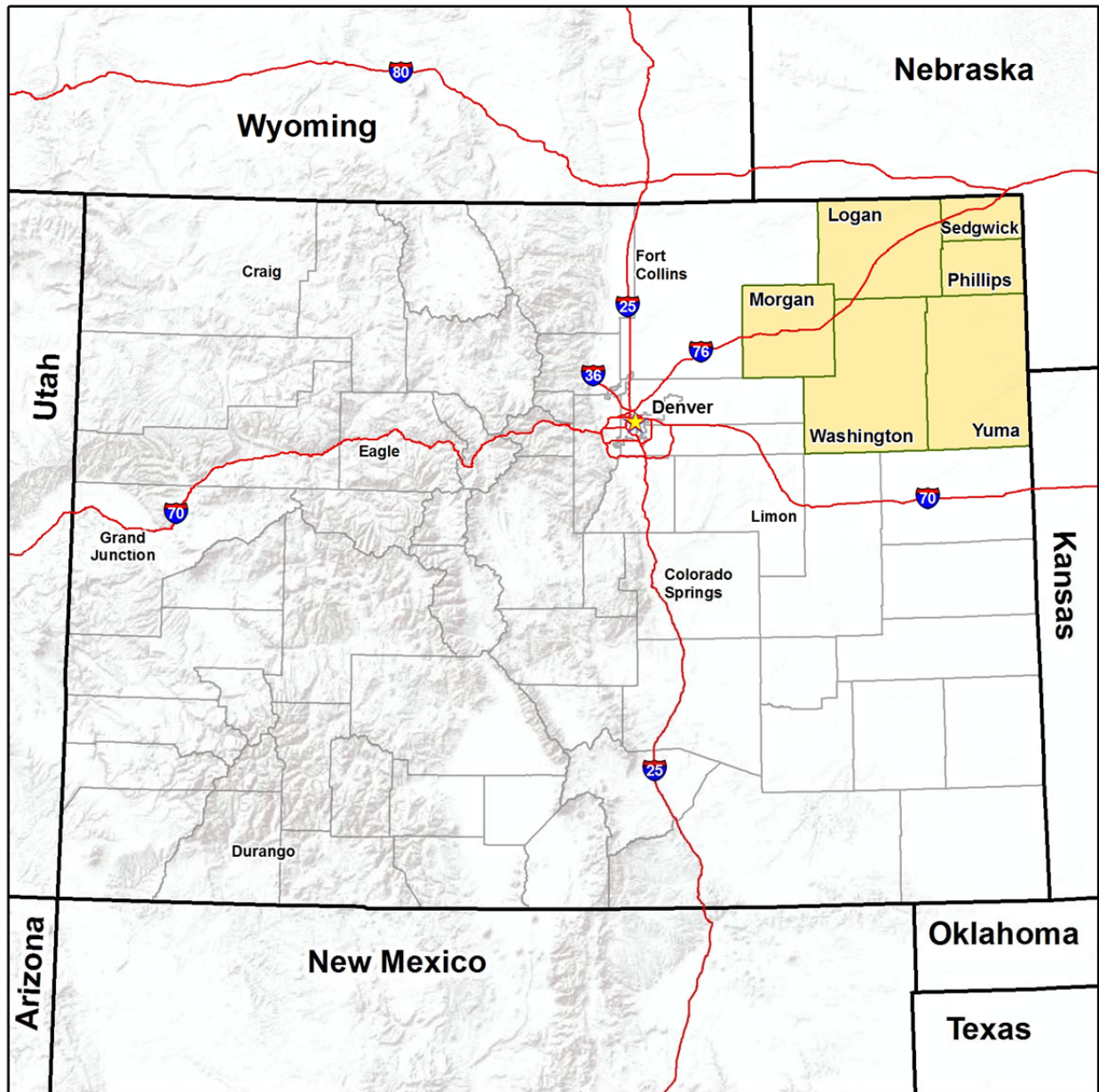
NCHD has chosen four, five-year **Strategic Priorities** and associated **Goals**. **These were** developed through this planning process are provided below. They focus on enhancing communication, and meeting the requirements of national public health accreditation:

- 1) Create Targeted Communication and Outreach Strategies
Goals: Strategically market programs to specific audiences; have a presence in smaller communities; improve internal communication.
- 2) Complete and Implement a Five-year Public Health Improvement Plan
Goals: Conduct a community health assessment; develop a five-year public health improvement plan; establish a progress tracking/reporting system; implement and evaluate the plan.
- 3) Create and Implement a Quality Improvement Plan
Goals: Develop a plan to create a culture of quality improvement at NCHD; implement and evaluate the plan.
- 4) Create and Implement a Workforce Development Plan
Goals: Develop a plan for workforce sustainability, considering retention strategies, plus the necessary capacity and expertise; implement and evaluate the plan.

Overview of the Northeast Colorado Health Department Region

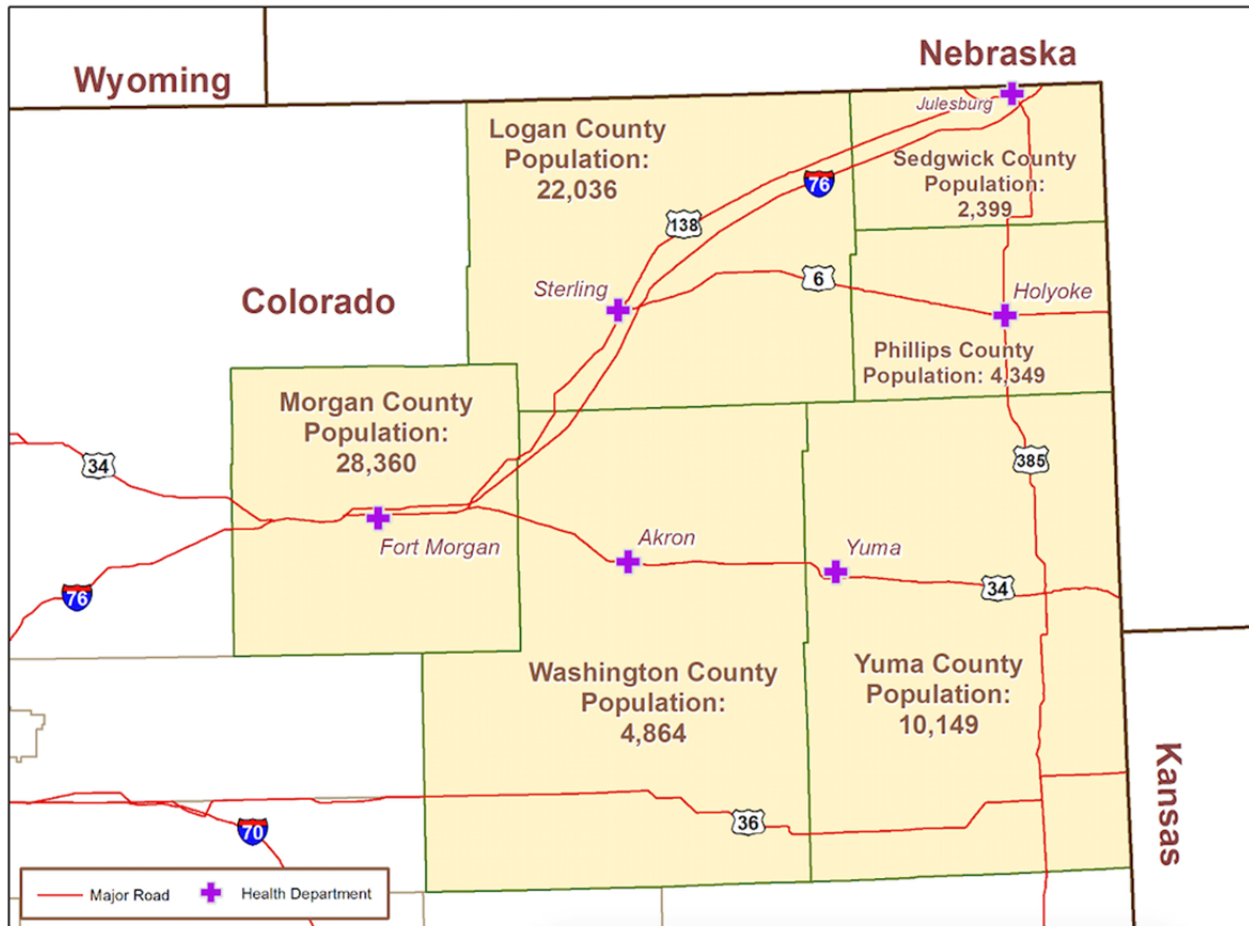
The Northeast Colorado Health Department (NCHD) has been in existence since 1948, and covers six counties on the Eastern Plains of Colorado including: Logan, Morgan, Phillips, Sedgwick, Washington, and Yuma. NCHD is the largest public health regional department in the state, spanning 9,200 square miles, with a mix of both rural and frontier communities (defined as a population density of six or less people per square mile). Service provision is a challenge, given the long distances between population centers. Some areas lack broadband and cellular phone coverage, further hampering communication (Figure 1).

Figure 1: Counties served by the Northeast Colorado Health Department



The Northeast Colorado Health Department serves a population of 72,154. The department has offices in all six counties. The main office is located in Sterling, with satellite offices in the towns of Ft. Morgan, Yuma, Julesburg, Holyoke, and Akron (Figure 2). Ft. Morgan is the closest population center to Denver, situated approximately 90 miles northeast of the state capitol.

Figure 2: Counties Served by the Northeast Colorado Health Department, County Populations, and NCHD Office Locations



The local economy is based on agriculture, including farming, ranching, and related industries. One of the region's larger towns, Ft. Morgan, is home to a Cargill meatpacking plant, a Leprino Foods cheese factory, and a Dairy Farmers of America milk-processing facility. The energy industry in the form of wind farms, and oil and gas production is also present in northeast Colorado. The Sterling Correctional Facility, located in Logan County, is the largest prison in Colorado's system. Many employment opportunities also exist through local government. Ft. Morgan, for example, owns and operates several local utilities, in addition to providing standard municipal services.

County populations range from 2,399 in Yuma County to 28,360 in Morgan County. Washington, Yuma and Sedgwick counties are considered frontier areas with less than six people per square mile. The six counties have a lower median income than the state as a whole, ranging between \$41,749 and \$46,223, compared to Colorado at \$59,488. The poverty rate is highest in Logan

County at 17.7 percent of residents, compared to Colorado at 11.5 percent. At least three languages other than English are spoken among residents, with Spanish being the most common, potentially resulting in linguistic isolation. Figure 3 displays geographic, demographic and economic indicators for the region.^{1 2}

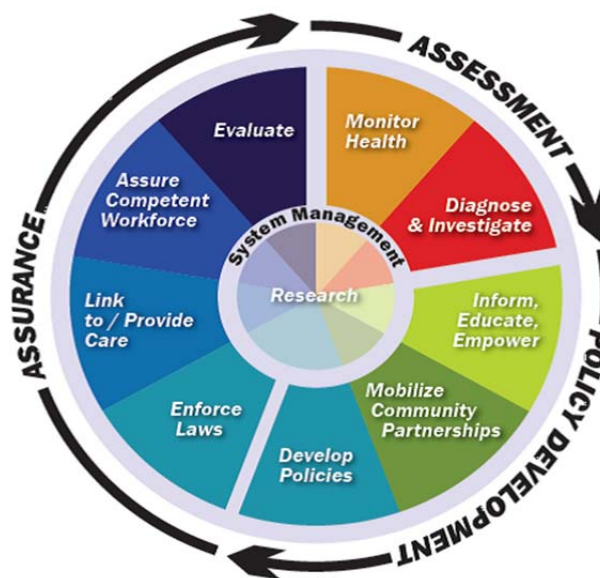
Figure 3. Social and Economic Indicators, and Demographics for Counties Served by the Northeast Colorado Health Department, 2015

	Population	Median Income	% Living in Poverty	% Latino	% Foreign Born	Pop/Sq. Mile
Colorado	5,456,574	\$59,488	11.5%	21.3%	9.8%	48.5
Morgan	28,360	\$46,223	13.4%	35.5%	12.4%	22.0
Logan	22,036	\$41,749	17.7%	15.8%	6.6%	12.4
Yuma	10,146	\$43,279	14.0%	22.1%	8.8%	4.2
Phillips	4,349	\$44,390	11.5%	21.6%	13.0%	6.5
Washington	4,864	\$44,271	11.4%	9.4%	3.3%	1.9
Sedgwick	2,399	\$43,864	13.9%	15.6%	3.4%	4.3

Organizational Structure and Services

The Northeast Colorado Health Department promotes health and wellness for the entire community by monitoring the health of the population, promoting healthy behaviors, preventing injuries and the spread of disease, protecting against environmental hazards, responding to disease outbreaks and disasters, and promoting access to quality health care services. The department performs its work in the context of the Centers for Disease Control and Prevention’s Core Functions (Assessment, Policy Development and Assurance), and Ten Essential Public Health Services (Figure 4). NCHD is an integral part of a larger local, regional, and state public health system at work to keep residents safe and healthy. The Centers for Disease Control and Prevention defines this system as “all public, private, and voluntary entities that contribute to the delivery of essential public health services within a jurisdiction.”

Figure 4. The Public Health Field’s Core Functions and Ten Essential Services



NCHD’s organizational structure is unique, as the department does not fall under a local county government, which is a common health department model in Colorado. Instead, it is a self-contained, stand-alone agency, able to fulfill its own human resources, legal, information

¹ State and County Quick Facts 2015, US Census Bureau

² Northeast Colorado Health Department, 2013 Public Health Improvement Plan

technology, and accounting needs. A board of health governs the department, with representation from all six counties and the two largest population centers: Ft. Morgan and Sterling. County commissioners fill the county board of health seats. The department is organized into three divisions: Nursing, Administration and Environmental Health. Nursing has three sections: Public Health Nursing, Health Promotion and Wellness, and Prevention Services. Four generations work for the department. Some employees have been at the agency for decades, while others are new. The organization has gone through major changes over the past four years, including a change in leadership at the executive director level, a re-organization, and re-branding.

Strategic Planning Process

The purpose of NCHD's five-year strategic planning process is to:

- 1) Assess strengths, challenges, opportunities and threats (SCOT analysis), within the organization, the public health field, and the community.
- 2) Identify trends and prepare for the future.
- 3) Meet the requirements of PHAB, in anticipation of going through the national accreditation process.

The strategic planning process has five phases as described below: 1) Assessment, 2) Mission, Vision and Values Review, 3) Strategic Priority and Goal Setting, 4) Action Planning, 5) Monitoring and Reporting. Attachment A provides a list of strategic planning participants and activities.

Assessment

During the Assessment phase, an environmental scan was performed (including a Strengths, Challenges, Opportunities and Threats or "SCOT Analysis"). This began with an interview of the department's executive director, and included a focus group with lead staff. An audience-targeted survey was also provided to all department employees, community partners, and the local board of health. The environmental scan identified themes that were then used to develop strategic priorities and corresponding goals. Highlights of the assessment include:

Strengths:

- Mission-driven services
- Family-friendly services
- Community partnerships
- County commissioners' commitment to the organization
- Employee professionalism and commitment
- Recent re-branding and re-organization
- Grant writing capacity and \$1 million in new grant funds over four years
- Employment benefits and the work environment

Challenges:

- Covering an area the size of Vermont (9,200 square miles)
- Creating employee cohesiveness, given so many sites; internal communication
- Identifying new and relevant funding sources to prevent "chasing the money"
- Limited cellular coverage & slow dial-up connections hamper communication
- Unfamiliar processes for billing insurance companies under the Affordable Care Act; may need additional expertise
- Less funding for clinical services available due to Affordable Care Act; future role of public health unclear
- Effectively serving vulnerable populations including people with disabilities; the homebound, uninsured and linguistically isolated residents; children; seniors/elderly

Opportunities:

- Communicating our great work to the community
- Sustaining the department's transformation
- Increasing healthy eating/active living in the community
- Providing additional outreach to outlying areas
- Having four generations at work
- Building bridges with the community
- Creating a formal orientation for new commissioners
- Increasing department transparency and communication with the public

Threats:

- Drug and alcohol abuse within the community
- Implications of the Affordable Care Act are still unknown
- Obesity in the population
- Regulatory uncertainty
- Economic uncertainty
- Undocumented residents lacking health insurance coverage
- Number of medically underserved residents increasing as premiums go up; insurance becoming less affordable
- Lack of specialty providers; long wait times to be seen; long distances to emergency care
- Emerging infections

Vision, Mission, and Values

NCHD's vision, mission, and core values were reviewed during the strategic planning process. These still resonate with the organization, and will stay the same. They are as follows:

- Vision: "Protecting health; inspiring prevention."
- Mission Statement: "We are a rural public health department promoting healthy communities and protecting the environment through leadership, expertise and collaboration."
- Core Values: Professionalism • Leadership • Integrity • Dedication • Accountability • Compassion

Strategic Priorities and Goals

Results from the environmental scan were presented at a half-day planning retreat, attended by lead health department staff. The goal of the retreat was to consider the results, then develop strategic priorities and respective goals. These emerged as the following:

1. Create Targeted Communication and Outreach Strategies
Goals: Strategically market health department programs to specific audiences; have a presence in smaller communities; improve internal communications.
2. Complete and Implement a Five-year Public Health Improvement Plan
Goals: Conduct a community health assessment; develop a five-year public health improvement plan; establish a tracking/reporting system; implement and evaluate the plan.
3. Create and Implement a Quality Improvement Plan
Goals: Develop a plan to create a culture of quality improvement at NCHD; implement and evaluate the plan.
4. Create and Implement a Workforce Development Plan
Goals: Develop a plan for workforce sustainability, considering retention strategies, plus the necessary capacity and expertise; implement and evaluate the plan.

Action Planning

Action plans are the roadmap to strategic plan implementation, as they contain the specifics for addressing each strategic priority. At the strategic planning retreat, action-planning teams were created, and a lead staff member identified. Team members consist of health department staff with relevant expertise. The action teams developed goals to meet the strategic priorities, and then identified objectives, strategies, major tasks, timelines, a monitoring plan, and the person or persons responsible. Action plans for each strategic priority are provided in the next section. Teams will re-write each action plan annually, based on progress and available resources.

Monitoring and Reporting

The NCHD's board of health will adopt this five-year strategic plan in 2016, prior to plan implementation. Beginning in 2017, action teams will meet bimonthly to check in on the action plans, track the completion of major tasks, and make mid-course corrections. Progress toward meeting the strategic priorities, goals and objectives will be reported to the board of health once a year, as well as community members in the department's annual report. Action planning will occur on an annual basis, over the course of the five-year strategic plan.



Eastern Plains: Photo courtesy of the Northeast Colorado Health Department

Northeast Colorado Health Department (NCHD) ACTION PLAN				Lead: Jessa Hatch, Public Information Officer	
STRATEGIC PRIORITY: <i>Create Targeted Communication and Outreach Strategies</i>				TEAM Members: Trish McClain, Tony Cappello, Aaron Glassburn, Sherri Yahn, Jessica Lundgren	
GOAL 1: Strategically market NCHD's programs to the public, community partners, and elected officials.					
Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Improve external communication by targeting three specific audiences with a market-focused approach	Strategic and targeted marketing to the board of health, partners, and the community to increase education and transparency	-Develop a coordinated monthly marketing schedule	January 2017 and ongoing annually	-Jessa	<input type="checkbox"/>
		-PIO meet with managers to develop strategic marketing plan/strategy for their programs	January 2017 and ongoing	-Jessa & managers	<input type="checkbox"/>
		-Implement marketing plans/strategies	January 2017 and ongoing	-Jessa, Tony, & managers	<input type="checkbox"/>
2. Increase by 10 percent the number of individuals who have knowledge of NCHD programs and activities from targeted audience surveys	Evaluate NCHD marketing impact	-Conduct 5-7 question baseline survey to community partners, clients, elected officials and general public through meetings, health fairs, client interactions and social media	Jan. 1, 2017- May 1, 2017	-Jessa, Tony & managers	<input type="checkbox"/>
		-Conduct a post survey to same target audience, to measure progress from baseline	Jan. 1, 2018 - May 1, 2018	-Jessa, Tony & managers	<input type="checkbox"/>
GOAL 2: Be intentional about having a presence in smaller communities.					
Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Increased visibility of NCHD in all communities across the six-county region 2. Annually rotate events around communities within each county	Develop a shared calendar to ensure intentional scheduling, attendance and participation across six-county region, color-coded by county to show gaps in attendance	-Intentionally rotate events among all communities across the six-county region	January 2017 and ongoing	-Tony, Trish & managers: <i>(leads)</i> All staff	<input type="checkbox"/>
		-Intentional attendance at partner meetings in all communities across the six-county region	January 2017 and ongoing	-Tony, Trish & managers: <i>(leads)</i> All staff	<input type="checkbox"/>
		-Assess effectiveness of event rotation and meeting attendance to increase visibility in all communities across the six-county region	March 2018 & March 2020	-Tony, Trish & managers	<input type="checkbox"/>

STRATEGIC PRIORITY: *Create Targeted Communication and Outreach Strategies, continued . . .*

TEAM Members: Trish McClain, Tony Cappello, Aaron Glassburn, Sherri Yahn, Jessica Lundgren

GOAL 3: Improve internal communication

Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed <input checked="" type="checkbox"/>
1. Identify internal communication strengths and weaknesses	Assess internal communication strengths and weaknesses through a survey	-Conduct a survey monkey to identify communication strengths and challenges	March 2017	-Jessa & Tony	<input type="checkbox"/>
2. Implement strategies to address weaknesses	Develop strategies based on results	-Analyze survey results and develop internal communication strategies to address key findings.	May 2017	-Jessa, Tony, Trish, Aaron, Mike, Claudia & managers	<input type="checkbox"/>
		-Updates for staff on programs	General staff meetings	-Tony, Trish, managers	<input type="checkbox"/>
3. Improve internal communication	Evaluate whether strategies improved internal communication	-Use Survey Monkey to identify ongoing communication strengths and challenges, as well as assess effectiveness of newly implemented strategies	June 2018 & June 2020	-Jessa & Tony	<input type="checkbox"/>
		-Analyze survey results and adapt new internal communication strategies as appropriate.	September 2018 & September 2020	-Jessa, Tony, Trish, Aaron, Mike, Claudia, & managers	<input type="checkbox"/>

Northeast Colorado Health Department (NCHD) ACTION PLAN				Lead: Michelle Pemberton, Planning and Administration Manager	
STRATEGIC PRIORITY: <i>Complete and Implement a Five-Year Public Health Improvement Plan, Consistent with PHAB national accreditation standards and CHAPS state guidelines</i>				TEAM Members: Tony Cappello, Trish McClain, Penny Stumpf, Jessa Hatch, Lynn Bournia, Melvin Bustos	
GOAL 1: Complete a Community Health Assessment					
Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Conduct a community health assessment of the six-county region	Assess community health through community focus groups, data collection and analysis	-Identify sources for quantitative data and information	Jan. 2017	-Michelle, Trish, Tony	<input type="checkbox"/>
		-Determine collection methods for qualitative data	Feb. 2 017	-Michelle, Trish, Tony	<input type="checkbox"/>
		-Implement collection methods	May 2017	-Tony, Trish, Michelle, & managers	<input type="checkbox"/>
		-Analyze and report quantitative & qualitative data	Aug. 2017	-Michelle with TA from CDPHE	<input type="checkbox"/>
		-Write community health assessment	Dec. 2017	-Michelle	<input type="checkbox"/>
GOAL 2: Complete the Public Health Improvement Plan (PHIP).					
Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Develop a five-year public health improvement plan	Prioritization and planning using data analysis and assessment results	-Develop a steering committee	Nov. 2017	-PHAB Team	<input type="checkbox"/>
		-Conduct priority and capacity assessments	March 2018	-PHAB Team, steering committee	<input type="checkbox"/>
		-Evaluate NCHD's role in mental health	April 2018	-PHAB Team	<input type="checkbox"/>
		-Write the public health improvement plan	Sept. 2018	-Michelle & PHAB team	<input type="checkbox"/>
GOAL 3: Establish an agency-wide PHIP tracking and reporting system					
Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Track and demonstrate progress of PHIP goals & objectives	Establish a tracking and reporting system.	-Identify and/or create a tracking & reporting system.	Dec. 2018	-Michelle & Tony	<input type="checkbox"/>

Northeast Colorado Health Department (NCHD) ACTION PLAN			Lead: Dr. Tony Cappello, Executive Director		
STRATEGIC PRIORITY: <i>Create and implement a Quality Improvement Plan, Consistent with PHAB National Accreditation Standards.</i>			TEAM Members: Trish McClain, Mike Burnett, Claudia Gonzalez, Rosemary Lengel, Melvin Bustos, Michelle Pemberton, Penny Stumpf		
GOAL 1: Develop priorities that will create a culture of quality improvement for NCHD.					
Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Develop quality improvement goals, objectives and measures	Assessment of organizational policies, procedures and processes through staff engagement and analysis Prioritization of areas for improvement using assessment results	-Increase program update meetings to monthly for 2017	January 2017	-Tony, Trish, Claudia, Aaron, Jessa, Mike & managers: <i>(for all four tasks)</i>	<input type="checkbox"/>
		-Establish a new Performance Management System	March 2017		<input type="checkbox"/>
		-Assess organizational policies, procedures and processes according to PHAB standards	April 2017		<input type="checkbox"/>
		-Identify priorities for improvement (i.e., staff capacity of smaller offices, billing for services)	May 2017		<input type="checkbox"/>
2. Create a quality improvement plan according to PHAB standards	Work with an MPH student from the School of Public Health to utilize assessment and prioritization results to create a QI Plan	-Provide all revised policies, procedures to develop a QI Plan.	June 30, 2017	-Tony, Michelle & MPH student <i>(both tasks)</i>	<input type="checkbox"/>
		-Provide guidance to the MPH Student.	July 2017		<input type="checkbox"/>
GOAL 2: Implement and Evaluate the Quality Improvement Plan					
1. Implement quality improvement plan	Implementation of quality improvement priorities	-Implement quality improvement plan	July 2017 Ongoing	-Tony, Trish, Claudia, Aaron, Mike, Jessa & managers	<input type="checkbox"/>
2. Evaluate implementation of quality improvement plan	Evaluation and assessment of identified QI priorities through staff engagement and data analysis	-Assess and evaluate the implementation of the quality improvement plan	July 2018 & July 2020	-Tony, Trish, Claudia, Aaron, Mike, Jessa & managers	<input type="checkbox"/> <input type="checkbox"/>

Northeast Colorado Health Department (NCHD) ACTION PLAN	Lead: Dr. Tony Cappello, Executive Director
STRATEGIC PRIORITY: <i>Create and Implement a Workforce Development Plan, Consistent with PHAB National Accreditation Standards.</i>	TEAM Members: Trish McClain, Melvin Bustos, Claudia Gonzalez

GOAL 1: Develop priorities that will provide a foundation for NCHD workforce sustainability, considering retention strategies, plus the necessary capacity and expertise

Objectives	Strategies	Major Tasks	Date to be Completed	Person(s) Responsible	Task Completed ✓
1. Assess job descriptions and tiers of NCHD staffing according to PHAB core competencies.	Align job descriptions and tiers of NCHD staffing according to PHAB core competencies	-Evaluate job descriptions and tiers of NCHD staffing according to PHAB core competencies	March 2017	-Tony, Trish, Claudia & managers	<input type="checkbox"/>
		-Revise job descriptions and tiers of NCHD staffing according to PHAB core competencies as identified in evaluation	June 2017	-Tony, Trish, Claudia & managers	<input type="checkbox"/>
2. Write a workforce development plan	Planning for development of workforce training on public health core competencies	-Work with MPH student to write a workforce development plan using assessment results	June 2017	-Tony, Trish, Claudia, Michelle & MPH student	<input type="checkbox"/>

GOAL 2: Implement and Evaluate the Workforce Development Plan

1. Implement a workforce development plan to address gaps.	Development and implementation of workforce development plan	-Implement workforce development strategies	Beginning July 2017 and ongoing	-Tony, Trish, Claudia & managers	<input type="checkbox"/>
2. Evaluate implementation of the Workforce Development Plan	Evaluation and assessment	-Assess and evaluate the implementation of the workforce development plan	July 2018 & July 2020	-Tony, Trish, Claudia & managers	<input type="checkbox"/>

Attachment A: Northeast Colorado Health Department Strategic Planning Participant List

Interview (June 27, 2016)

- Tony Cappello, PhD, MPH, Executive Director

Planning Meeting/SCOT Analysis Focus Group (July 27, 2016)

- Tony Cappello, PhD, MPH, Executive Director
- Aaron Glassburn, IT Support Specialist
- Claudia Gonzalez, MHA, Human Resources Specialist
- Sherri Yahn, Prevention Services Manager
- Jessa Hatch, Public Information Officer
- Trish McClain, BSN, RN, Deputy Director
- Penny Stumpf, Health Promotion and Wellness Manager
- Tammy Hort, RN, Public Health Nurse Manager
- Melvin Bustos, Environmental Health Manager
- Jessica Lundgren, RD, CLC, WIC Manager

Anonymous Environmental Scan Survey (August 2016)

- 28 NCHD staff
- 5 NCHD Board of Health members
- 6 community partners

NCHD Board of Health

- Roger Segura, President, Fort Morgan Representative
- Joe Kinnie, Vice President, Phillips County Commissioner
- Gene Meisner, Secretary, Logan County Commissioner
- Laura Teague, Morgan County Commissioner
- Mark Turner, Sedgwick County Commissioner
- Robin Wiley, Yuma County Commissioner
- Terry Hart, Washington County Commissioner
- Nancy Zwirn, Sterling Representative

Strategic Planning Retreat, (September 13, 2016)

- Tony Cappello, PhD, MPH, Executive Director
- Trish McClain, BSN, RN, Deputy Director
- Michelle Pemberton, Planning and Administration Manager
- Claudia Gonzalez, MHA, Human Resources Specialist
- Sherri Yahn, Prevention Services Manager
- Jessa Hatch, Public Information Officer
- Penny Stumpf, Health Promotion and Wellness Manager
- Tammy Hort, RN, Public Health Nurse Manager
- Melvin Bustos, Environmental Health Manager
- Lynn Bournia, Community Health Specialist
- Jessica Lundgren, RD, CLC, WIC Manager

Continued . . .

Attachment A: Northeast Colorado Health Department Strategic Planning Participant List

Action Planning Teams (October 2016)

Communication and Outreach:

- Jessa Hatch, Public Information Officer - Lead
 - Tony Cappello, PhD, MPH, Executive Director
 - Trish McClain, BSN, RN, Deputy Director
 - Aaron Glassburn, IT Support Specialist
 - Sherri Yahn, Prevention Services Manager
 - Jessica Lundgren, RD, CLC, WIC Manager

Public Health Improvement Plan:

- Michelle Pemberton, Planning and Administration Manager - Lead
 - Tony Cappello, PhD, MPH, Executive Director
 - Trish McClain, BSN, RN, Deputy Director
 - Penny Stumpf, Health Promotion and Wellness Manager
 - Jessa Hatch, Public Information Officer
 - Lynn Bournia, Community Health Specialist
 - Melvin Bustos, Environmental Health Manager

Quality Improvement Plan:

- Tony Cappello, PhD, MPH, Executive Director – Lead
 - Michelle Pemberton, Planning and Administration Manager
 - Trish McClain, BSN, RN, Deputy Director
 - Mike Burnett, Response Coordination Officer
 - Claudia Gonzalez, Human Resources Specialist
 - Rosemary Lengel, Community Health Navigator
 - Melvin Bustos, Environmental Health Manager
 - Penny Stumpf, Health Promotion and Wellness Manager

Workforce Development Plan

- Tony Cappello, PhD, MPH, Executive Director – Lead
 - Trish McClain, BSN, RN, Deputy Director
 - Melvin Bustos, Environmental Health Manager
 - Claudia Gonzalez, MHA, Human Resources Specialist

Attachment B: PHAB Requirements Check List

Source: Public Health Accreditation Board, Standards and Measures, Version 1.5, Domain 5, Standard 5.3, Pages 145-148

STANDARD 5.3: “Develop and implement a health department organizational strategic plan.”

Measure 5.3.1

- Use a planning process to develop the organization’s strategic plan.
 - Provide membership of the planning group, including titles; include various levels of staff, as well as representatives from the department’s governing entity.

 - Provide a summary of the strategic planning process, including number of meetings, duration and methods. Include steps such as environmental scanning process and stakeholder analysis.

Measure 5.3.2

- Complete and adopt the department’s strategic plan. Content must include:
 - a. Mission, vision, guiding principals and values
 - b. Strategic priorities
 - c. Goals and objectives with measurable, time-framed targets
 - d. Consideration of key support functions required for efficiency and effectiveness, such as information management, workforce development, communication, and financial sustainability
 - e. Identification of external trends, events, or other factors that may impact community health or the health department
 - f. Analysis of the department’s strengths and challenges
 - g. Link the strategic plan with the health improvement plan and quality improvement plan

Measure 5.3.3

- Assess the health department’s implementation of the strategic plan.
 - Health department must provide reports developed since the plan’s adoption showing that the plan has been monitored and progress evaluated towards reaching the goals and objectives. Reports must include how targets are monitored. Progress is evidenced by the completion of defined steps to reach a target. The plan may be revised based on work completed, adjustments to timelines or changes in resources.

(Note: A monitoring and reporting plan is in place, utilizing action plans as roadmaps, and a checklist of defined steps, called “major tasks.” Assuming the department follows the monitoring and reporting plan, this measure will be met.)