

Black Hawk County Health Department

FY 2015-2017 Strategic Plan



Introduction and Planning Team Membership

During 2013, representatives of the Black Hawk County Health Department participated in a revision of the County-wide strategic plan, *Black Hawk County Governing for the Future*, facilitated by the Institute for Decision Making (IDM) - University of Northern Iowa. With the Health Department strategic planning process due to commence, IDM's Associate Director and Senior Planner were recruited to offer continuity to the county-wide initiative, as well as, facilitate the unique needs of a local public health agency seeking to build capacity for future national public health accreditation. Through engagement of the local Board of Health and multidisciplinary representatives across the agency a series of planning sessions were organized.

2014 Strategic Planning Team Members

Chairperson, Black Hawk County Board of Health
Director, Black Hawk County Health Department
Health Planner
Fiscal Manager
Social Worker (also Collective Bargaining Leader)
Public Health Nurse

Member, Black Hawk County Board of Health
Environmental Health Manager
Information Analyst
Advanced Registered Nurse Practitioner
Environmental Health Officer
MPH Student

Reviewing the Planning Process and Timeline

The Proposed Operating Principles (*Exhibit A*), Strategic Planning Process, (*Pg 2 and Exhibit B*), and Process Timeline (*Box 1*) were reviewed with the Planning Team emphasizing the overall goal of the process to provide the Black Hawk County Health Department with a functional strategic plan. IDM facilitated a streamlined planning approach with a focus on determining what an organization wants to accomplish, who will be responsible for working toward the accomplishment, and the timelines for achieving the accomplishment.¹

Box 1 – Process Timeline

- **January-February 2014:** Situational Analysis/Environmental Scan Research
- **February 12, 2014:** Planning Session 1
- **March 7, 2014:** Planning Session 2
- **April 16, 2014:** Planning Session 3
- **April 23, 2014:** Planning Session 4
- **April-May 2014:** Finalization and Adoption of Plan; Initiate Development of Action Plans

Reporting the Situational Analysis/Environmental Scan

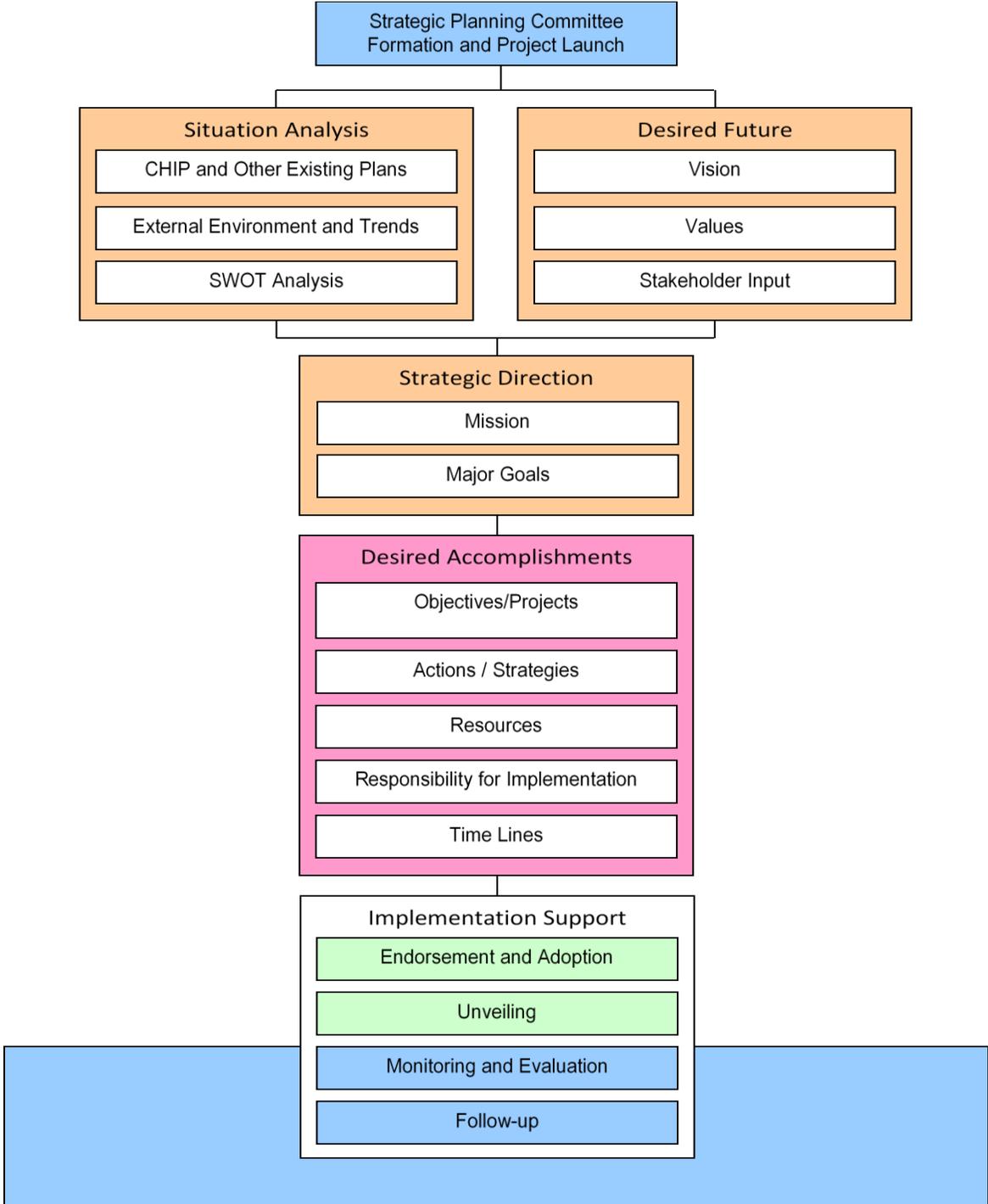
Information and data for the situational analysis and environmental scan were organized prior to the first session by Health Department planning staff. The Planning Team was asked to consider the question, “What are the trends, needs and opportunities for change in our community?” during a review of the following six different theme areas (*Exhibits C, D & E*):

- Black Hawk County Demographic Detail Comparison Data
- County Health Ranking Data
- Black Hawk County Health Status Measures
- Multi-Sector Food System Assessment
- 2011 Community Health Needs Assessment and Health Improvement Plan
- Domains of the national Public Health Accreditation Board

¹ IDM utilized, NACCHO, *Developing a Local Health Department Strategic Plan: A How-To Guide*, (2010)

Black Hawk County Health Department

3-Year Strategic Planning Model



Identifying Strengths, Weaknesses, Opportunities and Challenges (SWOC)

The Planning Team was encouraged to focus on the situational analysis and environmental scan by identifying the Health Department's strengths, weaknesses, opportunities and challenges.

Discussion focused on the following questions (*Exhibit F*):

- What are Health Department's Strengths (Internal)?
- What are Health Department's Weaknesses (Internal)?
- What Opportunities does the Health Department currently have (External)?
- What Challenges does the Health Department currently face (External)?

Validating Vision, Values and Mission

A review of the Health Department's current Vision, Values and Mission Statements occurred along with a set of questions for the Planning Team members to consider when reviewing each statement. The Planning Team members were also provided a copy of the updated *Black Hawk County Governing for the Future Strategic Plan* and were instructed to review the County's *2028 Vision, Motivating Values and Vision Elements in a Rapidly Changing Future*. Multiple discussions were focused around the proposed questions, below:

- Vision – a futuristic view regarding the ideal state or conditions one aspires to become:
 - Based on present knowledge and expertise, insights, situation analysis and SWOC does the current vision statement reflect the future desires of the Department?
 - In general, does the current vision statement stretch the Department to address the potential needs, issues and desires we may face over time?
 - Is the current vision statement inspiring and motivational?
 - Is the vision statement aligned with the *Governing for the Future* document?
 - Can we endorse the current vision statement as stated? If not, what changes are indicated?
- Values – principles, beliefs and underlying assumptions that guide the Department; communicate how the Department will conduct itself; and align the heart with the head serving as the foundation of decision making:
 - The current value statement is acceptable to the Department
 - The current value statement reflects how the Department conducts itself
 - If we do not include this current value statement and build on it, we won't achieve what we want/need to achieve as a Department, in other words, it is a "must."
- Mission - a clear explanation describing why the Department exists and what it does. Does the Mission Statement answer the following questions:
 - Who are we?
 - What is our purpose – what are we here to do?
 - What business are we in? – major fields of activity
 - Who do we serve?
 - How are we unique?

Vision, values and mission statements were reviewed with the Planning Team and full Board of Health. Validated vision, values and mission statements are included below and *Exhibit G*.

Black Hawk County Health Department Vision Statement

Black Hawk County Health Department is a leader and innovator in creating collaborative networks and approaches to health services and delivery. The Department is respected for its dedication and willingness to champion efforts; and adapt programs and services to improve the health of our community.

Black Hawk County Health Department Values Statements

Black Hawk County Health Department is committed to these guiding principles:

We are Accountable: We accept our individual and team responsibilities and meet the needs of our commitments. We expect to be evaluated by the successful execution of our commitments.

We are Effective: We utilize resources in ways that consistently produce desired results.

We are Responsible: We address the changing needs and trends that affect our diverse public. We are sensitive to the cultural and equity factors influencing health. We take responsibility for our performance in all of our decisions and actions.

We are Collaborative: Through effective partnerships and transparent communication, we practice collaboration internally and externally, vertically and horizontally, with public and the private sector, as a leader and as a team player.

We are Efficient: We maximize the benefits from our resources within a rapidly changing culture and economy to deliver services to the public economically without sacrificing quality.

We are Innovative: We foster an environment of continuous quality improvement where as we plan, do, study, and act upon evidence-based research, creative, open and resourceful changes to how we work.

We are Adaptable: We are flexible while remaining regulatory compliant and ethical.

Black Hawk County Health Department Mission Statement

The Black Hawk County Health Department is responsive and accountable. Through collaborative efforts, planning and policy development, we promote population health, prevent disease and protect the environment for all Black Hawk County residents and visitors.

Identifying Strategic Issues, Goals and Objectives

The Planning Team focused on identifying what the Health Department's major strategic issues will be over the next 1-3 years. Each Planning Team member was asked to complete a worksheet which asked, "In your opinion, what are the top 5-6 strategic issues that should be addressed by the Black Hawk County Health Department over the next 1-3 years and beyond?" IDM facilitators encouraged the Planning Team to reflect on the information discussed in the situational analysis/environmental scan; SWOC analysis; discussion regarding vision, values and mission; in addition to priority community issues. Strategic issues were revisited during planning sessions to provide an opportunity for review, modification and identification of potential gaps, e.g. healthy equity – poverty, race, culture and age and quality management (*Exhibit H*).

The Planning Team was asked to develop goals (and subsequent objectives) from the identified strategic issues, including activities assigned to the Health Department in the County strategic plan, *Governing for the Future*; linkages to the Health Improvement Plan; and future Quality Improvement Plan. Early in the process, health planning staff correlated newly defined goals with the domains of public health accreditation. However, it was important to allow the process to evolve without any bias, rather than direct a conversation exclusively around the 12 domains. As the goals and objectives were refined, two domains were noted without corresponding goals and place holders are included indicating, "No goals are recommended at this time."

Local Health Department Capacity

The strategic plan includes goals and objectives to build capacity and enhance the specific areas of information management², workforce development³, communication⁴, and financial sustainability⁵.

Engagement of the Local Board of Health

From the onset of the strategic planning process, the Black Hawk County Board of Health was engaged by designating two members to represent the Board on the Planning Team, discussion with the full Board at monthly meetings, and designating the initial FY2015 work session⁶ of the Board to discuss, *Board of Health Measures of Success*. Prior to the Board's review of the goals and objectives, a review of the Health Improvement Plan was completed to fully understand the relationship between both planning documents, including the deletion of four goals which are best aligned with the Strategic Plan. Moving forward, the Strategic Plan will function as a dynamic tool to guide regular monitoring, evaluation, modification and redirection of activities into a cycle of process improvement.

² **Goal 1.2:** Enhance the Department's capacity to effectively utilize technology

³ **Goals 8.1 & 8.2:** Elevate the Health Department's efforts to attract and retain a workforce that meets its current and future needs; Assure the community has access to a workforce that meets public health competency standards

⁴ **Goals 4.1 & 11.2:** Enhance the Health Department's communication and collaboration with clients, service providers and partners; Strengthen internal communication and collaboration throughout the Health Department

⁵ **Goal 11.3:** Diversify the Health Department's funding through alternative revenue streams to meet the demand for services and programs

⁶ **Goal 12.1:** Provide timely and appropriate information regarding public health and the official responsibilities to the Board of Health

Goals and Objectives

Goal 1.1: Monitor population health status and understand health issues facing the community (Domain 1 - Assessment)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
1.1.1 By December 2014, review and revise the current process for identifying health status indicators	Health Planning	Management Team, Community Partners	Define revised process
1.1.2 By December 2015, facilitate a collaborative process resulting in a comprehensive community health needs assessment (CHNA) and utilizing a health equity impact assessment process, as indicated	Board of Health	Health Planning, Community Partners	Community Health Needs Assessment
1.1.3 By June 2016, utilize the results of the CHNA to develop a revised Health Improvement Plan (HIP) ⁷	Board of Health	Health Planning, Community Partners	Health Improvement Plan

Goal 1.2: Enhance the Health Department’s capacity to effectively utilize technology (Domain 1)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
1.2.1 By September 2014, establish a standardized system to evaluate and monitor security policies and procedures	Health IT Committee	County HIPPA Committee	Security policies and procedures
1.2.2 By December 2014, establish a standardized system to inventory data collection requirements consistent with internal and external reporting criteria	Information Analyst	Black Hawk County IT, Management Team	Comprehensive set of data requirements
1.2.3 By December 2014, develop a technology/capital equipment acquisition and replacement plan	Health IT Committee	Black Hawk County IT	IT/Capital acquisition and replacement plan
1.2.4 By June 2015, enhance capacity to provide time sensitive IT services	Health IT Committee	Black Hawk County IT	Reduced wait time for IT service requests

⁷ Revision of 2011 HIP

Goal 2.1: Ensure the Health Department has access to laboratory and epidemiologic/environmental public health expertise and capacity (Domain 2 – Investigate health problems)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
2.1.1 By September 2014, implement a laboratory oversight program to assure compliance with Clinical Laboratory Improvement Amendments (CLIA)	ESP Leadership	Medical Director Mid-Level Provider	Laboratory MOU; Compliance plan for CLIA certification
2.1.2 By December 2014, implement a revised system of information management, policies, procedures, and fee structure to support well and septic inspections and other environmental health services ⁸	ESP Leadership	Health Planning, Fiscal Staff	Data Mgt System; Revised policies and procedures; Increased fee revenues

Goal 3.0: *No goals are recommended at this time* (Domain 3 – Inform and educate about public health issues)

Goal 4.1: Enhance the Health Department’s communication and collaboration with clients, service providers and partners (Domain 4 – Community engagement)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
4.1.1 By March 2016, engage the public health system and community in identifying and addressing health problems consistent with activities of the Community Health Needs Assessment (CHNA)/Health Improvement Plan (HIP) ⁹	Health Department Leadership	Designated Program Staff, Community Partners	Population health services consistent with emerging trends and gaps; diverse needs addressed
4.1.2: By June 2015, develop an (external) communication plan to assure regular and consistent communications with clients, service providers and partners	Director	Public Information Officer	Communications Plan (external)

Goal 5.1: Develop and implement an Agency Strategic Plan (Domain 5 – Develop public health policies and plans)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
5.1.1 By September 2014, adopt and implement the Agency Strategic Plan	Director	Board of Health, Management Team	Progress reports to the Board of Health

⁸ Measure will be achieved through application of the PDSA cycle

⁹ 2011 HIP, Goal 2: Advocate for and develop strategies to address gaps in health promotion and prevention services

Goal 6.0: *No goals are recommended at this time* (Domain 6 – Enforce public health laws)

Goal 7.1: Assure quality services are provided to prevent, protect and promote the community’s health status (Domain 7 – Access to care)¹⁰

Objective	Lead Responsibility	Support Responsibility	Progress Measure
7.1.1 By March 2015, facilitate a gap assessment of health services: clinical preventive services, emergency services, urgent care, occupational health, primary/specialty ambulatory care, inpatient care, oral and behavioral health	Director	Board of Health, Community Partners	Gap assessment
7.1.2 By March 2015, identify populations in the community experiencing barriers to health services	Director	Board of Health, Community Partners	Identified populations with unmet needs
7.1.3 By September 2015, participate in a collaborative process to establish culturally competent strategies to improve access to health care services	Director	Board of Health, Community Partners	Implementation of culturally competent health services

Goal 8.1: Elevate the Health Department’s efforts to attract and retain a workforce that meets its current and future needs (Domain 8 – Workforce)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
8.1.1 By March 2015, recommend to the Board of Health a framework for public health competency and credentialing	Director	Health planning staff, designated staff reps, Human Resources	Adoption of public health competency framework
8.1.2 By June 2015, complete a workforce assessment to identify barriers to attract an optimum workforce	Leadership Team	Human Resources, Board of Health	Report of workforce assessment

Goal 8.2: Assure the community has access to a workforce that meets public health competency standards (Domain 8)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
8.2.1 By June 2016 implement a system of public health competency to assess and address gaps for individual, leadership and organizational training/development needs	Leadership Team	Human Resources, Designated reps from multidisciplines	Professional development plan for department/community

¹⁰ 2011 HIP, Goal 2: Advocate for and develop strategies to address gaps in health promotion and prevention services

Goal 9.1: Promote a culture of quality improvement (Domain 9 – Quality Improvement)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
9.1.1 By March 2015, implement a performance management system including standards, measures, reporting, and quality improvement components	Director, Performance Mgt Consultant	Board of Health, Leadership Team	Operational performance management system
9.1.2 By March 2015, develop a plan to continuously improve local health department processes and programs	Health Planning	Director, Board of Health, Participants of CQI initiatives	Quality Improvement Plan

Goal 9.2: Develop organizational capacity to achieve accreditation from the Public Health Accreditation Board (Domain 9)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
9.2.1 By March 2015, identify an accreditation team including designated Accreditation Coordinator, public health leadership, staff, human resources and BOH liaisons	Director, Board of Health	Health Planning, Management Team	Roster of Accreditation Team members
9.2.2 By March 2015, conduct department-wide awareness meetings to communicate the importance of all roles in building capacity for public health accreditation	Director	Health Planning	Schedule of agency-wide awareness meetings
9.2.3 By September 2015, assess the Department’s readiness for Public Health Accreditation Board (PHAB) accreditation including prerequisites, processes and on-line orientation	Accreditation Team	Director, Board of Health, Human Resource liaison	Completed <i>PHAB Readiness Checklists</i> ; and on-line training
9.2.4 By June 2016, identify documentation demonstrating the Agency’s conformity with PHAB standards/measures	Accreditation Team	Management Team, Human Resources	Document selection corresponds with each measure of compliance
9.2.5 By December 2016, submit a Statement of Intent to inform PHAB of the Agency’s application for accreditation	Director	Board of Health & Board of Supervisors	Statement of Intent

Goal 10.1: Contribute to and apply the evidence base of public health (Domain 10 – Evidence-Based Practices)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
10.1.1 By December 2014, facilitate discussion with the Board of Health to prioritize future commissioned research	Director	Planning Staff Fiscal Manager	Priority research recommendations
10.1.2 By September 2015, inventory evidence-based (health) practices implemented throughout the community	Health Planning	Management Team, Community Partners	Inventory of evidence-based practices

Goal 11.1: Align the Health Department’s strategic direction to ensure greater effectiveness and efficiency (Domain 11 – Administration & Management)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
11.1.1 By September 2014, and ongoing thereafter, evaluate the structure of comparable local public health departments to explore best leadership and programmatic alignment	Director, Board of Health	Management Team	Recommended organizational structure
11.1.2 By September 2014, identify public health priorities in response to Affordable Care Act/Affordable Care Organization implementation as it relates to organizational structure (care coordination and direct services)	Director, Board of Health	Management Team	Program alignment recommendations to improve operational effectiveness
11.1.3 By September 2014, and annually thereafter, prior to the budgeting process, complete a review all new and existing programs to determine alignment with the plan	Director, Board of Health	Management Team	Program alignment with the Agency strategic plan
11.1.4 By December 2014, and ongoing thereafter, sustain an accountable and effective system of resource utilization	Director, Board of Health	Fiscal Manager	Balanced financial statements and a successful audit

Goal 11.2: Strengthen internal communication and collaboration throughout the Health Department (Domain 11)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
11.2.1 By September 2014, complete a gap assessment of internal communication needs	Director	Board of Health, Leadership Team	Assessment report and recommendations
11.2.2 By December 2014, develop an internal communications strategy plan	Director	Board of Health, Leadership Team	Communication (internal) strategy plan

Goal 11.3: Diversify the Health Department’s funding through alternative revenue streams to meet the demand for services and programs (Domain 11)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
11.3.1 By December 2014, and ongoing thereafter prior to the annual legislative session, advocate for legislative changes to support programs and unfunded mandates	Director, Board of Health	Management reps of Impacted Programs	Iowa (Administrative) Code changes to direct resources for local public health activities
11.3.2 By September 2014, and ongoing thereafter, evaluate billing/fee for service and federal indirect rate opportunities	Fiscal Manager	Management reps of Impacted Programs	Increase in receivables
11.3.3 By September 2014, and ongoing thereafter, evaluate and respond to requests for external funding proposals consistent with local public health priorities	Health Promotion Manager	Management reps of Impacted Programs, Board of Health	Percentage of external funds included with the Department budget

Goal 11.4: Provide optimal physical space to accommodate the Health Department and client needs (Domain 11)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
11.4.1 By June 2015, leverage additional work space within the Pinecrest Building consistent with programmatic needs	Director, County Maint.	Management reps of Impacted Programs	Work space enhancements
11.4.2 By September 2015, and ongoing thereafter, promote a safe and healthy work environment for employees/clients	County Maintenance	Human Resources, Off Site Facility Mgt	Safe and healthy workplace options

Goal 12.1: Provide timely and appropriate information regarding public health and the official responsibilities to the Board of Health (Domain 12 - Governance)

Objective	Lead Responsibility	Support Responsibility	Progress Measure
12.1.1 By September 2014, establish a system of regular work sessions to encourage the Board’s engagement in the Health Department’s overall obligations and responsibilities <ul style="list-style-type: none"> • July 2014 work session to focus on Board of Health defined measures of success 	Director, Board of Health	Administrative Assistant	Minutes of scheduled work sessions

Black Hawk County Health Department Timeline for Objectives

#	Objectives	2014		2015				2016				2017	
		Sept	Dec	March	June	Sept	Dec	March	June	Sept	Dec	March	June
1.1.1	Revise process for health status indicators												
1.1.2	Facilitate CHNA processes												
1.1.3	Develop HIP												
1.2.1	Evaluate security policies and procedures												
1.2.2	Inventory data collection requirements												
1.2.3	Develop technology/capital equipment plan												
1.2.4	Provide time sensitive IT services												
2.1.1	Implement laboratory oversight program												
2.1.2	Revise well and septic inspection system												
4.1.1	Engage public health system/community												
4.1.2	Develop (external) communications plan												
5.1.1	Implement an Agency Strategic Plan												
7.1.1	Facilitate health services gap assessment												
7.1.2	Identify barriers to health services												
7.1.3	Establish strategies to improve access												
8.1.1	Recommend competency framework												
8.1.2	Complete a workforce assessment												
8.2.1	Implement competency assessment system												
9.1.1	Implement a performance management system												
9.1.2	Develop a CQI plan												
9.2.1	Identify an public health accreditation team												
9.2.2	Conduct department awareness meetings												
9.2.3	Assess readiness for accreditation												
9.2.4	Identify documentation to support PHAB												
9.2.5	Submit Statement of Intent (SOI)												
10.1.1	Prioritize commissioned research activities												
10.2.1	Inventory evidence-based (health) practices												
11.1.1	Evaluate structure of comparable agencies												
11.1.2	Identify priorities to respond ACA												
11.1.3	Alignment of programs with strategic plan												
11.1.4	Sustain a system of resource utilization												
11.2.1	Complete communications assessment												
11.2.2	Develop internal communications strategy												
11.3.1	Advocate for legislative funding												
11.3.2	Evaluate billing/fee for service and indirect rate												
11.3.3	Respond to requests for external funding												
11.4.1	Leverage additional work space												
11.4.2	Promote a safe and healthy work place												
12.1.1	Encourage the Board of Health's engagement												