

**Fairfield Department of
Health**

Strategic Plan

2019 - 2024

Table of Contents

Overview of the Process	3
Strategic Plan Work Group	4
Vision.....	5
Mission.....	5
Values	5
Strategic Priorities.....	5
Goals and Objectives.....	6
Continue to Enhance Customer Service	6
Community Health Improvement Plan (CHIP) Priorities	8
Internal Performance Enhancements.....	11
Appendix.....	13
Strategic Plan Survey Results, March 2019	13
Meeting Notes.....	17
Preparation Strategic Plan Meeting: February 11, 2019	17
Strategic Plan Meeting: March 19, 2019	18
Strategic Plan Meeting: March 21, 2019	19
Strategic Plan Meeting: March 26, 2019	22

Overview of the Process

On February 11, 2019 Sands Cleary, Director of Health and senior staff of the Fairfield Health Department met with Tim Callahan, facilitator, to review the process for updating the strategic plan. Tim Callahan led the group through a review of the Public Health Accreditation Board's criteria for a Strategic Plan. Next the group reviewed the current Health Department Strategic Plan. The alignment of the Strategic Plan with the Community Health Assessment and Community Health Improvement Plan was also discussed. The group then reviewed and edited the Strategic Plan Survey which would be made available to the Board of Health and all department staff via Survey Monkey. Finally, the group developed a schedule for completing the project.

The Strategic Plan Survey was made available from February 25, 2019 through March 1, 2019. Participants were asked to evaluate the current vision, mission, and values. Next a series of questions asked about internal strengths and weaknesses and external opportunities and threats. Finally, participants were asked to rate the department's customer service, provide suggestions for improving processes and procedures, and evaluate several options for a department logo. Sixty percent (41/68) of the Board of Health and staff completed the survey. Participants identified themselves as belonging to one of groups within the Department. School based staff accounted for 61% (25/41) of the participants, community based/code enforcement staff were 24% (10/41) and the Board of Health 15% (6/41). Tim Callahan presented the results of the Strategic Plan Survey to the Board of Health at their March 11, 2019 meeting. The Board offered revisions to the Vision, Mission, and Values.

A Work Group met on March 19, 21, and 26 to develop the Strategic Plan. The Work Group included a cross section of staff representing Health Education, Environmental Health, School Nursing and Administration. At the outset Sands Cleary and Santina Jaronko, Health Educator, reviewed the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) and discussed how these documents would impact the strategic plan. Tim Callahan reviewed the Public Health Accreditation Board's (PHAB) requirements for strategic plans. Using the findings from the Strategic Plan Survey and the suggestions from the Board of Health to guide the process, the Work Group reviewed and considered revisions to the Vision, Mission, and Values. Next, using the Strategic Plan Survey findings to stimulate the discussion, the Work Group considered internal strengths and weaknesses and external opportunities and threats. This information was considered in the next step of the process, which was setting strategic priorities, goals and objectives. On June 10th, 2019 the Strategic Plan was approved by the Board of Health.

Strategic Plan Work Group

Mary Cannon, Special Projects Coordinator

Sands Cleary, Director of Health

Mary Ellen Dragicevich, Public Health Nurse

Andrea Flynn, Secretary A

Rob Guerrero, Assistant Director of Health for Environmental Health

Santina Jaronko, Health Educator

Amy Lehaney, Sanitarian

Jill Mitchell, Assistant Director of Health for Public Health Nursing

Irene Stepanoff, Nursing Coordinator

Facilitator

Tim Callahan

Tim Callahan Enterprises, LLC

Vision

A Healthy Community through Professional Excellence

Mission

Innovation, education, and action to improve community health and well-being

Values

Commitment to Integrity
Compassion in Conduct
Creative Teamwork
Continuous Improvement

Strategic Priorities

Customer Service
Community Health Improvement Plan Priorities
Internal Performance Enhancements

Goals and Objectives

Continue to Enhance Customer Service

Strategic Priority: Continue to Enhance Customer Service				
Goal	Objectives	Outcomes	Responsibility	Timeframe
1. By 6/30/22 implement an on-line permit and payment system	1.1 Work with the Purchasing Department to establish an interim credit/debit card payment system	1.1.1 Credit/debit card payments accepted	Sands Cleary	7/1/19 – 12/31/19
	1.2 Participate with the IT group in the vendor selection process	1.2.1 Vendor selected	Sands Cleary	7/1/19 – 6/30/20
	1.3 Migrate data to the new system and go live within 6 months of the signing of the contract with chosen vendor	1.3.1 Online permit application and payment system available to the public	Sands Cleary, Rob Guerrera, & Mary Cannon	7/1/20 – 12/31/20
2. By 6/30/20 implement public facing septic system information	2.1 Work with the IT Department to migrate the septic system information to an internal server.	2.1.1 Septic system information transferred from external server to Town servers	Mary Cannon	7/1/19 - 7/31/19
	2.2 Test system and go live	2.2.1 System works on internal servers	Mary Canon	7/31/19 – 8/31/19
	2.3 Promote system by setting up links from the Town website, by press release, and via social media	2.3.1 Link on Town website functions and media campaign underway	Mary Cannon, Santina Jaronko	7/1/19 – 12/31/19
3. By 6/30/20 complete, train staff, and exercise Continuity of Operations Plan (COOP)	3.1 Complete the review and revision of the COOP	3.1.1 Revised COOP approved by Board of Health?	Sands Cleary, Jill Mitchell, and Santina Jaronko	7/1/19 – 12/31/19
	3.2 Design a staff training program	3.2.1 Training plan complete	Sands Cleary, Jill Mitchell, and Santina Jaronko	1/1/20 - 3/31/20
	3.3 Implement staff training program	3.3.1 Staff trained	Sands Cleary, Jill Mitchell, and Santina Jaronko	4/1/20 – 6/30/20

Strategic Priority: Continue to Enhance Customer Service

Goal		Objectives	Outcomes	Responsibility	Timeframe
4.	By 6/30/20 provide all commonly requested school nursing forms on every school's website.	4.1 Identify forms for each level (pre-k, elementary, middle, and high schools)	4.1.1 Forms chosen for inclusion on website	Jill Mitchell and Irene Stepanoff	7/1/19 – 8/31/19
		4.2 Develop internal web page	4.2.1 Web page containing forms complete and tested	Jill Mitchell and Irene Stepanoff	9/1/19 – 12/31/19
		4.3 Load link on each school's web site	4.3.1 Link included on websites	Jill Mitchell and Irene Stepanoff	1/1/20 – 4/30/20
		4.4 Go live	4.4.1 School nurse forms available on each school's website	Jill Mitchell and Irene Stepanoff	6/30/20
5.	By 12/30/19 develop and implement the capability to communicate with parents electronically	5.1 Identify content available for electronic communications.	5.1.1 Content chosen	Jill Mitchell and Irene Stepanoff	7/1/19 – 8/31/19
		5.2 Establish query to identify target audience	5.2.1 Audience identified	Jill Mitchell and Irene Stepanoff	7/1/19 – 9/30/19
		5.3 Contact Chris Brand to identify parents not participating in Infinite Campus	5.3.1 Parent list produced	Jill Mitchell and Irene Stepanoff	7/1/19 – 9/30/19
		5.4 Test system with Form B notification to 6 th grade parents	5.4.1 Parents notified	Jill Mitchell and Irene Stepanoff	10/1/19 – 11/30/19
		5.5 Update annual plan for school nurses to reflect this change	5.5.1 Annual Plan updated	Jill Mitchell and Irene Stepanoff	12/1/19 – 12/30/19
6.	Through 6/30/24 continue to increase social media engagement	6.1 Develop media engagement plan	6.1.1 Media engagement plan completed and approved	Santina Jaronko	7/1/19 - 12/31/19
		6.2 Continuously develop, distribute, and evaluate content	6.2.1 Content distributed and tracked	Santina Jaronko	12/31/19 – 6/30/24

Community Health Improvement Plan (CHIP) Priorities

Strategic Priority: Community Health Improvement Plan (CHIP) Priorities						
Goal	Objectives	Outcomes	Responsibility	Timeframe		
1. Enhance and integrate programs and environmental policy changes that follow the American Heart Association's Life's Simple 7 to reduce the incidence of high blood pressure and diabetes by June 30, 2024. (2019 incidence rates: 24% and 6 respectively)	1.1 Implement more screening opportunities of the Know Your Numbers program and/or blood pressure screenings	1.1.1 Identify more screening locations 1.1.2 Identify more screening tests that can be completed 1.1.3 Explore supplementary staff who might be able to help with screenings 1.1.4 Offer more screening opportunities throughout the year – ongoing, offer screenings at least biannually.	Santina Jaronko	7/1/19 – 12/31/19	7/1/19 – 12/31/19	
	1.2 Increase the number of days per week of exercise	1.2.1 Bike Share <ul style="list-style-type: none"> • Internal discussion of bike share opportunities • If Bike Share idea is approved issue RFP • Pilot Bike Share program 1.2.2 Promote fitness opportunities - promote tips and events on social media 1.2.3 Possible environmental changes (bike routes and sidewalks) depending on grants	Santina Jaronko	ongoing	By 1/1/20	
	1.3 Decrease rate of residents who report use of tobacco and e-cigarettes/vaping	1.3.1 Develop an educational campaign around e-cigarettes/vaping – especially	Santina Jaronko	7/1/19 – 7/1/20		
					By 6/30/20	7/1/19 – 6/30/24

Strategic Priority: Community Health Improvement Plan (CHIP) Priorities

Goal	Objectives	Outcomes	Responsibility	Timeframe
		among youth 1.3.2 Promote local cessation resources, possibly including Quit Line. 1.3.3 Improve version of Fresh Start program		7/1/19 - 6/30/24 7/1/19 – 1/1/20
	1.4 Increase access to healthy food	1.4.1 Farmers’ Market promoted via social media and website 1.4.2 Promote the Eat Well Healthy Restaurant Program 1.4.3 Rework criteria for Eat Well program 1.4.4 Enroll at least 2 restaurants in Eat Well program, pending funding	Santina Jaronko	7/1/19 - 6/30/24 7/1/19 – 6/30/24 7/1/19 - 10/31/19 7/1/19 – 10/31/20
2.	Promote available behavioral health and substance resources, specifically opioid prevention strategies and programs by 6/30/24. (2019 incidence rates: 31% know of someone with an opioid addiction, approximately 30 opioid related visits	2.1 Increase awareness of available behavioral health and substance abuse resources.	2.1.1 Promote web page of resources on social media 2.1.2 Using social media educate community on crisis and non-crisis resources 2.1.3 Continue to connect and share with Fairfield CARES and Behavioral Health Task Force	Santina Jaronko 7/1/19 - 6/30/24 7/1/19 – 6/30/24 7/1/19 - 6/30/24
		2.2 Increase awareness of opioid epidemic	2.2.1 Hire Health Education Assistant to assist with opioid related activities 2.2.2 Use social media to educate community and provide community opioid forums 2.2.3 Support the CT	Santina Jaronko, Sands Cleary Santina Jaronko and Health Education Assistant By 5/1/19 8/1/19 – 6/30/24 8/1/19 –

Strategic Priority: Community Health Improvement Plan (CHIP) Priorities

Goal	Objectives	Outcomes	Responsibility	Timeframe
to ED in 2018)		Prescription Monitoring System (CPMS) Continue relationships with Fairfield CARES, local doctors, and local pharmacies 2.2.4 Promote DEA Drug Take Back Days and the proper disposal of medications		6/30/24 8/1/19 - 6/30/24 7/1/19 – 6/30/24
	2.3 Increase access to Narcan	2.3.1 Host Narcan training sessions 2.3.2 Promote pharmacies who provide Narcan	Santina Jaronko	By 8/30/19 7/1/19 – 6/30/24
3. Improve access to and awareness of health care services by 6/30/24	3.1 Increase awareness of health insurance open enrollment	3.1.1 Promote yearly open enrollment periods via social media and web page	Santina Jaronko	7/1/19 - 6/30/24
	3.2 Promote the availability of health care services	3.2.1 As part of a partnership develop community awareness of services raised through social media and the Access to Health Care Services web page	Santina Jaronko	7/1/19 – 6/30/24
	3.3 Increase awareness of medical transportation services	3.3.1 With partners promote Veyo as an option for medical transportation 3.3.2 Determine and promote other means for medical transportation	Santina Jaronko	7/1/19 – 6/30/24 By 6/30/24
	3.4 Increase implementation of CLAS standards	3.4.1 Complete a CLAS assessment with HIA to determine current gaps	Santina Jaronko	By 6/30/24
4. Identify services and programs to	4.1 Continue to offer the Matter of Balance program	4.1.1 Identify locations 4.1.2 Offer the program 2 times	Santina Jaronko	By 7/1/19 5/1/20 –

Strategic Priority: Community Health Improvement Plan (CHIP) Priorities				
Goal	Objectives	Outcomes	Responsibility	Timeframe
assist elderly and to keep them in their homes		per year		6/30/24
	4.2 Compile a comprehensive list of services and programs available to seniors	4.2.1 Complete with the assistance of Senior Center and Social Services	Santina Jaronko	By 6/30/24

Internal Performance Enhancements

Strategic Priority: Internal Performance Enhancements				
Goal	Objectives	Outcomes	Responsibility	Timeframe
1. Through 6/30/24 work towards complying with the Public Health Accreditation Board (PHAB) pre-requisites, plans and processes	1.1 Finalize Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and Strategic Plan	1.1.1 Updated CHA and CHIP, 5-year Strategic Plan adopted	Sands Cleary	7/1/19 – 8/30/19
	1.2 Create a plan to address other PHAB requirements	1.2.1 Plan identifying plans and processes required by PHAB completed.	Sands Cleary	7//19 – 10/31/19
	1.3 Implement plan	1.3.1 PHAB required plans and processes developed and implementation initiated	Sands Cleary	11/1/19 – 6/30/24
2. Ensure the provision of the 10 Essential Services	2.1 Familiarize staff with each of the 10 services	2.1.1 Staff training developed and implemented	Mary Cannon	7/1/19 – 12/30/19
	2.2 Identify examples of compliance	2.2.1 Documentation of compliance	Mary Cannon	7/1/19 – 12/31/19
	2.3 Identify non-compliance and develop a plan to attain compliance	2.3.1 Action plan developed and implemented	Mary Cannon	1/1/20 – 6/30/24

Strategic Priority: Internal Performance Enhancements

Goal	Objectives	Outcomes	Responsibility	Timefram
3. Review key program metrics and seek system improvements to monitor	3.1 Program managers identify key metrics to monitor	3.1.1 Key metrics identified for Environmental, School Nursing and Health Education	Rob Guerrero, Jill Mitchell, and Santana Jaronko	7/1/19 – 12/31/19
	3.2 Determine if systems exist to generate desired information	3.2.1 Decision on system capability reached	Rob Guererra, Jill Mitchell, and Santana Jaronko	7/1/19-12/31/19
	3.3 If systems do not exist, work to create a system to collect data and provide key metrics	3.3.1 Software system capable of generating data on key metrics	Rob Guerrero, Jill Mitchell, and Santana Jaronko	1/1/20 – 6/30/24
	3.4 Regularly analyze data to identify barriers to achievement of established performance standards	3.4.1 Compliance/deviation from standards regularly monitored and action to address deviation	Rob Guererra, Jill Mitchell, and Santana Jaronko	7/1/19 – 6/30/24

Excellence in effort	52% (22/42)
Compassion in conduct	50% (21/41)
Professional dedication	43% (18/41)
Dedication to health promotion	41% (17/42)

Participants were asked for suggestions not appearing on the list.

They are as follows:

Involvement in the town community

Quality—excellence in patient care and other work performed

Safety—for patients, employees and visitors

Creativity—enhancing knowledge and discovering and sharing new ways to do things

Teamwork—commitment to working together to achieve goals

Strengths

Participants were asked to rate the Health Department's performance, first by listing three strengths. Monitoring and enforcing statutes and regulations effecting environmental, clinical, and school programs was identified nine times. Recognizing the department as a well-run operation was next with nine response. Respondents noted it is progressive, resourceful, supportive, and constantly exploring opportunities. The third most noted strength by eight participants was the dedicated knowledgeable staff.

When asked to identify successful initiatives or projects, the flu clinic program was listed by 14 participants. Other ventures mentioned were Bikeshare, Emergency shelter to assist with Hurricane Sandy, introduction of in-house video production, Matter of Balance, professional development days with outside speakers and discussion, and weight loss education programs (Diabetes Prevention Program and Modified Healthy Living Program).

The reasons identified for the success of these projects were leadership, well organized, teamwork, appropriately targeted advertising/marketing/messaging, the in-house video on flu was entertaining yet educational with great acting.

Weaknesses

Internal impediments to meeting the mission are considered weaknesses. Budget constraints were identified by 8 respondents. Next was internal and external communications by 7 participants. Limited staff, limited time and resources to implement ideas, community low value of public health and lack of support for programs, and inadequate salary and benefits were all listed 5 times.

Participants were also asked to name an initiative that was less than successful and the reasons why. Several were listed:

The first attempt at accreditation – Perceived benefit exceeded necessary resources, and lack of leadership and commitment.

Well Child Clinic at PHN – Income eligibility requirements restrict participation. Need to bill 3rd parties

Fresh Start Program – Residents lacked interest

Eat Well Healthy Restaurant Program – Poor marketing, program is unknown

Licensing of mobile food vendors – Not enough advance planning.

Opportunities

Participants were asked to consider external trends or forces that might result in opportunities during the next five years. The most often (9 times) cited opportunity related to technology. Examples included: software to support operations in the environmental and school programs, telemedicine, and social media. Next changes in the school health program (5 times) particularly the increasing health needs of students, more demands resulting from new laws, and a general expansion of the scope of practice. Finally, regionalization of services, continuing to develop emergency response capabilities and substance use and abuse were all mentioned 3 times.

Threats

Participants were asked to identify trends or external forces that will present threats to the Health Department's ability to meet the mission. Financial constraints, most often budget cuts, were identified by 15 respondents. Adequate staffing and training for the group was listed by 5 respondents, regionalization by 4 participants, accreditation, ability to meet the changing needs of students, mental health and substance abuse, emerging diseases, the anti-vaccine movement, and general apathy by citizens toward public health were each identified 3 times.

Customer Service

Recognizing the Health Department is a customer driven organization, participants were asked to rate the service provided. The response was very positive, 65% (26/40) choosing "exceptional" and 35% (14/40) "good but could be better".

Suggestions to improve service were as follows:

More compassionate care Self-evaluation

Technology – on line permitting, payments, septic information

More participation in community events to raise visibility of the health department

Improve nurse student ratio

Standard operating procedures

Expand clinic services

Processes and Procedures

Participants were asked for ideas to improve processes or procedures.

The suggestions were as follows:

Improve Environmental and School Health technology

Regular staff meetings to improve communication and be up to date on happenings in the department

Develop eye catching advertising

Add staff in the school health program to meet workload.

More training opportunities for staff.

Logo

The National Association of County and City Health Officials (NACCHO) public health logo, the town seal, and several town departments' and other health departments' logos were presented. Survey participants were asked to choose one of four options.

The results are:

Adopt the NACCHO logo	10% (4/40)
Use some elements of the town seal in a new logo	40% (16/40)
Cobrand using the NACCHO and new logo	5% (2/40)

Develop a unique health department logo	35% (14/40)
Other	10% (4/40)
(2) Keep current seal, develop a new logo, have a logo contest	

Meeting Notes

Preparation Strategic Plan Meeting: February 11, 2019

Present:

Health Department staff: Sands Cleary, Director of Health, Rob Guerrera, Assistant Director of Health for Environmental Health, Santina Joronko, Health Educator, and Jill Mitchell, Assistant Director for Public Health Nursing
Consultant: Tim Callahan, Tim Callahan Enterprises, LLC

Sands Cleary opened the meeting by thanking his staff for their willingness to engage and help lead this project.

Tim Callahan led the group through a review of the Public Health Accreditation Board's criteria for a Strategic Plan.

Next the group reviewed the current Health Department Strategic Plan. The alignment of the Strategic Plan with the Community Health Assessment and Community Health Improvement Plan was also discussed.

The group then reviewed and edited the Strategic Plan Survey.

Items for follow up:

Sands Cleary will send Tim Callahan the Survey in Word format and the Survey Monkey log in information.

The Group will create a list of values for inclusion in the Survey. The list will consist of the current values with revisions and additional values defined by the group. Tim Callahan will forward a list of values for consideration.

Tim Callahan will make the suggested changes to the survey and send the document to the group for review and comment.

Finally, the group developed a schedule for completing the project.

By February 19th Sands Cleary will email the final version of the Survey in print form to the Health Department staff and Board of Health.

On February 25th Sands Cleary will send the Health Department staff and Board of Health the link to the Survey. The link will be accessible from February 25 -27. Tim Callahan will tabulate the survey findings.

By noon on March 8th Tim Callahan will forward the survey findings report to Sands Cleary for inclusion in the Board of Health meeting package.

At the March 11th Board of Health meeting Tim Callahan will use the Survey findings as the catalyst for a discussion with the Board. The focus will be on the Department's strengths and weaknesses and the external opportunities and threats.

The Health Department vision, mission, values, strategic priorities, goals, and objectives will be also be reviewed at a high level. The Board will be asked to provide input on these items as presented in the draft strategic plan.

On March 25th and March 29th, the Strategic Plan Group will meet to develop a draft strategic plan. April 2nd will serve as a back-up date in case of cancellation of a meeting or in the event additional time is necessary to complete the plan.

By April 5th Tim Callahan will forward a draft Strategic Plan to the Strategic Plan Group for review and comment. All comments must be received by April 12th.

By noon on May 10th Tim Callahan will forward the final draft of the Strategic Plan to Sands Cleary for inclusion in the Board of Health packet.

On May 13th Tim Callahan will present the final draft of the Strategic Plan to the Board of Health.

By May 20th, provided the Board of Health approved the Strategic Plan on May 13th, Tim Callahan will forward to Sands Cleary a package including Meeting notes, the Strategic Plan Survey report, and the approved Strategic Plan.

Strategic Plan Meeting: March 19, 2019

Present:

Health Department staff: Mary Cannon, Special Projects Coordinator, Sands Cleary, Director of Health, Mary Ellen Dragicevich, Public Health Nurse, Andrea Flynn, Secretary A, Rob Guerrero, Assistant Director of Health for Environmental Health, Santina Jaronko, Health Educator, Amy Lehaney, Sanitarian, Jill Mitchell, Assistant Director for Public Health Nursing, Ken Rubano, Sanitarian, and Irene Stepanoff, Nursing Coordinator
Consultant: Tim Callahan, Tim Callahan Enterprises, LLC

Sands Cleary opened the meeting by thanking his staff for their willingness to engage in and help lead this project. Sands expressed his desire to create road map that will be used every day to guide the department for the next five years. In order to accomplish this Sands asked everyone to actively participate in the process.

Tim Callahan set out the ground rules –

2 to 3 meetings, 2 hours in duration

Tim's role is to facilitate the conversation and keep the group on track.

The ideas discussed and decisions made belong to the group

Everyone is strongly encouraged to participate

Agenda contains 10 items – there is considerable ground to cover

Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)

Santina Jaronko and Sands Cleary described the process and the role of the Health Department. The process is led by the hospitals and health departments in the region. The CHA findings are town specific and the CHIP goals and objectives are also customized as necessary. Regional or common goals focus on addressing the high incidence of cardiovascular disease and diabetes, promoting healthy lifestyles as a means of addressing obesity and increasing the understanding of mental health and substance abuse as a public health issue. The one goal specific to Fairfield is to identify services and programs to allow the elderly to remain in their homes. These goals were included in the most recent Fairfield Health Department Strategic Plan.

Using the results of a survey administered to the Board of Health and health department staff the Work Group reviewed the Vision, Mission and Values.

The current vision statement

"All Fairfield residents engaged in achieving their optimal physical, mental and social well-being."

Proposed vision statement

"A Healthy Community through Professional Excellence"

While the majority of the survey responses indicated the vision statement provided inspiration, suggestions for improvement included a shorter more memorable statement, inclusion of non-residents and employees, and adding action words. The workgroup considered the importance and relevance of an internal versus external focus. Several options were proposed and discussed. The workgroup agreed on a draft vision statement. **"A Healthy Community through Professional Excellence"** The focus of this statement is external (healthy community) and internal (professional excellence of staff).

The current mission statement is

"To prevent disease and injury by promoting and protecting the health, safety, and well-being of the public and our environment through education and action."

Proposed mission statement

"Innovation, education, and action to improve community wellness"

While the majority of the survey responses indicated the vision statement provided inspiration, suggestions for improvement included a shorter more memorable statement, add action words, and focus on the positive aspects of public health. After considerable brainstorming and discussion, the workgroup agreed on a draft mission statement. **"Innovation, education, and action to improve community wellness"**

Values

Survey participants were asked to choose 5 values that guide their work from a list. The values most often chosen were Integrity in conduct, excellence in effort, compassion in conduct, professional dedication, and dedication to health promotion. The workgroup agreed on the following: **professional excellence, integrity in conduct, compassionate approach, creative teamwork, and continuous improvement.**

The meeting was adjourned at 11:00 am. The next meeting is scheduled for March 21, 2019 at 9:00 am.

Strategic Plan Meeting: March 21, 2019

Present:

Health Department staff: Mary Cannon, Special Projects Coordinator, Sands Cleary, Director of Health, Mary Ellen Dragicevich, Public Health Nurse, Andrea Flynn, Secretary A, Rob Guerrero, Assistant Director of Health for Environmental Health, Santina Jaronko, Health Educator, Amy Lehaney, Sanitarian, Jill Mitchell, Assistant Director for Public Health Nursing, and Irene Stepanoff, Nursing Coordinator
Consultant: Tim Callahan, Tim Callahan Enterprises, LLC

The meeting started with a final review of the Vision, Mission, and Values. The Work Group spent considerable time discussing options and ultimately agreed upon the following:

Vision

“A Healthy Community through Professional Excellence”

Mission

“Innovation, education, and action to improve community health and well-being”

Values

Commitment to Integrity

Compassion in Conduct

Creative Teamwork

Continuous Improvement

Strengths, Weaknesses, Opportunities, Threats (SWOT)

Using the survey results, internal strengths and weaknesses and external opportunities and threats were reviewed and discussed. Survey participants were asked to identify three strengths, weaknesses, opportunities, and threats.

Strengths

Monitoring and enforcing statutes and regulations effecting environmental, clinical, and school programs was identified nine times. Recognizing the department as a well-run operation was next with nine response. Respondents noted it is progressive, resourceful, supportive, and constantly exploring opportunities. The third most noted strength by eight participants was the dedicated knowledgeable staff.

Weaknesses

Budget constraints were identified by 8 respondents. Next was internal and external communications by 7 participants. Limited staff, limited time and resources to implement ideas, community low value of public health and lack of support for programs, and inadequate salary and benefits were all listed 5 times.

Opportunities

The most often (9 times) sited opportunity related to technology. Examples included: software to support operations in the environmental and school programs, telemedicine, and social media. Next changes in the school health program (5 times) particularly the increasing health needs of students, more demands resulting from new laws, and a general expansion of the scope of practice. Finally, regionalization of services, continuing to develop emergency response capabilities and substance use and abuse were all mentioned 3 times.

Threats

Financial constraints, most often budget cuts, were identified by 15 respondents. Adequate staffing and training for the group was listed by 5 respondents, regionalization by 4 participants, accreditation, ability to meet the changing needs of students, mental health and substance abuse, emerging diseases, the anti-vaccine movement, and general apathy by citizens toward public health were each identified 3 times.

The survey also included questions on customer service, process and procedures and the department logo. The Work Group reviewed the findings for each of these three questions.

Customer Service

The response was very positive, 65% (26/40) choosing “exceptional” and 35% (14/40) “good but could be better”.

Suggestions to improve customer service were as follows:

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The National Association of County and City Health Officials (NACCHO) public health logo, the town seal, and several town departments’ and other health departments’ logos were presented. Survey participants were asked to choose one of four options.

The results are:

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Cobrand using the NACCHO and new logo	5% (2/40)
Develop a unique health department logo	35% (14/40)
Other	10% (4/40)
(2) Keep current seal, develop a new logo, have a logo contest	

Strategic Priorities

Prior to embarking on setting strategic priorities the Public Health Accreditation Board’s (PHAB) guidance for strategic planning was reviewed. PHAB recommends considering the department’s capacity to establish or enhance information management, workforce development, and financial stability and how the Strategic Plan will link to the Quality Improvement Plan.

The Work Group then focused on identifying a few broad strategic initiatives that take into account opportunities, competitive challenges, or environmental changes.

Three Strategic Priorities were identified

Customer Service

Community Health Improvement Plan Priorities

Internal Performance Enhancements

Goals

The Work Group then turned its attention to setting goals for each strategic priority.

Customer Service

1. Implement an on line permitting and payment system by 6/30/22
2. Implement public facing septic system information by 6/30/20
3. Complete, train, and exercise a Continuity of Operations Plan by 6/30/20
4. Provide all commonly requested school nursing program forms on all school web sites by 6/30/20
5. Implement electronic communication with parents' capability by 12/30/19
6. Increase social media engagement continuously through 6/30/24

CHIP Priorities

1. Enhance and integrate programs and environmental/policy changes to reduce the incidence of high blood pressure and diabetes by June 30, 2024. (2019 incidence rates: 24% and 6% respectfully)
2. Promote available behavioral health and substance abuse resources and specifically opioid prevention strategies and programs by June 30, 2024. (2019 incidence rates: 31% know of someone with an opioid addiction, 28% know of someone who has died from opioids, approximately 30 opioid related visits to ED in 2018)
3. Improve access to and awareness of health care services by June 30, 2014.
4. Identify services and programs to help assist the elderly and aid in keeping them in their homes longer by June 30, 2024. (Of those over the age of 55 years, 82% own their own home)

Strategic Plan Meeting: March 26, 2019

Present:

Health Department staff: Mary Cannon, Special Projects Coordinator, Sands Cleary, Director of Health, Mary Ellen Dragicevich, Public Health Nurse, Andrea Flynn, Secretary A, Jahliah Green, Student Intern, Rob Guerrero, Assistant Director of Health for Environmental Health, Santina Jaronko, Health Educator, Amy Lehaney, Sanitarian, Jill Mitchell, Assistant Director for Public Health Nursing, Ken Rubano, Sanitarian, and Irene Stepanoff, Nursing Coordinator
Consultant: Tim Callahan, Tim Callahan Enterprises, LLC

Goals

The Strategic Planning Group continued to address the strategic priorities and focused on setting goals for the #3. Internal Performance Enhancements. Three goals were established. Through 6/30/24 work towards complying with the Public Health Accreditation Board (PHAB) pre-requisites, plans and processes
Ensure the provision of the 10 Essential Services
Review key program metrics and seek system improvements to monitor

Objectives

Next the Strategic Planning Group developed objectives for each goal. Prior to embarking on developing objectives, the Public Health Accreditation Board's (PHAB) guidance for strategic planning was reviewed. PHAB recommends considering the department's capacity

to establish or enhance information management, workforce development, and financial stability and how the Strategic Plan will link to the Quality Improvement Plan. The details for each objective can be found in the document entitled FHD Strategic Plan Tracking Form (attached)

Next Steps

A draft of the strategic priorities, goals, and objectives will be forwarded to the Strategic Planning Group for review and comment. Group members were asked to “reply to all” with their comments by April 5, 2019. A revised draft will be prepared and circulated for a final review. The final draft will be presented to the Board of Health at their May 13, 2019 meeting.