Strategic Plan

A Guide to Our Future

2018-2020
Butler County Health Department

Public Health
Prevent. Promote. Protect.

**Butler County
Health Department**
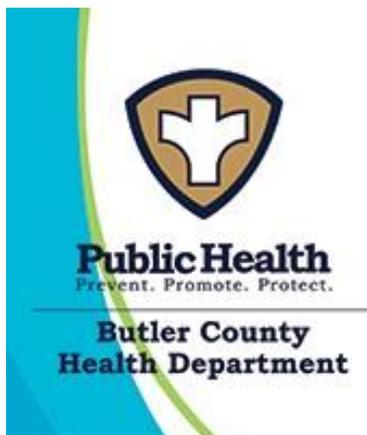
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Our Mission Statement

At Butler County Health Department our mission is to prevent disease and injury, promote health and wellness, protect the environment, and achieve health equity.

Our Vision

We aspire to create a healthy and connected community where residents can enjoy optimal physical, emotional, and environmental health.

Our Values

Our guiding principles provide a framework for staff to conduct their jobs.

Build – We work with partners and stakeholders to meet the needs of our community to promote health equity.

Unity – We show support, courtesy, and understanding for all with whom we interact.

Teamwork – We capitalize on our collective differences, strengths, and perspectives.

Leadership – We are committed to developing a public health staff that exceeds core competencies and provides outstanding service to the community.

Excellence – We set goals and strive to achieve the highest quality of public health service through innovation and demonstration of outcomes.

Respect – We respect the diversity of those we serve and value the contributions made by all staff.

The Butler County Health Department is pleased to present its 2018-2020 strategic plan. This planned approach provides a guide for achieving the goals and objectives identified in the priority areas over the next three years.

The strategic planning process included input from department staff and the Board of Health which was facilitated by the Center for Public Health Practice at Ohio State University. This process included a series of planning sessions that occurred over a 5 month period. The work plans that were developed serve as tools to steer the direction of the department in achieving its mission.

This plan aligns with work done on our Community Health Assessment and Community Health Improvement Plan (CHIP), and will utilize the Quality Improvement plan and process when appropriate in order to meet the stated objectives.

Strategic Priorities

Strategic Priority #1: *Health Promotion and Community Outreach*

Strategic Priority #2: *Service and Quality*

Strategic Priority #3: *Sustainability and Finance*

The Butler County Board of Health was incorporated on February 20, 1920, with the ideal of creating an organization that would strive to help secure the right to a sound body and a healthy life for the citizens of the Butler County Health District. The health department staff continue to strive to achieve this ideal by focusing on environmental health programs, communicable disease control, immunizations, maternal-child health, health education, emergency preparedness, plumbing inspections, and vital statistics.

Leadership and guidance is presently provided to the staff by an eight member Board of Health, working to ensure the health of our citizens by maximizing the health of the population as a whole. The Board of Health strives to take every measure possible to secure the right to a sound and healthy life for each citizen. The department is also fortunate to receive support from our township, city, and county officials as well as numerous county agencies. Without their assistance, we could not meet the many challenges that arise.

The Butler County Health Department was part of an 11-jurisdiction award from the Ohio Department of Health to receive planning and facilitation support for strategic planning purposes. Services were provided by the Center for Public Health Practice (CPHP), at the Ohio State University, who provided overall guidance and support using a seven-phase planning approach. The process began in October 2017 and concluded in March 2018; our planning team met a total of six times. A summary of activities related to the first five phases of our process follows.

October 2017 - Phase 1 - Plan to Plan: A strategic planning team representing various levels in the department along with Board of Health members was asked to participate in the development of the strategic plan. With guidance from CPHP an outline and timeframe of activities were developed to guide the agency through the process of forming a strategic plan. Planning included a live introductory webinar for planning team members, as well a recorded webinar for all staff to set the stage for the planning process.

November 2017 - Phase 2 - Articulate Mission, Vision, and Values (MVV): An online survey was distributed to all staff and Board of Health members in November 2017 to gather input regarding the MVV for the department as part of our environmental scan. A meeting was then held and board members were invited to review the results of the survey and help draft the MVV. This was later reviewed by the governing board (the Board of Health) and approved on February 15, 2018.

 November 2017- **Phase 3 – Assess the Situation:** An online SOAR survey to assess strengths, opportunities, aspirations and results, and challenges was distributed to staff and Board of Health members along with the MVV online survey. This data was used to help determine the strategic areas the Butler County Health Department wanted to focus their efforts on.

December 2017 - Phase 4 – Agree on Priorities: With facilitation from the CPHP, the strategic planning committee met for half a day to identify priorities. During this meeting the MVV were confirmed and a gap analysis was conducted. Using themes identified from the SOAR survey and work group activities, themes were streamlined into three areas.   The priority areas for the strategic plan were identified and goal statements related to these three areas were developed.

January 2017 - Phase 5 – Write the Plan: During another half-day session facilitated by CPHP in January 2018, the team met and worked to develop a work plan which included objectives, measures and action steps to address the priority areas for the agency. Through additional meetings and distance based support from CPHP, priority areas were defined and further explored to help gain clarity over the strategic direction the agency wanted to move toward over the next three years. The final plan was reviewed and approved by the board on May 17, 2018.

Phase 6 – Plan Implementation: The Strategic Planning team, along with leadership and staff, will implement the action steps outlined in the work plan in an effort to reach the goals and objectives of the strategic plan.

Phase 7 – Plan Monitoring and Evaluation: To ensure progress is being made toward the strategic priorities, the plan will be monitored using a performance management system. The strategic planning team will meet quarterly to evaluate the implementation of the plan and make any revisions. A progress report will be developed for the Annual Report to update staff and Board of Health members.

Our Writing Team

Jenny Bailer, Health Commissioner

Karen Carr, Public Health Nurse

Sue Haines, Director of Nursing

Mita Patel, Accreditation Coordinator

Rhonda Smith, Fiscal Officer/Office Manager

Jason Soles, Registered Sanitarian

Jonathan Yang, Epidemiologist

Board of Health members were invited to participate on the strategic planning team. Their input in the environmental scan through the SOAR survey and with the development of the mission, vision, values statements helped guide this process.

SOAR/C Analysis

As part of our overall strategic planning process, the agency conducted a SOAR/C Analysis, assessing strengths, opportunities, aspirations, results and challenges. During November 2017, electronic surveys were distributed to all staff and Board of Health members. Findings from the survey are summarized in the table below. The planning team reviewed the results together which helped identify themes to address for our strategic priorities and goals.

Strengths	Opportunities
- Quality of staff - Teamwork and collaboration - Caring and compassionate - Dedication, determination, and commitment - Customer service - Reliability and dependability - Hardworking - Diversity - Responsive - Helpful - Leadership - Integrity and honesty	- Drugs, addiction, opiates, mental health - Health promotion - Obesity - Smoking - Community education - Community awareness/communication - Networking - Community engagement - Community outreach - Infant mortality - Funding and grants - Staffing, growth - Internal improvements
Aspirations	**Results**
- Cultural diversity - To be technologically on par with corporations - Growth - To be trusted by the community - Being a resource for public health information - Chronic illness awareness and education - Educating the general public, especially the youth about drugs and	- Customer satisfaction - Easy and rapid access to data - New programs - More community support - Website and social media visit tracking and subscriber numbers - Impact the chronic illness in our community through diet and exercise education/programs - Drops in overdoses, drug use in general - Decreased deaths

how to find help if they should need it • Decrease infant mortality • Be fully staffed in all departments • Have large flexible and responsive workforce • Become more consistent across the Health Department and use performance management • Community will engage with health department • To educate and promote healthy active lifestyles • Provide education to the community on preventative health issues and chronic disease management •	• Able to complete work in a timely manner with less stress and positive attitudes • able to respond to complaints, changes in workload or current events quickly without undue stress • Become accredited • Policies/programs will go forward with increased focus on community needs • Decrease health care costs and provide better quality of living, decrease chronic illnesses • Improved health of residents in our county
Internal Weaknesses/Challenges	**External Challenges**
• Staffing • Funding • Accreditation	• Community growth • Limited resources • Community engagement

In the development of this plan, after multiple meetings and taking another look at the SOAR/C Analysis, the planning team decided to focus on 3 priority areas. The health promotion and community outreach priority will link with the branding strategy and the CHIP to increase visibility in the community and to improve health outcomes. Service and quality will be improved upon by utilizing the workforce development plan along with the quality improvement plan. Sustainability and finance will consider information management through automation, and reassess the programs and services provided by the health department.

This section lists our strategic priorities, key measures, goals, and objectives. More detailed work plans are included in Appendix A.

Strategic Priority #1: Health Promotion and Community Outreach

Health Promotion and Community Outreach go hand in hand in public health. Health Promotion focuses on keeping people healthy through behavior change and education. Communication assists in getting health focused messages out to the community. Our Community Health Assessment revealed several areas where health outcomes are less than desirable. These areas are also evident in both the state and county level Community Health Improvement Plans. Community outreach to promote health and improve outcomes is critically important.

Key measures:

Increased access to naloxone

Increased knowledge of access to progesterone treatment

Increased access to tobacco cessation programs offered by the Health Department

Increased access to clean needles

Increased non-emergency communications with the community

Goal 1.1: Improve critical population health outcomes identified in the Community Health Assessment in the areas of opioid overdose deaths, infant deaths/poor birth outcomes, smoking/chronic disease

Objectives

1.1.1: Increase the distribution of naloxone kits in the community by 15%

1.1.2: Increase Butler County community awareness of progesterone treatment by 5%

1.1.3: Increase the number of tobacco cessation programs offered by the health department from 1 to 2

1.1.4: Implement an additional syringe exchange program in Butler County

Goal 1.2: Increase overall health department visibility in the community by utilizing a non-emergency communications plan

Objectives

1.2.1: Develop a non-emergency communications plan for the health department.

1.2.2: Increase the utilization of two communication methods

Strategic Priority #2: Service and Quality

Public health provides services to the community and those services must consistently be of exceptional quality. Complacency in these areas is not an option. Actively using data to improve performance will help to ensure an agency achieves desired results. Use of systematic, deliberate approaches to improving quality through measuring processes and outcomes is necessary throughout the local health department. Benchmarks such as accreditation and certification (by individuals as well as the agency) indicate attainment of quality, however implementation of a performance management system to continuously measure everyday tasks and activities is necessary to maintain and ensure quality. Establishing a culture of quality throughout the public health department requires an investment in ongoing staff training and begins with job descriptions and evaluations that align with national public health core competencies.

Key measures:

Improved infrastructure for workforce development

Increased alignment with Core Competencies for Public Health

Butler County Health Department is PHAB accredited

Performance management system is in place and utilized across the health department

Goal 2.1: Invest in ongoing staff development and training to maintain excellence in public health service provision

Objectives

2.1.1: Develop an agency-wide Workforce Development Plan

2.1.2: Implement two trainings targeted at deficits in PH Core Competencies as part of workforce development

2.1.3: Develop functional job descriptions and evaluations that align with Public Health Core Competencies

Goal 2.2: Attain Accreditation from the Public Health Accreditation Board (PHAB)

Objectives

2.2.1: Collect and prepare 100% of the documentation necessary for submission to PHAB for accreditation

2.2.2: Receive accreditation status from PHAB

Goal 2.3: Increase use of data monitoring and decision making in all areas of the health department

Objectives

2.3.1: Establish a performance management system to monitor all areas of health department including state mandated programs

Strategic Priority #3: Sustainability and Finance

Funding allows us to impact the health of the population, enhance or expand programs and services, and perform our day-to-day work. Financial sustainability is dependent upon continuous monitoring and improvement of our financial structure. Technological improvements ensure that our operations are efficient and effective resulting in positive outcomes for the agency and the community we serve.

Key measures:

Improved financial accountability for contracts and programs

Improved efficiency of internal processes via technological improvements

Increased funding sources

Increased billing capability

Goal 3.1: All health department programs will be efficiently run

Objectives

3.1.1: Develop and implement a comprehensive systematic method to review 100% of contracts and programs annually to evaluate cost

3.1.2: Add at least one new technological improvement annually

Goal 3.2: Increase funding stream through maximizing new sources of funds

Objectives

3.2.1: Implement a MAC Billing program

3.2.2: Increase revenue from vaccine billing by 15%

Tracking Our Performance

The strategic planning team will monitor the progress of the plan on a quarterly basis during the three year cycle. Performance measures will be tracked and reviewed through the use of a performance management system dashboard. The team will review the implementation of the plan, monitor performance indicators, and see if any quality improvement opportunities exist. The team will make revisions to the plan as deemed necessary. Progress of the plan will be reported to staff and the governing board during the monthly meetings and a report will be submitted annually to be included in the department's Annual Report.

Priority # 1: Health Promotion and Community Outreach

Health Promotion and Community Outreach go hand in hand in public health. Health Promotion focuses on keeping people healthy through behavior change and education. Communication assists in getting health focused messages out to the community. Our Community Health Assessment revealed several areas where health outcomes are less than desirable. These areas are also evident in both the state and county level Community Health Improvement Plans. Community outreach to promote health and improve outcomes is critically important.

Goal 1.1: Improve critical population health outcomes identified in the Community Health Assessment and Community Health Improvement Plan in the areas of opioid overdose deaths, infant deaths/poor birth outcomes, and smoking/chronic disease.

Key Measure(s):

Increased access to naloxone, Baseline: 250
Increase knowledge of access to progesterone treatment , Baseline TBD

Increased access to tobacco cessation programs offered by the Health Department, Baseline: 1

Increased access to clean needles, Baseline: 1

Objective 1.1.1	Measure	Timeframe	Lead/Person Responsible
Increase the distribution of naloxone kits in the community by 100% (CHIP Priority 1)	Baseline: 250 kits in 2017 Target: 500 kits in 2018	Start: April 2018 End: December 31, 2018	Nursing Director Sue Haines

Action Steps:

- Develop master list for county of all agencies/entities distributing and receiving naloxone from state supported, and private sources
- Link with additional existing programs to expand reach and increase number of classes conducted outside the health department (jails, churches, libraries, etc.)
- Ensure those at highest risk of OD have access to naloxone kits
- Meet quarterly to evaluate: number of doses dispensed and used, barriers and successes

Objective 1.1.2	Measure	Timeframe	Lead/Person Responsible
Increase Butler County community awareness of progesterone treatment by 5% (CHIP Priority 3)	Baseline: TBD Target: Baseline + 5%	Start: March 2018 End: April 2019	Butler County Partnership to Reduce Infant Mortality (BC PRIM) Co-Leads, Kathryn Yang, Goldie Wontumi

Action Steps:

- Develop and conduct survey of PRIM priority population to assess knowledge of use of progesterone for preterm birth prevention
- Assess facilities/providers in Butler County that provide screening for and treatment with progesterone for prevention of preterm birth
- Develop and administer a survey to assess provider knowledge of facilities/institutions where eligible clients can be referred for progesterone treatment for prevention of preterm births
- Analyze and interpret survey results for priority population survey
- Analyze and interpret survey results from provider survey
- Develop educational/awareness campaign using information obtained from provider and community surveys
- Implement educational/awareness campaigns to address knowledge gaps identified from provider and community surveys
- Repeat surveys to assess improvement in knowledge of progesterone treatment

Objective 1.1.3	Measure	Timeframe	Lead/Person Responsible
Increase the number of tobacco cessation programs offered by the health department from 1 to 2.	Baseline: 1 program (Moms Quit for Two) Target: 2 programs	Start: April 2018 End: December 31, 2020	Nursing Director Sue Haines

Action Steps:

- Search for grants pertaining to smoking cessation
- Review and apply for potential grants that seem applicable to BCHD
- Train staff on smoking cessation program
- Implement smoking cessation program
- Evaluate smoking cessation program

Objective 1.1.4	Measure	Timeframe	Lead/Person Responsible
Implement an additional syringe exchange program in Butler County (CHIP Priority 2)	Baseline: 1 Target: 2	Start: April 2018 End: May 2019	Health Commissioner, Jenny Bailer

Action Steps:

- Evaluate the need for additional needle/syringe and education sites in Butler County
- Convene a stakeholder group to review the need for needle/syringe exchange sites
- Develop a plan for implementation of needle/exchange program
- Implement needle/syringe exchange program

Status:		

Goal 1.2: Increase overall health department visibility in the community by utilizing a non-emergency communications plan

Key Measure(s):

Increased non-emergency communications with the community, Baseline: Average number reached FB 60, Twitter 75

Objective 1.2.1	Measure	Timeframe	Lead/Person Responsible
Develop a non-emergency communications plan for the health department.	Baseline: All hazards plan in place Target: Overall non-emergency communications plan in place	Start: April 2018 End: December 2018, ongoing	Emergency Response Coordinator, Jake Collins PIOs Jason Soles and Betsy Waldeck

Action Steps:

- Write health department non-emergency communications plan for consistent and continuous outreach via traditional media and social media
- Allocate and establish .20 FTE to maintain outreach and evaluate effectiveness via traditional media and social media

Objective 1.2.2	Measure	Timeframe	Lead/Person Responsible
Increase the utilization of two communication methods	Baseline: Average number reached FB 60, Twitter 75 Target: FB 75, Twitter 94	Start: April 2018 End: December 31, 2018	Emergency Response Coordinator, Jake Collins, PIOs Jason Soles and Betsy Waldeck

Action Steps:

- Research model non-emergency communications plans for outreach via traditional and social media such as http://www.phf.org/resourcestools/Pages/Planning_Before_You_Communicate_Tool.aspx
- Inventory what is currently being used by the health department and its effectiveness
- Utilize community engagement to identify effective ways to reach target populations (including low literacy, non-English speaking, etc.)
- Explore new ways to utilize technology to effectively reach target populations

Priority 2: Service and Quality

Public health provides services to the community and those services must consistently be of exceptional quality. Complacency in these areas is not an option. Actively using data to improve performance will help to ensure an agency achieves desired results. Use of systematic, deliberate approaches to improving quality through measuring processes and outcomes is necessary throughout the local health department. Benchmarks such as accreditation and certification (by individuals as well as the agency) indicate attainment of quality, however implementation of a performance management system to continuously measure everyday tasks and activities is necessary to maintain and ensure quality. Establishing a culture of quality throughout the public health department requires an investment in ongoing staff training and begins with job descriptions and evaluations that align with national public health core competencies.

Goal 2.1: Invest in ongoing staff development and training to maintain excellence in public health service provision

Key Measure(s):

Improved infrastructure for workforce development, Baseline: Incomplete Workforce Development Plan (WDP)

Increased alignment with Core Competencies for Public Health, Baseline: 0% aligned with Core Competencies

Objective 2.1.1	Measure	Timeframe	Lead/Person Responsible
Develop an agency-wide *Workforce Development Plan (WDP)*	Baseline: no WDP Target: WDP signed by leadership	Start: April 2018 End: August 2018, ongoing	Accreditation Coordinator, Mita Patel, Department Heads

Action Steps:

- Research WDPs in use at other public health agencies
- Establish a committee to write a WDP that includes such things as professional development, cultural competency and cross training
- Complete a WDP
- Evaluate WDP

Objective 2.1.2	Measure	Timeframe	Lead/Person Responsible
Implement two trainings targeted at deficits in PH Core Competencies as part of workforce development	Baseline: 0 trainings targeted to Core Competencies available Target: 2 Core Competency trainings	Start: April 2018 End: December 31, 2018	Accreditation Coordinator, Mita Patel,

Action Steps:

- Survey staff regarding training needs
- Identify training opportunities aside from mandated trainings that will be implemented in 2018.

- Implement two Core Competency training opportunities for staff

Objective 2.1.3	Measure	Timeframe	Lead/Person Responsible
Develop functional job descriptions and evaluations that align with Public Health Core Competencies	Baseline: 0 Target: 40	Start: April 2018 End: July 2018, ongoing	Health Commissioner, Jenny Bailer

Action Steps:

- Establish Tier Level 1, 2, 3 competencies for job descriptions and evaluations via staff surveys
- Develop functional job descriptions and evaluations based on PH competencies identified by staff as most important to their job category
- Finalize and utilize new job descriptions and evaluations
- Evaluate

Status:		

Goal 2.2: Attain Accreditation from the Public Health Accreditation Board (PHAB)

Key Measure(s):

Butler County Health Department is PHAB accredited, Baseline: not currently accredited

Objective 2.2.1	Measure	Timeframe	Lead/Person Responsible
Collect and prepare 100% of the documentation necessary for submission to PHAB for accreditation	Baseline: 25% collected Target: 100%	Start: April 2018 End: July 2019	Accreditation Coordinator, Mita Patel

Action Steps:

- Research available tools and resources to support accreditation process
- Take advantage of all support activities offered by Ohio Department of Health (ODH) and Ohio Public Health Association (OPHA)
- Establish internal PHAB domain teams to engage in process
- Conduct a gap analysis on documentation requirements
- Maintain and complete required components
- Consistently markup documentation to assure all components of PHAB guidance are met

Objective 2.2.2	Measure	Timeframe	Lead/Person Responsible
Receive accreditation status from PHAB	Baseline: not	Start: April 2018	Accreditation

| | | accredited
Target: accredited | End: July 2020 | Coordinator, Mita Patel |

Action Steps:

- Submit formal application in May, 2018,
- Attend ePHAB training, August, 2018
- Submit required documentation into ePHAB
- Respond to site reviewer questions
- Prepare staff and BOH for the site visit
- Participate in the PHAB site visit
- Receive PHAB accredited status

Status:	Date	Update

Goal 2.3: Increase use of data in monitoring and decision making in all areas of health department

Key Measure(s): *Performance management system is in place and utilized across the health department*, Baseline: No overall performance management system is utilized

Objective 2.3.1	**Measure**	**Timeframe**	**Lead/Person Responsible**
Establish a performance management system to monitor all areas of health department including state mandated programs	Baseline: 0 dashboard measures Target: 100% of dashboard measures tracked	Start: April 2018 End: January 2020	Accreditation Coordinator, Mita Patel Jenny Bailer, Health Commissioner

Action Steps:

- Select the framework for the performance management system
- Train staff on the selected performance management system framework
- Investigate and evaluate technological options that would support the health department's performance management system
- Purchase a technological platform
- Train staff on how to utilize the technology

Status:	Date	Update

Priority 3: Sustainability and Finance

Funding allows us to impact the health of the population, enhance or expand programs and services, and to do our day to day work. Financial sustainability is dependent upon continuous improvement of our financial structure. Technological improvements ensure that our operations are efficient and effective resulting in positive outcomes for the agency and the community we serve.

Goal 3.1: All health department programs will be efficiently run

Key Measure(s):

Improved financial accountability process for contracts and programs, Baseline: No current comprehensive standardized process to review contracts

Improved efficiency of internal processes via technological improvements, Baseline: No new technological improvement utilized

Objective 3.1.1	Measure	Timeframe	Lead/Person Responsible
Develop and implement a comprehensive systematic method to review 100% of contracts and programs annually to evaluate cost.	Baseline: No contracts under review Target: 100% of contracts reviewed annually	Start: April 2018 End: January 1, 2020	Chief Fiscal Officer, Rhonda Smith

Action Steps:

- Review all contracts annually and renegotiate/re-evaluate where costs could be decreased
- Investigate other sources of contract services
- Update cost analysis annually
- Annually review and update all program fees
- Review policies and procedures governing the collection of clinic fees

Objective 3.1.2	Measure	Timeframe	Lead/Person Responsible
Add at least one new technological improvement annually	Baseline: 0 Target: 2	Start: June 2018 End: January 1, 2020	Department Heads Jeff Agnew, Environmental Sue Haines, Nursing Rhonda Smith, Administrative Jerry Frederick, Plumbing

Action Steps:		
- Review/assess at least one internal process used within each division of the health department - Identify gaps in technology in the internal processes used - Select 2 internal processes to utilize a technological improvement - Implement the technological improvement - Evaluate the technological improvement		

Status:	Date	Update

Goal 3.2: Increase funding stream through maximizing new sources of funds			
Key Measure(s): *Increased funding sources,* Baseline: no MAC Billing *Increased vaccine billing capability*, Baseline: $39,314 (in 2017)			

Objective 3.2.1	Measure	Timeframe	Lead/Person Responsible
Implement a MAC Billing program	Baseline: 0% of staff tracking time for MAC Billing Target: 100% of eligible staff tracking time for MAC Billing	Start: January 2019 End: January 1, 2020, ongoing	Office Manager, Rhonda Smith

Action Steps:			
- Train an employee to establish and oversee MAC Billing - Train staff on MAC Billing - Implement MAC Billing program - Evaluate MAC Billing program			

Objective 3.2.2	Measure	Timeframe	Lead/Person Responsible
Increase revenue from vaccine billing by 15%	Baseline: $39,314 Target: 15% increase $45,211	Start: April 2018 End: January 2019, ongoing	Nursing Director, Sue Haines

Action Steps:	
• Implement a QI project in order to establish a vaccination billing process • Establish new vendor for vaccine billing • Establish contract with new vendor • Train an employee to implement vaccination billing process • Implement new vaccination billing process • Evaluate new vaccination billing process	

Status:	Date	Update