



LCHD Strategic Plan 2014-2017

Striving to, “Protect, promote, and improve the health of all people to enhance the quality of life”

IMPLEMENTED: January 1, 2014

Revised & Adopted in 2013

**Revised
January 2016**

Version 2.0

Table of Contents

Letter of Introduction	2
Executive Summary.....	3
Mission, Vision, Values.....	4
Strength-Weakness-Opportunity-Challenge Analysis Results	5
Strategic Priorities.....	5
Goals and Objectives.....	6
Goals and Objective Revised Version 2.0	9
Link between Strategic Plan, CHIP, Performance Management/Quality Improvement Plan, & Budget ...	11
Appendix A: Strategic Plan Updating Committee Work Plan	12
Appendix B: S.P.U. Committee Meeting Minutes.....	13
Appendix C: Description of Methods Used and Steps Taken in the Strategic Plan Updating Process	14
Appendix D: Example of PM/QI Dashboard.....	16
Appendix E: Example of 2016 Dashboard	17

Letter or Introduction:

The mission of the La Crosse County Health department is to protect, promote and improve the health of all the people in our county in order to enhance the quality of life. To that end, our staff has always created a strategic plan to guide the efforts of the department and provide goals and benchmarks to assess our progress.

When it became apparent in the spring of 2013 that the format which had served us well for many years, was rather vague, somewhat outdated, and only minimally compliant with the national standards established by the Public Health Accreditation Board (PHAB), it was time for an update of our strategic planning approach. Our intensive preparations for national voluntary accreditation by the PHAB provided added impetus.

The HHS committee, under my direction, established a Strategic Plan Updating (S.P.U.) Committee comprised of staff and board members. This committee efficiently and effectively studied prototypes of PHAB-compliant strategic plans and, using input from a variety of stakeholders, crafted the current LCHD strategic plan, which preserves all the best aspects of our previous work and combines it with current best practices. The end product of this arduous process is a strategic plan that is focused on the jointly developed priorities of this health department, sets a clear path for achieving its goals and objectives in the form of an action plan, and links to other plans used by the LCHD to promote an integrated approach to problem solving and service delivery.

Monica Kruse, Chairperson
La Crosse County Health and Human Services Board

EXECUTIVE SUMMARY

In preparing for national voluntary accreditation by the Public Health Accreditation Board (PHAB) the La Crosse County Health Department (LCHD) created a work-plan (Appendix A) in April 2013 to update and revise its current (2011-2015) strategic plan. The LCHD wanted to ensure the department's strategic plan is in compliance with PHAB's standards and measures.

The first step in updating the department's strategic plan was to form a Strategic Plan Updating (S.P.U.) Committee with membership consisting of division managers, staff, health and human services board members, and the health director. A Wisconsin Population Health Service Fellow facilitated the updating of the strategic plan. After the S.P.U. Committee was formed the updating process was completed swiftly and promptly.

Between May 2013 and September 2013 the S.P.U. Committee met five times for a total of ten hours. During the meetings the S.P.U. Committee reviewed PHAB compliant strategic plans as well as the LCHD's current strategic plan, conducted a strength-weakness-opportunity-challenge (SWOC) analysis, developed mission and vision statements, and determined strategic priorities. Work was also completed electronically by the S.P.U. Committee in order to maximize committee member's time and to meet deadlines outlined in the initial work-plan. Throughout the entire updating process feedback and input was sought via surveys and discussions from health department staff, clients, health and human services board members, and community stakeholders.

In order to select the strategic priorities of the revised strategic plan a nominal group technique was used to prioritize the health department's priorities. Eight strategic priorities were proposed: workforce development, funding, department communication, information technology utilization, program evaluation, priority setting, partnerships/collaboration, and programs/services. The top four priorities were selected. Below are the strategic priorities the health department will work towards in the coming years:

- Priority Setting
- Workforce Development
- Funding
- Partnerships and Collaborations

After strategic priorities were selected S.P.U. Committee members developed several goals and objectives to help move the strategic priorities forward. At this point, it was decided to reach out to division managers to develop action items that would be implemented to help accomplish the objectives. Examples of action items include:

- Staff will participate in an annual exercise of the Public Health Emergency Plan (PHEP)
- Hold at least 2 divisional team building activities annually
- Train 100% of division managers on cost benefit analysis by December 2015
- Host two legislative gatherings a year

Additionally, it is essential for the updated strategic plan to emphasize the connection between it and other pertinent plans used by the LCHD (the Community Health Assessment (CHA), the Community Health Improvement Plan & Process (CHIPP), the health department's performance management and quality improvement plan, and the health department's annual budget). Each component reinforces the next and all are intertwined in purpose; ensuring the health department is addressing the needs of the community by developing, implementing, monitoring performance, engaging in quality improvement initiatives, and evaluating its programs, services, and daily operations.

Ultimately, the S.P.U. Committee developed four main components of the updated and revised strategic plan:

- Mission, Vision, and Value Statements
- Strength-Weakness-Opportunity-Challenge (SWOC) Analysis Results
- Strategic Priorities and Goals, Objectives, and Action Items to achieve the strategic priorities
- The link between the revised strategic plan, CHIP, the Performance Management/Quality Improvement Plan, and the health department's budget

The Strategic Plan Updating Committee decided to use the health department's performance management tracking logs and dashboards to monitor the implementation of the strategic plan and to provide updates on the status of action items identified in the strategic plan.

Mission, Vision, Values

Mission: Protect, promote, and improve the health of all people to enhance the quality of life

Vision: The La Crosse County Health Department will employ well-educated and committed staff that collaborates to provide and advocate for effective and innovative initiatives assuring everyone lives in healthy and sustainable environments with access to tools to improve their own lives.

Together WE Will:

Be **ADVOCATES** by supporting and promoting public health policy and programs while actively seeking out and engaging with the underserved population by continually highlighting accessible services at the LCHD and throughout the community.

Be **INNOVATIVE** by working with public health experts to guarantee the services provided are cutting-edge by utilizing the most recent technology available to reach clients while providing staff the freedom to think creatively when planning population based interventions.

Be **COLLABORATIVE** by leading, assisting, and guiding community partnerships and collaborations while continuously seeking the input and feedback of the Health and Human Service Board and the community.

Be **SENSITIVE** to the various needs in the community and to the public by providing culturally competent programs and services while being aware of staff's needs and opinions by providing an inclusive and diverse environment for all to work and visit.

Be **GOOD STEWARDS** by being accountable to the public's needs and by seeking staff input and feedback when allocating resources, pioneering new and sustainable sources of funding, and providing services.

Be **TRUSTWORTHY** by providing reliable and accurate public health education and information to citizens, legislators, and the media while being a primary resource for public health information in the county.



Reliable
Caring · Innovative Committed
Trustworthy Professional
Integrity Competent
Effective Partnerships
Understanding Advocate
Influential Compassionate
Dedicated

Strength-Weakness-Opportunity-Challenge (SWOC) Analysis Results

Be **EVIDENCE-BASED** by using scientific-based research and data to develop programs and services to effectively and efficiently implement population based interventions while continuously utilizing performance management and quality improvement tools to evaluate all programs and services. The Strategic Plan Updating Committee conducted a SWOC analysis and decided to seek outside feedback from all health department staff, clients, health and human services board members, and vital community partners. In total, there were approximately twenty-two respondents. Data was collected over a period of three weeks in the summer of 2013. The results of the SWOC analysis are as follows:

<p><u>Strength (Internal):</u> <i>External Relationships</i> <i>Programs/Services</i> <i>Workforce Experience/Expertise</i> <i>Innovative and Progress Oriented</i></p>	<p><u>Opportunities (External):</u> <i>Partnerships</i> <i>Global Thinking</i> <i>Communication</i> <i>Innovation</i> <i>Priority Setting</i> <i>Workforce Development</i></p>
<p><u>Weaknesses (Internal):</u> <i>Information Technology</i> <i>Priority Setting</i> <i>Workforce Development</i> <i>Funding</i> <i>Department Communication</i></p>	<p><u>Challenges (External):</u> <i>Addressing the Social Determinants of Health</i> <i>Program Evaluation</i> <i>Funding</i></p>

Strategic priorities

Strategic priorities were selected using a Nominal Group Technique (NGT) to prioritize the eight potential priorities down to four. The four strategic priorities the LCHD will move forward as selected by the S.P.U. Committee are:

- **Priority Setting:** Throughout the strategic plan updating process the theme of priority setting was identified multiple times. The LCHD will use evidence based practices, client and staff feedback, the performance management system, and emerging community needs to set priorities in a more methodical approach.
- **Workforce Development:** Ensuring a competent, trained, and committed workforce is essential for the LCHD. Providing efficient and effective services while being flexible and available to respond to community needs is critical. The health department will implement a department wide workforce development plan and determine how to become the employer of choice in western Wisconsin while being viewed as a premier resource for public health information in the Coulee region.
- **Funding:** Being accountable to taxpayers, staff, and the public is important to improving the health of the population. Resources are limited and it is key to provide staff the opportunity to pursue new and creative ways to fund public health while continuing to educate the public and partners on the savings public health interventions generate. In 2015-2017, the department budgets will align more closely with the strategic plan.
- **Partnerships and Collaborations:** Public health aims to improve the health of populations. In order to do this, partnerships and collaborations are needed to minimize negative health outcomes while maximizing collective impact.

January 2016 the Strategic Priorities were changed to align with the Accreditation Domains & the 10 Essential Public Health Services. Strategic Priorities are referred to as “Goals” in Version 2.0. Priorities for each of the “Goals” in Version 2.0 were selected from the original Action Items from Version 1.0. In addition, the Performance Management Team within the Health Department worked with each Division to develop and track performance measures on their Division dashboard. Two to three performance measures were identified by each Division as priority and added to the Strategic Plan Objectives in Version 2.0 under the revised “Goals”. The original SPU Committee was consulted and provided input on this revision.

Goals, Objectives, & Action Steps – VERSION 1.0

COLOR KEY:

Continue

Achieved

Revised

Removed

Strategic Goal 1: Prioritize the work we do

Objective 1.1: Use evidence based interventions

Action 1.1.1: Train 90% of staff through a Training Learning Center (TLC) on how to determine if a service meets evidence based criteria by December 2014

Action 1.1.2: Identify what percent of services¹ provided by the La Crosse County Health Department are evidence based² in all divisions by December 2015

Action 1.1.3: Evaluate 100% of services that are not evidence based and determine if services are supported by the needs of the community, CHA, CHIPP, or Wisconsin Statutes by June 2016

Action 1.1.4: Based on the results of the evidence based evaluation in 2016, take action to bring one non-evidence based service into compliance³ by December 2017

Objective 1.2: Continuously seek input from internal and external stakeholders

Action Item 1.2.1: Develop a plan by December 2014, to be implemented annually, to collect feedback from internal/external stakeholders and partners on services provided

Action Item 1.2.2: Provide services that address at least 2 of the community health needs from the results of the Community Health Assessment by December 2017

Action Item 1.2.3: Participate with community partners in at least 2 interventions identified in the Community Health Improvement Plan and Process by December 2017

Objective 1.3: Implement a department wide performance management system

Action Item 1.3.1: 75% of staff will participate in audit reviews that occur within their program area by December 2016

Action Item 1.3.2: Research lean management training and decide if staff should be trained in this model by December 2015

Action Item 1.3.3: Meet at least 3 'human characteristics' and 3 'process characteristics' in NACCHO's Roadmap to a Culture of Quality Improvement⁴ by December 2017

Objective 1.4: Be responsive to emerging issues

Action Item 1.4.1: The Health and Human Services Board will consider, and if needed, take action on 2 emerging public health issues annually

Action Item 1.4.2: Staff will participate in an annual exercise of the Public Health Emergency Plan (PHEP)

Action Item 1.4.3: The La Crosse County Health Department will lead 1 community conversation on an emerging issue by December 2017

¹ Services are defined as any program or service within the public health system that fall within one of the [10 Essential Public Health Services](#)

²The definition of 'Evidence based' can be located in the '[Evidence-Based Clinical and Public Health: Generating and Applying the Evidence](#)' Brief used in developing the National Health Plan, Healthy People 2020

³ Compliance as defined by [Health and Human Services Board Resolution #61](#)

⁴ For more information on NACCHO's Roadmap to a Culture of Quality Improvement visit: <http://qiroadmap.org/>

Strategic Goal 2: Ensure a competent, trusted, committed, and motivated workforce

Objective 2.1: Implement the department wide workforce development plan

Action Item 2.1.1: Develop a system to monitor the implementation of the workforce development plan by June 2014

Action Item 2.1.2: Annually report on the implementation of the workforce development plan to staff and the Health and Human Services Board

Objective 2.2: Become an employer of choice for public health professionals in western Wisconsin

Action Item 2.2.1: Hold at least 2 all staff meetings annually

Action Item 2.2.2: Gather employee satisfaction baseline data by December 2014 then evaluate employee satisfaction survey results and implement changes by June 2015

Action Item 2.2.3: Annually conduct employee satisfaction survey in 2015, 2016, and 2017, evaluate results, and implement changes as necessary

Action Item 2.2.4: Each year maintain current employee retention rate equal to the national average for local health departments

Action Item 2.2.5: Develop and implement a system to recognize employees by December 2015

Objective 2.3: Be viewed as a primary reference source of public health information in the community

Action Item 2.3.1: Annually release 24 media releases

Action Item 2.3.2: Annually provide 12 public health presentations to different community members and/or groups

Action Item 2.3.3: Provide timely and relevant public health information to the public by ensuring the La Crosse County Health Department's website receives 36,000 visitors a year

Action Item 2.3.4: The La Crosse County Health Department will use social media outlets 36 times a year to communicate about public health topics with community members

Strategic Goal 3: Balance fiscal responsibility with innovative funding

Objective 3.1: Be accountable, effective, and efficient with resources

Action Item 3.1.1: Annually provide at least 14 programs or services that address at least 7 focus areas in the current state health plan, Healthiest WI 2020⁵

Action Item 3.1.2: Participate in at least 12 financial and program audits a year

Action Item 3.1.3: Each year 100% of divisions will complete a program prioritization tool with each budget cycle

Action Item 3.1.4: Train 100% of division managers on cost benefit analysis by December 2015

Action Item 3.1.5: Complete 1 program cost benefit analysis in 2016 and 2017

Objective 3.2: Assure sustainable programs

Action Item 3.2.1: Annually assess what percent of a full time equivalent (FTE) from tax levy money will be allocated to department-wide grant writing during the budget process

⁵ For more information on Healthiest Wisconsin 2020 click [here](#); this action item is also intended to assist the LCHD in meeting requirements for a Level 3 health department as outlined in [Administrative Rule 140](#)

Action Item 3.2.2: Annually increase fees in budget to account for inflation rates

Action Item 3.2.3: Annually maintain 60% of operating costs not accounted for by tax levy money

Objective 3.3: Assure innovative programs

Action Item 3.3.1: Provide an in-service training to the La Crosse County Board of Supervisors on the benefits of a 'health in all policy' approach to policy development by December 2017

Action Item 3.3.2: Implement two upstream interventions aimed at reducing health disparities by December 2017

Action Item 3.3.3: Coordinate with 2 other county departments to develop and promote one initiative aimed at developing healthy and safe neighborhoods by December 2017

Objective 3.4: Identify the most efficient and effective way to deliver services within the community

Action Item 3.4.1: Determine the feasibility of the La Crosse County Health Department staff to conduct the La Crosse County employee health assessments by December 2014

Action Item 3.4.2: Conduct at least 2 Quality Improvement projects a year

Strategic Goal 4: Participate in, lead, and build effective community partnerships

Objective 4.1: Evaluate engagement in current partnerships

Action Item 4.1.1: Develop a baseline list of community coalitions and partnerships that staff participate in (noting responsibilities, if any) by June 2014

Action Item 4.1.2: Develop an evaluation of coalition and partnership involvement by August 2014

Action Item 4.1.3: Annually evaluate coalition and partnership involvement and determine if staff should continue participating in coalition/partnership

Action Item 4.1.4: Determine the level of collaboration in 2013 the LCHD had with higher institutions of learning⁶ in the community through student internships, presentations to classes, research projects, etc. by December 2014

Action Item 4.1.5: Increase collaboration efforts with all four higher institutions of learning by 2% by December 2017

Objective 4.2: Sustain and build relationships with policy makers and elected officials

Action Item 4.2.1: Host two legislative gatherings a year

Action Item 4.2.2: Bring forth 2 public health resolutions a year to the HHS Board on proposed or current state legislation

Action Item 4.2.3: Work with local, state, and federal legislators to promote two public health policies throughout the county and state by December 2017

⁶ Any higher institution of learning including but not limited to the University of Wisconsin La Crosse, Viterbo University, Western Technical College, Globe University, University of Wisconsin Oshkosh, University of Wisconsin Madison, and Winona State University

VERSION 2.0 2016-2017 Goals & Objectives
(Aligned with Accreditation Domains & 10 Essential Public Health Services)

Version 2.0 KEY: Revised Strategic Priorities (Goals) in GREEN highlighted boxes to reflect alignment:
→ Accreditation Domain 10 Essential Public Health Services
Revised/Added Objectives RED text
No Change to Objective in BLACK text

GOALS (Strategic Priorities):

1 Assess Monitor health status to identify & solve community health problems.

Objective 1.1: Complete a Community Health Assessment by April 1, 2016.

2 Investigate Diagnose & investigate health problems & health hazards in the community.

Objective 2.1: Goal of zero foodborne outbreaks at La Crosse County licensed facilities.

Objective 2.2: Goal of zero waterborne outbreaks at public facilities.

Objective 2.3: Conduct initial investigations on 100% of all confirmed reportable diseases reported annually in the Wisconsin Electronic Disease Surveillance System (WEDSS).

Objective 2.4: Complete 500 Lead Tests annually on La Crosse Women, Infant & Children (WIC) Children.

Objective 2.5: Report 100% of transient non-community water systems with bacteria and nitrate maximum contaminant level violations within 24 hours of test completion.

Objective 2.6: Investigate 100% of reported disease mosquito habitat(s).

#3 Inform & Education Inform, educate and empower people about health issues.

Objective 3.1: Lead one community conversation on an emerging issue by December 2017.

Objective 3.2: 38% of 11 year olds born between 10/1/2004-9/30/2005 will receive one Meningococcal and one HPV vaccination by the end of the year 2016.

Objective 3.3: 30% of infants born to Women, Infant & Children (WIC) mothers who are breastfed at birth will continue breastfeeding through 6 months of age.

Objective 3.4: 70% of children ages 2-5 years participating in La Crosse County Women, Infant & Children (WIC) Program will be not exceed the recommended body mass index (BMI).

#4 Community Engagement Mobilize community partnerships & action to identify & solve health problems.

Objective 4.1: Participate with community partners in two interventions identified in the Community Health Improvement Plan and Process by December 2017.

Objective 4.2: Train seven child care centers to become recognized as Breastfeeding Friendly.

Objective 4.3: Maintain zero heroin overdose deaths among La Crosse County residents.

#5 Policies & Plans Develop policies & plans that support individual & community health efforts.

Objective 5.1: Develop a Community Health Improvement Plan (CHIP) by August 2016.

Objective 5.2: Identify two interventions aimed at reducing health disparities by December 2016.

#6 Public Health Laws Enforce laws & regulations that protect health & ensure safety.

Objective 6.1: Inspect 100% of licensed establishments once every 12 months.

Objective 6.2: Inspect 95% of new well locations annually.

Objective 6.3: Less than 10% of tobacco vendors will violate tobacco age restrictions during WI Wins youth tobacco compliance checks.

Objective 6.4: Investigate 100% of dog and cat bites involving humans or other animals to ensure proper quarantine or rabies testing.

#7 Access to Care

Link people to needed personal health services & assure the provision of health care when otherwise unavailable.

Objective 7.1: Facilitate services that address two of the community health needs from the results of the CHIP by December 2017.

Objective 7.2: Maintain 97% of the contracted monthly caseload in the Women, Infant & Children (WIC) Program.

Objective 7.3: Provide 50 homeless adults with mental health screening and referrals through the CARING program at the Salvation Army Shelter.

Objective 7.4: Provide 450 children age 6 years and under with oral health education, oral health screenings and fluoride varnish applications.

Objective 7.5: Contact 100% of La Crosse County clients referred for HIV Partner Services.

#8 Workforce

Assure competent public & personal health care workforce.

Objective 8.1: Exercise the Public Health Emergency Plan (PHEP) annually.

Objective 8.2: Ensure workforce development training is implemented according to the Workforce Development Plan.

Objective 8.3: Recognize employees through implementation of the Employee Recognition Work Plan.

Objective 8.4: Maintain 24 internship opportunities with higher institutions of learning.

Objective 8.5: Correctly measure and report 80% of clinical and environmental proficiency tests.

#9 Quality Improvement

Evaluate effectiveness, accessibility & quality of personal & population-based health services.

Objective 9.1: Conduct at least 2 quality improvement projects annually.

Objective 9.2: Correct 100% of program evaluation/audit deficiencies within 12 months.

#10 Evidence-Based Practice

Research for new insights & innovative solutions to health problems.

Objective 10.1: Assess 14 programs/services to determine whether they are evidence based by December 2016.

Objective 10.1: Deliver at least 16 educational classes through the Nature Connections program.

#11 Administration & Management

Objective 11.1: Maintain training budget funds.

Objective 11.2: Complete one program cost benefit analysis in 2016 and 2017.

Objective 11.3: Fund no more than 45% of the total Health Department budget using tax levy.

Objective 11.4: Track expense revenues on a monthly basis.

#12 Governance

Objective 12.1: The Health and Human Services Board will consider taking action on 2 emerging public health issues annually.

Objective 12.2: Maintain Department of Health Service Chapter 140 Level III status.

Objective 12.3: Host two legislative gatherings a year.

Objective 12.4: Recommend County resolutions addressing public health concerns to the Health & Human Services Board.

Objective 12.5: Complete Accreditation Action Plan by August 2016 to become nationally accredited by December 2016.

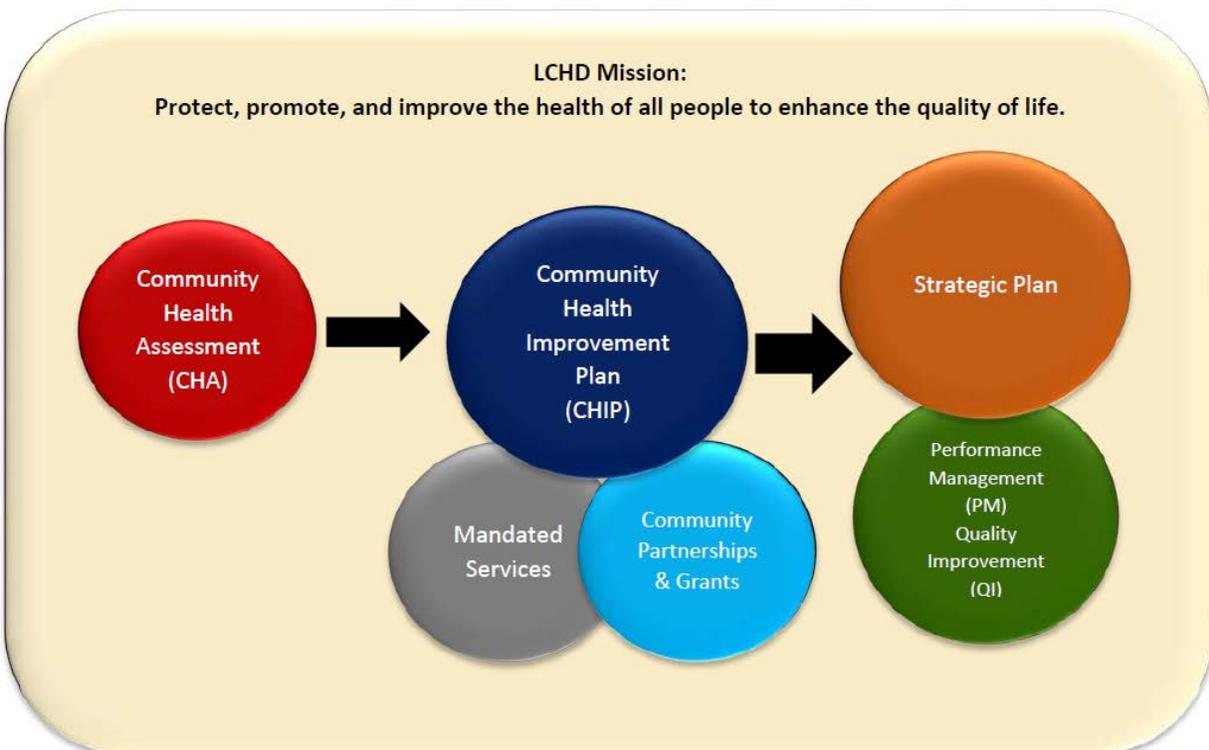
Linkages with the CHIP, Performance Management/Quality Improvement Plan, & Budget

The Community Health Assessment (CHA) provides the foundation for the department Community Health Improvement Plan (CHIP), Performance Management and Quality Improvement Plan (PM/QI) and the Strategic Plan. The 2012-2015 La Crosse County Health Department Community Health Assessment (CHA) was conducted with the Great Rivers United Way and provided the foundation for three of the major plans developed by the health department. The 2016-2021 Community Health Assessment, conducted by La Crosse County Health Department, which includes data from the Great Rivers United Way COMPASS report and additional data collected by our department, provides the foundation for Version 2.0 of the Strategic Plan and revisions for our CHIP and Performance Management plans.

The CHA identifies the health needs of the community while the CHIP is a community-wide plan to implement initiatives to improve the health of all community members. The La Crosse County Health Department then uses the results of the CHIP to guide the strategic planning process. The department's strategic plan guides its daily operations. Each year the department's strategic plan also helps inform the CHIP as it is reviewed and updated. In order to guarantee the CHIP and the strategic plan's goals and objectives are effectively and efficiently tracked, analyzed and executed, the PM/QI Plan provides a system to identify priority objectives and track the progress. The PM/QI plan allows programs, services, and department operations to be monitored, their progress reported routinely, and quality improvement measures started if activities are not meeting their established targets. Lastly, the health department's annual budget provides monetary limits for the department to implement plans in order to meet the needs of the community.

Figure 1 shows the relationship between all components with the final outcome being a fulfilled mission of the La Crosse County Health Department.

Figure 1:



APPENDIX A: Strategic Plan Updating Committee

S.P.U. Committee Membership: Doug Mormann, MS; Sarah Spah, MSN; Jim Steinhoff, MS; Dr. Cheri Olson, MD; Bill Schultz, Paula Silha, BS, MCHES, and Tiffany Lein, RD, CD

The Strategic Plan Updating Committee and process was facilitated by Lindsay Menard, MPH

April 2013:

- A) Identify and confirm 6 staff members to be on the Strategic Plan Updating (S.P.U.) Committee
- B) Identify and confirm 1-2 HHS board members to sit on S.P.U. Committee

May 29, 2013:

- A) One 1-hour meeting (7:00 am - 8:00 am in room 2000 in the HHS Building)
 - a. Review current 2011-2015 plan
 - b. Provide examples of Public Health Accreditation Board (PHAB) compliant strategic plans
 - c. Overview of S.P.U. process

June 18, 2013:

- A) One 3-hour meeting (8:00 am - 11:00 am in room 2100 in the HHS Building)
 - a. Conduct a Strength-Weakness-Opportunity-and Challenge (SWOC) analysis

July 17, 2013:

- A) One 3-hour meeting (8:00 am – 11:00 am in room 2000 HHS Building)
 - a. Review current mission, vision, goals, and objectives and develop amendments and changes for revised plan
 - b. Identify and confirm the health department's core values

July 18, 2013 – August 30, 2013:

- A) Lindsay will develop revised strategic plan

September 10th, 2013:

- A) One 1-hour meeting to review plan (1:00 pm – 2:00 pm in room 2000 HHS Building)
 - a. Finalized mission, vision, and value statements

October 2013:

- A) One 2- hour meeting of the S.P.U. Committee on **October 3rd, 2013** to finalize goals and objectives
- B) Lindsay develops second draft of the strategic plan by **October 8th, 2013**
- C) Division managers, Doug Mormann (Health Director/Officer), and Lindsay Menard (Strategic Plan Facilitator) develop action items based on available staff, budgets, and other available resources for each objective at **October 11th, 2013** division manager retreat
- D) Division managers, Doug Mormann (Health Director/Officer), and Lindsay Menard (Strategic Plan Facilitator) finish developing action items based on available staff, budgets, and other available resources for each objective at **October 25th, 2013** division manager meeting

November 2013:

- A) Lindsay and Doug quantified strategic plan by **November 11, 2013**
- B) Lindsay sends out quantified strategic plan (version 5) on November 11th, 2013 to division managers for review and discussion at the division manager meeting on November 22nd, 2013
- C) Lindsay sends out quantified strategic plan (version 5) on November 11th, 2013 to S.P.U. Committee members to review and provide feedback on by November 22nd, 2013
- D) Lindsay updates strategic plan with feedback from November 22nd, 2013 division manager meeting creating version 6
- E) S.P.U. Committee and division managers accept final draft (version 6) of strategic plan by **November 27th, 2013**

December 2013:

- A) Bring final strategic plan to HHS Board meeting on December 10th, 2013 to take action on
- B) Either adopt plan in December 2013 or make amendments to it based on HHS Board feedback
- C) Implement plan starting January 1, 2014

December 2015:

Health Department formed a Strategic Planning Team to update current version of Plan. It was decided to develop version 2.0 to align with Accreditation Domains & 10 Essential Public Health Services. Members include Jim Steinhoff, Diane Panzer, Jennifer Logging, Christine Gillespie and Joe Larson. The original SPU was consulted and feedback integrated into Version 2.0.

Appendix B: S.P.U. Committee Meeting Minutes

 La Crosse County	MEETING AGENDA/MINUTES		
	MEETING: Strategic Planning (S.P.U.) Committee meeting		
	PURPOSE: To select the health departments goals, objectives, tactics to accomplish tasks, and core values for the updated strategic plan		
Meeting Date	Location(s)	Start Time	End Time
7/17/13	2000 in HHS Building	8:00 am	11:00 am
Facilitator/Lead:	Lindsay	Minutes Prepared by:	Lindsay
ATTENDEES (Bolded in attendance)			
X Doug Mormann, Health Director/Health Officer X Bill Schultz, Member Health and Human Services Board	<input type="checkbox"/> Sarah Spah, Public Health Nursing Division Manager X Paula Silha, Health Education staff member, BS, MCHES	X Jim Steinhoff, Environmental Health Division manager X Tiffany Lein, Health/Nutrition Health Education staff member, RD, CD	X Dr. Cheri Olson, MD and Member, Health and Human Services Board
Items/Actions to Be Discussed	Outcome/Notes		Action Items
Review Meeting Minutes From 6/18/13	-Discussion occurred -No explicit feedback was received from other S.P.U. Committee members on SWOC analysis from key stakeholders and partners. Stakeholders feel the S.P.U. Committee is heading in the right direction.		N/A
Conduct Core Value Analysis, Review Staff Results of Core Value Analysis Survey and Develop Value Statements	-Committee members brainstormed core values -Group reviewed staff's input on core values and developed a list on committee's and staff's recommendations -Identified core values for strategic plan are: Together we will: 1) Advocate (include be accessible while actively seeking out and fighting for the underserved) 2) Innovate 3) Collaborate 4) Be Sensitive 5) Be Good Stewards 6) Be Trustworthy 7) Be Evidence Based		Lindsay will develop core value statements and will forward them to S.P.U. Committee members to discuss and review via email. S.P.U. Committee members will provide feedback in a timely manner
Review SWOC Analysis Results From Staff Survey	-Committee Reviewed the SWOC analysis		-N/A
Prioritize SWOCs	-Did not prioritize SWOCs		-N/A
Review and Potentially	-Committee developed a mission and vision statement:		-Lindsay will develop draft goals and objectives and

<p>Develop Mission Statement, Vision Statement Goals, Objectives, and Tactics</p>	<p>Mission Statement: Protect, promote, and improve health to enhance the quality of life</p> <p>Vision: A well-educated, dedicated, and committed staff that collaborates to provide and advocate for effective and innovative initiatives ensuring everyone lives in health and sustainable environments with access to tools to improve their own lives</p>	<p>will forward them on to S.P.U. Committee members to discuss and review via email. Committee members will provide feedback in a timely manner -Lindsay will draft strategic plan by August 23rd and will email out to committee members by August 27th</p>
<p>Next Meeting</p>	<p>September 10th at 1:00 pm in room 2000s HHS Building</p>	

Appendix C: Description of Methods Used and Steps

The revising of the La Crosse County Health Department Strategic Plan started in April 2013 and concluded with its implementation in January 2014. Throughout updating and revising the plan, the S.P.U. Committee thought it essential to receive feedback from several groups of people---department staff (including division managers), clients, health and human services board members, and external partners. At crucial points in the process these groups of people were also asked to take surveys and/or participate in discussions in which the S.P.U. Committee's progress was reviewed. The majority of the groups mentioned above were asked to provide their insights on internal strengths, internal weaknesses, external opportunities, and external challenges (SWOC) of the health department as the S.P.U. Committee was simultaneously conducting their SWOC analysis in the summer of 2013. Due to time constraints, an environmental scan and stakeholder analysis were not completed. In creating future strategic plans it is recommended to perform these two steps in the early stages of the planning process.

The Health and Human Services (HHS) Board members that participated in the S.P.U. Committee updated the full HHS Board at monthly meetings. At HHS Board meetings, board members were allowed to provide feedback and ask questions about the process. As the plan was near completion, the health director (Doug Mormann) held a half-day retreat on October 11th, 2013 in which division managers developed action items to fulfill the strategic priorities. Time was spent at extra division manager meetings on October 25th and November 22nd, 2013 to finish finalizing the action items. When developing the action items division managers and the health director were asked to reference the results of the SWOC analysis and the state health plan, Healthiest Wisconsin 2020.

Lindsay (Strategic Plan and Process Facilitator) and Doug Mormann (Health Director/Officer) quantified the strategic plan during the first two weeks of November. The division managers and health director ensured the action items were Specific-Measurable-Achievable-Relevant-Timely (SMART). The final review of the updated strategic plan (version 5) was completed by the health director, division managers, and the S.P.U. Committee in the last weeks of November 2013. After the action items were finalized, division managers were asked to develop work-plans to ensure the strategic plan would be implemented. When developing work plans for their division, division managers reviewed a calendar of action items associated with its corresponding year of completion to determine two things. The first decision being whether or not it would be feasible to complete all of the action items listed in the strategic plan by December 2017 and the second choice was to select division managers to monitor the progress of each action item.

It is planned to adopt the strategic plan in December 2013 after receiving the approval from the Health and Human Services Board. Implementation of the updated strategic plan is scheduled to start in January 2014 and conclude in December of 2017. The revised plan will be reviewed as needed to purposely ensure the health department is moving forward in alignment with the CHA, CHIP, and budget.

Revision of the plan was facilitated by Jim Steinhoff, Diane Panzer, Jennifer Loging, Christine Gillespie and Joseph Larson in December 2015-January 2016 in consultation with the original SPU Committee members.

Appendix D: Example of PM/QI Dashboard

2015 La Crosse County Health Department Performance Management Tracking Log
4th Quarter

Action Item #	Performance Standard	Performance Measure	Baseline	Target in 2015	Current Value	Status	Follow-up: QI/IP/PP/C/A
Strategic Goal 1: Prioritize the Work We Do							
1.1.2	Strategic Plan	Assess 14 programs/services provided by the La Crosse County Health Department are evidence based by December 2015.	New Initiative	14	3		To be completed by 12/31/16
1.2.1	Strategic Plan	Develop survey to continuously collect feedback from internal & external stakeholders and partners on services provided by December 2015.	New Initiative	Yes=1, No=0	2		
1.2.2	Strategic Plan	Provide services that address at least 2 of the community health needs from the results of the Community Health Assessment by December 2017:	New Initiative	1 in 2015, 1 in 2016	1		
1.2.2	Strategic Plan	Percent of children, ages 2-5 years, participating in the La Crosse County WIC Program that are overweight/obese.	New Initiative	30%	0.31725		
1.3.2	Strategic Plan	Research lean management training and determine if staff should be trained in this model by December 2015.	New Initiative	Yes=1, No=0	1		Not feasible at this time.
1.4.1	Strategic Plan	Health & Human Services Council will consider, address, and make action on 2 emerging public health issues annually.	New Initiative	2	3		
1.4.2	Strategic Plan	Staff will participate in annual exercises for the Public Health Emergency Plan (PHEP).	New Initiative	1	1		
Strategic Goal 2: Ensure a competent, trusted, and motivated workforce							
2.1.2	Strategic Plan	Annually review the implementation of workforce development plan to the Health & Human Services Council.	Yes	Yes=3+, No=0	3		
2.1.2	Strategic Plan	Management staff will be trained on cultural competency via all staff or TLC.	New Initiative	100%	97		
2.2.1	Strategic Plan	Hold at least 2 staff meetings annually.	2	2	2		
2.2.3	Strategic Plan	Annually conduct employee satisfaction survey in 2015, 2016, 2017, review results, and implement changes as necessary.	New Initiative	Yes=2, No=0	2		
2.2.4	Strategic Plan	Maintain the Health Department staff average longevity at 9.5 years or higher by December 31, 2015.	10.44	9.5	10.803333		
2.2.5	Strategic Plan	Develop & implement a system to recognize employees by December 2015.	New Initiative	Yes=1, No=0	1		
2.3.1	Strategic Plan	Annually release 24 media releases.	61	24	58		
	Strategic Plan	Annually provide 24 media interviews by December 2015.	New Initiative	24	338		
2.3.2	Strategic Plan	Annually provide 12 public health presentations to different community members and/or groups.	347	12	153		
2.3.3	Strategic Plan	Provide timely and relevant public health information to the public by ensuring the La Crosse County Health Department's website receives 36,000 visitors a year.	28,829	36,000	41,100		
2.3.4	Strategic Plan	The La Crosse County Health Department will use social media outlets 50 times a year to communicate about the public health topics with community members.	568	50	494		
Strategic Goal 3: Balance Fiscal Responsibility with Innovative Funding							
3.1.1	Strategic Plan	Annually provide at least 14 programs or services that address at least 7 focus areas in the current state health plan, Healthiest WI 2020.	15	14	14		
3.1.2	Strategic Plan	Participate in at least 12 financial and program audits/reviews a year.	12	12	9		
3.1.3	Strategic Plan	Each year 100% of divisions will complete a program prioritization tool with each budget cycle.	100%	100%	100%		
3.1.4	Strategic Plan	Train 100% of division managers on cost benefit analysis by December 2015.	New Initiative	100%	100%		
3.2.1	Strategic Plan	Annually assess what percent of a full time equivalent (FTE) from tax levy money will be allocated to department-wide grant writing during the budget process.	New Initiative	Yes=1, No=0	1		



La Crosse County Health Department

Administration Performance Dashboard

Mission: To protect, promote, and improve the health of all people to enhance the quality of life.



Program Manager: Jim Steinhoff

Report Date: 1/8/2016

Key Performance Indicators	2014	2015	2016	2017	2016 YTD	Annual Target		Program/Division	Strategic Plan Goal
10.1: Assess >= 14 programs/services provided by the La Crosse County Health Department for evidence based practices.	0	5	0	0	0	14	⊗	Administration	Evidence-Based Practice/Research for new insights & innovative solutions to health problems
7.1: Facilitate services that address at least 2 of the community health needs from the results of the CHIP by December 2017.	0	0	0	0	0	2	⊗	Administration	Access to Care/Link people to needed personal health services & assure the provision of health care when otherwise unavailable
4.1: Participate with community partners in at least 2 interventions identified in the Community Health Improvement Plan and Process by December 2017.	0	0	0	0	0	2	⊗	Administration	Community Engagement/Mobilize community partnerships & action to identify & solve health problems
5.1: Develop a Community Health Improvement Plan (CHIP) by August 2016.	0%	0%	0%	0%	0%	100%	⊗	Administration	Policies & Plans/Develop policies & Plans that support individual & community health efforts
9.2: Required program staff will participate in programs being evaluated annually.	0	0	0	0	0	1	⊗	Administration	Quality Improvement/Evaluate effectiveness, accessibility & quality of personal & population-based health services
12.1: The Health and Human Services Board will consider, and if needed, take action on 2 emerging public health issues annually.	10	3	0	0	0	2	⊗	Administration - HHS Board	Accreditation Goal 12: Governance
8.1: The Public health Emergency Plan will be exercised annually.	1	1	0	0	0	1	⊗	Administration	Workforce/Assure competent public & personal health care workforce
3.1: The La Crosse County Health Department will lead 1 community conversation on an emergency issue by December 2016.	0	0	0	0	0	1	⊗	Administration	Inform & Educate/Inform, educate & empower people about health issues
8.2: Ensure that all Development Plan Trainings schedules are reviewed and implemented.	7	7	0	0	0	1	⊗	Administration	Workforce/Assure competent public & personal health care workforce
8.3: Maintain a system to recognize employees through implementation of the Employee Recognition Committee annual work plan.	1	1	0	0	0	1	⊗	Administration	Workforce/Assure competent public & personal health care workforce
11.1: Seven Divisions within the Health Department will maintain training budget funds.	7	7	0	0	0	7	⊗	Administration	Accreditation Goal 11: Administrative & Management
12.7: Maintain Wisconsin Health Department Level III Status.	1	1	0	0	0	1	⊗	Administration	Accreditation Goal 12: Governance
11.2: Complete 1 program cost benefit analysis in 2016 and 2017.	0	0	0	0	0	1	⊗	Fiscal	Accreditation Goal 11: Administrative & Management
11.3: Maintain 40% of total Health Department budget through grant funding.	40%	40%	0%	0%	0%	40%	⊗	Fiscal	Accreditation Goal 11: Administrative & Management
5.2: Identify 2 interventions aimed at reducing health disparities by December 2016.	0	0	0	0	0	2	⊗	Administration	Policies & Plans/Develop policies & Plans that support individual & community health efforts
9.1: Conduct at least 2 Quality Improvement projects a year.	2	2	0	0	0	2	⊗	Administration	Quality Improvement/Evaluate effectiveness, accessibility & quality of personal & population-based health services
Action Item 3.4.3: Identify 2 program areas and conduct an assessment with partners to determine health care services provided (within the 2 program areas) and identify gaps in coverage by December 2016.	0	0	0	0	0	2	⊗	Strategic Goal 3: Balance fiscal responsibility with innovative funding	Objective 3.4: Identify the most efficient and effective way to deliver services within the community
Action Item 3.4.4: Develop a plan to resolve gaps in health care coverage (of the 2 identified program areas) with partners by December 2017.	0	0	0	0	0	2	⊗	Strategic Goal 3: Balance fiscal responsibility with innovative funding	Objective 3.4: Identify the most efficient and effective way to deliver services within the community
1.1: Complete Community Health Needs Assessment by March 2016.	0	0	0	0	0	1	⊗	Administration	Assess/Monitor health status to identify & solve community health problems
8.4: Maintain 24 internship opportunities or greater with higher institutions of learning.	37	24	0	0	0	24	⊗	Administration	Workforce/Assure competent public & personal health care workforce
12.3: Host two legislative gatherings a year	2	2	0	0	0	2	⊗	Administration	Accreditation Goal 12: Governance
12.4: Bring forth public health resolutions as needed to the HHS Board on proposed or current state legislation	10	2	0	0	0	1	⊗	Administration	Accreditation Goal 12: Governance
11.4: Track expense/revenues on a monthly basis.	12	12	0	0	0	12	⊗	Fiscal	Accreditation Goal 11: Administrative & Management
12.5: Complete Accreditation Action Plan by August 2016 to become nationally accredited by December 2016.	0	0	0	0	0	6	⊗	Administration	Accreditation Goal 12: Governance

DRAFT 2016 DASHBOARD