



# Strategic Plan 2012-2015

*Moving from Good to Great*

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## **What is Strategic Planning?**

The Public Health Accreditation Board (PHAB) defines strategic planning as "a disciplined process aimed at producing fundamental decisions and actions that will shape and guide what an organization is, what it does, and why it does what it does. The process of assessing a changing environment to create a vision of the future; determining how the organization fits into the anticipated environment, based on its mission, strengths, and weaknesses; then setting in motion a plan of action to position the organization."<sup>1</sup>

## **What is a Health Department Strategic Plan?**

An organizational strategic plan provides a local health department (LHD) and its stakeholders with a clear picture of where it is headed, what it plans to achieve, the methods by which it will succeed, and the measures to monitor progress. It is a leadership tool grounded in decisions the organization has made about strategic priorities for the near future (usually the next three to five years). The plan communicates these priorities and provides a basis for future decision-making.<sup>2</sup>

## **How Will Henry County Health Department Use Its Strategic Plan?**

The Henry County Health Department Strategic Plan defines for Henry County residents, partnering agencies and organizations, and our staff where our agency is headed, what we plan to achieve, how we will succeed, and how we will monitor and measure progress. The Board of Health and Health Commissioner will use the Strategic Plan to guide the Henry County Health Department from being a "good" health department to becoming a great health department, as defined by our Pillars of Excellence (see page 3).

Henry County Health Department will also use its strategic plan to pursue and achieve national, voluntary accreditation through the Public Health Accreditation Board (PHAB), the national accrediting body for Tribal, state, local and territorial public health departments.<sup>3</sup> A strategic plan is so fundamental to effective management that it is one of three prerequisites that must be completed before a local health department can apply for accreditation.

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<sup>1</sup> Public Health Accreditation Board. *Acronyms and Glossary of Terms*, Version 1.0, Approved September 2011. <http://www.phaboard.org/wp-content/uploads/PHAB-Acronyms-and-Glossary-of-Terms-Version-1.0.pdf>. Accessed February 20, 2012.

<sup>2</sup> National Association of County and City Health Officials. *Developing a Local Health Department Strategic Plan: A How-To Guide*. Washington, D.C: 2010.

<sup>3</sup> Public Health Accreditation Board website. [www.phaboard.org](http://www.phaboard.org). Last accessed on August 7, 2012.

# Henry County Health Department

## PILLARS OF EXCELLENCE

### PEOPLE

To be the public health employer of choice in northwest Ohio

### SERVICE

To consistently provide exceptional service

### QUALITY

To provide client-centered public health services that are safe, effective, timely, efficient, and equitable

### GROWTH

To lead northwest Ohio in implementing effective public health interventions that improve the lives of local residents

### FINANCE

To maintain adequate funding to support the provision of essential public health services

## **How Was the Henry County Health Department Strategic Plan Developed?**

Henry County Health Department began its strategic planning efforts by conducting a Community Health Assessment (CHA) with the Henry County Health Partners in 2010. The 2010 Henry County Community Health Assessment Report is available online at [www.henrycohd.org](http://www.henrycohd.org). The results were presented at two community meetings in September, 2010.

The Community Health Improvement Planning process began in December 2010 and continued throughout 2011 and into 2012. The full planning process is outlined in the 2012 Henry County Community Health Improvement Plan (CHIP), which will also be available online at [www.henrycohd.org](http://www.henrycohd.org) in September 2012.

Henry County Health Department's strategic planning activities were done incrementally between July 2010 and August 2012. The most intensive portions of the strategic planning process began in earnest once the bulk of the CHIP process was completed in early fall 2011.

Health Department strategic planning efforts involved Health Department staff, management, Health Commissioner, and Board of Health members; local residents; Health Department clients; and community agencies that partner with Henry County Health Department. Many of these activities were led by Health Commissioner Anne Goon, MS, RD, LD. Joanne Pearsol, M.Ed, MCHES, Associate Director of the Center for Public Health Practice at The Ohio State University College of Public Health, was also contracted for several activities using funds received for this purpose from the Ohio Department of Health. These strategic planning activities are outlined in the following sections.

## **Henry County Health Department's Mission, Vision, and Values**

Henry County Health Department staff began their examination of the agency's mission, vision, and values during a Staff Retreat in July 2010; several Board of Health members also participated. After considering the vision and mission statements and how these statements relate to what they do at the Health Department, employees were asked to respond to several questions:

1. What behaviors do Health Department clients value?
2. What behaviors do Health Department employees value in co-workers?
3. What behaviors do Health Department employees value in supervisors?
4. What behaviors do Health Department employees value when they are the patient, the client, or the customer?

The responses provided by staff at this Staff Retreat and to the Health Department's initial Employee Satisfaction Survey in July 2010 were used to develop agency Standards of Conduct (located in

# Henry County Health Department Strategic Plan

Appendix A.) Crafted by a workgroup of employee volunteers and vetted with all staff, these standards outlined the behaviors that all staff are expected to demonstrate to clients, community members, and co-workers. The six workgroup members came from all divisions of the Health Department, with four being line staff. The Health Department Standards of Conduct were presented to and adopted by the Board of Health in November 2010.

Through exercises conducted over a series of several Quarterly Employee Forums in 2011, staff examined the mission and vision statements more thoroughly. The final vision and mission statements selected by employees and approved by the Board of Health in September 2011 were:

**Vision: To be a public health leader that embraces excellence and collaboration to optimize the health of residents of Northwest Ohio.**

**Mission: To improve the quality of life for residents of Henry County and northwest Ohio through health promotion, health education, and disease prevention.**

## **Stakeholder Engagement**

Stakeholder input was intentionally sought through several different methods: 1) annual Employee Satisfaction Surveys (completed in July 2010 and May 2011); 2) Staff Ideas for Growth generated at the July 2010 Staff Retreat; 3) on-going Client Experience Surveys (begun in July 2010); 4) a “Health Priorities and Concerns of Henry County Residents” survey conducted in early fall 2011; and 5) Stakeholder Focus Groups (completed in October 2011). These reports were used during the SWOT analysis process (all located in Appendix B).

## **Analysis of Strengths, Weaknesses, Opportunities and Threats (SWOT) and Identification of Strategic Priorities**

Joanne Pearsol facilitated two strategic planning sessions (one full-day, one one-half day) in November and December 2011. All Board members were invited to participate, as were all Division Directors. The Strategic Planning team also included four staff as volunteer representatives of their divisions. The following persons participated in one or more strategic planning sessions: Roger Richard and Wallace Nelson (representing the Board of Health); Gloria Arps, Nancy Bannister, Jennifer Imthurn, and Melissa McHugh (representing staff); and Peg Dammann, Anne Goon, Julie Lauf, Jon Lindsay, Julie McHugh, Viola Ordaz, Marianne Shawley (representing the agency’s management team).

Prior to the first planning session, all staff and Board members were invited to review the information outlined in the sections above and complete a SWOT analysis.

## Henry County Health Department Strategic Plan

At the conclusion of the first session, the Strategic Planning Team identified six Strategic Priorities for the next three years:

1. Effectively use of technology;
2. Strategic funding decisions;
3. Collective communications to improve the public's perception;
4. Collaboration and networking for growth;
5. Facility [improvements]; and
6. Improved internal processes.

The following seven months (January-July 2012) were used to develop detailed action plans for addressing these Strategic Priorities, with a break in the middle of this time period for the Health Commissioner to participate on the Association of Ohio Health Commissioners' Public Health Futures Committee. This ad hoc committee was charged with developing a new model or set of preferred models for Ohio's local governmental public health system that enhances quality, assures value, and attains sustainable financing in the future. This participation informed the final stages of the Health Department's strategic planning efforts.

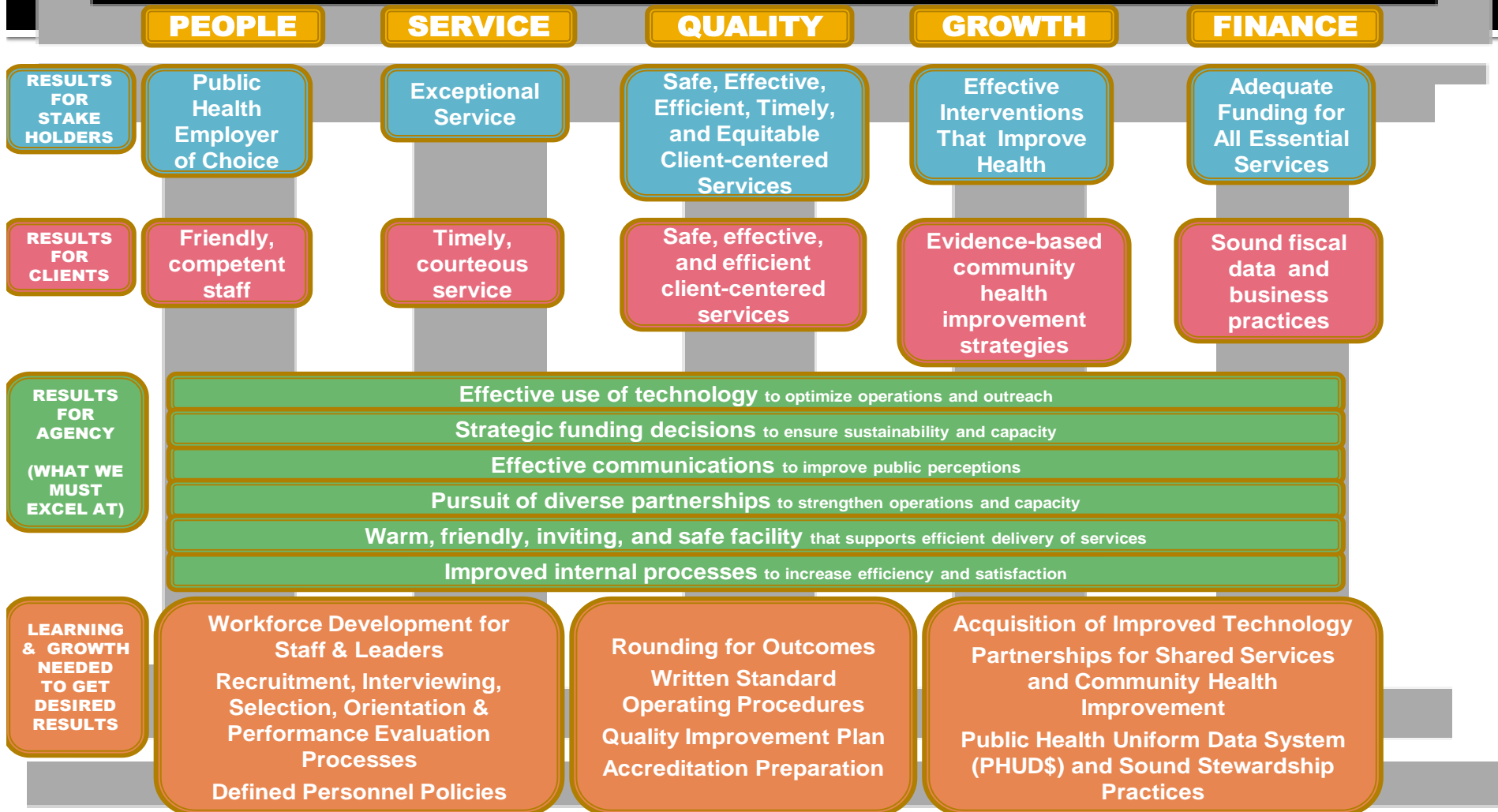
Henry County Health Department's Strategic Plan for 2012-2015 is summarized in the Strategy Map on page 6.

The action plans for each Strategic Priority follow on pages 7-28.

# Henry County Health Department Strategic Plan



**Vision:** To be a public health leader that embraces excellence and collaboration  
**Mission:** Improve quality of life through health promotion, health education, and disease prevention.



**Henry County Health Department Strategic Plan (2012 – 2015)**  
**Action Plans**

**Strategic Priority: Effective Use of Technology**

**Goal 1: Henry County Health Department will effectively use technology to optimize the delivery of public health services.**

**Summary:** Effectively using current technology will allow Henry County Health Department to optimize its business operations and community outreach. Updating fiscal, personnel, and non-clinical software and adopting electronic health records that meet federal meaningful use requirements will make it possible for Henry County Health Department to continue providing high quality public health services that are timely, efficient, convenient, accurate, and HIPAA-compliant. HCHD will strive to acquire and use software and hardware that are financially feasible, efficient, and secure.

- Objective 1:** Continuously maintain computer hardware and software at levels required for efficient operations.
- Objective 2:** 100% of Henry County Health Department staff will competently perform essential job functions requiring the use of computers or other current technology by October 31, 2013.
- Objective 3:** Create Health Department technology team with representation from all clinical and non-clinical areas by October 1, 2012.
- Objective 4:** Update accounting and payroll software by December 31, 2013.
- Objective 5:** Improve current or implement new phone system by December 31, 2013.
- Objective 6:** Implement electronic health records for clinical services (medical and dental) by December 31, 2014.
- Objective 7:** Update software for other non-clinical programs (e.g. environmental health) by December 31, 2015.

<b>Objective 1: Continuously maintain computer hardware and software at levels required for efficient operations.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Maintain current inventory of all HCHD computer hardware and software.	Jon Lindsay, Anne Goon	Bruce Guyer, EK Computer	Service	8/1/2012	9/30/2012 (on-going)	Electronic/printed inventory of computer hardware and software	
2. Develop and implement routine maintenance and replacement schedule for hardware and software.	Jon Lindsay, Anne Goon	Bruce Guyer, EK Computer		10/1/2012	12/31/2012 (on-going)	Electronic/printed maintenance and replacement schedule Actual maintenance and replacement of hardware and software according to schedule	



**Henry County Health Department Strategic Plan (2012 – 2015)  
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<b>Objective 2: 100% of Henry County Health Department staff will competently perform essential job functions requiring the use of computers or other current technology by June 30, 2013.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Identify/create tool to assess staff's current computer skills and skills needed to perform essential functions of each position.	Division Directors	Viola Ordaz	People	1/1/13	3/31/13	ID or creation of computer skills assessment tool	
2. Identify computer training needs of current employees by administering assessment tool. Identify training needs of new employees by administering test during interview or orientation process on an on-going basis.	All Employees, Division Directors	Viola Ordaz		4/1/13	10/31/13 (on-going)	Aggregate staff training needs report	
3. Establish and implement on-going training plan to provide employees with needed skills. Training plan will identify training resources and opportunities available in or near Henry County.	Division Directors	Viola Ordaz		7/1/13	On-going	Staff computer skills training plan (as part of workforce development plan) Staff training logs, transcripts, certificates verifying completion of training	

<b>Objective 3: Create Health Department technology team with representation from all clinical and non-clinical areas by October 1, 2012.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Create Health Department technology team, with representation from all clinical and non-clinical areas, to accomplish Objectives 4-7.	J Lauf, J Lindsay, M Shawley, J McHugh, N Bannister, J Imthurn, others....	Jon Lindsay	Service	10/1/12	On-going	Creation of Technology Team Completion of Objectives 4-7	

## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

Objective 4: Update accounting and payroll software by December 31, 2013.							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Identify needs and wants for accounting and payroll software.	Technology Team members, A Goon, and others as appropriate (B Guyer?)	Julie McHugh	Service	10/1/12	12/30/12	Implementation of updated accounting and payroll software	
2. Research software.	"	"		10/1/12	3/31/13		
3. Select most cost-effective product that meets identified needs.	"	"		4/1/13	4/30/13		
4. Procure financing and purchase software.	A Goon	"		4/1/13	8/31/13		
5. Implement software.	Above team, B Guyer	"		9/1/13	12/31/13		

Objective 5: Improve current or implement new phone system by December 31, 2013.							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Identify needs and wants for phone system.	J Imthurn, A Murray, D Ferreira, L Rosebrock, other Tech Team members, B Guyer?	Viola Ordaz	Service	9/1/12	12/31/12	Implementation of improved or new phone system	
2. Research systems.	"	"		1/1/13	3/31/13		
3. Select most cost-effective product that meets identified needs.	Above group + A Goon, J McHugh	"		4/1/13	4/30/13		
4. Procure financing and purchase system.	A Goon, J McHugh	"		5/1/13	7/31/13		
5. Implement system.	Above team, B Guyer	"		8/1/13	12/31/13		

**Henry County Health Department Strategic Plan (2012 – 2015)  
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<b>Objective 6: Implement electronic health records for clinical services (medical and dental) by December 31, 2014.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Use Welch-Allyn tool to identify needs and wants for electronic health record for clinical services (medical and dental).	Technology Team; B Hoffman; PHN, Clerical, and Dental staff; B Guyer?	J Lauf and M Shawley	Service	8/1/12	9/30/12	Implementation of electronic health record Receipt of Medicaid incentive funding for meeting meaningful use requirements	
2. Research EHR systems.		"		8/1/12	3/31/13		
3. Select most cost-effective product(s) that meet identified needs.	Above group + A Goon, J McHugh	"		4/1/13	6/30/13		
4. Procure financing and purchase system(s).	A Goon, J McHugh	"		7/1/13	12/31/13		
5. Implement system(s).	Above team, B Guyer	"		1/1/14	6/30/14		
6. Meet meaningful use requirements and submit required documentation to receive Medicaid incentive funding.	Technology Team, B Guyer	"		1-2 qtrs after implementing	Through end of funding		

<b>Objective 7: Update software for other non-clinical programs (e.g. environmental health) by December 31, 2015.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Identify needs and wants for EH or other non-clinical software.	Technology Team, and others as appropriate	Jon Lindsay	Service	7/1/14	10/31/14	Implementation of new EH or other non-clinical software	
2. Research systems.		"		7/1/14	10/31/14		
3. Select most cost-effective product that meets identified needs.	Above team + A Goon, J McHugh	"		11/1/14	12/31/14		
4. Procure financing and purchase system.	AGoon, JMcHugh	"		1/1/15	6/30/15		
5. Implement system.	Above team, B Guyer	"		7/1/15	12/31/15		

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**Strategic Priority: Strategic Funding Decisions**

**Goal 2: Henry County Health Department will use sound fiscal data and business practices to ensure its sustainability and capacity to deliver core public health services.**

**Summary:** The financial viability of HCHD is influenced by the overall economic climate, national and state funding priorities, and by service delivery costs. HCHD will make all financial decisions based on established, proven business practices and will seek funding opportunities that are aligned with community needs and departmental goals for growth.

<p><b>Objective 1: Implement key financial analysis and business management practices by December 31, 2013.</b></p> <p><b>Objective 2: Increase business management skills of Health Department management by June 30, 2014.</b></p> <p><b>Objective 3: Increase financial awareness among Board of Health members by December 31, 2014.</b></p> <p><b>Objective 4: Continuously seek funding opportunities that support Health Department capacity, sustainability, and growth.</b></p>
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<b>Objective 1: Implement key financial analysis and business management practices by December 31, 2013.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Implement rolling 5-year Health District budget projections that are updated and presented to the Board of Health semi-annually (using PHUD\$).	J McHugh	Anne Goon	Finance	10/1/12	12/31/12	Provision of semi-annual 5-year budget projections to Board of Health	
2. Adopt a formal Board policy on the level of unrestricted fund balance to be maintained in the Health District General Fund.	BOH Finance Committee; J McHugh	Anne Goon		10/1/12	12/31/12	Adoption of fund balance policy by Board of Health	
3. Adopt a formal Board policy on fees and charges that identifies factors that should be taken into account when pricing Health Department goods and services.	BOH Finance Committee; J McHugh; Management team	Anne Goon		1/1/13	3/31/13	Adoption of fees and charges policy by Board of Health	
4. Develop and implement monthly financial dashboard report for Board of Health, management, and staff.	J McHugh	Anne Goon		10/1/12	3/31/13	Distribution of financial dashboard report in monthly Board of Health packets	

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5. Become credentialed as a provider and electronically bill private insurance companies for family planning, immunizations, and case management services (in addition to current home health, hospice, and dental credentialing already approved).	J McHugh, N Bannister, V Ordaz, M Shawley	Julie Lauf	Currently underway (8/8/12)	12/31/12	Credentialed as in-network provider (for at least 4 private insurance companies by 10/1/12, by at least 6 companies by 1/1/13) Electronic submission of insurance claims and payments by 10/1/12	
6. Create annual budget appropriations to ensure adequate funding to achieve strategic priorities.	BOH Finance Committee; J McHugh	Anne Goon	1/1/13	3/15/13, annually thereafter	Inclusion of funds in annual Health Department Appropriations that reflect priorities in agency strategic plan	
7. Perform cost analyses for all programs.	Management team; Project Directors	Julie McHugh	10/1/13	6/30/14	Creation of cost analysis report for all programs	
8. Develop detailed operating budgets for all divisions and programs.	Management team; Project Directors	Anne Goon, Julie McHugh	1/1/14	On-going at least annually	Creation of detailed operating budgets for all divisions and programs	
9. Provide detailed monthly budget reports (within 10 days of month-end) to all staff with budget management responsibilities.	Management team; Project Directors	Julie McHugh	1/1/14	On-going	Provision of detailed monthly budget reports within desired timeframe	
10. Monitor financial performance regularly to assure financial viability of Health Department programs and services. <ul style="list-style-type: none"> <li>o Review billing charges/cost methodology (at least annually) to ensure charges are routinely updated to reflect actual costs.</li> <li>o Evaluate and review data from cost analysis.</li> <li>o Review insurance reimbursement rates to ensure maximizing profit/reimbursement and to determine if revenues exceed costs.</li> </ul>	BOH Finance Committee; Management team; Project Directors	Anne Goon, Julie McHugh	1/1/14	On-going	Existence of financial analyses generated on a regular basis Records of Board and staff actions taken in response to financial analyses	

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<b>Objective 2: Increase business management skills of Health Department management by June 30, 2014.</b>							
<b>Action steps</b>	<b>Group members</b>	<b>Lead</b>	<b>Pillar Alignment</b>	<b>Schedule</b>		<b>Metrics</b>	<b>Status (% done /date)</b>
				<b>Begin</b>	<b>End</b>		
1. Identify tool to assess management staff's current business management skills and knowledge needed to perform essential functions of each position.	J McHugh, V Ordaz	Anne Goon	Finance	1/1/13	3/31/13	ID of business management skills and knowledge assessment tool	
2. Identify business management training needs of current managers by administering assessment tool. Identify training needs of new managers by administering test during interview or orientation process on an on-going basis.	J McHugh, V Ordaz	Anne Goon		4/1/13	6/30/13	Aggregate management training needs report	
3. Establish and implement on-going training plan to provide managers with needed business management skills. Training plan will identify training resources and opportunities available in/near Henry County, including Health Department Leadership Development Institute.	Management Team	Anne Goon		7/1/13 (plan creation) 1/1/14 (impleme ntation)	12/31/13  On-going	Business management skills training plan (part of workforce development plan)  LDI agendas, Board minutes, training logs, transcripts, certificates to verify completion of training	
4. Periodically re-assess assess management staff's current business management skills and knowledge needed to perform essential functions of each position.	Management Team	Anne Goon		1/1/15	Annually	Re-administration of assessment tool and review/revision of training plan	

**Henry County Health Department Strategic Plan (2012 – 2015)  
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<b>Objective 3: Increase financial awareness among Board of Health members by June 30, 2013.</b>							
<b>Action steps</b>	<b>Group members</b>	<b>Lead</b>	<b>Pillar Alignment</b>	<b>Schedule</b>		<b>Metrics</b>	<b>Status (% done /date)</b>
				<b>Begin</b>	<b>End</b>		
1. Identify tool to assess Board of Health's current level of financial awareness and ability to perform its fiduciary responsibilities.	BOH Finance/Audit Committee	Anne Goon	Finance	1/1/13	3/31/13	ID of Board assessment tool (possibly National Public Health Performance Standards- local governance assessment tool)	
2. Identify financial awareness training needs of Board of Health members by administering assessment tool. Identify training needs of new Board of Health members by administering test during interview or orientation process on an on-going basis.	BOH Finance/Audit Committee; J McHugh, V Ordaz	Anne Goon		4/1/13	6/30/13	Administration of Board assessment tool Board training needs report	
3. Establish and implement on-going Board development training plan to increase financial awareness and ability to perform fiduciary responsibilities.	BOH Finance/Audit Committee; J McHugh, V Ordaz	Anne Goon		7/1/13 (plan creation) 1/1/14 (implementation)	12/31/13 On-going	Board of Health training plan (part of workforce development plan) Agendas, Board minutes, certificates to verify completion of training	
4. Periodically re-assess Board of Health's current level of financial awareness and abilities.	BOH Finance/Audit Committee; J McHugh, V Ordaz	Anne Goon		7/1/14	12/31/14 and annually or biennially thereafter	Re-administration of Board assessment tool and review/revision of training plan	

**Henry County Health Department Strategic Plan (2012 – 2015)  
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<b>Objective 4: Continuously seek funding opportunities that support Health Department capacity, sustainability, and growth.</b>							
<b>Action steps</b>	<b>Group members</b>	<b>Lead</b>	<b>Pillar Alignment</b>	<b>Schedule</b>		<b>Metrics</b>	<b>Status (% done /date)</b>
				<b>Begin</b>	<b>End</b>		
1. Identify funding needed to deliver Ohio Minimum Package of Public Health Services (core public health services and foundational capabilities).	AOHC; ODH; Management team	Anne Goon	Finance	7/1/13	12/31/13	Report to Board of Health outlining funding needed to deliver core public health services and foundational capabilities	
2. Identify funding needed to deliver optional public health services (non-core services provided in response to local needs).	AOHC; ODH; Management team	Anne Goon		7/1/13	12/31/13, on-going	Report to Board of Health outlining funding needed to deliver optional public health services	
3. Pursue Local Government Innovation Fund grant (or other funds) for feasibility study to identify mechanisms for achieving foundational capabilities (e.g. Councils of Government, Public Health Service Centers, contractual arrangements, cross-jurisdictional sharing) at a reasonable cost.	6-pact Health Commissioners	Anne Goon		8/2/12	9/4/12, on-going as appropriate	Award of LGIF grant(s) Completed feasibility report	
4. Establish (within Health Department or through cross-jurisdictional sharing) dedicated personnel with grant writing expertise to identify and pursue additional funding opportunities.	Local, regional, and state public health partners; Management team; Staff	Anne Goon		7/1/13	On-going	Access to or employment of grants writer(s) Receipt of new funds through grants writer's efforts	
5. Establish (within Health Department or through cross-jurisdictional sharing) dedicated personnel with project management expertise to implement services supported by new funds.	Local, regional, and state public health partners; Management team; Staff	Anne Goon		7/1/13	On-going	Access to or employment of grants project manager(s)	
6. Pursue Local Government Innovation Fund grants and other funds to implement strategies identified through feasibility study to improve operational efficiencies and/or achieve foundational capabilities.	6-pact Health Commissioners; AOHC; ODH; Community partners	Anne Goon, Grants Writer(s)		7/1/13	On-going	Implementation of strategies identified through feasibility study	



**Henry County Health Department Strategic Plan (2012 – 2015)**

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<p>7. Identify and pursue emerging business “opportunities” (e.g. to add needed services; to eliminate services that are no longer needed, cost-prohibitive, duplicative, or not consistent with agency mission; to provide or expand “niche” services done best by Health Department).</p>	<p>BOH; Management team and staff; Community partners; Colleagues</p>	<p>Anne Goon</p>		<p>8/1/12</p>	<p>On-going</p>	<p>Addition of new services Elimination of services that are no longer needed, duplicative, cost-prohibitive, or not consistent with agency mission Expansion of “niche” services done best by Health Department</p>	
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## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

#### Strategic Priority: Collectively Communicate to Improve the Public’s Perceptions

**Goal 3: Henry County Health Department will effectively communicate with staff, stakeholders, and residents of Henry County and northwest Ohio to ensure public confidence in, recognition of, and value for the public health services offered.**

**Summary:** Public perception of our work can influence service utilization and financial support. Henry County Health Department will intentionally deliver accurate, concise, and consistent messages about public health and the services we provide to our staff, our local stakeholders, and the communities we serve. We will select our messages and methods (e.g. types of media, spokespersons) to most effectively reach the desired target audiences.

**Objective 1: Develop formal communications plan to increase staff and public awareness of health department services by December 31, 2012.**  
**Objective 2: Implement communications plan beginning in January 1, 2013.**

Objective 1: Develop formal communications plan to increase staff and public awareness of health department services by December 31, 2012.							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Develop formal communications plan to increase staff and public awareness of health department services.	Management team, staff???	Sharon Meece	Service	9/1/12	12/31/12	Creation of formal communications plan	

Objective 2: Implement communications plan beginning in January, 2013.							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
Action steps and implementation timelines will flow from content of formal communications plan.							

**Henry County Health Department Strategic Plan (2012 – 2015)**  
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**Strategic Priority: Collaboration & Networking for Growth**

**Goal 4: Henry County Health Department will pursue diverse partnerships that strengthen our operations and capacity to improve our community's health.**

**Summary:** Strong leadership, supportive board, and caring, committed, and skilled staff are at the core of Henry County Health Department. The department will leverage these strengths to establish and sustain strategic partnerships that maximize mutual benefits and community health improvements. HCHD and its collaborations will be responsive to changes in policy, political climate, and community needs.

- Objective 1: Expand local collaborations to assess the community's health, plan and implement community health improvement strategies, and evaluate the effectiveness of collaborative efforts to improve the health status of local residents by December 31, 2015.**
- Objective 2: Establish and sustain local, regional, and/or state collaborations to achieve the Foundational Capabilities needed to deliver of Core Public Health Services (as defined in Ohio Minimum Package of Local Public Health Services) and to pursue emerging business opportunities by December 31, 2015.**
- Objective 3: Achieve voluntary accreditation through the Public Health Accreditation Board (PHAB) by 7/1/2014.**

<b>Objective 1: By December 31, 2015, expand local collaborations to assess the community's health, plan and implement community health improvement strategies, and evaluate the effectiveness of collaborative efforts to improve the health status of local residents.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Expand Health Education staffing to include health educators and community health planners with skills, experience, and expertise in strategic planning; quality improvement; community health assessment; community health planning; community problem-solving; community coalition development; environmental change strategies; and program implementation and evaluation.	V Ordaz; Management team; BOH	Anne Goon	Growth	1/1/13	12/31/14	Employment of health education and community health planning staff with the desired skills, experience, and expertise	
2. Identify and prioritize existing local collaborations focused on community health that Health Department staff currently do or should participate in.	Management team; Staff; Community stakeholders and partners	Anne Goon, Community Health Planner		4/1/13	10/31/13, on-going thereafter	List of existing local collaborations, mission and purpose of collaboration, staff currently involved, return on investment for Health Department participation	

## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

3. Through these collaborations, complete development of a Henry County Community Health Improvement Plan (CHIP).	Henry County Health Partners	Anne Goon	Already underway	9/30/12	Henry County Community Health Improvement Plan
4. Present Community Health Improvement Plan to Henry County Board of Health, Henry County Hospital, and other agencies and organizations for adoption or approval.	Henry County Health Partners	Anne Goon	10/1/12	3/31/13	Evidence of presentations Board resolutions of adoption or support
5. Implement Community Health Improvement Plan in collaboration with community partners. Steps will include, but are not limited, to:	Henry County Health Partners; Management team; Staff; WIC	Anne Goon, Community Health Planner(s), Educator(s)	Already underway	12/31/15	Achievement of outcomes outlined in Community Health Improvement Plan
a. Implement employee wellness strategies in order to achieve Fit-Friendly employer recognition by American Heart Association.	Employee Wellness team; Health Educator(s)	Vi Ordaz, Community Health Planner	Already underway	12/31/15	Employee wellness offerings to staff Staff participation
b. Apply for and achieve Fit-Friendly employer recognition by American Heart Association.	Employee Wellness team; Health Educator(s)	Vi Ordaz, Community Health Planner	6/1/13	Annually thereafter	Designation of Fit-Friendly Employer
c. Create a lactation room for staff (per federal requirements).	Staff; Fulton/ Henry WIC	Vi Ordaz	10/1/12	12/31/12	Existence of staff lactation room
d. Implement policy to have at least one Certified Lactation Counselor on staff.	Help Me Grow and other staff; Management Team	Julie Lauf	10/1/12	6/30/13	Staff with CLC credential
e. Conduct annual BMI screenings in local public and private schools, as required by SB 210 - Healthy Choices for Healthy Children Act.	Staff; School administration and nurses; Medical Reserve Corps; Henry County Hospital	Community Health Planner or Educator	8/1/13	Annually thereafter	Completion of BMI screenings Creation of annual report of BMI screening results

## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

f. Assist School Wellness Teams in implementing their Wellness Plans.	Staff; School administration and nurses; Medical Reserve Corps; Henry County Hospital	Community Health Planner or Educator		8/1/13	On-going	Achievement of outcomes in school wellness plans	
6. Complete 2013 Community Health Assessment.	Henry County Health Partners; Staff	Anne Goon, Community Health Planner		10/1/12	12/31/13	Report of 2013 Henry County Community Health Assessment	
7. Assess status of local public health system (as required once every five years by Ohio Administrative Code).	Henry County Health Partners; Local healthcare providers; Other members of local public health system	Anne Goon, Community Health Planner		1/1/13	6/30/13	Completion of National Public Health Performance Standards assessment tool for local public health systems	
8. Use results of 2013 Community Health Assessment survey to determine changes in health status in past three years.	Henry County Health Partners; Staff; Management team	Community Health Planner		9/1/13	12/31/13	Analysis of community health status included in Community Health Assessment and/or Improvement Plan reports	
9. Revise Community Health Improvement Plan.	Henry County Health Partners	Community Health Planner		9/1/13	3/31/14	Analysis of community health status included in Community Health Assessment and/or Improvement Plan reports	

**Henry County Health Department Strategic Plan (2012 – 2015)  
Action Plans**

<b>Objective 2: By December 31, 2015, establish and sustain local, regional, and/or state collaborations to achieve the Foundational Capabilities needed to deliver of Core Public Health Services (as defined in Ohio Minimum Package of Local Public Health Services) and to pursue emerging business opportunities.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
See Objective 4 of "Strategic Funding Decisions" priority			Quality				

<b>Objective 3: By 7/1/2014, achieve voluntary accreditation through the Public Health Accreditation Board (PHAB).</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Prepare and assess agency readiness, complete online PHAB orientation, and formally inform PHAB of intent to apply. Interim steps may include creation of agency accreditation and quality improvement teams, workforce development plan, and other pre-requisites for accreditation.	Management team; Agency accreditation team	Marianne Shawley	Quality	Already underway	6/30/13	Completion of Readiness Checklists, online orientation by Accreditation Coordinator and Health Commissioner, and submission of Statement of Intent	
2. Submit application form and fee, and complete applicant training.	A Goon	Marianne Shawley		7/1/13	12/31/13	Submission of application and fee Completion of mandatory training	
3. Select and submit documentation for each measure to demonstrate compliance.	Management team; Agency accreditation team	Marianne Shawley		1/1/14	2/28/14	Online submission of documentation	
4. Complete on-site PHAB accreditation visit.	Entire agency	Marianne Shawley		When scheduled by PHAB	When scheduled by PHAB	Completion of site visit Notification of accreditation decision	
5. Once accredited, submit annual accreditation report and fee.	Management team; Agency accreditation team	Marianne Shawley		Upon accreditation	Annually x 5 years	Submission of annual report and fee	

**Henry County Health Department Strategic Plan (2012 – 2015)**  
**Action Plans**

**Strategic Priority: Facility**

**Goal 5: The Henry County Health Department building will be a warm, friendly, inviting, and safe place that supports the efficient delivery of public health services to clients.**

**Summary:** The Health Department building, location, and parking are currently convenient and adequate. However, the layout and décor have not been updated since the building was occupied in 2004. The building lacks many security features that would optimize the safety of staff and clients. The current layout prevents the efficient delivery of services to the public and presents significant barriers to future growth and expansion. Henry County Health Department will make improvement that result in facilities that are flexible enough to meet both current and future client and staff needs.

<b>Objective 1: Update building décor to create a warm, friendly, and inviting space for staff and clients by December 31, 2013.</b>
<b>Objective 2: Improve building's safety and security by December 31, 2013.</b>
<b>Objective 3: Develop more flexible and efficient space utilization and client/work flow plans by March 31, 2015.</b>
<b>Objective 4: Fully implement facility plan by December 30, 2015.</b>

<b>Objective 1: Update building décor to create a warm, friendly, and inviting space for staff and clients by December 31, 2013.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Develop schedule to complete painting of patient care and staff work areas.		Viola Ordaz,	Service	8/1/12	9/30/12	All areas of Health Department painted with approved color schemes	
2. Work with County Maintenance Department to gain County Commissioner support/approval for painting.		Jennifer Imthurn		10/1/12	6/30/13		
3. Work with County Maintenance to complete painting with approved color scheme.		Viola Ordaz,	10/1/12	6/30/13			
4. Assess adequacy of signage throughout facility.		Jennifer Imthurn	5/1/13	6/30/13			
5. Create more welcoming entrance with appropriate signage, décor, and layout.		"	10/1/12	12/31/12			
6. Improve signage throughout facility.		"	7/1/13	12/31/13			

**Henry County Health Department Strategic Plan (2012 – 2015)  
Action Plans**

<b>Objective 2: Improve building's safety and security by December 31, 2013.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Work with County Maintenance Department and Sheriff's Office to identify safety and security improvements needed.		Viola Ordaz, Gloria Arps	Quality	8/1/12	10/31/12	Safety and security features installed	
2. Create safety and security implementation plan.		"		11/1/12	12/31/12		
3. Implement plan, including but not limited to, a. Collaborate with County Commissioners to acquire proximity card system for Health Department facility (to control access to staff areas of building, after-hours access). b. Install blinds in all windows in clerical area. c. Install security buzzers in registration areas and patient care areas		"		1/1/13	12/31/13		

<b>Objective 3: Develop more flexible and efficient space utilization and client/work flow plans by December 31, 2014.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Using formal quality improvement processes, create plan to improve the utilization of space and the delivery of public health services in the current facility.	Department heads or designee	Marianne Shawley	Growth	4/1/2014	3/31/15	Creation of plan to create more versatile patient care areas; single check-in/check-out areas for all patients and/or clients; more efficient work areas for staff; and more versatile work, meeting, and storage areas that can accommodate future staff and service changes	



**Henry County Health Department Strategic Plan (2012 – 2015)  
Action Plans**

<b>Objective 4: Fully implement facility plan by December 30, 2015.</b>							
Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
Action steps and implementation timelines will flow from content of facility plan.							

**Henry County Health Department Strategic Plan (2012 – 2015)  
Action Plans**

**Strategic Priority: Internal Processes**

**Goal 6: Henry County Health Department will achieve greater efficiency and customer satisfaction by defining and improving its standard operating procedures (SOPs).**

**Summary:** Establishing clearly-defined standard operating procedures will increase staff and management efficiency; support employees' abilities to make independent decisions; foster more consistent work performance and client service; improve client satisfaction; reduce staff dissatisfaction; and minimize agency liability. Standard operating procedures will streamline decision-making processes and increase staff and management accountability.

**Objective 1: Written standard operating procedures will be created for general Health Department operations (operations not related to a specific program or service) by December 31, 2013.**

**Objective 2: Division- and program/service-specific standard operating procedures will be defined in writing by December 31, 2014.**

**Objective 1: Written standard operating procedures will be created for general Health Department operations (operations not related to a specific program or service) by December 31, 2013.**

Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Review existing written SOPs for general Health Department operations not related to specific programs or services. This will include procedures relating to:	Staff and management	Marianne Shawley	Quality	4/1/13	12/31/13	ID of SOPs needed to be revised or developed for each topic area	
a. Accounts payable and receivable;	J McHugh, N Bannister, J Huber	Julie McHugh		"	"	ID of standard SOP format, storage location, and review schedule	
b. Board operations;	A Goon, V Ordaz, J McHugh	Anne Goon		"	"	Creation of SOPs	
c. Marketing and communications;	S Meece, D Breitbart, P Dammann, G Arps?	Sharon Meece		"	"	Adoption of SOPs	
d. Employee recruitment, selection, hiring, orientation, and training;	V Ordaz, A Goon, M Shawley, S Meece, G Arps,?	Viola Ordaz		"	"		
e. Grants management;	J McHugh, J Lauf, B Hoffman	Julie McHugh		"	"		
f. Payroll and benefits;	J McHugh, V Ordaz, J Lindsay	Julie McHugh		"	"		
g. Purchasing;	V Ordaz, D Ferreira, P	Viola Ordaz		"	"		

## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

<p>h. Quality improvement; and i. Risk management.</p>	<p>Dammann, ?? M Shawley, A Goon, ?? A Goon, J McHugh, ??</p>	<p>Marianne Shawley Anne Goon</p>	<p>“ “</p>				
<p>2. Identify or create standard SOP format, storage location, and review schedule.</p>	<p>M Shawley, A Goon, V Ordaz</p>	<p>Peg Dammann</p>	<p>1/1/13</p>	<p>3/31/13</p>			
<p>3. In each area, compile a list of procedures that need to be created (working with staff to identify most frustrating or confusing procedures).</p>	<p>Teams outlined above</p>	<p>Team leaders outlined above</p>	<p>4/1/13</p>	<p>6/30/14</p>			
<p>4. In each area, compile a list of procedures that need to be revised (working with staff to identify most frustrating or confusing procedures).</p>	<p>Teams outlined above</p>	<p>Team leaders outlined above</p>	<p>4/1/13</p>	<p>6/30/14</p>			
<p>5. Drawing upon internal and external subject matter experts and QI process, create and vet draft SOPs identified in Obj. 6.1.b. and 6.1.c. (Vetting is the process of having experts check for accuracy, validity.)</p>	<p>Teams outlined above</p>	<p>Team leaders outlined above</p>	<p>4/1/13</p>	<p>12/31/14</p>			
<p>6. Create final SOPs and secure approval from Health Commissioner (and Board of Health, Prosecuting Attorney, or others as required by Ohio Revised Code).</p>	<p>Teams outlined above</p>	<p>Team leaders outlined above</p>	<p>4/1/13</p>	<p>12/31/14</p>			
<p>7. Orient and train staff on use of new SOPs.</p>	<p>Teams outlined above + V Ordaz and S Meece</p>	<p>Team leaders outlined above</p>	<p>4/1/13</p>	<p>12/31/14</p>			
<p>8. Monitor implementation of SOPs and provide retraining or other corrective action as necessary.</p>	<p>Teams outlined above + V Ordaz and S Meece</p>	<p>Marianne Shawley</p>	<p>1/1/15</p>	<p>12/31/15</p>			

## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

9. Review and revise SOPs per review schedule and as cumbersome or confusing procedures are identified through rounding.	Teams outlined above	Team leaders outlined above		4/1/15	12/31/15		
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**Objective 2: Division- and program/service-specific standard operating procedures will be defined in writing by December 31, 2014.**

Action steps	Group members	Lead	Pillar Alignment	Schedule		Metrics	Status (% done /date)
				Begin	End		
1. Review existing written SOPs for general Health Department operations not related to specific programs or services. This will include procedures relating to: a. Dental services; b. Emergency preparedness and risk communications; c. Environmental health services; d. Home health, hospice, and home health aide services; e. Public health nursing services- including BCMH case management, communicable diseases, family planning, Help Me Grow, immunizations, school health; f. Vital Statistics.	Staff and management	Marianne Shawley	Quality	4/1/13	12/31/13	ID of SOPs needed to be revised or developed for each topic area	
	M Shawley, Dental Director, Dental staff member(s)	Marianne Shawley		"	"	ID of standard SOP format, storage location, and review schedule	
	G Arps, S Meece, ??	Gloria Arps		"	"	Creation of SOPs	
	J Lindsay, D Breitbart, L Sonnenberg T P	Jon Lindsay		"	"	Adoption of SOPs	
	Dammann, J Cline, P Miller, staff member	Peg Dammann		"	"		
	J Lauf, B Hoffman, K Wiechers, J Wagner	Julie Lauf		"	"		
J Imthurn, V Ordaz, D Ferreira	Jennifer Imthurn		"	"			
2. Identify or create standard SOP format, storage location, and review schedule.	A Goon, M Shawley, V Ordaz	Peg Dammann		1/1/13	3/31/13		
3. In each area, compile a list of procedures that need to be created (working with staff to identify most frustrating or confusing procedures).	Teams outlined above	Team leaders outlined above		4/1/13	6/30/14		

## Henry County Health Department Strategic Plan (2012 – 2015)

### Action Plans

4. In each area, compile a list of procedures that need to be revised (working with staff to identify most frustrating or confusing procedures).	Teams outlined above	Team leaders outlined above	4/1/13	6/30/14		
5. Drawing upon internal and external subject matter experts and QI process, create and vet draft SOPs identified in Obj. 6.1.b. and 6.1.c. (Vetting is the process of having experts check for accuracy, validity.)	Teams outlined above	Team leaders outlined above	4/1/13	12/31/14		
6. Create final SOPs and secure approval from Health Commissioner (and Board of Health, Prosecuting Attorney, or others as required by Ohio Revised Code).	Teams outlined above	Team leaders outlined above	4/1/13	12/31/14		
7. Orient and train staff on use of new SOPs.	Teams outlined above + V Ordaz and S Meece	Team leaders outlined above	4/1/13	12/31/14		
8. Monitor implementation of SOPs and provide retraining or other corrective action as necessary.	Teams outlined above + V Ordaz and S Meece	M Shawley	1/1/15	12/31/15		
9. Review and revise SOPs per review schedule and as cumbersome or confusing procedures are identified through rounding.	Teams outlined above	Team leaders outlined above	4/1/15	12/31/15		

**Appendix A:**

**Standards of Conduct**

## Henry County Health Department Standards of Conduct

By making a conscious commitment to practice the standards listed below, I will reinforce them through my daily actions, attitude and work ethic. I acknowledge that these are expected of me and of all employees of the Henry County Health Department, regardless of position. By working with these standards as a guide, I will be ensured a healthy, pleasant and productive work environment.

### ❖ Commitment to Coworkers

I will.....

- Respect others differences, opinions, strengths and limitations
- Provide a safe and supportive environment for coworkers while being mindful of sensitive matters
- Display positive behavior and encourage positive behavior from my coworkers
- Willingly provide help and ask for help when needed
- Communicate positively and provide feedback in a positive way
- Value the contributions of my coworkers

### ❖ Commitment to Service and Community

I will.....

- Treat all clients with the respect I would want to receive
- Welcome everyone in a warm and friendly manner
- Acknowledge all clients concerns and needs with a positive attitude
- Always represent the HCHD in a professional and respectable manner
- Provide the highest standard of service to all clients

### ❖ Commitment to Professionalism

I will.....

- Look, act, dress and speak in a professional manner
- Display personal and professional dignity
- Be consistent in my actions and follow through with projects
- Process hardships and celebrate successes with coworkers
- Earn trust by being honest and working with integrity
- Acknowledge my mistakes and ask for assistance when needed
- Use discretion when talking to others about performance issues

Print name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Appendix B:**

**Reports Used During Strategic Planning Process**



# Employee Satisfaction Surveys

## Henry County Health Department

**PURPOSE OF EMPLOYEE SATISFACTION SURVEYS:**

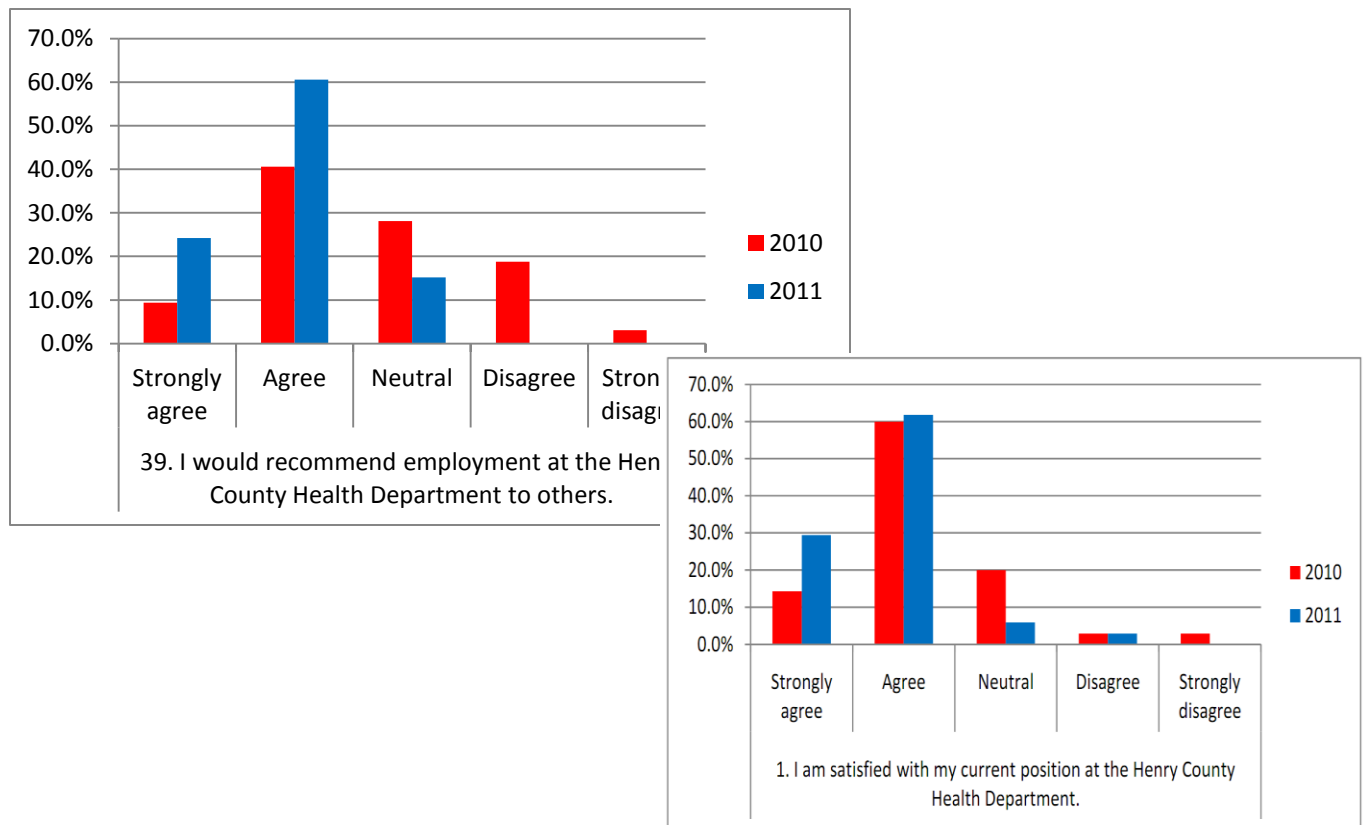
1. Measure employees' satisfaction with Henry County Health Department as their employer.
2. Measure achievement of our PEOPLE PILLAR goal to be the public health employer of choice in northwest Ohio.
3. Determine our employees' expectations and satisfaction with key factors like communication, supervision, leadership, and opportunities for training and input.
4. Determine key areas where quality improvement is needed in management and leadership practices.

Henry County Health Department began conducting an annual Employee Satisfaction Survey in 2010. The survey tool was developed from existing employee satisfaction tools used by Henry County Hospital and other employers. Members of the Health Department management team and a human resource consultant from Clemans-Nelson Associates were involved in the tool's development.

The survey was initially conducted in July-August 2010. In 2011, additional questions were added so that employees could report on whether improvements had been made in the past year. The 2011 survey was conducted in May-June 2011. The Employee Satisfaction Survey is conducted via surveymonkey.com to allow employee anonymity. 33 employees (60%) completed in 2011; 3% didn't indicate their division or PT/FT status. 35 employees (58%) completed in 2010; 20% did didn't indicate their division or PT/FT status.

**Overall: The percentage of employees "strongly agreeing" increased for all questions except one related to satisfaction with benefits. These results show that the Health Department has made improvements in the past year to make the workplace more satisfying for staff. The results also indicate that the increased emphasis placed on quality and service are "catching on" among staff.**

**Key Measures of Employee Satisfaction:**



### **Areas of Strength:**

#### **+ 2011 highest-ranking strengths:**

- 100% of employees agree/strongly agree that providing quality public health services is a high priority.
- 100% of employees agree/strongly agree that customer/client service is a high priority.
- 100% of employees agree/strongly agree that their physical work environment is safe.

#### **+ 2010 highest-ranking strengths:**

- 94% of employees agreed/strongly agreed that they would recommend Henry County Health Department to others needing public health services. (The % strongly agreeing improved from 25% in 2010 to 76% in 2011.)
- 90% of employees agreed/strongly agreed that their managers/supervisors treat them fairly. (The % strongly agreeing improved from 23% in 2010 to 42% in 2011.)
- 88% of employees agreed/strongly agreed that they receive the amount of supervision they need to do their jobs. (The % strongly agreeing improved from 21% in 2010 to 33% in 2011.)

### **Areas of Weakness:**

#### **+ 2011 lowest-ranking areas:**

- 49% of employees agree/strongly agree that they are satisfied with their benefits package. (45% agreed or strongly agreed in 2010. However, the % strongly agreeing dropped from 3% in 2010 to 0% in 2011.)
- 55% of employees agree/strongly agree that the amount of recognition they receive for the work they do improved over the past year. (79% of employees in 2011 agreed or strongly agreed that they received enough recognition for their work, vs. 52% in 2010.)
- 55% of employees agree/strongly agree that their work environment improved over the past year. (91% of employees in 2011 agreed or strongly agreed that their work environment is good, vs. 75% in 2010.)

#### **+ 2010 lowest-ranking areas:**

- 31% of employees agreed/strongly agreed that their pay is fair for the work they do. (This improved to 73% agreeing or strongly agreeing in 2011. Also, the % strongly agreeing increased from 0% in 2010 to 12% in 2011.)
- 42% of employees agreed/strongly agreed that they had some understanding of how the Health Department was doing financially. (This increased to 97% in 2011. The % strongly agreeing increased from 9% in 2010 to 30% in 2011.)
- 45% of employees agreed/strongly agreed that they learned about changes that directly affect them before they were implemented. (This increased to 58% agreeing or strongly agreeing in 2011. The % strongly agreeing increased from 0% in 2010 to 12% in 2011.)

### **Areas of Greatest Gain from 2010 to 2011 (% “strongly agreeing” only):**

- I would recommend the Henry County Health Department to others needing public health services. 25% in 2010 → 76% in 2011.
- I have the tools and equipment I need to do my job. 3% in 2010 → 36% in 2011
- Staff meetings within my division are helpful to me. 16% in 2010 → 49% in 2011.

### **Areas of Least Gain from 2010 to 2011 (% “strongly agreeing” only):**

- I am satisfied with my benefits package. 3% in 2010 → 0% in 2011.
- I learn about changes that will directly affect me before they are implemented. 0% in 2010 → 12% in 2011.
- My pay is fair for the work I do. 0% in 2010 → 12% in 2011.
- I receive the amount of supervision I need to do my job. 21% in 2010 → 33% in 2011.

**Employees' Growth Ideas for the Health Department  
Generated at Summer 2010 Staff Retreat**

Title of Department	Q1: How does my program or division help the Health Department meet our mission and vision?	Q2: What additional ways could my program or division help move the Health Department toward achieving our mission and vision?	Q3: What resources would be needed to be able to accomplish the ideas we generated in Q2?
Health Ed/Emergency Preparedness	<ul style="list-style-type: none"> <li>- Car seat program</li> <li>- Food safety</li> <li>- Collaboration with the police (bike/helmet)</li> <li>- Collaboration with the EMA, Law, Health care, partners on preparedness</li> <li>- Website/communication means for education</li> <li>- Compass training</li> </ul>	<ul style="list-style-type: none"> <li>- Social media (twitter, facebook, linked In, myspace)</li> <li>- Collaboration with Hospital</li> <li>- Keep up provide "newest training</li> <li>- More community training on preparedness</li> <li>- Collaboration with WIC (lead)</li> <li>- More educational media venues (videos, powerpoints)</li> </ul>	<ul style="list-style-type: none"> <li>- Educational videos</li> <li>- Monitors in both waiting rooms</li> <li>- Looping videos</li> <li>- Need comp. time so we can go out in the community in eves./weekends</li> <li>- More flexible/time to do essential functions of individual jobs</li> <li>- Trainings (staff can attend, and for the public)</li> </ul>
Public Health Nursing/Help Me Grow	<ul style="list-style-type: none"> <li>- We focus on ensuring children birth-3 in Henry County have the best possible start in life.</li> <li>- We monitor health status, provide home safety checks and connect/refer to community resources.</li> <li>- We collaborate and network with surrounding counties to provide the best quality/continuity of services for our families</li> <li>- Work with community partners to provide a consistent and cohesive system of care for HC families</li> <li>- Work on issues such as underage drinking/drinking and driving for a safe community</li> <li>- Partner with other county FCFCs: grants, system of care, etc.</li> </ul>	<ul style="list-style-type: none"> <li>- Provide newborn home visit to all families to identify families and children at risk for developmental delays</li> <li>- Work in collaboration with the community to provide additional access to specialized services (OT, PT, Speech)</li> <li>- Additional staff to serve more families</li> <li>- Bring more community awareness to available programming and services</li> <li>- More community/family involvement</li> <li>- Greater involvement in multi-county initiatives</li> </ul>	<ul style="list-style-type: none"> <li>- Additional resources for public awareness related to HMG.</li> <li>- Additional space/facility to conduct screenings and educational activities for families.</li> <li>- Additional staff to serve our growing HMG population.</li> <li>- Utilize and implement new technologies (computerized charting – not wasting so much paper)</li> <li>- Comp time/flexibility with scheduling.</li> <li>- More storage/office space</li> <li>- An intern</li> <li>- A four county free pass to travel to Defiance/Williams/Fulton for Council</li> </ul>
Public Health Nursing	<ul style="list-style-type: none"> <li>- Screenings, immunizations, partnering with other counties - BCCP, communicable diseases), education (schools, day care, senior center, individuals, doctors offices, public), referrals, prevention, treatment, Insurance back up program – BCMH (medical treatment/diagnostic needs), BCCP,</li> </ul>	<ul style="list-style-type: none"> <li>- More staff to support current and additional services (being pulled in too many areas that you cannot complete tasks)</li> <li>- Addressing the issues identified on the community needs assessment</li> <li>- A true team approach to problem</li> </ul>	<ul style="list-style-type: none"> <li>- More Staff</li> <li>- Updated trainings and resources</li> <li>- Investigate Medicaid re-imburement rates for services</li> <li>- What happened to MAC?!!!</li> </ul>

**Employees' Growth Ideas for the Health Department  
Generated at Summer 2010 Staff Retreat**

	<p>Load/unloading/ordering, travelers vaccines/education</p> <ul style="list-style-type: none"> <li>- Nursing Duties - BCMH – IAP, communicable disease reporting/investigation, Family planning, school nursing, immunizations, vision/hearing clinics, flu clinic – H1N1 and seasonal, Tdap clinics, travelers, head lice checks, blood pressure checks, pill pickups, pregnancy testing, HIV counseling, Plan B</li> </ul>	<p>solving</p> <ul style="list-style-type: none"> <li>- Proper training ( but not enough staff to cover to attend)</li> <li>- Wheelchair accessible rooms (lifting patients)</li> </ul>	
Home Health Hospice	<ul style="list-style-type: none"> <li>- Patient/Family Education</li> <li>- Advocate with medical community to promote health of residents</li> <li>- Providing services in home to prevent illness, keep in homes, prevent infection</li> <li>- Linking patients with appropriate resources (meals on wheels, transportation networks, lifeline, fish, drug companies – Meds too \$)</li> <li>- Collaboration</li> <li>- Patient advocate</li> <li>- Establish inpatient hospice care in community</li> </ul>	<ul style="list-style-type: none"> <li>- More resources for financial</li> <li>- Increase visibility in the community</li> </ul>	<ul style="list-style-type: none"> <li>- More staff</li> <li>- Night time staff – HHA</li> <li>- More space for extra staff needed</li> <li>- Sign for Home Health/Hospice</li> <li>- Private area for families – counseling</li> <li>- More parking in back</li> <li>- Snow removal to prevent falls</li> </ul>
Dental	<ul style="list-style-type: none"> <li>- By providing comprehensive quality dental health care to residents in NOW</li> <li>- We collaborate with all (6) counties in NOW and accept patients from everywhere not just HC</li> <li>- Help treat and prevent oral diseases</li> <li>- We educate the residents of NOW on dental health care (schools, community centers, pre-schools, senior centers, hope services)</li> </ul>	<ul style="list-style-type: none"> <li>- Provide treatment at minimal or no cost</li> <li>- Expanding the dental clinic facility and staff</li> <li>- Make community aware of offered services</li> <li>- Continue to provide excellent care to patients who may encourage others to come to our facility</li> <li>- Make patients aware of other services offered by the Health Department</li> </ul>	<ul style="list-style-type: none"> <li>- STAFF: increase staff to provide more services, provide staff with competitive wages to continue long term employment so there's less staff turnover so our patients are seeing familiar faces – in turn will make patients feel more comfortable, become a site for the Ohio project through OSU = free labor</li> <li>- MONEY: increase funding through grants, donations, fundraisers, and other resources</li> <li>- SPACE: increase dental clinic size to provide more services to residents of NWO (wheelchairs, stretchers, walkers, more operatories, storage for charts, Eliminate wasted space in health dpt., to provide more services to our residents</li> </ul>

## SUMMARY OF CLIENT EXPERIENCE SURVEYS JULY 2010 - OCTOBER 2011

### PURPOSE OF CLIENT EXPERIENCE SURVEYS:

1. Measure clients' satisfaction with public health services provided by Henry County Health Department.
2. Measure achievement of our SERVICE PILLAR goal to consistently provide exceptional public health services.
3. Measure achievement of our QUALITY PILLAR goal to provide client-centered public health services that are safe, effective, timely, efficient, and equitable
4. Determine our clients' expectations and where we are meeting or exceeding them.
5. Glean quality improvement ideas from our clients/customers.

### BACKGROUND INFORMATION:

Henry County Health Department began conducting on-going Client Experience Surveys in July 2010. Since there is no standardized national tool for local health departments to assess client satisfaction, the Health Department survey tool was modeled after a standardized national survey tool used by Henry County Hospital (administered by Professional Research Consultants, a marketing research organization that provided services exclusively for the healthcare industry). The survey is available both in printed and online formats. It is to be offered to all clients except those receiving home health/hospice services, since a standardized national survey tool is used with these clients. Some programs/clinics have successfully integrated survey administration into their workflow, which has optimized client response rates. 1,288 surveys were completed by Health Department clients July 2010 - October 31, 2011.

### KEY RESULTS:

- 78% of respondents received services at the Health Department building in Napoleon, 8% at the Family Planning clinics in Defiance, 7% at the Immunization Clinic in Deshler, and 7% in other locations (e.g. community flu clinics, their home, local business).
- 85% previously received services from the Health Department, while 15% were new clients.
- 48% of respondents received Family Planning Clinic services, 42% immunizations (childhood, teen, adult, travelers'), 7% dental services, and 1% Help Me Grow. These percentages are not representative of the proportion of clients served annually by each program. For example, the Dental Clinic had 7,406 visits in 2010, while the Family Planning program had 2,221 visits.
- The majority of clients were referred to the Health Department by friends (37%), family (29%), and local physicians (18%).
- 74% of respondents came for services for themselves, while 28% brought their children for services. (The total exceeds 100% since respondents and their children could be service recipients during the same visit.)
- 74% of service recipients were female (which is not surprising, since 1) 48% of survey respondents came for family planning services, and 2) mothers more frequently bring their children in for shots than fathers).
- 48% of clients were 16-39 years old, which reflects that 48% of survey respondents were family planning clients (who are primarily in this age range). Children under the age of 7 comprised 22% of clients, while children ages 10-12 were 8% of clients (reflecting the most common ages needing childhood immunizations). 7% of clients were ages 60 and older.
- 84% of clients were from Henry County, 13% Defiance County, 6% Fulton County, and 3% Williams County.

## SUMMARY OF CLIENT EXPERIENCE SURVEYS JULY 2010 - OCTOBER 2011

- 34% of survey respondents indicated that from the time they arrived to the time they left, their visits was 15-30 minutes. 18% of visits were 30-45 minutes, 17% 45-60 minutes, and 16% less than 15 minutes. Only 16% of visits lasted more than 1 hour.
- 65% of respondents indicated that the amount of time was about what they expected, while 27% indicated it was much shorter than they expected and 8% much longer than they expected. Childhood immunization clients were the most likely to report that the visit time was much longer than expected.
- 84% of respondents indicated the services were excellent, and 14% stated they were good. Only 2% indicated the services were adequate, poor, or unacceptable. The following % of clients rated services as excellent: Children's shots- 75%; Dental- 76%; Teen or adult shots- 82%; Family planning- 88%.
- 80% of survey respondents said they would definitely return for services, and 17% said they were very likely to return. The following % of clients said they would definitely return: Children's shots- 76%; Dental- 75%; Teen or adult shots- 72%; Family planning- 86%.
- 75% of respondents said they would definitely refer others to the Health Department; 20% were very likely to refer others. The following % of clients said they would definitely refer others: Children's shots- 68%; Dental- 74%; Teen or adult shots- 70%; Family planning- 79%.
- Overall, 83% of survey respondents had an excellent experience with the Health Department, and 15% said their experience was good. The following % of clients said they had an excellent experience: Children's shots- 72%; Dental- 76%; Teen or adult shots- 82%; Family planning- 88%.
- Survey respondents most commonly that the following were **THE BEST PARTS OF THEIR VISIT:**
  - **#1 Our Staff** (friendly, informative, caring, helpful, kind, sincere, caring, courteous, nonjudgmental, respectful, knowledgeable, organized, efficient, polite, smilen' faces).
  - **#2 Speed of Service** (getting in and out quickly, fast, promptness, getting right in)
  - **#3 Quality and Availability of Services** (explanation of shots, meds available, painless shot, giving me the information and help I needed, the free birth control, information & options, prompt attention)
- The most common **SUGGESTIONS FOR IMPROVEMENT** related to:
  - **#1 Decrease waiting time** (make the wait time shorter; less wait time- I had an appt and still waited 60+ minutes; be a little quicker to start my services; speed up my wait time before the appt; could have started on time; faster service; check in sooner; appt was at 10:30 but didn't get in until 11:00)
  - **#2 Improve processes and communication** ( We were unable to use our Benny card, flexible spending acct MasterCard for today's immunizations; let me know how long visit would take; Made sure personnel all had the same info; more staff to process birth/death certificates; better time management and more staff; more people at the windows; more chairs for waiting room; start on time; open up 2 windows for many sitting & waiting; do a better job at the information desk; have more expedited check-in-more receptionists; ability to fill out paper work prior to appt)
  - **#3 Extend hours of services** (consider evening hours for working people; more hours avail; more open hours; scheduled an appointment)
  - **#4 Improve customer service or patient care skills** (multiple comments re: receptionists being rude, cold, unsmiling, inattentive, poor attitude; nurse practitioners being rough, not explaining things)

# HEALTH PRIORITIES AND CONCERNS OF HENRY COUNTY RESIDENTS

## REPORT OF COMMUNITY SURVEY RESULTS

### EXECUTIVE SUMMARY

#### Survey Purpose:

As part of its strategic planning efforts, Henry County Health Department invited all Henry County adults to share their health priorities and concerns via a short, structured survey. The purpose of the survey was to determine:

- How Henry County residents define a healthy community,
- What they believe are the top health problems affecting the health of Henry County,
- What they think the Health Department should focus on,
- What public health services they would support using local health levy dollars to fund,
- Services that residents felt Henry County Health Department should start addressing, and
- Services that residents felt Henry County Health Department should stop addressing.

#### Survey Process:

The “Health Priorities and Concerns of Henry County Residents” survey was modeled after tools used by other local health departments across the national to engage their communities in local health assessment and improvement planning efforts. The survey was pilot-tested with 19 Health Department clients to assess the clarity of instructions, content, and readability.

The survey period was August 9 to September 23, 2011. Surveys were distributed through a mass mailing to 12,694 Henry County households; at a county networking meeting to county offices; and in the Health Department. An online version of the survey was created on surveymonkey.com, and residents were encouraged to use this tool via a link on the Health Department website. Participation was encouraged through a front-page article in the local daily newspaper and a news story on the local radio station.

229 surveys were received (representing roughly 1% of Henry County adults). The majority of responses were received via mail; the responses were entered into the online survey tool for analysis. Respondents were asked to select their top three choices for items one through four; ranking of choices was not requested. Written responses could be provided for items five and six. Respondents were also asked to provide information relating to their gender, marital status, age, education, income, and zip code of residence.

#### Survey Results:

#### **Item 1: Survey respondents characterized the most important traits of a “healthy community” as:**

1. **Good jobs and healthy economy (selected by 49.6% of respondents)**
2. **Access to healthcare services (selected by 45.6%)**
3. Good schools (selected by 32.5%)
4. Strong family life (selected by 27.6%)
5. Religious or spiritual values (selected by 24.6%)

#### **Item 2: Survey respondents felt the factors most hurting the health of Henry County residents are:**

1. **Overweight/obesity (selected by 41.2% of respondents)**
2. Chronic diseases like heart disease, cancer, diabetes (selected by 28.1%)

## HEALTH PRIORITIES AND CONCERNS OF HENRY COUNTY RESIDENTS

### REPORT OF COMMUNITY SURVEY RESULTS

3. Alcohol/drug abuse (selected by 27.2%)
4. Lack of affordable health care (selected by 26.8%)
5. Lack of health insurance (selected by 21.9%)

**Item 3: Survey respondents indicated that for Henry County to become one of the healthiest counties in Ohio, the Health Department should focus on:**

1. Access to health care services (selected by 39.0% of respondents)
2. Overweight/obesity (selected by 25.9%)
3. Preventing teen, unwed, or unplanned pregnancies (selected by 22.4%)
4. Risk factors for diseases like heart disease, cancer, diabetes (selected by 21.9%)
5. Helping people be more active (selected by 21.9%)

**Item 4: Survey respondents indicated that, if grant dollars were not available, local tax dollars (health department levy) should be used to:**

1. Provide medical services (selected by 36.8% of respondents)
2. Reduce overweight/obesity (selected by 36.3%)
3. Reduce risk factors for cancer, heart disease, diabetes (selected by 32.7%)
4. Provide children's shots (selected by 32.7%)
5. Prepare for and response to public health emergencies (selected by 25.6%)

**Item 5:** 54 survey respondents (24% of respondents) listed issues that they felt the Health Department should start addressing. The most common responses were:

- Wellness (8 comments)- exercise programs for all income levels, year-round activity program, nutrition education for parents, increased availability of good food
- Availability of affordable health care services (8 comments)- including medical, dental, family planning services
- Increased communication and community awareness of health department resources (4 comments)- more information about services provided by health department and how to access these services
- Services for seniors (2 comments)- needs of seniors living in rural areas of county

**Item 6:** 31 survey respondents (14% of respondents) listed issues that they felt the Health Department should stop addressing. The most common responses were:

- Free health care services (7 comments)- free dental care; dental services; adult medical services; free health care to the poor; any support to illegal immigrants
- Traffic safety/car seats (3 comments)
- Smoking issues (3 comments)
- Immunizations (2 comments)
- Birth control (2 comments)

**Next Steps:**

Survey results will be shared with focus groups of community residents and local stakeholders in mid-October 2011 to identify strategic actions that could be taken in the next one to three years. The Henry County Board of Health and Health Department staff will use the survey and focus group results, in combination with other sources of data, to create a strategic plan for implementation in 2012-2014.



# Summary of Henry County Community Engagement Process

## September – October 2011

The purpose of this community engagement initiative was to gather input from the residents of Henry County to inform the strategic plan for the Henry County Health Department. HCHD used three methods for collecting community input:

- *Community survey:* In September 2011, a two page survey was mailed to 12,694 residents as part of the agency's annual report to the community. An electronic survey was also conducted as part of the HCHD's website. 229 responses were received from the hard copy and electronic surveys.
- *Resident meeting:* On October 13, 2011, 8 community members attended a two hour meeting to gather additional information about the health priorities of residents. Both individuals who had used HCHD services, and those who had not, participated.
- *Stakeholder meeting:* On October 14, 2011, a group of 8 community organization stakeholders convened for two hours to discuss community survey results and provide additional input regarding health department priorities.

### **SUMMARY OF RESULTS**

#### **COMMUNITY SURVEY: EXECUTIVE SUMMARY IS ATTACHED AS A SEPARATE REPORT.**

#### **RESIDENT MEETING:**

1. *What surprises you about these survey results?*
  - **Overweight and Obesity** –Community members were surprised that survey respondents ranking overweight/obesity as the #1 health problem hurting the health of Henry County residents, but it was not as the #1 area where the Health Department should be focusing (it was 2<sup>nd</sup> to access to health care services).
  - **Birth Control/Teen or Unwed Pregnancies** – Community members felt that survey results were contradicting. The results showed that teen pregnancy was a concern to focus on, but there were multiple respondents that said the Health Department should stop providing birth control.
2. *Based on the survey results, what three things should the health department do in the next year?*
  - **Market Services** – Community members suggested the Health Department find ways to inform all community members about the services they provide so that they can better access and utilize these services.
    - **Community Members Suggestions:**
      - Media – radio, newspaper, news, etc.
      - Social media – to reach younger community members
      - Website – make it more user friendly
      - Public meetings – going out to the community (senior center, library, etc.) and speak to what the Health Department does
  - **Find niche services** - Community members suggested evaluating current services and programs for effectiveness to identify what is best done by the Health Department and what may be better done by community partners. Services retained by the health department would become “niche” programs based on what HCHD does best.
  - **Funding** – Community members suggested that the Health Department try to find grants or other outside funding sources.
  - **Focus on Prevention** – Community members suggested that the Health Department focus on prevention and early detection for residents by offering basic non-invasive screenings.
  - **Provide Wellness and Education** – Community members suggested that the Health Department offer wellness and education programs that focus on “whole person health” and help residents adopt healthier lifestyles.

## Summary of Henry County Community Engagement Process September – October 2011

3. *Based on the survey results, what three things should the health department do in the next 3 years?*
  - **Provide Services** – Community members suggested that the Health Department keep providing strong and needed programs (dental, immunizations, family planning, etc.) and add new needed programs such as chronic disease and medical care related service.
  - **Evaluation of Programs** – Community members suggested that the Health Department continue to evaluate the efficacy of programs/services provided and to expand the provision of “niche” programs.
  - **Build Partnerships** – Community members suggested that the Health Department work on their partnerships with other agencies in the community.
  - **Other** – Community members stated that the Health Department should grow what they are good at and allow outsourcing for what they are not.
4. *What else would you like the health department to know?*
  - **Partnerships** – Community members stated that the Health Department should increase collaboration, networking, and linking with other existing community resources/charitable organizations to “get more bang for your buck.” They also encouraged not being afraid of “thinking outside the box.”
  - **Staffing** – Community members stated that in order for the programs to be successful, the Health Department must have enough employees to run the programs.
  - **Question on Spending** – Community members stated that residents should be informed on where the money is going and how it is being spent. They feel that there are misconceptions about how funds are spent, especially since the public doesn’t understand the restrictions on many funds.
  - **Negative Stigma** - Community members stated that they think there is a stigma related to receiving services at the Health Department- that residents have to be low income to use their services.

### **STAKEHOLDER MEETING:**

1. *How should HCHD respond to these results?*
  - The stakeholders felt that the Health Department should inform community of programs/services. Such as the internet, flyers, other organizations to distribute. \*
    - Help clear up misconceptions
    - Need to find out which media best reaches particular target audiences
    - Link with other facilities/stakeholders websites
    - Make sure the Health department website is user friendly
  - The stakeholders felt that it is important for the medical community to provide leadership with response to these community perceptions. \*
  - The stakeholders felt it is important for the health department to maximize partnerships.\*
    - This will help each other understand what each organizations offer.
    - It will also delete any duplication of services.
2. *What are your reactions to the community dialogue?*
  - **Community Answers** – the stakeholders were surprised that community members’ answers were “administrative” in nature. Although the community members came from various backgrounds, the stakeholders felt as though their answers were from individuals who were educated or from higher socioeconomic status. However, some stakeholders felt that they could have been stereotyping because of what they thought should have been said.

## Summary of Henry County Community Engagement Process September – October 2011

- **Other** – the stakeholders also stated that they wonder if wellness and education was mentioned because it is a politically correct response. They were curious to know if the levy was the reason behind the comments on funding. Also they thought maybe there was a bias by those who attended the meeting because they already have an interest in the Health Department, so they were more likely to give an opinion.

### **Other Information**

A common theme at both meetings was for the Health Department to develop more partnerships with other agencies within the community. Also, both groups felt that the Health Department should find their “niche” and “grow what they are good at.” Both groups agreed that duplicative programs should be dropped. Other themes were both groups felt that the Health Department should strive to get messages out into the community in ways that will allow all target groups to be reached.