

STRATEGIC PLAN

2018 – 2020



Prevent • Promote • Protect



Executive Summary

The Pueblo City-County Health Department (PCCHD) presents its 2018-2020 Strategic Plan. This three-year plan provides actionable items for the health department under five distinct pillars: workforce, population health, excellence, engagement, and sustainability. Each of the pillars (described below) is reinforced by foundational areas, including Colorado public health core services, health equity, and PCCHD's core values. Yearly action plans and progress reports will be maintained and can be accessed on the Department's internal network folders (SharePoint).

- **Workforce:** Recruit, retain, and train a qualified Public Health workforce
- **Population Health:** Change policies and take actions that improve community health and well-being
- **Excellence:** Use state and national standards to evaluate and improve work of PCCHD
- **Engagement:** Engage with new and existing partners, community members, and leaders to drive change and improve the value of public health
- **Sustainability:** Stabilize and sustain funding structure while remaining accountable to the community

“The reason most people never reach their goals is that they don't define them, learn about them, or even seriously consider them as believable or achievable. Winners can tell you where they are going, what they plan to do along the way, and who will be sharing the adventure with them.”

---*Denis Waitley*

**Adopted by Pueblo County Board of Health
November 2017**

Strategic Planning Process

Process Summary

The steps taken to create PCCHD’s 2018-2020 Strategic Plan are described below. This process was internally facilitated to maximize resources and decrease workload burdens.

- This process took place from February through October 2017 over the course of 13 meetings and presentations. Special attention was made to ensure that PCCHD staff members provided input and feedback into the plan and pillars.
- Starting in February through May 2017, Senior Management at PCCHD met to discuss and decide on the focus of the Strategic Plan including timelines. This was done through completion of an environmental scan, SWOT (Strengths, Weaknesses, Opportunities and Threats) assessment, review of existing action plans, review of other strategic plans and creation of pillars with focus areas. All PCCHD staff participated in the SWOT assessment during a workforce development day. Community members and the Board of Health were also offered the opportunity to participate in an election and SWOT assessment.
 - The environmental scan involved looking at the following areas of consideration: Public Health 3.0, Chief Public Health Strategist, National Public Health Accreditation, Community Health Assessment and Improvement Plan, Core Public Health Services, Mandates (local, state and federal), financial impact, Workforce Development Plan, Social Determinants of Health, current contracts and commitments, as well as Colorado Winnable Battles.
 - The following charts summarize the major trends from the SWOT assessments described above. These items were mentioned multiple times in the results and thus were significant trends that should be accounted for in the planning process.

SWOT Results from PCCHD Staff Members			
STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
<ul style="list-style-type: none"> • Understanding the community • Connected to community partnerships • Strong skills within the Public Health Sciences competency 	<ul style="list-style-type: none"> • Workload puts quality of effort at risk • Inadequate inter-division communication and alignment 	<ul style="list-style-type: none"> • Public Health tax district • Branding • Being visible within the community and with partners • Collaboration with other Health Departments and medical community 	<ul style="list-style-type: none"> • Lack of Public Health understanding (elected officials/general public) • Lack of political relationships

SWOT Results from Community Partners and Board of Health Members

STRENGTHS	WEAKNESSES	OPPORTUNITIES	THREATS
<ul style="list-style-type: none"> • Data driven decision making • Great facility • Access and ability to provide data to the community 	<ul style="list-style-type: none"> • Variable funding; too dependent on short term grants and funding outside of PCCHD's control • Minimal partnership with other health departments • Have many 'masters' e.g. CDPHE, City Council, Commissioners, etc. 	<ul style="list-style-type: none"> • Marijuana issues and collaboration • Host a data/networking summit annually • Growing recognition by payers and health policy makers that public health and prevention is key to reducing costs • Awareness of emerging issues and impacts to public health • Inject public health priorities into public policy and community decision making, i.e., economic development. 	<ul style="list-style-type: none"> • Gap in funding • Inadequate engagement at key tables of discussion • Lack of community knowledge on public health services and responsibilities • Workload puts excellence and quality at risk

- In May 2017, Senior Management presented the draft pillars and focus areas to the Board of Health (BOH) for review and input. This was done during a Board retreat where information on the process was reviewed and Board Members were asked to provide feedback on specific sections of each focus area. Also during this time, a revision to the vision and mission statements was proposed.
- At the end of June, all of PCCHD's Management Team came together to begin the task of creating objectives and activities and finalizing the plan details. The process began with final revisions and creation of the new mission and vision statements. Then, a brainstorming session using the nominal group process was held to determine objectives and activities to be included under each pillar.
- Objectives with action steps detailing persons responsible, timelines, and measures of success were drafted over the next three meetings throughout July and August 2017. All staff members were asked to review the draft plan and provide their input on September 18 during a Strategic Plan Open House. Feedback was incorporated into the plan and clarifications were made.
- The plan draft was presented to the Board of Health for final input during Board work sessions in September and October 2017.
- Comments from staff members and the Board Of Health (BOH) were taken back to PCCHD's Management Team for finalization at the end of September. The BOH received the final plan for adoption on November 29, 2017.
- Finally, performance measures were selected to demonstrate progress related to the objectives and pillars.

Vision, Mission, Core Values

During the strategic planning process, PCCHD Senior Management revised the existing vision and mission statements for PCCHD. The need for this revision was noted after the pillars and focus areas were developed and Senior Managers determined the need to simplify and clarify the two statements to more accurately reflect the work done by PCCHD and make the statements memorable and meaningful. Senior Management drafted new statements and presented the statements to the BOH for review and input. Comments from the BOH were taken to the PCCHD Management Team for consideration in drafting the final statements.

The following vision and mission statements were adopted November 2017:

Vision: A thriving, healthy and safe Pueblo County

Mission: Promotes and protects the health and environment of Pueblo County

The Department's Core Values were adopted in 2010 after deliberate creation by a committee of staff members. These values guide PCCHD and the employees in daily interactions and decision making.

- Communication
- Accountability
- Respect
- Positive Attitude
- Empowerment and Professional Development
- Teamwork

Consideration of Key Support Functions Required for Efficiency and Effectiveness

Throughout the process described, there were several conversations regarding the structure, capacity and resources that are in place and/or are needed to carry out the plan efficiently, effectively, and with integrity. One of the most crucial elements identified was for all of leadership to support the plan and to have responsibility for implementation. If leadership is not accountable and invested in the plan, or is not supportive of the work necessary to implement the plan, then the success will be compromised. To account for this, the process included all levels of leadership in developing the plan. In addition, different leaders were assigned to various objectives to monitor progress. Next, individual staff members and the divisions were also included in this process through review of the plan and objectives. Also, there are specific objectives each division is responsible for creating and implementing that will impact the division's programs and day-to-day performance. It is the hope through inclusion, staff members will have more buy-in and support of the plan and its implementation.

Having regular reporting and tracking mechanisms in place ensures progress and revisions are occurring as appropriate. This reporting and tracking system is done by naming individuals responsible for each objective with specific timelines, deliverables, and measures. The specifics for this process are described below in the implementation and evaluation section.

Several conversations were held regarding capacity. In fact, specific capacity issues were identified and acknowledged. In order to fully achieve the future desired state, these deficiencies should be addressed. These deficits included additional staffing requirements, financial resources, and an

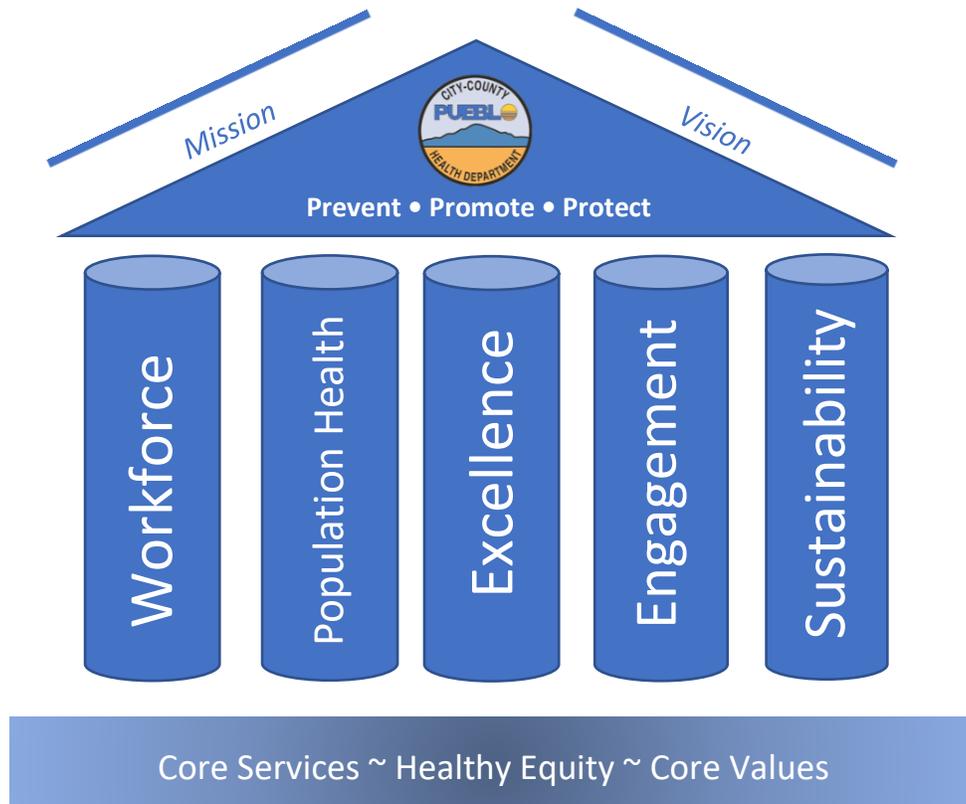
understanding of public health’s role and importance. Many of these staffing needs are outside the control of PCCHD leadership. However, steps can be taken to get closer to securing these resources, which have been built into the plan. For example, website management and updating (branding), performance management and program assessment, and partnership effectiveness.

Another future significant resource gap was identified as the ending of Chemical Stockpile and Emergency Preparedness Program funding. This program has provided significant resources for technology and training during the past 29 years. As the program end date draws near, PCCHD needs to ensure existing technology funded through this program is updated and replaced and training opportunities are maintained. The ability to continue funding this technology and training, will have a significant financial impact on the Department.

Finally, internal and external SWOT assessments identified financial capacity and sustainability as a key matter. Financial concerns, constraints, and barriers pose significant challenges to the entire public health system and create obstacles to carrying out the work necessary for a healthy community. To overcome the financial uncertainties, it will require creative approaches regarding education and awareness of public health roles, examining and pursuing diverse funding, having a plan for funding transitions, etc. Considering the importance of this work, an entire ‘Sustainability’ pillar was created. However, this theme is seen throughout the other pillars as well.

Pillars with Focus Areas

Below is a visual of the PCCHD pillars and description of each pillar and focus areas. Detailed work plans will be created annually. These work plans along with quarterly progress reports can be found in the internal PCCHD SharePoint folder.



Pillar	Focus Area
Workforce Recruit, retain, and train a qualified Public Health workforce	Retention
	Professional development/training for employees and supervisors
	Capacity
Population Health Change policies and take actions that improve community health and well-being	Community Health Improvement Plan (CHIP)
	Policy
	Emerging Issues
Excellence Use state and national standards to evaluate and improve work PCCHD does	Accreditation
	Performance Management: Data Driven Decisions
	Quality Improvement: Capacity, culture, efficiency/effectiveness, and customer satisfaction
Engagement Engage with new and existing partners, community members and leaders to drive change and improve the importance of public health	Collaboration/Partnerships
	Education/Public Relations
	Board of Health engagement and efficiency
Sustainability Stabilize and sustain funding structure while remaining accountable to the community	Technology capacity for information management
	Advocacy
	Stewardship/Accountability

Implementation and Evaluation

A detailed work plan will be created annually detailing action steps with timelines, persons responsible and expected results. Each quarter an update for each objective and activity will be collected and entered into ClearPoint, the Department’s strategy management software. The progress will then be reviewed by the Strategic Planning Team to ensure progress is occurring, resources needed are deployed, and barriers are overcome. The Strategic Planning Team is made up of Program Managers and Division Directors and serves as the Performance Management Team for the Department as well. New action plans will be created based on the overall goals, progress made during the previous year, and accounting for necessary adjustments because of environmental changes or influences.

Progress reports will be given to the Board of Health two times per year and at least annually to PCCHD staff members.

Linkages with Performance Management, Quality Improvement, Workforce Development, and Community Health Improvement Plan

A successful strategic plan cannot stand alone or operate in a vacuum. The plan is inexorably linked with other efforts such as performance management, quality improvement, workforce development, community health assessment and improvement planning among others. For example, as action steps and objectives are implemented and monitored there will be times when the defined performance measures, timelines, or objectives will not be achieved. When this occurs, a quality improvement approach can be taken to determine ways to make improvements to achieve the desired outcome. This approach could be through a formal quality improvement project that follows the Department procedures and is monitored through the Quality Improvement Steering Committee. Or, the improvement may be more simplistic and only require the use of quality improvement tools and the knowledge of leaders that have received formal quality improvement training.

To track the impact of the Strategic Plan, performance measures will be set and tracked on a regular basis. The data gathered from these measures will be reviewed by the Strategic Planning team, as well as the Board of Health. An additional overlap for these two systems comes because the Strategic Planning team also serves as the performance management team. The performance management system at PCCHD incorporates looking at data to show the impact, as well as tracking and examining progress toward achieving objectives. The plan acknowledges unless process measures are met, the ultimate result will not be achieved. Thus, quarterly review toward achieving process measures will be essential to the performance management system and ultimate success of the Strategic Plan.

The Strategic Plan links to other Department plans such as the Community Health Improvement Plan and the Workforce Development Plan through inclusion of objectives in the action plan. Instead of tracking objectives and action steps for each of these plans separately, the decision was made to track everything within this one plan. The intention is to ensure transparency among plans and acknowledge efforts planned or occurring.

Appendix

A. List of Participants

As described in the process, the following groups and individuals were responsible for the development of PCCHD's Strategic Plan.

- Senior Management Members:
 - Georgia Alfonso, Fiscal Officer
 - Jody Carrillo, Director of Environmental Health and Emergency Preparedness
 - Ramona Chisman-Ewing, Executive Assistant to the Director
 - Katie Davis, Director of Operations and Health Promotion
 - Sarah Joseph, Public Information Officer
 - Lynn Procell, Director of Community Health Services
 - Sylvia Proud, Public Health Director
- Program Management Team Members (in addition to those listed under Senior Management):
 - Vicki Carlton, Program Manager, Environmental Health and Emergency Preparedness
 - Nicole Cawrse, Program Manager, Community Health Services
 - Kathy Nelson, Program Manager, Environmental Health and Emergency Preparedness
 - Zak VanOoyen, Program Manager, Community Health Services
 - Jenna Ward, Program Manager, Community Health Services
 - Kim Whittington, Program Manager, Operations and Health Promotion
 - Chad Wolgram, Program Manager, Environmental Health and Emergency Preparedness
- The Board of Health:
 - Eileen Dennis, RN, Board of Health President (Community Data Liaison, Pueblo Triple Aim Corporation)
 - Michael Nerenberg, MD, Board of Health Vice President
 - Ed Brown, (Pueblo City Council)
 - Donald Moore, (CEO, Pueblo Community Health Center)
 - Garrison Ortiz, (Pueblo County Commissioner)
- All PCCHD staff members participated in the SWOT Analysis, as well as an open house event to review the Strategic Plan objectives and activities.
- Facilitator: Shylo Dennison, Public Health Planner
- Facilitator: Anne Hill, DrPH

Lastly, the community was asked to participate in the SWOT Analysis. The creation of a well-rounded and thoughtful plan would not have been possible without input from all of these individuals.