Strategic Plan
2021 – 2023

December 23, 2020

Prevent • Promote • Protect
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Executive Summary

The Pueblo Department of Public Health and Environment (PDPHE) presents the 2021-2023 Strategic Plan. The development of this strategic plan began in early December 2019 and throughout 2020. PDPHE Senior Management worked through the COVID-19 pandemic to identify strategic priorities and goals to help move PDPHE and Pueblo County forward over the next three years. This three-year strategic plan provides actionable items for PDPHE under two priority areas: population health and organizational excellence. Each priority area includes two goals that reflect the current needs of PDPHE and Pueblo County.

- **Priority Area One: Population Health**
  - **Goal One:** Decrease morbidity and premature mortality due to health inequities, health behaviors, and injury
  - **Goal Two:** Increase the community’s ability to respond to, withstand, and recover from emergency and disaster situations

- **Priority Area Two: Organizational Excellence**
  - **Goal Three:** Enhance systems and training to support an innovative, competent, and diverse public health workforce to respond to changing public health needs in Pueblo County
  - **Goal Four:** Optimize operations at PDPHE to improve fiscal accountability, effective resource management, use of technology, strategic funding decisions, and customer service
Background and Governance

The Pueblo Department of Public Health and Environment (PDPHE) was established in 1952 through a partnership with the City and the County of Pueblo. PDPHE’s goal is to promote and protect the health and environment of Pueblo County. Initially, PDPHE addressed typical health issues such as polio and rubella; however, as health issues changed and the burden has moved to chronic disease and environmental health issues, PDPHE services evolved as well. Although the community needs have changed and PDPHE has adjusted to meet those needs, the focus is still on the mission of promoting and protecting the health and environment of Pueblo County.

PDPHE serves all of Pueblo County, in which 18.2% of the 168,424 residents live in poverty and only 22% receive a bachelor’s degree or higher. In addition, 51.7% are White not Hispanic or Latino, 43.2% are Hispanic or Latino, 2.6% are Black or African American alone, 3.2% are American Indian/Alaskan Native alone, 1.1% are Asian alone, and 3% are two or more races.

The Board of Health is the governing body for PDPHE. The five-members are appointed by the Pueblo City Council and Pueblo County Commissioners for a term of five years. The Board meets monthly to provide appropriate oversight of contracts, finances, and strategic planning, while advocating on behalf of the Health Department.

Process Summary

The creation of the new strategic plan commenced December 2019 and was internally facilitated. The framework for the strategic plan processes came from the Developing a Local Health Department Strategic Plan: A How-To Guide by the National Association of County & City Health Officials (NACCHO). PDPHE’s strategic plan process was further influenced by a comprehensive review of the following factors:

- Public Health Accreditation Board (PHAB) requirements;
- Budget and budget timeframes;
- Strategic plan committee composition;
  - Involvement from Board of Health, program managers, all staff, and external stakeholders
- Available data; and
- Data collection methodology.

Starting in mid-January 2020 through early-March 2020, Senior Management met regularly to discuss strategic focus areas and goals for the Strategic Plan based on information collected. This process included the following steps.

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1 United States Census Bureau: QuickFacts
2 National Association of County & City Health Officials
Data Collection

Using worksheet #3 in NACCHO’s Developing a Local Health Department Strategic Plan: A How-To Guide, as shown in Appendix C of this document, Senior Management identified key sources of information that would provide valuable information to inform the strategic planning process and development of strategic priorities, goals, and objectives. In addition, the list below highlights information reviewed early in the strategic planning process:

- Most recent PDPHE Community Health Assessment and Community Health Improvement Plan;
- Current Colorado Department of Public Health and Environment Community Health Assessment and Community Health Improvement Plan;
- Internal customer satisfaction surveys from 2018 and 2019;
- 2019 County Health Rankings for Pueblo County;
- Public Health Transformation 3.0;
- Strategic Plans from 14 Local Public Health Agencies across the United States and the Strategic Plan from the Colorado Department of Public Health and Environment;
- Employee information including, but is not limited to:
  - Past and current staff surveys: staff satisfaction surveys, performance management/quality improvement, and strategic planning
  - Turnover data
  - Employee feedback from exit interviews, divisional staff meetings, annual staff performance reviews, etc.
  - Senior management and program manager meetings

A summary of key findings can be found later in this strategic plan document, or in Appendix B.

Review of Programs and Services by Division

Senior Management was tasked with reviewing all programs and services under each member’s area of responsibility to determine if each program or service was:

- **Mandated**: programs / services legally required for a Health Department.
- **Essential**: programs / services not legally required, but fulfill a critical public health need within the community.
- **Priority**: programs / services not legally required or essential for the community, but meet an important, pre-defined public health need/role within the community.
- **Beneficial**: programs / services that provide or enhance the health of the community, but are not legally mandated, not essential, or not a priority.

Senior Management determined PDPHE provided a total of 69 programs and services (excluding those provided by the Business and Finance Office). There were 26 programs categorized as mandated, 15 essential, 19 priority, and 9 beneficial.
For the document used by Senior Management when reviewing programs and services, please see Appendix C. This document also directed Senior Management to document details supporting classification of programs and services. Results from the program review were taken into consideration when developing strategic priorities, goals, and objectives, and were reviewed continuously when making ongoing organizational decisions.

**Staff Survey**

All staff within PDPHE, including Senior Management and Program Managers, were given an opportunity to provide feedback in January on the direction of the strategic plan by answering three open-ended questions via SurveyMonkey. At the time the survey was distributed, 68 out of 101 staff members (67%) took the opportunity to provide feedback. Below are results of the survey:

**PDPHE Staff Feedback on Current Mission, Vision and Core Values**

![Graph showing feedback results](image)

Please indicate the degree to which you disagree or agree with the following. PDPHE is consistently meeting/demonstrating its organizational:

- **Mission**: Promotes and protects the health and environment of Pueblo County (4.6)
- **Vision**: A thriving, healthy and safe Pueblo County (4.21)
- **Values**: Communication, Accountability, Respect, Positive Attitude, Teamwork, and Empowerment & Professional Growth (3.87)

*Values demonstrate scores with a maximum of 5.*
### Open Ended Questions

<table>
<thead>
<tr>
<th>People, places, and things are always changing. What changes do you anticipate happening that PDPHE should be aware of and plan for?</th>
<th>What gaps do you see in the community that PDPHE should address?</th>
<th>If money and staffing were not an issue, what could PDPHE be doing differently or better that has the biggest impact on the community?</th>
</tr>
</thead>
</table>

#### Key Themes

<table>
<thead>
<tr>
<th>Changing Population Demographics</th>
<th>Behavioral and Mental Health</th>
<th>Access to Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environment</td>
<td>Built Environment and Transportation</td>
<td>Community Outreach</td>
</tr>
<tr>
<td>Funding</td>
<td>Community Outreach</td>
<td>Environment / Regulation</td>
</tr>
<tr>
<td>Poverty</td>
<td>Financial Security / Insecurity</td>
<td>Health Education</td>
</tr>
<tr>
<td>Staff Turnover / Retention</td>
<td>Healthy Weight</td>
<td>Partnership Engagement</td>
</tr>
<tr>
<td>Political, Legislative, Regulation</td>
<td>Health Education / Equity</td>
<td>Health Education / Equity</td>
</tr>
<tr>
<td>Substance Use (drugs, alcohol, tobacco vaping)</td>
<td>Substance Use</td>
<td>Staff – Hiring and Development</td>
</tr>
</tbody>
</table>

When cross referencing key themes and responses between each question, the following key themes were taken into high consideration throughout development of the strategic priorities, goals, and objectives:

- Sustainable funding;
- Workforce development;
- Environmental health;
- Community outreach/education;
- Population health; and
- Behavioral health.

Population health and behavioral health were selected as key themes for consideration as they are broad categories that encompasses many themes, including those listed above. Additionally, the wide variety of responses from staff members indicated population health and behavioral health are important public health focus areas. However, additional review of health considerations and needs was required to determine specific population and behavioral health priority areas.

**Strengths, Weaknesses, Opportunities and Threats Assessment**

In addition to the all staff survey, Senior Management wanted to get additional insight from staff and board of health members. During the SWOT process, Senior Management requested unbiased feedback from all participating members, therefore, the SWOT assessment was performed in multiple stages. First, each division performed a SWOT assessment with only staff
member feedback. Next, a meeting was held with only Program Managers to conduct a SWOT, followed by a separate meeting with Senior Management to conduct a SWOT assessment. Finally, the Board of Health was asked to participate in a SWOT assessment via SurveyMonkey. All results were compared and overlapping themes were identified. Lastly, Senior Management and Program Managers participated in a meeting to review and revise results of all SWOT assessments, resulting in major themes highlighted in the table below. The major themes were taken into consideration during the planning process and when identifying strategic priorities, goals, and objectives.

<table>
<thead>
<tr>
<th>SWOT Results from PDPHE Staff Members and Board of Health</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>Knowledgeable and skilled staff members motivated to complete the job they are passionate about</td>
</tr>
<tr>
<td>Financial accountability</td>
</tr>
<tr>
<td>Environment to support all staff (i.e. building, equipment, human resources, etc.)</td>
</tr>
<tr>
<td>Diverse community services and support</td>
</tr>
<tr>
<td>Supportive, dedicated team members who collaborate to move the department forward</td>
</tr>
<tr>
<td>Public/community education and collaborative outreach efforts that are easily accessible</td>
</tr>
<tr>
<td>Evidence-based decision making</td>
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<tr>
<td>Adaptable to community needs</td>
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</tbody>
</table>
Initial Development of Strategic Priority Areas and Goals

After reviewing all information outlined above, Senior Management participated in multiple meetings to create the preliminary list of strategic priority areas and goals. Initial strategic priorities included:

- Quality of life;
- Safe and healthy environment;
- Highly effective workforce; and
- Efficient and effective business practices.

The end goal of these strategic priorities was to positively impact chronic disease, communicable disease, and social determinants of health. With that in mind, this information was presented during the Board of Health work session, where board members were actively engaged in further identifying priority areas and providing feedback on necessary changes.

Board of Health Engagement

In addition to the SWOT assessment, a separate work session was held with all Board of Health (BOH) members, PDPHE’s chief medical officer, and PDPHE’s legal representative to review the summary of results obtained from steps outlined below, and to actively participate in numerous exercises to further identify priorities and needs within Pueblo County. During exercises, participating members highlighted various needs within Pueblo County that would positively impact chronic disease, communicable disease, and social determinants of health. Additionally, through the work session, participating members provided valuable feedback that ultimately adjusted the direction Senior Management would take to develop the strategic plan. Specifically, this work session resulted in a shift of strategic priorities from the four previously mentioned to focus more broadly on population health and organizational excellence.

Working Through COVID-19

Shortly after the BOH work session, PDPHE, like all other public health agencies across the United States, began to shift efforts towards protecting residents of Pueblo County from COVID-19. During this time, the planning process continued; however, the process had to continuously be adjusted to accommodate response efforts. The following sections highlight the original work intended and the final direction taken.

Community Engagement

During initial stages of the planning process, Senior Management advocated for community member and stakeholder engagement. Internal customer satisfaction surveys were initially reviewed to determine overall satisfaction with PDPHE programs and services, and to identify areas for improvement. These surveys revealed PDPHE customers were highly satisfied with programs, services, and staff members. The Senior Management team also concluded action had already been taken on areas identified in surveys for improvement. The following surveys were reviewed:

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- Family Planning (2018 & 2019)
- Environmental Health Temporary Events (2019)
- Immunization Services (2019)
- Specialty Clinic Services (2019)
- Women, Infants, and Children (2019)

Senior Management also emphasized the need to engage key community stakeholders after the BOH work session and worked through a few exercises to identify specific stakeholders to engage. This included utilizing a tool from The Community Tool Box and recommended by NACCHO to sort stakeholders into one of four quadrants, shown below.

Unfortunately, the COVID-19 pandemic created an environment where most of the key community stakeholders were heavily engaged in the COVID-19 response. It was determined agency capacity was limited to participate in providing formal feedback to PDPHE. Therefore, informal information was obtained over multiple months as PDPHE Senior Management participated in numerous community meetings with community stakeholders. These meetings allowed for continuous dialogue and information sharing regarding ongoing needs and concerns. This information further influenced development of the strategic plan priority areas, goals, and objectives, and will also be taken into consideration during year-one work plan development.

**Refinement of Priorities, Goals, and Objectives**

Between March and July, multiple meetings occurred to further identify, review, and refine priority areas, goals, and objectives. Once established, Senior Management and Program Managers participated in sessions where objectives were reviewed using the following questions:
• Has the objective been identified as a need for PDPHE and/or Pueblo County, pre-COVID-19;
• Is the objective a need for PDPHE and/or Pueblo County during/post-COVID-19;
• Will the objective move PDPHE and/or Pueblo County forward;
• Is the objective cross-divisional;
• Does the objective convey what actually needs to be accomplished/is the objective clear;
• Can the objective be completed within three years.

In a follow-up meeting with both Senior Management and Program Managers, results were compared, and differences were discussed to further identify any amendments necessary. Prior to finalizing objectives, management team included staff in refinement of strategic priorities, goals, and objectives. Due to social distancing requirements resulting from COVID-19, a series of short videos were created providing an overview and steps utilized to develop each goal and objective. Staff were asked to complete an online survey similar to Senior Management and Program Managers and had an opportunity to provide additional feedback on each objective.

Senior Management met to complete one final revision of goals and objectives, taking into consideration staff feedback and current impacts on capacity associated with COVID-19.

Vision, Mission, Core Values

During development of the strategic plan, PDPHE Senior Management reviewed existing vision, mission, and core values to determine whether revisions were necessary. After reflecting on past and current staff surveys and board of health feedback, it was determined the current vision, mission, and core values still reflect work done and beliefs held by PDPHE leadership and staff.

The following vision and mission statements were adopted in 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 PDPHE and the staff members in daily interactions and decision making.

• Communication: active listening; openness and honesty.
• Accountability: accept responsibility; act with integrity; follow through.
• Respect: responsible citizenship; social and environmental justice; trust.
• Positive Attitude: friendly; accessible; considerate; empathetic.
• Empowerment and Professional Development: cultivate personal and professional development to maintain and improve workforce competency; promote initiative; foster an environment of independence and leadership; support continuous learning and education.
• **Teamwork:** collaboration; flexibility; commitment.

**Focus Areas, Goals, and Objectives**

Development of the strategic plan was influenced by numerous factors, such as staff feedback from past and current surveys, divisional staff meetings, exit interviews, and staff annual reviews, as well as Board of Health work sessions, Senior Management meetings, Program Management meetings, and summaries of internal and external reports and assessments. This comprehensive review resulted in the creation of Focus Areas, Goals, and Objectives identified below.

The objectives were created using the Specific, Measurable, Achievable, Realistic, and Time-defined (SMART) concept. The action plans for each objective will be reviewed quarterly to ensure progress is occurring and to make course corrections as necessary. Annually, the action plans will be reviewed and, if necessary, revised to ensure current efforts align with and accommodate progress, barriers, community needs, capacity, and emerging trends. Yearly action plans will be maintained separate for this plan to allow for adaptations as necessary.

**Focus Area 1: Population Health**

**Goal 1:** Decrease morbidity and premature mortality due to health inequities, health behaviors, and/or injury.

**Objective 1:** By December 31, 2023, PDPHE will implement strategies to ensure 93% of Pueblo County kindergartners are protected against measles, mumps and rubella (MMR).

**Objective 2:** By December 31, 2023, PDPHE will reduce the rate of STIs (syphilis, gonorrhea, chlamydia) within Pueblo County by 3%.

**Objective 3:** By December 31, 2023, PDPHE will identify and implement strategies to address health inequities among populations that are at risk for poor health outcomes and sources of vulnerability in order to improve the overall ranking for Pueblo County in the County Health Rankings from 54/60 to 50/60.

**Objective 4:** By December 31, 2023, PDPHE will implement at least three strategies to improve environmental sustainability in Pueblo County with an emphasis on environmental justice in order to support and develop healthy places where people live, learn, work, and play.

**Goal 2:** Increase the community’s ability to respond to, withstand, and recover from public health emergency and disaster situations

**Objective 1:** By December 31, 2023, PDPHE will convene Emergency Support Function (ESF) 8 community partners and leaders on a yearly basis to create, evaluate, and revise,
as necessary, a comprehensive ESF8 annex of the Emergency Operations Plan for Pueblo County.

**Objective 2:** By December 31, 2023, PDPHE will identify and implement at least one prevention, response, mitigation, and/or recovery strategy, based on lessons learned during COVID-19 response.

**Focus Area 2: Organizational Excellence**

**Goal 3:** Enhance systems and training to support an innovative, competent, and diverse public health workforce to respond to changing public health needs in Pueblo County.

**Objective 1:** By December 31, 2023, PDPHE will implement and evaluate a Workforce Development Plan that includes training, hiring, retention, and succession planning.

**Objective 2:** By December 31, 2023, PDPHE will implement strategies for standardization of employee training and development.

**Goal 4:** Optimize operations at PDPHE to improve fiscal accountability, effective resource management, use of technology, strategic funding decisions, and customer service.

**Objective 1:** By December 31, 2023, PDPHE will identify strategic and/or alternate funding strategies to improve the Department’s financial sustainability.

**Objective 2:** By December 31, 2023, PDPHE will continue to create a culture of continuous quality improvement by integrating quality improvement in all levels of the organization; moving from Phase 4 to Phase 5 of NACCHO’s QI assessment.

**Objective 3:** By December 31, 2023, PDPHE will review at least twelve internal programs/services to identify alternative service opportunities to meet community needs and optimize operations.

**Objective 4:** By December 31, 2023, PDPHE will use data to evaluate programs/services to determine existing capacity, expertise, effectiveness and efficiency with consideration of the Department’s strategic direction.

**Linkages**

Due to the complexity of large health issues outlined in the strategic plan process, it was important for PDPHE’s strategic plan to align with numerous internal and external initiatives. Alignment maximizes limited capacity, resources, and knowledge in order to support maximum impact.
The following goals from Healthy People 2030\(^3\) align with PDPHE’s population health focus area.

- Attain healthy, thriving lives and well-being, free of preventable disease, disability, injury, and premature death.
- Eliminate health disparities, achieve health equity, and attain health literacy to improve the health and well-being of all.
- Create social, physical, and economic environments that promote attaining full potential for health and well-being for all.
- Promote healthy development, healthy behaviors, and well-being across all life stages.
- Engage leadership, key constituents, and the public across multiple sectors to take action and design policies that improve the health and well-being of all.

PDPHE’s plan also aligns with two keys statewide plans. The first is the Colorado Department of Public Health and Environment (CDPHE) Strategic Plan for 2019-2023\(^4\). In this plan, the following objectives and goals align childhood immunizations, COVID-19 response, and advancing operational excellence that consistently exceeds expectations. The final goal includes digital transformation, health equity, and environmental justice. The second plan is the CDPHE Public Health Improvement Plan 2020-2024\(^5\) that calls out climate change action, root cause of health, and emerging issues such as immunizations.

Internally, the strategic plan also aligns with the following initiatives and efforts. First, the strategic plan will have defined performance measures to track and monitor implementation and impact. The performance measures will be a part of the formal performance management system for the Department. Next, when a performance measure indicates a goal is not being met, quality improvement projects will be used to assist with determining ways to reach goals and/or improve outcomes. Furthermore, quality improvement tools are built into several strategic plan objectives and an entire objective focuses on creating a culture of continuous quality improvement within the organization. Third, the Department’s Workforce Development Plan (WFD) aligns not only through an objective on creation of an updated WFD plan, but also objectives on employee training and assessing capacity. Last, PDPHE’s Community Health Improvement Plan (CHIP) will support the strategic plan in a variety of ways. First, data gathered through the Community Health Assessment (CHA) will inform objectives under the population health focus area. Furthermore, partnerships developed through the CHA and CHIP efforts will be mobilized to achieve the population health objectives that should ultimately support CHIP priorities.


\(^{4}\) https://drive.google.com/file/d/12TN8dsld3ZOW5cv5REREX71heQfETgoV/view

\(^{5}\) https://docs.google.com/document/d/1uqoxqAXyuJQ2vkmZ82nUCQohP_QTnz2gloBxPR69U70/edit
## Appendix A. Assessing Data Needs

<table>
<thead>
<tr>
<th>Data Readily Accessible</th>
<th>Data to Compile</th>
<th>Data to Collect (List possible ways to collect data and expected time to complete)</th>
<th>Responsible Person</th>
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## Appendix B. Environmental Scan

<table>
<thead>
<tr>
<th>Colorado Health Rankings</th>
<th>Public Health Transformation 3.0</th>
<th>Pueblo CHA/CHIP</th>
<th>Staff Turnover</th>
<th>Employee Meetings</th>
<th>Other Strategic Plans from Local Public Health Agencies</th>
<th>Employee Evaluations</th>
<th>CU Boulder</th>
<th>CDPHE CHA/CHIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Outcomes - 56/60</td>
<td>SDOH</td>
<td>Unprotected sex</td>
<td>High staff member turnover</td>
<td>Positive - Good teams</td>
<td>Mix of internal/external goals</td>
<td>Communication Material Request Form (issues with the process, lack of autonomy, expectations)</td>
<td>Decreased water availability over next 50 years</td>
<td>Behavioral and Mental Health</td>
</tr>
<tr>
<td>Length of Life - 56/60</td>
<td>More focus on convening and leading rather than doing</td>
<td>Drugs among adults and youth</td>
<td>Shift in tenure (training, culture, etc.) with &gt;50% under 5 years</td>
<td>Positive - Flexibility</td>
<td>Consider SMART goals (e.g., CDPHE's)</td>
<td>Time management</td>
<td>Increased heat / fires over next 50 years</td>
<td>Climate Change Action and Adaptation</td>
</tr>
<tr>
<td>QoL - 57/60</td>
<td>More focus on data</td>
<td>Mental Health among adults and youth</td>
<td>Need for retention</td>
<td>Positive - Benefits</td>
<td>Look for Alignment</td>
<td>Staff capacity (workload, prioritizing efforts/concerns)</td>
<td>How do we plan to respond?</td>
<td>Root Causes of Health - Primarily focused on Housing and Food Security</td>
</tr>
<tr>
<td>Health Factors - 55/60</td>
<td>Good expertise</td>
<td>Dental among adults and youth</td>
<td>Need for retraining</td>
<td>Positive - People</td>
<td>Consider short and interim goals vs long term goals</td>
<td>Lack of systems (big picture) perspective</td>
<td></td>
<td>Urgent and Emerging Issues, such as: (1) Vaping and e-cigarette use; (2) Emerging water contaminants; (3) Transportation-related injuries and fatalities; (4) Immunizations</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Health Behaviors - 57/60</th>
<th>Plan for short tenures</th>
<th>Positive - Family Friendly</th>
<th>Unrealistic expectations</th>
<th>Transforming Colorado’s Governmental Public Health System (Core Public Services - Public Health Transformation)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Care - 18/60</td>
<td>Regional Considerations</td>
<td>Negative - Communication</td>
<td>Funding (sustainability, direction)</td>
<td></td>
</tr>
<tr>
<td>Social &amp; Economic Factors - 58/60</td>
<td>Policy/informing on policy</td>
<td>Negative - Transparency</td>
<td>Lack of direction</td>
<td></td>
</tr>
<tr>
<td>Physical Environment - 58/60</td>
<td>Evaluation/performance management - using for decision making</td>
<td>Negative - Flexibility</td>
<td>Bureaucracy</td>
<td></td>
</tr>
<tr>
<td>STI’s are considerably higher than state</td>
<td></td>
<td>Negative - Salary</td>
<td>Goals: Training</td>
<td></td>
</tr>
<tr>
<td>Obesity higher than state and increasing</td>
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<td>Negative - Not much passion for work mentioned overall (not mentioned as much as other items)</td>
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<td>Access to exercise significantly lower than state</td>
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Appendix C. Program Review

**Definitions**

**Mandated:** programs / services legally required for a health department.

**Essential:** programs / services not legally required, but fulfill a critical public health need within the community.

**Priority:** programs / services not legally required or essential for the community, but meets an important, pre-defined public health need/role within the community.

**Beneficial:** programs / services that provide and enhance the public health of the community, but are not legally mandated, not essential, or not a priority.

**Documentation:** If the program / service is a mandated program for Local Public Health Agencies, please provide the reference outlining the requirement to offer said program / service (i.e. Agency and document title; URL; etc.). If not mandated, this section can be left blank, unless you want to provide supporting documentation as to why it is an essential, priority, or beneficial program.

<table>
<thead>
<tr>
<th>Division/Area</th>
<th>Program Area</th>
<th>Program / Service Title</th>
<th>Program Type <em>(Choose one: Mandated; Essential; Priority; Beneficial)</em></th>
<th>Documentation</th>
<th>Notes</th>
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