

2018-2021



Sandusky County Health Department Strategic Plan

Adopted on: 09.21.18

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Foreword

It gives me great pleasure to introduce to you the Sandusky County Health Department (SCHD) 2018-2021 Strategic Plan, which outlines the strategic vision, goals and direction the SCHD will take to prevent, promote and protect the health of Sandusky County, Ohio.

The following plan will help ensure that the workforce within SCHD has a blueprint to fulfill the mission of working with the community to protect and improve the health and environment of those people who live, work, and play within Sandusky County.

Throughout the plan we will focus on seven strategic priorities that directly align with our Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and State Health Improvement Plan (SHIP). The priority areas are: achieve Public Health Accreditation; Continuous Quality Improvement; Workforce Development; increase capacity in agency Branding, Marketing and Communication, Community Engagement, Financial Health; and Information Technology.

This plan was formulated with all levels of influence from our organization and included community feedback. From board members to boots-on-the-ground to give all actions in this agency purpose and accountability to improve health outcomes.

The SCHD has always been focused on improving the health and well-being of the community. Using the feedback of the CHA and CHIP, we truly are using feedback from the community and dedicating resources to community priority areas while advancing SCHD. It is encouraging to see this alignment.

I could not be prouder of this fine workforce and the supportive board for the manner in which they shared, supported and crafted our plan. Now is the time we take action as a team and achieve success together. As George Washington Doane, Bishop of New Jersey in 1825 wrote, "Onward and upward," which is a common phrase shared among our team. The meaning in the literal sense, "onward" means moving forward without looking back, and "upward" means having a goal of continued self-improvement. If we all apply a mindset of moving on with what we learn and don't dwell on our past, we truly can keep improving ourselves. I like to think that the SCHD is moving onward and upward together and with hard work, clear goals, and dedicated staff, we can achieve anything.

Bethany Brown MSN, RN
Health Commissioner

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Plan Review Responsibility

REVIEW OF PLAN

The Sandusky County Health Department (SCHD) will review this plan every year, or more often if the need presents itself. Board of Health members, management, staff and community partners will be involved in the review. Strategies and action steps will be updated quarterly at management team meetings (during January, April, July, and October).

AUTHORSHIP

The 2018-2021 Sandusky County Strategic Plan was facilitated and written by the Hospital Council of Northwest Ohio (HCNO) with input from SCHD staff, Board of Health, community partners, and community members.

APPROVAL

This plan was approved by the Sandusky County Board of Health on September 21, 2018.

Introduction

ABOUT THIS DOCUMENT

The Sandusky County Health Department (SCHD) is pleased to present the 2018-2021 Strategic Plan. Through a comprehensive planning process that included input from employees, Board of Health members, community partners, and community members, we identified our agency's priorities and developed specific goals and objectives to guide our work over the next three years. This plan allows us to focus our organization towards addressing the strategic priority issues that have been articulated through several assessments, plans and data sets, and is intended to be a roadmap for the Health Department's current and future endeavors.

AGENCY OVERVIEW

Sandusky County is located in the northwest region of Ohio. The county seat is Fremont. According to the 2017 United States Census Bureau, the population is 59,195. The majority (94%) of the population are Caucasian. Hispanics and Latinos (10%), African Americans (3%), American Indian and Alaska Natives (<1%) and Asian (1%) comprise the rest of the population. The median income (in 2016 dollars) for households in the County is \$49,032.



The SCHD is the public health agency for the residents of Sandusky County. It exists and operates under the legal authority as described in the Ohio Revised Code. The direction of the SCHD is based upon the strategic priority areas which are consistent with Ohio's Public Health Standards mandated by Ohio Revised Code 3071.36 and ensures the ability of the agency to respond to community needs.

The SCHD provides a variety of programs and services. These programs and services include Help Me Grow, immunizations, Reproductive Health & Wellness clinic, and Women, Infants, and Children (WIC) program, Maternal and Child Health services, public health nursing is responsible for the surveillance and management of communicable diseases. SCHD also provides environmental health services whose programs inspect local the food establishments, water systems, campgrounds, pools/beaches, solid wastes, and sewage; as well as investigates animal bites and rabies. Other programs and services include: emergency preparedness, birth and death certificates, health planning and education, and public health outreach and education.

This strategic plan has the full support of the Board of Health and SCHD administration. The plan is linked to the Community Health Improvement Plan (CHIP), Ohio State Health Improvement Plan (SHIP), Workforce Development Plan, Branding Policy, Marketing Plan, and operates in conjunction with the Quality Improvement (QI) and Performance Management Plans to ensure that priorities, objectives, strategies, and activities are met.

EXECUTIVE SUMMARY

The 2018-2021 Sandusky County Health Department Strategic Plan is the result of planning efforts which were initiated in April 2018 to meet new standards associated with the Public Health Accreditation Board (PHAB) accreditation process, and the 2017-2019 Ohio State Health Improvement Plan.

The initial strategic planning process began with the formation of a strategic planning committee comprised of a variety of staff members representing all divisions of the Health Department. SCHED contracted with the Hospital Council of Northwest Ohio (HCNO), a neutral, not-for-profit hospital association to facilitate the strategic planning process. The committee met on three separate occasions. First, the committee reviewed their current mission, vision and value statements from their previous strategic plan and decided not to change them. Next, the committee completed an environmental scan by reviewing various sources of internal and external data. Data sources included the Health Department financial status, emerging issues in the community, the Local Public Health System Assessment (LPHSA) results, customer satisfaction survey results, employee satisfaction survey results and the results of the strengths, weaknesses, opportunities and threats (SWOT) analysis. HCNO also administered a community partner survey as part of the data collection process. The data were then used to inform the strategic plan and select the strategic priorities.

The strategic priorities have direct ties with the SHIP, CHIP, and the QI Plan. Seven strategic planning priorities (below) were chosen unanimously by the subcommittee. Goals and objectives were also established for each priority. Goals were broadly stated, and objectives were written in the SMART (Specific, Measurable, Achievable, Realistic, Time-phased) format.

The 2018-2021 strategic plan was sent to the Board of Health for review in September 2018 and was approved on September 21, 2018. Once approved, the plan is considered a living document and may be revised should the need arise. The plan will be available online to employees and the public.

The strategic plan will be reviewed and updated on an annual basis and will be formally rewritten every three years to ensure that the priorities, goals, and objectives remain relevant and related to our mission, vision and values.

STRATEGIC PLANNING PRIORITIES

The following strategic planning priorities support our mission, vision, and values, and contribute to providing high quality public health services to Sandusky County:

1. Achieve public health accreditation
2. Continuous quality improvement
3. Workforce development
4. Branding, marketing and communication
5. Community engagement
6. Financial health
7. Information technology

ALIGNMENT WITH THE 2017-2019 OHIO STATE HEALTH IMPROVEMENT PLAN (SHIP) AND 2017-2020 SANDUSKY COUNTY COMMUNITY HEALTH IMPROVEMENT PLAN (CHIP)

The 2017-2019 State Health Improvement Plan (SHIP) serves as a strategic menu of priorities, objectives, and evidence-based strategies to be implemented by state agencies, local Health Departments, hospitals and other community partners and sectors beyond health including education, housing, employers, and regional planning.

The SHIP includes a strategic set of measurable outcomes that the state will monitor on an annual basis. Given that the overall goal of the SHIP is to improve health and wellbeing, the state will track the following health indicators:

- **Self-reported health status** (reduce the percent of Ohio adults who report fair or poor health)
- **Premature death** (reduce the rate of deaths before age 75)

In addition to tracking progress on overall health outcomes, the SHIP will focus on three priority topics:

1. **Mental health and addiction** (includes emotional wellbeing, mental illness conditions and substance abuse disorders)
2. **Chronic Disease** (includes conditions such as heart disease, diabetes and asthma, and related clinical risk factors-obesity, hypertension and high cholesterol, as well as behaviors closely associated with these conditions and risk factors- nutrition, physical activity and tobacco use)
3. **Maternal and Infant Health** (includes infant and maternal mortality, birth outcomes and related risk and protective factors impacting preconception, pregnancy and infancy, including family and community contexts)

The SHIP also takes a comprehensive approach to improving Ohio's greatest health priorities by identifying cross-cutting factors that impact multiple outcomes: health equity, social determinants of health, public health system, prevention and health behaviors, and healthcare system and access.

The 2017-2020 Sandusky County CHIP very closely aligns with the 2017-2019 SHIP priorities:

- Mental health and addiction
- Chronic disease
- Maternal and infant health

The 2018-2021 Sandusky County Health Department Strategic Plan aligns with both the 2017-2019 SHIP and 2017-2020 Sandusky County CHIP by making community engagement a priority and completing specific CHIP-rated strategies in which SCHD is the lead agency. SCHD also supports partner organizations, such as the Mental Health and Recovery Services Board of Seneca, Sandusky and Wyandot Counties, in the following CHIP priority areas: mental health and addiction, chronic disease, and maternal and infant health.

ALIGNMENT WITH THE 2018 SANDUSKY COUNTY HEALTH DEPARTMENT QUALITY IMPROVEMENT (QI) PLAN

Quality improvement is an element of performance management that uses processes or address specific targets for effectiveness and efficiency. The purpose of the Sandusky County Health Department Quality Improvement (QI) Plan is to provide context and framework for Quality Improvement (QI) activities at the Sandusky County Health Department. The 2018-2021 strategic plan aligns with the QI plan by making quality improvement a priority, and integrating quality improvement processes into organizational practice, programs, processes and interventions. SCHED will also implement and maintain a performance management system that will function in conjunction with the CHIP and Strategic Plan.

THE LOCAL PUBLIC HEALTH SYSTEM

The 10 Essential Public Health Services

The Sandusky County Health Department strives to continually assure that the Ten Essential Services of Public Health are provided with quality in our community:

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovated solutions to health problems.



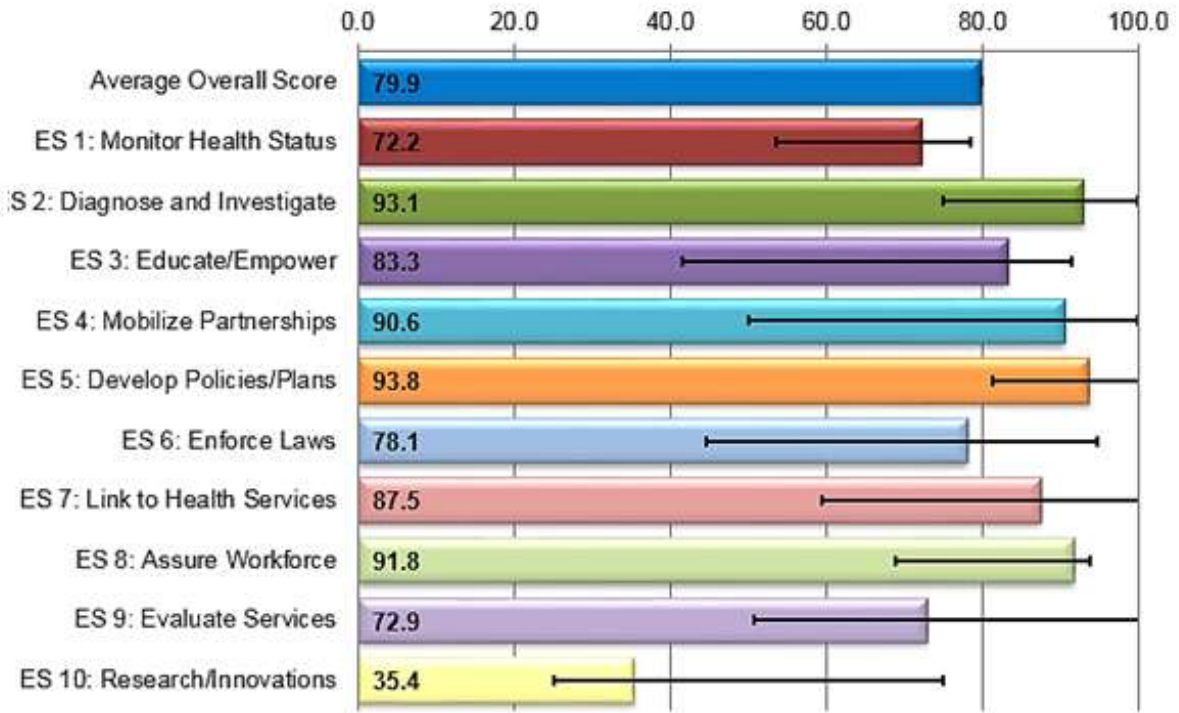
The Local Public Health System Assessment

As part of the 2017-2020 CHIP planning process, the Local Public Health System Assessment (LPHSA) answered the questions, "What are the components, activities, competencies, and capacities of our local public health system?" and "How are the Essential Services being provided to our community?" The assessment involves the use of a nationally recognized tool called the *National Public Health Performance Standards Local Instrument*.

Sandusky County Health Department Management Team staff completed the performance measures instrument and results were then presented to the full CHIP committee for discussion. The 10 Essential Public Health Services and how they are being provided within the community as well as each model standard was discussed and the group came to a consensus on responses for all questions. The challenges and opportunities that were discussed were used in the CHIP action planning process.

To view the full results of the LPHSA, please contact Bethany Brown at bbrown@sanduskycohd.org.

Summary of Average ES Performance Score



Strategic Planning Process: Planning to Plan

Phase	Questions Considered	Action Steps
Phase 1: Plan to plan	<ul style="list-style-type: none"> • What needs to be addressed from your readiness assessment before you begin? • Who will you involve in the process? • Who will lead the process? • When will you need Board of Health approval? • Timeframe? 	In 2018, SCHD contracted with HCNO to facilitate the strategic planning process. A committee was formed with representation from all divisions within the Health Department. Beginning in April 2018, the committee participated in three working meetings to complete the strategic planning process. The final draft of the strategic plan was presented to the Board of Health in September 2018.
Phase 2: Articulate mission, vision, values	<ul style="list-style-type: none"> • Do you have a current mission, vision and values? • What can help with this phase? 	In April 2018, the committee met and reviewed their mission, vision and value statements from their previous strategic plan. The committee decided to keep their current mission, vision and value statements.
Phase 3: Assess the situation	<ul style="list-style-type: none"> • How will you approach your environmental scan? • What other inputs will you use? • What data do you have? 	The committee reviewed many sources of internal (the Health Department) and external (the community) data to complete the environmental scan. Data sources include but are not limited to: results from the SWOT analysis, Health Department financial status and emerging health issues.
Phase 4: Agree on strategic priorities	<ul style="list-style-type: none"> • Who needs to be involved? • When will your board be involved? • What processes will you use? 	The strategic priorities were chosen through a nominal ranking process completed by the committee and have direct linkages with the SHIP, CHIP, and the QI Plan. After much discussion, seven strategic planning priorities were unanimously chosen. The Board of Health will have final approval of these priorities.
Phase 5: Write the plan	<ul style="list-style-type: none"> • Who will write your plan? • What approach will you use? 	The committee identified potential strategies and objectives for each of the identified priority areas. HCNO wrote and presented a draft of the strategic planning document in June 2018. A final draft was presented to and approved by the Board of Health in September 2018.

Phase	Questions Considered	Action Steps
Phase 6: Implement	<ul style="list-style-type: none"> • Who will oversee the implementation? • Where will the plan reside? • How will progress be tracked? • How will communication take place? 	<p>The strategic planning committee will oversee the implementation of the 2018-2021 strategic plan. The plan will reside in the SCHD S drive as well as online. The plan will be monitored and progress will be evaluated on an annual basis by the committee.</p>
Phase 7: Evaluate and monitor	<ul style="list-style-type: none"> • When will the plan be reviewed? • How often will the plan be updated? 	<p>The plan will be reviewed on an annual and as-needed basis. There will be a plan update completed every 3 years. There is a revision page in this plan to track updates. All updates must be approved by the Board of Health before being published and implemented. Strategies and action steps will be updated quarterly at management team meetings (during January, April, July, and October) and documented on tracking form.</p>

Mission, Vision, and Values

MISSION

Mission Statement:

Our mission is to improve, protect and promote the public health, well-being and environment of the communities in Sandusky County.

VISION

Vision Statement:

The communities of Sandusky County will Always Choose Health.

VALUES

Values:

We will assure that conditions within the health district allow its residents to lead healthy lives through:

- *Promoting a healthy community and protecting residents from health risks;*
- *Preventing disease, disability, injury, and premature deaths;*
- *Defining health priorities determined through community health assessments;*
- *Monitoring the health status of the community;*
- *Developing health policy that supports and encourages improved health status.*

We assist residents through public health education and information to:

- *Understand both community and personal health risks;*
- *Accept individual responsibility for their own health;*
- *Adopt personal practices that enhance both individual and community health.*

We assure that:

- *Health services are available and accessible to all residents;*
- *Medical services are the highest quality and necessary;*
- *Environmental health conditions related to air, water, food, shelter, solid waste, sewage, consumer protection, and safety to foster a healthy community.*

Environmental Scan

The environmental scan serves to create a big-picture view of what is going on inside and outside the Health Department. The purpose is to gather data and information to understand the historical perspective, the current context, and the future outlook of the Health Department.

In order to capture this information, the Health Department asked the following questions as part of its environmental scan:

- What is going on in the community? What are the trends, needs and opportunities for change within the community? Are our customers satisfied with our services?
- What is the financial picture within the economic climate? What are the SCHED resources, assets and opportunities?
- How is the Health Department doing? What are the Health Department's strengths and weaknesses? Are internal processes efficient and meeting needs of the customer (internal or external)?
- What is going on at the state, national and legislative level that may impact the Health Department or community?
- What types of learning and growth are important for the Health Department? What is the current capacity of the Health Department to do the work needed now and in the future?

SCHED collected a variety of data and information such as customer satisfaction survey results, community health improvement plan priorities, employee satisfaction survey results, local public health system assessment, community surveys, and internal employee surveys. This information provided the basis for identifying the agency's strategic priorities and goals.

INTERNAL SWOT ANALYSIS

In 2018, the SCHD conducted an online analysis to identify strengths and weaknesses as well as opportunities and threats (SWOT). Survey respondents included Health Department staff, management, and board members. SCHD received a total of 32 responses. The results of the SWOT analysis are identified in the table below.

Strengths	Weaknesses
<ul style="list-style-type: none"> • Employee dedication (13) • Community outreach (8) • Communication between leadership and staff (7) • Collaboration among agencies (5) • Diverse program availability (2) • Maintain clinics and programs with limited staff • Proactive health commissioner • Strong billing department • Staff ability to obtain funding for programs • Experience, education and skill of staff • Location of the building • Grant funding • The Board of Health 	<ul style="list-style-type: none"> • Financial challenges (9) • Lack of competitive wages (5) • Lack of staff/overburdening (4) • Lack of social media outreach (4) • Need more collaboration across divisions (3) • Need better communication with the public on programs (3) • Lack of engagement within the minority communities (2) • Too much emphasis on accreditation • Lack of support of employees and suggestions • More involvement in the community • Compliance issues • Unable to reimburse for college classes • Negative outlook of some services • IT support
Opportunities	Threats
<ul style="list-style-type: none"> • Educate the public (8) • Collaboration with partners (6) • Promote/market our services (6) • More community events (3) • Being a resource for our community (2) • Maintaining current clinics (2) • Various programs at the schools (2) • Complete accreditation (2) • Passing levies (2) • Outreach to social clubs (2) • Revamp website • Senior programs • Openness to serve on different committees • Car seat safety; essential oils; holistic health alternatives • Increase environmental health presence in the community • Increase the pay of employees to reduce turnover 	<ul style="list-style-type: none"> • Loss of grant monies (12) • Levy renewal/increase (11) • Lack of funding (9) • Turnover rate of employees (7) • Accreditation (2) • Public education about services (2) • Succession planning (2) • Being able to afford private vaccine (2) • Clear signs outside of building • Providing bi-lingual staff • Clients unable to pay for their services • Working with the underserved populations • Unfunded mandates

EXTERNAL COMMUNITY ANALYSIS

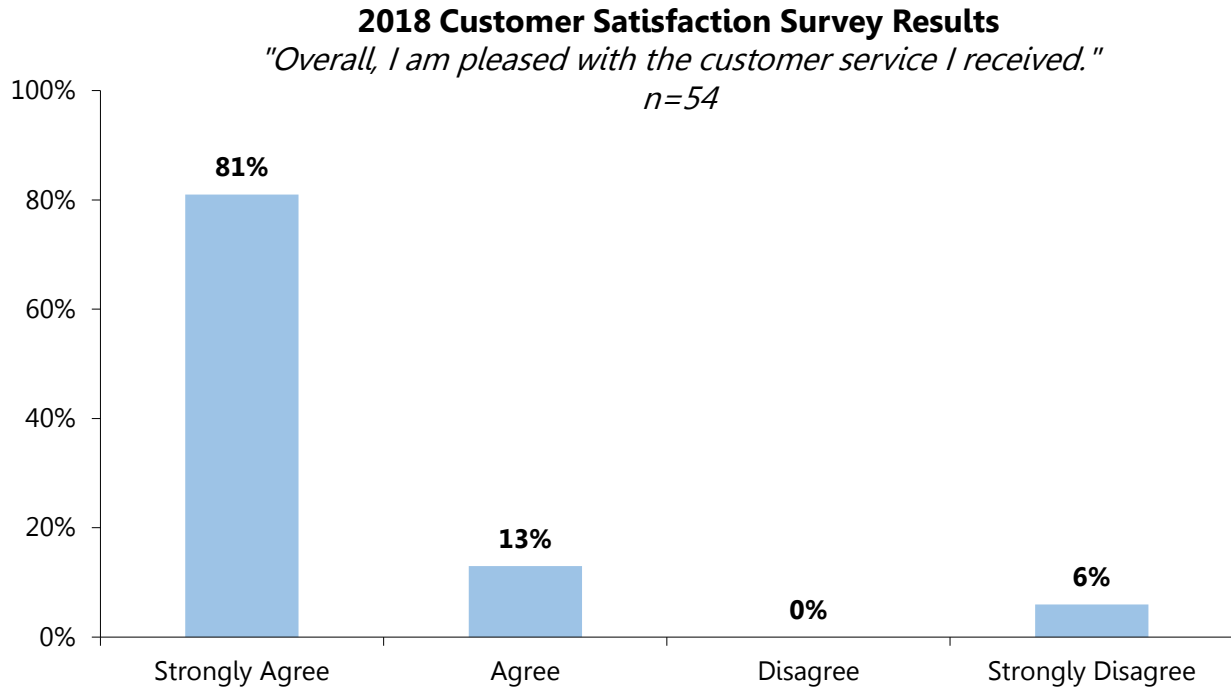
In 2018, as part of the strategic planning process, SCHD conducted an online survey of community partners to identify community perceptions regarding Health Department strengths, weaknesses, opportunities for improvement, and valued services. SCHD received a total of 72 responses. The results of the external community survey are identified in the table below.

Overall, 98% of community partners were satisfied (45%) or very satisfied (53%) with the Health Department as whole. To view the full results of the external community analysis, please contact SCHD at (419) 334-6377.

Strengths	Weaknesses
<ul style="list-style-type: none"> • Partnerships with other organizations (8) • Proactive in the community (7) • Quality staff and teamwork (5) • Community outreach (5) • Communication (5) • Providing immunizations (3) • Community Health Assessments (2) • Prevention Partnership Coalition (2) • Pregnancy prevention/education (2) • Number of programs (2) • WIC • Environmental health inspections • Health analysis information support • Health education materials • Help Me Grow • Various coalition groups 	<ul style="list-style-type: none"> • Lack of knowledge of services (8) • Advertisement of programs (3) • Funding (4) • Understaffed/overworked (2) • Office hours • No outreach in rural communities • Lack of cooperation from other agencies • Outreach/education in the schools • Involvement with the minority community • Adult services • Nutritional education • Abating public nuisance issues
Opportunities to Better Serve the Community	Valued Services
<ul style="list-style-type: none"> • More outreach and programs in schools (5) • Better marketing of services offered (4) • Enforce nuisance health issues (2) • Partnerships with community & private health services (2) • Being a visible in rural communities • Weight loss options or walking clubs • Assist in bringing funds to the community • Evening hours to access services • Publicize restaurant inspection results • Put time, effort and resources in other towns • Provide bilingual promotional materials • Children programs • Nutrition programs • Prenatal • A newsletter mailed out to homes • Environmental 	<ul style="list-style-type: none"> • Opportunities available to community (4) • Family planning (4) • Resource for information (3) • Adaptive and proactive to issues within the community (3) • Communication efforts (3) • Expertise and dedication of staff (2) • Environmental health services (2) • Immunizations (2) • Willingness to collaborate with other agencies (4) • Leadership in areas of substance abuse prevention • Work well with the schools • Community health assessment • Prevention partnership coalition activities • Birth certificates, Help Me Grow, WIC • Free training in a multitude of health areas • Disease prevention • Accessibility

CUSTOMER SATISFACTION SURVEY

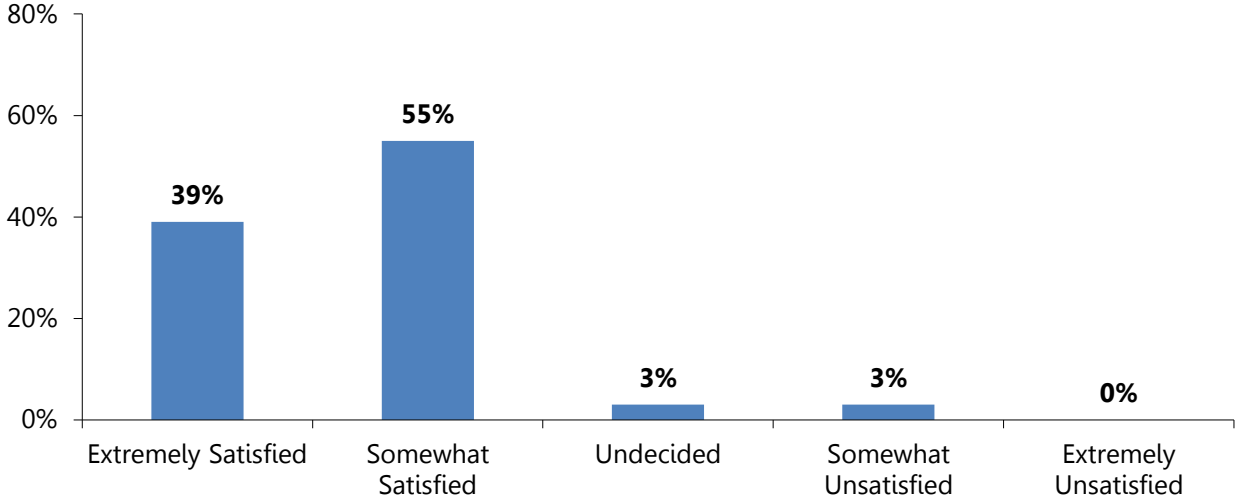
SCHD is committed to delivering optimal customer service. As part of the ten essential public health services, SCHD strives to provide high quality healthcare services to Sandusky County residents. In a 2018 customer satisfaction survey, 94% of clients reported they strongly agreed or agreed that they were pleased with the customer service they received the Sandusky County Health Department. For more information regarding customer satisfaction, please contact SCHD at (419) 334-6377.



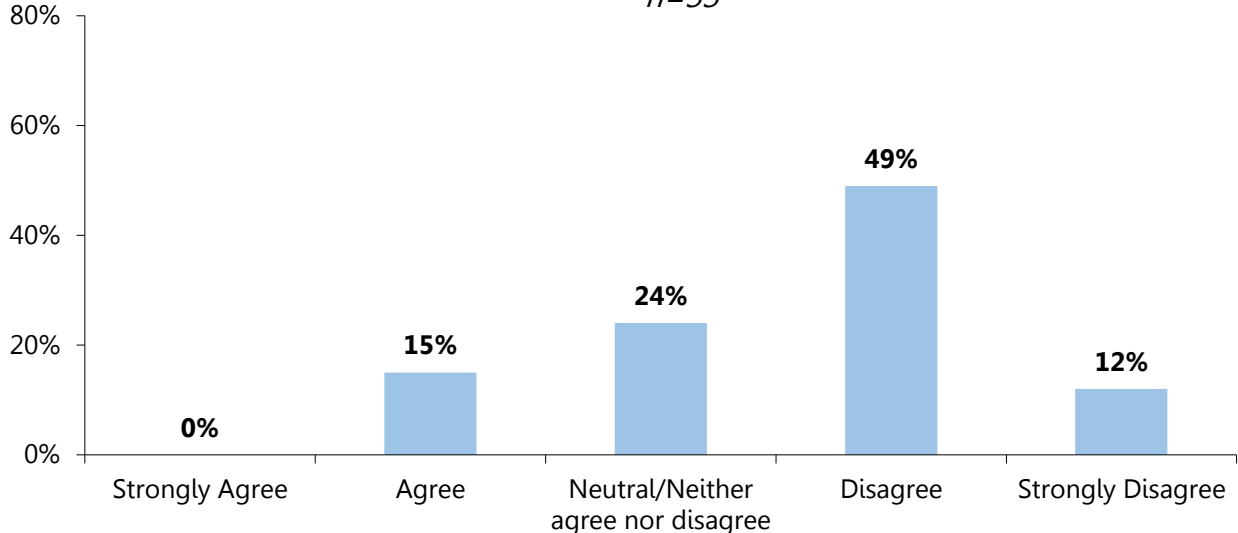
EMPLOYEE SATISFACTION SURVEY

SCHD recognizes employee satisfaction as a vital component to Health Department success. In a 2018 employee satisfaction survey, 94% of employees agreed they were at least a somewhat satisfied employee. When asked if they were compensated fairly relative to the local market, 61% disagreed or strongly disagreed. For more information regarding employee satisfaction, please contact SCHD at (419) 334-6377.

2018 Employee Satisfaction Survey Results
"Overall, how satisfied are you with your current job?"
n=31



2018 Employee Satisfaction Survey Results
"I am compensated fairly relative to my local market."
n=33



EMERGING AND CURRENT ISSUES

As part of the 2018 strategic planning process, the committee created the following list of emerging and current issues that could impact the Sandusky County Health Department:

- Obtaining PHAB accreditation
- Lack of public health funding
- Upcoming public health levy
- Potential changes proposed by Association of Ohio Health Commissioner (AOHC)
- Potential workforce changes and upcoming retirements
- Ignored by state in terms of needs
- Unfunded state mandates
- Opiate epidemic/behavioral health
- Increasing access to care for minority populations
- Millennials/generational divide
- Racial divide between minorities
- Lack of education in community leaders

2018 COUNTY HEALTH RANKINGS

The County Health Rankings and Roadmaps program is a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The annual County Health Rankings measure vital health factors, including high school graduation rates, obesity, smoking, unemployment, access to healthy foods, the quality of air and water, income inequality, and teen births in nearly every county in America. The annual County Health Rankings provide a revealing snapshot of how health is influenced by where we live, learn, work and play. For more information on County Health Rankings please go to <http://www.countyhealthrankings.org/>.

Below is a list of 2018 County Health Rankings results in which Sandusky County is ranked, per measure, out of 88 counties in Ohio:

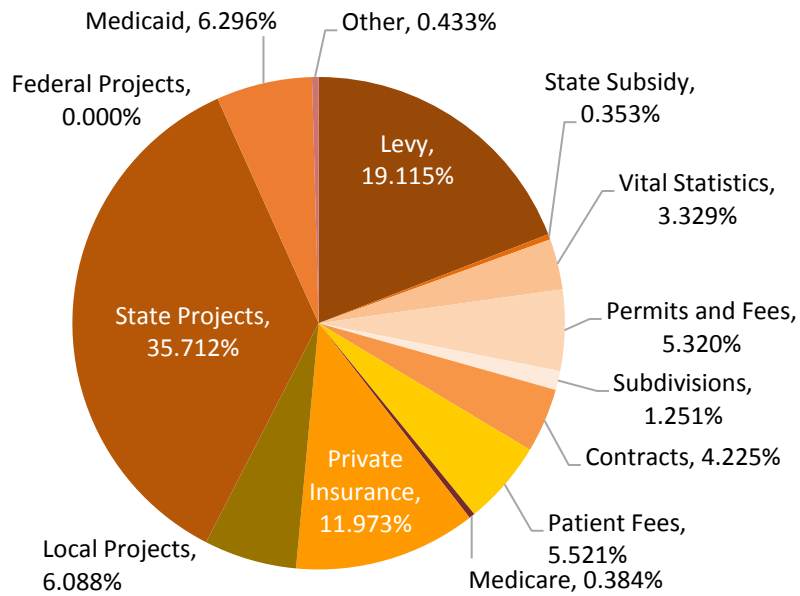
County Health Rankings Measure	2016	2017	2018
Health outcomes (Overall rank)	38	33	48
Length of life	23	30	47
Quality of life	50	38	46
Health factors	34	32	23
Health behaviors	45	38	20
Clinical care	48	37	27
Social and economic factors	39	36	36
Physical environment	6	19	18

(Source: County Health Rankings)

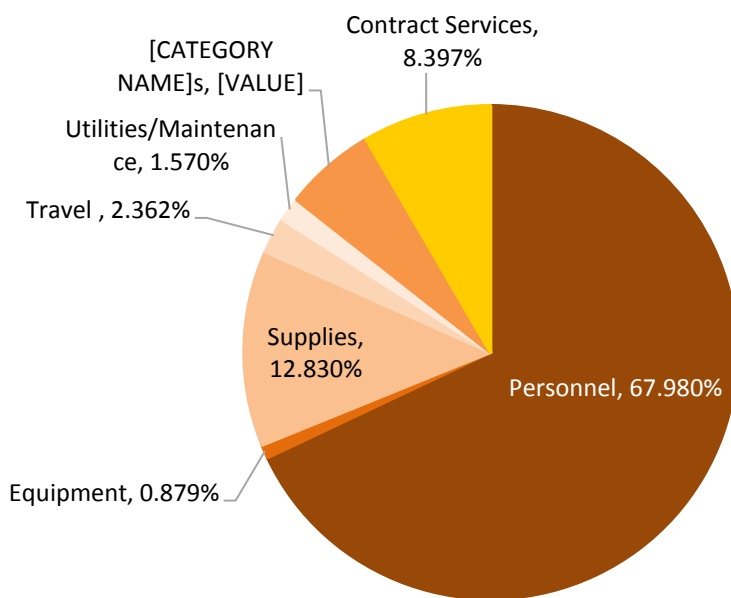
FINANCIAL STATUS OF THE SANDUSKY COUNTY HEALTH DEPARTMENT

The information below indicates the financial status of SCHD in 2017 (per the 2017 SCHD Annual Report):

Total Revenue: \$2,959,293.80



Total Expenses: \$2,777,059.68



Strategic Priorities

STRATEGIC PLANNING TERMINOLOGY

Strategic Priority: highest level of thinking about what needs to be accomplished; core themes

Goal: broad, major initiatives that need to be undertaken to address the priority area

Key Measure: specific metric used to measure progress and success

Objectives: interim steps that address the goal; should be SMART

Action Steps: specific steps that need to be taken to meet the objective

Timeline: timeframe within activities will take place

Responsible Party: who will be responsible for ensuring the objective is met?

STRATEGIC PRIORITY #1: ACHIEVE PUBLIC HEALTH ACCREDITATION

SCHD is dedicated to improving quality and performance, and is currently seeking national accreditation as an effective and efficient provider of public health services. SCHD capitalizes on the expertise and commitment of experienced staff members in order to adapt to a changing public health landscape.

Goal: Achieve accreditation from the Public Health Accreditation Board (PHAB).

Key Measure: Obtain PHAB Accreditation through the Public Health Accreditation Board by July 1, 2020.

Objective:

1. Submit PHAB Action Plan by August 30, 2018.
2. Implement and document PHAB-approved Action Plan strategies by February 1, 2019.
3. Upon receiving accreditation from PHAB, submit an annual report by June 30, 2020.

Strategic Priority #1 Metric		
	Baseline 2018	Target 2020
Obtain PHAB Accreditation through the Public Health Accreditation Board by February 1, 2019	Not accredited by PHAB	Accredited by PHAB

Strategic Priority #1 Work Plan				
Goal: Achieve accreditation from the Public Health Accreditation Board (PHAB).				
Objective	Action Step	Timeline	Responsible Party	Status
1. Submit PHAB Action Plan by August 30, 2018.	1. Review comments and guidance from the PHAB site visit report and create an Action Plan for accreditation.	July 2018	Health Commissioner and Accreditation Coordinator	
	2. Submit the Action Plan to PHAB by August 30, 2018.	August 2018	Accreditation Coordinator	
	3. Obtain approval of the Action Plan by the PHAB Accreditation Committee.	February 2019	Accreditation Coordinator	
2. Implement and document PHAB-approved Action Plan strategies by February 1, 2020.	1. Once approved by the PHAB Accreditation Committee, implement the Action Plan.	January 2019	Health Commissioner, Accreditation Coordinator and Domain Teams	
	2. Gather all documents related to Action Plan implementation and upload them to e-PHAB.	January 2019	Accreditation Coordinator and Domain Teams	

Strategic Priority #1 Work Plan

Goal: Achieve accreditation from the Public Health Accreditation Board (PHAB).

Objective	Action Step	Timeline	Responsible Party	Status
3. Upon receiving accreditation from PHAB, submit an annual report by June 2020.	1. Upon receiving accreditation from PHAB, submit an annual report describing how SCHD has addressed areas identified by the Accreditation Committee as priority areas for improvement, and ensure continued conformity with all the standards and measures of version 1.5.	Annually by June 2020	Accreditation Coordinator	

STRATEGIC PRIORITY #2: CONTINUOUS QUALITY IMPROVEMENT

Quality improvement in public health is the use of a deliberate and defined improvement process that is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the health of the community. SCHED strives to achieve excellence through continuous quality improvement and source

Goal: Maintain a culture of continuous quality improvement by implementing and monitoring quality improvement (QI) and performance management (PM) activities.

Key Measure: By October 1, 2021, SCHED will have met all their goals outlined in their QI and PM plans.

Objective:

1. Establish a QI plan by October 1, 2018.
2. Establish a PM plan by October 1, 2018.
3. Annually review the QI plan by October 1 of each year.
4. Annually review the PM plan by October 1 of each year.
5. Implement annual quality improvement projects by utilizing the Plan, Do, Study, Act (PDSA) framework by October 1 of each year.
6. By October 1 of each year, all staff will participate in annual quality improvement training.
7. Implement a fully-functioning performance management system to monitor achievement of departmental and divisional objectives by October 1 of each year.

Strategic Priority #2 Metric		
	Baseline 2018	Target 2021
By October 1, 2021, SCHED will have met all their goals outlined in the QI and PM plans.	Incomplete QI and PM goals	Completed QI and PM goals

Strategic Priority #2 Work Plan

Goal: Maintain a culture of continuous quality improvement by implementing and monitoring quality improvement (QI) and performance management (PM) activities.

Objective	Action Step	Timeline	Responsible Party	Status
1. Establish a QI plan by October 1, 2018.	1. Meet with the QI Council to review the current draft of the QI Plan and create a final draft to present to the Board of Health.	August 2018	Accreditation Coordinator, QI Coordinator and QI Council	
	2. Present the draft of the QI Plan to the Board of Health for approval.	September 2018	Accreditation Coordinator, QI Coordinator and QI Council	
	3. Adopt the QI Plan and implement strategies at the staff level.	Ongoing until October 2021	Accreditation Coordinator, QI Coordinator, QI Council, and staff members	
2. Establish a PM plan by October 1, 2018.	1. Meet with department directors to review the current draft of the PM Plan and create a final draft to present to the Board of Health.	August 2018	Health Commissioner, Accreditation Coordinator, and department directors	
	2. Present the draft of the PM Plan to the Board of Health for approval.	September 2018	Health Commissioner, Accreditation Coordinator, and department directors	
	3. Adopt the PM Plan and implement measures at the staff level.	Ongoing until October 2021	Health Commissioner, Accreditation Coordinator, and department directors	

Strategic Priority #2 Work Plan

Goal: Maintain a culture of continuous quality improvement by implementing and monitoring quality improvement (QI) and performance management (PM) activities.

Objective	Action Step	Timeline	Responsible Party	Status
3. Annually review the QI plan by October 1 of each year.	1. Annual review of QI plan.	Annually by October 1	Accreditation Coordinator, QI Coordinator and QI Council	
	2. Present the revised plan to the Board of Health for approval, if necessary.	Annually by October 1	Health Commissioner, Accreditation Coordinator, QI Coordinator and QI Council	
	3. Disseminate the revised plan, noting any changes, to the SCHD staff.	Annually by November 1	QI Coordinator	
4. Annually review the PM plan by October 1 of each year.	1. Annual review of PM plan.	Annually by October 1	Health Commissioner, Accreditation Coordinator, and department directors	
	2. Present the revised plan to the Board of Health for approval, if necessary.	Annually by October 1	Health Commissioner, Accreditation Coordinator, and department directors	
	3. Disseminate the revised plan, noting any changes, to the SCHD staff.	Annually by November 1	Health Commissioner	

Strategic Priority #2 Work Plan

Goal: Maintain a culture of continuous quality improvement by implementing and monitoring quality improvement (QI) and

performance management (PM) activities.

Objective	Action Step	Timeline	Responsible Party	Status
5. Implement annual quality improvement projects by utilizing the Plan, Do, Study, Act (PDSA) framework by October 1 of each year.	1. Utilize Health Department data to prioritize and select two QI projects to be completed each year: one program-based and one administration-based.	Annually by October 1	QI Coordinator and QI Council	
	2. Implement the four stages of the PDSA cycle and utilize relevant tools to analyze internal processes and improve quality and efficiency of selected projects.	Annually by October 1	QI Coordinator and QI Council	
	3. Create and present a storyboard to SCHD employees illustrating the process and results of the QI projects.	Annually by October 1	QI Coordinator and QI Council	
6. By October 1 of each year, all staff will participate in annual quality improvement training.	1. All staff will participate in 0.5 hours of quality improvement training on an annual basis.	Annually by October 1	QI Coordinator and staff members	

Strategic Priority #2 Work Plan

Goal: Maintain a culture of continuous quality improvement by implementing and monitoring quality improvement (QI) and performance management (PM) activities.

Objective	Action Step	Timeline	Responsible Party	Status
7. Implement a fully-functioning performance management system to monitor achievement of departmental and divisional objectives by October 1 of each year.	1. Utilizing the performance management system, select performance goals and measures for each division and individual employee.	Annually by January 30	Health Commissioner and department directors	
	2. Discuss progress related to performance management with employees in respective divisions.	Annually by January 30	Health Commissioner and department directors	
	3. Present performance management goals, measures, and outcomes to the Board of Health.	Annually by January 30	Health Commissioner	

STRATEGIC PRIORITY #3: WORKFORCE DEVELOPMENT

Maintaining a positive, knowledgeable, and dedicated workforce is instrumental to Health Department success. The SCHED values its employees and is dedicated to developing their skills, honing their success, and fostering a positive work environment.

Goal: Provide a workplace that fosters a qualified, well-trained and supported staff.

Key Measure: By October 1, 2018, SCHED will revise and update their 2015 Workforce Development Plan to include an assessment of workforce capacity, succession planning, and improved quality of job-related training.

Objectives:

1. Revise and update the 2015 Sandusky County Workforce Development Plan by October 1, 2018.
2. Create a succession plan by October 1, 2019.
3. By October 1, 2020, create a written plan for a new-employee orientation program that is job-specific, yet cross-cutting across the 10 Essential Public Health Services.
4. Review the workforce development plan on an annual basis by October 1.
5. Increase professional development opportunities by October 1, 2021.

Strategic Priority #5 Metric		
	Baseline 2018	Target 2021
By October 1, 2019, SCHED will revise and update their Workforce Development Plan to include an assessment of workforce capacity, succession planning, and improved quality of job-related training.	2015 Workforce Development Plan	2019-2022 Workforce Development Plan

Strategic Priority #3 Work Plan

Goal: Provide a workplace that fosters a qualified, well-trained and supported staff.

Objective	Action Step	Timeline	Responsible Party	Status
1. Revise and update the 2015 Sandusky County Workforce Development Plan by October 1, 2018.	1. Survey the staff on their current capabilities regarding the public health core competencies and identify any gaps and barriers.	August 2018	Workforce Development Committee	
	2. Revise and update the workforce development plan to include the assessment and comprehensive strategies to address the capacity of the Health Department and it's changing environment.	October 2018	Workforce Development Committee	
	3. Present a draft of the Workforce Development Plan to the Board of Health for approval.	November 2018	Workforce Development Committee	
	4. Adopt the Workforce Development Plan and implement strategies at the staff level.	December 2018	Workforce Development Committee	

Strategic Priority #3 Work Plan

Goal: Provide a workplace that fosters a qualified, well-trained and supported staff.

Objective	Action Step	Timeline	Responsible Party	Status
2. Create a succession plan by October 1, 2019.	1. Identify essential positions within the Health Department and identify areas of cross-training so critical positions can be covered when necessary.	June 2019	Health Commissioner and department directors	
	2. Develop a formal succession plan and implement cross-training strategies.	October 2019	Health Commissioner and department directors	
3. By October 1, 2020, create a written plan for a new-employee orientation program that is job-specific, yet cross-cutting across the 10 Essential Public Health Services.	1. Review all job descriptions to ensure they are competency-based for each respective discipline.	June 2020	Health Commissioner and department directors	
	2. Develop written orientation and training materials, such as a check list, to include position-specific responsibilities as well as interdivisional exposure to the 10 Essential Public Health Services.	October 2020	Health Commissioner and department directors	
	3. Designate a staff member from each division to coordinate and oversee the orientation of new employees.	October 2020	Health Commissioner and department directors	
	4. Implement the new-employee orientation and training as directed.	October 2020	Designated staff members	

Strategic Priority #3 Work Plan

Goal: Provide a workplace that fosters a qualified, well-trained and supported staff.

Objective	Action Step	Timeline	Responsible Party	Status
4. Review the workforce development plan on an annual basis by October 1.	1. Annual review of Workforce Development plan.	Annually by October 1	Health Commissioner, Accreditation Coordinator, and department directors	
	2. Present the revised plan to the Board of Health for approval, if necessary.	Annually by October 1	Health Commissioner, Accreditation Coordinator, and department directors	
	3. Disseminate the revised plan, noting any changes, to the SCHD staff.	Annually by October 1	Health Commissioner	
5. Increase professional development opportunities by October 1, 2021.	1. Explore opportunities such as local trainings, Ohio TRAIN, and OSU free online training programs to expand professional development, cultural competency and cross-training.	Annually by October 1	Health Commissioner and department directors	
	2. Offer at least two trainings on either professional development, cultural competency, or cross training to SCHD employees annually.	Annually by October 1	Health Commissioner and department directors	

STRATEGIC PRIORITY #4: BRANDING, MARKETING, AND COMMUNICATION

Visibility within the community is a crucial element to remaining viable. SCHD strives to be engaged with partners, stakeholders, community organizations, and residents to create sustainable change that improves health within the community. It is crucial that residents understand the role of our agency and look to us as the primary source for public health-related information and services.

Goal: Increase visibility and community awareness of SCHD and the services that are provided.

Key Measure: By October 1, 2021, SCHD will demonstrate and document full compliance with the branding, marketing, and communication policies.

Objectives:

1. By October 1, 2019, SCHD will revise the Branding Policy to comply with PHAB standards and include the use of logos, typeface, colors, and templates, as well as guidelines for department-wide integration and compliance.
2. By October 1, 2019, SCHD will revise the Communication Procedures to comply with PHAB standards.
3. Review the Branding Policy, Marketing Plan, and Communication Procedures on an annual basis by October 1, 2021.
4. By October 1, 2021, SCHD will hire a full-time Communications and Outreach Coordinator.
5. Display signage outside of the main campus by October 1, 2021.
6. By October 1, 2021, increase marketing efforts by 10%.

Strategic Priority #4 Metric		
	Baseline 2018	Target 2021
By October 1, 2021, SCHD will demonstrate and document full compliance with the branding, marketing, and communication policies.	Inconsistent compliance with branding, marketing and communication policies.	Full compliance with branding, marketing and communication policies.

Strategic Priority #4 Work Plan

Goal: Increase visibility and community awareness of SCHED and the services that are provided.

Objective	Action Step	Timeline	Responsible Party	Status
1. By October 1, 2019, SCHED will revise the Branding Policy to comply with PHAB standards and include the use of logos, typeface, colors, and templates, as well as guidelines for department-wide integration and compliance.	1. Review and revise the Branding Strategy against PHAB standards and comments from the site visit.	October 2019	Health Commissioner, Accreditation Coordinator, and department directors	
	2. In addition to logo usage, include parameters regarding the usage of typeface (font and size), colors, and templates.	October 2019	Health Commissioner, Accreditation Coordinator, and department directors	
	3. Outline strategies and timelines for department-wide integration.	October 2019	Health Commissioner, Accreditation Coordinator, and department directors	
	4. Present the revised policy to the Board of Health for approval, if necessary.	October 2019	Health Commissioner, Accreditation Coordinator, and department directors	
	5. Disseminate the revised policy, noting any changes, to the SCHED staff.	November 2019	Health Commissioner	
	6. Implement the Branding Policy and review Health Department documents to ensure branding compliance before distribution to the public.	October 2021	Health Commissioner, Accreditation Coordinator, and department directors	

Strategic Priority #4 Work Plan

Goal: Increase visibility and community awareness of SCHD and the services that are provided.

Objective	Action Step	Timeline	Responsible Party	Status
2. By October 1, 2019, SCHD will revise the Communication Procedures to comply with PHAB standards.	1. Review and revise the Communication Procedures against PHAB standards and comments from the site visit.	October 2019	Health Commissioner, Accreditation Coordinator, and department directors	
	2. Present the revised plan to the Board of Health for approval, if necessary.	October 2019	Health Commissioner, Accreditation Coordinator, and department directors	
	3. Disseminate the revised procedures, noting any changes, to the SCHD staff.	November 2019	Health Commissioner	
	4. Implement the communication procedures at the staff level and monitor compliance.	October 2021	Health Commissioner, and department directors	
3. Review the Branding Policy, Marketing Plan, and Communication Procedures on an annual basis by October 1, 2021.	1. Annual review of plans, policies and procedures.	Annually by October 1	Health Commissioner, Accreditation Coordinator, and department directors	
	2. Present the revised documents to the Board of Health for approval, if necessary.	Annually by October 1	Health Commissioner, Accreditation Coordinator, and department directors	
	3. Disseminate the revised documents, noting any changes, to the SCHD staff.	Annually by October 1	Health Commissioner	

Strategic Priority #4 Work Plan

Goal: Increase visibility and community awareness of SCHD and the services that are provided.

Objective	Action Step	Timeline	Responsible Party	Status
4. By October 1, 2021, SCHD will hire a full-time Communications and Outreach Coordinator.	1. Explore the feasibility of employing a full-time Communications and Outreach Coordinator.	October 2019	Health Commissioner and fiscal staff	
	2. Review the Branding Policy, Communication Procedures, and Marketing Plan. Create a competency-based job description based on these documents.	October 2020	Health Commissioner, and department directors	
	3. Hire a full-time Communications and Outreach Coordinator.	October 2021	Health Commissioner	
5. Display signage outside of the main campus by October 1, 2021.	1. Obtain approval from the lessor and Board of Health for the outside signage.	October 2019	Health Commissioner	
	2. Determine the size and location of the sign.	October 2019	Health Commissioner, and department directors	
	3. Obtain quotes from local or outside vendors.	October 2020	Health Commissioner and fiscal staff	
	4. Install the sign.	October 2021	Health Commissioner and vendor	

Strategic Priority #4 Work Plan

Goal: Increase visibility and community awareness of SCHD and the services that are provided.				
Objective	Action Step	Timeline	Responsible Party	Status
6. By October 1, 2021, increase marketing efforts by 10%.	1. Utilizing the Marketing Plan, increase the outcome of each goal by 10%.	October 2021	Marketing Committee	
	2. Sponsor or "boost" at least one Facebook post a month to reach an increased number of Sandusky County residents.	October 2021	Marketing Committee	
	3. Create a one-page flyer of all SCHD services and distribute it at the end of each service or encounter, such as immunizations, WIC appointments, food inspections, and health education events.	October 2021	Marketing Committee	

STRATEGIC PRIORITY #5: COMMUNITY ENGAGEMENT

Community engagement is a necessary component to achieving optimal health status in a community. Collaboration that results from engaged community partners allows for the shared use of resources, such as funding or even personnel. SCHD remains committed to engaging with community members, maintaining community partnerships and collaborating on community endeavors, such as the community health improvement plan (CHIP).

Goal: Promote and sustain community engagement.

Key Measures:

1. By October 1, 2020, SCHD will have completed the action steps outlined in its current 2017-2020 Community Health Improvement Plan (CHIP).
2. By December 31, 2020, SCHD will have partnered with local stakeholders to complete a community health assessment (CHA) and community health improvement plan (CHIP).
3. Increase community awareness of SCHD by increasing community engagement activities by October 1, 2021.

Objectives:

1. Contribute to the 2017-2020 CHIP efforts by offering guidance and assistance in mental health and addiction, chronic disease, maternal and infant health and cross-cutting strategies by October 1, 2020.
2. Collaborate with local stakeholders, including Sandusky County Health Partners, to create the 2019 Sandusky County CHA by March 31, 2020.
3. Collaborate with local stakeholders, including Sandusky County Health Partners, to create the 2020-2023 Sandusky County CHIP by December 31, 2020.
4. Identify methods of external communication to increase community awareness of SCHD by October 1, 2021.

Strategic Priority #5 Metric		
	Baseline 2018	Target 2021
1. By October 1, 2020, SCHD will have completed the action steps outlined in their current 2017-2020 Community Health Improvement Plan (CHIP).	Incomplete CHIP strategies	Completed CHIP strategies
2. By December 31, 2020, SCHD will have partnered with local stakeholders to complete a community health assessment (CHA) and community health improvement plan (CHIP).	2016-2017 CHA and 2017-2020 CHIP	2019-2020 CHA and 2020-2023 CHIP
3. Increase community awareness of SCHD by increasing community engagement activities by October 1, 2021.	No new methods being used to increase community engagement	Five additional methods to increase community engagement

Strategic Priority #5 Work Plan

Goal: Promote and sustain community engagement.

Key Measure 1: By October 1, 2020, SCHD will have completed the action steps outlined in their current 2017-2020 Community Health Improvement Plan (CHIP).

Objective	Action Step	Timeline	Responsible Party	Status
1. Contribute to the 2017-2020 CHIP efforts by implementing mental health and addiction, chronic disease, maternal and infant health and cross-cutting strategies by October 1, 2020.	1. Expand the number of primary care providers screening for depression during office visits utilizing the PHQ-2 and PHQ-9 screening tools.	October 1, 2020	Health Commissioner	
	2. Implement healthy food initiatives through expanding community gardens and farmers markets, encouraging the use of SNAP/EBT at farmers markets, and working with food pantries to provide fresh produce.	October 1, 2020	Creating Healthy Communities Director	
	3. Increase the Use of Safe Sleep Practices through the implementation of Cribs for Kids.	October 1, 2020	Public Health Nursing	
	4. Implement smoke-free policies in multi-unit housing facilities, schools, parks and other locations in Sandusky County.	October 1, 2020	Creating Healthy Communities Director	
	5. Implement shared use (joint use agreements) for improved access to physical activity.	October 1, 2020	Creating Healthy Communities Director	

Strategic Priority #5 Work Plan

Goal: Promote and sustain community engagement.

Key Measure 2: By December 31, 2020, SCHD will have partnered with local stakeholders to complete a community health assessment (CHA) and community health improvement plan (CHIP).

Objective	Action Step	Timeline	Responsible Party	Status
2. Collaborate with local stakeholders, including Sandusky County Health Partners, to create the 2019 Sandusky County CHA by March 31, 2020.	1. Secure funding for the 2019 CHA.	March 2019	Health Commissioner	
	2. Recruit additional partners to the CHA process. Ensure all sectors are represented, including local minority leaders.	June 2019	Health Commissioner	
	3. Participate in selecting questions for the CHA survey instrument.	August 2019	Health Commissioner	
	4. Participate in the review of the CHA draft, which is necessary for finalizing the CHA.	December 2019	Health Commissioner	
	5. Participate in a community release of the CHA and make it available on SCHD website.	March 2020	Health Commissioner	
3. Collaborate with local stakeholders, including Sandusky County Health Partners, to create the 2020-2023 Sandusky County CHIP by December 31, 2020.	1. Secure funding for the 2020-2023 CHIP.	December 31, 2020	Health Commissioner	
	2. Recruit additional partners to the CHIP process. Ensure all sectors are represented, including local minority leaders.	December 31, 2020	Health Commissioner	
	3. Participate in CHIP meetings to prioritize health needs and select 2020-2023 CHIP strategies.	December 31, 2020	Health Commissioner	

Strategic Priority #5 Work Plan

Goal: Promote and sustain community engagement.

Key Measure 3: Increase community awareness of SCHD by increasing community engagement activities by October 1, 2021.

Objective	Action Step	Timeline	Responsible Party	Status
4. Identify methods of external communication to increase community awareness of SCHD by October 1, 2021.	1. Provide at least four annual "Lunch and Learns" to various sectors of the community. Use this opportunity to promote the services and programs within SCHD.	Annually by October 1	Marketing Committee	
	2. Incentivize social media "likes," "follows," or subscriptions. Utilize social media to provide health education, outbreak notifications, and hot topics; promote relevant services and programs offered at SCHD.	October 1, 2021	Marketing Committee	
	3. Create "Employee Spotlight" videos on social media once a month. Emphasize their history with Sandusky County, their role at SCHD, and what they do to make the community a better place to live.	October 1, 2021	Marketing Committee	
	4. Create an informational presentation to promote SCHD to different communities, businesses, and organizations.	October 1, 2021	Marketing Committee	
	5. Educate governing entities, advisory boards, elected officials, and community members about policies and/or strategies that will promote and/or affect the public's health and the role SCHD plays.	October 1, 2021	Marketing Committee	

STRATEGIC PRIORITY #6 FINANCIAL HEALTH

Strong financial health allows the Health Department to maintain, improve, and expand existing health services, as well as allow for the implementation of new programs and services. Financial sustainability can be influenced by our reliance upon local levy resources, government funding and short-term grants. SCHD strives to achieve optimum financial health by monitoring finances, pursuing funding opportunities, such as grants and levies, and creating a 5-year financial plan.

Goal: Complete each fiscal year with a positive financial balance.

Key Measure: By December 31, 2021, continue to complete each fiscal year with an increased balance from the previous fiscal year.

Objectives:

1. Pass public health levy for increased funding by November 6, 2018.
2. Pursue 1-2 new funding opportunities each calendar year.
3. Create a finance plan by October 1, 2020.
4. Create an employee compensation plan by October 1, 2020.
5. Review the Financial Plan and Employee Compensation Plan on an annual basis by October 1, 2021.

Strategic Priority #6 Metric		
	Baseline 2018	Target 2021
By December 31, 2021, continue to complete each fiscal year with an increased balance from the previous fiscal year.	Positive balance at the end of FY 2016.	Positive balance at the end of FY 2020.

Strategic Priority #6 Work Plan

Goal: Complete each fiscal year with a positive financial balance.

Objective	Action Step	Timeline	Responsible Party	Status
1. Pass levy for increased funding by November 6, 2018.	1. Place levy on November 2018 ballot.	November 6, 2018	Health Commissioner	
	2. Raise awareness of Health Department services through marketing and community engagement (see Strategic Priorities 4 and 5).	November 6, 2018	All SCHED Staff	
2. Pursue 1-2 new funding opportunities each calendar year.	1. Explore potential funding opportunities at both the county, state, and national level.	Annually by October 1	All SCHED Staff	
	2. Write and secure 1-2 additional grants annually.	Annually by October 1	All SCHED Staff	
	3. Collaborate with community partners on local projects when applicable.	Annually by October 1	All SCHED Staff	
	4. Collaborate with other rural counties and Health Departments to share resources.	Annually by October 1	All SCHED Staff	

Strategic Priority #6 Work Plan

Goal: Complete each fiscal year with a positive financial balance.

Objective	Action Step	Timeline	Responsible Party	Status
3. Create a Finance Plan by October 1, 2020.	1. Review past financial history, create a 5-year budget projection, and write a formal Finance Plan.	September 1, 2020	Health Commissioner and Fiscal Officer	
	2. Present a draft of the Finance Plan to the Board of Health for approval.	October 1, 2020	Health Commissioner and Fiscal Officer	
	3. Adopt and implement the Finance Plan.	October 1, 2020	Health Commissioner and Fiscal Officer	
4. Create an Employee Compensation Plan, by October 1, 2020.	1. Examine the current state of the wage system and complete a market analysis of wages comparative to local health districts.	June 1, 2020	Health Commissioner and Fiscal Officer	
	2. Write a formal Employee Compensation Plan, including pay steps, relative to the findings of the market analysis.	September 1, 2020	Health Commissioner and Fiscal Officer	
	3. Present a draft of the Employee Compensation Plan, to the Board of Health for approval.	October 1, 2020	Health Commissioner and Fiscal Officer	
	4. Adopt and implement the Employee Compensation Plan.	October 1, 2020	Health Commissioner and Fiscal Officer	

Strategic Priority #6 Work Plan

Goal: Complete each fiscal year with a positive financial balance.

Objective	Action Step	Timeline	Responsible Party	Status
5. Review the Financial Plan and Employee Compensation Plan on an annual basis by October 1, 2021.	1. Annual review of plans, including a 5-year budget projection and market wage analysis.	Annually by October 1	Health Commissioner and Fiscal Officer	
	2. Present the revised documents to the Board of Health for approval, if necessary.	Annually by October 1	Health Commissioner and Fiscal Officer	
	3. Disseminate the revised documents, noting any changes, to the SCHD staff.	Annually by October 1	Health Commissioner and Fiscal Officer	

STRATEGIC PRIORITY #7: INFORMATION TECHNOLOGY

Information technology (IT) is a vital asset to administering public health services, monitoring communicable disease, and communicating to the public, among other things. SCHED strives to achieve optimum information technology by monitoring usage, effectiveness, and proposing IT improvements when necessary.

Goal: Monitor IT usage and effectiveness.

Key Measure: Create an IT Plan by March 1, 2020.

Objectives:

1. Create an IT plan by March 1, 2020.
2. Evaluate the current technology used by the Health Department on a quarterly basis by October 1, 2021.
3. Present ideas and proposals for technological improvements to the Board of Health on an annual basis by October 1, 2021.
4. Review the IT Plan on an annual basis by October 1, 2021.

Strategic Priority #7 Metric		
	Baseline 2018	Target 2021
Create an IT Plan by March 1, 2020.	No IT Plan.	IT Plan in place.

Strategic Priority #7 Work Plan

Goal: Monitor IT usage and effectiveness.

Objective	Action Step	Timeline	Responsible Party	Status Update
1. Create an IT plan by March 1, 2020.	1. Examine the current state of the IT infrastructure.	November 1, 2019	Health Commissioner	
	2. Write a formal IT Plan, including procedures for IT staff/contractors, equipment age and usage, the use of software programs, evaluation, etc.	February 1, 2020	Health Commissioner	
	3. Present a draft of the IT Plan to the Board of Health for approval.	February 1, 2020	Health Commissioner	
	4. Adopt and implement the IT Plan.	March 1, 2020	Health Commissioner	
2. Evaluate the current technology used by the Health Department on a quarterly basis by October 1, 2021.	1. Meet with the IT staff/contractor and evaluate IT usage quarterly.	Quarterly	Health Commissioner	
	2. Give a quarterly IT update to the Board of Health.	Quarterly	Health Commissioner	
3. Present ideas and proposals for technological improvements to the Board of Health on an annual basis by October 1, 2021.	1. Meet with the IT staff/contractor and evaluate IT usage quarterly.	Quarterly	Health Commissioner	
	2. Present ideas and proposals for technological improvements to the Board of Health.	Annually by March 1	Health Commissioner	

Strategic Priority #7 Work Plan**Goal: Monitor IT usage and effectiveness.**

Objective	Action Step	Timeline	Responsible Party	Status Update
4. Review the IT Plan on an annual basis by March 1, 2021.	1. Annual review of the IT Plan.	Annually by March 1	Health Commissioner	
	2. Present the revised plan to the Board of Health for approval, if necessary.	Annually by March 1	Health Commissioner	
	3. Disseminate the revised document, noting any changes, to the SCHED staff.	Annually by March 1	Health Commissioner	

Conclusion and Acknowledgements

CONCLUSION

This strategic plan is intended to provide focus for the Health Department staff and Board of Health over the next three years. The plan will undergo annual review by Strategic Planning Committee and changes will be made as necessary. All revisions must be approved by the Board of Health and will be tracked on the revision page. Progress towards each of the goals will be reported in the Health Department's annual report.

ACKNOWLEDGEMENTS

The Sandusky County Health Department would like to acknowledge the individuals who helped create the 2018-2021 Strategic Planning document:

Martha Bowen, Director of Environmental Health
Bethany Brown, Health Commissioner
Laura Burkin, Director of Nursing
Rachel Calvillo, Help Me Grow Home Visitor
Tessa Elliott, Hospital Council of Northwest Ohio
Chris Frederick, Account Clerk
Kim Gahn, Clerk
Stacey Gibson, Director of Health Education and Planning
Emily Golias, Hospital Council of Northwest Ohio
Heather Justice, Sanitarian in Training
Wendy McNelly, Help Me Grow Supervisor
Thomas Miller, Health Educator
Marsha Overmyer, Office Manager/Registrar
Angie Ruth, Director of W.I.C
Marti Swander, Director of Support Services
Joli Yeckley, Public Health Nurse