



STAFF REPORT

Report To: Board of Health

Meeting Date: December 19, 2019

Staff Contact: Nicki Aaker (naaker@carson.org)

Agenda Title: For Possible Action: Discussion and possible action regarding approval of the Carson City Health and Human Services' (CCHHS) Strategic Plan.

Staff Summary: A strategic plan is one of the core documents required by Public Health Accreditation. The purpose of the CCHHS Strategic Plan is to provide an action strategy for CCHHS management and employees in the following four priority areas: (1) communication; (2) employee development; (3) funding; and (4) partnerships. It aligns with the Carson City's Strategic Plan's goals of efficient government and organizational culture. The Plan will be reviewed internally on an annual basis and a progress report will be given to the Carson City Board of Health annually.

Agenda Action: Formal Action / Motion

Time Requested: 15 minutes

Proposed Motion

I move to accept CCHHS' Strategic Plan, as presented.

Board's Strategic Goal

Quality of Life

Previous Action

N/A

Background/Issues & Analysis

In 2013, CCHHS developed the department's first Strategic Plan, which was accepted unanimously (7-0) by the Carson City Board of Health. The CCHHS Public Health Accreditation Board (PHAB) Site Visit Report, completed by the PHAB site visit team in 2016, cautioned that CCHHS was not just a "lean" organization, but somewhat too lean. Comments demonstrated a concern for the organization's ability to maintain the large volume of work with limited funding and comparatively few staff in relation to other health departments of similar size. Given the lessons learned from the first plan, the goal for this Plan was to identify a smaller, more manageable set of organizational goals and SMART objectives; set up a reporting system that puts minimal workload on staff; and keep goals and objectives focused on the most pressing issues facing programs and staff.

In 2019, CCHHS began the process with each CCHHS division (Chronic Disease Prevention and Health Promotion, Clinical Services, Disease Control & Prevention, Human Services, and Public Health Preparedness) and completed a strengths, weaknesses, opportunities, and threats (SWOT) analysis. Four overarching themes were identified: communication, employee development, funding, and partnerships.

In addition, the SWOT analysis identified staff's concern with: burnout; breakdowns in internal communications; community misconceptions about the organization and poor health literacy; limited staff training and development opportunities; and funding restrictions bubbling to the top of potential issues to be addressed. While the first CCHHS Strategic Plan focused on external objectives, this iteration focuses on strengthening the organization from the inside out, in hopes that this fortitude will allow the organization to be more efficient and effective in its efforts to serve the community.

Applicable Statute, Code, Policy, Rule or Regulation

N/A

Financial Information

Is there a fiscal impact? No

If yes, account name/number:

Is it currently budgeted?

Explanation of Fiscal Impact:

Alternatives

Modify the CCHHS Strategic Plan as presented.

Attachments:

[CCHHS Strategic Plan - Draft_V2.docx](#)

Board Action Taken:

Motion: _____

- 1) _____
- 2) _____

Aye/Nay

(Vote Recorded By)

Carson City Health and Human Services

Organizational
Strategic Plan
2020 - 2025

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Introduction

In 2013, Carson City Health and Human Services (CCHHS) completed its first strategic planning process, as a part of the organization's efforts to meet requirements for accreditation by the Public Health Accreditation Board (PHAB). As the first time the organization had undertaken a strategic plan, the scope and nature of the goals, objectives, and activities were largely experimental; staff weren't entirely sure what was achievable, and what was too idealistic. However, many lofty goals were identified as a means of exploring what the organization was capable of completing.

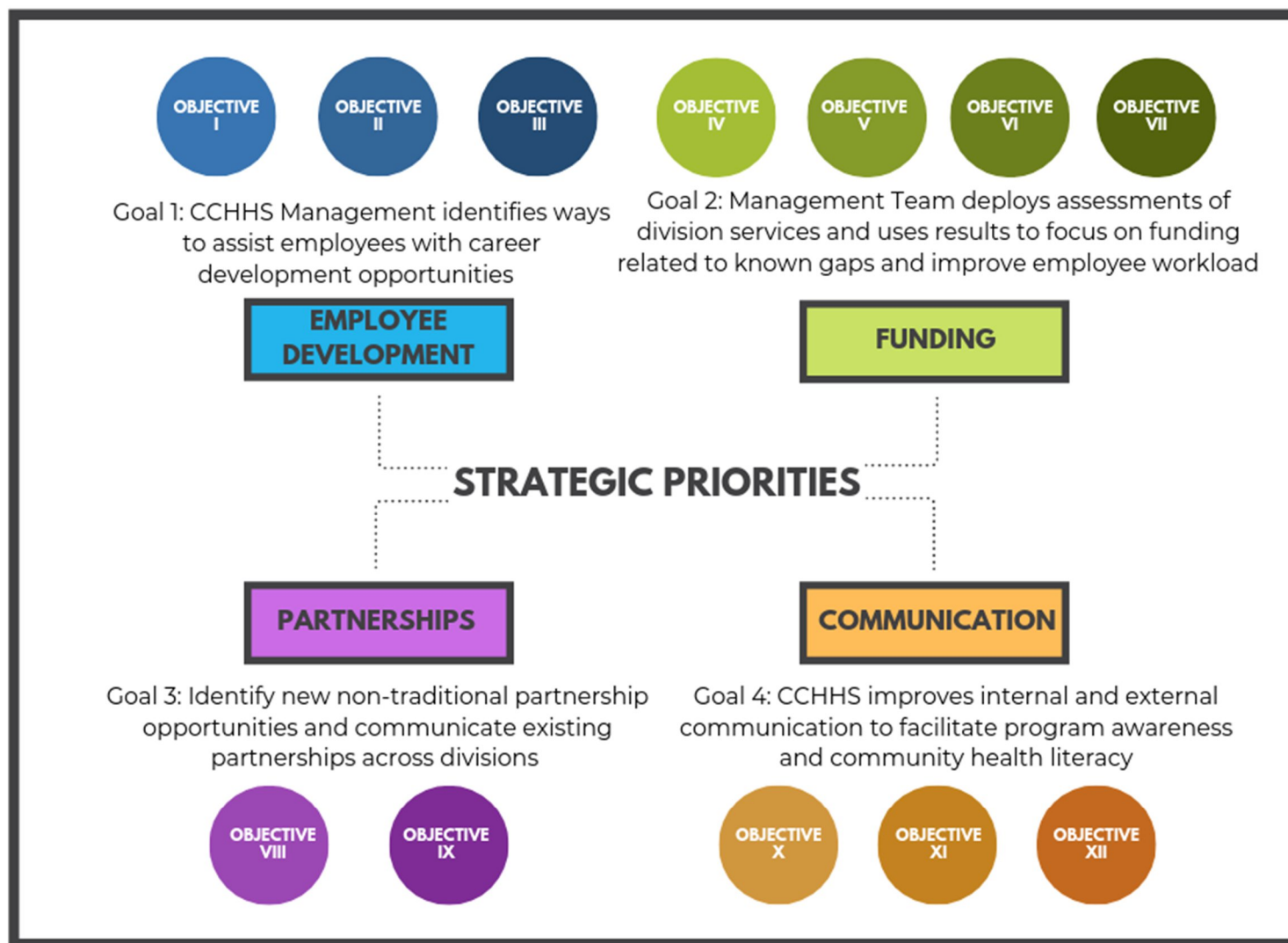
While the organization made headway in many areas (including being awarded PHAB Accreditation in 2016), the volume of objectives and related measures that were being tracked decreased the feasibility of timely and accurate tracking and reporting. Staff members responsible for updating information were spending upwards of a full work day collecting and inputting information per month, affecting other work. Additionally, changes in grant funding and related programmatic priorities altered the organization's ability to move forward with many of the objectives. The first plan was ultimately too large and rooted in too many resources outside of the organization's control to be truly effective.

The process goals of this strategic plan were simple: identify a smaller, more manageable set of organizational goals and SMART objectives; set up a reporting system that puts minimal workload on staff; and keep goals and objectives focused on the most pressing issues facing programs and staff. Through the SWOT Analysis undertaken (full results in Appendix E), four overarching themes emerged: Employee Development, Funding, Partnerships, and Communication.

These four themes focus largely on the organization's infrastructure. The PHAB Site Visit Report, completed by the PHAB site visit team in 2016, cautioned that CCHHS was not just a "lean" organization, but somewhat too lean; comments were made showing concern for the organization's ability to maintain the large volume of work completed

with little funding and comparatively few staff in relation to other health departments and districts of similar size. The 2019 SWOT Analysis showed staff concern regarding burnout; breakdowns in internal communications; community misconceptions about the organization and poor health literacy; limited staff training and development opportunities; and funding restrictions bubbling to the top of potential issues to be addressed. While the first CCHHS Strategic Plan focused on external objectives, this iteration focuses more on strengthening the organization from the inside out in hopes that this fortitude will allow the organization to be more efficient and effective in its efforts to serve the community.

This plan will act as a guide for the next five years of activities CCHHS will undertake. It will be reviewed annually, and progress will be reported at least annually to the Carson City Board of Health (the CCHHS governing entity). Updates to this plan may include additional objectives, the tabling of objectives that prove to not yet be within the organization's reach, or alteration of the original goals or objectives.



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Employee Development

Goal 1: CCHHS Management identifies ways to assist employees with career development opportunities

Objective I

By March 31, 2020, Managers will identify and deploy methods of assessing employee needs related to career development and recognition.

Measure: # of managers to ID and deploy method

Objective II

By March 31, 2021, participating employees will develop a personal career development plan.

Measure: # of employees completing plan

Objective III

Employees complete opportunities outlined in their career development plan, annually by March 31st.

Measure: % of employees activity/opportunity completion

Employee Development

Through the process of the organizational SWOT analysis, staff members' desire for more opportunities to grow their professional skills and their careers became very clear. There were a couple of conversations that were repeated in discussions with more than one division: the desire to have something to show for the time employees spend improving their skill set and broadening their professional expertise; as well as the frustration with feeling that development opportunities were fully limited to those funded by grants, rather than those which might be needed but are not related to specific program funding.

Staff desire for more employee development opportunities became the forefront of the CCHHS Management Team's development of this plan's goals and objectives. Various obstacles identified during this process included restrictions put on training opportunities by funding agencies, little general funds available for miscellaneous professional training, and high staff workloads. From these conversations, the Management Team decided that an in-house, coordinated, and voluntary approach would be necessary to create a meaningful employee development program that could be tailored to the individual employee's needs.

Participation in the employee development plans will be voluntary for any CCHHS employee that is interested. Employees will work with their Division Manager to identify short- and long-term career goals, as well as what training and development opportunities may help them reach those goals. From this point, participating employees will work with their respective Division Manager to identify what funds may be available to facilitate their participation, acknowledging that participation cannot guarantee funding availability; in other words, there may be some opportunities that employees may have to pursue outside of the scope of CCHHS funding, but Division Managers will make best efforts to accommodate employee participation in other ways.

Funding

Goal 2: Management

Team deploys assessments of division services and uses results to focus on funding related to known gaps and improve employee workload.

Objective IV

By May 31, 2020, deploy the Business Impact Assessment.

Measure: assessment completion

Objective V

By September 30, 2020, create an "ideal" organizational chart based on the results of the Business Impact Assessment

Measure: organizational chart completion

Objective VI

By December 31, 2020, the Management Team will conduct a grant funding evaluation to identify value-added grant programs and base costs of grant management.

Measure: evaluation completion

Objective VII

By July 31, 2021, CCHHS will continue to support (as allowed) legislative efforts to improve State public health funding of local public health agencies and programs

Measure: # of support actions taken by CCHHS Management Team and employees

Funding

Reliance on grant funding was a concern brought to the table by staff members at all levels through the SWOT Analysis process. Concerns voiced included: local programmatic priorities shifting based on funder requirements or priorities; discontinuation of grant funding affecting staff employment; staff turnover at funding agencies creating miscommunication and reduced program momentum; the costs to CCHHS associated with managing small grants being greater than the entire funding amount; and others.

To address these issues, the Management Team decided to focus on leveraging a previously planned Business Impact Assessment (BIA), identifying what an “ideal” health department structure would look like, and identifying new funding streams that could help the organization achieve that goal. The BIA will evaluate the costs of managing current grant funding, as well as which grants offer the most programmatic “bang for the buck”. This is in terms of funding for staff, programmatic dollars, and training funds (as described in the section above).

The development of an overall vision for an “ideal” organizational structure will be advised by the results of the BIA. The organization will use any current or known future gaps in programs and related funding to prepare for any future funding opportunities.

It should be noted that the purpose of the objectives associated with the “Funding” theme is not to cut current funding or positions, but to better prepare the organization to identify and capitalize on opportunities that provide funding that fills programmatic goals and creates a more stable funding stream for staff.

Partnerships

Goal 3: Identify new non-traditional partnership opportunities and communicate existing partnerships across divisions

Objective VIII

By June 30, 2021, identify partner sector gaps for the organization as a whole.

Measure: assessment completion

Objective IX

By June 30, 2023, engage new partners to fill sector gaps identified through the assessment process

Measure: organizational chart completion

Partnerships

During the SWOT Analysis process, many staff noted that there was a need to increase and share partnerships across CCHHS divisions. This came from a desire to find new ways for internal programs to partner on various projects, as well as to communicate and share the partnerships each division has generated with the others. Staff noted that while some programs and divisions have a broad spectrum of partners, others have struggled to make contacts or build relationships with the same or similar organization. In addition, staff discussed the need to look beyond the conventional partnerships long held by public health organizations (health care, social service non-profits, etc.) and identify different or “non-traditional” sectors (tribal groups, economic development, educational institutions, etc.) with which they could engage. It was felt by the Management Team that creating a “map” of divisional and programmatic relationships would help in communicating partnerships across the organization and identifying obvious gaps.

The perceived benefit of expansion into these “non-traditional” partnerships includes improved engagement with hard-to-reach populations, improved community-wide understanding of public health and related services, and increased likelihood of awareness of funding opportunities outside of traditional state and federal public health grantors. Additionally, exposure to new sectors allows for staff to learn more about the practices of others, and have the opportunity to take an innovative approach to complex public health problems; other sectors may have already found solutions to similar issues experienced by public health agencies, and connecting with those solutions, or creating new and innovative practices, may be necessary to address persistent public health issues.

Communication

Goal 4: CCHHS improves internal and external communication to facilitate program awareness and community health literacy.

Objective X

By June 30, 2020, CCHHS will deploy updated 508 compliant website that improves information accessibility

Measure: website completion

Objective XI

By June 30, 2020, CCHHS will collaborate with Carson City Human Resources on health-related articles for the citywide newsletter.

Measure: # of articles contributed by CCHHS to CCHR

Objective XII

By December 31, 2023, the Management Team and staff will work to build and implement an internal communications plan

Measure: Plan completion and implementation

Communication

Internal and external communications have been on the radar of CCHHS staff at all levels since the inception of the first organizational strategic plan. During the 2019 planning process, many staff voiced concern that limited health literacy in the community and confusion regarding the local nature of CCHHS (often confused for a state-level agency) may decrease community engagement and effectiveness of its programs. In addition, the CCHHS website continues to be the focus of external communications to the communities the organization serves and improving upon the accessibility of public health information through 508 compliance of the website has been prioritized.

To improve understanding of the role of CCHHS in public health among other City departments and staff, it is hoped to partner with the Carson City Human Resources (CCHR) office to provide health information and raise the visibility of the department. Carson City has over 400 active employees and many retired personnel who receive the CCHR newsletter, many of whom live within the region served by CCHHS programs and services.

Additionally, the organization struggles with timely internal communication of staffing and program changes; given the high workload experienced by staff at all levels, it's difficult to communicate internal changes quickly, leaving some staff members feeling "out of the loop". While several efforts to remedy this issue have been piloted in the past, an ideal solution has not yet been found. However, resolving issues to improve communications is a goal at all levels of the organization, and is reflected in these objectives.



Appendix A: Performance Measures and Dashboard

The performance measures for each objective are stated in each section above. However, “what is measured, is improved”. It is vital that each of the 12 performance measures associated with this plan are updated on a regular basis to monitor success and maintain focus (for reporting intervals, see Appendix B).

A separate dashboard document has been created to develop appropriate charts to report data to the CCHHS governing entity, the Carson City Board of Health (BOH), as well as the community as a whole.

For clarification of data to be collected and appropriate intervals, the 12 measures have been listed in the tables below.

Theme	Measure	Unit	Collection Interval	Reporting Interval
Employee Development	Managers deploying employee development needs assessment	# of managers	Quarterly	Quarterly
	Employee personal development plans	# of employees completing plans	Quarterly	Quarterly
	Employee plan completion	Aggregate average % completion (average percent completion)	Quarterly	Quarterly
Funding	Business Impact Assessment completed	% completion	Quarterly	Quarterly
	Ideal org. chart completion	% completion	Quarterly	Quarterly
	Grant funding evaluation completion	% completion	Quarterly	Quarterly
	Public health support actions related to the Nevada Legislature	# of activities 2020 – 2021; # of activities 2022-2023	Quarterly	Annually

Theme	Measure	Unit	Collection Interval	Reporting Interval
Partnerships	Partner sector gap assessment completed	% completion	Quarterly	Quarterly
	New partnerships	# of new partners	Quarterly	Annually
Communication	Website update completed	% completion	Quarterly	Quarterly
	Articles contributed to CCHR	# of articles	Annually	Annually
	Communication plan completion, plan implementation	% completion, % of proposed activities implemented	Quarterly	Quarterly

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Appendix B: Strategic Plan Revision and Reporting Intervals

It is necessary that the Strategic Plan be reviewed and revised at regular intervals. This will include progress towards stated objectives, as well as identifying new objectives that fall towards the end of this planning period (2025). Additionally, some objectives may need to be removed or altered, due to shifts in funding, funding organization's priorities, or general feasibility. Any goals or objectives that either may no longer be feasible, or are currently outside of CCHHS' reach, will be "Parked" in the "Parking Lot" (appendix D). Parking lot issues should be re-examined on at least an annual basis to determine if there are any changes in feasibility, or if they are still a priority for the health department.

The table below outlines the recommended review and reporting intervals, as well as reporting format.

Strategic Plan Component	Review Interval, Process	Reporting Interval	Reporting Format
Objective Measures	Quarterly; update dashboard	Quarterly, unless otherwise specified	Board of Health Presentations - Annually
Objectives	Annually; discuss success and feasibility. Update Strategic Plan as appropriate.	Annually	Board of Health Presentations, Annual Report
Goals	Annually; discuss success and feasibility. Update Strategic Plan as appropriate.	Annually	Board of Health Presentations, Annual Report
Parking Lot	Quarterly; discuss feasibility to keep on radar.	Annually	Board of Health Presentations, Annual Report

Appendix C: Strategic Planning Process Description

The purpose of this narrative is twofold: (1) to provide the reader with context regarding the development of this Strategic Plan, and (2) to provide a narrative of the process that meets the requirements for PHAB Reaccreditation (Measure 5.3.1).

Part I: SWOT Analyses

Over the course of April 2019 through June 2019, each division within the organization completed a divisional SWOT analysis. For some divisions, this was done in person, while one division opted to develop their divisional SWOT analysis via survey, due to conflicting staff schedules. These Analyses were specific to each individual division, and did not necessarily apply to the organization as a whole.

In July 2019, an outside staff member met once with each division to facilitate the organization-wide SWOT Analysis. The purpose of these meetings was to review the divisional SWOT Analyses and identify:

- Which divisional issues previously identified apply to the organization as a whole
- What other issues that weren't previously discussed staff felt were applicable to the organization as a whole.

The meetings were generally inset within previously schedule division staff meetings. The respective division's manager attended two of meetings of the four total division meetings. The Administration division (comprised of the CCHHS Director, Business Manager, and two administrative staff) did not participate in the divisional SWOT analysis process.

Part II: Theme Development

After meeting with individual divisions, the results were compiled into large posters, each representing one of the four elements of a SWOT Analysis: Strengths, Weaknesses, Opportunities, and Threats. Each of the posters were placed in the most commonly used conference room in the building, which is also always available to staff when not in use for meetings. The posters were left in the conference room for one week and were unattended in order to allow staff anonymity in voting for their highest priority issues.

For the voting process, staff were given a set of 12 small "dot" stickers and asked to indicate their three highest priority issues on each of the four posters, thus indicating what they saw as the organization's three biggest Strengths, greatest Weaknesses, biggest Opportunities, and most urgent Threats. After one week, the posters were removed, and the staff member hired to complete the Strategic Plan tallied the votes for each of the issues listed on the posters.

A report was then completed that visualized the top five responses for each of the four elements of the SWOT Analysis (see Appendix E, Figures 4-7), and was brought to the CCHHS Management Team for the development of goals and objectives. In this report, the staff member outlined a proposed set of themes, based on the responses from the SWOT Analysis process

above, which were accepted by the Management Team as the four priority areas to be addressed: Employee Development, Funding, Partnerships, and Communication.

Part III: Goal and Objective Development

After the results of the organizational SWOT Analysis were presented to the Management Team and Priority Areas were set, the group went about developing goals and objectives for the Strategic Plan. The Managers were advised to only set 1-2 goals per priority area, with 1-3 objectives per goal to keep the workload associated with monitoring and reporting progress towards them manageable for staff and managers who had already indicated high workloads and burnout being an issue. The Management Team decided to take up one goal per priority area, with two to four objectives per goal.

After the goals were drafted, all CCHHS staff members were sent the draft of priority areas, goals, and objectives for review and feedback via email. Staff were directed to give all feedback to the staff member in charge of the plan to avoid confrontation with management. If critical feedback was received, the process was to bring the de-identified feedback back to the Management Team for review and adjustment of the goals and objectives. However, there were no requests for changes to the goals and objectives by staff, and so they were accepted as drafted.

Due to time constraints, the staff member tasked with development of the plan identified measures for each of the objectives separately. Due to this and other influencing factors, such as changing data collection resources and others, the specific performance measures utilized for tracking the progress of the plan may evolve over time.

Part IV: Relationships Between the CCHHS Strategic Plan, CCHHS Community Health Needs Assessment, and CCHHS Community Health Improvement Plan

Over the course of CCHHS' preparation for initial accreditation from the Public Health Accreditation Board (PHAB) to the present, the organization has worked to develop a system in which each of the accreditation requirements feeds into the others, rather than acting alone in a vacuum. The graphic below illustrates this system and has been used to communicate the purpose and benefit of participation in these activities to a variety of audiences, including elected officials, stakeholders, other City entities, and staff.

As illustrated below, it is one of the main roles of the organizational Strategic Plan to guide CCHHS through the work the organization needs to complete in order to address the goals and objectives of the Community Health Improvement Plan (CHIP), and ultimately move the needle in regards to overall community health status, as measured and communicated by the Community Health Needs Assessment (CHNA).

While this rendition of the CCHHS Strategic Plan does not overtly address the objectives of the CHIP, the goals and objectives set here enable the organization to improve the organization's effectiveness and efficiency. Essentially, the organization must strengthen its infrastructure and

staff development before it can make further programmatic changes to broaden the work it does in the context of the CHIP.

Figure 1: “How It All Fits Together”, a diagram of the CCHHS work to address population health



Appendix D: Strategic Plan Parking Lot

While the official Strategic Plan Goals and Objectives are listed in detail in previous sections, there were many issues brought up by staff that can be re-assessed for appropriate ways to address these concerns during quarterly and annual reviews of the Strategic Plan itself. This re-assessment gives the organization an opportunity to move past the previously-chosen Goals and Objectives and address areas that may have been previously unfeasible or not within the organization's capacity during the original development of this plan. The template for the Parking Lot is below.

Goal or Objective	Description	Why is this important?	Why is it in the parking lot?	Criteria for SP inclusion, or removal from Parking Lot

Appendix E: Organizational SWOT Analysis Results

As described in the narrative process description found in Appendix B, the following figures and tables outline the information collected through the 2019 Organizational SWOT Analysis Process.

Figure 2: Number of staff participating in divisional SWOT Analysis meetings (N = 25), by division

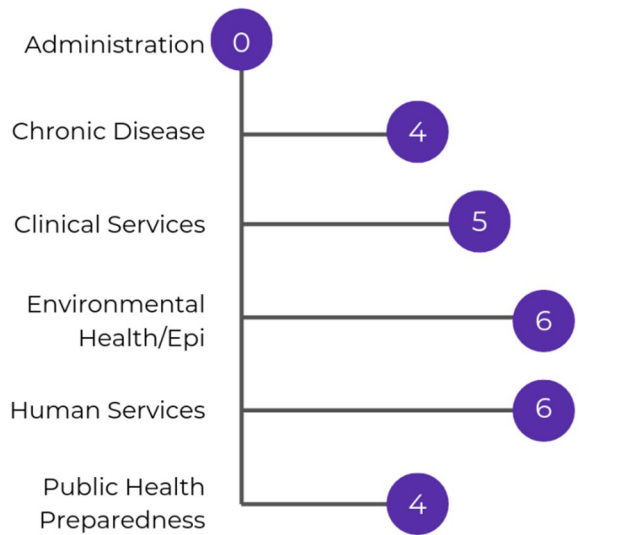


Figure 3: Number of staff participating in SWOT prioritization board activity (N = 24), by division

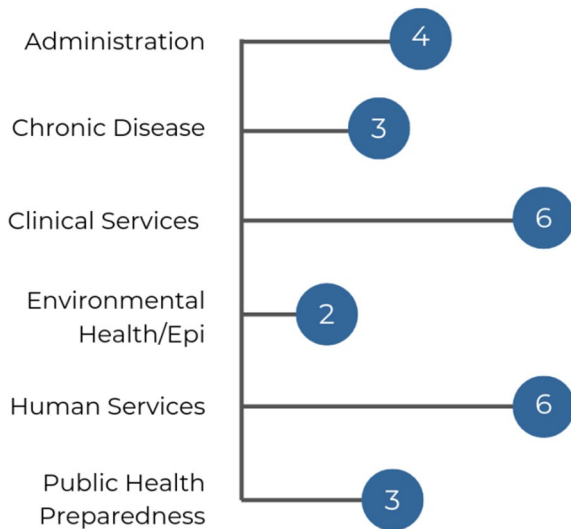


Figure 4: Top 5 SWOT Prioritization Results, Strengths, number of votes

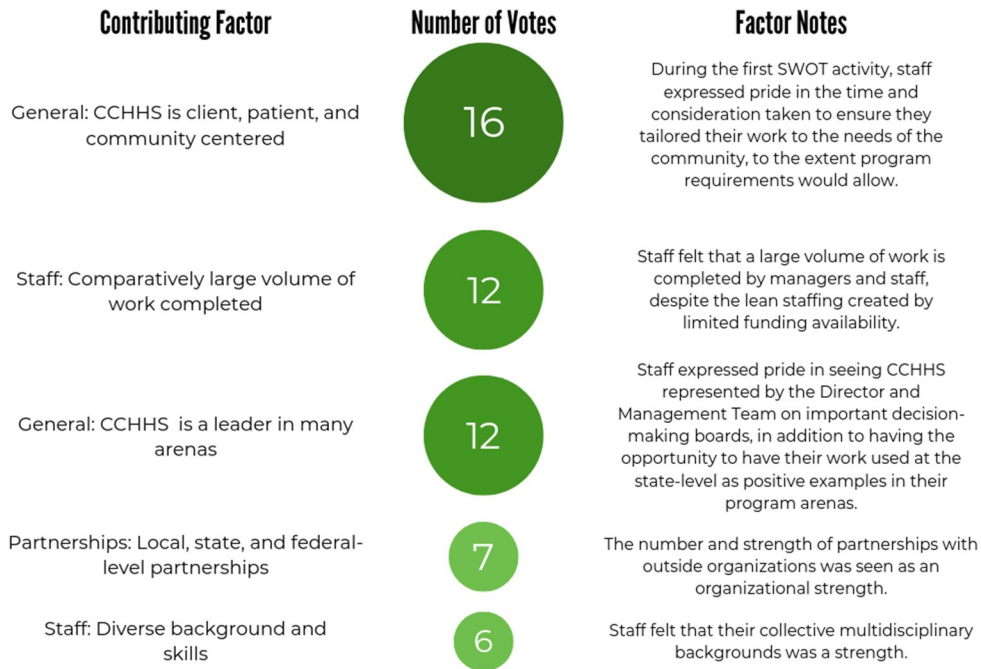


Figure 5: Top 5 SWOT Prioritization Results, Weaknesses, number of votes

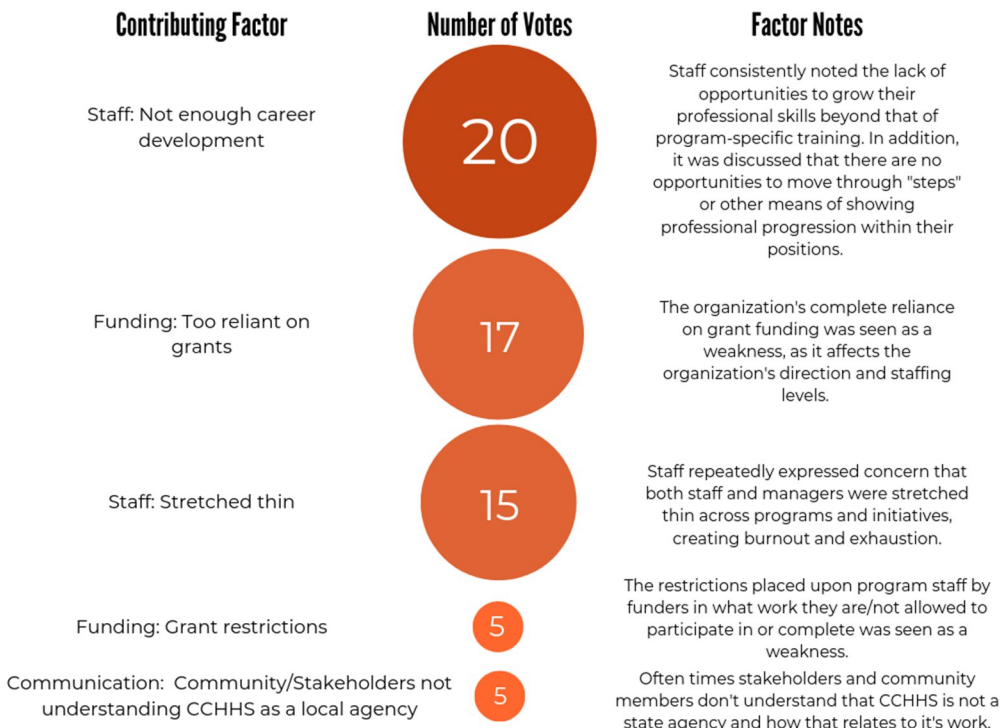


Figure 6: Top 5 SWOT Prioritization Results, Opportunities, number of votes

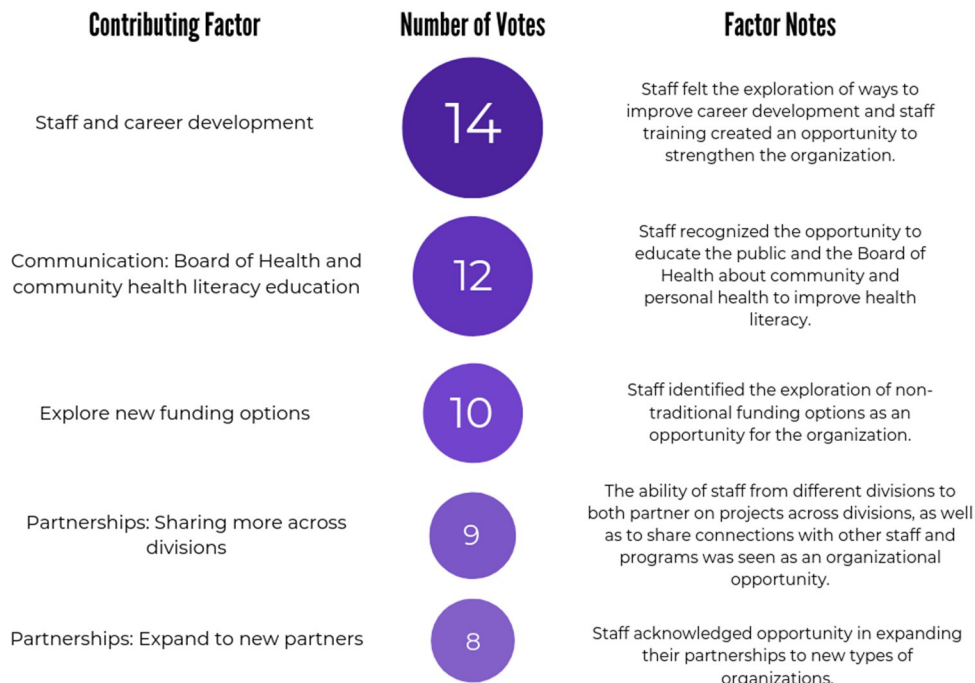


Figure 7: Top 5 SWOT Prioritization Results, Threats, number of votes



Appendix F: PHAB Re-Accreditation Requirements Location

Re-Accreditation Measure	Description from “PHAB Guide to National Public Health Department Reaccreditation: Process and Requirements” (2016)	Location within CCHHS 2020-2025 Strategic Plan
5.3.1a	A description of how the health department’s staff at various levels and across the department are engaged with a shared responsibility to implement and update the strategic plan	Appendix C, Parts I-III
5.3.1b	A description of how the implementation of the plan is tracked.	Appendix A
5.3.1c	A description of the process for reassessing and revising department priorities.	Appendix B, Appendix D
5.3.1d	A description of how unanticipated changes in priorities, level of resources, and/or opportunities are factored into the strategic plan implementation and revision.	Appendix B, Appendix D
5.3.1e	A description of the process for reviewing and updating the plan	Appendix B
5.3.2a	Strategic priorities	Page 4
5.3.2b	Goals and measurable objectives	Pages 6-13
5.3.2c	Consideration of agency infrastructure and capacity required for efficiency and effectiveness	Priority Areas “Employee Development” and “Funding”, pages 6-9
5.3.2d	The identification of changing or emerging trends that affect the effectiveness and/or strategies of the health department	Appendix E
5.3.2e	A description of how the strategic plan links to the community health improvement plan	Appendix C, Part IV