

Strategic Plan Report

Benton County Public Health

2015–2019

| Benton County Human Services, Public Health Unit

Introduction

Benton County Human Services is an integrated public health and human service agency. Services include public health, child support, social services, mental health and financial support. In partnership with local service providers, regional state and federal partners, BCHS is educating our community through public health efforts and providing safety and protection to the most vulnerable children and adults.

The BCHS department reports directly to the Benton County Human Services Board which operates in accordance with Minnesota Statute 145A.09–17 and Minnesota Statute 393.01–13. Benton County Human Services Board consists of 5 County Commissioners. There are approximately 90 staff employed in the various units of the department.

The Public Health Unit of BCHS provides services to promote healthier and safe living for the Benton County Community. These services include disease prevention and control, Women’s, Infants and Children program, emergency preparedness, maternal and child health, and community health improvement priorities. In collaboration with community partners, the Public health Unit is responsible for determining and addressing local public health needs as well as community health priorities.

Background

In Minnesota, the Community Health Services (CHS) Act of 1976 established a “State Community Health Services Advisory Committee” (SCHSAC), to advise, consult with and make recommendations to the Commissioner of Health on matters relating to the development, funding and evaluation of community health services in Minnesota. The CHS Act (later renamed the Local Public Health Act) began the partnership between the Minnesota Department of Health and local governments. This state/local partnership has proved to be an effective tool for protecting and improving the health of all Minnesotans.

In 2011, SCHSAC approved recommendations from the “Performance Improvement Steering Committee” that Community Health Boards in Minnesota be required to submit three plans for the 2010–2014 assessment and planning cycle. These plans were:

1. Community Health Improvement Plan
2. Strategic Plan
3. Quality Improvement Plan

As a result of the recommendation, the Office of Performance Improvement (OPI) from the Minnesota Department of Health (MDH) issued an application for a Strategic Planning Facilitation Project in 2012. The goal of the project was to help facilitate a strategic planning process with at least 8 local or tribal health departments. A strategic planning process overview, tools, templates, and other supporting materials are available from MDH. All guidance has been designed to help CHBs meet the national public health standards develop by PHAB.

Strategic Plan: Process Overview

Strategic planning is a deliberate decision–making process that determines the direction in which the organization is going.



In Benton County, the strategic planning team included:

- Director of Health and Human Services: Robert Cornelius
- Public Health Nursing Supervisor: Nicole Ruhoff
- CHS Administrator: Renee Fraundeinst
- Public Health Educator(s): Jenny Brenny, Julie Willman
- Staff Nurse(s): Cloanne Wegman, Deb Deger, Nancy Dahlstrom
- Public Health Nutritionist(s): Pam Gohman, Sally Murray
- Case Aide: Brianne Zulawski

And was facilitated by:

- Minnesota Department of Health Public Health Nurse Consultants:
Linda Bauck–Todd and Brenda Menier

The strategic plan was presented and approved by the Benton County Board on:

- January 20, 2015

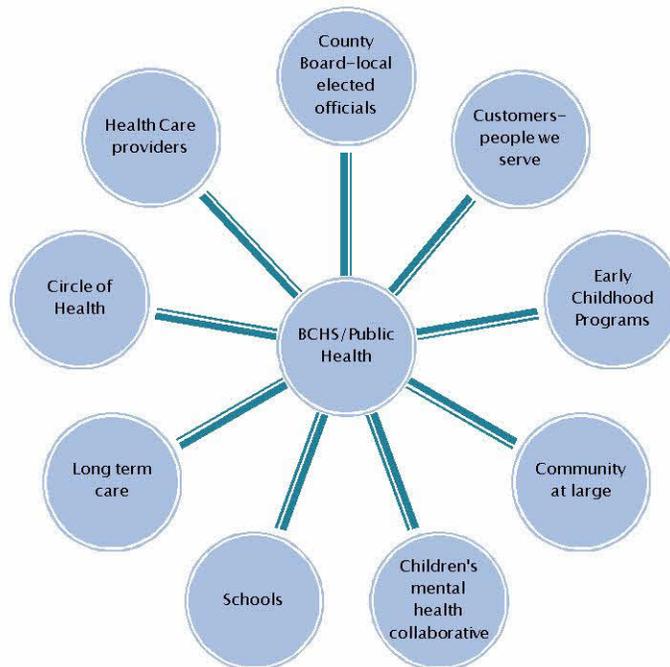
The strategic planning team met on three occasions between February 2014 and May 2014, additional meetings were held with the Public Health staff to further develop action plans. A stakeholder analysis was completed that identified those who may be interested in the strategic planning process and who have a “stake” in the outcome. There was discussion about the value of a public health advisory committee. Plans continue to be developed on information stakeholders would need and the method and frequency of communication. Information from the 2013 Community Health Assessment was reviewed to identify key issues. Discussion of summary of key trends and reports was reviewed by the team members to provide a picture of the county demographics and other social, economic and health related data.

A SWOC (Strengths, Weaknesses, Opportunities and Challenges) analysis was completed. Values were identified that guide staff in their work that led to some draft vision elements. The vision elements were further refined to develop language for communication with stakeholders. A vision statement was developed and value statements were chosen and defined. A Dot Exercise and Interrelationship Diagram were used to further develop priority strategies, goals and outcomes.

There were five overarching goals identified and action planning began. The goals were further refined into objectives that were Specific, Measurable, Attainable, Relevant and Time-Based (SMART). For each objective developed, an action plan was developed that included tasks, identification of staff responsible for implementation and timeline for tasks. Benchmarks and methods measuring success methods continue to be developed. Implementation of the action plans has begun on some of the strategies and others have been designated to start at a later date.

Stakeholder Analysis

A stakeholder analysis was completed by having each Public Health team member identify the stakeholders who are unique to their duties; these are identified in the graphic below:



The analysis concluded that all stakeholders need information and education about the strategic planning purpose and process.

Summary of Reports and Key Trends

The team noted significant changes for the organization and community since the data was last collected and assessments were done.

- Change in leadership, both Public Health and Human Services
- One change in County Board member, chair of Human Services Board
- Shift in cultural make-up, growing Somali population.

They also identified accomplishments the organization has made in the last assessment and planning cycle.

- Human Service leadership is interested and engaged in moving the organization forward in a positive way.
- Strong leadership in Human Services and Public Health
- Good partnership with surrounding counties, leadership is at the table for promoting and maintaining partnerships.

External trends that will affect the agency's future include MnChoices, movement for regional collaboration, MNSure and the potential of pursuing PHAB accreditation. The team also identified needs or risks the organization has in the next 3-5 years which included the following:

- Population dynamics-cultural, ethnicity, overall growth
- Sustainability of Public Health funding
- Capacity of Public Health services
- Focus on prevention-methods to quantify the value of Public Health.

SWOC Analysis

Following the review of the summary of reports and key trends, the strategic planning team discussed a list of strengths, weaknesses, opportunities and challenges. This information was used to help further refine the vision, mission, value statements and strategic issues. The team reviewed the strengths that could be useful in addressing the opportunities. They also identified that many of the challenges could also be viewed as opportunities for the agency. Listed below are the issues identified by the team members.

Strengths/Accomplishments

- Dedicated employees passionate about the work
- Transition to new staff
- Ability to voice opinions
- Staff are reliable and accountable
- Excitement about possibilities
- Vast amount of knowledge
- Open communication
- Ability to expand website and media
- Leadership support
- Building capacity
- County Board is taking a leadership role in redefining how to create efficiencies
- Economic development
- Health and Wellness committee is promoting overall staff and family wellness– Board wants to look at this within the community as well
- Board member is part of the SHIP Community Leadership Team

Weaknesses/Challenges

- Silos in work, between Human Services and Public Health
- Staff are task focus, lack big picture view
- Changing of staff, transition to new staff
- Lack of policy and procedures in many program areas
- Public Health is unknown in the community
- Dynamics of the county make up, Greater Benton County vs. the St. Cloud area Benton County
- Lack of health care resources in rural areas
- Lack of tax base to provide funding, area needs economic development; companies prefer to be located in neighboring counties

Opportunities

- Use of data and outcomes in talking about Public Health
- Increased emphasis on outcomes
- SHIP grant provides opportunities to highlight outcomes
- Shift in staffing provides opportunities to make program changes
- HS structure changes have led the way to be more comfortable with changes
- CHS administrator contract allows Public Health an opportunity to learn from well-established leadership in the region
- MDH's availability to consult with local public health
- Changes in budget and finance
- Changes with billing codes, opportunity to better reflect the work of Public Health
- Central intake through SSIS allowing PH better access to information needed for clients
- Benton County Fair as a platform to promote Public Health and other community services/events
- Movement for regional collaboration among health providers and local public health

Mission, Vision and Value Statements

After review of the summary of reports, trends and SWOC analysis, the team spent time reviewing, revising and writing a mission, vision and value statements .The Public Health unit discussed and revised these statements which were adopted by the strategic team members.

Mission of the Public Health Unit

To promote, protect and improve the health of the Benton County Community through Advocacy, Education and Collaboration.

Vision

To improve the quality of life for the Benton County Community.

Vision elements:

Empowered and Diverse Workforce: The workforce is well rounded and represents and respects the population it serves. Staff identifies the need for change and creates improvement using the Plan, Do, Study, Act cycle (PDSA).

Evidence Based Public Health Practice: The work we do is grounded in science. Goals and outcomes are developed to define programs and services. Data is used to measure program and service success and drive change.

Supported and Sustained Public Health Practice: Benton County Public Health is recognized and valued. Quality programs and effective services are supported with adequate resources to ensure sustainability.

Collaborative Community Leader: Public Health leads collaborative efforts by engaging with the community to improve health.

Everything is related.....

Value Statements

Collaboration

We value working relationships with interdisciplinary and community groups. We strive to develop positive relationships and creative solutions to accomplish our mission.

Integrity

We are honest, trustworthy and professional. We strive to do the right thing for the best public health outcomes.

Quality

We are continually working towards improvement with measurable differences in the lives of our community.

Teamwork

We value the diversity and unique contributions of our employees and partners.

Respect

We embrace a standard of conduct that recognizes and values the contributions of all. We earn and preserve trust through our behavior and the quality of our work.

Accountability

We strive to be efficient managers of public funds to promote public trust. We manage resources wisely and hold ourselves and others to appropriate high standards.

Strategic Priorities/Goals

1. Priority: Promoting the Value of Public Health

Goal: Sustainable, quality programs and effective services.

- a. Quarterly media articles in 2 of 3 local newspapers highlighting a Public Health issue/service/program by December 2015.
- b. A Public Health topic will be highlighted on a social media venue weekly by December 2015.
- c. Public Health will have a presence at 6 promotional outreach community events each calendar year by December 2015.

2. Priority: Collaboration with the Community

Goal: To establish and maintain positive community relationships.

- a. Establish a list of potential and current Public Health collaborative partners by December 2019.
- b. Establish a process for outreach to potential and current Public Health collaborative partners by December 2019.

3. Priority: Fostering a Dynamic Infrastructure through a Continuous Quality Improvement culture

Goal: A well-organized, efficient and clearly defined duties in alignment with the mission of the unit and agency.

- a. Office support and Case Aid will be utilized for appropriate duties by December 2015 by reviewing time study monthly reports.
- b. Professional staff will maximize their skills in daily duties and to generate revenue whenever possible by December 2015 by monitoring monthly revenue sources.
- c. Explore options for building capacity and infrastructure in the Public Health unit by December 2019.
- d. Public Health computerized files will be reorganized by area of Public Health responsibility to provide order, improved accessibility and efficiency by December 2019.
- e. Public Health policy and procedures to be reviewed and revised on a routine basis by January 2016.

4. Priority: Continuous Workforce Development

Goal: A well rounded workforce creating improvements with evidence based methods.

- a. All Public Health staff will complete the Clifton Strength Finder survey and exercises by December 2015.
 - b. All Public Health staff will complete training in the Plan-Do-Study-Act (PDSA) cycle by December 2015.
 - c. All Public Health staff will complete an assessment of core competency skills by December 2019.
 - d. All Public Health staff will complete the QI maturity questions annually by December 2015.
 - e. Public Health will develop and implement a Continuous Quality Improvement Committee by March 2015.
5. Priority: Inform and Engage stakeholders and policy makers

Goal: Public Health is recognized and valued. Quality programs and effective services are supported with adequate resources to ensure sustainability.

- a. Present an annual report to the Benton County Board annually by June 2015.
- b. Develop a simple guide to showcase what Public Health is about and “Tell our Story” by December 2019.

Community Health Improvement Plan Linkages

Benton County completed its Community Health Assessment in April 2014. The top 10 health priorities were identified using the Community Health Assessment, other data sources and input from the community members. In 2014, members of Public Health, Human Services and the community have developed an action, implementation and evaluation plan for the top 3 identified health priorities. The Community Health Improvement Plan ties into the broad goals in our strategic plan of “Promote the Value of Public Health” and “Collaboration with the Community”. Promoting the Value of Public Health will bring a new awareness to population health issues and strategies that can be utilized. Collaborating with the community has aligned knowledge, resources and momentum towards goals common to the community.

Quality Improvement Plan Linkages

The strategic plan has guided the process for developing the Quality Improvement Plan. Much like the strategic plan, the quality improvement plan needs a foundation for it to be successful. The mission, vision and values identified during the strategic planning process support the structure and type of initiatives that the committee will focus on. The broad strategic goals are integrated with quality improvement processes. As the Continuous Quality Improvement Committee identifies initiatives and projects, priority will be given to services and activities identified in the strategic plan.