# Strategic Plan



## Meigs County Health Department



Adopted on Revised

October 10, 2017 January 11, 2023

### **Signature Page**

This plan has been approved and adopted by the Meigs County Board of Health:

Roger Gaul, BOH President

Date

Date

Date

Date

For questions about this plan, contact:

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#### Introduction

### About This Document

The MCHD's Strategic Plan describes the agency's operational framework and key priority areas. It provides a clear picture of what the MCHD plans to achieve, the methods used to succeed, and the measures used to monitor progress. It is designed to focus on the areas of need for public health in Meigs County, as well as to meet operational goals for the MCHD.

The MCHD Strategic Plan is an ever-evolving product of collaborative efforts of the Board of Health (BOH), Senior Management, Supervisors, and front-line staff. It will be reviewed annually and revised as needed. A digital copy will be located on the MCHD server (MEIGSPRIME) and a paper copy will be located in the Accreditation Coordinator's office.

#### Mission, Vision, and Values

Mission Statement-To preserve, promote, and protect the health and well-being of Meigs County.

Vision Statement-To be a leader in public health, providing solutions to community health challenges so that people enjoy optimal health in a clean and safe environment.

#### Values

- Prevention Focused: We believe that the best investments in the public's health are those that prevent the spread of disease, foster optimal wellness, and promote healthy behaviors.
- Accountable: We are open and honest in our relationships and good stewards of available resources.
- Community Centered: We build and sustain our public health system through partnerships that improve health outcomes for all.
- Evidence-based: We implement strategies that are based on science and best practices.
- Social Justice: We work to eliminate health disparities and advocate for the needs of the underserved.
- Respect: We treat everyone with dignity, sensitivity, and compassion.

#### Links to Other Agency Plans

The MCHD's Branding Policy aligns with and supports other agency plans and policies as appropriate. Specific examples include, but are not limited to:

- Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) initiatives. One of the current Objectives is to hire a Grant Writer/Executive Director for Get Healthy Meigs!, which is the county coalition that is the driving force behind the CHA and CHIP.
- Performance Management/Quality Improvement projects will be based on evidence gathered from Strategic Plan priorities, the MCHD Branding Policy, CHIP, and other sources as applicable.
- Communications Policy initiatives-Encourages consistent and correct communication efforts with county leaders, partners, and the public.
- Workforce Development-completed Objectives would allow for increased programs and services, as well as allow for employee wellness opportunities.

#### PHAB Requirements

Public Health Accreditation Board (PHAB) Standards & Measures for Reaccreditation Version 2022:

**Measure 10.1.1 RD 1**-The process to develop the strategic plan, which includes:

- a. How the health department's staff at various levels and the governing entity or advisory board are engaged in developing the strategic plan.
- b. Strategic planning process steps.

Measure 10.1.1 RD 2-A department-wide strategic plan, which must include:

- a. The health department's mission, vision, and guiding principles or values.
- b. Strategic priorities.
- c. Objectives with measurable and time-framed targets.
- d. Strategies or actions to address objectives.
- e. A description of how the strategic plan's implementation is monitored, including progress towards achieving objectives, and strategies or actions.
- f. Linkage with the community health improvement plan (CHIP). (If the linkage with the CHIP is not evident in the plan, it could be indicated in the Documentation Form.)
- g. Linkage with performance management (PM). (If the linkage with PM is not evident in the plan, it could be indicated in the Documentation Form.)

#### **Strategic Priority Selection Process**

# The Strategic Planning Process

The MCHD utilized a seven-phased approach to Strategic Planning. A summary of activities related to the seven phases of the Strategic Planning process is provided below.

**Phase 1-Plan to Plan**: The MCHD contacted Mission Met, which is a strategic planning organization that provides consultation, training, and software services. Mission Met conducted interviews with MCHD staff as follows:

- Multiple Zoom calls with the Administrator and Accreditation Coordinator
- Thirty-minute interviews with one Senior Management, two
   Supervisors, one Program Director, and one Board of Health member
- All staff via the Strengths, Weaknesses, Opportunities, Threats (SWOT) Analysis.

These interviews served to give Mission Met a well-rounded view of the MCHD's funding, facilities, staff, and programs. This information was used to formulate Strategic Priorities.

**Phase 2-Articulate Mission, Vision, and Values**: The MCHD had revised the Mission, Vision, and Values during the previous Strategic Plan cycle in 2017. The team elected not to make any changes for this cycle.

**Phase 3-Assess the Situation**: As previously mentioned, Mission Met conducted a SWOT Analysis during which all MCHD staff and Board of Health (BOH) members were given a chance to voice their opinion. Sixteen staff members and three BOH members participated. See the SWOT Analysis section below for the results.

**Phase 4-Agree on Priorities**: A Strategic planning retreat was held October 12, 2022, and was attended by the MCHD Administrator, Accreditation Coordinator, Health Commissioner, Director of Nursing, Director of Environmental Health, WIC Director, Maternal and Child Health Program Director, Creating Healthy Communities Program Director, Public Health Emergencies Coordinator, and two members of Mission Met's staff.

#### **Strategic Priority Selection Process cont.**

The purpose of this meeting was to identify strategic priorities. SWOT Analysis survey data, along with other inputs such as the CHA informed priority identification. MCHD staff identified their ideal vision of the MCHD, barriers to that vision, and ways to overcome those barriers. By the end of the day, five priority areas were finalized:

- Funding
- Facility
- Workforce
- Programs
- Community

**Phase 5-Write the Plan**: Additional meetings were held November 1, November 4, and December 5, 2022 to finalize objectives and action steps for the Strategic priorities identified during the retreat in October. Participants at these meetings included the same MCHD staff members that attended the retreat.

A draft form of the Strategic Plan was presented to the BOH during their December 2022 meeting for the purpose of gathering final input concerning the goals and action items before the plan is to be completed and approved in January 2023.

**Phase 6-Implementation**: Implementation has already begun for some of the goals and action steps such as "Create and communicate the department's case for support for additional space and/or a new building," while others will be initiated over time. The Plan is a five-year plan, but will be reviewed annually in December to revise goals and action steps as needed.

Phase 7-Monitoring: Monitoring of this Plan will be done by the Accreditation Coordinator as needed. Documentation will be uploaded to a folder located on the MCHD's server (MEIGSPRIME) and into the Mission Met online system as long there continues to be access to it. Progress made on the Objectives and Action Items will be tracked in the Mission Met system as long as it is available and/or in a spreadsheet. Progress will be shared periodically during staff meetings, Accreditation Team meetings, and BOH meetings.

### The SWOT Analysis

As part of the overall strategic planning process, Mission Met conducted a SWOT Analysis to identify internal strengths and weaknesses, as well as external opportunities and threats. Survey respondents included 16 MCHD staff members and 3 BOH members, who were asked to provide the top three answers to each category. A summary of themes from the SWOT Analysis are shown in the table below and the full report can be found in Appendix A. This was combined with information from other staff interviews to provide a basis for identifying the agency's strategic priorities and goals. A (\*) symbol denotes multiple mentions.

Internal Strengths	Internal Weaknesses
Concern for the community****	Building issues (Limited growth due to lack of
	space, lack of maintenance)*****
Supportive (staff and BOH)*	Limited staff*
Ability to work together********	Time/Resources too thin***
Public Outreach****	Getting information out to the public/
	Advertising services*
Staff Expertise/Strong Leadership (long-term	Frequent turnover of staff in certain
management & program directors)****	positions/inability to find qualified people to
	fill positions******
Excellent customer service*	Confusion from pandemic
Flexible/Adaptable	County support
Staff Resilience	Ever changing guidance policies
Knowledge of the community needs	Cross training
Knowledge of community resources	Project accountability
Funding	Broad learning curve for the profession
Dedication	Shorter work week
Respectful	Disorganized in some areas
Organization	Pay
Cooperation	Location/parking
Family friendly	Exhausted staff
	Performance Management/Quality
	Improvement
	Strong willed staff
	Lack of funding
	Lack of knowledge
	Motivation
	Competition between local clinic/hospitals

External Opportunities	External Threats
Increased partnerships due to CHA, CHIP,	Decreased respect/trust for public health and
etc.****	government during and after COVID****
Workforce Development/Trainings (online,	Ongoing COVID**
find more, etc.)**	
Public Health Accreditation	Funding (grant reductions, non-supported
	levies, competition, etc.)***
Funding (grants, better tax collections,	Workforce (lack of qualified applicants,
etc.)****	turnover, etc.)****
Outreach*****	Politics****
Harm reduction program	Anti-vaccine people
Community involvement	Lack of a County Auditor accounting system
	to access real-time data
Extensive network of stakeholders/Get	Lack of consistent, effective marketing to all
Healthy Meigs!	County residents
Diversity of board members	Less communication outlets or availability
Contact with State Health Department	Greater disconnect with State agencies
Need of HD due to pandemic	Larger, well-known facilities such as Holzer*
Need of HD due to many environmental	Maintaining Accreditation
health factors	
Need of HD due to services provided	Lack of engagement and buy-in of
	community (leaders and residents)*
New employees with fresh perspectives	WIC participants (lack of adherence to
	schedule, lack of transportation)
Develop health care services or other	Biological warfare
programs to benefit community and	
generate revenue	
A larger building to facilitate more programs	

#### **Strategic Priorities**

### Priority Area #1: Funding

Priority Area Vision: Within the next five years we will have:

- ✓ Identified sustainable resources of unrestricted funding
- ✓ Strengthened our current sources of funding
- ✓ Implemented a strategy to secure funding from those sources

### <u>Objective A</u>- As funding allows, hire/contract with a grant writer/executive director for Get Healthy Meigs! by December 31, 2024

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Action Item #1	Explore funding options
Person/ People Responsible	Courtney Midkiff
	Leanne Cunningham
Due Date	December 31, 2023
Performance Indicator	Grant Writer/Executive Director hired for
	Get Healthy Meigs!

## <u>**Objective B.**</u>-Document and implement our set of local advocacy activities, to address both elected officials and other key stakeholders by ????

dualess both elected officials and other key stakeholders by	
Action Item #1	Develop a consistent message for
	presentations to county leaders
Person/ People Responsible	Courtney Midkiff and Marc Barr
Due Date	December 31, 2023
Performance Indicator	unknown

### Priority Area #2-Facility

Focus Area Vision: Within the next five years, the department's facility will sufficiently accommodate employees, storage, public access, and the growth of programs.

<u>Objective A</u>-Create and communicate the department's case for support for additional space and/or a new building by December 31, 2024

and an experience and a great framework and	
Action Item #1	Attempt to obtain entire 2 <sup>nd</sup> floor of
	current building
Person/ People Responsible	Courtney Midkiff
Due Date	December 31, 2023
Performance Indicator	Email communications; Minutes from
	County Commissioner meetings

Action Item #2	Maintain consistent communication with
	the county commissioners
Person/ People Responsible	Courtney Midkiff
Due Date	December 31, 2023
Performance Indicator	Email communications; Minutes from
	County Commissioner meetings

### Priority Area #3-Workforce

Focus Area Vision: Within the next five years we will have created a recruitment, development, and retention model that:

- ✓ Supports the delivery of all required initiatives of the department
- ✓ Addresses employee wellness
- ✓ Provides for a dedicated HR staff position
- ✓ Reinforces succession planning for key leaders

#### Objective A-Hire a Human Resources specialist by December 31, 2025

<u></u>	
Action Item #1	Additional information concerning the
	Ohio Department of Health Workforce
	grant is needed to formulate an action
	item
Person/ People Responsible	
Due Date	
Performance Indicator	

### <u>Objective B</u>-Establish a "Wellness Committee" comprised mainly of staff persons by December 31, 2023

Action Item #1	Review and revise current Wellness Policy
Person/ People Responsible	Juli Simpson
	Lindsey Jeffers
	Michelle Willard
Due Date	December 31, 2023
Performance Indicator	Completed Wellness Policy

Action Item #2	Gather input from staff via survey
Person/ People Responsible	Juli Simpson
	Lindsey Jeffers
Due Date	December 31, 2023
Performance Indicator	Previously used survey will be located or a
	new one will be compiled

Action Item #3	Develop list of wellness priorities to
	address
Person/ People Responsible	Juli Simpson
	Lindsey Jeffers
Due Date	December 31, 2023
Performance Indicator	List of wellness priorities presented to
	Senior Management

Action Item #4	Develop list of possible interventions
Person/ People Responsible	Juli Simpson
	Lindsey Jeffers
Due Date	December 31, 2023
Performance Indicator	List of wellness interventions

## Objective C-Create emergency succession plans for the Administrator and Supervisors by December 31, 2024

Action Item #1	Review information that Perry County and	
	Intern Mayre Newcomb provided	
Person/ People Responsible	Accreditation Team	
Due Date	December 31, 2023	
Performance Indicator	Perry County and Mayre's information	
	located, reviewed, and an outline or draft	
	copy made for each Senior Management	
	and Supervisor position	

Action Item #2	Each staff member (where applicable) will	
	create a printed list of reports, etc. that	
	they are responsible for	
Person/ People Responsible	Accreditation Team	
Due Date	December 31, 2023	
Performance Indicator	Report lists will be presented to	
	Supervisors	

### Priority Area #4-Programs

Focus Area Vision: Within the next five years we will have:

- ✓ Developed and delivered harm reduction programs to include suicide, overdose, child fatality programs
- ✓ Increased our ability to provide more individualized care by hiring a full-time nurse practitioner and a community health worker

<u>Objective A</u>-Explore implementation of a comprehensive harm reduction program by December 31, 2026

program by 2 cccmber c2, 2c2c		
Action Item #1	More information is needed to create	
	action steps for this goal	
Person/ People Responsible		
Due Date		
Performance Indicator		

### Priority Area #5-Community

Focus Area Vision: Within the next five years, we will strengthen and develop programs and sustainable resources to improve our community engagement. This means that:

- ✓ We are reaching more individuals and families with our initiatives
- ✓ The community we serve knows who we are and how we can support them
- ✓ The community trusts the MCHD as a source of knowledge and best practices in public health
- ✓ We have effectively implemented our Communications Policy
- ✓ We have strengthened the effectiveness of Get Healthy Meigs!

### <u>**Objective A**</u>-Review, update, and continue to implement the current Communications Policy by December 31, 2023

	,	
Action Item #1	Review and revise the current	
	Communications Policy	
Person/ People Responsible	Courtney Midkiff	
	Leanne Cunningham	
	Michelle Willard	
	Shawn Cunningham	
	Steve Swatzel	
Due Date	December 31, 2023	
Performance Indicator	Completed Communications Policy	

Action Item #2	Attend township trustee meetings
Person/ People Responsible	Courtney Midkiff and Marc Barr
Due Date	December 31, 2023
Performance Indicator	Meeting minutes or other evidence of
	having attended the meetings

### **Appendix A: SWOT Analysis**



#### Meigs County Health Department

2022 Organizational Checkup Completed by 19 Staff and Board Members

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Varia Dela ana Dala		, specifically, are up to three of you	
Your Primary Role	strengths? (	List them in order with the biggest s	strength first.)
Response	1	2	3
Board Member	Concern for others	Knowledge of current staff	Ability to work together
Board Member	General passion for community health care	Health care experience	Business experience
Board Member	Public Outreach	Teamwork	Collaboration
Staff Member	LOW TURNOVER	INDEPENDENT THINKERS	ACHEVIED HIGHER EDUCATION
Staff Member	Knowledgeable of Community Needs	Commitment to the Community	Longevity of Management Team
Staff Member	Hard working staff	Team mindset	Small staff, so feel that we have each other's back
Staff Member	staff works well together	care about the community	knowledgeable about resources
Staff Member	Relationship between Sr. Management and supervisors	Funding	Board of Health doesn't micromanage, but is supportive
Staff Member	Accessibility to public	Understand needs of community from public health standpoint	Family friendly
Staff Member	Working with the public		
Staff Member	Dedication	Respectfulness	Patience
Staff Member	Great Customer Service	Educated Staff	Strong Leadership
Staff Member	Community outreach	Diversity in experiences among staff	User friendly website and social media
Staff Member	Employees work together well	Excellent customer service	Adaptability
Staff Member	Team players	Flexibility	Compassion
Staff Member	Supportive	Team oriented	Flexible
Staff Member	Expertise-about half the staff has been here long-term (5 or more years)	Staff Resilience-we faced a rough road dealing with COVID activities and trying to get accredited.	
Staff Member	Team Work		
Staff Member	Unity	organization	cooperation

Your Primary Role		nat, specifically, are up to three or ? (List them in order with the bio	
Response	1	2	3
Board Member	Frequent turnover of staff	Confusion from pandemic	Paucity of resources/time
		Ever changing guidance	
Board Member	New employees	policies	County support
Board Member	Employee Retention	Cross Training	Project Accountability
Board Member	BROAD LEARNING CURVE FOR	SHORTER WORK WEEK (35	DISORGANIZED IN SOME
Staff Member	THE PROFESSION	HOURS)	AREAS
Staff Member	Limited Staff	Space to Expand	Getting Information out to the Public
Staff Member	High staff turnover in certain positions	Continuity of work and projects due to the staff turnover	Fragmented info re: fiscal processes across programs
Staff Member	old building	pay	location/parking
Staff Member	Being confined to a County Commissioner owned building - space and upkeep	Exhausted staff	Performance management/Quality Improvement
Staff Member	Advertising services	Getting quality information to community	Require additional space to grow
Staff Member			
Staff Member	some are too strong willed	self criticism	some take things too personally
Staff Member	High Employee Turnover in Certain Positions		
Staff Member	Lack of funding	Resources available are stretched thin	Competition between local clinic/hospitals
Staff Member	High turnover rate	Limited growth due to space	
Staff Member	Lack of Knowledge	Motivation	
Staff Member	Limited staff		
Staff Member	Staff turnover (revolving door for some positions) and/or inability to find qualified people to fill positions	Space that limits ability to expand services and/or staff and building is not well-maintained	Time-many staff are doing multiple jobs, which are made more difficult by extra things like Accreditation requirements and COVID activities.
Staff Member	Time		
Staff Member			
July Melline			

Your Primary Role		at, specifically, are up to three of yo List them in order with the biggest o	
Response	1	2	3
Board Member	Diversity of board members	Extensive network of stakeholders	Contact with State Health Dept
Board Member	Community involvement	Grant opportunities	
Board Member	Funding Procurement	Becoming Imbedded in the community	
Staff Member	BETTER TAX COLLECTIONS INCREASE REVENUE	VISIBILITY IN COMMUNITY EVENTS	BETTER COMMUNITATION OPPORTUNITIES WITH CITIZENS
Staff Member	Harm Reduction Program	Getting out into the Public More	Increased Partnerships due to CHA, CHIP, etc.
Staff Member	partnerships with other stakeholders/agencies	increase in funding from various funding sources	don't know
Staff Member	need of HD due to pandemic	need of HD due to many environmental health factors	need of HD due to services provided
Staff Member	Funding	Established partnerships	Public Health Accreditation
Staff Member	Recieving grants	Outreach via community events	Creating collaborations
Staff Member			
Staff Member	availability of online trainings	new employees with fresh perspectives	
Staff Member	Trainings		
Staff Member	Develop health care programs that drive community outreach	Find specific services that will that benefit the community and can generate revenue	Find more training opportunities for staff
Staff Member			
Staff Member	A larger building to facilitate more programs to the public		
Staff Member	Outreach to local hospitals/ clinics	Word of mouth increases participation	
Staff Member	Workforce Development	Get Healthy Meigs!	Potential grant funding
Staff Member	Working with external agencies		
Staff Member			

Your Primary Role		ifically, are up to three of your depar hem in order, with the biggest threa	
Response	1	2	3
Board Member	Decreased "respect" for public health during the pandemic	Poor communication with local officials	Ongoing COVID
Board Member	Non supported levies	Grant reductions	
Board Member	Labor Market	Availability of Trained Indivuals	
Staff Member	GOVERNMENT DISTRUST	LESS COMMUNICATION OUTLETS OR AVAILBILITY	GREATER DISCONNECT WITH STATE AGENCIES
Staff Member	Lack of Buy-In from the Community	Funding Concerns	Difficult to find staff
Staff Member	insecurity of public funding	covid pandemic	workforce decline
Staff Member	anti vaccine people	some political choices	funding
Staff Member	Lack of a County Auditor accounting system that all County departments can access data in real time	General public's perception of public health and government in general following COVID	Lack of consistent, effective marketing to all County residents
Staff Member	Politics (HB 463)	Politics (SB22)	Politics (SB311)
Staff Member			
Staff Member	Pandemic threats	Biological warfare	
Staff Member	Organizations competing with MCHD for grant funded positions		
Staff Member	Public perception of HD after COVID	Other clinics close by	Loss of staff
Staff Member			
Staff Member	Larger, well known facilities ie. Holzer		
Staff Member	Participant lack of adherence to schedules	Participant lack of consistent transportation	
Staff Member	Maintaining Accreditation	Funding-every 5 years the levy has to be voted on, also House Bill 463 seeks to move responsibility of health department's from the District Advisory Council to the County Commissioners, which would limit necessary support from the different communities.	Engagement and buy-in of Community (people and leaders) is lacking
Staff Member	Not enough community support		
Staff Member			

Your Primary Role		ould your department's top three pr m in order, with the biggest priority f	
Response	1	2	3
Board Member	Public safety of all	Fiscal responsibility	Ease of access to services provided
Board Member	Community awareness	Bigger location	Employee retention
Board Member	Hire Qualified Individuals	Properly Train	Employee Retention.
Staff Member	CREATE BETTER VISIBILITY OF SERVICES TO ALL PUBLIC	SEEK ADDITIONAL GRANT FUNDING AND OPPORTUNITIES	ADDITIONAL SERVICES AND EMPLOYEES
Staff Member	Outreach to Public	Harm Reduction	Doing what is needed to maintain Accreditation
Staff Member			
Staff Member	providing vaccinations	providing environmental health services	providing information to the community about what we do and what is available
Staff Member	Employee Wellness - Mental health especially	Community engagement - finding ways to offer services 'out of the box'	Obtaining a facility in which to relocate department operations
Staff Member	Serve the needs of public	Outreach via community events	Creating collaborations
Staff Member			
Staff Member	Avoid med errors with all of covid vaccines	Stay on top of the next emerging threat i.e. monkeypox	
Staff Member	Set Goals & Meet Them		
Staff Member	Outreach	Grant funding	Trainings
Staff Member	Growth (New building, etc)		
Staff Member	Create access to a healthy community for all	Have a larger building with better access to the public	Provide knowledge to public about what we do
Staff Member	Keep participant level up	Staff retention	
Staff Member	New facilities-the current building is County Commissioner owned; is not well maintained; and lacks necessary space for expanded staffing, services, and storage.	Begin Reaccreditation activities and document collection	Succession planning
Staff Member	Team work		
Staff Member	Getting community more involved with our services		

Your Primary Role	(Optional) IDEAS and COMMENTS - Provide any additional ideas and comments that will aid in the overall assessment.
Response	Open-Ended Response
Board Member	Meigs county health department has a good base of employees that are extremely knowledgeable and have a passion for their jobs and community
Board Member	We have a great group of individuals, but the focus needs to be on improvement.
Staff Member	SALARY COMPARISIONS AND BENEFITS WITH OTHER HEALTH DEPARTMENTS OR SIMILAR ORGANIZATIONS