



Public Health
Prevent. Promote. Protect.

**Winnebago County
Health Department**

Winnebago County Health Department

2020-2023 STRATEGIC PLAN

Winnebago County Health Department
112 OTTER AVENUE, OSHKOSH, WI, 54901



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Winnebago County Health Department Strategic Plan 2020-2023

Contents

Introduction	2
Public Health Core Functions and Essential Services	3
Overview of WCHD	5
WCHD Mission, Vision and Values	9
Mission:	10
Vision:	10
Values:	10
Environmental Scan: Public Health Industry Research Findings	11
SWOT Analysis: Affinity Exercise	12
Community Partnership Assessment	13
Finalizing the Strategic Planning Process	14
Strategic Priorities and Key Focus Areas Overview	14
Strategic Priority 1	15
Strategic Priority 2:	15
Strategic Priority 3	15
Strategic Priority 4	15
Strategic Planning Implementation	17
PHAB and Strategic Planning	17
Strategic Priorities and Focus Areas	18
Appendix A: Principles of the Ethical Practice of Public Health	30
Appendix B: Environmental Scan (SWOT Questions)	31
Appendix C: SWOT Summary of Responses	32
Appendix D: Responses from Board of Health Members	37
Appendix E: Community Partnership Survey Questions and Responses	38



Winnebago County Health Department Strategic Plan 2020-2023

Introduction

What an organization does, how it does its work, and how an organization knows if they are on track with the work, requires planning. The process of planning strategically is an effort that produces fundamental decisions and actions that shape and guide who we are as a department, who we serve, what we do, and why we do it. It articulates not just where WCHD is going and the action needed to make progress, but also how WCHD will know if it is successful.

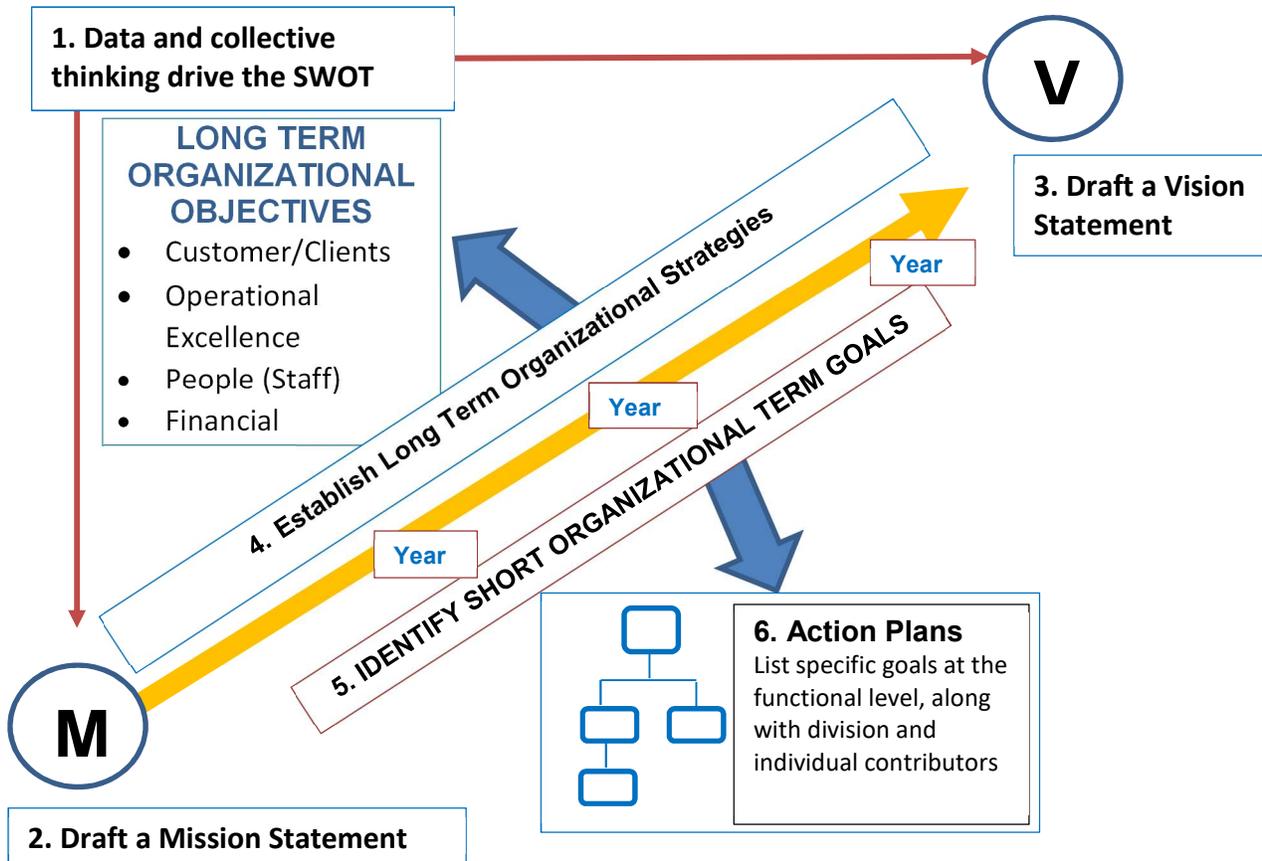
Strategic planning processes often involve:

- conducting an environmental scan (SWOT, SOAR, etc.)
- drafting mission and vision statements
- drafting or updating organizational value statements
- setting priorities and establishing agreement around intended key performance indicators
- focusing energy and resources and ensuring staff and other stakeholders are working toward common goals
- monitoring, assessing and adjusting the department's direction in response to a changing environment

As the strategic planning process is taking place it provides an opportunity to identify areas in which internal operations can be strengthened to set realistic priorities, agreeing on indicators and common goals.

A pictorial description of the strategic planning process is shown on the next page.

Information from an internal SWOT (strengths, weaknesses, opportunities and threats) analysis was used in conjunction with other information to draft the organization's Mission and Vision Statement. Achieving the department's vision can be done by establishing both long term and short-term goals which are then used to inform individual division work plans.



Public Health Core Functions and Essential Services

There are three core public health functions [and ten essential public health services](#):

Assessment:

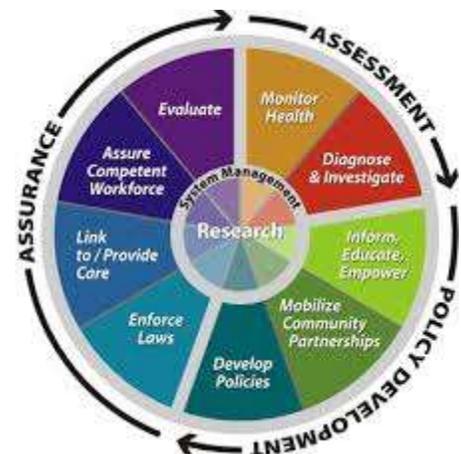
The systematic collection, analysis, and sharing of data and information about health conditions, risks, and resources in a community. Assessments identify trends in illness, injury and death and factors which may cause these events.

- Monitor health status to identify and solve community health problems
- Diagnose and investigate health problems and health hazards in the community

Policy Development:

Information from assessments can be used to develop or advocate for local health policies.

- Inform, educate and empower people about health issues
- Mobilize community partnerships and action to identify and solve health problems
- Develop policies and plans that support individual and community health efforts



Assurance:

Assurance in public health refers to making needed health services available while also maintaining the capacity of public health agencies and workforce to manage day-to-day operations and provide the core public health functions in the most qualified manner.

- vi. Enforce laws and regulations that protect health and ensure safety
- vii. Link people to needed personal health services and assure the provision of health care otherwise unavailable
- viii. Assure competent public health workforce
- ix. Evaluate effectiveness, accessibility and quality of personal and population-based health services.

The tenth essential public health function and service includes participation in research for new insights and innovate solutions to health problems. For more information visit [Defining Public Health Practice: 25 Years of the 10 Essential Public Health Services.](#)

Complementing the public health core functions and essential services, are the public health Foundational Capabilities (FC) and Foundational Areas (FA). The FCs are “cross cutting skills that need to be present in health departments everywhere for the health system to work anywhere.” The FA’s are “substantive areas of expertise of program-specific activities essential for all health departments to protect the health of communities”. [[RESOLVE. Defining and Constituting Foundational Capabilities and Areas](#)]



Overview of WCHD

The Winnebago County Health Department is considered a [Level III public health agency](#), the highest level recognized by [state statute](#). An overview of a Level III public health agency's requirements defined by State Administrative Code 140 includes:

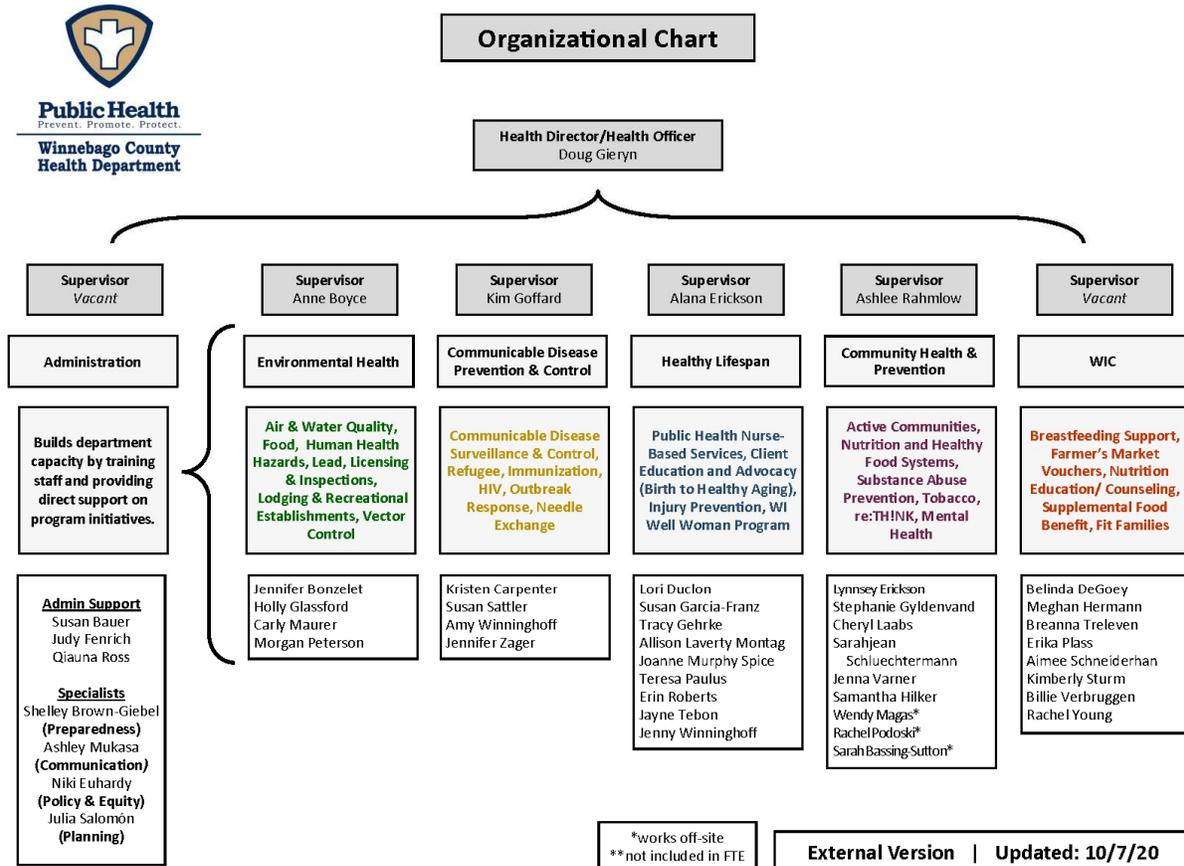
1. Provide leadership for developing, addressing and providing the following public health services to the community:
 - a. Surveillance and investigation
 - b. Communicable disease control
 - c. Other disease prevention
 - d. Emergency preparedness and response
 - e. Health promotion
 - f. Human health hazard control
 - g. Policy and planning
 - h. Leadership and organizational competencies
 - i. Public health nursing services

2. Provide and submit the following reports:
 - a. Annual Report
 - b. Public health data

[Level III requirement for Public Health Departments \(Summary\)](#)

WCHD Organizational Structure and Areas

The Department is [organized into six divisions](#), each with its unique mission statement reflecting their varied responsibilities. It is headed by the Director with support from the Leadership team.



Overview of 2020-2023 strategic planning process

Learnings from past processes

Planning for the 2020-2023 Winnebago County Health Department Strategic Plan began with a review of the 2016-2020 strategic plan and meeting with the previous strategic planning team. General suggestions for the 2020-2023 strategic plan included:

- Establishing and communicating more measurable outcomes
- More staff involvement in the initial process and incorporation of their voice in the strategic planning process and plan
 - Providing more transparency about the strategic planning process to staff
- Revisiting our mission and vision statements to include equity
- Making the strategic plan a dynamic plan that will not just “live on a shelf”
- Inclusion of community voice

Strategic Planning 2020 Timeline

- **January 2019**
 - Facilitation of environmental scan (Strengths, Weaknesses, Opportunities and Threats [SWOT]) discussion with Board of Health
- **January - February 2019**
 - Facilitation of SWOT discussion with WCHD Leadership team (Supervisors and Admin Specialists)
- **March - April 2019**
 - Facilitation of SWOT discussion with staff
 - Google SWOT document developed and sent out
- **April 2019**
 - Continuation of response collection
 - Preparation for All Staff meeting to engage staff in affinity exercise (categorizing and prioritizing) SWOT responses
- **May 2019**
 - Facilitation of All Staff meeting in which affinity exercise was conducted (categorization and prioritization of SWOT responses)
- **July – October 2019**
 - Mission Statement development with each division
 - Organization of SWOT responses from affinity exercise
 - Start write up of draft Strategic Plan
 - Organizing final phase of strategic planning process with WCHD Leadership team in which results from environmental scan and other materials collected through the process were reviewed and used to develop a draft strategic plan
- **November – December 2019**
 - Facilitate final phase of strategic planning process with WCHD Leadership team (3 half days)
 - Develop priorities, focus areas, goals, activities and measurables
- **January 2020**
 - Draft priorities, focus areas, goals, activities and measurables completed
- **February 2020**
 - Sharing of priorities, focus areas, goals, activities and measurables with Leadership team for final approval
 - Write up of draft plan and share plan to Leadership for comments
 - Update Board of Health on strategic planning process and timeline
- **March 2020**
 - Present Strategic Plan to WCHD Director and Leadership team for final comment
 - Preparation for roll out of mission and vision to staff
 - Update draft plan and send out electronically to BOH for comments
- **April 2020**
 - Presentation of Strategic Plan to Board of Health
 - Presentation of Strategic Plan to all staff
- **Ongoing**

- Implementation of plan including monitoring progress toward achievement of goals

Division Mission Statement Development

Staff and supervisors participated in a [divisional](#) level mission statement development exercise. This is the first time divisions within the department worked together to create their division's mission statement. Creating a division level mission statement promotes cohesion and direction and it provides a communication tool for members of each division.

Administration:

Mission Statement: Supports staff to build division capacity and serves the community.

This division provides leadership in the following areas:

- accounting, budgeting, grant billing and tracking
- communication (internal and external including social media)
- development of organizational plans such as the community health assessment, community health improvement plan, strategic plan, etc.
- equity and policy
- planning and evaluation, programmatic oversight
- preparedness
- staffing support

Communicable Disease:

Mission Statement: Conducts disease surveillance and control, in collaboration with the State of Wisconsin and community partners, through prevention, education and research to improve the health of the residents of Winnebago County.

Provides information and services, monitoring and surveillance in the following areas:

- communicable disease prevention and control
- immunizations
- tuberculosis treatment such as direct observation therapy (DOT)
- HIV partner referral/counseling and testing
- needle exchange service
- health screenings for newly arrived refugees

Community Health & Prevention:

Mission Statement:

Contributes to improvement in health outcomes by working on community level change through fostering partnerships, changing the environment, and influencing policy to shift cultural norms and attitudes about unhealthy behaviors and making the healthy choice the easy choice. Focus areas include:

- mental health
- physical activity and nutrition
- substance use

- tobacco
- transportation
- social connectedness
- and other social/ecological determinants of health

Environmental Health:

Mission Statement: Prevents diseases and reduces environmental risks through education and regulation, for the well-being of all persons in Winnebago County.

Programs include:

- Sanitarian: inspection, consultation, code enforcement and licensure of food service establishments, campground, temporary restaurants, swimming pools, hotel/motels, bed and breakfasts, animal grooming establishments, manufactured home parks, transient non-community wells and tattoo parlors.
- Environmental Health: inspections, consultation and education to prevent and minimize adverse environmental exposures from air, water, housing, occupation, toxic materials, vector control, human health hazards and nuisances.

Healthy Lifespan:

Mission Statement: Empowers Winnebago County residents to lead healthier lives by promoting health, preventing harm, and protecting quality of life through the provision of direct services, programs, population assessment and community engagement.

Programs include:

- Family and Child Health including prenatal care coordination, breastfeeding support, lead poisoning prevention and more.
- Promoting Healthy Aging including falls prevention, direct health nursing services, and more.
- Access to Health Care including breast and cervical cancer screenings through the Wisconsin Well Woman program, health services and resource for jail population and more.

Women, Infants, and Children (WIC):

Mission Statement: Safeguards the health of low to moderate income women, infants and children up to age 5 who are at nutrition risk, by providing nutritious foods to supplement diets, information on healthy eating and referrals to health care.

Focus areas include:

- food benefits redeemed at local grocery stores
- nutrition and breastfeeding information
- referral to community resources

WCHD Mission, Vision and Values

During the final discussion of the strategic planning process, (in which the WCHD Leadership team reviewed all materials collected), each division's mission statement, the department's previous mission statement and other documents related to public health agencies serving as a Chief Strategist and equity were reviewed to assist in the development of the organization's

mission and vision statements. Responses from the environmental scan were also reviewed. The WCHD Leadership team worked toward establishing a mission and vision statement that reflects its function and forward-thinking spirit during the strategic planning process.

Mission: WCHD protects and promotes health through services, partnerships, and equitable practices and policies so all can live their best life.

Vision: Healthy people building thriving communities.

Values:

The Winnebago County Health Department developed an additional value that incorporates the principles of equity for the department. WCHD operates under these five current values:

Accountability

- We are committed to providing services that benefit our community.
- We strive to be transparent, timely in our response, flexible and engage in continuous quality improvement to maintain the public's trust.
- We are committed to the science of public health; using evidence-based practices, using statistical and scientific data, and other methods and resources available to guide our policies and actions.
- We are responsible for effectively and efficiently managing public funds.

Building and Sustaining a Responsive Public Health Workforce

- We value training and educational opportunities for our staff to further our knowledge of public health interventions and research.
- We promote public health workforce development including mentoring, professional development and peer to peer collaboration.
- We recognize the rapid pace of change and strive to be prepared for changes in the social, political and biological environments.

Collaboration and Partnership

- We value the diversity and unique contributions of our employees and partners.
- We recognize that positive relationships foster innovative solutions and strengthen our capacity to accomplish our mission and vision.
- We strive to engage those impacted by community health issues in decision-making and implementation processes.
- We believe that by working together we can achieve more and be more effective.

Equity

- We recognize that health starts where we live, learn, work and play and should not be determined by social identity or socially determined group status such as, but not limited

to, ability, gender identity, geography, income, or race. Expanded description of [equity value statement](#).

Ethical Practice of Public Health

- We adhere to the Public Health Leadership Society's [Principles of the Ethical Practice of Public Health](#) which highlights the interdependence of people. Accordingly, the code of ethics states public health not only seeks to assure the health of whole communities but also recognizes that the health of individuals is tied to their life in the community.

Environmental Scan: Public Health Industry Research Findings

The [Public Health Workforce Interests and Need Survey](#) is a report published by the de Beaumont Foundation and the Association of State and Territorial Health Officials (ASTHO) which summarizes the results from the Public Health Workforce Interests and Needs Survey (PH WINS) administered in 2017. The survey is one way to track trends in public health workforce in an effort to monitor the recruitment and retention of public health professionals. The key findings include:

- Despite high levels of job satisfaction, a large proportion of workers are considering leaving their organization in the next year. Top reasons include dissatisfaction with pay, lack of opportunity for advancement, and workplace environment.
- The majority of workers are satisfied with their jobs, but are less satisfied with their organizations and even less so with their pay.
- Workers indicate a high level of engagement, but do not believe that creativity and innovation are rewarded or that communication between senior leadership and staff is good.
- The top areas of training needs are budgeting and financial management, systems and strategic thinking, change management, and developing a vision for a healthy community.
- Demographically, the workforce is not representative of the nation in terms of gender or age.

WCHD used these public health workforce findings during the strategic planning process and reviewed them when identifying staff development as a focus area in the strategic plan. In the future, these will be useful to keep in mind as the department drafts budgets, work priorities, policies, and regulations to help address the needs of the communities WCHD serves.

Environmental Scan: SWOT Analysis- Idea Generation Phase

The basic purpose of conducting an environmental scan is to gather information about events and issues and their relationships within an organization's internal and external environments. There are many ways to conduct an environmental scan including a SWOT (strengths, weaknesses, opportunities and threats) analysis.

WCHD engaged in a SWOT analysis in which information was obtained from members of the Board of Health, the WCHD Leadership team and staff. Information gathering took place in early to mid-2019.

Board of Health and leadership team members participated in a facilitated SWOT discussion during scheduled meeting times. To provide staff with as many opportunities as possible to participate in this phase, a variety of methods were used to encourage staff engagement over the course of seven weeks. Responses were gathered from:

- in person facilitated SWOT sessions
- during pre-established “open house” style meetings with the planner
- through an online survey
- through written comments on poster paper made available throughout the offices

Responses from a brief evaluation of the SWOT process, indicated the various times and different modes for staff to contribute to the SWOT analysis provided ample opportunity for them to participate.

The different groups (BOH, leadership and staff) were asked the same core set of questions. Board of Health members and WCHD Leadership team members were asked additional questions. The full set of questions asked during the SWOT can be found in Appendix B.

SWOT Analysis: Affinity Exercise

Overview

Following the collection of responses from members of the Board of Health, leadership and staff, all responses were combined into one large document. Duplicate entries were merged. The process of categorizing responses into themes, and prioritizing them, was developed to include staff. Approximately six hours of preparation went into planning and facilitating the Categorization and Prioritization Exercise (affinity exercise) with all staff.

First step: Training Additional Group Facilitators

Six staff were identified as potential small-group facilitators. These volunteers represented different divisions within WCHD. The volunteers were trained by walking them through the exercise in its entirety using the Strengths category of the SWOT, as this one had the least number of duplicated responses and could be run through fairly quickly and thoroughly.

Each individual unduplicated Strength response had been previously transcribed onto a post it. These were placed on a larger piece of poster paper. The volunteers then read through all of these responses and place similar or related responses together in groups. Next, they assigned a word or phrase that described the theme of the grouped responses. After the themes were identified the volunteers “voted” on their top three to five responses using colored sticky dots. Themes that had the most votes would then be listed and brought forth for discussion during the priority development phase.

Second Step: All Staff Involvement

Before the All Staff meeting, activity organizers met to deliberately assign staff into six groups. Each group would work on one element of the SWOT analysis (strengths, weaknesses, opportunities and threats) or on one of the two additional elements (What is the role of Public Health? and What priorities should WCHD work on?). Each group was comprised of five to six staff members and one volunteer facilitator.

The day of the activity, staff found their place at their assigned table/team and had 25 minutes to read through each of the post-its (with the respective SWOT responses written on them), and work together to cluster related comments. They were then tasked to identify a theme that described the cluster of comments.

Each small group shared with the rest of the groups what themes they developed for clusters of related comments. After the sharing time, each small group was given sticky dots they used to “vote” on what they thought were the most impactful/important responses, under each theme, to the department as a whole. This “Rating Phase” entailed each group rotating through every group to place the dots on comments, returning to their own group to do the same.

The number of dots each person received for each SWOT Analysis question was $\frac{1}{3}$ the number of comments in each group, plus one more dot, as recommended in the Journey of Facilitation Training. For example, if one group was working with 25 responses, each individual would receive 9 dots ($25 \div 3 \approx 8$; $+1 = 9$). As each SWOT Analysis question had a different number of comments, a different number of dots were provided at each SWOT Analysis question/station. Once all staff had voted on responses using the provided dots, the number of dots per response was counted. This dot count led to the identification of the top themes containing the most response votes. The small groups reviewed and discussed the top rated-comments under each SWOT Analysis question as a debrief to the process.

SWOT findings (responses and number of votes) can be found in appendix C and D.

Community Partnership Assessment

WCHD is committed to working with and listening to the communities we serve. As such it was natural for the department to reach out to key community partners as a means to assess the quality of the department’s partnership. The questions asked were the following:

1. Do you currently partner with Winnebago County Health Department in any capacity?
2. If you would like to explore a potential partnership, please provide your contact information so we can reach out to you. [asked if response to first question was no].
3. How would you rate Winnebago County Health Department’s current partnership with your organization? [asked if response to first question was yes].
4. Is there anything we can do to make it easier to work with us?
5. What other organizations or community partners could Winnebago County Health Department engage with to improve community health in Winnebago County?

6. What can Winnebago County Health Department do better to engage with populations most impacted by poor health outcomes?

In the Fall of 2019, a total of 110 electronic surveys were sent out to elected officials (24) and key community partners such as community organizations, institutions and coalitions (86). The survey asked respondents to rate the department's partnership and to provide comments about such partnerships. (Appendix E). A total of 61 responses were received (55% response rate). Overall the survey revealed that WCHD is considered an important partner within the community. It also highlighted areas in which WCHD could improve such as:

- having WCHD leaders and staff be representative of the communities served;
- improved communication and engagement with certain groups about what WCHD does;
- identifying different ways to engage in outreach and provide services to populations most affected.

Finalizing the Strategic Planning Process

Members of the WCHD Leadership team met for three half day meetings to review the review findings from the SWOT analysis and the community partnership survey, develop mission, vision and value statements and determine strategic priorities and measurables. The meetings were co-facilitated by the Public Health Planner and the Public Health Preparedness Specialist.

Leadership Team/Advisory members

Anne Boyce, Environmental Health Division Supervisor
Anna Carpenter, Public Health Preparedness Specialist
Alana Erickson, Healthy Lifespan Division Supervisor
Niki Euhardy, Policy and Equity Coordinator
Doug Gieryn, Health Officer
Kim Goffard, Communicable Disease Division Supervisor
Julia Salomon, Public Health Planner
Penny Schry, Accounting Associate
Barb Sheldon, WIC Division Supervisor
Julie Wisneski, Community Health and Prevention Supervisor

Strategic Priorities and Key Focus Areas: Overview

During establishment of priorities, the facilitators brought forth four strategic priorities based on general themes from the SWOT, the community partnership survey and other information collected. The broad proposed strategic priorities were:

- Team Members (Staff)
- Community and Clients (Customers)
- Organizational Excellence (Operational excellence)
- Sustainability (Financial)

After discussion and reflection, and to add more specificity, a variety of focus areas were identified for each corresponding strategic priority. The focus areas reflect internal growth as an organization, trends in public health, and findings from the environmental scan. Goals were developed for each focus area and activities and measurables were established for each goal.

The discussions wrapped with the following priorities and focus areas identified:

Strategic Priority 1: We will invest in our team members

- *Focus Area 1.1:* Staff Development
- *Focus Area 1.2:* Workplace Culture
- *Focus Area 1.3:* Employee Health, Safety and Wellness

Strategic Priority 2: We will invest in our community, clients and partners

- *Focus Area 2.1:* External Communication
- *Focus Area 2.2:* Community Health Priorities
- *Focus Area 2.3:* Emergency Preparedness
- *Focus Area 2.4:* Engagement and Inclusion
- *Focus Area 2.5:* Access to Healthcare

Strategic Priority 3: We will invest in achieving organizational excellence

- *Focus Area 3.1:* Accountability
- *Focus Area 3.2:* Policy and Procedure Development
- *Focus Area 3.3:* A Leader in Public Health

Strategic Priority 4: We will invest in the sustainability of our organization and work

- *Focus Area 4.1:* Fiscal Sustainability
- *Focus Area 4.2:* Workforce Continuity

A detailed listing of all strategic priorities, focus areas, goals, activities and measurables can be found in the [Priority Worksheet](#) in appendix F.

Linkages to other organizational plans and accreditation standards and measures

The department's strategic plan links to other organizational plans such as the Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP), the Organizational Branding Plan (OBP), the Workforce Development Plan (WFD), the Quality Improvement and Performance Management Plan (QIPM). Review [Crosswalk of Plan Requirements and Public Health Accreditation Board Standards and Measures](#) for full description of how each plan relates to other plans and meets the [Public Health Accreditation Board \(PHAB\) requirements](#). PHAB standards and measures are shown in parentheses.

CHA/CHIP (PHAB 5.3.2.g)

The development of the 2020-2023 strategic plan comes at the heels of the completion of the Community Health Assessment (CHA) which presents community health data and highlights issues of concern. The 2021-2026 CHIP was to be developed in 2020 based on findings from the CHA; however it was delayed due to the COVID-19 pandemic. WCHD's Strategic Plan was able to include three community health priorities based on the CHA and the environmental scan as well as focus areas related to communication and community engagement.

The CHA revealed there is work to be done in several health-related topics including mental health, substance use and issues related to early childhood development. WCHD, through its work and engagement with the community is aware that there is community momentum and readiness in Winnebago County, related those three topics. As such, the strategic planning includes specifically mentions these topics as areas in which WCHD will address in their work with the community. Social connectedness, a topic that was mentioned by many in the environmental scan was identified as one of many strategies to address the aforementioned community health topics.

Organizational Branding (OBP) (5.3.2.d)

WCHD welcomed a new Communication Specialist who is working on updating the department's OBP. The strategic plan includes communication priorities further distinguished into external communication goals and internal communication goals.

Workforce Development (5.3.2.d)

Staff development is an important focus area in the strategic plan. It was highlighted in the plan as it was a common mention in the environmental scan, is one of the ten essential functions of public health and an issue [affecting the public health industry as a whole](#). Staff development and advancement opportunities is crucial especially as public health is experiencing changes in such as decline in state and federal funding and increased demand for technology in the workplace, among others.

Quality Improvement and Performance Management (5.3.2.g & 5.3.2.c)

Building a quality improvement culture and establishing a system by which progress can be tracked are goals highlighted in the Strategic Plan under strategic priority 3, focus area 1 which represents accountability. Currently WCHD is working toward creating topic specific dashboards through a pilot program with the Wisconsin Department of Health of Health Services.

Efforts to build a quality improvement culture also ties in with WCHD's commitment to staff development. There is a concerted effort to train staff in Results Based Accountability, the framework used by the performance management system used in the pilot program at WCHD.

All of these plans are complementary, building capacity and playing to the strengths of our organization and community.

Strategic Planning Implementation

The development of a written strategic plan should not be considered the end of the strategic process; on the contrary it marks the beginning of operationalizing the plan and monitoring progress of the priorities and goals delineated in the plan. Strategic planning success is characterized by a few factors:

Sharing and Communication of the Plan

The Strategic Plan will be shared with Board of Health members and WCHD staff through presentations at meetings, email and communication tools such as Learning to Link (L2L), WCHD's internal communication tool. Supervisors will use the Strategic Plan to align their division action plans and as a tool that will provide focus to division work.

Mission, Vision and Value Statements

WCHD's new mission and vision statements as well as the updated department's value statements will be shared with Board of Health members and staff through presentations and communicated via email and other communication tools. Mission and Vision statements will be included in template agendas, written materials to the community, WCHD's website and other social media accounts.

Priorities, Focus Areas, Goals, Activities and Measurables

You can't manage what you don't measure. In order to monitor progress of the goals delineated in the Strategic Plan, each division will develop dashboards through a performance management system WCHD is piloting. A dashboard for the Strategic Plan will be developed and piloted.

PHAB and Strategic Planning

The Public Health Accreditation Board (PHAB) Standards and Measures is a comprehensive list of requirements for local health departments seeking accreditation. WCHD is working toward becoming accreditation ready by 2023 as indicated in the Strategic Plan. Standard 5.3 in the PHAB Standards and Measures states the requirement to "Develop and implement a health department organizational strategic plan." It further describes that such strategic plan should include the following:

- Mission, vision and values for the health department
- The health department's strategic priorities
- Goals and objectives with measurable and time framed targets
- Must consider capacity for and enhancement of information management, workforce development, communication (including branding) and financial sustainability
- Identification of external trends, events or other factors that may impact community health or the health department
- Analysis of the department's strengths and challenges

- Linkages with the health improvement plan and the health department's quality improvement plan.

WCHD's 2020 strategic plan meets all of these PHAB measures.

Strategic Priorities and Focus Areas

Over the past several years our organization has experienced many changes such as changes in funding, in the workforce and more. One thing has not changed, however, and that is the dedication of our staff to their work and the commitment to serve the community we serve.

How we serve our community and community needs requires a well thought out plan allowing us to be strategic to continue work that has proven to positively impact the health of our community and a plan that allows the opportunity to explore innovative ways to address emerging public health issues. To ensure what and how we do our work is efficient and effective, this plan presents clear goals, activities and measurables for ease of monitoring and ability to make corrective actions when needed.

The following section lists the strategic priorities identified through the strategic planning process along with main focus areas, goals, activities and measurables.

If you have questions or feedback please contact Julia E. Salomon at jsalomon@co.winnebago.wi.us or Doug Gieryn at dgieryn@co.winnebago.wi.us

STRATEGIC PRIORITY #1: WE WILL INVEST IN OUR TEAM MEMBERS

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p data-bbox="121 492 300 570">1.1 Staff Development</p> 	<p data-bbox="436 651 867 813">1.1.A Establish a staff development plan that includes equitable processes and staff advancement opportunities at all levels by end of 2021</p>	<p data-bbox="898 354 1545 410">Conduct a staff competency assessment; analyze and share results with staff.</p>	<p data-bbox="1625 342 1940 399"># and % of staff who completed competency assessment</p>
		<p data-bbox="898 488 1598 610">Create and implement individual professional development plan (IPDP) tool for staff to meet their identified training needs, seek opportunities for advancement and to use during their performance evaluations</p>	<p data-bbox="1625 443 1940 500"># and % of staff with completed IPDP. # and % of staff who communicated their IPDP with their supervisor during performance evaluation</p>
		<p data-bbox="898 675 1591 764">Establish a list of professional development opportunities (PDO) at individual, divisional and departmental levels taking into consideration findings from the staff competency survey</p>	<p data-bbox="1625 675 1808 699">Completion of list</p>
		<p data-bbox="898 789 1583 878">Update all job descriptions to include core public health competencies and credentialing requirements as well as equity language to ensure recruitment of qualified professionals</p>	<p data-bbox="1625 789 1856 846"># and % of updated job descriptions</p>
		<p data-bbox="898 919 1556 976">Enhance organizational leadership and management skills by improving leadership training for Leadership team members.</p>	<p data-bbox="1625 902 1976 992"># and % of leadership team members who have completed at least one leadership training yearly</p>
		<p data-bbox="898 1032 1503 1089">Develop and offer health equity training for all staff and incorporate it into new staff training (onboarding)</p>	<p data-bbox="1625 1016 1955 1040">Health equity training developed</p>
			<p data-bbox="1625 1089 1856 1114"># and % of staff trained</p>

STRATEGIC PRIORITY #1: WE WILL INVEST IN OUR TEAM MEMBERS

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p>1.2 Workplace Culture</p> 	<p>1.2.A WCHD will establish itself as an employer of choice through its equitable practices, and a diverse and well-informed staff that feels, respected, valued and trusted</p>	<p>Support communication related activities</p> <ul style="list-style-type: none"> • Maintain internal communications to enhance staff knowledge of pertinent WCHD and cross divisional information to improve work efficiency. • Expand use of change communication tool (“What’s changing” memo) to communicate to staff when a policy or procedure is changing • Communicate and continue to improve work life balance procedure and offsite work procedure to enhance recruitment and retention of staff; <u>including but not limited to provisions for staff to work remotely.</u> <ul style="list-style-type: none"> ○ Development of a remote work assessment tool 	<p>Assessment of readership of L2L</p> <p>Development of work life balance procedure</p> <p>Development of offsite work procedure</p> <p>% of staff working remotely</p> <p>% of remote staff whose productivity level remains the same or improved</p> <p>% of staff who are aware of work life balance procedure</p>
		<p>Assess staff culture</p> <ul style="list-style-type: none"> • Develop/conduct annual staff culture survey. <ul style="list-style-type: none"> ○ Include strength finder language • Review results and make applicable changes to improve work culture based on survey results. 	<p>Survey development and administration to all staff</p> <p>% of staff reporting positive WCHD work culture from culture survey</p> <p># and % of staff who completed survey</p> <p>Diversity of staff reflective of diversity of community</p>
		<p>Review exit interviews from WCHD to understand what we do well and what we need to improve</p>	<p>Documentation of findings</p>

STRATEGIC PRIORITY #1: WE WILL INVEST IN OUR TEAM MEMBERS

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p>1.3 Workplace Culture (continued)</p>		<p>Support staff strengths</p> <ul style="list-style-type: none"> Continue to expand on “strengths finders” training to highlight strengths and skills of staff Celebrate successes at every all staff meeting <p>Recruitment and Retention</p> <ul style="list-style-type: none"> Continue to improve process to onboard new staff to WCHD Create an onboarding evaluation tool and administer to new staff Establish a mentorship process by which new WCHD staff are paired with a peer for the first year for improved retention of staff 	<p>Inclusion of strengths finder in new staff orientation documents.</p> <p>Inclusion of success celebration on agenda</p> <p>% of evaluation responses indicating new onboarding process is good or very good</p> <p># of staff serving as mentors # of staff being mentored</p>
<p>1.4 Workplace Safety and Wellness</p> 	<p>1.3.A The organization will support WCHD staff to be safe, well, and healthy at work</p>	<p>Safety</p> <ul style="list-style-type: none"> Provide safety training to staff on an annual basis Conduct and share results of a facility assessment that includes workplace safety measures (locks, cameras etc.) Participate in and share information from county safety committee to staff <p>Wellness</p> <ul style="list-style-type: none"> Offer and promote workplace wellness opportunities Health, safety, and wellness trainings/topics are covered at all staff meeting as needed Access to healthy workplace food options – vending machines 	<p>% of staff who participate in safety training annually</p> <p>% of staff safety concerns that are resolved</p> <p># of workplace wellness opportunities offered</p>

STRATEGIC PRIORITY #2: WE WILL INVEST IN CLIENTS/PARTNER/COMMUNITY

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p><i>2.1 Communication</i></p> 	<p>2.1.A WCHD will have an organizational branding and communication plan (OBP) developed by end of 2021</p>	Develop and increase use/awareness of an organizational branding and communication plan (OBP_	<p>OBP plan completed</p> <p>% of staff who are aware of OBP and use branding standards</p>
	<p>2.1.B WCHD will share health department related strategic documents with stakeholders on an annual basis</p>	Create an inventory of external communications (annual and quarterly reports, CHA, CHIP, Strategic Plan etc.)	Inventory created
	<p>2.1.C WCHD will maximize the use of social and other media platforms as a means to disseminate and enhance health department information communication to the public</p>	<p>Divisions will create a document that delineates:</p> <ul style="list-style-type: none"> • their communication needs based on division and programmatic activities • priority (target) population 	% of divisions that have completed their communication needs
		<p>Communications specialist will support the external communications needs for divisions (trainings for staff on techniques and tools)</p>	# and % of staff trained
		<p>Divisions will track communications, activities, achievements to include in the annual report at the end of the year.</p>	Inclusion in annual report

STRATEGIC PRIORITY #2: WE WILL INVEST IN CLIENTS/PARTNER/COMMUNITY

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p><i>2.2 Community Health Priorities</i></p> 	<p>2.2.A WCHD is committed to support work in three major public health areas in conjunction with county and regional partners</p> <ul style="list-style-type: none"> • Mental Health • Substance misuse (including alcohol) • Early childhood development/ACES 	Staff through routine care, programs, and initiatives will incorporate questions about and promote access to healthcare and issues related to social connectedness (and other SDOH) with participants they serve when addressing community health priorities	Development of questions for use with clients and partners serving clients
		Establish or enhance partnerships with healthcare systems for improved health outcomes	partnership evaluation tool to assess quality of partnership
		Support PSE strategies/activities for sustainable outcomes	% of strategies and activities in division action plans that are PSE related
<p><i>2.3 Emergency Preparedness</i></p> 	<p>2.3.A WCHD enhances community preparedness through regional preparedness partnerships</p> <p>2.3.B WCHD will demonstrate an increase of staff resiliency for emergency response by end of 2020</p>	Make personal preparedness materials available to residents through a variety of methodologies and in conjunction with community partners	% of residents who received materials
		<ul style="list-style-type: none"> • Train staff in personal preparedness through • ICS trainings • Staff utilization of an emergency communications plan • Staff preparedness go kit/bags • Preparedness awareness culture/training • Utilization of training tools • Implement preparedness concepts to community partners 	Development of an emergency communications plan
			# and % of staff participating in preparedness exercises, drills, workshops, seminars.
<p><i>2.4 Engagement and Inclusion</i></p>	<p>2.4.A WCHD will lead and support authentic community engagement and action around community health issues</p>	Identify platforms to listen to community voice to increase inclusion of community voice	Relationship mapping
		Develop strategies to minimize barriers to community participation	Strategies developed
		Update community health coalition database to increase efficiency	Updated database
		Evaluate effectiveness of community partnerships	Use validated coalition

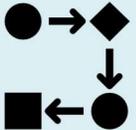
STRATEGIC PRIORITY #2: WE WILL INVEST IN CLIENTS/PARTNER/COMMUNITY

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p><i>2.4 Engagement and Inclusion (continued)</i></p> 	<p>2.4.B WCHD will work to collaboratively further public health initiatives by continuing to serve as a trusted community partner.</p>	<p>Increase community engagement/diversity (SES, race, etc.) at community based meetings</p>	<p>Assessment tools to assess quality of partnerships</p>
		<p>Conduct Community Partnership Survey to assess quality of WCHD/Community partnership</p>	<p>% of good or very good survey responses</p>
<p><i>2.5 Access to Healthcare</i></p> 	<p>2.5.A WCHD focuses on high level public health strategy/practices to ensure availability of healthcare to all Winnebago County residents</p>	<p>Develop a relationship mapping/tracking of WCHD's partners and community served.</p> <ul style="list-style-type: none"> • Develop organizational/community plans framed in public health equity and incorporating community supported strategies 	<p>Completion of relationship mapping.</p>
		<p>Conduct environmental scan/assessment to identify health care services and capacity in service area including free & charitable clinics, FQCHCs, etc.)</p>	<p>Identification of staff who would conduct scan Completion of environmental scan</p>
		<p>Identify and document underserved populations their needs and gaps and barriers to health care services.</p>	<p>Completion of document</p>
		<p>Identify/implement strategies to improve, and remove barriers to, access to health care services.</p>	<p>% of clients who report having fewer barriers to health care access</p>
		<p>Develop assessment tool to monitor if improvements to reducing barriers to health care services have occurred</p>	
		<p>Serve as resource referral through department programs</p>	<p># of health care services referrals</p>
<p>Track/respond to policy impacting healthcare access</p>	<p># of policies impacting health care access</p>		

STRATEGIC PRIORITY #3: WE WILL INVEST IN ORGANIZATIONAL EXCELLENCE

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p><i>3.1 Accountability</i></p> 	3.1.A WCHD will develop an effective performance management (PM) dashboard that includes health equity measures	Establish leadership supported PM team with members who will implement the PM plan in each division	Performance Management team established
		Enhance performance management knowledge and skill set for leadership	# and % of leadership who report increased comfort and skill sets with PM
		Disaggregate division data to determine how disparities are impacting our work	
	3.1.B WCHD will successfully complete 140 review when scheduled by state	Leadership/staff will assist in DHS 140 review process	Completion of 140 review
	3.1.C WCHD will identify and follow industry best practices including evaluation of work and services provided	Staff will utilize foundational public health services framework in action planning	
	3.1.D WCHD will be responsive to community and stakeholder requests for public health information	Respond to external requests for public health information (elected officials, stakeholders, community partners) in a timely manner	% of inquiries responded in a timely manner as defined
	3.1.E WCHD will develop and nurture an effective culture of continuous quality improvement (QI) throughout the department	Establish a leadership supported quality improvement team who will assist in identifying and documenting quality improvement opportunities and implementing quality improvement processes for enhanced organizational effectiveness and efficiency.	QI teams established. These could be stat
		Complete quality improvement plan based on recommendations from QI Council (QI STAT)	QI plan completed

STRATEGIC PRIORITY #3: WE WILL INVEST IN ORGANIZATIONAL EXCELLENCE

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p><i>3.2 Policy and Procedure Development</i></p> 	<p>3.2.A Establish 100% of policies required by PHAB accreditation by 2023</p>	Develop system by which WCHD policies are revised and updated following PHAB guidelines.	Process developed and implemented
		Staff will become knowledgeable about internal policies and procedures	# and % of staff reporting increased knowledge of internal policies/procedures
	<p>3.2.B WCHD will commit to using a Health in All Policies approach to develop, support, and advocate for public health related policies</p>	Staff will learn about and work on policies that promote health as recommended and led by the WCHD policy team	% of HIAP policies adopted in Winnebago County
		Maintain/strengthen existing relationships and build new relationships with decision-makers and municipalities in Winnebago County to provide information and increase awareness of public health impacts of relevant policies	Attendance at public municipal meetings
<p><i>3.3 Leader in Public Health</i></p> 	<p>3.3.A Establish WCHD as a teaching public health agency</p>	<ul style="list-style-type: none"> Developing future public health workforce Serve as a host site for AmeriCorps, AHEC and other internship programs from local higher education institutions	# of members/interns or students placed with WCHD
		% of students who rate their internship/rotation at WCHD as stellar or very good	
	<p>3.2.B WCHD will work toward reaching accreditation readiness by 2023.</p>	Develop an accreditation team representing all divisions to work on and delegate the different standards and measures to the corresponding division, team or staff for completion.	Accreditation team formed
		% of staff trained in accreditation	
<p>3.2.C WCHD staff will be a leader in the region and in the state</p>	Staff will speak/present at state and national conferences	# and % of measures and standards completed	
		# of conferences WCHD staff presents at	
		% of staff involved in regional or statewide initiatives and groups	

STRATEGIC PRIORITY #3: WE WILL INVEST IN ORGANIZATIONAL EXCELLENCE

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p><i>3.3 A Leader in Public Health (continued)</i></p>	<p>3.3.D WCHD will commit to advancing health equity in public health</p>	<p>Serve as a model department, mentor and provide training support for other partner orgs</p>	<p># of partner organizations that received training/support from WCHD</p>
		<p>Develop and administer a health equity assessment to staff.</p>	<p>% of staff who completed survey</p>
		<p>Equity team</p> <ul style="list-style-type: none"> Incorporate health equity into division plans 	<p>% of division action plans that include or are HE framed.</p> <ul style="list-style-type: none"> Community investment Staff per capita in community Action plan that include health equity language

STRATEGIC PRIORITY #4: WE WILL INVEST IN THE SUSTAINABILITY OF OUR WORK AND ORGANIZATION

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p>4.1 Fiscal Sustainability</p> 	<p>4.1.A WCHD will be aware and actively pursue grant funding that aligns and supports WCHD’s strategic plan and other departmental plans (CHA/CHIP, etc.) including opportunities that address health disparities</p>	Develop process by which grant opportunities are communicated/shared to relevant division and staff	Process developed
		Develop grant application criteria by 2021, tool to determine alignment of grant opportunities and assist leadership decide whether to pursue a grant or not.	Grant application criteria is developed
		Apply for grants that support and sustain programs and initiatives at WCHD that align with WCHD’s strategic plan, CHIP and organizational plans.	# of grants written # and % of grants awarded
	<p>4.1.B WCHD will maximize available revenue streams for the departmental services staff are providing in an equitable way that does not pose an undue financial burden on clients</p>	Conduct a review/assessment of department services to identify revenue generated services and other available/potential sources of revenue.	# of reviews completed
		Conduct a cost benefit analysis (evaluation of return on investment) of services WCHD currently provides.	# of services identified with revenue generating opportunities # of cost benefit analysis completed
	<p>4.1.C WCHD will enhance fiscal transparency to staff and community</p>	<p>Offer opportunities for Leadership to understand fiscal operations and budget activities</p> <ul style="list-style-type: none"> Continue to act as fiscal agent for other organizations to support department capacity 	# and % of leadership team members who report an increased understanding of WCHD budget activities and processes.

STRATEGIC PRIORITY #4: WE WILL INVEST IN THE SUSTAINABILITY OF OUR WORK AND ORGANIZATION

FOCUS AREA	GOAL (SMARTIE)	ACTIVITIES	MEASURABLE
<p>4.2 <i>Workforce Continuity</i></p> 	<p>4.2.A WCHD's workforce continuity plan and processes will consider staff capacity and organizational needs and professional development opportunities by end of 2021 [Connection to emergency preparedness and staff development*]</p>	Develop workforce continuity planning tools	Continuity planning tools developed
		Train staff on how to complete and use workforce continuity planning tools	# and % of staff who complete and use workforce continuity tools
		Draft a workforce continuity plan (may be part of workforce development plan)	Workforce continuity plan complete

Appendix

Appendix A: Principles of the Ethical Practice of Public Health

1. Public health should address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.
2. Public health should achieve community health in a way that respects the rights of individuals in the community.
3. Public health policies, programs, and priorities should be developed and evaluated through processes that ensure an opportunity for input from community members.
4. Public health should advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all.
5. Public health should seek the information needed to implement effective policies and programs that protect and promote health.
6. Public health institutions should provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community's consent for their implementation.
7. Public health institutions should act in a timely manner on the information they have within the resources and the mandate given to them by the public.
8. Public health programs and policies should incorporate a variety of approaches that anticipate and respect diverse values, beliefs, and cultures in the community.
9. Public health programs and policies should be implemented in a manner that most enhances the physical and social environment.
10. Public health institutions should protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of the high likelihood of significant harm to the individual or others.
11. Public health institutions should ensure the professional competence of their employees.
12. Public health institutions and their employees should engage in collaborations and affiliations in ways that build the public's trust and the institution's effectiveness.

Appendix B: Environmental Scan (SWOT Questions)

Questions asked of WCHD Board of Health

1. What are some strengths of our organization?
2. What are some things we could do better?
3. What barriers should we be aware of as we accomplish our work?
4. What are some things we should be taking advantage of? (What opportunities should we be aware of?)
5. What do you think are some priorities WCHD should be working on?
6. What do you see is the role of Winnebago County Health Department in the 21st century?
7. What do you see is the role of the Board of Health in WCHD accomplishing its goals/priorities?

Questions asked of Leadership

1. What are some strengths of our organization?
2. What are some things we could do better?
3. What barriers should we be aware of as we accomplish our work?
4. What are some things we should be taking advantage of (opportunities we should be aware of)?
5. What do you think are some priorities WCHD should be working on?
6. What do you see is the role of WCHD (in the 21st century)?
7. What is the role of our board of health in supporting the work we do?
8. What is the role of our community in the work we do?

Questions asked of Staff

1. What are some strengths of our organization?
2. What are some things we could do better?
3. What barriers should we be aware of as we accomplish our work?
4. What are some things we should be taking advantage of (opportunities we should be aware of)?
5. What do you think are some priorities WCHD should be working on?
6. What do you see is the role of WCHD (in the 21st century)?
7. What is the role of our community in the work we do?

Appendix C: SWOT Summary of Responses

The following list consists of themes and responses related to each theme. The numbers in parentheses designates the number of “votes” that particular responses received during the categorization and prioritization process. The responses with the most votes for each SWOT category are listed.

Strengths

Partnerships and Outreach

1. The relationships we have as an organization with various community partners. (29)
2. We engage in work “in the community” not just in the office. (30)

Innovation

1. Our willingness to try new things, our courage to be innovative. (29)

Staff Skill Sets

1. The variety of skill sets, education and depth of knowledge of our staff allow for a variety of perspectives. (37). We have more seasoned staff who know what has worked before and we have younger staff bring new ways of doing things. (37)

Transparency

1. Supervisors that listen and support their staff. We have a Leadership team who really wants to improve the organization and wants to listen to staff. (25)

Weaknesses

Gaps in Communication and Leadership Training

1. Leadership, just because they are leadership, don’t have all the answers all the time. Value input from staff and your long-term employees. (43)
2. We need to develop the leadership skills of leadership. (48)

Accountability

1. We need better role models in the department. Members of leadership should role model what is expected of staff to do. We have processes in place that some members of leadership and staff ignore but are expected to be followed by others. (21)

Professionalism and Work Culture

1. Address less than professional behavior. It is tolerated way too often. (27)
2. How do we improve our workplace culture, make it more positive? (26)

Prioritization and Streamlining Work

1. Minimize duplication of work due to not knowing who is working on what, where the potential common ground for work is. Come together to identify ways we can work smarter together. (40); Internal communication the way it is now, is a barrier. Often one staff does not know who is on 1st, 2nd, or 3rd and you wind up with 3 of each... all getting in each other's way.
2. Focus on fewer priorities vs. taking on so much. Prioritize our work to be more focused. (27)

The next theme was selected by staff as being important and one to consider changing. However, this theme is related to human resources policies which WCHD has little or no control over. It is mentioned in this plan as it has workforce development implications.

Human Resource Policy

1. Allow for more flexibility in work schedules - helps with retention and employee satisfaction/morale/trust. (71). "There is demand without flexibility". Option to work at home sometimes (snow days, etc.) To allow flexibility in work schedule and flexibility in work places and spaces. (29). We are the perfect type of organization to entertain flexibility in work schedules and places. (4)
2. HR policy regarding 0 days of vacation for first year of hire. This is a real burden and a barrier to working here. Can we have a voice in HR policies regarding benefits? (38).

Note: Since the start of 2020 Winnebago County has changed the 0 vacation days for the first year of hire for new employees.

Opportunities

Community Engagement

1. We have an opportunity to not only listen to our community but also value and respect and recognize what they are saying and not have WCHD override or ignore that. (37)
2. To truly partner with lived experience individuals and other organizations in the community to, together, come up with solutions to issues affecting the community. (35)
3. We have the opportunity to improve our departmental relationships with other government agencies and municipalities to understand more of what other community serving organizations do. (28)

Public Health Workforce Utilization

1. To take advantage of the strengths of each staff. Everyone does not have or need to have the same set of skills. (37)

Progressive Staff Development

1. We have an opportunity to work internally, together, and better. We have an opportunity to portray WCHD as a whole department not as silos. (43)

Threats

Internal Perceptions: Communication

1. Internal communication the way it is now, is a barrier. Often one staff does not know who is on 1st, 2nd, or 3rd and you wind up with 3 of each... all getting in each other's way. (24)
2. Staff seem to have distrust of certain aspects of how the organization is run, why certain decisions are made, etc. lots of speculating as to reasons for this. (37)

Internal Perceptions: Change

1. Fear of change is a threat to moving forward; stifles innovation. WCHD is stuck in the mode of "this is how we have always done it, and it's how we will continue to do it." (36)

External Perceptions

1. The community not really understanding what public health does or has the potential of doing. (43)

Funding Restraints

1. The changing demographics of our county which many times leads to increased need for cultural and linguistic competence is real. The barrier is that we don't have robust training in cultural and linguistic competence to address the changing population. (24)

Changing Role of Public Health

1. We are struggling trying to be the "chief strategist" and content expert vs. honoring and listening to the knowledge of the community of what works. The way public health is changing is fast. Hard to change what we do in our daily work to represent the change. (35)

Additional Questions

In addition to questions related to strengths, weaknesses, opportunities and threats, staff, leadership and members of the board of health were asked to comment on some or all of the following questions:

1. What do you see is the role of public health in the 21st century?
2. What priorities should the department be working on?
3. What do you see is the role of the community in helping WCHD accomplish its work?

The top ten responses for each additional question are listed below.

Role of Public Health in the 21st Century

Root Causes and Equity

1. To be better listeners of the community and to learn from them. (48)
2. Identify and address root causes of health inequities, address institutional inequities and be the catalysts of work on social determinants of health. (16)

Public Health Prevention and Protection

1. To be proactive in assessing and identifying issues before they become a public health crisis. (31)
2. To improve or increase the mindset toward prevention among service providers (DHS, healthcare, etc.) in our community to identify root causes and conditions. (30)
3. To both educate the public on how to be healthy but also provide services and functions to keep individuals and the environment they live in safe. (24)
4. To educate and raise the public's awareness about what good health is and how to achieve good health. (18)
5. To tackle larger public health issues such as mental health, outbreaks, etc. (18); to keep the public safe as it relates to health issues and be ready to deal with outbreaks. (17)

Building Bridges and Partnerships

1. To solidify partnerships; to be the liaison between government, public and individuals (31)

Policy, Systems, and Environmental (PSE) Changes

1. To expand PSE work so this kind of work happens across the department. (23)
2. To communicate clearly to others that the public health of today is different from years past. (15)

Work Priorities

Social Needs

1. Social connectedness (40)
2. Housing as a social determinant of health. Affordable and safe urban and rural housing. (37)
3. Addressing safety issues re: trauma, stress, adverse childhood experiences (ACEs), etc. (23)

Direct Services

4. Prevention of illnesses. Work on efforts toward achieving a healthier environment, both physically and non-physical - meaning quality of life and environment. (28)
5. Vaccine Preventable diseases/vaccines including: educating public, lawmakers, etc. about the benefits of vaccines; listen to anti-vaccination folk, understand their perspective; educate them on the benefits; be aware of laws affecting how unvaccinated people in the community can threaten the health of the public. (26)
6. STI's. Explore different ways to reduce STI's. (23)
7. Early childhood and to expand connections and work into 4K-12 schools. (19)

Staff Investment

8. Improve workforce culture and improve staff morale. (31)
9. Build trust internally. (24)
10. Provide staff more opportunities for advancement and utilizing skills we already have. (24)

Role of Community in Assisting WCHD accomplish its work

The community as drivers and doers

1. Our community are the drivers and the sources of data of the work we do. Our community informs our work “they are essentially the boots on the ground; we hear about things from the community first before we know about them from other sources.” The community are the “doers” of the work. “The community is part of the solution.”
2. Drive the work that is done at the health department by identifying and communicating what the issues are in the community

The community as initiators and communicators

1. Our community often gets us to act faster on issues as community raised concerns prompt action. (example: juuling).
2. The community serves as a “reality check” on what the real issue is and what will work to address the issue.
3. For the community to identify issues and solutions to those issues.
4. Community should identify and share resources they have, that supports public health work. For the community to better identify and communicate their needs to us and others.
5. To inform us as to what are the most important health issues.
6. To be responsible for communicating what their needs are so partners can work with them to address their needs.
7. Let us know what issues they think are important and want us to be working on.

The community as partners

1. Our community should integrate and participate more in the work that we do, that ultimately benefits them. (help us help you).
2. For the community to view us a “content experts” and allies and that we can help the community. For the community to realize that public health is part of the community.
3. To trust that PH does have expertise that can help the community.
4. Know that we are a good resource for many things besides what they think of as public health (i.e. just doing immunizations).
5. To work with us to be part of the solution.
6. To be public health’s partner.
7. To work with us on accomplishing our work, including work that relates to PSE and social determinants of health.
8. Partner and work together, rather than us working in our own silos.

Appendix D: Responses from Board of Health Members

The strategic planning process provided an opportunity to ask members of WCHD's Board of Health additional questions not typically included in SWOT analysis.

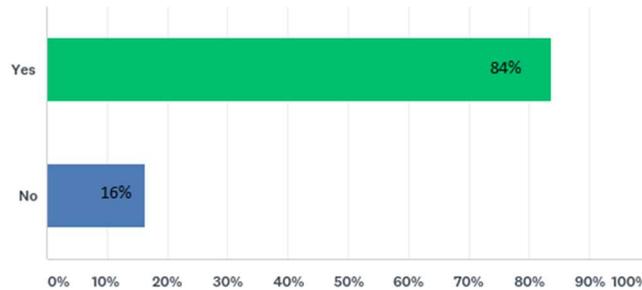
What do you see is the role of the Board of Health in order for WCHD accomplishing its goals or priorities?

- The Board of Health should be utilized in way that it can use each one's individual skills and talents to achieve the goals/priorities of Winnebago County Health Department. The Board of Health should have an active and engaging role with the Health Department in order to achieve goals.
- The Board of Health should be fully informed of the goals/priorities of the Health Department as well the activities/programs of the department. While department staff can help facilitate this, individual board members should initiate this activity of learning about the Health Department.
- I believe the Board's role is to learn as much about what the department does, try to improve the mission of the Health Department utilizing each one's own experience, knowledge and skills.
- To be supportive when it needs to be, to give advice to correct what it's not doing right.
- To be a liaison when called on between the public and the Health Department.
- There is clearly a County Board accountability/interface element to the BOH. This includes budget oversight.
- We should contribute to the development of the strategic plan.
- I assume we have a role in the evaluation of the director and when appropriate, selection of a successor.
- I hope we can provide a buffer from external criticism that might accompany innovation or other strong action. I would hope we can support the department in being bold and enabled to take calculated risks, when doing such might lead to a quantum improvement in the health of the community.
- We should stay out of operational details.

Appendix E: Community Partnership Survey Questions and Responses

The electronic community partnership survey combined close ended and open-ended questions. 110 surveys were sent out and 61 completed responses were received (RR:55%)

1. Do you currently partner with Winnebago County Health Department in any capacity?



2. If you would like to explore a potential partnership, please provide your contact information so we can reach out to you.

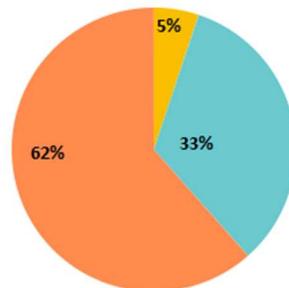
Three organizations included their names and contact information

- i. Rural Health Initiative
- ii. NAMI Fox Valley, Inc.
- iii. Day by Day Warming Shelter

3. Is there anything else you would like to share with us?

- i. None of the three from question 2 added anything

4. How would you rate WCHD's current partnership with your organization?



Legend for Question 4:
■ Not a good community partner (Green)
■ Partnership needs improvement (Blue)
■ Fair (Yellow)
■ Good community partner (Cyan)
■ Excellent community partner (Orange)

5. Is there anything we can do to make it easier to work with us?

39 respondents answered this question. Responses were categorized for improved organization.

Communication

- More ongoing communication about projects or initiatives so there is not a silo - especially between work in Appleton/Neenah/Menasha vs. Oshkosh.
- The staff at Winnebago County Health department does a great job of communicating with us and will give us a call if there is an opportunity to partner with us.
- A second fax number perhaps? Sometimes difficult to fax items to Winn CO DOH
- With your large staff, sometimes it is difficult to know to whom specific topics and questions should be addressed. Helping us understand your org chart and a basic "who does what" would be helpful.
- Better communication.
- Not that I can think of. I highly regard the leadership of your staff/team in partnership with the work we do!

Partnerships

- We could not say anything negative about our partnership with Winnebago County Health Department. They are a true asset to this community and we deeply value their commitment to the community.
- The folks I've been working directly with (Stephanie G., Alana E, and Lynnsey E.) have been easy and great to work with.
- It has been a great partnership.
- Always willing to get involved, be candid, share resources, etc. enjoy the relationship
- It would be useful to hear how you want to partner with various groups that don't fall neatly into your CHIP.
- I'm very satisfied with the multiple ways we interact with the Health Dept.
- No, the health department is already accessible and proactive on many fronts.
- Nothing comes to mind. In the past, you have been very responsive and supportive.
- So far, it's been very easy to find the right people from the WCHD to partner with on specific programs or projects.

Outreach

- Do more outreach on routine, annual basis to not for profit service organizations.
- We would love for your community mental health team to be able to have monthly meetings w/our high school team for our most severe and chronic cases who are working or could be working w/county services. We LOVE our partnership with our county partners in the elementary and middle schools. We would also invite having a county mental health therapist at our high school to see our students already in services so they could miss less

school and it could remove barriers for transportation. We also would invite our Crisis Intervention partner to visit with our school counselor and school social worker a couple times a year. We love all of you!!!!

Approaches of WCHD's work

- No, staff are always amazing and great systems-thinkers!
- Staff are committed to a community health model and try to identify the right partners and work in collaboration with them. They have access to and provide good information and resources that help get the job done.

Other

- We need to improve the parking situation at the County building on N. Commercial St in Neenah.
- Do miss having "our own" health department here in Neenah.

6. What other organizations or community partners could Winnebago County Health Department engage with to improve community health in Winnebago County?

- I think the health department already partners with a lot of organizations including highway, parks and rec, planning, non-profits, business, etc. The only one that I can think of is working with Land Information Officer (LIO) to do more GIS analysis.
- City of Menasha Health Dept.
- Fit Oshkosh
- Grassroots groups that represent community members impacted by inequity.
- University of Wisconsin-Extension
- Oshkosh Police
- Fit Oshkosh, Inc., Because Race Matters
- Hospitals if the hospitals have the capacity to engage. Also, get OASD more engaged also with Fox Valley Technical College and University of Wisconsin-Oshkosh nursing and fitness departments.
- I think you already work with all of these? ThedaCare Community Health Action Team (CHAT), NEW Mental Health Connection, POINT, Weight of the Fox Valley, First Five Fox Valley, ReThink Health (rethinkhealth.org)
- Our public schools are fortunate to have your ear and services. Not sure who else to mention.
- Overall, from the work I do, I think WCHD is proactive in seeking out partners.
- Fox Valley Memory Project, Menasha WI
- Nutrition programs outreach, exercise outreach. YMCA.

7. What can Winnebago County Health Department do better to engage with populations most impacted by poor health outcomes?

- Engage partnership with UW Oshkosh Head Start to look at early social emotional screening in low SES early childhood.
- Tacos and transportation, meet people where they are, develop a community engagement strategy with ways that the health department will engage the community.
- Hire more People of Color in positions of leadership.
- Awareness of available programs, being readily available and an approachable entity to work with.
- Empower them to get involved in decision making in meaningful ways.
- Behavioral is somewhat closed to collaborations.
- Prioritize relationship building with these populations.
- Always engage lived experience.
- More significant comprehension of case management of vulnerable and high utilization people.
- Go to grassroots groups' events, identify specific ways you can support other groups' work; build concrete incentives for folks to be engaged, build capacity and take leadership in your work.
- Keep on trying to modify their mindset. Give them alternative means for helping themselves.
- Hold 'clinics' for health services during non-business hours or offer traveling 'clinics' for those with barriers to travel. Utilize the language line to serve non-English populations.
- More remote access to those areas.
- I know you are not a health care provider, but it would be great to go into these areas to provide general wellness checks- especially for children and elderly.
- Focus group conversations and discussions.
- Increase staff representation from the communities you want to serve. Use participatory priority setting, work upstream; include folks much earlier in initiatives so that there is time to do this effectively.
- Go to them rather than expect these populations to come to the health dept.
- Ask them how they'd like to be engaged. Involve them in co-design of programs.
- Educational options for youth regarding the dangers of vaping.
- Work more with the Parks system.
- Great question. How do we reach those that need our services the most?
- Mental health screenings and trainings for doctors/nurses. Partner w/groups to reduce mental health stigma and increase help-seeking behavior. Partner w/groups to provide parent education.

- Continue to talk about the health behaviors that have the biggest impact on health.
- Seek ways to meet people where they are at (e.g. not doing traditional public input meetings, but going out into the community to seek input); establish relationships with groups and individuals from underserved populations.
- Perhaps train staff as instructors for Adult Mental Health First Aid.
- I think you have by expanding the workforce present in the northern half of the County
- Ask THEM - not healthy people. Survey those people that you are wondering how to engage. What do THEY want?

8. Is there anything else you would like to share with us?

- I get a little concerned that WCHD. takes the lead on some initiatives when there are others in a better position to do so. Someone once said “more would get done if we didn't care who got the credit.” Sometimes I feel the county health dept. leadership is more concerned about getting the credit. I will say, the staff I have worked with do a wonderful job.
- Debunk quack and ineffective/unproven health trends.
- WCHD has been a valuable partner in the work we do--we have learned a lot about how to better engage with the public and have learned to take a health lens into consideration in the work we do.
- Love-love-love our valuable collaborations and the positive leadership you provide!
- Overall, I believe you are doing good work, thank you for what you do.
- Thank you for the commitment and effort to make our community healthier.
- You're awesome. We appreciate all you do.
- I have found the employees of Public Health who have worked with me on the Winnebago County Drug and Alcohol Coalition to be smart, dedicated, and fun to be around. It has been a pleasure.
- You are doing a good job with helping the community in the areas that count most.
- I am always impressed with your work and look forward to continued work together.
- I enjoy interacting with the help department employees and programs.
- I appreciate all of the collaboration and the relationship Oshkosh Medical Center has with the Winnebago County DOH.
- The health department has been a great partner to work with and we appreciate all that you do.
- I appreciate how visionary Doug Gieryn and the department are in finding ways to create private/public partnership.