Dear Board of Health and TCHD staff:

The vision of Tri-County Health Department (TCHD) is optimal health across the lifespan for the populations we serve. Our mission is to promote, protect and improve the lifelong health of individuals and communities in Adams, Arapahoe, and Douglas Counties through the effective use of data, evidence-based prevention strategies, leadership, advocacy, partnerships, and the promotion of health equity. This Strategic Plan has been developed to ensure we are better able to achieve our vision and mission.

Strategic planning is a process for defining and determining an organization’s roles, priorities, and direction. A strategic plan sets forth what an organization plans to achieve, how it will achieve it and how it will know if it has achieved it. The strategic plan provides a guide for making decisions about allocating resources and taking action to pursue strategies and priorities. A health department’s strategic plan focuses on the entire health department (Public Health Accreditation Board Standards and Measures).

Our Strategic Plan serves as a tool to help the department promote health in Adams, Arapahoe, and Douglas Counties by setting the foundation to drive organizational improvement. This strategic planning document serves as a road-map for TCHD for the next six years, and is supplemented by the Community Health Assessment, the Public Health Improvement Plan, and the Public Health Accreditation Board’s Standards and Measures version 1.5 for public health accreditation.

Priority selection was based on the principle that the Strategic Plan should support TCHD in continuing its longstanding trajectory of excellence by combining continued high performance in current programs that support core public health functions with efforts to address new strategic priorities relevant to the changing landscape of public health. The four Priority Areas of focus are:

1. Employee Retention and Development
2. Excellence in Business Practices
3. Strengthen Organizational Culture
4. Partner for Healthy Communities

We are excited about the potential of this Strategic Plan to guide our leadership, bring together and advance our talented workforce, and better align Tri-County with the efforts of a growing array of key community partners.

Sincerely,

John M. Douglas, Jr., MD
Executive Director
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Executive Summary

Tri-County Health Department initiated planning for a new, six-year Strategic Plan in January 2019. TCHD staff in coordination with the TCHD Board of Health (BOH) and partners combined efforts to create the plan. The Strategic Plan is the culmination of seven months of activities to determine where TCHD will focus its attention over the next six years to reinforce its mission and advance the agency vision. This work builds off of our previous TCHD Strategic Plan, our 2018 Community Health Assessment, and our 2019-2024 Public Health Improvement Plan.

Vision: Optimal health across the lifespan for the populations we serve.

Mission: Promote, protect and improve the lifelong health of individuals and communities in Adams, Arapahoe and Douglas Counties through the effective use of data, evidence-based prevention strategies, leadership, advocacy, and partnerships, and the promotion of health equity.

The Strategic Plan process was informed by TCHD staff surveys, staff focus groups, leadership retreats, Board of Health retreat, summaries of previous internal and external reports and assessments, and key informant interviews with external partners. The combination of these data and discussions led to the selection of four Priority Areas: Employee Retention and Development, Excellence in Business Practices, Strengthen Organizational Culture, and Partner for Healthy Communities. The below goals were identified within each priority area:

Priority Area 1: Employee Retention and Development
Goal A - Address competitive pay and benefits
Goal B - Promote professional and leadership development
Goal C - Assess workload and balance across agency

Priority Area 2: Excellence in Business Practices
Goal A - Enhance technology and information systems
Goal B - Standardize and enforce policies and procedures
Goal C - Cultivate a culture of change management and quality improvement

Priority Area 3: Strengthen Organizational Culture
Goal A - Improve trust and transparency
Goal B - Improve staff collaboration and internal communication

Priority Area 4: Partner for Healthy Communities
Goal A - Increase policy and advocacy work
Goal B - Prioritize health equity and meaningful community engagement

The 2019-2024 Strategic Plan has great potential to strengthen TCHD as an organization and to enhance its impact in our communities. Maximizing the effect of the Plan will require careful attention to implementation, resource allocation, monitoring, and evaluation by TCHD leadership and staff over the next six years.
Tri-County Health Department History, Governance and Background

Tri-County Health Department (TCHD) serves over 1.5 million people in Adams, Arapahoe and Douglas Counties, and offers over 60 programs and services from 11 offices in this 3,000-square-mile area. Programs and services are diverse and range from birth certificates, immunizations, and health care referrals to restaurant inspections and infectious disease investigations. The agency’s jurisdiction includes 26 municipalities and three unincorporated counties, 15 school districts with more than 360 public schools, 12 acute care hospitals, three Federally Qualified Health Centers with multiple facilities, three community mental health service providers, and one Regional Accountable Entity (Colorado Access). TCHD also provides limited nutrition, nursing, disease control and emergency preparedness and response services to Elbert County under contract with the Colorado Department of Public Health and Environment (CDPHE).

TCHD currently provides a full range of traditional public health services as well as a variety of innovative services to the diverse communities it serves. Public health efforts target those preventable conditions yielding the greatest public health benefits. Much of the work of public health agencies is population-based—that is, it focuses on improving the health of the entire community.

TCHD is governed by a Board of Health consisting of three members from each of the three counties the agency serves; each member is appointed by his/her County Commissioners. The key functions of the BOH include the following:

- Makes the final decision on policies concerning personnel, budget, and external communications
- Provides guidance and support on agency strategic planning, general policies for enforcing public health laws, orders, rules and regulations
- Serves in an advisory capacity to the public health director on all matters pertaining to public health
- Approves the Department budget and programs

In 2008, the Colorado Public Health Act specifically designated public health functions for health departments in Colorado, and subsequent resolutions from each of our three Boards of County Commissioners designated TCHD as their local public health agency (LPHA) and re-authorized the Department as it is today. More recently, in April 2019, the Colorado State Board of Health passed a new rule and updated framework for Core Public Health Services. This rule requires each LPHA to deliver or assure that core public health services are provided to the community, and it also requires LPHAs to complete a Public Health Improvement Planning process every five years. This rule contains some key definitions that guide TCHD activities.

- Core Public Health definition - BOH Rule: “… shall include but need not be limited to, the assessment of health status and health risks, the development of policies to protect and promote health, and the assurance of provision of the essential public health services.”
  - 4. Partnerships
  - 5. Organizational Competencies
  - 6. Emergency Preparedness and Support
  - 7. Health Equity and Social Determinants of Health
B. Foundational Services
   1. Communicable Disease Prevention, Investigation and Control
   2. Environmental Public Health
   3. Maternal, Child, Adolescent and Family Health
   4. Chronic Disease, Injury Prevention and Behavioral Health Promotion
   5. Access to and Linkage with Health Care

Strategic Planning Process

Overview

In January 2019, TCHD staff, in coordination with the TCHD BOH, initiated a strategic planning process. TCHD initiated the process for several reasons: to align the organization around a shared vision of a local public health agency in rapidly changing local, state, and national environments; to align TCHD staff, leadership, and BOH efforts around priorities and strategies to accomplish that vision; and, to align the organization with Public Health Accreditation Board re-accreditation efforts. The Plan is intended to help TCHD heighten its excellence in carrying out core public health functions and as well as emerging health priorities over the next six years.

In addition to the Colorado Board of Health Rules, the Community Health Assessment, and the Public Health Improvement Plan, there are a number of additional factors that influence the plans and activities of local health agencies in Colorado. They include statutory mandates, Colorado Health and Environmental Assessment, other Local Public Health Agency plans, US Centers for Disease Control and Prevention (CDC) Winnable Battles, CDPHE Health Improvement Priorities, Public Health Accreditation Board accreditation requirements, and state and federal funding organizations’ guidance and regulations.

Identification of External Factors that May Impact Community Health

External trends, events, and other factors impacting the health of our communities and the work of our department was extensively addressed through our recent 2018 Community Health Assessment (CHA) which detailed issues of importance for our communities, ranging from key social determinants of health to specific areas of health outcomes. This external assessment in turn guided the development of our new 2019-2024 Public Health Improvement Plan (PHIP) which focuses on four Priority Areas: Access to Mental and Physical Health Care Services, Mental Health, Health and Food, and Health and Housing. It was our intent to design a Strategic Plan that would consider these external factors and synergize with our PHIP.

Process

A strategic planning team from the Planning and Information Management (PIM) Division was selected to guide the TCHD planning process. The planning team summarized previous internal and external reports and assessments, conducted staff focus groups, surveyed staff, and assisted in the facilitation of internal Board of Health and TCHD Leadership retreats. A facilitator was also hired to conduct external Key Informant Interviews and facilitate internal Board of Health and TCHD Leadership retreats.
Summary of reports and assessments (January 2019)

An analysis of 15 internal and external contemporary reports and assessments was completed in January of 2019. These reports and assessments included partner and staff input from a variety of sources over the past five years.

Partner Input
- Regional Health Connector Alignment Assessment (2016)
- Local Government Work Group Qualitative Research Results (2017)
- Strategic Plans from Partnering LPHA’s (2017-2019)
- TCHD Tobacco-Focused Community Profiles (2019)

Staff Input
- TCHD Workforce Development Plan (2016)
- Prior Strategic Plan performance reports to Board of Health (2018)
- Internal Communications Research (2018)
- Public Health Workforce Interests and Needs Survey (PH WINS) (2018)
- All Staff Meeting feedback on organizational strengths and weaknesses (2018)
- TCHD Performance Management Key Performance Indicators (2018)
- WIC Annual evaluation (2018)
- TCHD Health Equity Strategic Plan (2018-2020)

Identified Themes:
- Communication
- Community Engagement
- Employee Satisfaction
- Health Equity
- Informatics
- Partnerships
- Quality Improvement
- Workforce satisfaction

Staff Focus Groups

To gain more real-time staff input for the TCHD 2019-2024 Strategic Plan, the Office of Human Resources generated a list of all current employees employed at least six months. Forty-five staff members were randomly selected to attend one of three focus groups in early February. Forty-three (96%) staff responded to the invitation and participated. Each focus group was led by a member of the PIM planning team and another staff member acted as scribe. Participants were also given a sheet of
paper to record anonymous comments which they turned in at the end. Each focus group lasted an hour and a half.

Focus group questions were:

1. What needs to be in place at TCHD so you can do the best job you can do?
   a. If these things exist, are there barriers to getting what you need?
   b. Of these things, what are the most critical that you do not currently have?

2. The Community Health Assessment identified the top health needs of our communities as: mental health, social connection, economic security, housing, food insecurity, and access to physical and mental health care services.
   a. How does your work contribute to meeting these community needs?
   b. How well is the agency positioned to meet the needs of our community members?

3. People, places, and things are always changing. What changes do you anticipate happening that TCHD should be aware of and plan for?

One PIM team member analyzed the focus group data and identified common themes across the three focus group and two PIM staff members coded the responses according to these themes.

Identified Themes:

- Staff Training and Education
- Resources
- Technology
- Structure
- Communication
- Pay and Benefits
- Policy and Practice
- Creativity and Innovation
- Planning
- Authority/Decision-Making
- Customer Service
- Fairness
- Safety

Work Group Focus Groups

As an additional input for the new TCHD Strategic Plan, five focus groups were held with existing work groups within TCHD that meet regularly, deal with cross cutting issues, and are currently active. These work groups were the Public Health Improvement Plan Coordination Team, the Work Force Development work group, the Informatics Governance Group, the Health Equity work group, and the Local Government work group. A total of 75 staff were represented by these groups.
The questions asked were:

1. How well is the agency positioned to address the needs and goals identified by [this] work group? What are the barriers? What needs to be in place?

2. The Community Health Assessment identified the top needs of our communities as: mental health, social connection, economic security, housing, food insecurity, and access to physical and mental health care services. How do you see the work of [this workgroup] connecting to these areas?

The following categories were identified as common themes and then used to identify issues from each work group.

- Staff Training and Education
- Resources
- Technology
- Structure
- Communication
- Pay and Benefits
- Policy and Practice
- Creativity and Innovation
- Planning
- Authority/Decision-Making

All-Staff Surveys

To capture a broader range of staff input, in February of 2019, all staff members of TCHD were requested to participate in an electronic survey (Appendix B) developed to capture agency feedback on current TCHD values in their work unit as well as across the agency, identifying areas for agency improvement, and prioritizing agency areas of improvement. Responses were received from 214 (54%) of the approximately 400 full- and part-time staff of TCHD. This information was summarized and shared with the Board of Health and TCHD leadership teams in the development of the priority areas and goals. The graphs below depict the results of the staff prioritization survey.
Figure 1. Percent of staff who feel these values are practiced often or always, 2019 Staff Survey, n=214

- Respect: 67%
- Integrity: 62%
- Courage: 44%
- Excellence: 58%
- Leadership: 41%
- Collaboration: 45%
- Stewardship: 52%
- Innovation: 36%

*The weighted average is based on the importance ranking (1-13) assigned to each item by participants with 13 being the highest importance.

Figure 2. Weighted average ranking of 13 areas for improvement, 2019 Staff Survey, n=214

1. Compensation (pay, benefits, budget for training)
2. Trust and transparency from managers and executives
3. Up-to-date technology and information systems
4. Career ladders and opportunity for advancement
5. Finding ways of working across divisions -- break down silos
6. Standard policies and procedures that everyone follows
7. Office building quality (safe, modern, adequate space)
8. Aligning work and resources to accomplish our goals
9. Opportunities for staff to give input into agency decisions
10. Internal communication flow across the agency
11. Professional development and training opportunities
12. Room for innovation and creativity
13. More time to plan and look ahead

- 8.52
- 6.39
- 5.81
- 7.22
- 10.25
- 6.23
- 4.34
- 6.6
- 6.42
- 7
- 7.97
- 8.7
- 8.7

*The weighted average is based on the importance ranking (1-13) assigned to each item by participants with 13 being the highest importance.
External Key Informant Interviews

TCHD contracted with the Trebuchet Group to conduct key informant interviews in January and February of 2019. Eighteen interviews were conducted with key partners from various community sectors using a key informant interview guide developed by Tri-County (Appendix C). The themes of the interviews were the following:

- Public Health Issues and Trends
- Perceptions of Tri-County Health Department
- Communication
- Role of Public Health Strategist
- Partnering in Social Determinants of Health
- Health Equity

A report was prepared and presented in March 2019 summarizing the key themes from the interviews under each of these headers. The report provided highlights from each of the 18 individual interviews. Those highlights include:

**Greatest Public Health Issues Facing Our Communities**

- Behavioral Health
- Social Determinants of Health/Health Inequity
- Environmental Health
- [Childhood] Obesity
- Immunization Gaps
Role of a Cutting-Edge Public Health Department
- Community Convenor
- Public Policy
- Data and Analytics
- Public Awareness
- Social Determinants of health

Strengths of TCHD/What is TCHD known for
- Partnering/Connecting
- Core Public Health Services
- Strong Staff
- Leader in Colorado
- Respected, Credibility, Expertise
- Data Sharing and Analytics

Opportunities for Improvement
- More advocacy
- More partnering with other sectors
- Push further into social determinants of health
- More intentional sharing of information
- More flexible provision of service
- Determine role in provision of services
- Modify processes (e.g., restaurant inspections)
- Be mindful of differences among counties

Desired Support from Utilizing Public Health Strategist
- More data sharing
- Neutral convening is key role
- TCHD has been successful at this
- Use [this role] to engage policymakers and drive decisions

Barriers to Working Together to Address Social Determinants of Health Now
- Funding
- Turf issues, silos, human nature
- Really big, complicated issues; overwhelming
- Lack of understanding; inter-relationships

Infrastructure Needs for Working Together on Social Determinants of Health
- Leadership structure
- Shared data (Big Data) and analytics
- Clarity on shared outcomes

Resources and Skills Needed for Working Together on Social Determinants of Health
- Shared understanding of issues
- Systems thinking on interdependence
• Communication skills
• Cross-sectoral relationships

Health Equity
• Interviewees had a generally strong understanding of health equity
• High priority of equity and justice in interviewee’s organization
• Clarifying the differences between Equity and Equality
• Some disagreement over whether healthcare should be considered a right

TCHD Leadership Retreats

TCHD staff, in coordination with and facilitated by the above listed contractor, conducted TCHD leadership retreats in March and April of 2019 to consider, rank, and select strategic priorities. The leadership retreat included the TCHD Executive Management Team and managerial staff from across the agency.

Input previously gathered for the Strategic Plan were shared prior to the first retreat in March, with a summary overview of those inputs provided at the retreat. Staff were divided into tables of 6-8 participants to complete an activity that identified what strategies were on target, what was missing, and what was unclear. During the table activity discussion participants were tasked with categorizing the priorities into three categories: Yes/Agree, No/Disagree, and Caution/Question/Clarification Needed. Once each table came to a consensus, a larger plenary discussion was facilitated. Each priority area was discussed again with tables voting Yes/Agree, No/Disagree, and Caution/Question/Clarification Needed. Priority wording and language was revised during the meeting, as needed.

The contractor and the TCHD planning team used the notes and feedback from the retreat to further refine the Strategic Priorities and Goals. The information cultivated from the initial TCHD leadership retreat was used to inform the planning of the Board of Health strategic planning retreat.

The second TCHD leadership retreat utilized the previous inputs as well as the input from the Board of Health retreat to determine how TCHD would address the strategies that had been identified. A small table exercise was used to capture how to prioritize the strategies, to brainstorm activities under prioritized strategies, and how to structure the work of the Strategic Plan going forward. Tables identified the 2-3 most strategic concepts. Potential activities were brainstormed and strategic concepts identified. Staff also discussed if there was an existing individual or group within the agency that could be identified to oversee the work. This process was repeated for each of the four priority areas. The summarized discussions were then shared in the larger plenary setting. The notes and feedback were shared and the TCHD planning team synthesized the information into a final recommendation that was shared with the TCHD Executive Management Team.

Board of Health Retreat

Tri-County Health Department’s Board of Health (BOH) met on March 26, 2019 together with the Executive Management Team (EMT) to provide input on strategic priorities and work toward consensus on a framework for the 2019-24 Strategic Plan.
The BOH had consensus on the proposed framework provided for the Plan, including the recommendation of having four internal Priority Areas of focus for the Strategic Plan complementing the four external areas of emphasis in the PHIP.

The BOH also provided input on Goals within each of the Priority Areas, and had general agreement on them, with follow-up consideration of the input. A timeline for completing the plan was agreed to, with final approval at the August BOH meeting.

Financial Sustainability

In developing this strategic plan, TCHD took capacity and allocation of resources to accomplish the goals into consideration. Most of the strategies in the plan require existing staff time and effort; the intended outcome will result in improved business processes. In addition, TCHD has budgeted funds for strategic initiatives and innovations. These funds are short-term in nature and are available to assist with the start-up or completion of a special project related to the strategic plan.

Structure of Final Strategic Plan

With all above inputs collected and evaluated, twenty-one goals were identified within the four Priority Areas (see figure below). The Executive Management Team (EMT), comprised of agency leadership (Executive Director, Deputy Director, and eight Division Directors), reviewed the feedback from all previous input phases and recommendations coming from the final leadership retreat. The feedback from EMT was used to confirm the four Priority Areas and the ten Goal Areas highlighted below for initial implementation in Year 1.

**STRATEGIC PLAN PRIORITY AREAS 2019-2024**

1. **Employee Retention and Development**
   - A. Address competitive pay and benefits
   - B. Promote professional and leadership development and training opportunities for all
   - Succession planning
   - C. Assess workload & balance across agency
   - Ability to innovate within one’s program or role

2. **Excellence in Business Practices**
   - A. Enhance technology and information systems
   - Align resources with goals
   - B. Standardize and enforce policies and procedures

3. **Strengthen Organizational Culture**
   - A. Improve trust and transparency
   - Create a culture of shared leadership & informed decision-making
   - B. Improve internal collaboration and communication
   - C. Cultivate a culture of change management and quality improvement
   - Seek flexible and sustainable funding
   - Share innovations and successes

4. **Partner for Healthy Communities**
   - Identify and respond to emerging public health issues
   - Serve as a community convener for work across sectors, issues, and geography
     - A. Increase policy and advocacy work
     - Strengthen strategic partnerships
     - B. Prioritize health equity and meaningful community engagement
     - Refine external communication strategies
     - Share data and analytic capacity

*Strategies in yellow denote Year 1 focus areas*
As noted, the Strategic Plan was designed to complement Priority Areas of the PHIP, as well as our Core and Innovative Public Health Services, all with a commitment to promoting health equity. These relationships are depicted in the Figure below.

**Strategic Plan Priority Area Development**

Priority Area sponsors and Goal leads were identified from across the agency to lead the work plan development in each of the Goals selected for Year 1. All staff were given the opportunity to participate on a Goal Task Force to generate strategy areas and action steps: “Phase 1.” Sixty-two staff members from across all divisions signed up to participate on one or more Strategic Plan Task Forces. A Strategic Plan Role Matrix was developed to help define roles and responsibilities of those participating in the process (Appendix D).

Goal leads utilized a Strategic Plan Work Plan Development Guide for Phase 1 with each Task Force (Appendix E). Each Task Force carefully followed the methods laid out in the guide, including: (1) organizing, (2) reviewing the data, (3) exploring and refining the problem, (4) prioritizing solutions, (5) developing strategies and action steps, and (6) finalizing language and identifying next steps. At the conclusion of the ten-week-Phase 1 planning process, Task Forces created the following strategies and action steps to guide Year 1 of Strategic Plan implementation.
### Strategic Priorities and Goals

#### Priority Area 1: Employee Retention and Development

**Goal 1A: Address competitive pay and benefits**  
**Lead:** Cindy Jamieson  
**Task Force:** Adam Anderson, Omar Awan, Jill Bonczynski, Keiana Choyce, Yesenia Enriquez, Keith Homersham, Callie Preheim, Ricky Ross, Nicole Watanabe, Alyson Shupe (PIM Staff)

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| 1A.1 Develop and ensure enactment of clear policies and procedures which include the rationale for all phases of the pay and benefit process, informed by employees’ work and by employee input from all levels. | • A short term, topic focused task force will identify gaps in the compensation plan and need for policies supporting, or in addition to, what is in the plan.  
• Determine and implement an accountability structure for following and communicating the comp plan and associated policies and procedures.  
• Provide transparency by engaging staff in development and communication of changes to policies, procedures, and processes. | • Compensation plan is reviewed, by May, 2020  
• Policies are communicated by September, 2020  
• Accountability structure is operational by September, 2020  
• Responses to engagement questions reflect increased awareness of company pay practices as measured by the end of 2020 | • Strategic Plan 2B-Standardize and enforce policies and procedures  
• Strategic Plan 2C-Cultivate a culture of change management  
• Strategic Plan 3A-Improve trust and transparency from managers  
• Strategic Plan 2B- Improve staff collaboration and internal communication  
• PHAB Domain 11 |

| 1A.2 Research, identify, and implement mechanism(s) for decreasing inequities in pay and benefits. | • A short term, topic focused task force will assess and address current practices for providing benefits based on position or assignment.  
• Standardize recruitment process to include pay range on all positions.  
• Model different scenarios to determine costs, benefits, and unintended consequences of a more equitable pay and benefits system. | • Inequities by positions are addressed in an on-going basis in the context of total compensation.  
• Present scenarios which would reduce inequities in pay and benefits to the Executive Management Team on an on-going basis. | • Strategic Plan 2B-Standardize and enforce policies and procedures  
• Strategic Plan 4B-Prioritize health equity and meaningful community engagement |
**Goal 1B: Promote professional and leadership development and training opportunities for all**

**Leads:** Tenesha DuBose and Michelle Harris  
**Task Force:** Holly Adams, Stacey Baker, Patty Boyd, Heidi Fritz, Natasha Newlin, Kathleen Rebollo, Leslee Warren, Kelly Weidenbach (PIM Staff)

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| 1B.1 Fully implement Learning Management System (LMS) to expand access to training/development opportunities and to track individual growth | • Track training/development by TCHD staff in the LMS  
• For training/development that cannot be tracked in LMS, create standard method for documenting  
• Use change management for implementing LMS across agency  
• Provide complete LMS course catalog to staff  
• Develop in-house training content for LMS to augment LMS content | • Creation of change management plan for LMS implementation across supervisor/manager group by September 1, 2019  
• First supervisor/manager training on LMS in August 2019  
• Create ongoing training plan development process for LMS for all staff by December 31, 2019  
• Meet with Divisions and cross-Divisional subgroups to develop specific learning paths within LMS (ongoing) to meet identified training needs  
• Complete course list provided to staff by December, 2019  
• Evaluation of LMS use/satisfaction by August 31, 2020 | • Strategic Plan 2A-Enhance technology and information systems  
• Strategic Plan 2C-Cultivate a culture of change management and quality improvement  
• PHAB Domain 11 |
| 1B.2. Update the Workforce Development Plan to promote current and future training and development needs of TCHD staff | • On an ongoing basis, assess staff training and develop needs  
• Develop standardize onboarding for new employees as part of WFD plan  
• Align WFD plan with all training/development needs identified in strategic plan  
• Address PH core competencies in WFD plan | • Pilot training/development assessment with all staff by December 31, 2019  
• Assess strengths and gaps in current onboarding procedures by December 31, 2019  
• Create an outline for the revised Workforce Development Plan by April 30, 2020  
• Completion of revised Workforce Development Plan by August 31, 2020 | • Strategic Plan 1A-Competitive Pay and Benefits  
• Strategic Plan 2A-Enhance technology and information systems  
• Strategic Plan 2C-Cultivate a culture of change management and quality improvement  
• PHAB Domain 8 |
Goal 1C: Assess workload and balance across agency  
Lead: Jessica Gomez  
Task Force: Bernadette Albanese, Claudia Bernal, Sara Garrington, Carolyn Kwerneland, Callie Preheim (PIM Staff)

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| 1C.1 Assess and evaluate current work and workload | • Design and conduct an agency-wide assessment of work and workload to include perspective from managers, supervisors, frontline staff, and executive management.  
• Use the assessment to describe and understand agency leadership practices and decision-making processes, and their impact on work and workload. | • Assessment report is completed that describes current work and workload and issues related to workload balance, and staff communication by September, 2020  
• Recommend steps to address issues identified in the assessment by December, 2020 | • Strategic Plan 1A- Competitive Pay and Benefits  
• Strategic Plan 3A- Improve Trust and Transparency  
• CO Core PH Services Foundational Capabilities |
| 1C.2 Align work and right-size workloads | • Develop a process for ongoing review of work/workload and how to rebalance work/workload (addition of new work and elimination of existing work)  
• Develop process to align job descriptions and performance evaluations with work and workload  
• Recommend processes/procedures for staff to follow regarding workload balance  
• Implement workload balance processes | • Set up a process for review and adjustment of workload based on assessment by March, 2021  
• Implement processes developed to update job descriptions and performance evaluations and establish workload balance across the agency by June 30, 2021  
• Processes/procedures are developed and staff are trained by September 30, 2021  
• Supervisor Training is updated to include workload balance by September 30, 2021  
• Process regarding workload balance is implemented September 30, 2021 | • Strategic Plan 1B- Promote professional and leadership development and training opportunities for all  
• Strategic Plan 2B- Standardize and enforce policies and procedures  
• Strategic Plan 2C- Cultivate culture of change management and quality improvement |
### Priority Area 2: Excellence in Business Practices

**Goal 2A: Enhance technology and information systems**  
**Lead:** Jordan Luke  
**Task Force:** Informatics Governance Group: Holly Adams, Adam Anderson, Heather Baumgartner, Jill Bonczynski, Yushiuan Chen, Laura DeGolier, Theresa Fox, Penny Grande, Janet Harm, Melissa Spenser, Ryan Smith; and Lori Haas, Tim Glazier, Luisana Pedemonte, Alyson Shupe (PIM Staff)

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| 2A 1. Develop an informatics governance structure that includes an accountability framework, delineates lines of authority, outlines the decision making process, and ensures compliance with state and federal laws, regulations, and mandates. | • Determine parameters for what is in scope and out of scope of informatics governance  
• Develop standard operating procedures for governance  
• Implement data capability model to ensure compliance with state and federal laws, regulations, and mandates. | • Governance structure and procedures finalized by March 31, 2020  
• Roles and responsibilities defined by May 30, 2020  
• Signed informatics governance policy by June 30, 2020 | Strategic Plan 2B- Standardize and enforce policies and procedures  
Strategic Plan 2C- Cultivate culture of change management and quality improvement  
All PHIP Priorities  
CO Core PH Services  
Foundational Capabilities: Information Technology/Informatics (IT)  
PHAB Domain 11 |
| 2A 2 Develop a model technology and information systems training program for all TCHD staff | • Identify training needs  
• Determine a standardized training curriculum needed for new employee orientation and continuing education related to technical competencies  
• Work with workforce development coordinator to build training curriculum into the LMS | • Training needs by various groups (by work group, by longevity, etc.) identified by June 30, 2020 | Strategic Plan 1B-Promote professional and leadership development and training opportunities for all  
All PHIP Priorities  
CO Core PH Services  
Foundational Capabilities: Information Technology/Informatics  
PHAB Domain 8 |
| 2A.3 Develop standardized methods for informatics project management | • Research and select standard methods for informatics project management  
• Develop resource materials, templates, and toolkit for informatics project management  
• Train relevant staff on informatics project management method  
• Develop procedure document to formalize informatics project management at TCHD | • Select a project management framework by December 31, 2019  
• Develop resource materials, templates, and toolkit by March 31, 2020  
• Conduct at least one informatics project management training by August 31, 2020  
• Draft procedure document on informatics project management by August 31, 2020 | Strategic Plan 1B-Promote professional and leadership development and training opportunities for all  
Strategic Plan 2B- Standardize and enforce policies and procedures  
Strategic Plan 2C-Cultivate culture of change management and quality improvement  
CO Core PH Services  
Foundational Capabilities: Information Technology/Informatics |
| 2A.4 Develop strategy for multi-year planning for software and systems acquisition | Explore a centralized informatics budget  
Collaborate with Division of Administration and Finance to develop multi-year capital budget for software and information systems  
Prioritize software and information systems and align with capital budget  
Ensure capital budget and operational budgets consider funding for administrative support, training, maintenance, and essential upgrades of software and prioritized information systems | Develop systematic prioritization criteria for software and information systems by March 31, 2020  
Prioritize known/expected informatics projects by March 31, 2020  
Develop 5-year software and informatics plan for TCHD by May 31, 2020  
Complete first draft of capital budget by May 31, 2020 | Strategic Plan 3B-Improve Staff Collaboration and Internal Communication  
CO Core PH Services Foundational Capabilities: Information Technology/Informatics (IT)  
PHAB Domain 11 |
Goal 2B: Standardize and enforce policies and procedures
Lead: Sue Bettermann
Task Force: Amy Armstrong, Roslyn Asuncion, Joan Eskens, Melissa Spencer, Kelly Weidenbach (PIM Staff)

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| 2B1 Create a TCHD work group for policy and procedure management that establishes new policies/procedures, revises pre-existing policies/procedures, and vets the need for policy/procedures. | • Create diverse and inclusive work group that is representative of TCHD workforce (Division, geography, staff level).  
• Define roles and responsibilities of the work group.  
• Work group to create and implement process for prioritizing and creating new policies/procedures.  
• Work group to create and implement process for prioritizing, reviewing, and revising pre-existing policies. | • Creation of work group (i.e., charter that describes make-up of group, roles and responsibilities, how policies are prioritized, how decisions are made) by October 1, 2019.  
• Process (i.e., flow chart, written process) for creating new policies, revising old policies by March 31, 2020. | • Strategic Plan 2C- Cultivate a culture of change management and quality improvement  
• PHAB Domain 11 |
| 2B.2 Organize all existing TCHD policies and procedures to ensure that TCHD staff have access to the most up-to-date version | • Catalog existing policies and procedures and place them in established central location.  
• Review existing policies and procedures for content, format, and discrepancies. Recommend changes as necessary.  
• Ensure only the most recent version of the policy/procedure can be found (remove access to old versions). Establish process for version control.  
• Explore document management software as a solution for version control and access. | • Completion of catalog of existing policies and procedures by August 31, 2020.  
• Establish a central location of all policies and procedures with clear version control standards by December 31, 2019  
• Completion of software vetting to examine document management options by August 31, 2020 | • Strategic Plan 2A- Enhance technology and information systems  
• PHAB Domain 11 |
| 2B.3. Provide relevant training to TCHD staff on existing, new, and revised policies and procedures | • Update checklist of training on policies/procedures for New Employee Orientation  
• Determine training needed for supervisors and incorporate into supervisor training  
• Determine process for training staff on new policies/procedures | • Create outline for policies/procedures focused training plan by August 30, 2020  
• Coordinate with Workforce Development Coordinator to align training needs on policies/procedures with revised Workforce Development Plan by April 30, 2020 | • Strategic Plan 2B- Promote professional and leadership development and training opportunities for all  
• Strategic Plan 2C- Cultivate a culture of change management and quality improvement  
• PHAB Domain 8 |
Goal 2C: Cultivate a culture of change management and quality improvement
Lead: Kelly Weidenbach
Task Force: Daniel Barton, Laura DeGolier, Caitlin Gappa, Michele Haugh, Sandy Shafer, Alyson Shupe, Ryan Smith, Matt Jackson (PIM Staff)

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| 2C.1 Research, select, and implement a change management framework for TCHD | • Utilize short-term taskforce to research and select change management frameworks  
• Pilot framework on change project  
• Adjust, implement, and use framework consistently                   | • Select change management framework by December 31, 2019  
• Completion of pilot project of use of framework by March 31, 2020  
• List of recommendations from pilot project by April 30, 2020  
• Practice use of adapted framework on relevant projects by August 30, 2020  
• Evaluate utility of framework at TCHD by August 30, 2020       | • All Strategic Plan Goals  
• All PHIP Priorities                                                                                                        |
| 2C2 Foster formal quality improvement culture to empower staff to identify meaningful changes for improvement, which utilizes components of chosen change management framework | • Create a PM/QI council  
• Revise and update agency-wide QI plan  
• Increase training for QI, including beginner and advanced training  
• Identify methods to empower staff to innovate within their own role | • Creation of PM/QI council by October 1, 2019  
• Completion of revised QI plan by March 31, 2020  
• Creation of annual calendar of QI training by December 31, 2019  
• Completion of Year 1 of QI training by August 30, 2020 | • Strategic Plan 1B-Promote professional and leadership development and training opportunities for all  
• Strategic Plan 2C-Cultivate a culture of change management and quality improvement  
• PHAB Domain 8  
• PHAB Domain 9                                                                                                           |
## Priority Area 3: Strengthen Organizational Culture

### Goal 3A: Improve trust and transparency

**Lead:** Jennifer Ludwig  
**Task Force:** Michele Askenazi, Jaclyn Blitz, Yeraldie Caloca, Judy Fowler, Janet Harm, Mellissa Sager, Makena Slater, Alyson Shupe (PIM Staff),

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| 3A.1. Establish set of principles for making and communicating agency decisions          | • Describe the current state and future state of decision making (types of decisions, staff engagement, group vs individual, communication of decision)  
• Develop principles to include guidelines that establish clear expectations, roles and responsibilities, and communications plan (feedback loop)  
• Ensure alignment with and incorporation of agency’s values  
• Pilot test (supervisor training) and evaluate process | • Principles developed by January 31, 2020  
• Pilot projects are identified by February 28, 2020  
• Pilots completed by June 30, 2020  
• Evaluation data are used to assess and revised the new model August 31, 2020 | • All Strategic Plan Goals  
• All PHIP Priority Areas                                                                 |
| 3A.2. Actively promote inclusion of agency values in our work                              | • Engage staff in conversations about how values are important to them to improve trust and transparency  
• Develop stories on operationalizing values (garnered from staff engagement)  
• Explore how values can be included in performance management system (key performance indicator)  
• Develop and implement a sustainability plan for rolling out values and embedding them into our culture | • Examples of operationalizing values created by February 28, 2020  
• Performance improvement metrics established by April 30, 2020  
• Plan is implemented and evaluated by July 30, 2020 | • Strategic Plan 1A-Address Competitive pay and benefits  
• Strategic Plan 4B-Prioritize health equity and meaningful community engagement |
**Goal 3B: Improve staff collaboration and internal communication**

**Leads:** Becky O’Guin and Callie Preheim

**Task Force:** Sam Decker, Meredith Henry, Melanie Morrison, Kathy Staats, Courtney Tomlin, Matt Jackson (PIM Staff)

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| **3B.1. Develop and Implement an Internal Communication Plan** | - Assess and evaluate current communication channels and tools  
- Determine components of the communication plan  
- Develop internal communication processes and procedures: (What to whom, how, why, when) (Communication Matrix)  
- Develop a Communication Plan Training/Onboarding Process (LMS)  
- Consider and test innovative communication tools; develop recommendations based on testing | - Assessment is completed by January 31, 2020  
- Completed outline of communication plan by March 31, 2020  
- Completed communication matrix by May 31, 2020  
1. Completed framework  
2. Identified best practices  
- Plan Completed by August 31, 2020  
- Recommendations ongoing | - All Strategic Plan Goals  
- All PHIP Priority Areas  
- CO Core PH Services Foundational Capabilities: Communications |
| **3B.2. Research and Explore Collaborative Working Models (ex. Place based, Integration, etc.)** | - Assess current state of collaborative work  
- Research existing collaborative models and best practices  
- Pilot test and evaluate new collaborative best practices and working model(s)  
- Develop recommendations around collaborative models | - Assessment and inventory and/or cross-walk completed by February 28, 2020  
- Research completed by April 30, 2020  
- At least two pilot projects will be completed by July 31, 2020  
- Recommend collaborative models for use at TCHD by July 31, 2020 | - All Strategic Plan Goals  
- All PHIP Priority Areas |
## Priority Area 4: Partner for Healthy Communities

**Goal 4A: Increase policy and advocacy work**  
Lead: Mellissa Sager  
Task Force: Dylan Garrison, Amanda Gersabeck, Emma Goforth, Annemarie Heinrich, Greta Macey, Angelica Moreno, Matt Jackson (PIM Staff)

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| 4A.1 Create and implement a Policy and Advocacy Framework | • Define Policy and Advocacy work across the agency  
• Complete an internal assessment of roles and responsibilities related to policy and advocacy  
• Complete and internal assessment of TCHD policy and priority areas  
• Revise the TCHD staff guidance on public health policy education and advocacy | • Glossary of terms and definitions related to policy and advocacy by December 31, 2019  
• Documentation of feedback of roles and responsibilities by January 31, 2020  
• Clear program/policy priorities by March 31, 2020  
• Completion of the revised TCHD staff guidance on public health policy education and advocacy by March 31, 2020  
• Process for ongoing review of policy and advocacy needs by March 31, 2020 | • Strategic Plan 2C- Cultivate a culture of change management and quality improvement  
• Strategic Plan 3B- Improve Staff Collaboration and Internal Communication  
• CO Core PH Services Foundational Capabilities: Policy Development and Support |
| 4A.2 Develop Policy and Advocacy Training Plan | • Assess policy and advocacy training needs across TCHD  
• Develop curriculum for policy and advocacy training  
• Create a Policy and Advocacy Toolkit and Guidelines  
• Develop ongoing policy and advocacy training schedule and structure for all staff | • Feedback received from diverse staff related to training needs including knowledge/experience/expertise by December 31, 2019  
• Complete external scan of training opportunities by December 31, 2019  
• Training curriculum developed and completed to fill needs of the agency by February 28, 2020  
• Schedule of trainings is developed and shared with all staff is ongoing | • Strategic Plan 2B- Promote professional and leadership development and training opportunities for all  
• CO Core PH Services Foundational Capabilities: Policy Development and Support |
**Goal 4B: Prioritize health equity and meaningful community engagement**

**Lead:** Alix Hopkins

**Task Force:** Dani Egeberg, Haley Foster, Loribeth Mesa, Sharon Penna, Adrian Pidek, Kaitlin Wolff, Callie Preheim (PIM Staff)

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| 4B.1 Determine Accountability, Responsibility, Authority, and Funding Structure(s) for Health Equity and Community Engagement Work (HE&CE) at TCHD | - Assess current capacity of Health Equity Work Group and Steering Committee and make recommendations for next steps  
- Determine at least three different staffing and funding scenarios for health equity and community engagement work at TCHD  
- Assess and clarify internal and external priority areas of focus for HE&CE  
- Clarify steps necessary for determining: (1) Accountability, responsibility, and authority  
- Staffing and funding structures  
- Implement steps | - Assessment completed by December 30, 2019  
- At least three staffing and funding scenarios are developed by June 30, 2020  
- Clear focus areas are recommended by September 30, 2020  
- Clear steps for each area are recommended by December 30, 2020  
- A process for implementing steps is determined and a plan is made to begin implementation by February 28, 2021 | - Strategic Plan 3B- Improve Staff Collaboration and Internal Communication  
- CO Core PH Services Foundational Capabilities: Health Equity and the Social Determinants of Health |
| 4B.2 Create shared definition and model(s) of Health Equity and Community Engagement that reflect TCHD Values and Align with Public Health Transformation (year 1-2) | - Research HE&CE best practices and models.  
  o Develop recommendations based on this and previous research for TCHD’s creation of a model and framework  
  - CE Policies/Procedures (Guidance)  
  - Modify, and adopt a (1) Community Engagement Spectrum and (2) a Health Equity Framework  
  - Tie HE and CE framework/model together and align them to TCHD Values in a way that gives examples of what this looks like at different levels of interaction and for different types of jobs (direct service, systems level, etc.) | - Recommendations for TCHD HE&CE models are developed  
- Policies and procedures for CE is developed  
- CE spectrum and HE framework for the agency are adopted  
- A detailed crosswalk of model/framework and TCHD values is developed | - Strategic Plan 1B- Promote professional and leadership development and training opportunities for all  
- Strategic Plan 2C- Cultivate a culture of change management and quality improvement |
| 4B.3 Identify existing, internal efforts and best practices related to HE&CE (year 1-2) | - Scan internal programmatic efforts of Community Engagement  
  - Examine HE&CE efforts in Job Descriptions, Evaluations of Currently – Funded Projects, Work Force Development  
  - Map efforts to CE spectrum and to HE framework | - Scan completed  
- Map completed | - Strategic Plan 3B- Improve Staff Collaboration and Internal Communication  
- CO Core PH Services Foundational Capabilities: Health Equity and the Social Determinants of Health |
Strategic Plan Phase 2 - Implementation

The Strategic Plan will be evaluated using developed performance management measures for each prioritized area. A communication plan will be followed to ensure progress is shared regularly with staff, partners, and the public. Progress will be tracked and reported to the Board of Health on a regular basis throughout the next six years.
Appendix A

Acknowledgements

Key Informants

Local Public Health
- Mark Johnson, MD, Executive Director, Jefferson County Public Health
- Bill Burman, MD, Director, Denver Public Health
- Jeff Zayach, MS, Executive Director, Boulder County Public Health

Hospital Systems
- Deb Federspiel, BS, Community Partnerships, Children’s Hospital Colorado

Colorado Department of Public Health & Environment
- Tista Ghosh, MD, Chief Medical Officer, CDPHE
- Jeff Lawrence, Environmental Health Sustainability, CDPHE
- Web Brown, MS, Office of Health Equity, CDPHE

Community Health
- Bebe Kleinman, MNM, Executive Director, Doctors Care
- Jessica Dunbar, MSPH, CEO, Every Child Pediatrics
- Ben Wiederholt, MHA, CEO Stride Community Health Center

County Commissioners
- Kathleen Conti, Arapahoe County Commissioner
- Barbara Drake, MS, Deputy County Manager, Douglas County

Health Foundations
- Chris Wiant, PhD, CEO, Caring for Colorado
- Ned Colange, MD, CEO, The Colorado Trust

Schools
- Tony Poole, MAED, ED of Student Achievement, Cherry Creek Schools
- Michelle Weinraub, MSN, RN, NCSN Director of Nursing, Cherry Creek Schools

Community Mental Health
- William (Bill) Henricks, PhD, CEO, AllHealth Network
- Kelly Phillips-Henry, Psy.D, CEO, Aurora Mental Health Center
- Rick Doucet, MA, CEO, Community Reach
Board of Health

Adams County
- Julie Mullica, MPH
- Rosanna Reyes, RN
- Naomi Steenson, RD

Arapahoe County
- Jan Brainard, RN
- Thomas Fawell, MD
- Kaia Gallagher, PhD

Douglas County
- Marsha Jaroch, NP
- Paulette Joswick, RN
- Zachary Nannestad, MPH

TCHD Staff

Executive Management Team
- John M. Douglas, Jr., MD, Executive Director
- Jennifer L. Ludwig, MS, Deputy Director
- Michele Askenazi, MPH, CHES, Director of Emergency Preparedness, Response, and Communicable Disease Surveillance
- Heather Baumgartner, MSS, Director of Community Health Promotion
- Jill Bonczynski, RD, MS, Director of Nutrition
- Theresa Fox, MBA, Director of Administration and Finance
- Mame Fuhrman, MPS, SPHR, Director of Human Resources
- Penny Grande, RN, MS, Director of Nursing
- Brian Hlavacek, MAS, REHS, Director of Environmental Health
- Kelly Weidenbach, DrPH, MPH, Director of Planning and Information Management

Executive Sponsors
- John M. Douglas, Jr., MD, Executive Director
- Jennifer L. Ludwig, MS, Deputy Director
- Mame Fuhrman, MPS, SPHR, Director of Human Resources

Strategic Plan Goal Leads
- Sue Bettermann
- Tenesha DuBose
- Jess Gomez, RN
- Michelle Harris, MPH, RD
- Alix Hopkins, RN, MPH
- Cindy Jamieson, SPHR
- Jennifer Ludwig, MS
• Jordan Luke
• Becky O’Guin, MPS
• Callie Preheim, MSPH
• Mellissa Sager, JD
• Kelly Weidenbach, DrPH, MPH

PIM Planning Team
• Matt Jackson
• Callie Preheim, MSPH
• Alyson Shupe, PhD, MSW
• Kelly Weidenbach, DrPH, MPH

Strategic Planning Task Force Members

All TCHD staff
All-Staff Survey

1) Below are TCHD’s Values and Guiding Principles. To what extent are these practiced in your work unit? At TCHD in general?

   **Respect:** We treat others with the same dignity as we wish to be treated. We honor the whole person and recognize the importance of work-life balance and diverse perspectives. We recognize the power of teamwork and appreciate the unique contributions that each member of a team can make.

   **Integrity:** We maintain consistency in what we say and what we do. We uphold high ethical standards and maintain accountability to each other and the communities that we serve.

   **Courage:** We stand up for what is right in the face of adversity. We communicate openly and welcome honest feedback. We advocate for those who cannot do it for themselves.

   **Excellence:** We strive for the highest quality in everything that we do. We pursue opportunities and seek creative and innovative solutions to the challenges that face us.

   **Leadership:** We believe that everyone can be a leader. We empower others to act; we encourage everyone to reach their fullest potential; and we model our core values.

   **Collaboration:** We seek to sustain and enhance the reach and impact of our efforts through the respectful engagement with community partners (local, regional and state).

   **Stewardship:** We maintain good stewardship of public monies and facilities through active management and will always strive to provide high quality, targeted, and cost-effective services for the community.

   **Innovation:** We seek and encourage innovative approaches to address public health issues, reach diverse communities and improve agency operation.

2) The list below was identified in staff focus groups as areas for agency improvement. On a scale of 1 to 13 with 1 being the most important and 13 being the least important, please rank each item in terms of how important improvement is for optimal organizational performance.

   - Up-to-date technology and information systems
   - Career ladders and opportunity for advancement within TCHD
   - Standard policies and procedures that everyone follows
   - More opportunities for staff to give input into agency decisions -- and have management listen
   - Finding ways of working across divisions -- break down the silos
   - Internal communication flow across the agency
   - More time to plan and look ahead
   - Office building quality (safe, modern, adequate space)
   - Compensation (pay, benefits, budget for training)
   - Professional development and training opportunities for everyone
   - Room for innovation and creativity
   - Aligning work and resources to accomplish our goals
   - Trust and transparency from managers and executives
Appendix C

Key Informant Questions

Strategic Plan 2019

1. What are some of the most important trends and factors facing our communities over the next 3-6 years?
   a. What do you see as the greatest public health issues facing our communities now and in the future?
   b. What role should a cutting edge public health department play in addressing those issues?
   c. What are the greatest challenges your organization will be facing in the next 3-6 years?
   d. What role can TCHD play in supporting your work? In addressing those challenges?

2. Based on what you know about Tri-County’s current work, what do you feel:
   a. it is best known for? (What do you think of when you hear Tri-County?)
   b. are its greatest strengths?
   c. are its opportunities for improvement?

3. Most communities are struggling with issues of affordable and safe housing, access to healthy affordable food, struggling schools, economic insecurity and poverty, homelessness, social isolation and stress, and safety. These are large cross-cutting issues that require strong and effective partnerships to address them.
   a. What do you think stands in our way of working together to address these issues now?
   b. What infrastructure needs must be met in order for us to work together to solve these issues facing our communities?
   c. What resources and skills are needed to work together on these issues?

4. The ability to communicate effectively with various audiences is a persistent challenge. What are the most effective communication strategies you employ or appreciate from others?
   a. How can TCHD be more effective in communicating with your organization?
   b. How can TCHD be more effective in communicating with your stakeholders about public health issues?

5. Nationally, public health leaders are being asked to play a Chief Health Strategist role in their communities by developing strong strategic partnerships with players in other sectors. Additionally, public health can provide current, geographically-specific data and practical, readily accessible tools for data analysis and an enhanced informatics workforce. How would you utilize someone in this role to:
   a. help support your work?
   b. accomplish joint goals and objectives?

6. Part of TCHD’s mission is to promote health equity.
   a. What does health equity mean to you?
   b. How important is equity and justice in the mission of your organization?


### Strategic Plan Priority Area Sponsors
- Assure task force is making progress in accordance with SP timeline and deliverables
- Provide executive level review and input on developed activities
- Ensure implementation of work plans
- Communicate SP priorities as organizational priorities consistently
- Elevate Task Force concerns to appropriate leadership level
- Ensure knowledge/awareness of resource needs
- Advocate for resource needs (i.e., funding, human capital) to senior leadership
- Communicate timeline changes to Executive Management Team
- Update Leadership on task force progress
- Communicate Executive Management decisions or requirements that impact the work of the group in a timely and transparent manner
- Identify and promote opportunities for alignment between the SP and the PHIP
- Ensure equity is practiced and fostered among work group members

### Strategic Plan Goal Leads – Phase 1
- Provide subject matter expertise for priority area
- Convene task forces weekly
- Build consensus around task force activities/timelines
- Ensure equity is practiced and fostered among Task Force members
- Provide focus for task force on solutions that work across divisions and positions
- Consistently communicate SP strategy area action steps as organizational priorities
- Connect work by communicating regularly with Executive Sponsors and PIM staff
- Adhere to established team work plans, timelines, and deliverables
- Provide leadership to task force
- Understand potential resource needs around activities and communicate those needs to Executive Sponsor
- Ensure that Executive Sponsors are aware and knowledgeable of work plan/implementation plan

### Task Force Members – Phase 1
- Provide expertise and knowledge to task force, and represent colleagues’ expertise and knowledge, when known
- Actively participate in task force meetings weekly
- Provide input on problem statements, goals, action steps, and timelines
- Communicate concerns to SP lead and PIM Staff
- Focus on desired future state of the organization [on goals and how to get there]
- Bring solutions to perceived barriers
- Consider other staff who may be needed to carry out implementation activities. Communicate this with Task Force lead
PIM Planning Support Group – Phase 1

- Provide technical assistance with creating appropriate activities for each workgroup and developing appropriate outcome measures
- Provide facilitation so that leads can participate
- Assist SP Leads and task forces with completion of tools/products, as necessary
- Provide existing data to inform each phase of implementation
- Ensure the quality and proper use of data
- Provide technical assistance around SP evaluation
- Assure alignment of SP activities, outcomes, population measures with PHAB requirements, and evidence-based public health practice.
- Develop and disseminate performance metrics
Appendix E


The components of a strategic plan are difficult to operationalize unless task forces make a deliberate connection between the root causes of identified problems to defined, best-practice strategies and subsequent implementation throughout the organization. While the 2019-2015 Strategic Plan contains externally-focused priorities, the majority of priorities are internally focused. As such, all employees should feel connected to the strategic plan – both in their individual, day-to-day work as well as in their experience as an employee of TCHD. The TCHD Planning and Information Management Division has created this guide to assist task forces in developing the 2019-2025 Strategic Plan Work Plan: defining goals for each priority area and identifying effective, best-practice action steps that will enable us to reach these goals.

Step 1: Organize
Week 1 | May 27-31, 2019
By the end of this step, each task force will:

- Have reviewed this guide to understand the overall process, timeline, and deliverables
- Held its first task force meeting
  - Defined norms, roles, and expectations of the group
  - Defined the objectives of the task force

Step 2: Review Data
Week 2 | June 3-7, 2019
By the end of this step, each task force will:

- Review priority area input (survey, focus group, and key informant data) and problem statement
- Identify if additional information or clarification is needed

Step 3: Explore and Define Problem
Weeks 3-4 | June 10-21, 2019
By the end of this step, each task force will:

- Thoughtfully discuss the problem and root causes
- Conduct a root cause analysis of your priority area
- Complete brainstorming exercise

Step 4: Prioritizing Solutions
Weeks 5-6 | June 24-July 5, 2019
By the end of this step, each task force will:

- Prioritize root causes and solutions on which to focus in year one

Step 5: Develop Goals and Action Steps
Weeks 7-8 | July 8-19, 2019
By the end of this step, each task force will:

- Develop measurable action steps for each of the year-one strategic plan priority areas

Step 6: Finalize plans; identify next steps and lessons learned
Week 9 | July 22-26, 2019

By the end of this step the work group will:

- Discuss next steps beyond year one