

# Green River District

HEALTH DEPARTMENT

## STRATEGIC PLAN 2023-2027

### Vision

To ensure our community lives in a healthy and safe environment.

### Mission

To promote, protect, and strengthen the health and well-being of all by helping develop and maintain healthy lifestyles and environmentally safe communities.

### Values

Compassion, Respect, Innovation, Integrity, Accountability

[www.healthdepartment.org](http://www.healthdepartment.org)

270-686-7747

 Green River District Health Department

 @GRDHD





## CONTENTS

Letter from the Director .....	2
About GRDHD .....	3
Strategic Planning Process .....	4
Vision Mission Values .....	6
Vision .....	6
Mission.....	6
Values .....	6
Organizational Scan / Stakeholder Input .....	6
SWOT Analysis – .....	7
Current Plan.....	10
Strategic Priorities .....	11
Goals/Objectives.....	12
Link to other plans .....	19
CHA CHIP .....	19
Workforce Development.....	19
Performance Management .....	19
Quality Improvement.....	19
Capacity Assessment.....	20
Plan in Action .....	22
Monitoring .....	22
Communication .....	22
Appendices.....	23
Appendix A – Planning Process Meetings: 2018-2021 Strategic Plan .....	24
Appendix B – GRDHD All Staff Survey Results 2018-2021 Strategic Plan .....	27
Appendix C – 2018-2021 Evaluation .....	28
Goals/Objectives.....	28

# Green River District



## HEALTH DEPARTMENT

Dear Health Department Employees, Partners, Customers, Board members and taxpayers,

It is my honor to present to you the Green River District Health Department's 2023-2027 Strategic plan.

Within this report you will find a description of how this plan was developed with the insight from our stakeholders and input from all health department employees. The plan lays forth a strong roadmap for the next five years on how our health department can continue to improve the ways we serve our community and fulfill our mission **to promote, protect, and strengthen the health and well-being of all by helping develop and maintain healthy lifestyles and environmentally safe communities**. As this plan was developed, we set strategic priorities with corresponding goals and objectives that we believe represented the most important issues and efficient ways to see our important work for the community improve.

Our team is excited about these priorities and the progress we think the future holds, just as we are proud of the many accomplishments that have been a result of our previous strategic plans. In keeping with the spirit of continuous improvement, we invite you to share your thoughts on our plan and our progress going forward. We always welcome and take seriously your feedback.

Sincerely,



Clayton Horton

Public Health Director

## ABOUT GRDHD

Located in Western Kentucky, Green River District Health Department (GRDHD) was established as a district in 1974 when the individual county health departments, focused primarily on family planning, transitioned to a unified organization in order to provide comprehensive health services. Currently, there are seven county health centers, two satellite clinics at school sites and an administrative office serving a population of approximately 212,000 in Daviess, Hancock, Henderson, McLean, Ohio, Union, and Webster counties.



GRDHD offers programs and services designed to meet the health care needs of the seven-county district for an array of eligible participants. Certain programs are mandated by law or regulation to protect the health of the public. These fall under the categories of Enforcement of Public Health Regulations (such as occurs in the Environmental Program), Surveillance, Communicable Disease Control (such as the tuberculosis program), Public Health Education, Public Health Policy, Family and Children Risk Reduction, and Disaster Preparedness. Local option services include other Population-Based Services which improve health outcomes for groups of people or communities such as the Women, Infants and Children (WIC) Program and other preventative services. Additional services for individuals may also be provided such as the Home Health Program and Adult Day Care. Each health center throughout the seven counties is a key component in providing public health services.

### Agency Accreditation

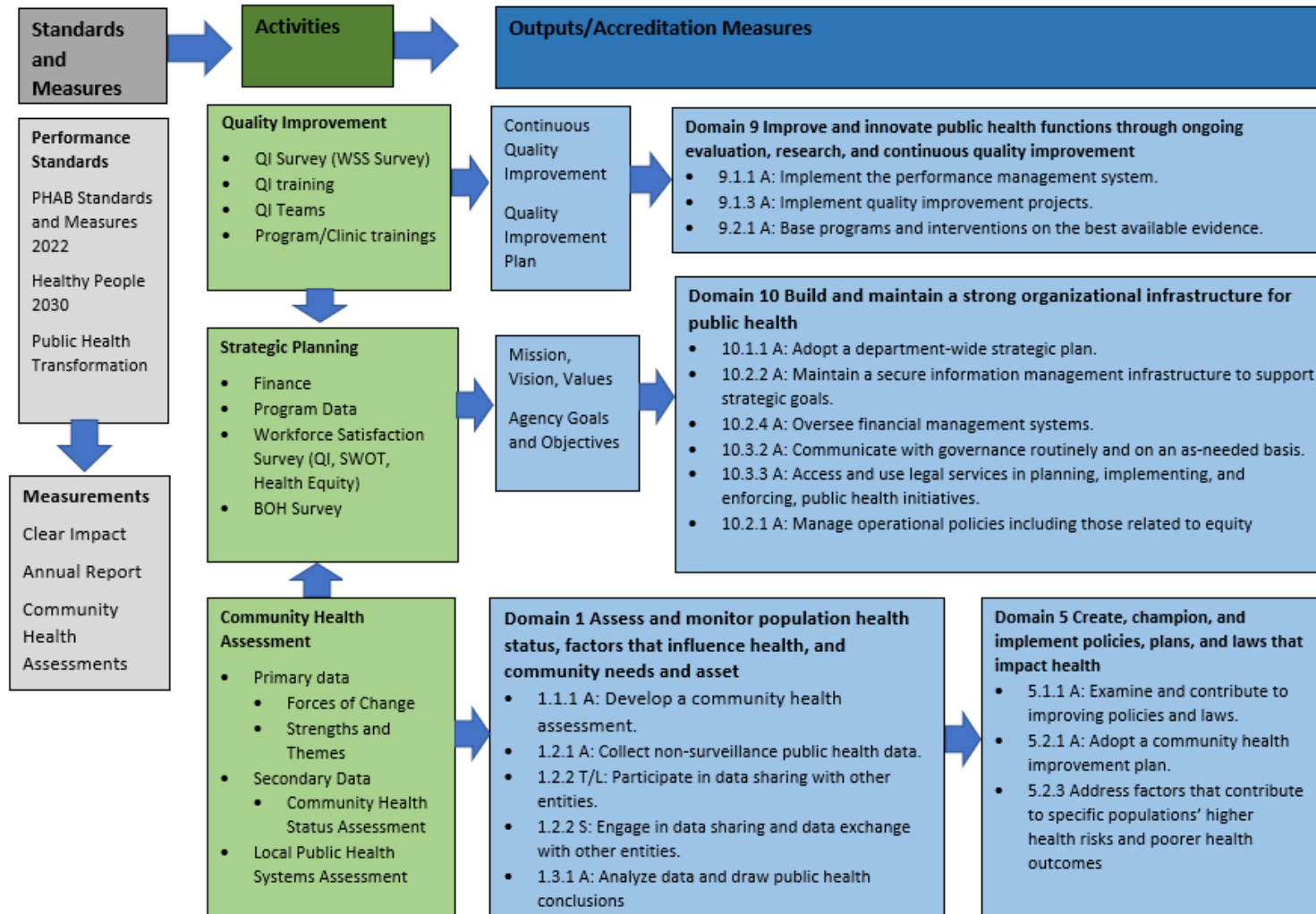
The Green River District Health Department achieved national accreditation for five years by the Public Health Accreditation Board (PHAB) on December 9, 2014. Receipt of accreditation certifies that GRDHD has met or exceeds national standards for high quality public health services, leadership, and accountability. GRDHD was reaccruited in August of 2021.



The Public Health Accreditation Board (PHAB), established in 2007, was created to serve as the national public health accrediting body, and is jointly funded by the Centers for Disease Control and Prevention and the Robert Wood Johnson Foundation. The development of national public health accreditation has involved, and is supported by, public health leaders and practitioners from the national, Tribal, state, and local levels. Learn more about PHAB by visiting [www.phaboard.org](http://www.phaboard.org).



# Performance Management/Strategic Plan 2023





## VISION MISSION VALUES

The results of the 2022 staff SWOT analysis and Workforce Satisfaction Survey were compared against the agency vision, mission and values. Agency supervisors were polled to see if the current mission and values were reflected in these results and in the day-to-day work of serving our communities. It was found that our current mission and values reflect both the work done by GRDHD and how staff see their roles in the agency and the community.

An agency's vision conveys the ideal conditions, while the mission is the action (what and why) of how the vision can be achieved.

### VISION

***To ensure our community lives in a healthy and safe environment.***

### MISSION

***To promote, protect, and strengthen the health and well-being of all by helping develop and maintain healthy lifestyles and environmentally safe communities.***

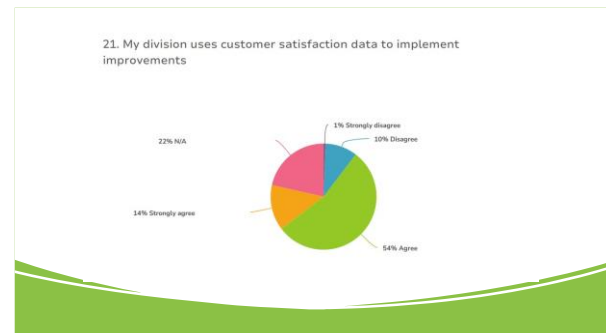
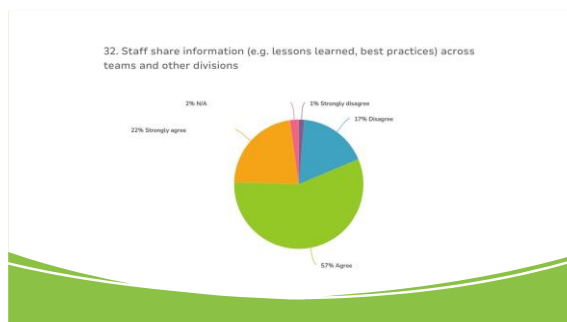
### VALUES

**Compassion—Respect—Innovation—Integrity—Accountability**

## ORGANIZATIONAL SCAN / STAKEHOLDER INPUT

The GRDHD Performance Management Team utilized an organizational scan that included a SWOT Analysis of various departments along with an agency wide Workforce Satisfaction Survey. The organizational scan included several questions that allowed the interviewees to evaluate the organizations' current priorities and determine if any perceived areas needed attention.

The seventy-seven-question online survey utilized a Likert Scale to measure level of agreement with statements concerning workplace culture, job satisfaction and opportunities, fairness and equity, relationships among clients and colleagues, training needs, and quality improvement. All staff were invited to participate; approximately 75% of staff responded. The survey results were used to identify strategic issues for the organization. (The full report for staff survey results is in a separate document.)



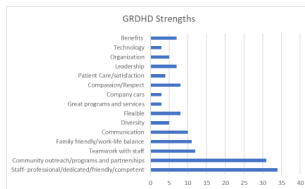


## SWOT ANALYSIS –

A member of the Performance Management Team conducted in person SWOT Analysis with various departments to gather input which included: HANDS, Home Health, Nutrition, First Steps, Union County Health Center, Community Education, Environmental, and Community Access Project. A SWOT exercise was also conducted at the October 2022 Board of Health Meeting.

### Strengths

- Staff – High function/well trained/dedicated/experience
- Teamwork – Helping each other
- Work/Life Balance



Strengths	
Helping each other/fixing/Teamwork	16
High functioning staff/well trained/competent/experienced/passionate about work	8
Work from home/work life balance	8
Benefits - vacation/docking/holidays	8
Viability of HD especially after COVID - ground to work at the HD	7
Staff - professional/educated/tenured/competent	34
Community outreach/programs and partnerships	31
Teamwork with staff	12
Family friendly/work life balance	11

### Weaknesses

- Communication
- Lack of Staff
- Retirements
- Pay

Weakness	
Siloed program/Communication between departments/knowledge of other departments	6
Lack of staff/hard to recruit and retain staff	9
State - regulations/processes/deliverables/lack of knowledge of local HD process	4
Pay	3
Communication	24
Pay	16
Staff	13
Lack of staff/staff retention	23

Staff Meetings

Staff Survey

### Opportunities

- Community Outreach
- Marketing
- Awareness of HD
- Technology

Opportunity	
Use of technology to reach more clients/virtual working opportunities/health equity	9
Increased marketing/media	4
More awareness of the HD	7
Communication	4
More Staff	4
Training/ Training for new employees for future retirements	4
Community Outreach/Marketing	14

Staff Meetings

Staff Survey

### Threats

- Staffing (Retention/Retirements)
- Politization/Distrust of Health Messaging
- Funding
- Safety?

Threats	
Funding	5
Staff retirements	6
Safety of staff	5
Politization/Distrust of HD and messaging	4
Lack of staff	3
Staff retention/loss of staff due to retirement/pay	11
Safety	3
Funding	7
Political climate/politics and health	5

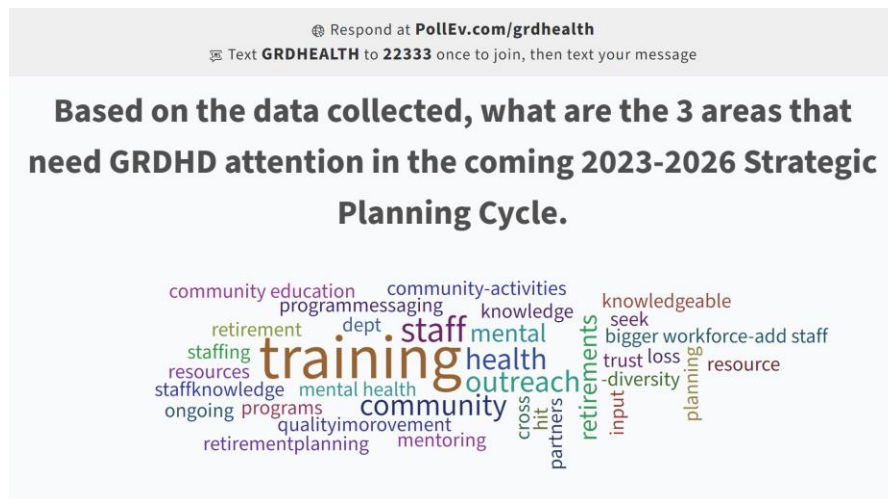
Staff Meetings

Staff Survey

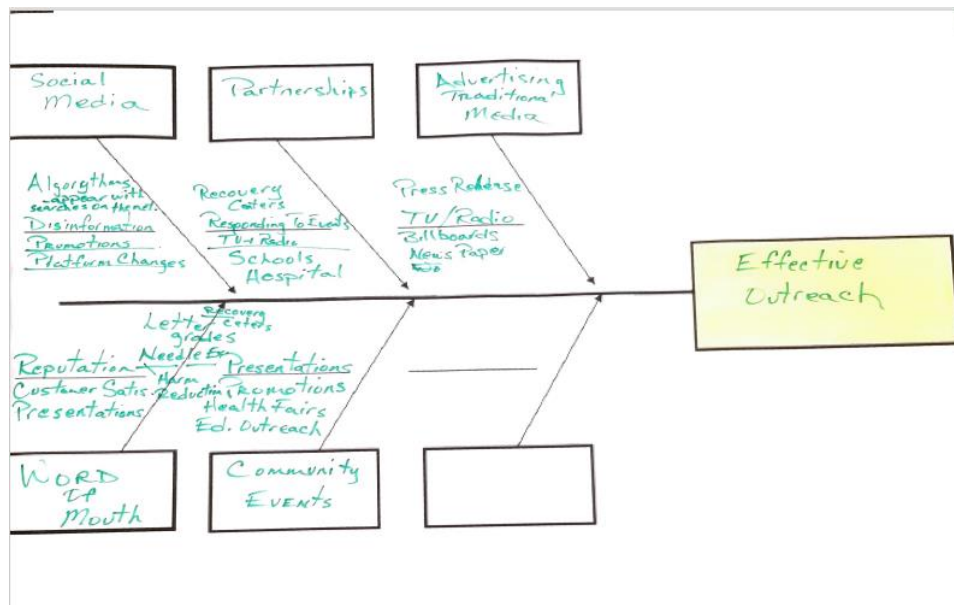
## Board of Health SWOT Analysis

A	B	C	D
Strengths	Weaknesses	Opportunities	Threats
Staff communications with the board	Lack of staff, staff doing multiple jobs	Awareness of what GRDHD does among medical community	Funding
Good communication skills	Workforce getting older	Awareness of what GRDHD does in community	Aging workforce
Very visible in the community	Lack of knowledge of GRDHD among medical clinicians	Services at GRDHD are for everybody	Burn out throughout staff
Staff are hardworking and dedicated			Keeping epidemiologists in Public Health

GRDHD conducted a planning session for all managers and supervisors. During the December 2022 session, staff assessed the strengths, weaknesses, opportunities and threats/challenges (SWOT) and reviewed data from the staff wide survey and developed some common themes.



Once the common themes were established, the group participated in creating a Fishbone Analysis of potential solutions to address reoccurring themes and opportunities, while minimizing weaknesses and challenges. The information gathered was analyzed by the Performance Management Team and Senior Management to develop the goals and objectives for the agency going forward.



For the 2023-2027 Strategic Plan, the below themes emerged from the data gathering and analysis to established to provide focus for agency direction and growth.

## Identifying Priority Areas



### Internal Workforce

- Retention
- Retirements
- Communication
- Safety/Mental Health



### Community Outreach

- Outreach and Marketing
- Messaging/Politization
- Health Equity
- Use of Technology

## CURRENT PLAN

In September 2022, members of the Senior Management reviewed the final report from the 2018-2021 Strategic Plan to prioritize which of the previous plan goals should be carried forward to the 2023-2027 Strategic Plan. (Please see appendix C for the full analysis of the 2018-2021 Strategic Plan.) The below highlighted goals were decided for consideration either in a new goal or as a continuation in the 2023-2027 Strategic Plan.

### Review 2018-2021 Strategic Plan

- **Goal 1:** GRDHD will expand the CHA annually during the 2018-2021 Cycle.
- **Goal 2:** By January 31, 2019, GRDHD will identify health department actions to support 2018 CHIP initiatives at county and district levels.
- **Goal 3:** By October 31, 2021, GRDHD will support health equity by identifying and monitoring up to 5 health outcomes to address the community's needs.
- **Goal 4:** By December 15, 2020, GRDHD will develop and implement a policy advocacy plan for use in shaping public health policy.
- Goal 5: GRDHD will create a comprehensive branding strategy based on branding policy by June 30, 2019.

### Review 2018-2021 Strategic Plan (pt. 2)

- **Goal 6:** By July 2020 GRDHD will improve the organizational culture of quality focusing on customer service & communication.
- **Goal 7:** GRDHD will provide ongoing professional development opportunities for all staff in various formats including annual training with KY Train, trainings during staff meetings and target specific trainings as appropriate.
- Goal 8: By June 1, 2020, GRDHD will foster the development, maintenance, and expansion of Academic Health Department (AHD) relationships.
- Goal 9: Develop a longterm technology plan which includes 1, 2, and 4 year goals for the Agency by January 31, 2019.

Goal 5, 8, and 9 were discontinued at the strategic plan level but shifted to programmatic or committee level for continuation and possible integration within the performance management system.

## STRATEGIC PRIORITIES

All of the services provided by Green River District Health Department can be linked to at least one of the Ten Essential Public Health Services (EPHS). Developed by the Core Public Health Functions Steering Committee in 1994, the EPHS provide a working definition of public health and a guiding framework for the responsibilities of public health systems. The core functions are assessment, policy development and assurance.

### **TEN ESSENTIAL PUBLIC HEALTH SERVICES**

1. Monitoring health status to identify community health problems including health disparities.
2. Detecting (Diagnosing) and investigating health problems and health hazards in the community.
3. Informing, educating, and empowering people and organizations to adopt healthy behaviors to enhance health status.
4. Partnering with communities and organizations to identify and solve health problems and to respond to public health emergencies.
5. Developing and implementing public health interventions and best practices that support individual and community health efforts and increase healthy outcomes.
6. Enforcing laws and regulations that protect health and ensure safety.
7. Linking people to needed personal health services and ensuring the provision of population-based health services.
8. Assuring a competent public health workforce and effective public health leadership.
9. Evaluating effectiveness, accessibility, and quality of public health services, strategies, and programs.
10. Researching for insights and innovative solutions to public health problems.

### Strengthening, Development, and Support of the Workforce

Goal: 1	GRDHD will develop and implement employee recruitment and retention strategies	Measure
Objective: 1	By December 31, 2023, GRDHD will increase five-year retention rates by 3%.	
	<ol style="list-style-type: none"> <li>1. By December 31, 2023, GRDHD will canvas other businesses and health departments to gain information on employee retention strategies.</li> <li>2. By December 31, 2023, an employee exit interviews will be developed.</li> <li>3. By June 30, 2024, create a committee to develop activities that foster work relationships that create work inclusiveness and loyalty.</li> <li>4. By December 31, 2024, provide an Employee Benefit Package Value Statement to all employees on their anniversary date.</li> </ol>	<ul style="list-style-type: none"> <li>• Document with Q&amp;A from other agencies.</li> <li>• Checklist of exit interview items with termed staff.</li> <li>• Committee Minutes</li> <li>• Checklist of sent Value Statements.</li> <li>• Calendar for processes by classification.</li> </ul>
Objective : 2	By June 30, 2025, GRDHD will identify at least 3 classifications to develop work process descriptions and develop a calendar for completion. Work to be done in conjunction with preparedness program.	.
	<ol style="list-style-type: none"> <li>1. By July 1, 2023, identify 3 areas in need of process manual development (yr 1)—International Integration Process, WIC, Finance Director AR/BARS implementation of Accounts Receivable.</li> <li>2. By July 1, 2023, implement process mapping manuals: WIC by December 31, 2023; International Integration Process by July 1, 2024; Finance Director AR/BARS by October 1, 2025</li> </ol>	<ul style="list-style-type: none"> <li>• Calendar for process by justification.</li> <li>• WIC Customer Satisfaction.</li> <li>• WIC Participation and Enrollment.</li> <li>• Errors in Billing and Coding.</li> <li>• APRN Visits w/in 60 days of refugee arrival.</li> <li>• The amount of time a medical card is received.</li> <li>• AR days to post after received via CDP timeframe, reduce number of days to close month/yr - end financial AR. Reduce number of days to post/code after payment receive from commercial payors quarterly.</li> </ul>

<b>Goal: 2</b>	<b>GRDHD will foster the development of future agency leaders through targeted process development and training opportunities.</b>	<b>Measure</b>
<b>Objective : 1</b>	<b>By June 1, 2024, GRDHD will identify leadership development opportunities for staff in various formats including leadership programs, web-based trainings, and self-study programs.</b>	
	<ol style="list-style-type: none"> <li>1. By June 1, 2023, establish a committee representative of agency programs to identify opportunities for leadership development.</li> <li>2. By August 31, GRDHD will identify 3 staff to participate in leadership programs annually. Senior Management will review and approve participants.</li> <li>3. Quarterly identify 3 key positions to develop a succession plan within 6 months of being identified. Focusing on reviewing current knowledge, gaps, and plan to fill gaps.</li> </ol>	<ul style="list-style-type: none"> <li>• Committee minutes.</li> <li>• Senior Management Team minutes.</li> <li>• The number of staff completing the programs</li> <li>• Number of succession plans.</li> </ul>
<b>Goal 3:</b>	<b>GRDHD will improve internal communication.</b>	<b>Measure</b>
<b>Objective : 1</b>	<b>By January 31, 2024, GRDHD will develop and utilize three internal communication strategies.</b>	
	<ol style="list-style-type: none"> <li>1. All staff emails will be utilized to share agency press releases, staff training updates, job postings, and other agency wide communications to keep everyone informed in a timely manner.</li> <li>2. The GRDHD Gazette will be distributed electronically to all employees on a monthly basis to share agency highlights as well as program and personnel updates.</li> <li>3. By December 31, 2023, create a shared calendar accessible to all employees informing them of upcoming agency activities and community events where GRDHD is involved.</li> </ol>	<ul style="list-style-type: none"> <li>• Document and track all staff emails &amp; Gazette distribution.</li> <li>• Update calendar at least weekly and track number of events shared via the calendar.</li> </ul>



<b>Goal 4:</b>	<b>GRDHD will provide ongoing opportunities for mental health awareness by providing information and training for all staff in various positions through Gazette articles, KY Train, staff emails, and orientation.</b>	<b>Measure</b>
<b>Objective: 1</b>	<b>By December 31, 2026, GRDHD will create a Mental Health Training and Resource Plan to address staff mental health needs.</b>	
	<ol style="list-style-type: none"> <li>1. By December 31, 2023, develop ways to promote current mental health insurance benefits by creating a list of available resources and disbursing through email, Gazette articles, etc. Resources would include both current health insurance as well as any other benefits available. This list will also be provided during orientation to all new hires.</li> <li>2. By June 30, 2024, locate or develop an in-person training for supervisors on mental health issues (various – burnout, stress, healthy work/life balance, etc.) by pulling in outside experts in subject matter, to help supervisors be aware of mental health issues in staff.</li> <li>3. By February 28, 2025, create a training plan within KY Train on mental health for all staff.</li> </ol>	<ul style="list-style-type: none"> <li>• Number of articles in Gazette; new hire resources sheet.</li> <li>• Supervisor survey after training.</li> <li>• Completion roster after training.</li> </ul>
<b>Goal 5:</b>	<b>GRDHD will address safety issues identified by employees.</b>	<b>Measure</b>
<b>Objective: 2</b>	<b>By June 30, 2027, GRDHD will develop and initiate a safety plan based on identified programmatic and facility risks district wide.</b>	
	<ol style="list-style-type: none"> <li>1. By December 31, 2023, GRDHD will identify safety risks for health department facilities.</li> <li>2. By June 30, 2024, GRDHD will complete job safety analysis for each department throughout the district.</li> <li>3. By June 30, 2025, GRDHD will create safety metrics for GRDHD to achieve based on identified risks.</li> <li>4. By June 30, 2027, GRDHD will deliver regular and engaging safety training for identified risks.</li> </ol>	<ul style="list-style-type: none"> <li>• Internal audit for facilities with Risk Management committee.</li> <li>• Department managers will complete job safety analysis (survey monkey) within department to identify individual job safety risks.</li> <li>• Develop written safety plan based on identified risks.</li> <li>• Will add additional training to GRDHD training matrix and hold department specific training based on identified risks with partner agencies (active shooter, substance abuse awareness for field staff, etc.).</li> </ul>

## Improve Communication, Engagement and Collaboration in the Community

<b>Goal 6:</b>	<b>GRDHD will expand outreach and visibility to increase services to the community.</b>	<b>Measure</b>
<b>Objective: 1</b>	<b>By June 30, 2026, GRDHD will expand outreach and visibility to increase services to the community in at risk populations identified in the CHA.</b>	
	<ol style="list-style-type: none"> <li>1. Utilize advertising strategies to target health messages to at risk populations in at least 1 program per month.</li> <li>2. Communicate targeted, evidence-based health messaging a minimum of 20 days/month via social media platforms.</li> <li>3. Send a minimum of 1 press release per month to share agency/program related information.</li> <li>4. Agency and program specific information will be shared with the media upon request for interviews and via scheduled monthly or quarterly segments across all media platforms (television, radio, print, and online)</li> <li>5. GRDHD staff will conduct a minimum of four community presentations per year related to program planning goals and objectives to reach at risk populations.</li> </ol>	<ul style="list-style-type: none"> <li>• Document and track ads by program monthly.</li> <li>• Document and track social media postings monthly by program.</li> <li>• Document and track all press releases.</li> <li>• Document and track all interviews conducted by agency staff.</li> <li>• Document and track community presentations.</li> </ul>
<b>Goal 7:</b>	<b>GRDHD will increase and promote health equity both in the community and within the agency.</b>	<b>Measure</b>
<b>Objective: 1</b>	<b>By June 30, 2023, GRDHD will establish a health equity steering committee within the Green River District Health Department, consisting of five agency employees.</b>	
	<ol style="list-style-type: none"> <li>1. By July 30, 2023, form the committee and identify five agency employees with experience in health equity issues to serve on it.</li> <li>2. By September 1, 2023, the committee will develop a charter outlining its purpose, roles, and responsibilities. The committee will evaluate GRDHD's capacity and programs.</li> </ol>	<ul style="list-style-type: none"> <li>• Development of the committee/meeting minutes.</li> <li>• Charter completed.</li> </ul>

<b>Objective:2</b>	<b>By January 1, 2024, GRDHD will develop a communications plan to engage community members and stakeholders in the work of the health equity steering committee.</b>	
	<ol style="list-style-type: none"> <li>1. By January 1, 2024, the health equity committee will develop a communication plan that includes outreach strategies, communication channels, and target audiences as identified in the GRDHD CHA. The committee shall ensure the communications plan aligns with health needs and priorities identified in the GRDHD CHA/CHIP.</li> </ol>	<ul style="list-style-type: none"> <li>• Total number of outreach and messages to identified populations.</li> </ul>
<b>Objective: 3</b>	<b>By June 30, 2025, GRDHD will increase engagement and agency/community awareness, understanding, and promotion of health equity.</b>	
	<ol style="list-style-type: none"> <li>1. By January 1, 2024, develop an agency training program consisting of a web-based introductory training on health equity and a more in-depth live training that can be presented at department staff meetings and other small groups.</li> <li>2. Hold at least two community events or forums on health equity by the end of 2024, with a total attendance of at least 60 community members, 20 of whom represent marginalized communities.</li> </ol>	<ul style="list-style-type: none"> <li>• The number of staff members trained on Health Equity.</li> <li>• Training evaluations.</li> <li>• Attendance at community events.</li> </ul>
<b>Objective: 4</b>	<b>Annually, GRDHD will monitor and evaluate progress in addressing health disparities and promoting health equity.</b>	
	<ol style="list-style-type: none"> <li>1. By January 1, 2024, the health equity steering committee shall identify metrics and regularly review progress towards achieving the objectives in the GRDHD CHIP. Conduct at least two progress reviews each year and report findings to the health equity committee and Performance Management team. Use progress reviews to identify areas for improvement and make necessary changes to the plan and activities.</li> </ol>	<ul style="list-style-type: none"> <li>• Health Equity and Social Determinates of Health (i.e., poverty rate, education, access to care) metrics tracked by the PM committee and the CHA.</li> <li>• The number of GRDHD programs and services evaluated and improvements made to address equity.</li> <li>• CHIP initiative directly linked to addressing health equity.</li> </ul>

<b>Goal: 8</b>	<b>GRDHD will expand the CHA/CHIP during the 2023/2026 cycle to focus more on health equities and the social determinates of health that contribute poorer health outcomes.</b>	<b>Measure</b>
<b>Objective : 1</b>	<b>GRDHD staff will update the CHA annually (August 2024, 2025, 2026) and review to identify inequities in subpopulations and contributing health factors.</b>	
	<ol style="list-style-type: none"> <li>1. In August (2024,2025,2026, 2027) link identified health disparities and community needs to GRDHD programs and services for targeted outreach.</li> <li>2. By August 2023, GRDHD staff will complete a Health Equity Assessment to be reviewed annually, to provide additional targeted data on health equity in our district.</li> <li>3. By August 2024, GRDHD will identify 3 targeted local data sources on social determinants and outcomes.</li> </ol>	<ul style="list-style-type: none"> <li>• The number of programs directly linked priority areas identified in CHA.</li> <li>• Participation and enrollment rates of programs linked to SDOH.</li> <li>• Identified data sources related to health equity and barriers.</li> </ul>
<b>Objective : 2</b>	<b>By February 1, 2024, GRDHD will identify Community Health Improvement initiatives in all seven counties and at district level.</b>	
	<ol style="list-style-type: none"> <li>1. By April 2024, GRDHD will identify and connect with 2 community partners representing marginalized populations to promote identified health initiative.</li> <li>2. By April 2024, minimum of one initiative per county will be reviewed by partners and coalition members to evaluate if they are Specific, Measurable, Achievable, Relevant, Timebound, but also Inclusive and Equitable.</li> </ol>	<ul style="list-style-type: none"> <li>• The number of new community partners and collaborations.</li> <li>• The number of SMARTIE Goals identified in the CHIP.</li> </ul>
<b>Goal: 9</b>	<b>GRDHD will increase utilization of customer feedback through the use of GRDHD customer satisfaction survey.</b>	<b>Measure</b>
<b>Objective: 1</b>	<b>By October 31, 2023, GRDHD will create a group of agency staff representing areas throughout the health department to develop goals for improving the usage of customer satisfaction surveys and data.</b>	
	<ol style="list-style-type: none"> <li>1. By June 30, 2023, define targeted collection dates for programs to encourage customer satisfaction surveys.</li> <li>2. Create a QR code that can be utilized with business card, on business forms, in presentations during community events, etc. By June 30, 2023, create appointment card QR code, on back of personal business cards.</li> </ol>	<ul style="list-style-type: none"> <li>• Minutes of the group documented.</li> <li>• Email communicating the new QR code to be utilized in surveys.</li> </ul>

<b>Objective: 2</b>	<b>By December 31, 2023, GRDHD staff will research methods to collect information that would allow communication of satisfaction data in languages that represent the population served in GRDHD.</b>	
	<ol style="list-style-type: none"> <li>1. By October 31, 2023, interpret Surveys into three languages.</li> <li>2. By December 31, 2023, implement electronic surveys in chosen program.</li> </ol>	<ul style="list-style-type: none"> <li>• Minutes of the group documented.</li> <li>• Email with interpreted surveys.</li> <li>• Link and feedback from the survey.</li> <li>• Number of customer surveys completed.</li> </ul>
<b>Objective: 3</b>	<b>By February 28, 2024, GRDHD will develop a reporting mechanism for all agency programs to receive feedback and determine need for improvement of services.</b>	
	<ol style="list-style-type: none"> <li>1. By February 28, 2024, define who collects, analyzes, reports and follow up on information, who is designated to receive that information and share with their program quarterly.</li> </ol>	<ul style="list-style-type: none"> <li>• Minutes of group documented.</li> <li>• Quarterly reports from Alchemer software to programs for follow up and improvement.</li> </ul>

## LINK TO OTHER PLANS

The 2023-2027 GRDHD Strategic Plan spans January – December of 2023, 2024, 2025, 2026, and 2027. The selection of a five-year plan creates an alternating schedule with other agency plans and activities to assure alignment of efforts. As GRDHD commences its fourth Community Health Assessment/Community Health Improvement Plan cycle, there is the possibility that regional strategic initiatives will change. Since current plans are coming to an end and new plans have yet to be written, developing specific strategic plan tactics to coincide with other agency plans was a challenge. In many cases, the structural course of action was written with details of the final strategies being dependent on content not yet determined. (See Appendix A to how the Strategic Plan links to other GRDHD plans.)

## CHA CHIP

Goal 8 directly correlates to the Community Health Assessment and Community Health Improvement Plans. With the increased emphasis on health equity in our assessments and community outreach, it was imperative that we as an agency focus on equity in all of our operations including evaluating current data sources, reaching out to additional partners and resources, and assessing the current populations and coalition recruitment.

We will also work with our local coalitions to develop our CHIP and strategize objectives and strategies to address identified health needs in the CHA that are Specific, Measurable, Achievable, Relevant, Timebound, Inclusive, and Equitable.

## WORKFORCE DEVELOPMENT

Goal 1 and 2 specifically address needs identified in the Workforce Satisfaction Survey and SWOT analysis related to recruitment and retention of employees and growing leaders in our current workforce to prepare for upcoming retirements of key staff. Our Workforce Development Plan will address the objectives and strategies outlined in this plan.

## PERFORMANCE MANAGEMENT

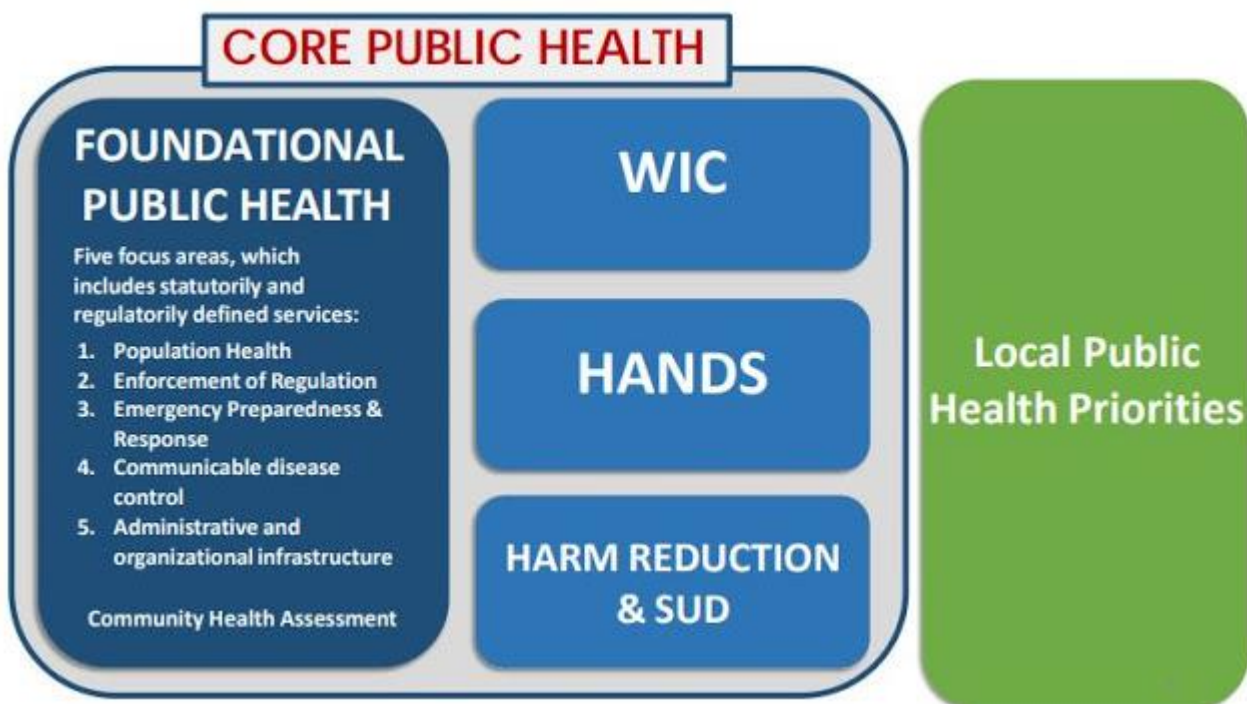
The Strategic Plan makes up an integral part of the Performance Management Plan. Goals and objectives identified in this plan will be tracked monthly by the Performance Management team. GRDHD will utilize identified performance measures in the Strategic Plan to guide program planning and operating procedures for both our internal and external operations.

## QUALITY IMPROVEMENT

Quality improvement is essential to GRDHD operations. We will utilize the findings of both our SWOT analysis and Workforce Satisfaction Survey to continue the promotion of Continuous Quality Improvement in the agency. GRDHD has already begun to implement aspects of Goal 2 into current QI projects by reviewing and documenting standard procedures for two programs. Goal 9 specifically addresses customer feedback; data captured through customer feedback will be utilized for both our Performance Management and Quality Improvement systems to monitor outcomes and progress in our services and programs and guide the selection of QI projects.

## CAPACITY ASSESSMENT

In developing this strategic plan, GRDHD management evaluated the capacity of the organization to deliver essential services and act as a high functioning public health agency. This evaluation included a review of the mandatory functions as described by the Kentucky Department for Public Health as “Foundational Capabilities” and “Core Public Health Services”



Assessment of health department services found that GRDHD was providing the mandatory services and possessed the functional capabilities. The strategic planning process identified strategies for GRDHD to improve on these existing capacities to provide these core services. GRDHD demonstrates the capacity and commitment to continuously improve public health programs to positively affect the health of our seven county region. We will also utilize our CHA/CHIP process to identify local health priorities and work with partners and the community in addressing them.

The current strategic planning cycle focuses on the following capacity areas:

**Communication:** Improving communication will benefit the entire agency in carrying out both the core services, and health messaging to the community. Both internal and external communication were identified in our analysis of Workforce Satisfaction Surveys. Through the COVID pandemic, GRDHD developed new partners and had an increased visibility in the community. GRDHD will build upon this to promote our other services, programs, and messaging.

**Employee Health and Safety:** Employee health and safety is always a high priority for GRDHD. In the past several years, mental health has been an increasing priority area for both the CHA and CHIP and is also an increased priority for many employers. The COVID-19 pandemic particularly put a strain on the



public health workforce. To address this issue, we will build upon current programs and services and identify other opportunities for employees who need services. GRDHD will also continue to evaluate practices and facilities to improve safety for employees.

**Health Equity:** Health equity has been a priority for GRDHD. This goal was a carryover from the previous cycle. Part of the goal in this current plan is to evaluate our capacity to improve and implement health equity in our agency and adjust programs and staffing accordingly.

**Workforce Development:** Training and development of the workforce is one part of a comprehensive strategy toward agency quality improvement. Fundamental to this work is identifying gaps in knowledge, skills, and abilities through the assessment of both organizational and individual needs, and addressing those gaps through targeted training and development opportunities. The Workforce Development Plan provides a strategic direction based on agency & workforce profile, competencies & education requirements and training needs. GRDHD strives to foster an environment where learning is a continuous ongoing endeavor undertaken by all staff with complete support from management. GRDHD desires to be pro-active in meeting learning needs of all staff, with management encouraging staff to seek out training opportunities as well as providing resources for staff training and learning. GRDHD will also look to identify and promote future leaders within the agency (Goal 2).

## PLAN IN ACTION

This document functions as a guide for achieving the goals laid out by both staff and leadership of GRDHD. The 2023-2027 Strategic Plan is a living document that serves to direct the operations and priorities of GRDHD and the mission, vision and values of the department.

## MONITORING

GRDHD Performance Management Team will be required to monitor the overall progress of the goals and objectives through their monthly meetings. Designated teams and leads will be formed for each goal, which will be responsible for executing the objectives identifying any issue or barriers to completion and reporting them to the Performance Management Team. Some changes will be subject to the approval of Senior Management. Details will be documented in monthly Performance Management Team meeting minutes.

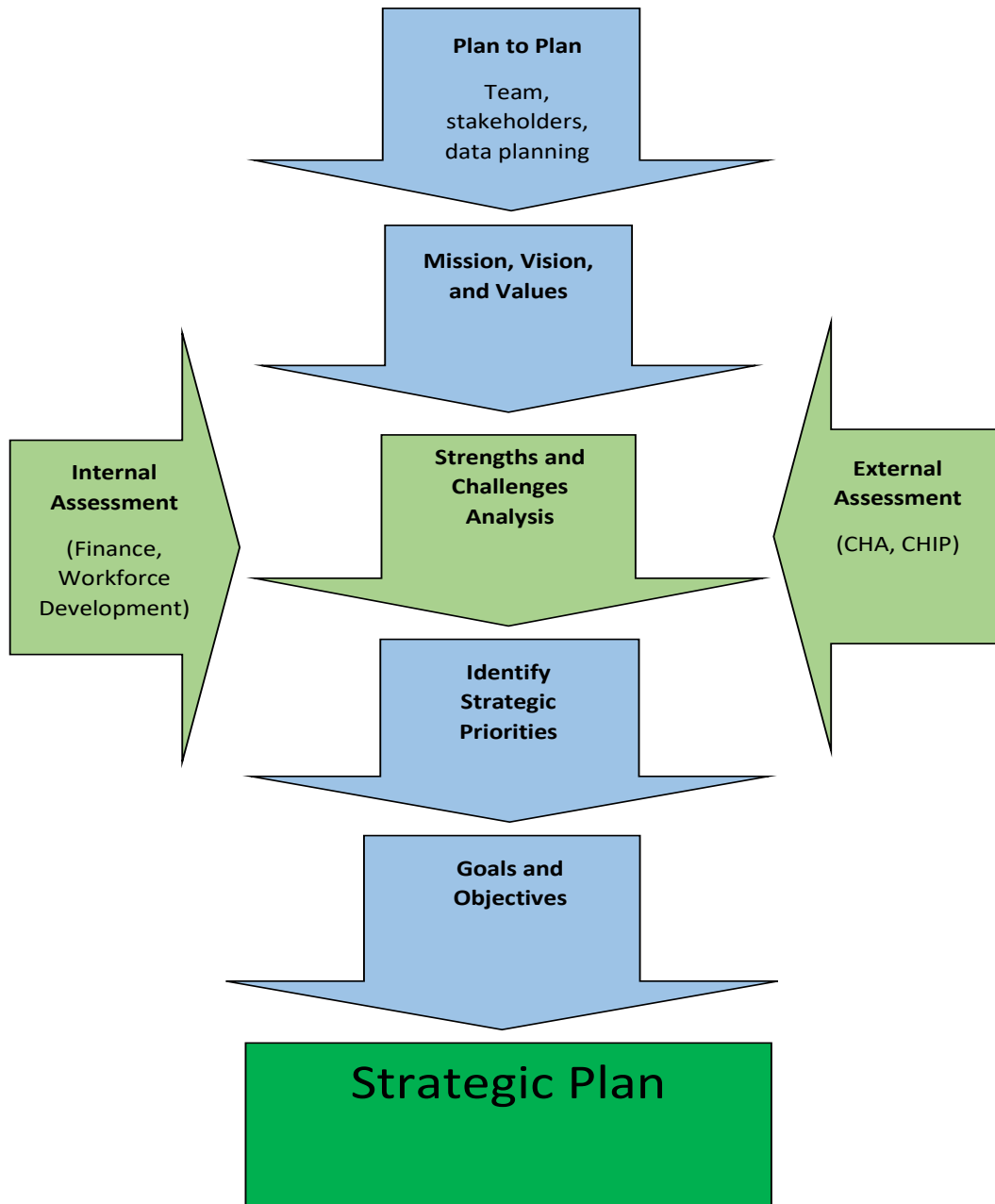
The Accreditation Coordinator will track progress on the plan through the Performance Management software Clear Impact and spreadsheets. The coordinator will provide quarterly and annual updates for the full strategic plan. These will be shared with the Board of Health and staff through meetings and publications posted to the internal shared network and website.

## COMMUNICATION

Communication of our strategic plan will be done in various avenues. The 2023-2027 Strategic Plan will be presented and approved by the district board of health at one of their quarterly meetings which are open meetings. We will also distribute the entire plan to our workforce through email. GRDHD leadership feels that it is important to communicate to staff that their feedback was appreciated and utilized in setting our goals and objectives going forward. We will also put the entire plan on our website for community members and partners to review.

(This page intentionally left blank)

*Green River District*  
HEALTH DEPARTMENT



Planning for Plan				
Activity/Purpose	Timeline	Justification	Participants	Progress
1. Determine readiness for strategic planning	April – May 2022	Due to the COVID 19, GRDHD had to reform the PM Team and determine a strategy for word for several plans.	GRDHD Director/Accreditation Coordinator	Completed May 2022
2. Identify strategic planning committee leadership	May 2022	PM Team has taken lead of all plans	GRDHD Director/Accreditation Coordinator	Completed June 2022
3. Evaluation of 2018-2021 Strategic Plan	May 2022	The PM team needs to determine the status of the previous Plan	Senior Management Team Performance Management Team	Completed June 2022
4. Identify Stakeholders in the Strategic Planning Process	June 2022	Input will be needed internally and externally for a comprehensive strategic planning	Senior Management Team Performance Management Team	Completed June 2022
5. Determine levels of engagement needed from stakeholders.	June 2022	<ul style="list-style-type: none"> <li>• Staff completion of Employee Satisfaction Survey (Workforce Culture Assessment); QI Culture Assessment</li> <li>• BOH Survey (electronic or in-person)</li> <li>• Customer Satisfaction Surveys (Clinic Satisfaction, other GRDHD programs)</li> </ul>	Senior Management Team Performance Management Team	Completed October 2022
Data Gathering				
1. Senior Management Interviews: collect directional data	September 2022	Review of past data. Incorporate new data sources. Internal – Past strategic plan, QI Plan, Financials, Annual Report, Workforce Survey, External - CHA, CHIP, Customer Feedback.	Senior Management, Accreditation Coordinator	Completed September 2022
2. BOH SWOT	October 2022	Internal analysis of SWOT from the BOH	Accreditation Coordinator	Completed October 2022
3. All Staff Survey: collect directional data	August – September 2022	New workforce survey needs to be conducted.	All Staff (123 results/~75%)	Completed September 2022
4. SWOT analysis of departments	August – November 2022	Completed – Nutrition, Community Ed, HANDS, First Steps,	Senior Management Team	Completed November 2022

		Nursing and Clerical Supervisors, Home Health, CAP, Union County	Performance Management Team, Program Managers	
4. Supervisors Session: vision, mission, values, SWOT, potential action items	November – December 2022	Strengths/Challenges will be captured in SWOT that is part of Workforce Culture Assessment	Program Managers & Supervisors	Completed December 15, 2022
5. Senior Management/Performance Management Discussion: Review results, next steps	February 2023	Compellation of data.	Director, Senior Management	Completed February 13, 2023
6. Work Sessions: goals and objectives	February/March 2023	Identification of priority areas.	Director, Senior Management, Performance Management	Completed February 24, 2023
7. Status Update: progress of goals & objectives, Board of Health Presentation	April 2023	Presentation to the Board for approval	Director, Accreditation Coordinator	
8. Work session: final draft goals and objectives	April 2023	Finalization of the plan.	Director, Senior Management, Performance Management	

Data Assessment			
Data Needed	Source	TimeLine	Progress
Community Health Assessment Primary data *Forces of Change, Strengths and Themes	<ul style="list-style-type: none"> <li>Focus groups</li> <li>Surveys</li> <li>Community Partners (i.e. local hospitals, law enforcement)</li> <li>Photovoice</li> </ul>	March – May 2022	In progress
Community Health Assessment Secondary Data *Community Health Status Assessment	<ul style="list-style-type: none"> <li>BRFSS</li> <li>County Health Rankings</li> <li>Kentucky Health Facts</li> <li>Program Staff</li> </ul>	June – March 2022	In progress
*Local Public Health Systems Assessment	<ul style="list-style-type: none"> <li>Community Partners</li> </ul>		
Workforce Development Survey	<ul style="list-style-type: none"> <li>Staff</li> </ul>	August – September 2022	Completed September 2022
Customer Satisfaction Survey	<ul style="list-style-type: none"> <li>Survey Monkey</li> </ul>	Bi – Yearly	Completed 1/6/2022
Strategic Plan 2018-2021	<ul style="list-style-type: none"> <li>SP 2018-2021</li> <li>SP Updates</li> </ul>	June 2022	Evaluation Completed June 2022
Performance Management	<ul style="list-style-type: none"> <li>Clear Impact</li> <li>Strategic Plan updates</li> </ul>	Continuous	Annual Report/ PHAB report October 2022

The Green River District Health Department Workforce Satisfaction Survey is in a separate document.



## APPENDIX C – 2018-2021 EVALUATION

### GOALS/OBJECTIVES

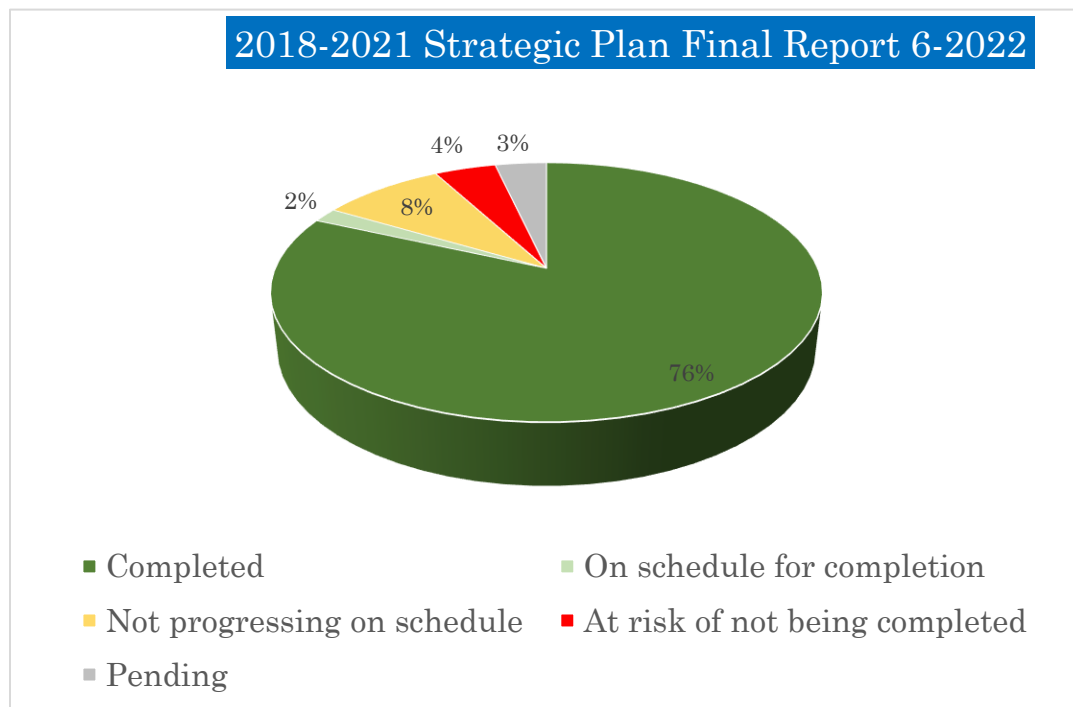
For the 2018-2022 Strategic Plan, two Strategic Priorities were established to provide focus for Agency direction and growth. These priorities encompass the over-arching themes developed during the strategic plan process, provide a continuum between previous and current plan efforts, maintain alignment with the Ten Essential Public Health Services and strengthen the vision, mission and values of GRDHD.

#### Improve Community Outreach and Service

#### Improve Agency Culture and Capacity

Two additional concepts emerged during the strategic planning process: **customer service** and **communication**. Since both are key to the success of the agency and its goals, these were adopted as “common themes” for the 2018-2022 Strategic Plan. Aspects of the customer service and communication focus are present throughout the tactics to support the overall goal(s).

In May 2022, the Performance Management group reviewed all goals and programs from the 2018-2021 plan. Below is the progress made on the goals selected as of June 2022. The results of this strategic plan will be evaluated in the development of the new strategic plan.



## Improve Community Outreach and Service

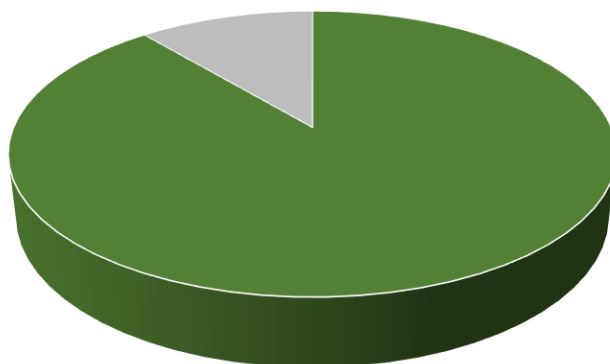
### Goal 1: GRDHD will expand the Community Health Assessment annually during the 2018-2021 Cycle.

- A. Annually by March, publish CHA update with expanded data report on select issues.
1. By July 15, 2018 (2019, 2020\*), utilize CASPER or other new primary data resource results to identify health issues, contributing factors, and/or specific population groups for further study
  2. Collect data from subject matter experts or gather additional primary data by December 31, 2018 (2019, 2020\*)
  3. Write report of data / findings by March 2019 (2020, 2021\*)
  4. Publish as annual CHA update by March 31, 2019 (2020, 2021\*)

\*Repeat steps 1-4 utilizing a new issue or population group

EPHS: 1, 2, 3, 4, 7, 10

#### Goal 1 Final Report 6-2022



- Completed
- On schedule for completion
- Not progressing on schedule
- At risk of not being completed
- Pending

#### FINAL REPORT NOTES

Due to the COVID 19 pandemic, some of the CHA updates were not completed on schedule, but the final update was published June 2021 and uploaded to the website. Some primary data was collected during the pandemic through the Community Education programs and events along with the vaccine outreach. This goal has been deemed complete.

#### LINKED TO:

Community Health Assessment  
Community Health Improvement Plan  
PHAB 1,2,3,4,7,9,10  
Essential Public Health Services 1,2,3,4,7,10  
PH 3.0/HP 2020

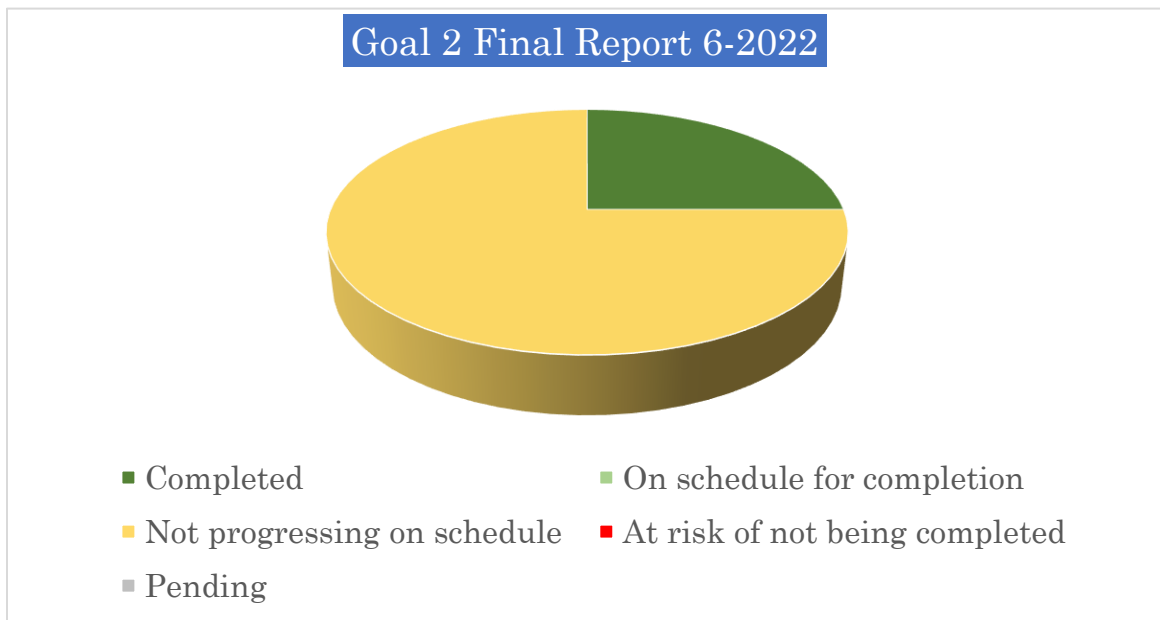
**Goal 2: By January 31, 2019, GRDHD will identify health department actions to support 2018 CHIP initiatives at county and district levels.**

A. By August 1, 2018, GRDHD will establish at least one goal per 2018 CHIP strategic initiative and develop measurable activities to pursue at the county/district level throughout the cycle.

1. Meet with GRDHD programs to select activities aligned with initiatives
2. Establish program approved (health outcome related) metric for tracking in Clear Impact
3. Identify frequency, person & method for reporting program metric progress to PM team for posting in Clear Impact

B. By October 31, 2018 GRDHD will identify methods to partner with local organizations to offer events/activities or joint campaigns to address CHIP initiatives.

EPHS: 1, 3, 4, 5, 7, 9



**FINAL REPORT NOTES**

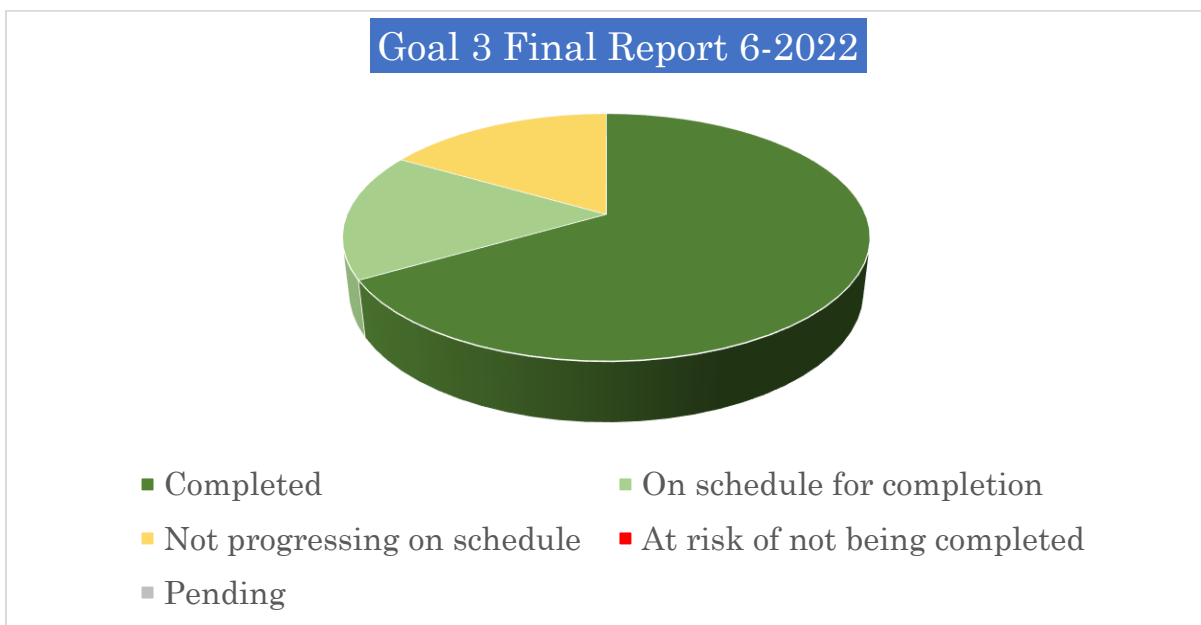
There was a final CHIP update published in July 2020. This was based upon established goals set by the local coalition and the activities that were completed during the cycle. The update was shared with the coalition and published on the GRDHD website. Some activities and events were cancelled due to the COVID 19 pandemic. Data was not published in Clear Impact and a schedule was not established.

**LINKED TO:**

Community Health Assessment  
Community Health Improvement Plan  
Performance Management  
Quality Improvement  
PHAB 1,3,4,5,7,9,10  
Essential Public Health Services 1,3,4,5,7,9,10  
PH 3.0/HP 2020

**Goal 3: By October 31, 2021, GRDHD will support health equity by identifying and monitoring up to 5 health outcomes to address the community's needs**

- A. By July 1, 2019, identify specific health outcomes of focus for at risk/vulnerable (disparate) populations
    - 1. By March 31, 2018 identify trackable health outcomes of focus
    - 2. By April 30, 2018 present list of possible topics to PM/SM for review/selection
    - 3. By August 31, 2018 develop high risk group data profile and contributing factors linked to selected health problems.
    - 4. By July 1, 2019, develop plan of targeted messages, initiatives & interventions for GRDHD programs to complete.
  - B. Set Baseline data by using 2017-2018 data.
  - C. Monitor outcomes monthly or quarterly beginning July 2019, continue monitoring throughout plan
- EPHS: 1, 2, 3, 4, 5, 7, 9*



**FINAL REPORT NOTES**

Health outcomes were identified at the beginning of the cycle, but due to the COVID 19 pandemic, quarterly updates were not completed. We will continue to evaluate baseline data throughout the next CHA/CHIP schedule and next round of re-accreditation in relation to health equity to assist us in new goals and objectives.

**LINKED TO:**

Community Health Assessment  
 Community Health Improvement Plan  
 Performance Management  
 Quality Improvement  
 Branding  
 PHAB 1,2,3,4,7,9,  
 Essential Public Health Services 1,2,3,4,5,7,9,  
 PH 3.0/HP 2020

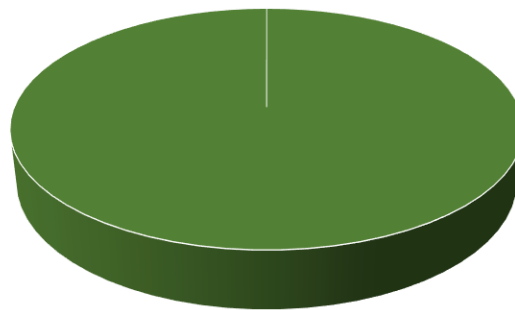
**Goal 4: By December 15, 2020, GRDHD will develop and implement a policy advocacy plan for use in shaping public health policy.**

A. By August 31, 2018, GRDHD Senior Management team will establish a policy advocacy planning process and integrate into PM (Plan of Plans) review cycle.

1. By August 31, 2018, GRDHD Senior management will complete a draft of a policy advocacy plan that includes a prioritized list with a minimum of 3 specific areas where policy development or improvement is needed for the district.
2. By December 15 of each year 2018 -2020, GRDHD will develop standardized messages addressing the policy improvements that will positively impact the health of the community for one of the specific areas listed in the plan.
3. GRDHD will partner with appropriate stakeholders to conduct policy assessment for focus areas and provide recommendations regarding policy change.

*EPHS: 3, 5, 6, 9*

**Goal 4 Final Report 6-2022**



- Completed
- On schedule for completion
- Not progressing on schedule
- At risk of not being completed
- Pending

**FINAL REPORT NOTES**

This goal was deemed as complete. Policy advocacy was focused on syringe exchange programs in Henderson and Daviess, advocating for smoke free laws in Hancock and Ohio with the assistance of Foundation for Healthy Kentucky, and messaging around public health transformation and funding for public health. GRDHD continues to advocate for policies that improve the health of the general population and increases the ability of the public health workforce to improve health outcomes.

**LINKED TO:**

Community Health Assessment  
Community Health Improvement Plan  
Performance Management  
Policy and Procedures  
PHAB 3,4,5,6,7,9,10,12  
Essential Public Health Services 3,5,6,9,  
PH 3.0/HP 2020

## Improve Agency Culture and Capacity

**Goal 5: GRDHD will create a comprehensive branding strategy based on branding policy by June 30, 2019.**

- A. Public Information & Communications Committee will develop GRDHD brand specifics including logo/emblem, standardized identification, and staff role in brand management for incorporation into branding policy by December 31, 2018
  - 1. Senior Management will approve Public Information & Communications Committee revisions to branding policy by December 31, 2018.
  - 2. Public Information & Communications Committee will develop target messages related to our agency “brand”) (i.e. Promoting healthy and safe communities ... Proudly serving Daviess, Hancock, Henderson, McLean, Ohio, Union & Webster Counties ...).
  - 3. Public Information & Communications Committee, along with Senior Management and GRDHD Supervisory staff, will implement strategy including standardized identification signs, phone greetings, etc., and train staff as necessary by June 30, 2019.

EPHS: 3, 7, 8, 9



### FINAL REPORT NOTES

This goal is complete. A branding policy was developed to standardize the process of branding materials, advertising, presentations, and writing documents for staff. Logos were standardized and old logos were eliminated from use. Standardized phone messages were sent to staff. The agency vision and mission were reviewed and updated during the strategic planning process.

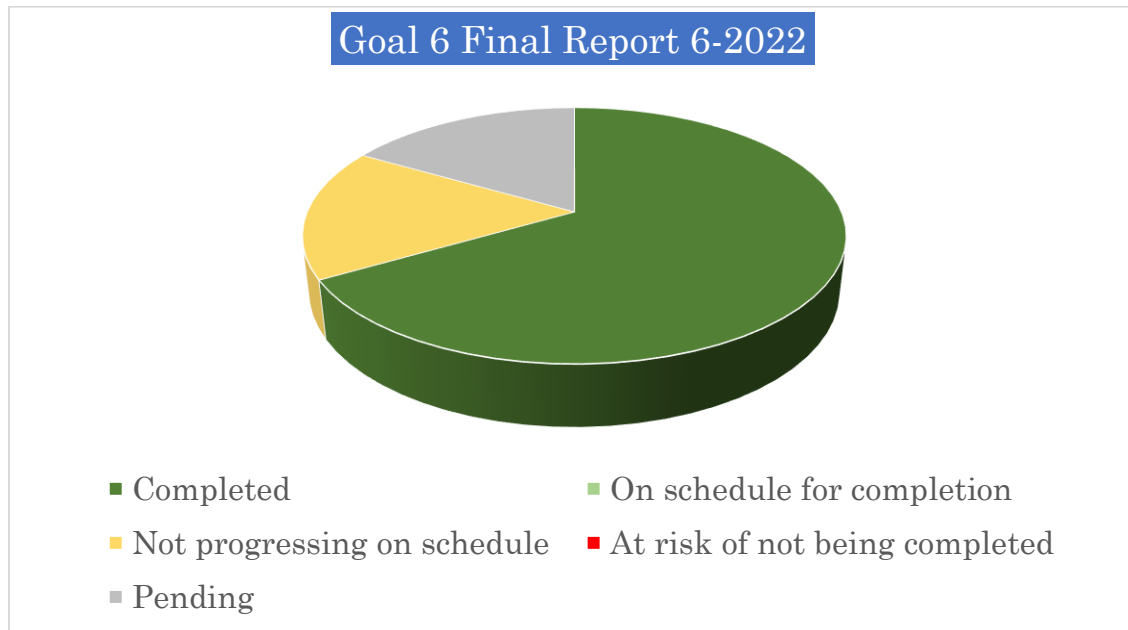
### LINKED TO:

Community Health Assessment  
Community Health Improvement Plan  
Branding  
Communication  
Workforce Development  
PHAB 3,11  
Essential Public Health Services 3,7,8,9

**Goal 6: By July 2020 GRDHD will improve the organizational culture of quality focusing on customer service & communication.**

- A. Established committee will develop customer service and communication expectations by Oct 31, 2018.
  - 1. Senior management will review customer service and communication expectations by December 31, 2018.
  - 2. Senior management will develop a policy on customer service cross-referencing communication policies expectations by July 31, 2019.
  - 3. Baseline data will be gathered by a survey to staff on attitudes about customer service and communication by April 30, 2019.
  - 4. All staff will receive training on customer service and communication expectations by December 31, 2019.
  - 5. A post survey will be done on evaluating the effectiveness of training by June 30, 2020.

EPHS: 3, 5, 7, 8, 9



**FINAL REPORT NOTES**

The majority of this goal was determined complete. Expectations related to customer service were selected and approved by Senior Management. A customer service survey was sent to clinics. Due to the pandemic, the training could not be scheduled, but staff is looking to the possibility of holding the training in the future.

**LINKED TO:**

Policy and Procedures  
Quality Improvement  
Workforce Development  
Communication  
Branding  
Essential Public Health Services 3,5,7,8,9,  
PHAB 3,5,7,8,9,11



**Goal 7: GRDHD will provide ongoing professional development opportunities for all staff in various formats including annual training with KY Train, trainings during staff meetings and target specific trainings as appropriate.**

- A. Revise WDP by August 2018, to incorporate diversity/cultural sensitivity training, program awareness, technology training, customer service, communication and job specific skills into the plan.
1. Inform and advise staff about purpose of WDP beginning in January 2019 through emails, Gazette articles, staff meetings, etc.
  2. GRDHD will offer continuing education opportunities and professional development that include subjects such as diversity/cultural sensitivity training, program awareness, technology training and job specific subjects.

EPHS: 3, 5, 7, 8, 9,



#### FINAL REPORT NOTES

This goal is complete. The Workforce Development Plan was revised and reviewed to be deemed as complete. Staff was communicated about the plan through a Gazette article. Health equity training was provided to supervisors. The annual training plan was reviewed and updated.

#### LINKED TO:

Quality Improvement  
Workforce Development  
Communication  
Essential Public Health Services 3,5,7,8,9,  
PHAB 3,5,7,8,9,11By

**Goal 8: By June 1, 2020, GRDHD will foster the development, maintenance and expansion of Academic Health Department (AHD) relationships.**

- A. By August 1, 2018, GRDHD will establish a list of at least 5 potential research projects that can be promoted to schools (interns/classes).
1. By June 1, 2020, GRDHD in partnership with other local health departments in Kentucky will sponsor an event during KPHA or other conference to recognize partner colleges & universities.
  2. Promote at least one joint research project by presenting or publishing results at public or professional conferences annually starting in 2019.

EPHS: 1, 2, 8, 10



**FINAL REPORT NOTES**

Prior to COVID19, this goal had already been identified as needing revision. The tactics state we will sponsor an event recognizing partner college/universities which is a regular item at the Kentucky Public Health Association's annual conference. However, the past few years the conference has been in Northern Kentucky which has presented some logistical difficulties. We also said we would partner on research, and we are exploring those opportunities. Currently, there are no plans to complete this goal.

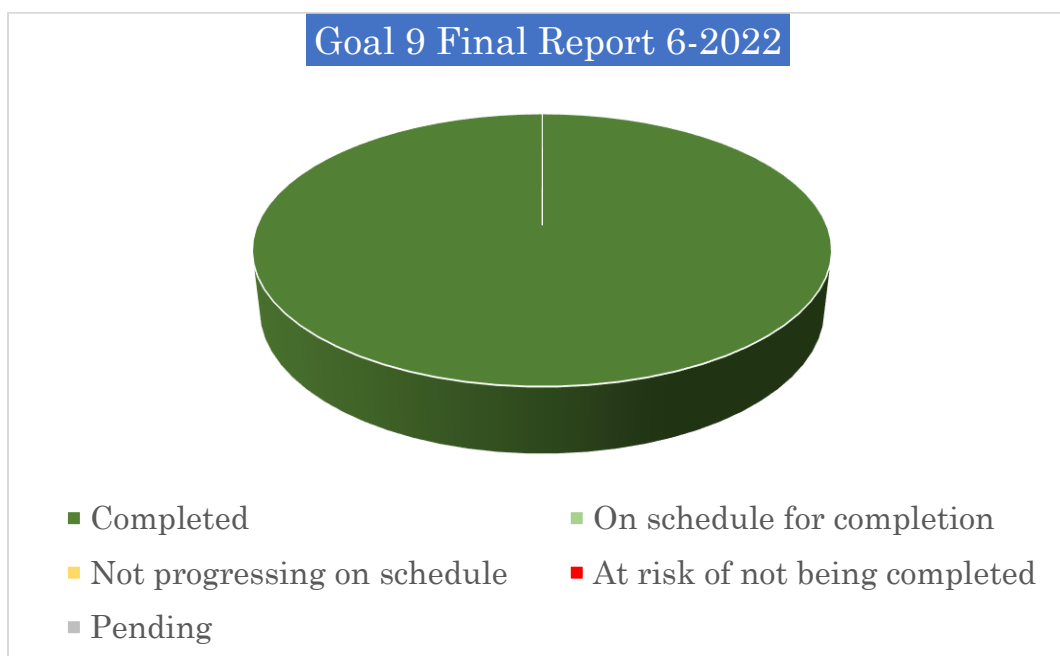
**LINKED TO:**

Community Health Assessment  
Community Health Improvement Plan  
Essential Public Health Services 1,2,8,10  
PHAB 1,2,8,9,10,11

**Goal 9: Develop a long term technology plan which includes 1, 2, and 4 year goals for the Agency by January 31, 2019**

- A. By April 30, 2018, establish a committee/workgroup with diverse representation to perform a SWOT analysis of agency technology gaps, needs and areas for improvement.
1. Recommend a 4 year equipment replacement plan to Senior Management by August 31, 2018.
  2. Conduct a SWOT analysis by December 31, 2018 and every 2 years thereafter to identify and prioritize technology needs and potential solutions.
  3. By January 31, 2019, utilize SWOT results to identify and develop job specific and/or overall IS training (internal or external offerings) opportunities for all staff.
  4. Utilize SWOT results to identify and amend equipment 4 year lifecycle replacement plan by January 31, 2019.
  5. Pursue at least 1 grant and/or alternative solutions to assist in improving technology resources throughout the agency by December 31, 2021. Identify experienced grant writing staff to research opportunities or assist in linking technology (equipment/training) needs to programmatic grant applications.

EPHS: 8, 9, 10



**FINAL REPORT NOTES**

This goal has been completed. A committee was formed, and SWOT analysis and a survey were conducted with staff. The equipment replacement cycle was conducted. An analysis of technology needs during the pandemic has been ongoing as our needs/role has changed. IS staff applied and received Rural Healthcare Grant funding to offset internet costs in our rural counties.

**LINKED TO:**

Workforce Development  
Essential Public Health Services 8,9,10  
PHAB 8,9,10,11