

# Strategic Plan

## 2017-2021



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**Public Health**  
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Acknowledgements

Thank you to those who offered their time and expertise toward the development of the Kenton-Hardin Health Department Strategic Plan 2017-2021. Participants include:

**Kenton-Hardin Health Department Leadership, Management, Supervisors and Program Managers**

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Cindy Keller, RN	Nursing Division Director
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Arin Tracy	Accreditation Coordinator & Emergency Response Planner

**Kenton-Hardin Health Department Board of Health**

- Robert Wood, President
- Jeryl Kissling, Vice President
- Roger Crates
- Larry Oates, MD
- Corey Scarbrough
- Jackie Brown
- Jamie Hunsicker

**Kenton-Hardin Health Department Staff Members**

Derek Dunson	Environmental Health Registered Sanitarian
Pam Fox	Fiscal Officer
Mindy Hensel	Communicable Disease Program & Family Planning Program Nurse
Alexa Heacock	Bureau of Children with Medical Handicaps Program Nurse
Melissa Humble	Help Me Grow Program Nurse
Jennifer Newland	Clerk / Billing
Kelsey Ralston	Public Information Officer
Diana Carroll-Aghdam	Prescription Drug Overdose Project Coordinator

**Hospital Council of Northwest Ohio**

Emily A. Golias	Community Health Improvement Coordinator
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**Stakeholder Participation**

The Kenton-Hardin Health Department strives to keep avenues of communication open with our community stakeholders. In doing so, stakeholders are well-informed of Public Health initiatives and activities. Our partnerships are invaluable; collaboration between both KHHD and community partners allows for increased resources, enhanced relationships, greater positive outcomes, and improved public health. Thank you to all!

The Kenton Hardin Health Department is a combined city and county health department providing services to Hardin County, a rural county in Northwest Ohio, with a population of 31,474 (US Census Bureau, Census 2016).

Hardin County is a HPSA (Health Professional Shortage Area), ratio of 3,960:1 primary care providers and 5,300:1 Mental Health Providers (County Health Rankings, 2016). Unemployment is 4.3%, compared to state at 4.8% (April 2016, Homefacts). We continue to have high rates of poverty, as many jobs are minimum or low wage jobs. According to County Health Rankings 2016, income inequity in Hardin County is 4.2%, compared to the state at 4.8%, and disparity is seen in educational attainment. Because Hardin County is not a very diverse rural community, poverty is identified as the highest factor leading to health inequities in our county. Reasonably, KHHD feels it is important that policies and systems are in place to identify resources readily available for prevention of disparities, monitoring of population health, and the use of quality data to prioritize target impacted public health areas.

The organizational structure of the Kenton-Hardin Health Department is shown on page 10. The Board of Health consists of 7 members who meet monthly to enable the organization to achieve its purpose. The board consists of two representatives from the city, four from the county and one from the licensing board. The staff of the Health Department consists of a part time Health Commissioner, and a part time Public Information Officer/Public Affairs, and a full time Director of Nursing with three RN's that work at the Health Department in various programs, one each full time Environmental Director, Sanitarian, Vital Statistics Officer, Fiscal Officer, Clerk, Injury Prevention Coordinator and one full time employee that serves as the combined Emergency Preparedness & Response Coordinator and Accreditation Coordinator. Our staff totals 10 full time staff and 2-part time staff who function very smoothly between multiple tasks.

KHHD Board of Health Members are strongly committed to the process of achieving Accreditation. Board members, health department staff and community stakeholders came together in the year 2014 and worked diligently to complete the first comprehensive Community Health Assessment for Hardin County since the early 1990's. The Kenton Hardin Health Department worked and collaborated with Community Partners to see the first Comprehensive Community Health Assessment conducted. A Community Health Assessment Advisory Committee was formed. This committee was responsible to determine the process, structure and funding of a community health assessment. This work led to a successful partnership with the Hospital Foundation of Northwest Ohio, one of the top recognized community assessment programs in the nation. To meet standards this process will be repeated every three to five years. The next steps include a Health Department Strategic Plan, followed by a Community Health Improvement Plan (CHIP). The CHIP will be a collaborative effort with strategic stakeholders working together to address community needs. We continue to keep the Advisory Committee engaged through each step of the Accreditation process. In addition, KHHD continues to assess for strength and gaps in the committee and conducts on-going partnership building activities.

In the Spring of 2015, Kenton Hardin Health Department released the Comprehensive Community Health Assessment. In April, the Health Department invited partners, stakeholders and the community to the public release and data assessment of the Hardin County Community Assessment Report. Next steps have included Focus Groups and staff education. Focus Group meetings were developed to select public health priorities for the Health Department Strategic Plan and the Community Health Improvement Plan (CHIP). The Focus Groups have included external partners and stakeholders from the county, and the Community Health Advisory Committee, as well as internal groups such as the Board of Health

and the Kenton Hardin Health Department staff members. We continue to conduct staff education and planning to improve our structure and to meet the 12 Standards and Measures of Public Health Services.

July 2015, the Kenton Hardin Health Department revamped the Mission of the Health Department and created a Vision and Value Statements, developed Domain Teams and Leaders and began the process of preparing documentation according to the guidance contained in the standards and measures for application. A SWOT assessment was conducted in November 2015 to identify successes and challenges which the Health Department and stakeholders were facing; actionable items were built for each category.

In May 2016, the initial Community Health Improvement Planning meeting was conducted with external partners and stakeholders from the county, and the Community Health Advisory Committee, as well as internal groups such as the Board of Health and the Kenton Hardin Health Department staff members. In October 2016 KHHD received a CHIP Grant to continue the process, with the Hospital Council of Northwest Ohio Association. The Community Health Improvement Plan for Public Health was completed May 2017. The first Quality Improvement initiative for substance abuse data, and to increase current substance abuse data from sources, started in October 2016. The CQI Team meets twice a month for this initiative. The Strategic Plan for the Health Department has been in process since 2015. As of December 2016, the Board of Health completed Strategic Planning Inputs for the Plan; two Internal Inputs and three External Inputs and was completed July 2017.

Kenton-Hardin Health Department also works with the Healthy Lifestyles Coalition of Hardin County on multiple community and population based initiatives. Future collaboration will include work with the Maternal Child Innovative funding, to explore potential evidence based activity programs which can be implemented in school and community functions.

## Linking the Strategic Plan, CHIP and Quality Improvement Plan

With the help of the Hospital Council of Northwest Ohio in 2014, the Kenton-Hardin Health Department collaboratively conducted a Community Health Assessment with community partners and community members which examined the system-wide public health needs; release Spring 2015. The Community Health Assessment can be found online at [www.kentonhardhealth.com](http://www.kentonhardhealth.com).

In the Fall of 2016, the Kenton-Hardin Health Department collaboratively began, with community partners and the HCNWO, a Community Health Improvement Plan which sets priorities for a system-wide response to the identified needs from the Community Health Assessment. The CHIP was completed May 2017.

The Kenton-Hardin Health Department along with the Board of Health for Hardin County has been working with an agency-specific Strategic Plan since 2015 that clarifies their role in addressing the identified needs of the county. The Strategic Plan was completed July 2017.

The Kenton-Hardin Health Department's Quality Improvement Plan focuses on initiatives that support the Strategic Plan and the CHIP.

The Kenton-Hardin Health Department will strengthen its monitoring of progress of its Strategic Plan, CHIP and quality improvement plan through a performance management system.



**MOTTO:**

Improving public health by promoting healthy choices

**VISION:**

Keeping Hardin County healthy by improving the lives of those we serve and strengthen our communities through collaborative partnerships.

**MISSION:**

To protect, maintain, and improve the health, environmental quality and safety of Hardin County residents.

**VALUES:**

The Kenton-Hardin Health Department is a citizen-driven organization that serves the community based upon its core values: Integrity, quality and excellence in service provisions through collaboration, preparedness, communication and accountability.



**Public Health**  
Prevent. Promote. Protect.

**COLLABORATION**

**PREPAREDNESS**

**COMMUNICATION**

**ACCOUNTABILITY**

**EXCELLENCE**

**INTEGRITY**

**QUALITY**

*Nursing – Environmental Health - Vital Stats – Fiscal –  
Emergency Preparedness - Accreditation*

**NURSING FOCUS**

Kenton Hardin Health Department Division of Health Services is focused and committed on meeting the needs of the community by addressing identified community priority needs. Priorities addressed are determined using Community assessments. Programs are developed and implemented utilizing evidenced base initiatives and evaluated for effectiveness based on outcomes. Programs and education efforts are focused at meeting the Mission of Kenton Hardin Health Department and the essential services and standards of Public Health.

**ENVIRONMENTAL HEALTH FOCUS**

The Sanitarians are committed to serving the public, through the application of scientific knowledge and experience to identify threats to public health and protection of the citizens of Hardin County.

**VITAL STATS FOCUS**

Certified copies of Birth Certificates are legal documents used for proof of age and identification. Citizens of the United States are required to produce them for schools, employment, passports, and many other uses. Certified copies of Death Certificates are also legal documents used for proof of death in probating estates and other uses.

**FISCAL FOCUS**

The fiscal officer is focused on accurate tracking of income and expenditures from all sources, paying careful attention to recording grant spending for proper reporting to maximize reimbursements from the approved grants. In addition, the finance committee will utilize the information recorded from past and present activity to effectively forecast and evaluate the financial position of the Kenton Hardin Health Department.

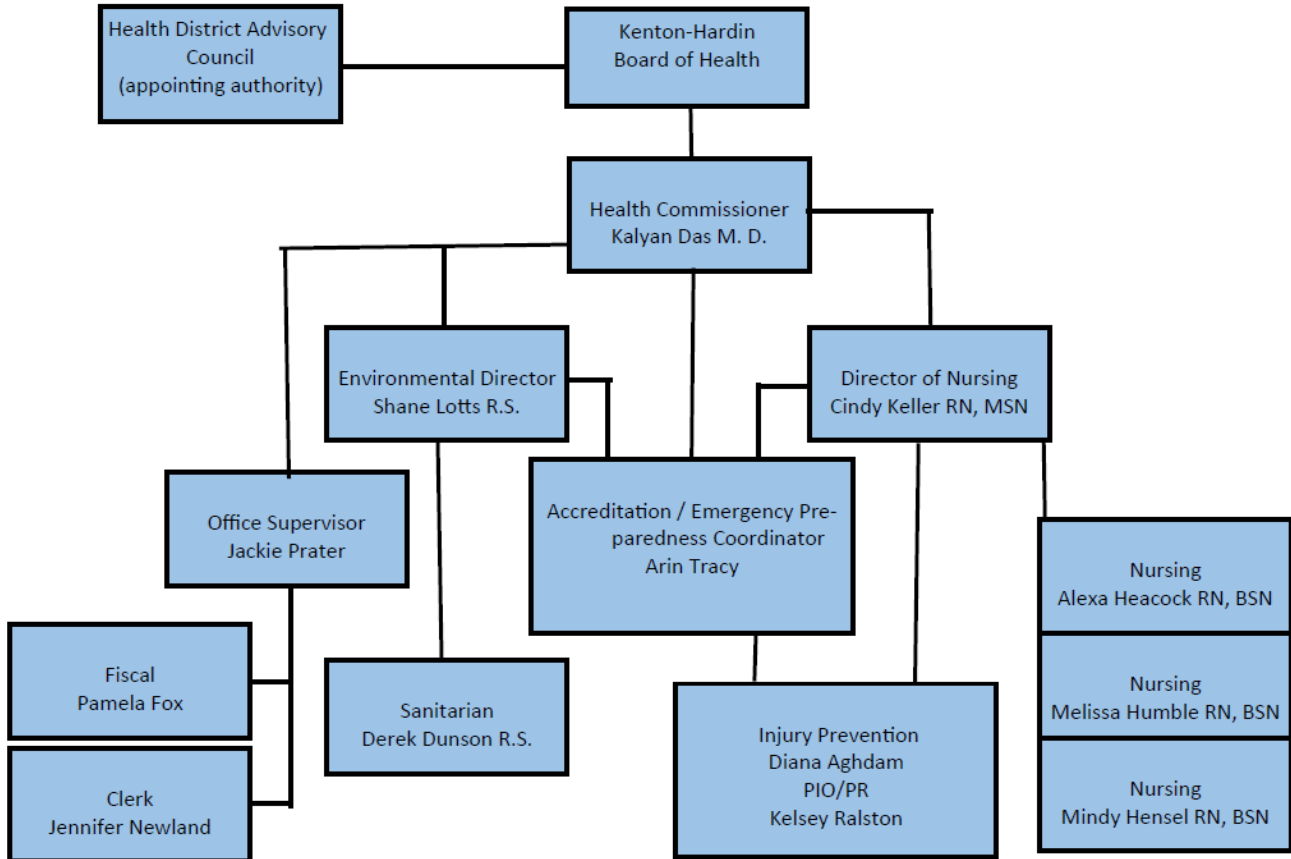
**EMERGENCY PREPAREDNESS FOCUS**

The Division of Emergency Preparedness within the Kenton-Hardin Health Department (KHHD) continues under the Public Health Emergency Preparedness (PHEP) Program, grant funding made possible through Centers for Disease Control (CDC) and the Ohio Department of Health (ODH). KHHD maintains local, regional, and state collaboration with ODH, the Central Ohio Regional Public Health, community partners and stakeholders, and the citizens of Hardin County. The Kenton-Hardin Health Department is committed to the ongoing development of Public Health Infrastructure in Hardin County, with the support from the Ohio Department of Health and the Centers for Disease Control and Prevention.



## **ACCREDITATION FOCUS**

Health Department's across the nation are working to provide services following a set standard of care. Although, there is nothing new about core functions and essential services provided by health departments, there is now a requirement to move toward becoming an Accredited Public Health Department. What this means to the community is that all Health Department's across the nation will provide services and care based on a set standard. This is the same concept as the Standard of Care you expect to receive from hospitals which are accredited. Within the state of Ohio, the mandate is to be Accreditation ready by 2018, with Accreditation achieved 2020.



Strategic Planning Inputs & SWOT Summary				
2015 CHA Indicators (as compared to state/national averages)		2015 County Health Rankings	CHIP Priorities	2015 Systems Assessment Priorities ( Top 3)
+	-			
<ul style="list-style-type: none"> <li>• High School Graduation Rate</li> <li>• Drinking water violations</li> <li>• Violent Crimes</li> </ul>	<ul style="list-style-type: none"> <li>• Access to Care</li> <li>• Behavioral Health</li> <li>• Length of Life</li> <li>• Physical Environment</li> <li>• Social/Economic Factors</li> <li>• Communication</li> <li>• Visibility</li> <li>• Public Relations</li> </ul>	<p><b>Health Outcomes:</b></p> <ul style="list-style-type: none"> <li>• 68 of 88</li> </ul> <p><b>Health Factors:</b></p> <ul style="list-style-type: none"> <li>• 59 of 88</li> </ul>	<p><b>PRIORITY #1: BEHAVIORAL HEALTH:</b> SUBSTANCE ABUSE</p> <p><b>PRIORITY #2: ACCESS TO HEALTH CARE:</b> COUNTY WIDE - MENTAL HEALTH, DENTIST, PRIMARY CARE</p> <p><b>PRIORITY #3: CHRONIC DISEASE:</b> OBESITY</p> <p><b>PRIORITY #4: COMMUNICATION:</b> INTERNAL AND EXTERNAL</p> <p><b>PRIORITY #5: PUBLIC RELATIONS:</b> VISIBILITY - INTERNAL AND EXTERNAL</p>	<ol style="list-style-type: none"> <li>1. ES#5: Develop Policies and Plans that Support Individual and Statewide Health Efforts</li> <li>2. ES#3: Inform, educate, and empower people about health issues</li> <li>3. ES#4: Mobilize partnerships to identify and solve</li> <li>4. ES#9: Evaluate effectiveness, accessibility, and quality of personal and population-based health services</li> </ol>

2015 SWOT Themes			
Strengths	Weaknesses	Opportunities	Threats
<ul style="list-style-type: none"> <li>◆ Identifying stakeholders</li> <li>◆ Previous knowledge of a CHA</li> <li>◆ Homework/footwork was accomplished beforehand</li> <li>◆ Pre-existing collaboration with stakeholders</li> <li>◆ Fostering engagement of Hardin County agencies</li> <li>◆ Education of CHA for stakeholder ownership</li> <li>◆ Resources at hand</li> <li>◆ Current committee diversity</li> <li>◆ Contractor produced quality assessment, statistics, product, with resource &amp; tool. Facilitator was informative and kept motivation and interest.</li> <li>◆ Cost of Return On Investment was good</li> </ul>	<ul style="list-style-type: none"> <li>◆ Need to identify production of process</li> <li>◆ Gaps in list of stakeholders; lack of political, government, town representatives.</li> <li>◆ Look at who fell out after the first meeting</li> <li>◆ Lack of experience at conducting a CHA</li> <li>◆ Short time frame to accomplish process</li> <li>◆ Format of invitation could be improved</li> <li>◆ Environmental Health and Emergency Preparedness need to be introduced into CHA</li> <li>◆ Manpower</li> <li>◆ Lack of understanding from partners</li> </ul>	<ul style="list-style-type: none"> <li>◆ Who will be our major stakeholders within healthcare in the county</li> <li>◆ Board of Health involvement with next CHA</li> <li>◆ Defining areas of health issues in our county</li> <li>◆ Assessment programs developed due to 2014 CHA</li> <li>◆ Building the "process" will allow more time to address the gaps</li> <li>◆ Admin team pulling other staff in for involvement</li> <li>◆ Build a case for COQ opportunities</li> <li>◆ Reaching out to other communities/county jurisdictions in Hardin County, not just Kenton;</li> <li>◆ Identify available resources and what we lack</li> <li>◆ Share resources and tools with other agencies</li> <li>◆ More players/ member are needed</li> <li>◆ Look for more funding opportunities</li> <li>◆ To become more efficient within the process by utilizing a timeline</li> <li>◆ Projects can improve local healthcare</li> <li>◆ Melding of data - align priorities with other agencies, although may look different</li> </ul>	<ul style="list-style-type: none"> <li>◆ Lack of Environmental Health and Emergency Preparedness in CHA represents a threat</li> <li>◆ Lack of follow-up of identified needs</li> <li>◆ Financial/funding needs</li> <li>◆ Lack of identified processes - go back and reconstruct the process</li> <li>◆ Buy-in from members/ stakeholder involvement</li> <li>◆ Balance of activity with CHA Committee members</li> <li>◆ CHA engagement: to ensure advisory committee has value, to share info with committee, to create value for their organizations</li> <li>◆ Time span</li> </ul>

Revenue: \$761,941.75	
State:	4.55%
Local:	32.09%
Service Fees:	26.03%
Grants:	22.41%
License/Permits:	10.16%
Other:	0.82%

Expenditures: \$611,972.58	
Wages & Benefits:	70.9%
Travel:	2.11%
Refunds to State:	5.0%
Contracts:	6.30%
Supplies:	11.81%
Equipment:	0.40%
Operating:	3.44%

**STRATEGIC PRIORITY #1 BEHAVIORAL HEALTH:**

*SUBSTANCE ABUSE*

**STRATEGIC PRIORITY #2 ACCESS TO HEALTHCARE:**

*COUNTY WIDE - MENTAL HEALTH, DENTIST, PRIMARY CARE*

**STRATEGIC PRIORITY #3 CHRONIC DISEASE:**

*OBESITY*

**STRATEGIC PRIORITY #4 COMMUNICATION:**

*INTERNAL AND EXTERNAL*

**STRATEGIC PRIORITY #5 PUBLIC RELATIONS:**

*VISIBILITY – INTERNAL AND EXTERNAL*



**STRATEGIC PRIORITY#1 BEHAVIORAL HEALTH *SUBSTANCE ABUSE***

**Goal: Increase monitoring and surveillance of substance abuse in Hardin County.**

Summary:

**Objective 1: By August 31, 2019, the Kenton-Hardin Health Department in collaboration with the Healthy Lifestyles Coalition will reduce prescription drug overdose (PDO) fatalities by 10 percent in Hardin County.**

**Objective 2: Create and maintain a Project DAWN program.**

**Objective 3: Establish data collection (database) by December 2019.**





Strategic Priority #1 Behavioral Health *Substance Abuse*

Goal: Increase monitoring and surveillance. To distribute project DAWN kits to community members in need.

**Objective 2: Create and maintain a Project DAWN program.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Project DAWN Program plan	Cindy	People Service Quality Growth Finance	August 2017	Dec. 2017	Program plan is produced	To increase awareness and usage of a Community Based Project DAWN program.  To distribute 70 kits in the first year
2. Community Project Dawn Events			Yearly		2 Community Events per year	
3. Training of Staff	HMH	August 2017	Ongoing / as needed	1 Clinic monthly  OhioHealth Hardin Memorial Hospital to train KHHD staff  Surveys distributed at Events, clinics, agencies, and Open Gate of Hardin County.		

**Strategic Priority #1    Behavioral Health    Substance Abuse**
**Goal: Increase monitoring and surveillance. To collect current community data on substance abuse in Hardin County.**
**Objective 3: To establish a data collection management system by December 2018.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Overdose Dashboard implemented for Hardin County.	Arin Tracy Jackie / Alexa Summit Co. / Arin Tracy  Public Affairs	People Service Quality Growth Finance	August 2017	Dec 2017  Jan. 2018  March 2018  July 2018  August 2018  Sept 2018  October 2018	1. Purchase Microsoft BI Software. 2. Establish responsible person to input data into database. 3. Train staff on the database 4. Review performance of database within designated timeframe following implementation. 5. Promote database to partners. 6. Promote database to community. 7. Build a Contact Database. 8. Email database	Fully functional database is implemented within the Kenton-Hardin Health Department.

**STRATEGIC PRIORITY#2**

**ACCESS TO HEALTHCARE:**

*COUNTY WIDE*

*MENTAL HEALTH, DENTISTS, PRIMARY CARE*

**Goal: To improve access to health care**

**Summary:** The Kenton-Hardin Health Department

**Objective 1: Increase awareness of existing healthcare services by 2021.**

**Objective 2: Increase clientele by 10% by 2021.**

**Objective 3: Increase rates by 10% by 2021.**

Strategic Priority #2 ACCESS TO HEALTHCARE:

COUNTY WIDE

Goal: To improve access to health care

**Objective 1: Increase awareness of existing healthcare services by 2020.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
<p>Year 1: Coordinate efforts between hospitals, community health centers, Open Gate, Ohio Northern University, and the health department to increase community outreach and education on available health services (many of which are free or at a reduced cost).</p> <p>Year 2: Continue community outreach efforts.</p> <p>Year 3: Increase efforts from years 1 and 2.</p>	<p>Cindy Keller</p> <p>Jackie Prater</p>	<p>People Service Quality Growth Finance</p>	<p>August, 2017</p>	<p>May 22, 2018</p> <p>May 22, 2019</p> <p>May 22, 2020</p>	<ol style="list-style-type: none"> <li>Increase community education on the importance of preventive health care. Increase promotional activities</li> <li>Create or update a community resource guide to reflect all organizations providing free or reduced cost healthcare services.</li> <li>Revise Resource Directory using Ohio Northern University Student / Advisor as needed.</li> </ol>	<p>Increase the awareness of existing healthcare services in Hardin County.</p> <p><b>Priority Outcome:</b> Decrease percentage of adults without usual source of care</p> <p><b>Priority Indicator:</b> Percent of adults ages 18 and older who don't have one (or more) persons they think of as their personal healthcare provider (BRFSS and Hardin County CHA)</p>

Strategic Priority #2 ACCESS TO HEALTHCARE: COUNTY WIDE  
 Goal: To improve access to health care  
 Objective 2: Increase clientele by 10% by 2021.

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Family Planning Services	Melissa Humble as of Sept. 2017	People Service Quality Growth Finance	August 2017	August 2021	1. Increase promotion of activities 2. Formulate and integrate promotion into communication plans. 3. Retrieve baseline data 4. Monitor overall customer satisfaction with surveys 5. PM System for monitoring of Family Planning	Increase clientele by 10% of baseline data



Strategic Priority #2 ACCESS TO HEALTHCARE:

COUNTY WIDE

Goal: To improve access to health care

**Objective 3: Increase rates by 5% by 2021.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Immunization Services a. Childhood preventable flu b. Report to IMPACT (7.25.2017)	Nursing Staff	People Service Quality Growth Finance	August 2017	August 2021	1. Increase promotion of activities 2. Formulate and integrate promotion into communication plans. 3. Retrieve baseline data 4. Monitor overall customer satisfaction with surveys 5. PM System for monitoring of Immunization Services	Increase clientele by 5% of baseline data

**Goal: To improve chronic disease outcomes**

**Summary:**

**Objective 1: Increase school-based nutrition education programs by 2021.**

**Objective 2: Increase blood pressure clinic clientele by 5% by 2021.**

**Objective 3: Reduce disease outbreaks.**



Strategic Priority #3 CHRONIC DISEASE: *OBESITY*  
 Goal: To improve chronic disease outcomes  
**Objective 2: Increase blood pressure clinic clientele by 5% by 2021.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
Blood Pressure Clinics	Alexa Heacock	People Service Quality Growth Finance	<i>August 2017</i>	<i>August 2021</i>	1. Increase promotion of clinic activities for existing Blood Pressure Clinic sites 2. Formulate and integrate promotion into communication plans. 3. Retrieve baseline data 4. Increase BP education at existing sites. 5. Continue to refer to primary care as needed 6. Monitor overall customer satisfaction with surveys 7. PM System for monitoring of Blood Pressure Clinics	Increase clientele by 5% of baseline data (baseline + 5%)

Strategic Priority #2 ACCESS TO HEALTHCARE: COUNTY WIDE  
 Goal: To improve chronic disease outcomes.  
**Objective 3: Complete 100% pool inspections.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
Environmental Health Inspections	EH Staff	People Service Quality Growth Finance	August 2017	August 2021	1. Combine educational and environmental services with each swimming pool inspection  Country Hearth Inn, YMCA, OhioHealth Wellness Center, Kenton City Pool, ONU Pool, Ada Pool.	Complete 100% of inspections for pool inspections  Increased physical activity

**STRATEGIC PRIORITY#4 COMMUNICATIONS: *INTERNAL & EXTERNAL***

**Goal: To improve communication with department staff and community stakeholders.**

**Summary:** The Kenton-Hardin Health Department

**Objective 1: Implement department wide communications to improve process, policies and procedures by 2021.**

**Objective 2: Expand external communication best practices by 2021.**

**Objective 3: Build and implement a Communication Plan by December 2018.**



**Strategic Priority #4    Communications:    *Internal & External***
**Goal: To improve communication with department staff and community stakeholders.**
**Objective 1: Implement department wide communications to improve process, policies and procedures by 2021.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Conduct formalized department staff meetings.	Health Commissioner	People	<i>March 2017</i>	<i>Ongoing</i>	1. Conduct a brief of daily operations with the Health Commissioner and Staff members	1. Staff meetings are scheduled
2. Build a Communication Plan.	Public Affairs/Staff	People	<i>Jan. 2017</i>	<i>See Objective 3</i>	2. Layout of communication plan begins	2. A formal communication plan is produced.
3. Employee Recognition a. Recognition anniversary dates b. Recognition milestones c. At a BOH Mtg. mention staff member d. BOH Recognition Committee e. List of recognitions & start plan f. Celebrate Success g. Highlight staff member @ each BOH mtg. h. Above & Beyond recognition picture i. History recognition of staff j. Draw from a hat	Board of Health	People	<i>Sept 2017</i>	<i>Nov 2017</i>  <i>December 2017</i>	3. Formal policy is produced & in place  3b. Formal plan is implemented  3c. QI project after 1 <sup>st</sup> year implementation 10.10.2017.	3. A formal Recognition plan is implemented.

<p>4. Board of Health visits to the Health Department.</p> <p>a. Each BOH member to visit the office at least twice a year.</p>	<p>Board of Health</p> <p>a. BOH to set a policy schedule</p> <p>b. Staff to set a schedule at staff mtg. To be set at Dec. 2017 staff meeting.</p>	<p>People</p>	<p><i>Sept 2017</i></p>	<p><i>Dec 2017</i></p> <p><i>Jan 2018</i></p>	<p>4. Formal policy is produced and in place</p> <p>4b. BOH members participate in office visits</p>	<p>4. A formal BOH plan to visit the Health Department is implemented.</p>
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Strategic Priority #4      Communications: *Internal & External*  
 Goal: To improve communication with department staff and community stakeholders.  
**Objective 2: Expand external communication best practices by 2021.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		

1. Develop an agency newsletter.	Public Affairs	Service	Aug 2017	Dec 2017	1. Agency newsletter is produced and distributed. May, August, November, February newsletters.	1. 4 newsletters produced and sent out per year (Aligns with major EH & Nursing initiatives)
2. Build a Contact Database. a. Email database	Public Affairs/Staff Members	Service	Aug. 2017	Ongoing	2. Clients are added to a database.  2b. Clients are emailed when Policy, System, Environmental Changes (PSEC) are made or there is a Public Health threat.	2. Clients receive timely information with regards to Public Health issues.
3. Utilize social media. a. Agency Website b. Twitter c. Blogs d. Facebook	Public Affairs/Staff Members	Service	July 2017  Sept 2017  Dec. 2017	Ongoing	3. Weekly updates to existing media sites FB & Webpage.  3b. Assess current agency media sources.  3c. Implement new media outlets Twitter & Blogs.	3. Continuous improvement to media outlets, Engage customer & stakeholder conversations on social media outlets.
4. Presentations and speaking engagements in Hardin County communities. a. Get a list of current meetings all are attending. b. Get a list of current meetings which need to be attended.	Health Commissioner BOH/Staff/Public Affairs	Service/ Growth	Sept 2017  Dec 2017  Jan 2018	Ongoing	4. Assess opportunities to speak on PH behalf.  4b. Engage community leadership.  4c. KHHD members are attending meetings throughout the county.	4. Awareness of Public Health functions and services is increased.
5. Agency Highlights and PSAs in the newspaper	Public Affairs	People Service Growth	Jan. 2018	Ongoing	5. Every other month add a highlight or PSA to the Kenton Times newspaper.	5. Increase in who we are and what we do.

**Strategic Priority #4    Communications:    *Internal & External***
**Goal: To improve communication with department staff and community stakeholders.**
**Objective 3: Build and implement a Communication Plan by December 2018.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Develop a communication plan.	Public Affairs	People Service Quality Growth Finance	Jan. 2017	May 2017	1. Formulate a communication plan 2. Integrate agency information in to plan 3. Share with staff 4. Implement the plan 5. Evaluate the plan 6. Matrix needs to be completed by Jan. 2018 (10.10.2017)	Overall increase in and improvement in communication and awareness between Agency Leadership, Agency Staff Members, Community Members and Community Stakeholders.
2. Implement the communication plan.	Public Affairs/Health Commissioner/Staff/BOH		Aug 2017	Dec. 2017		
3. Evaluate the communication outcomes.	Public Affairs/Admin Team		Dec. 2017			
		March 2018	July 2018			
			Oct. 2018			

**STRATEGIC PRIORITY#5 PUBLIC AFFAIRS: VISIBILITY**

**Goal: To gauge community awareness and effectively promote KHHD health policies, programs and procedures.**

**Summary:** The Kenton-Hardin Health Department

**Objective 1: POLICIES: Implement an education platform for community health policies by 2021.**

**Objective 2: PROGRAMS: Increase exposure of Health Department programs by 2020.**

**Objective 3: PROCEDURES: Broaden the awareness of the Health Department's actions within programs by 2020.**

STRATEGIC PRIORITY#5 PUBLIC RELATIONS: VISIBILITY						
Goal: To gauge community awareness and effectively promote KHHD services, health policies, programs and procedures.						
Objective 1: POLICIES: Implement an education platform for community health policies by 2021.						
Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Education 2. Advocacy 3. Presentations <ul style="list-style-type: none"> <li>a. OSU Extension – Education platform</li> <li>b. FFA</li> <li>c. Healthy Lifestyles Coalition</li> </ul>	Public Affairs Public Affairs Public Affairs	People Service Quality Growth Finance	Sept. 2017	Dec. 2020	1. Surveys are developed to gauge awareness of KHHD services <ul style="list-style-type: none"> <li>1a. Utilize at community functions</li> <li>1b. Utilize in KHHD</li> <li>1c. Use social media outlets</li> <li>1d. Development of brochures and increase in distribution at 11 sector areas.</li> </ul> 2. Publicize findings & work with key decision- makers to shape public policy to address today's ongoing public health concerns.  3. Schedule outreach for those blocks of communities and services	Community members, partners, and stakeholders have an increased understanding of KHHD services.



**STRATEGIC PRIORITY#5 PUBLIC RELATIONS: VISIBILITY**

**Goal: To gauge community awareness and effectively promote KHHD services, health policies, programs and procedures.**

**Objective 2: PROGRAMS: Increase exposure of Health Department programs by 2021.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
<ol style="list-style-type: none"> <li>1. Expand into schools</li> <li>2. Lunch and learn with the Chamber of Commerce</li> <li>3. Build strategic partnerships with blocks of audiences               <ol style="list-style-type: none"> <li>a. Divisional partnerships</li> </ol> </li> </ol>	<p>Public Affairs / Staff</p> <p>Public Affairs / Health Commissioner / Board of Health</p> <p>Public Affairs / Health Commissioner/ Board of Health / Staff</p>	<p>People Service</p> <p>Quality Growth</p> <p>Finance</p>	Sept. 2017	Dec. 2020	<ol style="list-style-type: none"> <li>1. Surveys are developed to gauge awareness of KHHD services               <ol style="list-style-type: none"> <li>1a. Utilize at community functions</li> <li>1b. Utilize in KHHD</li> <li>1c. Use social media outlets</li> </ol> </li> <li>2. Publicize findings &amp; work with key decision- makers to shape public policy to address today's ongoing public health concerns.</li> <li>3. Schedule outreach for those blocks of communities and services</li> </ol>	<p>Community members, partners, and stakeholders have an increased understanding of KHHD programs.</p>

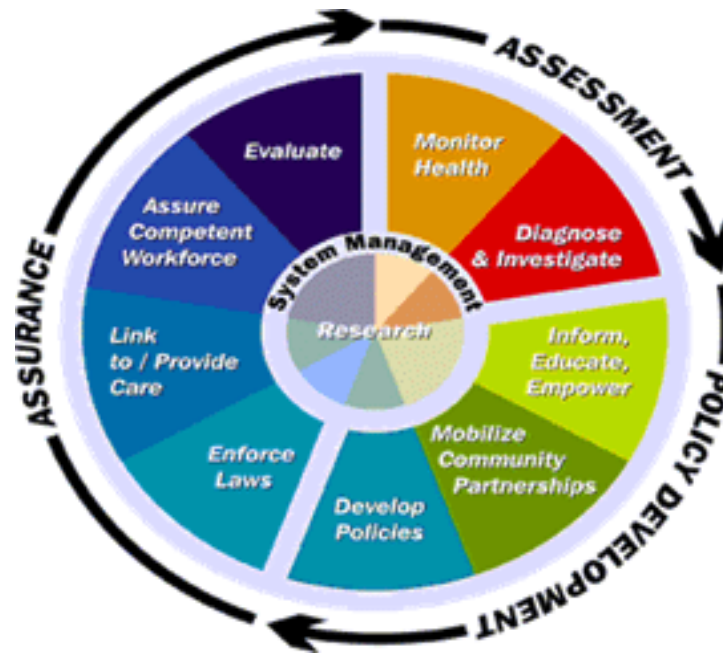
**STRATEGIC PRIORITY#5 PUBLIC RELATIONS: VISIBILITY**

**Goal: To gauge community awareness and effectively promote KHHD services, health policies, programs and procedures.**

**Objective 3: PROCEDURES: Broaden the awareness of the Health Department’s actions within programs by 2021.**

Program Activities/ Action steps	Lead Person/Group Responsible	Pillar Alignment	Timeline Schedule		Process Indicator	Outcome Indicator
			Begin	End		
1. Communicate current Health Department processes with the Hardin County community, partners and stakeholders  •C. Keller sits on the Board of Education for the Curriculum of the Consumer Science classes for Health Education •Township and village meetings	Public Affairs / Health Commissioner / Staff	People Service Quality Growth Finance	Sept. 2018	Dec. 2020	1. Surveys are developed to gauge awareness of KHHD services 1a. Utilize at community functions 1b. Utilize in KHHD 1c. Use social media outlets  2. Publicize findings & work with key decision- makers to shape public policy to address today's ongoing public health concerns.  3. Schedule outreach for those blocks of communities and services	Community members, partners, and stakeholders have an increased understanding of KHHD procedures.

*The 10 Essential Public Health Services*



The 10 Essential Public Health Services describe the public health activities that all communities should undertake and serve as the framework for the NPHPS instruments. Public health systems should

1. Monitor health status to identify and solve community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships and action to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure competent public and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

ASTHO STRATEGIC PLANNING GUIDE

CDC – NATIONAL PUBLIC HEALTH PERFORMANCE STANDARDS MAY 29, 2014

HENRY COUNTY PUBLIC HEALTH STRATEGIC PLAN 2012-2015

HOSPITAL COUNCIL OF NORTHWEST OHIO

KHHD CHA 2015, CHIP 2017, ACCREDITATION ANNUAL SUMMARY 2014, 2015, 2016, PDO GRANT 2017

OHIO DEPARTMENT OF HEALTH STRATEGIC PLAN 2015-2016