Strategic

Planning

in the Public Health Sector

HANDBOOK

KANSAS HEALTH INSTITUTE

Informing Policy. Improving Health.

STRATEGIC PLANNING IN THE PUBLIC HEALTH SECTOR

Handbook

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INTRODUCTION

Welcome to "Strategic Planning in the Public Health Sector." This handbook walks through the basics of creating a strategic plan for organizations and includes consideration of the Public Health Accreditation Board (PHAB) requirements for health departments who undertake this process.

These activities are recommended for organizations that have completed a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP); however, completion of these processes is not required. The content of this handbook does assume that the user has at least a basic working knowledge of the CHA and CHIP processes.

This handbook includes references to the NACCHO "Developing a Local Health Department Strategic Plan: A How-To Guide"[1], augmenting with additional learning content and exercises that supplement the Guide. Furthermore, strategic plans come in many sizes and formats, and its intention is to provide an overview, as well as specific tips to help avoid pitfalls and complete a successful process.

The NACCHO references are included and this material is required reading when completing the activities in this handbook. Additionally, NACCHO updated its guide in a separate document to reflect PHAB "Standards and Measures 1.5" that was revised and published in January 2014. It is recommended to reference this addendum as well.

While this handbook addresses all the PHAB required components of a strategic plan, **PHAB is the only organization to determine if the strategic plan meets its requirements. Following this handbook does not guarantee that PHAB reviewers will deem a strategic plan compliant with the standards and measures.** In addition, there are many ways to complete a strategic plan; this handbook outlines one example.

FOOTNOTES

[1] Developing a Local Health Department Strategic Plan: A How-To Guide; With support from the Robert Wood Johnson Foundation, this guide was prepared for NACCHO by the Illinois Public Health Institute; available at: http://bit.ly/NACCHOStrategicPlanningGuide

CHAPTER 1: ASSESSING THE READINESS OF THE LHD FOR STRATEGIC PLANNING

Value: The value in this exercise is to help the strategic planning team become explicitly aware of the foundational components needed to be in place for a successful planning process. It will also increase awareness of potential challenges that may arise during the process.

NACCHO Guide Readings: Module 1, pages 6–15

Desired Participants:
　　Local Health Department (LHD) Leadership Team

Time: 60–90 minutes

Instructions: Read Module I of the NACCHO Guide (see page numbers above). Then, complete Worksheet #1, found on page 5 of this handbook. These exercises assist in the assessment of an organization's readiness for embarking on the strategic planning process:
- Discussing and completing the past experience/current reality grid
- Reviewing the 10-point checklist

DISCUSSION/EXERCISE:

What did health department staff learn about their organization during the "readiness assessment?"

What are the greatest challenges the health department staff foresees in the strategic plan development?

How might the organization address those challenges?

Worksheet #1: Assessing Readiness for Strategic Planning

Past Experience	
What contributed to past planning success?	What contributed to past planning failures?

Current Reality	
What is in place to support successful planning?	What is missing and needed for successful planning?

Here are some important needs for a successful strategic planning process. Check those that are currently in place when assessing readiness.

- o Access to many of the types of data needed for the environmental scan (i.e. It may be helpful to complete the community health assessment prior to strategic planning)
- o Access to a skilled facilitator, either internal or external
- o Adequate time for a quality environmental scan
- o Adequate time in the process to devote to stakeholder engagement
- o A champion for the strategic planning process from the governing body
- o Budget allocations for the process
- o Buy-in from senior leadership at the health department
- o Commitment to the process, including remaining flexible
- o Understanding of the process and expectations for how the plan will be used throughout the agency
- o Other _____

CHAPTER 2: ASSESSING THE NEED FOR DEVELOPING/REVISING MISSION, VISION AND VALUES

Value: The purpose of this exercise is to review and discuss existing statements and determine if they require revision. As the NACCHO Guide notes, "the backbone of the strategic plan is an organization's mission, vision and values statements. The strategic planning process helps an organization define and solidify these fundamental statements, which can foster a shared understanding of the organization's purpose, intended goals and underlying principles guiding the work of the organization."

Reviewing these statements at the beginning of the strategic planning process is helpful in driving focus for the development of the actual plan. There may be times that refining these statements can be an iterative process. Additionally, these current statements are still relevant at the beginning of the planning process. It is not unusual to start or discontinue a key service that could impact the content of an organization's mission statement. It is suggested to revisit the organization's statements after the strategic plan is drafted to determine any additional revisions

NACCHO Guide Readings: Module III, pages 23–24, 26–36

Desired Participants:
   LHD leadership team

Time: 60–90 minutes

Instructions:
Review current mission/vision/values statements and discuss the following questions:
   A. As per PHAB measure 5.3.2., identify if the following statements are explicitly articulated for the department:
      • Mission statement
      • Vision statement
      • Values

   B. Discuss any/all of the statements and whether they are still reflective of what the health department does and what it expects to keep doing OR, do any/all of these statements need to be revised? If revision is necessary, outline how the health department will conduct that process referring to Module III (see page numbers above) for guidance.

   C. If the health department does not have all three articulated statements, discuss a process for how it can develop them, referring to Module III (see page numbers, above) for guidance.

DISCUSSION/EXERCISE:

How well do the health department's current statements reflect current reality and anticipated future desires?

If the health department needs to develop/revise statements, how does it plan to do that? At what point in the plan will it begin the development process?

CHAPTER 3: LAYING THE GROUNDWORK FOR STRATEGIC PLANNING AND COMPILING RELEVANT INFORMATION: ENVIRONMENTAL SCAN

Value: The value of Module II of the NACCHO Guide (pages16–22) is to help position the health department for successful plan development through determining:
1. Who should be involved in each step of the planning process;
2. Sources of data needed to help inform the strategic decision-making and direction-setting;
3. Adopt a high-level project plan for strategic plan development.

Module IV of the NACCHO Guide (pages 37–41) continues the work of data collection, guiding the department to create a big-picture view of what is going on inside and outside the organization. Planners use many different terms to describe this step (i.e. situational analysis, environmental scan, assessment etc.). Whatever the name, the purpose is to gather data and information to understand the historical perspective of the organization, the current context and the future outlook.

NACCHO Guide Readings: Module II, pages 16–22, and Module IV, pages 37–41

This handbook references two modules together because Module IV is essentially a continuation of the data source identification process in Module II.

Key points to keep in mind:
When considering 1–3 above, the health department may discover that an environmental scan is not a linear process. For example, the discussion of *who* should be involved in the process may lead to thinking about *what* they can provide and what can be learned from them. Furthermore, *how* information is collected may be influenced by *what* needs to be learned from the information. As the *what* and *how* are determined, an additional "*who*" may need to be added to the list.

The CHA can be an excellent source of data. Some organizations rush the strategic planning process and do not pull together the types of data suggested before completing Strengths, Weaknesses, Opportunities and Threats (SWOT) analysis or a Strengths, Weaknesses, Opportunities and Challenges (SWOC) analysis. According to PHAB Measure 1.2.3, the collection of additional primary and secondary data on population health is the foundation of the CHA. This data is useful for the strategic plan to understand the context the LHD operates in and the issues facing the community the LHD serves. If the health department's CHA is complete, the compilation of data for strategic planning should already be complete (except agency-focused data). Even though most organizations can list internal strengths and weaknesses and external opportunities and threats/challenges, doing so without a broad spectrum of relevant data runs the risk of missing important considerations and linkages.

DISCUSSION/EXERCISE: *Laying the groundwork for strategic planning*

Work with the health department's leadership team to complete Worksheet #2 (page 12 of this handbook). Be particularly mindful of conducting an inclusive process that gathers input from many key stakeholders.

What challenges occurred while drafting the project calendar?

DISCUSSION/EXERCISE: *Compiling relevant information: Environmental scan*

What systematic information-gathering routines does the health department have to help it continue to make well-informed decisions based on current information?

If a CHA is completed, how will that information help inform this step in the strategic planning process? How can the health department integrate those findings into its environmental scan?

What were some of the major data gaps that the health department discovered that needed to be filled? What is its plan to fill them?

Worksheet #2[2]
Planning Process Calendar Template
Timeframes based on a six-month plan development calendar (adjust as appropriate, and enter actual dates)

Step	Components	Typical Timeframe	Primary Responsible Party	Participants
1. Pre-planning	• Steps to process • Schedule • Participants • Data	Month 1		

2. Situational Analysis/Needs Assessment	• Review CHA data
	• Research
	  – Review industry trends and benchmarks
	  – Review internal issues/organizational assessment
	  – Review external influencing factors
	• Interviews with key stakeholders (focus groups, surveys, etc., as appropriate)
	• Review internal strengths/weaknesses (SWOT)
		Month 1–2		

3. Vision/Mission	• Review vision/mission (conceptually) • Note: unless a significant change in the vision/mission is needed, keep large group discussion at high-level concept, then assign small group for future word-smithing • Values can be reviewed here, or at a later time (see below)	Month 1, with continual revisiting as needed		
4. Program/Services Review/Assessment (optional)	• Determine if needed • Determine key questions for review • Identify programs for review (if not all programs) • Conduct assessment – typically using a tool like	Assessment best if prior to first full retreat; with results shared/		

FOOTNOTES

[2] Note: this worksheet is the iBossWell ® Planning Calendar template. There is an alternate (and similar) planning template on Worksheet #4, page 71 in the NACCHO Guide.

Step	Components	Typical Timeframe	Primary Responsible Party	Participants
	MacMillan Matrix and/or Matrix Map	*discussed during retreat*		
5. Key Issues	• Identify and discuss key issues that must be addressed in the strategic planning process	*Begin in Step 1, then continue at first full retreat*		
6. Strategic Priorities	• Create Strategic Priorities and begin to identify ideas for goals	*First full retreat*		
7. Goals	• Further refine key goals for each strategic priorities (utilize work completed in initial retreat)	*First full retreat*		
8. Objectives and Action Plans	• Identify objectives and action plans to meet goals • Include key steps, dates, responsible parties, required resources and measurable outcomes • Complete additional research needed to determine required resources	*Months 3–6*		
9. Outcome Measures/Key Performance Measures	• High-level measurable – performance/success factors that are evidence to level of goal accomplishment • Identify outcome measures/performance measures for each goal	*Months 3–6*		
10. Values (optional)	• Review/create values	*Anytime*		
11. Review and Approval of Next Steps for Plan Implementation Oversight and Management	• Determine which stakeholders should be involved in plan review • Prioritize goals • Review and approval of suggested process for plan implementation oversight and any future plan changes • Clarity of roles/responsibilities for plan execution	*Month 5–6*		

Step	Components	Typical Timeframe	Primary Responsible Party	Participants
	• Clarity of roles/responsibilities for plan execution			
12. Final Review and Completion of Plan	• Final "clean up" based on input • Revise dates if needed, based on prioritization	Month 6		
13. Plan Implementation Process Set-up	• Implement agreed upon practice for plan oversight and management • Align strategic plan with operational plans and individual performance plans	Month 6–7		
14. Ongoing Plan Implementation, Evaluation, Progress Reporting, Improvement Identification and Adjustment	• Conduct periodic assessments (as defined above), and proceed per implementation policy and procedure	Ongoing (Reporting typically is 2 to 4 times per year)		

CHAPTER 4: PROGRAM ASSESSMENT

Value: It can be extremely beneficial to conduct a systematic review of all programs and services. This will help determine the future scope of each and will provide a comparative analysis of its impact/financial sustainability ratio. Two methods that can help guide this process are the Matrix Map[3] and the MacMillan Matrix. These tools are outlined on pages 18–21 of this handbook and can help:

- Assess programs against trends of increasing demand for smaller resources;
- Gain greater focus;
- Avoid duplication of services;
- Explore and increasing opportunities for collaboration/partnerships;
- Determine prioritization and divestiture of programs;
- Compare all programs/services/efforts relative to mission impact and financial sustainability.

This type of assessment process positions an organization to be more flexible to assess potential opportunities for impact and sustainability.

NACCHO Guide Readings: None

Desired Participants:
Plan administrator
LHD Leadership team — (Initial assessments may be conducted by individual teams responsible for each business line/program/service being assessed, then draft assessment results for all lines can then be reviewed and finalized by leadership team.)

Time: Time can vary significantly, depending on the number of business lines/programs/services to be reviewed. Expect 20–60 minutes/program.

Instructions: Read the overview on pages 18–21 of this handbook and then complete the following discussion and exercise.

FOOTNOTES

[3] Jeanne Bell, Jan Masaoka, Steve Zimmerman. Nonprofit Sustainability: Making Strategic Decisions for Financial Viability. Jossey-Bass. 2010

DISCUSSION/EXERCISE:

Pick one current program/service that might be the most effective direction for the program to take in the future.

Walk through the questions in each of the four sections of the MacMillan Matrix, and then plot the program on the matrix. Write notes below.

1. Mission Fit:
   *Answer: Is it a **good** fit or a **poor** fit?*

2. Program Strength — (Competitive Position)
   *Answer: Is the program strength **strong** or **weak**?*

3. Alternate Provider(s) — (Alternative Coverage)
   *Answer: Is it a **high** number of alternate providers or a **low** number?*

4. Program Resource Attractiveness
   *Answer: Is program resource attractiveness **easy** or **difficult**?*

Program Assessment Overview

When an organization is struggling with the relevance of its programs/services and/or with diminishing resources, it may be of value to conduct an in-depth assessment of individual programs/services.

These types of assessments can guide in:
- Assessing programs against trends of increasing demand for smaller resources;
- Gaining greater focus;
- Avoiding duplication of services;
- Exploring and increasing opportunities for collaboration/partnership;
- Determining prioritization and divestiture of programs.

Utilizing the MacMillan Matrix process, leadership team members are guided in assessing each current or prospective program/service based upon four key criteria:

1. Fit/Alignment with Mission
    - Fit is the degree to which a program "belongs" or fits within an organization. Criteria for a good fit include:
        - Congruence with the purpose and mission of the organization;
        - Ability to draw on existing skills in the organization.
    *Answer: Is it a **good** fit or a **poor** fit?*

2. Program Strength — (Competitive Position)
    - Competitive position addresses:
        - Degree to which the program has a strong capability;
        - Delivers outcomes (generally and compared to other organizations);
        - Satisfies clients;
        - Has solid potential for funding (although we typically hold on "rating" this element to Section D).
    *Answer: Is the program strength **strong** or **weak**?*

3. Alternative Provider(s) — (Alternative Coverage)
    - Alternative coverage is the number of other organizations attempting to deliver or succeeding in delivering a similar program in the same region to similar constituent.
    *Answer: Is there a **high** number of alternate providers or a **low** number?*

4. Program Resource Attractiveness
    - Program attractiveness is the complexity associated with managing a program. Highly attractive programs have:
        - Stable funding;
        - High demand;
        - Measurable program results;
        - Attract volunteers and resources.

The level of program attractiveness also has a focus on the economic perspective and a review of current and future resource investments. This area is typically defined with the most quantifiable measures (compared to the other three areas).
    *Answer: Is program resource attractiveness **easy** or **difficult**?*

Once a program or service is reviewed against the questions above, a score is determined and the program is placed in the appropriate cell of the matrix below.

MacMillan Matrix APhA		High Program Resource Attractiveness: "Easy" Program		Low Program Resource Attractiveness: "Difficult" Program	
		Alternative Provider High	Alternative Provider Low	Alternative Provider High	Alternative Provider Low
Good Fit with Mission and Abilities	**Strong Program Strength**	1. Compete aggressively	2. Grow Aggressively	5. Support the Best Competitor	6. "Soul of the Organization"
	Weak Program Strength	3. Divest aggressively	4. Build strength or Get Out	7. Divest Systematically	8. Work collaboratively
Poor Fit with Mission and Abilities		9. Aggressive Divestment	10. Orderly Divestment	11. Aggressive Divestment	12. Orderly Divestment

The Matrix Map

Originally developed by CompassPoint Nonprofit Services as the Dual Bottom Line Matrix, then further advanced in the 2010 released book: "Nonprofit Sustainability: Making Strategic Decisions for Financial Viability 4," there is another tool organizations have found useful in prioritizing issues. It is designed to help nonprofits balance mission impact and financial viability. As stated in the NACCHO handbook, "mission impact refers to the importance of an activity or program to the organizations' goals. Financial viability considers if costs are covered, whether revenue is produced or if there is financial sustainability. The overall strategy with this model is to combine a set of programs and activities that result in high mission impact and long-term financial viability. (Masoka, CompassPoint, 2005)"

Using this tool, potential interventions or programs aligned with particular strategic issues are considered based on its level of mission impact and financial viability. High impact and financial viability are desirable, but it is important to establish a balance as well. For example, an LHD may have a program that has high mission impact and low financial viability but decides to continue in that direction as other financially viable programs balance things out. Alternatively, a health department may have a program that has low mission impact but is funded and therefore has high financial viability. In this case, the LHD should consider whether there are ways to restructure or leverage the program to increase its mission impact.

Use of this tool typically requires a more robust effort on the part of the organization, as well as financials tracked by program and other operational business lines. Although it takes more work, it is highly recommend to consider this type of analysis if the health department is struggling with limited resources and a strong need to prioritize and/or limit programs and services offered.

FOOTNOTES
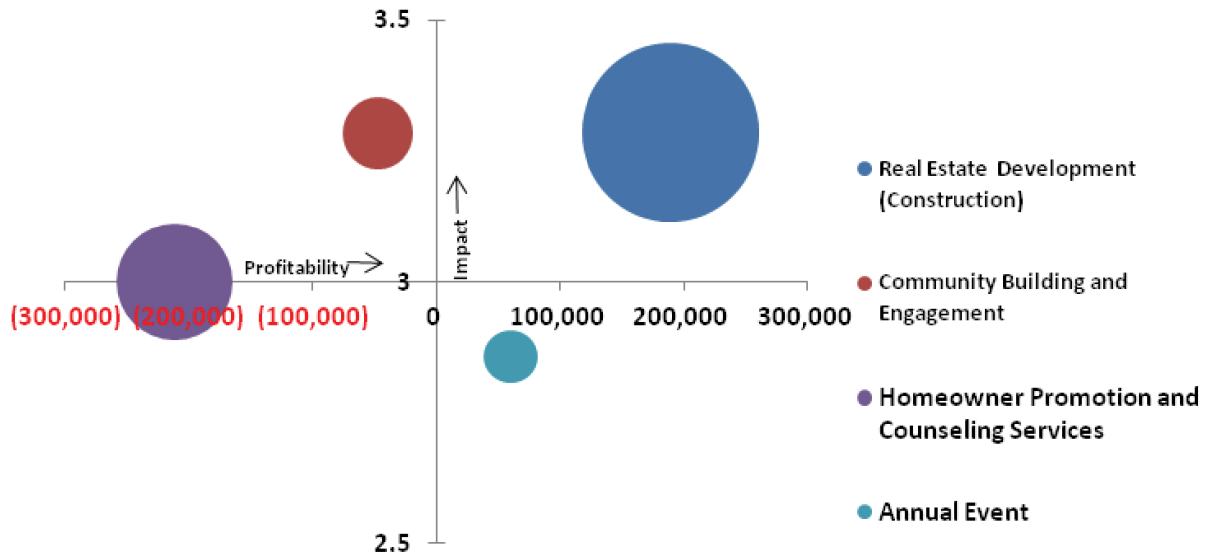
[4] Jeanne Bell, Jan Masaoka, Steve Zimmerman. *Nonprofit Sustainability: Making Strategic Decisions for Financial Viability.* Jossey-Bass, San Francisco. 2010.

Matrix Map

Using Assessment to Adjust Strategic Priorities
These are valid exercises for staff to learn how to separate preferences for certain programs from the realities of the financial implications to the organization.

CHAPTER 5: ANALYZING RESULTS AND SELECTING STRATEGIC PRIORITIES

Value: The value of this module lies in reviewing all the data that have been collected and the assessments conducted, and using it to inform solid strategic decision-making and direction-setting.

There are multiple approaches to doing this; one of the most commonly used is the Strengths, Weaknesses, Opportunities, Threats (SWOT) analysis. The following exercise walks through conducting a SWOT, and then how to use that analysis to inform identification of key strategic priorities.

All of the pre-planning efforts, including stakeholder input, program/services assessments, best practices research, findings from the CHA, etc., all bring insights and data that inform the SWOT.

NACCHO Guide Readings: Module V, pages 42–46, 48

Desired Participants:
    LHD Leadership team

Time: 30–60 minutes

Instructions: Read Module V of the NACCHO Guide (see page numbers, above), and then complete the following discussion and exercise.

DISCUSSION/EXERCISE:

Using Worksheet #3 (page 24 of this handbook) — "Conducting a SWOT" — take ten minutes to begin to identify significant strengths, weaknesses, opportunities and threats for the health department.

Review the brief SWOT, what are the key critical issues the organization is facing (from a strategic perspective)?

Given what is currently known about the community and the health department, identify the top 4–6 strategic priorities for the department's plan.

How can the health department weave in the CHIP priorities for which the department has taken accountability?

Worksheet #3: Conducting a SWOT/SWOC Analysis

This activity is usually completed by a small group or committee based on the data and information compiled from the various sources (see Module IV). Once completed, it can be shared with additional staff and stakeholders for further input if desired.

1. Organize data and information into the categories listed in the quadrant.
2. Identify any connections between listed items in the quadrants. (i.e. Is there an opportunity that can be taken advantage of to address a particular threat or weakness?)
3. Look for any patterns in the results.
4. Discuss ways strengths can be maintained, enhanced or leveraged.
5. Discuss ways to minimize weaknesses.
6. Discuss options for leveraging or taking advantage of opportunities.
7. Discuss the potential impact of threat/challenges and anything being done to address or prepare for the threat.
8. Identify any potential strategic issues that the health department may need to address.

Strengths (Internal)	Opportunities (External)

Weaknesses (Internal)	Threats or Challenges (External)

Worksheet Source: NACCHO Guide Supplemental Worksheets

NOTES:

CHAPTER 6: DEVELOPING THE STRATEGIC PLAN AND IMPLEMENTATION PLAN

Value: The organization has done the work, research, and discussion, conducted analysis and identified key strategic priorities. Now it is time to draw a roadmap to move the needle on the health department's priorities.

There are many formats and terms used in strategic planning. Even in the public health arena, the terminology and format of plan structure and elements can vary significantly. PHAB is not fully prescriptive either. Thus, as the health department looks at different guides and even plans from different organizations, it will see a varied range in these areas.

At the core, there are two major elements to include in the strategic plan:

1. **High-level strategic priorities/goals:** These provide a focused or prioritized direction in high-level areas for expending the organization's efforts and resources. (These strategic priorities are driven by its mission and focused to address community needs and/or mandated required offerings.)
   - **Outcomes:** Additionally, the health department should have articulated desired outcome measures that serve as the evidence that it is reaching the organization's goals and moving the needle on its strategic priorities.

2. **Actions – Implementation:** These are the key steps/milestones outlining what needs to be done to accomplish the goals and outcomes. This section of the plan will also include accountabilities such as (at a minimum) who will do the work and the timeframe for achievement. It is also good to include resources required to achieve the actions, particularly those resources that are not included in the health department's current budget.

Some organizations separate the strategic elements from the tactical into two different plans, others combine both into one plan. Choose a format that works best for the health department to successfully follow for implementation as well as for telling the story to stakeholders.

Note: There may be additional elements, process measures/indicators[5] and/or other terms in this step. The health department can choose to include these, or it can keep the plan document simple. If the simple approach is chosen, make sure to include the above core items and that plan elements are written in the "SMART"[6] format. In other words, plan items are stated so that the completion of the item/action/objective itself is the same as the process measure/indicator. For example, "develop and complete a communication plan" is both an action as well as a process measure.

In the NACCHO Guide readings, there is a middle-ground approach relative to plan complexity/simplicity. There is some flexibility here so it can design a plan format that fits the organizational capabilities and capacity for implementation. The health department's plan is no better than its ability to support effective implementation. Keep it simple, as stakeholders may get lost in the

FOOTNOTES

[5] Process Measures or Process Indicators are terms used to describe the evidence that a particular tactic or action has been achieved.
[6] The "SMART" acronym: Specific, Measurable, Achievable, Relevant, Time-oriented.

structure and/or terminology and lose sight of the intention and purpose of the plan and of the planning process.

NACCHO Guide Readings: Module VI, pages 49–53, 57–58

Desired Participants:
   LHD Leadership team

Time: Approximately 60 minutes

Instructions: Read Module VI in the NACCHO Guide (see page numbers, above), and then complete the following exercise.

DISCUSSION/EXERCISE: Measuring Success

Identify an important area of measurement in the health department.

Write examples of the continuum of relevance of the measures from *activities* to *impact*.

Goal:

Impact indicator(s) — Ultimate metric/indicator/evidence that the needle has moved on this goal:

Outcome indicator(s) — Metric/indicator/evidence that illustrates successful progress towards achieving goal:

Activities/Process Measures — The actions required to help achieve the outcome and/or impact measures:

DISCUSSION/EXERCISE: *Developing the Strategic and Implementation Plan*

Using the blank Strategic Plan implementation template Worksheet #4 (on pages 36–37 of this handbook), select ONE of the strategic priorities previously identified.*

- Fill in the template, starting with a key goal that could have significant positive impact on this strategic priority.
- Continue on with *objectives*, *actions* and *accountabilities*.
- Don't forget the outcome measures.

* Keep in mind PHAB requires that health departments explicitly weave components of the CHIP for which the department is responsible for into the Strategic Plan. The health department may choose one of the CHIP items for this exercise.

NOTES:

Example Strategic Plan Structure and Terminology
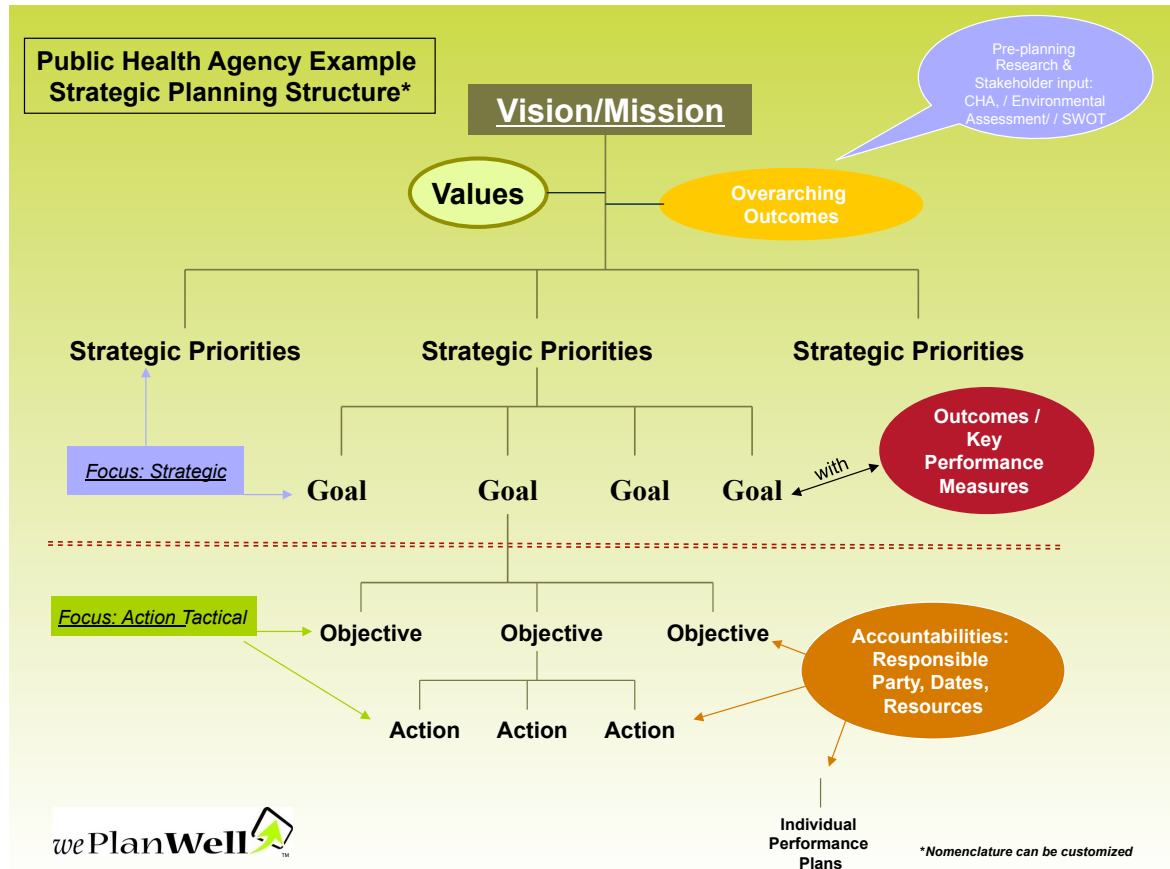
Measuring Success

An organization becomes more effective and high-performing when it has an explicit focus on measuring success.

- How does the health department identify measures of success, while avoiding *analysis paralysis?*
- Impact vs. outcomes vs. activities — What's really important?

"The most critical requirement is that the senior leader, the operating manager and other key stakeholders agree that the process is reasonable and that the outcomes from it constitute fair and trustworthy information."
Talley and Fram. "Using Imperfect Metrics Well: Tracking Progress and Driving Change."

Examples for a Local Health Department

Goal: Decrease incidence of diseases preventable through immunization.[7]

- Activities: Increase in number of immunization clinics offered monthly.
- Outcomes: Increase by five percent annually the number of children receiving American Academy of Pediatrics (AAP) recommended immunizations.
- Impact: By 2020, no cases of immunization-preventable diseases reported in county.

Goal: Serve as the voice for public health in the county.

- Activities: Five press releases per quarter
- Outcomes:
  - One release picked up by one or more media outlet per quarter.
  - At least two inquiries from communications or public sector representatives regarding health department opinion or information on public health-related issue received quarterly.
  - External stakeholder survey results average four or above on five-point scale with satisfaction of health department representation as the "voice of public health in county."

FOOTNOTES

[7] Note: These types of plan elements may come from your CHIP in some cases.

Example Strategic Plan Report — Excerpt from Johnson County KS Department of Health and Environment — Strategic Plan
Reflecting on both the high-level strategy, goals and outcomes measures, as well as the actions for implementation.

Strategic Priority:
4. People: Recruit and retain a diverse, highly skilled and engaged work force, create leadership at all levels, and work to continuously improve the organization.

Goal	Outcome Measures			
4.3 Retention: Retain a committed, engaged and skilled staff.	• By end of 2015 — all staff has been exposed to HPO principles and received some level of training. • By the end of 2014 — 100 percent of employees meet the minimum training levels and the professional development objectives outlined in their EPMs. • Department turnover rate is below benchmarked departments annually. • Define the approach to measuring the level of adoption of HPO leadership philosophy.			
Objective	**Actions**	**Responsible Party**	**Date Range**	**Resources**
4.3.1 Workforce Development: Plan and implement a comprehensive orientation, training and professional development program.	4.3.1.1 Orientation: Revise and implement a comprehensive and consistent new employee orientation program grounded in Public Health Core Competencies (as established by the Center for Public Health Policy, Columbia University) and environmental protection and sustainability principles. 4.3.1.2 Minimum Training Levels: Maintain minimum training levels for all positions in the department. Review and revise these levels as needed. 4.3.1.3 Maintain Training Program: Maintain a training program to identify and provide opportunities for all employees to meet at least the minimum requirements for job-based knowledge and	**Objective** PHEP Manager +z-Training **Actions** 1. Z-LT +z-Training 2. Director JCDHE +z-Training 3. Director JCDHE +Z-LT 4. Director JCDHE +Z-LT 5. Director JCDHE +Z-LT	**Objective** 1/01/11–12/31/15 Annually **Actions** 1.1/01/11–12/31/15 2.1/01/11–12/31/11 Annually 3.7/01/11–12/31/15 Annually 4.1/01/12–12/31/15 Annually 5.1/01/11–12/31/15 Ongoing	**Objective** $50,000/yr starting 2013

	licensing.			
	4.3.1.4 Cross-Training: Continue and expand cross-training programs and efforts across the organization where appropriate. Recognize the limitations that may be faced by staff working in grant-funded programs.	6. Director JCDHE +Z-ET	6.9/01/12– 12/31/13	
	4.3.1.5 Professional Development: Support ongoing professional development opportunities for employees, including online training/tools to maintain licensure/certification, expand their professional knowledge and abilities and promote personal and professional growth.			
	4.3.1.6 Employee Advancement: Identify opportunities to expand staff experience and scope of work when further education/certification is achieved within existing county HR policies or pursue HR approval as necessary. Promote from within whenever possible.			
Objective	**Actions**	**Responsible Party**	**Date Range**	**Resources**
4.3.2 Leadership Development: Create a culture that fosters and encourages leadership in all staff through the High Performing Organization philosophy.	4.3.2.1 Empower staff to Lead: Empower all staff to take leadership roles. 4.3.2.2 Acknowledge and Support: Acknowledge and support leadership initiative taken by staff. 4.3.2.3 Leadership Training: Support ongoing opportunities for leadership	**Objective** Director JCDHE +Z-LT **Actions** 1. Director JCDHE +Z-LT 2. Director JCDHE	**Objective** 1/01/11–12/31/15 Ongoing **Actions** 1.1/01/11– 12/31/15 Ongoing 2.1/01/11– 12/31/15	**Objective** $10,000/yr starting 2013

	training.	+Z-LT	Ongoing
	4.3.2.4 Professional Association Leadership: Support opportunities for staff to assume leadership roles in professional associations.	3. Director JCDHE +Z-LT 4. Director JCDHE	3.1/01/12– 12/31/15 Ongoing 4.1/01/13– 12/31/15

**Worksheet #4: Strategic Plan
Implementation Template**

Strategic Priority:

Goal	Outcome Measures			
Objective	Actions	Responsible Party	Date Range	Resources
Objective	Actions	Responsible Party	Date Range	Resources
Objective	Actions	Responsible Party	Date Range	Resources
Objective	Actions	Responsible Party	Date Range	Resources

Goal	Outcome Measures			
Objective	Actions	Responsible Party	Date Range	Resources
Objective	Actions	Responsible Party	Date Range	Resources
Objective	Actions	Responsible Party	Date Range	Resources

CHAPTER 7: IMPLEMENTING, MONITORING AND REVISING AS NEEDED

Value: Although developing the plan is a significant undertaking, it is actually just the beginning. The most important effort is its successful implementation.

The organization must have a process and practices designed for ongoing oversight, assessment, reporting on implementation progress and updating of the strategic plan. Additionally, it is great when there is an explicit integration of the strategic plan into individual performance in order to ensure optimal success. One simple approach is to have employees create their annual individual performance plans. Have them reference the related strategic plan element each of their individual objectives align with best.

Additionally, PHAB not only requires an explicit plan oversight process, it also requires an evaluation and quality improvement (QI) process.

Furthermore, a strategic plan, when utilized appropriately, is never truly "completed." Rather, it serves as a roadmap for the organization in moving towards its mission and goals. Thus, the organization's implementation process must also include guidance on the identification and the process for changes to the plan.

Ideally, as the health department develops policies and procedures for plan implementation, monitoring and revisions, it will adopt a broader perspective for developing a "culture of implementation and mission-focus." This culture helps all stakeholders keep perspective and stay focused on effectively executing the planned tactics to achieve the mission.

NACCHO Guide Readings: Module VII, pages 59–63

Desired Participants:
   Plan administrator
   LHD Leadership team

Time: Approximately 60 minutes for both exercises

Instructions: Read Module VII in the NACCHO Guide (see page numbers above), and then complete the following discussion and exercise.

DISCUSSION/EXERCISE:

Begin to outline the key steps for ongoing plan implementation oversight, assessment/monitoring, reporting, improvement and revising.

NOTES:

CHAPTER 8: A KEY ELEMENT TO SUCCESSFUL PLANNING — ORGANIZATIONAL CULTURE

Value: Understanding the interplay and interdependencies between organizational culture and the organization's plan is critical to successful plan implementation. This section provides an overview of these dynamics with the intention to help build the health department's awareness and focus on ensuring alignment between these elements.

NACCHO Guide Readings: None

Desired Participants:
   All LHD Staff

Time: 20 minutes

Instructions: Read overview on page 40 of this handbook and then complete the following discussion and exercise.

DISCUSSION/EXERCISE:

Consider the following:

What impact has been observed in the department/agency/team that the organizational culture has on performance outcomes?

How can the health department integrate specific actions around organizational cultural development into its strategic plan?
- Think about the challenges/problems that have been identified in the first exercises.
- What specifically can the health department do?

Overview: Strategy/Tactics/Culture[8]

As the strategic plan is drafted, it is critical to consider the organizational culture elements that can have a significant impact on the success of achieving the goals of the plan. Gaining alignment between the plan and the culture is key to successful plan implementation.

The concept of alignment between *vision*, *tactics* and *culture* applies to individuals within an organization, as well as to organizations and teams as a collective entity.

- *Vision* encompasses the compelling vision and the high-level key strategies/goals and desired outcomes for success.
- *Tactics* define the specific *action* required to achieve the organization's vision and goals.
- Organizational *culture* is the environment in which people operate. The *culture* is the official and unofficial "way things are done" and the way staff treats each other. It is woven with the collective core values of the organization.

The model of the *Concentric Circles of Excellence* (page 46) illustrates how the organizational culture must be in alignment with its vision and tactics. It assures successful execution of those strategies and tactics and ultimately, the long-term sustainability.

FOOTNOTES

[8] Denise McNerney and Lynn Rolston. *The PeoplePACT: Achieving Exemplary Performance through Humane Leadership*; Copyright The People PACT Company, 2007. All rights reserved.

Concentric Circles of Organizational Excellence

A key element to ensuring quality and success and excellence
lies in aligning your strategy and tactics with your organizational culture.

« Strategies without tactics provide great ideas, but no clear
roadmap to achieve them.

« Tactics without Vision/Strategy keeps activity level up, but with
no clear focus or direction. Little is truly achieved.

« Alignment is critical between Strategy and Tactics.

« The organizational culture must be in alignment with Strategy and
Tactics to assure optimizing the achievement of execution of those
Strategies and Tactics, and ultimately long-term sustainability,
success and excellence.

NOTES:

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