

# 2017 & 2018 Revised Goals and Objectives

2014-2018 Strategic Plan

2017



# Table of Contents

- I. Revised Goals and Objectives ..... 1
- II. Summary of Remaining Objectives ..... 17


## 2017 & 2018 Revised Goals and Objectives


The annual strategic plan retreat was held on Monday, January 9, 2017 and was attended by department leadership, management team members, and objective leads. Participants utilized the annual strategic plan progress report to conduct a comprehensive review of all plan objectives, discuss off-track objectives, prioritize 2017 and 2018 objectives, and removed or amended objectives as needed.

Due to changing priorities within the Department, a complete re-working of the State Health Improvement Plan, and the completion of the majority of plan objectives, the team moved to accelerate the completion date of all current plan goals and objectives. All objectives previously due for completion in 2018 will now be completed in 2017. This will allow for a new five year strategic plan to be crafted and presented in 2018.

This document amends the 2014-2018 Strategic Plan and includes all current goals and objectives agreed upon during the annual strategic plan retreat and replaces the previous goals and objectives.

### **Document Key**

Revised goals and objectives are identified within the document by a  symbol before their identifying numbers. Specific information regarding why revisions were made is available in the 2016 Annual Strategic Plan Review report.

Objectives with a performance measure are identified within the document by a  symbol before their identifying numbers.

Objectives are identified with the following completion dates or statuses:

- On-Going:** An On-Going status identifies objectives that are carried forward each plan year and have annual completion requirements. For example an objective stating the department will hold and annual in-service and is designated as On-Going requires an in-service to be held each plan year to remain on-track for that year.
- 2017:** All remaining objective completion dates have been reclassified to a 2017 completion date.
- Complete:** Objective status is identified as Complete when objective requirements have been met and completed.
- Removed From Plan:** This status is assigned when objectives are removed from the strategic plan. Specific reasons for the items removal are summarized in the 2014 Annual Strategic Plan Review.

# Priority 1 – Davis County Community Health Improvement Plan

**Goal 1** Ensure successful implementation of the Community Health Improvement Plan (CHIP).



1.1.1 DCHD staff will regularly participate in meetings for each CHIP action group and will serve in leadership roles when necessary and appropriate.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete



1.1.2 DCHD staff will provide technical support to action group leads and will maintain regular communication.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete



1.1.3 DCHD staff will coordinate grant applications, provide updated data, and assist with any identified assessment needs for CHIP action groups.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete

**1.1.4** DCHD staff will promote activities and messages that support the four CHIP priorities through news media, social media, and other channels.

Objective Lead: Isa Perry

Designated Completion Date\Status: 12/17



1.1.5 DCHD Division Directors will include support for CHIP activities in their division strategic plans.

Objective Lead: Dave Spence, Wendy Garcia, Ivy Melton Sales, Kristy Cottrell

Designated Completion Date\Status: Complete

1.1.6 Document success in meeting at least 80% of short-term CHIP objectives.

Objective Lead: Isa Perry

Designated Completion Date\Status: Removed from Plan



**1.1.7** Document success toward meeting long-term CHIP objectives.

Objective Lead: Isa Perry

Designated Completion Date\Status: 12/17

- 1.1.8 Two staff will be trained as Question, Persuade, Refer (QPR) Gatekeeper Instructors.  
Objective Lead: Ivy Melton Sales  
Designated Completion Date\Status: Complete
- 1.1.9 At least 85% of employees will have completed QPR Gatekeeper training.  
Objective Lead: Andrea Hood  
Designated Completion Date\Status: Complete
- 1.1.10 At least one staff member will regularly participate in Davis County Active Transportation Committee meetings.  
Objective Lead: Isa Perry  
Designated Completion Date\Status: Complete
- 1.1.11 Start at least one community garden project at a county facility.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Complete
- 1.1.12 Promote the benefits of comprehensive employee wellness programs to at least five worksites.  
Objective Lead: Marcie Clark  
Designated Completion Date\Status: 12/17
- 1.1.13 Promote online tool/directory for mental health and substance abuse resources and service providers through department website and social media.  
Objective Lead: Isa Perry  
Designated Completion Date\Status: Complete
- 1.1.14 At least ten staff will receive Mental Health First Aid Training.  
Objective Lead: Isa Perry  
Designated Completion Date\Status: Complete
- 1.1.15 At least one program will pilot a depression/suicide screening tool for clients.  
Objective Lead: Isa Perry  
Designated Completion Date\Status: Complete



1.1.16a Budget for at least one additional air monitor annually through 2018.

Objective Lead: Dennis Keith

Designated Completion Date\Status: Removed from Plan

1.1.16b Ensure Davis Clean Air Network website (daviscleanairnetwork.com) provides real time air monitoring results, educational information, and is promoted to community partners and the public by December 31, 2015.

Objective Lead: Dennis Keith

Designated Completion Date\Status: Complete

1.1.17 Increase by at least one the number of no idling policies adopted by businesses, cities, and other organizations annually.

Objective Lead: Dennis Keith

Designated Completion Date\Status: 12/17

**Goal 2** Document and communicate CHIP progress and achievements.

1.2.1 Develop reporting tool/system for documenting and collecting progress towards CHIP short and long-term objectives and other successes.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete



1.2.2 Prepare an annual CHIP progress report through 2019.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete

1.2.3 Communicate annual CHIP progress to public health partners and the community through at least two avenues by February 14 annually through 2019.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete

## Priority 2 – Utah State-Wide Health Improvement Plan

**Goal 1** DCHD will actively participate in State-Wide Health Improvement Plan (SHIP) goal groups.



2.1.1 DCHD staff will regularly participate in meetings for at least two of the SHIP goal groups.

Objective Lead: Wendy Fleming (Imms), Ivy Melton Sales (PHS), Marcie Clark (Obesity),  
Anna Dillingham (Review Committee)

Designated Completion Date\Status: Complete

**Goal 2** DCHD will implement activities that support SHIP efforts.



2.2.1 DCHD Division Directors will include support for SHIP activities in division strategic plans.

Objective Lead: Dave Spence, Wendy Garcia, Ivy Melton Sales, Kristy Cottrell

Designated Completion Date\Status: Complete

2.2.2 Increase regular structured physical activity each day in school children by expanding the Spark program in at least six additional Davis School District schools.

Objective Lead: Ivy Melton Sales

Designated Completion Date\Status: Complete

2.2.3 Promote shared healthy family meal time messages through at least two avenues annually.

Objective Lead: Ivy Melton Sales

Designated Completion Date\Status: Complete

**2.2.4** Work with the Davis County School District to implement an employee vaccination policy.

Objective Lead: Brian Hatch

Designated Completion Date\Status: 12/17

2.2.5a Increase immunization rates by age 2 (4:3:1:3:3:1) in children receiving WIC services from 62.6% (2013) to 85%. (Short-term objective)

Objective Lead: Vener DeFriez

Designated Completion Date\Status: Complete



**2.2.5b** Increase immunization rates by age 2 (4:3:1:3:3:1) in children receiving WIC services to 90%. (Long-term objective)

Objective Lead: Yolanda Cabrera

Designated Completion Date\Status: 12/17



**2.2.6** Increase influenza immunization rates of long-term healthcare workers in Davis County from 66% (2012) to 85%.

Objective Lead: Yolanda Cabrera

Designated Completion Date\Status: 12/17



**2.2.7** Increase the percentage of Davis County adults ages 65+ who report receiving at least one pneumococcal vaccination from 75.1% in 2011 to 90% (Healthy People 2020 Target).

Objective Lead: Yolanda Cabrera

Designated Completion Date\Status: 12/17

2.2.8 Provide employee training on "Principles for Effective Local and State Partnerships" and encourage commitment to practicing the principles in every-day work-life through signed agreement.

Objective Lead: Ivy Melton Sales

Designated Completion Date\Status: Complete

## Priority 3 – Public Health System Coordination

**Goal 1** DCHD actively assesses the effectiveness of the public health system and engages partners to make system improvements.

3.1.1 Conduct local public health system assessment.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete

3.1.2 DCHD will participate in bringing health and human services agencies together to assess county human service's needs, determine appropriate human services coordination structure, and assist with human services improvement plans.

Objective Lead: Lewis Garrett

Designated Completion Date\Status: Removed from Plan



**Goal 2** DCHD provides the community with current, comprehensive information about health and aging network resources and services in Davis County.

3.2.1 DCHD will launch, maintain and promote an online health resource locator to educate about existing health resources and services in Davis County.

Objective Lead: Isa Perry

Designated Completion Date\Status: Complete

## **Priority 4 – Communication**

**Goal 1** Improve communication within DCHD so employees receive clear communication about current events, policies, procedures, and the direction of the department.

4.1.1 The Project Val-You Team, will evaluate communication needs using SWOT survey results and identify areas for improvement.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

4.1.2 A department emergency call down list, department directory, and program directory will be updated and shared with staff.

Objective Lead: Chris Bateman, Liz Carlisle

Designated Completion Date\Status: Complete

4.1.3 The Project Val-You Team will implement at least one communication QI project.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Complete

4.1.4a The Project Val-You team will assess a variety of new tools to communicate with employees (may include video updates, newsletters, etc.).

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

4.1.4b Employees will receive an update via a new communication tool.

Objective Lead: Linda Ebert

Designated Completion Date\Status: Complete

- 4.1.5 Hold quarterly department functions/events creating an informal atmosphere for staff to network with employees from across the department from 2014-2018.

Objective Lead: Liz Carlisle

Designated Completion Date\Status: Complete

- 4.1.6 Conduct annual department in-service for all employees from 2014-2018.

Objective Lead: Brian Hatch, Tiffany Leishman

Designated Completion Date\Status: Complete

- 4.1.7 Each division will conduct at least one yearly in-service and/or staff retreat from 2015-2018.

Objective Lead: Dave Spence, Ivy Melton Sales, Kristy Cottrell, Wendy Garcia

Designated Completion Date\Status: Complete

**Goal 2** DCHD will engage in more strategic, relevant, and timely communication with community partners and the public.

- 4.2.1 Develop a social media plan to identify appropriate channels of communication with the community and to strengthen social media presence.

Objective Lead: Ivy Melton Sales

Designated Completion Date\Status: Complete



- 4.2.2 Update DCHD website with the end user in mind to provide current information, improve ease of use, and offer online services.

Objective Lead: Liz Carlisle

Designated Completion Date\Status: Complete

## **Priority 5 – Performance Management & Quality Improvement Culture**

**Goal 1** Develop and implement a department-wide performance management system.

- 5.1.1 Establish a performance management/Quality Council team with representation from all DCHD divisions.

Objective Lead: Anna Dillingham

Designated Completion Date: Complete

- 5.1.2 Develop a performance management framework.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Complete
- 5.1.3 Develop and provide advanced performance management training to Quality Council members, senior leadership, and the Management Team.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Complete
- 5.1.4 Provide basic performance management training to 85% of DCHD employees.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Complete
- 5.1.5 Provide training opportunities for performance management on an ongoing basis, at least one training every three years for each employee.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Removed from Plan
- 5.1.6 Each DCHD bureau will develop at least two measures for monitoring.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Complete
- 5.1.7 All DCHD bureaus will have fully developed standards, measures, and targets.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: 8/17

**Goal 2** Build capacity for doing QI and implement QI to increase effectiveness and efficiency of DCHD programs.

- 5.2.1 Develop a Quality Improvement Plan that will closely align with performance management system.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Complete
- 5.2.2 Develop and provide advanced QI training to Quality Council members, senior leadership and the management team.  
Objective Lead: Anna Dillingham  
Designated Completion Date\Status: Complete

5.2.3 Provide ongoing training opportunities for QI, at least one training every three years for each employee.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Removed from Plan

5.2.4 Each DCHD division will identify an area of improvement and will complete and document at least one QI project in this area annually.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 12/17

5.2.5 Provide basic QI training to 85% of DCHD employees.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Complete

5.2.6 Complete at least one department-wide QI project.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Complete

5.2.7 Conduct a self-assessment of organizational capacity and culture of QI (e.g. NACCHO's self-assessment tool) to identify targets for continued improvement.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Complete

## Priority 6 – Workforce Development

**Goal 1** Create a culture in which employees feel valued and appreciated.



6.1.1 Complete a QI project to measure and improve employees' sense of value and appreciation.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Complete

6.1.2 Provide recognition to engaged employees.

Objective Lead: Liz Carlisle

Designated Completion Date\Status: Complete

**Goal 2** DCHD will ensure a competent public health workforce.



**6.2.1** Every employee will be provided the opportunity to develop a Personal Professional Development Plan (PPDP).

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 12/17

6.2.2 At least 85% of employees will have completed mandatory and program specific required trainings.

Objective Lead: Liz Carlisle

Designated Completion Date\Status: Complete

6.2.3 100% of required licensures and certifications will be current.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

6.2.4 Develop a procedure for employees to request an alternative work schedule for the purpose of pursuing formal education.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

6.2.5 Provide essential functions training opportunities.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

**6.2.6** Create a public health core competency and aging network curriculum and certificate program.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 12/17



6.2.7 Develop a project based learning system to cross train employees.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Removed from Plan

6.2.8 Review and update the workforce development standard.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

**Goal 3** Develop and improve supervisory, leadership, and programmatic skills of DCHD managers.

6.3.1a Develop an employee handbook to be implemented department-wide.

Objective Lead: Ivy Melton Sales

Designated Completion Date\Status: Complete



6.3.1b The Workforce Development Team will annually review the employee handbook.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: Complete

6.3.2 Provide a curriculum on management principles that current managers are required to attend.

Objective Lead: Dee Jette

Designated Completion Date\Status: Complete

## Priority 7 – Employee Wellness

**Goal 1** Improve the health and well-being of DCHD employees.

**7.1.1** Maintain a standing DCHD wellness committee.

Objective Lead: Dave Spence

Designated Completion Date\Status: 12/17

7.1.2 DCHD wellness committee will create a mission and logo for the program.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

7.1.3 Complete a comprehensive employee wellness program plan.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete



7.1.4 Annually 90% of employees will participate in the HRA.

Objective Lead: Brian Hatch

Designated Completion Date\Status: Removed from Plan

- 7.1.5 Write a health risk assessment standard.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Complete
- 7.1.6 60% of employees will be in the minimum risk category for blood pressure.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Removed from Plan
- 7.1.7 80% of employees will be in the minimum risk category for cholesterol.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Removed from Plan
- 7.1.8 90% of employees will be in the minimum risk category for glucose.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Removed from Plan
- 7.1.9 40% of employees will be in the minimum to moderate risk category for body fat.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Removed from Plan
- 7.1.10 50% of employees will receive at least 150 minutes of physical activity in a week.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Complete
- 7.1.11 The DCHD Clearfield campus will make one infrastructure change to increase physical activity.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Complete
- 7.1.12 Provide at least six adult recess opportunities for employees.  
Objective Lead: Tiffany Leishman  
Designated Completion Date\Status: Complete
- 7.1.13 Provide at least six educational opportunities for staff through brown bag instruction and/or health tip emails.

Objective Lead: Tiffany Leishman

Designated Completion Date\Status: Complete

**7.1.14** Establish a physical activity release time policy.

Objective Lead: Brian Hatch

Designated Completion Date\Status: 12/17



**7.1.15** Monitor the percentage of employees in the minimum risk categories for blood pressure, cholesterol, glucose, and body fat to identify trends. [12/18]

Objective Lead: Brian Hatch

Designated Completion Date\Status: Removed from Plan



## **Summary of Remaining Objectives**

### **Completion Due in 2017**

#### **Priority 1 – Davis County Community Health Improvement Plan**

- 1.1.4 DCHD staff will promote activities and messages that support the four CHIP priorities through news media, social media, and other channels.

Objective Lead: Isa Perry

Designated Completion Date\Status: 12/17

- 1.1.7 Document success toward meeting long-term CHIP objectives.

Objective Lead: Isa Perry

Designated Completion Date\Status: 12/17

- 1.1.12 Promote the benefits of comprehensive employee wellness programs to at least five worksites.

Objective Lead: Marcie Clark

Designated Completion Date\Status: 12/17

- 1.1.17 Increase by at least one the number of no idling policies adopted by businesses, cities, and other organizations annually.

Objective Lead: Dennis Keith

Designated Completion Date\Status: 12/17

#### **Priority 2 – Utah State-Wide Health Improvement Plan**

- 2.2.4 Work with the Davis County School District to implement an employee vaccination policy.

Objective Lead: Brian Hatch

Designated Completion Date\Status: 12/17

- 2.2.5b Increase immunization rates by age 2 (4:3:1:3:3:1) in children receiving WIC services to 90%. (Long-term objective)

Objective Lead: Yolanda Cabrera

Designated Completion Date\Status: 12/17

- 2.2.6 Increase influenza immunization rates of long-term healthcare workers in Davis County from 66% (2012) to 85%.

Objective Lead: Yolanda Cabrera

Designated Completion Date\Status: 12/17

- 2.2.7 Increase the percentage of Davis County adults ages 65+ who report receiving at least one pneumococcal vaccination from 75.1% in 2011 to 90% (Healthy People 2020 Target).

Objective Lead: Yolanda Cabrera

Designated Completion Date\Status: 12/17

## **Priority 5 – Performance Management & Quality Improvement Culture**

- 5.1.7 All DCHD bureaus will have fully developed standards, measures, and targets.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 8/17

- 5.2.4 Each DCHD division will identify an area of improvement and will complete and document at least one QI project in this area annually.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 12/17

## **Priority 6 – Workforce Development**

- 6.2.1 Every employee will be provided the opportunity to develop a Personal Professional Development Plan (PPDP).

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 12/17

- 6.2.6 Create a public health core competency and aging network curriculum and certificate program.

Objective Lead: Anna Dillingham

Designated Completion Date\Status: 12/17

## **Priority 7 – Employee Wellness**

7.1.1 Maintain a standing DCHD wellness committee.

Objective Lead: Dave Spence

Designated Completion Date\Status: 12/17

7.1.14 Establish a physical activity release time policy.

Objective Lead: Brian Hatch

Designated Completion Date\Status: 12/17