

MADISON COUNTY HEALTH DEPARTMENT STRATEGIC PLAN, 2011-2016

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Madison County Health Department Strategic Planning Committee

For
Madison County Board of Health
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Executive Summary

The strategic planning process is meant to strengthen the organization internally, and focus on range of agency-level organizational goals, strategies, objectives, and new initiatives.

Public health serves communities and individuals by providing an array of essential services through the core functions of public health: Assessment, Policy Development, and Assurance. This document serves as a foundation for both short-term and long-range planning in accordance to the 10 Essential Public Health Services.

National accreditation of local public health departments through the Public Health Accreditation Board (PHAB) is scheduled to launch sometime in 2011. PHAB accreditation requirements include an organizational strategic plan, community health assessment, and community health improvement plan. By fulfilling these requirements, Madison County Health Department (MCHD) can apply for accreditation if desired, when Illinois deems voluntary accreditation status for certified local health departments.

In mid-2009, MCHD started working on its 4th Community Health Assessment and 5-year Community Health Plan to maintain certification from the Illinois Department of Public Health (IDPH). This is known as The Illinois Project for Local Assessment of Needs (IPLAN). To fulfill the organizational capacity assessment required by IPLAN and based on MCHD staff and Board of Health (BOH) input, *The National Association of County and City Health Officials (NACCHO) "Local Health Department Self-Assessment Tool – Operational Definition of a Functional Local Health Department Capacity Assessment for Accreditation Preparation"* tool was used to assess the department's strengths and weaknesses based on the essential services framework.

The Strategic Planning Committee consisted of BOH members, Health Advisory Committee (HAC) members and MCHD management staff. A Facilitator from Illinois Public Health Institute Center for Community Capacity Development led the committee through a series of meetings over a seven month period to review the agency's vision, mission, and values; conduct a Strength, Weakness, Analysis, Threat (SWOT) analysis; and develop strategic goals and objectives. All BOH, HAC members and MCHD staff were involved via surveys to review, evaluate and provide additional comments on the strategic planning committee projects and tasks.

For continuous quality improvement, the purpose of this plan is to guide MCHD's work, growth, goals, objectives and action plans over the next 5 years. This plan will be used to address the health priorities addressed in the Madison County Community Health Plan, 2011-2016. These priorities include: Obesity, Substance Abuse, Mental Health, Teenage Pregnancy, and Environmental/Air Quality. Implementation strategies and timelines have been developed to clearly define the MCHD role in addressing the health priorities.

Purpose and Practices of Public Health¹

What Public Health Does (The Purpose of Public Health)

The fundamental obligation of agencies responsible for population-based health is to:

- Prevent epidemics and the spread of disease
- Protect against environmental hazards
- Prevent injuries
- Promote and encourage healthy behaviors and mental health
- Respond to disasters and assist communities in recovery
- Assure the quality and accessibility of health services

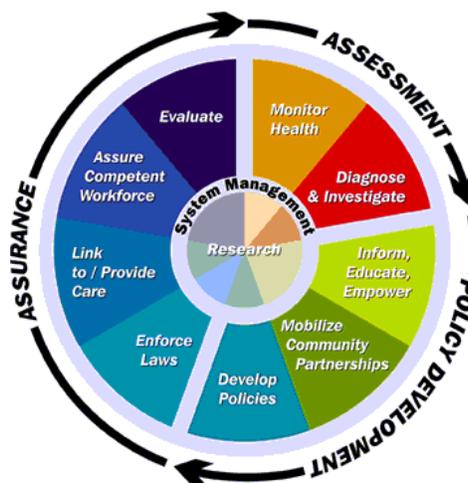
These responsibilities describe and define the function of public health in assuring the availability of quality health services. Both distinct from and encompassing clinical services, public health's role is to assure the conditions necessary for people to live healthy lives, through community-wide prevention and protection programs.

Core Public Health Functions

Assessment
Policy Development
Assurance

How Public Health Serves (The Practice of Public Health)

Public health serves communities and individuals within them by providing an array of essential services. Many of these services are invisible to the public. Typically, the public only becomes aware of the need for public health services when a problem develops (e.g., an epidemic occurs). The *practice* of public health becomes the following ten "essential services":



The 10 Essential Public Health Services

1. Monitor health status to identify community health problems:

This service includes accurate and periodic assessment of the community's health status including identification of health risks, attention to vital statistics and disparities and identification of assets and resources. Also included is the utilization of methods and technology, such as GIS, to interpret and communicate data and population health registries.

2. Diagnose and investigate health problems and health hazards in the community:

This service includes timely identification and investigation of health threats, availability of diagnostic services, including laboratory capacity, and response plans to address major health threats.

3. Inform, educate, and empower people about health issues:

This service includes initiatives using health education and communication sciences to build knowledge and shape attitudes, inform decision-making choice and develop skills and behaviors for healthy living. Also included are health education and health promotion partnerships within the community to support healthy living as well as media advocacy and social marketing.

4. Mobilize community partnerships to identify and solve health problems:

This service includes constituency development and identification of system partners and stakeholders, coalition development as well as formal and informal partnerships to promote health improvement.

5. Develop policies and plans that support individual and community health efforts:

This service includes policy development to protect health and guide public health practice, community and state planning and alignment of resources to assure successful planning.

6. Enforce laws and regulations that protect and ensure safety:

This service includes review, evaluation and revision of legal authority, laws and regulation. Also included are education about laws and regulations, advocating of regulations needed to protect and promote health and support of compliance efforts and enforcement as needed.

7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable:

This service includes identifying populations with barriers to care, effective entry into a coordinated system of clinical care, on-going care management, culturally appropriate and targeted information for at risk population groups as well as transportation and other enabling services.

8. Assure a competent public health and personal health care workforce:

This service includes assessment of the public health and personal health workforce, maintaining public health workforce standards including efficient processes for licensing/credentialing requirements and use of public health competencies. Also included is Quality Improvement and life-long learning, including leadership development and cultural competence.

9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services:

This service includes ongoing evaluation of health programs based on analysis of health status and service utilization of data to assess program effectiveness and to provide information necessary for allocation resources and re-shaping programs.

10. Research for new insights and innovative solutions to health problems:

This service includes identification and monitoring of innovative solutions and cutting-edge research to advance public health. Also included are linkages between public health practice and academic/research settings and epidemiological studies, health policy analyses and health systems research.

¹ References:

Baker, E.L., Melton, R.J., Strange, P.V., Fields, M.L., Koplan, J.P., Guerra, F.A., & Satcher, D. (1994). Health reform and the health of the public: Forging community health partnerships. *JAMA*, 272(16), 1276-1282.

Institute of Medicine (1988). *The Future of Public Health*. Washington, DC: National Academy Press.

Blueprint for a Healthy Community (1994). Washington, DC: National Association of County Health Officials.

Roper, W.L., Baker, E., Dyal, W.W., & Nicola, R.M. (1992). Strengthening the public health system. *Public Health Reports*, 107(6), 609-615.

Core Public Health Functions: A Progress Report from the Washington State Core Government Public Health Functions Task Force (January, 1993). Olympia, WA: Washington Department of Health.

Strategic Planning Model / Methodology

Strategic Planning Committee Members

Toni M. Corona, Public Health Administrator	Harold Johnson, Health Advisory Committee
Michael Holiday, Sr., Board of Health	Marcia Custer, Health Advisory Committee
Kent Scheibel, Board of Health	Betty Stone, Health Advisory Committee
Mary Cooper, Health Department	Joanne Condellone, Health Advisory Committee
Debra Tscheschlok, Health Department	Debbie Knoll, Health Department
Scott Pursell, Health Department	Amy J. Yeager, Health Department

Strategic Planning Facilitator

Laurie Call, Illinois Public Health Institute Center for Community Capacity Development

Planning Group Meetings

Tuesday, July 13, 2010
Tuesday, August 10, 2010
Tuesday, September 14, 2010
Tuesday, October 12, 2010
Tuesday, November 9, 2010
Tuesday, January 18, 2011

BOH, HAC, and MCHD Staff Surveys

Surveys were sent to Board of Health (BOH), Health Advisory Committee (HAC) and MCHD Staff to solicit feedback about the revisions of the agency's vision, mission, and value statements, and the agency's Strengths, Weaknesses, Opportunities, Threats. Both survey tools and summaries are in appendices.

Components of Strategic Planning Process

Vision, Mission, Guiding Principles/Values Revision
NACCHO Operational Definition Self Assessment Tool
Strengths, Weaknesses, Opportunities, Threats Analysis
Review of 2011-2016 IPLAN Priorities and MCHD role in each priority
Goals and Objectives with development of measurable outcomes and targeted time frames

Vision, Mission, Values

VISION

Healthy choices, people and places. Healthy Madison County.

MISSION

To promote, protect, and assure conditions for optimal health through leadership, partnership, prevention and response.

VALUES

We believe in ...

- Being sensitive to cultural factors influencing health
- Encouraging employees to pursue personal and professional growth
- Delivering high quality services
- Identifying and minimizing health disparities
- Maintaining a qualified work force dedicated to fulfilling their roles
- Providing programs necessary to promote and protect community
- Sustaining partnerships and maintaining community collaborations

Madison County Health Department Self Assessment

The NACCHO Local Health Department Self-Assessment Tool, *Operational Definition of a Functional Local Health Department Capacity Assessment for Accreditation Preparation Tool* allows local health departments to measure themselves against the Operational Definition of a functional local health department and subsequently identify areas of strength and areas for improvement. Focus areas and indicators in the tool are aligned with the 10 Essential Public Health Services. The services provide consistent standards regarding how local health departments fulfill their fundamental responsibility of keeping people healthy.

MCHD managers completed the self-assessment tool. The results were summarized and then shared with the Strategic Planning Committee. Next a analysis of Strengths, Weaknesses, Opportunities and Threats (SWOT analysis) was conducted with strategic planning members and MCHD staff via survey to further identify strengths and opportunities.

The agency scored well on topics involving collection of records, trainings, meetings, disease reports, surveillance, preparedness, stakeholder engagement and some communication within focus topics. In addition, the agency has conducted three community health assessments and developed three 5-year community health plans since the department formed in 1996.

The findings also suggested that the organization has a strong focus on disease reporting relationships, community assessment and health plan development, outbreak investigations, leading response during public health emergencies, engaging stakeholders, working well with media, and has competent and credible regulatory authority.

Weaknesses were noted primarily around focus areas addressing sufficient staffing and resources for agency service delivery. Health disparities need to be better addressed throughout the agency as programs and services are developed and implemented. Quality improvement and management strategies need to be implemented. It was identified that the agency has minimal capacity for the data analysis topics in the tool. Written protocols need to be updated, revised and/or created in some circumstances.

Data analysis capacity is minimal at this time. Evaluation of programs and services delivered by the agency needs to be developed and implemented. There is a definite lack of funding for addressing identified health priorities within Madison County.

Finally, the process revealed that data sharing between Divisions could be improved. Shared documentation and knowledge can improve internal services of the agency. Staff development could be enhanced with efforts to effectively communicate the agency infrastructure (i.e. improved organizational chart, comprehensive annual report booklet, staff orientation, etc.).

Operational Definition Self Assessment Results

KEY DESCRIPTION:

No capacity: There is no capacity, planning, staff, resources, activities, or documentation to fulfill the indicator

Minimal capacity: There is minimal planning and staffing capacity to fulfill the indicator but no implementation activity or documentation

Moderate capacity: There is moderate planning, staffing and other resources to fulfill the indicator but only minimal activity and/or documentation

Significant capacity: There is significant planning, staffing, and other resources and a moderate amount of activity and/or documentation

Optimal capacity: There is significant planning, staffing and resources and significant to optimal activity and/or documentation to fulfill the indicator

ESSENTIAL PUBLIC HEALTH SERVICE	MCHD Capacity
Monitor health status to identify community health problems	
<ul style="list-style-type: none"> • data collection, processing and maintenance • disease reporting relationships; make data and information flow routine • conduct or contribute expertise to periodic community health assessments • integrating data/data sharing with community partners • data analysis 	Optimal Moderate Optimal Minimal Minimal
Diagnose and investigate health problems and health hazards in the community	
<ul style="list-style-type: none"> • routine outbreak investigations • alleviate health problems and adverse health events • working with other governmental agencies on routine investigation and response • take lead in emergencies that are public health in nature • participate when other agencies are in the lead • access to lab and biostats resources • capacity for emergency communications and data exchange 	Optimal Minimal Moderate Optimal Optimal Optimal Optimal
Inform, educate, and empower people about health issues	
<ul style="list-style-type: none"> • develop and implement media strategies • general data and information exchange on issues affecting population health • provide health information to individuals for behavior change • health promotion programs for behavior and environmental/community change 	Optimal Minimal Significant Moderate
Mobilize community partnerships to identify and solve health problems	
<ul style="list-style-type: none"> • community planning process engaging systems partners • raise awareness & gain general public support for the plan and a deeper understanding of public health issues • support partners to implement action • reporting progress, advocating for resources to implement priorities 	Optimal Minimal Minimal Moderate

Develop policies and plans that support individual and community health efforts	
<ul style="list-style-type: none"> • primary scientific resource for policy change in public health • policy advocacy for health improvement • local health department role in implementing community health improvement plan 	Significant Minimal Minimal
Enforce laws and regulations that protect and ensure safety	
<ul style="list-style-type: none"> • review and update public health authority • link local health department practice to existing law and regulation in an appropriate way • communication with and education of regulated entities on how to comply with laws • tracking & understanding patterns of compliance with regulation • competent and fair enforcement actions • notify other government agencies of enforcement violations 	Significant Optimal Optimal Optimal Optimal Moderate
Link people to needed personal health services and assure the provision of health care when otherwise unavailable	
<ul style="list-style-type: none"> • community-oriented program planning • prevention and personal healthcare system building • individual-focused linkages to needed care 	Optimal Optimal Moderate
Assure a competent public health and personal health care workforce	
<ul style="list-style-type: none"> • overall human resources function/ workforce capacity • public health competencies of existing workforce • developing the future workforce • effective public health practices used by other practitioners • adequate resources (educational & equipment) for job performance 	Significant Significant Optimal Significant Optimal
Evaluate effectiveness, accessibility, and quality of personal and population-based health services	
<ul style="list-style-type: none"> • local health department evaluation strategy focuses on community outcomes • use of evidence- based methodology for evaluation • evaluate local health department programs • external evaluation of other's programs 	Minimal Minimal Significant Significant
Research for new insights and innovative solutions to health problems	
<ul style="list-style-type: none"> • participate in research activities • disseminate research findings • apply research results in local health department activities 	Moderate Moderate Moderate

SWOT Analysis Summary

In addition to the self assessment, a analysis of Strengths, Weaknesses, Opportunities and Threats (SWOT analysis) was conducted with strategic planning members and MCHD staff via survey to identify strengths and opportunities regarding the agency.

WEAKNESSES

OPTIONS FOR MINIMIZING

<ul style="list-style-type: none"> • Cultural Competence Inclusivity • Language Inclusion • Staffing Demographics? • Staffing must accommodate services • Culture of youth violence, technology etc. 	<i>Training for Staff</i> <ul style="list-style-type: none"> • Awareness • Lessen sensitivity • Changes in culture esp. with certain groups • Education
Dialogue/Communication with other local government	See <i>general communication section</i>
Need for Assistant Administrator and Management Audit of Duties/Focus	See <i>internal capacity building</i>
Communication – External/Internal	<i>External:</i> <ul style="list-style-type: none"> • Work with local governments when needed • Tell the public health story <i>Internal:</i> <ul style="list-style-type: none"> • Improve communication between management and staff • Invite staff to share expertise as a speaker Internal Madison County Health Department • Policies & Procedures could be more accessible • Consider a Comment Box System
Lack of Human Resource Expertise	<ul style="list-style-type: none"> • Labor-Management Training • Discipline and Discharge • Make organizational chart accessible • Identify opportunities for staff to share expertise and growth • Engage in internal Capacity Building
Lack of opportunities for upward movement within the organization	<ul style="list-style-type: none"> • External position audit • Distribution of roles (grant writing, operational oversight)
Minor negativity among staff	<i>Negativity - Improve communication</i>
Funding	<ul style="list-style-type: none"> • Establish a Foundation • Seek community partners
Lack of access/use of social media	

OPPORTUNITIES

OPTIONS FOR TAKING ADVANTAGE

Explore options for forming 501-C3	Need objective/professional legal guidance to explore
Use of Media for: <ul style="list-style-type: none"> • External Communication (Information on Madison County Health Department services & activities) • To show how tax money spent • Show health disparities • Educate 	<ul style="list-style-type: none"> • Update brochure • Weekly information sharing with community (Community affairs & articles) • Social media
Refined Reporting – Shoot executive summary of data analysis for Board/Health Advisory Committee OPPORTUNITY-Board of Health/Health Advisory Committee understanding	Short executive summary/bullet point analysis on data reports to Board of Health/Health Advisory Committee
Always look for additional funding	Staff be aware of bringing funding opportunities to table
Increasing County millage (scale) to Madison County Health Department	<ul style="list-style-type: none"> • Health Advisory Committee to Board Committee • Taking advantage of Madison County Health Department • Success with health outbreaks etc.
County Board as Board of Health	Opportunity & Challenge
Electronic Health Records	<ul style="list-style-type: none"> • Online appointments/streamlining • Build in training time
Madison County Health Department Building Space	

Environmental Health Ranking	Room for growth & new partnership
Partnering with major hospitals & universities for research	Explore opportunities to partner and participate as they contribute to mission

CHALLENGES

OPTIONS FOR OVERCOMING EACH CHALLENGE

Serving large County from 1 city (Wood River)	Using Township Buildings for outreach/Clinic Services (Already do this/Do more when you have more staff)
Competition (substance abuse)	Identify competitors (Define) Work for Partnership
Grant Writing by Madison County Health Department Grant Managers (funding)	Higher incentive – based Resource Development Specialist Madison County Health Department grant manager give input to R.D.S.
Reliance on State funding	
Politics of Board & Politician Priorities	Educating constituents about Madison County Health Department – Advocating & engaging
No independent Board of Health	Grass roots movement
Union influence/Effect on Madison County Health Department decisions such as clinic staffing etc.	Negotiate change
Electronic Health Records	Staffing needs, Training time
Low Environmental Health Ranking	IPLAN Priority
Enforcement of Indoor Smoking Ban (Also an opportunity) Challenge and mixed messages with Board of Health	<ul style="list-style-type: none"> • Incentives for enforcement • Already do this

STRENGTHS

Part of county government system
Flat organization
Credibility
Preparedness
Public involvement/input
Partnerships
Consistent & fair (enforcement)
Board of Health Members & employees involved in other State/National organizations
Facility
Forward - Thinking
Diligent fiscal responsibility
Information Technology very updated
Experience & Education of Management
Dedication to Public Health and our community
Willing to step up and take the lead
Diverse areas of expertise
Staff really cares about the public and the services that they provide
Team-spirited and works well-together toward the same goals

Community Health Priorities 2011-2016

The 2011-2016 Madison County Community Health Plan addresses the five health priority areas that were identified through the 2010 Madison County Health Needs Assessment. Each health priority is addressed in an exclusive committee of Madison County Stakeholders who implement the Community Health Plan over the next five years. The Stakeholders are from MCHD, hospitals, schools, agencies, organizations and citizens of Madison County. The Madison County Partnership for Community Health (MCPCH) is the umbrella collaborative for each health priority committee and therefore the action arm for implementation of the community health plan. Each priority has established outcome objectives, impact objectives, contributing factors and intervention strategies to work toward improving the health of Madison County.

The 2011-2016 Madison County Health Priorities:

- 1. Air Quality/Environment**
- 2. Mental Health**
- 3. Obesity**
- 4. Substance Use and Abuse**
- 5. Teen Pregnancy**

Strategic Issues

The Self-Assessment and SWOT results were discussed and used to identify cross-cutting strategic issues to be addressed with the strategic plan. The following strategic issues and objectives for each issue will be addressed over the next 5-year period:

1. Resource Development: Strengthen Workforce and Financial Structure

- Management Audit
- Budget review
- Continuity of Operations Plan
- Succession Plan
- Workforce Development
- Public Health Foundation

2. Reduce Health Disparities

- Educate And Identify Disparate Populations
- Identify Evidence-Based Intervention Strategies
- Address Disparities With Targeted Programs And Services
- Evaluate And Make Necessary Changes

3. Improve Quality and Outcomes of Programs and Services

- Baseline Review
- Determine Effective Evaluation and Quality Improvement Protocol
- Implement Quality Improvement System
- Evaluate Quality Improvement Tools

4. Assure Illinois Project for Local Assessment of Needs (IPLAN) Implementation

- Define MCHD Role In Madison County Partnership For Community Health (MCPCH) With IPLAN Priorities
- Strengthen MCPCH Stakeholders Within IPLAN Priority Areas
- Provide Hard Copy Progress Reports For Priority Committee Work
- Monitor Health Status Indicators

Resource Development- Strengthen Workforce and Financial Structure

Appropriating adequate funding and maintaining a workforce with diverse expertise is needed to fulfill the agency's mission as well as assuring that core public health functions are met within Madison County. Addressing this issue will better prepare the agency to fulfill the public health needs of Madison County; increase credibility with the public, funders, and partners; and promote forward thinking and diligent fiscal responsibility. The workforce complement will enable qualified individuals to assume leadership responsibility and promote professional development.

Year 2011

- Create Scope Of Work And Request For Proposal For MCHD Management Audit
- Establish Fee Reviews Schedule Based Upon Cost Based Allocation Process
- Develop MCHD Succession Plan
- Draft MCHD Continuity Of Operations' Plan (COOP)

Year 2012

- Discuss, Analyze, Allocate And Address Management Audit Findings
- Implement 501-C3 Public Health Foundation
- Workforce Development Plan

Year 2013

- Implement Changes And Determine Effectiveness Of Audit Recommendations
- Workforce Development Continuation

Year 2014

- Evaluate Effectiveness Of Management Audit With Recommended Direction
- Workforce Development Maintenance

Year 2015-2016

- Maintain Audit Findings
- Internal Quality Improvement Evaluation

Reduce Health Disparities

Health department programs and services can be targeted to specific populations for greater impact when the avoidable differences in a populations' health status is known. Disparate populations will be identified, stakeholders educated, and programs implemented as to the issues and circumstances impeding health status of Madison County.

Year 2011

- Define Health Disparity
- Identify Health Disparities In Madison County
- Educate Community, Partners And Stakeholders Of Known Disparities

Year 2012

- Assess Disparities As Related To IPLAN Health Priorities
- Assess Service Availability For Existing Disparities

Year 2013

- Address Disparities
- Implement Programs And Services Which Address Disparities

Year 2014

- Evaluate Effectiveness

Improve Quality & Outcomes of Programs and Services

Evaluation of effectiveness, quality and accessibility of health services is an essential component for local health departments. Increased quality improvement and outcome strategies of public health services and programs lead to improved community health status. MCHD needs a process for evaluation and quality improvement (QI) of programs and services.

Year 2011

- Obtain Baseline To Identify Which Programs And Services Need QI

Year 2012

- Establish QI Committee To Review Existing QI Tools And Models
- Select QI Protocol

Year 2013

- Format And Structure For Reporting Findings And Improvements
- Share Useful Data With Stakeholders And Policy Makers

Year 2014

- Establish Quarterly Self-Evaluation Of Programs And Service To Determine How To Improve Outcomes

Assure IPLAN Implementation

Leadership within each community health priority committee is vital for successful health outcomes. Local Health Department Recertification by Illinois Department of Public Health (IDPH) assures core public health functions in addition to providing base funding for some essential services delivered by MCHD. The Madison County Partnership for Community Health (MCPCH) brings together community partners to optimize health through leadership, partnership, prevention and response.

Year 2011

- Assign MCHD Staff To Each Priority Committee (Obesity, Mental Health, Air Quality/Environment, Teenage Pregnancy, Substance Abuse and Abuse)
- Add MCPCH Information And Documents To Health Department's Website
- Adopt 4th Round Community Health Needs Assessment And Health Plan

Year 2012

- Create Leadership Development Opportunities For IPLAN Stakeholders
- Develop And Implement Health Plan Progress Reports For Each MCPCH Priority Committee

Year 2013

- Evaluate MCHD Involvement, MCPCH Functioning, And Progress Toward Meeting IPLAN Objectives

Year 2014

- Maintain Progress and Implementation
- Pre-Assembly Of Stakeholders For 5th Round Process Of IPLAN

Year 2015-2016

- Conduct Community Health Assessment
- Adopt Health Priorities for next IPLAN

Appendix

MCHD Vision, Mission and Values Survey Questions and Responses

Survey Question 1: The MCHD Strategic Planning Committee met for the first time this month to re-visit the vision and mission and draft guiding values. The Committee is seeking your input into the process by asking for you to provide feedback on the draft statements. Your input is very important to the process as these are "agency" statements. Please review the drafts and offer your feedback to improve and finalize this work which will guide the development of the strategic plan for the Madison County Health Department.

A mission statement should clarify the organization's purpose and indicate why it is doing what it does. It should answer the question, "Ultimately, what are we here to do?" A mission statement is intended to be shared with clients, customers and the larger community to communicate purpose and function of your organization.

The Strategic Planning Committee has drafted the following mission statement: "The Madison County Health Department maximizes community health through leadership, partnership, health promotion and quality health services to protect and assure optimal health for our residents."

Please indicate if you agree with the mission statement and if you have any suggested revisions.

Agree Disagree Suggestions for Improvement:

	Response Percent	Response Count
Agree	78.3%	36
Disagree	21.7%	10

Survey Question 2: A vision statement describes what the organization should look like as it successfully implements its strategies and achieves its full potential. A vision statement answers the question, where and what do we want to be. It is intended to be inspirational and a picture in the future. A vision statement articulates dreams and hopes. The vision statement is for members of the staff and Board of Health as inspiration and direction.

The Strategic Planning Committee has drafted the following Vision Statement, "Positive health impact on all health indicators, elimination of health disparities and through provision of high quality services, a positive built environment and accessible services for all, healthy responsible residents."

Please indicate if you agree with the vision statement and if you have any suggested revisions.

Agree Disagree Suggestions for Improvement:

	Response Percent	Response Count
Agree	69.6%	32
Disagree	30.4%	14

Survey Question 3. Values statements represent the core priorities in the organization's culture, including what drives members' priorities and how they act and provide their services. Values are important in strategic planning as they often serve as drivers and establish framework. Values statements should articulate how the organization will conduct itself and should answer the questions: "How do we want to treat others? and How do we wanted to be treated ourselves?"

The Strategic Planning Committee began brainstorming values that should be included in value statements. The following were included in that brainstorm:

- **Employ passionate, dedicated and empowered employees to fill the roles they serve at the MCHD**
- **Continuously seek employee and community input and engagement and foster mutual respect among each other and with our residents**
- **Assure accessible information, education and preventive and health services for the residents of Madison County to be empowered to reach their optimal health**
- **Work through partnerships and community collaboration to increase the effectiveness and reach of our work**
- **Provide the highest quality services and practice continuous quality improvement and evaluation of our work**
- **Practice consistency, fairness and timeliness in everything we do**
- **Seek to understand our community and changes in our community and its culture to increase our cultural competency and better serve our residents.**

Agree Disagree

Please offer any revisions to specific statements or additional statements that should reflect our values.

	Response Percent	Response Count
Agree	89.1%	41
Disagree	10.9%	5

MCHD SWOT Survey Questions and Responses

Question 1. Based on the feedback provided through the last survey, 78% of respondents agreed with the mission statement. Feedback was offered and the mission statement was revised by the Strategic Planning Committee to address the feedback. As a reminder, a mission statement should clarify the organization's purpose and why it is doing what it does. It should answer the question, "Ultimately, what are we here to do?" A mission statement is intended to be shared with clients/customers, partners, funders and the larger community to communicate purpose and function of your organization. The revised draft mission statement is, "Madison County Health Department promotes, protects, and assures optimal health through leadership, partnership, education, prevention and response." Please indicate whether this mission is relevant and clear?

Response Percent	Response Count
Yes 93.2%	41
No 6.8%	3

Question 2. Based on the feedback provided through the last survey, 70% of respondents agreed with the vision statement. Feedback was offered and the vision statement was revised by the Strategic Planning Committee to address the feedback. As a reminder, a vision is for internal use within an organization and is intended to state the results of fulfilling your mission, a picture of the future communicating where and what you want to be. It is intended to be inspirational and provide direction to staff and BOH members. The revised draft vision statement is, "Through leadership and commitment, Madison County Health Department is a catalyst to influence choices and actions for optimal health." Please indicate whether this vision is relevant and clear?

Response Percent	Response Count
Yes 84.1%	37
No 15.9%	7

Question 3. Please indicate any significant organizational **strengths** in the following areas.

	Response Percent	Response Count
Leadership	64.0%	16
Management	60.0%	15
Structure	36.0%	9
Staff (as a whole)	88.0%	22
Processes	24.0%	6
Culture	36.0%	9

(Defined as the personality of the organization including the collection of assumptions, values, norms and tangible signs of organization members and their behaviors)

answered question	25
skipped question	20

Question 4. Please indicate any significant organizational **weaknesses** in the following areas.

	Response Percent	Response Count
Leadership	60.0%	9
Management	73.3%	11
Structure	60.0%	9
Staff (as a whole)	40.0%	6
Processes	60.0%	9
Culture	46.7%	7

(Defined as the personality of the organization including the collection of assumptions, values, norms and tangible signs of organization members and their behaviors)

answered question	15
skipped question	30

Question 5. Please indicate any significant organizational **strengths** in the following areas.

	Response Percent	Response Count		
Budget	75.0%	9		
Human Resources	66.7%	8		
Information Technology	91.7%	11		
			answered question	12
			skipped question	33

Question 6. Please indicate any significant organizational **weaknesses** in the following areas.

	Response Percent	Response Count		
Budget	92.9%	13		
Human Resources	57.1%	8		
Information Technology	57.1%	8		
			answered question	14
			skipped question	31

Question 7. Please indicate any significant organizational **strengths** in the following areas.

	Response Percent	Response Count		
Internal Communications	90.9%	10		
External Communications	72.7%	8		
			answered question	11
			skipped question	34

Question 8. Please indicate any significant organizational **weaknesses** in the following areas.

	Response Percent	Response Count		
Internal Communications	83.3%	10		
External Communications	66.7%	8		
			skipped question	33

Question 10. Please indicate any significant external opportunities with enough detail to interpret how/why this may be an opportunity for the organization.

	Response Percent	Response Count		
Social	46.2%	6		
Economic	53.8%	7		
Political	46.2%	6		
Technological	61.5%	8		
Environmental	38.5%	5		
Scientific	46.2%	6		
Legal	30.8%	4		
Ethical	7.7%	1		
			answered question	13
			skipped question	32

Question 11. Please indicate any significant external threats with enough detail to interpret how/why this may be a potential threat or challenge for the organization.

	Response Percent	Response Count		
Social	31.3%	5		
Economic	75.0%	12		
Political	50.0%	8		
Technological	25.0%	4		
Environmental	43.8%	7		
Scientific	12.5%	2		
Legal	25.0%	4		
Ethical	12.5%	2		
			answered question	16
			skipped question	29

Question 13. As I complete this feedback survey, I am (check only one that best describes your role as you complete this survey):

	Response Percent	Response Count		
MCHD staff	74.4%	29		
County Board of Health	10.3%	4		
Health Advisory Committee	12.8%	5		
Health Department Committee	2.6%	1		
Other (please specify)		1		
			answered question	39
			skipped question	6

Glossary of Acronyms

BOH	Board of Health
COOP	Continuity of Operations Plan
HAC	Health Advisory Committee
IDPH	Illinois Department of Public Health
IPLAN	Illinois Project for Local Assessment of Needs
LHD	Local Health Department
MCHD	Madison County Health Department
MCPCH	Madison County Partnership for Community Health
PHAB	Public Health Accreditation Board
QI	Quality Improvement
RDS	Resource Development Specialist
SWOT	Strengths, Weaknesses, Opportunities, Threats