



Randolph County Health Department Strategic Plan 2014-2016

2222-B South Fayetteville Street
Asheboro NC 27205
Phone (336)318-6200
<http://www.co.randolph.nc.us/ph/>

Table of Contents

Introduction.....	3
Strategic Planning Process.....	3
Contributors	4
Mission	5
Values	5
Strengths, Weaknesses, Opportunities and Threats	5-6
Priorities, Objectives and Strategies	7-13

Introduction

The Randolph County Health Department’s Strategic Plan describes the agency’s operational framework and key priority areas for the years 2014-2016. Through a collaborative process involving health department staff, partnering agencies, organizations and community members, health priorities have been identified for the county. The Strategic Plan outlines the Randolph County Health Department’s commitment to focus on these areas while still meeting the operational goals of the agency. The Randolph County Health Department serves as the lead in many of the goals outlined in this report. However, a successful outcome is only achieved through the collaboration of agencies, organizations and committees working together toward these common goals.

Strategic Planning Process

Members of the Randolph County Health Department Management Team and partnering agencies, organizations and committee members met for a day and a half to determine the needs of key partners and to establish strategic priorities for the health department. Advisory Committee Members helped define the strategic framework by:

- Review of the health department’s mission statement
- Appreciative Inquiry: Solving problems by “What’s Going Right”
- SWOT – strengths, weaknesses, opportunities and threats
- Defining stakeholders
- Developing goals, sub-goals and objectives
- Outlining next steps

Strategic Planning Timeline	
Survey development	July 26, 2013
Surveys deployed	August 19, 2013
Data collection deadline <ul style="list-style-type: none"> • Employee Survey • Partners Survey • Customer and Community Survey 	<ul style="list-style-type: none"> • September 6, 2013 • September 23, 2013 • September 30, 2013; not to be extended past October 18, 2013
Finance data review	<ul style="list-style-type: none"> • No later than November 2, 2013
Proposed dates for 1 ½ day planning meeting	<ul style="list-style-type: none"> • November 21-22, 2013 or • December 5-6, 2013 or • December 12-13, 2013
Place of the meeting	RCC Foundation Center

Contributors

Health Department Staff

MiMi Cooper, Health Director
Susan Hayes, Assistant Health Director
Karen Allen, Environmental Health Supervisor
Kathi Auman-Einig, WIC/Nutrition Director
Leigh Casaus, Animal Control Supervisor
Cynthia Grantham, Nurse Manager
Ava Harrington, Clerical Supervisor
Darlene Hill, Finance Officer
Becky Hinshaw, Nurse Manager
Wayne Jones, Environmental Health Supervisor
Wendy Kennon, Health Educator
Arey Rash, Nursing Supervisor
Misty Smith, Clerical Supervisor
Beth Thomas, Dental Hygentist

Board of Health

Dr. Charles Lee
Cathy Clark

External Support

Jennifer Beasley, Liberty Early Childhood Center
Kimberly Burger, Public Health Education Intern
Beth Duncan, Department of Social Services
Jaimie Coble, Public Health Dietetic Intern
Elworth Cheek, Mt. Nebo Holiness Church
Devin Griffith, Randolph Hospital
Todd Henderson, Randolph County Schools
Jonny Hussey, Randolph County Sheriff's Department
Steve Orton, UNC School of Public Health
Brad Rice, Asheboro City Schools
Candie Rudzinski, Randolph County Senior Adults
Lewis Schirloff, Randolph County Emergency Management
Kristen Terry, Asheboro Cultural and Recreation Services
April Thornton, Randolph Hospital
Beverly Wall, Randolph County Head Start

Mission

To preserve, protect and improve the health of the community through collection and dissemination of health information, education and service programs aimed at the prevention of disease, protection of the environment and improvement of the quality of life for our citizens.

Values

- Quality: doing great work
- Strong community network and support
- Strong teamwork inside the agency and solid collaboration outside the agency
- Flexibility: adapting and learning
- Quick response during a public health crisis
- Prevention: working upstream

Strengths

- Effective internal communication
- Strong and quick responses during a public health crisis
- Stable, strong staff with experience
- Great new hires originating from intern pool
- Staff network, partner link and collaborate well with outside agencies/organizations
- Outreach
- Prioritization
- Limited duplication in services offered or provided
- Timely in meeting mandates
- Prevention
- Flexibility: able to learn, respond, change

Weaknesses

- Financial instability
- Staff turnover / reluctance to accept change
- Current political environment

Opportunities

- Regional landfill: potential \$30 million for county
- Health department integrated clinic, “no wrong door” approach
- Intergenerational living: creating opportunities for young people
- Cross-training
- Quality improvement

Threats

- High unemployment drags down health
- No Medicaid expansion (yet) = budget woes
- Loss of programs impacting community

Combination of Opportunities and Threats

- *Regional landfill*
- *Environmental Health Record: might help with surveillance, access, continuity, might hurt, might crash*
- *Affordable Care Act: wait and see, vague now*
- *Budget constraints: opportunity if we are creative and flexible, develop partners, retrain, redeploy*

Priorities, Objectives and Strategies

Based on input from the Strategic Planning Advisory Committee and the community through the Community Health Assessment, the Randolph County Health Department identified four strategic priorities.

1. Obtain funding to support services (revenue enhancement)
2. Maximize partnerships
3. Promote wellness/lifestyle changes by increasing healthy behaviors including healthy eating and physical activity, and reduction in tobacco use
4. Improve processes and efficiency of integrated clinic

This section outlines the strategies and objectives for each priority. The primary strategies that will support the objectives are listed below with the lead individual and key partners responsible for implementation.

Priority 1: Obtain funding to support services (revenue enhancement)

Objective 1: By December 2016, the Randolph County Health Department will maximize reimbursement by increasing accuracy on coding medical services and billing by taking a teamwork approach.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
<p>1.1a Assure that staff are coding procedures correctly by:</p> <ul style="list-style-type: none"> • Make sure staff understand the new ICD-10 codes through training/reminders/ record audits • Billing staff and nursing staff will notify providers when codes are omitted or are not typical of the procedure 	<p>Reimbursement will increase by at least 2% per year.</p>	<p>Administration Billing/clerical support Nurses Lab Technicians</p>	<p>Years 1-3</p>	
<p>1.1b Assure that all necessary client personal data information is documented in order to bill clients directly</p> <ul style="list-style-type: none"> • Gather all required information when clients are registered in HIS • Update addresses and contact information for all clients whether they are visiting the Health Department or contacting the Health Department by phone • Make sure that all clients who are delinquent with outstanding balances of greater than or equal to \$50.00 are entered into the Debt Set-off program 	<p>Reimbursement will increase by at least 2% per year.</p>	<p>Billing / clerical support Administration</p>	<p>By end of year 1</p>	

Objective 2: By December 2016, the Randolph County Health Department will maximize revenue enhancement to further services by exploring external funding opportunities.

Strategies	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
1.2a Continually seek grant funding	Review available grant opportunities and apply for grants that match our needs	Health Director Health Educator Health Department Staff	Years 1-3	
1.2b Constantly monitor WIRM funds allocated to the Health Department to ensure all funds available are collected.	100% of available allocated funds will be collected each year.	Accounting Specialist Health Director	Years 1-3	

Objective 3: By December 2016, the Randolph County Health Department will seek partners to share the costs of programs and services.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
1.3a Identify and propose to partner agencies costs saving opportunities that enhance services	Develop at least one proposal where costs may be shared with partner (s)	Health Director Management Team	Years 1-3	

Objective 4: By December 2016, the Randolph County Health Department will reduce agency costs by a reduction in waste.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
1.4a Develop a plan to save money by using resources more efficiently, eliminating wasteful spending and reducing waste.	The budget should reflect a 2% reduction in costs annually.	Health Director Accounting Specialist Purchasing Clerk Management Team Health Department Staff	Years 1-3	

Priority 2: Maximize Partnerships

Objective 1: By 6-30-2016 maximize the health department partnerships by creating a county-wide training website to be used by employees of the health department and partnering agencies.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress / Outcome
2.1a Partner with community agencies to create a training website	A website where agency partners may list trainings and education opportunities they are willing to share for staff participation.	Lead: Health Department and County IT Department Partnering agencies	Years 1-3	
2.1b Create a routine forum for agencies to come together to share information about services	Meeting (s) offered by the Health Department	Health Department and partnering agencies	By the end of Year 1	

Priority 3: Promote wellness/lifestyle changes by increasing healthy behaviors including healthy eating and physical activity, and reduction in tobacco use

Objective 1: Increase the number of providers that offer smoking cessation by training 12 individuals to facilitate six smoking cessation programs throughout Randolph County.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
3.1a Offer at least 12 participants the opportunity to attend the Quit Smart facilitator training	<ul style="list-style-type: none"> Decrease the number of Randolph County residents who smoke Decrease the number of residents who are exposed to secondhand smoke 	Lead: Randolph Hospital <ul style="list-style-type: none"> Coordinate & offer the Quit Smart Facilitator Training Partners: health department, private physicians, urgent care providers, worksites,	January 2014 – July 2014	

		<p>churches, RCC, etc.</p> <ul style="list-style-type: none"> • Select individuals to attend facilitator training • refer clients, employees or members for intervention 		
	<p>Implement at least six class sessions per year with a minimum of 8-10 people per session</p>	<p>Lead: Health Educator and Randolph Hospital</p> <ul style="list-style-type: none"> • Coordinate and implement the Quit Smart Smoking Cessation Program throughout Randolph County <p>Partners: Private physicians, urgent care providers worksites, churches, etc.</p> <ul style="list-style-type: none"> • Refer clients, employees and/or congregations to the Quit Smart Program • Provide space to conduct the classes 	<p>January 2014 – September 2016</p>	

Objective 2: By September 2016, increase the number of residents who are provided with a safe and healthy smoke/tobacco-free environment by working with at least two Randolph County municipalities to adopt a smoke/tobacco-free outdoor policy.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
3.2a Increase and/or strengthen smoke/tobacco-free policies.	<ul style="list-style-type: none"> Decrease the number of Randolph County residents who smoke Decrease the number of residents who are exposed to secondhand smoke 	Lead: Health Educator <ul style="list-style-type: none"> Coordinate efforts with local municipalities and the appropriate agencies Partners: City/Town Mayors or Managers, Local Parks Recreation, Community Transformation Grant Coordinator, Randolph Hospital	January 2014-September 2016	

Objective 3: By September 2016, baseline data for joint-use-agreements will be collected and relationships will be established in at least three areas of Randolph County, with those entities that have space and opportunity to make a joint-use-agreement feasible.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
3.3a Create joint-use-agreements (JUA) in at least three areas of the county	<ul style="list-style-type: none"> Increase the percentage of adults and children who get the recommended amount of physical activity Increase the access to existing walking trails/tracks for residents by developing JUA within the county 	Lead: Health Educator <ul style="list-style-type: none"> Conduct assessment of current JUA and agencies that open facilities for the community Work with agencies to determine why or why not to have JUA 	January 2014 – September 2016	

Objective 4: By September 2016, assessment of Randolph County’s food environment will be completed and at least one food retail store will be identified and targeted for possible transition to offering and promoting healthier food and beverage options

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
3.4a Incorporate healthy food and beverage items in convenient or corner stores	<ul style="list-style-type: none"> • Increase the access to healthier food and beverage items to residents who live within a food desert • Increase the percentage of adults consuming five or more servings of fruits and vegetables per day 	Lead: Health Educator <ul style="list-style-type: none"> • Work with community members and store owners / managers to implement new policy Partners: Randolph Hospital, Cooperative Extension, CTG Coordinator	January 2014 – September 2016	

Objective 5: By September 2016, incorporate at least one healthy food option, per day in backpacks for children participating in the Backpack Pal Program.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
3.5a Incorporate healthier food options in the backpacks for children participating in the Backpack Pal Program	<ul style="list-style-type: none"> • Increase the percentage of children consuming five or more servings of fruits and vegetables per day 	Lead: Randolph Hospital <ul style="list-style-type: none"> • Work with Community in Schools to provide healthier options in the backpacks Partners: Health department, school systems and Community in Schools	January 2014 – September 2016	

Priority 4: Improve processes and efficiency of integrated clinic

Objective 1: By December 31, 2014 utilize health department staff according to their highest scope of work/ practice by cross training for integrated clinics.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
4.1a Cross-train staff for integrated clinics	Cross-training completed	Nursing supervisor Nurse managers Clerical supervisors Management Team	Year 1	
4.1b Develop a statement of Scope of Work/Practice	Include the Scope of Work/Practice statement in competency checklists and in job descriptions as they are created and updated.	Management Team/Supervisors	Year 1	

Objective 2: By June 1, 2014 use customer /staff satisfaction surveys to improve Health Department services.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
4.2a Develop/revise policy to require that information collected through customer/staff opinion surveys be used to improve the Health Department	<ul style="list-style-type: none"> • A written policy. • Evidence of implementation of opinion survey feedback. Should be summarized annually to the Board of Health (can be during a regular meeting or in the Annual Report) 	Management Team/Supervisors	Year 1	

Objective 3: By June 1, 2014 utilize public health core competency standards to assess and meet training and workforce development needs.

Strategy	Outcome	Roles and Responsibilities	Time Frame	Progress/ Outcome
4.3a Incorporate public health core competencies into the performance evaluation/ job description process.	Create a job competency checklist to be implemented in combination with the annual performance evaluation process and included in job descriptions as they are updated and created.	Management Team/Supervisors	Year 1 (by June 30,2014)	