Appendix A: Implementation Plan

Acronyms for Implementation Plan:

AST=Accreditation Support Team

BOH=Board of Health

BOHAC=Board of Health Advisory Committee

DOH=Washington State Department of Health

KCPHD=Kittitas County Public Health Department

LHJ=Local Health Jurisdiction

MT=KCPHD management team

NACCHO=National Association of County and City Health Officials

PHAB=Public Health Accreditation Board

PHUND\$=Public Health Uniform National Data System

PIO=Public Information Officer

SAT=Self Assessment Tool

QI=Quality Improvement

QILT=Quality Improvement Leadership Team

WSALPHO=Washington State Association of Local Public Health Officials

Increase sustainability and stability of public health funding.

PERFORMANCE MEASURES (How will we know we are making progress?)

Short Term Indicators	Source	Frequency
Decreased the county contribution/fund balance budget request by 5% annually.	Annual budget	Annually
Increased clinic revenue by 10% annually.	Financial data	Annually
Eliminated the usage of fund balance in annual budget by 2017.	Annual budget	Annually

Long Term Indicators	Source	Frequency
Increased the number of local or alternative sources of funding from 0 to 3 by December 2019.	Financial data	5 years
At least 80% of all activities in the strategic implementation plan have been completed by December 2019.	Plan monitoring	5 years

STRATEGIES (What will we do to achieve our goal?)

Analyze trends in budget, revenues, and expenses and compare to other LHJs.

Objectives:

- Enter financial data into PHUND\$ system by June 2015.
- Compare financial data to at least ten other similar LHJs by December 2015.
- Develop five year and ten year trend reports by December 2015.
- Present information to Board of Health by March 2016.

Activity	Target Date	Lead
Enter all financial data into PHUND\$ up to date	June 2015	Financial Analyst
Complete comparison and trend reports	December 2015	Financial Analyst
Analyze comparisons and trend reports	December 2015	Financial Analyst
Incorporate information into a report and presentation	March 2016	Financial Analyst
Present information to BOH	March 2016	Public Health Administrator

Work with county commissioners, Board of Health, Board of Health Advisory Committee, and other stakeholders to generate, research, and pursue opportunities for local and alternative sources of funding.

Objectives:

- Recruit at least five individuals to form public health funding committee by June 2015.
- Identify minimum funding level by December 2015.
- Research and/or pursue at least one funding idea annually through December 2019.

Activity	Target Date	Lead
Brainstorm and recruit individuals for funding committee	June 2015	Public Health Administrator
Set meeting schedule and logistics	September 2015	Public Health Administrator
Define "local and alternative sources of funding"	December 2015	Committee
Identify local foundational services and minimum funding level	December 2015	Committee
Generate local and alternative funding ideas within the committee	Ongoing	Committee
Research feasibility and legality of funding ideas	Ongoing	Committee
Present results of researched ideas to BOH	Ongoing	Public Health Administrator

Collect information from other local health jurisdictions (LHJs) about local and alternative sources of funding.

- Collect information from at least ten other LHJs by September 2015.
- Present information to Board of Health by December 2015.

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Activity	Target Date	Lead	
Research and compile information from existing sources of data for			
LHJ funding (previous administrator work, DOH reports, NACCHO	June 2015	Public Health Administrator	
reports, etc.)			
Develop survey questions for other LHJs about funding	June 2015	Public Health Administrator	
Survey Washington State LHJs about funding	September 2015	Public Health Administrator	
Follow up with specific LHJs via phone or in person	December 2015	Public Health Administrator	
Put information and data together in a report and presentation	March 2016	Public Health Administrator	
Present information to BOH	March 2016	Public Health Administrator	

Create a long term sustainable plan and policy for maintaining an adequate and sustainable fund balance.

Objective:

• A plan will be approved by Board of Health and Board of County Commissioners by December 2015.

Activity	Target Date	Lead
Identify and maintain adequate amount needed for three months	March 2015	Fiscal Analyst
operating expenses	IVIAICII 2013	FISCAI Allalyst
Work with the auditor's office identify adequate amount needed	June 2015	Fiscal Analyst
for capital asset replacement	Julie 2013	FISCAI Allalyst
Work with the auditor's office to identify annual contribution	June 2015	Fiscal Analyst
amount needed for capital asset replacement	Julie 2015	1 iscai Anaryst
Create policy and procedures for the utilization and maintenance	December 2015	Fiscal Analyst
of the fund balance	December 2013	i iscai Alialyst
Get policy and procedures approved by BOH	December 2015	Public Health Administrator

Establish system of grant opportunity tracking and improve grant writing capacities. Objectives:

- Send at least three staff to grant writing training by December 2016.
- Submit at least three grant applications annually through December 2019.
- Complete a search for new grant opportunities quarterly through December 2019.

Activity	Target Date	Lead
Research and identify grant writing trainings	June 2015	Administrative Assistant
Identify staff to attend trainings	December 2015	Management Team
Have staff present summary of training to all staff	December 2016	Staff
Create list of primary public health grant funding sources	December 2016	Management Team
Search sources quarterly	Quarterly	Administrative Assistant
Research grant opportunities for feasibility	Ongoing	Supervisors
Apply for feasible grant opportunities	Ongoing	Supervisors

Maximize revenue sources for fee-based services.

- Revise fee schedule and policy annually to maximize revenue for public health services through December 2019.
- Contract with at least three primary health insurance companies by December 2015.

Activity	Target Date	Lead
Adopt county's level of service fee methodology	December 2015	Public Health Administrator
Revise all fee calculations	Annually in October	Public Health Administrator
Consider cost-recovery as well as public health need, demand, and financial barriers in the development of fees	Annually in October	Public Health Administrator
Ensure staff understand and apply fees appropriately	Annually in December	Supervisors
Work with attorney to negotiate language in health insurance contracts	June 2015	Community Health Supervisor
Finalize health insurance contracts	December 2015	Community Health Supervisor
Implement systems to bill health insurance for clinic services	December 2015	Administrative Assistant
Consider adding new fee-based health services	December 2016	Management Team

Communicate with the public and state policy makers about the importance of adequate public health funding for foundational public health services.

- Complete at least two annual communications to the general public and/or community groups in Kittitas County about the importance of public health funding through December 2019.
- Communicate with each state legislator at least annually through December 2019.
- Incorporate language into the county's legislative priorities annually through December 2019.

Activity	Target Date	Lead
Research talking points about the importance of public health funding (WSALPHO, NACCHO, etc.)	June 2015	Public Information Officer
Develop local talking points, key messages, and "elevator speech"	December 2015	Public Information Officer
Create press release or newspaper article	June 2016	Public Information Officer
Incorporate funding messages into community public health presentation	June 2016	Public Information Officer
Set up meetings with state legislators	Annually	Public Health Administrator
Develop written communication to share with legislators	Annually	Public Information Officer
Familiarize with local public health legislative agendas (WSALPHO, NACCHO, etc.)	Annually	Public Health Administrator
Recommend public health language to be added to the county's legislative agenda	Annually	Public Health Administrator

To increase community partnerships and awareness of public health's role in the community.

PERFORMANCE MEASURES (How will we know we are making progress?)

Short Term Indicators	Source	Frequency
Increased average quarterly number of community engagements by five annually.	Quarterly data	Every January, Annually
Increased annual number of hits on community health indicator dashboard website by 10% annually.	Google Analytics website data	Every January, Annually

Long Term Indicators	Source	Frequency
Fully met Domain 3 and 4 of Public Health Accreditation Board	PHAB Standards and	Evene
(PHAB) standards and measures by December 2017.	Measures 1.5	5 years
At least 80% of all activities in the strategic implementation plan	Dian manitaring	F. v. 0.0 m2
have been completed by December 2019.	Plan monitoring	5 years

STRATEGIES (What will we do to achieve our goal?)

Create and promote community health indicator dashboard.

Objectives:

- Publish community health indicator dashboard by December 2018.
- Promote community health indicator dashboard through at least three different methods by December 2018.

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Activity	Target Date	Lead
Research and choose dashboard format, platform, or software	December 2016	Assessment Coordinator
Identify community health indicators and align with Community Health Improvement Plan	June 2017	Assessment Coordinator
Work with county Information Technology Department to set up dashboard	December 2017	Assessment Coordinator
Get community and stakeholder feedback about dashboard format	December 2017	Assessment Coordinator
Publish dashboard	December 2018	Assessment Coordinator
Promote among the media, community partners and community members	December 2018	Assessment Coordinator
Maintain and update dashboard	Ongoing	Assessment Coordinator

Increase KCPHD participation in community events. Objectives: Participate in at least one community event per quarter through December 2019. **Activity Target Date** Lead Create common definition for what qualifies as a community event December 2016 Public Health Administrator Brainstorm and maintain list of recurring community events December 2016 **Public Information Officer** appropriate for KCPHD participation Purchase standard supplies for community event participation December 2016 **Public Information Officer** Ongoing, Annually in Annually review list of events and designate staff **Public Information Officer** December

Implement annual campaign for National Public Health Week.

Objective:

• Hold at least one event and coordinate at least one media connection annually for National Public Health Week through December 2019.

Activity	Target Date	Lead
Coordinate with BOHAC for annual Public Health Champion	Annually	Public Health Administrator
Organize and hold an open house or community event	Annually	Public Information Officer
Send press release and/or news article for National Public Health Week	Annually	Public Information Officer

Increase visibility of KCPHD logo in the community.

Objective:

Co-sponsor at least four events or efforts annually through December 2019.

Activity	Target Date	Lead
Identify events and efforts in the community that we could cosponsor	December 2016	Management Team
Contact coordinators about co-sponsoring	June 2017	Public Information Officer
Increase logo size on displayed permits	December 2017	Environmental Health Supervisor
Install public health signage outside building	December 2017	Public Health Administrator
Look into budgeting and purchasing clothing items for official use during public health events and community work	December 2017	Public Health Administrator

Create and deliver standard public health presentation to local community groups.

Objective:

• Present to at least four community groups annually through December 2019.

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Activity	Target Date	Lead
Create template public health presentation	June 2017	Public Information Officer
Create list of groups to present to	June 2017	Public Information Officer
Set up presentations	Ongoing	Public Information Officer
Deliver presentations	Ongoing	Public Health Administrator

Increase co-sponsored initiatives and projects with other community organizations. Objectives:

- Co-sponsor and/or partner with another community agency on at least one initiative or project annually through December 2019.
- Meet with at least four leaders of community organizations annually through December 2019.

Activity	Target Date	Lead
Create list of organizations and efforts with the possibility of increased partnerships	June 2018	Public Health Administrator
Hold meetings with leaders of community organizations to discuss increased partnerships	Quarterly	Public Health Administrator
Partner with agencies on initiatives and projects	Annually	Public Health Administrator

Become accredited through the Public Health Accreditation Board.

PERFORMANCE MEASURES (How will we know we are making progress?)

Short Term Indicators	Source	Frequency
Increased department accreditation readiness by 75% by	PHAB Readiness Checklist	Appually
December 2016.	PHAB Reauliless Checklist	Annually

Long Term Indicators	Source	Frequency
Fully met all Public Health Accreditation Board (PHAB) standards	PHAB Standards and	Evene
and measures by December 2017.	Measures 1.5	5 years
At least 80% of all activities in the strategic implementation plan	Dlan monitoring	Evene
have been completed by December 2019.	Plan monitoring	5 years

STRATEGIES (What will we do to achieve our goal?)

Evaluate the department's readiness for accreditation. Objective: Establish baseline accreditation readiness data by June 2015.			
Activity Target Date Lead			
Identify tool to use to evaluate accreditation readiness	March 2015	Assessment Coordinator	
Complete tool, establish baseline data	June 2015	Assessment Coordinator	
Summarize results	June 2015	Assessment Coordinator	

Familiarize staff and stakeholders with the accreditation process. Objective: 100% of accreditation stakeholders receive information about accreditation by September 2015. Activity Target Date Lead Create presentation about accreditation March 2015 Assessment Coordinator Identify stakeholders to receive presentation March 2015 Assessment Coordinator Schedule and conduct presentations September 2015 Assessment Coordinator

Establish an accreditation team consisting of representatives from each division. Objective:		
 An accreditation team is well established and meeting regularly by December 2015. 		
Activity	Target Date	Lead
Make recommendations of who should be on the team	March 2015	Assessment Coordinator
Discuss recommendations	April 2015	Management Team
Appoint members to team	June 2015	Public Health Administrator
Develop team charter	September 2015	Assessment Coordinator

Establish a system for collecting and organizing accreditation documentation.

Objective:

• A system for collecting and organizing accreditation documentation is established and implemented by December 2015.

Activity	Target Date	Lead
Research how other accredited departments organized documentation	March 2015	Assessment Coordinator
Become familiar with current software/systems at the department and compare to others	March 2015	Assessment Coordinator
Decide on system to be used	June 2015	Assessment Coordinator
Implement system	December 2015	Assessment Coordinator

Identify focus areas to prepare for accreditation and make plans to meet standards.

Objective:

• Increase department accreditation readiness by December 2015.

Activity	Target Date	Lead
Use results of accreditation readiness evaluation to determine areas of focus	September 2015	Accreditation Support Team
Create action plans to meet standards	December 2015	Accreditation Support Team
Implement action plans	December 2016	Accreditation Support Team
Re-evaluate the department's accreditation readiness	December 2016	Assessment Coordinator
Create and implement new action plans if needed	March 2017	Accreditation Support Team

Apply for PHAB accreditation.

Objective:

• An application is submitted for public health accreditation by December 2016.

- This application is submitted for public health decreated by Becchiber 2010.		
Activity	Target Date	Lead
Submit letter of intent	December 2015	Assessment Coordinator
Submit application	December 2016	Assessment Coordinator
Begin collecting documentation for accreditation	December 2016	Accreditation Support Team
Budget for accreditation fees	December 2016	Fiscal Analyst
Submit final documentation	December 2017	Assessment Coordinator

Implement an ongoing, sustainable system and culture of Quality Improvement (QI) and Performance Management.

PERFORMANCE MEASURES (How will we know we are making progress?)

Short Term Indicators	Source	Frequency
Increased scores of all 6 QI SAT foundational elements by .5	NACCHO Culture of QI Self	Event lanuary Annually
annually	Assessment Tool (QI SAT)	Every January, Annually
Increased QI skills and knowledge of all KCPHD staff by 25% annually	Internal staff QI survey	Every July, Annually
At least 3 formal QI projects are implemented annually	Quality Improvement Leadership Team (QILT) data	Annually

Long Term Indicators	Source	Frequency
Fully met all Domain 9 Public Health Accreditation Board (PHAB)	PHAB Standards and	Event
standards and measures by December 2017.	Measures 1.5	5 years
At least 80% of all activities in the strategic implementation plan	Plan monitoring	5 years
have been completed by December 2019.		
Increased overall score from Phase 3 to Phase 5 by December	OLSAT	Evene
2019.	QI SAT	5 years

STRATEGIES (What will we do to achieve our goal?)

Create and implement an agency wide quality improvement (QI) plan. Objective:				
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Activity	Target Date	Lead		
Incorporate QILT, staff, KCPHD Management Team (MT), NACCHO, and Washington State Department of Health (DOH) feedback into current QI plan.	December 2015	Assessment Coordinator		
Revise and finalize current QI plan to meet PHAB standards.	December 2015	Assessment Coordinator		
Publish, share, and present final QI plan.	March 2016	Assessment Coordinator		
Create and implement ongoing formal and ad hoc training plan for staff.	December 2016	QILT		
All staff will have participated in basic QI training.	December 2016, Ongoing	Public Health Administrator		
Monitor, implement, and annually evaluate the QI plan.	Ongoing, Annually in December	QILT		
QILT meets monthly.	Ongoing	QILT		
At least 3 formal QI projects will be completed annually.	Ongoing	QILT		

Create and implement a performance management system.

- A formal performance management system will be developed, implemented, and continually utilized by 2019.
- KCPHD will have a defined set of performance indicators identified and continually monitored by 2019.
- KCPHD will have an agency wide performance management dashboard that is utilized for continuous quality improvement by 2019.

Activity	Target Date	Lead
A process for continually evaluating and improving customer service will be implemented	December 2015	QILT
Identify dashboard system for ongoing monitoring and reporting	December 2015	Assessment Coordinator
Implement dashboard system	December 2016	Assessment Coordinator
Each program will have an up to date logic model and identified performance measures	December 2016	Assessment Coordinator
All performance measures will be tracked on a quarterly basis	Ongoing	Assessment Coordinator
Performance measure data will be reviewed quarterly	Ongoing	Assessment Coordinator
Program performance measure data will be thoroughly evaluated and analyzed for efficiency, effectiveness, and improvement opportunities annually.	Ongoing	Assessment Coordinator
Performance measure data will be communicated to stakeholders in quarterly and annual reports	Ongoing	Assessment Coordinator

Improve internal collaboration and communication between KCPHD divisions and teams.

PERFORMANCE MEASURES (How will we know we are making progress?)

Short Term Indicators	Source	Frequency
Increased satisfaction with overall department communication	Department survey	Annually in July
Increased satisfaction with overall department collaboration	Department survey	Annually in July
Increased level of comfort talking about public health programs and services to others	Department survey	Annually in July
Increased level of satisfaction with the department leadership team	Department survey	Annually in July
Increased engagement in all staff meetings	Department survey	Annually in July

Long Term Indicators	Source	Frequency
At least 80% of all activities in the strategic implementation plan	Dlan monitoring	Evene
have been completed by December 2019.	Plan monitoring	5 years

STRATEGIES (What will we do to achieve our goal?)

Utilize Outlook calendars to communicate work schedules with each other.

Objectives:

- At least 90% of staff is trained in using Outlook calendars by December 2015.
- At least 90% of staff is actively using Outlook calendars by June 2016.
- At least 90% of new staff is trained in using Outlook calendars through December 2019.

Activity	Target Date	Lead
Communicate expectation of using Outlook calendars	September 2015	Public Health Administrator
Conduct all staff training on using Outlook calendars	December 2015	Public Health Administrator
Create handout on key tips and shortcuts for using Outlook	December 2015	Public Health Administrator
Include Outlook calendar training/expectation in new employee and intern orientations	December 2015	Public Health Administrator

Utilize outcome based agendas for all internal and external meetings.

- At least 90% of staff is trained in using outcome based agendas by December 2016.
- At least 90% of new staff is trained in using outcome based agendas through December 2019.

Activity	Target Date	Lead
Communicate expectation of using outcome based agendas	September 2016	Public Health Administrator
Conduct all staff training on using outcome based agendas	December 2016	Public Health Administrator
Create handout on key tips for using outcome based agendas	December 2016	Public Health Administrator
Include outcome based agenda training/expectation in new employee and intern orientations	December 2016	Public Health Administrator

Ensure staff has the opportunity to communicate with their supervisors on a weekly basis.

Objective:

• At least 90% of staff reports having the opportunity to communicate with their supervisors weekly by December 2019.

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Activity	Target Date	Lead
Establish baseline measure of staff who report having the opportunity to communicate with their supervisors weekly	July 2015	Public Health Administrator
Create plans for weekly communication with staff	December 2015	Supervisors
Implement plans for weekly communication with staff	March 2016	Supervisors
Re-measure objective measure	Annually, in July	Public Health Administrator

Create and implement set of management and leadership principles and guidelines for supervisors to follow.

Objectives:

- Leadership/management topics are incorporated into management meetings at least monthly through December 2019.
- Principles and guidelines are implemented by December 2016.
- 100% of supervisors have attended management training by December 2015.

Activity	Target Date	Lead
Supervisors attend management training together	December 2015	Public Health Administrator
Leadership and management topics are incorporated into management team meetings	December 2015	Public Health Administrator
Collect "nuggets" of leadership and management information and tools to incorporate into department principles and guidelines	Ongoing	Supervisors
Discuss actual management scenarios, challenges, and issues at management team meetings to use collective approaches	Ongoing	Supervisors
Create principles and guidelines to be used in the department among both current and new supervisors	December 2017	Public Health Administrator

Develop and implement guidelines for sharing program and project updates with all staff on a regular basis.

Objectives:

- Updates are prepared and shared with all staff at least monthly through December 2019.
- Guidelines are formalized and followed consistently by December 2015.

Activity	Target Date	Lead
Collect staff input on guidelines for updates	March 2015	Public Health Administrator
Formalize and finalize guidelines	December 2015	Public Health Administrator
Distribute and communicate guidelines with supervisors and other key staff	December 2015	Public Health Administrator
Include updates on monthly all staff agendas or email out monthly	Ongoing	Management Team

Establish guidelines for internal communications.

Objective:

At least 90% of staff have reviewed internal communication plan by December 2018.

Activity	Target Date	Lead
Update department communication plan to include internal communications	December 2017	Public Information Officer
Share communication plan with all staff	June 2018	Public Information Officer
Add communication plan review to new staff orientation	June 2018	Public Health Administrator
Update plan annually	Annually	Public Information Officer

Implement cross training program for programs and divisions.

Objectives:

- At least 75% of services have at least two individuals who can do them by December 2019.
- New staff persons meet with at least 90% of staff to learn about their jobs annually through December 2019.
- At least four staff presentations will take place at all staff meetings annually through December 2019.

Activity	Target Date	Lead
Create list of services and identify who can do each task and who can be trained	December 2018	Management Team
Conduct additional training to ensure at least two people can do all tasks in department	December 2019	Supervisors
Incorporate staff presentations about their jobs in all staff meetings	Ongoing	Public Health Administrator
Incorporate cross training or job shadowing activities into annual all staff retreat	Annually	Public Health Administrator
Ensure new staff meet with each staff person to learn about their jobs, add to new employee orientation	Ongoing	Supervisors

Host more internal and guest presentations.

• At least one presentation is conducted quarterly through December 2019.		
Activity	Target Date	Lead
Create list of presentation topics, audience, and presenters	December 2015	Public Health Administrator
Update list quarterly with staff suggestions	Ongoing, quarterly	Public Health Administrator
Incorporate presentations into all staff meetings and/or as special presentations	Ongoing, quarterly	Public Health Administrator