

2015-2019

**Le Sueur—Waseca
Community Health Board**

Strategic Plan

NOVEMBER 5, 2019



Public Health
Prevent. Promote. Protect.

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Introduction

The Le Sueur—Waseca Community Health Board is a multi-county Community Health Board (CHB) governed under Minnesota Statute Chapter 145A. In 1977, a Joint Powers Agreement was signed by Le Sueur County and Waseca County establishing the Le Sueur—Waseca Community Health Board. The membership includes the five Le Sueur County Commissioners and the five Waseca County Commissioners. Other attendees to the quarterly meetings include the Community Health Services (CHS) Administrator, Public Health Directors, Public Health Supervisors, Environmental Health Specialists and the Health Coordinator serving Le Sueur and Waseca Counties.

Le Sueur County Public Health and Waseca County Public Health are separate and distinct agencies, each serving the population of their respective counties. Both agencies are guided by the Six Areas of Public Health Responsibility and have developed and maintained programs over the years to meet the needs of their population. There are similarities in the programs in each agency, for example, both Public Health agencies provide WIC, Family Home Visiting, Immunizations, and Disease Prevention and Control (DP&C) activities. Waseca County is the lead agency for the county's waived services and case management activities including, Alternative Care (AC), and Elderly Waiver (EW). Le Sueur County is the lead for the county's AC, EW, Community Access for Disability Inclusion (CADI), Community Alternative Care (CAC), and Brain Injury (BI). Le Sueur County also has a robust Medicare Certified Home Health Care program.

Le Sueur – Waseca Community Health Board has a Delegation Agreement with the state of Minnesota to provide certain Environmental Health Services. These services include the licensing and inspections for Food, Beverage and Lodging, Schools and Pools; Non-Community Water, Recreational Camping, and Manufactured Home Parks. The CHB has worked together on local ordinances for these program with each county passing the ordinances through the local County Board of Commissioners. In addition, Waseca County inspects and permits septic systems.

Le Sueur County and Waseca County Public Health departments work collaboratively to assess our communities and workforce, then document this for the five year Local Public Health Assessment and Planning cycle required by MDH. Annual reporting is also done together as required by the Local Public Health Act and for many state administered grants. In addition, the CHB entered into a collaborative agreement with Brown—Nicollet CHB to plan and implement Statewide Health Improvement Partnership (SHIP). The Le Sueur—Waseca CHB are also working with Faribault—Martin Health and Human Services to implement Health Families America (HFA), an evidenced-based family home visiting program.

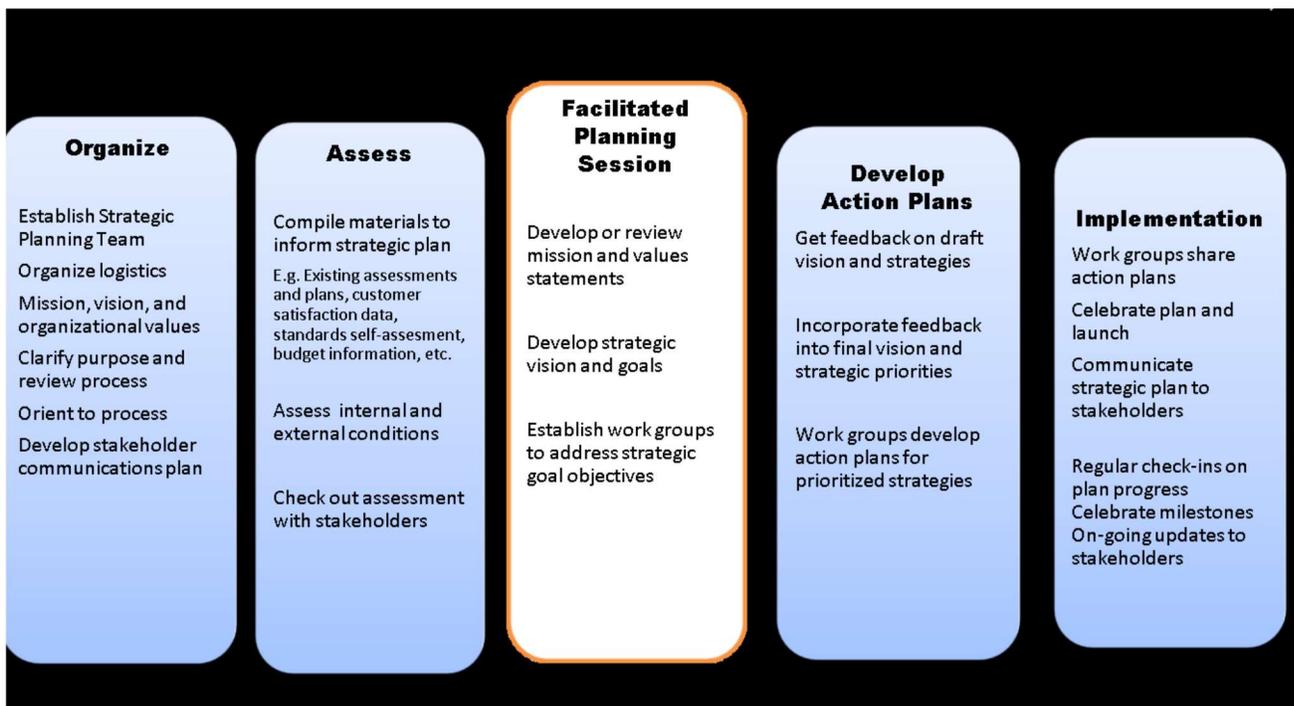
Strategic Planning Background

In Minnesota, the CHS Act of 1976 established a State Community Health Services Advisory Committee (SCHSAC), to advise, consult, and make recommendations to the Commissioner of Health on matters relating to the development, funding, and evaluation of CHS in Minnesota. The CHS Act (later renamed the Local Public Health Act), began the partnership between the Minnesota Department of Health (MDH) and local governments. This state/local partnership has proved to be an effective tool for protecting and improving the health of all Minnesotans.

SCHSAC utilizes workgroups to ensure cohesive, strategic planning for the majority of their work. In 2010, the Minnesota SCHSAC Performance Improvement Work Group identified strategies to strengthen accountability and improve performance across all Public Health agencies. Therefore, the 2015-2019 cycle includes an Organizational Strategic Plan as well as a plan for monitoring and revisions.

Strategic Plan Process Overview

The strategic planning process developed and facilitated by the MDH was based on national public health accreditation standards issued by the Public Health Accreditation Board (PHAB). Elements and steps of the planning process utilized to develop the Public Health Strategic Plan are highlighted in the following table:



Facilitation of the strategic planning process with the leadership team of the Le Sueur—Waseca CHB occurred between 2018 and 2019. The process was facilitated by Linda Bauck-Todd, regional Public Health Nurse Consultant at the MDH. Leadership of Le Sueur—Waseca CHS included:

Cindy Shaughnessy	Le Sueur County Public Health Director
Darlene Tuma	Le Sueur County Adult Health Supervisor
Elisa O'Malley	Le Sueur County Family Health Supervisor
Sarah Berry	Waseca County Public Health Director and Community Health Services (CHS) Administrator
Sam Holicky-James	Waseca County Public Health Supervisor
Sondra Herman	Waseca County PH/CHS Business Manager (through 9/2018)
Nick Madsen	Waseca County PH/CHS Business Manager (beginning 1/2019)

Through facilitated sessions, the leadership team and the regional Public Health Nurse Consultant (PHNC) met to decide on priority goals and objectives as well as complete the first draft of an Action Plan (attached).

The CHS Administrator reports quarterly to the governing body (Le Sueur—Waseca Community Health Board), informing, updating and seeking feedback from the Community Health Board on the Strategic Plan as noted in the Community Health Board minutes from meetings on 7-3-18, and 7-2-19. The Strategic Plan was brought to the Community Health Board for discussion and was approved as a “living, working and changing” document on 11-5-19.

The Public Health Directors of both counties will provide ongoing updates to the identified stakeholders. See the attached communication and stakeholder charts.

Strengths, Weaknesses, Opportunities and Challenges Analysis

During the assessment phase of the strategic planning process, the strategic planning team brainstormed a thorough list of the strengths, weaknesses, opportunities and challenges of the health department; as well as external trends, events and other factors using the Summary of Reports and Key Trends document. The list was revisited for consideration during the facilitated session after which the strategic planning team made additions.

Mission, Value Statements and Vision Elements

Early in the process, the leadership team evaluated the existing mission statement and list of organizational values. The mission was not adjusted, but the values statement was altered slightly, both were included in the update to the CHB on July 3, 2018. See below attached image.

Mission

**In partnership, the Le Sueur-Waseca Community Health Board protects, promotes, preserves and enhances the health of our community.
(March 13, 2013)**

Values

Integrity - We are honest, trustworthy and transparent in all we do. We strive to do the right things to achieve the best public health outcomes.

Respect - We demonstrate and uphold a standard of conduct that recognizes and values the contributions and diversity of all. We earn and preserve trust through our behavior and the quality of our work.

Competency – We deliver compassionate services of the highest quality using standards research has proven effective.

Collaborate – We value the diversity and unique contributions of our employees and partners. Teamwork and partnerships produce cost effective health outcomes by bringing people, resources and organizations together to achieve common goals.

To begin brainstorming vision elements specific for the Community Health Board, the leadership team was asked to respond to the following questions, “What do you hope to see in place as a result of your public health organization’s work in three to five years? What will be different?” An affinity grouping process was utilized to collect similar ideas and the following vision elements were identified to capture main themes.

During the follow-up meeting the team further refined the brainstormed elements into vision statements with summary phrases to describe the meanings and intentions of the visions to the county’s governing entity, community partners and other stakeholder groups.

Vision Elements

STRONG COMMUNITY PARTNERSHIPS WITH A SHARED VISION FOR PUBLIC HEALTH. Public Health will identify and gather key partners who are invested in making improvements or providing support to our community as they journey toward optimum health.

ROBUST FINANCIAL SUPPORT. Public Health will pursue increased and ongoing funding to improve, support and expand our programs to meet the needs of our population and the mission of the Le Sueur-Waseca Community Health Board.

COMPETENT, CONFIDENT AND COMMITTED STAFF. Public Health will offer competitive salaries and benefits to recruit and retain a diverse, experienced and passionate public health staff assuring successful succession planning. Public Health will explore creative supports and benefits to enhance employee job satisfaction.

STRONG PUBLIC HEALTH INFRASTRUCTURE. Public Health space needs will be addressed to provide a work environment that promotes optimal productivity and teamwork. Public Health will continue to align processes to meet the Public Health accreditation standards.

CURRENT AND UP TO DATE TRAINING AND TECHNOLOGY. Public Health will seek and provide innovative training and remain responsive to emerging and evidenced-based options for strong staff development and support. Technology will enhance our efficiency and productivity.

IMPROVED COMMUNITY HEALTH. Public Health will provide enthusiasm and support to existing and developing health initiatives to improve and create opportunities for a healthier community. We contribute knowledge, data and expertise to complement our communities' concerns.

PROGRESSIVE APPLICATION OF TECHNOLOGY. Public Health will be responsive and committed to exploring and communicating our needs at the county, regional and state level to enhance customer service to our population. We will embrace technology and emerging practices to the fullest.

Strategic Priorities

The final series of leadership team meetings was spent brainstorming actions/steps necessary to implement in order to make the vision statements become reality. The team was asked to consider, "What needs to happen in the next 1 – 2 years to make the visions a reality?" Similar to the process used with the vision elements, an affinity grouping was utilized to collect similar action steps; strategy elements were identified to capture the main themes.

Once a list of potential strategies was completed, a dot exercise was used to identify the strategies with the most support and then an interrelationship diagram was used to further prioritize the strategies. The strategies are listed in order of priority beginning with number one and include:

1. Advocate for competitive salary and benefits package
2. Engage and collaborate with commissioners and policy-makers to strengthen Public Health
3. Integrate and implement optimal strategies for public health work
4. Revise and implement the Workforce Development Plan
5. Educate and empower the community to improve health outcomes
6. Strengthen, collaborate, and strategize with community partners

After discussion regarding span of control and interwoven themes, and informed by the prioritization process the team decided to focus on the second and fourth prioritized strategies and went on to develop objectives and action steps for these two strategies. The action planning was completed by developing the attached action plan at the subsequent follow-up meetings. The action plan specifies the objectives, actions and ways to monitor progress for these strategic priorities.

Use of Plan in the Organization

The CHB leadership team, will continue to meet quarterly to monitor implementation and progress of the plan. Adaptations to the plan will be implemented to ensure continued progression. Upon completion of these priorities, the team will develop and implement action plans for the additional strategies. The team will also adjust or change strategic priorities based on results of the Community Health Assessment and Improvement Plan (CHIP), and quality improvement activities.

Linkage with Community Health Improvement Plan

The Strategic Plan will act as the jurisdiction under which the CHIP will be created. The CHIP was finalized for 2019. A Community Health Assessment was conducted and a report was approved November 2019. Public Health staff from the two counties reviewed the assessment and determined the most important community health issues. Ongoing conversations with leadership staff, Community Health Board, and other community groups resulted in a list of priority health issues and goals. The final product was completed in 2019 by the two Public Health Directors. The CHIP goals for physical activity and substance use both require the need to engage and collaborate with policy-makers and commissioners for implementation.

Linkage with Quality Improvement Plan

The Quality Improvement Plan was implemented in 2014. This plan defines the organization's current culture of quality, the desired future state of quality, and how this culture aligns with the organization's mission and vision. Public Health staff from both counties are active participants in implementation of the Plan.

Monitoring and revision of the Strategic Plan will be accomplished using quality improvement tools when needed. Additionally, the strategic priority of revising the Workforce Development Plan will be done during leadership team meetings. The leadership team serves as the Quality Improvement Council for the CHB and as such, will evaluate the revisions under that umbrella.