



***Welcome to ...***

## **Public Health INsights & INnovation**

# Developing Public Health Policies and Plans, Part II

Join via: <https://connect.iu.edu/ph-insights-innovation/>

### **Presenters:**

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## Objective:

Participants will be able to 1) serve as a primary and expert resource for establishing and maintaining public health policies, practice and capacity, and 2) develop a comprehensive strategic plan.

National Public Health Accreditation Board Standards and Measures, Version 1.5  
<http://www.phaboard.org/wp-content/uploads/SM-Version-1.5-Board-adopted-FINAL-01-24-2014.docx.pdf>

# Domain 5: Developing Public Health Policies and Plans

## DOMAIN 5 INCLUDES FOUR STANDARDS:

Standard 5.1: Serve as a Primary and Expert Resource for Establishing and Maintaining Public Health Policies, Practices, and Capacity

Standard 5.2: Conduct a Comprehensive Planning Process Resulting in a Tribal/State/Community Health Improvement Plan

# Domain 5: Developing Public Health Policies and Plans

## DOMAIN 5 INCLUDES FOUR STANDARDS:

Standard 5.3: Develop and Implement a Health Department Organizational **Strategic Plan**

Standard 5.4: Maintain an **All Hazards Emergency Operations Plan**

# Domain 5: Develop Public Health Policies and Plans Part 2

Cynthia Stone DrPH, RN

August 28, 2015



# Outline

- Evidence for a functional strategic plan
  - Strategic plan is understood and implemented by staff
  - Key elements are evidence based
  - Strategic planning process is reviewed
- Evidence for a collaborative and coordinated All Hazards Emergency Operations Plan (EOP)
  - Purpose and benefits of cross-agency collaboration
  - Effectiveness of continuous drills and revision of plans



# Strategic Plan

- What is a strategic plan?
  - Leadership tool grounded in decisions on what direction the organization will head
  - Plan is based on priorities for the near future
  - (typically plan for 3-5 years and then one year)
  - Aligns with assessment, planning and evaluation, Quality Improvement Plan, Operational Plan



# Strategic Plan

- Why do a strategic plan?
  - Gives clear direction of where you want to go
  - Determines how you will achieve your goals
  - Determine how to measure/check progress
  - One of three prerequisites for LHDs seeking accreditation





# Strategic Planning within PHAB requirements

- Community Health Assessment: provides data
- Community Health Improvement Plan takes the assessment data and uses it to develop a plan with community stakeholders
- Strategic plan led by the health department mostly internal stakeholders and key external stakeholders but gives priorities and direction to the **health department**



# PHAB Domain 5.3 Standard and Measures

- Strategic Plan process to define organization roles, priorities, direction over 3-5 years
- Sets out what will be done, how it will be done, how you will know if it is achieved
- Provides a guide on how to allocate resources
- You might have program specific strategic plans or one for the entire agency



# PHAB measures

- Conduct a strategic planning process note who was involved (names and title) and steps taken (one plan produced or revised within 5 years)
- Document: minutes of meetings, attendance lists, duration of process, how you reviewed major elements with the stakeholders
- No specific format is required



# Elements that must be in the Strategic Plan

- Mission, vision, guiding principles/ values
- Strategic priorities
- Goals and objectives (measurable with time frames)
- Key functions to be done
- Identify external trends
- Assessment of strengths and Challenges
- Link to health improvement plan and quality improvement plan



# Show progress report actions toward achieving goals and objectives

- Two reports at least 14 months apart
- You are showing that you reviewed the strategic plan and data used to monitor progress, and adjust actions
- Must do at least annually can do sooner



# Resources and Processes to assist in meeting these measures

- NACCHO guide
- Other Strategic Planning references



# NACCHO guide examples

- Module 1 Exploring Strategic Planning for LHDs-  
Five P's of Strategy (Mintzberg, 1992)
- **Plan**-purposeful actions or guidelines
- **Pattern**-work to have consistent actions and behaviors
- **Position**-strategy within context of operation
- **Perspective**-collective thinking or shared vision
- **Ploy**-specific steps to overcome a competitor



# NACCHO planning modules

- Laying the groundwork
- Develop mission, vision, value statement
- Compile data and environmental scan
- Analyze results and select strategic priorities
- Develop strategic plan and implementation plan
- Implement, monitor and revise plan as needed





# NACCHO ABC's of Strategic Planning



(Bryson, 2004)



# PHAB measures-Adopt the strategic plan

- LHD mission, vision guiding principles/values



# Mission, Vision, Values

- Developing mission, vision, values statement
- What the LHD does and why it exists=mission
  - What is the current mission?
  - What does it say about who we are and our purpose?
  - Should answer what are we here to do?



# Vision

- Statement of ideal future state = vision
- How the organization will be in the future:  
how it goes about its work, etc
- How the community will benefit from the  
work of the organization
  - Short (fit on a t-shirt)



# Value Setting

- Principles and beliefs that guide work=values
- We believe...
- Being sensitive to cultural factors influencing health
- Delivering high quality services ...

Or

- Ethics: we honor the public's trust and maintain highest standards of accountability and ethics
- Diversity: we value and respect diversity
- Communication: we value effective, responsive, and timely communication



# Strategic Priorities

- Internal activity with a few external key stakeholders
- Multi-voting technique
- Strategy grids
- Nominal group technique
- Hanlon method
- Prioritization matrix (cost, ROI, available solutions, urgency of the problem, size of problem)



# Strategy Grid

Low Need/High Feasibility	High Need/High Feasibility
Low Need/Low Feasibility	High Need/Low feasibility



# Hanlon Method

- Rate against specified criteria
- Apply PEARL test (propriety, economics, acceptability, resources, legality)
- Calculate priority scores
- $D = [A + \{2 \times B\}] \times C$ 
  - D= priority score A= size of problem ranking
  - B=Seriousness of health problem C=Effectiveness of intervention

Rank the health problems





# Example of Hanlon Method

- McLean County, IL had 8 health problems

Health Problem	A size	B seriousness	C Effective intervention	D priority score	rank
Cancer	8	10	6	168	3
Cerebrovascular Disease	7	9	7	175	2
Heart Disease	10	10	7	210	1
	% population	Morbidity, mortality, economic loss	Intervention available to use	$(A+2B) \times C$	



# Goals and Objectives

Goals less formal, more general, consider what the health department wants to achieve, Preserve, avoid and eliminate.

Objectives: specific performance target, SMART: Specific Measurable; Achievable, Realistic and Time-phased Can be short-term and long- term

Goals	Objectives
Goals are broad	Objectives are narrow
Goals are general intentions	Objectives are precise
Goals are intangible	Objectives are tangible
Goals are abstract	Objectives are concrete
Goals are often difficult to measure	Objectives are measurable



# SWOT Analysis

- What are the strengths/weaknesses/opportunities and threats?



# SWOT

- LHD **Strengths**: positive attributes, tangible and intangible (within your control, resources you have, what you do well, review for each area) ex. Positive attitude, educated, credentials, reputation, skills
- LHD **Weaknesses**: what detracts from ability to be competitive (lack of expertise, limited resources, lack of skills or technology, poor location)



# SWOT continue

- Market **Opportunities**: potential that exists outside of agency may come from market growth, resolution of a problem, positive perception of the agency, ability to offer new services, what is the timeframe of the opportunity?
- Market **Threats**: factors beyond your control that place agency at risk, challenges created by an unfavorable trend
  - examples: state regulation, increase price of immunization supplies, economic downturn, bad media coverage
- Classify them by how serious and probability of occurring



# SWOT continued

The better you can identify threats the more likely you can proactively respond to them

## Next steps:

- How can you use strengths to better take advantage of the opportunities?
- How can you minimize the harm from threats so they don't become reality?
- How can you eliminate weaknesses?



# LHD SWOT example

St Clair County, IL

## Strengths:

- Good community partners
- Staff: caring, professional, committed, low turnover

## Weaknesses:

- Reluctant to embrace change
- Too many directors and managers
- Outdated computers and phone system
- Too dependent on grant funding



# LHD SWOT ex.

**Opportunity:** use social media to inform the public:

- Use facebook, twitter
- Identify new revenue sources
- Work with hospital to expand community benefit work

**Threats:**

- High gas prices for field work
- Competition for qualified employees
- Local economy, reduced revenue streams





# Environmental Scan

- Identify relevant issues: what is changing or impacting us now?
- Look for trends that are coming
- Avoid surprises
- Tie to issues of current concern
- Aim: report details of relevant trends in external environment likely to impact work of LHD
- Informs strategy development along with SWOT analysis



# Environmental Scan

1. Situational analysis with secondary data
  2. List important issues found from data
  3. Situational analysis review using primary data with key stakeholders
  4. Plan to collect primary data from residents
  5. Collect resident information
- List issues from steps #2,3,5
  - Conduct external assets assessment
  - Prioritize issues
  - Examine the complexity and interdisciplinary nature of priority items



# Strategic Plan Linkages to CHIP

- Linkages with CHIP, and QI plan with roles and responsibilities outlined



# Quality Improvement Plan

- Focus on activities that are responsive to community needs
- Ongoing effort to achieve measurable improvement in: efficiency, effectiveness, performance, accountability, outcomes and other indicators of quality services or processes
- Overall goal is to increase equity and improve the overall health of the community



# Overlap of plans

- All the plans have some overlap
- Unique components also exist
- CHIP: health status risk interventions to address health assessment concerns
- QI: operational issues, current data on process outcomes
- Strategic plan: emerging and new issues



# Are you ready to do strategic planning ?

- Make the decision to do a strategic plan
- Identify and define key stakeholders
- What data is available?
- Determine process and timeline
- Develop a project plan



# Strategic Planning Process

- Gather information and data to do SWOT
- Internal Strengths and weaknesses
- External Opportunities and Threats or Challenges
- Identify strategic issues and prioritize
- Action plan has actions to impact the priority items
- Broad goals and measurable objectives are set



# Strategic Process

- Identify who will implement and monitor the process
- You want to measure outcome and process data
- The process is not linear and you may need to go back and make revisions in earlier steps





# Readiness for strategic planning

Past Experiences	
What contributed to past planning successes?	What contributed to past planning failures?
Current reality	
What is in place to support successful planning?	What is missing and needed for successful planning?



# To determine readiness for strategic planning

- Access to data to do the environmental scan
- Access to a skilled, objective facilitator
- Adequate time for a good environmental scan
- Adequate time for stakeholder engagement
- A champion of the process on the governing board
- Budget allocation for the process
- Buy in from senior leadership
- Commitment to the process
- Understanding of the process and expectations for how the plan will be used



# Example of LHD strategic plan-IL

- Mission- To protect, promote, and preserve the health of the citizens and communities of Stanly County
- Vision-Building a county of healthy individuals, families and communities through public health service and collaboration
- Introduction: process used
- SWOT Analysis
- Information used from community health assessment
- Ranking of survey responses to major health issues
- Ranking of community issues



# Ex. Strategic Planning Report

County	Health Concerns	Matrix
<p><b>Community Health Survey</b> Health problems identified with primary data</p>	<p>Areas of concern from secondary data</p>	<p>Modifiable risk factors associated with concerns</p>
<p>Tobacco use/smoking Obesity/overweight Illegal drug use Cancer Diabetes Heart Disease Teen Pregnancy</p>	<p><b>Leading causes of mortality</b> Heart disease Cancer all sites Cancer trachea, bronchus, lung Cerebrovascular disease Chronic lower respiratory disease <b>Maternal/child health factors</b> <b>Communicable disease</b></p>	<p><b>Chronic diseases:</b> Obesity Inactivity Tobacco use <b>Infectious/Communicable diseases:</b> Drug abuse Alcohol abuse <b>Injuries:</b> Motor vehicle safety <b>Infants &amp; Children</b> Teen pregnancy</p>

# Example Strategic Report

- Priorities: Tobacco Use and Obesity
- Addressing Priorities and Strategic Goals: Completed with Community Partners (listed)
- Specific Strategic Goals and objectives that also tie into improvement plan for the whole department

Activities - lead person – partners – timeframe

Goals by program area too



# Example of Strategic plan

By Service area goal:

- Major accomplishment for the previous year
- Revised goals for the next year



# PHAB measures-Implement Strategic Plan

- Document in annual reports progress towards goals and objectives
- Show over some time that progress was made (first step met and moved onto next objective)
- Note how the Strategic plan links to QI and CHIP where results overlap and changes are being made
- Many use: Plan-Do-Check-Act



# Domain 5.4.2

- All Hazards Emergency Operation Plan





# PHAB Standard 5.4.2 Maintain All Hazards Emergency Operation Plan

- Show collaborative planning for all hazards with other governmental agencies (2 examples within 5 years)
- List roles and responsibilities of health department and partners-esp. coordinator
- Communication network, responders, emergency communication plan
- Continuity plan during emergency



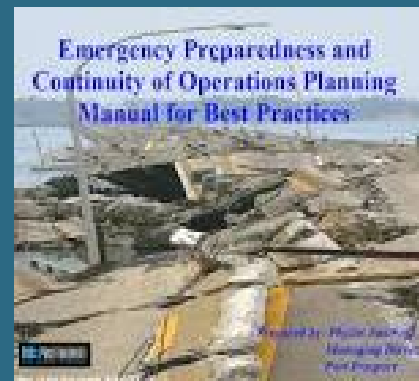
# Testing of EOP

- Describe and show collaborative testing of EOP: drills, or actual response (2 examples within 5 years)
  - Document: written procedure, memo stating the process, minutes, report or records
- Collaborative debriefing or After Action Report after the drill or an event



# Maintain an all hazards EOP

- Revision of public health EOP (1 example within 2 years)
  - A review meeting (minutes, agenda, report)
  - Revised public health EOP through drills, review, evaluation, updated contact list, shows dates and changes made



# References

- Bryson, J.M. (2004). Strategic Planning for Public and Nonprofit Organizations (3<sup>rd</sup> ed).
- Michigan Association for LHD. (2012). Key Components to a Strategic Plan: A Guidebook for Local Health Departments. Available from: <http://www.malphp.org/sites/default/files/files/Health%20Improvement/Strategic%20Plans/Key%20Components%20to%20a%20Strategic%20Plan.pdf>



# References Continued

- NACCHO Developing a Local Health Department Strategic Plan: A How-To Guide. Available from: <http://www.naccho.org/topics/infrastructure/acc-creditation/upload/strategicplanningguidefinal.pdf>
- PHAB Standards and Measures V 1.5 available from: <http://www.phaboard.org/wp-content/uploads/SM-Version-1.5-Board-adopted-FINAL-01-24-2014.docx.pdf>



# Environmental Scan references

- Human Resource Services, (2007). Workforce Planning Tool Kit: Environmental Scan and SWOT Analysis. <http://www.cpshr.us/WorkforcePlanning/documents/toolkitEnvScanSWOT.pdf>
- Morrison, JL Environmental Scanning: <http://horizon.unc.edu/courses/papers/enviroscan/>
- Thinking Futures: Environmental Scanning: What it is and how to do it <http://thinkingfutures.net/wp-content/uploads/2010/10/ES-Guide-April-09.pdf>



# Questions

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# BOONE COUNTY HEALTH DEPARTMENT (BCHD) STRATEGIC PLAN 2015-2017



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# BOONE COUNTY, IN

- Located in the metropolitan Indianapolis region of Indiana
  - Divided into 12 Civil Townships and the county seat is in Lebanon
- Population estimate 61,915
  - One of Indiana's fastest growing counties
- Third healthiest county in County Health Rankings



# OVERVIEW

- BCHD's organizational Structure
- BCHD's strategic planning process
- Public Health Accreditation Board (PHAB) Strategic Plan requirement
- Emergency Preparedness



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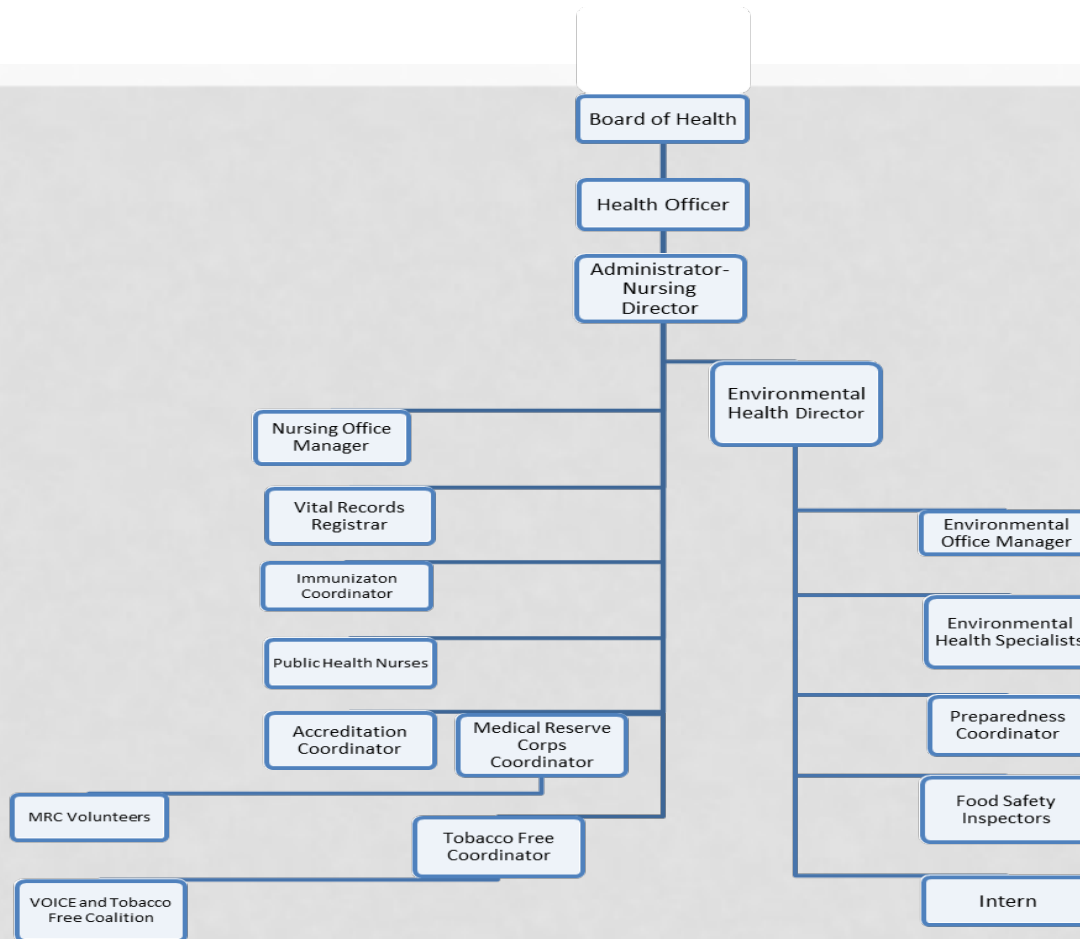
# WHAT IS AN ORGANIZATIONAL STRATEGIC PLAN

- A strategic plan sets forth what an organization plans to achieve, how it will achieve it, and how it will know it has achieved it
- A health department's strategic plan focuses on the entire health department



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# BCHD'S ORGANIZATIONAL CHART



# BCHD'S STRATEGIC PLANNING PROCESS

- Gap Analysis of 10 domains by Indiana Department of Health
  - Strategic Plan [Domain 5]
  - Community Health Assessment (CHA)[Domain 4]
  - Community Health Improvement Plan (CHIP) [Domain 5]

## Indiana State Department of Health Public Health Accreditation Gap Analysis Report

**Health Department:** Boone County  
**Facilitator:** Aless Goman  
**Analysis Date:** June 22, 2011  
**Survey Completed by:** Cindy Murphy, Greg Inman, Leslie Stewart, and Richard Stroup  
**Health Officer:** Dr. Herschell Services

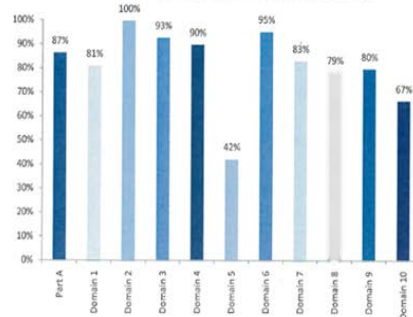
Public Health Accreditation declares that the health department has an appropriate mission and purpose. Public health departments play a critical, but often unrecognized role in promoting and preserving the health of people in communities across the country. Despite the important role health departments play in our communities, there has not been a national system for ensuring their accountability and quality. Achieved accreditation status indicates, through examined documentation, the capacity of the public health department to deliver the three core functions and the ten essential services of public health. Thus, accreditation gives reasonable assurance of the range of public health assistances a department should provide.

There are three documents that must be completed before planning to apply for accreditation. They are the most current versions of the department's:

- Strategic Plan [Domain 5]
- Community Health Assessment (CHA) [Domain 4]
- Community Health Improvement Plan (CHIP) [Domain 5]

The graph below indicates how Boone County Health Department scored for Part A and each Domain of the analysis. Out of a possible 202 points Boone County received 166 points for an overall total of 82%. Please review the completed survey and the documentation required very carefully.

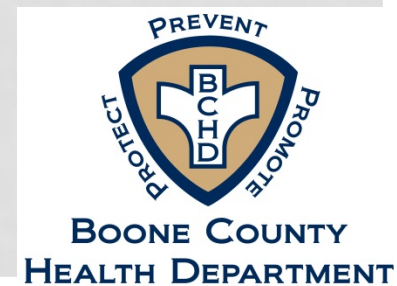
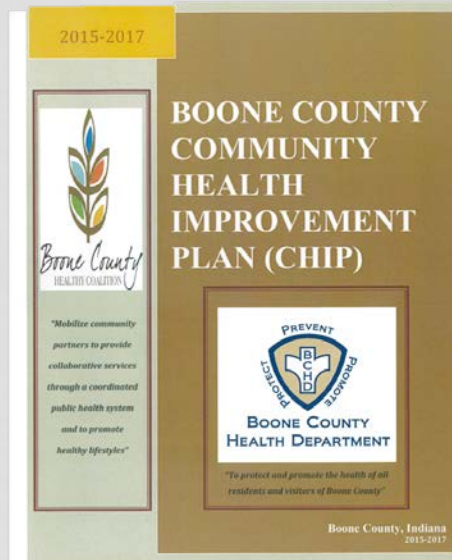
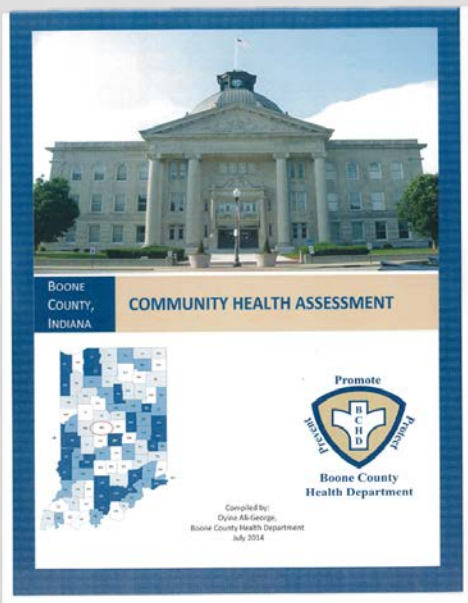
Boone County Gap Analysis Summary



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# BCHD'S STRATEGIC PLANNING PROCESS

- Reviewed Public Health Accreditation Board (PHAB) requirements for accreditation and established an Accreditation Team and Coordinator
- Developed the Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)



# BCHD'S STRATEGIC PLANNING PROCESS

- Adopted Mission, Vision, and Organizational Value statements
- Completed the SWOT (Strength, Weakness, Opportunity, Threats) Analysis
- Completed NACCHO's Local Health Department Self-Assessment Tool
- Completed an Organizational Culture of Quality Self-Assessment Tool (SAT) for Local Health Departments.



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# PHAB'S STRATEGIC PLAN REQUIREMENT

1. Mission/Vision/Values
2. Strategic Priorities
3. Goals and SMART Objectives
4. Consideration of key support functions for efficiency and effectiveness
5. Identification of external trends, events, or factors that may impact community health of the health department
6. Assessment of health department strengths and weakness
7. Link to the health improvement plan and quality improvement plan





# MISSION / VISION / VALUES

- Mission

*“To Protect and Promote the Health of all Residents and Visitors of Boone County”*

- Vision

*“Striving for a Healthier Community through Public Health Services and Collaboration”*

- Value

*We value:*

- Teamwork with effective communication and respect
- Accessible quality services and programs to promote and protect public health
- Improved health outcomes and quality of life
- A comprehensive response to public health emergencies
- Continuous quality improvement
- A competent and diverse public health workforce and leadership



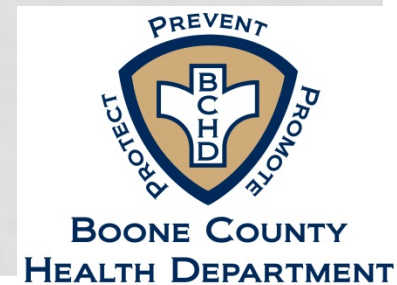
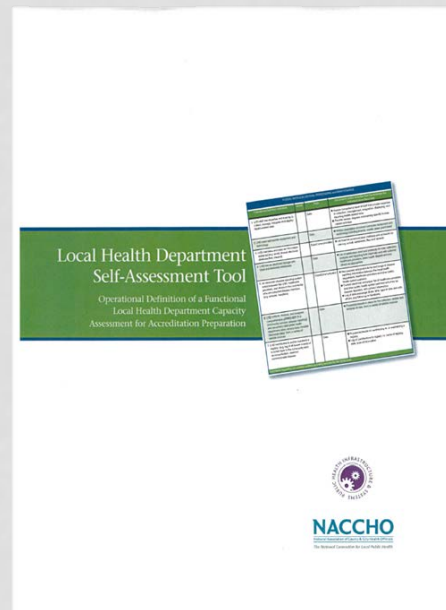
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# DATA SOURCES FOR STRATEGIC PRIORITIES

- NACCHO's Local Health Department Self-Assessment Tool

(Operational Definition of a Functional Local Health Department Capacity Assessment for Accreditation Preparation)

- SWOT Analysis
  - Board of Health
  - Staff



# KEY SUPPORT FUNCTIONS

- Information Management
  - IT support
  - Department's shared drive
  - Performance Management System
- Workforce Development
  - Staff training
  - Workforce development plan
- Communication
  - Staff meeting
- Financial Sustainability
  - Budget and grants

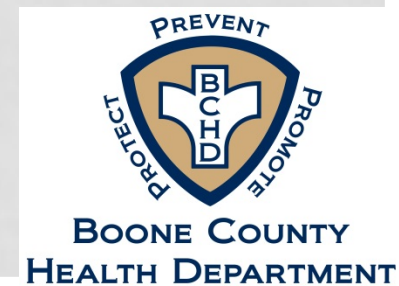


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# ENVIRONMENTAL SCAN

- External trends, events, or factors
- SWOT Analysis

<p><i>Strengths (Internal)</i></p>	<p><i>Opportunities (External)</i></p>
<p><b>We want to maintain and leverage strengths.</b></p> <ul style="list-style-type: none"> <li>• Budget</li> <li>• Human Resources</li> <li>• Management</li> <li>• Culture</li> <li>• Internal/ external communication</li> <li>• Process</li> </ul>	<p><b>We Want to invest in opportunities.</b></p> <ul style="list-style-type: none"> <li>• Social</li> <li>• Economic</li> <li>• Political</li> <li>• Technological</li> <li>• Environmental</li> <li>• Scientific</li> <li>• Legal</li> <li>• Ethical</li> </ul>
<p><i>Weaknesses (Internal)</i></p>	<p><i>Threats or Challenges (External)</i></p>
<p><b>We want to minimize weaknesses.</b></p>	<p><b>We want to identify threats or challenges that need to be addressed and understand their potential impact.</b></p>



# EMERGENCY PREPAREDNESS

# EMERGENCY PREPAREDNESS

- **Responsible staff:** Preparedness Coordinator
- **Role and Responsibility of the health department:** Activate emergency operations plan and utilize Local, State, and Federal resources to provide an appropriate response to those at risk
- **Communication network:** Call down
- **Plan for managing continuity of operations during an emergency:** Incidence Command System



# EMERGENCY SUPPORT FUNCTION (ESF) #8

- The primary mission of the Health and Medical Emergency Support Function (ESF #8) is to provide resources and personnel to support local jurisdictions with ensuring the health and welfare of their residents, before, during and after emergency or disaster events.



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# EMERGENCY SUPPORT FUNCTION (ESF)

## #8 PARTNERS

- Public Health
  - Health Department
  - Boone County Board of Health
- Medical
  - Witham Hospital
- Mental Health
  - Aspire Indiana
  - BCSO Chaplain
  - Cummins Behavioral Health Services
  - Integrative Wellness
  - Mental Health America of BC
- Emergency Management
- Law Enforcement
- Emergency Services
  - Communications/911
  - Coroners Office
  - Fire Department
- Government
  - County Council
  - County Commissioners
- Schools
- Volunteer/Community
  - American Red Cross
  - Love Inc
  - MRC
  - Transportation Services

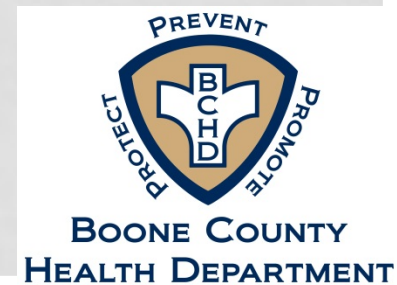
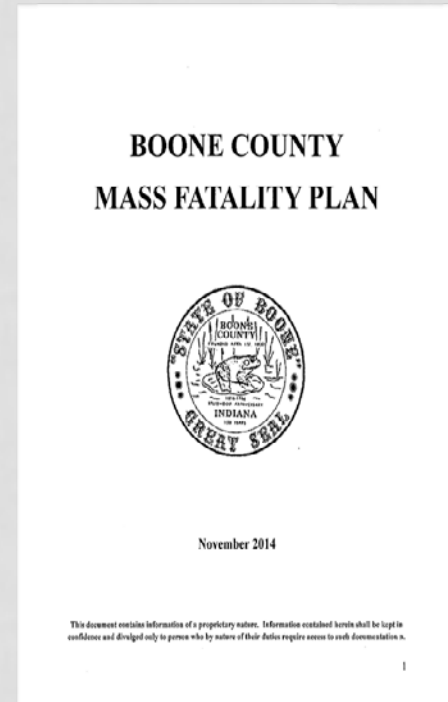


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# BOONE COUNTY MASS FATALITY PLAN

- Purpose
  - This plan is to provide a coordinated and comprehensive local response to a mass fatality incident in Boone County, Indiana.



# INITIAL RESPONSIBILITIES

- **All Response Agencies:** All agencies responding to a mass fatality incident shall utilize the Incident Command System during response.
- **Attending Physician:** Is responsible for certifying the cause of death of a patient he/she have attended, completing the death certificate and reporting the death to the Coroner's Office.
- **Incident Response Agency:** Is responsible for determining that the incident involves a large number of fatalities that exceed local response capabilities, and notifying the Boone County Coroner's Office for further instruction. Examples of Incident Response Agencies include Police, Fire, and EMS.



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# INITIAL RESPONSIBILITIES

- **Law Enforcement:** Responsible for securing the incident scene and to the greatest extent possible preventing contamination of the area throughout the incident response; reporting to the Boone County Emergency Operations Center (EOC) to represent Emergency Support Function (ESF) 13, compiling Missing Persons Data per department Standard Operating Procedures (SOP's), and working closely with Mental Health response agencies.
- **Local Health Officer:** May certify the cause of death when a physician isn't in attendance, and may investigate the cause of death from anyone having knowledge of the facts regarding the cause of death. This includes issuing subpoenas to obtain information, and employing pathologists.



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# ACTIONS/TASKS/PROCEDURES

- Phase One – Initial Response
- Phase Two – Body Recovery and Handling Phase
- Phase Three – Morgue Operations
- Phase Four – Ante-mortem Info Collection - Family Assistance Center
- Phase Five – Post-Morgue Services



# OTHER ESF 8 ACTIVITIES

- Hazard Vulnerability Assessment (HVA)
- Ebola gap analysis



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# REFERENCES

- NACCHO's Local Health Department Self-Assessment Tool  
<http://www.naccho.org/topics/infrastructure/accreditation/LHDtool.cfm>
- Organizational Culture of Quality Self-Assessment Tool (SAT) for Local Health Departments  
<http://www.naccho.org/topics/infrastructure/accreditation/qi-culture.cfm>



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# Domain 5: Developing Public Health Policies and Plans

**Standard 5.1:** Serve as a Primary and Expert Resource for Establishing and Maintaining Public Health Policies, Practices, and Capacity

**Standard 5.2:** Conduct a Comprehensive Planning Process Resulting in a Tribal/State/Community Health Improvement Plan

**Standard 5.3:** Develop and Implement a Health Department Organizational Strategic Plan

**Standard 5.4:** Maintain an All Hazards Emergency Operations Plan



**Evaluation:** <http://survey.constantcontact.com/survey/a07ebd1pux1icw660cc/start>



# Resources

Title	Description	Link
Public Health Quality Improvement Exchange	Shared resources for creating a culture of quality improvement	<a href="https://www.phqix.org/">https://www.phqix.org/</a>
Public Health Accreditation Board	Tools, resources, information, research on voluntary public health accreditation	<a href="http://www.phaboard.org/">http://www.phaboard.org/</a>
National Association of City and County Health Officials	Accreditation Prerequisite: Strategic Plan	<a href="http://www.naccho.org/topics/infrastructure/accreditation/strategic-plan.cfm">http://www.naccho.org/topics/infrastructure/accreditation/strategic-plan.cfm</a>
Minnesota Department of Health	Strategic Planning Toolkit	<a href="http://www.health.state.mn.us/divs/opi/pm/lphap/stratplan/howto.html">http://www.health.state.mn.us/divs/opi/pm/lphap/stratplan/howto.html</a>

# InSOPHE's Fall Conference

10/7/2015



Northeast Indiana Area  
Health Education Center

**FREE  
M/CHES  
hours  
for InSOPHE  
Members!**



## Registration

- **InSOPHE Member:** \$55  
includes lunch & # NCHEC hrs\*
- **Non- InSOPHE Member:**  
\$65 includes lunch\*
- **Student Deluxe:** \$25  
includes lunch & 1-year  
InSOPHE membership\*
- **Student Basic:** \$10  
(food/beverages not included)

**\*free gift to first 75 registered**

**Join us to celebrate our hometown heroes  
at Ball State Alumni Center, Muncie, IN**

## Agenda

**8:30-9:00** Check-in & Registration

**9:00-9:30** Welcome

**9:30-10:30** Keynote - Dr. John Seffrin, Retired  
CEO American Cancer Society

**10:30-10:45** Networking Break

**10:45-Noon** Round Table Presentations

- Coalition Building
- Advocacy
- School Health
- Neighborhood Initiatives
- AHEC
- Student to Professional Transition
- Health Department
- And More

**Noon-1:00**

- Lunch & Networking
- Annual Meeting (Members)
- Student Social (Student Attendees/Members)
- Photo Voice Video Celebrating Hometown Heroes

**1:00-2:00** Bluffton Parks Department

**2:00-3:00** Top 10 Coalition

**3:00 -3:15** Networking Break

**3:15-4:00** McMillen Center for Health  
Education

**4:00** Closing Remarks, End of Conference

### Post Conference Activities

**4:30-5:30** Walking Tour of Campus (free; optional)

**5:30-6:45** Dinner on Your Own (optional)

**6:45-8:30** McGovern Lecture Featuring Dr. John  
Seffrin (free; optional) Student Center Ballroom

**More info at [insophe.org](http://insophe.org)**



*Thank you for attending...*

**Public Health INsights & INnovation**

**Save the Date!**

Please join us on **September 25** for  
*Enforcing Public Health Laws* with **Mindy  
Waldron and Ross Silverman.**